Investor Presentation, June 2016

Noxopharm (ASX:NOX)

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NOXOPHARM

Noxopharm is focused on the problem of drug-resistance in cancer patients and how it can be overturned in order that standard cytotoxic chemotherapy, the backbone of cancer therapy, can be made:

- more effective
- safer and
- available to more patients

This is a story of:

Idronoxil, a molecule that overturns cancer drug-resistance mechanisms

&

NOX66, an innovative way of delivering idronoxil designed to ensure its ability to work in humans

&

an objective to see **NOX66** become standard of care for patients with solid cancers being treated with cytotoxic chemotherapy

NOXOPHARM

An unwelcome truth

1:2 men and 1:3 women will develop a life-threatening cancer

30% will die from that cancer within 5 years

Cancer Therapy Options

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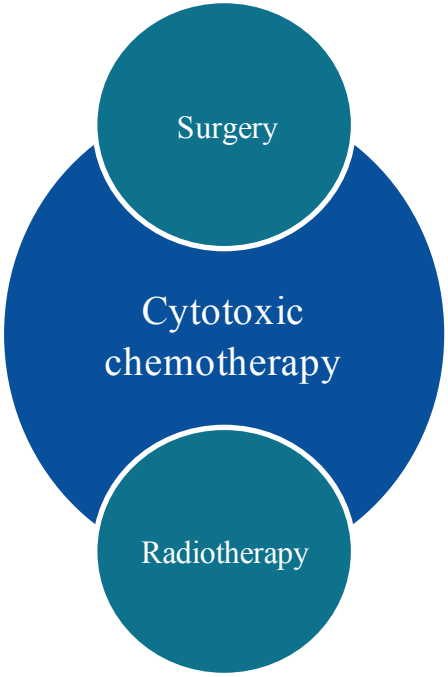
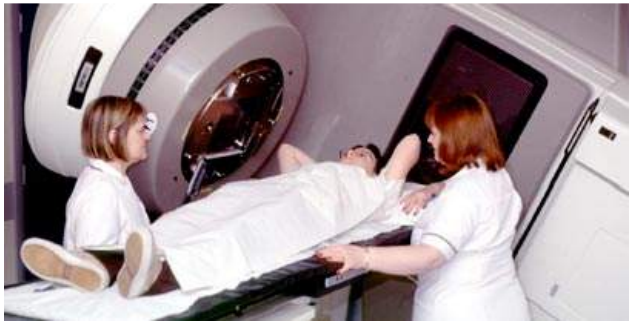
Frontline / First Line Therapies



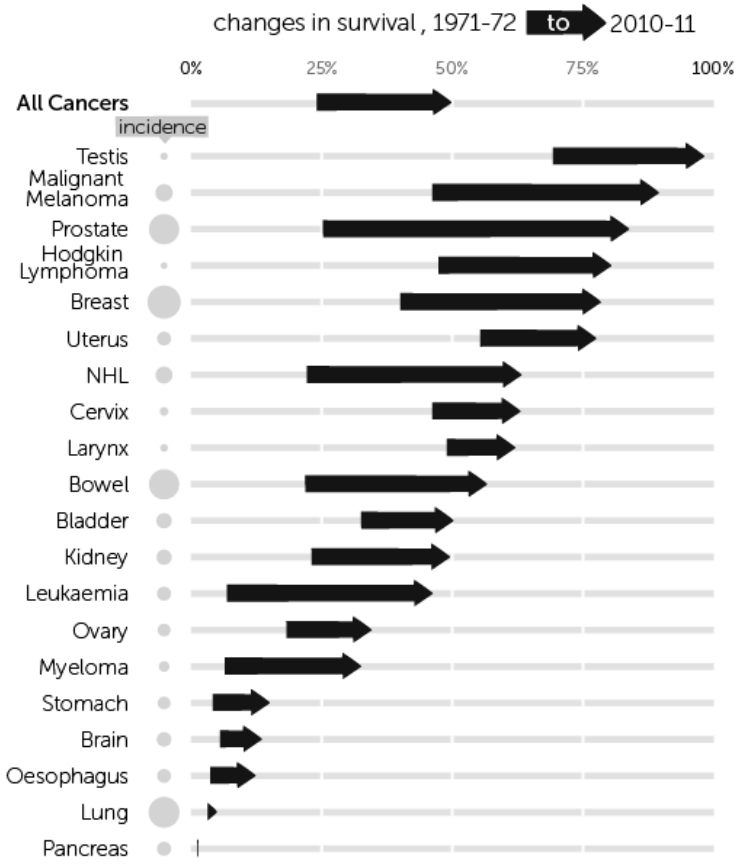
Second Line Therapies

- Immunotherapies
- Hormone Therapies
- Anti-angiogenics
- Gene silencing/anti-sense
- Targeted therapies

Therapies that damage/ kill cells
(cytotoxic therapy)
remain the backbone of cancer therapy



After 45 Years of **Cytotoxic Chemotherapy**…



Little or no progress made in survival outcome for cancers of:

- Pancreas
- Lung
- Brain
- Head and neck
- Oesophagus
- Stomach
- Cervix
- Bladder

BUT….even where progress has been made, many cancers eventually recur and ultimately become resistant to chemotherapy leaving few other therapeutic options

Drug-Resistance: major obstacle to successful chemotherapy

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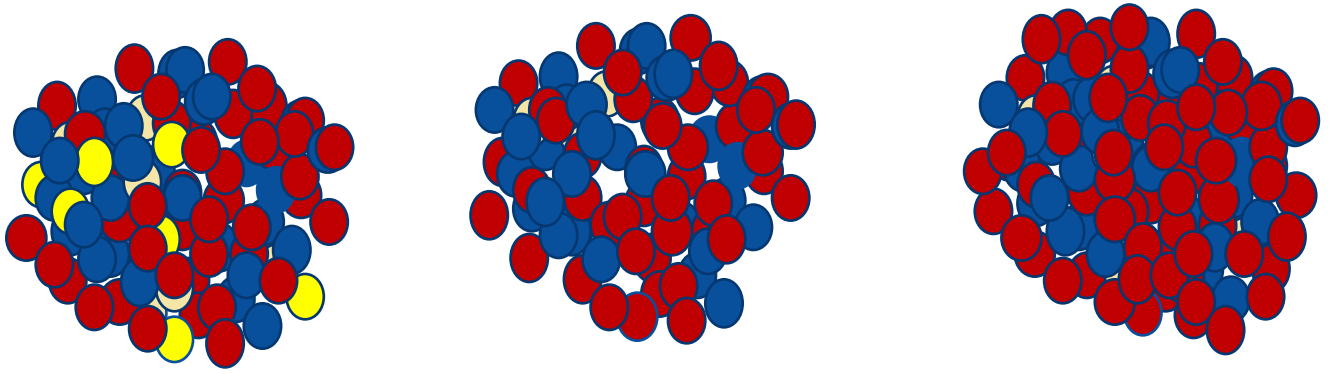
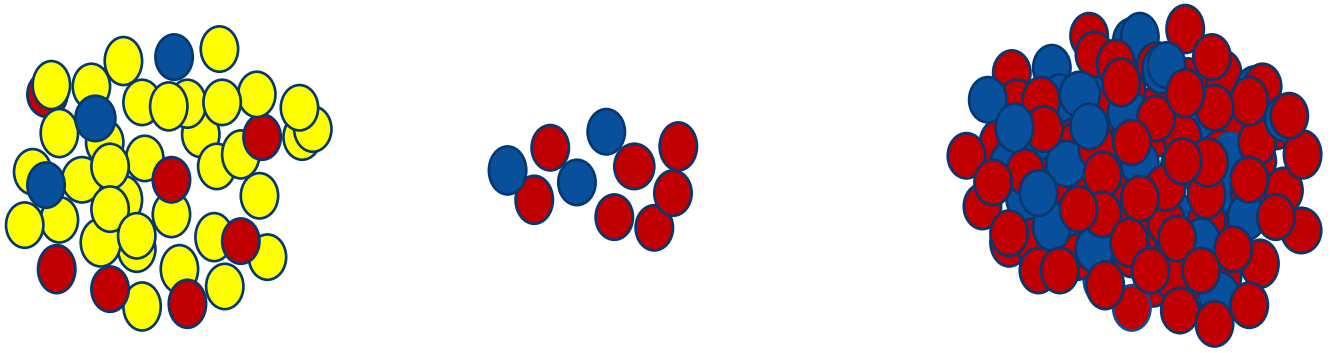
Pre-treatment | Response | Recurrence

