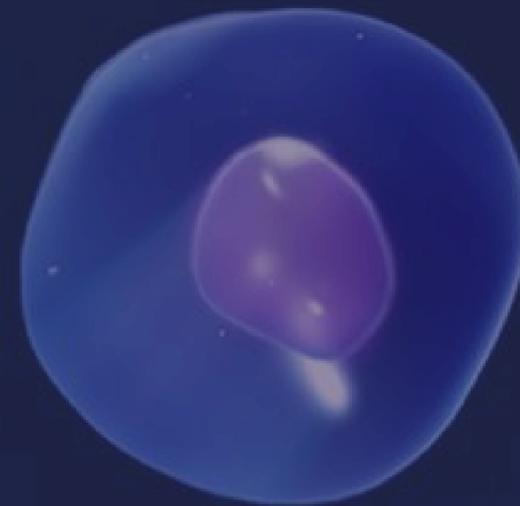
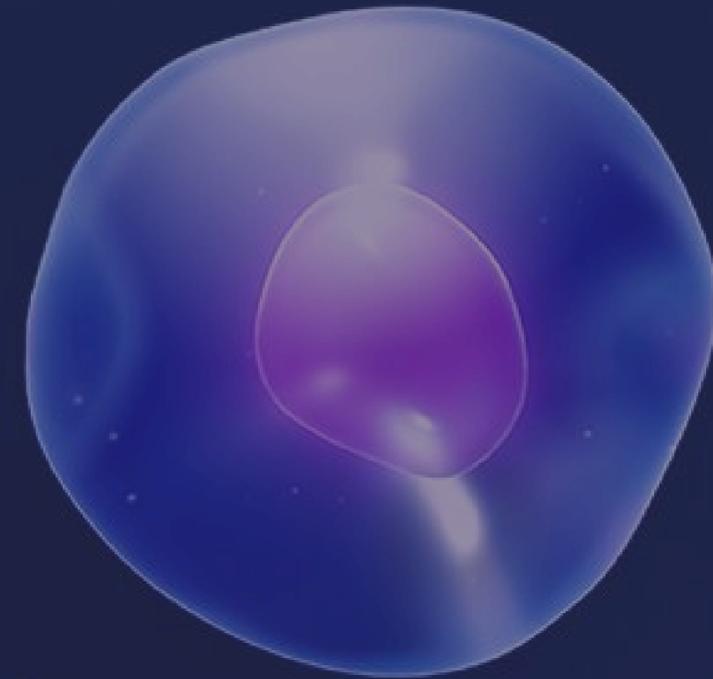


Cell Therapy

Microscopic treatments making big impacts



Agenda

01 | Overview

02 | Value Proposition

03 | Market

04 | Stem Cells

05 | CAR-T Cells

06 | Natural Killers

07 | Exit Opportunities

08 | Thesis

Overview

Cell therapy involves **treating** disease **by administering living** cells into a patient to **repair, replace, or reprogram** malfunctioning cells.



Cell therapy harnesses patient cells for lasting cures, and a **highly personalized** and potentially **curative** treatments for a **range** of conditions

Phase 1

- Initial small trials
 - **Tests safety**, dosage, and side effects
-

Phase 2

- Medium-scale trials
 - Evaluates **efficacy** and continue monitoring
-

Phase 3

- Large-scale trials
 - **Continuation** and **comparative** trial
-

Types: Source

Autologous

Patient-derived cells are **modified and re-infused**—minimizing rejection (e.g., CAR-T) but costing **~\$400k** per dose and **hard to scale**.

Allogeneic

Donor cells **create off-the-shelf** products that are **scalable** and **lower-cost**, though they require some editing to manage rejection risks.

Types: Main Cell Types

Stem Cells

Uses versatile cells from sources like bone marrow to repair damaged tissues, offering **regenerative benefits** while requiring careful control for safety.

CAR-T

Uses patient's or donor's T cells **engineered to target** cancer cells and fight blood cancers, though it's costly and can have significant side effects.

Natural Killers

Natural Killer (NK) cells, from patients or donors, targets and kills cancer cells, providing an option that may **reduce** immune-related side effects.

History

Early forms of cell therapy emerged with procedures like bone marrow **transplants**.

