

Translating Academic Concepts to Commercial Medical Products: A Complex Academic/Industrial Partnership

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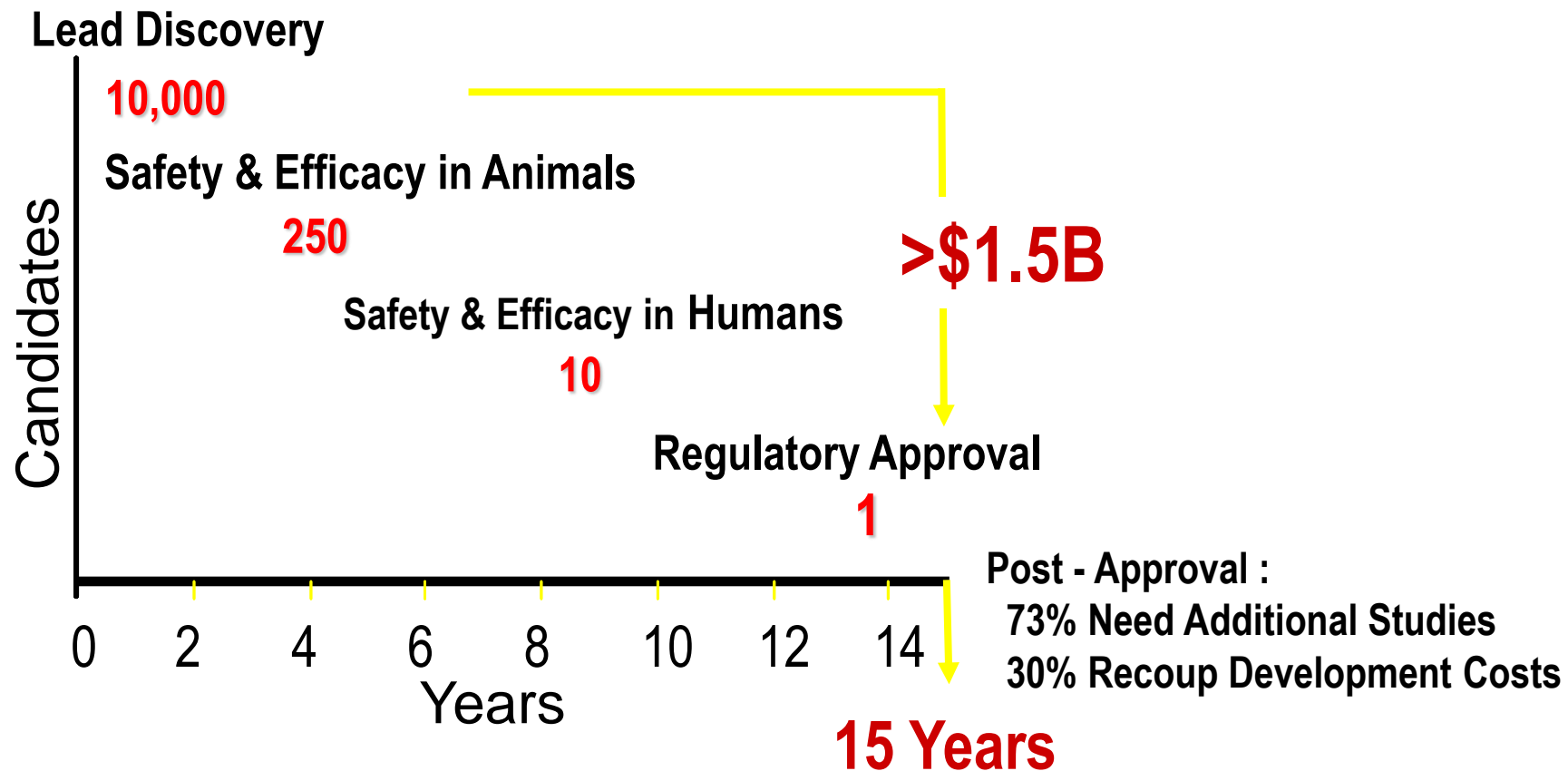
Focus: Medical Product Development

