

Open PHACTS Workshop, February 2015

The Lilly Perspective: *Challenges We Face & Tools We Need*

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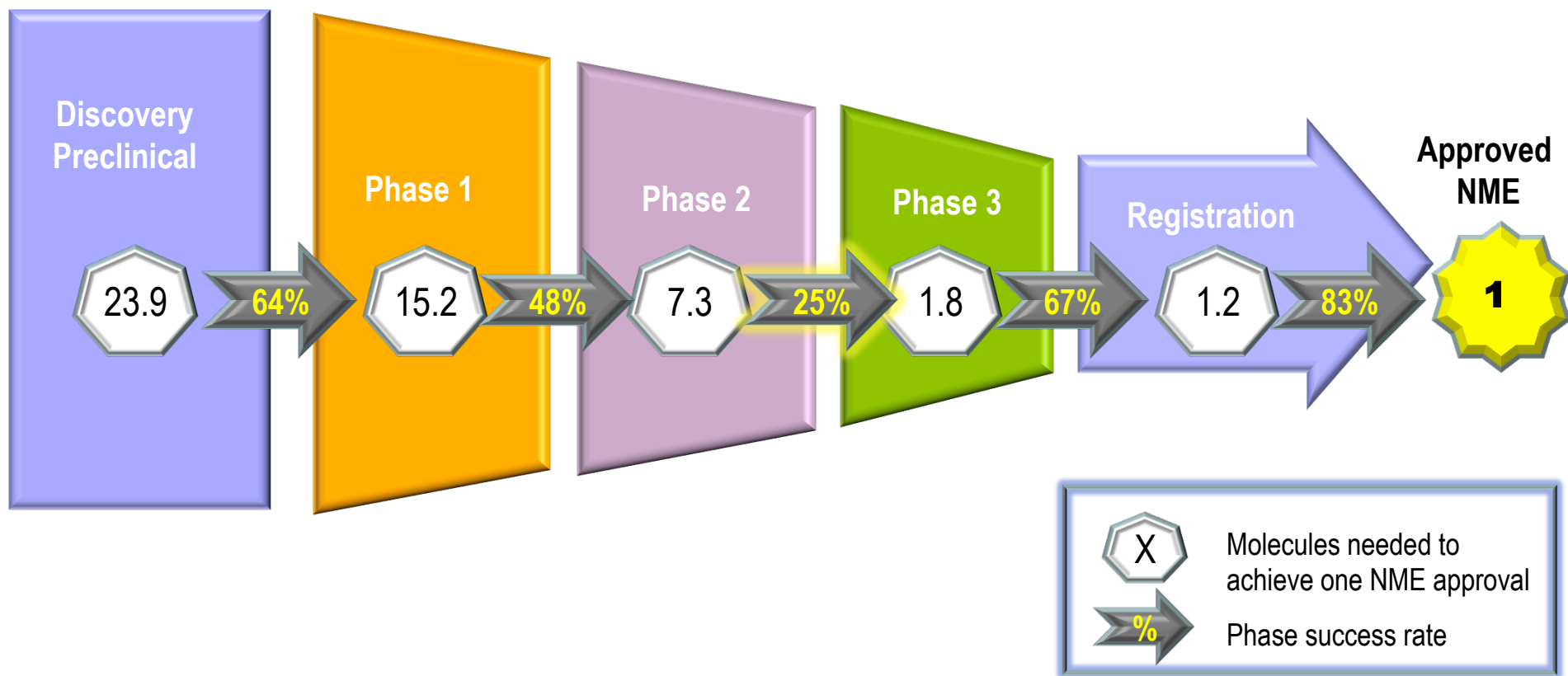
Part I: Challenges

The Lilly Perspective: Challenges We Face & Tools We Need



Part I: Challenges

The Drug Discovery & Development Process

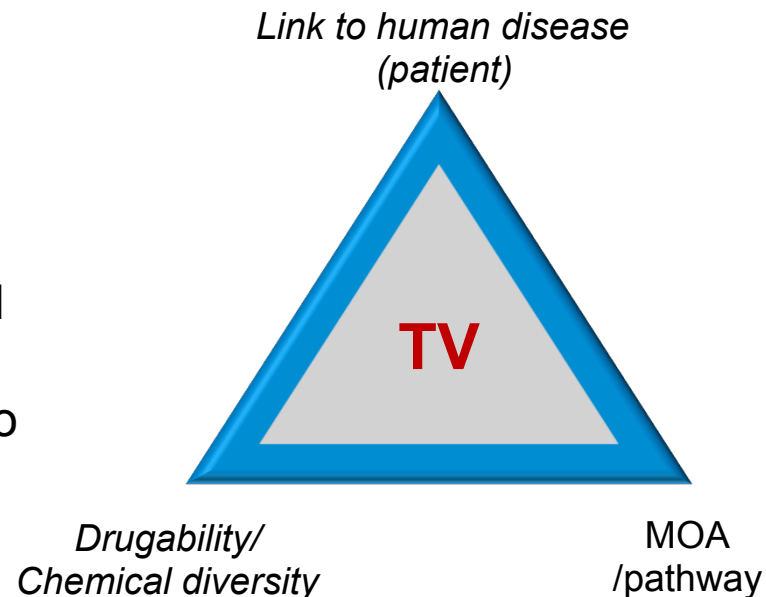


Data from Bunnage, *Nature Chemical Biology*, **2011**, 7, 335.

Part I: Challenges

Target Validation Remains Critical

- Despite huge increases in R&D investment, wealth of scientific and technological advances, the output of new drugs has not increased.
- Not all biological insights lead to effective drug targets, and focusing on the wrong target can result in clinical failures costing time, money, and ultimately, not helping patients.
- Developing a new drug — from early discovery to approval — takes well over a decade and has a failure rate of more than 95 percent.

