argenica THERAPEUTICS

AGM PRESENTATION
ASX: AGN

MANAGING DIRECTOR PRESENTATION
NOVEMBER 2024

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NEUROPROTECTION
THE THERAPEUTIC OPPORTUNITY

BREAKTHROUGH
NEUROPROTECTIVE THERAPY

MISSION

Commercialise a neuroprotective treatment that minimises brain damage and fosters recovery following stroke & other neurological conditions

VISION

Redefine the standard of care for stroke and other neurological conditions by reducing brain injury

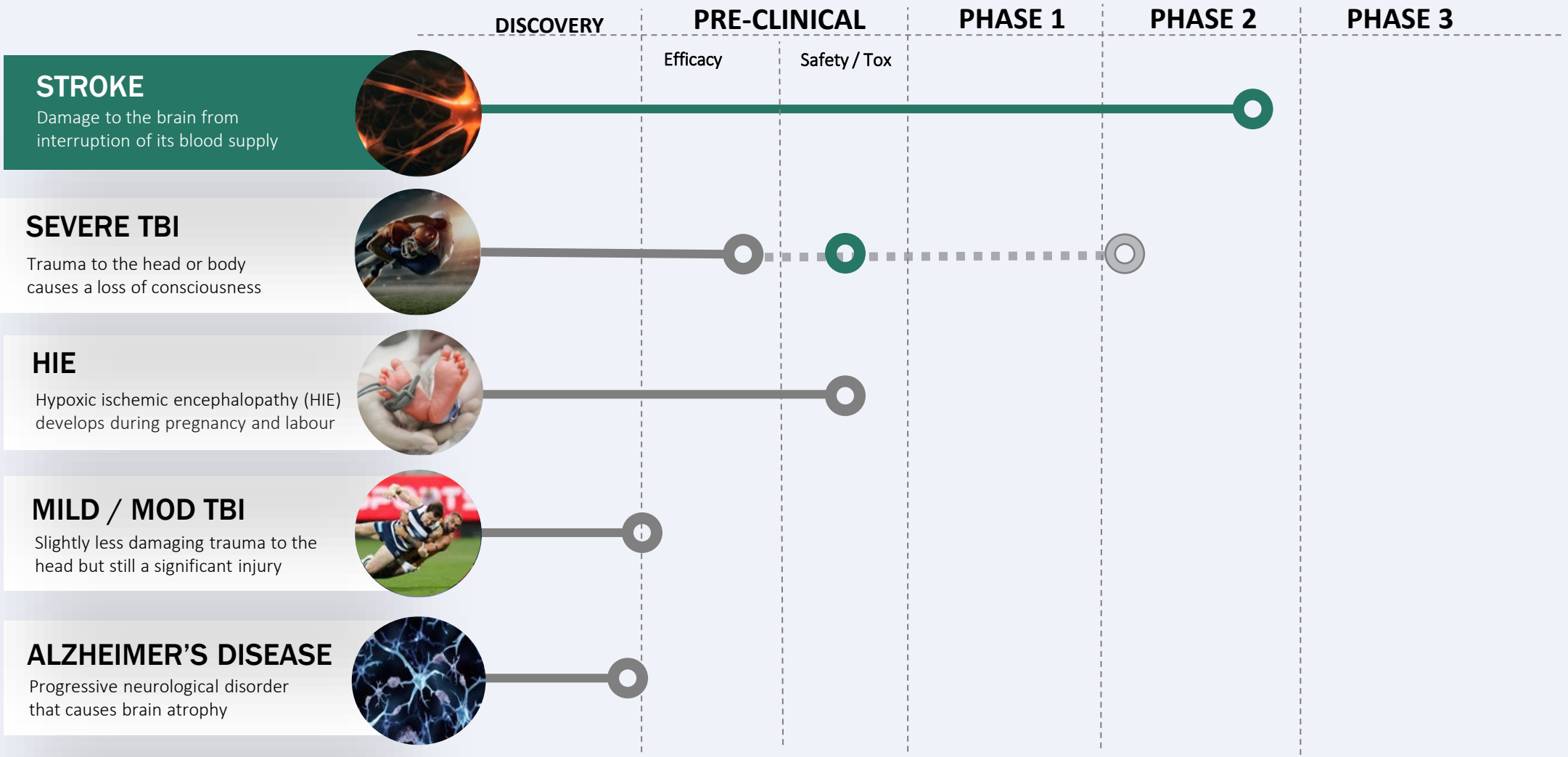
IMPACT

Create positive, life-altering impact for millions suffering from neurological conditions, offering new hope

ABOUT ARG-007

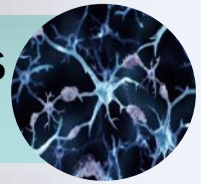
- Cationic poly-arginine peptide
- Multiple mechanisms of action working across multiple conditions
- Granted patents & strong IP
- Significant pre-clinical efficacy
- 25+ peer reviewed papers
- Proven safe for healthy humans

OUR LEAD DRUG CANDIDATE ARG-007



Single dose of ARG-007 in severe TBI can move straight from preclinical into Phase 2 clinical trial, do not need to repeat a Phase 1 or safety & tox studies.

