



**ASX Announcement | 8 December 2020  
Noxopharm Limited (ASX:NOX)**

**Noxopharm Corporate Presentation for December Investor Webinar**

**Sydney 8 December 2020: Australian clinical-stage drug development company Noxopharm Limited (ASX:NOX)** is pleased to provide the following corporate presentation for today's Investor Webinar.

Noxopharm CEO, Dr Graham Kelly will provide an updated overview of the Company's recent corporate and R&D activities, proposed use of the \$23 million funds recently raised, and the Company's plans and expectations for 2021. A recording of the webinar will be made available on the Noxopharm website later this week.

**Date and Time: Tuesday 8 December, 2020 at 2pm AEDT**

**Attendees will need to pre-register via the following link:**

[Noxopharm Investor Webinar 8 December 2020 at 2pm AEDT](#)

*Graham Kelly, CEO and Managing Director of Noxopharm, has approved the release of this document to the market on behalf of the Board of Directors.*

**-ENDS-**

**About Noxopharm**

Noxopharm Limited (ASX:NOX) is an Australian clinical-stage drug development company focused on the treatment of cancer and septic shock.

Veyonda® is the Company's first pipe-line drug candidate currently in Phase 2 clinical trialling. Veyonda® has two main drug actions – inhibition of sphingosine kinase and inhibition of STING signalling. Activity against the former target contributes to its dual-acting oncotoxic and immuno-oncology functions designed to enhance the effectiveness and safety of standard oncology treatments, i.e., chemotherapies, radiotherapy and immune checkpoint inhibitors. Activity against the latter target provides an anti-inflammatory effect, also contributing to an anti-cancer action, but also potentially blocking the development of septic shock.

Noxopharm also is the major shareholder of US biotechnology company Nyrada Inc (ASX:NYR).

To learn more, please visit: [noxopharm.com](http://noxopharm.com)

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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.



# Noxopharm Limited (ASX:NOX)

WEBINAR PRESENTATION

DECEMBER 2020

Discover



Develop



Deliver



# Disclaimer



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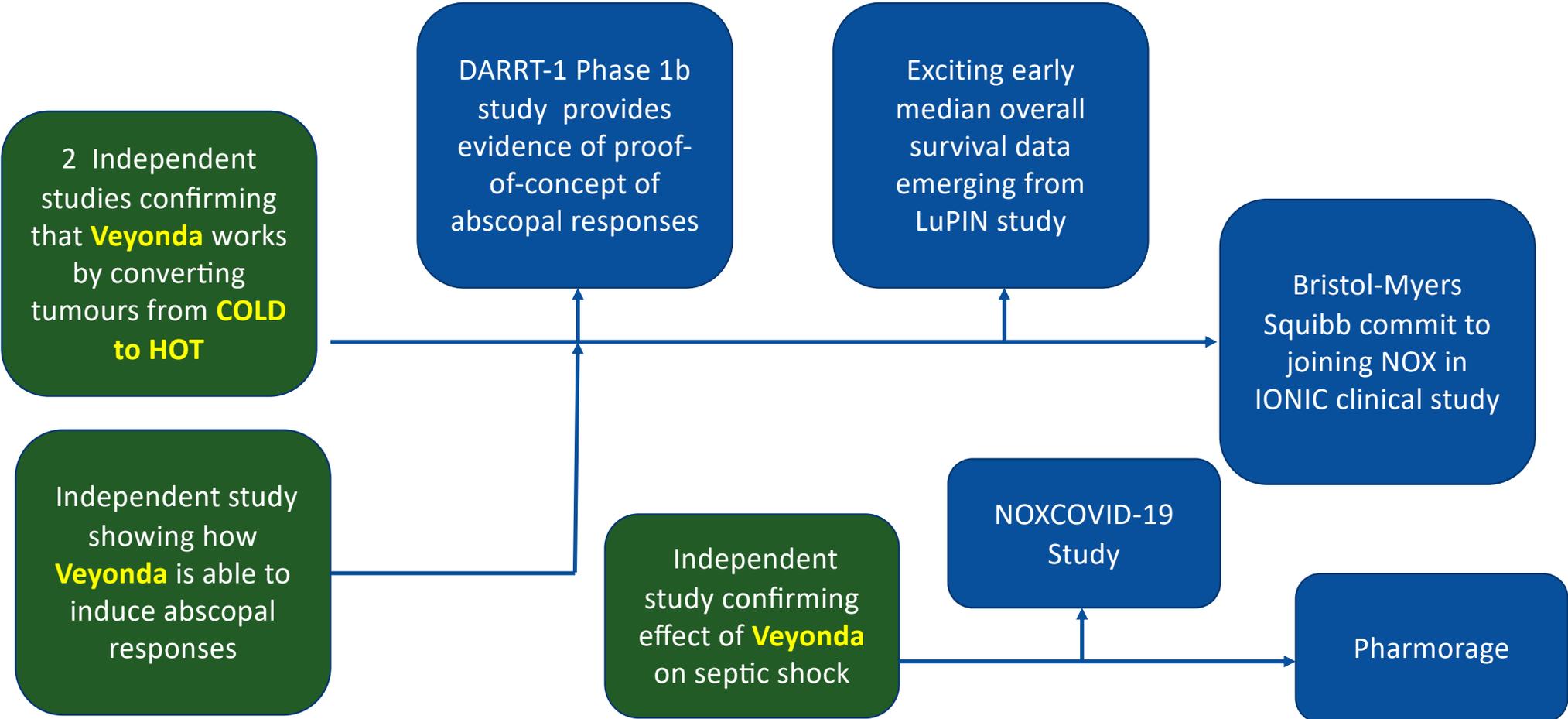
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## Our single-minded objective .....



