



Reinventing Oncology through AI

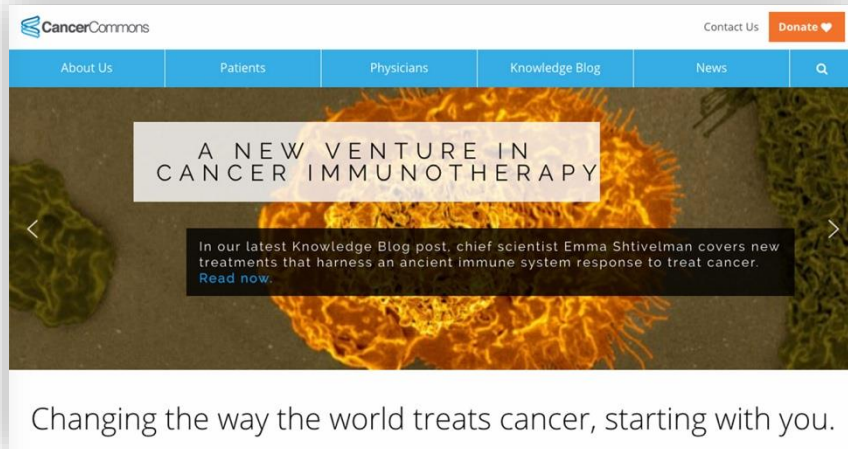
Marty Tenenbaum
Founder and Chairman

April 24, 2019

Precision Oncology Network



Patients and Physicians



- Network of world-class physicians and researchers
- ~4,000 patients who have benefitted from ASK virtual tumor boards
- Multiple peer reviewed publications
- American Cancer Society collaborator



Software and Services

- **Share Knowledge** across virtual tumor boards
- **Facilitate Access** to recommended therapies
- Capture resulting **real-world data**
- **Coordinate treatment** across patients to optimize outcomes and learning



ARIANNA

Patient with DIPG holding her
investigational drug she got
access to with xCures

Cancer Commons and xCures:

A *perpetual trial* that continuously learns from all patients, all physicians, all therapies, all the time.

An AI-based **precision oncology platform** that coordinates treatment plans to globally optimize individual outcomes and collective knowledge.

Creating value

- Faster, cheaper development of drugs and tests
- Payers pay only for what works
- Patients get the best outcomes

A faded background image of a patient in a hospital gown sitting in a chair, looking out a window. The patient is seen from behind, and the room is brightly lit by natural light from the window.

For Advanced Cancer Patients, Getting the Best Care Is a Nightmare

No one knows the optimal way to treat any cancer,
many patients **can't get or pay for** the drugs they need
and treatment **outcomes vary** widely

Each year thousands die unnecessarily

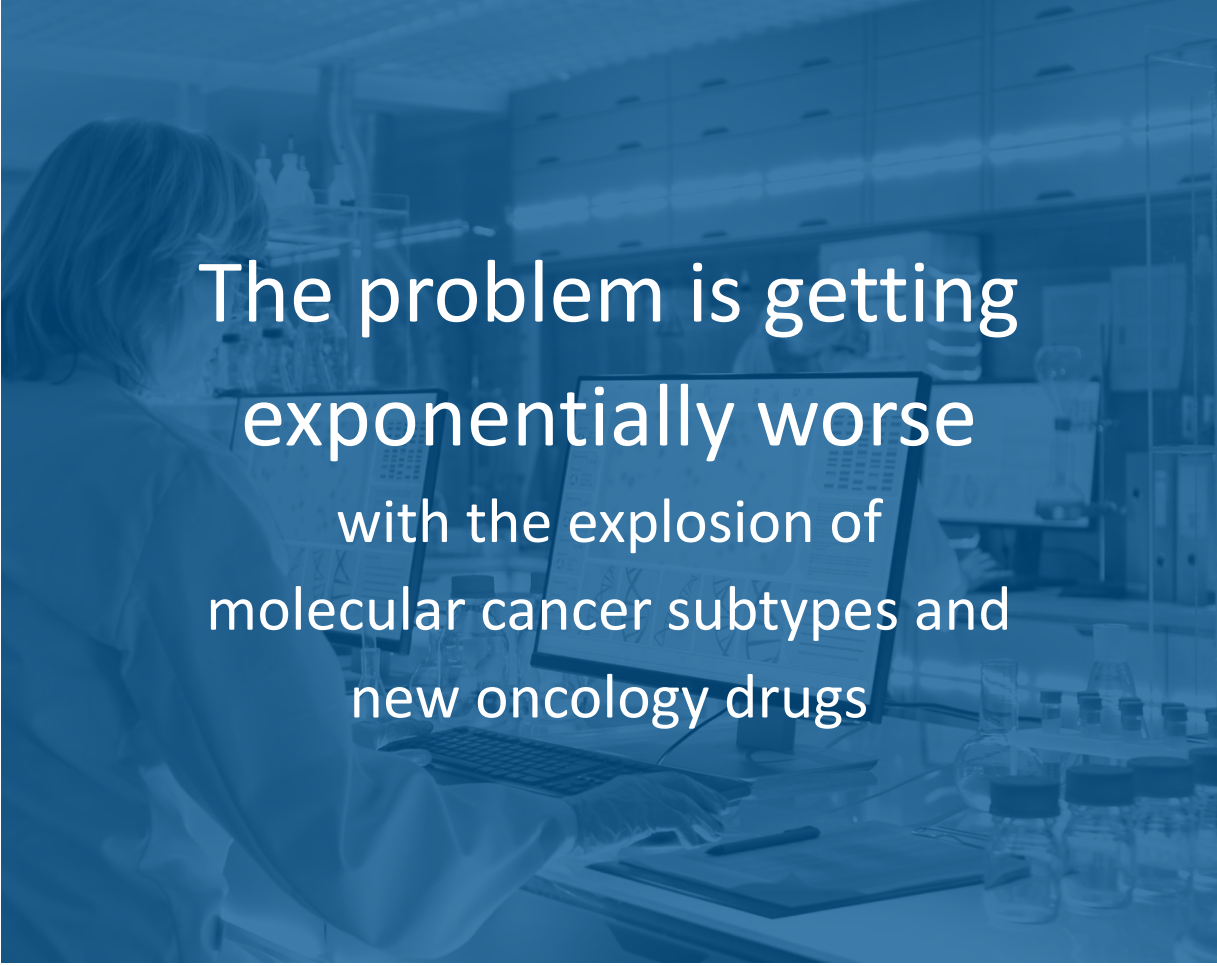
Drug Development Is About to Hit the Wall