Outline

- Medical Product Costs, Development Protocol
- Medical Product Resourcing: Hypothetical Case
- Product Selection Criteria
- Concluding Remarks

Development Costs

Pharmaceuticals/Biopharmaceuticals



Typical Development Costs for New Class III Medical Device (Rough Estimate)

- Preclinical Costs- \$10-\$20M
- Clinical/Regulatory Costs- \$20-\$40M
- Sales, Marketing, Finance, Etc.- \$10-\$20M
- Manufacturing Development- \$10-\$15M
- **Total Costs to Launch- \$50-\$95M**

Timescale: 5-10 Years

Efficiency of Corporations, 2011 (Net Cost Per Employee for Operations)

2011

R-E/# = Cost / Employee

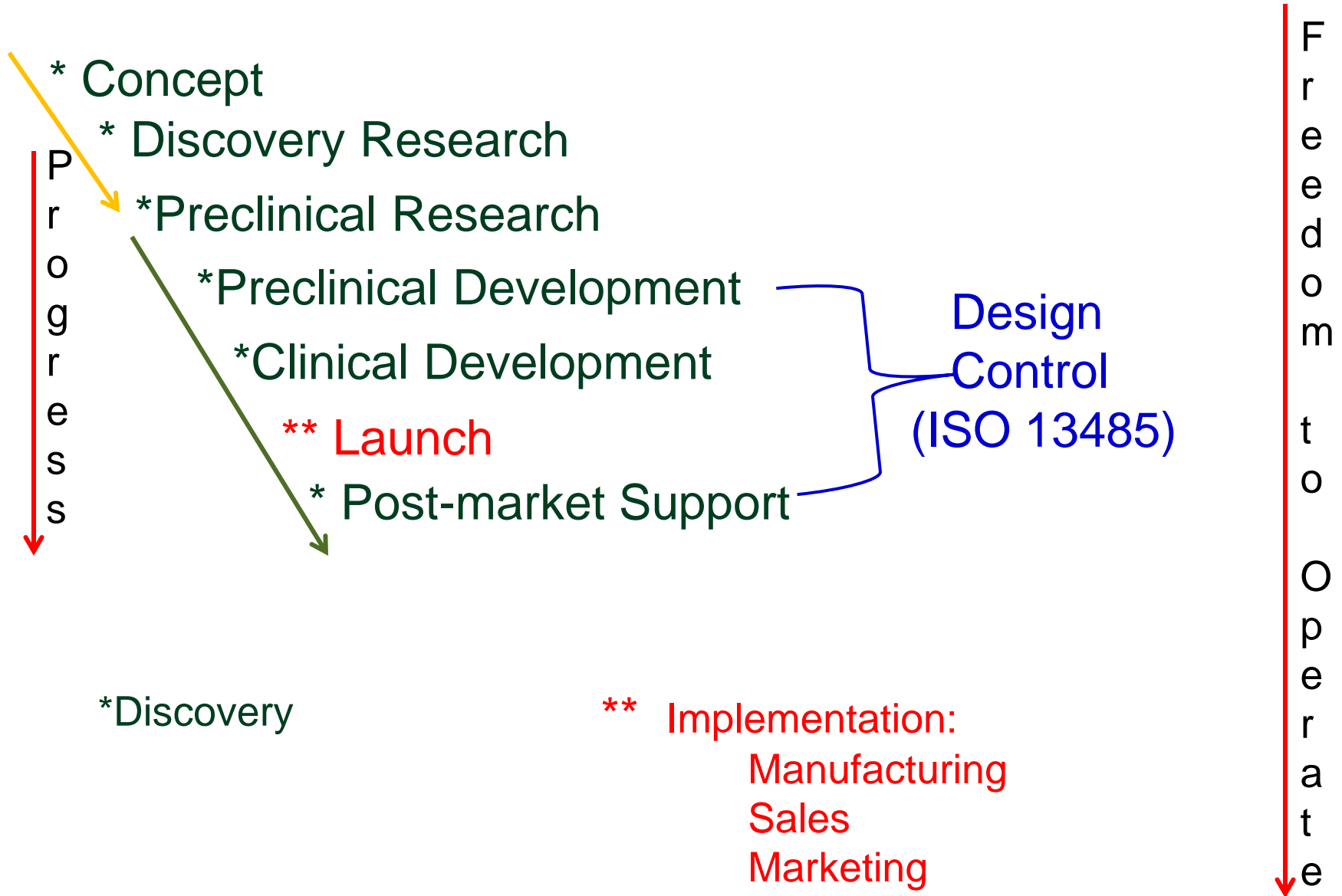
Firm	Revenues (R)	-	Net Earnings (E)	/	Employees (#)	2011	2009	2007
Medtronic	\$15.9 B	-	\$3.1 B	/	45,000	\$285,000	\$327,000	\$297,000
Boston Sci.	\$ 7.6 B	-	\$0.44 B	/	24,000	\$298,000	\$354,000	\$354,000
C.R. Bard	\$2.9 B	-	\$0.33 B	/	12,100	\$212,000	\$188,000	\$176,000
J&J	\$65.0 B	-	\$9.7 B	/	117,900	\$469,000	\$351,000	\$435,000
(Genzyme**	\$ 4.0 B	-	\$.32 B	/	10,000	\$368,000	\$371,000	\$406,000
Amgen	\$15.3 B	-	\$3.7 B	/	17,600	\$659,000	\$560,000	\$663,000
Novartis	\$58.6 B	-	\$13.5 B	/	123,700	\$399,000	\$440,000	\$261,000