- is to prove that **Veyonda<sup>®</sup>**
- is the answer to unlocking the power of the immune system to fight cancer
- allowing the 3 main forms of cancer therapy - **immuno-oncology, radiotherapy, chemotherapy** - to reach their full potential
- identifying **Noxopharm** as a highly valuable industry partner

# Key R&D achievements in 2020 .....



## We go into 2021 .....



- with a strong cash position

*(based on **\$23M** CR and anticipated R&D Rebate)*

- providing a full 12-month runway

- to meet aim of attaining proof-of-concept of **Veyonda** as a major new drug prospect

# Veyonda joins the new wave of cancer immuno-oncology (I-O) therapies .....



- ▮ that aim to restore the body's immune system to fight cancer

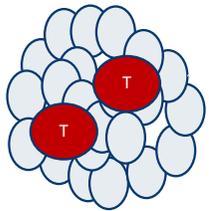
- ▮ are the acknowledged future of cancer therapy

- ▮ re-activating the immune system is readily achieved

- ▮ the problem is getting the reactivated immune cells back inside the tumours where they can kill the cancer cells

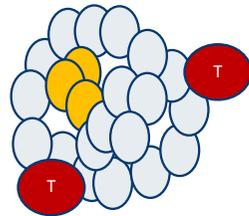
- ▮ the challenge facing the current US\$30 billion p.a. I-O therapy market is that most human tumours block that re-entry. NOX believes **Veyonda** is the leading candidate to overcome this problem

# Restoring immune function to tumours



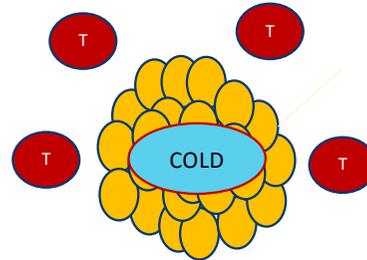
All healthy tissues contain immune cells (T cells)

whose role is to detect and eliminate any abnormal cells



Emerging cancer cells

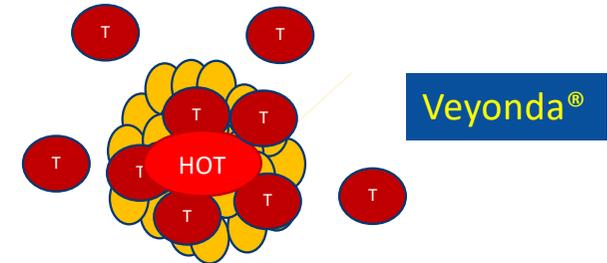
produce high levels of S1P (**sphingosine-1-phosphate**) that drive the immune cells out of the tissue



