
NOXOPHARM
Noxopharm Limited (ASX:NOX)
ASX SMALL-MID CAP CONFERENCE PRESENTATION
March 2021
Discover
Develop
Deliver
Dr Graham Kelly
CEO and Managing Director

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Medical advances have helped delay the progression of many forms of cancer. However, once an aggressive cancer becomes metastatic (with secondary tumours), current treatment options generally are very limited in their effectiveness

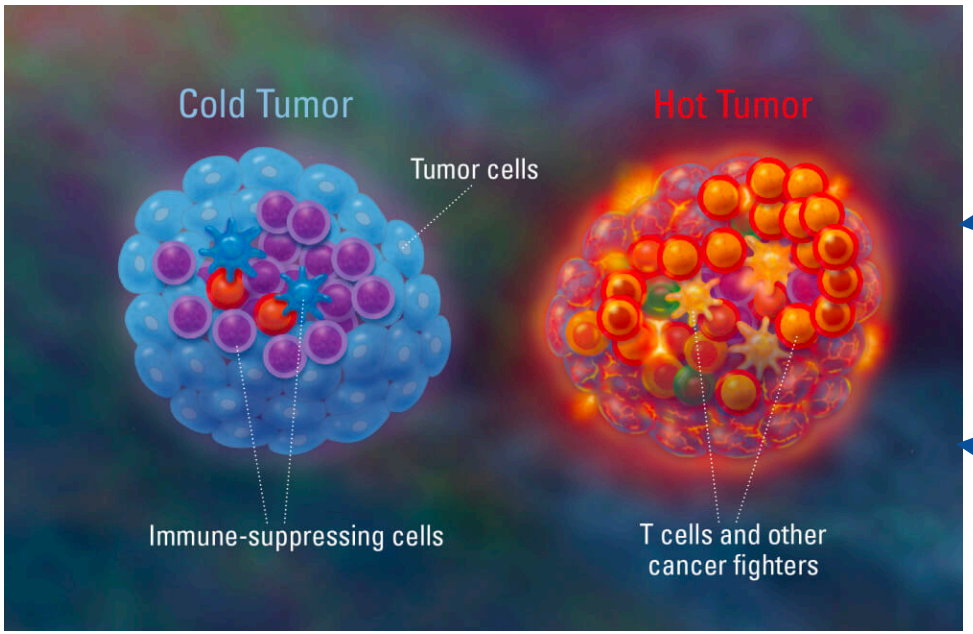
Our aim is simple. To boost the effectiveness of most current forms of cancer treatment, delivering long-term remission in most patients, by restoring the cancer-fighting capacity of the body's immune system

We believe that Veyonda® is about to achieve that goal and in so doing revolutionise the treatment of cancer

Veyonda® breakthrough COLD to HOT immunotherapy drug

Activates immune cells

Increases trafficking of activated immune cells



Source: Dana-Faber Cancer Institute

Blocks autophagy ⇩ abscopal responses

Inhibits inflammation

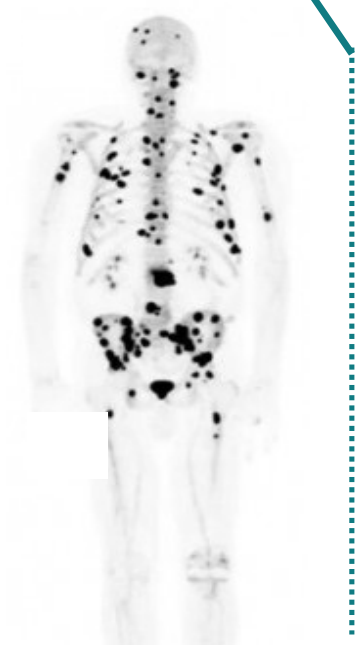
Converts **COLD** tumors to **HOT** tumors

