

Project	What's the product?	What's the problem?	Comments / questions to the team
ME Therapeutics	New immunotherapy for cancer patients that inhibits a target commonly seen in some types of cancer with poor prognosis.	For some type of cancer, there are still no effective treatments	I would recommend to narrow down your presentation to lung or colon and then, at the end of the presentation, you can explain the potential other possibilities.
ME Therapeutics	Antibody targeting immune pathway for indications that are generally not responsive to immunological approaches.	Many cancer types are not responsive to current immunooncology therapies.	<p>If there's already a drug in phase I for this target, is that going to affect your market?</p> <p>Who is your business team? Lots of PhDs is great but people with the strategic business and market experience is critical.</p>
ME Therapeutics	G-CSF antibodies	T-cells, even in the presence of checkpoint inhibitors, are still inhibited from attacking cancer cells.	<p>I may have missed this: any human (e.g. Phase 1) data yet? If no, what do you need to show in order to get into humans?</p> <p>Are there any expected side effects of neutralizing G-CSF? Chemo-induced extreme neutropenia is treated with G-CSF - how often does that happen in lung and colon cancer? And would that be a contraindication for your drug?</p> <p>off target effects of antibodies?</p>
ME Therapeutics	A novel immunotherapy targeting G-CSF with a humanized antibody	Cancer patients benefit from IO treatments but some resistance exists or lack of efficacy in some patients Need for multiple tumor types?	<p>Would this be given as a single treatment? Or in combination?</p> <p>Is the target population patients that have developed resistance or all patients?</p> <p>Biomarker for patient stratification?</p> <p>How about neutropenia? Would you develop a particular assay to check this for regulatory purposes?</p>
ME Therapeutics	antibodies	low response rate to certain cancer treatments	I would recommend to work on an effective elevator speech for this project.

			<p>What are the current competitors?</p> <p>You have mentioned freedom to operate, correct?</p> <p>How/when was this verified?</p>
ME Therapeutics	check point inhibitor second generation drugs	cancer immunotherapy needs improvement	completely unclear why this team's approach is any better than others , very busy field with much more novel approaches than check point inhibitors, how does this approach compare to newer approaches that try to enhance/activate the patient's own immune system
ME Therapeutics	G-CSF for improving the response rate to OI drugs	lung and colorectal cancer - limited treatment	
ME Therapeutics	Promising research potential involving immunity-oncology	Untreatable cancer	It seems like there is more research that needs to be done. What are your future plans to move this forward. Thank you for your work in this important area.
ME Therapeutics	I/O Therapeutics	I/O therapies not sufficient	<ul style="list-style-type: none"> - What is your target label/indication - How are you finding patients for trial - What is your companion diagnostic strategy
ME Therapeutics	Humanized antibody targeting G-CSF	lung and colorectal cancer	<p>What about the side effect of this treatment?</p> <p>What about the specificity of your treatment?</p> <p>Have you probed this in human models?</p> <p>What kind of clinical trials have you developed?</p>
ME Therapeutics	Antibodies against G-CSF to suppress ME resistance to anti tumoral therapies	Resistance to anti-cancer drugs is a big problem. Anti-cancer drugs have G-CSF as a common resistance pathway in ME.	Could the benefits of the treatment be quantified in anyway?
ME Therapeutics	2nd generation IO therapy	Patients are either irresponsive or develop resistance to the current 1st generation therapy	
ME Therapeutics	antibody against G-CSF to target resistance to currently available immune therapies	lack of response or resistance to immune therapies in some cancers	<p>do you intend to partner with current immune therapies?</p> <p>is there a lasting negative effect on bone marrow?</p>

