

approach

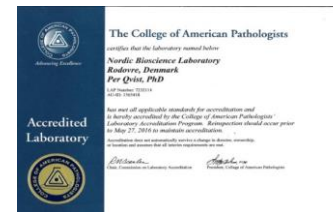


NORDIC BIOSCIENCE

- 80%** of our 180 employees are directly involved in science or research
- 45+** articles are published a year in well respected, peer-reviewed journals with more than **400** publications in total – we are very science-driven
- 80+** abstracts accepted a year at scientific conferences all over the world
- 25** years of experience in biomarker development and integration of biomarkers in clinical trials
- 100** validated proprietary biomarkers in our biomarker portfolio – the fibrosis panel
- 3** FDA/EMA validated biomarkers and **6** biomarkers currently being validated
- >275 000** test results delivered to sponsors from our CAP-certified laboratory in 2018



Biotechnology since 1991

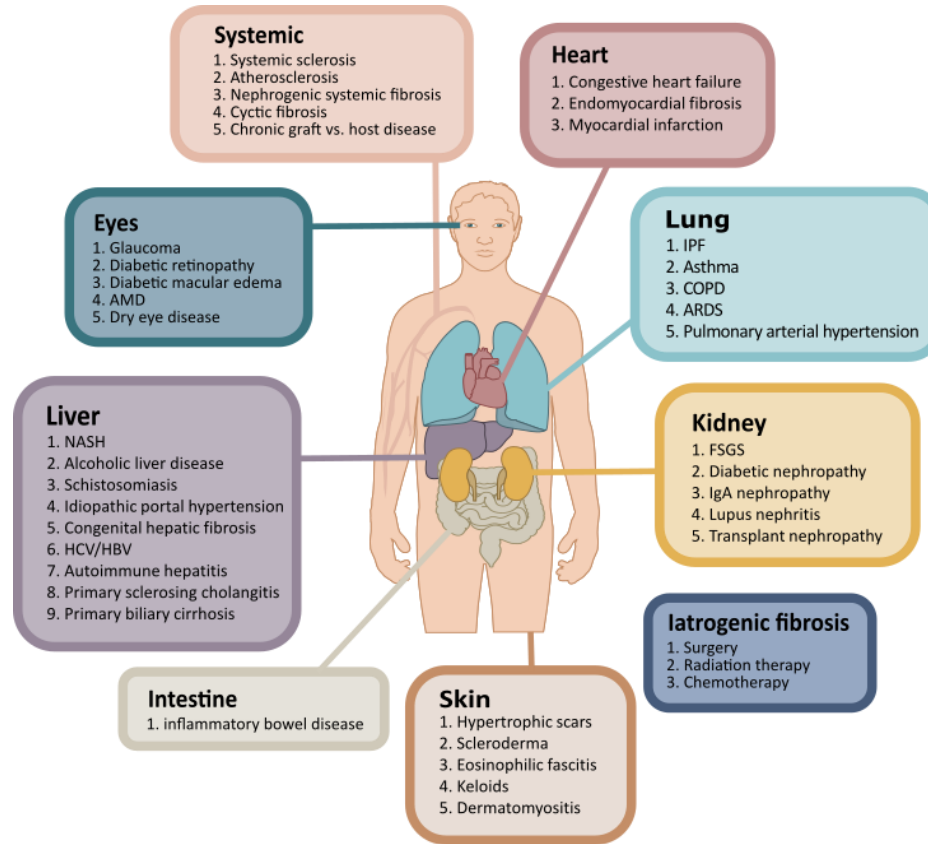


In Vitro Companion Diagnostic Devices
Guidance for Industry and Food and Drug Administration Staff

Document issued on: August 6, 2014.
 The draft of this document was issued on July 14, 2011.
 For questions regarding this document that relate to CDDE contact Elizabeth Mansfield at 301-794-4846 or elizabeth.mansfield@hhs.gov; for questions on CDDE contact Office of Communications, Outreach and Development (OCOD) at 301-794-7000 or 301-794-4001 or ocod@hhs.gov; for questions on CDER contact Christopher Lynch at 301-794-4001 or chryl@hhs.gov.