POTENTIAL OF ARG-007

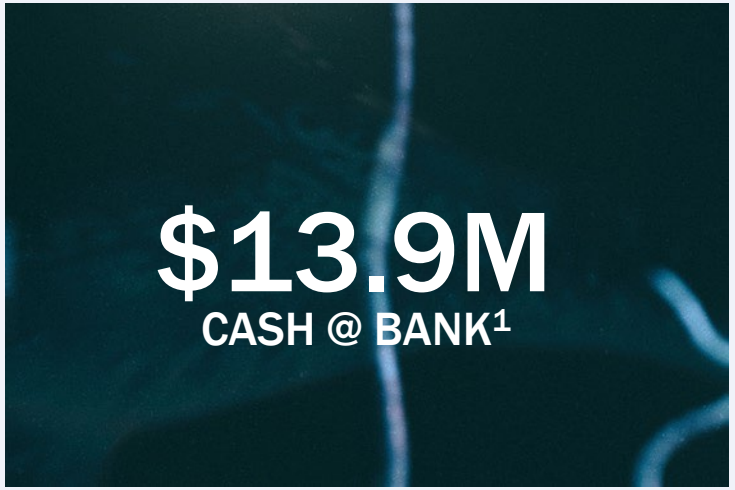
MAIN INDICATIONS	ADDRESSABLE MARKET	SUMMARY OF RESULTS TO DATE
STROKE 	**USD$12bn** by 2030[1]	**66% reduction** in Brain Tissue Death 24 hours after stroke **70% reduction** in Brain Tissue Death 28 Days after stroke
	1. Coherent Market Insights Report – Acute Ischemic Stroke (AIS) Market Analysis, Oct 2023	Meloni, B. P. et al (2020) *Neurotherapeutics : the journal of the American Society for Experimental NeuroTherapeutics*, *17*(2), 627–634
TBI 	**USD$18.6bn** by 2031[2]	**52% reduction** in neurofilament heavy protein **51% reduction** in amyloid precursor protein
	2. Traumatic brain injuries assessment market research, 2031 – Allied Market Research	*ASX Announcement titled 'ARG-007 protects brain cells in moderate traumatic brain injury model' 22 June 2023*
HIE 	**USD$1.9bn** by 2030[3]	**52% reduction** in total brain injury 4 weeks after injury **60% reduction** compared to hypothermia
	3. Data Bridge Market Research Market Analysis Study 2023	*ASX Announcement titled 'ARG-007 is an effective stand-alone therapy in preclinical study of term hypoxic ischaemic encephalopathy' dated 18 October 2023*
ALZHEIMER'S DISEASE 	**USD$13.0bn** by 2031[4]	**65% reduction** in Abeta aggregation **84% reduction** in cellular uptake of a-syn **89% reduction** in Tau aggregation
	4. Alzheimer's Therapeutics Market Global Opportunity Analysis 2021-2031 – Allied Market Research	*ASX Announcements dated 9th February 2023, 1st August 2023 and 3 November 2023*

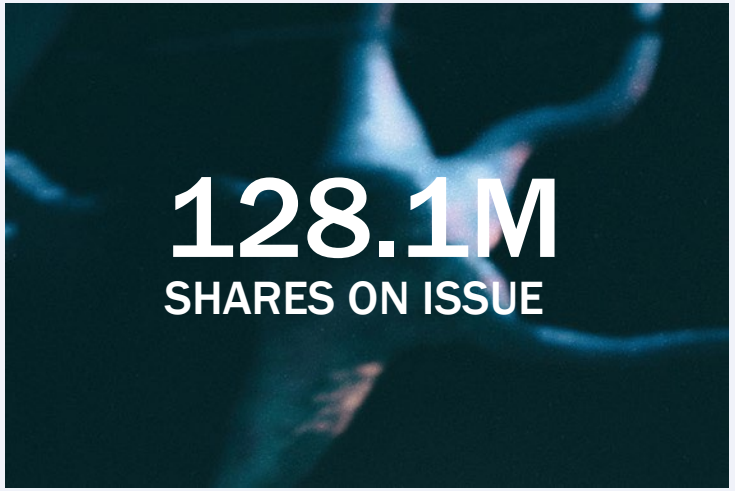
Ability to partner / licence on all indications

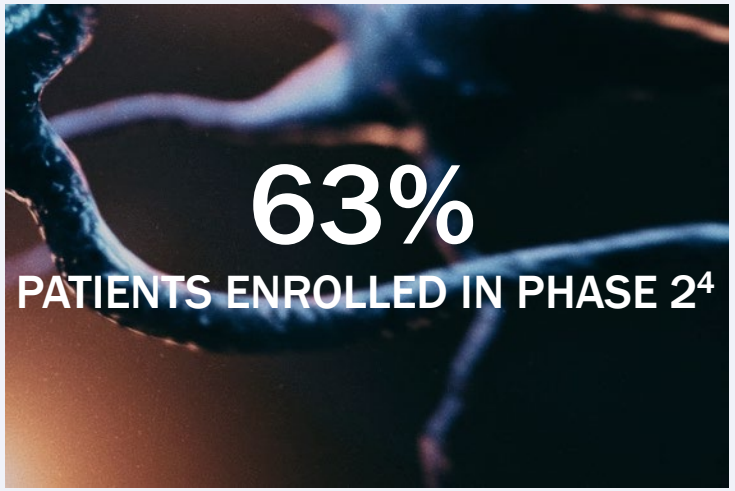
All indications have large addressable markets

Results to date are exceptional and will drive commercial / partnering interest

KEY COMPANY METRICS







1. Cash balance as @ 30 September 2024
2. Calculated with closing price on @25th October 2024 being $0.75
3. Various ASX Announcements dated 20 January 2023, 22 March 2023, 30 March 2023, 12 September 2023
4. ASX Announcement dated 6th September 2024, Positive DSMB Safety Outcome & Phase 2 Trial Progress Update

PHASE 2
STROKE TRIAL

SO WHY ARE WE TARGETING STROKE FIRST?

INCIDENCE

45 SECONDS

How often someone suffers an ischaemic stroke in the US[1]

SOCIETAL IMPLICATIONS

ONLY 10%

will recover almost completely, due to the extent of brain cell damage[2]

