

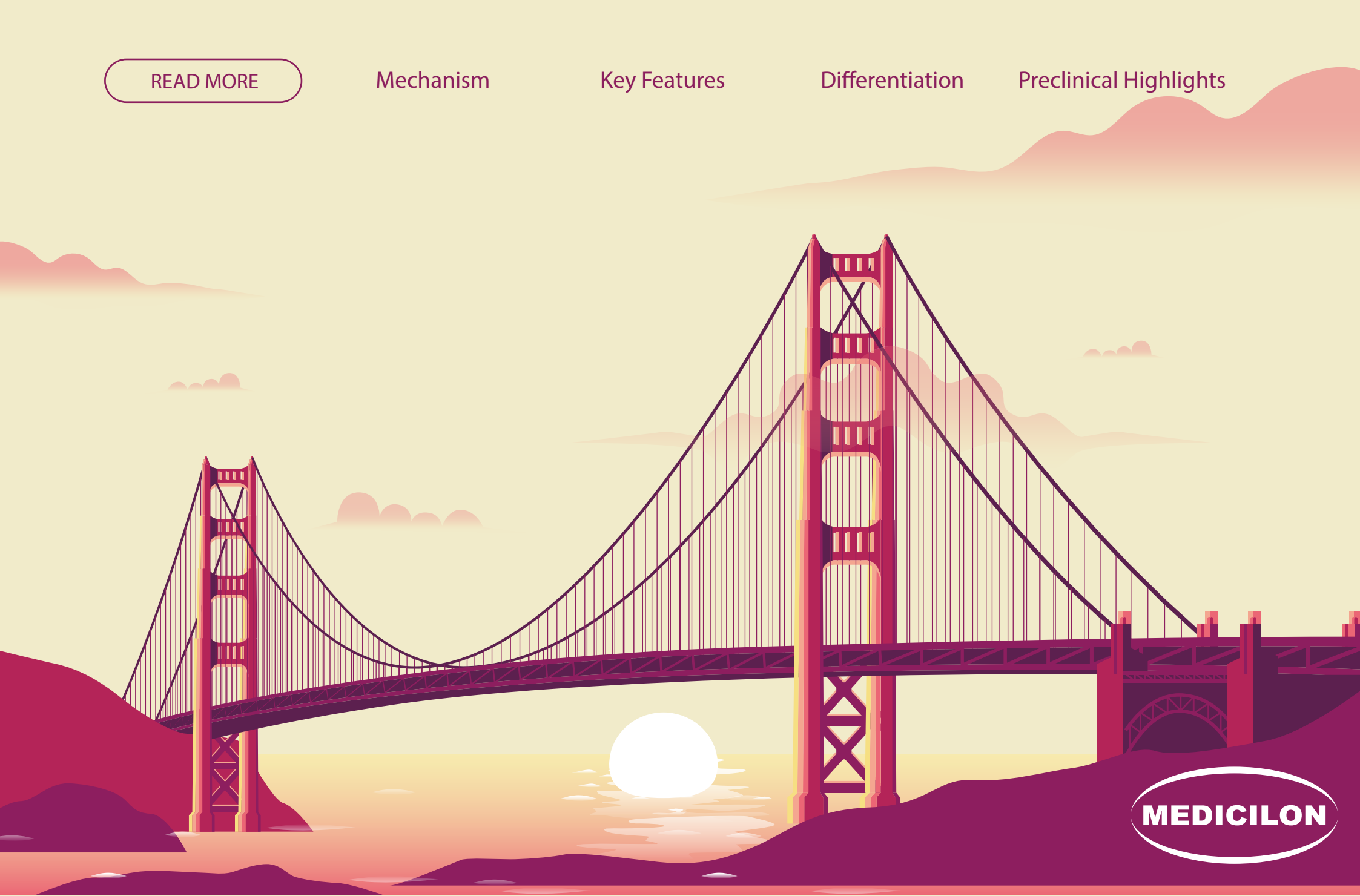
[READ MORE](#)

[Mechanism](#)

[Key Features](#)

[Differentiation](#)

[Preclinical Highlights](#)



MEDICILON

Medicilon | ACCESS ASIA BD Forum @JPM 2026

The Blueprint: A Portfolio of Executed Programs

[READ MORE](#)

www.medicilon.com

• COMPANY PROFILE

From its inception in 2004, Medicilon (SHA: 688202) has been committed to providing comprehensive research and development (R&D) services to biopharmaceutical companies, research institutions, and other organizations working in the preclinical space, with the primary objective of supporting and accelerating pharmaceutical, biopharmaceutical and medical device R&D worldwide.

610+ IND approved by **FDA, NMPA, EMA, TGA, MFDS, PMDA**

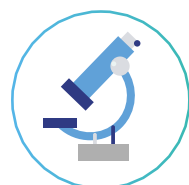


OECD

NMPA



• SERVICE SCOPE



Drug Discovery

- Chemistry
- Biology
- Early DMPK



Drug Development & CMC

- API/Formulation
- CMC Research



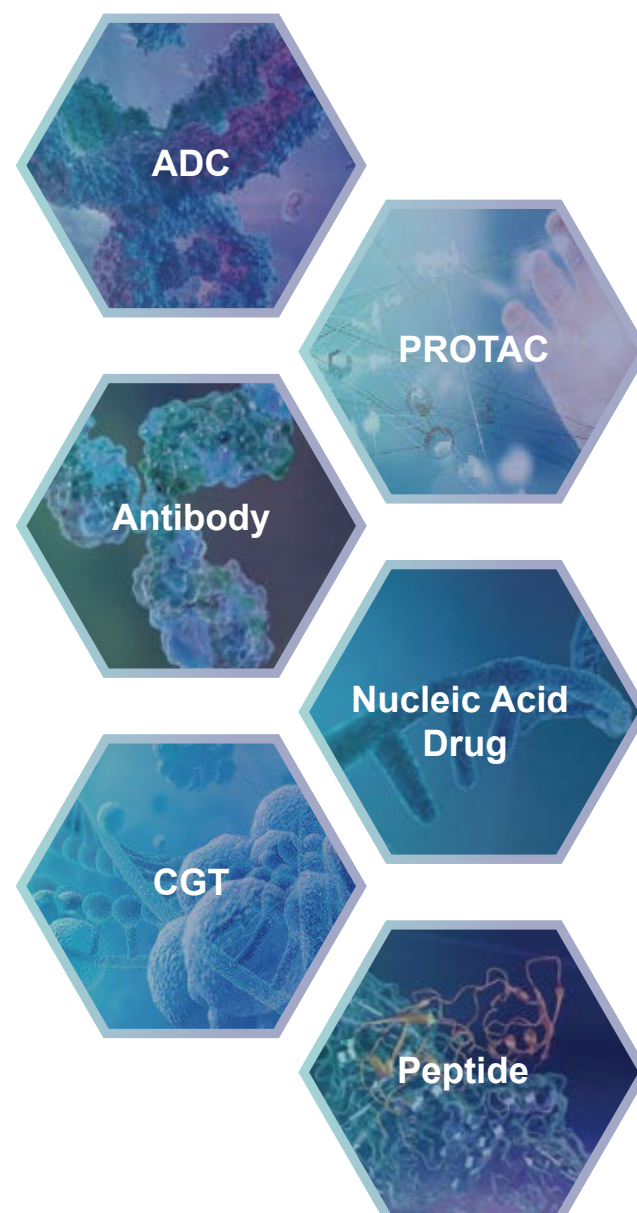
Preclinical Research

- Pharmacology
- Pharmacodynamics
- Pharmacokinetics
- Drug Safety Evaluation
- Bioanalysis