With tumour now fully established, ongoing high S1P levels keep immune cells excluded

Cancer cells now free to grow in the absence of immune cells

= **COLD tumour**



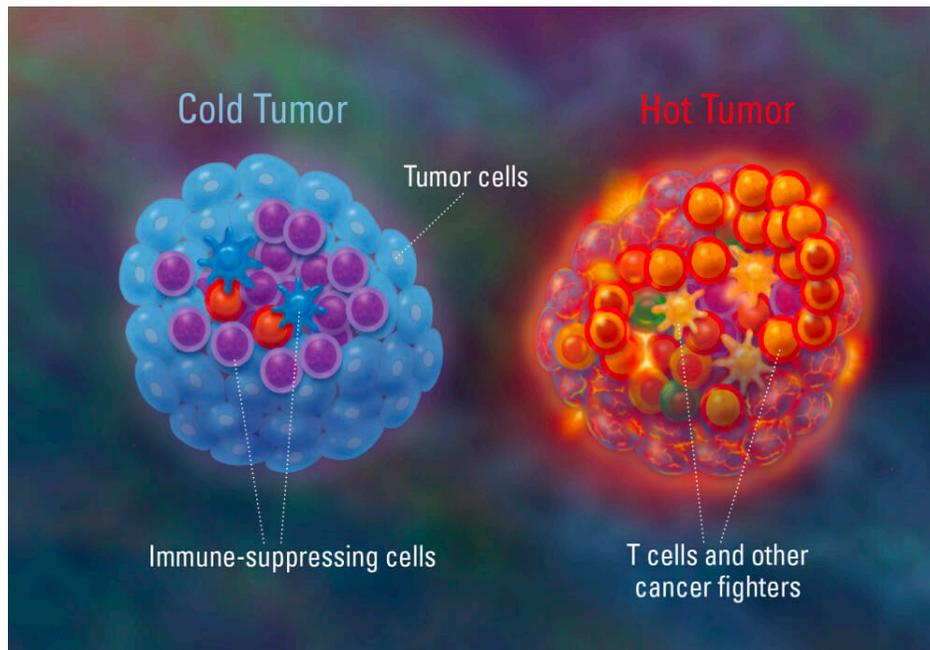
**Veyonda** block S1P production by cancer cells

With S1P levels down and the shield removed, immune cells now enter and repopulate the tumour

Immune cells now able to kill cancer cells

= **HOT tumour**

# Employing the unique 'COLD to HOT' **Veyonda** function



Source: *Enhancing Immunotherapy: The Race to Make "Cold" Tumors "Hot"*. <https://blog.dana-farber.org/insight/2018/06/enhancing-immunotherapy-race-make-cold-tumors-hot/>