THE IMPORTANCE OF TIME

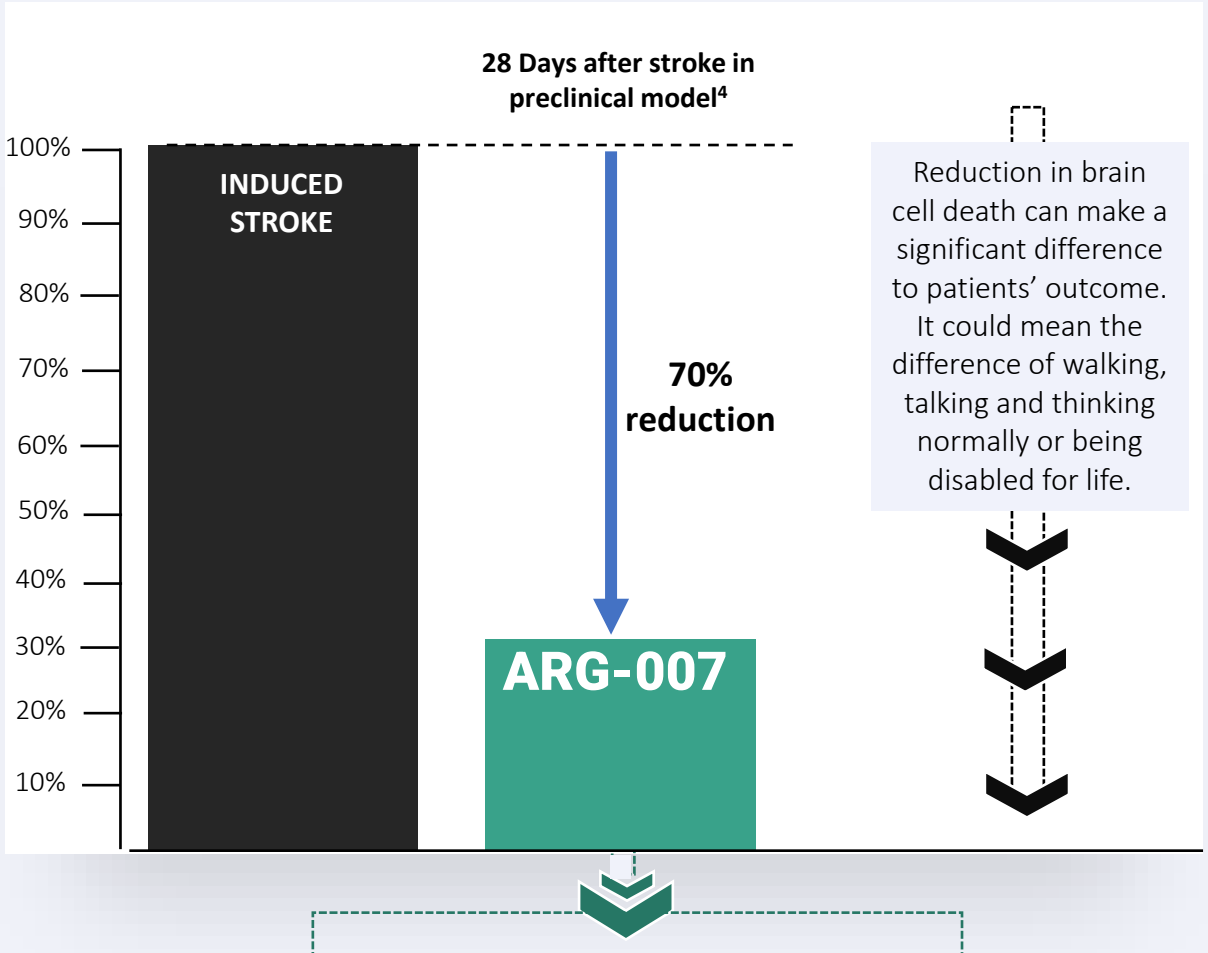
1.9 MILLION

brain cells are attacked each minute during a stroke[3]

FIRST IN CLASS DRUG ADDRESSING $12B MARKET[4]

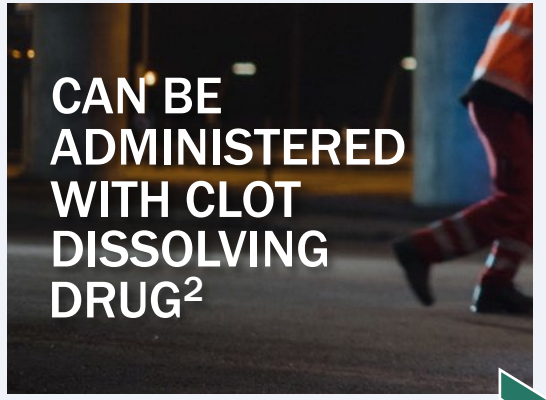
1. *US Centers for Disease Control and Prevention (CDC)*
2. *Stoke Foundation*
3. *Saver, JL (2006). "Time is Brain". Stroke, 37 (1), pp 236-266*
4. *Coherent Market Insights Report – Acute Ischemic Stroke (AIS) Market Analysis, Oct 2023*

ENCOURAGING STROKE RESULTS TO DATE



This protective effect remained significant (70%), showing a significant reduction in brain tissue death for at least 28 days post stroke following a single i.v. injection of ARG-007

PRECLINICAL & CLINICAL DATA



PHASE 2 IN ISCHAEMIC STROKE PATIENT

These findings are preliminary in nature. A larger dataset will be required for clinical validation.

1. Liddle, L. et al (2019). *PloS one*, *14*(11), e0224870.
2. *ASX Announcement 'Study shows arg-007 does not degrade when co-administered with ischemic stroke therapeutics' 12 July 2021*
3. *ASX Announcement 'Final Phase 1 Clinical Trial Report Confirms Argenica Successfully Passes Critical Milestone' 15 May 2023*
4. Meloni, B. P. et al (2020) *Neurotherapeutics : the journal of the American Society for Experimental NeuroTherapeutics*, *17*(2), 627–634

PHASE 2 STROKE TRIAL

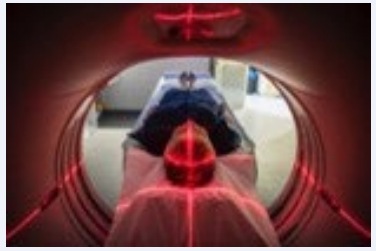
PHASE 2 TRIAL DESIGN IN ACUTE ISCHAEMIC STROKE

PATIENT HAS A STROKE

PATIENT IN AMBULANCE

ARRIVES AT HOSPITAL

DIAGNOSE STROKE TYPE



THROMBECTOMY

REHAB BEGINS

- Initial screening of patients to meet inclusion criteria
- Consent for thrombectomy & ARG-007 trial

- Administration of **0.3mg/kg** ARG-007 or saline placebo
- All patients receive thrombectomy

