

# PCI Biotech -Q1 2022 Interim Report

Presentation May 11, 2022

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# PCI Biotech

Q&A session through teleconference and webcast console

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# PCI Biotech

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Q1 2022

#### fima VACC

- Progressing towards initiation of a Phase II clinical proof-ofconcept study
- Established group of international clinical experts to provide clinical guidance and support the development and performance of the trial
- ► Good project readiness preparation of clinical trial application and sourcing of study treatments ongoing, and selection of clinical sites in EU5 started

Q1 2022

### fima NAC

- Progressing the focused development plan, targeting applications suited to the specific strengths of the PCI technology
- ► Established a preclinical collaboration with the South Korean company MDimune, developing innovative drug delivery technologies for modifying cellular and disease processes

Q1 2022

#### fima CHEM

- ► RELEASE was closed to recruitment in January 2022 due to changes in the competitor situation that renders the trial challenging to complete and potentially inadequate for approval
- ► Available data from RELEASE have been reviewed there is not sufficient data to show differences between the treatment arms and last patient will leave the study in May
- ► RELEASE will be closed as quickly as possible, with an expected future cash effect of up to NOK -10 million

Q1 2022

### Corporate

- ► Per Walday will step down as CEO at the end of May 2022 and Ronny Skuggedal, CFO, is appointed as Interim CEO effective 1<sup>st</sup> June
- ► The CBO, Ludovic Robin, will leave the company in May 2022
- ► The organisation has been reduced by 4 FTE (25%), with notice periods ending during Q2. The financial runway, with current commitments, is estimated to be towards the end of 2023
- ► Further strengthened the Scientific Advisory Committee with Prof. Ernst Wagner at the Ludwig-Maximilians-Universität (LMU) and Center of Nanoscience in Munich, Germany, contributing expertise in the field of targeted delivery of nucleic acids and protein therapeutics

# **Pipeline**

Development programmes

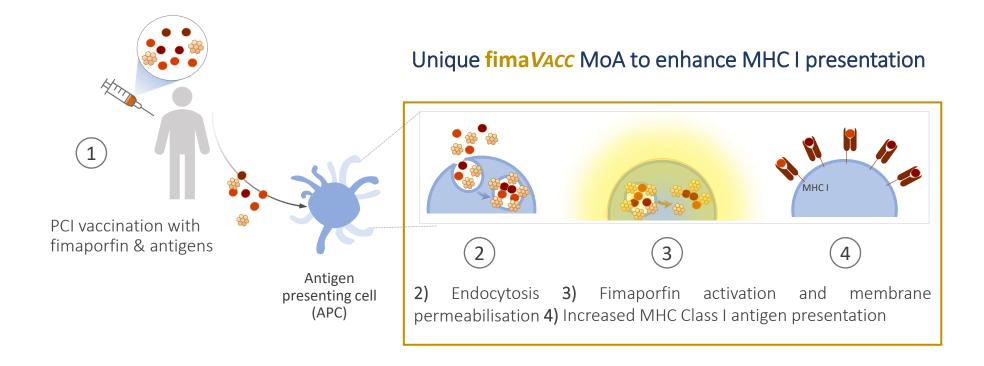
# Leveraging the PCI technology platform within Immunotherapy & nucleic acid therapeutics

Programme	Therapeutics	Preclinical	Phase 1	Phase 2
fima VACC	Therapeutic cancer vaccines			
fima <i>NAc</i>	Nucleic acid therapeutics			

## fima CHEM

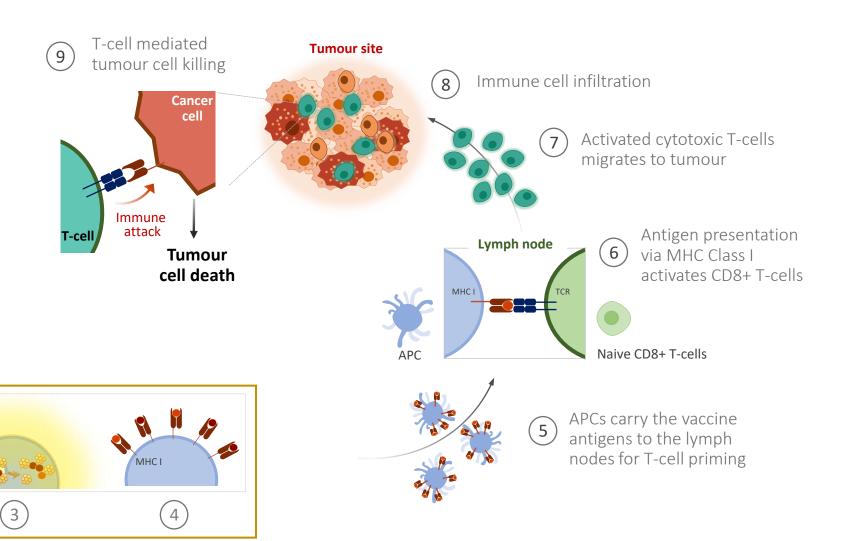
- ► RELEASE recruitment closed in January 2022
  - Expected rapid change in SoC
  - Trial challenging to complete as a result of the expected change in SoC, and potentially inadequate for approval
- Available data reviewed
  - Radiographic data from 34 out of 41 enrolled patients evaluated for PFS/ORR
  - Data are not sufficient to allow conclusion.
- All further follow-up assessments ceased
  - Enables swift and cost-efficient closing process
  - Last patient will leave the study in May