CLINICAL TRIALS ARE UNSUSTAINABLE

- Too slow (5-10 years)
- Too expensive (\$100M+)
- Outcomes vary widely

TOO MANY DRUGS, TOO FEW PATIENTS

- ~3500 open IO trials in the US
- Requiring ~600,000 patients
- Only ~50,000 patients / year enroll in trials



The problem is getting
exponentially worse
with the explosion of
molecular cancer subtypes and
new oncology drugs

Regulators Agree That Change Is Needed

“We must bridge clinical research and health care or the entire enterprise is going to fall down.” Janet Woodcock, Director, CDER. FDA

- Master protocols
- Adaptive designs
- Seamless trials
- Expanded access
- Real-world evidence (RWE)

Helpful but not enough to solve the existential problem: too many options, too few patients

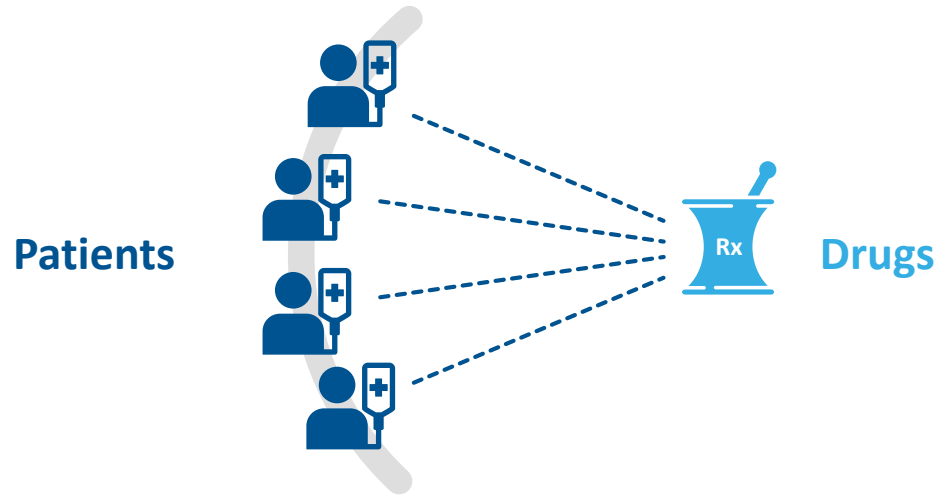


We need a
paradigm shift
to integrate clinical research
and care

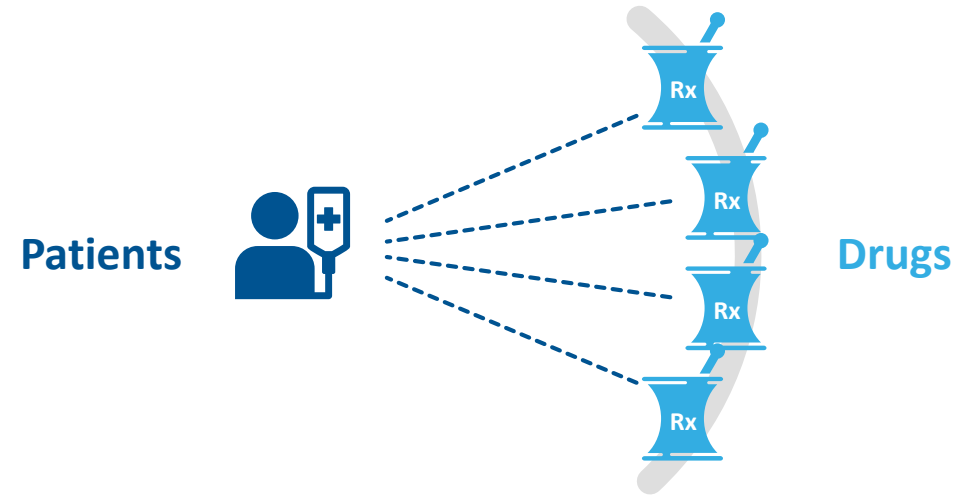
From Approving Drugs to Curing Patients

OLD WAY

Trials finding best patients
for a given drug



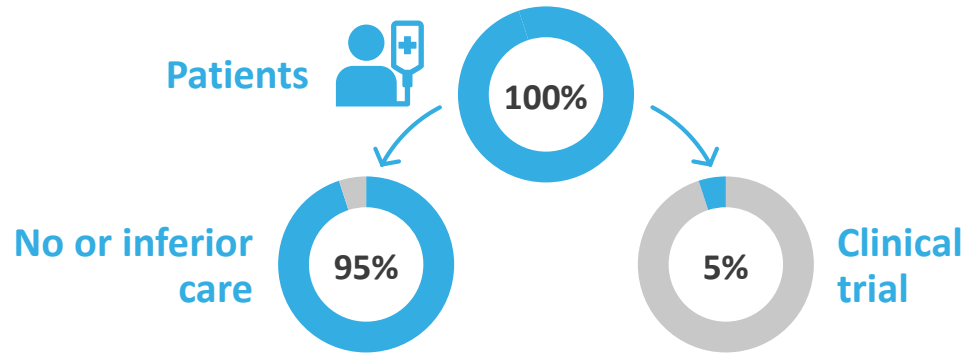
Leveraging knowledge and AI to find the
best drug regimens for each patient



xCures globally optimizes the allocation of patients and drugs to ensure superior outcomes
and prioritize development of the most promising therapies

Slashing the Time and Cost of Drug Development

TRADITIONAL TRIALS

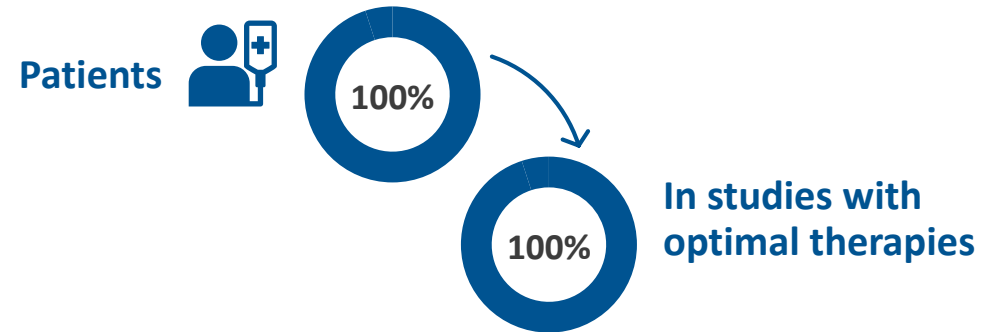


- Inclusion/exclusion criteria
- Randomized control
- Geographic disparity

5-10 years, 200 patients @ \$50,000

Each site / phase starts anew
New sites take months
Trials compete selfishly for patients