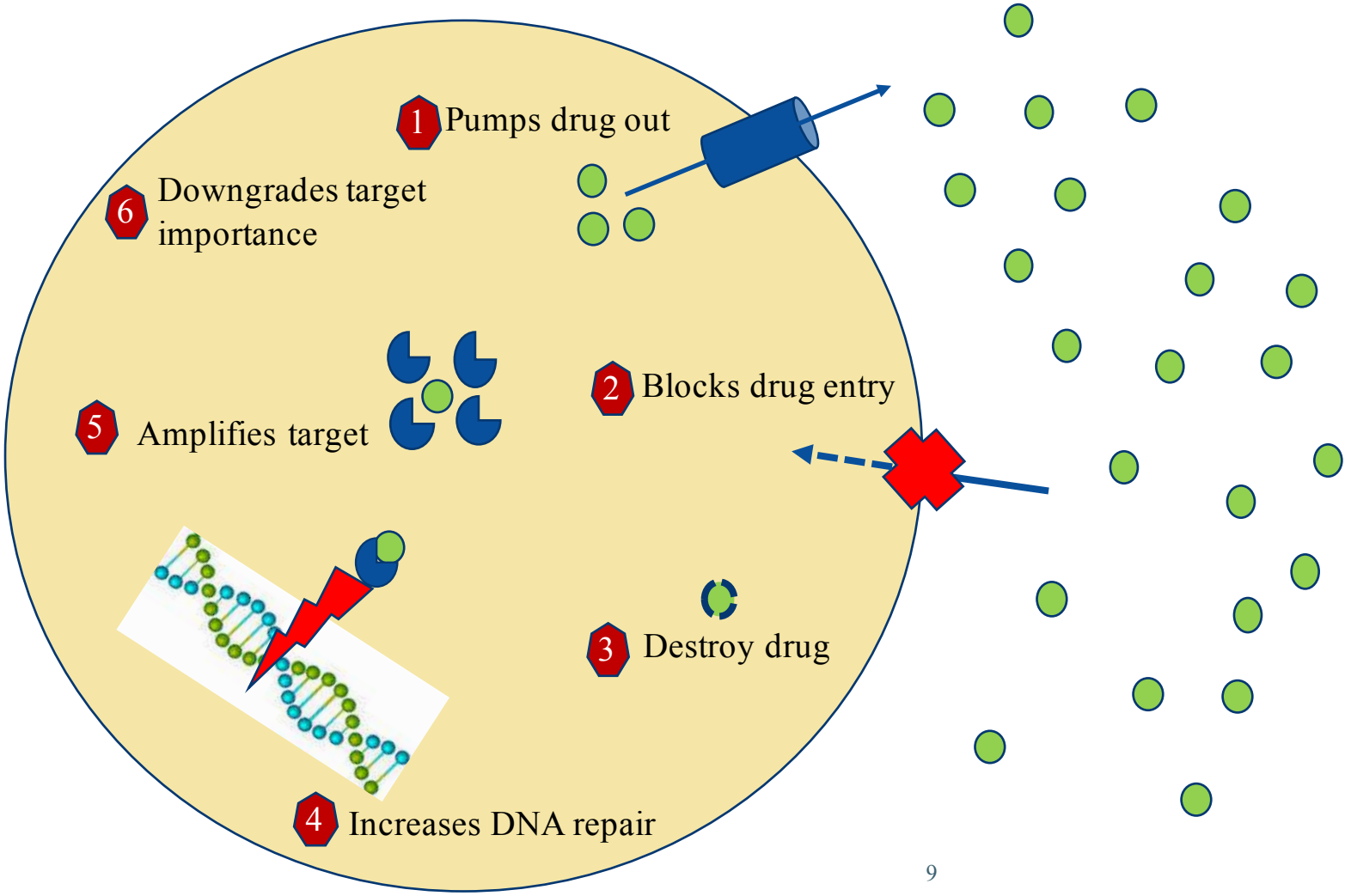
Primary resistance:
Resistant to first-line Rx
(pancreatic cancer, melanoma)



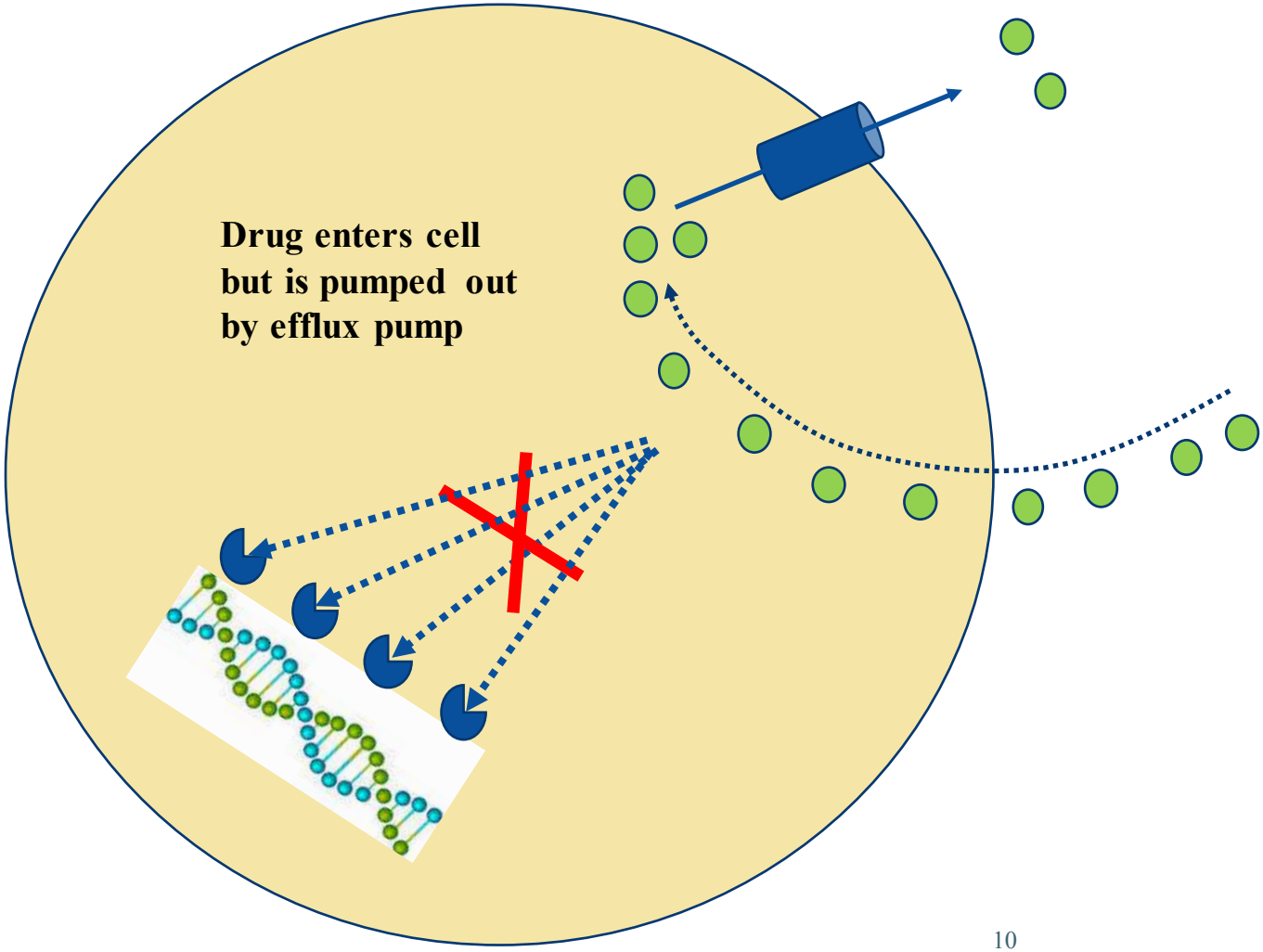
Acquired resistance:
Respond to first-line Rx, then develop resistance