# Innovative and versatile platform for immunotherapy Unique MoA to enhance cytotoxic effects of therapeutic cancer vaccines

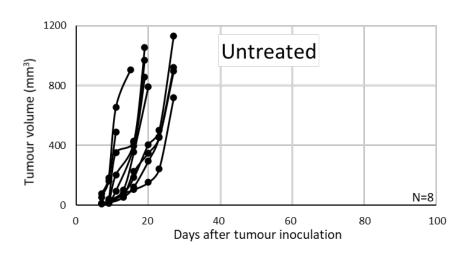


### Induced cytotoxic CD8+ T-cells attack cancer cells

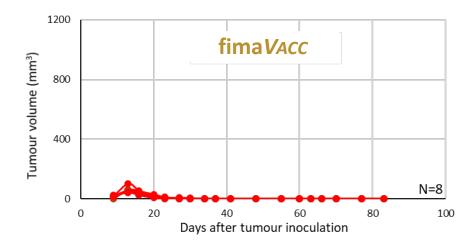
## fima VACC



#### Intradermal vaccination with fima VACC induces strong anti-tumour response



- ► TC-1 tumours inoculated in animals without subsequent vaccination
- Aggressively growing tumours established in all animals, with no animals surviving beyond Day 30



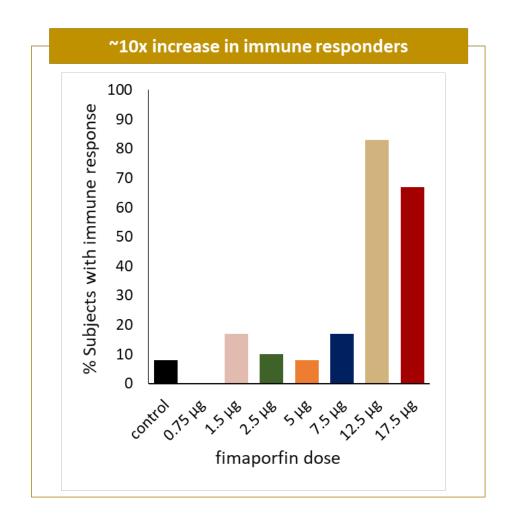
- fimaVacc (fimaporfin + HPV long peptide antigen) with polyIC adjuvant vaccinated i.d. on days 8, 13, and 22 after tumour established
- Mice became tumour-free and were immune to a new challenge with tumour cells

### Scientifically validated platform – Clinical evidence in Phase I study

# Operational review

- Phase I in healthy subjects showed increased T-cell responses
- Good safety and tolerability
- PCI Recommended Phase 2 dose determined

Phase 1 trial results showed a good safety profile and increase in immune response at the recommend phase 2 dose

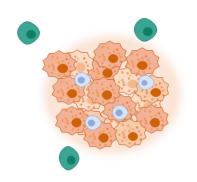


### Converting cold tumours to hot

# Operational review

#### **Cold Tumour**

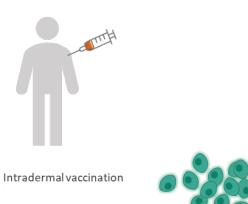
- Few T-cells and low infiltration of Tcells in the tumour
- Immunosuppressive cells present
- · Poor response to anti-PD-(L)1 drugs



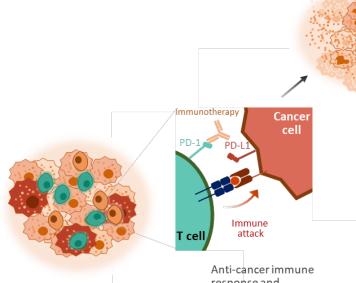
#### Immune checkpoint inhibitors are effective treating hot tumours

#### Conversion into hot tumour in the PoC study

- CD8+ T-cells are activated and infiltrate the tumour
- Suppression of immunosuppressive cell types
- · Sensitisation to anti-PD-(L)1 drugs







#### **Tumour site**

Immune cell infiltration and reduction of immune suppressive cells by immunomodulator Anti-cancer immune response and sensitisation to anti-PD-(L)1 drugs







