

16 May 2022

Investor Presentation

Key highlights

- Release of updated corporate presentation for Botanix's non-deal investor roadshow this week
- The presentation includes recap of the recent acquisition of Sofpironium Bromide, which has positive Phase 3 data and is being prepared for FDA approval filing, in 2H 2022
- Presentation also includes updates on the Company's clinical pipeline with near term catalysts with BTX 1702 rosacea study recruitment nearing completion and the BTX 1204A canine study also nearing completion
- Botanix retains a strong cash position of \$16.4 million at 31 March 2022

Philadelphia PA and Phoenix USA, 16 May 2022: Clinical dermatology company, Botanix Pharmaceuticals Limited (ASX: BOT, "Botanix" or "the Company"), is pleased to release an updated corporate presentation for its investor roadshow taking place this week with US based leadership.

The presentation includes a recap of the recent acquisition of Sofpironium Bromide, as well as an update on the Company's BTX 1702 Phase 1b/2 rosacea study which is nearing completion of recruitment and the BTX 1204A Phase 1b canine dermatitis study which is also completing enrollment.

The Company's cash position remains strong with \$16.4 million at 31 March 2022. No capital raising is planned as part of this roadshow.

Release authorised by

Vince Ippolito

President and Executive Chairman

About Botanix Pharmaceuticals

Botanix Pharmaceuticals Limited (ASX:BOT) is a dermatology company based in Philadelphia and Phoenix (USA) which is committed to the development of pharmaceutical products that are underpinned by science and supported by well-controlled randomised clinical trials. The Company has a mature dermatology pipeline with its first product, Sofpironium Bromide for the treatment of primary axillary hyperhidrosis planned to be filed for FDA in 2H 2022, and a series of other products in late-stage clinical studies for the treatment of rosacea, dermatitis and acne. Botanix is also developing a topical antimicrobial product for the eradication of bacteria, initially in patients undergoing hemodialysis.

Botanix leverages its proprietary drug delivery system (Permetrex™) for direct skin delivery of active pharmaceuticals in all skin diseases, which is utilised 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

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Investor Update

May 2022

Transforming into a commercial stage dermatology company



Botanix: a leader in topical drug development

Clinical stage dermatology company developing new treatments for common skin diseases and infection, leveraging its novel delivery technology Permetrex™



Pharmaceutical focus

New treatments for common skin diseases - such as hyperhidrosis, rosacea and acne – as well as life-threatening bacterial infections



Topically driven

Targeting key indications with topical treatments that are safe, well tolerated and validated by clinical efficacy



Leaders in cannabinoid drug development

Most advanced pipeline globally for cannabinoids in skin diseases, with positive Phase 2 data and multiple late-stage programs underway



Sofpironium Bromide

First and only new drug for “primary axillary hyperhidrosis” (medical condition which results in excessive underarm sweating)



Near-term catalysts

Upcoming NDA filing for Sofpironium Bromide, and data readouts for Phase 1b/2 rosacea study, canine dermatitis study and start of antimicrobial Phase 2 study

World class board and management team

Developed, secured approval for and commercialised over 30 dermatology products



VINCE IPPOLITO

President and Executive Chairman

- COO of Anacor and Medicis; former President Dermavant; more than 17 years at Novartis.
- More than 35 years experience in pharma with 20+ years within dermatology



HOWIE MCKIBBON

Chief Commercial Officer

- Former SVP Commercial of Dermavant, Anacor and Medicis
- 20+ years working in dermatology - launched more than 15 brands and managed over 35 dermatology products



DR PATRICIA WALKER

Chief Medical Adviser

- Former President and head R&D Brickell Biotech
- Former CMO/CSO at Kythera, Inamed and Allergan Medical responsible for multiple products including Botox and Tazorac



MATT CALLAHAN

Board Executive Director

- Serial founder and ex-investment director of two venture capital firms in life sciences
- Developed four products through FDA approval and launch



DR BILL BOSCH

Board Executive Director

- 30+ years experience in pharma industry
- Co-inventor of SoluMatrix™ drug delivery technology and NanoCrystal® Technology



ANTHONY ROBINSON

VP of Development

- Recently Vice President R&D at Advicenne
- Senior leadership roles at Aquestive Therapeutics, Intromune and Shire Pharmaceuticals



DR JACK HOBLITZELL

SVP Pharmaceutical Development

- 30+ years leading world-class technical operations
- Senior leadership roles at Assertio Therapeutics, Pfizer, King, Ivax and Teva



DR IRA LAWRENCE

Clinical and Regulatory Adviser

- 30+ years of senior level leadership experience within the global pharmaceutical and medical device industries
- Former SVP R&D Medicis, Astellas and Fujisawa



DR CLARENCE YOUNG

Chief Medical Adviser, Antimicrobials

- Recently Chief Medical Officer at Velicept Therapeutics
- Senior leadership roles at Iroko Pharmaceuticals, Novartis, Protez and GlaxoSmithKline



LYNDA BYRNE

Commercial Adviser, Antimicrobials

- Managing Partner BAL Pharma Consulting
- Senior leadership roles at Motif Biosciences, Nabriva Therapeutics, Shire Abbot and BMS

Corporate Overview

Well funded and positioned to transition to commercial dermatology company

ASX: BOT TRADING INFORMATION

Share price	A\$0.077
6-month low / high	A\$0.061/0.115
Shares outstanding	973,142,074
Market Capitalisation	A\$74.9m
Cash (31 Mar 2022)	A\$ 16.4m
Debt (31 Mar 2022)	Nil
Enterprise value	A\$58.5m

SUBSTANTIAL SHAREHOLDERS

Shareholder	%
Matt Callahan, Founder and Executive Director	7.27%
Caperi Pty Ltd, Co-Founder	5.4%