THE MEDICAL NEED: NON-INVASIVE TECHNOLOGIES FOR PROGNOSIS, DIAGNOSIS & EFFICACY OF INTERVENTION

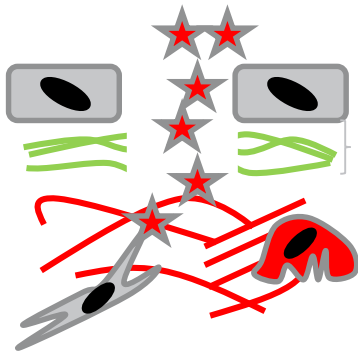


1. 45% of the deaths in western world are associated with fibro-proliferative diseases
2. There more than 50 different fibro-proliferative diseases

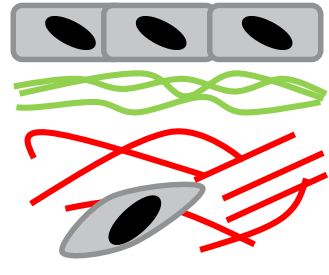
BALANCE OF ECM TURNOVER

SEPARATION OF THE MEASUREMENT OF TISSUE FORMATION AND TISSUE DEGRADATION

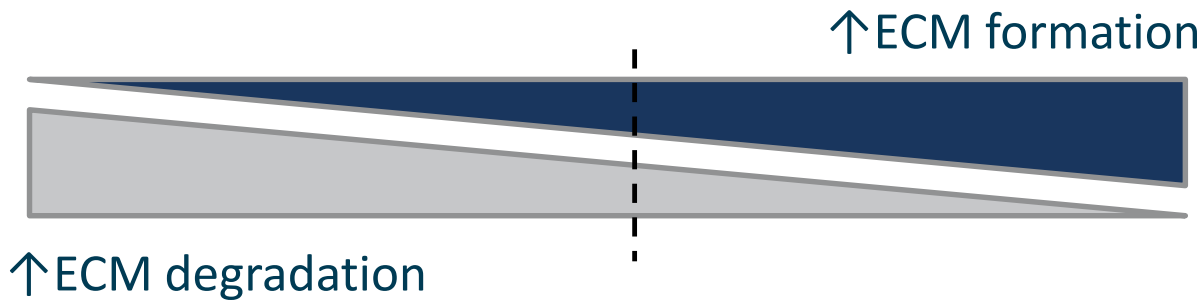
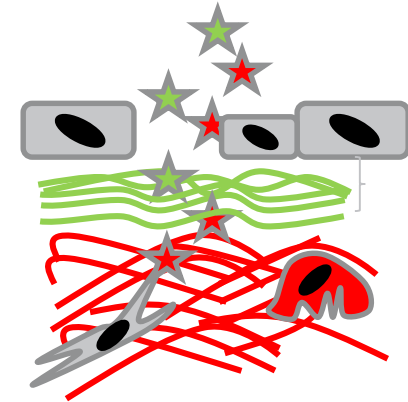
Fibrosis



Balance



Fibrogenesis



Resolution phenotype

Progression phenotype

PRECISION MEDICINE - QUALIFICATION

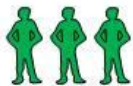
OPTION FOR YESTERDAY



10 Potential patients



No patient selection



30% Response



7 non-responders



responders



Non-responders



Serious side effects



Non-treated

OPTION FOR TOMORROW



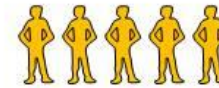
10 Potential patients



50% selected patients for treatment/non-treatment



60% Response



Non-treated

BEST RESOURCE (SEPT 25, 2017)

Term definition – context of use – the BIG mission

Diagnostic biomarker:

A biomarker used to detect or confirm presence of a disease or condition of interest or to identify individuals with a subtype of the disease

Monitoring biomarker:

A biomarker measured serially for assessing status of a disease or medical condition or for evidence of exposure to (or effect of) a medical product or an environmental agent

Pharmacodynamic/Response biomarker:

A biomarker used to show that a biological response has occurred in an individual who has been exposed to a medical product or an environmental agent

Predictive biomarker:

A biomarker used to identify individuals who are more likely than similar individuals without the biomarker to experience a favorable or unfavorable effect from exposure to a medical product or an environmental agent

Prognostic biomarker:

A biomarker used to identify likelihood of a clinical event, disease recurrence or progression in patients who have the disease or medical condition of interest

