

We accelerate Brain Repair

Breakthrough for Amyotrophic Lateral Sclerosis (ALS) Patients:

Pulsed Bone Marrow Stem Cell Mobilization by G-CSF leads to Slow Disease Progression and Long-Time Survival in ALS-Patients

Fundraising for Pivotal Clinical Phase 2b/3 to get Approval

Munich / Regensburg - Germany

February 2024





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- Clinical pilot data show slow disease progression & improved survival
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Approach: Develop patch pump to perform pivotal clinical trial for approval in ALS

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Market:

- > Exclusivity by Orphan Drug Protection in EU / US and User (Label of Approval)
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IP: Exclusivity on drug-device combination for > 10 yrs

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ALS - a grave neurodegenerative disease of complex & long pathophysiology needs a powerful and comprehensive longtime intervention to stop it



Modified from Eisen et al., 2014

Filgrastim (G-CSF) acts at many targets as highly comprehensive treatment and therefore is a promising candidate for long-lasting ALS-Therapy

lelvio



Stephanie Wallner et al: Front Neurology 2015, Stephanie Wallner et al: Drug Discovery 2021

G-CSF stands for > 30 years of safety and survival in oncology – transfer to ALS needs to show efficacy and long-time tolerance



- Granulocyte colony-stimulating factor
- K. Welte 1985, Pediatrician, MHH Germany
- Human 19.6 kD glycoprotein
- On the market since 1991 ("Neupogen")

Biological Function: Stimulates survival / proliferation and mobilizes hematopoietic stem and progenitor cells from bone marrow.

Existing indications: Neutropenia in oncology, prevention & treatment infectious complications of chemotherapy, stem cell transplantation *Side effects:* bone and muscle pain, well known safety profile

New indication ALS: treatment concept of long lasting stem cell mobilization, needs early start and upper dosing

The G-CSF receptor is expressed in motor neurons of the spinal cord



^{*}From: Pitzer et al., 2008

^{*} Pitzer, C.; Krüger, C.; Plaas, C.; Kirsch, F.; Dittgen, T.; Müller, R.; Laage, R.; Kastner, S.; Suess, S.; Spoelgen, R.; et al. Granulocyte-Colony Stimulating Factor Improves Outcome in a Mouse Model of Amyotrophic Lateral Sclerosis. *Brain* 2008, 131, 3335–3347, doi:10.1093/brain/awn243.

Uni Regensburg treated 36 ALS patients and compared outcomes to current standard therapy - collected in the PRO-ACT *,**,*** database

G-CSF led to robust and relevant survivalbenefit - strongly associated to initial functional ALS-FRS-R score and age - less to gender, latency to first symptoms and site of manifestation

Analysis in matched pairs (1 G-CSF: 10 PRO-ACT) reveals a 50% survival benefit for all G-CSF treated patients (median survival):

PRO-ACT*.*** 373 days vs. G-CSF 596 days (p<0.001) rp-PRO-ACT** 403 days vs G-CSF 596 days (p<0.005)



*Johannesen S, ..., Bruun T-H, Ferguson AR, Bogdahn U. Frontiers; 2021 Mar 18;12. ** rp means population with Riluzol and placebo only; ***Data used in the preparation of this article were obtained from the Pooled Resource Open-Access ALS Clinical Trials (PRO-ACT) Database. The data available in the PRO-ACT Database have been volunteered by PRO-

40% of patients had exceptional strong G-CSF response - identified by PRO-ACT* modeling – with almost 4-fold survival





Johannesen S, ..., Bruun T-H, Ferguson AR, Bogdahn U. Frontiers; 2021 Mar 18;12. **Data used in the preparation of this article were obtained from the Pooled Resource Open-Access ALS Clinical Trials (PRO-ACT) Database. The data available in the PRO-ACT Database have been volunteered by PRO-ACT Consortium members." alsinfo@alsa-national.org

- Velvio GmbH -

Velvio's Biomarker panel reflecting brain structure, inflammation and stem cell activity could predict response within 3 months of G-CSF treatment

- Biomarkers confirm MoA & significantly predict treatment outcome after 3, 6 and 12 months of G-CSF therapy
- Biomarkers may enable an adaptive trial concept to identify / enrich for potential "super responders"
- > Biomarkers will also serve for treatment safety and may be part of the approval label



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Velvio is determined to translate these data from stem cell mobilization by G-CSF to an approved therapy in ALS - Patients



- Can we translate these pilot data in a pivotal clinical Phase 2b/3 trial with pulsed G-CSF application and receive FDA / EMA approval
- > Aim: achieve a very low disease progression and improve survival by factor 3 to 4 with high QoL
- Use a patch pump instead of individual syringes to
 - Mitigate G-CSF side effects
 - Improve feasibility and adherence
 - Establish safe home-based long-term biomarker guided stem cell therapy
 - Employ guidance by experienced team including Neurologists and Hematologists



How does Velvio want to pursue the pivotal clinical trial?





