



Patrick Doyle

CEO of Stelexis Therapeutics

Patrick Doyle is the CEO of Stelexis Therapeutics, a private biotechnology company based in New York. Patrick spoke with us about the company and the future of cancer treatments.

What recent advancements have you seen in cancer therapeutics?

Although it has fast become a crowded field, areas such as Immune oncology including CAR-T, checkpoint inhibitors, oncolytic viruses and the attempt to turn cold tumors hot. Another important area is personalized oncology, the comprehensive molecular profiling of individual tumors (including liquid biopsies) and the acceptance of the basket trial model.

A good example of the merge between immune oncology and personalized oncology is the concept of neoantigen.

I believe the imminent advancement, and one that we are part of, is to go after the origin of cancer, such as cancer stem cells (CSC), the elimination of recurrence via CSC, circulating tumor cells (CTC) and disseminated tumor cells (DTC) and cancer dormancy and how that can be targeted by new innovative therapeutics.

What is acute myeloid leukemia (AML) and myelodysplastic syndrome (MDS)?

AML is a blood cancer. It happens when young abnormal white blood cells called blasts or leukemia cells begin to fill up the bone marrow, preventing normal blood production. Doctors diagnose AML when 20 out of every 100 white blood cells in the bone marrow is a leukemia cell. AML is the most common acute leukemia affecting adults, with about 20,000 new cases diagnosed each year.

MDS is a group of disorders in which bone marrow cells do not develop into mature blood cells. Instead, these cells stay within the bone marrow in an immature state. MDS is a cancer of the blood and bone marrow and often progresses to AML.

Relapse continues to be the most common cause of death in acute myeloid leukemia (AML) and myelodysplastic syndrome (MDS) like many other cancers, where overall cure rates remain below 20%.

Why is there an initial focus on these particular diseases at Stelexis Therapeutics?

The treatment paradigm and clinical outcome in AML & MDS has not significantly improved in the past four decades, particularly for the majority of patients over 55 years of age.

Stelexis aims to change this by targeting disease-initiating, pre-leukemic stem cells and their progression. This offers a fundamentally novel approach for potentially curative strategies in Leukemias and possibly solid tumors. Stelexis' founders have analyzed the earliest definable stem and progenitor populations in human primary MDS/AML and age-matched healthy control samples and identified several novel therapeutic targets. Building on years of world class research in this area by our founders, Stelexis naturally has an initial focus on MDS & AML that will always include solid tumors in our wide-angle vision.

What has your previous experiences in big Pharma and Biotech brought to Stelexis Therapeutics?

I had so many amazing learning experiences both in Pharma &

Biotech, in particular, on the technical level, remembering that early biotech companies must be driven by a target product profile that keeps the unmet patient need absolutely in daily sight.

On a personal, staff and human resources level, I am an avid believer in transparency and inclusion. I like to lead by example, meaning just as in life in general, you should always treat people the way you expect to be treated e.g.; with calm, polite respect. We have generated this culture within Stelexis and as a young entrepreneurial company, we all share the excitement that an early stage company brings with it. My experience in how to respond in the face of molecule, platform and product failure is an invaluable set of insights that I apply to our data reviews and planning on a constant basis.

A mixture of my big Pharma and biotech experience in setting realistic goals and communicating them has helped me create an environment where there are no surprises – at all levels including the board & investor level.