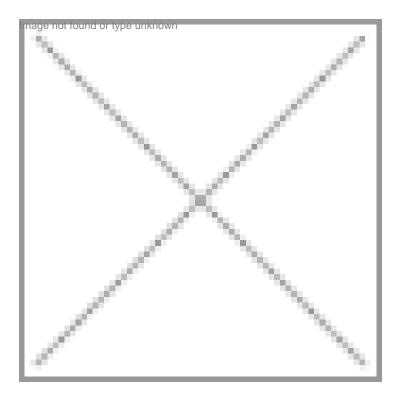


"We have plenty of opportunities to in-license latest drugs and work on them,"

11 March 2008 | News



"We have plenty of opportunities to in-license latest drugs and work on them,"

mage not found or type unknown Dr Harish Iyer, Head, R&D, Biocon

What is state of R&D for oncology in India?

My view is that the business models to get these drugs in the market are going to be different in the future. It is a global world now so it is not necessary to spend a lot of money in fundamental research here and come up with all new products yourself. There are a lot of labs around the world working on cancer therapies which cannot manufacture or do the trials or commercialize it. So we have plenty of opportunities to in-license latest drugs and work on them. However, we have to be up-to-date in our knowledge so that we can recognize the value in the opportunities when we see them.

Can you tell us something about the features of BIOMAb EGFR?

BIOMAb EGFR is a humanized antibody, a complex molecule approximately 150,000 Dalton in molecular weight. It targets a molecule called Epidermal Growth Factor Receptor (EGFR) that is present on epithelial cells. EGFR is present at particularly high levels on tumorous epithelial cells. When the BIOMAb EGFR binds

this receptor, it helps to kill the tumor. Our clinical trials have indicated patients respond extremely well to BIOMAb EGFR given in combination with traditional chemotherapy and radiotherapy.

These antibodies have complex secondary and tertiary structure that enable them to specifically target cancer cells as opposed to all cells; therefore the systemic toxicity is often very minimal. So you can almost get into a specialist clinic, get an infusion in an outpatient setting and walk away. This is not like typically chemotherapy where you have systemic toxicity because the drug targets specific receptors or signals in the body that cause the disease.

We have been working on this product for several years now. It is a novel molecule, which makes it very interesting. In the entire world, there are very few monoclonal antibodies that have been approved, the majority being from the US. Monoclonal antibodies are very complex large molecules, not like aspirin. One needs a lot of scientific expertise to manufacture, characterize and even apply them in a clinical setting. These are not the kind of drugs that you go to the pharmacy and pick up. Typically, they are applied in tertiary care settings where you go to a specialist clinician who then prescribes this drug. We are very fortunate that we have a molecule that got approved in India and is available for the Indian patients ahead of the patients in the rest of the world.

This drug is also in clinical trials in Europe. They have very promising results in a very deadly form of brain cancer, called Pontine Glioma, in children. Many other trials are going around the world. There is a global meeting that occurs every once in a while where the investigators meet. Here clinicians came from all over the world, including our clinicians, to share their experience about how this drug has worked.

Which are the other companies in this space?

There are very few companies in this segment as it is a complex and expensive business. In India, we have Dr Reddy's, and most other companies are global MNCs like Genentech, Roche, Bristol Myers, Amgen, and J&.

How successful is BIOMab compared with the existing drugs in the market?

I would say it is very successful compared with the conventional treatment. Survival in the BIOMAb along with chemotherapy and radiotherapy is significantly higher than chemotherapy and radiotherapy alone.

-Jahanara Parveen