OncoPharma Virtual Advisory Board: Analysis and Recommendations Report

Touchpoint #1
January, 2018
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  – Synopsis of responses and insights to each touchpoint question

• Section 2: Oncology Leadership
  – Synopsis of responses and insights to each touchpoint question

• Section 3: Conclusion
  – Synopsis of responses and insights to each touchpoint question
Touchpoint Dashboard

- **100% Engagement**
  - Engagement this touchpoint

- **48 Likes**
  - Likes throughout this touchpoint

- **8 Attachments**
  - Attachments from advisors

- **121 Comments**
  - Comments this touchpoint

- **1097**
  - Average number of words per advisor

**Total Contributions per Advisor**

<table>
<thead>
<tr>
<th>Advisor</th>
<th>Number of Words</th>
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<tbody>
<tr>
<td>JERRY CORRIGAN</td>
<td>4441</td>
</tr>
<tr>
<td>MARCO WAREZ</td>
<td>3983</td>
</tr>
<tr>
<td>MELISSA KWOK</td>
<td>3892</td>
</tr>
<tr>
<td>FRANK CÜRR</td>
<td>3199</td>
</tr>
<tr>
<td>IAN BAITZ</td>
<td>2991</td>
</tr>
<tr>
<td>MARY BLACK</td>
<td>2931</td>
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Number of words range from 0 to 5000.
Touchpoint Objectives

• To discuss and gather advisor insights on:
  – Literature considered when making treatment decisions
  – Relevant biomarkers and predictive factors
  – Regional bias in treatment algorithms
# Touchpoint Participants

**Moderator**

<table>
<thead>
<tr>
<th>Jerry Corrigan</th>
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**Advisors**

<table>
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<tr>
<th>Marco Warez</th>
<th>Mary Black</th>
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<tr>
<td>Frank Cürr</td>
<td>Ian Baitz</td>
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<td>Melissa Kwok</td>
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Overview & Touchpoint Synopsis

In **Section 1**, the advisors were presented with a case study involving a 55-year-old postmenopausal white Caucasian female presented with a palpable right breast mass 3/2011, at age 50. She had a benign mammogram 9/2010. A diagnostic mammogram and ultrasound revealed a 4 cm mass and suspicious axillary lymphadenopathy. Advisors were asked:

- Would you recommend clinical genetics consultation for BRCA testing? Would an expanded panel be beneficial?
Overview & Touchpoint Synopsis (cont’d)

• In **Section 2**, advisors were asked the following:

  • What does Oncology Leadership mean to you? Please type in 5-10 keywords that represent Oncology Leadership to you.
Key Insights

- One advisor considered that the online format provides a great opportunity to conduct advisory boards with experts from all over the world. Having the boards open to a bigger community and for a longer period might fuel some great discussions.
- A few advisors considered that more reading materials could have been provided, especially as very few advisors attached original publications during the discussions.
Recommendations

• Seek Market Access opportunities based on Judy and Mark’s suggestions, perhaps in early 2018.
• Providing more details would allow the advisors to better assess each case and compare their treatment strategies, as well as to discuss the management of side effects.
## Strategic Recommendations

<table>
<thead>
<tr>
<th>Action</th>
<th>Details</th>
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<tr>
<td><strong>Provide more details for case studies</strong></td>
<td>• Providing more details would allow the advisors to better assess each case and compare their treatment strategies, as well as to discuss the management of side effects.</td>
</tr>
<tr>
<td><strong>Provide more reading materials</strong></td>
<td>• A few advisors considered that more reading materials could have been provided, especially as very few advisors attached original publications during the discussions.</td>
</tr>
<tr>
<td><strong>Conduct similar online advisory boards with experts from all over the world</strong></td>
<td>• One advisor considered that the online format provides a great opportunity to conduct advisory boards with experts from all over the world. Having the boards open to a bigger community and for a longer period might fuel some great discussions.</td>
</tr>
<tr>
<td><strong>Future touchpoint topics</strong></td>
<td>• Seek Market Access opportunities based on Judy and Mark’s suggestions, perhaps in early 2018.</td>
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Section 1:
Patient Case Study #1
Section 2:
Oncology Leadership
Conclusion

The presentations contained sufficient information to enable me to answer the questions asked and to contribute to discussions.

- All advisors agreed that the presentations contained sufficient information (three strongly agreed).

- It was also pointed out that some of the information provided was not detailed enough. For example, for Case 3, the findings and the specific situation of the patient at diagnosis would have been useful, as well as a multidisciplinary evaluation.
Conclusion

The management and organization of the meeting were...

- ... *good* and *excellent* according to two and five advisors, respectively.

- They remarked that it was very well done and an enjoyable experience.

The professionalism of OncoPharma staff involved in this meeting was...

- ... *excellent*! All advisors (100%) rated the professionalism of the OncoPharma staff as excellent, both before, during, and after the advisory board.
Conclusion

We welcome your feedback on this virtual/online format to ensure the success of future interactions. Please share a couple of your thoughts regarding your experience using this virtual/online format (e.g. what have you particularly enjoyed, are there opportunities for improvement, what content would you recommend exploring via online touchpoints in the future?)

• Several advisors pointed out that the advisory board was very well done and that they enjoyed the process.
  – This format provides a good platform to include multiple specialists, potentially from all over the world; this would fuel further discussions.
  – In contrast to in-person advisory boards, it can be done at several time points at your own leisure.
  – It saves a lot of travel time, which is a huge advantage.
• They also considered that in-person advisory boards may be more interactive and powerful, as the discussion can be more detailed and as it would be easier to clarify questions.
• In the online advisory board, you also have to wait for the other advisors to answer before replying.
• One advisor pointed out that only a few people attached original publications, possibly because they thought that the other advisors were already aware of the results of the studies or because it is time-consuming. However, this would have helped improve arguments.
• Additional and more detailed case presentations were also preferred in order to compare treatment strategies.