IND Filing

- FDA
- NMPA
- EMA
- TGA
- MFDS
- PMDA



MEDICILON

Email: marketing@medicilon.com Website: www.medicilon.com

USA: 20 Maguire Road, Suite 103, Lexington, MA 02421, USA

China: 585 Chuanda Road, Pudong, Shanghai, 201299, China

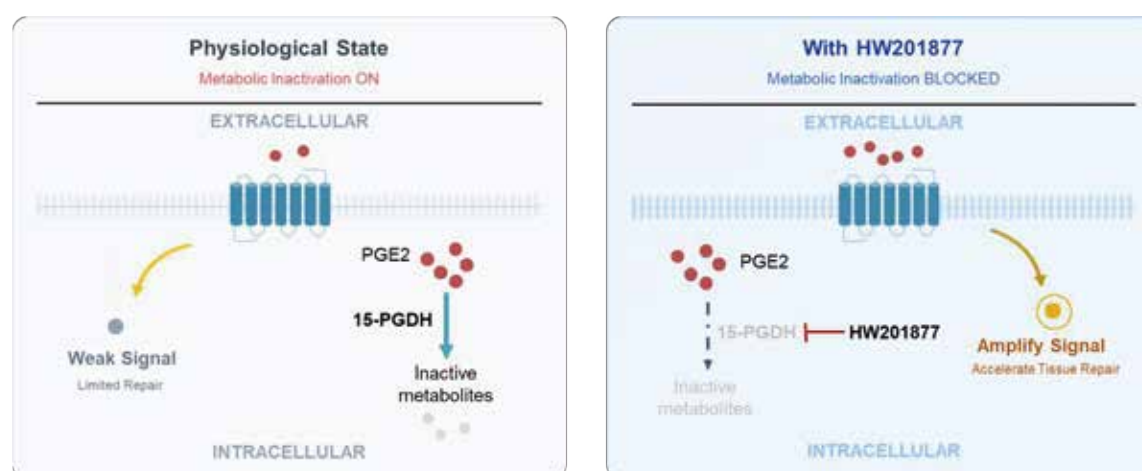


- Headquarters: Wuhan, China
- Humanwell Healthcare Group is one of the largest pain management specialty pharma in China
- Seeking for BD&L and partnership opportunities with leading global biopharmaceutical companies in treating CNS, respiratory, and autoimmune disorders

15-PGDH inhibitor

Mechanism of Action:

- 15-hydroxyprostaglandin dehydrogenase (15-PGDH), negatively regulates tissue regeneration and repair in the bone marrow, colon, and liver.
- Prostaglandin PGE2, a lipid signaling molecule that supports expansion of several types of tissue stem cells, is a candidate therapeutic target for promoting tissue regeneration.
- Multiple scientific breakthroughs demonstrates that inhibiting 15-PGDH could promotes tissue repair through elevating PGE2 level.



Zhang et al. Science 2015; 348 (6240); Palla et al. Science. 2021; 371(6528); Singla et al. Science 2025; Li et al. J Med Chem 2025;68(13):14099-14113

Lead Program - HW201877

A potential first in class oral therapy for inflammatory bowel disease (IBD)

Differentiation:

- Leading clinical development position in global 15-PGDH inhibitor R&D competition
- Strong druggability features support once-daily(QD) oral solution for refractory IBD patients
- Potential revolutionary MOA promotes mucosa protection and healing to tackle root cause of IBD
- Novel MOA backed by multiple scientific discoveries could build a product-in-a-pipeline to other chronic disorders such as sarcopenia, osteoarthritis, or IPF.

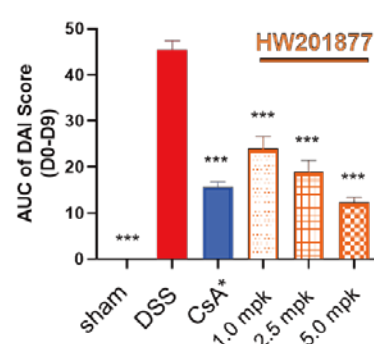
Preclinical Highlights:

- Highly potent inhibitor with IC₅₀ in nM range with favourable pre-clinical safety profiles
- Proof-of-biology provides therapeutic effects in multiple classic IBD models comparable/superior to oral SOC/best-in-disease drugs

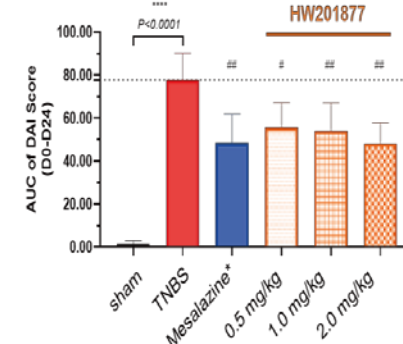
Planned Clinical Milestones:

- Phase 1 SAD data is expected in Q1 2026
- First indication is targeting ulcerative colitis
- Global MRCT is planned after phase 1 completion in China

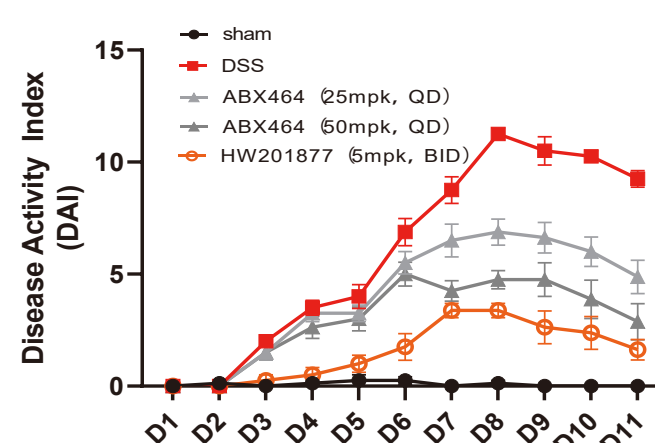
DSS-induced IBD model



TNBS-induced IBD model



DSS-induced IBD model



ABX464/Obefazimod is a phase 3 best-in-disease (miRNA modifier) oral drug candidate for IBD developed by Abivax



人福医药
HUMANWELL HEALTHCARE

- Headquarters: Wuhan, China
- Humanwell is one of the largest pain management specialty pharma in China
- Seeking for BD&L and partnership opportunities with leading global biopharmaceutical companies in treating CNS, respiratory, and autoimmune disorders

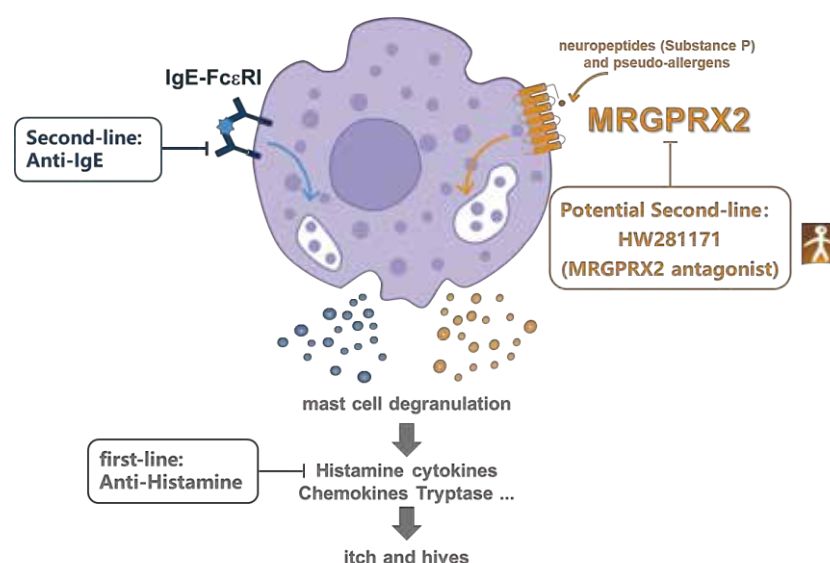
MRGPRX2 antagonist

◆ Unmet Medical Needs:

- ~80 million Chronic spontaneous urticaria(CSU) patients globally, the chronic urticaria market in major developed countries approached 1.5 billion USD in 2023
- Only three targeted therapies: Omalizumab Injection, Dupilumab Injection and Remibrutinib

◆ Mechanism of Action:

- Mas-related G-protein receptor X2 (MRGPRX2) is a newly discovered receptor mediating IgE-independent mast cell (MC) activation.
- MRGPRX2 activation on MCs triggers degranulation and the release of inflammatory mediators.
- Inhibiting MRGPRX2 blocks MCs activation and prevent MCs degranulation, offering a novel, selective treatment for inflammatory diseases independent of IgE.