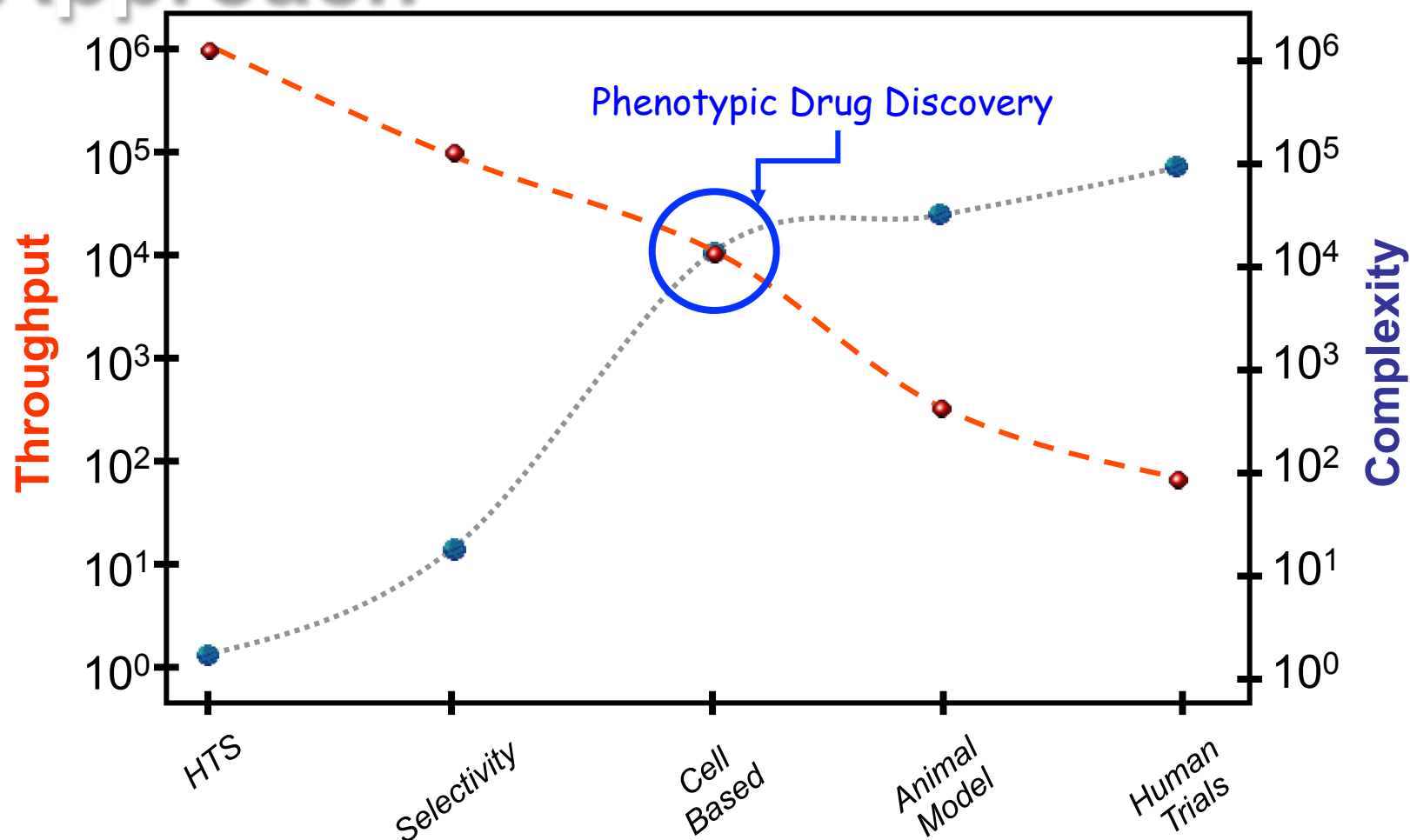


Thus, it is critical to do a better job in identifying the right biological targets early in the process.

The global biomedical research community and the public have a common interest in compressing timelines, reducing costs, and increasing success rates of new targeted therapies. Is there a pre-competitive opportunity to collaborate to identify human relevant targets worth investing further?

Part I: Challenges

Allure of the Phenotypic Approach



Part I: Challenges

Target vs Phenotypic Approaches

- Target Approach

- Target-centric, pick “best” target hypothesis
- biochemical criteria prioritize compounds for evaluation in cell
- Cell-based assays Provide a “Physiological” Context

- Phenotypic Approach

- R&D Conducted Using Complex, Disease-Relevant *In Vitro* Models
- Does Not Require Identification of Target(s), Does Not Preclude It
- Complements and Supports Target-Based Discovery
- May Increase p(TS)

Part I: Challenges

The Price of Going Phenotypic

- Offers an empirical approach to identify novel targets linked to human disease.
- Unbiased approach for increasing understanding of a pathway
- It could lead to multiple target opportunities (single or polypharmacology)

Key challenges:

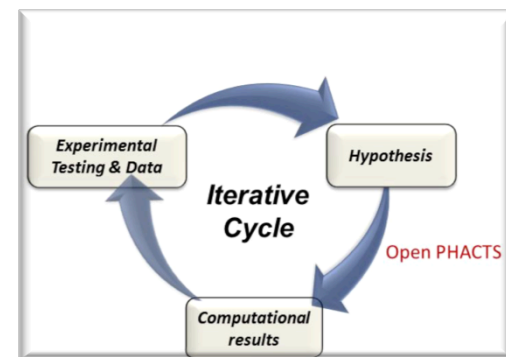
- ☐ Data deconvolution (complex and lengthy) leading to target-hypothesis
- ☐ Identification of key experiments to confirm target hypothesis (who has expertise; timelines)
- ☐ Chemoproteomic approaches to confirm target engagement in different species (probe design)
- ☐ Internal level of interest/buy-in (really early drug discovery/exploratory)
- ☐ Needs to focus on a few key areas/pathways (due to complexity/resources)