PD-1  
therapy

**IONIC Program**  
**Veyonda + checkpoint (PD-1) inhibitors**

Radio-  
therapy

**DARRT Program**  
**Veyonda + (external beam) radiotherapy**

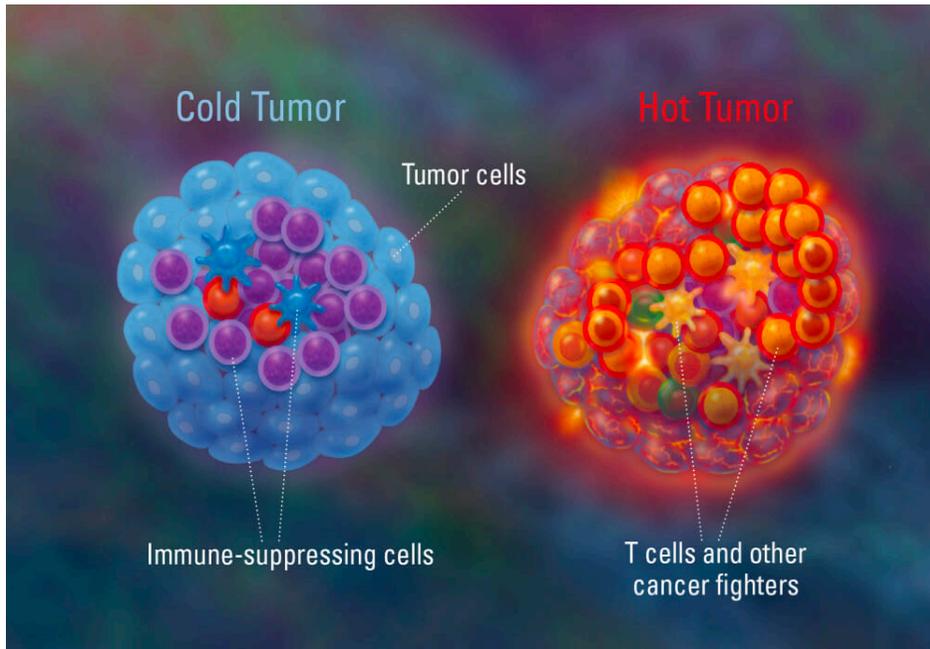
Radio-  
therapy

**LuPIN Program**  
**Veyonda + (intravenous) radiotherapy**

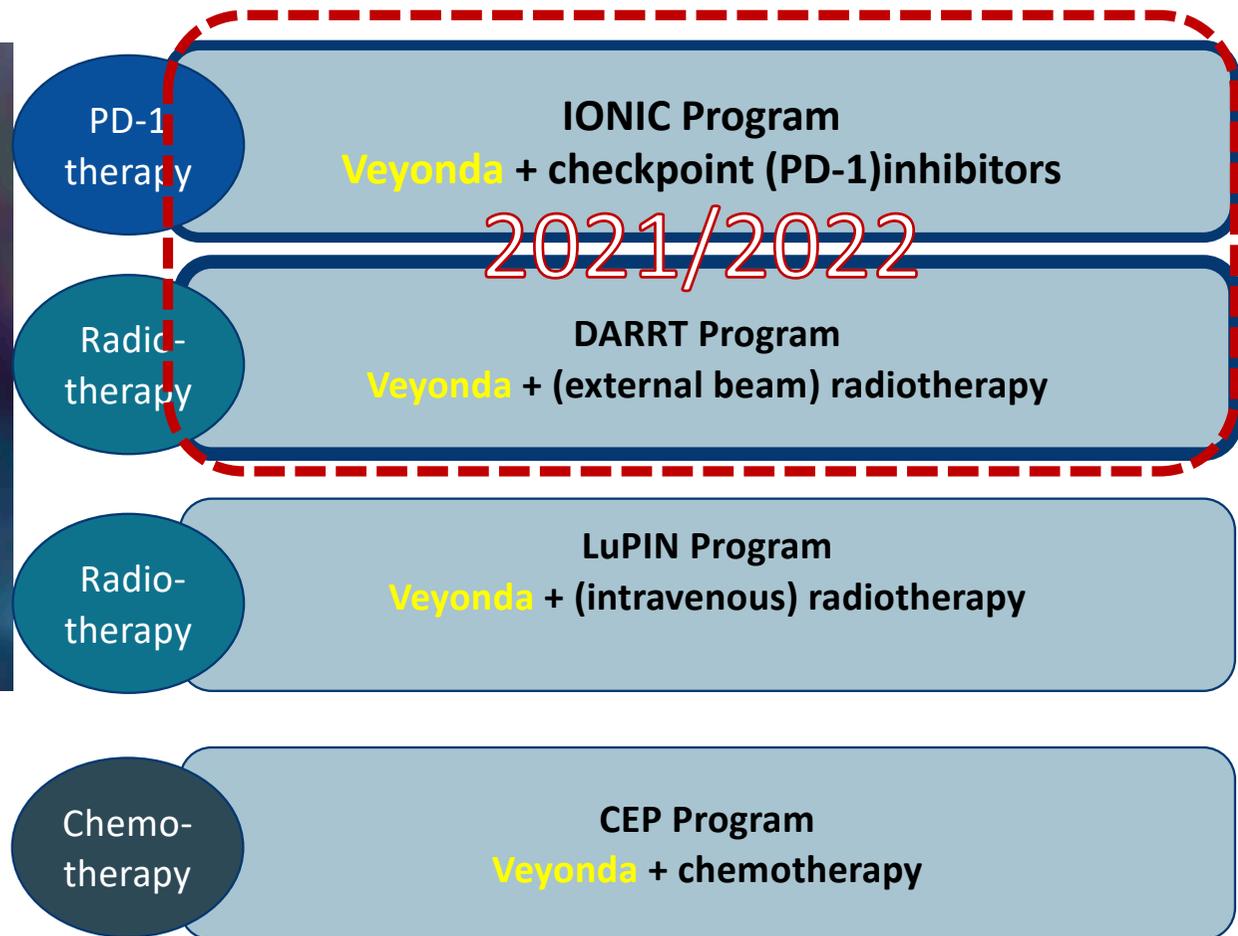
Chemo-  
therapy

**CEP Program**  
**Veyonda + chemotherapy**

# Employing the unique 'COLD to HOT' **Veyonda** function



Source: Enhancing Immunotherapy: The Race to Make "Cold" Tumors "Hot". <https://blog.dana-farber.org/insight/2018/06/enhancing-immunotherapy-race-make-cold-tumors-hot/>



PD-1  
therapy

## IONIC Program Veyonda + checkpoint inhibitors



2019 sales of checkpoint inhibitors **US\$22 billion**

- Keytruda® Merck
- Opdivo® Bristol-Myers Squibb
- Yervoy® Bristol-Myers Squibb

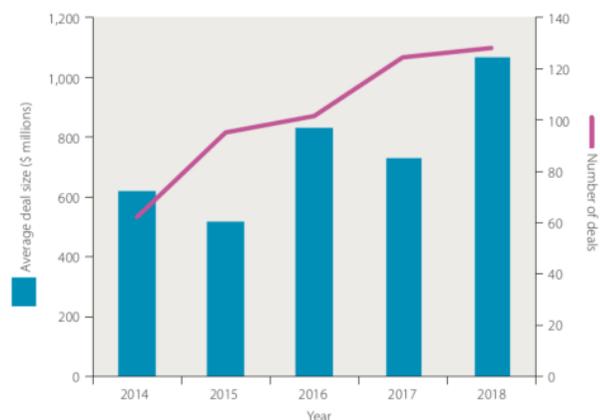
**10-30% response rates** in 7 cancers (eg. lung, melanoma, kidney, bladder)

**<5% response rates** in most other cancers

**COLD tumours** identified as major cause of non-response

Major Licensing and M&A activity to achieve higher response rates shifting sales to predicted US\$100 + billion p.a.