Roy, S et al. *J Allergy Clin Immunol.* 2021; Kolkhir Pet al. *JAMA.* 2024 Nov 5; <https://www.cortellis.com>

Lead Program - HW281171

A novel small molecule oral drug for chronic spontaneous urticaria (CSU)

◆ Differentiation:

- A novel IgE-independent anti-inflammatory agent inhibiting mast cell degranulation
- Wide safety margin, significantly enhanced safety profile vs. Incyte EP262 (POC MRGPRX2 antagonist)
- Oral bioavailability and long half-life support the potential for once-daily(QD) dosing regimen
- Broad therapeutic potential across multiple allergic & inflammatory indications

◆ Preclinical Highlights:

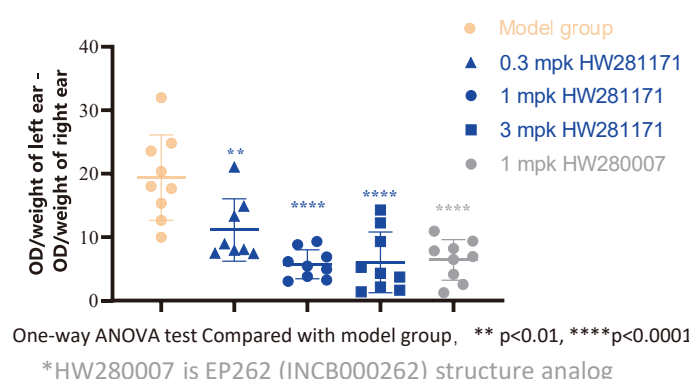
- Dose-response analysis confirms IC₅₀ in nM range for Calcium Flux inhibition
- HW281171 exhibits favorable pharmacokinetic properties across all species
- HW281171 demonstrates superior efficacy in anti-pruritus and anti-inflammation *in vivo* tests

◆ Planned Clinical Milestones:

- IND submission is scheduled for H2 2026
- Phase 1 clinical study is scheduled for H1 2027

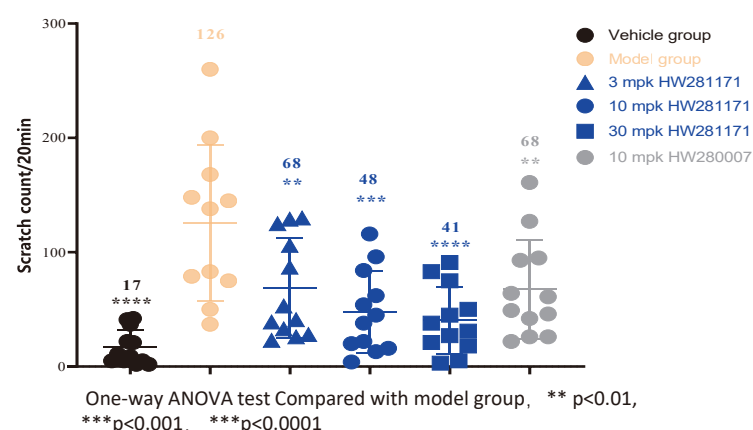
Mouse Passive Cutaneous Anaphylaxis reaction (PCA) Model

HW281171 PCA test data (n=9)



Mouse Itch Behavioral Study

HW281171 anti-pruritus test data (n=12)





- Headquarters: Wuhan, China
- Humanwell Healthcare Group is one of the largest pain management specialty pharma in China
- Seeking for BD&L and partnership opportunities with leading global biopharmaceutical companies in treating CNS, respiratory, and autoimmune disorders

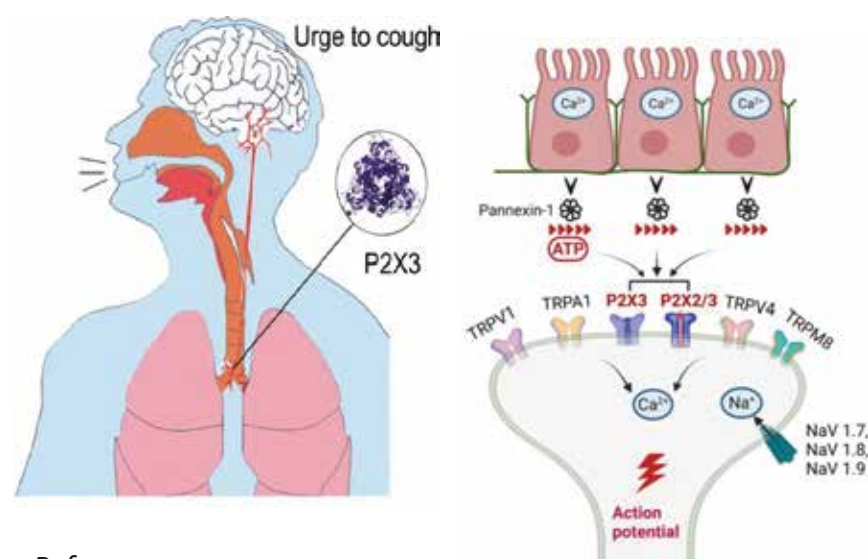
P2X3 Receptor Inhibitor

◆ Unmet Medical Needs:

- Effective treatments of refractory chronic cough (RCC) remain as highly unmet medical needs in the world.
- The market of chronic cough is growing rapidly, and estimated to reach \$ 9 billion USD by 2032

◆ Mechanism of Action:

- P2X3 receptors are believed to play a key role in the sensitization of cough reflexes
- P2X3 receptors can be opened by ATP activation which triggers action potentials in the airway sensory nerves
- Homomeric P2X3 receptors are important in mediating cough reflexes
- A well-balanced design of inhibiting P2X3 vs P2X2/3 may be translated into a better therapy to RCC



Reference:

Guo et al. Nat Commun 14, 5844 (2023)

Zhang et al. Purinergic Signal. 2022 Sep;18(3):289-305.