1950-1970

U.S. **policy** established the **RMAT designation**, offering **expedited FDA review** for qualifying cell therapies and gene therapies

2016

1997

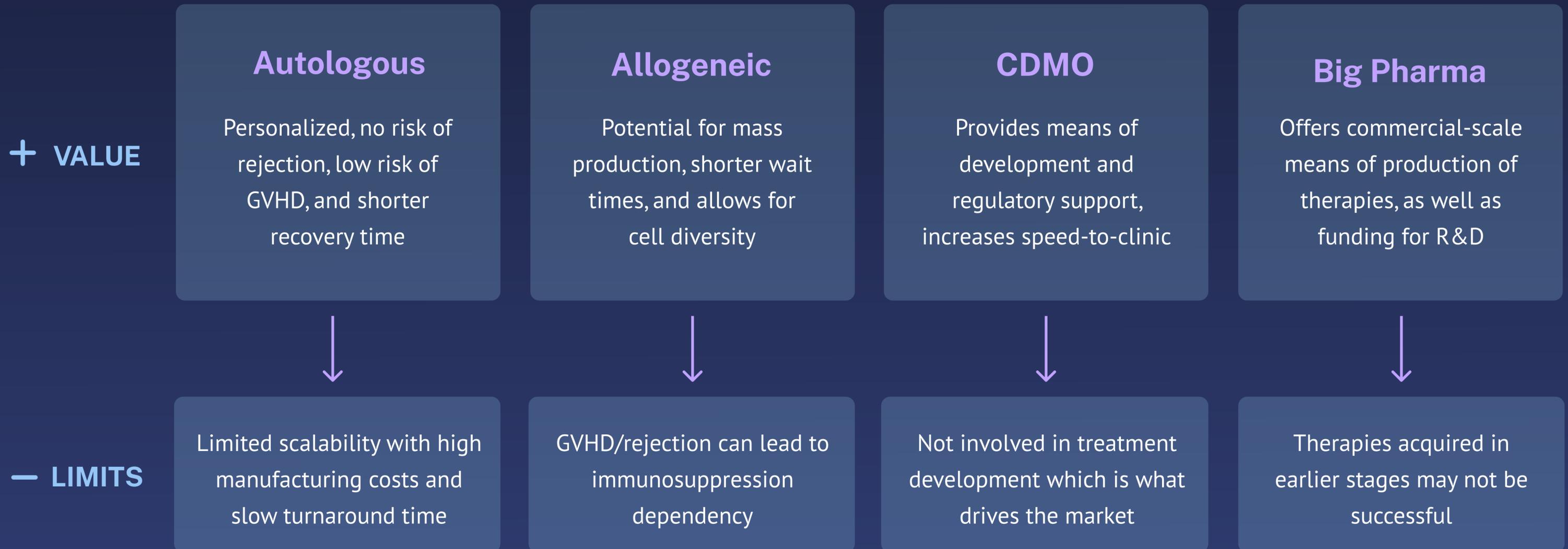
Genzyme's Carticel was FDA approved, an autologous implant for repairing knee cartilage injuries.

2020's

Due to COVID, there was a **spike in demand for cell therapy**. By **2023**, **six CAR-T** therapies were **approved** in the U.S.

Value Proposition

Different types of cell therapies and companies propose **unique values**



Market



Growth Factors



Increasing cases of chronic diseases: Cancer, diabetes, cardiovascular, etc.



More funding for R&D sparked by the pandemic and aging demographic



Maturation leads to higher approvals and clearer regulatory frameworks

\$15.2B

Investments in cell/gene therapy (2024)

