FUTURE ONCOLOGY

TECHNOLOGY, PRODUCTS, MARKETS AND SERVICE OPPORTUNITIES

A New Medicine Publication

VOLUME 3, NUMBER 1-12 INDEX

May 1998

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REPORTS

CANCER PAIN: WORLDWIDE PRODUCT DEVELOPMENT AND MARKET OPPORTUNITIES

REPORT #430

SEPTEMBER 1998

250 PAGES

\$3,450

One of the most debilitating complications of cancer is moderate to severe chronic pain. Ignored in the past, new guidelines call for aggressive treatment of such pain and are encouraging physicians to co-operate with their patients to achieve satisfactory control. Currently, the most effective agents in the treatment of cancer pain are opioids but considerable R&D effort is underway to discover and commercialize alternative pharmacologic treatments promising to improve the quality-of-life of chronic pain sufferers irrespective of the origin of pain. This report provides a comprehensive review of all aspects of cancer pain as outlined below:

Section I describes the basic mechanisms involved in pain

Molecular Biology of Pain (pain receptors and signal transmission pathways)

Anatomy of Pain Perception (peripheral receptors, spinal cord, brain regions and pathways)

Types of Cancer-Related Pain (bone, breakthrough, central, neuropathic, nociceptive, phantom and treatment-related pain)

Physiology and Pathogenesis of Pain (cancer types and special populations)

Section II provides a worldwide epidemiology of incidence, prevalence and morbidity associated with cancer pain by origin and world region (North America, Europe, Japan and ROW) and assesses its economic and quality-of-life impact.

Section III describes diagnostic and management approaches by origin of pain

Tumor-related Chronic Pain Syndromes Treatment-related Chronic Pain Syndromes

Section IV delineates current treatment approaches

Pharmacologic Interventions (NSAIDs, morphine/opioids, methadone, corticosteroids, alpha adrenergic agonists, anticonvulsants, antidepressants, neuroleptics, biphosphonates/calcitonin, antineoplastics, muscle relaxants, antihistamines, psychostimulants, etc.)

Radiation Therapy (treatment of bone metastases by localized, wide-field, stereotactic and fractionated radiotherapy and radiopharmaceuticals)

Surgery and other Approaches (neurosurgery, nerve blocks, acupuncture, psychosocial interventions)

Section V describes drug delivery methodologies in use or in development to enhance administration of pain medications, including oral controlled/sustained release, rectal, transdermal, nasal/inhaled, injectable, intrathecal/intraspinal (temporary/permanent catheters, subcutaneous injection ports/reservoirs, implantable pumps, intraventricular delivery, patient-controlled analgesia, encapsulated cells, etc.) and subarchnoid delivery.

Section VI provides a detailed review of R&D involving significant improvements of existing drugs such as opioids and non-opioids as well as novel agents based on newly-discovered mechanisms, including ion channel blockers, afferent neurons, ligand/receptor interactions (neurotransmitters, NMDA antagonists, neuropeptides, cholecystokinin antagonists, etc.), anti-hypersensitivity agents, etc. This Section also incorporates a comprehensive database of analgesics in development worldwide, listing the agent's developer/ affiliate, mechanism/technology and clinical status.

Section VII estimates current worldwide markets for pain management products and identifies major opportunities for cancer-pain medications.

Section IX profiles over 40 developers of pain-related products.