Part I: Challenges

Data Analysis & Deconvolution

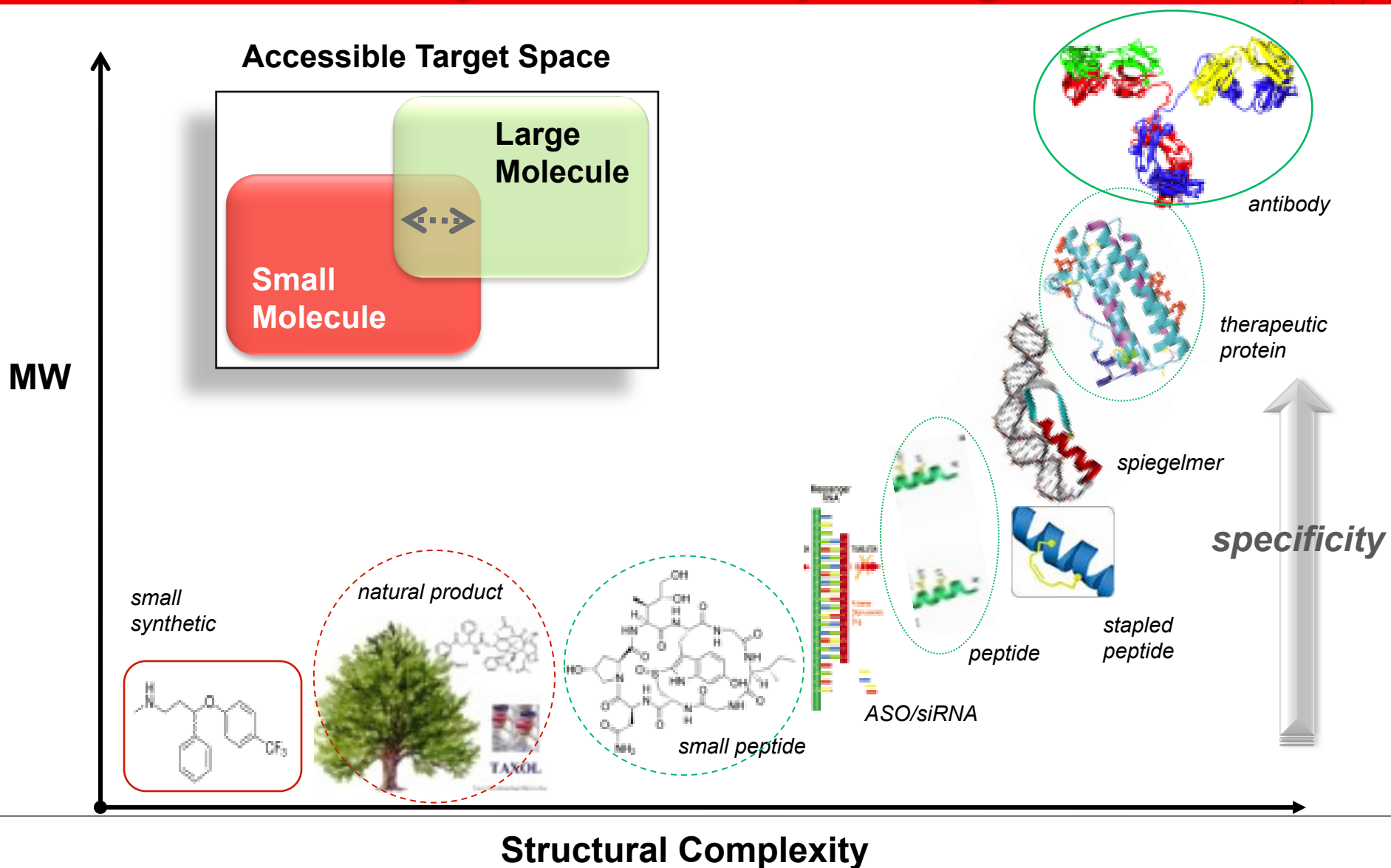
Once some hypotheses had been generated (e.g. 5 key targets), what are the key experiments that can feed the data pool, validating or discarding some hypothesis:

- Do clinical biomarkers/database exist for this target or disease?
- Can a selective and potent compound tested in human tissue?
- Level of expression in different human tissues (isoforms) – is this data available in any database?
- Interpretation of pathway MOA – up or downregulation, compensation mechanisms, disease state
- Integrate data with known target population/patients (known mutations, resistance....)
- Confirm or generate a database of human genotypes with associated medical records and a target safety review portal
- Do KO experiments/data exists in preclinical species ?
- In depth review of each target and iterative data update (data curation)
- Do we have a high quality tool/compound?



Part I: Challenges

Chemical Space Complexity



Part I: Challenges

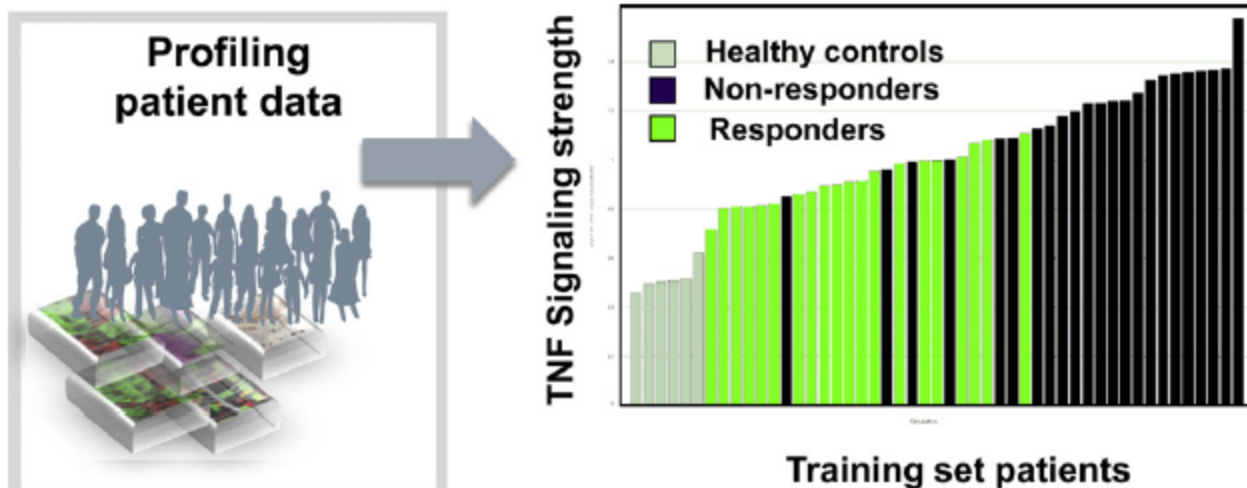
Impact on Lead Generation

- Improving target selection might be key to reduce attrition in phase 2
- There is a need to expand druggability of novel biological targets e.g. *epigenetics, protein-protein interactions....*
- Lead Generation plays a critical role to identify starting points for those novel targets
- Identification of novel chemical space relies on:
 - Structure-based drug design, biophysical methods
 - Expansion of chemical diversity and topology
 - Moving beyond “Rule of Five” small molecule
 - Computational methods