Zang et al. Eur J Med Chem. 2025;300(118116)

Lead Program – HW091077

A potential best-in-class oral therapy for refractory chronic cough (RCC)

◆ Differentiation:

- A potent P2X3 receptor inhibitor possessing well-balanced benefit/risk features of P2X3 vs P2X2/3
- Once-daily oral administration can be achieved based on superior PK profiles
- Better safety profiles than Gefapixant and Eliapixant
- Achieved 6-10x higher exposure in human than Eliapixant

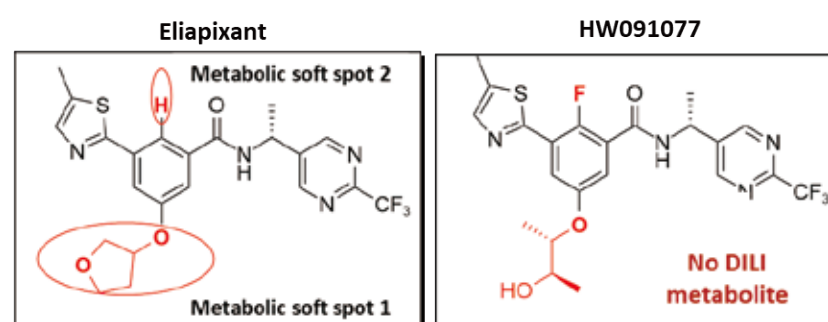
| Compound | Gefapixant | Eliapixant | HW091077 |
|------------------------------|------------|------------|----------|
| P2X3 IC ₅₀ (nM) | >100 | >10 | >10 |
| P2X2/3 IC ₅₀ (nM) | >200 | >100 | >100 |
| Selectivity (Fold) | ~2 | ~10 | ~10 |

◆ Preclinical Highlights:

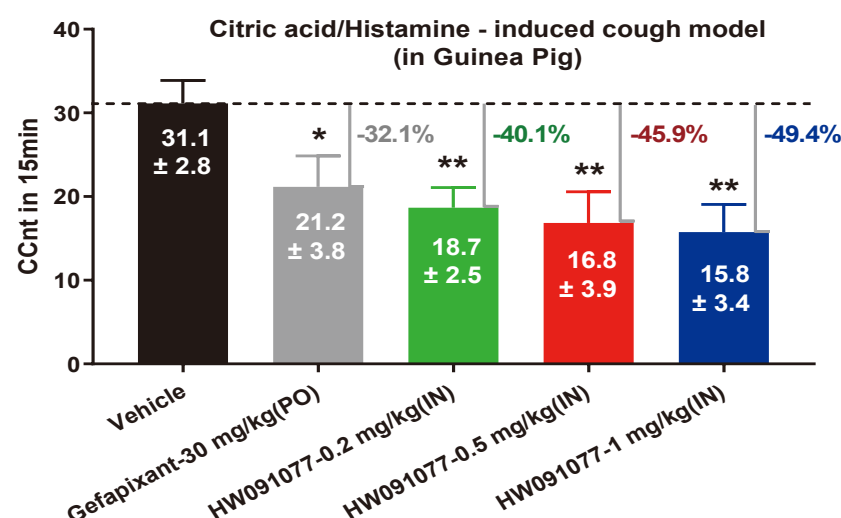
- HW091077 exhibits potent anti-cough effects in classic animal models at low doses (0.2-1.0 mpk)
- Structural optimizations result in eliminating liver toxicity identified from Eliapixant
- Moderate selectivity between P2X3 and P2X2/3 receptors maintains an optimal balance of minimizing taste alteration and reducing cough frequency

◆ Planned Clinical Milestones:

- Phase 1 clinical study was completed in Q4 2025
- HW091077 demonstrated favorable tolerability and excellent safety profile in healthy subjects
- Phase 2 is planned to start in Q1 2026



DILI, Drug-Induced Liver Injury





- US Site: Ballwin, MO, US; Parent Company: Yichang Humanwell Pharmaceutical Co. LTD, Yichang, Hubei, China
- Global market leader in anesthetic and pain medications
- Seeking strategic partnerships for the clinical development of pain therapeutics, including licensing, co-development, and collaborative opportunities.

Sigma-1 Receptor Antagonist RFUS-949

- **Clinical Need for Non-Opioid Alternatives:** Traditional opioid analgesics, such as morphine, are severely constrained by adverse effects—including constipation, tolerance, and dependence—that limit long-term pain management. A novel non-opioid class is urgently needed to deliver effective pain relief without these liabilities.
- **Sigma-1 receptor (Sigma-1 R):** A chaperone protein involved in pain modulation, highly expressed in key CNS and PNS regions (spinal cord, periaqueductal gray, locus coeruleus, rostral ventromedial medulla, dorsal root ganglia)
- **Mechanism:**
 - Sigma-1 receptor antagonists modulate pain via non-opioid mechanisms, representing a differentiated therapeutic approach
 - RFUS-949 selectively antagonizes Sigma-1 R, reducing neuronal sensitization and pain signaling
- **Key Features:**
 - **Excellent selectivity** for the Sigma-1 receptor ($K_i = 73.67$ nM) over Sigma-2 receptor ($K_i > 8,695$ nM)
 - **Robust analgesic efficacy** across multiple rodent pain models (formalin test, incision model, spinal nerve ligation model, acetic acid writhing test)
 - **No opioid-like adverse effects** (no constipation, tolerance, or dependence)
 - Suitable for **both acute and chronic pain management**
 - **Ongoing clinical studies** in China are expected to further define clinical utility and validate RFUS-949's impact on current pain treatment paradigms.

RFUS-949: Pre-Clinical Results

- **Indications:** Acute and chronic pain
- **In Vivo Efficacy:**
 - Rat Formalin test: $ED_{50} = 16.3$ mg/kg, **superior potency** to hydrocodone/APAP
 - Mouse incision model: dose-dependent inhibition of mechanical allodynia
 - Rat SNL neuropathic pain model: strong efficacy at 3–30 mg/kg
- **PK Profile:**
 - Beagle dogs (oral 5, 15, 45 mg/kg):
 - mean bioavailability ~40–70% across sexes and doses
 - CD-1 mice (oral 10, 30, 75 mg/kg):
 - mean bioavailability consistently >90% in both males and females
 - Suitable in vitro ADME; stable physicochemical profile
- **Safety Profile:**
 - No effect on motor coordination (rotarod test)
 - No significant impact on cardiovascular or respiratory functions in dogs

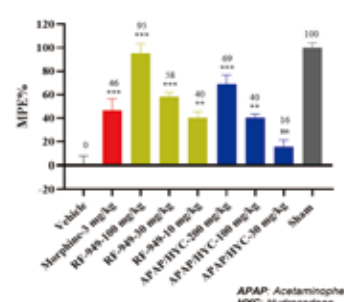


Fig 1. The Efficacy of RFUS-949 vs. Hydrocodone/APAP in rat formalin model (SC)

Under the conditions of this experiment:

1. Subcutaneous injection of RFUS-949 at 10, 30, and 100 mg/kg, 15 minutes in advance, produced dose-dependent analgesic activity, with an ED_{50} value of 16.3 mg/kg.
2. Subcutaneous injection of hydrocodone-acetaminophen at 30, 100, and 200 mg/kg, 15 minutes in advance, produced dose-dependent analgesic activity, with an ED_{50} value of 123.5 mg/kg.
3. RFUS-949 showed comparable analgesic efficacy to the hydrocodone-acetaminophen combination.

Note: 1. RFUS-949 (conversion between salt form and free base performed), solvent: physiological saline. 2. Hydrocodone-acetaminophen is a mixture of acetaminophen and hydrocodone bitartrate (325 mg / 5 mg), solvent: 5% DMSO + 95% physiological saline.

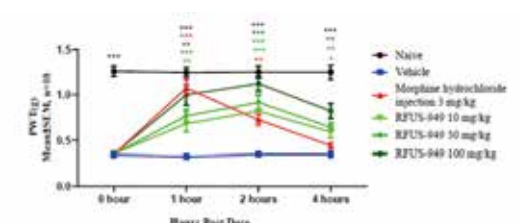


Fig 2. The Efficacy in Mice Post-Surgical Pain Model (oral gavage)

In a post-surgery pain model in mice, RFUS-949 had a dose-dependent inhibitory effect on mechanical allodynia at 10–100 mg/kg, and 2 hours after administration, RFUS-949 showed the maximum possible inhibition rate to mechanical allodynia.

