

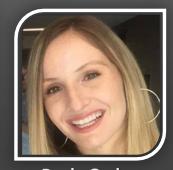
TEAM SPATIALPATH



Ruan Medrano, PhD Cancer immunologist



Shaopeng Yuan
Cancer biologist with
experience in therapeutic
development



Paula Godoy
Cancer biologist and
bioinformatician



Paarth Dodhiawala
Cancer biologist and
bioinformatician



Christopher Cowley

Stem cell biologist/

immunologist (



THE PROBLEM

- Current methods used by pathologists to determine histological features of solid tumors lack the depth of profiling capabilities that is required to thoroughly characterize the disease
- Cancer researchers wanting spatial analysis of cells and molecular characterization in tumors require investment in expensive technology
- Clinicians needing more in-depth molecular and cellular characterization of patient tumors lack pathology services to provide this information.



THE SOLUTION

- Provide a <u>customizable service</u> for the spatial analysis of the tumor tissue to enable cancer research and personalized patient management
- Use CODEX multiplex imaging technology from Akoya Biosciences to visualize 50 or more markers in a tissue section
- Develop and optimize "ready to pick" biomarker panels specific for different types of cancers
- Provide bioinformatics analysis that can assist both researchers and clinicians on the diagnosis and treatment selection of cancer patients







SPATIALPATH BUSINESS MODEL

Value Creation

-Increase accessibility to multiplex imaging technologies for spatial pathology for cancer researcher and clinicians

Value Delivery

-Start with research scientists and move into the clinic and pathology cores

Value Extraction

- -Apply for initial seed funding
- -Partner with Akoya and antibody companies
- -Establish customer base



SPATIALPATH SERVICE MODEL

Tissue processing

Select "ready to pick" cancer specific antibody panels

Provide tissue sample

Perform CODEX assay

Spatial data analysis

Data mining to enable personalized medicine



Receive data in user friendly interface



COMPETITIVE LANDSCAPE



- High-throughput microscopy
- Spatial resolution
- Limited to solid tumors



- Mass spectrometry
- High through-put, not limited to solid tumor
- No spatial resolution or imaging



- Histology and microscopy
- Very fast service, current standard
- Low through-put



- Histology
- Very fast service, current standard
- No spatial resolution or imaging, low through-put



MARKET OPPORTUNITY **PROJECTED CURRENT** (initial beach head market) **Global Solid Tumor** Academic Market Market 2019-2027 ~\$2 - 10M ~\$400B **Pathology Market**

CUSTOMER VALIDATION

Rachel Niec, MD, PhD (Rockefeller University)

 Will reach to a better cellular resolution comparing to current spatial 10X single cell RNAseq technology



Kian H. Lim, MD, PhD (Washington University)

- Will increase utilization of CODEX by scientists largely in part by eliminating burden of running and maintaining the machine and doing complex analysis.
- Anticipates a large clientele
- Antibody panels that can be customized provide flexibility, while maintaining a standardized analysis pipeline.



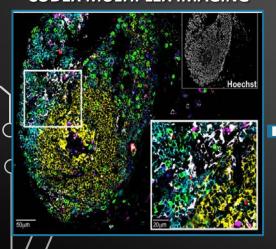
Charles Kaufman, M.D., PhD.

- Fast turnaround time in order to start therapy ASAP
- Database to offset customer cost.

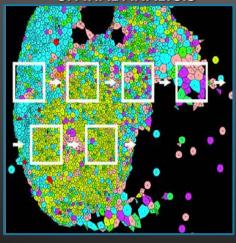




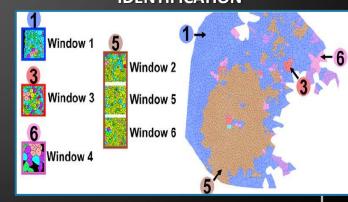
CODEX MULTIPLEX IMAGING



SPATIAL ANALYSIS



CELLULAR NEIGHBORHOOD IDENTIFICATION





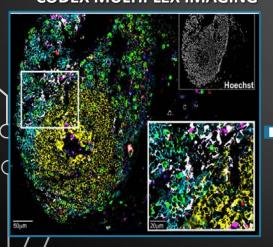
Cell

Resource

Coordinated Cellular Neighborhoods Orchestrate Antitumoral Immunity at the Colorectal Cancer Invasive Front

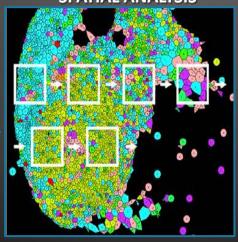
Christian M. Schürch, 1965 Salil S. Bhate, 1936 Graham L. Barlow, 196 Darci J. Phillips, 1946 Luca Noti, 1 Inti Zlobec, 5 Pauline Chu, 19 Sarah Black, 19 Janos Demeter, 1 David R. McIlwain, 19 Nikolay Samusik, 1 Yury Goltsev, 19 and Garry P. Nokan 1937.