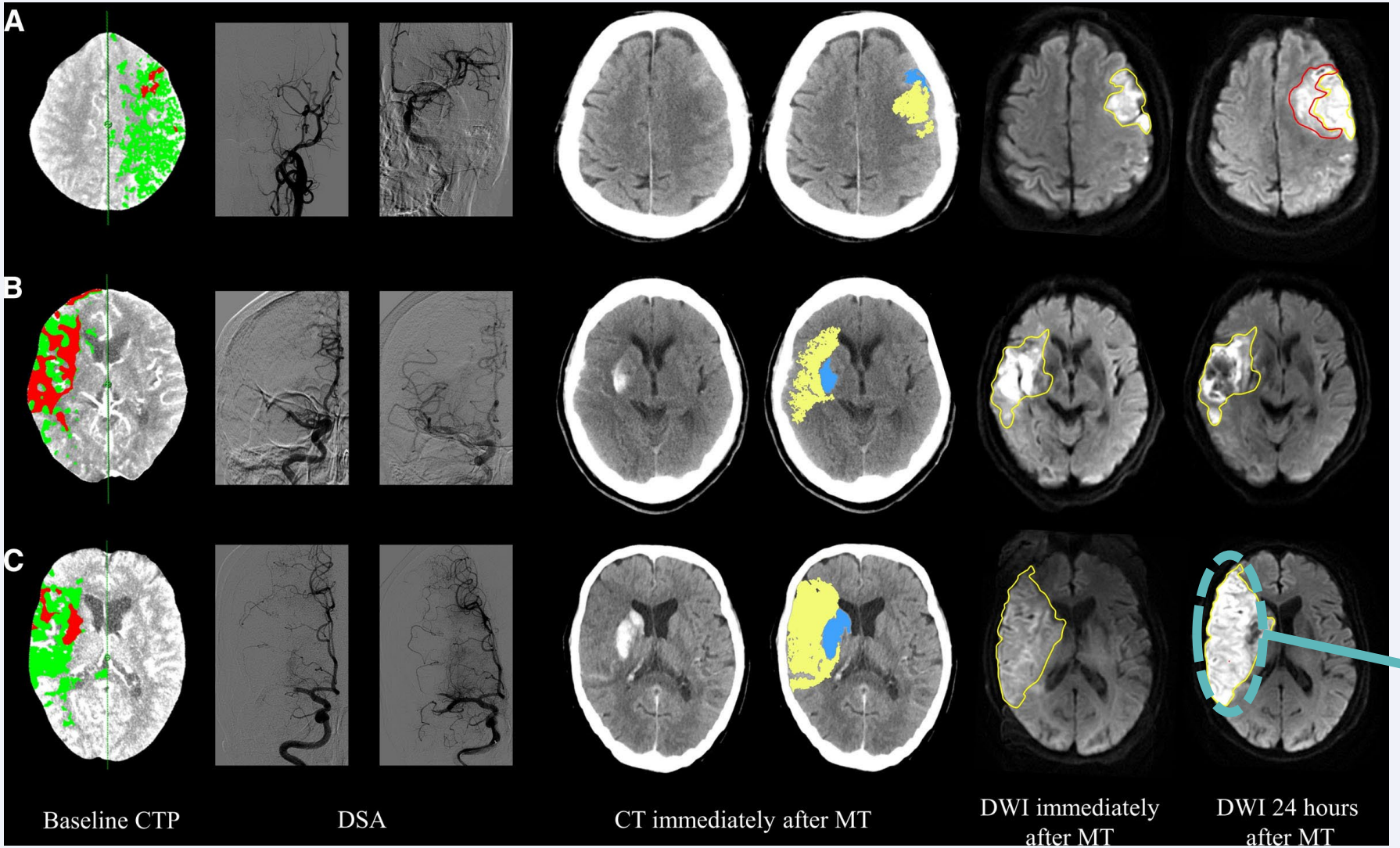
Endpoints

- Mortality rate and frequency of **Adverse and Serious Adverse Events**; timepoints of Day 1, Day 2, Day 3, Day 6 or Discharge, Day 30 and Day 90
- **Infarct volume reduction** between ARG-007 and placebo at 48 hours (Day 3 ± 1 day)

Potential benefits only. ARG-007 is under development and subject to clinical validation.

EXAMPLE OF WHAT PHASE 2 TRIAL HOPES TO ACHIEVE:

PROTECTING VULNERABLE BRAIN TISSUE (PENUMBRA) FOLLOWING STROKE & THROMBECTOMY



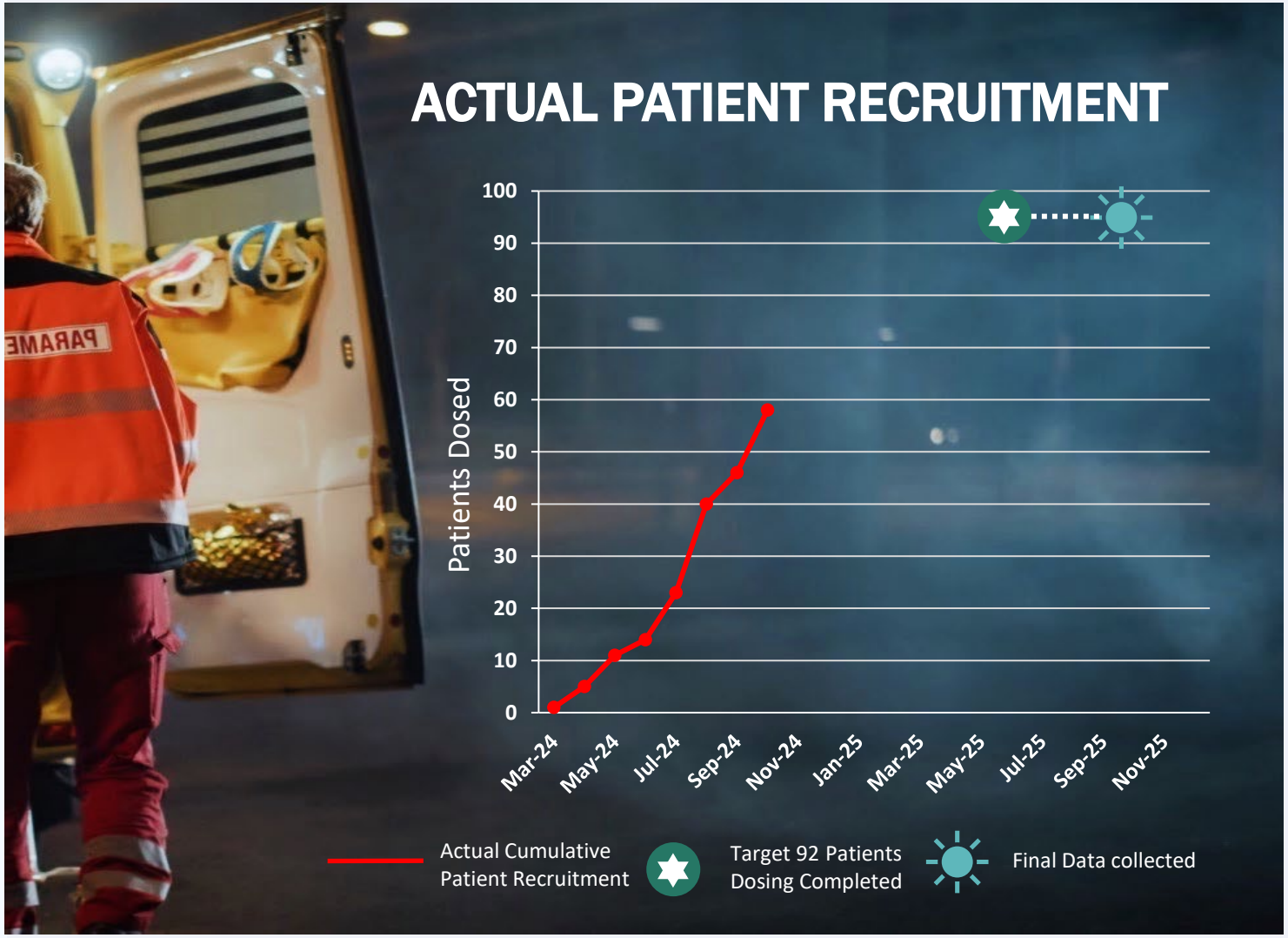
Infarct core: permanent brain cell death

Penumbra: Surrounding tissue that is still alive but vulnerable

ARG-007 aims to protect the vulnerable penumbra from dying following stroke & thrombectomy

Zhou Y, et al, Reperfusion Injury Is Associated With Poor Outcome in Patients With Recanalization After Thrombectomy. Stroke. 2023 Jan;54(1):96-104.

PHASE 2 CLINICAL TRIAL IN STROKE

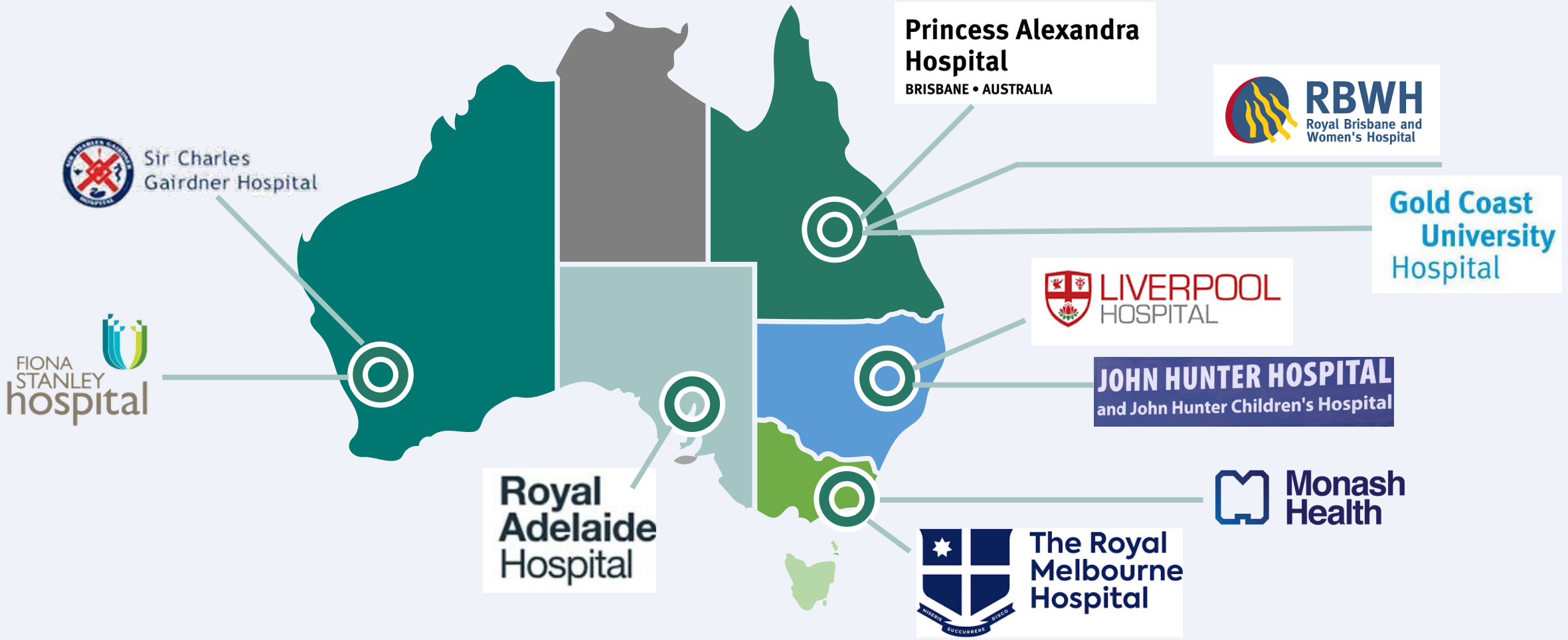


- 10 Australian hospitals activated to recruit 92 patients, currently 63% patients dosed[1].
- Double-blinded, randomised, placebo-controlled study with 0.3mg/kg dose of ARG-007.
- ARG-007 given to patients that have suffered a diagnosed acute ischemic stroke eligible for thrombectomy.
- Objectives;
  1. Safety
  2. Tolerability
  3. Pharmacokinetics
  4. Preliminary Efficacy
- Data Safety Monitoring Board confirmed trial safe to continue after 46 (50%) patients dosed.