Note: Data were presented as Mean ± SEM, n = 10/group. *p < 0.05, **p < 0.01, ***p < 0.001 vs. Vehicle group, by two-way ANOVA followed by Dunnett's Multiple Comparison Test.

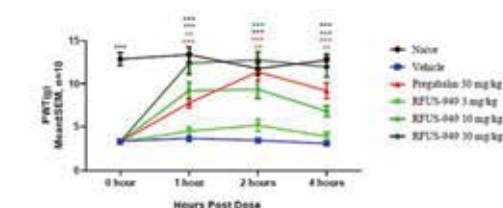


Fig 3. The Efficacy in Rat SNL Pain Model (oral gavage)

In a spinal nerve ligation model in SD rats, RFUS-949 had a dose-dependent inhibitory effect on mechanical allodynia at 3–30 mg/kg, and 2 hours after administration, RFUS-949 showed the maximum possible inhibition rate to mechanical allodynia.

The results of mechanical allodynia test at baseline and 1 hour, 2 hours and 4 hours after administration. Note: Data were presented as Mean ± SEM, n = 10/group. **p < 0.01, ***p < 0.001 vs. Vehicle group, by two-way ANOVA followed by Dunnett's Multiple Comparison Test.



**Chengdu Hyperway
Pharmaceutical Co., Ltd.**

- Headquarters: Chengdu, China
- Hyperway Pharma has advanced over ten innovative pipelines across key therapeutic areas including oncology, pain management, and central nervous system disorders.
- Through regional licensing, technology cooperation, and platform transfers, Hyperway Pharma actively seeks external partners to co-develop high-quality, cost-effective medicines

HBW-3220 – 4th Gen BTK inhibitor (Phase III)

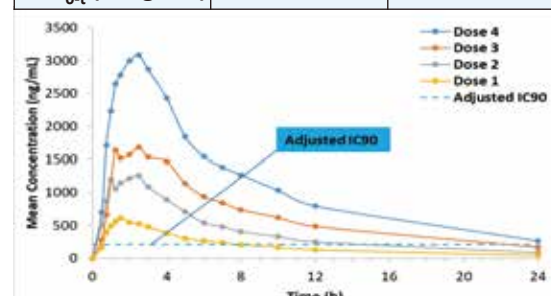
- **A non-covalent 4th Generation BTK inhibitor** offering the best coverage of known resistance mutations. **Strong potency against L528W** linked to Pirtobrutinib and Zanubrutinib resistance. **Potential best-in-class!**
- **Indication:** lymphoma, leukemia, and various autoimmune diseases, including membranous nephropathy & urticaria.
- **Phase II results:** 1) **75% ORR** in the 120mg group for CLL/SLL patients who had previously taken at least one irreversible BTKi. 2) **100% ORR** in a cohort of 7 CLL/SLL patients with BTK C481S (1 case w/ additional T474I). 3) **86% ORR** in MCL patients and **75% ORR** in MZL patients who had not received any prior BTKi therapy. 4) No DLTs were observed and the incidence of \geq grade 3 adverse reactions was significantly lower than that of Pirtobrutinib.

| IC ₅₀ (nM) | BTK WT | BTK C481S | BTK L528W | BTK T474I |
|-----------------------|----------------|-----------|-----------|---------------|
| ARQ-531 | 1.7 | 66.2 | 4.2 | 793.3 |
| Pirtobrutinib | 2.7 | 58.3 | 1970 | 331 |
| Zanubrutinib | \ | \ | 660 | \ |
| Orelabrutinib | \ | \ | 7280 | \ |
| HBW-3220 | <0.6 | ~3 | ~6 | <14 |

HBW-004285 –Nav1.8 inhibitor (Phase II)

- A selective, safe, and efficacious **Nav1.8 inhibitor with non-addictive properties. Potential best-in-class!**
- **Indication:** acute and chronic pain.
- Favorable PK linearity in humans with large safety margins.
- Plasma concentrations exceed the adjusted IC90 level across all dose groups.
- **A phase IIa clinical trial (for acute pain) has been completed**, demonstrating clear analgesic effect and good safety.
- **The lower proportion of patients receiving rescue therapy** in the treatment group compared to the placebo group.

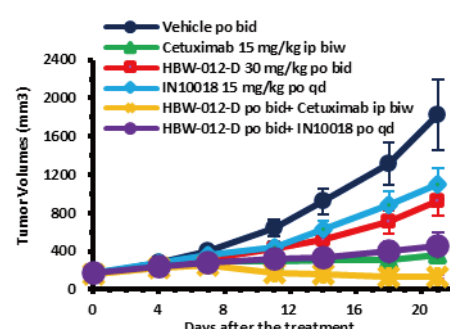
| IC ₅₀ (nM) | VX-548 | HBW-004285 |
|---|--------|------------|
| Human iPSC-SNs | 0.26 | 1.01 |
| Safety Margins (Animal _{NOAEL} /Tablet _{Clinic}) | | |
| C _{max} (ng/mL) | 3.8 | 10.7 |
| AUC _{0-t} (h*ng/mL) | 2.8 | 12.4 |



HBW-012-D & HBW-016-K –KRAS inhibitor (Phase I)

HBW-012-D KRAS-G12D inhibitor

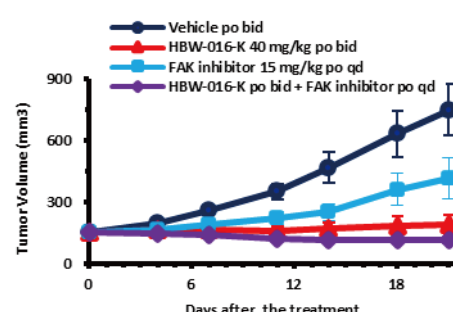
| Cell line | KRAS | Method | MRTX1133 | HBW-012-D |
|-----------------------|---------|--------------|----------|-----------|
| IC ₅₀ (nM) | | | | |
| AGS | G12D | pERK | ~1 | <1 |
| AsPC-1 | G12D | 3D Viability | 10.88 | ~3 |
| GP2D | G12D | | 1.38 | <1 |
| PANC-1 | G12D | | 2.32 | <1 |
| HPAC | G12D | | 2.72 | ~5 |
| MKN-1 | KRAS-WT | | >3000 | >3000 |



- An orally active KRAS G12D inhibitor with potential to be **best-in-class!**
- **3-5x more potent** in inhibiting cell proliferation and **10-50x higher exposure** compared to MRTX1133.
- **Excellent antitumor efficacy** both as monotherapy and in combination therapy.

HBW-016-K Pan-KRAS inhibitor

| Cell line | KRAS | Method | HBW-016-K | | | |
|-----------|------|--------------|-----------------------|-------------------------|--------|--------|
| | | | IC ₅₀ (nM) | PK: PO, 30 mg/kg | | |
| AGS | G12D | pERK | ~2 | Species | Mouse | Rat |
| GP2D | G12D | 3D Viability | ~2 | C _{max} (ug/L) | ~4300 | ~1000 |
| HPAF-II | G12D | | ~5 | AUC _{0-t} | ~12000 | ~11000 |
| KP-4 | G12D | | <5 | (ug·hr/L) | | |
| SW1990 | G12D | | ~7 | T _{1/2} (hr) | ~3.2 | ~3.2 |
| RKN | G12V | | <5 | F (%) | ~12 | ~22 |



- **Potent inhibition** against multi-KRAS mutations, including G12D and G12V.
- **Favorable PK** in both mouse and rat models.
- **Strong antitumor efficacy** as a monotherapy or in combination therapy.

