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NOXOPHARM CORPORATE PRESENTATION, SEPTEMBER 2016

ASX: NOX

Noxopharm Limited

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Registered Office: Suite 1 Level 6 50 Queen St Melbourne VIC 3000 Australia

Board of Directors Mr Peter Marks Chairman Non-Executive Director

Dr Graham Kelly Chief Executive Officer Managing Director

Dr Ian Dixon Non-Executive Director Ahead of a roadshow commencing 12 September in Asia, Noxopharm has today released an updated corporate presentation incorporating expansion of its NOX66 clinical program into both chemotherapy and radiotherapy indications as announced recently.

The Corporate presentation can be found on the Company's website <u>www.noxopharm.com</u>

About NOX66

NOX66 is an innovative dosage formulation of idronoxil, a compound that down-regulates prosurvival mechanisms in cancer cells, including the cell's ability to establish and maintain a range of drug-resistance mechanisms. The primary target of idronoxil is tumour-specific external NADH oxidase 2 (or ENOX2), the protein responsible for maintaining the transmembrane electron potential in the cancer cell's plasma membrane. Loss of this potential inhibits the ability of the cancer cell to maintain a wide range of pro-survival mechanisms. NOX66 has been developed specifically to protect idronoxil from Phase 2 metabolism in the human body, and in so doing to increase the bio-availability of idronoxil to cancer cells.

About Noxopharm

Noxopharm is an Australian drug development company with offices in Melbourne and Sydney. The Company has a primary focus on the development of drugs to address the problem of drug-resistance in cancer cells, the major hurdle facing improved survival prospects for cancer patients. NOX66 is the first pipeline product, with later generation drug candidates under development in an R&D program.

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Forward Looking Statements

This announcement may contain forward-looking statements. You can identify these statements by the fact they use words such as "aim", "anticipate", "assume", "believe", "continue", "could", "estimate", "expect", "intend", "may", "plan", "predict", "project", "plan", "should", "target", "will" or "would" or the negative of such terms or other similar expressions. Forward-looking statements are based on estimates, projections and assumptions made by Noxopharm about circumstances and events that have not yet taken place. Although Noxopharm believes the forward-looking statements to be reasonable, they are not certain. Forward-looking statements involve known and unknown risks, uncertainties and other factors that are in some cases beyond the Company's control that could cause the actual results, performance or achievements to differ materially from those expressed or implied by the forward-looking statement. No representation, warranty or assurance (express or implied) is given or made by Noxopharm that the forward-looking statements contained in this announcement are accurate and undue reliance should not be placed upon such statements.





Corporate Presentation, Sept 2016

ASX: NOX

The problem

- **q** Once a cancer becomes metastatic, death is the usual eventual outcome
- **q** Treatmentfails because cancer cells have become resistant to standard therapies
- **q** Death occurs because the patient runs out of treatment options
- **q** Resistance to chemother apy and radio ther apy is the single largest problem facing the management of cancer



Our objective

- **q** To bring to market a proprietary drug that overturns cancer cell resistance mechanisms in a potent and highly selective way
- q To restore responsiveness to standard chemotherapy and radiotherapy
- **q** To provide treatment options for the elderly and frail, and the growing population of patients who elect not to undergo damaging therapies



Our means

NOX66 An innovative form of idronoxil

q Idronoxil is the most potent inhibitor of cancer cell resistance mechanisms

q Idronoxil works for both chemotherapy and radiotherapy

q Idronoxil is highly selective for cancer cells

q NOX66 - designed to ensure idronoxil reaches the cancer in an active form

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Our vision

- **q** Tohave a first-in-class drug meeting a substantial unmet clinical need
- **q** To dominate the field in major drug territories with IP protection
- **q** To become a global biopharmaceutical company with a suite of drugs focused on cancer cell resistance mechanisms



Idronoxil



Overturns resistance to all major cytotoxic drugs

Cisplatin Paclitaxel Gemcitabine Topotecan Carboplatin Docetaxel Doxrubicin

Overturns resistance in all forms of cancers tested

No evidence of toxicity

OvarianMelanomaProstateHead & neckPancreatic

Laboratory Animals Humans

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Source: Brown D et al (2008) Drugs of the Future 33, 844