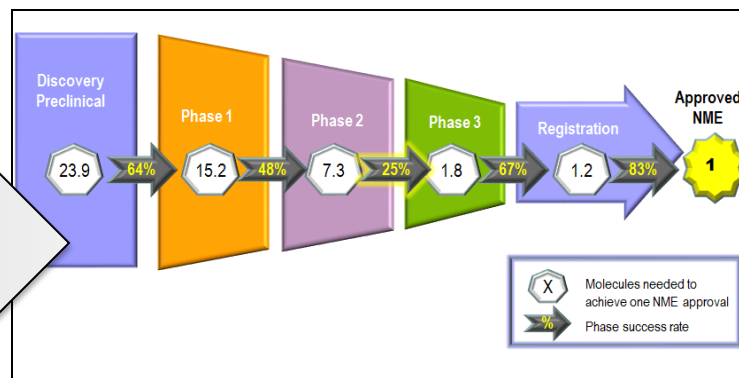
Part I: Challenges

Integrating Clinical Learnings

H.-C. Schneider, T. Klabunde/Bioorg. Med. Chem. Lett. 23 (2013) 1168–1176



Data Integration
& Into
Lead Generation
Strategies



Part II: Tools

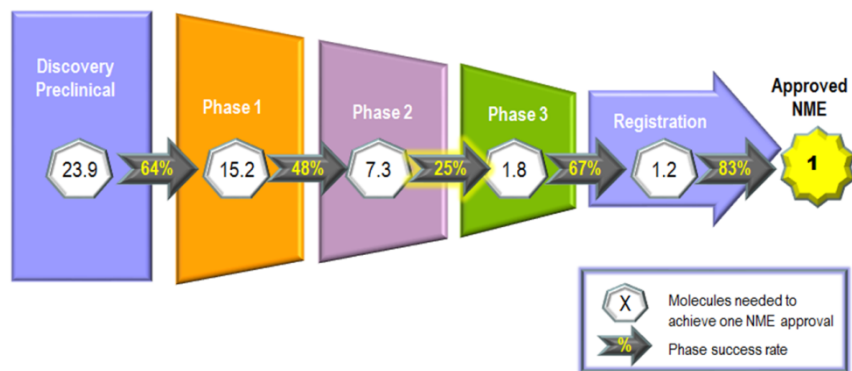
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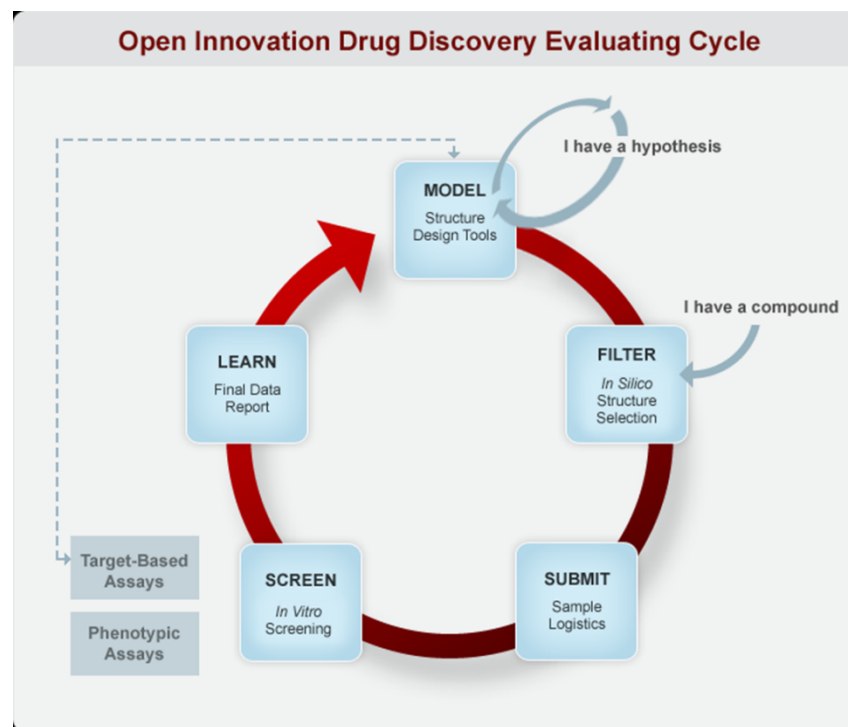
Part II: Tools

The Rocket vs The Wheel

In early Discovery,
it's not a rocket....