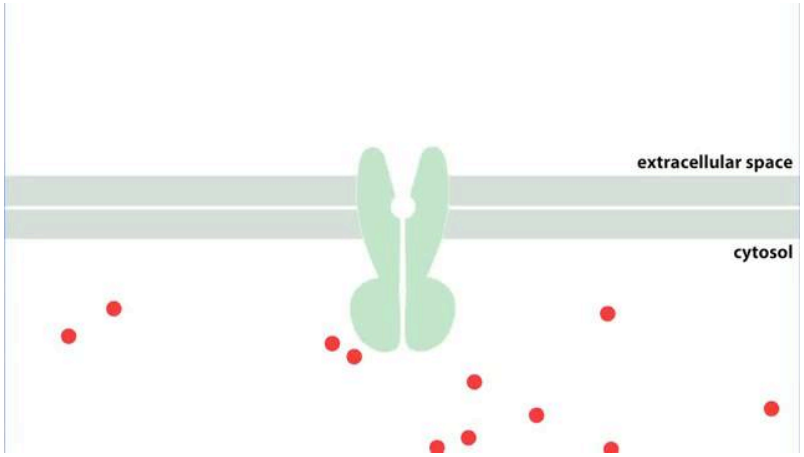
Drug-Resistance: *multiple mechanisms*



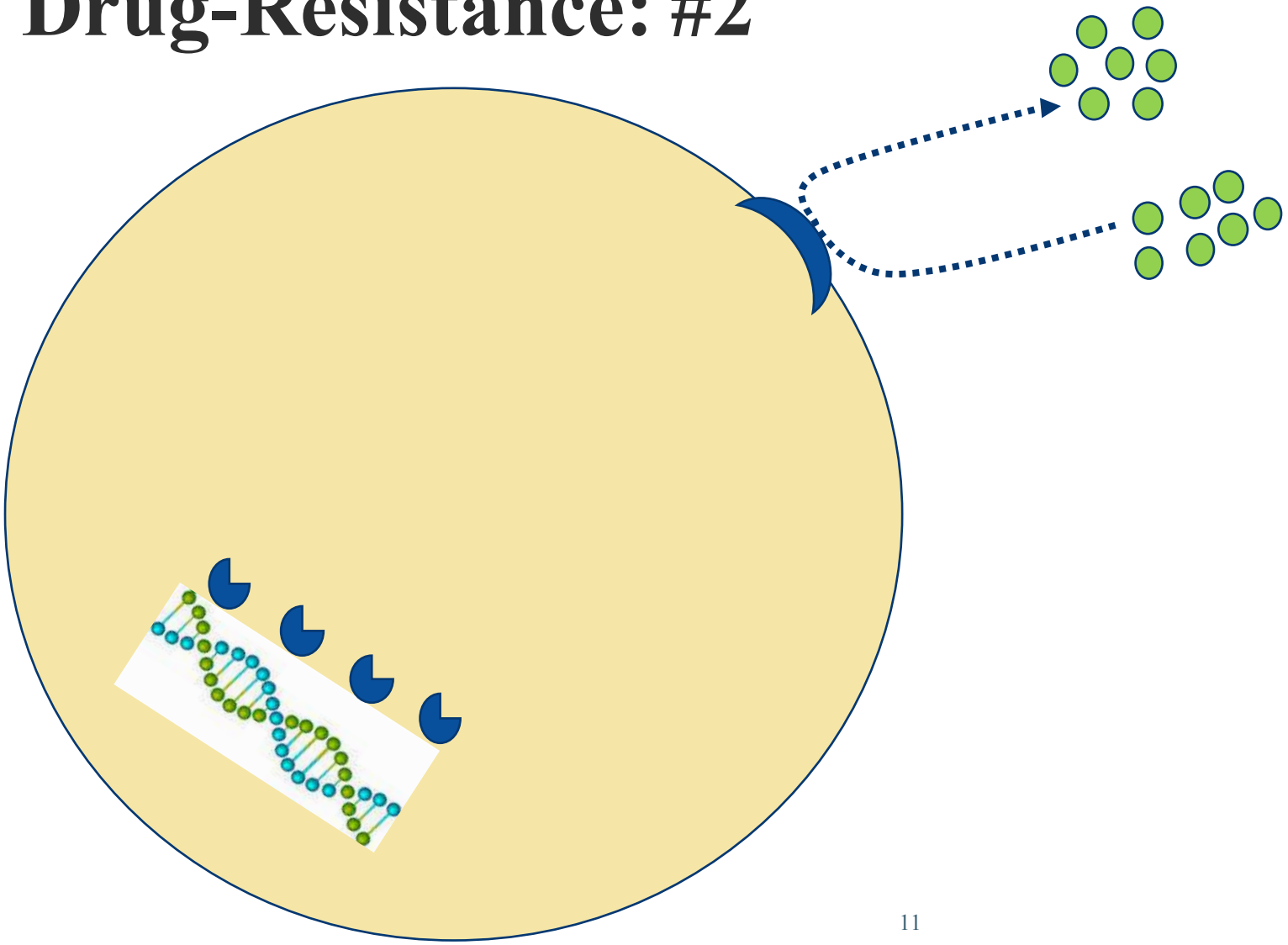
Drug-Resistance: #1



Drug cannot reach its target



Drug-Resistance: #2



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