\$1.94B

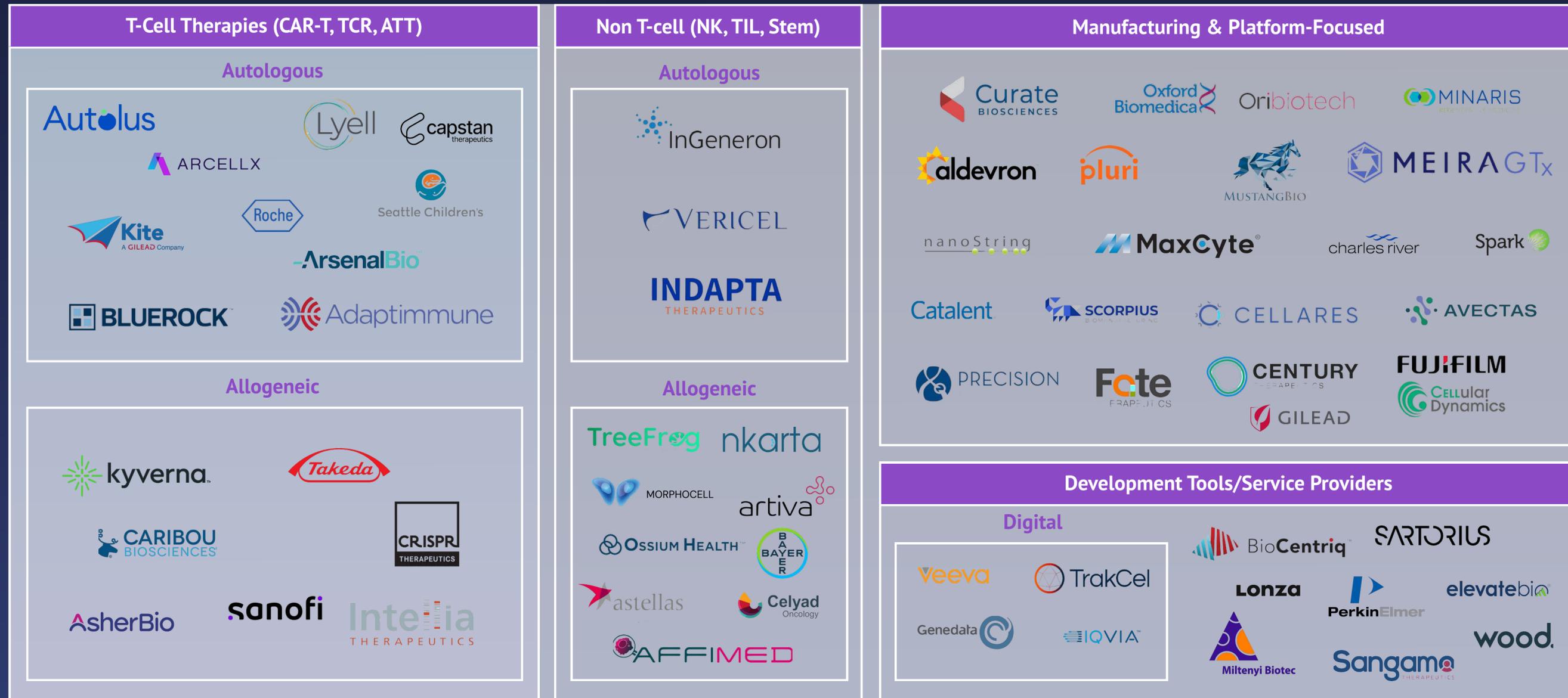
Go-to-market costs (2024)

77%

Rise in cancer cases from 2022 → 2024

Market: Map

Segmented by lead candidates/main products or services



Market: Trends



Autologous vs. allogeneic:
Personalized treatments vs.
scalability and Big Pharma
investments



Prioritizing **clinical trials**
success over revenue
generation; Partnerships
with gene therapies



Moving from third-line to
second-line treatments and
testing for first-line with
tech developments



Candidate-centric: one
main pipeline with several
variations turning
companies into **platforms**

Market: Leaders



Asia-Pacific region is the fastest growing market

Characteristics:

-  **Startup:** Successful phase 1 and phase 2 trials
-  **Startup:** Potential for scalability
-  **CDMO:** disrupts production efficiency
-  **Big Pharma:** Enough capital to support production

Incumbents



Startups



Regulation

Why regulate?