XCURES TRIALS

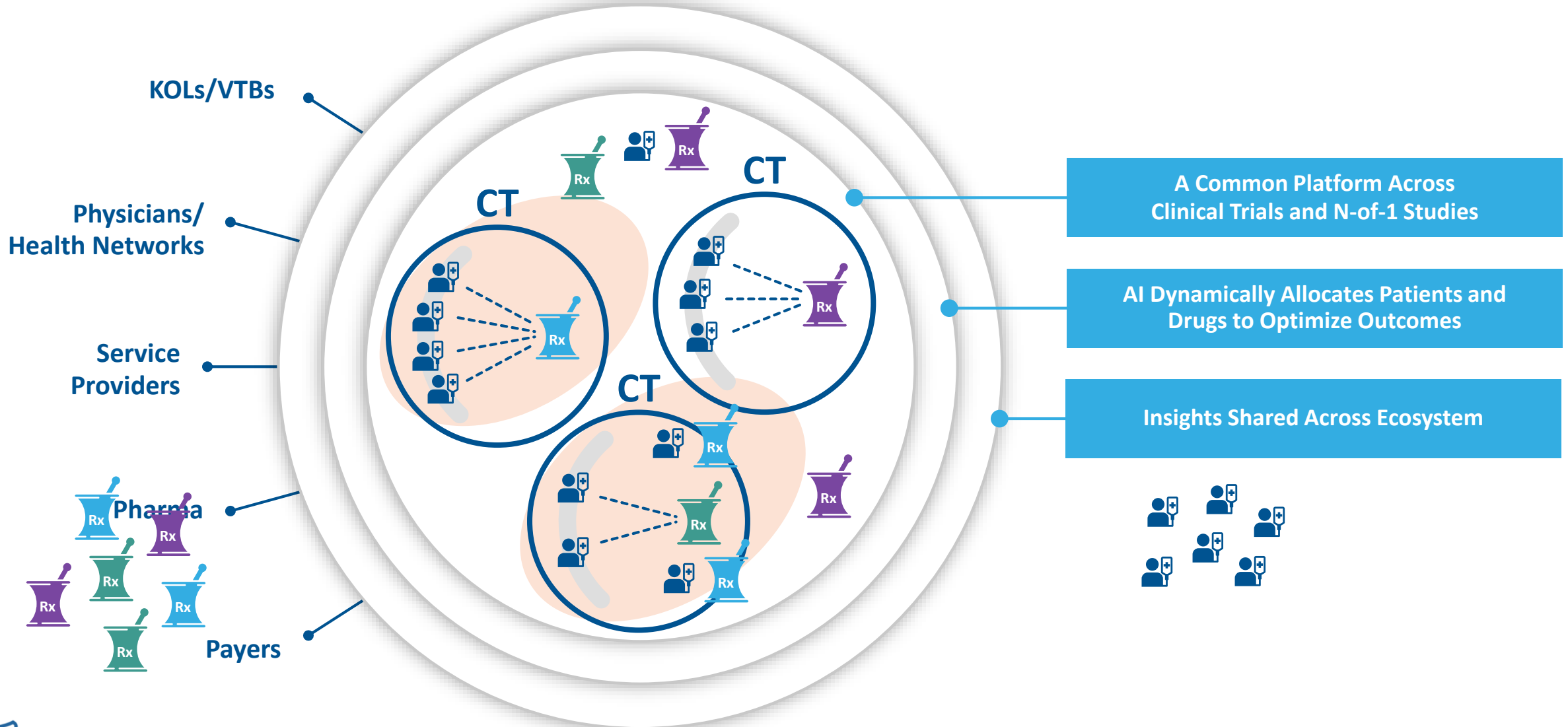


- No inclusion/exclusion
- No randomized control
- All geographies

1 year, 20 patients @ \$2,000

Always on and siteless
Costs amortized across all drugs
Globally optimize patient utilization in trials