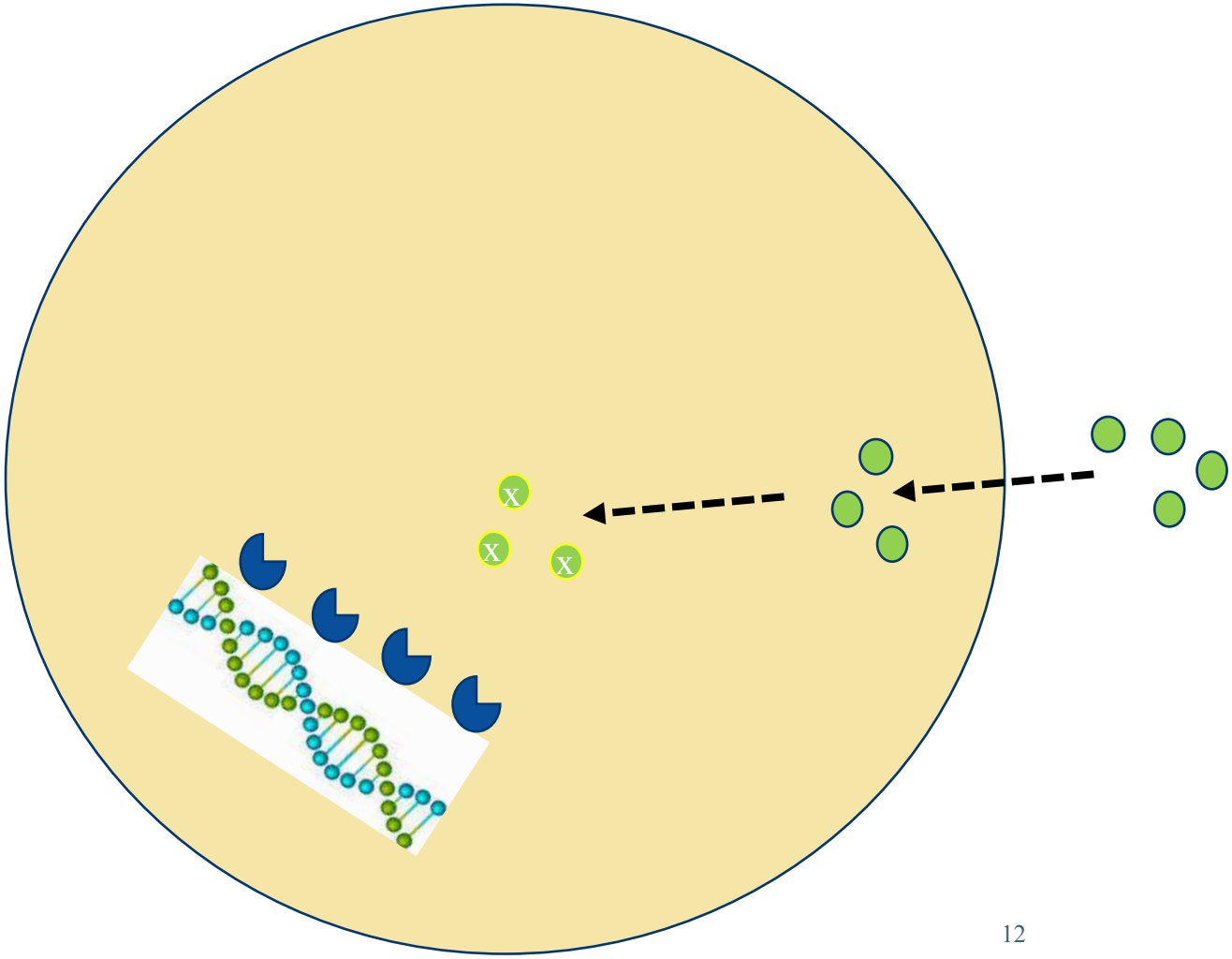
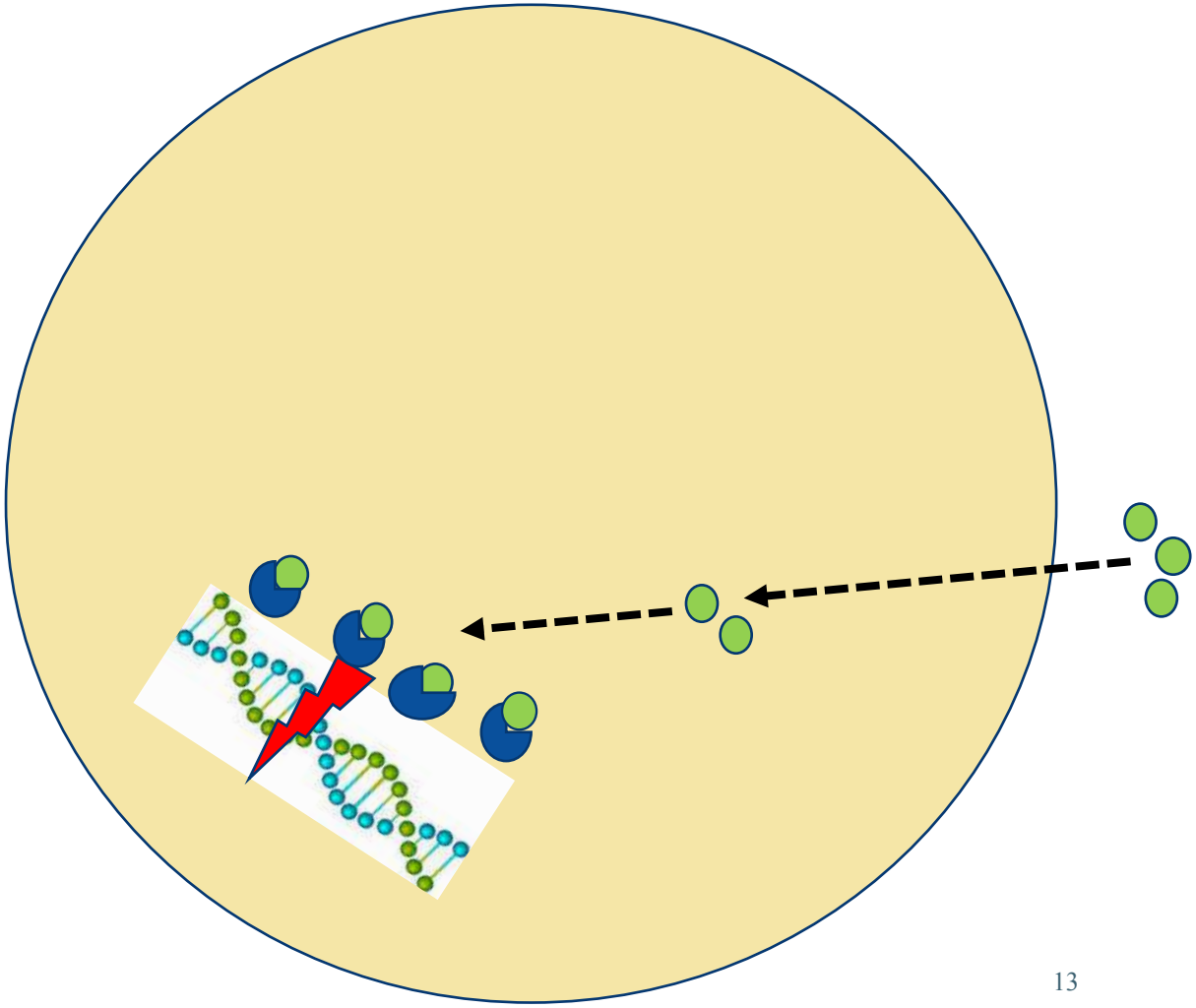
Drug blocked from entering cell

Drug-Resistance: #3



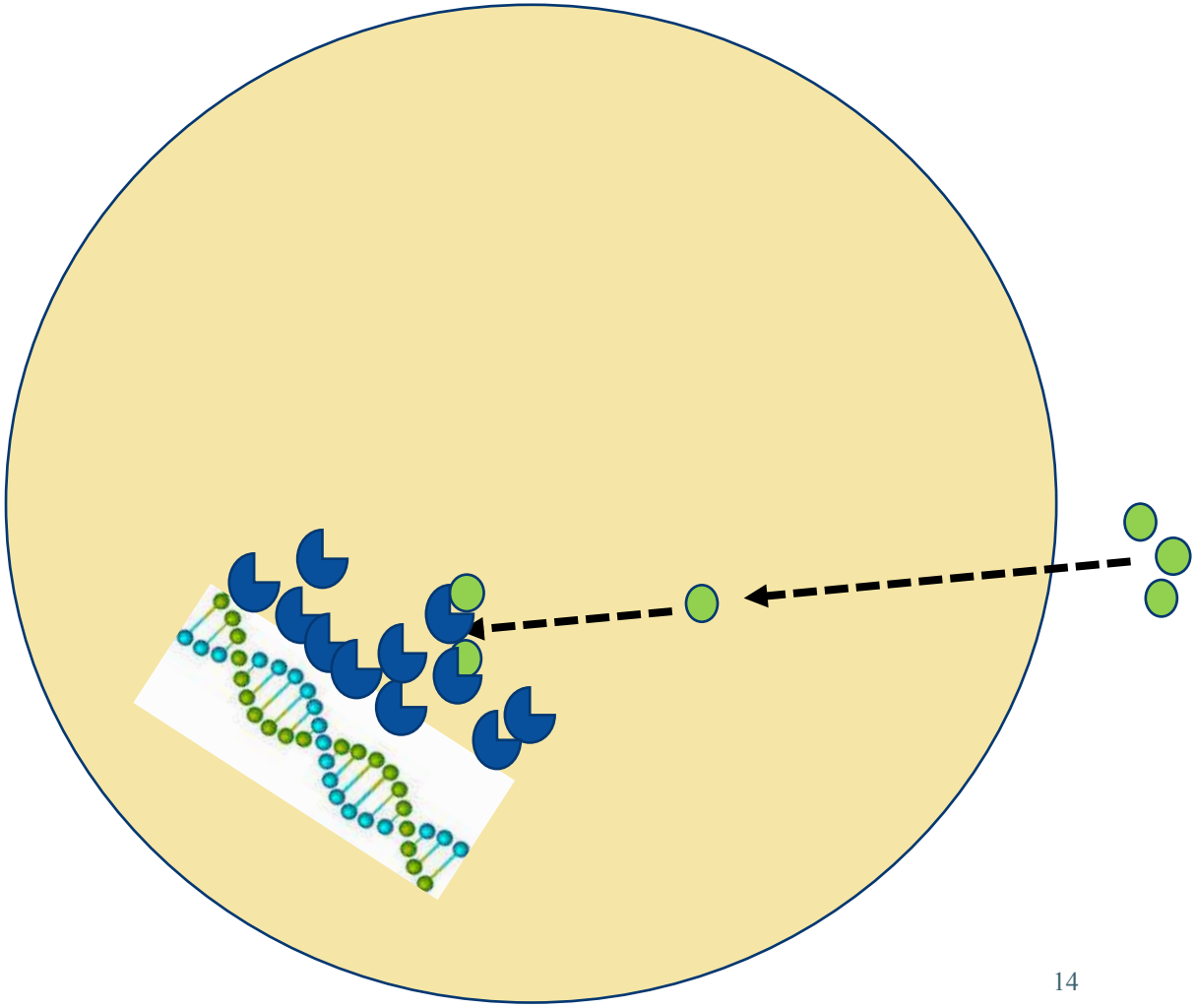
Drug enters cell but is destroyed before it can act

