



Neuroscience Therapeutics Development: Current State And Challenges

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Disclosure: I am an employee of Merck

Finding New Drugs Is Difficult

- In many disorders with unmet medical need,
 - Our understanding of disease biology is incomplete, making it difficult to choose targets that result in effective drugs
 - Even when disease is better understood, finding targets that reliably move biology can be challenging (e.g. tau, α -synuclein)

Background

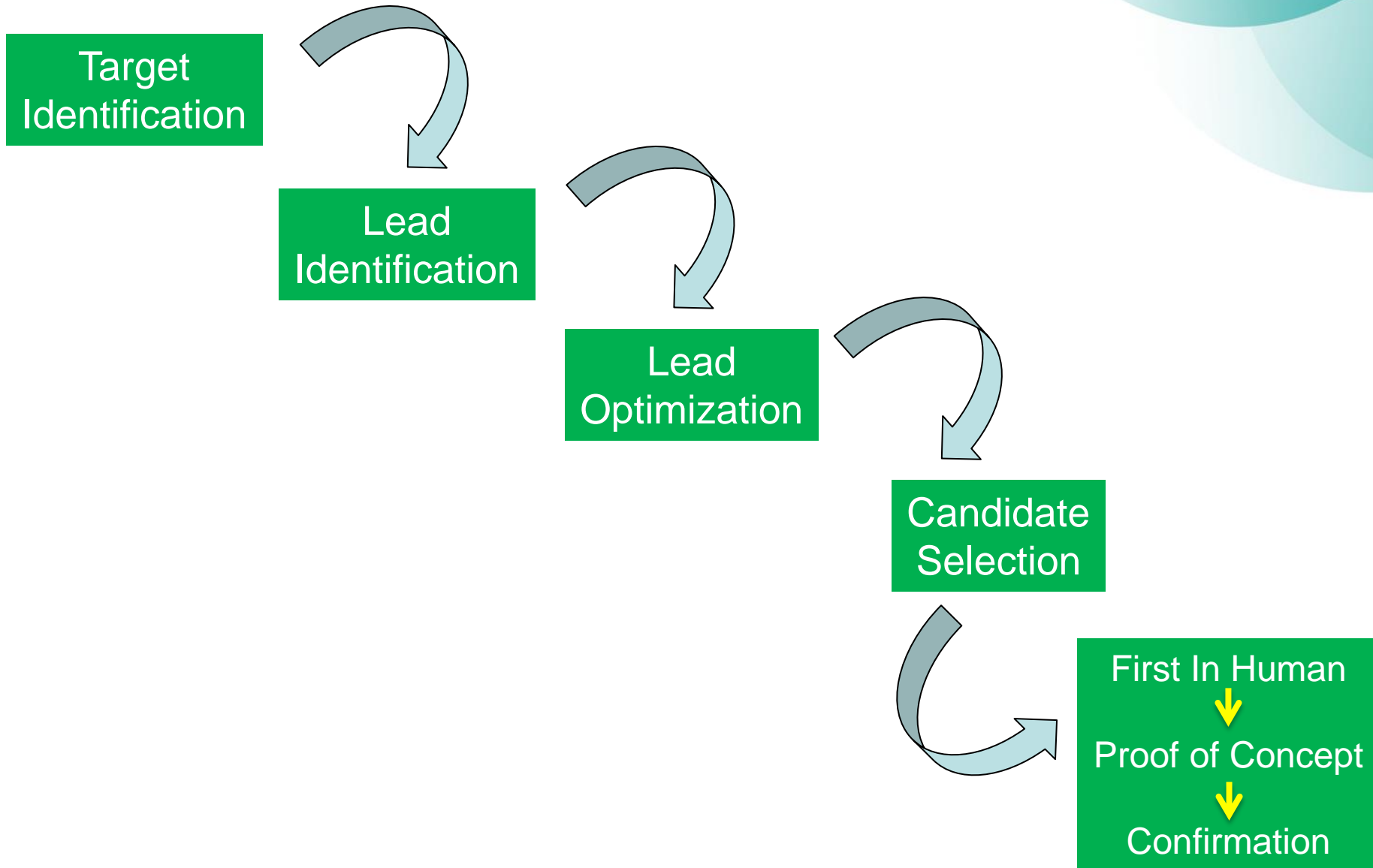
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- Compared with other disease areas, CNS disorders have been relatively less tractable to finding new treatments as measured by success rates:
 - From 1995 to 2007 the proportion of all new CNS drugs with a first in human dose that ultimately received regulatory approval was 6.2%¹
 - Benchmarking data suggest that CNS (neurology/psychiatry/pain) success rates are among the lowest of the major therapeutic areas
 - As many new drugs are iterative (e.g. 2nd or 3rd in class, etc.), the success rates for truly novel ('unprecedented') mechanisms may be overstated
 - In recent years, many companies previously active in developing novel CNS drugs have exited the area, despite the large unmet medical need that remains

