

phormoxis

Investor Presentation | 31 March 2022

developing breakthrough treatments for fibrosis and inflammation

#### Forward looking statement

This document contains forward-looking statements, including statements concerning Pharmaxis' future financial position, plans, and the potential of its products and product candidates, which are based on information and assumptions available to Pharmaxis as of the date of this document. Actual results, performance or achievements could be significantly different from those expressed in, or implied by, these forward-looking statements. All statements, other than statements of historical facts, are forward-looking statements.

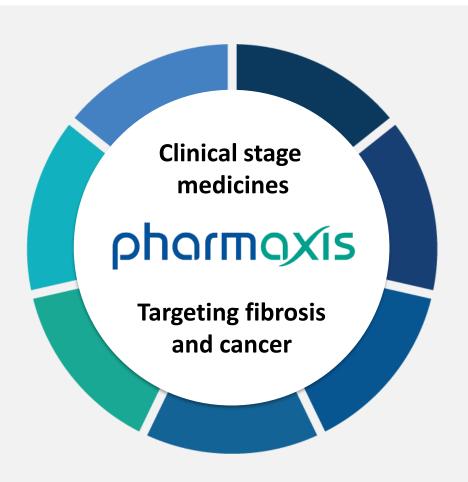
These forward-looking statements are not guarantees or predictions of future results, levels of performance, and involve known and unknown risks, uncertainties and other factors, many of which are beyond our control, and which may cause actual results to differ materially from those expressed in the statements contained in this document. For example, despite our efforts there is no certainty that we will be successful in developing or partnering any of the products in our pipeline on commercially acceptable terms, in a timely fashion or at all. Except as required by law we undertake no obligation to update these forward-looking statements as a result of new information, future events or otherwise.

## Program

	11.00	Welcome and introduction to program	Michael Woods						
	11:05	Pharmaxis – a global leader in lysyl oxidase chemistry and biology	Gary Phillips						
	11.15	The science of scarring and potential for LOX inhibition	Dr Mark Fear (UWA)						
	11.30	Clinical applications for LOX inhibition	Professor Fiona Wood (UWA)						
	11.45	Q&A with panel							
	12.10	Pharmaxis Q&A	Gary Phillips						
(QD)	12.20	Close							
<b>O</b> phormoxis									

### **Executive Summary**

- Pharmaxis is a clinical stage drug development company targeting fibrosis and cancer indications with first in class or best in class small molecule drugs in markets of high value
- Pharmaxis is the global leader in fibrosis driven by lysyl oxidase enzymes having invested in a multi year research program leveraged with extensive external scientific collaborations
- Pharmaxis has 4 studies planned for 2022 that will lead to near term value opportunities
  - Lead asset PXS-5505 is in a multinational phase 2 trial a breakthrough clinical program with disease modifying potential in Myelofibrosis
  - IND approval to commence US investigator led phase 2 trial in liver cancer with PXS-5505 as first line treatment added to existing chemotherapy.
  - Topical drug PXS-6302 is in a phase 1c trial in patients with potential to improve function and appearance of established scars with a study in burns patients to follow later this year.
- Specific corporate strategy to deliver non-dilutive cash and cost savings from commercial stage mannitol business
- Pharmaxis is well positioned to fund its focused clinical program

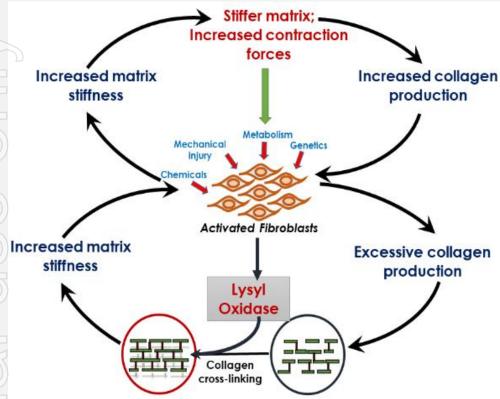




#### Pharmaxis is the global leader in lysyl oxidase chemistry and biology

Multi year research program leveraged with extensive scientific collaborations worldwide has delivered 2 drugs in the clinic

## Lysyl oxidases are the final stage in fibrosis



Tissue stiffening due to increases in collagen and number of cross-links is preventable through lysyl oxidase inhibition and at the heart of a true anti-fibrotic therapy

#### PXS-5505

- Oral dosage form twice a day dosing
- Patent 2018
- Strong pre clinical evidence in models of fibrosis and cancer
- INDs approved for myelofibrosis and hepatocellular carcinoma
- Potential in multiple cancer indications
- Phase 1 data demonstrates a safe, well tolerated drug that gives >90% inhibition of LOX enzymes