Treatment options for metastatic cancer

NOXOPHARM

Used in most cancers

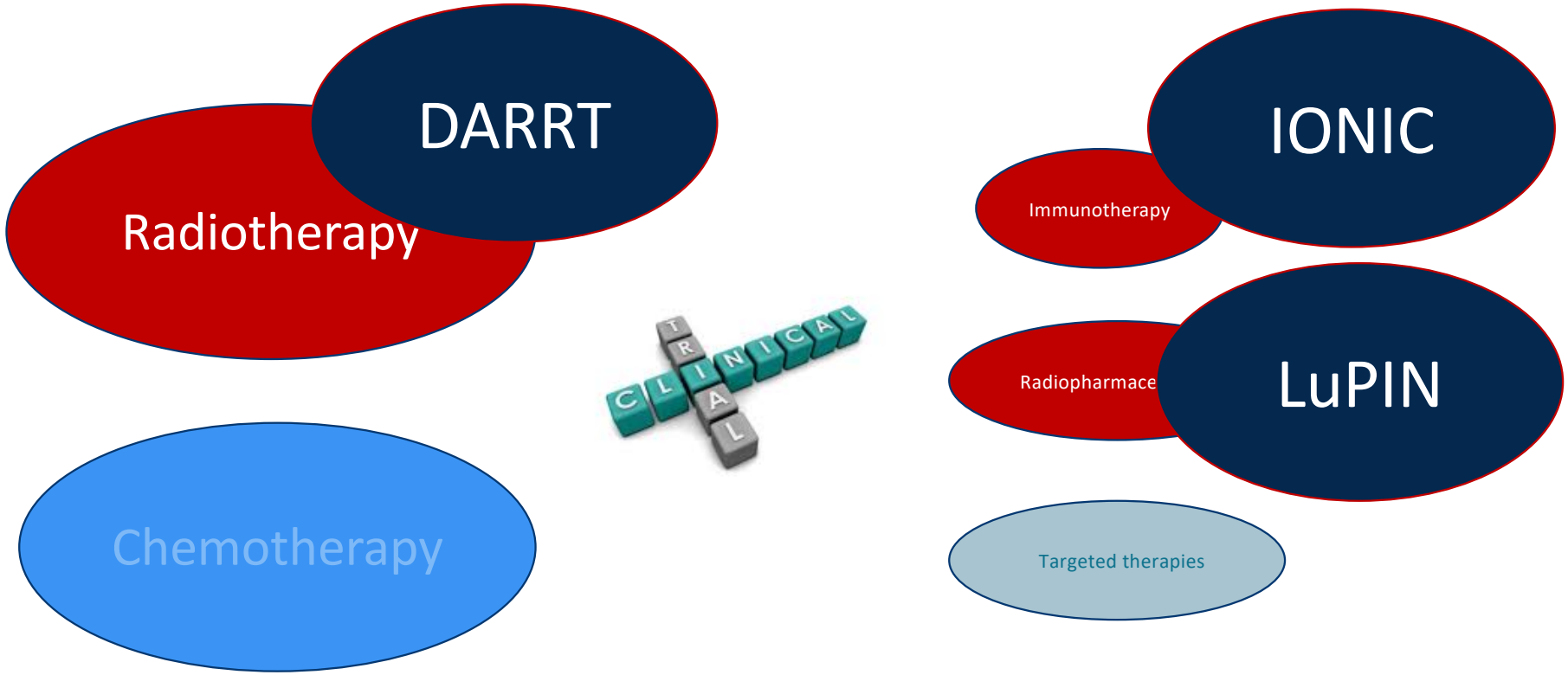
- Radiotherapy
- Chemotherapy



Limited to certain cancer types

- Immunotherapy
- Radiopharmaceuticals
- Targeted therapies

Proof-of-concept being sought by NOX in 3 different cancer treatments



DARRT

Veyonda® + Low Dose Radiotherapy

A revolutionary new treatment for solid cancer

DARRT Program

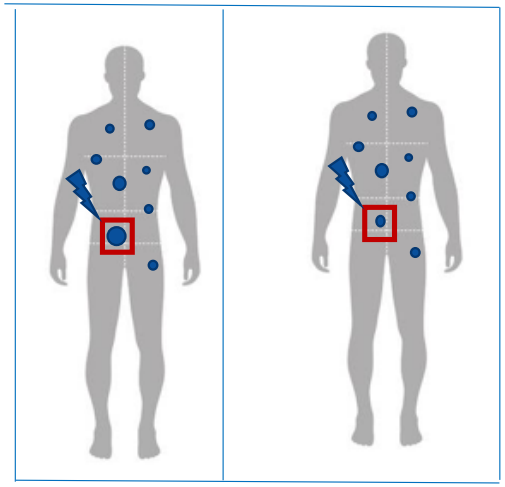
Veyonda® + Low-Dose Radiotherapy

- In metastatic cancer, radiotherapy (RT) generally applied to 1 or 2 individual tumours
- Mainly used for relief of symptoms (eg pain, loss of function)
- No meaningful effect on patient survival or disease progression expected with low-dose RT alone

DARRT Program

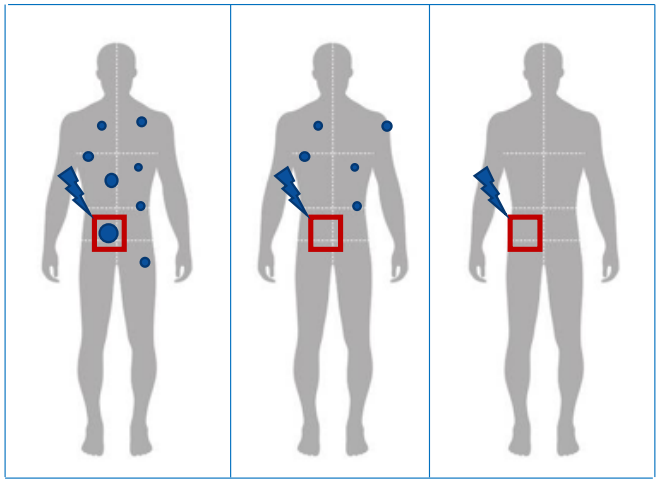
Direct and Abscopal Response to Radiotherapy

- Aim is to deliver a dose of radiation to a single tumour and to shrink or eradicate that tumour
- In the overwhelming majority of cases, the effect of the radiation is restricted to the irradiated tumour
- In extremely rare cases, tumours outside of the field of radiation also shrink. This is an immune response known as an ABSCOPAL RESPONSE



Shrinkage of irradiated tumour

Standard response



Partial abscopal response