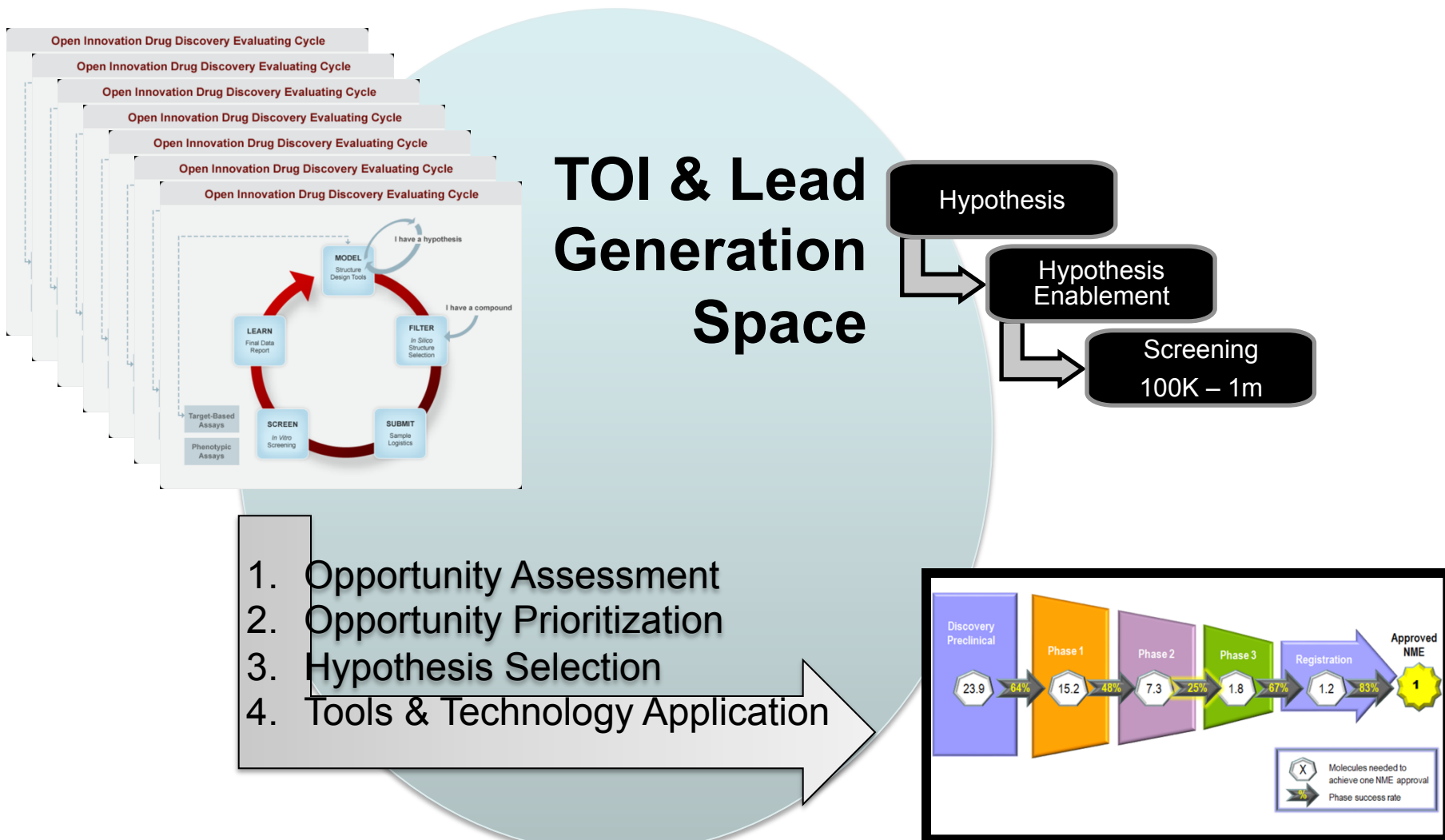


...but an infinite cycle of
learning



Part II: Tools

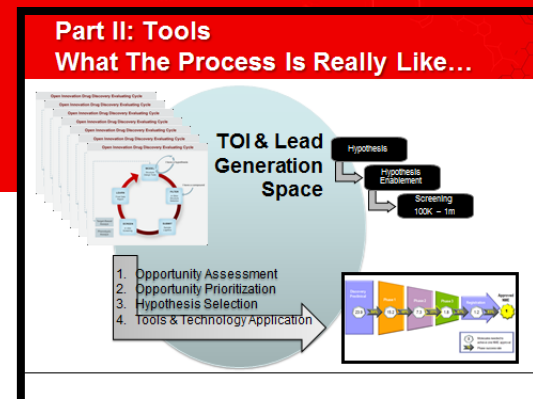
What The Process Is Really Like...