#### PXS-6302

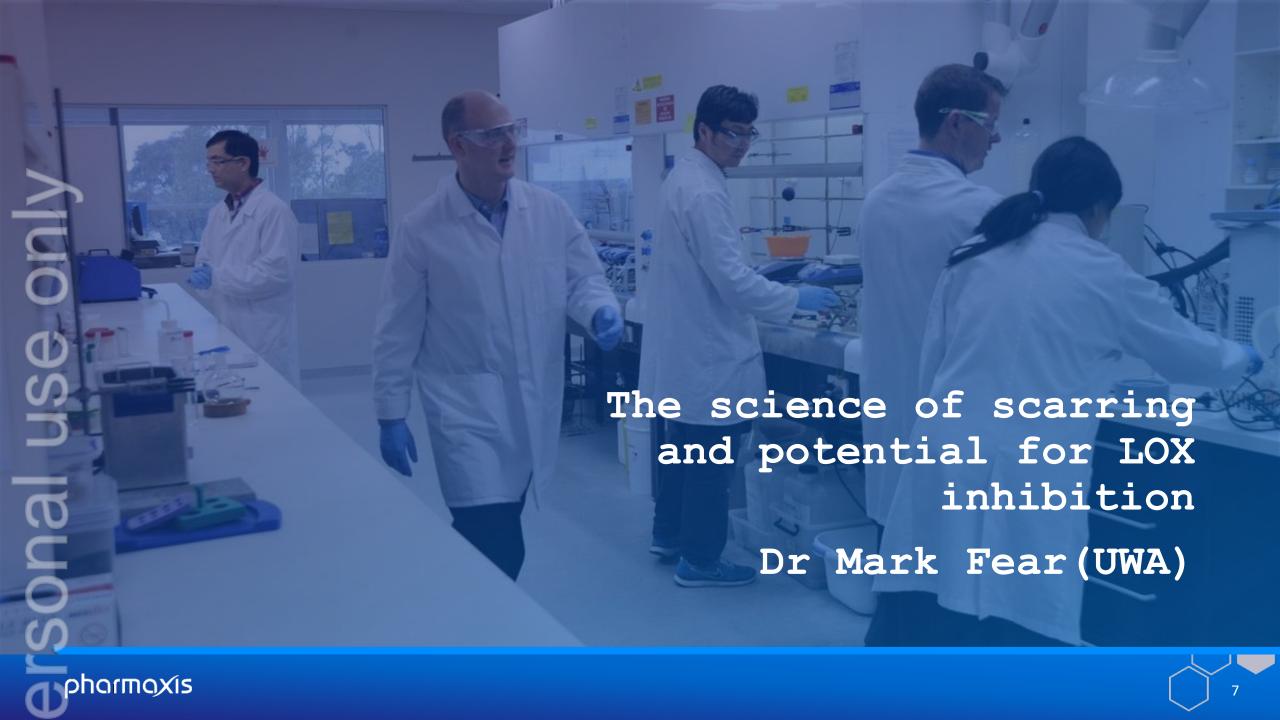
- Topical dosage form one application per day
- Patent 2019
- Strong pre clinical evidence in models of skin fibrosis and scarring
- Potential in prevention of scar formation and modification of existing scars
- Phase 1 data demonstrates a safe, well tolerated drug that gives full inhibition of LOX enzymes in the skin with minimal systemic exposure



#### Four trials to deliver near term value

Pipeline creates multiple opportunities in high value markets

	D	Indication	Addressable market (US\$)	Trial design	# patients	Status	Data
	PXS-5505	Myelofibrosis (MF)	\$1 billion	Phase 2 open label 6 month study in JAK intolerant / ineligible myelofibrosis patients	24	Recruiting	Year end 2022
		Hepatocellular Carcinoma (HCC)	\$7 billion	Phase 1c open label dose escalation study in newly diagnosed patients with unresectable HCC on top of standard of care (PD-L1 inhibitor + anti VEGF)	18	First Patient Q2 2022	2H 2023
	PXS-6302	Modification of established scars	\$3.5 billion	Phase 1c 3 month placebo controlled study in patients with established scars (>1 year old)	50	Recruiting	Q4 2022
		Scar prevention post surgery	\$3.5 billion	Phase 1c 3 month placebo controlled study in patients with scarring subsequent to a burns injury	50	First patient mid 2022	1H 2023





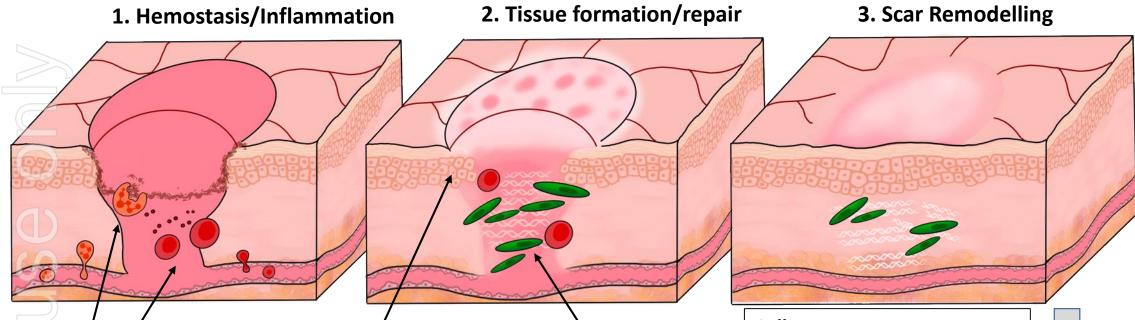
# PXS-6302 treatment in the amelioration of scar



**Mark Fear** 

Burn Injury Research Unit School of Biomedical Sciences University of Western Australia