- Headquarter: Chengdu, China
- Focus on the development of innovative small-molecule drugs and precision therapeutic platforms with broad pipelines covering therapeutic areas, including hematology, cancer, respiratory disease, cardiovascular metabolic disease, pain and central nervous system disease
- Seeking for partnership for clinical development (licensing, co-development and/or collaboration).

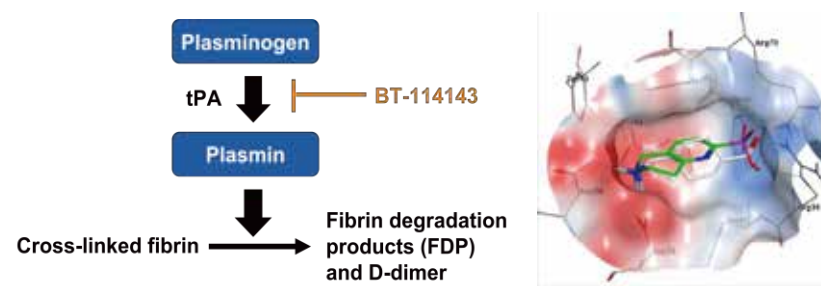
BT-114143, a Novel and Potent Small-Molecule Plasminogen Activation Inhibitor for Hyperfibrinolysis

Mode-of-Action

- By inhibiting plasminogen activation and reducing fibrin degradation, resulting in an antifibrinolytic effect

Key Features

- **Enhanced Antifibrinolytic Activity**
6-10x potency vs. tranexamic acid (TXA)
- **Minimized CNS Exposure and GI side-effects**
No serious AEs in completed Ph1a, 1b and on-going Ph2 studies
- **Intramuscular (IM) Administration Feasibility**
 - ✓ Low dosing volume (anticipated <5 mL)
 - ✓ Suitable for bleeding control for trauma and emergency use, esp. under prehospital scenario



Ex vivo Efficacy of BT-114143 and TXA in Human Whole Blood TEG Analysis (n=6)

| Analyte | Mean IC ₅₀ (μM) | Mean IC ₉₀ (μM) |
|-----------|----------------------------|----------------------------|
| BT-114143 | 0.56 | 1.01 |
| TXA | 3.39 | 10.12 |

J Med Chem . 2025 Mar 27;68(6):6084-6099.

Phase I Study of Safety, Tolerability, Pharmacokinetics, and Exploratory Biological Effects of Intravenous BT-114143 in Healthy Volunteers

- **Purpose of study:** To assess the safety, tolerability, pharmacokinetics, and exploratory biological effects of intravenous BT-114143 in healthy volunteers
- **Trial design:** IV single-ascending-dose study in healthy volunteers, dose range 0.03–15 mg/kg, total N = 84 (3A:1P)
- **Highlights:**
 - PopPK/PD analysis demonstrated a well-fit target-mediated drug disposition (TMDD) model for small molecules
 - Well-tolerated with a good safety profile at all doses, no dose-dependent AEs

Phase Ib, Multicenter, Randomized, Controlled, Dose-Escalation Study of BT-114143 Injection in Patients with Abnormal Uterine Bleeding (AUB)

- **Purpose of study:** Proof-of-concept (PoC) for bleeding control in patients, RP2D for other indications
- **Trial design:** IV multiple-ascending-dose study in AUB patients with doses of 0, 2.4, 4.8 or 9.6 mg/kg, BID × 3 days, total N = 39 (10A:3P)
- **Highlights:**
 - Similar PK/PD characteristic as those in Ph1a SAD with HV
 - Dose-dependent changes in PD biomarkers; Clinically meaningful reduction in menstrual bleeding
 - Well tolerated, with only mild, fully reversible TEAEs (Grade 1–2) and no significant safety concerns across dose groups

Planned Clinical Milestones

- Phase II total knee arthroplasty (TKA), first-patient-in took place in September 2025; Estimated completion by 2026
- Oral QD–BID formulation under development, with planned IND in 2Q 2026



- Gluetacs Therapeutics is a biopharmaceutical company developing oral small-molecule targeted protein degraders.
- Seeking strategic partnerships for the development of its pipeline assets, including licensing, co-development, and/or collaborative opportunities.
- Headquarter: Shanghai, China

GlueTacs® Library

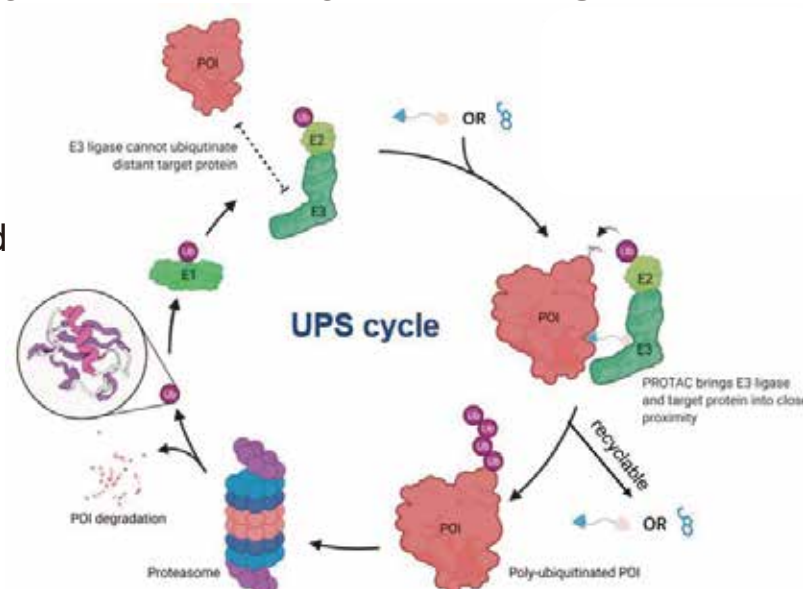
- A proprietary library of **over 13,000** small-molecule degraders, including **molecular glues and bifunctional modalities**

Mechanism:

- Molecular glues and bifunctional degraders recruit target proteins to E3 ligases
- Ubiquitination marks the target protein for recognition and selective degradation by the proteasome

Key Features:

- Orally available small-molecule modality
- Expands the druggable space
- Novel scaffold design enables enhanced substrate selectivity and efficacy
- Operates via catalytic "event-driven" pharmacology



PROTACs: past, present and future[J].*Chemical Society Reviews*, 2022, 51.

