

March 12, 2026

Open Letter to the Application Review Subcommittee

Re: CLIN2-19191 (P.I. K. Gaensler)– TriLeukeVax (TLV): A first in human trial of an engineered autologous vaccine to enhance relapse free survival in AML patients.

Dear Members of the Application Review Subcommittee,

We appreciate that the TriLeukeVax (TLV) program will be considered by the ARS within the broader context of CIRM's mission to advance regenerative medicine therapeutics to address unmet medical need.

I am writing this letter to provide my strong support of Dr. Karin Gaensler's CLIN2 application that proposes an exciting new vaccine approach (TriLeukeVax) for treating acute myelogenous leukemia. My interest in leukemia stems from the experiences that I and my family had when my father developed leukemia and was treated at the University of California. The treatment was intensive and difficult. While the leukemia team at UCSF was skilled, highly committed and professional, it was clear that even with high-dose chemotherapy, bone marrow transplantation and their attendant toxicities, outcomes are often poor, particularly in older patients like my father. In the wake of this experience, I made a commitment to supporting leukemia research at UCSF and establishing an endowed professorship at UCSF (which Dr. Gaensler now holds) to honor my father.

As an investor in novel technologies, many in the biomedical sphere, my group at GreatPoint Ventures has developed a portfolio that includes a number of companies in the pharmaceutical and biotech spaces. Some companies include Skyhawk Therapeutics, Onco Response, and Glympse Bio. My academic background is in computer science, but I have been involved in the intersection of computer science and biology for quite a few years and have started 2 biotech companies one called CAPP Medical (doing liquid biopsies) which was acquired by Roche and the other called CiberMed (doing biomarker discovery). We at Greatpoint are focused on early-stage companies that include health and wellness. Thus, I believe I have extensive experience in bringing new technologies through development process and to market.

Since pre-clinical data with her autologous vaccine were just emerging almost a decade ago, Dr. Gaensler and I have discussed her research on several occasions. I am impressed with her commitment to bringing this technology to the clinic to improve patient outcomes, and her recent progress in achieving IND approval and FastTrack and Orphan Drug Designation in the past year. We have initiated discussions as to strategies for developing the vaccine. The Strategic planning committee that Dr. Gaensler has assembled individuals with broad experience in medicine, science, and licensing.

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and business development ensuring that progress towards commercialization plan is forward-looking and efficient. From a product development perspective, the potential to apply this technology to other more common hematological malignancies and to combine the vaccine with other immunotherapeutic approaches is exciting. This could represent a new opportunity for patients in California and elsewhere.

Thus, I urge the CIRM to fund the IND approved CLIN 2 Phase 1 studies essential for bringing this technology to the clinic in the future.

Sincerely,

Ashok Krishnamurthi

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