Focal, Inc.(1992-2001), Peak Burn Rate/Peak # Employees:~\$19M/125 = ~\$152,000

**Data for 2010, Last year of Genzyme independent operations

*Sources: Corporation Websites, Annual Reports

Product Development Pathway



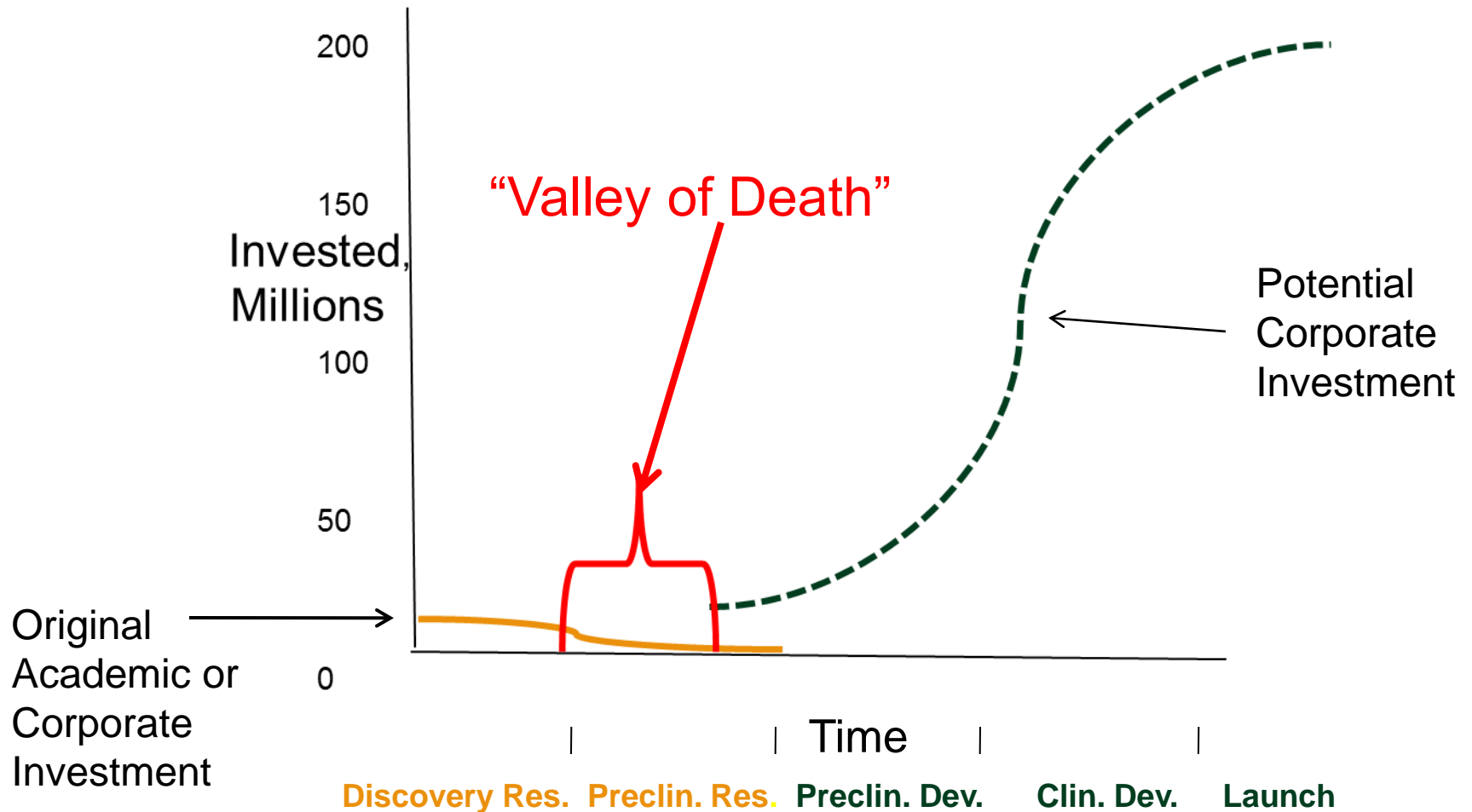
Hypothetical Case: New Biologic/Device Combination Product