Months/Years Mins Hours Weeks Days



#### **Inflammatory cells**

- Removal of bacteria and necrotic tissue
- Cytokine and MMP production
- Stimulate tissue repair growth factors

#### Keratinocytes

- Re-epithelialization
- Cover the surface

**Fibroblasts** 

Granulation tissue collagen deposition

#### Collagen

Small parallel bundles

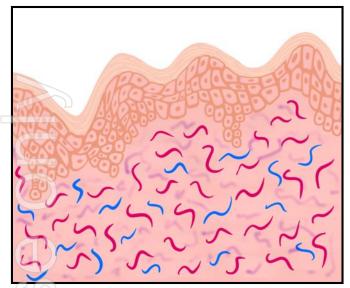
Parallel bundles with increased synthesis and crosslinks

Parallel bundles of thick fibres with increased production and crosslinks

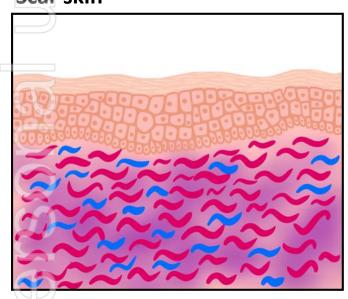
Scar Worse

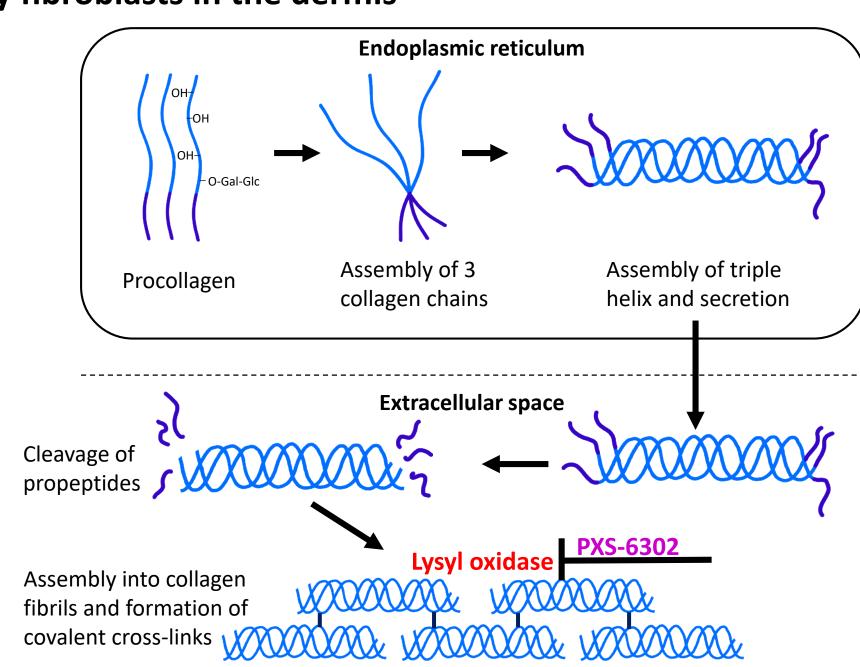
## Collagen is produced by fibroblasts in the dermis

