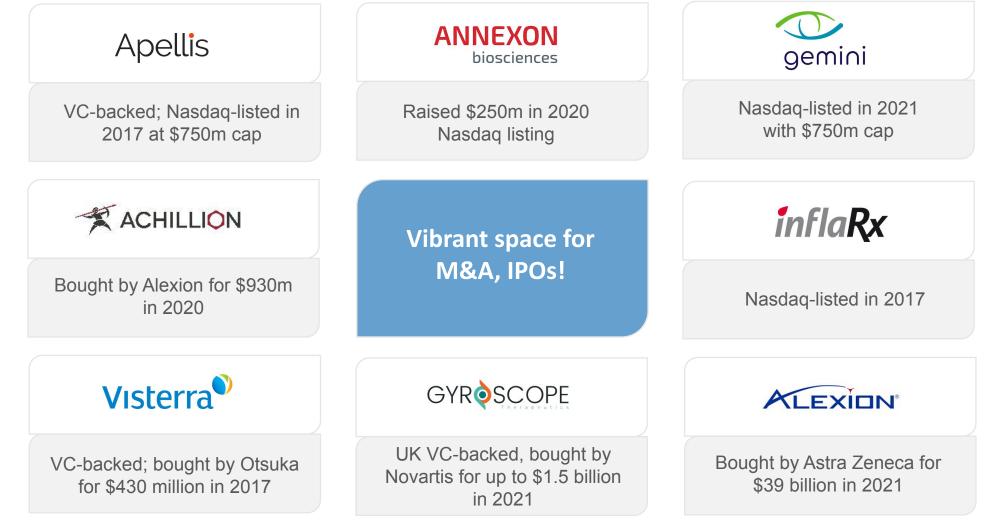
Developing second generation complement therapies

Richard Boyd, CEO <u>rboyd@invizius.com</u> April 2023

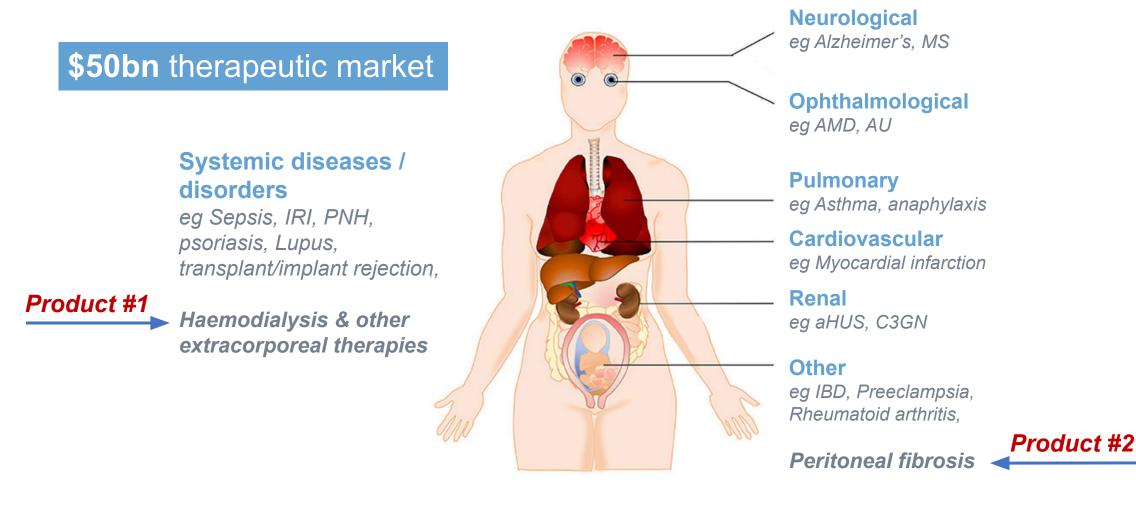


First generation complement therapeutics companies are generating significant shareholder value





Complement system dysregulation – an emergent driver of many inflammatory & autoimmune diseases





