



Date: 7 June 2018

Sydney, Australia

ASX: NOX

Noxopharm Limited

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NOXOPHARM CORPORATE PRESENTATION FOR PUBLIC BRIEFING

Sydney, 7 June 2018: Noxopharm (ASX: NOX) today conducts the first of a series of Public Briefings and duly releases the official corporate presentation to be used.

The presentation addresses the Company's 3-pronged clinical trial strategy for its experimental anti-cancer drug, NOX66, embracing the CEP, DARRT and LuPIN programs and outlining for each program its current status, the anticipated news flow, and future clinical strategy.

The details of today's briefing are:

Time: 10.30 am Thursday June 7

Place: Sofitel Sydney Wentworth Hotel, 61-101 Phillip St.

To view this corporate presentation please visit the Noxopharm website (www.noxopharm.com) Home Page – Latest News

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About NOX66

NOX66 is a novel lipophilic formulation of the experimental anti-cancer drug, idronoxil. Idronoxil is a triple-acting drug: (i) cytotoxic to cancer cells; (ii) blocks DNA repair; (iii) activates innate immune cells including natural killer (NK) cells. In conjunction with cytotoxic chemotherapy drug therapy (CEP program), it is being used to augment the cytotoxic effect of chemotherapy and to reverse resistance to chemotherapy drugs. In conjunction with radiotherapy (DARRT program), it is being used to augment both the direct and indirect (abscopal) effects of external beam radiotherapy and stereotactic body radiotherapy. In conjunction with intravenous radionuclide therapy (LuPIN program), it is being used to augment the anti-cancer activity of this therapy.

About Noxopharm

Noxopharm is an Australian drug development company with offices in Sydney and Hong Kong. The Company has a primary focus on the development of drugs to sensitise cancer cells to radiotherapy and chemotherapy. NOX66 is the first pipeline product, with later generation

drug candidates under development.

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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.



**A clinical-stage oncology drug company
developing a disruptive technology for the
treatment of solid cancers by
radiotherapy and chemotherapy**

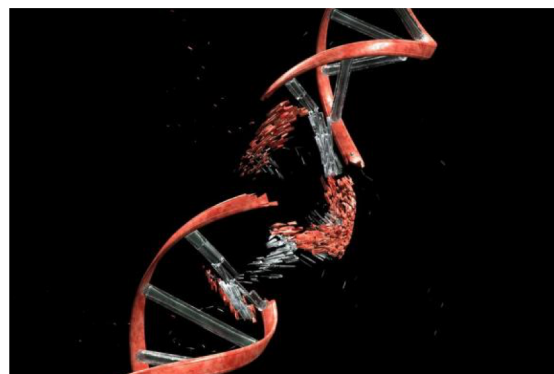
Open Briefing June 2018

Unique dual-acting anti-cancer drug

NOX66 Idronoxil (lipophilic form)

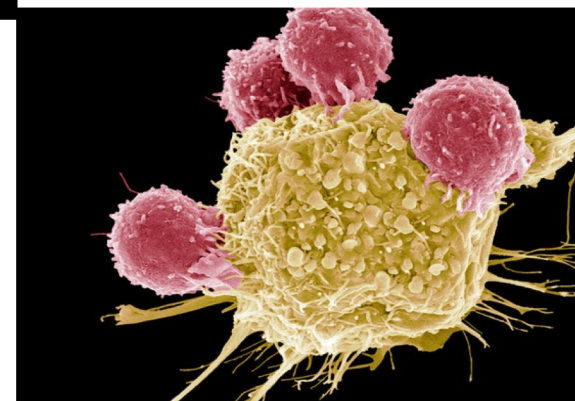
inhibits DNA repair

inhibits PARP-1, topoisomerases 1 and 2



promotes anti-tumour immunity

Increases NK (natural killer) cell activity



3-horse race



DARRT

- Risk mitigation
- Identify optimal route to market
- Expand post-registration markets

CEP

DARRT

LuPIN

Chemotherapy Enhancement Program

Objective:

- ❖ To enable salvage chemotherapy in patients with late-stage, resistant cancers
- ❖ NOX66 in combination with low-dose cytotoxic chemotherapy
- ❖ Aim to deliver a meaningful anti-cancer effect
in at least 50% patients
in a well tolerated way

CEP-1 Phase 1 Sighting study

Details:

- ❖ 19 patients; late-stage, metastatic cancer; no remaining standard Rx options
- ❖ Breast, lung, ovarian, prostate
- ❖ 14-day NOX66 run-in
- ❖ 6 cycles; each cycle = NOX66 (7 days) + carboplatin (1 day) each month
- ❖ 3 patients withdrew voluntarily; 1 carboplatin sensitivity; 1 sudden death; 4 death from progressive disease; 2 non-evaluable

CEP

CEP-1



Outcomes

Safety:

- 5 Grade 3 toxicities, all resolved. All other toxicities mild.
- No toxicity associated with NOX66

Efficacy:

	<u>Partial response</u>	<u>Stable disease</u>	<u>Disease progression</u>	<u>Total</u>
3 cycles	0	12	2	14
6 cycles	1	5	4	10*

* 12 started: 1 withdrew: 1 sudden death

- ❖ Phase 2
- ❖ NOX66 Dosage: 800 mg
- ❖ Platinum based therapy. Which drug?
 - Carboplatin
 - Cisplatin
 - Oxaliplatin
- ❖ Which cancer type(s)? What end-points?
- ❖ Protocol design
 - Q3 Meet with Advisory Board
 - Q4 Final protocol
 - Early-2019 Study opens

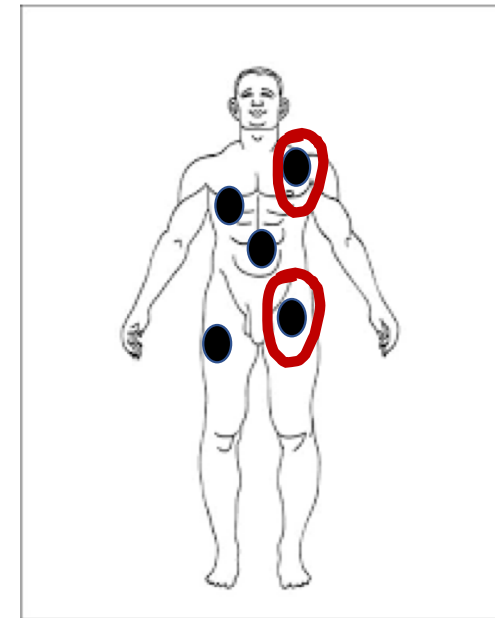
DARRT

Direct and Abscopal Response to Radio-Therapy



External Beam RT
or
Stereotactic Body RT

- Patients with multiple (>3) tumours
- Irradiate 1-2 tumours (5 days)
- NOX66 14 days
- Scan + 6 weeks and 12 weeks