Assumptions:

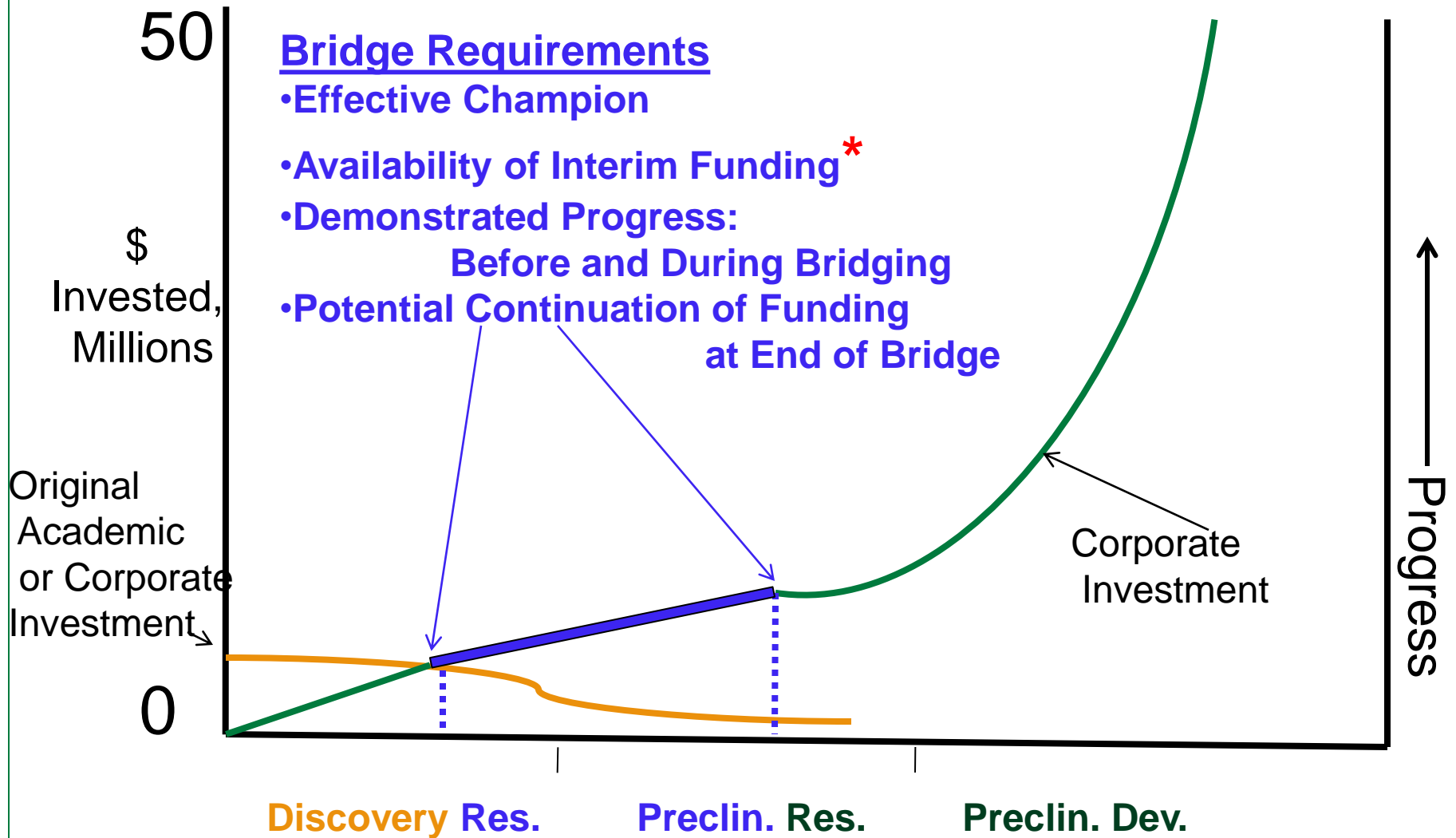
- Existing Delivery Matrix/ Recombinant Natural Protein (e.g., BMP-2)
- ~\$200 Million Development Costs
- Initial R&D with VC, “Angel,” or Government Funding
- Initial Funding Only Covers Discovery Research +
Limited Preclinical Research
- Follow-On Funding needed to Bridge Discovery → Development