Gluetacs Pipelines

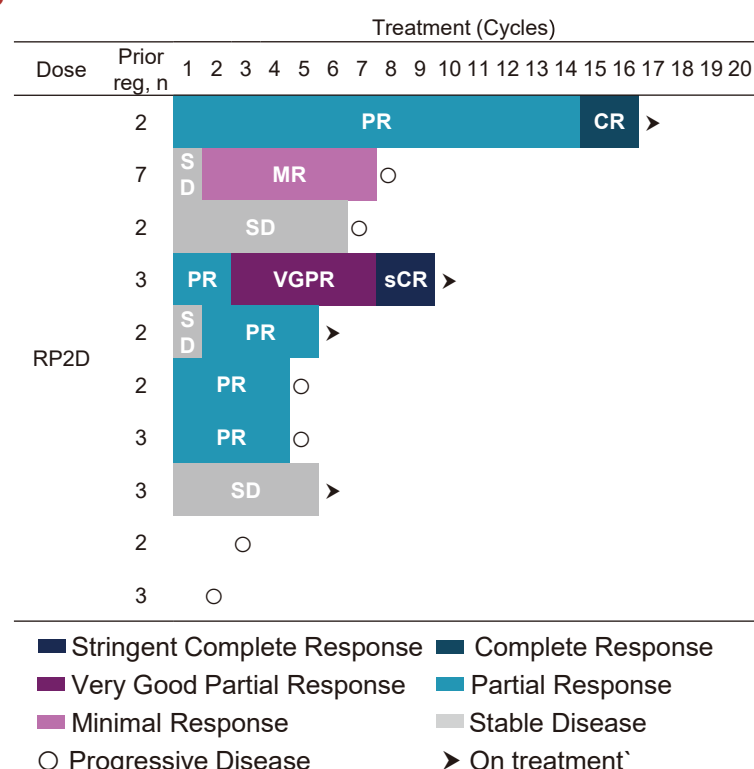
- **GT919:** IKZF3/1 degrader
- **Indications:** Relapsed and Refractory Multiple Myeloma (r/r MM)
- **Stage:** Phase II Clinical Trials
- **Phase I Results:**

Manageable Safety

- ✓ No DLTs were observed at all dose levels (0.5, 1, 2, 3, 4 and 5 mg).
- ✓ No TEAEs or TRAEs led to GT919 discontinuation, dose reduction or death.
- ✓ Wide safety dose range and promising safety profile.

Encouraging Efficacy

- ✓ ORR of 50% among 10 evaluable triple-refractory patients that received GT919 at RP2D.



- **GT929:** IKZF3/1 degrader
- **Indications:** Relapsed and Refractory Non-Hodgkin Lymphoma (r/r NHL)
- **Stage:** Phase I Dose Expansion
- **Highlights:** GT929 is a selective IKZF3/1 degrader showing favorable safety and early signs of clinical efficacy. In the ongoing Phase I study, GT929 achieved an 80% disease control rate among evaluable patients, with manageable safety and supportive PK/PD characteristics.
- **GT969:** VAV1 degrader
- **Indications:** Autoimmune Diseases
- **Stage:** IND-enabling
- **Highlights:** GT969 is a novel VAV1 degrader. The program shows strong target degradation, favorable tissue distribution, and in vivo efficacy across multiple autoimmune disease models, supporting continued advancement toward clinical development.

- **GT818:** RSK degrader
- **Indications:** Solid Tumors
- **Stage:** Pre-IND
- **Highlights:** A first-in-class RSK degrader that offers a distinct mechanism beyond conventional inhibition, addressing RSK's multi-functional behaviors. The compound shows compelling *in vivo* efficacy in multiple CDX models, including triple-negative breast cancer, prostate cancer, and NSCLC.
- **DAC Payloads:** A proprietary library of molecular glues suitable for use as payloads in degrader-antibody conjugates, with out-licensing and co-development opportunities.

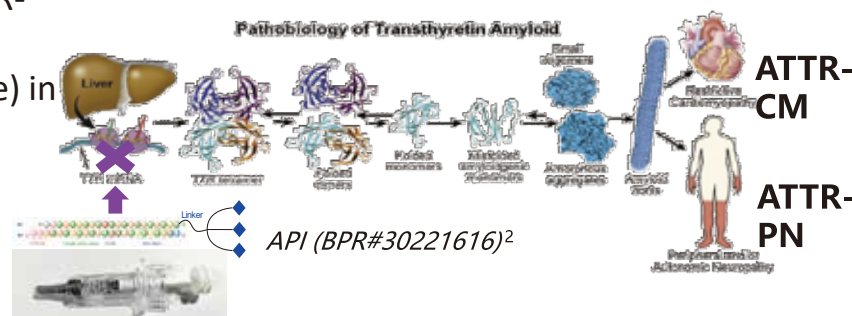
- Headquarters: Chengdu, China
- Focusing on siRNA drugs for CMR (Cardio-Metabolic-Renal) space
- Leading asset Phase I (ATTR potential Q6M, BIC)
- Extra-hepatic delivery pipelines welcome inquiries and investment
- Seeking investment: license, co-dev, new-co

Lead Clinical Asset: BPR-30221616

BPR#30221616 is a potential BIC proprietary siRNA drug for ATTR indications (ATTR-CM, ATTR-PM), Q6M

- **MOA:** Targeting and degrading the TTR (transthyretin) mRNA in the liver via RNAi MOA
- **Indications:** ATTR-CM (Transthyretin Cardiomyopathy); ATTR-PN (Transthyretin Polyneuropathy)
- **Dev. Phase:** Phase I (LPO 09/19/25, all doses finished & Safe) in China; ODD by FDA (06/2025); FDA IND approval (10/2025);
- **Potential Dosing Regimen:** admin. s.c., Q6M
- **Patents:** PCT/CN2024/125847 (LOE:2044), PCT/CN2024/121099 (LOE:2044) and CN2024118087535 (LOE:2045)
- **Next Important Data Report:** 01/2026-02/2026 (Phase I 150mg-300mg, Q6M)

Pathophysiology of ATTR diseases and the therapeutic MOA¹ of BPR#30221616



¹ Adapted from Ruberg FL et al. Transthyretin Amyloid Cardiomyopathy: JACC State-of-the-Art Review. J Am Coll Cardiol. 2019 Jun 11;73(22):2872-2891. doi: 10.1016/j.jacc.2019.04.003.
² BPR#30221616, a GMP drug product, developed & manufactured by Chengdu Brilliant Pharma Co.

Key Clinical Data of trial CT06760455/CTR20244864

PI: Xiaohong Han M.D.
 Leading Site: PUMCH (Peking Union Medical College Hospital)