The Challenge

To serve patients well and increase the flow of needed drugs, we will need more efficient discovery and development methods, and improved success rates

The focus today is to explore and discuss paths toward this goal

The Path To A Drug



The Path To A Drug

Target
Identification



Validated By:

- Genetics
- Pathophysiology
- Human Pharmacology
- Animal Models
- Other

Lead
Identification

Lead
Optimization

Candidate
Selection

First In Human
↓
Proof of Concept
↓
Confirmation

Validated Targets

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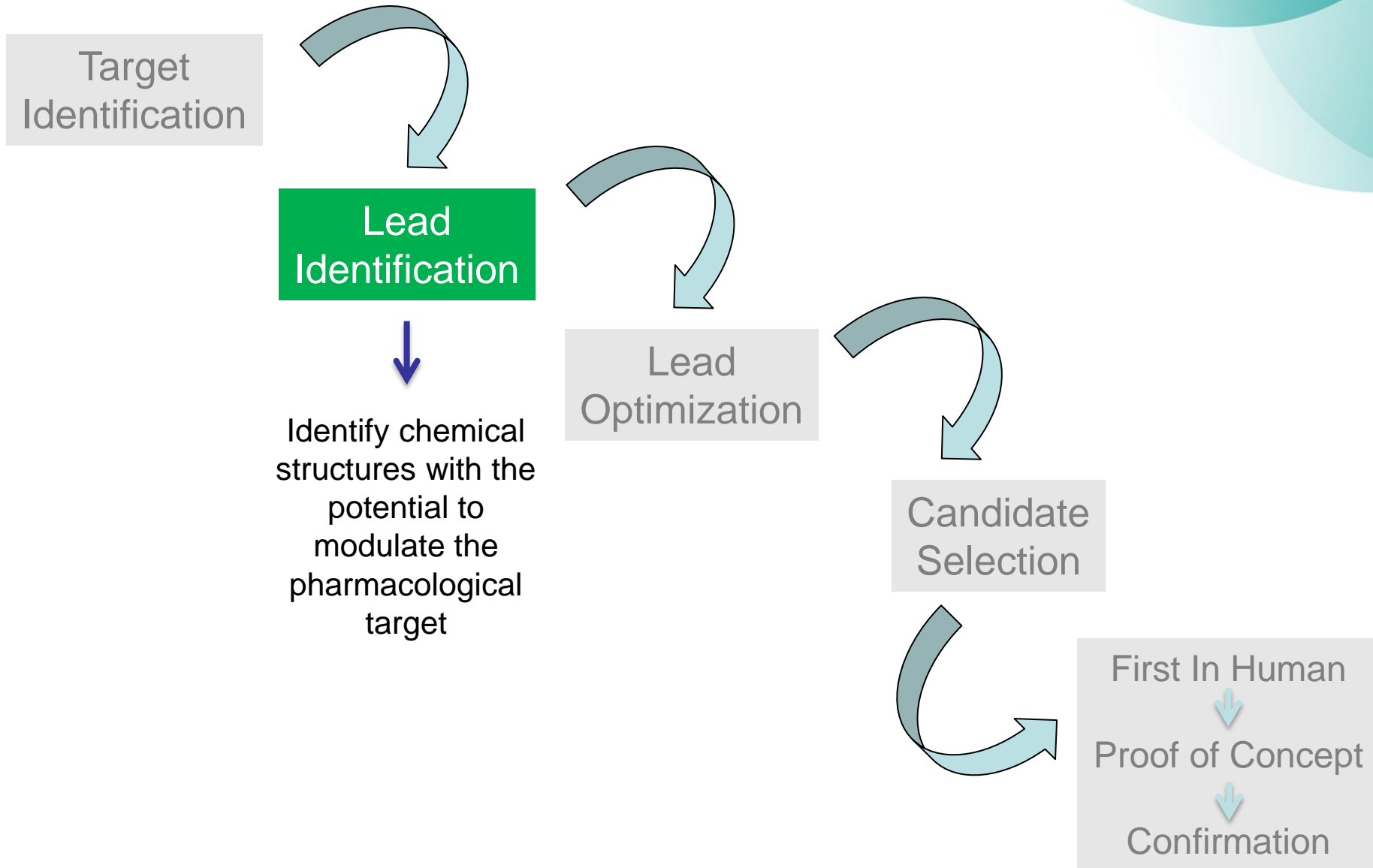
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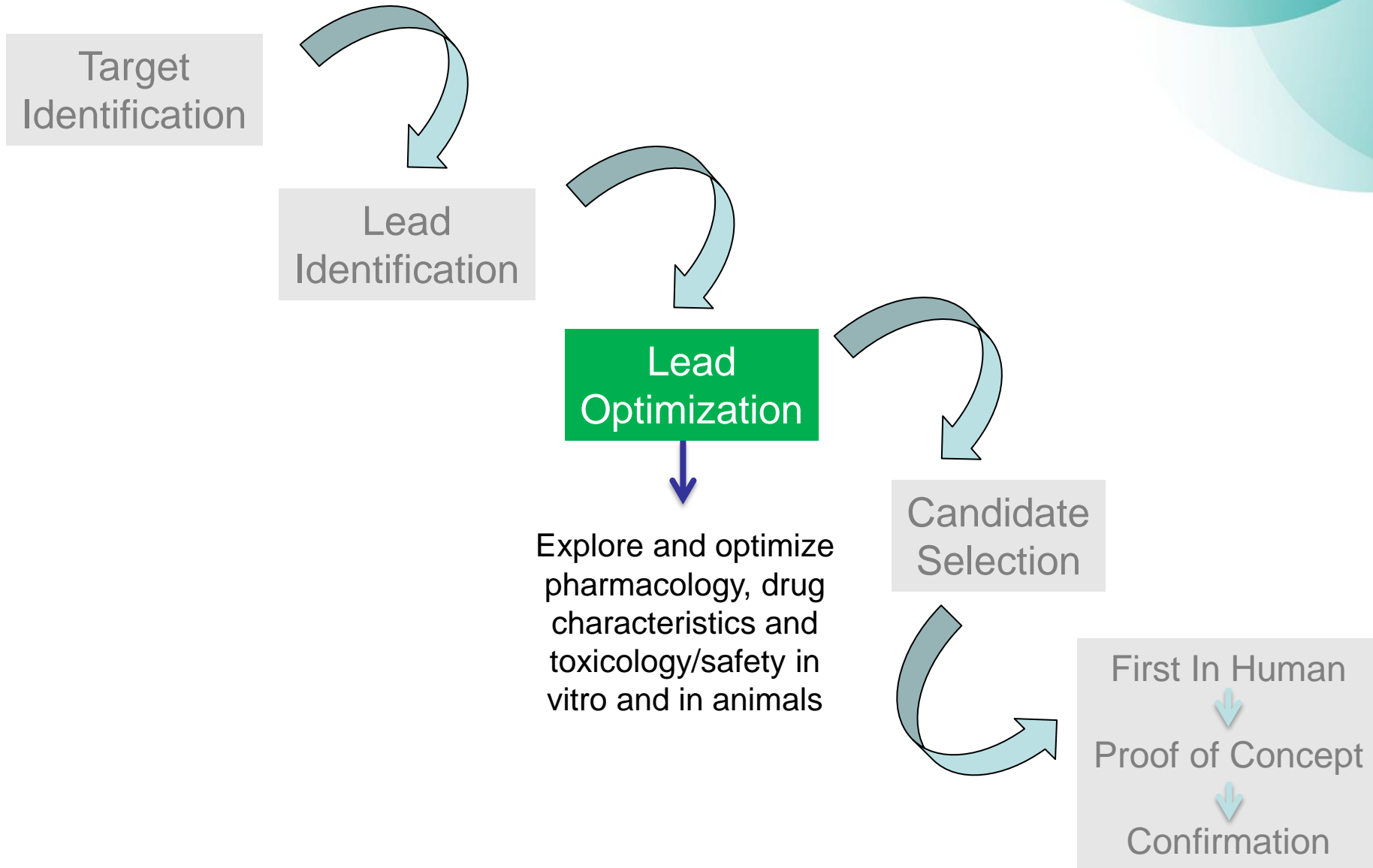
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- The limitations of animal models have been increasingly recognized, and emphasis is shifting towards validating targets with human data