Most Product Development Fails in the “Valley of Death”

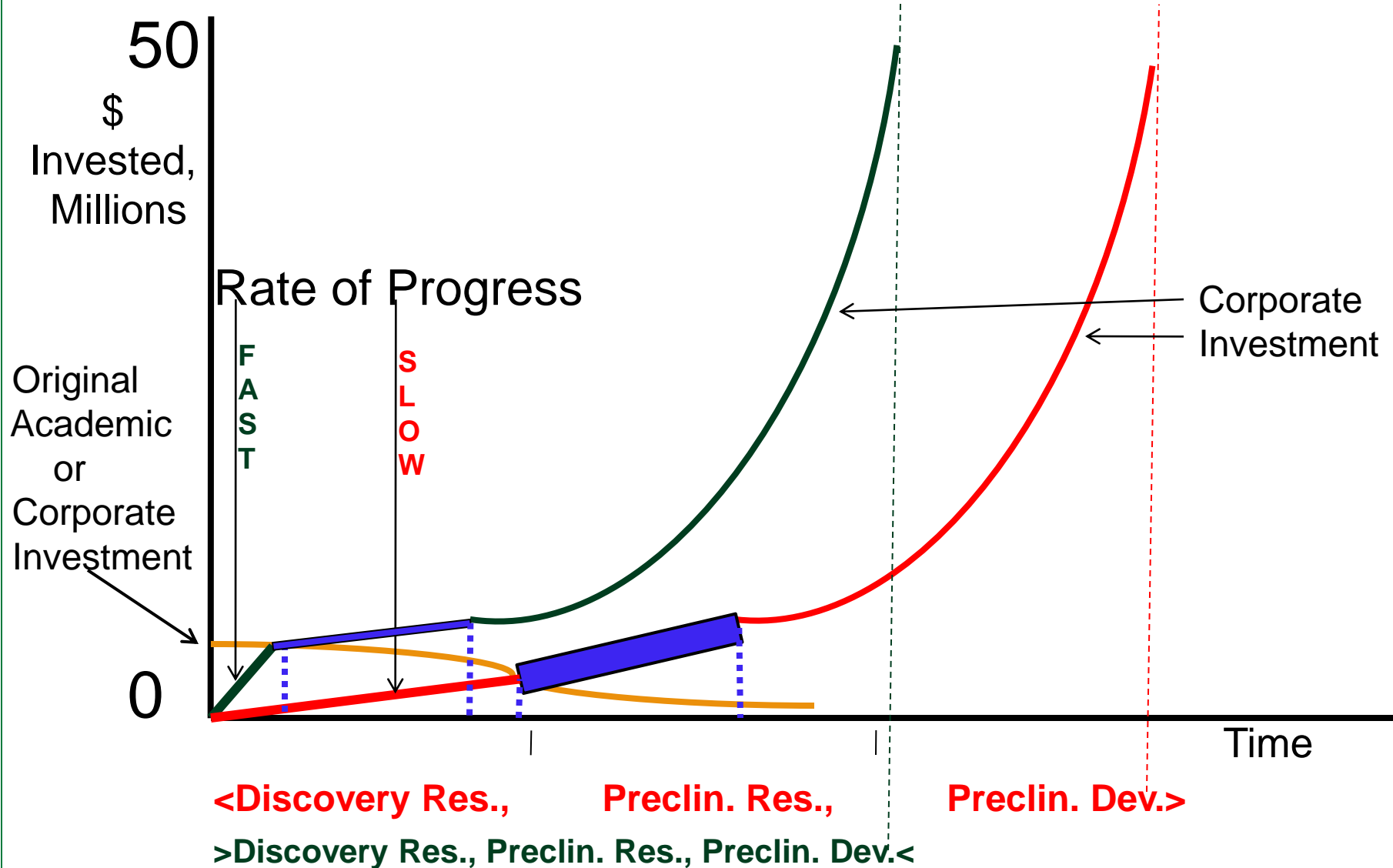


Bridging “Valley of Death”



*VC, Government, “Angel,” Foundation, Corporate, University, Etc.

Translation Requirements



Product Development: Selection Criteria

- Mission, Vision, Culture
- Product Mix Strategy
- Fiscal “Health,” (Finances, Stock Movements, Etc.)
- Maturity: Start-up → Mature
- Potential Adoption Curve
- Market Potential
- Reimbursement Potential
- Intellectual Property, Internal or External
- Competition
- Project Champion
- Staff Capabilities: Lab, Clinical, Manufacturing (Scalability), Sales, Marketing, Etc.
- Availability of Staff for Project, Staff Mix
- Availability of Materials, Products from Outside
- Physical Plant: Equipment, Space, Etc.
- Project Costs
- Timing Considerations: Handoffs, Funding, Regulatory, Clinical, Marketing, Etc.
- Publication Strategy
- Business Climate: Economic, Societal, Regulatory, Liability, Image, Morale, Etc.
- Exit or Survival Strategy