ME Therapeutics	Drug to improve response rate for currently difficult-to-treat or untreatable cancers	There are many non-responders to current drug	-clear problem statement -would like to see less text on presentation -it'll be nice to see a timeline for future development
ME Therapeutics	A new therapeutic which blocks gastrointestinal cancers	There are IO inhibitors that are not effective	Very technical presentation. Need a better problem description and overall scope of the problem. Need to describe the solution and how it will be delivered to market. What stage of development are you in?
ME Therapeutics	2nd gen IO drug to synergism with checkpoint inhibitors. Target is G-CSF with an inhibitor (anti-human G-CSF antibody)	Many patients fail to respond to existing check point inhibitors	What is the half-life of the antibody you are using? Is it an infusion or SC administration? Where are you currently in the preclinical development process? How do you control neutrophil and white cell counts in patients who receive the tx? What is your preclinical POC?
ME Therapeutics	a treatment for cancer	Cancer	I'm not very sure about what is the difference between this proposed solution and the ones currently developed by other teams. Maybe you should focus on explaining what that difference will be from the PATIENT's point of view, not from the scientific point of view. The latter by itself it is not enough to grab attention.
ME Therapeutics	Fully humanized anti-G-CSF mAbs for immunotherapy in cancer.	Although immunotherapy has been shown to be very beneficial in the treatment of cancer, its effect is only observed in a reduced number of patients.	Effects and safety?
ME Therapeutics	anti-human G-CSF antibody that recognises specifically this target. G-CSF is important to drive the suppression of immune response against the tumor. This target is associated to poor survival.	Cancer and the still low efficacy of cancer immunotherapy	

ME Therapeutics	G-CSF antibody for immunology therapy	unresponsive chemotherapy patients	Why was pancreatic cancer (mentioned in your project description) replaced with lung cancer in your presentation?
ME Therapeutics	drug to improve response rates of 1st generation IO	not all patients respond to IO	how are you going to choose which tumor type to target? By the time you get to market a lot of later line lung patients will be PD(L)1 pre-treated. Do you think you will be able to show efficacy in a later line setting?
ME Therapeutics	novel mAb for IO		What does the competitive landscape look like for G-CSF? I like that you put market projections with assumptions in your deck. Need more explanation of why G-CSF could enhance response - what is compelling and exciting about the mechanism?
ME Therapeutics	anti-G-CSF humanized antibody for cancer immunotherapy	Lack of response to 1st gen immunotherapies (checkpoint inhibitors); need to target other pathways (myeloid enhancers) with safety and efficacy	Do you see this as a combination therapy? How does your molecule compare to other anti-G-CSF molecules in terms of improved characteristics?
ME Therapeutics	GCSF ab for treatment of myeloid malignancies	need for treatment for myeloid malignancies	Interested in more information about immunologic effects of blocking GCSF
ME Therapeutics	Immunotherapy treatment.	Cancer.	
ME Therapeutics	Develop drugs to target G-CSF	There are some drug resistance to IO drugs and patients do not respond well	
ME Therapeutics	humanized antibody targeting g-csf	lung and colorectal cancer	i need more education on g-csf
ME Therapeutics	Immunotherapy in oncology		Not a subject matter expert in this area.

ME Therapeutics			- I can't really help this team at all - it's not in my area of expertise.
ME Therapeutics	cancer immunotherapy - inhibit breaks on T cells. Anti-body against GCSF; humanized	cancer - check point inhibitors do not work well. Lung and colorectal	
ME Therapeutics	An inhibitor to be given alongside cancer therapies to reduce drug resistance	Immuno-oncology drug have significant resistance issues.	Focusing on the most important indication is what will drive perceived value here. Just jumping to a platform technology rings alarm bells. Every indication requires studies and a lot of money and development, so having one very significantly impactful story would be better than a generic "platform" pitch.
ME Therapeutics	G-CSF antibody?	Immuno-oncology: patients do not respond to cancer drugs	Presentation can be improved (less words and more clear messages would help). It is a nice presentation but now it is too dense and the main messages are not clear.
ME Therapeutics	Immunotherapy treatment for cancer patients.	Cancer patients do not respond to actual treatments.	
ME Therapeutics	Second generation Immuno-oncology agents	Treating resistant colorectal and other GI carcinoma's	Are other companies working on the "new target"? Who are your competitors.
ME Therapeutics	Immuno-oncology treatment. Second generation of check point inhibitors	No response to check point inhibitors	