### Search for Checkpoint Inhibitor partners



**Fig. 1 | Trends in immuno-oncology drug licensing.** 2018 was the biggest year yet for immuno-oncology (IO) drug licensing in terms of deal size and volume. IO licensing deal size increased in value by 51% from 2017 to 2018, while volume increased by 8%. Only licensing deals for drugs or drug platforms applicable to IO therapeutics were included. Data from Cortellis Deals Intelligence from Clarivate Analytics.

### 2018 15x Licensing Deals > US\$1 billion

Buyer	Seller	Total deal value
BMS	Nektar Therapeutics	<b>US\$3,630 B</b>
Merck	Eisai	<b>US\$5,755 B</b>

PD-1  
therapy

IONIC Program  
Veyonda + checkpoint inhibitors



## IONIC-1

Veyonda® +  
checkpoint  
inhibitor



## Immuno-Oncology With NOX66 In Combination

Veyonda® + nivolumab (Opdivo®)  
(Bristol Myers Squibb)

<b>Bristol-Myers Squibb</b>	<b>(NYSE:BMJ)</b>
Market cap	<b>US\$145 billion</b>
Pharma ranking	<b>11<sup>th</sup></b>
2019 sales	<b>US\$26 billion</b>
<b>2019 Opdivo sales</b>	<b>US\$8 billion</b>
2019 Celgene acquisition	<b>US\$74 billion</b>

*A Phase I/II study involving both NOX and Bristol-Myers Squibb*

PD-1  
therapy

IONIC Program  
Veyonda + checkpoint inhibitors



## IONIC-1



Phase I/II study  
Investigator-initiated  
~30 patients  
3 Australian hospitals  
Early-Q1 2021 start