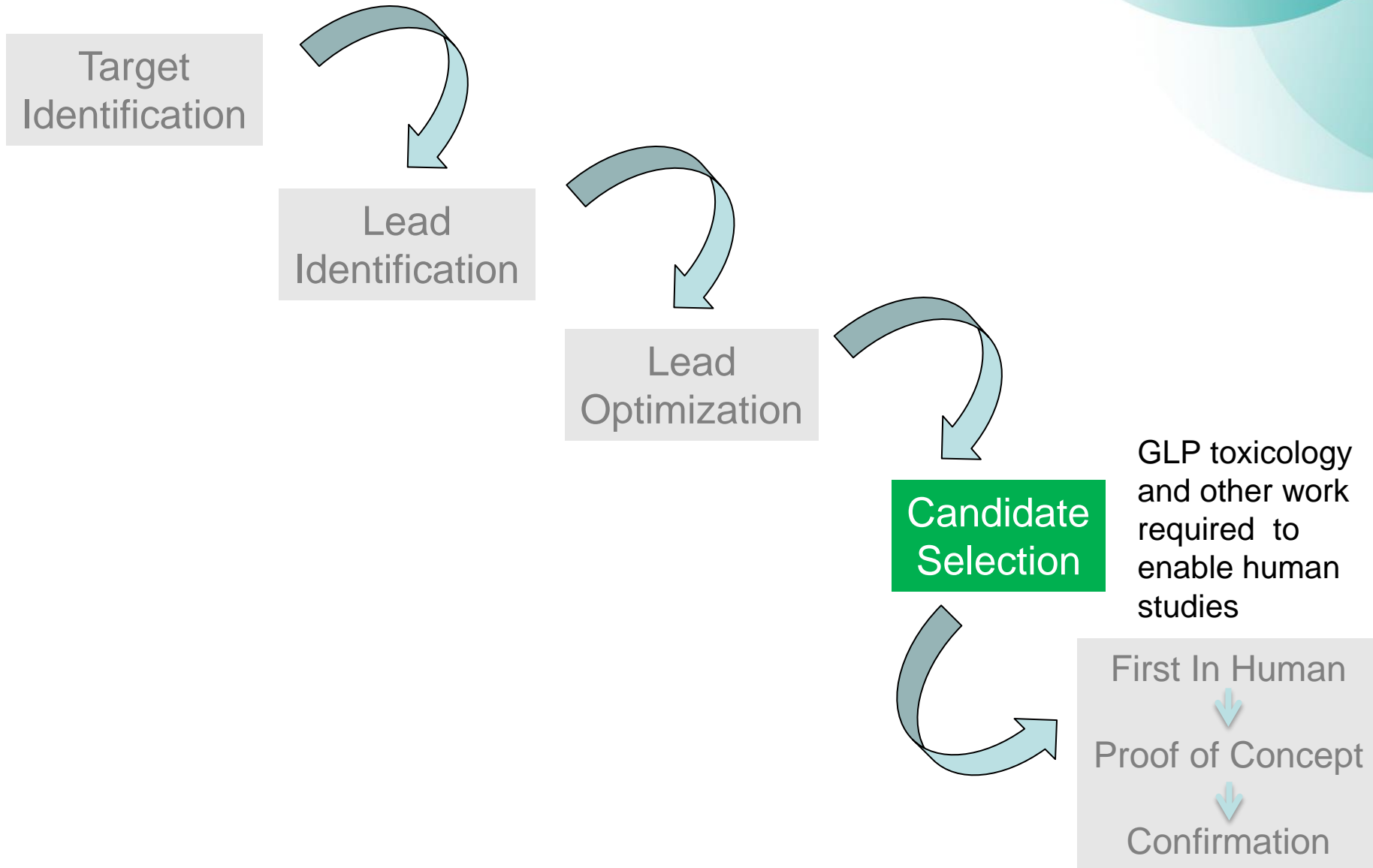
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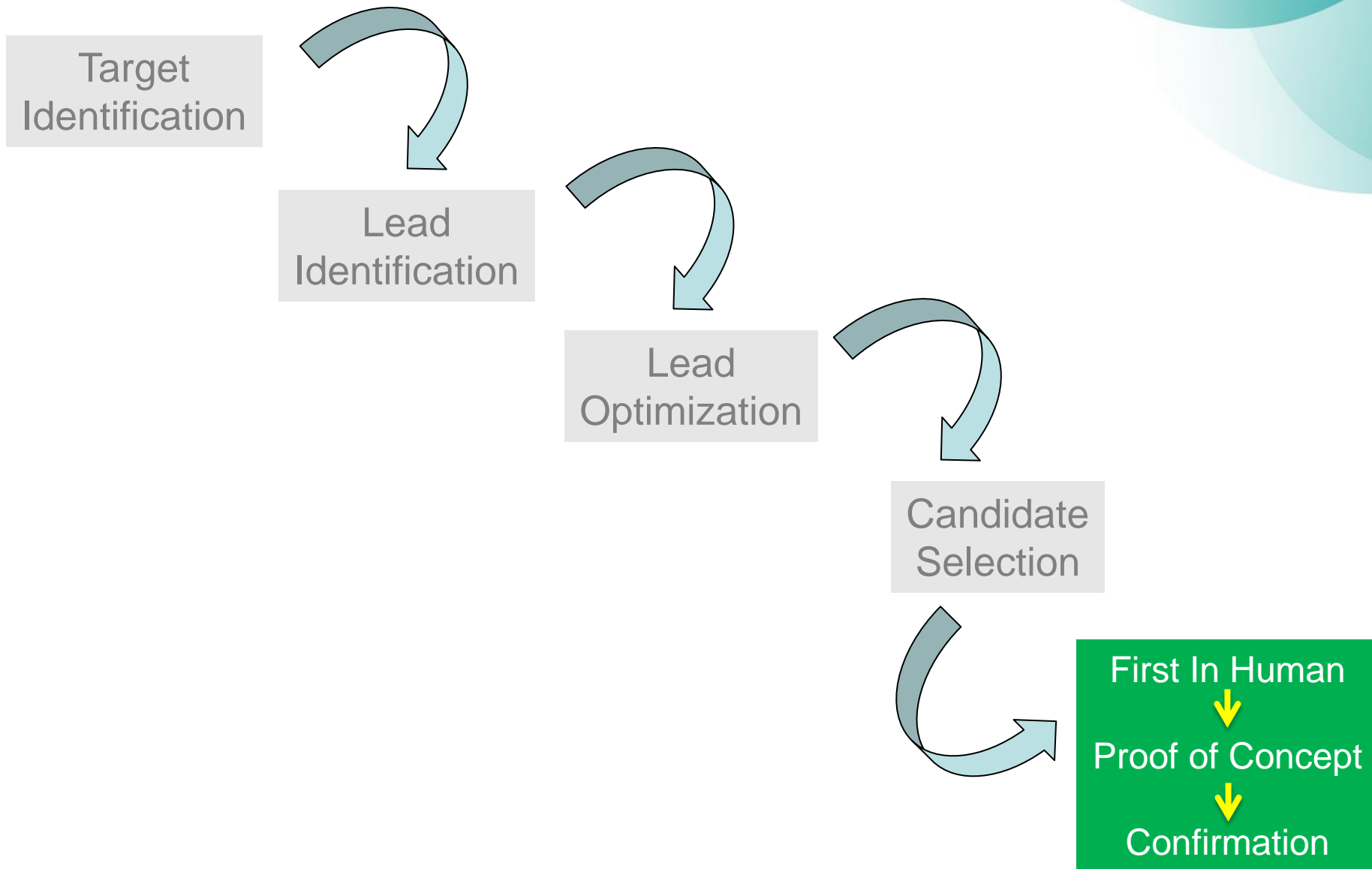
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- Animal models often can usefully explore whether a given pharmacology can effect desired biological changes

