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NEW YORK (GBI Research), 21 June 2016 - Of the three major indications within hematological cancer, namely leukemia, lymphoma and myeloma, leukemia has the largest pipeline, with 798 products in active development, while lymphoma has 552 and myeloma has 396, according to business intelligence provider GBI Research.

The company's latest report * states that there are currently 1,234 pipeline products in active development in the hematological cancer therapy area, and for each of the three key indications, the composition by stage of development is relatively similar, although leukemia and myeloma have more products in clinical development.

Yasser Mushtaq, Senior Analyst for GBI Research, explains: "Leukemia has the most products in the hematological cancers pipeline, with 349 in clinical development and 446 in early-stage development, while three products had an undisclosed stage of development. In terms of individual stages, however, Preclinical is the largest across leukemia and lymphoma, while Phase II is the largest in myeloma. It is notable that Phase II also contains many products for leukemia and lymphoma, which is a promising trend for product development.

"The leukemia indication contains the most first-in-class products, with 195, while the lymphoma and myeloma pipelines contain 186 and 82 first-in-class products, respectively."

GBI Research's report also states that considerable unmet needs remain in hematological cancer, with acute myeloid leukemia (AML) particularly ill-served, as there is a need for more efficacious targeted therapies across all patient subtypes. The treatment of AML is still limited to conventional DNA-targeted chemotherapy regimens, which achieve long-term survival rates of 25-50% in patients below the age of 60, and only 5-15% in older patients, indicating a clear need for more efficacious treatments.

Mushtaq continues: "Across other forms of hematological cancer, while some targeted therapies are already present in the market, reducing the rates of relapse and improving survival rates among patients who do relapse are particular areas of need.

“For example, across follicular lymphoma (FL), mantle cell lymphoma (MCL) and diffuse large B-cell lymphoma (DLCL), first-line treatment in patients is typically cytarabine-cased chemotherapy in combination with rituximab. Despite largely positive response rates, almost all patients ultimately relapse, with progression-free survival values of one to two years in MCL and above three years in FL and DLCL, presenting a notable need across the non-Hodgkin’s lymphoma pipeline for more effective maintenance therapies to prevent disease relapse.”

* **Frontier Pharma: Hematological Cancers – Highly Innovative Pipeline Continues Trend towards Targeted, Patient-Specific Therapies**