Unobserved long-term effects



Invasive procedures



GVHD and rejection risk

Present

- **Global standardization** through cross-country cell therapy councils (ICH)
 - **Allogeneic-focus:** follow-up, production, & donors
 - 21st Century Cures Act: Fast Track, Breakthrough, RMAT
 - 361 Products tightening regulations
-

Future

- **International partnership** guidelines for shipment and access to information
 - Shortening review periods
 - Tighter rules for **AI & robotics** CDMOs
 - Price pressure for premiums
-

Comparing Treatments

Cell Therapy

Live Cells

+ PROS

- Single treatment potential
- Regenerative quality

- CONS

- High costs for manufacturing
- CRS, GVHD, & rejection
- Preliminary

Traditional

Synthesized Drugs

- Predictable pharmacology
- Off-patent generics
- Established regulations

- Diminishing efficacy
 - Multiple treatment rounds
-

Stem Cells: Overview

Source

-  Blood
-  Umbilical Order
-  Bone Marrow
-  Fat Tissue

Use Cases

-  Organ Regeneration
-  Brain Disease
-  Blood Disease
-  Heart Disease

Collection

Autologous

- + Personalization and lower rejection risk
- Higher costs and variable regeneration

Allogeneic

- + Immediate availability & younger cells
- Donor match; needs immunosuppression



