

PFIZER'S CENTERS FOR THERAPEUTIC INNOVATION

REQUESTS PROPOSALS FOR THERAPEUTIC TARGETS

Deadline April 29, 2019



Pfizer's Centers for Therapeutic Innovation, or CTI, is a unique joint drug discovery model focused on collaborating with leading academic medical centers to rapidly translate novel target opportunities into new medicines.

CTI Collaborations Include

- Funded project-related research
- Hands-on collaboration from dedicated Pfizer drug-development experts
- Access to scientific/technological expertise and infrastructure at Pfizer
- Potential for financial incentives in the form of milestone and royalty payments
- Flexible publishing rights
- Opportunity for involvement in CTI's Foundation collaborations

Pre-proposal Submission Process

Submission entails a non-confidential 2-3 page overview of the target, mechanism, evidence for disease linkage, and the proposed therapeutic drug. At a high level, the pre-proposal should suggest how the therapeutic hypothesis could be tested in the clinic.

For Information

All researchers and clinicians whose work meets these criteria are invited to apply.

Please submit non-confidential pre-proposals to your Technology Transfer Office by April 29th. For further information about submitting a pre-proposal, please contact Eric Mah at emah@ucsd.edu

For further information about areas of focus, please contact Dr. Mary Faris at Mary.Faris@Pfizer.com.

Modalities Considered

- **Large Molecules:** antibodies, proteins, fusion proteins, antibody conjugates, conditional activated biotherapeutics for enhanced tissue/tumor targeting
- **Small Molecules:** target classes include kinases, deubiquitinating enzymes, GPCRs, ion channels, solute transporters, epigenetic targets, phosphatases, and RNA modulators

Areas of Interest

- **Cancer** – select solid tumors: colorectal, breast, lung, prostate, pancreatic, hepatocellular, ovarian cancers.
- **Autoimmunity/Inflammation** – inflammatory bowel disease, Non-alcoholic fatty liver disease/Non-alcoholic steatohepatitis, atopic dermatitis, psoriasis, Rheumatoid arthritis.
- **Metabolic** – cardiometabolism, cachexia.
- **Rare** – monogenic hematologic (non-malignant) disorders, neurologic/neuromuscular disorders, inborn errors of metabolism, endocrine, renal and cardiovascular diseases. Ultra-rare indications are not in scope at this time.

Targets/Pathways Focus:

- DNA damage recognition and repair (e.g. replication stress or repair mechanisms)
- Tissue-resident immune modulation (e.g. adaptive or innate mechanisms, immunometabolism, etc.)
- Immune activators /enhancers (e.g. nucleic acid sensing, toll-like receptors etc)
- Modulation of senescence in cancer and non-neoplastic indications
- DNA repeat expansion diseases (e.g. Huntington's disease, amyotrophic lateral sclerosis, myotonic dystrophy or frontotemporal dementia)
- Regulation of epithelial or mucosal barrier function including autophagy, host-microbe interactions
- Modulation of fibrosis pathways, either metabolism/stress-induced or inflammation-induced (possibly tumor-driven)
- Regulation of antigen-specific immune tolerance induction
- Emerging metabolic regulators in heart failure, satiety, nonalcoholic steatohepatitis and muscle biology



COLLABORATIVE

ENTREPRENEURIAL

RESULTS-DRIVEN