Drug-Resistance: #4



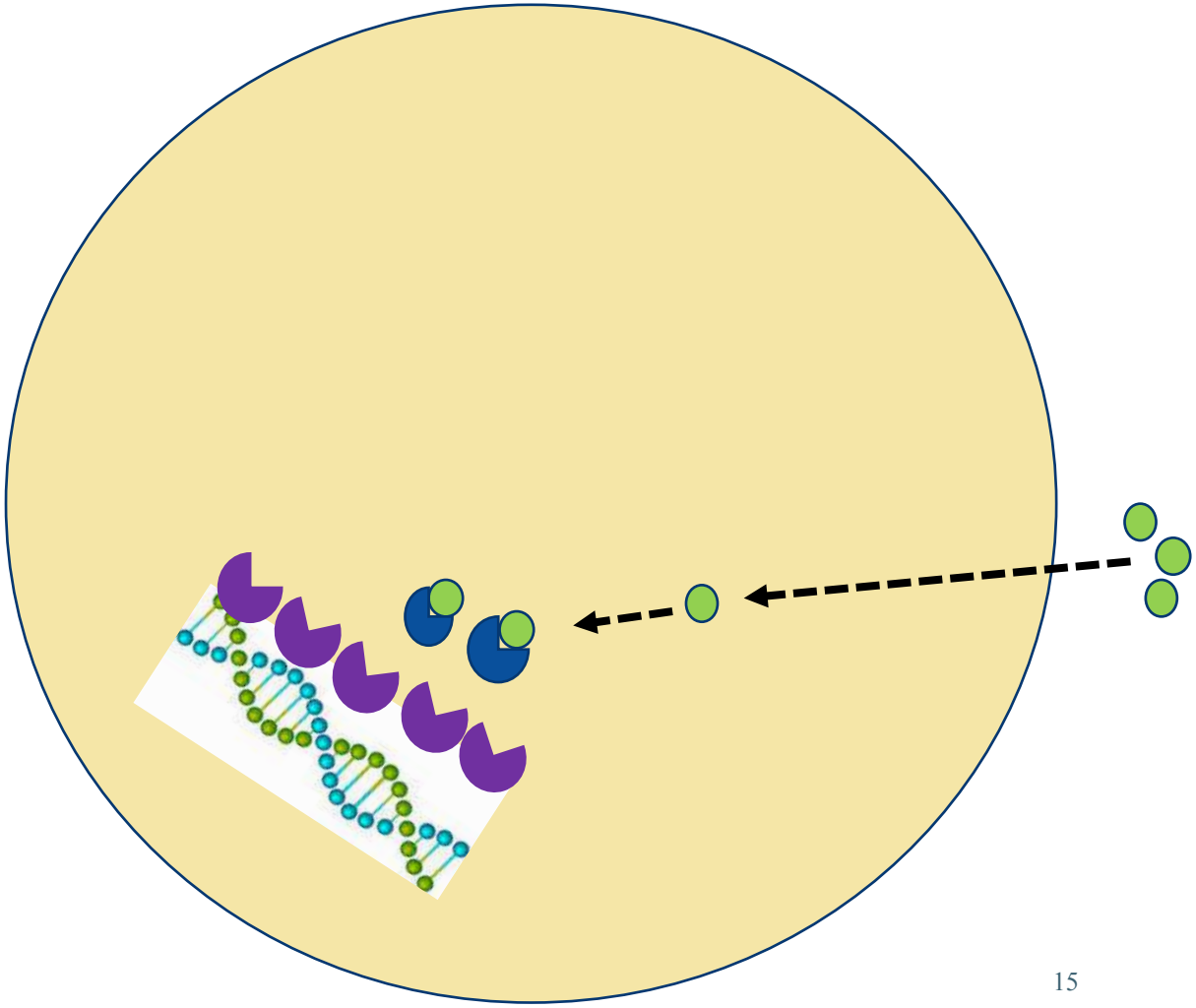
Drug inflicts damage but cell up-regulates repair mechanisms

Drug-Resistance: #5



Cell amplifies target: drug loses effectiveness

Drug-Resistance: #6



Cell downgrades importance of target: uses alternative pathway

Why drug-resistance to cytotoxic drugs is hard to over-ride

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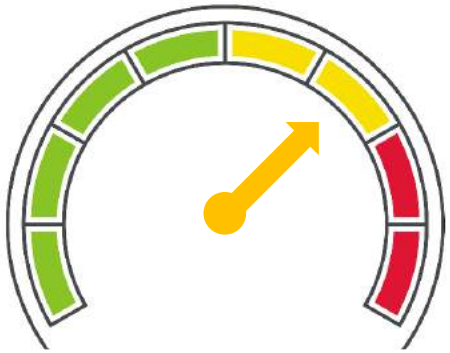
- **Poison action:** Cytotoxic drugs work by damaging the cell
- **Action is non-selective:** Also damage healthy cells (bone marrow, hair follicles, gut lining, nerves)
- **Restriction:** Toxic side-effects restricts dosages to sub-optimal levels

Drug dosage that might kill most cancer cells

But....would be lethal to patient.



Current dosage levels

Kill <100% cancer cells.

But…..tolerable toxicity.

Noxopharm Aim

To overturn drug-resistance to the most commonly-used chemotherapies

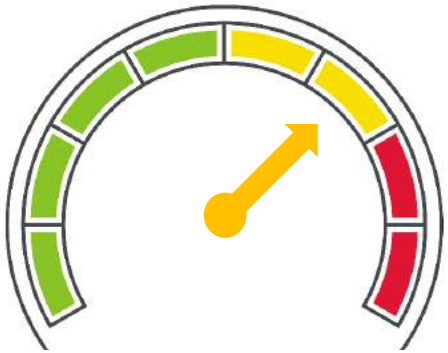
- Improved response rates in most forms of solid cancers
- Allow drug dose rates to be lowered to reduce toxicity
- Permit chemotherapy in elderly/frail patients
- Provide safer chemotherapy in children

Chemotherapy Dosage/Toxicity

Toxic dosage

100% cancer cell kill.

Lethal toxicity to patient.



Current dosage

<100% cancer cell kill.

Tolerable toxicity.

Optimum dosage

100% cancer cell kill.

Little or no toxicity.

NOX66 is intended to achieve this

Noxopharm: The Company

Experienced Team

Graham Kelly *PhD*
Managing Director

- Head of research team at University of Sydney that discovered idronoxil in 1992
- Founded (CEO) Novogen Ltd (ASX 1994; NASDAQ 1998). Executive Director 1994-2006)
- Chairman of Marshall Edwards Inc (AIM 2001; NASDAQ 2003)
- CEO/Executive Chairman Novogen Ltd 2012-2015
- Founded Noxopharm October 2015

Dr Ian Dixon *PhD, MBA*
Non-Executive Director

- Over 20 years' experience in the biotechnology and medical device industries and was founder/co-founder of numerous successful technology companies, including Cynata Ltd, Genscreen Pty Ltd and August Therapeutics.
- Previously a non-executive Director of Cell Therapies Pty Ltd, and Director of the Product Group at Invetech, now part of Danaher Corporation (NYSE: DHR).
- Led early development of the anti-tropomyosin drug technology that his company licensed to Novogen Ltd.