All relevant Partners are already on board



CRO-/Clin. Partner

 Clinical Trial to include patients early in their disease - who benefit most from Thx Velvio

We accelerate Brain Repair

Project Lead

- Scientific Know how / Clinical Data
- > Clinical Trial planning and conduct
- Regulatory Processes EMA / FDA
- MAA-/NDA Holder
- Project Funding (R&D Phase)
- R&D Label Extensions

Launch ALS-Filgrastim in US and EU in ALS Centers (Neurologists and Hematologists)

Pharma Partner* **teva**

- API / Bulk Substance Supply
- Support Regulatory Submissions (IND, NDA/MAA)
- Optional: Marketing & Sales: North America, Europe

CMC Partner



- > CMC and Fill & Finish Development
- Mfc. and Supply of pre-filled cartridges (for Device)
- Support Regulatory Submissions (IND, NDA/MAA)
- Mfc. & commercial supply of final Drug Product

MedTech / Device Partner*



- > Device IP protection
- Medical Device Adaptation to G-CSF protocol
- Support Regulatory Submissions (IND)
- Device Supply for Clinical Study
- Support Regulatory Submissions (NDA/MAA)
- Market Supply of Patch Pump & Disposables

Signed MOU



Development of Filgrastim for ALS patientswith Filgrastim + wearable infusion pump



The IP and Market Protection are achieved via Medical Device IP and extensive scientific and clinical know how (biomarkers, regul. labelling)



Orphan Drug Designation for G-CSF in ALS granted

- USA: 14-4618
- Europe: EU/3/08/532

Clinical Data Protection / Market Exclusivity

- European Union: 8 years ODD / + 2 years + 1 year for new indication.
- United States: 3 years for a new CE indication; 8 years ODD (12 years for new biological products)
- Japan / China: 6 years

Medical Device Patent Family (compare to Insulin pumps)

- Exclusive wearable patch pump is protected by a patent family (latest expiry date is 2031)
- Further new IP in development of Drug-Device combination, e.g. individual dosing

User (Label) ,Exclusivity'

 Approved regulatory label shall restrict patient managment to ALS centers (joint neurological with hematological care) capable to safely monitor treatment response and adjust dosimetry / treatment intervals based on the biomarker panel developed by Velvio

Velvio`s Funding Needs for Operations and Project Performance G-CSF in ALS



| | Y-1 | Y- | -2 | Y-3 |
|--|-----------|-----|----------|-------------------------|
| Velvio Ops: personnel, premises (lab & office), equipment, materials, utilities/services, biomarker program, IP/Legal, Consulting, Funding (EUR M) | 5.5 – 6 | | 9.5 – 10 | |
| Drug Product and Device Development | | | | |
| Device development with API and patient profile | CMO 1 | | | |
| API (G-CSF) / Fill & Finish development | CMO 2 | | | |
| Clinical study preparation | * velvio | 2 * | 3 | |
| Clinical study (FDA/EMA) | | | * V | elvio: ALS Study |
| Application for Approval (NDA/MAA) | | | | \star cNDA/ \star 3 |
| Project costs (EUR M) | 17.5 – 18 | | | 17.5 – 18 |
| Total (EUR M) | 23 – 24 | | | 27 – 28 |

Total over 3 years: 50 - 52 EUR m

- *1 FDA/EMA Clinical Advice
- ***1 FDA IND approval** (chance of registry trial)
- ***2** US FDA IND application
- ***2 Potential conditional approval** 6 months interim data
- ***3** Start of confirmatory clinical trial
- ***3 Potential conditional approval** 12 months interim data

Project - Milestones and Funding Steps

1st step: 23 - 24 M EUR will enable FDA/EMA Clinical Advice, Drug Product and Device Development, Clinical trial protocol & biomarker program, IND approval and Trial Site selection / initiation

2nd step: 27 - 28 M EUR will lead to regulatory approval and commercialization capabilites: Phase 2b trial conduct, clinical biomarker program, NDA/MAA submissions, Publications, Pharma Partnering/Licensing