#### Normal skin

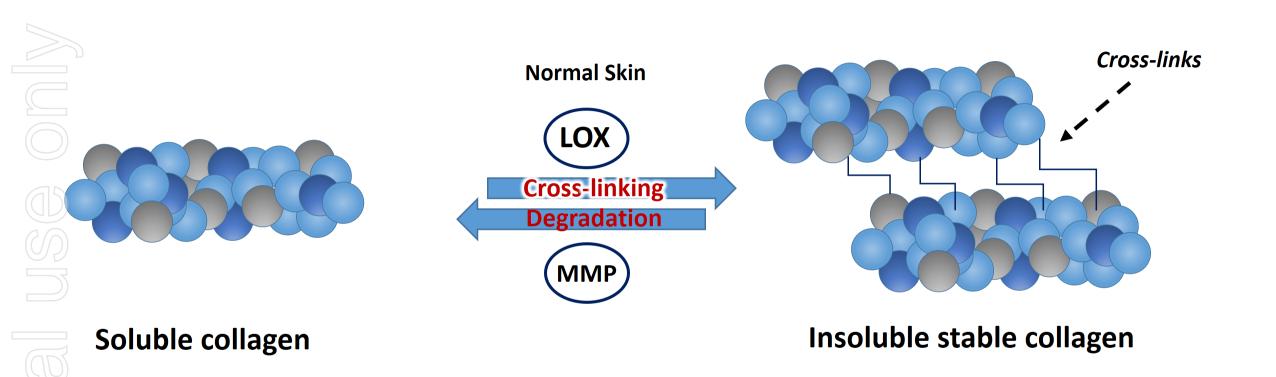


#### Scar skin

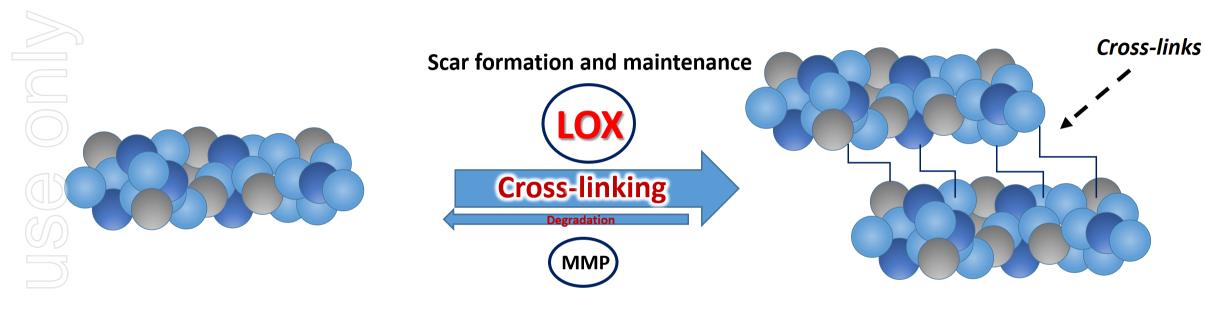




## PXS-6302 reduces collagen stability and increases remodelling



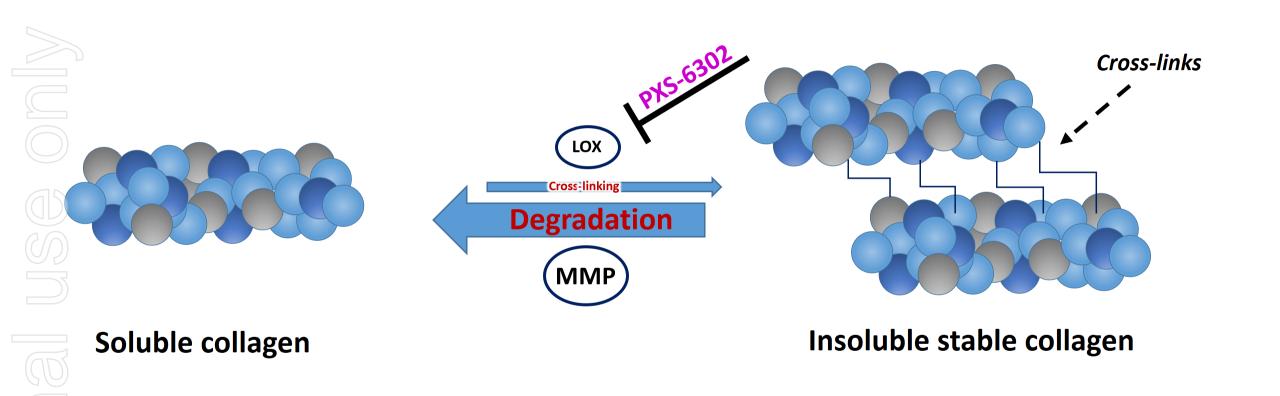
## PXS-6302 reduces collagen stability and increases remodelling



Soluble collagen

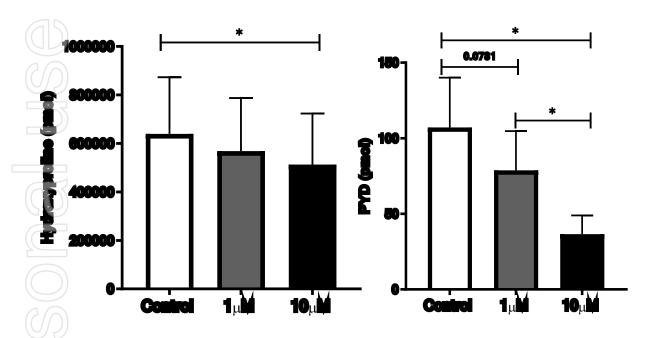
Insoluble stable collagen

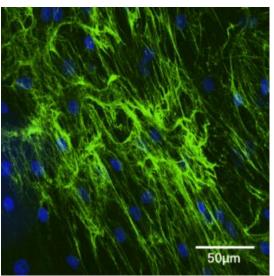
## PXS-6302 reduces collagen stability and increases remodelling

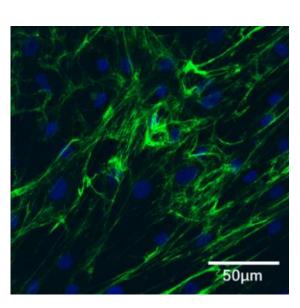


## Inhibiting LOX reduces collagen cross-linking and production of fibroblasts

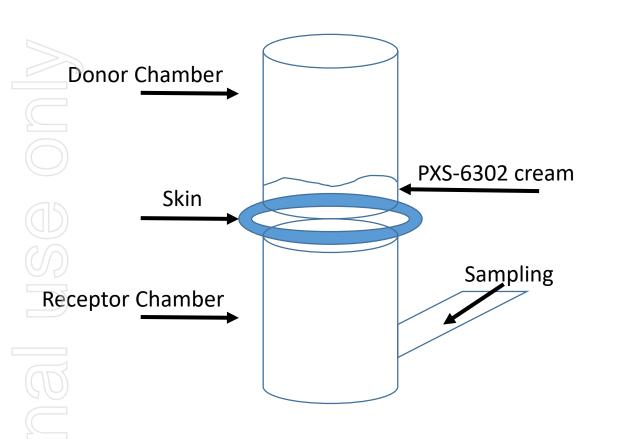
- 1. Treating fibroblasts with LOX inhibitor reduces;
  - A. Collagen production
  - B. Cross-linking of collagen