Part II: Tools

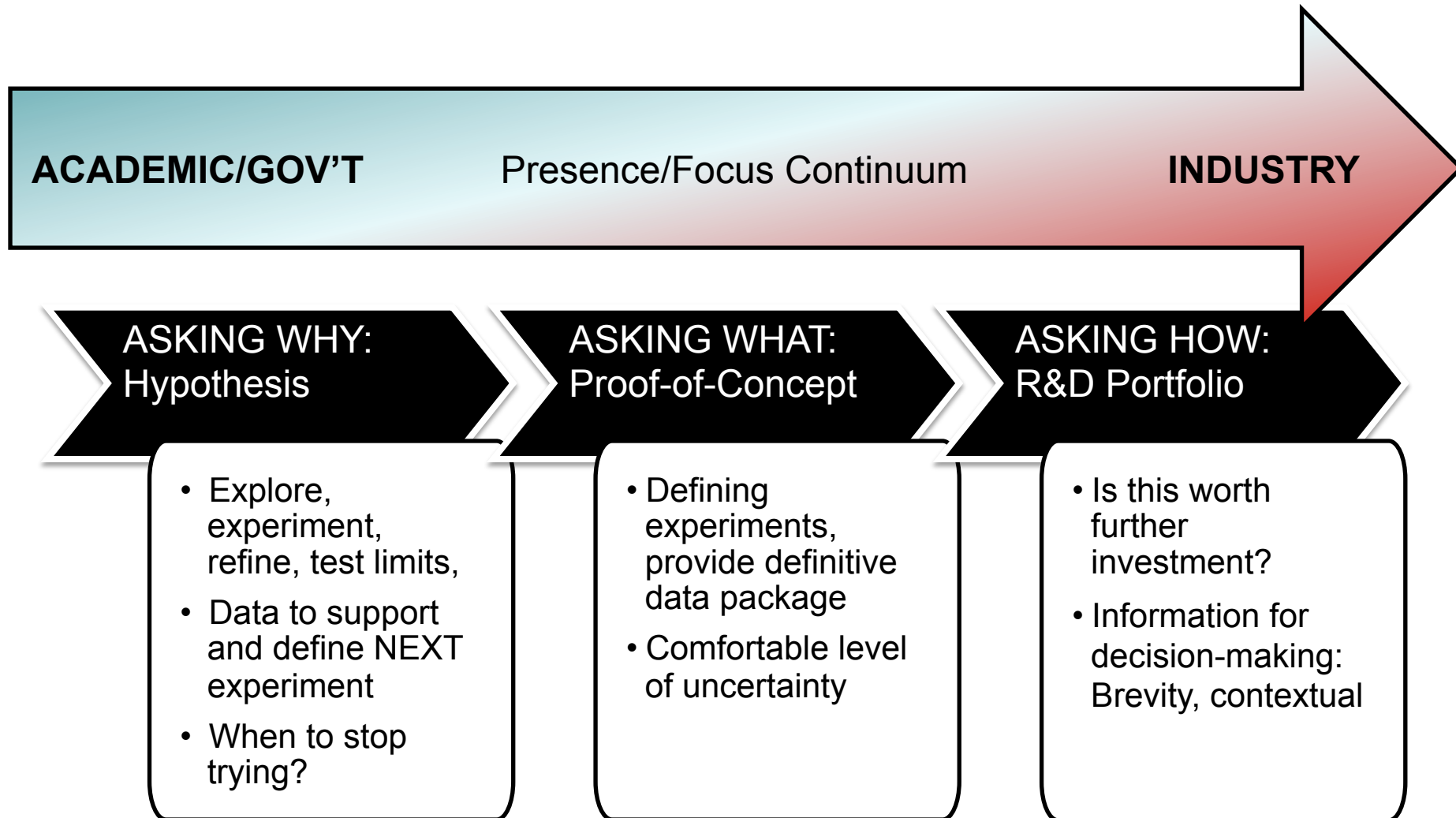
TOI & Lead Generation Space

- Biological Understanding
 - Tools & Technologies - Applicability
 - Chemical Space – Availability
 - Rapid-Fire Learning – Remove Uncertainty ASAP
- Data Analysis
 - Multiple Scaffolds – Prioritization
 - Large Data Sets – Relevance
 - Multi-Parameter Evaluation - Visualization
- Resourcing
 - How much \$\$\$/Effort?
 - Is this a good bet? How do we know it is? Rabbit hole?
 - Opportunity cost: while we do this, what are we missing?



