BioSpectrum the business of Bio & Health Sciences

NHL treatment pipeline shows below average innovation

08 October 2015 | Features | By BioSpectrum Bureau

NHL treatment pipeline shows below average innovation

The product pipeline for NHL exhibits a lower degree of innovation than both the industry and oncology average, with just 28% of all pipeline products, or 33% of the pipeline for which there is a disclosed molecular target, categorized as first-in-class.

This is in comparison to industry, breast cancer and lung cancer innovation rates of 43%, 57% and 59%, respectively, says business intelligence provider GBI Research.

The company's latest report states that while NHL, collectively, is the sixth to tenth most common cancer dependent on territory, each individual subtype is classified as an orphan disease.

With significant differences in each subtype's genetic profile and current treatment, there is reduced scope for the development of a targeted therapy with cross-subtype activity.

This does not present NHL drug development as an attractive investment in comparison to other indications in oncology, particularly as survival durations across many NHL subtypes are relatively strong, and likely the reason for low first-in-class innovation levels.

However, Ms Katie Noon, senior analyst for GBI Research, says that innovation is present to varying degrees across the majority of molecular target families and development stages for NHL therapeutics, rather than localized to a particular subset of therapies.

Ms Noon says: "There is a considerable range of clinical potential across treatments with first-in-class status, particularly those restricted to the early-stage NHL pipeline. Some targets, such as spleen tyrosine kinase, boast plenty of supporting scientific and clinical evidence, while others have shown mixed results in Preclinical studies and lack clarity on their role in disease pathophysiology."

She continues: "It is hoped that one of these many targeted therapy pipeline products will replicate the success observed with rituximab, which significantly altered the NHL treatment landscape following its approval.

"Clear gaps in the treatment algorithm include maintenance therapies to prolong initial or subsequent durations of remission, and improved therapies for relapsed patients, particularly those with a second or subsequent relapse," the analyst concludes.