SHARE PRICE PERFORMANCE



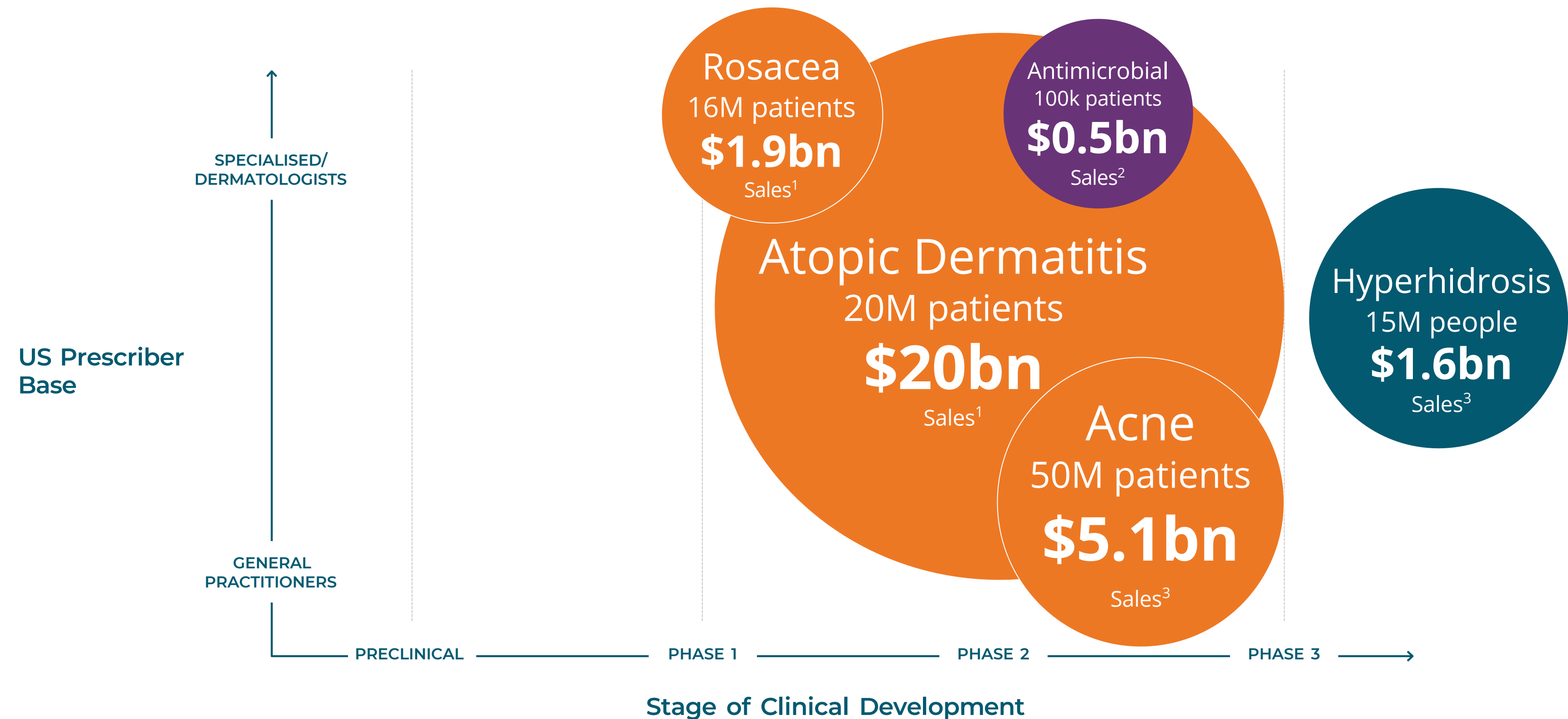
New acquisition (Sofpironium Bromide) complements existing pipeline

Accelerates revenue generation,
M&A opportunities and adds
dermatology indication

INDICATION	PRODUCT	PHASE 1	PHASE 1B	PHASE 2	PHASE 3	APPROVED	STATUS
Axillary Hyperhidrosis (excessive underarm sweating)	Sofprionium Bromide						FDA approval filing planned 2H 2022
Moderate to severe acne	BTX 1503						Phase 3 commencement pending
Rosacea	BTX 1702						Phase 2 study underway – enrollment complete mid 2022
Atopic Dermatitis	BTX 1204A						Canine study complete 2Q 2022
Antimicrobial	BTX 1801						Phase 2 study commencing 2Q 2022

Sofpironium Bromide is a significant opportunity in its own right, but also fits well alongside acne, rosacea and dermatitis as a new dermatology indication which accelerates Botanix towards revenue generation

Target markets with significant annual revenues and high unmet needs



1. Grandview Research. www.Grandviewresearch.com
2. Using GSK Bactroban Nasal Pricing/BTX 1801 pricing to be developed following analyses of potential impact on healthcare system; assumes 5% YOY pricing following product approval/launch
3. Symphony Health Solutions, METYS, data ending December 2019 – weighted

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Sofpironium Bromide

Accelerating Botanix towards revenue generation

Newly acquired asset Sofpironium Bromide being prepared for FDA approval filing in 2H 2022



Sofpironium Bromide

First and only new chemical entity for “primary axillary hyperhidrosis” (a medical condition which results in excessive underarm sweating)



Positive Phase 3 Data

All co-primary and secondary endpoints statistically significant. Side effects were mild to moderate and no treatment-related serious adverse events



Attractive Terms

Minimal upfront payment and back-ended deal decreases risk and allows Botanix to share success when it's achieved (based on commercial success)



Significant Market

More than 15 million people suffer from hyperhidrosis in the US alone and market for treatments is ~\$US1.6B per annum which is projected to grow to \$US2.8B by 2030^{1,2}



De-risked Asset

Molecule already approved by Japanese equivalent of the FDA with partner Kaken Pharmaceuticals and recently launched in Japan