Creating Value Through a Master Platform and AI



Cancer Commons

4000 patients, 40+ countries



Patient
and
Physician

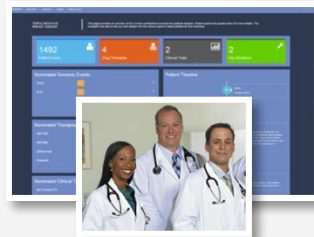


CancerCommons



Cancer
Network
Partner

Case
Referral



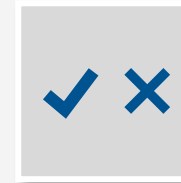
Virtual
Tumor
Board



Ranked
Options
for Care

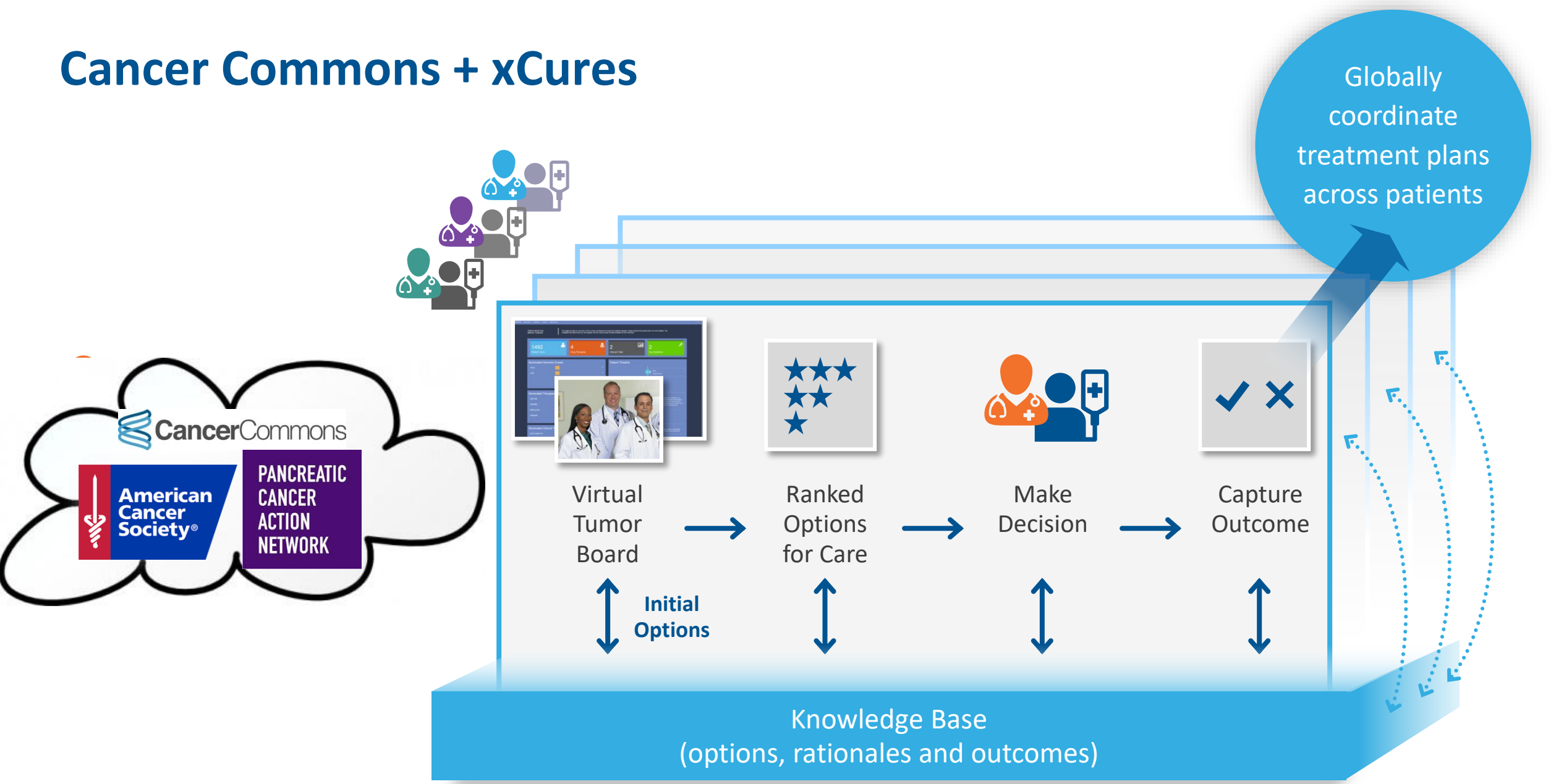


Make
Decision



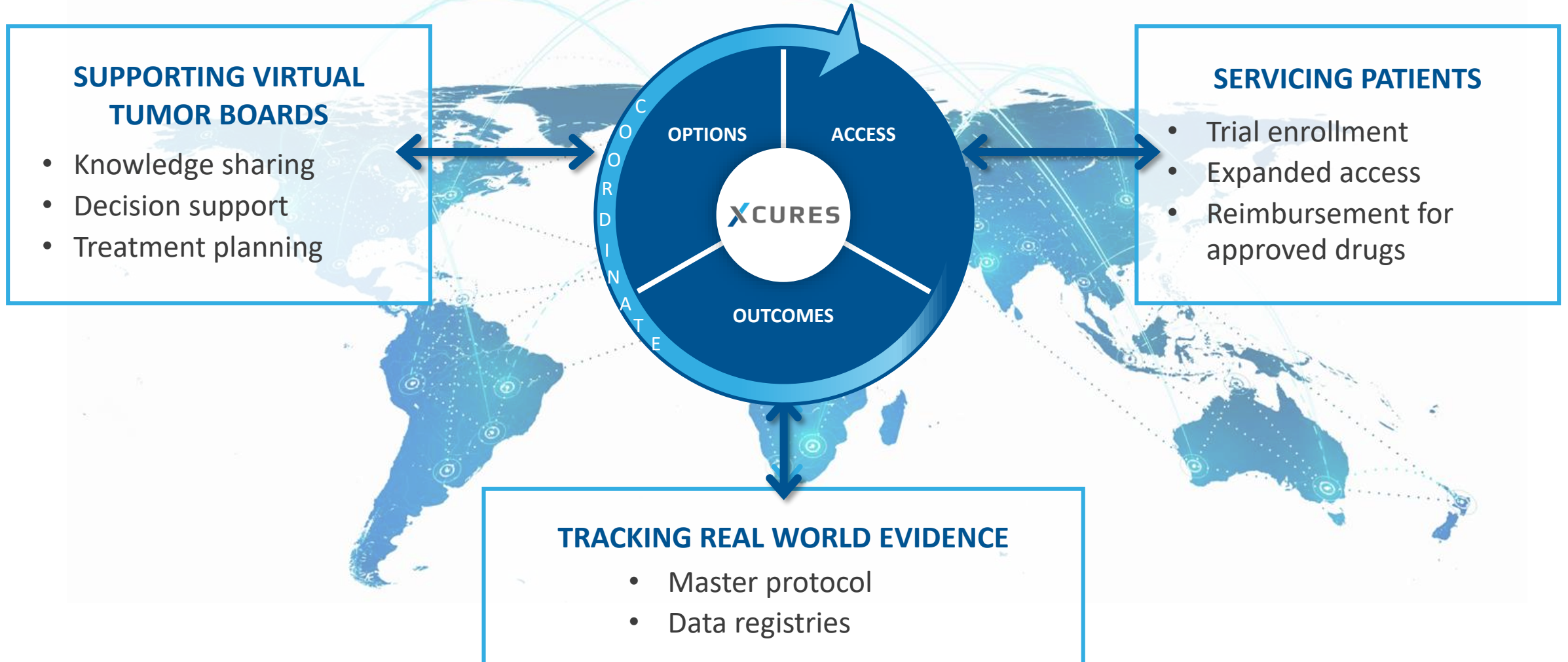
Capture
Outcome

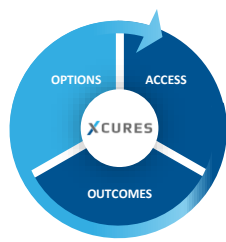
Cancer Commons + xCures



xCures Platform: Options, Access and Outcomes

LEARNING FROM ALL PATIENTS. ALL PHYSICIANS. ALL THERAPIES. ALL THE TIME.





Options – Using Experts and AI to Optimize Care



Knowledge Sharing

NLP to capture treatment options, recommendations, and rationales from literature, conferences, social media, and real-world evidence



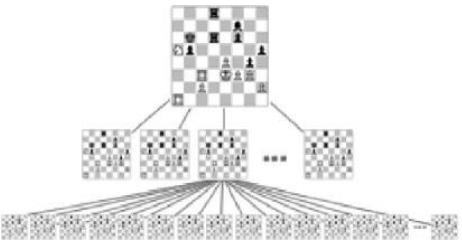
Decision Support

Virtual Tumor Boards develop treatment options for each patient, balancing personal insights against outcomes data and new options injected by researchers and industry.

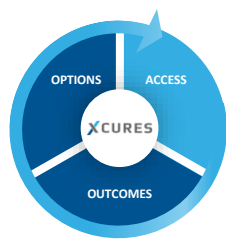


Treatment Planning

Evaluating patient’s treatment longitudinally with multiple drug regimens, to maximize shots on goal



Source: stanford.edu



Access – Getting Right Drugs to Patients

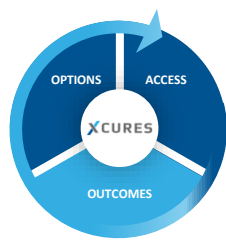
xCures SERVICES

- Trial matching and enrollment (ethical)