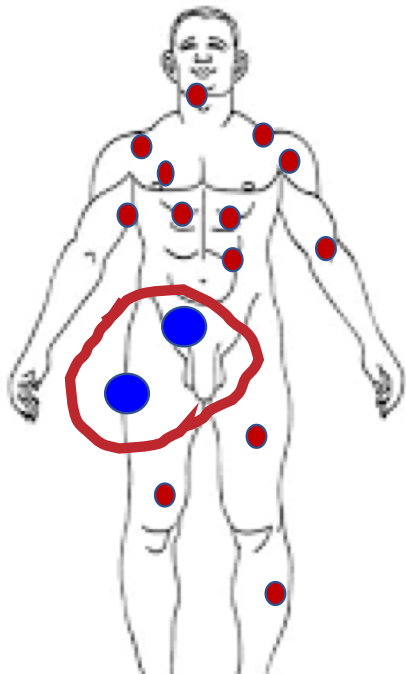


DARRT

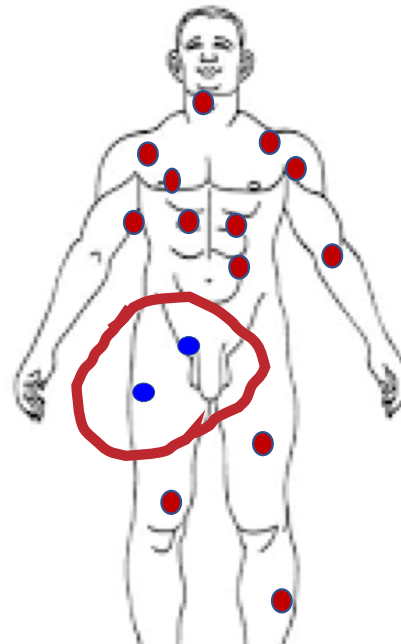
Direct and Abscopal Response to Radio-Therapy



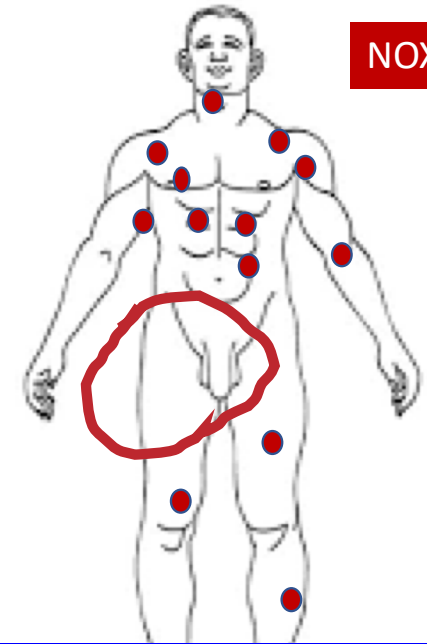
Direct Response



Radiotherapy applied to large tumours for pain relief



Shrinkage of irradiated tumours



NOX66

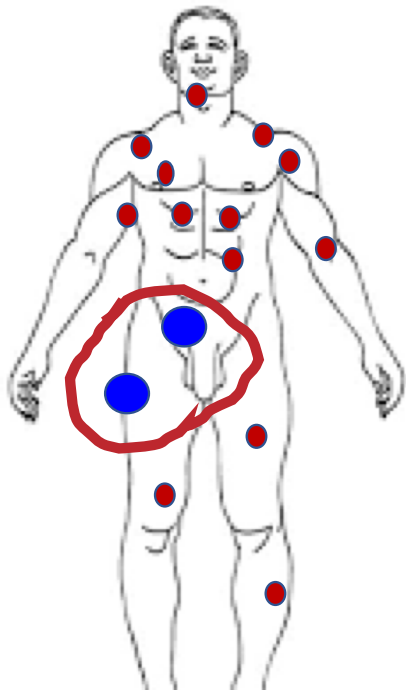
Seeking **complete remission** of irradiated tumours

DARRT

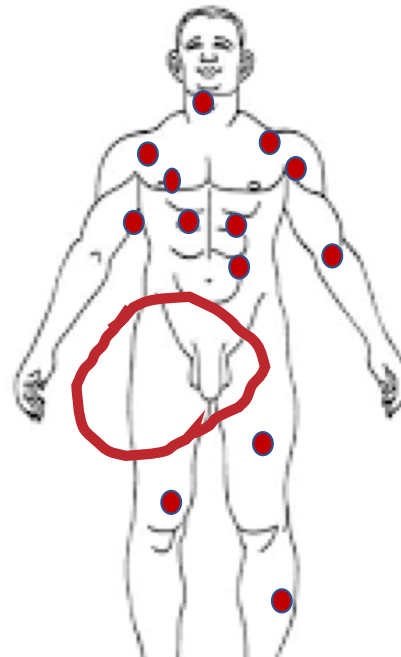
Direct and Abscopal Response to Radio-Therapy