Immunosuppressive ce



Harness the power of **fima***Vacc* to enhance immunotherapy by turning cold tumors into hot

Operational review

- PD-(L)1 checkpoint inhibitors are dominating the immunotherapy market
- Many patients have limited responses to checkpoint inhibitors

Attractive opportunity space to leverage the fima VACC platform Enhanced efficacy Solution **Entry indication** Expand Treatment concept Harness the power of Indication with Effective trial design Expand the clinically Treatment concept

fimaVACC to sensitise non-responding tumours to checkpoint inhibitors and thereby improve efficacy

perceived high likelihood of response, high unmet medical need, & commercial opportunity

to maximise possibility to show anti-tumour activity and turn tumours sensitive to PD-(L)1 drugs Endorsed by KOLs

established in Phase 2 Ready for partnering

established fimaVACC platform into follow-

on indications

### Phase 2 PoC study

Operational review

Safety and efficacy of PCI enhanced vaccination combined with immunomodulation for the treatment of R/M HNSCC that is resistant to immunotherapy

Approach **Entry indication** P2 PoC fima VACC increases cytotoxic T-cells R/M HNSCC progressing on anti-PD-1 Study design optimised to explore and their infiltration into the tumour efficacy of PCI vaccination combined therapy with immunomodulation in the target Combination with ~70% of R/M HNSCC receiving antipopulation, sensitising tumours to immunomodulation, expected to PD-1 therapy progress within 6 anti-PD-(L)1 convert cold tumours into hot months, cold tumours contribute to tumours, thereby sensitise tumours resistance Proof-of-concept readout with a to anti-PD-(L)1 drugs feasible budget and timeline High unmet medical need

#### PoC treatments

Operational review

PCI vaccination (PCIV-01 plus light) with an adjuvant to increase cytotoxic T-cell immune activation and tumour infiltration while downregulating immunosuppressive cells with an additional immunomodulator Anti-PD-(L)1 are effective treating hot tumours

PCIV-01	Vaccine adjuvant	Additional immunomodulator	Immune checkpoint inhibitor					
Definition								
Fimaporfin & a mix of peptide antigens*	Hiltonol	Chemotherapy	Anti-PD(L)1					
Rationale								
<ul> <li>HNSCC-associated antigens presented on the cancer cell's surface</li> <li>A CD4+ helper T-cell stimulator peptide</li> <li>The combination is expected to induce cytotoxic T-cell priming &amp; tumour infiltration, and trigger an anti-cancer immune response</li> </ul>	<ul> <li>Increase immune response</li> <li>Documented preclinical and validated clinical value in combination with PCI vaccination</li> </ul>	<ul> <li>Decrease immunosuppressive cells to enhance immunotherapy efficacy during the initial treatment cycles</li> <li>Expected to increase clinical benefit from the study treatments</li> </ul>	<ul> <li>Anti-PD-(L)1 drugs have good efficacy in patients were the tumour has been converted from cold to hot</li> </ul>					

### PoC study design

# Operational review

Safety and efficacy of PCIV-01 combined with immunomodulation for the treatment of R/M HNSCC that is resistant to immunotherapy; a multi-centre, open-label, non-randomised, phase 2 study

#### **Patient Populations – main eligibility**

- Recurrent or metastatic HNSCC
- Progression on pembrolizumab or nivolumab within 6 month of treatment (primary progression)
- History of pembrolizumab or nivolumab as monotherapy or with chemotherapy
- HPV negative



#### Up to 20 patients

- PCIV-01 combined with Hiltonol, anti-PD-(L)1, and chemotherapy
- Treatment scheduled to maximise effect of components
- Main end points: 6-months PFS, ORR, safety, and immune response in tissue and blood

Seamless expansion of population and region (US)
Conditional to partnering interest

Up to 24 patients

Same treatment and schedule

**Review of Accumulating data** 

- International, multicenter study, ~8-12 clinical sites
- Core clinical investigators and external experts engaged with the program, including Prof. Kevin Harrington, Institute of Cancer Research, UK and Prof. Ezra Cohen, University of California, San Diego, US
- Study planned to start in 2023



Operational review

P2 PoC: Status and project readiness

- ► Ongoing activities focusing on preparation of the clinical trial application, CMC, and study operations
  - Peptide manufacturer identified and manufacturing ongoing
  - Sourcing of other study treatments in progress
- ► A group of international clinical experts established to provide guidance and support the development and performance of the trial
- Selection of clinical sites in EU5 started

### P2 PoC: Focused opportunity positioned to drive value

# Operational review

#### Solid foundation

- Solid pre-clinical data including anti-tumour responses
- Strongly enhanced T-cell immune responses
- Successful proof-of concept of immune response demonstrated in healthy subjects in Phase 1 study