Adapted from Ekdahl et al (2018) Interpretation of Serological Complement Biomarkers in Disease. Front. Immunol. 9:2237. doi: 10.3389/fimmu.2018.02237

Our proprietary PspCN platform is designed to be safer and more effective than first generation complement therapies

First generation therapies

- Inhibits at a single point
- Stops all downstream activity
- May compromise beneficial functions - antimicrobial protection & debris clearance

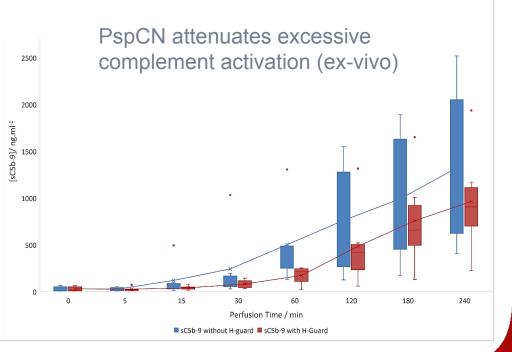
PspCN Second generation therapy

- Enhances the patient's own downregulator (Factor H)
- VS. Attenuates excessive complement activation
 - Maintains beneficial functions - antimicrobial protection & debris clearance

Potentially safer & more effective

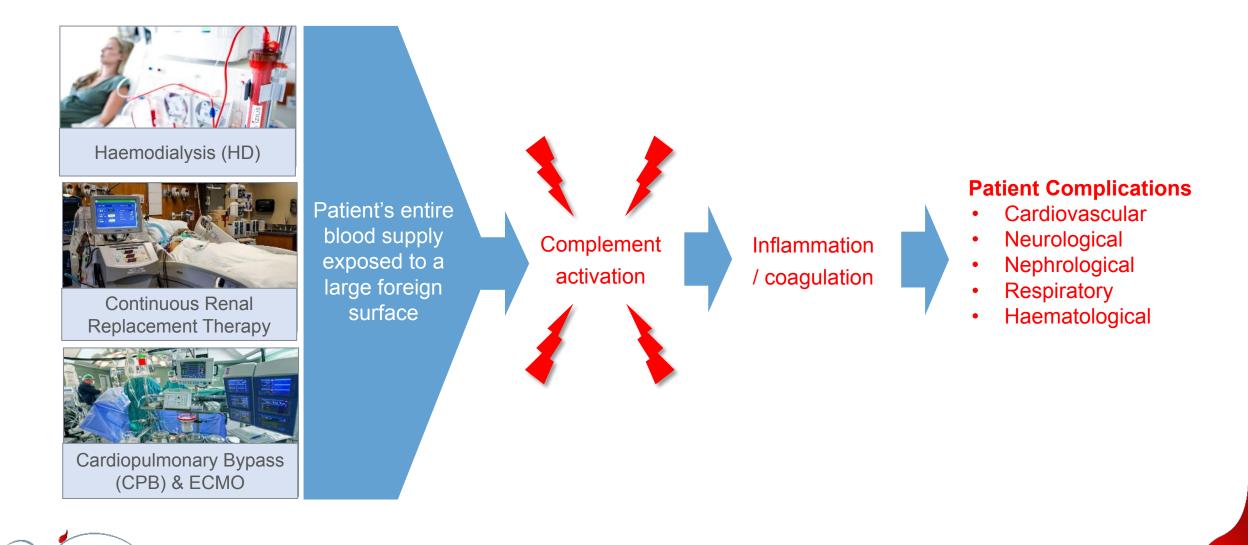


PspCN = "invisibility cloak" of Streptococcus Pneumoniae





Excessive complement activation during haemodialysis & other extracorporeal therapies drives serious patient complications