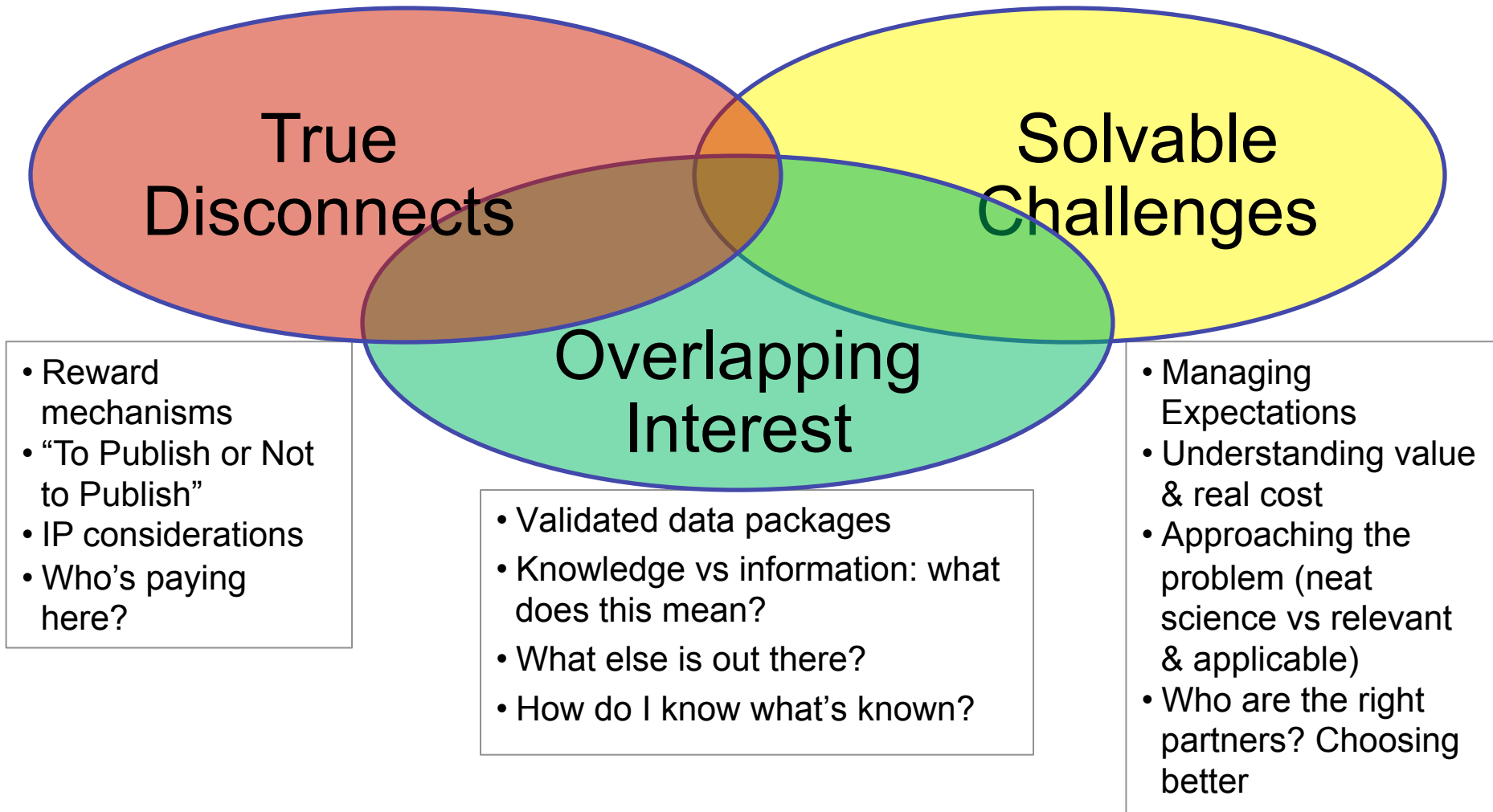
Part II: Tools

Pre-Competitive Space Offers Complementarity of Strengths



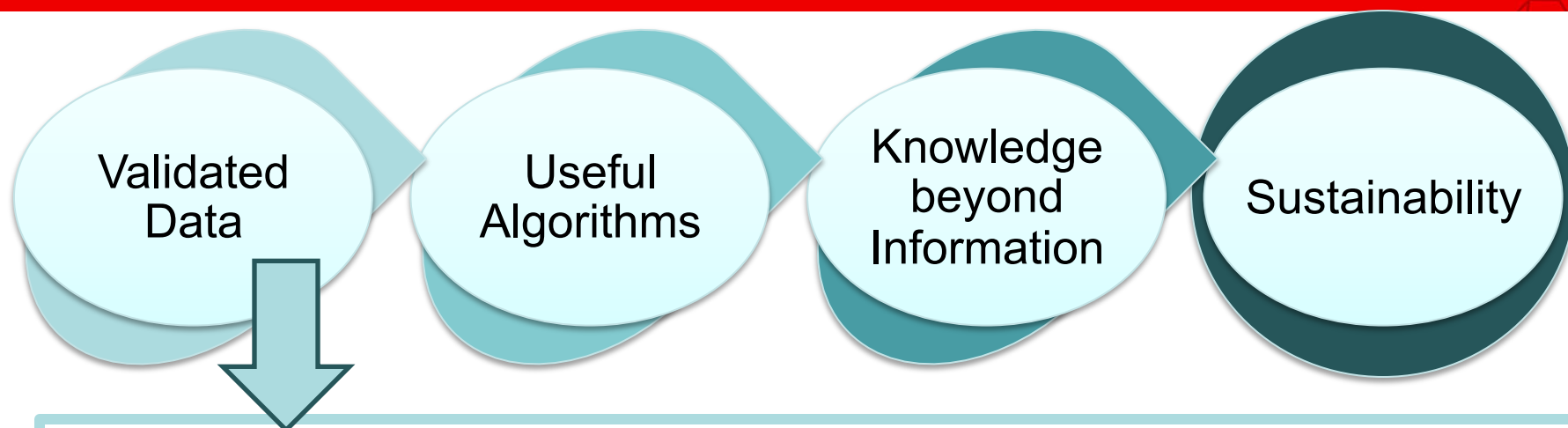
Part II: Tools

Pre-Competitive Space Offers Come With Its Own Set of Issues



Part II: Tools

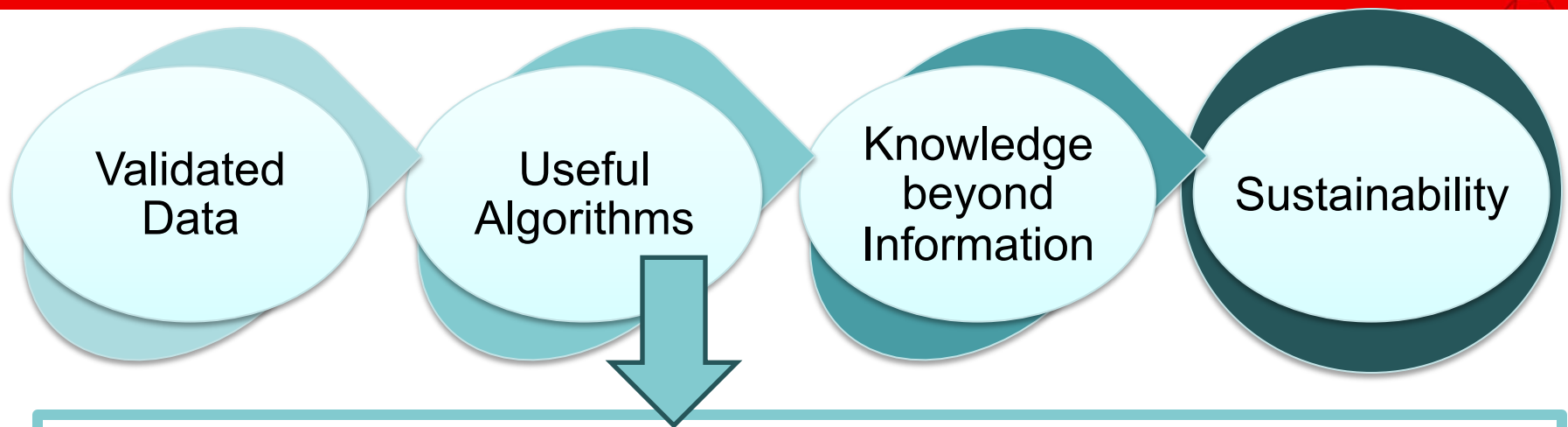
What Do We Build Next?



- Data validation, lit issues – recent statistics point of irreproducibility
- Think about:
 - Format
 - Quality
 - Gatekeeping (refute/purge)
- Feeding the algorithms: selecting from ever-growing data sets
- Experimental validation => example of Org Syn Prep – possible reward system? **Go CRO and crowdsourcing**

Part II: Tools

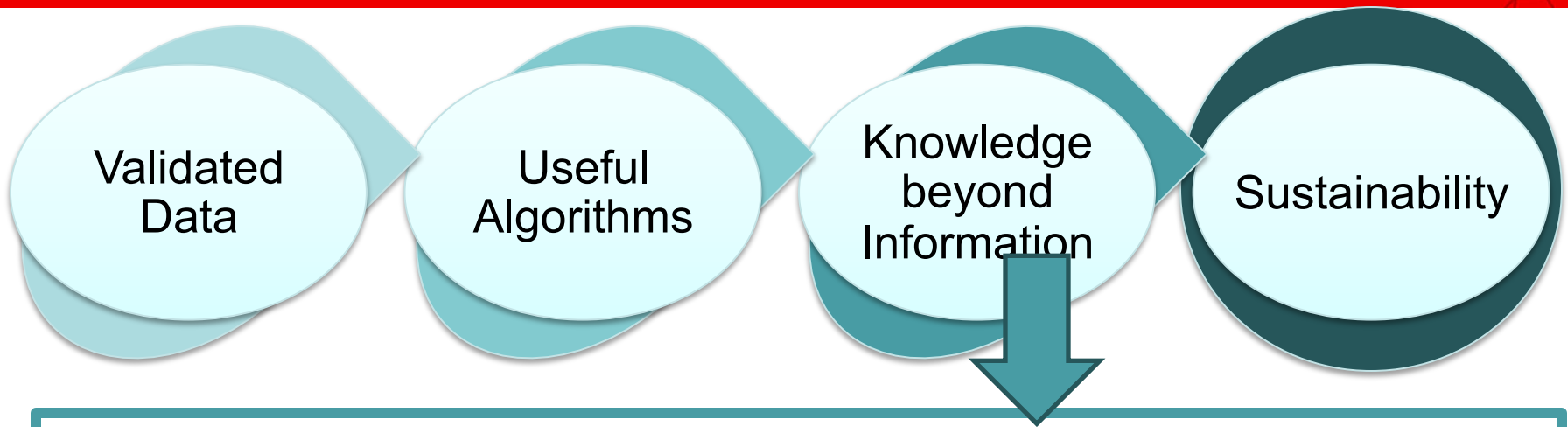
What Do We Build Next?