Develops into new cells

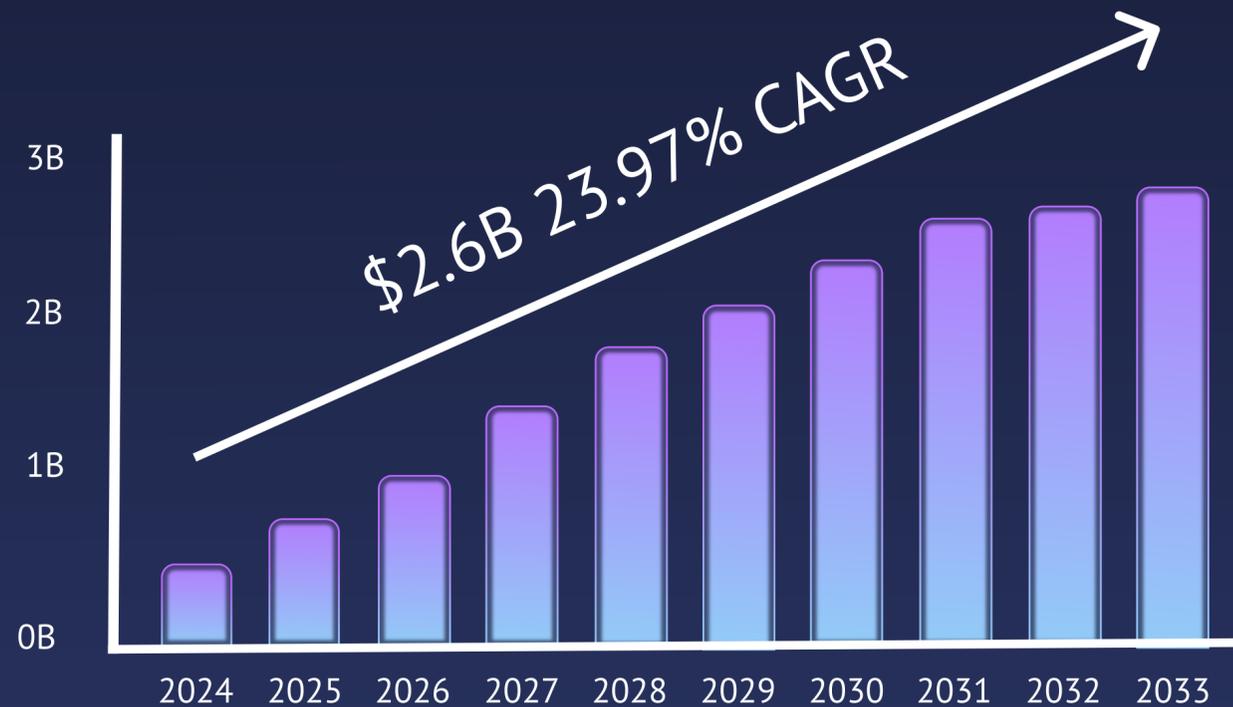


Regenerates to replace cells

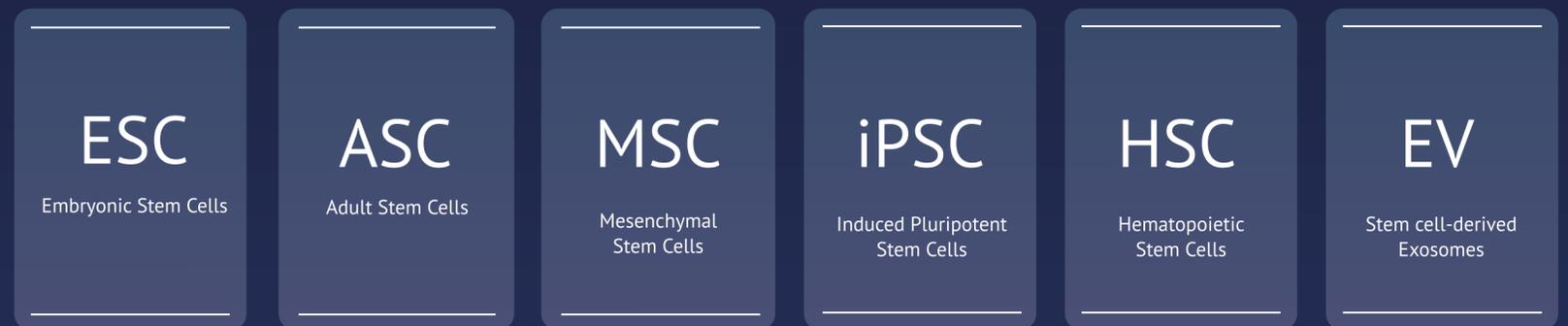


Replicates many times over time

Stem Cells: Market



Types



Mature

AstraZeneca 

 VERICEL

 **BLUEROCK**

Startups

 **OSSIUM HEALTH**

 **cellino**

 **MORPHOCELL**

Growing Regions

United States

Japan

Europe

Value Proposition:

- Regenerative qualities
- Alterations to core tech for new pipelines
- Personalized treatments
- Treatment of incurable diseases

Stem Cells: Trends

⚠️ Tightening Regulations

⚠️ Robust Clinical Rational

⚠️ Clear Differentiation

TREND	iPSC Growth	MSC Dominance & Exosomes Focus	Gene Editing & Synthetic Biology	Hard-to-Treat Clinical Validation	Stem Cell-Derived Exosomes
VALUE	Risk Diversification	Established Regulatory Paths & Market Saturation	High-Value Exits + IP Moat	High Potential for Underserved Areas	Reduced Immunogenicity & High Scalability
LIMIT	High Scale-up Costs	Difficult Quality Control	Regulation & Germline Modification	Extensive Clinical Risk	Early-Stage Space & Mechanistic Uncertainty

Stem Cells: Investments

M&A

Typically done by **Big Pharma** for a pipeline of multiple therapies and to fill knowledge gaps

- **Bayer & BlueRock** (2019) \$1B, iPSC platform
- **Vertex & Semma** (2019) \$950M, stem cell-derived insulin-producing beta cell

Valuation Drivers

- Broad stem cell platform → higher pre-money
- Accelerated regulatory pathways
- High chance for phase II/III success

Top Stem Cell Types

MSC

More funding towards GVHD or Crohn's, but not cardiovascular or neuro due to oversaturation. Must raise \$10-\$50M for viable treatments

iPSC

Newer treatment but large funding rounds from \$50-\$200M shows platform appeal and treatment of rare diseases

HSC

Novelty is the biggest differentiator because traditional bone marrow transplants are well-established

EV

Fewer companies w/ most at preclinical. Exosomes are the next frontier: low immunogenicity & no tumorigenicity

Stem Cells: Thesis



Highly-specialized with differentiated stem cell candidates for more **effective** & **trustable** treatments



Allogeneic source for scalability with strong **CDMO** partnerships and successful clinical trials



Neurological disorders, type 1 diabetes, & Cardiovascular Repair; **inconsistent success rates**



Identifying **first mover** robust moats in emerging sectors like stem cell-derived **exosomes**

CAR-T: Overview

Indications

- Hematologic malignancies like B-cell acute lymphoblastic leukemia, non-Hodgkin lymphoma, and multiple myeloma

Emerging Areas

- Trials are exploring solid tumors (e.g., glioblastoma, sarcoma) to expand therapeutic impact

 Engineered T cells **target** specific cancer antigens

 Long-term remission via **immune memory**

Source

 Patient's T Cells

 Donor T Cells

Use Cases

 Blood Cancers

 Solid Tumors

CAR-T: Market

Breakthrough **clinical efficacy**, **expanded treatment indications**, and **legislation** are key drivers propelling the CAR-T market.

