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NOXOPHARM MAKES KEY EXECUTIVE APPOINTMENT

- **Chief Medical Officer appointed**
- **Early clinical trial data leads to expanded clinical trial program**
- **Company prepares for pre-commercial phase**

Sydney, 22 October 2018: Noxopharm (ASX: NOX) is pleased to announce the appointment of Dr Greg van Wyk as its Chief Medical Officer.

Dr van Wyk MB BCH BBA MEd is an experienced pharmaceutical industry physician who has led medical teams across Australasia and North-Western Europe. With postgraduate degrees in management and economics and experience working and leading across multiple therapeutic areas, he brings significant clinical and business acumen to this key role.

Dr van Wyk joins the Company at a time of significant growth in the Company's clinical and pre-clinical programs and will play a key bridging role with the Company's medical advisors to plan and direct those programs.

The Company's most advanced pipeline drug candidate, Veyonda[®], already is undergoing two Phase 1b studies in prostate cancer patients (DARRT-1 and LuPIN-1) and clinical program is set to undergo considerable expansion in 2019 with 4 new studies to be added comprising:

- an IND-enabling Phase 0 study in healthy volunteers (commencing Q1 2019)
- two Phase 2 studies (DARRT-2 and DARRT-3) in lung cancer and sarcomas/rare cancers respectively (commencing Q2 2019)
- a proposed Phase 2/Phase 3 adaptive design registration study in prostate cancer (commencing Q3 2019).

Dr Graham Kelly, Noxopharm CEO, said, "This appointment comes at an important time in the Company's growth cycle as it transitions into a pre-commercial phase with Veyonda[®] due to enter its final stage of testing in the second half of next year. From there, we look forward to being in a position to lodge applications for marketing approvals in 2022. Dr van Wyk will play a key role in coordinating the clinical and regulatory aspects of that program."

The Company's primary strategy remains seeing Veyonda[®] brought to market for use in combination with standard externally-delivered radiotherapy in men with late-stage prostate cancer. The aim is to

use Veyonda® to boost the cancer cell-killing effect of radiation without increasing the risk of side-effects. This is the so-called DARRT radio-enhancing program involving a one-off 3-week course of combination treatment that to date has proven to be well tolerated and resulting in encouraging clinical signals including abscopal responses. Interim clinical data from this study has been released to the market previously.

Kelly added, “But the growing interest in the use of nuclear medicine as opposed to radiotherapy to treat prostate cancer has led us to look at an alternative method of use called the LuPIN program. In this program, Veyonda® is given in conjunction with intravenous ¹⁷⁷lutetium-PSMA-617, an experimental radiopharmaceutical licensed to US biotechnology company, Endocyte Inc. Treatment with that drug involves a considerably longer course of treatment of 36 weeks.”

“We still remain of the view that the DARRT treatment regimen is likely to prove eventually to be the treatment of choice for late-stage prostate cancer, in part because of DARRT’s more attractive features of a much shorter treatment course and much less invasive procedures, and in part because of what we believe will prove to be a greater and more durable survival outcome. Nevertheless, it is prudent to keep all options open until we get to the end of the trialing process.”

The LuPIN-1 study is being conducted at St Vincent’s Hospital Sydney with Veyonda® and ¹⁷⁷lutetium-PSMA-617 being made available by their respective companies. Published clinical data shows that a significant proportion of men have disease progression before they complete a 36-week treatment course of ¹⁷⁷lutetium-PSMA-617 therapy on its own. The aim of adding Veyonda® is to see if it can enhance the effect of ¹⁷⁷lutetium-PSMA-617 with an increase both in the proportion of men responding as well as in the longevity of the response.

“¹⁷⁷lutetium-PSMA-617 is the subject of a recent trade sale, which goes some way to highlighting the value of a drug candidate such as Veyonda® if it fulfils its potential of increasing the effectiveness of ¹⁷⁷lutetium-PSMA-617 treatment to a significant degree,” Kelly added.

The Veyonda® clinical program also includes additional studies planned to get underway in 2019 in lung cancer and rare cancers including sarcomas and possibly primary brain cancers, all being conducted for various strategic reasons as addenda to the prostate cancer programs.

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About Noxopharm Group

The Noxopharm Group includes Noxopharm Ltd, Nyrada Inc, and NoxAsia Ltd with offices in Sydney, New York and Hong Kong. The Group’s drug pipeline contains 4 drug candidates: Veyonda®, NYX-104, NYX-205, NYX-330. Veyonda® is being developed as an enhancer of radiotherapy across a range of cancers being treated with both standard external beam radiotherapy and intravenous radionuclide (¹⁷⁷lutetium-PSMA-617) therapy; NYX-104 is a neuroprotectant being developed to limit secondary brain damage (glutamate-induced excitotoxicity) following ischaemic stroke and concussion; NYX-205 is an anti-inflammatory being developed for the treatment of peripheral neuropathy associated with diabetes and chemotherapy; NYX-330 is a PCSK9 inhibitor being developed for the treatment of high blood LDL cholesterol levels that fail to respond adequately to statin therapy alone.

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