Epiphany

Case Studies

The Diversity of Epiphany Consulting Projects

April 2026



GLOBAL EPIDEMIOLOGY CASE STUDY

Biomarker-Driven Ovarian Pts

Epiphany
CUSTOM CONSULTING
EXPERTISE & SERVICES

CLIENT ISSUE

Client needed detailed analysis of patient population subtypes to support commercialization plans

PROJECT DESCRIPTION

Detailed patients estimates of ovarian cancer patients with BRCA-1/BRCA-2 and folate receptor alpha status by stage and line of therapy for the U.S., Japan, and EU-5 (France, Germany, Italy, Spain, and the U.K.) countries

DATA SOURCES

Incidence rates and populations from country registry datasets or IARC for Spain • Survival data from country- or regional-registries (SEER, UK, EUROCARE) • Staging data (FIGO system) from SEER and secondary sources • Biomarker estimates from COSMIC and secondary data sources by region and outcome • Treatment data based on physician surveys and patterns of care studies

MODEL PARAMETERS

BRCA-1 and BRCA-2 mutation patients, including modified survival, response, and relapse
Folate receptor alpha status across BRCA and non-BRCA mutation patients, from clinical trial and secondary sources
Chemotherapy by course to derive line of chemotherapy
Future testing trends modeled for both BRCA and FR-alpha in ovarian cancer patients by region/country

DELIVERABLES

Country-specific ovarian cancer flow models for each of the seven study countries with summary target patients
Slides of detailed methodology utilized including sources and assumptions by country/region
Future testing trends and changes in future outcomes provided to help with scenario planning based on clinical trial outcomes

TIMELINE

Seven weeks for preliminary project deliverables, final slides delivered at eight weeks after initiation; supplemental update provided five months later, post-clinical trial data analysis

OUTCOME

Client utilized patient flow estimates to build strategic commercialization plan, updates to model provided based on changes to assumptions based on clinical trial data

GLOBAL EPIDEMIOLOGY CASE STUDY

Alternate Futures: TNBC

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CLIENT ISSUE

Client needed to explore impact on target patient pools based on different scenarios

PROJECT DESCRIPTION

Updated model structure for Triple-Negative Breast Cancer (Female only) flow model to generate alternate future patient estimates in the U.S., Japan, and EU-5 (France, Germany, Italy, Spain, U.K.)

DATA SOURCES

Incidence, Survival, and Treatment data from primary model construction (registries and survey/POC data)
Future estimates based on collaborative team discussions to generate four (4) alternate futures for each country

MODEL PARAMETERS

Alternate Futures accounting for the following:

- Survival shifts by stage
- Continued trends in stage shifting towards early stages
- Impact of testing technology for identifying key subgroups within TNBC
- Treatment shifts in use of particular mechanisms/drug categories

DELIVERABLES

Alternate future patient estimates and comparisons of the different scenarios
Sensitivity and impact analysis of key input changes
Comparison of estimated differentials compared to “baseline” modeling from the first model version

TIMELINE

Several collaborative discussions over a two week period; final scenarios provided at three weeks; minor updates to two scenarios two (2) months after the final delivery

OUTCOME

Client reviewed and used the scenarios to determine the range of potential target patients, based on anticipated changes that may occur; minor changes to scenario inputs to define the level of impact on patient pools

GLOBAL EPIDEMIOLOGY CASE STUDY

HepB Vaccination Candidates

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CLIENT ISSUE

Client needed to better understanding the impact of potential changes to the vaccination schedule

PROJECT DESCRIPTION

Estimates of current adult Hepatitis B vaccination pools by risk and non-risk groups for individuals born pre-1992 (universal childhood vaccination adoption for Hepatitis B) based on risk groups (diabetes, HIV, employment, international travel, sexual transmission, home transmission, imprisonment, etc.)

Additional analyses to determine baseline and future expected Hepatitis B vaccination patients following a “universal adult vaccination” recommendation from ACIP (CDC)

DATA SOURCES

CDC publications on Hepatitis B, National Health Interview Survey, HIV Surveillance Reports, Diabetes reports, and others
Secondary source estimates on prison populations
Detailed population data from the U.S. Census Bureau by age group and year of birth

MODEL PARAMETERS

Age group • Hepatitis B risk factors (diseases, activities, employment, etc.) • Patients with no Hepatitis B risk factors • Vaccination levels by risk groups • Multiple scenarios for impact of “universal adult vaccination” recommendation

DELIVERABLES

Detailed patients and number of Hepatitis B vaccination doses, currently and future expectations by scenario type, broken out by risk group, including revaccination estimates

TIMELINE

Five weeks to provide preliminary model for review, additional two weeks to finalize model inputs based on multiple working sessions with clinical and commercialization teams; some delays due to anticipated ACIP meeting, which was delayed due to COVID discussions as a priority

OUTCOME

Client continues to utilize the detailed patients estimates, both baseline and future scenario to build forecast models based on anticipated ACIP (CDC) recommendations

GLOBAL EPIDEMIOLOGY CASE STUDY

Genetic Disease Epidemiology

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CLIENT ISSUE

The client needed a resource for understanding the epidemiology of three rare diseases for planning purposes