Peter Marks
Non-Executive Chairman

- 30+ years experience in corporate finance, specializing in capital raisings (for listed and unlisted companies), underwriting, IPOs and venture capital transactions.
- Participated in over $2B in public and private capital raised.
- Executive and Non-Executive Director of a number of listed entities on the ASX and AIM

Phillip Hains *MBA*
Company Secretary

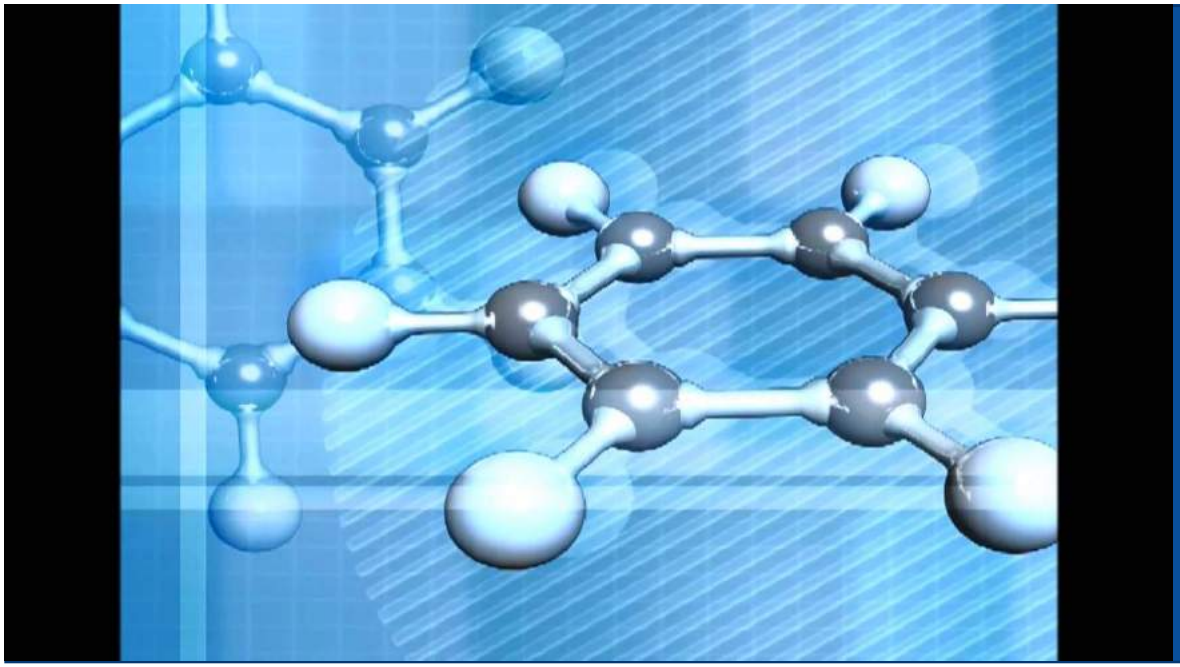
- Phillip holds a Masters of Business Administration from RMIT and a Public Practice Certificate from the Institute of Chartered Accountants.

  As a chartered accountant, Phillip operates his own specialist public practice, The CFO Solution, providing back-office support, financial reporting and compliance systems for public companies.

  Phillip has over 20 years' experience in providing businesses with accounting, administration, compliance and general management services.

Investment Highlights

Pharmaceutical field	• Chemo-sensitisation. Making standard cytotoxic chemotherapies more effective by overcoming drug-resistance
Objective	• Bring NOX66 to market to improve response to current standard of care drugs plus reduce side-effects
Market Size	• Most patients with life-threatening solid cancers
Significantly derisked	• Re-purposing of a clinically tested drug candidate
Team	• Board experienced in biotech start-ups. CEO experienced in founding/driving public biotech companies and in drug development



The Science

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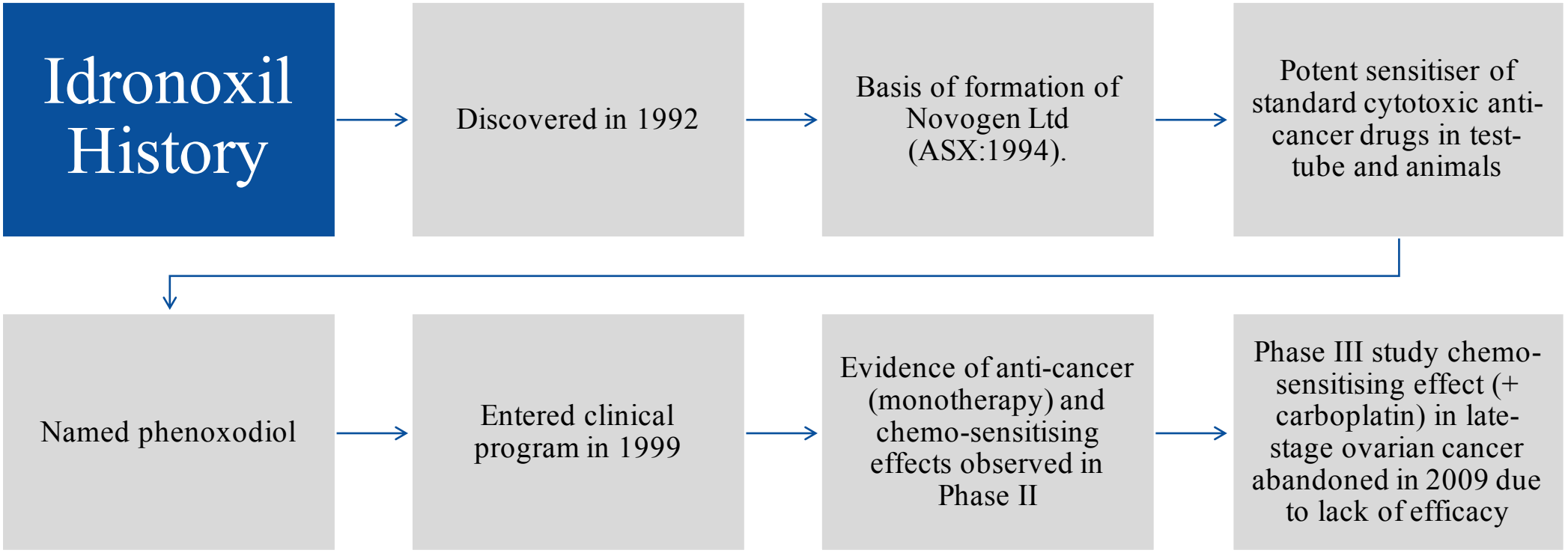
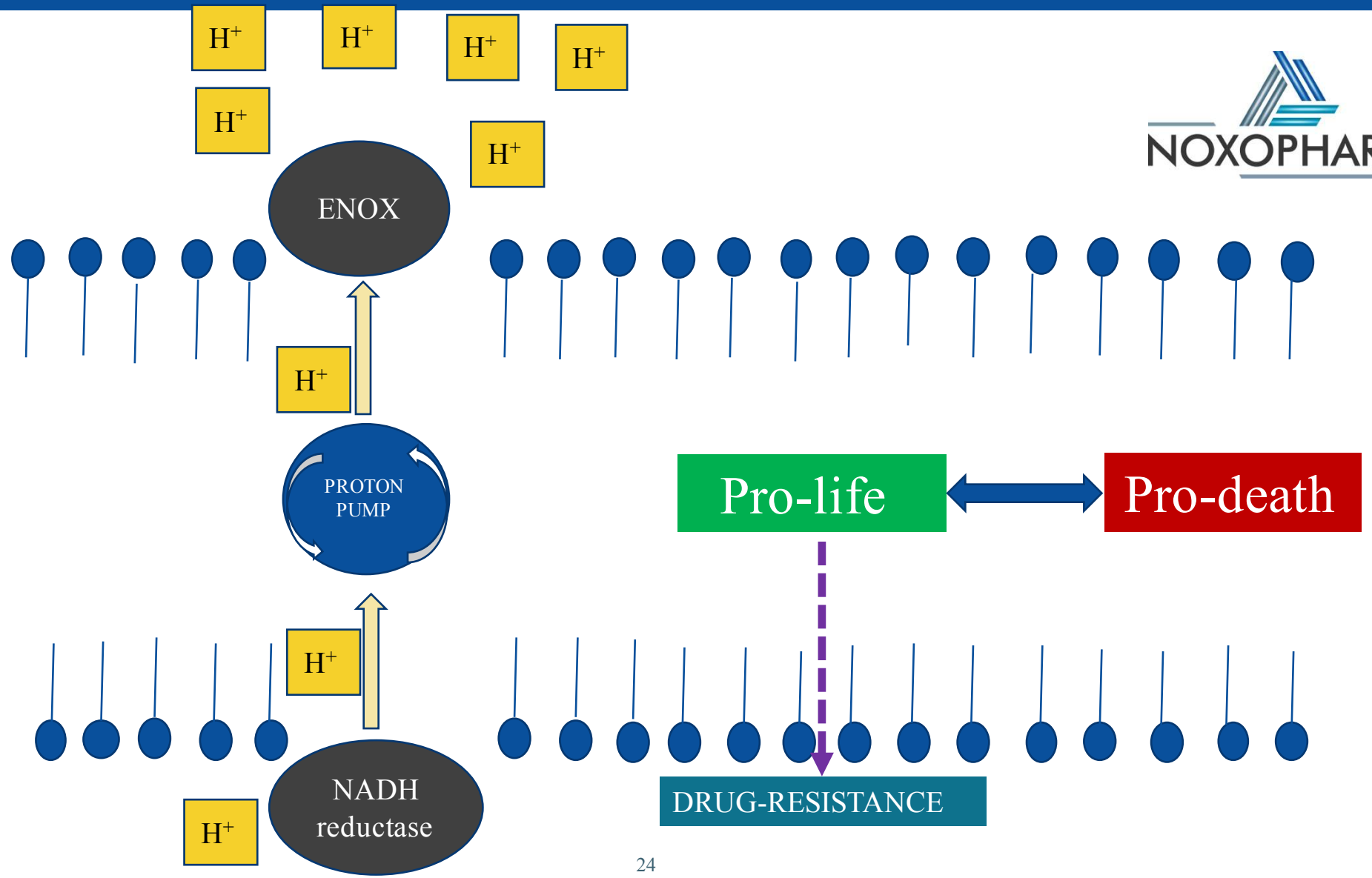
Idronoxil History