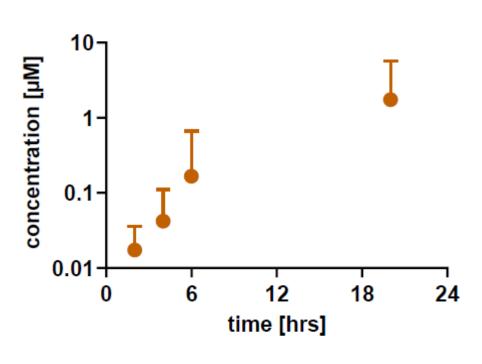






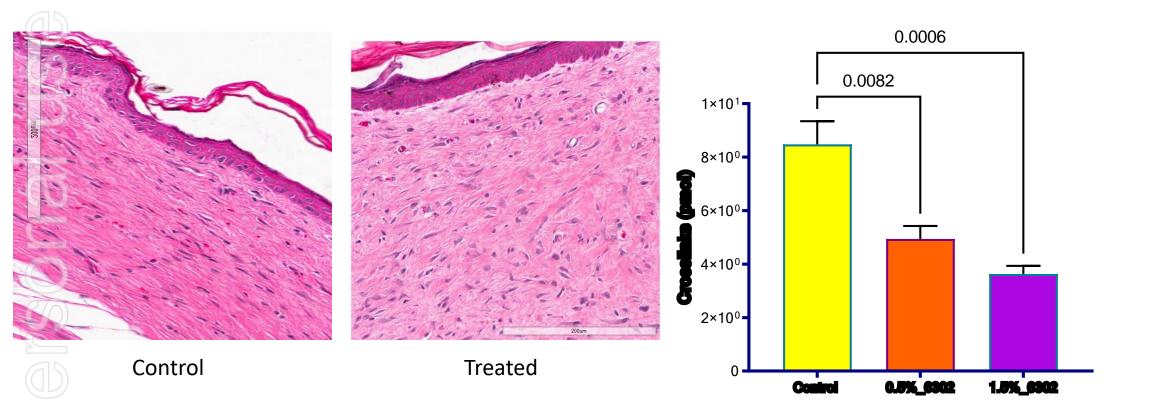
## PXS-6302 penetrates skin when applied as topical cream





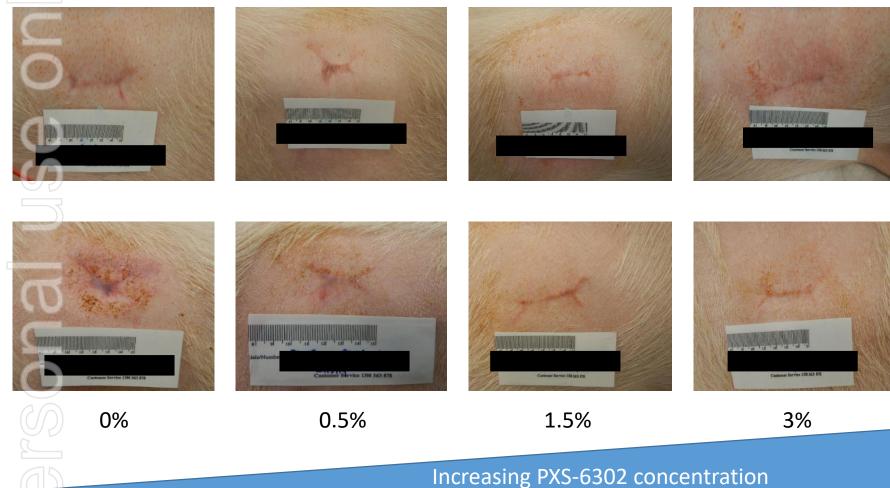
## **Pre-clinical models with PXS-6302**

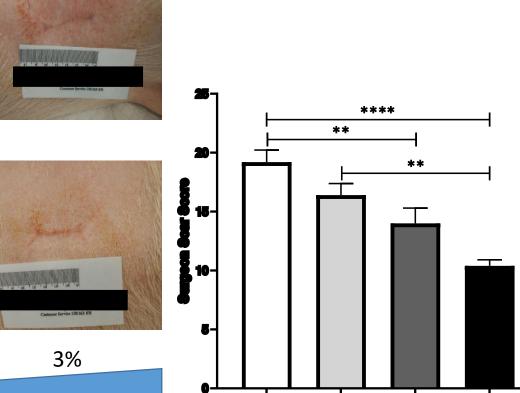
- 1. Small full-thickness excision injury
- 2. Topical treatment for 28 days (once per day)
- 3. Scar tissue analysed



## Improved scar appearance with PXS-6302 treatment

- 1. 10cm<sup>2</sup> large full-thickness excision injury
- 2. Topical treatment from time of healing for 10 weeks once per day
- 3. Scar tissue analysed