Strategic Product Choices

Comparing 2 Products

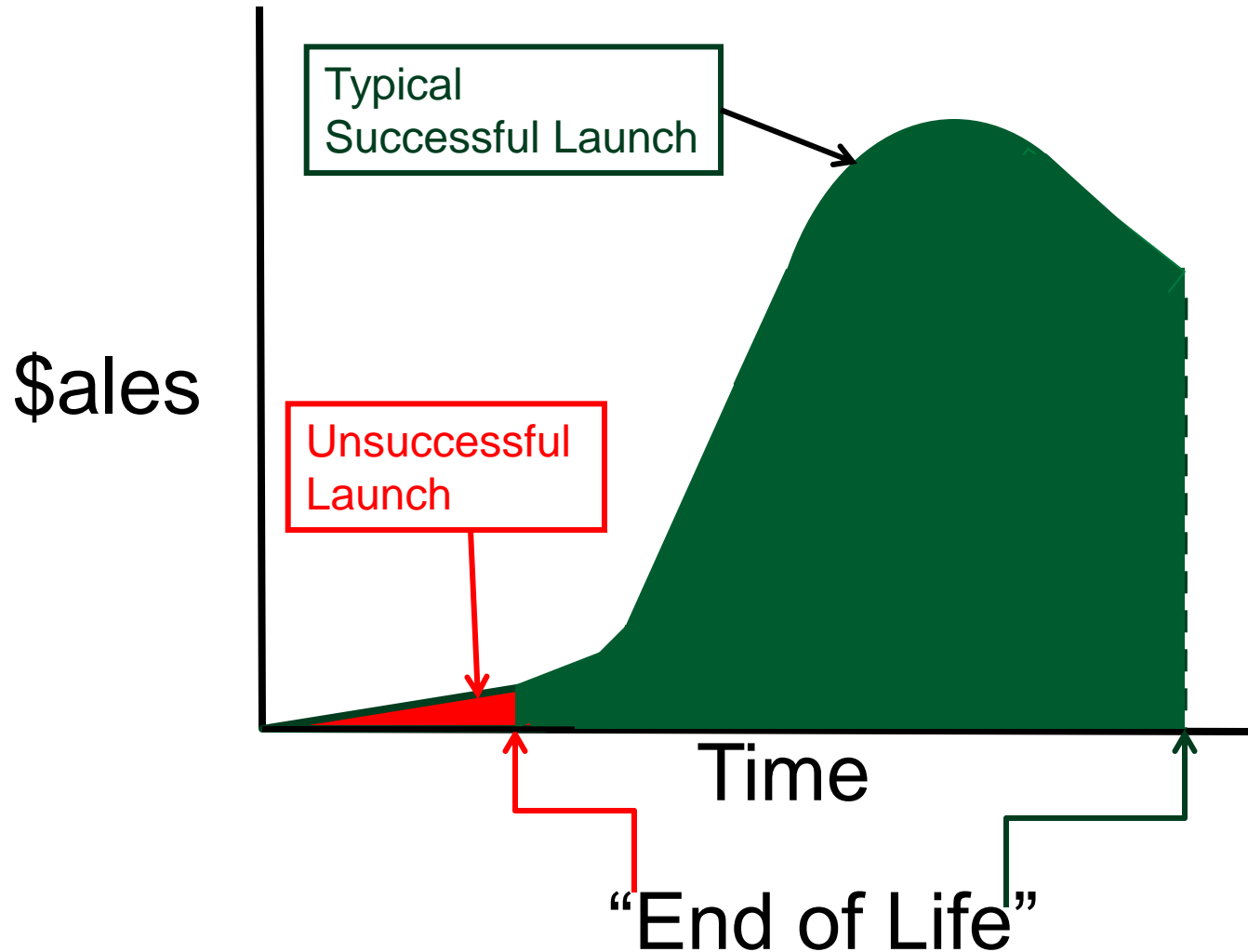
Market	# Patients
Product Sophistication	High-Low
Development Costs	\$\$\$-\$
Regulatory Pathway	PMA-501K
Implementation	Elective-Imperative
Utilization	%
Unit Price	\$
Market Potential	\$
New Product Intro	Timing
Implications	Product Improvements, Pipeline , etc

Limits to Value of Academic Licenses

Comparing Academic vs. Corporate Investment

- University vs Corporate Expenditures
- Funding Sources, University vs. Company
- Contribution of University vs. Company to Intellectual Property
- Stage of Development at Time of Licensure
- Totality of Licenses for Product
- Projected Revenues and Profits at Time of Licensure
- Degree of Risk Assumption by Company
- Profitability of Product when Marketed

Product Adoption Curve



Concluding Remarks

If medical product is goal:

- Be product-focused from the start
- Select product/project based on meeting **Product Development Selection Criteria** *a priori*
- Urgently make as much progress as possible with initial funding
- Appoint effective, articulate “Champion” to advance project, develop bridge funding, strategic partners
- Use “bridge” funding to make maximum product-oriented progress
- Collaborate with strategic partner during project transfer and for problem solving thereafter if applicable
- Have realistic expectations of state of progress and value of technology if academic-corporate transfer: Medical products may be derived from many patents
- Expect goals, project plans and evaluations to be driven by quality system (e.g. ISO 13485) imperatives in development stage
- Realize that, no matter how great the staff and promising the product, most programs change original direction, but:
- The experience, knowledge and reputations gained are never lost for future enterprises.

Thank You