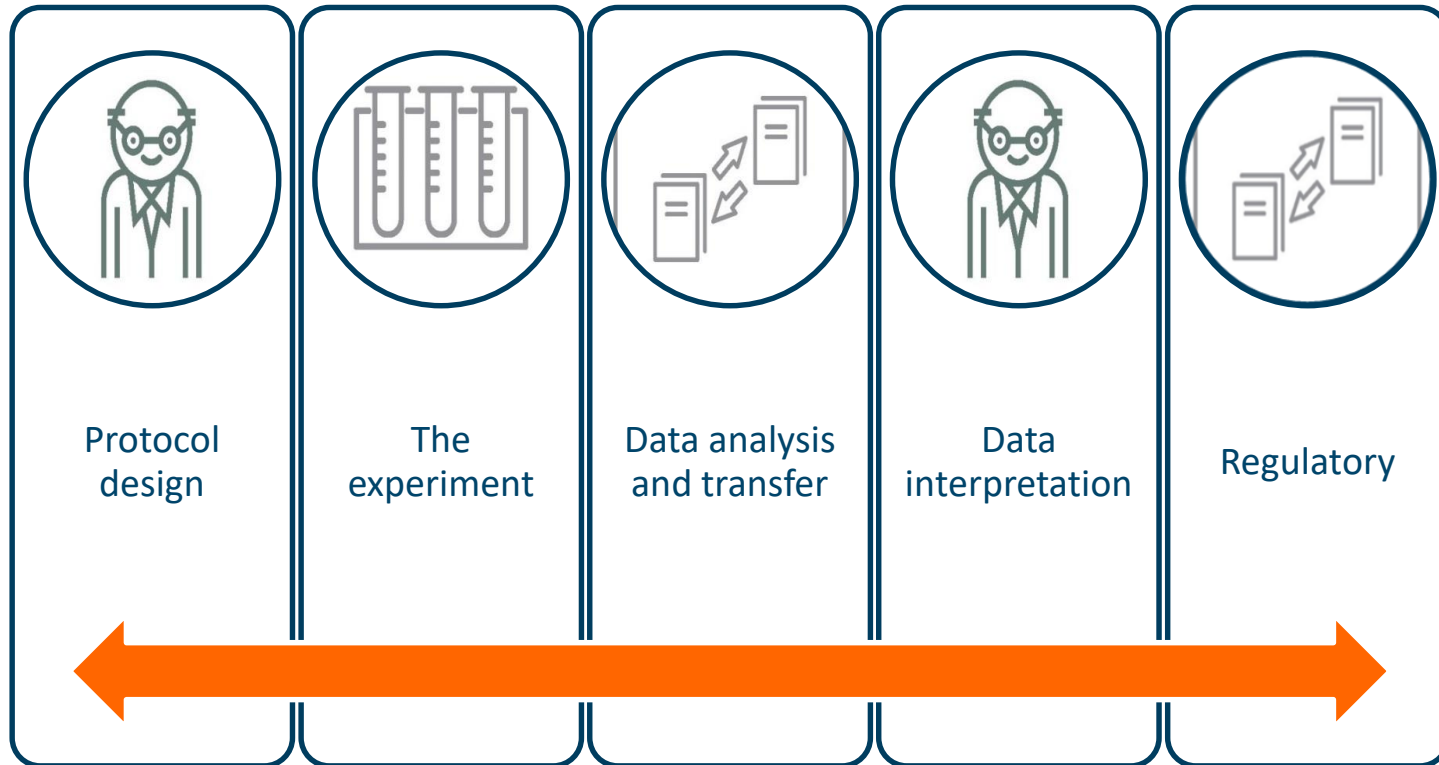
Safety biomarker:

A biomarker measured before or after an exposure to a medical product or an environmental agent to indicate the likelihood, presence, or extent of toxicity as an adverse effect