Value Proposition:

- Precisely engineered T cells attack cancer cells
- Achieves durable, lasting responses
- Personalized treatments



Mature

 NOVARTIS

 Kite Pharma

 Bristol Myers Squibb™

Startups

 TMUNITY

 Celyad Oncology

 Autolus

Growing Regions

North America

Asia

Europe

CAR-T: Types & Limits

Types

ABECMA

Approved for adult patients with **relapsed/refractory multiple myeloma** who have undergone **at least four prior therapies**.

BREYANZI

Indicated for adult patients with **relapsed/refractory large B-cell lymphoma** after **two or more** systemic therapies.

TECARTUS

For patients with relapsed/refractory mantle cell lymphoma and for adults with relapsed/refractory B-cell precursor ALL.

CARVYKTI

Approved for patients with relapsed/refractory multiple myeloma following **four prior lines of therapy**.

KYMIRAH

For adults with relapsed/refractory DLBCL and for patients **up to age 25** with relapsed/refractory ALL.

YESCARTA

Approved for patients with relapsed/refractory DLBCL, primary mediastinal B-cell, high-grade B-cell, and follicular lymphoma after **two or more lines of systemic therapy**.

Limits

CAR-T therapies are **limited by complex, costly** manufacturing processes and safety risks like **cytokine release syndrome and neurotoxicity**. Additionally, issues such as **antigen escape**, poor efficacy in solid tumors, and **suboptimal T cell persistence** further challenge their long-term effectiveness.

CAR-T: Investments

The global CAR-T cell therapy market has seen substantial investment, with reports indicating over **\$141.2 billion** raised through venture capital, IPOs, licensing deals, collaborations, and M&A transactions.

M&A

Done by **Big Pharma** for a pipeline of therapies

- **Celgene & Juno** (2018) \$9B
 - **Gilead & Kite** (2017) \$11.9B
-

Valuation Drivers

- Clinical Success & Curative Potential
 - Platform and pipeline potential
 - Manufacturing Scalability
-

CAR-T: Thesis



Engineered T cells show curative potential for hematologic malignancies



Off-the-shelf solutions promise **reduced costs** and **faster turnaround times**



Efforts to expand into solid cancers face obstacles like **antigen escape** and **tumors**