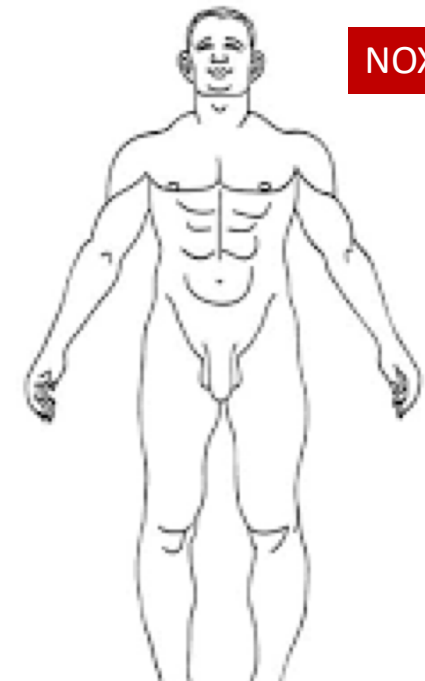
Abscopal Response



Low-dose radiotherapy



Seeking **complete remission** of irradiated tumours



Abscopal response

DARRT

DARRT-1

Details:

- ❖ Phase 1b multi-national study
- ❖ 24 patients; metastatic castrate-resistant prostate cancer
- ❖ NOX66 + External beam RT
- ❖ RT (5-10 days) ▲ NOX66 (duration of RT + 7 days)
- ❖ 4 Cohorts:
 - 400 mg NOX66 (4 patients) *completed*
 - 800 mg NOX66 (4 patients) *completed*
 - 1200 mg NOX66 (4 patients) *enrolled*
 - Best NOX66 dose (12 patients)

SCHEDULE

- ❖ Late-July 2018. Complete treatment and 6-week scans on first 3 cohorts.
 - Independent review of data
 - Select NOX66 dosage

- ❖ Late-Aug 2018. Commence recruitment of Cohort 4.
 - Target complete recruitment of all 24 patients in Q3 2018
 - 12 week review for all patients Q4
 - Study complete Q1 2019

DATA RELEASE

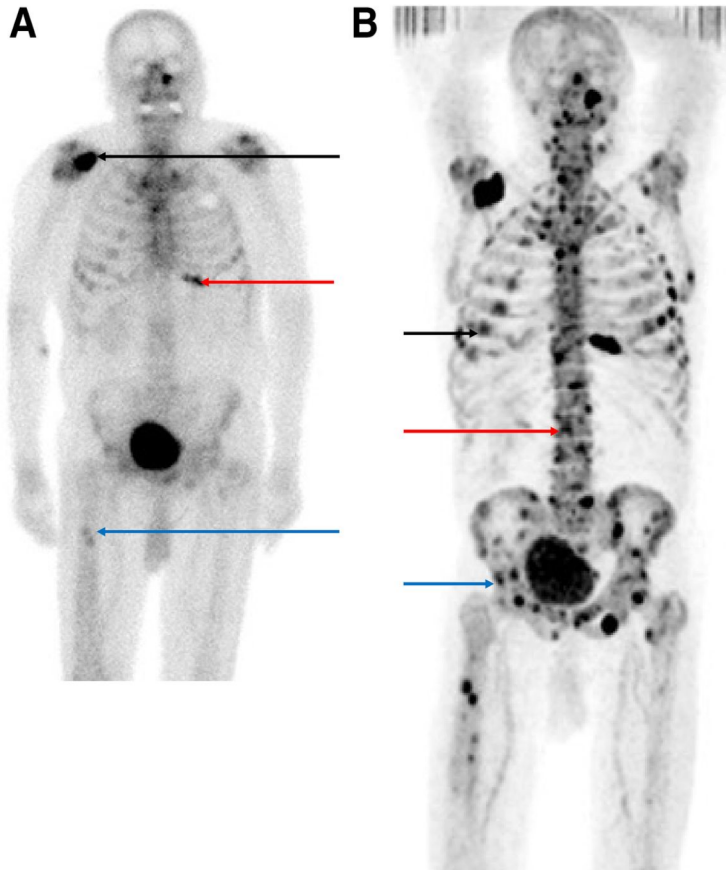
- ❖ Early-July 2018. Presentation at ANZUP
 - Study outline, safety of initial treatment

- ❖ Aug 2018. Release of 6-week data.

