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ONCOS-102 in mesothelioma

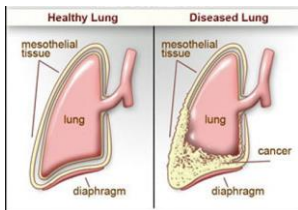
*Dr Magnus Jaderberg
Chief Medical Officer
Targovax*

ONCOS

CLINICAL DEVELOPMENT STRATEGY

1

Path-to-market Mesothelioma

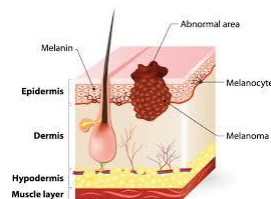


Target launch indication

- Ongoing Phase I/II

2

Proof-of-concept CPI refractory



Indications with no/ limited effect of CPIs

- Ongoing melanoma
Phase I

3

Proof-of-concept New CPI indication

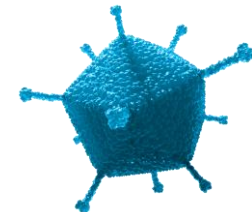


Peritoneal malignancies

- Ongoing Phase I/II in
ovarian and colorectal

4

Next generation oncolytic viruses



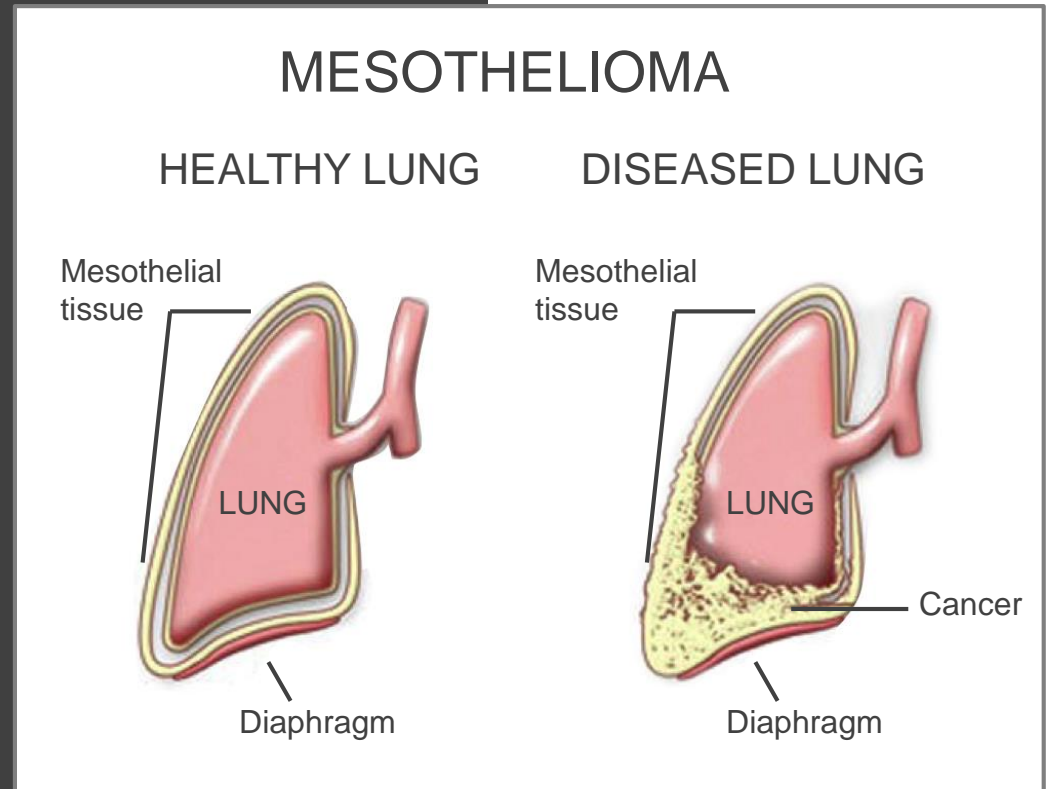
Targeting new indications

- Novel targets and
mode-of-action

ONCOS-102 target
launch indication

MALIGNANT PLEURAL MESOTHELIOMA

- **Orphan disease**, estimated 15,000 new cases per year (EU, USA, Australia)
- **Incidence is increasing** worldwide and is predicted to peak in 5-10 years
- Often **caused by asbestos** exposure, with a latency period of up to 40 years before diagnosis
- Aggressive cancer form with **median survival of 12 months**
- **No significant treatment advance** in the last decade



MESOTHELIOMA IS SHORTEST PATH-TO-MARKET

Rationale for ONCOS-102 opportunity in mesothelioma:

Become frontline therapy

- **Phase I results** indicate potential of ONCOS-102 in mesothelioma
- **Ongoing randomized phase I/II trial** combining ONCOS-102 with SoC chemotherapy
- **Good safety profile**

Orphan Drug Designation

- High unmet medical need, ONCOS-102 has **orphan drug designation**
- Opportunity for priority regulatory review, and **quick route-to-market**
- 7 year **market exclusivity** in the US and 10 years in the EU

Limited competition

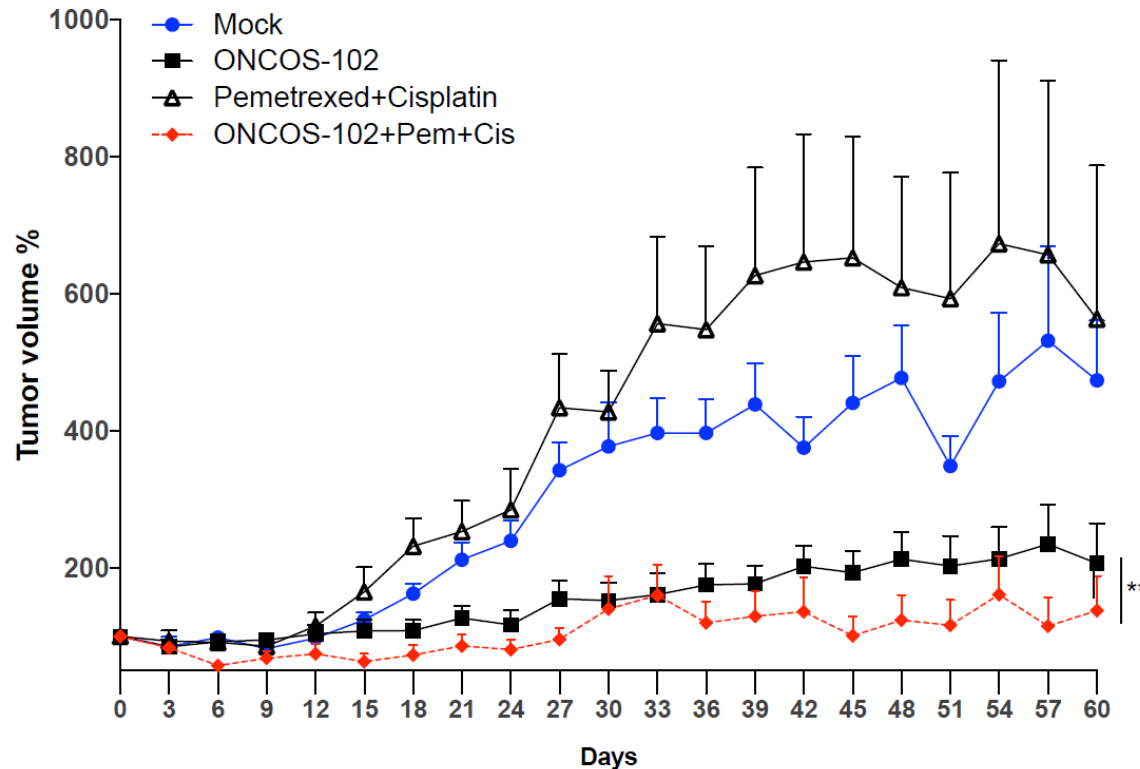
- CPIs show some early signs of efficacy, but are **potential ONCOS-102 combinations**, rather than competitors
- **No competing viruses** and few vaccines in current clinical development in mesothelioma

SYNERGY BETWEEN ONCOS-102 AND CHEMOTHERAPY

mesothelioma mouse model

Anticancer effect of ONCOS-102 and standard of care chemotherapy in xenograft mouse mesothelioma model

% change in tumor volume, 7 animals per group (14 tumors/group)



Effects observed at Day 60:

ONCOS vs. mock

56% tumor volume reduction
 $p < 0.01$

ONCOS vs. pem/cis

63% tumor volume reduction
 $p < 0.01$

ONCOS+pem/cis vs. pem/cis

75% tumor volume reduction
 $p < 0.001$

ONCOS+pem/cis vs ONCOS

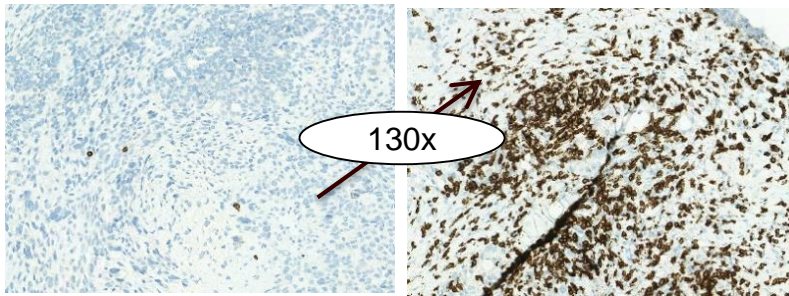
33% tumor volume reduction
 $p < 0.01$

ONCOS-102 CAN TURN MESOTHELIOMA LESIONS HOT

Phase I

CD8+ T-cells in tumor
Tumor biopsy staining

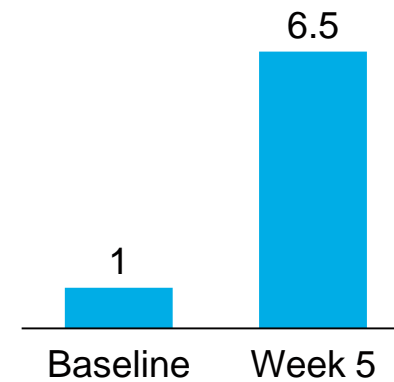
Mesothelioma – Phase I, patient 14



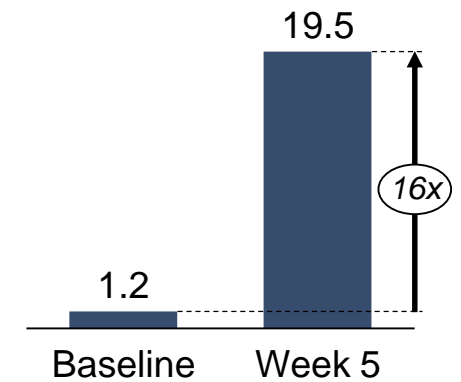
Baseline

Week 5

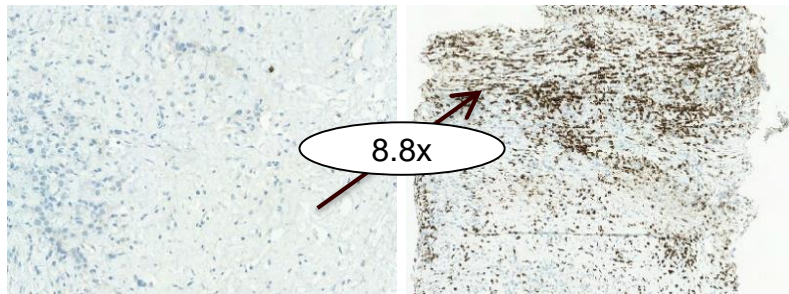
CD4+ T-cells in tumor
Fold change



PD-L1 positive tumor cells
% of total

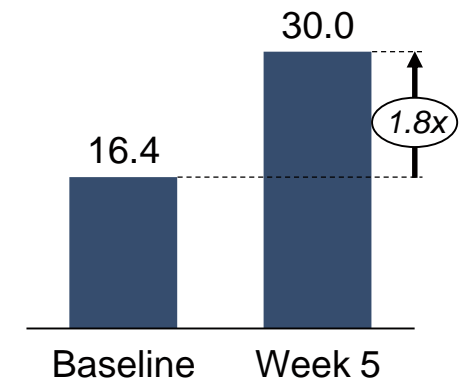
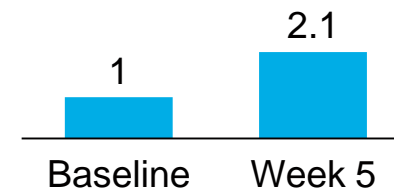