- Connect-the-dots: provide information within context
- How do I found a NOVEL idea?
- Complicated pathways: what's out there relevant to my question? Prioritize my answers
- Where do I look? How do I integrate?
- Alert me: **give me partners, technologies, competitive space**
- Feedback incorporation: machine learning (means) & human learning (end)

Part II: Tools

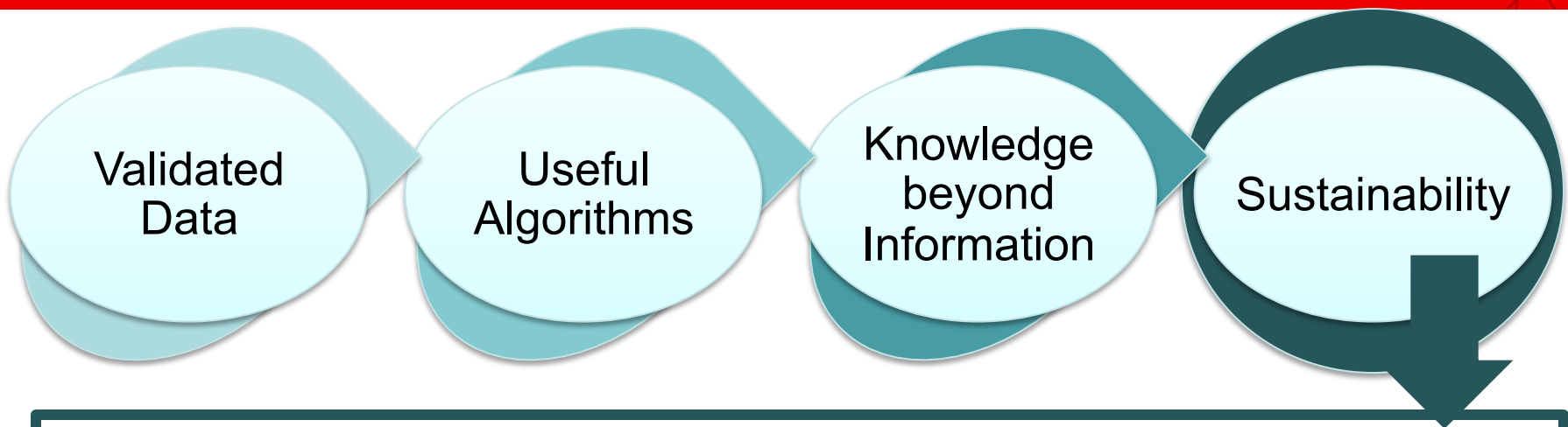
What Do We Build Next?



- Understanding requires interpretation => **opportunity for academia**
- What's next – integrating information provenance & relevance: think amazon.com vs google => **becoming the supplier**
- What does this mean? Incorporation of cross-functional learning
- Avoiding the “Expertise syndrome” => insular/isolated views
- Visualization tools; **“Analysis for dummies”** at the service of opportunity identification

Part II: Tools

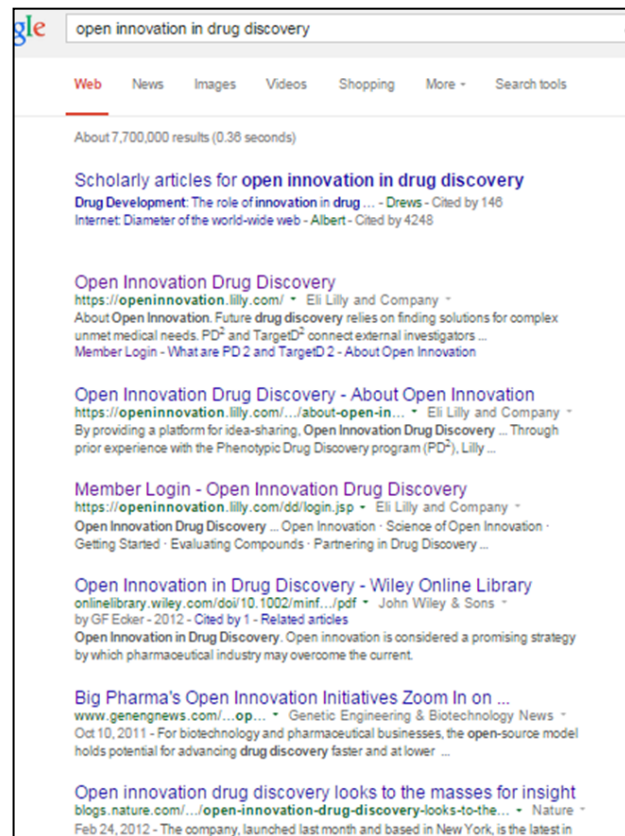
What Do We Build Next?



- Think Habitat for Humanity – need to pay for yourself!
- What's your ROI? => you need to keep your stakeholders happy (think Washington DC museums – all free)
- The “How” matters: user interfaces, presentation
- What do we have already? What do we need to build?
- Dealing with “NIH Syndrome” and “WIIFM”
- The ultimate value proposition for this exercise is to achieve incorporation of translational science, i.e. patient data

Think Amazon vs Google

Known Unknowns



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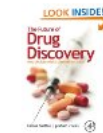
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Collaborative Innovation in Drug Discovery Technologies ... Apr 14, 2014
by Rathnam Chaguturu and Ferid Murad

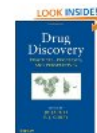
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