Clinical Program *Chemotherapy*

Cytotoxic chemotherapy

main front-line therapy for most forms of life-threatening cancers

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Objectives

Cytotoxic chemotherapy

- Achieve responses in cancers with inherent resistance (eg. pancreatic cancer, malignant melanoma, brain cancer)
- Achieve responses in cancers with acquired resistance
- Lower dosages of chemotherapy to provide safer therapy
- Make chemotherapy an option for patients who elect not to be treated
- Make effective chemotherapy feasible in elderly/frail patients



Phase I/II Clinical Study Design

Number of sites	2		
Territory	Georgia		
Commence	Q4 2016		
Patients	Solid tumours that have failed to respond to standard therapies		
Number of patients	Minimum 15. Maximum 35		
Phase 1a	14-days NOX66 monotherapy		
Phase 1b	6 months combination therapy: NOX66 + carboplatin. Carboplatin = low dose (AUC=4) for 3 months; standard dose (AUC=6) for next 3 months		
Phase 2a	Maximum 2 cohorts (each 10 patients) of selective cancer types of selective NOX66 + carboplatin dosage combination		



Phase I/II Clinical Study *Potential outcomes*

Safety	•	Confirmation that NOX66 does not exacerbate carboplatin toxicity
Clinical benefit	•	Reversal of resistance to carboplatin in cancers with inherent drug resistance (<i>eg. pancreatic cancer, lung cancer</i>) Reversal of resistance to carboplatin in cancers with acquired resistance (<i>eg. ovarian cancer, breast cancer</i>)
Lowered cytotoxic drug dosage	•	Confirm that NOX66 will allow the dosage of carboplatin to be lowered to a non-toxic level without compromising its anti-cancer effect





Clinical Program *Radiotherapy*

Radiation therapy

Front-line or second-line therapy for many common forms of cancer





Phase Ib Clinical Study Design/potential outcomes

Status	 2 proposed studies Currently in planning Projected start 4Q16& 1Q17
Proposed design	 Specific tumour type per study Palliative radiotherapy to selective lesions + NOX66 2 weeks Rx. 2-3 months response assessment
Hypothesised outcomes	 NOX66 will inhibit DNA repair mechanisms and radio-resistance NOX66 will enable palliative (non-curative) dosages of radiotherapy to deliver significant tumour responses



Indicative timelines



IP position

Idronoxil	Structure not patentable. First described by G. Kelly in 1994.		
Patent lodgement	Family of provisional patents lodged. Claims revolve around innovative formulation designed to block Phase 2 metabolism and conserve bio-activity		
2 nd and 3 rd generation products	R&D programs initiated with intention of delivering a family of therapeutics with specific abilities to cancel resistance mechanisms		



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 NovogenLtd.



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 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.

Key metrics

Shares outstanding	75M : 30M free; 45M escrowed (July 2019)
Other	22.5M options (\$0.30)(2021) 10M performance shares (\$50M market cap) (2021)
Cash position	\$6M IPO (9 Aug 2016) \$5M (Sept 2016)



Concluding Remarks

Company Aim

To overturn resistance to the most commonly-used chemotherapies & radiotherapy Improved response rates in most forms of solid cancers

Allow drug and radiotherapy dose rates to be lowered to reduce toxicity

Permit effective therapy in elderly/frail patients

Provide safe therapy to patients electing not to have 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 cancer resistance	Over 20 years' experience with this technology generally and this drug specifically	Phase 1 study to commence in 4Q16	Indication of efficacy designed to be available within 18 months

Key Messages



Resistance to chemotherapy/radiotherapy remains the most pressing and largest problem facing patients

No drug has come to market that successfully treats this problem

WE EXPECT TO KNOW WITHIN 12 MONTHS OF THE SUCCESS OF OUR MISSION IN RADIOTHERAPY

WE EXPECT TO KNOW WITHIN 18 MONTHS OF THE SUCCESS OF OUR MISSION IN CHEMOTHERAPY

A SUCCESSFUL OUTCOME ISA MAJOR SHARE OF THE \$100 BILLION ONCOLOGY DRUG MARKET

✓ Lean, focused operation

✓ 5 key inflection points anticipated within next 18 months

 Potential for NOX66 to become standard of care

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