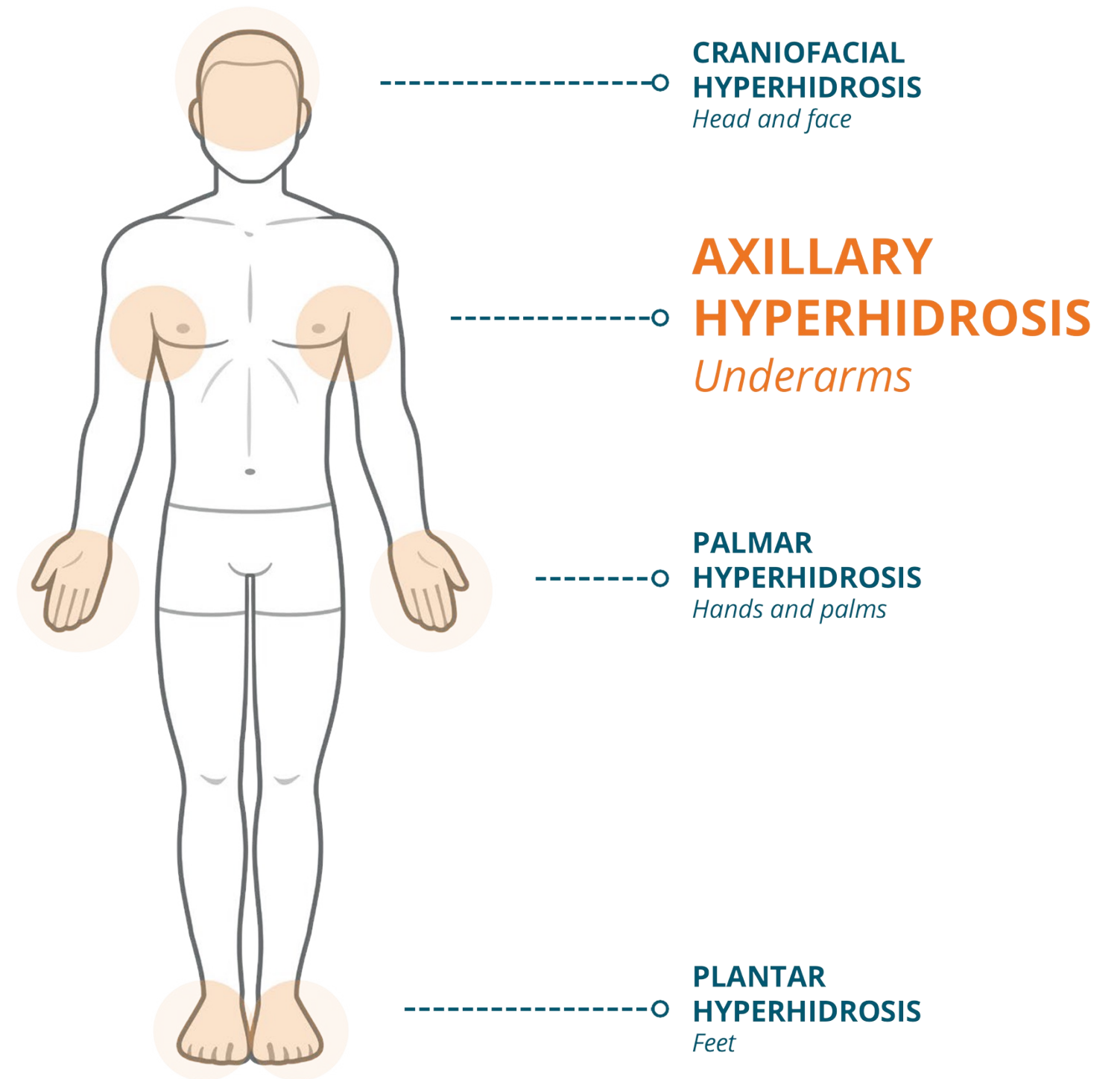
Hyperhidrosis

A medical condition where excessive sweating occurs beyond what is needed to maintain normal body temperature

Hyperhidrosis affects ~15M people in the US¹:

- Results from overstimulation of the nervous system (a physiological not psychological condition)¹
- 80% of patients have hyperhidrosis in more than one region¹
- 90% of axillary (underarm) patients also have it in second region¹
- The most common age of onset for axillary hyperhidrosis patients is 12-17²

Source: 1. Doolittle, J. et al. Arch Dermatol Res, 2016. 2. Hamm H. et al. Dermatology. 2006.



FREQUENTLY
CHANGE
CLOTHES



FRESHEN UP
BY WIPING OR
BATHING



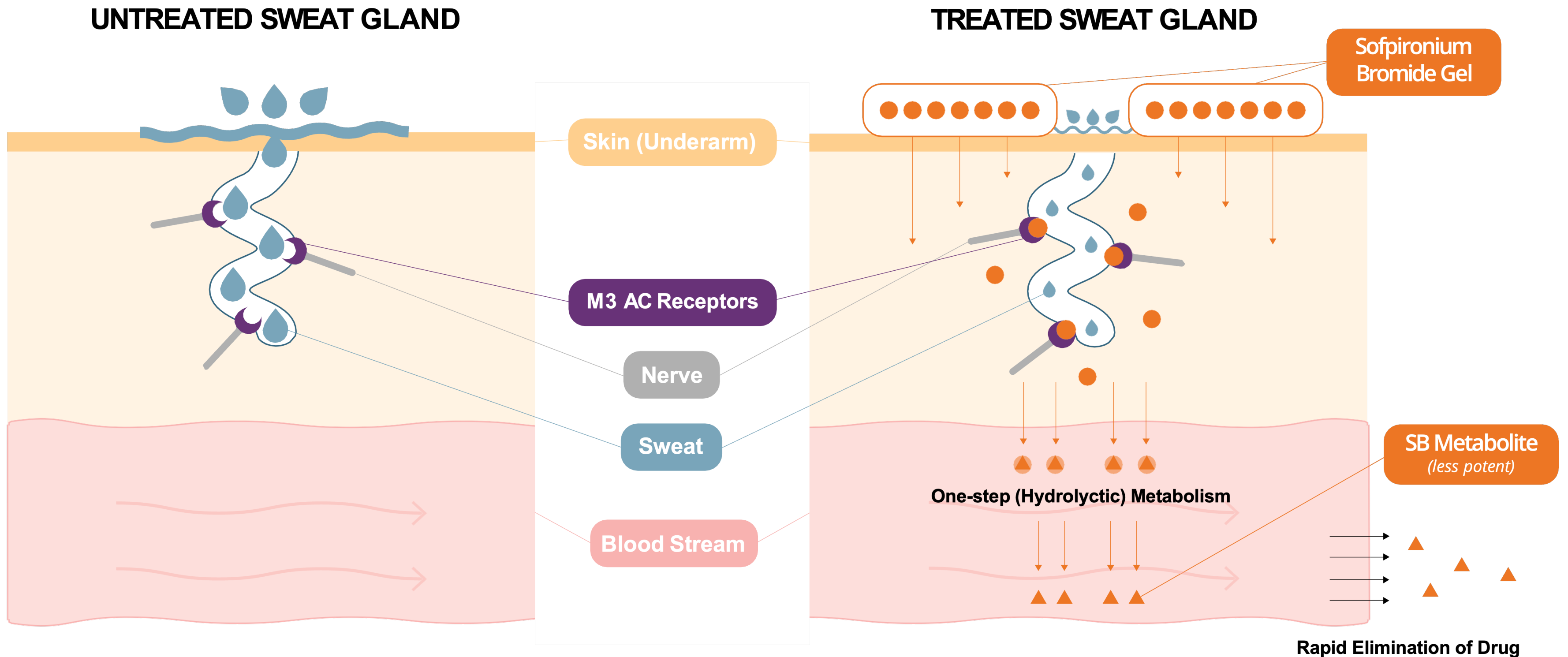
PLACE NAPKINS OR
PADS UNDER THEIR
ARMS OR THEIR
POCKETS