Mesothelioma – Phase I, patient 9

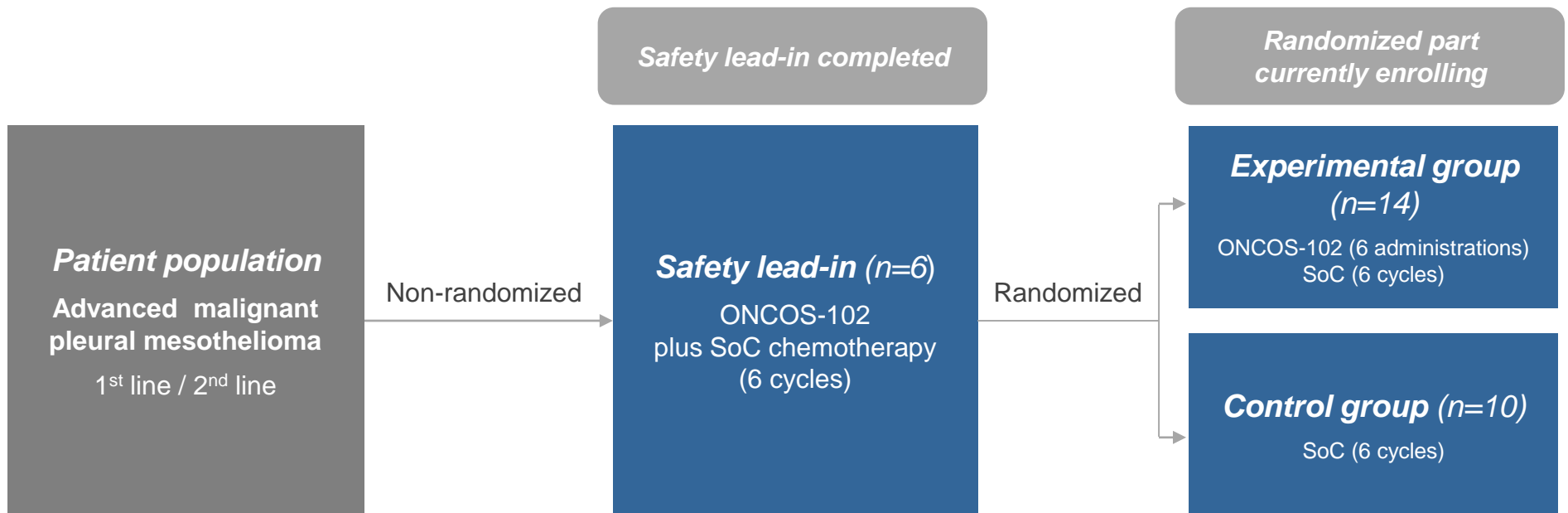


Baseline

Week 5



PHASE I/II STUDY DESIGN IN COMBINATION WITH SoC



SIGNAL OF EFFICACY IN THE FIRST 6 PATIENTS

1

Safety

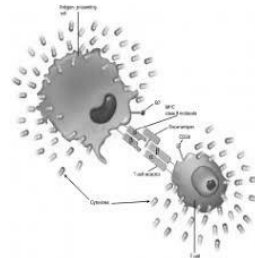
- ✓ ONCOS-102 **well-tolerated** in combination **with chemotherapy**



2

Innate immune activation

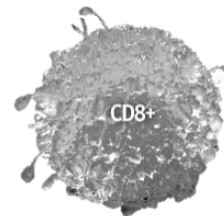
- ✓ **Systemic increase of pro-inflammatory cytokines** in 6/6 patients (IL-6, TNF α and IFN γ)