PROJECT DESCRIPTION

Detailed patients estimates of beta thalassemia, sickle cell anemia, and aldoleukodystrophy (ALD) in 190 countries by genotype, clinical status, and age group, accounting for changes in immigration across countries/regions

DATA SOURCES

U.N. Population data by country
Modell's Haemoglobinopathologist's Almanac
U.N. population migration statistics and future estimates; EUROSTAT immigration data by European country
Global Burden of Disease database for survival and mortality estimates
Secondary sources for clinical status, co-morbidities, and key genotype estimates

MODEL PARAMETERS

Incidence and prevalence for each disease across the 190 countries
Survival and mortality, combined with immigration of genetic carriers and disease patients
Genotype estimates by region, accounting for immigration patients
Clinical status patients (e.g., stroke, transfusion) by genotype and age group for each country

DELIVERABLES

Detailed patient estimates by genotype, age group, and clinical status based on on detailed data sets and assumptions of current and expected incidence/immigration status by region

TIMELINE

Nine weeks to provide all three disease state models for 190 countries; supplemental support to provide model training to new team members

OUTCOME

Epiphany generated detailed estimates and reviewed methodology and sources with brand team and consultants to generate baseline patient estimates for forecasting and investor relations communications

TREATMENT SURVEYS CASE STUDY

Prostate Treatment Comparisons

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CLIENT ISSUE

Client needed a robust baseline for forecasting purposes

PROJECT DESCRIPTION

Review of available public and client-provided private treatment data for prostate cancer by hormone-sensitive and castrate-resistant pools, including progression to CRPC over time and treatment

DATA SOURCES

Incidence and survival data from cancer registry (SEER18)
Progression from HSPC to CRPC from publications
Treatment data from public sources (single institution data, NCDB registry, pattern of care publications) and private data (IQVIA, IPSOS, Kantar, Epiphany)

MODEL PARAMETERS

Incidence of hormone-sensitive prostate cancer and metastatic progression (still HSPC)
Transformation to castrate-resistant setting (non-metastatic and metastatic pools)
Determination of best estimate of treatment data and treated pools by stage and clinical status

DELIVERABLES

Detailed review of treatment data by source and course of treatment (to allow “similarity” comparisons)
Determination of range of available treatment data and estimates of “best” treatment data based on sample, collection process, and assumptions/limitations in sources
Patient estimates of drug treated patients (chemotherapy and novel hormone agents) by line of therapy

TIMELINE

Two weeks for transformation analysis and treatment comparison; Feedback from client on “best” transformation and treatment data in week three; final deliverable approximately four weeks after initiation

OUTCOME

Client used transformation and treatment analysis for clinical and commercial discussions to define baseline modeling approach for forecast models

EXTERNAL EXPERTS CASE STUDY

Licensing Assistance

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CLIENT ISSUE

Client needed patient estimates for use in valuation exercise

PROJECT DESCRIPTION

Incidence and second-line drug-treated patients estimates for the U.S. and EU-5 (France, Germany, Italy, Spain, U.K.) for 2030 to 2040 for late-stage patients by subtype (MPNST, synovial sarcoma, ASPS

DATA SOURCES

SEER18 histology database for subtype analysis
Cancer registry data (country-specific and IARC data for subtypes)
Epiphany's EpiOncology™ data set as basis for second-line drug estimates, modified by incidence and survival data by subtype

MODEL PARAMETERS

Incidence by subtype (and stage if available)
Second-line drug treated estimates based on Epiphany's EpiOncology™ data

DELIVERABLES

Country-specific estimates of incidence and second-line drug treated patients by subtype for 2030 to 2040

TIMELINE

One week to deliver patient estimates by country and region;
Supplemental support to discuss inputs and surrogate assumptions

OUTCOME

Client utilized the analysis in forecast model to determine potential value of assets for out-licensing

REGULATORY SUPPORT CASE STUDY

Regulatory Filing Support

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CLIENT ISSUE

Client needed patient estimates in support of a regulatory filing

PROJECT DESCRIPTION

Detailed incidence and 10-year prevalence estimates for acute myeloid leukemia and key subtypes for each of the EU-28 and EEA countries (total of 31 countries)

DATA SOURCES

- U.N. Population Division data by country, gender, and 5-year age group
- Country-specific incidence rates and IARC's Cancer Incidence in Five Continents
- Survival data by country from registries and EUROCARE studies
- Subtype analyses for AML patients based on SEER18 (U.S.) dataset and HAEMACARE dataset (U.K.)

MODEL PARAMETERS

- Incidence by 5-year age group and gender
- Survival by gender and year
- Prevalence estimates by year for 5- and 10-year prevalence

DELIVERABLES

Detailed patient estimates by country, age group, and gender, both incidence and prevalence, for current and anticipated timeframes

Written MS WORD documentation of methodology and sources for inclusion in EMEA ODA regulatory filing and annual reports

TIMELINE

Two weeks to generate estimates by key genomic subtypes; delays in project due to clinical team determination of final subtypes for inclusion

OUTCOME

Two weeks to generate estimates by key genomic subtypes; delays in project due to clinical team determination of final subtypes for inclusion