

22 April 2022

Botanix announces upcoming presentation at Health Economics Conference

Key highlights

- Botanix announces presentation on outcomes and costs associated with central venous catheter-related *S. aureus* bloodstream in hemodialysis patients at the upcoming Professional Society for Health Economics and Outcomes Research Annual Meeting (ISPOR 2022) in Washington, DC.
- ISPOR 2022 will be an in-person and virtual event on May 15 -18, 2022; registrants can attend either in-person at the Gaylord National Resort and Convention Center, or virtually through an online platform. <https://www.ispor.org>
- The abstract (ID 115703:) *Outcomes and Costs Associated with Central Venous Catheter-Related S. aureus Bloodstream Infections in Adult Hemodialysis Patients with S. aureus Nares Colonization*, will be presented by the lead author, Professor Tom Lodise on May 17, 2022

Philadelphia PA and Phoenix AZ, 22 April 2022: Botanix Pharmaceuticals Limited (ASX: BOT, “Botanix” or “the Company”) a clinical dermatology company, is pleased to announce an upcoming presentation at the upcoming Professional Society for Health Economics and Outcomes Research Annual Meeting (ISPOR 2022) in Washington, DC on May 15-18, 2022. ISPOR 2022 will be a hybrid event. In addition to attendance on-site, the event will be live-streamed at <https://www.ispor.org>.

The abstract entitled *Outcomes and Costs Associated with Central Venous Catheter-Related S. Aureus Bloodstream Infections in Adult Hemodialysis Patients with S. aureus Nares Colonization* will be presented by the lead author, Professor Tom Lodise, on May 17, 2022, during Poster S4 at 5:30PM - 6:30PM EDT.

The study outlined in the Abstract modeled the annual costs to payers associated with central venous catheter (CVC)-related *S. aureus* bloodstream infections in adult CVC-hemodialysis (HD) patients with intranasal *S. aureus* colonization. The study population consisted of the ~90,000 patients who start in-center HD with a CV in the US each year. Data indicate that approximately thirty-six thousand (36,000) patients who begin in-center HD with a CVC each year are colonized with *S. aureus* in their nares. Based on a 7.5% estimated annual rate of *S. aureus* bloodstream infections in CVC-HD patients related to intranasal *S. aureus* colonization, attributable costs associated with *S. aureus* bloodstream infections in these patients are projected to exceed \$360 million annually.

Professor Tom Lodise, the lead author, remarked:

“Annual morbidity, mortality, and healthcare costs associated with central venous catheter - related S. aureus bloodstream infections in hemodialysis patients that are attributable to S.

aureus nares colonization are substantial. It is projected that costs to Payers, including Medicare, exceed \$360 million annually.”

“Among the 36,000 incident CVC-HD patients with intranasal S. aureus colonization, it is estimated that there are 7,470 S. aureus bloodstream infection-related hospital admissions and 1,440 S. aureus bloodstream infection-related deaths each year attributable to S. aureus intranasal colonization. Interventions designed at preventing infections in this patient population are sorely needed to minimize the deleterious outcomes associated with these infections”.

Dr Jamie P. Dwyer, MD, Professor of Medicine, University of Utah Clinical and Translational Sciences Institute, Co-founder of Innovative Renal Care remarked in relation to the Abstract:

“The hemodialysis patient population is highly vulnerable to infection, with many patients being older or immunocompromised or having comorbidities, such as diabetes mellitus. Complications of S. aureus bacteremia are life-threatening and include meningitis, endocarditis, and osteomyelitis, all of which are very costly”.

“It is widely known that S. aureus nasal carriers have a markedly higher risk of bacteremia vs non-carriers¹. There is a need for novel agents for intranasal decolonization of S. aureus to reduce the risk of S. aureus bloodstream infections among this high risk, hemodialysis patient population.”

ISPOR draw attendees from the global health economics and outcome Research (HEOR) community, including researchers, regulators, payers, decision makers, and global thought leaders.

Release authorised by

Vince Ippolito

President and Executive Chairman

About Botanix Pharmaceuticals

Botanix Pharmaceuticals Limited (ASX:BOT) is a dermatology focused company based in Perth (Australia) and Philadelphia (USA) committed to the development of pharmaceutical products that are underpinned by science and supported by well-controlled randomised clinical trials. The Company has two separate development platforms - dermatology and antimicrobial products - both of which currently leverage the unique anti-inflammatory, immune modulating and antimicrobial properties of cannabinoids, particularly synthetic cannabidiol. Botanix has an exclusive license to use a proprietary drug delivery system (Permetrex™) for direct skin delivery of active pharmaceuticals in all skin diseases, which it utilises in its existing development programs and is being explored with a view to being utilized in a number of other product opportunities. To learn more please visit: <http://www.botanixpharma.com/>

For more information, please contact:

General enquiries

Corporate Communications

Botanix Pharmaceuticals

P: +61 8 6555 2945

investors@botanixpharma.com

Investor enquiries

Hannah Howlett

WE Communications

P: +61 450 648 064

hhowlett@we-worldwide.com

Media enquiries

Haley Chartres

HACK

P: +61 423 139 163

haley@hck.digital

For personal use only

Cautionary Note on Forward-Looking Statements

Any statements in this press release about future expectations, plans and prospects for the Company, the Company's strategy, future operations, and other statements containing the words "anticipate," "believe," "estimate," "expect," "intend," "may," "plan," "predict," "project," "target," "potential," "will," "would," "could," "should," "continue," and similar expressions, constitute forward-looking statements. Actual results may differ materially from those indicated by such forward-looking statements as a result of various important factors, including: the Company's ability to successfully develop its product candidates and timely complete its planned clinical programs and the Company's ability to obtain marketing approvals for its product candidates. In addition, the forward-looking statements included in this press release represent the Company's views as of the date hereof. The Company anticipates that subsequent events and developments will cause the Company's views to change. However, while the Company may elect to update these forward-looking statements at some point in the future, the Company specifically disclaims any obligation to do so. These forward-looking statements should not be relied upon as representing the Company's views as of any date subsequent to the date hereof.

¹Scheuch *et al.*, (2019), Staphylococcus aureus colonization in hemodialysis patients: a prospective 25 month observational study. BMC Nephrology, 20(1), 1-12.

For personal use only