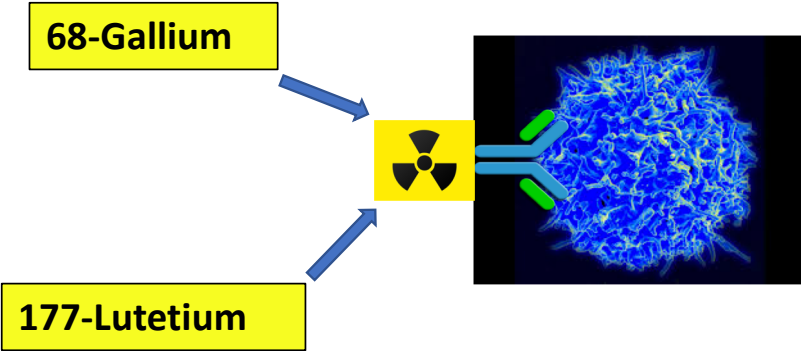
- ❖ DARRT-2: Solid tumours
 - Phase 1b; expanding DARRT-1 research beyond prostate cancer
 - Provide guidance on criteria which may suggest better response to NOX66
 - Decision point – DARRT-1: 12 patient, 6 weeks scan → drive protocol development
 - Commence study Q4 2018
- ❖ DARRT-3: Phase 2/3 registrational planning
 - Key study for first registration of NOX66
 - Feasibility, country and site identification (global) commence Q3 2018
 - Decision point – DARRT-1: 24 patients, 12 week → submission processes begin
 - Commence mid 2019
- ❖ Supportive research
 - Further small investigator led research studies
 - Specific patient populations; treatment regimen (e.g. stereotactic RT)

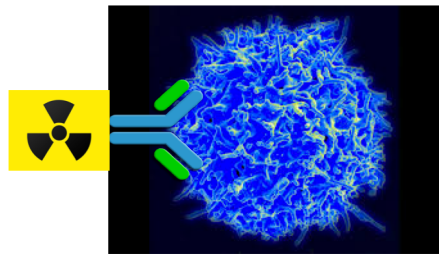
LuPIN

Lutetium-PSMA In Combination With NOX66



THERANOSTICS





THERANOSTICS

- Phase 1b study; investigator-initiated; St Vincent's Hospital Sydney
- Late-stage prostate cancer (metastatic castrate-resistant disease)
- ¹⁷⁷ Lutetium-PSMA-617
- 6 x monthly intravenous injections of LuPSMA + 10 days NOX66
- 6 patients 400 mg NOX66; 10 patients 800 mg NOX66

❖ LuPIN-1

- Recruitment ongoing – presentation of trial outline at ASCO 2018
- First 4 patients in 5th cycle of therapy; first key data expected late-2018

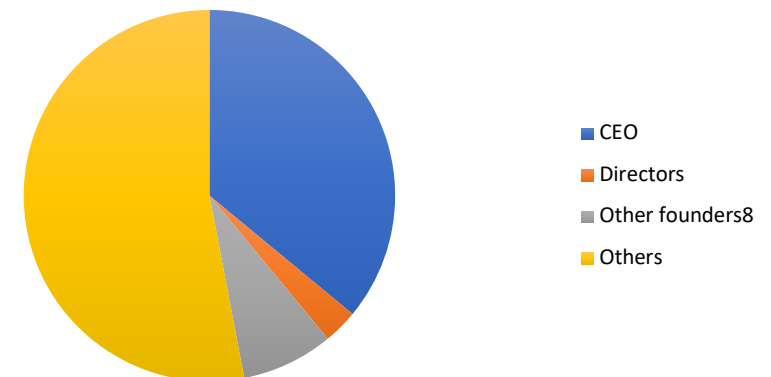
❖ Next Steps

- Development of expanded LuPIN study
 - Phase 2 multi-centre, sponsored study
 - Planned commencement early-2019
- Other targeted radionuclides
 - Partnership planning for other targeted therapies
 - Phase 1 studies early-2019

Key metrics



Number of Shares	121.9M : Free float 66.8%
Market Cap (6.6.2018)	\$90M
IPO price	20 cents
12 month high/low	\$1.58/0.29
Average daily turnover	\$0.54M
Cash position	AU\$ 11.8 (31 March 2018)



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