Velvio targets Peak Sales of half a billion in 7 major markets

Filgrastim Market Model in ALS



Key assumptions and outcome parameters – first outpatient long-time stem cell therapy

| Conservative Estimates of Market Data for ALS | ALS | | |
|---|----------------|--|--|
| ALS Prevalence (2030) ¹ | 59.650 | | |
| ALS Incidence (2030) ¹ | 23.860 | | |
| Per 100.000 | | | |
| US | 2,81 | | |
| North Europe | 2,81 | | |
| South Europe | 2,25 | | |
| East Europe | 2,53 | | |
| Patients eligible (2030) ² | 17.100 | | |
| Eligible Patients in % | 28,7% | | |
| Peak Patient Share ² | 42.5% | | |
| Median Life expectancy ^{2,3} (from start of treatment) | 16 - 24 months | | |
| Patients treated (2030) ² | 8615 | | |
| Median Treatment Duration ² | 48 months | | |
| Launch Year (US) | Q1 2027 | | |
| Launch Year (EU) | Q2 2027 | | |
| End of Market exclusivity (US) | 2034 | | |
| End of Market exclusivity (EU) | 2034 | | |
| Ex-MNF price per year (US) | 75.000 USD | | |
| Ex-MNF price per year (EU) | up to 37.000 € | | |
| Peak Sales (ex- mfc.) | € 538M | | |
| Project NPV (18% non risk adjusted discount) | € 447M | | |



1. Public information & BGM Database and Estimates

2. BGM Database and estimates, Velvio Management's estimates





- This is the chance to establish <u>Long-Term Bone Marrow Stem Cell Mobilization</u> via ALS for other challenge indications like severe neurodegeneration (MSA), spinal cord injury and TBI, or ,Chemobrain' in oncology
- Velvio asks to be active part of this breath-taking revolutionary therapeutic enterprise



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Appendix – Backup Slides





Velvio adresses a serious unmet clinical problem: ALS Patients still die loosing their motoneurons and their voluntary muscles within 2 to 3 years





- Patients progressively lose their power to use their muscles, swallow and speak normally, or breathe and communicate easily, cognition remains fully alert!
- Overall median survival from initial symptom with 21 31 months post diagnosis is poor -Incidence: 2 - 2.5 / 100,000 and Prevalence: 4 – 6 / 100,000 ³, will increase by ~ 30% in 7MM until 2040, median age varies in different populations
- Current Standard of Care Therapies Riluzole, Edaravone, Relyvrio have delaying effects New developments focus on mutations (mtSOD1), gene editing does not offer repair
- Individual Life-Time Risk: 1 / 400⁴ correlates with 60 80,000 treated patients per year, thereof 37.000 50.000 in EU5, US, Japan⁵

Patient - / Family costs peak around 150.000 € / year = 1.3 billion \$ / year alone in US



| Product Description | Recombinant human Granulocyte Colony Stimulating Factor – G-CSF Binds to G-CSF-R, Dimerization and transmembrane signaling to JAK-STAT (Transcription), Lyn (Inflammation), Erk1/2 (MAP/ERK signaling) Proliferation of hematopoietic / other stem cells, anti-apoptotic, anti-inflammatory |
|------------------------------|---|
| Indication | Early ALS, short latency from diagnosis, bulbar and spinal ALS Biological age <65 years - efficient stem cell mobilization modulated biomarker profile |
| Dose & Administration | 60mio IU/ml per day on 5 consecutive days / month S.c. infusion (60 minutes) using wearable patch pump |
| Drug Product presentation | Prefilled glass cartridge w / 1ml Filgrastim (600 μg/ml = 60 mio IU/ml) Device: wearable patch pump (reusable with electronics) using a disposable unit for each infusion (containing patch, needle and vacuum mechanism) |
| Efficacy | Slow disease progression (monthly decline in ALS-FRS-R of 0.9 – 0.97 with currently approved medication to ALS-FRS-R of 0.12) under G-CSF treatment Increased overall survival - from currently: 24 months after 1st symptoms - to ≥ 4 years |
| Safety | Very good tolerance and high safety (as reported in millions of patients in oncology indications), long-time use documented in 36 patients so far |
| Other benefit | Increased Quality of Life during entire therapy period Change in brain structure, apoptosis protection, general anti-inflammatory effect |
| Positioning | 'CNS Repair' by long-time bone marrow stimulation as a new therapeutic option for (early) ALS patients; Breakthrough facilitating extended survival in ALS with good quality of life |
| Project Upside(s): | Adding 'Chemobrain' (in cancer patients), Spinal Cord Injury, and other aggressive forms of neurodegeneration |