Complete abscopal response

Very rare abscopal response

Aim of DARRT therapy is to convert an abscopal response from extremely rare to commonplace

DARRT Program

Low-dose radiotherapy

- ☛ to a single lesion
- ☛ external beam radiotherapy
- ☛ 8-30 Gy
- ☛ 1-10 fractionated doses
- ☛ single cycle of radiotherapy

Veyonda® (NOX66)

- ☛ 21-day cycle: daily dosing for 14 days (7 days rest)
- ☛ starting Day -1
- ☛ repeat monthly cycles (in DARRT-2) until disease progression

RATIONALE

- ☛ standard dose of radiation designed to kill cancer cells
- ☛ low dose of radiation designed to damage cancer cells to trigger an immune response
- ☛ Veyonda used to tip that immune response over into an ABSCOPAL RESPONSE

Features:

- Highly accessible. External radiotherapy readily available
- Cost-effective treatment
- Very well tolerated
- Potential for all solid cancer types

DARRT Program

DARRT-1 Phase 1 trial

26 men with end-stage prostate cancer
- had stopped responding to treatment
- had metastatic and progressive disease
- were considered to have limited life-spans
- were treated with Veyonda + low-dose RT

- **In 10/15* men, tumours stopped growing or reduced in size**
- **10/16** had meaningful pain reduction**
- **Treatment well tolerated**
- **Abscopal responses confirmed in 4 men#**