3

Adaptive immune activation

- ✓ Increase in **tumor infiltration of CD4+ and CD8+ T-cells** in 3/4 patients



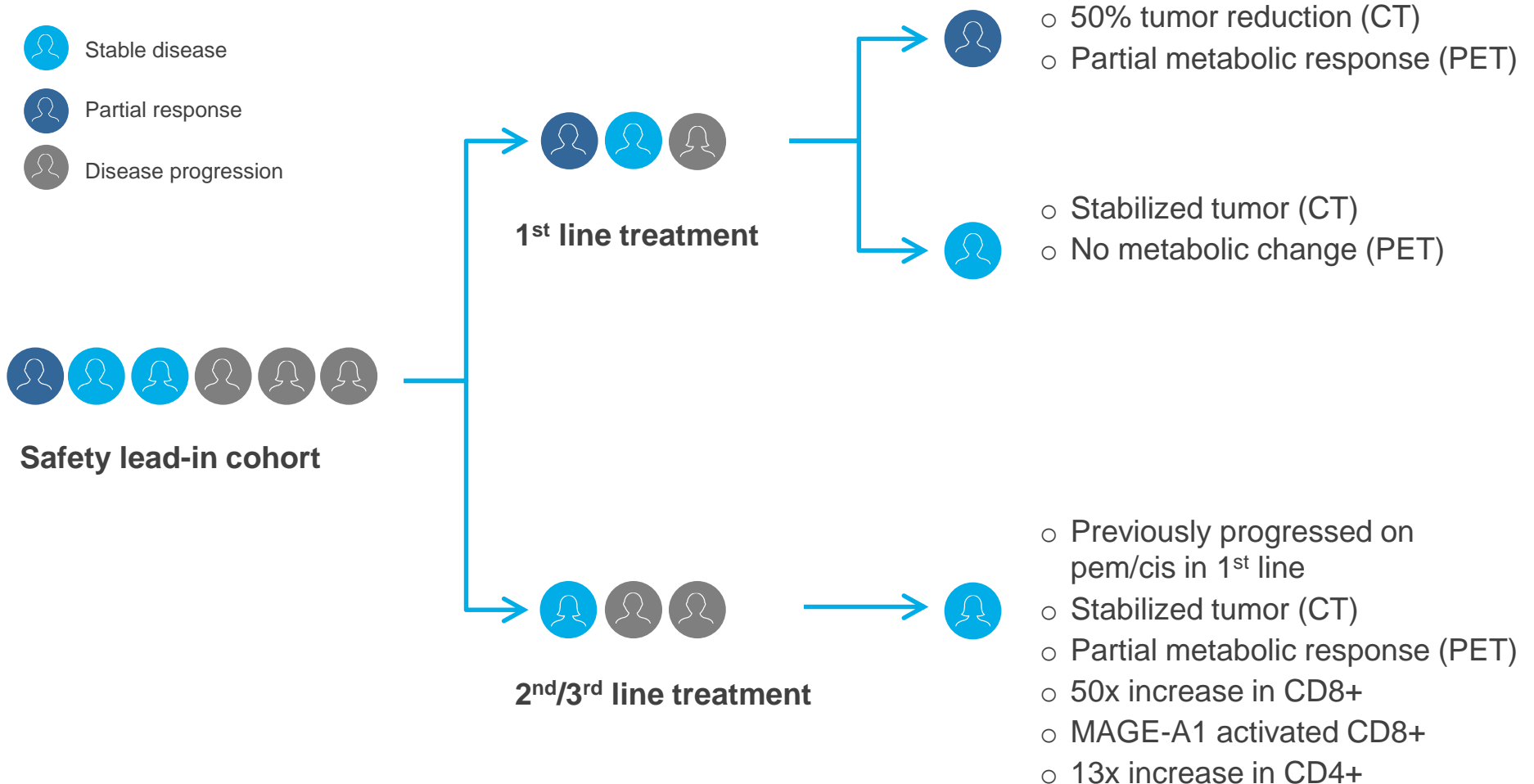
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Clinical benefit

- ✓ **Signal of clinical benefit** seen in **3/6 patients** after 6 months
- ✓ **50% disease control rate**

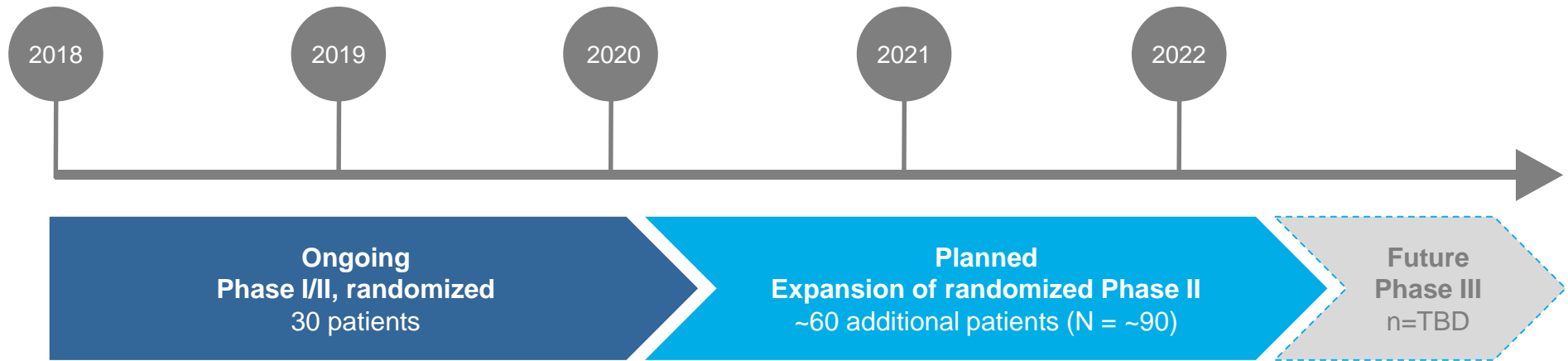


CLINICAL RESPONSES IN SAFETY COHORT



ONCOS-102 in malignant pleural mesothelioma

DEVELOPMENT STRATEGY AND INDICATIVE TIMELINES



- Randomized ORR and OS data 30 patients
- Decide on possible CPI combination arm
- EMA & FDA advisory meetings

- Randomized ORR and OS data 90 patients
- Potentially use as basis for a submission for conditional approval
- Start Phase III OS trial for full MAA