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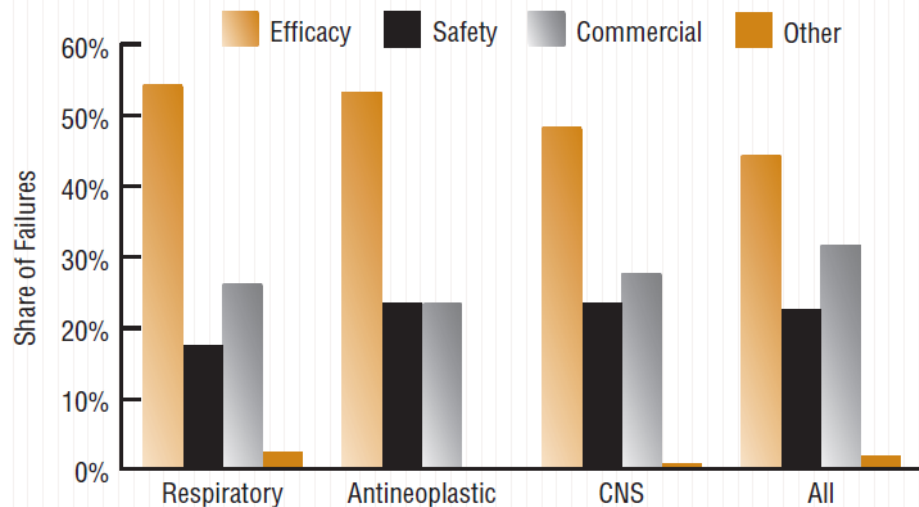
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- Thus better approaches and paradigms are needed

The Most Common Reason For Failure Is Inefficacy: The Drug Candidate Does Not Demonstrate The Desired Therapeutic Benefit

Efficacy issues leading to failure dominated for certain therapeutic classes

*Therapeutic Classes with Relatively High Efficacy
Failure Shares*



■ For investigational drugs that first entered clinical testing in 2000-09, more than half of the respiratory and antineoplastic indications (54.3% and 53.3%, respectively) that failed did so primarily for efficacy reasons.

Source: Tufts Center for the Study of Drug Development

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To encourage increased efforts to find and develop new CNS therapeutics there are several potential 'levers'

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Today's Focus