1. ASX Announcement – 1 November 2024, Positive DSMB Safety Outcome & Phase 2 Trial Progress Update

PHASE 2 ENROLMENT

92 participants being enrolled across 10 stroke centres in Australia:

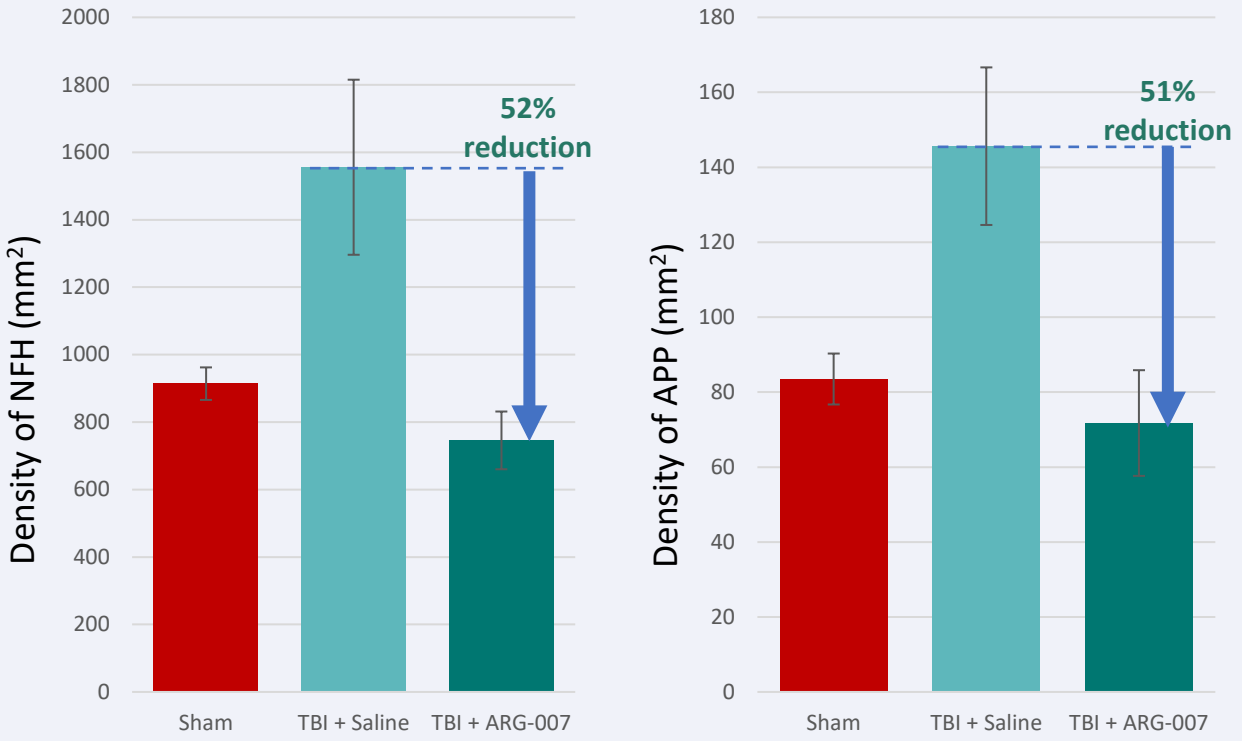


THE OPPORTUNITY FOR ARG-007 IN OTHER INDICATIONS

ARG-007 POTENTIAL IN TBI – RAT DATA

- Estimated USD$18.6bn market size by 2031[1]
- ARG-007 has shown efficacy in pre-clinical studies[2]
- Awarded A$1.2m grant to advance pre-clinical studies[3]

ARG-007 SIGNIFICANTLY REDUCES NFH PROTEIN AND APP FOLLOWING TBI[2]



ARG-007 was found to protect brain cells in the injured brain by significantly reducing the accumulation of proteins that contribute to brain cell injury and death following TBI, specifically neurofilament heavy protein (NFH) and amyloid precursor protein (APP).

1. Traumatic brain injuries assessment market research, 2031 – Allied Market Research

2. ASX Announcement titled 'ARG-007 protects brain cells in moderate traumatic brain injury model' 22 June 2023

3. ASX Announcement titled 'Argenica awarded $1.2m grant for Traumatic brain injury project under the CRC-P program' dated 20 Jan 2023