CANCER VACCINES: TECHNOLOGY, PRODUCTS, MARKETS AND BUSINESS OPPORTUNITIES

REPORT #401

250 PAGES

OCTOBER 1997

\$1,950

Increased understanding of the immune system coupled with genetic engineering and other cutting-edge technologies, is encouraging the development of a new generation of vaccines using diverse approaches. A new round of prototype tumor vaccines is expected to advance in clinical trials in the next two to three years. Some vaccines represent a broad-based approach, attempting to trigger the whole immune system, while others are directed at specific targets. If successful, cancer vaccines will first be used therapeutically, to boost the immune response to cancer in patients already afflicted. A vaccine that would actually prevent cancer in high-risk individuals will be the next step, although this is probably years away. **New Medicine** has just released a cancer vaccine report providing an in-depth analysis of the cancer vaccine sector (see page 5). This report provides a comprehensive analysis of the cancer vaccine sector in terms of: **basic science** (tumorigenesis, oncogenes, tumor-suppressor genes, mitogenic growth factors and growth inhibitory factors, viral causes, apoptosis, immune response, tumor antigens, immune surveillance); technology (antiviral vaccines against cancer, nonspecific and specific active immunotherapy, whole tumor cell vaccines, gene transfer, protein antigens, adoptive immunotherapy, activated killer cells, tumor-infiltrating lymphocytes, passive immunotherapy, adjuvants); indications and epi**demiology** (worldwide incidence by disease severity and survival and mortality statistics for major cancers); products under development (a comprehensive database of over 160 cancer vaccines in development worldwide, including data on developer/affiliate, technology and clinical status); market opportunities worldwide (by indication based on candidate populations and suggested treatment costs); and developer profiles (over 60 companies).

neu Oncology medicine KnowledgeBASE™

New Medicine, the publisher of Future Oncology, the premier analytical newsletter in the oncology field has released a comprehensive resource, Oncology KnowledgeBase, to keep its clients informed of developments in the cancer field.

 \cap M | **OK** is a resource developed for the executive/professional working in the oncology field. This is not another piece of the puzzle but a comprehensive all-in-one listing of everything you wanted to know about this field, updated daily. \cap M | **OK** was designed to reside in one's computer at one's desk and allow immediate and convenient access to information in this field. For instance, when a competitor releases clinical results of a novel agent in development, the \cap M | **OK** subscriber can instantaneously compare these results with those of other agents in development for the same or a related indication. When a new affiliation/collaboration is announced between two companies or a licensing agreement with an academic institution, \cap M | **OK** lets one review all other affiliations/collaborations of the key players.

The oncology field is advancing at a breakneck pace with new developments in basic science, progress in preclinical research, and results of clinical evaluations being reported on a daily basis and new drugs being approved for indications for which no new drugs had been introduced for decades. History will view the 1990s as pivotal years in the war against cancer but there is still a long way to go before a cure is found.

 $\cap \cap$ | **OK** was designed to be used by executives who need to follow closely any developments in this area, in terms of:

- product development status
- competitive pipelines
- affiliations
- novel drug development opportunities
- clinical development status
- current worldwide epidemiology
- current worldwide sales of commercially available agents
- market opportunities of agents in development

∩∩ | **OK** consists of a number of modules (New Drugs, Marketed Drugs, Companies, Diagnostics, Devices, Epidemiology, Markets, Indications, Technologies, Mechanisms, Drug Delivery, Markers, etc.) covering every important aspect of the cancer field.

The currently available module, New Drugs, incorporate over 950 records of agents in development for cancer and complications associated with the disease and its treatment (anemia, cachexia, edema, emesis, hypercalcemia, infection, mucositis, neutropenia, pain, thrombocytopenia, xerostomia, etc.). Each record contains information on every aspect of the agent in development. For instance, do you need to know:

How many drugs are in development based on the mechanism of angiogenesis? (about 40)

Who is the developer?

Is there a collaboration and with whom?

What is the status of the drug?

How is it administered? etc.

How many drugs are in development for prostate cancer? (140)

How many are in phase III? (21)

How many of these are oral agents? (7)

What are the results of clinical trials? etc.

How many drugs are there in the Pharmacia & Upjohn pipeline? (8) and those of its affiliates? (5)

What is the status of these drugs?

Which companies have forged alliances with Bristol-Myers Squibb? [Chiroscience Group, EntreMed, Pharma Mar, Progenics Pharmaceuticals, Somatix Therapy (Cell Genesys), etc.]; for what products/enabling technologies?

How many drugs in development are orally bioavailable? (73)

How many of these are in clinical trials? (51)

How many drugs are in preclinical trials? (257); in research? (121); in phase I? (260)

How many drugs have been discontinued in the last several years? (18); how many of these were in phase III clinical trials? (6)

Why were they discontinued?

How many affiliations have been concluded by M. D. Anderson Cancer Center? (14)

nm OK

A UNIQUE ELECTRONIC RESOURCE IN THE CANCER FIELD.

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