- Manage expanded access programs and trials
- Pay-for-performance program
- Clearinghouse for EA and off-label drugs



BENEFITS

- Patients get access to the latest drugs
- xCures gets hot drugs on our platform for use by patients in Virtual Trials
- Companies get real world data to accelerate approvals, label extensions, reimbursements
- Physicians get administrative support



Outcomes – Generating Real World Evidence

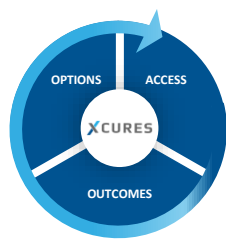
XCELSIOR Study

- IRB-approved Master Protocol
- Always-on: All patients and all treatments
- Add new sites, PIs, and drugs in days through amendments, sub-PIs, and subprotocols
- Patient-centric design: minimal inclusion / exclusion criteria; no randomized controls
- Level 1: Observational registry captures longitudinal, regulatory grade, treatment and outcomes data
- Level 2: Virtual Tumor boards and Virtual Trials seek to optimize individual outcomes and collective learning
- Innovative statistics for efficient signal generation from small data sets



- 21 CFR Part 11 Validated, HIPAA & FISMA compliant, and WHODrug and MedDRA certified EDC system
- All access and activity in the system is tracked
- Audit trail shows who made a change, the date and time, and the old and new values
- Standardized data reporting forms support precision oncology studies for most solid tumors
- Reporting forms can be quickly customized to capture study-specific fields