HIDE UNDER
DARK-COLOURED,
BULKY CLOTHES

Sofpironium Bromide mechanism of action

Blocks sweat gland receptors and rapidly degrades for excretion

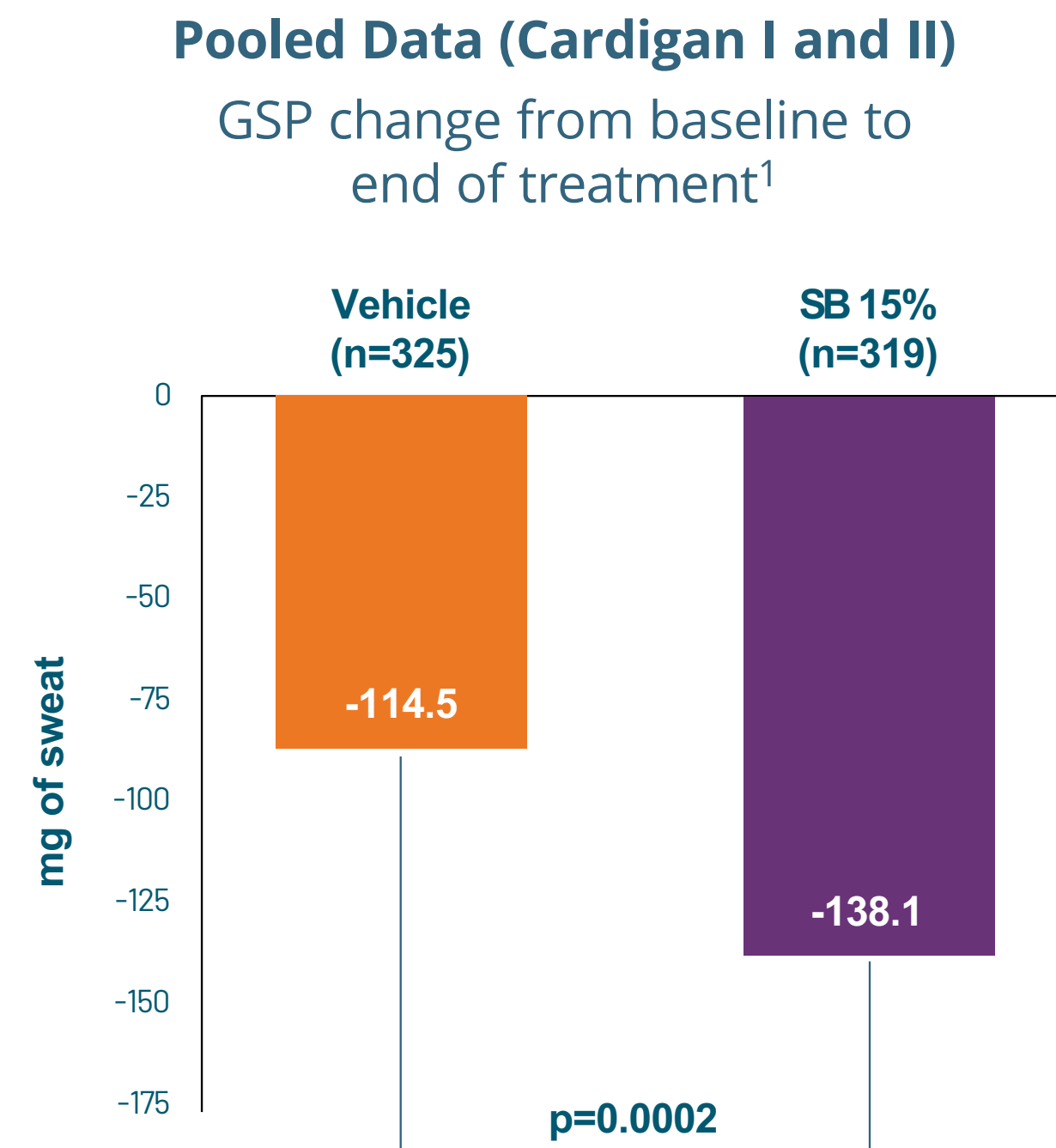
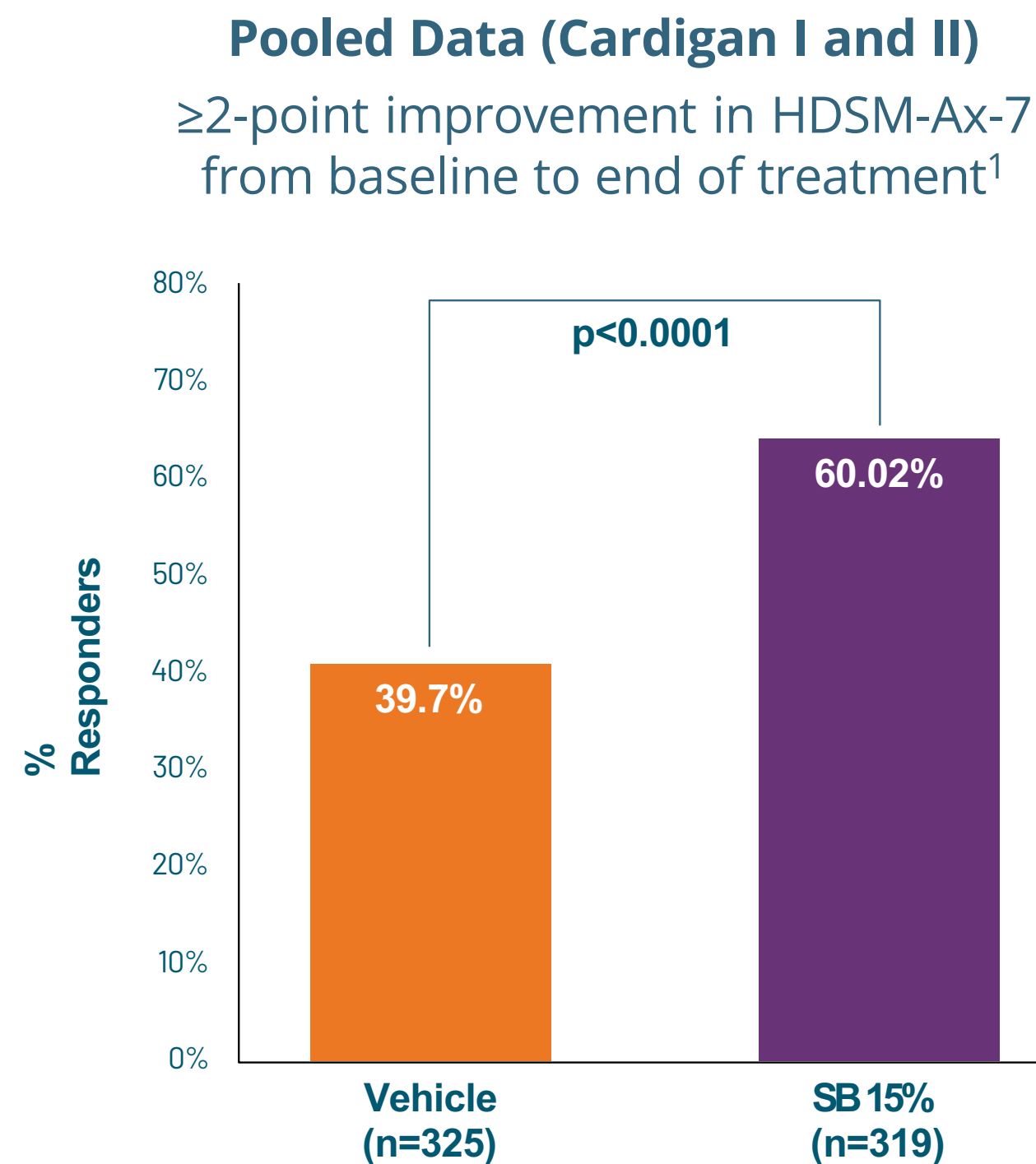


M3 AC Receptors = Muscarinic Acetylcholine Receptors which regulate the function of sweat glands

SB Metabolite = Sofpironium Bromide is converted into a less active form to help minimize side effects

Phase 3 co-primary endpoints - highly statistically significant

Measured reduction in Gravimetric Sweat Production (GSP) and HDSM-Ax-7 scale responses