Natural Killers

Overview



Naturally-produced white blood cells



Identifies & eliminates “sick” cells w/o prior sensitization

Types

Autologous NK Therapy

Allogeneic NK Therapy

iPSC

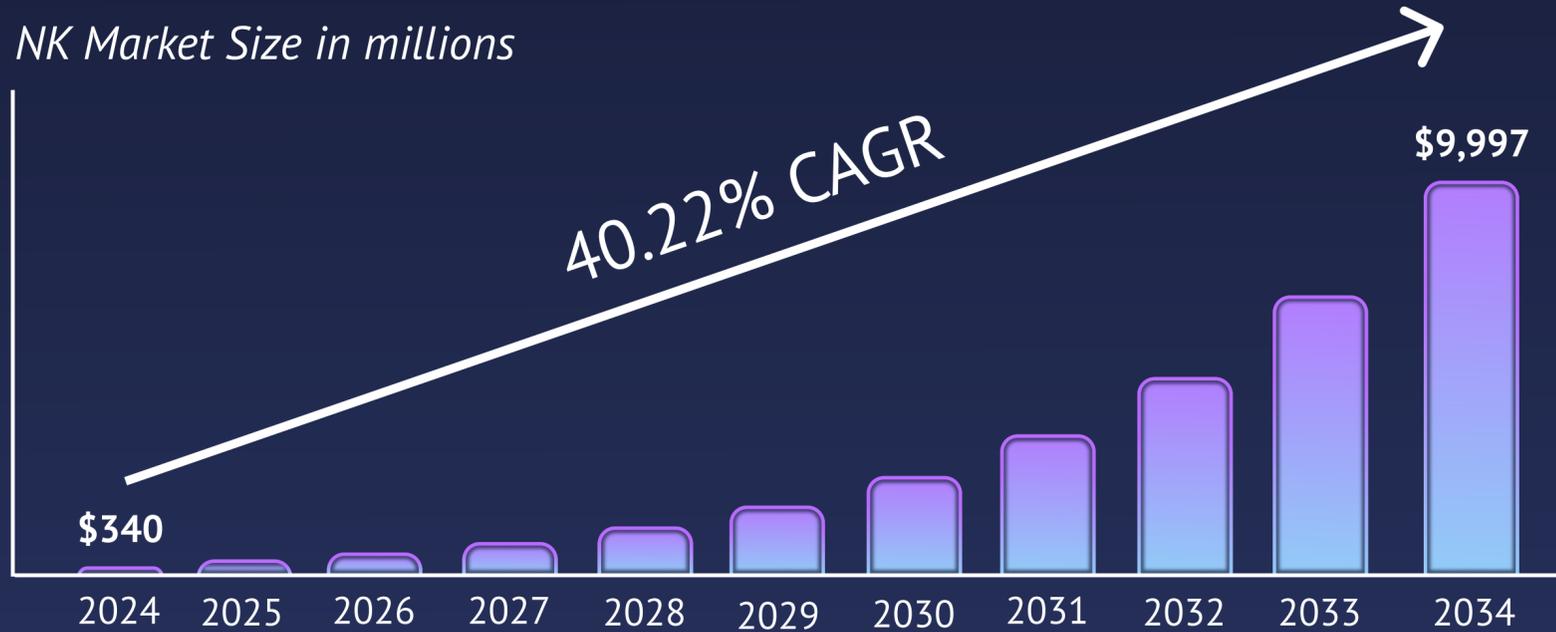
Induced Pluripotent Stem Cells

CAR

Chimeric Antigen Receptors

Natural Killers: Market

NK Market Size in millions



Mature Companies



Testing

- 165 Phase 1 NK Trials
- 92 Phase 2 NK Trials
- 3 Phase 3 NK Trials

Regulation

By 2024, 3 NK Treatments were approved by FDA for **Fast Track Designation**

Startups



Natural Killers: Value Prop



Safety

NKs do not cause GVHD and limits Cytokine Release Syndrome

Acts as safety measures for Allogeneic therapies



Lifespan

NKs have shorter lifespans and naturally clear in ~2 weeks

Eliminates potential long-term side effects

? Simple

NKs are generally less complex than other cell therapies like T cells

Improves large-scale batch consistency



Compatible

NKs don't require Human Leukocyte Antigens (HLAs) matching

Expands applicability to all patients

Natural Killers: Limits



Limited Lifespan

Administered cells naturally clears in
~2 weeks



Repeat Dosing

Patients need multiple dosing cycles for
allogeneic NKs

Implications



Insurance Friction

Chronic care with a cell
therapy price tag



FDA Uncertainty

Tighter regulations on dosing
schedules

Natural Killers: Thesis

Notable Activity

nkarta

Nkarta Therapeutics

\$250M IPO *June, 2020*

artiva

Artiva Biotherapeutics

\$167M IPO *July, 2024*

AstraZeneca

AstraZeneca & EsoBiotec

\$1B M&A *March, 2025*



NKs make Allogeneic treatments **safer** and more **compatible** for scaling to **mass production**



NKs have an **unforeseeable future** with no FDA-approved treatments and lack of insurance policies

Industry Activity

Top Advancements



Allogene Granted 3 FTDs

*Allogeneic CAR-T Cell Therapies
Phase 1 & 2 Trials*

Apr, 2025



Roche Acquires Poseida for \$1.5B

*Allogeneic CAR-T Cell Therapy
Phase 1/2 Trials*

Nov, 2024



Pfizer Invests 8% in Caribou Bio

*4 Allogeneic CAR-T Cell Therapies
Phase 1/2 Trials*

Nov, 2024

Implications



Big Pharma is willing to pay for secure Allogeneic



Regulatory Validation is catching up with pipeline development

Exit Opportunities

M&A

Highly Likely by Big Pharma as they have the expertise and capital for mass manufacturing Allogeneic Therapies from startups