ARG-007 POTENTIAL IN TBI – FERRET DATA

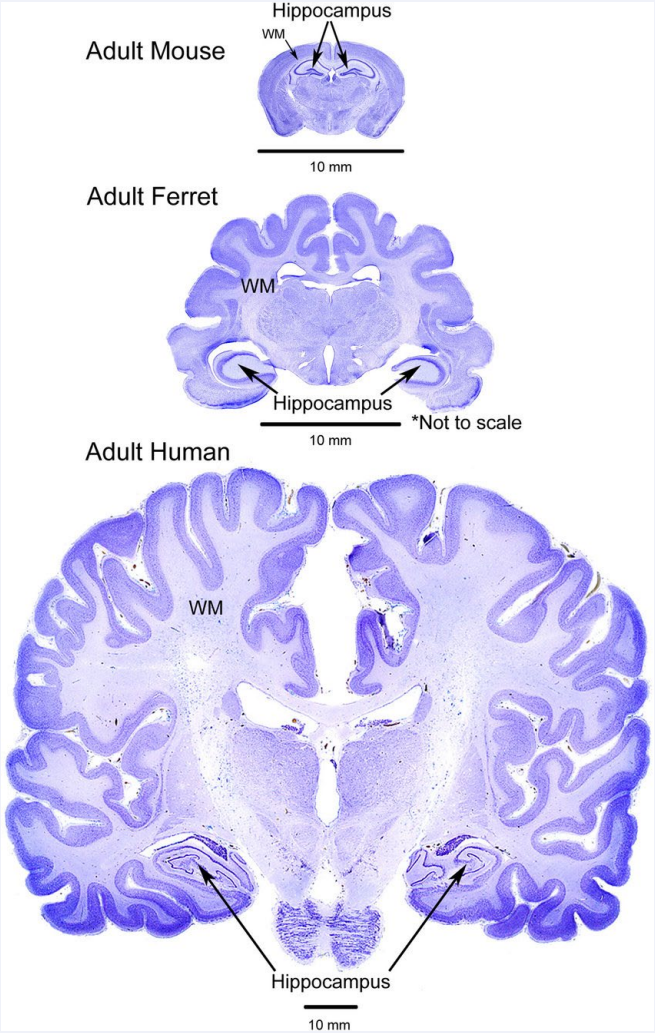
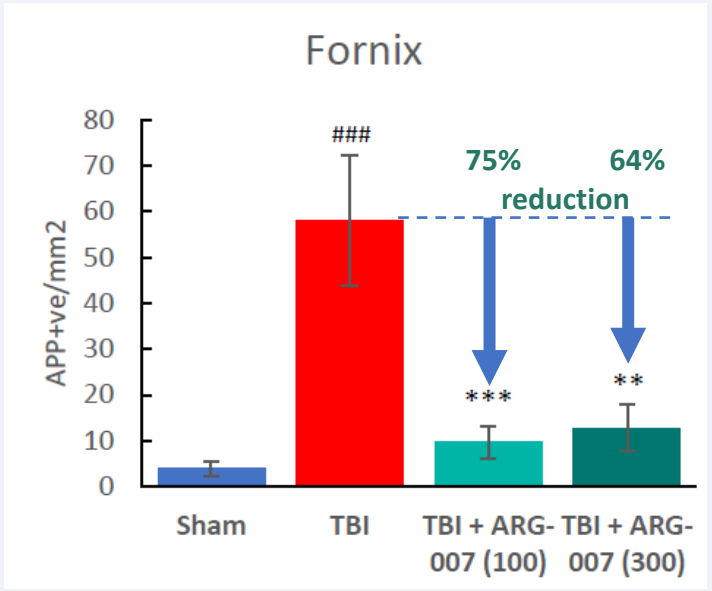
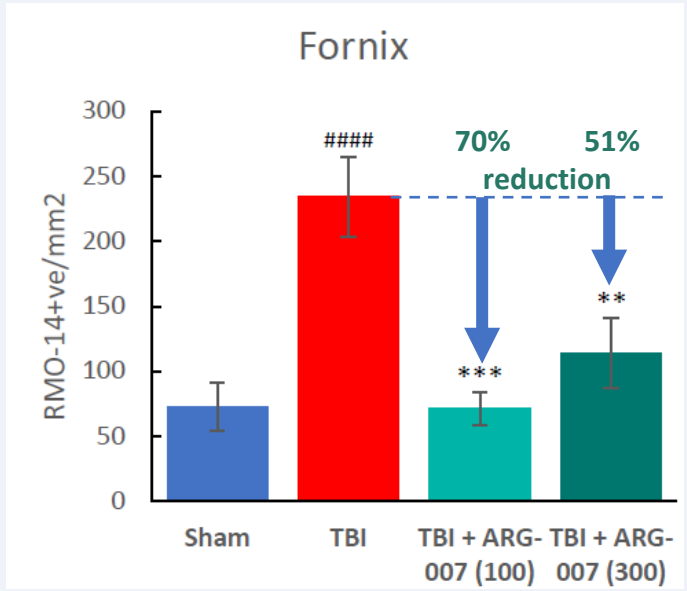


Image reference – Schwerin et al 2017, Establishing the ferret as a gyrencephalic animal model of traumatic brain injury: Optimization of controlled cortical impact procedures, Journal of Neuroscience Methods

ARG-007 SIGNIFICANTLY REDUCES AMYLOID PRECURSOR PROTEIN (APP) AND NEUROFILAMENT M-14.9 (RMO-14) & FOLLOWING TBI[1]

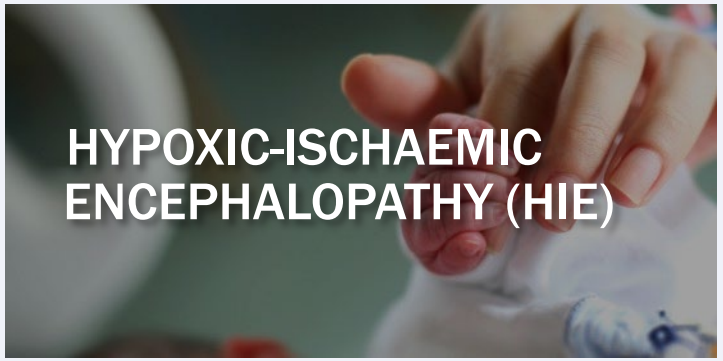




ARG-007 was found to protect brain cells in the injured brain by significantly reducing the accumulation of proteins associated with injury in brain cell following TBI, specifically APP and RMO-14. ### TBI injury is significantly difference from sham, confirming injury impairment. ***p<0.001, **p<0.01 *p<0.05 statistically significant difference of TBI:Vehicle to TBI:ARG007 treated animals to confirm therapeutic response of ARG-007.