Coordination – Planning, Search, Optimization

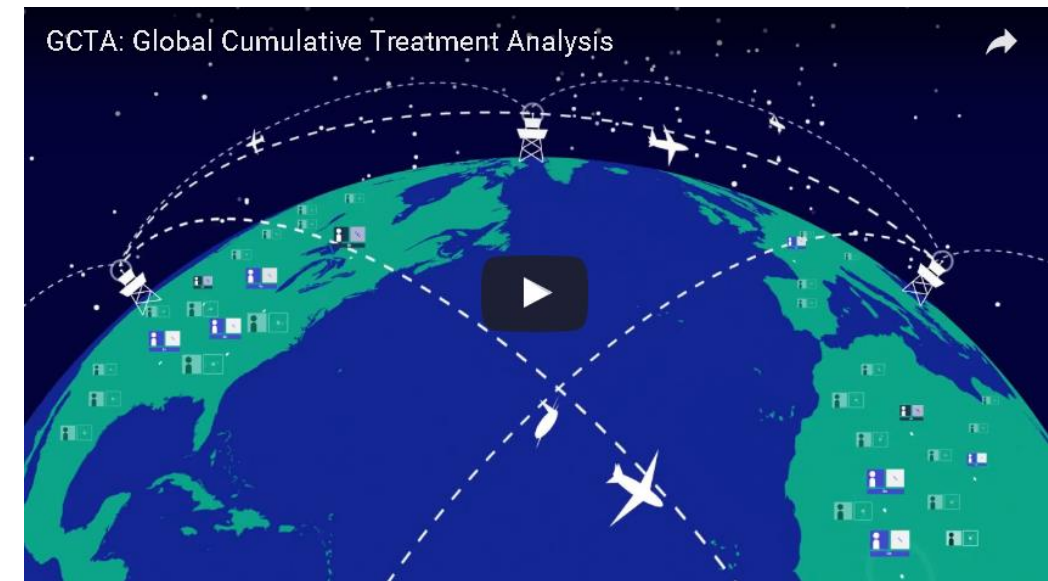


Global Cumulative Treatment Analysis

Coordinate treatment plans across patients to maximize information gain and collective learning:

- Rapidly replicate successes and quash failures
- Optimally allocate patients so therapies succeed or fail fast, using the fewest patients
- Run 'Pop-up' experiments to resolve equipoise sets, where it's unclear which option is best
- Efficiently search the vast space of plausible combination therapies
- Prospectively plan experiments to get the data you need, not just the observational data in EHRs

An 'Air Traffic Control System' for Cancer



Pilot: Brain Cancer

UNMET NEEDS

Glioblastoma Multiforme (GBM)

20,000 / year, prognosis 1 year

Diffuse Intrinsic Pontine Glioma (DIPG)

250 kids / year, prognosis: 9 months

xCures SOLUTION

Expanded access program makes
promising drugs available to patients

Perpetual trial continually refines treatment
regimens and cohorts

IMPACT

Better outcomes for GBM and DIPG patients

Regulatory-grade real-world data for pharma

Royalty payments from future sales

“

*All the gratitude and thanks
goes to you [xCures] and Cancer
Commons! ...You give us hope and