### Clinical objective #1

Improve low (10-30%) response rates to Opdivo in responsive cancers (eg. lung, melanoma, bladder, kidney)



**Cohort 1.** Patients recently treated with Opdivo® with mild disease progression

### Clinical objective #2

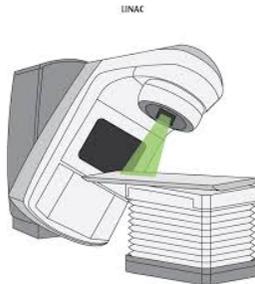
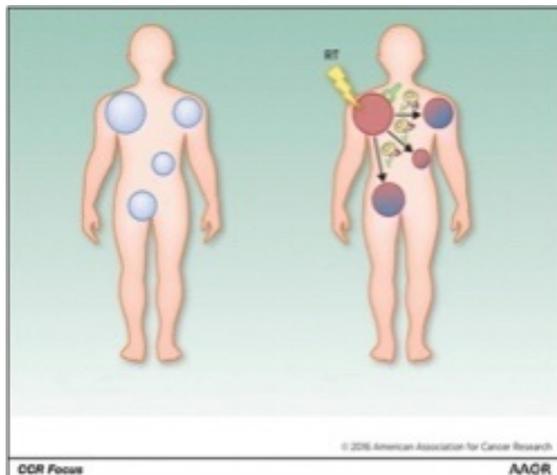
Achieve responses in remaining cancers where Opdivo® not currently used due to very poor response rates (eg. prostate, ovarian, pancreatic, sarcoma etc)



**Cohort 2.** Opdivo® naive patients

## Direct and Abscopal Response to Radiotherapy

Transforming a local anti-cancer effect of radiation into a whole-of-body anti-cancer effect (**abscopal response**)



### Objectives:

1. To convert the **abscopal response** from a very rare phenomenon (< 1 in 100,000) to a more commonplace event (~50% of cancer patients)
2. To produce long-term remission in metastatic cancers where survival prospects currently are poor

Radio-therapy

DARRT Program  
Veyonda + (external beam) radiotherapy

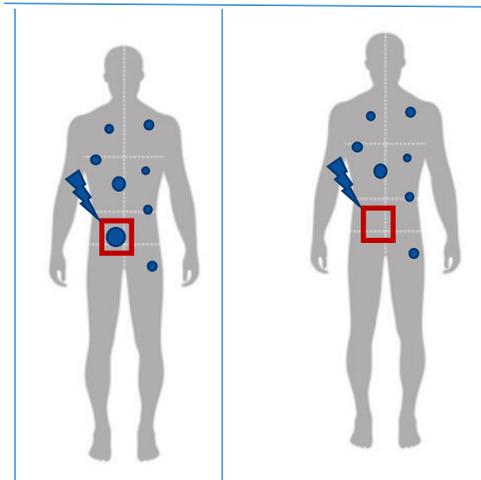


## DARRT Program

Radiotherapy

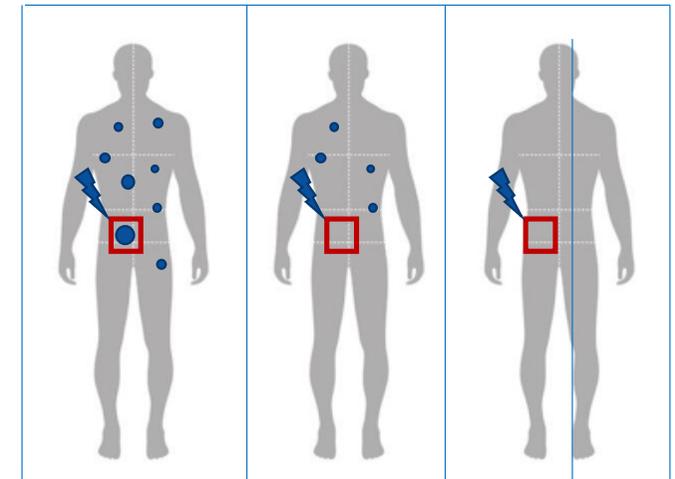
### 4-step DARRT process:

- Step 1.** Radiation applied to single tumour
- Step 2.** Radiation activates immune cells
- Step 3.** Veyonda augments that local immune response
- Step 4.** Veyonda then spreads that immune response to all other tumours throughout the body



Resolution of Irradiated tumour

Standard response



Partial abscopal response

Complete abscopal response

Abscopal response

Radio-  
therapy

DARRT Program  
**Veyonda** + (external beam) radiotherapy



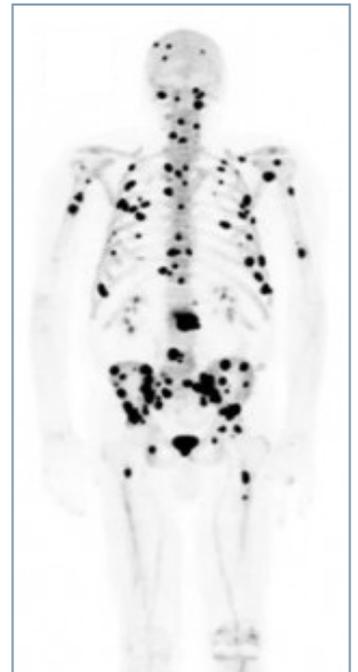
DARRT-1 Completed 25 men late-stage progressive prostate cancer

Metastatic castration-resistant prostate cancer (mCRPC)

No remaining standard treatment options

Low-dose (palliative) radiotherapy (RT) to single soft tissue tumour

Treatment with low-dose RT (5 days) and Veyonda® (14 days)



Bone scan with  
metastatic disease

Radio-  
therapy

DARRT Program  
**Veyonda** + (external beam) radiotherapy



In patients evaluable after 6 months\* .....

Over 50%  
drop in  
PSA in  
5/16  
patients

Over 30%  
drop in  
pain  
levels in  
10/16  
patients

No  
tumour  
growth  
in 10/15  
patients

Abscopal  
response  
in 4/15  
patients

\* 15 patients eligible for RECIST; 16 for PSA and pain

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Radio-  
therapy

DARRT Program  
**Veyonda** + (external beam) radiotherapy



**DARRT-2 Phase 2 study** 150 - 200 patients multi-national Parexel CRO

Late-stage cancer. No remaining standard treatment options

**Final planning current. Enrolment to start H1 2021**

Prostate cancer, breast cancer, lung cancer

Boosted therapy compared to DARRT-1 (2400 mg vs 1200 mg; multiple cycles of Veyonda vs 1 cycle)

Radio-  
therapy

LuPIN Program  
**Veyonda** + (intravenous) radiotherapy



LuPIN program = **Veyonda** + <sup>177</sup>**lutetium-PSMA-617** for late-stage prostate cancer

<sup>177</sup>**lutetium-PSMA-617** acquired by **Novartis** in 2018 in **US\$6 billion** transaction

**St Vincent's Hospital Sydney** testing ability of LuPIN therapy to boost modest survival effect of Novartis drug alone

**LuPIN-1** = Phase 2 study in 56 men with late-stage cancer that has progressed on all forms of therapy

First report of median overall survival from first **32 men (400/800 mg Veyonda)** highly encouraging at **17.1 months**

Median overall survival from all **56 men (400/800/1200 mg Veyonda)** to be reported **Feb 2021**

# Objectives

Over the next 2.5 years, with a modest investment of shareholder funds, to show that ...

IONIC

**Veyonda** increases the response rate to **nivolumab (Opdivo)** (BMS), establishing its potential to boost checkpoint inhibitor drug sales well above current US\$22 billion p.a.

DARRT

**Veyonda** + **radiotherapy** and the abscopal response is a valid, cost-effective alternative form of I-O treatment for a range of solid cancers

LUPIN

**Veyonda** boosts the response rate in advanced prostate cancer to **<sup>177</sup>Lu-PSMA-617** (Novartis)

PHARMORAGE

The Company's technology platform holds the potential to develop a family of new drugs for the treatment of septic shock, inflammatory diseases and autoimmune diseases

So building a highly valuable and compelling acquisition/partnering target

Discover



Develop



Deliver



# An I-O therapy to transform the management of cancer

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