* 15 patients had measurable disease as per RECIST v1.1 at 24 weeks
** 16 patients were evaluable for pain assessments at 24 weeks

First known demonstration of abscopal responses in prostate cancer in more than isolated cases

DARRT-2 Study Design

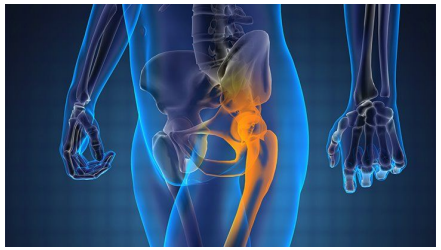
- Phase 1b/2a study
- Differs from DARRT-1 in higher Veyonda dose and repeat cycles
- Multi-national
- Prostate, breast, lung cancers
- 100-150 patients
- Abscopal responses + range of other anti-tumour responses
- Commencing H2 2021

LuPIN

Veyonda® + ^{177}lutetium-PSMA-617

An exciting new treatment for prostate cancer

LuPIN Program



Lu-PSMA-617 is a radioactive drug injected IV and designed to deliver radiation to every prostate cancer cell throughout the body

Acquired by Novartis in 2018 for **US$6 billion**

Proposed new treatment for prostate cancer once the cancer has spread widely

But ……

1/3rd men have little or no response; response in responders not long-lasting

Aim ……

Use Veyonda to boost the effectiveness of the Novartis drug ➡ more men responding as well as achieving significantly longer survival times

Phase I/II study. St Vincent's Hospital Sydney. 56 men. End-stage cancer. No remaining standard treatments. Anticipated median survival approximately 4.5 months

LuPIN: Interim Data Reporting

American Society of Clinical Oncology Genitourinary Cancers Symposium Feb 11-13 2021

ANSWER: Yes, the combination of Veyonda and Lu-PSMA-617 looks to be considerably more effective than Lu-PSMA-617 on its own (*based on published Phase 2 data*[1])

56 men

400 + 800 mg + 1200 mg Veyonda

Median Overall Survival:

19.7 months

a remarkable result for this late stage of the disease

Combination was well tolerated

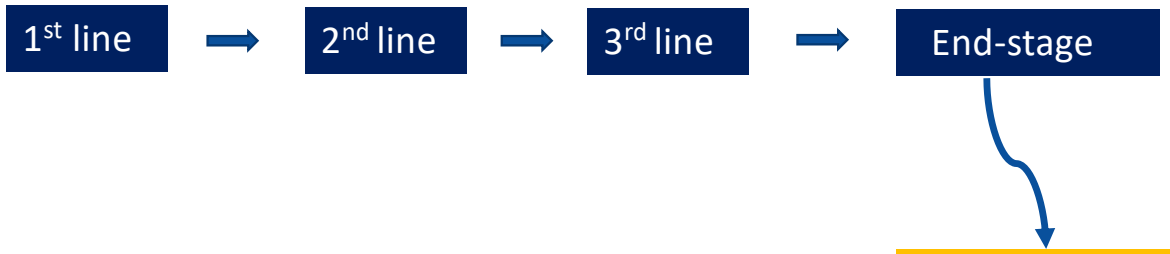
Noxopharm believes this to be a potential major breakthrough in the treatment of Stage 4 prostate cancer

1. https://ascopubs.org/doi/abs/10.1200/JCO.2019.37.7_suppl.228

LuPIN: Interim Survival Data

Median overall survival = *time when half the patients have died and half still alive*

Three standard lines of drug therapy once prostate cancer becomes metastatic



Historical data[1] → ~ 4.5 months

^{177}Lu-PSMA-617 alone[2] → 13.3 months

^{177}Lu-PSMA-617 + Veyonda (56 patients)[3] → 19.7 months

1. Buonerba C, et al. (2014) Future Oncol 10:1353–60. 2. Hofman M, et al. (2018) Lancet Oncol 19, 825. 3. Noxopharm ASX announcement 15 Feb 2021

