**If you want to join us at LiNK Health Group on our 360 program, we need to see your skills. Please complete the two assignments below, and upload them to the last section of your completed application form along with your video by Monday 2nd January 2023.**

**Assignment 1.**

Background

The document below is in the early stages of development. It is an FAQ document that your pharmaceutical company client, the US Medical Director for fictionalitinib, will use to brief their team before attending a congress where they will be discussing the product and its clinical data with healthcare professionals.

## **Instructions**

1. Please imagine you are reviewing the document and passing recommendations and queries onto your colleague, Anna. Please review it for accuracy, consistency, formatting and style. Please:
   1. Make proposed changes using the ‘track changes’ function
   2. Add in comment boxes as necessary for any queries you have
2. After editing the document, please write an email to Anna to update her on your review. When drafting the email, please indicate how long the edit took you, and consider:
   1. Any big changes or suggestions that you have made
   2. Anything that needs clarification or a decision
   3. The client’s preferences
   4. Potential next steps
3. When you return the document for assessment, please specify how long the full assignment took you.

|  |  |
| --- | --- |
| Time taken for edit |  |
| Total time taken for assignment 1 |  |

Fictionalitinib FAQs

|  |  |
| --- | --- |
|  | **Key Messages** |

* There is a high unmet medical need among patients with myelofibrosis due to limited treatment options
* Fictionalibinib is a FIC-selective *inhibitor* that has demonstrated clinically meaningful improvements in splenic response and total symptom score in patients with primary and secondary (post-PV and post-ET) myelofibrosis
* The mechanism of action (MOA) of fictionalitibing is novel, and it is a first-in class FIC selective inihbitor
* Fictionalibitin also shows efficacy in patients previously exposed to ruxolitinib, the current standard of care

|  |  |
| --- | --- |
|  | **fictionalitinib** |

1. What is ficitionalibitnb?
   1. Fictionalitinib is a highly selective, orally bioavailbe, small molecule substract-binding inhibitor of FIC (fictional interesting complex), which is a key substrate that binds to the fictional interesting receptor (FRI) [Grindelwald et al, Fic Sci Res 2016)
2. How does ficitonalibinib work?
   1. FIR signaling is key to the development and progression of myelofibrosis (Potter & Dumbledore 2007, Haem Magic Rev), and inhibition of FIR signalling pathways via FIC inhibition with fictionalitinib showed significant activity in preclinical modles {JK Rowling 2011)
   2. Mutations in fic in patients with myelofibrosis mean that following binding to the fir, the signally pathway shows constitutive activity, promoting disease transformation and progression (Nat Rev Haem 2009 Snape and Voldemort)
3. What
   1. Fictionalitinib has demonstratec dlinically meaningful improvments in splenic response and total system score in patients with primary and secondary myelofibrosis in the FICTION study programme (Weasley et al 2015). Fictionalibinig also shows activity in patients previously esposed to nonarafenib, the curent standard of care (Granger Pharmcol 2017)

|  |  |  |
| --- | --- | --- |
| **Endpoint** | **Fictionalibinit** | **Ruxolitinib** |
| Spllen response, 24 weeks | 38.967% | 29% |
| Synptom response, Week twenty-four | 62%\* | 48 |

1. What is the safety profile of fictionalibinit?
   1. Clinical studies of fictionalibinit have shown a good safety and tolerability profile, with simialr rates of advserve events to ruxolitinib Granger 2017 Pharmaol.
   2. Inhibition of FIC is associated with increased risk of anemia but this was predominatly Grade ½ with only 2% of patients expereincing Grade 3 or 4 anemia during the fiction studies (Grander Pharmacol 2017, Weasly NEJM 2015.
   3. Other frequently observed adverse events inclueded renal failure, leukopenis, neutropenia, epistaxis and nausea/vomiting, but rates were generally similar between fictionalibitinb and placebo.

References

1. Grindelwald et al, Fic Sci Res 2016
2. Potter & Dumbledore 2007, Haem Magic Rev
3. JK Rowling 2011
4. Nat Rev Haem 2009 Snape and Voldemort
5. Weasley et al 2015
6. Granger Pharmcol 2017
7. Grander Pharmacol 2017
8. Weasly NEJM 2015

Dear Anna,

[Please draft your email text here]

Best wishes,

**Assignment 2.**

Background

An internal team receive an email from their client (see below)

From: [bob@pharma.com](mailto:bob@pharma.com)

To: [anna@linkhealthgroup.com](mailto:anna@linkhealthgroup.com)

Dear Anna,

Thanks for the great job in delivering our breast cancer symposium at the recent global scientific congress in the USA. We would like your support in delivering a similar symposium, in the same therapy area, at a regional European congress or a global congress based in Europe. Can you suggest a couple of suitable conferences and let me know the dates and location, providing a rationale for each one recommended?

Regards,

Bob

Instructions

1. Read the email carefully and plan your approach to the request. This will require you to identify suitable congresses taking place in 2023 through internet searches.
2. Complete the table with the congress information you find and detail the rationale for recommending the congresses the client should consider.
3. After completing the table, please write a reply to Bob giving your congress recommendation and rationale.
4. When you return the document for assessment, please specify how long the assignment took you.

|  |  |
| --- | --- |
| Total time taken for assignment 2 |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Congress** | **Date** | **Location** | **Recommendation (Yes/No)** | **Rationale** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Dear Bob,

[Please draft your email text here]

Best wishes,