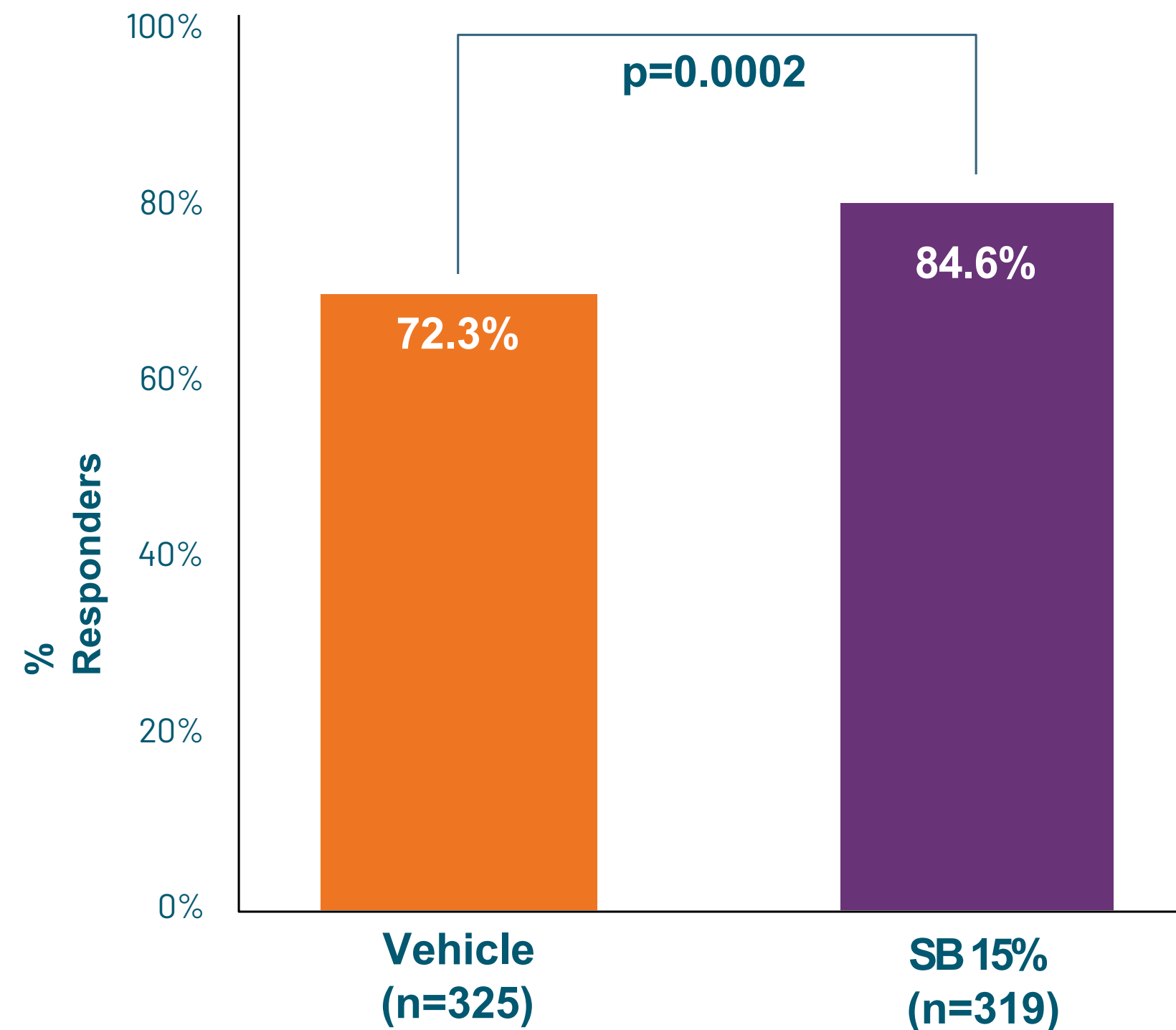
SB = Sofpironium Bromide

Secondary Efficacy Endpoint:

Almost 85% of patients experienced a statistically significant and clinically meaningful response

Pooled Data (Cardigan I and II)

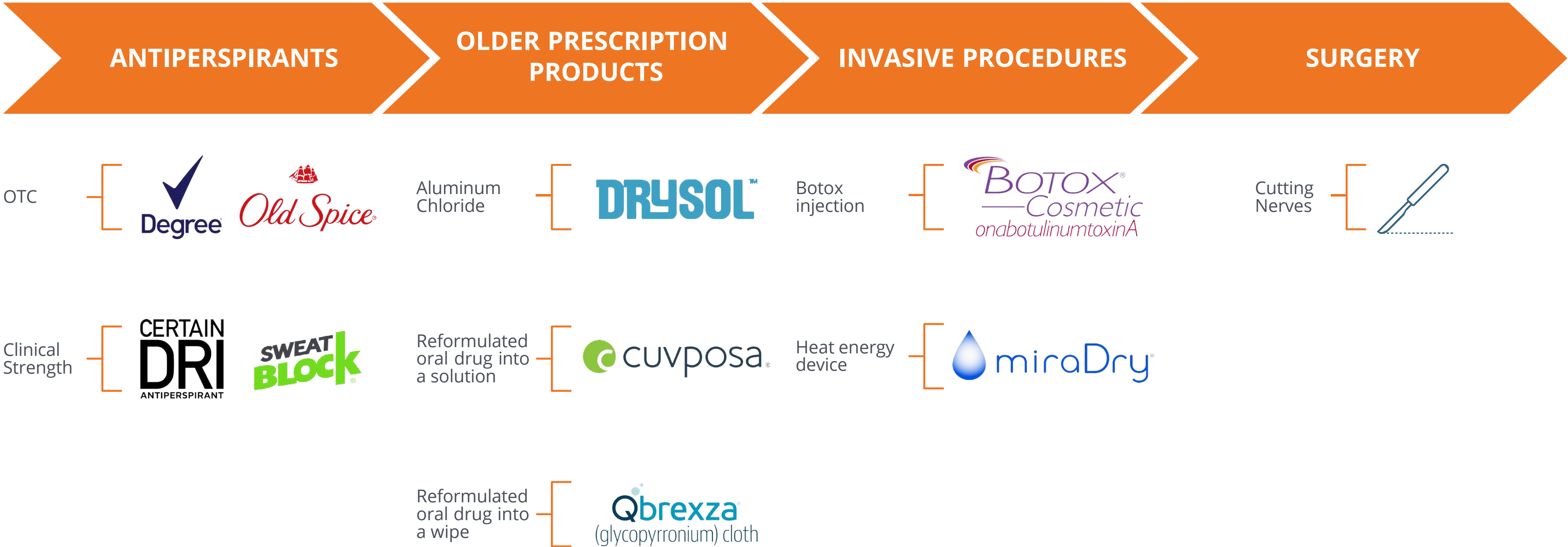
HDSM-Ax-7 reduction (≥ 1 -point improvement) from baseline to end of treatment¹