## Improving appearance without losing tensile strength

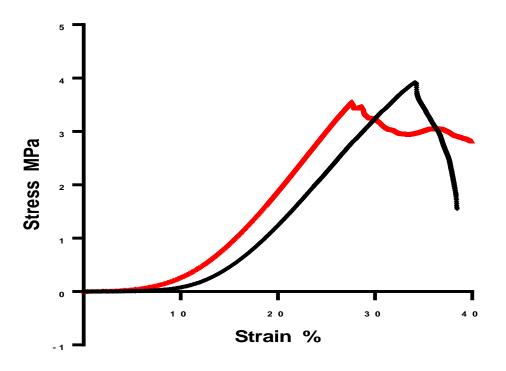
- 10cm<sup>2</sup> large deep dermal burn injury
- Topical treatment from time of healing for 10 weeks once per day
- 3. Scar tissue analysed



Placebo



3% PXS-6302



Red-placebo Black - 3% PXS-6302

## **Summary**

#### Once per day treatment with topical PXS-6302 cream;

- 1. Inhibited the target enzyme (LOX) in scar tissue
- 2. Improved scar appearance in small and large surgical injury models
- 3. Improved scar appearance in deep-dermal burn injury model
- 4. No loss of tissue strength and improvements in pliability
- 5. Potential to treat both developing and established scars





# PXS-6302 treatment in the amelioration of scar



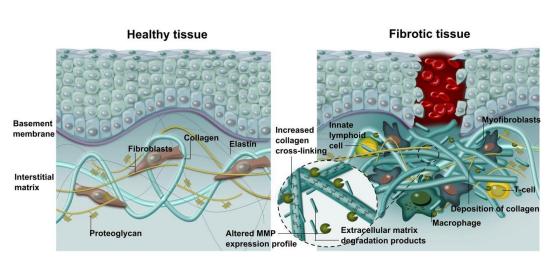
Fiona Wood
Burns Service of Western Australia
Burn Injury Research Unit
University of Western Australia

## The impact of scars on patients

Fibrosis is the result of an imbalance in the deposition and degradation of Extracellular matrix (ECM).

Fibroblasts activated to a phenotype which drives excess matrix deposition

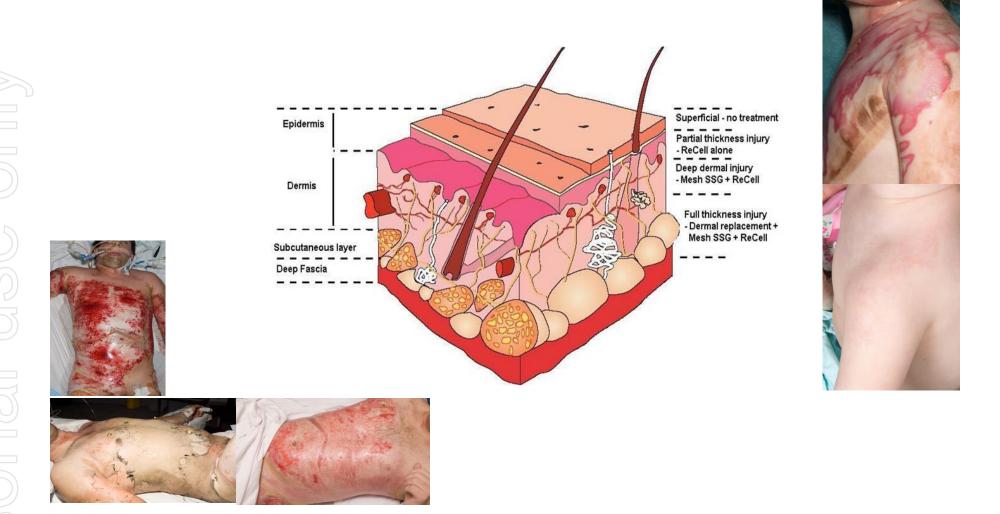






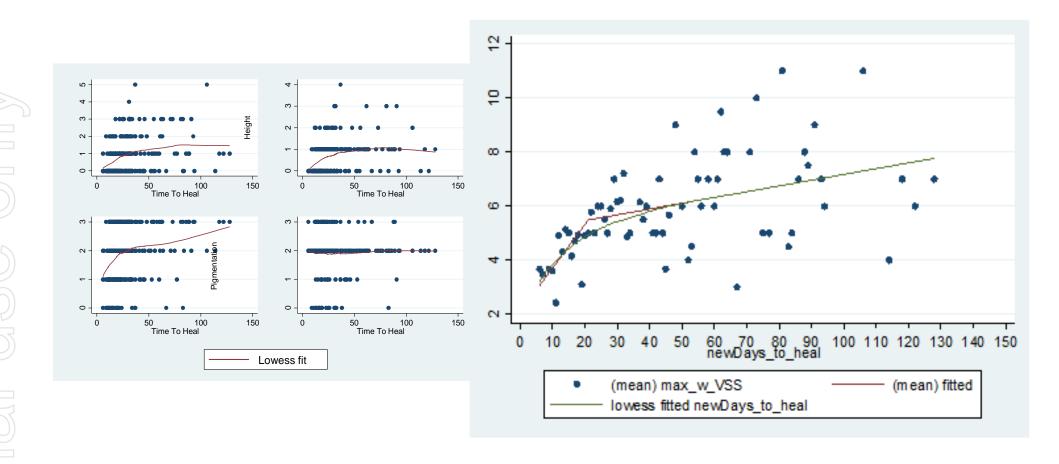
Morten A. Karsdal et al. Am J Physiol Gastrointest Liver Physiol 2015;308:G807-G830