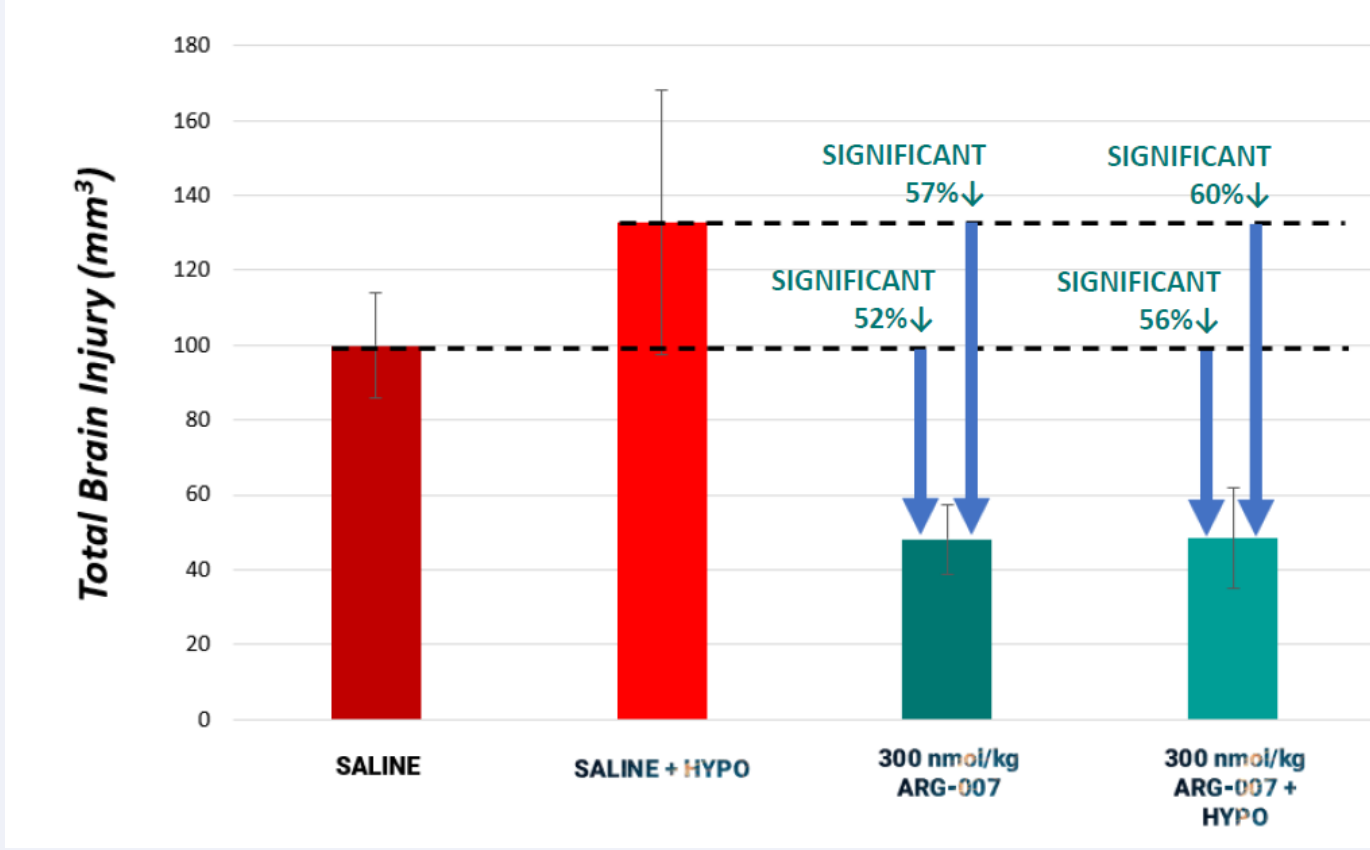
1. ASX Announcement dated 15 May 2024, ARG-007 Significantly Reduces Effects of Traumatic Brain Injury in Preclinical Study

ARG-007 POTENTIAL IN HIE



- HIE occurs in 1.5 to 2.5 births per 1000[1]
- Current standard of care is hypothermia
- Awarded A$2.5m grant to advance pre-clinical studies[2]

TOTAL BRAIN INJURY AT 4 WEEK POST HIE WITH ARG-007 TREATMENT OR ARG-007 WITH STANDARD OF CARE HYPOTHERMIA[3]



1. Hypoxic Ischemic Encephalopathy: Pathophysiology and Experimental Treatments Kimberly A. Allen, MSN, RN and Debra H. Brandon, PhD, RN, CCNS, FAAN
2. ASX Announcement titled 'Significant non-dilutive funding to Complete preclinical hypoxic ischaemic Encephalopathy studies' dated 30 March 2023
2. ASX Announcement titled 'ARG-007 is an effective stand-alone therapy in preclinical study of term hypoxic ischaemic encephalopathy' dated 18 October 2023

FDA HAS GRANTED ODD & RPDD STATUS FOR HIE[1]

Food and Drug Administration (FDA) has granted Orphan Drug Designation (ODD) and Rare Pediatric Disease Designation status to ARG-007 and ARG-006 for the treatment of Hypoxic Ischaemic Encephalopathy (HIE).

- ODD qualifies AGN for incentives including:
  - Tax credits for qualified clinical trials
  - Exemption from user fees
  - Potential seven years of market exclusivity after approval
- Granting of Orphan Drug Designation in HIE forms a key pillar of Argenica's commercialisation strategy
- The potential for extensive market exclusivity following approval is an extremely compelling commercial driver for the Company
- RPDD voucher can be used to obtain priority review for a subsequent human drug application, this voucher can also be sold. Only given on drug approval.

1. *ASX Announcements Dated 15 November 2023, 25 March 2024 and 30 October 2024.*

NEAR-TERM CATALYSTS

Each Quarter
- Phase 2 Trial Updates

Q4 CY24
- Investigational New Drug Application to be submitted to the FDA

Q2-Q4 CY25
- Phase 2 Dosing Complete
- Release of Phase 2 Top Line Data

Q3 CY24 – Q4 CY25
- Preclinical data for indications outside of stroke

INVESTMENT HIGHLIGHTS

1# SOLVING LARGE UNMET NEEDS

Nervous system disorders are the biggest cause of poor health globally[1]. **Currently there are no marketed safe, early intervention therapeutics capable of protecting the brain** from damage following stroke[2]. Argenica is one of the furthest progressed clinical drug development companies globally focused on this indication.

2# SIGNIFICANT PRE-CLINICAL DATA

ARG-007 (R18D) has amassed a huge amount of preclinical data scientifically validating the efficacy, safety and mechanism of action of the drug. There are over 25 peer reviewed publication, as well as the Phase 1 clinical trial data, derisking ARG-007.

3# NEAR-TERM CATALYSTS

Several clinical and preclinical data points will be generated over the next 12 months, providing significant upside to investors.

4# PARTNERING OPPORTUNITIES

Given the focus on neurology assets and blockbuster indications by pharmaceutical companies, Argenica is well positioned to partner post Phase 2.

1 - Global, regional, and national burden of disorders affecting the nervous system, 1990–2021: a systematic analysis for the Global Burden of Disease Study 2021. The Lancet Neurology, published online March 2024. https://doi.org/10.1016/S1474-4422(24)00038-3
2 - Stroke Foundation; accessed 3 May 2021, <https://strokefoundation.org.au/en/About-Stroke/Learn/Treatment-for-stroke/Early-treatment-after-a-stroke>

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