*Include 3 bullets (< 30 words total) per slide – the most important messages associated with the particular slide*

Team name: Inhibitec-Anticuerpos

Date updated: November 25, 2019

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| S1: Title  & Elevator Pitch/Headline | * Inhibitec-Anticuerpos S.L. * Psoriatic Arthritis (PsA) is a progressive and destructive joint disease that severely reduces the quality of life of patients with psoriasis. * BAMBI (BMP and Activin Membrane-Bound Inhibitor) blockade is a new therapeutic option for patients with Psoriatic Arthritis |
| S2: The problem and who has it | * More than 125 million individuals (2–3% of global population) are affected by psoriasis and 30% of them also develop PsA. * With the existing therapies 35-40% of patients with PsA do not reach a minimum level of efficacy (ACR 20% joint response level) and the appearance of drug resistances is frequent. * There is a need to identify new molecular targets and treatments in PsA that improve existing therapies. |
| S3: The solution | * We have identified BAMBI as a key player in PsA. * We have developed and anti-mouse and human BAMBI mAb, B101.37, that inhibits BAMBI. * B101.37 demonstrates in vivo preclinical efficacy in PsA equivalent to existing standard of care. |
| S4: Product (how it addresses the problem) | * B101.37simultaneously targets protective Treg (enhance) and harmful TH17 cells (reduce). * Existing therapies target only the IL-23/IL-17A TH17 axis. * Future development will position B101.37 as a new gold standard in the management of PsA. |
| S5: Technology | * Anti-BAMBI mAb acts on activated CD4+ T cells. * Anti-BAMBI mAb inhibits the differentiation of pathogenic TH17 CD4+ T cells. * Anti-BAMBI mAb enhances the differentiation and activity of protective regulatory CD4+ T cells (Tregs). |
| S6:  Competing approaches | * There exist new treatment with biologics for PsA [Secukinumab and Ixekizumab (anti-IL-17A), Ustekinumab (anti-IL-12 and IL-23)] that exhibit better responses than anti-TNF therapies. * When B101.37 mAb can arrive to the market, some of these treatments will be available as biosimilars. * Our anti-BAMBI mAb exhibits similar therapeutic responses than anti-IL-17 mAs in preclinical models of PsA. |
| S7:  Traction | * Two articles; one already published and the second in revision (both in Arthritis Rheumatol.). Three grants from the Spanish Nacional Agency of Science. * One patent on National Phases (USA and EC). * Inhibitec-Anticuerpos External Scientific Board: Prof Gabriel Nuñez, University of Michigan; Prof Miguel López-Botet Universidad Pompeu Fabra; Prof Carlo Chizzolini, University of Geneva; Prof Stéphane Schurmans, University of Liege. |
| S8:  Team | * Scientists: Ramón Merino, Jesús Merino. * Partners from Pharma and Biotech industries: Eduardo Quemada, Josep M. Piqueras, Joaquín A. Palma * Partners with experience in Finance: Eduardo Mesquida, Pascal Vieilledent |
| S9:  Closing | * We have identified a new molecular target in PsA, BAMBI, and develop inhibitory mAbs against it. * Inhibitec-Anticuerpos plans to position B101.37 as a new, gold standard therapeutic option in the management of PsA * Inhibitec-Anticuerpos, Instituto de Biomedicina y Biotecnología de Cantabria, C/ Albert Einstein 22, 39011 Santander, Spain. |