## **Treatment plan**

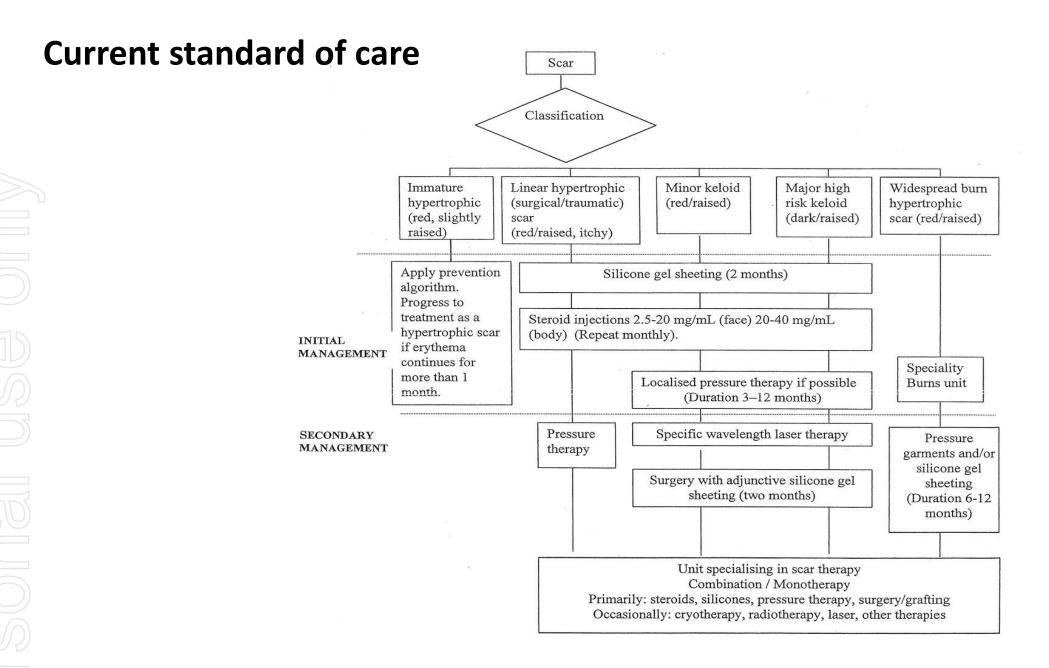


Navarro, F.A., Stoner, M.L., Park C.S. et. al. 2000. 'Sprayed keratinocyte suspensions accelerate epidermal coverage in a porcine microwound model'. J. Burn Care & Rehabilitation 21(6): 513-518.

## Time to Healing



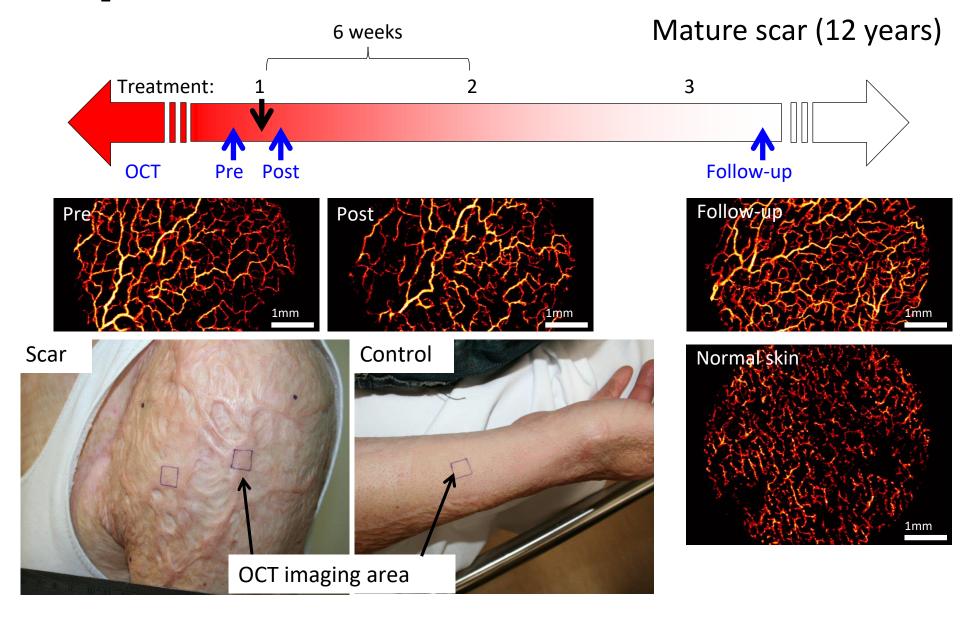
Finlay, V., Burrows, S., Burmaz, M., Yawary, H., Lee, J., Edgar, D., & Wood, F. M. (2017). Increased burn healing time is associated with higher Vancouver Scar Scale score. Scars, Burns & Healing, 3. L. Martin, M. Byrnes, S. McGarry, F. Wood. Social challenges of visible scarring after severe burn injury: A qualitative analysis. Burns, Aug 2016.