#### Scientific rationale

- PCIV-01 vaccination expected to induce T-cells necessary for anti-PD-(L)1 to work
- Aim to turn cancers sensitive to anti-PD-(L)1 drugs by conversion of cold to hot tumours
- Trigger effective immune attack against tumour cells

#### Broad IP portfolio

- Patent for vaccine technology in combination with TLR agonists granted in key markets
- Patent on combination with checkpoint inhibitors granted in US, pending ROW
- IPs extend into 2037, facilitates the opportunity to develop own vaccination product and pipeline

#### **Entry indication**

- Perceived high likelihood of response to study treatment
- High unmet medical need
- Ample opportunity for value growth

#### Expertise

- Deep expertise via internal clinical development team
- Close collaboration with core clinical consultancy
- Concept and clinical study endorsed by international, renowned KOLs

### P2 PoC expected upcoming catalysts & milestones

Operational review

Safety and efficacy of PCIV-01 combined with immunomodulation for the treatment of R/M HNSCC that is resistant to immunotherapy; A multi-centre, open-label, non-randomised, phase 2 study

2022	2023	2024		
Q4	Q1	H1		
CTAA submission	First patient enrolled	Top line results		
	Asset ready for partnering			
	Data accumulation			

- Open treatment study enables news-flow as results accumulate
- Strong core clinical group of KOLs established to support study protocol development and effective study execution

## fima NAC

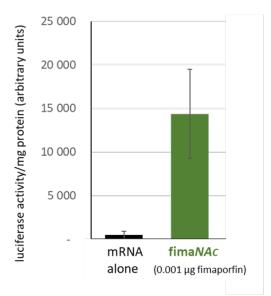
# Operational review

Providing an intracellular delivery solution for nucleic acid therapeutics

- Compelling preclinical results
  - Strong data for a range of nucleic acid therapeutics
- Addressing a major hurdle for this class of drugs
  - Intracellular delivery remains a major obstacle
- ► Focused development targeting applications suited to the strength of the platform
  - Strategy to build partnerships in key areas
- ► Collaboration established with MDimune in Q1, a South Korean biotech company developing innovative drug delivery technologies

## fima NAC

# Operational review - status



Enzymatic luciferase activity in skin samples after intradermal injection of luciferase mRNA

### Excellent technological fit with dermatological diseases

- ✓ Substantial enhancement of intracellular nucleic acid delivery in skin
- ✓ **fimaNAc** provides excellent spatial specificity of nucleotides
- ✓ Easy illumination access and possible topical application
- ► Large market and opportunity space with several companies developing nucleic acid therapeutics for dermatological applications
- ► Research collaboration with the South Korean company OliX

## fima NAC

Operational review - strategy

### Focused development of user-friendly application

- ► Intend to initiate collaborative development of integrated delivery solution for dermatological applications
  - Topical fimaNAc formulation
  - Skin illumination device
- ► Aim to be applied across dermatology applications
- Expanding the collaborative opportunity space

Corporate
Key financials
Outlook
Q&A

## Corporate

Organisational changes

- ▶ Organisational changes 25% reduction by end of June
  - Clinical team
  - CBO
  - CEO to assume a new position
  - Ronny Skuggedal, Interim CEO effective 1 June
  - Research and Development team fit for purpose

#### ▶ Conferences

- LSX World Congress, London, May 2022
- TIDES USA, Boston, May 2022
- ABGSC Life Science Summit, May 2022

### **Finance**

#### ► Financial run-way estimated towards the end of 2023

- RELEASE closure, estimated future cash effect up to NOK -10 million
- Organisational changes
- Preparations for the fima VACC PoC study continue while financing opportunities are being explored

#### Key financial figures

(figures in NOK 1,000)	Q1 2022	Q1 2021	FY 2021
Other income (public grants)	1 188	1 588	6 273
Operating results	-22 801	-21 171	-86 029
Net financial result	-212	-2 602	-2 362
Net profit/loss	-23 012	-23 773	-88 391
(figures in NOK 1,000)	Q1 2022	Q1 2021	FY 2021
Cash & cash equivalents	93 680	164 298	116 118
Cash flow from operating activities	-21 592	-20 621	-68 307

### Outlook

Enabling intracellular delivery

#### fima VACC

- Progressing towards initiation of Phase II
- ► Aiming to convert cold tumours to hot and improve the response to ICIs in head and neck cancer
- Good project readiness: clinical expert group established and clinical sites in EU5 selected
- Versatile vaccination technology available for partnering

### fima NAC

- Development of treatment applications in dermatology
- Pursuing collaborations and outlicensing opportunities

### fima CHEM

Swift and cost-effective closing of the RELEASE study



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