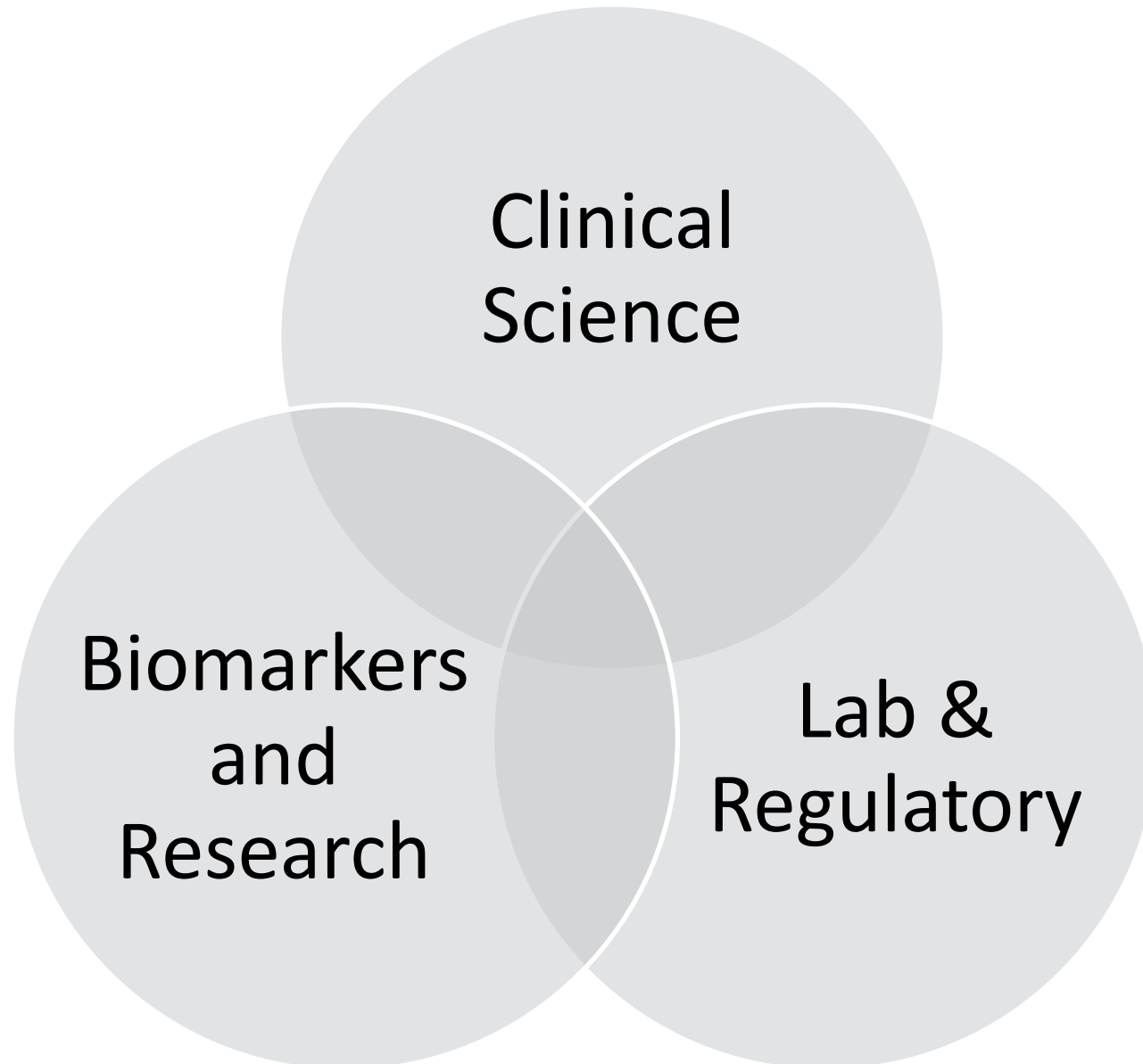
Susceptibility/Risk Biomarker:

A biomarker that indicates the potential for developing a disease or medical condition in an individual who does not currently have clinically apparent disease or the medical condition

THE BIOMARKER POWERHOUSE



WHY IMI



Clinical
Science

Biomarkers
and
Research

Lab &
Regulatory

WHY IMI?

1. A project with an end goal - a product
2. All players support the same vision
3. Controlled science – not deep basic research
4. Industry co-lead with a clear agenda and no fear of confrontation
5. A qualified biomarker to enable patient selection - we can make a difference

HOW TO GET INTO A SUCESSFULL CONSORTIA?

1. Build and know your friends – no last minute calls.
2. Alignment between the project and company vision.
3. Provide a task which is essential for a project – preferably on the critical path to success.
4. Make sure your technology is cutting edge – and no matter what will provide publications and advance the field.
5. Do not be protective – share, share and share.
6. Have a fantastic scientific reputation – and a reputation for publications and not blocking publications.
7. Transparency . . No hidden agenda.
8. Provide the technology to researchers to build data, publications, quality and trust free of charge.

WHY BIG COLLABORATIONS

1. Fun/reputation/credibility
2. Access to smart people
3. Vision of the field - leading the science
4. Regulatory utility meets clinical science
5. Pre-marketing - product pioneers