SB = Sofpironium Bromide

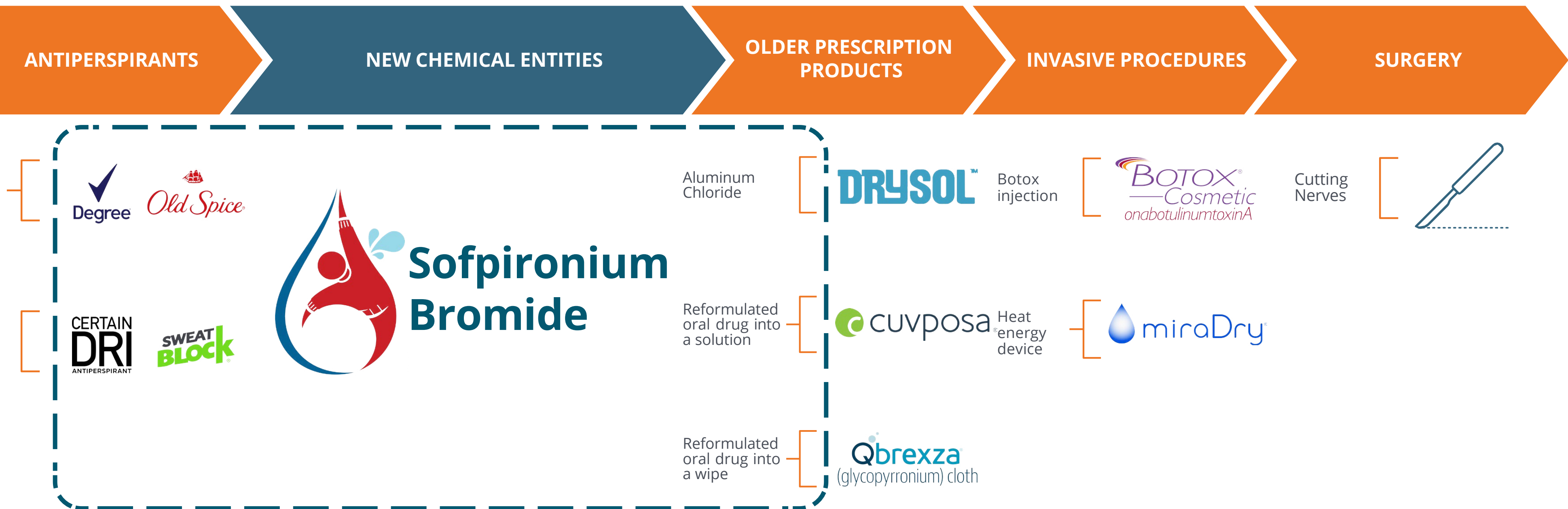
Hyperhidrosis treatment continuum

No new chemical entities ever approved for hyperhidrosis



Significant opportunity for a new topical agent with class leading efficacy and safety

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Due to its significant psychological impact, 54% of respondents suffering from hyperhidrosis say that they would pay anything for a treatment to stop their excessive sweating¹

Key Upcoming Milestones

Rapid pathway to approval and revenue

- NDA submission for approval
- Day 74 review letter from FDA

- Commercial manufacturing for launch
- FDA approval

1H 2022

2H 2022

1H 2023

2H 2023

Expected
Timing

- ✓ Pre Submission meeting with FDA completed
- Post-transaction transition

- FDA feedback on proposed trade name
- FDA mid-cycle review

Cannabinoid dermatology programs

Synthetic cannabinoids are well suited to treat skin diseases and infections

Botanix's studies show that synthetic cannabidiol:¹

- ✓ is safe and well tolerated
- ✓ has broad anti-inflammatory properties
- ✓ has a strong and consistent impact on skin lesions
- ✓ has antimicrobial properties – kills Staph aureus²
- ✓ has potential for widespread use across human and animal health
- ✓ has anti-inflammatory and antimicrobial properties important for dermatology conditions including acne, rosacea and dermatitis

1. See ASX announcement "Antimicrobial Platform Update and Launch of BTX 1801 Study" (13 March 2020) and The Antimicrobial Potential of Cannabidiol, Communications Biology 4, Article number: 7 (2021) Blaskovich, M et al
2. Staphylococcus aureus (S. Aureus) is a common bacterium that lives on skin & nasal passages.. It can cause skin infection & serious or life-threatening infection.



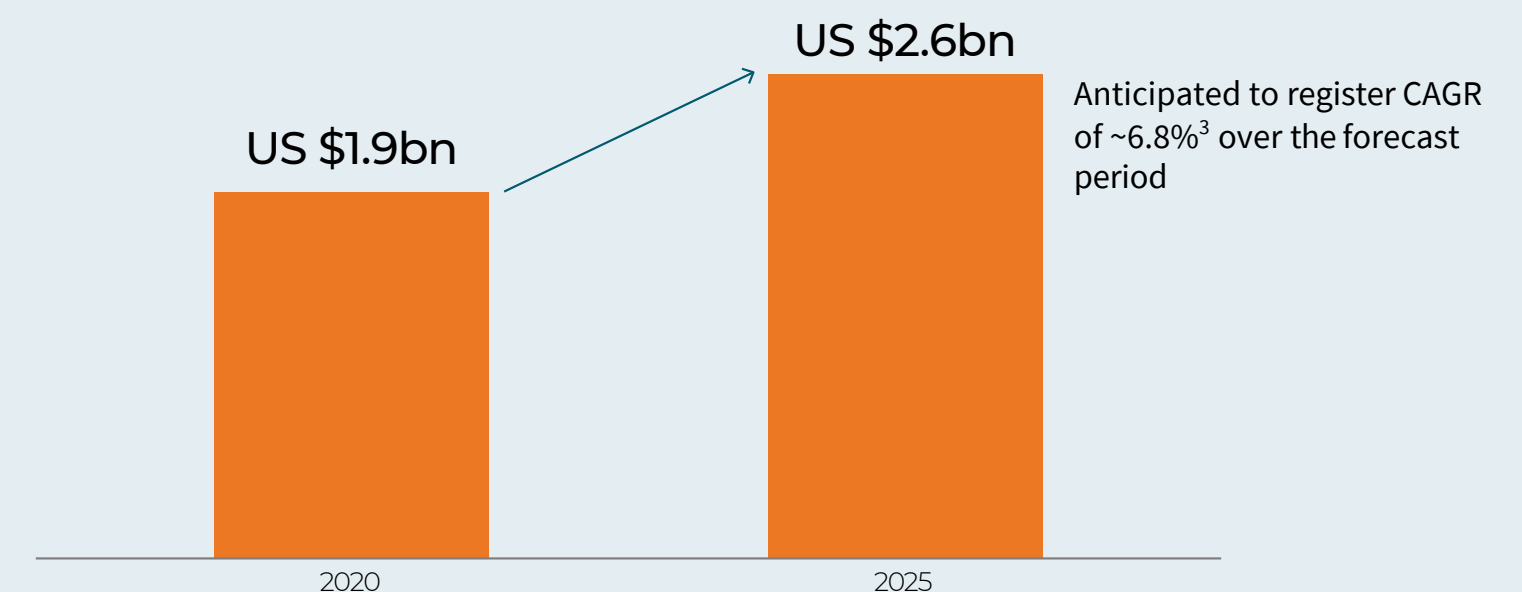
BTX 1702: high impact of rosacea on patients and significant market opportunity



- Papulopustular rosacea is a highly visible chronic skin disease characterised by redness (inflammation) and acne-like-break-outs¹
- Patients diagnosed with Rosacea tend to have higher incidences² of:

- Depression
- Social Anxiety
- Embarrassment
- Decreased quality of life

A rapidly growing market: Rosacea market projected to grow to US\$2.6bn by 2025³



- Affects ~5.5% of the global population⁴, ~430m individuals, women are more likely to be affected than men
- 85% of patients are > 30 years old⁵
- Currently over 16m Americans affected⁶ by rosacea, with ~5m medical treatment prescriptions⁷ in the US alone
- Active treatment seekers looking for new solution to rosacea

BTX 1702: Rosacea Phase 1b/2 study is almost fully recruited

Improved data capture design with dose ranging over 8 week treatment period



- Study designed to enable increased data capture and provide insights to support broader dermatology program
- All sites using Canfield imaging technology supporting clinical assessment, tracking and analysis

Study Details

Three dose groups, ~120 patients:

- BTX 1702 high dose - twice daily: 40 patients
- BTX 1702 low dose - twice daily: 40 patients
- Vehicle - twice daily: 40 patients

Sites

~15 dermatology sites across Australia and NZ

Patients

Adults (18+ years) with moderate to severe papulopustular rosacea

Treatment Period

8 weeks

Endpoints

- Safety and tolerability
- Change in inflammatory lesion counts from baseline at days 15, 29 and 57
- Proportion of patients with Investigator's Global Assessment (IGA) treatment success
- Change in Clinician's Erythema Assessment (CEA) scale

BTX 1204A: Atopic dermatitis

Canine study, will inform licensing in animal health and potential launch of late-stage Phase 2b human clinical program

PROOF OF CONCEPT CANINE STUDY

Three dose groups, ~36 dogs:

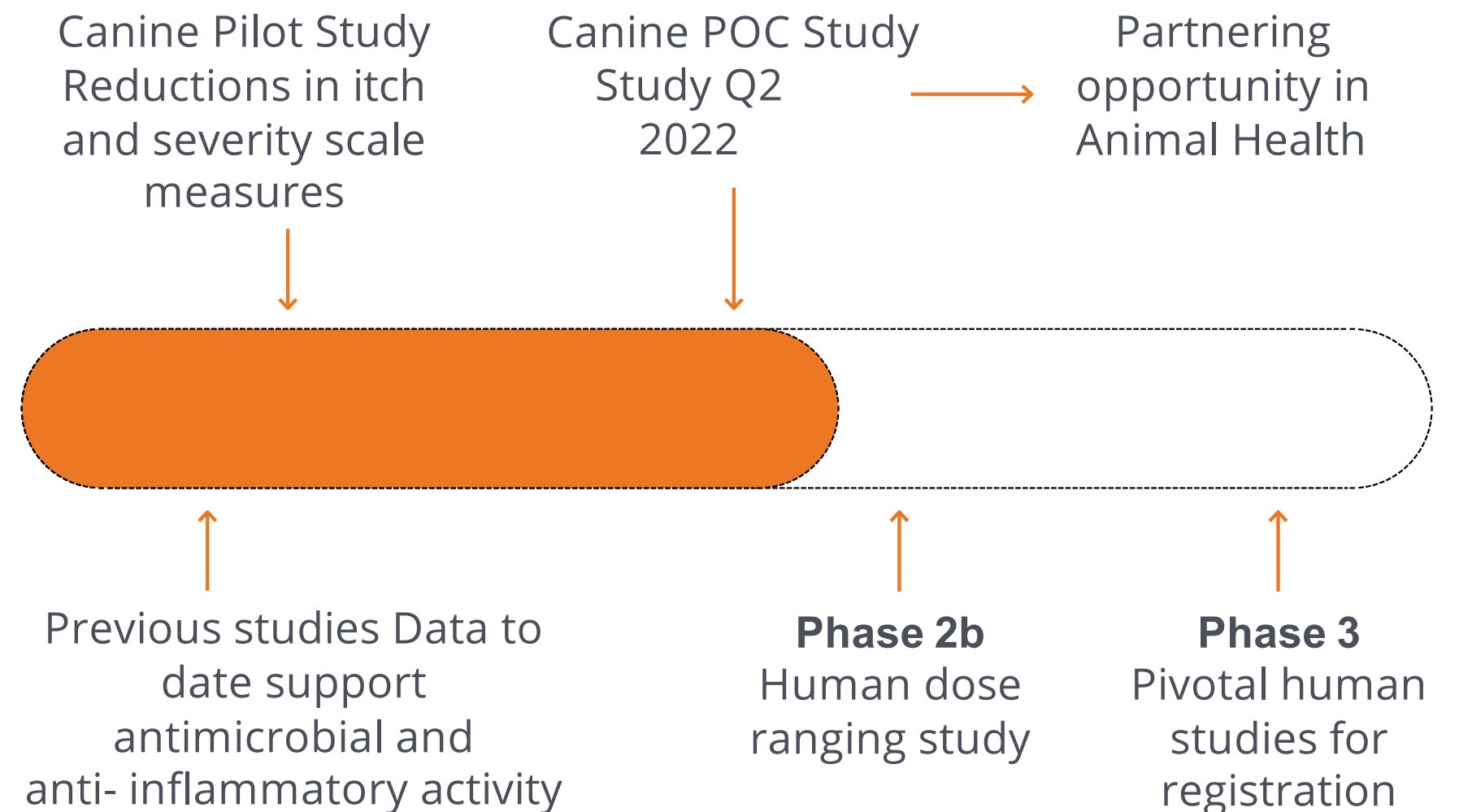
- BTX 1204A high dose: 12 dogs
- BTX 1204A low dose: 12 dogs
- Vehicle: 12 dogs

Sites: 3 Australian sites

Treatment period: Twice daily treatment for 28 days

Endpoints: Treatment effectiveness using Enhanced Pruritus Score²; Canine Atopic Dermatitis Extent and Severity Scale Index³

PLANNED PATHWAY TO APPROVAL



Successful outcome opens up partnering opportunity and supports progression to Phase 2b human study in atopic dermatitis.

1. ASX 29 Sep 2021: Launch of canine atopic dermatitis program
2. Enhanced Pruritus Score (EPS): designed to measure the severity of itching in dogs
3. Canine Atopic Dermatitis Extent and Severity Index (CADESI-04): simplified scale for assessing skin lesions of atopic dermatitis in dogs

BTX 1503: Acne in preparation for Phase 3 and future filing

Successful End-of-Phase 2 FDA meeting and completion of rosacea BTX 1702 study will inform final design for Phase 3 acne study

DEVELOPMENT UPDATE

- ✓ End of Phase 2 meeting with FDA successfully completed, supported by overall efficacy and safety, and significance of Australian data on further analysis¹ in 2020 of late 2019 Phase 2 study data².
 - ✓ FDA highlighted excellent safety profile of BTX 1503, allowing several waivers for studies typically required for dermatology drug registration
 - ✓ Co-primary efficacy endpoints³ agreed for Phase 3
 - ✓ Important milestone providing clarification on activity to move forward
 - ✓ Confirmed drug development plan to support filing and registration for treatment of moderate and severe acne
- Planning underway for Phase 3 clinical studies to be informed by completion of BTX 1702 Phase 1b/2 study