Mustoe T.A., Cooter D., Gold M.H., Hobbs R., Ramelet A., Shakespeare P.G., Stella M., Teot L., Wood F.M., Ziegler U.E. (2002) 'International Clinical Recommendations on Scar Management'.

Plastic and Reconstructive Surgery, 110; 2: 560-571

## Assessing CO<sub>2</sub> fractional laser ablation



Gong P, McLaughlin, R.A., Liew, Y.M., Munro, P.R., Wood, F.M., Sampson, D.D Photonics

### Unmet need and current clinical development pipeline

- Regeneration V repair cellular processes, control of the ECM to drive a regenerative phenotype and reduce scarring in the acute phase
- Scar control, enhance scar reduction over time
- Integration of new tissue into recipient area controlling the scar processes

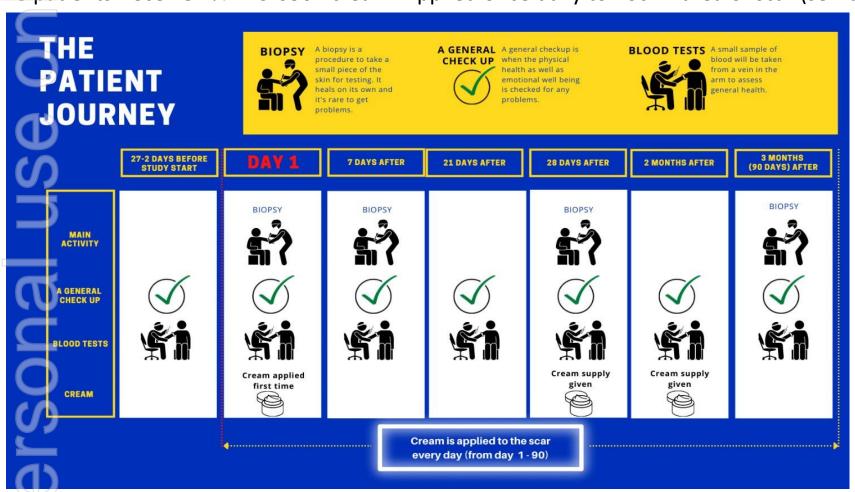
#### Solaria 2 Trial Outline -PART I

#### **Population**

Patients with established scar >10cm<sup>2</sup> area. 18-60 years old

#### Cohort 1

8 patients receive 2% PXS-6302 cream. Applied once daily to 10cm<sup>2</sup> area of scar (self-administered).



#### Solaria 2 Trial Outline - PART I

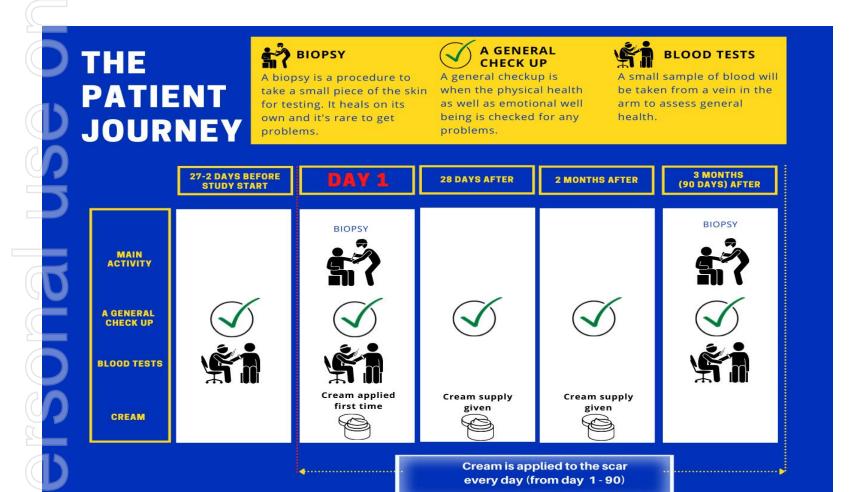
#### Cohort 2

42 patients.

Patients randomized into two groups (placebo or PXS-6302 cream). Applied once daily to 10cm<sup>2</sup> area of scar (self-administered) Samples collected at day 1 (commence treatment), 3 months only (final treatment)

Outcome measures: Primary - Safety – Adverse events

Secondary: Image assessment, POSAS, ultrasound, histology



## Solaria 2 Trial Outline – PART II Improving healing after a burn injury

#### **Patient population**

Adult with non-severe burn injury - Recruited at 2-3 weeks post-injury

#### Study design

RCT with placebo or treatment cream

3 months – once per day treatment

Outcome measures

Primary: Adverse events

Secondary: 3D scar scans, POSAS, ultrasound, histology, requirement

for secondary intervention for scar (eg laser therapy)



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## phormoxis

developing breakthrough treatments for fibrosis and inflammation

Pharmaxis Ltd ABN 75 082 811 630 www.pharmaxis.com.au





#### Contacts

Gary Phillips
Chief Executive Officer
gary.phillips@pharmaxis.com.au

David McGarvey
Chief Financial Officer
david.mcgarvey@pharmaxis.com.au