Product #1: H-Guard[®] Priming Solution for extracorporeal circuit treatments

| | | INDICATIONS | INTENDED BENEFITS | REVENUE OPP. |
|--|---|---|---|-----------------|
| H-Guard = PspCN modified as a medical device coating | | Haemodialysis (HD) | Prevent AKF becoming Chronic Accelerate recovery from DGF (transplant pts.) Improve health-related QoL (fatigue, itching, depression) Reduce CV morbidity & costs Reduce circuit clotting/failure | ~\$2bn |
| ① Add H-Guard to existing priming liquid | ② Prime extracorporeal circuit, leaving coating of H-Guard | Continuous Renal Replacement Therapy | Prevent Acute Kidney Failure becoming Chronic Reduce patient inflammation & association risk of organ dysfunction, sepsis, respiratory distress, delirium Reduce circuit clotting/failure | ~\$200m |
| | | Cardiopulmonary Bypass | Prevent systemic inflammatory response syndrome (SIRS) – associated with respiratory failure, renal and neurologic dysfunction, bleeding disorders, altered liver function, and multiple organ failure | ~\$100m |

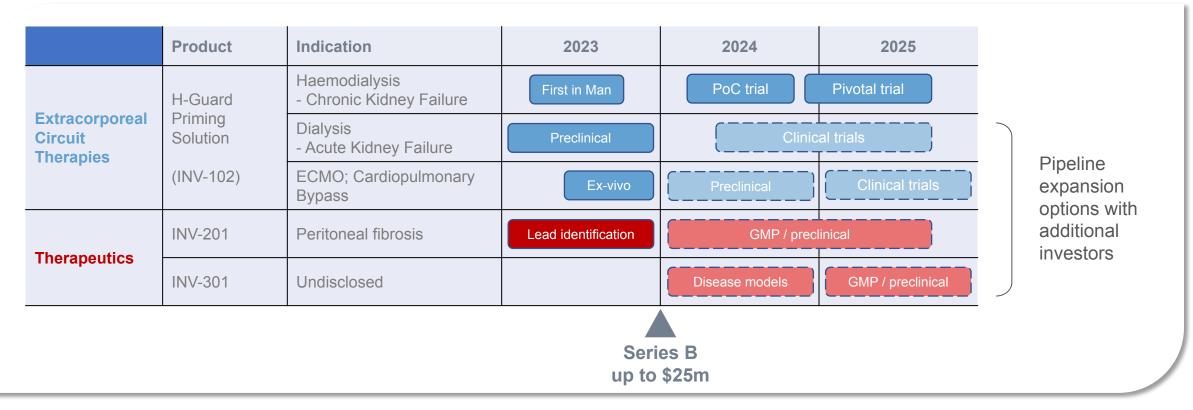
(CPB) & ECMO



function, and multiple organ failure

We are looking for investors to join our syndicate at Series B to accelerate growth to exit

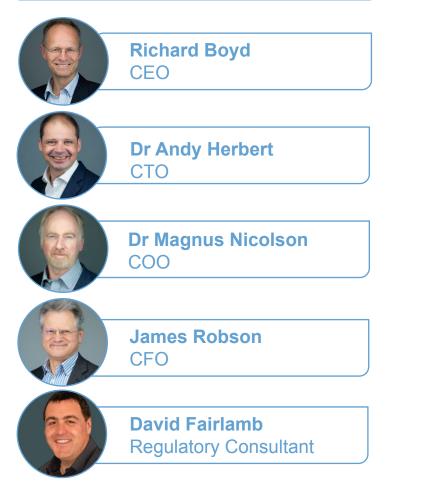






Leadership team

Management







Professor Sandip Mitra Manchester Royal Infirmary



Professor Paul Barlow University of Edinburgh



Karolinska Institutet

Manchester University

NHS



Professor Peter Stenvinkel Karolina Institutet



Summary



Clinical stage biotech



Supportive VC & CVC syndicate of investors



Developing second generation complement therapies



First generation complement therapeutics are an active M&A and IPO space with **\$bn-level valuations**



Lead product addresses huge unmet need in haemodialysis



Seeking additional investors at Series B in Q1'24, to expand pipeline based on exciting pre-clinical & clinical data, and accelerate growth to exit









Celebrating Innovation & Achievement in Life Sciences