SIZEABLE ACNE PRESCRIPTION MARKET



22m total prescriptions in 2019 growing ~5% year-on-year 4



US\$5.1bn in sales in 2019⁴



>2m p.a. active, diagnosed acne patients under HCP care⁵



~40m to ~50m acne sufferers⁶ (~10m mod-to-severe)



60% of acne patients are managed by 5,000 HCPs⁷

1. ASX 4 Mar 2020, Additional BTX 1503 data analysis 2. ASX 22 Oct 2019 BTX 1503 data and progression to Phase 3 3. Co-primary efficacy endpoints: (1) Absolute change from baseline in inflammatory and absolute change from baseline in non-inflammatory lesion at Week 12; (2) Proportion of patients with an Investigators Global Assessment (IGA) of “clear” or “almost clear” and at least a 2-grade improvement in IGA from baseline at Week 12
4. Symphony Health Solutions, METYS, data ending December 2019 – weighted; 5. Symphony Health Solutions, MAT, ending April 2019; 6. AAD. Acne Stats and Facts. <https://www.aad.org/media/stats-numbers>; 7. Symphony Health Solutions, IDV Vantage, February 2019 HCPs:: Healthcare Professionals

Cannabinoid antimicrobial programs

BTX 1801: demonstrated clinical efficacy vs *Staph aureus* in Phase 2a study

Staphylococcus aureus (*Staph aureus* or 'staph') is a common bacterium that lives on skin and in nasal passages. It can cause skin infection and serious or life-threatening blood stream infections, pneumonia or bone and joint infections



EFFICACY

- ✓ Efficacy of ointment and gel formulations demonstrated for primary endpoint at Day 12¹
- ✓ Eradication rates as high as 76.2% at Day 7, with eradication effects extending through to Day 28, despite no treatment after Day 5



SAFETY & TOLERABILITY

- ✓ Safe and generally well tolerated at doses of active drug up to 20%
- ✓ All 66 participants successfully completed the BTX 1801 study
- ✓ No severe adverse events reported²

1. BTX 1801 Phase 2a Clinical Study - BOT data on file
2. The incidence of adverse events was low, mild in severity and occurred at similar rates across the different treatment groups with no severe events reported

BTX 1801: Haemodialysis patients with central venous catheters at risk of bloodstream infections



Haemodialysis

Replicates the functions of the kidneys in patients with kidney failure, by using a machine to filter and clean the blood



Rationale for selection

Infection is a leading cause of death with 20% to 40% of haemodialysis patients eventually dying from an infection¹



Significant health risks

Risks for central venous catheter-related complications were as high as 30% and 38%, at 1 and 2 years respectively²

Central venous catheter patients (approx. 160,000) make up more than 70% of blood infections in the dialysis population²

11.8%

of patients were re-admitted within 12 weeks of hospitalisation related to Staph aureus infections¹

US\$734M

Market for nasal decolonisation of haemodialysis patients at risk of blood stream infection by 2030³

~US\$32k

Mean cost (per episode) of treating Staph aureus blood stream infections, including re-admissions and outpatient costs¹

US\$1bn

Estimated annual cost of treating bacteraemia in haemodialysis patients with central venous catheters²

1. 'Mortality in dialysis patients: analysis of the causes of death', Mailloux LU, Bellucci AG, Wilkes BM, Napolitano B, Mossey RT, Lesser M, Bluestone PA. AJKD. 1991 Sep;18(3):326-35
2. 'Complications From Tunneled Hemodialysis Catheters: A Canadian Observational Cohort Study', (2019) Poinen, K. et al AJKD Volume 73 Issue 4 Pages 467-475

BTX 1801: Phase 2 study preparing to launch in 2Q 2022

Targeting nasal decolonisation of Staph in patients undergoing haemodialysis to reduce incidence of life threatening blood stream infections

Phase 2 study 9-week study preparing to initiate in 2Q 2022

Three dose groups, ~75 subjects:

- BTX 1801 high dose: 25 subjects
- BTX 1801 low dose: 25 subjects
- Vehicle: 25 subjects

Sites: 3 Australian sites

Treatment period: 5-day daily treatment followed by every other day for 8 weeks

Endpoints: eradication of Staph aureus in the nares of subjects

FDA incentives provide accelerated development and increased market exclusivity



QIDP¹ status



Extra 5 years (total of 8 years) exclusivity from generic competition

Fast track status



Following IND submission, allows increased consultation with FDA and de-risks clinical trials and accelerates development pathway

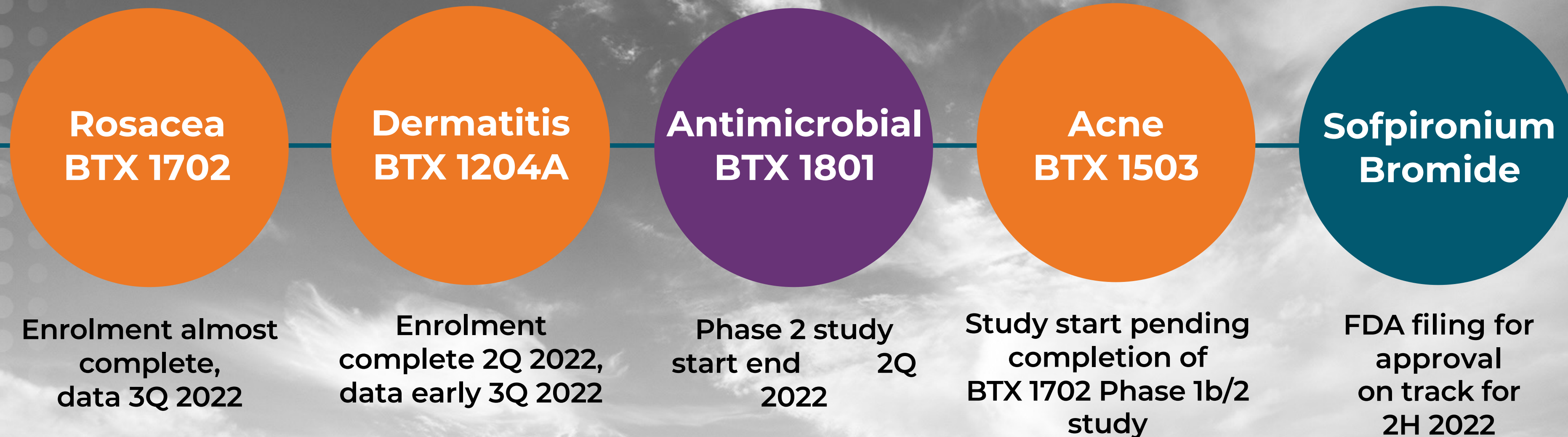
LPAD² status



Allows smaller, fewer and / or shorter clinical trials for FDA approval

Botanix plans to apply for all three programs to accelerate development, reduce clinical costs and increase exclusivity

Executing on key commercial and clinical milestones



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Operations:

3602 Horizon Drive, Suite 160
King of Prussia PA 19406

Corporate Office:

Level 1, 50 Angove Street
North Perth W. Australia 6006