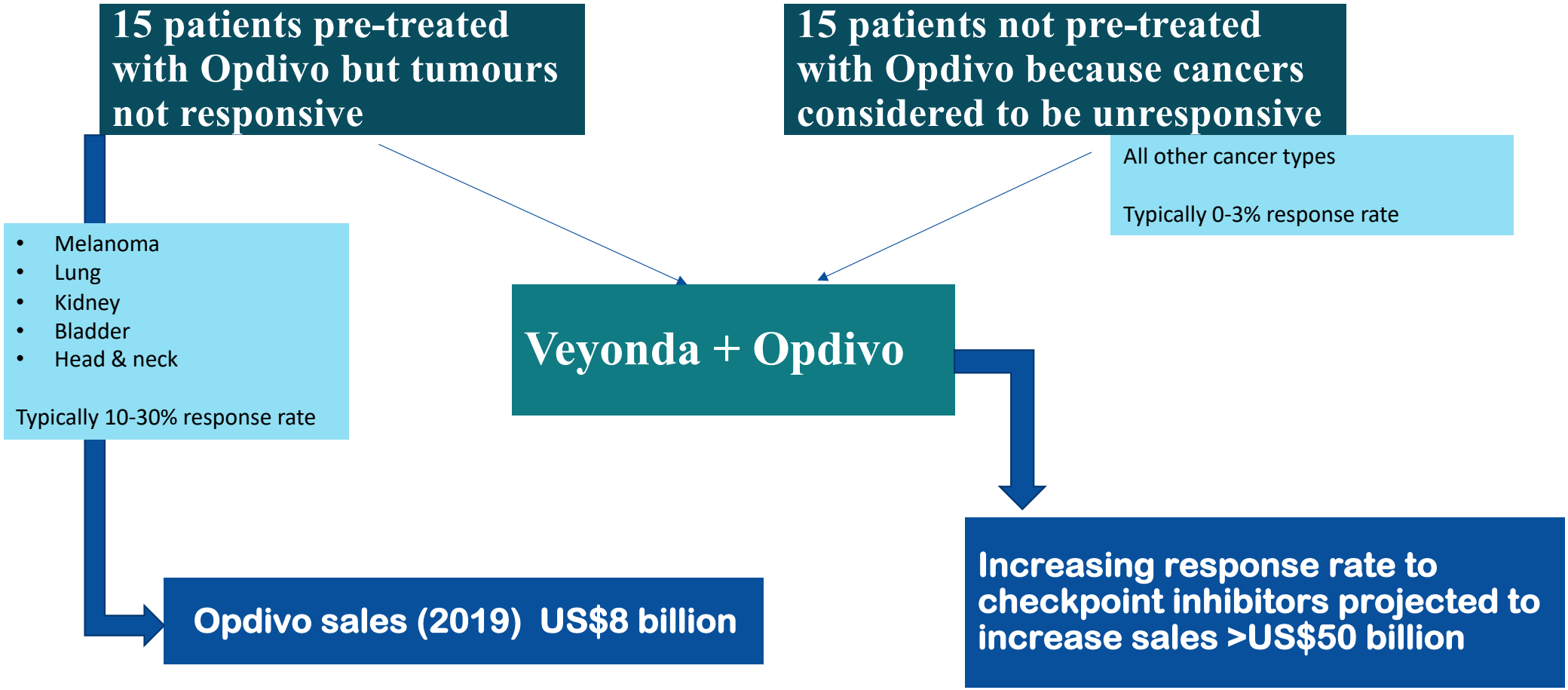
IONIC

Veyonda ® + nivolumab (Opdivo®)

Overcoming resistance to checkpoint inhibitors

IONIC Study

Phase I/II proof-of-concept study



SUMMARY

Both DARRT and LuPIN have provided clear evidence of proof-of-concept

DARRT: **Adding Veyonda** to a low dose of radiotherapy not expected to do anything more than shrink a single tumour, led in men with end-stage prostate cancer to:

- A halt to disease progression or better in 10/15 men
- Confirmed ABSCOPAL RESPONSES in 4 (25%) men, where few reports in prostate cancer exist

LuPIN: **Adding Veyonda** to Lu-PSMA-617 in men with end-stage prostate cancer:

- Resulted in a median overall survival of **19.7** m versus **13.3** m with the Novartis drug on its own

IONIC trial

Veyonda has first-in-class action in the lab in converting COLD tumours to HOT, an action considered vital in overcoming resistance to drugs such as Opdivo (Bristol Myers Squibb)

Veyonda is well tolerated as a combination treatment

Our commercial end-point for Veyonda

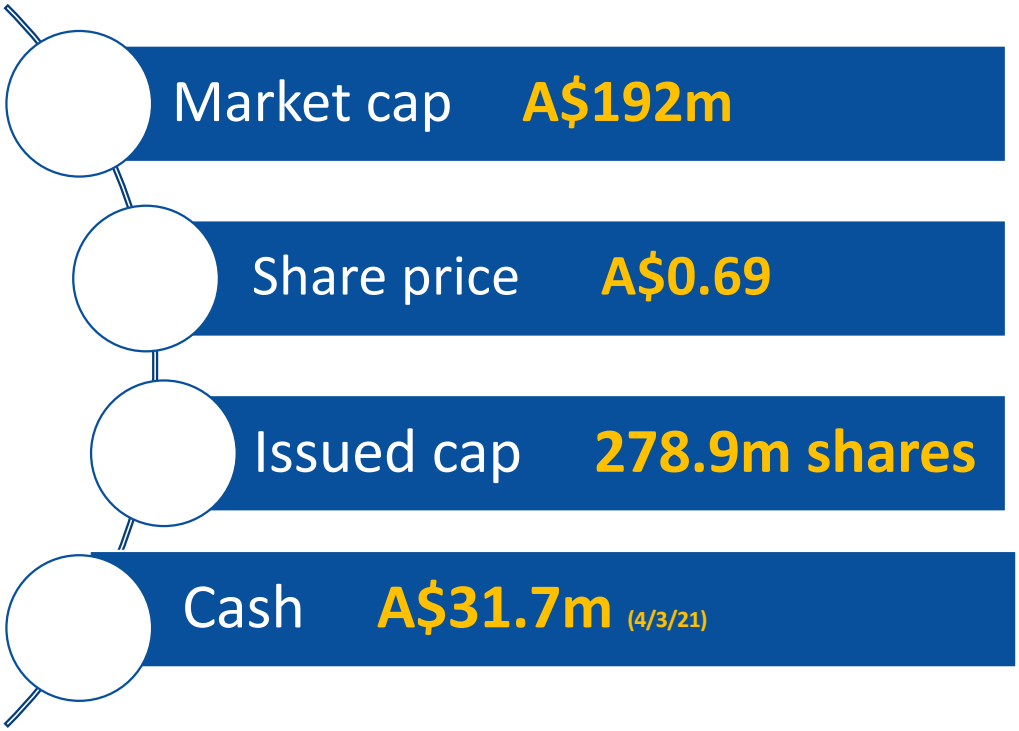
A number of important blockbuster (>US$1 B annual sales) drugs are losing their exclusivity over coming years. This is putting pressure on big pharma to refresh revenue streams through M&A activity

Programs focusing on immuno-oncology and cell therapy remain the most attractive targets for partnering

In 2020, 52 deals >US$1 billion were transacted, 31 of these were for immuno-oncology and cell therapy assets and platforms

Key metrics

as at 12 March 2021



News Flow (next 6 months)

- IONIC-1 and DARRT-2 start patient recruitment
- COVID-19 clinical trial completion
- Growing first-in-class drug pipeline
- Pharmorage (subsidiary) progressing novel drug development for sepsis and autoimmunity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