options to save our baby girl's life!*

— Patient's Mother

”

**Building Pipeline of
Pharma Collaborations**



Pilot: Pancreatic Cancer

UNMET NEED

Stage 4 Pancreatic Cancer
40,000 adults / year, 35,000 die
prognosis: 14 months

xCures SOLUTION

Use Perpetual Trial to explore novel regimens
(e.g., Mekinist + Chloroquine)

Pay for performance program covers drugs used
off-label...when they work.

IMPACT

Giving advanced stage patients new options
Generating real-world evidence for FDA filings
Drug salvage and repurposing
Potential label expansion

“..If we’d been using your platform,
we’d already know the answer. We’ll
use it for the next combo in our
pipeline

– Medical oncologist with exciting
new combo therapy

Value for All Stakeholders



PATIENTS

Consults with VTB experts; Access to top drugs; Superior Outcomes



PHARMA

Faster, cheaper trials → approvals, label expansions, compendia listings. Early signals. Salvage drugs abandoned for business reasons.



PROVIDERS

Improved outcomes. Patient referrals and retention. Access to novel treatments. Knowledge sharing with peers.



RESEARCHERS

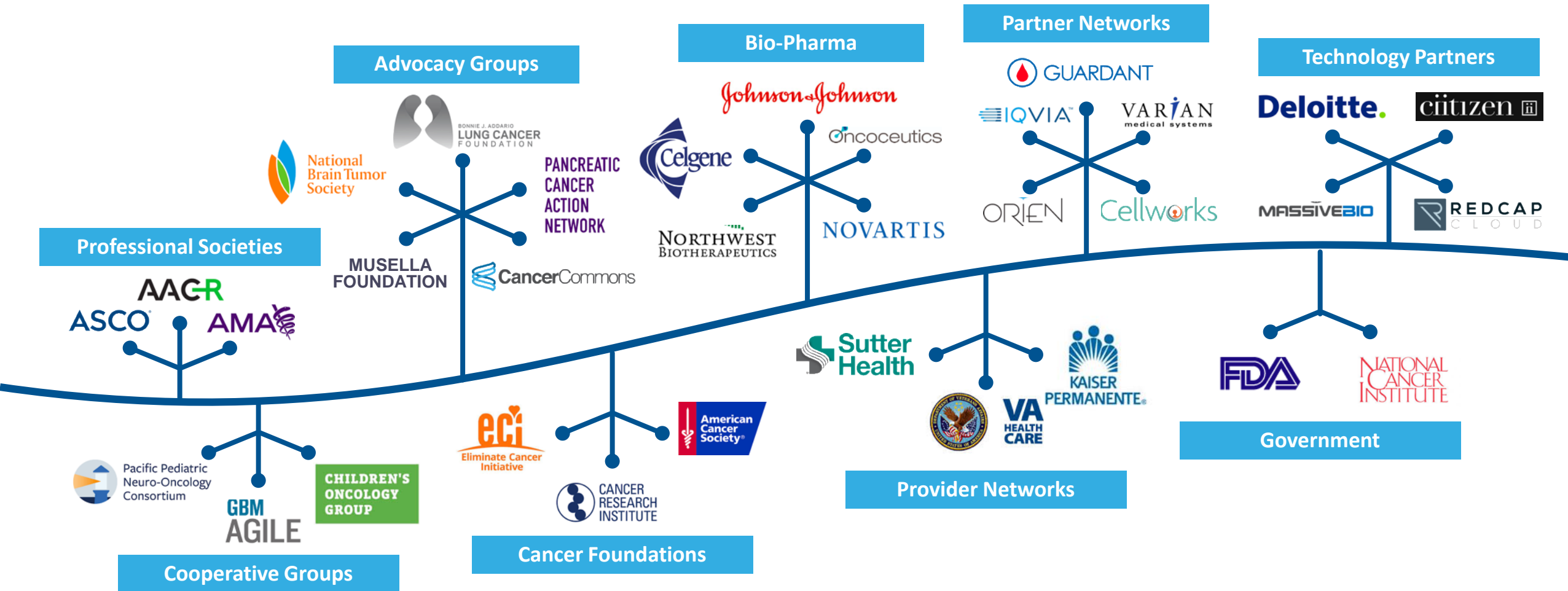
Clinical data. Outcomes data. Rapid Investigator Initiated Studies.



