



# Stem Cell Therapeutics

## **Investment summary: Cancer stem cell target**

Following the reverse merger with Trillium Therapeutics, Stem Cell Therapeutics (SCT) is focused on developing SIRP $\alpha$ Fc, an anti-CD47 fusion protein with potential to target cancer stem cells (CSCs) in acute myeloid leukaemia (AML). SIRP $\alpha$ Fc appears to be a promising asset, with few competing anti-CD47 agents in development, although fresh funds are required to advance into the clinic. A Phase I trial is planned for mid-2015.

### SIRPaFc targets "do-not-eat" CD47 signal

SIRP $\alpha$ Fc is an antibody-like biologic that binds to CD47, a protein expressed on many cells but prominent in certain CSCs, including those in acute myeloid leukaemia (AML). Research suggests that CD47 produces a "do not eat" signal through SIRP $\alpha$  to suppress phagocytosis by macrophages, and CD47 expression is associated with poor clinical outcomes in AML. By binding to CD47 on tumour cells, SIRP $\alpha$ Fc blocks this survival mechanism and promotes macrophage-mediated tumour cell destruction (shown in vivo with human AML cell-transplanted mice). IND-enabling studies could start in Q413, with a Phase I in AML patients by 2015.

### Repositioning tigecycline for AML

Another key SCT asset is IP covering a potential new use of tigecycline, an approved glycylcycline antibiotic (Tygacil). Studies indicate that tigecycline selectively targets bulk AML cells and AML CSCs by inhibiting mitochondrial protein synthesis. A four-site Phase I dose-escalation study (n=28) is ongoing, with data expected in Q313. SCT is developing new formulations of tigecycline, potentially increasing IP strength, and plans Phase I/II AML trials in mid-2014.

## CSC hypothesis: Promising but seeking clinical proof

CSC-targeting agents could overcome the shortcomings of traditional cancer drugs, which are often ineffective against CSCs. Although unproven in clinics, when combined with traditional cancer drugs, CSC-targeting agents could potentially offer a cure for cancer. SCT recently expanded its CSC development pipeline by acquiring an exclusive option to prostate CSC assets from the University of York.

## Valuation: C\$12.2m EV indicative of early stage

SCT had pro forma C\$3.6m net cash in March 2013 and, given its c C\$3.5m/year burn rate, will require additional capital in Q214. Management expects up to C\$20m could be needed to bring SIRP $\alpha$ Fc through Phase I trials. Out-licensing TTI-1612 (in Phase I for interstitial cystitis) could generate cash. The advancement of CSC programmes is key to re-rating the shares in the long term.

Historic financials							
Year end	Revenue (C\$m)	PBT (C\$m)	EPS (C\$)	DPS (C\$)	P/E (x)	Yield (%)	
12/10	0.0	(4.31)	(0.30)	0.0	N/A	N/A	
12/11	0.0	(3.17)	(0.20)	0.0	N/A	N/A	
12/12	0.0	(1.06)	(0.60)	0.0	N/A	N/A	
Source: Bloomberg. Note: Historical financials refer to SCT before Trillium merger.							

#### Pharma & biotech

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Share details	
Code	SSS
Listing	TSX-Venture
Shares in issue	42.5m

#### **Business description**

Stem Cell Therapeutics (SCT) develops therapeutics for oncology that target cancer stem cells (CSCs). SIRPaFc, a pre-IND stage immunotherapy programme that promotes macrophages to kill CSCs, and tigecycline are both being studied for acute myeloid leukaemia (AML).

#### Bull

- SIRPαFc novel mechanism of action targeting CD47 pathway could provide therapeutic potential in other haematological cancers as well as solid tumours.
- Out-licensing of non-core clinical-stage TTI-1612 asset could provide source of non-dilutive capital.
- Collaborations with established oncology research institutes in Toronto and the UK.

#### Bear

- Early-stage oncology assets are associated with high development risk.
- Up to C\$20m in additional capital required to bring SIRPαFc through Phase I studies.
- Strength of intellectual property (IP) for tigecycline programme unclear given drug's expected genericisation in 2016.

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