H+
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ENOX
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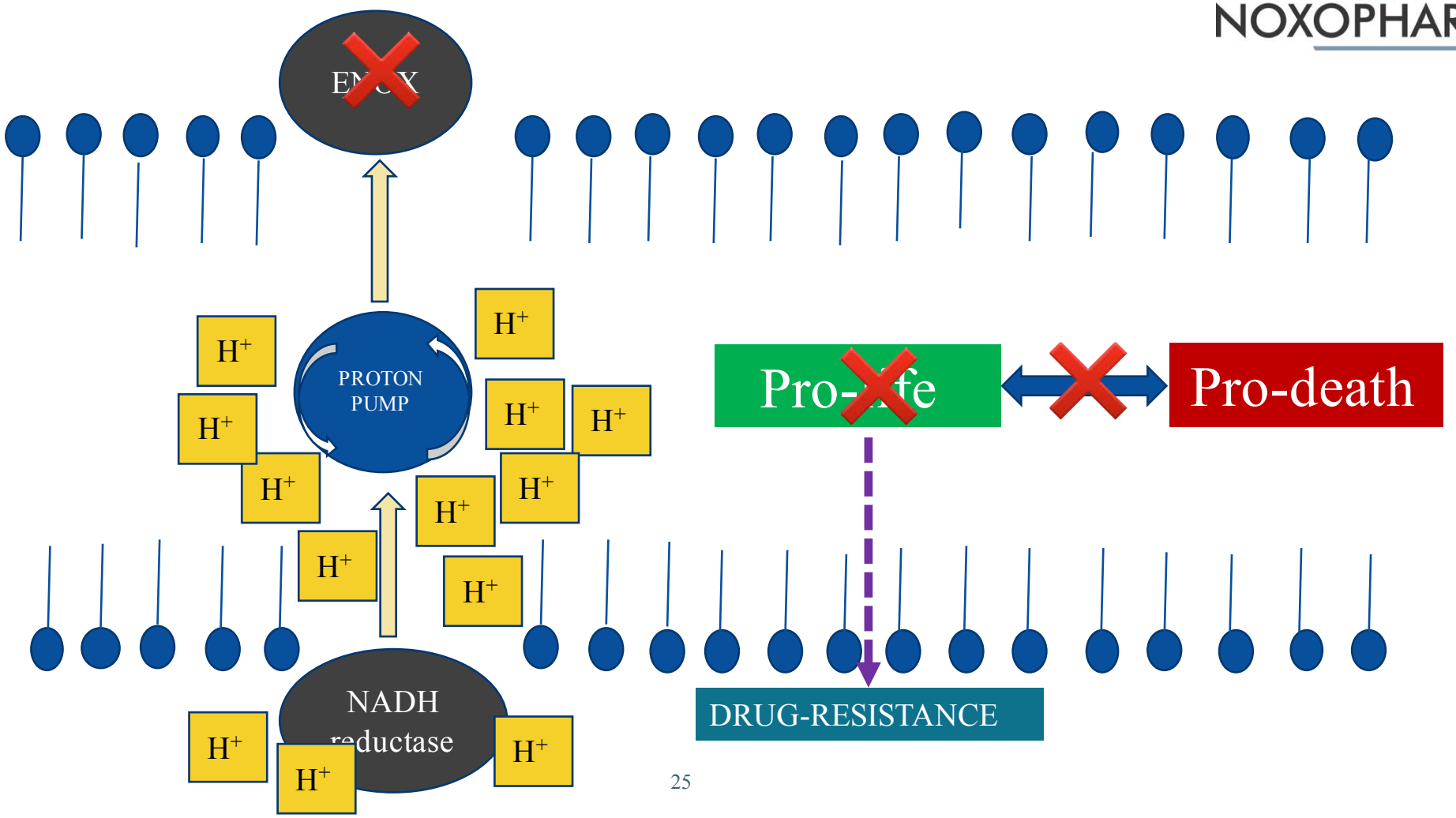
PROTON PUMP
H+
H+
NADH reductase
Pro-life
Pro-death
DRUG-RESISTANCE

idronoxil



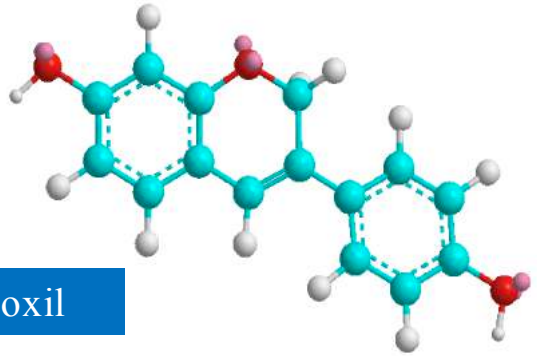
Noxopharm rebirth idronoxil

Noxopharm has re-birthed idronoxil because

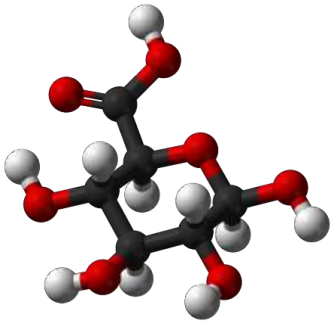
- We consider it remains the most potent INHIBITOR of cancer drug resistance mechanisms yet developed
- It overturns resistance to the most commonly-used chemotherapies in oncology
- It works on all major cancer types
- Its target is only found on cancer cells and therefore only enhances killing of cancer cells
- It works on cancer cells with primary drug resistance
- It works on cancer cells with acquired drug resistance
- Its ability to work is unaffected by multi-drug resistance mechanisms

We believe we know why idronoxil failed when used before and now how to administer it to enable it to work

The Problem: Phase 2 Metabolism



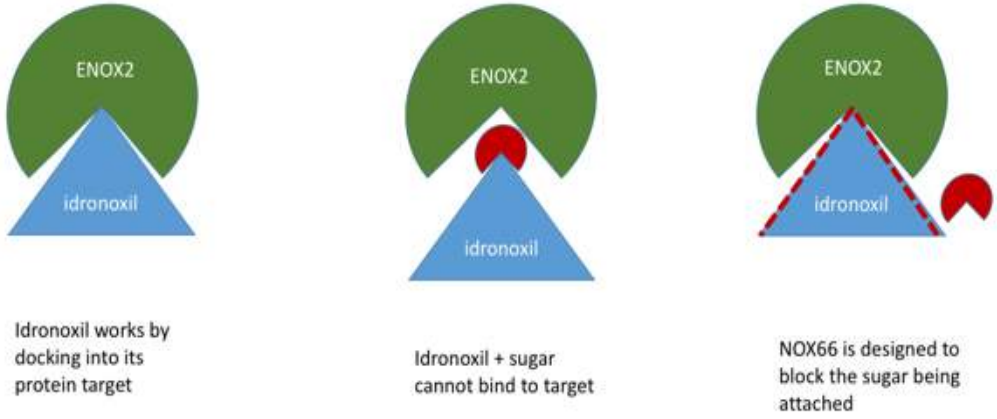
idronoxil



glucuronic acid

Body attaches sugar to idronoxil: blocks access to target

NOX66 – designed to allow idronoxil to work



NOX66: innovative formulation designed to prevent Phase 2 metabolism

Clinical Program

NOX66: Potential Clinical Indications

Overcome a cancer cell's resistance to:

- Cisplatin
- Carboplatin
- Paclitaxel
- Docetaxel
- Gemcitabine
- Doxorubicin
- Topotecan

Primary Resistance	• Improve response rates where first-line treatments currently poorly effective *(eg. pancreatic cancer, lung cancer, melanoma, mesothelioma)*
Acquired Resistance	• Provide opportunity to achieve response in drug-resistant late-stage cancers following multiple lines of therapy
Reduced Toxicity	• Allow lower dosages of cytotoxic chemotherapy to be used • Enable chemotherapy in elderly or frail patients • Reduced long-term toxicity issues in children

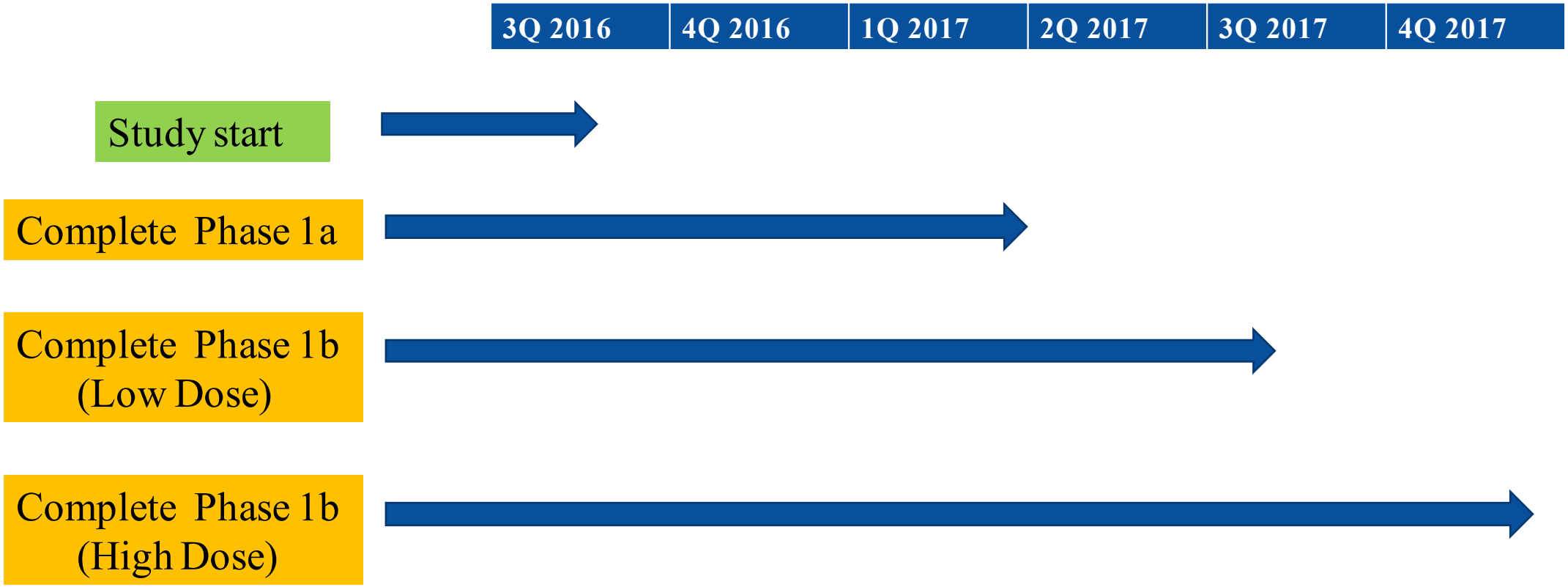
NOX66: Phase 1a/1b Clinical Study

Number of sites	2 (planned recruitment, 1.5 patient per site per month
Territory	Eastern Europe
Commence	Q4 2016
Patients	Solid Tumours • that have failed to respond to standard therapies, or • where the patient has elected not to receive therapy, or • where the patient is unable to receive standard dosages of chemotherapy.
Number of patients	15
Outcomes	Primary: Safety of NOX66 alone and in combination with carboplatin Secondary: Clinical response
Two studies in 1	Phase 1a (NOX66 monotherapy) Study followed immediately by Phase 1b (NOX66 + carboplatin) Combination Study
3 NOX66 dosage cohorts	5 patients per dosage cohort at 3 dosages - 400, 800, 1200 mg idronoxil per day
Phase 1a	14-days continuous
Phase 1b	NOX66 Days 1-7; carboplatin Day 2 6x treatment cycles (28-days)
Carboplatin	low dose (AUC=4) 3 cycles followed by standard dose (AUC=6) 3 cycles

NOX66: Potential Phase 2a Study

Adaptive design	• Phase 2a Study triggered by meaningful clinical responses (complete or partial remission) in Phase 1b Study • Immediate recruitment • 2 additional cohorts; 10 patients per cohort • 2 specific tumour types • 6 treatment cycles of NOX66 + carboplatin
Purpose	To inform on clinical indications for later stage studies

Proposed clinical study timeline



The Offer

Key Offer Statistics

Cap structure

Existing NOX Shares	45,172,429
New Shares Offered	30,000,000
Total Shares at re-listing	75,171,429
Options*	22,500,000
Performance Shares**	10,000,000

Offer details

Offer price per Share	A$0.20
Cash proceeds from Offer	A$6.0M

* Exercise price = $0.30; expiry Feb 2021

** Achieves market cap of $50,000,000 before 28 February 2021

Use of Proceeds

AUD$6 million			
Cost of Offer	Phase 1b Clinical Study	Research & Development	Working Capital
	Phase 1a/1b/2a	Develop core technology for 2nd generation drugs	• Administration • Working capital
$0.51M	**$2.50M**	**$0.55M**	**$2.80M***

* Includes $0.37M pre-IPO cash

Key Investment Risks

Clinical Trials	Clinical trials may prove unsuccessful
Intellectual Property	Key patents may not be granted, allowing others players to enter the same market Others may claim infringement of existing IP
Competition	Other drugs unknown to the Company and with similar or greater benefit may be under development
Additional Funding	Company has no revenue. Further capital will need to be raised in the future to progress the technology beyond Phase 2a. This will be dilutive to existing shareholders

Concluding Remarks

Major Opportunity

Drug-resistance major block to more successful cancer therapy

↓

Noxopharm believes idronoxil is the most potent reverser of drug-resistance

↓

Delivering idronoxil to humans in a form that works has proved challenging

↓

Noxopharm believes it has solved the problem…NOX66... an innovative method of delivering idronoxil

↓

Noxopharm believes that NOX66 has the potential to revolutionise cancer therapy

Value Drivers

Large market size	Lack of competition	Experience	Clinic-ready	Expeditious clinical plan
Substantial unmet need for most patients with solid cancers	No current drug or known drug in development with same ability to reverse drug-resistance	Over 20 years' experience with this technology generally and this drug specifically	Phase 1 study to commence in 2H16	Indication of efficacy potentially available within 18 months

Key Messages

- Resistance to cytotoxic chemotherapy remains the most pressing and largest problem facing patients
- No drug has come to market that successfully treats this problem
- Idronoxil holds that promise but faltered at the final hurdle
- Noxopharm is confident it knows why it faltered and is confident that it has resolved the problem
- NOX66 is a new dosage formulation of idronoxil designed to enable it to work

✓ Lean, focused operation

✓ Key inflection points likely within next 18 months

✓ Potential for NOX66 to become standard of care

Contact

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