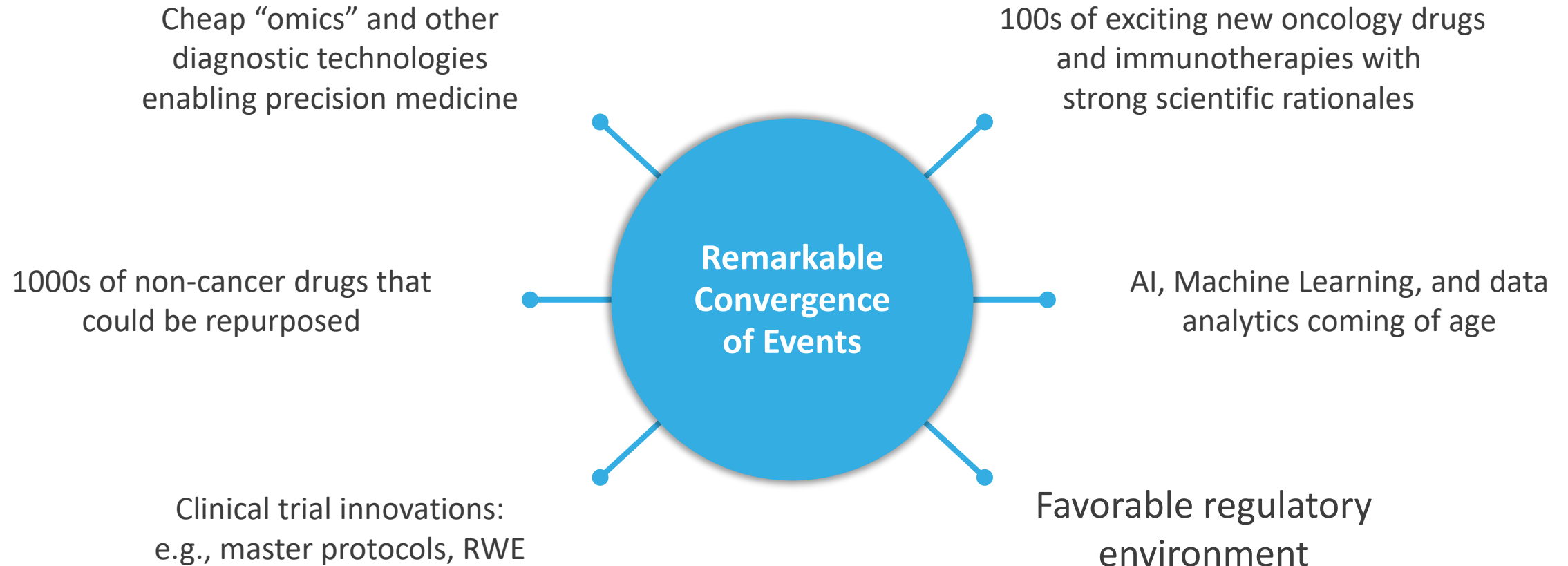
PAYERS

Pay only when drugs work. Trusted data for claims adjudication.

5 Year-Goal: A Network of Networks



The Timing Is Perfect



Seize the Moment: Join the Commons

Huge unmet need for patients

Existential crisis for pharma

Paradigm shift to patient-centric clinical trials

Transformative clinical oncology network/platform

Powered by AI, ML and Collective Intelligence



Yes, It's Personal

This could save your life or the life
of your spouse or child



XCURES

JOIN THE COMMONS

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