CODEX MULTIPLEX IMAGING

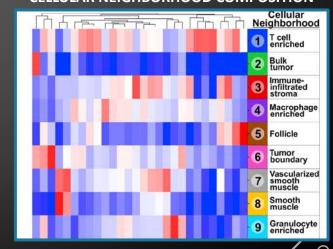


SPATIAL ANALYSIS

CellPress
OPEN ACCESS



CELLULAR NEIGHBORHOOD COMPOSITION





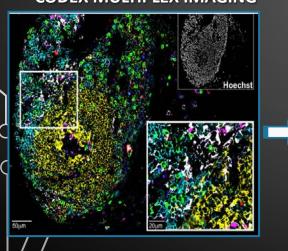
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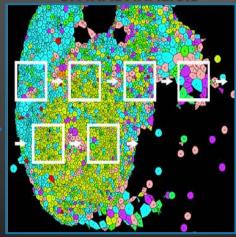
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CODEX MULTIPLEX IMAGING

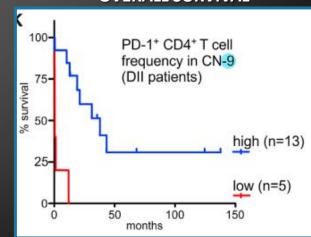


SPATIAL ANALYSIS

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OVERALL SURVIVAL

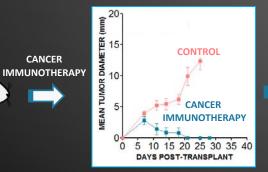


SPATIAL KNOWLEDGE TRANSLATES TO PATIENT'S PROGNOSIS

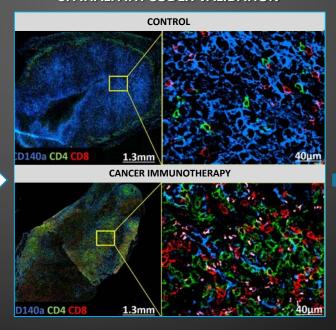


SPATIALPATH CANCER IMMUNOTHERAPY STUDY

CANCER



SPATIALPATH CODEX VALIDATION



SPATIALPATH RESPONSE TO IMMUNOTHERAPY **BIOMARKER PANEL**

CD90.2 (30-H12)	F4/80 (BM8)
CD45 (30-F11)	iNOS (W16030C)
CD45R/B220 (Ra3-6B2)	FOXP3 (MF-14)
IgM (RMM-1)	PD-1 (RMP1-30)
IgD (11-26c.2a)	CX3CR1(SA011F11)
CD38 (90)	ICOS (C398.4A)
CD24 (M1/69	PDCA-1 (927)
CD140A (APA5)	Ly6G (1A8)
CD5 (53-7.3)	CD40 (3/23)
CD8a (53-6.7)	
CD31(MEC13.3)	
CD44 (IM7)	
MHC II (M5/114.15.2)	
CD19 (6D5)	
CD21/35 (7E9)	
CD4 (RM4-5)	
Ki67 (B56)	
CD169 (3D6.112)	
TCRb (H57-597)	
CD49f (GoH3)	
CD11c (N418)	
CD3 (17A2)	



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Stem cell biologist/
immunologist

Additional personnel required:



Bioinformatician/ computational biologist



CODEX technician



Web developer



Administrative staff
SPATIAL
PATH

USE OF FUNDS

Specific Activity	Funds Required	Deliverable/Risk Mitigation	Estimated Delivery Date
Acquire CODEX system	\$500,000	Required for service, additional funding, can rent from WashU lab	April 2021
Bioinformatician	\$100,000	Required for data processing, in-house	January 2021
Technician	\$50,000	Required for sample processing, in-house	March 2021
Facilities	\$30,000	Required for sample processing, rent academic space	March 2021



Thank you!

SPATIAL PATH



RISK ASSESSMENT

Risk factor	Risk mitigation strategy
Cost of CODEX machine	Additional funding
Reliance on a new company	Partnership, tech development
Lack of customer interest	Survey lab interest
Recurring Costs - reagents	
Initial seed funding	SBIR grants