IPO

Less likely to happen as startups don't have enough capital to complete trials but tech advancements could reduce complications



Investment Thesis

Invest in Proven Allogeneic Startups*



Scalable & Cost-Efficient Model

Off-the-shelf production cuts costs by up to **70%**, enabling **broader access** and faster revenue scaling



Faster Delivery, Lower Risk

Short turnaround times reduce patient drop-off and capital burn, addressing key **capital** and **liability** concerns



De-Risked Targets Drive M&A

Focus on **Phase 1/2 allogeneic** startups as Big Pharma seeks de-risked, scalable assets

Appendix

Industry Calls

Victor Shapiro

- <https://www.linkedin.com/in/victorshapiro/>

Mark Bamforth

- <https://www.linkedin.com/in/mark-bamforth-b1001410/>

- <https://www.mordorintelligence.com/industry-reports/cell-therapy-market>
- <https://www.cellandgene.com/doc/catalysts-of-change-how-the-cell-and-gene-therapy-market-has-evolved-0001>
- <https://www.genengnews.com/topics/bioprocessing/cell-gene-therapy-costs-drive-deals/>
- <https://www.scaleready.com/insights/shaping-the-future-of-cell-and-gene-therapy-manufacturing-key-trends-and-innovations/#:~:text=Automation%20and%20Robotics:%20Paving%20the,control%20and%20ensure%20product%20quality.>
- <https://www.mckinsey.com/industries/life-sciences/our-insights/how-ai-can-accelerate-r-and-d-for-cell-and-gene-therapies>
- <https://www.investopedia.com/terms/c/clinical-trials.asp#>
- <https://www.patheon.com/us/en/insights-resources/blog/differences-between-autologous-and-allogeneic-cell-therapies.html>
- <https://www.massgeneralbrigham.org/en/about/newsroom/articles/what-is-gene-cell-therapy#>
- https://www.morganstanley.com/im/publication/insights/articles/articles_carttherapy_en.pdf
- <https://www.massgeneralbrigham.org/en/about/newsroom/articles/what-is-gene-cell-therapy#>
- <https://allianceforcelltherapynow.org/wp-content/uploads/2022/02/21st-Century-Cures-Act-Assessing-5-Year-Progress-Against-Regenerative-Medicine-Provisions-FINAL.pdf#>
- <https://pmc.ncbi.nlm.nih.gov/articles/PMC11305028/>
- <https://www.fda.gov/vaccines-blood-biologics/cellular-gene-therapy-products>
- <https://www.mckinsey.com/industries/life-sciences/our-insights/how-ai-can-accelerate-r-and-d-for-cell-and-gene-therapies>
- <https://www.astrazeneca.com/what-science-can-do/topics/next-generation-therapeutics/regulatory-success-cell-therapy.html#:~:text=Cell%20therapies%20present%20unique%20regulatory,can%20be%20hard%20to%20predict.&text=As%20a%20result%20C%20requirements%20for,up%20period%20of%2015%20years.&text=This%20can%20have%20important%20implications%20for%20long%2Dterm%20patient%20care.>
- <https://www.biospace.com/press-releases/global-stem-cell-therapy-market-size-to-surpass-2-612-9-million-by-2033>
- <https://www.biopharmadive.com/news/cell-gene-therapy-biotech-venture-investment-decline/725401/>
- <https://www.bblsa.com/featured-news-home/2023/8/19/celltherapies>
- <https://pmc.ncbi.nlm.nih.gov/articles/PMC8645794/>
- <https://www.technologynetworks.com/biopharma/articles/the-applications-of-cell-therapy-383051>
- <https://www.fda.gov/vaccines-blood-biologics/cellular-gene-therapy-products>
- <https://www.asgct.org/global/documents/asgct-citeline-q1-2024-report.aspx>
- <https://www.patheon.com/us/en/insights-resources/blog/emerging-cell-therapy-trends-autologous-and-allogeneic-perspective.html>