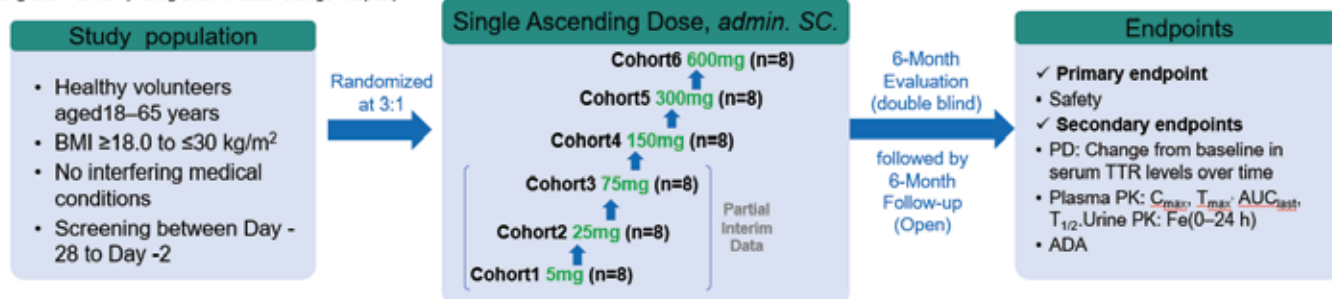


Table 1: Baseline Demographics

| | BPR-30221616 and Placebo | | | | | |
|----------------------------|--------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| | 5mg (N=8) | 25mg (N=8) | 75mg (N=8) | 150mg (N=8) | 300mg (N=8) | 600mg (N=8) |
| Age, years, median (range) | 40.5 (36.0 - 51.5) | 40.5 (38.5 - 46.0) | 35.0 (28.5 - 39.5) | 38.0 (28.5 - 42.5) | 35.0 (26.0 - 38.0) | 44.0 (31.5 - 45.5) |
| Gender Male (%) | 6 (75.0) | 7 (87.5) | 5 (62.5) | 6 (75.0) | 8 (100) | 5 (62.5) |
| Race Asian (%) | 8 (100) | 8 (100) | 8 (100) | 8 (100) | 8 (100) | 8 (100) |
| Weight, kg, median (range) | 67.30 (58.10 - 73.80) | 70.15 (66.55 - 76.45) | 64.70 (57.75 - 72.35) | 61.35 (57.10 - 68.50) | 72.50 (63.95 - 81.65) | 73.20 (56.25 - 75.90) |
| Height, cm, median (range) | 165.0 (157.5 - 174.0) | 172.0 (166.0 - 177.5) | 170.5 (163.0 - 174.0) | 168.0 (160.5 - 175.5) | 172.0 (167.5 - 174.5) | 165.0 (159.5 - 171.5) |
| BMI, kg/m², median (range) | 25.2 (23.5 - 26.1) | 24.9 (23.1 - 26.5) | 22.6 (21.3 - 24.3) | 22.7 (21.1 - 23.0) | 24.0 (22.6 - 27.6) | 24.9 (22.9 - 27.4) |

Table 2: Adverse Events

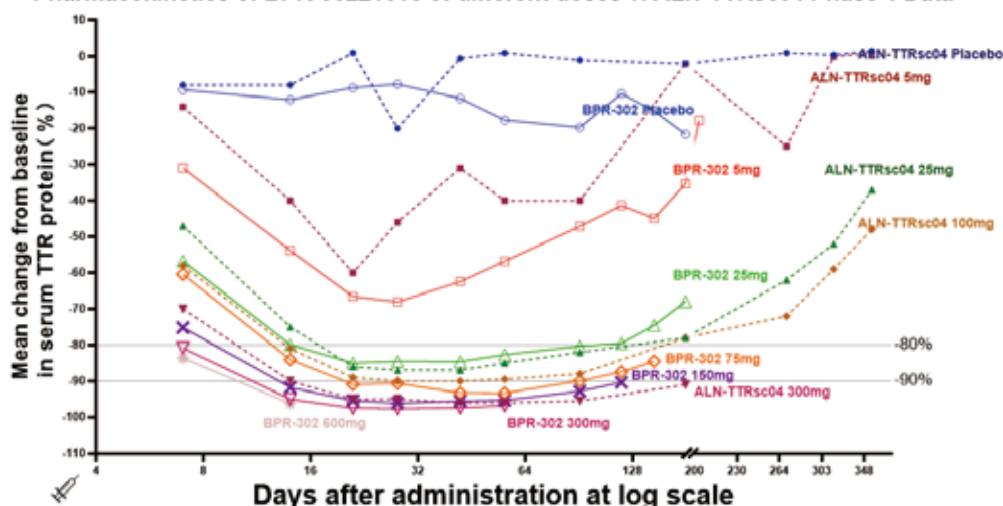
| | BPR-30221616 and Placebo | | | | | |
|-----------------------------------|--------------------------|------------|------------|-------------|-------------|-------------|
| | 5mg (N=8) | 25mg (N=8) | 75mg (N=8) | 150mg (N=8) | 300mg (N=8) | 600mg (N=8) |
| At least 1 AE | 5 (62.5) | 7 (87.5) | 7 (87.5) | 4 (50.0) | 6 (75.0) | 7 (87.5) |
| At least 1 SAE | 0 | 0 | 0 | 0 | 0 | 0 |
| At least 1 severe AE* | 0 | 0 | 1 (12.5)* | 0 | 1 (12.5)* | 1 (12.5)* |
| AE related to study drug | 3 (37.5) | 6 (75.0) | 6 (75.0) | 4 (50.0) | 6 (75.0) | 7 (87.5) |
| AEs lead to study discontinuation | 0 | 0 | 0 | 0 | 0 | 0 |

N is the number of subjects in the Safety Set. The denominator for percentages is the number of subjects in each treatment group of the Safety Set.
 *Severe AE is defined as severity level of AEs equal or greater than CTCAE grade 3.
 *Blood creatine phosphokinase increased, attributed to strenuous exercise and not related to study drug.
 *Gamma-glutamyltransferase increased, subject consumed alcohol 3 days before the visit.

Safety Summary

- All AEs were transient and not clinically significant.
- The majority of AEs across doses were mild.
- Five subjects had mild, transient injection-site reactions (ISRs).
- Elevations in liver-function tests (LFTs) were transient and mild; all ALT and AST values < 3 × ULN.
- No clinically significant changes in renal function or hematologic parameters, including platelets.
- No clinically significant changes in ECG, vital signs or physical exam.

Pharmacokinetics of BPR-30221616 of different doses v. ALN-TTRsc04 Phase 1 Data



- BPR-30221616 shows similar PD profile at 150 mg as ALN-TTRsc04 at 300mg
- BPR-30221616 150mg expects to translate to Q6M dosing and ~90% serum knockdown of TTR
- All forms of investment is welcome



- Headquarters: Guangzhou, P.R.China
- Dedicated to the discovery and development of antibody-based and drug delivery therapies for the treatment of oncology, metabolic and immune diseases
- Seeking for partnership for clinical development (licensing, co-development and/or collaboration) of self-nanoemulsifying lipid nanoparticle delivery platform.

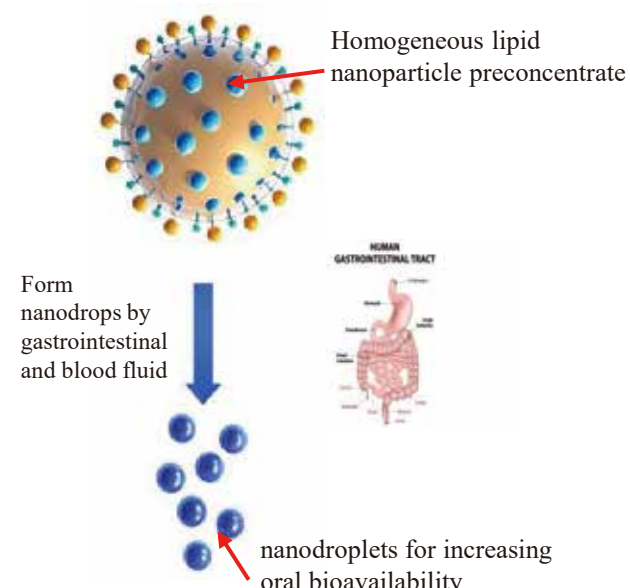
Self-emulsifying Lipid Nanoparticle (SELNP) Platform

- High efficient oral and parenteral delivery of small molecule, antibody, linear peptide, cyclic peptide and mRNA, and in vivo CAR-T delivery potential

- Overcomes low drug loading and parenteral only delivery of conventional liposome and cationic lipid nanoparticle
- Improves low solubility and oral bioavailability, poor cellular penetration and safety of drugs
- Multiple dosage forms: oral, parenteral and transdermal etc.

Key Features:

- Potent, targeted and regulatory safe P-glycoprotein inhibition
- Robust oral and parenteral bioavailability and therapeutic efficacy enhancement
- Reduced peripheral neuropathy, neutropenia and hematological toxicity
- Improved drug resistance



Lead Program – MJC-001

- **MJC-001: Oral Paclitaxel Softgel Capsule for Novel Metronomic Q3D high-frequency and low-dosing regimen**
- **Indications: Gastric, esophagus, NSCLC, breast, ovarian, liver cancer and fibrosarcoma**
- **Differentiation:**

- Overcomes short half-life, limited therapeutic efficacy, peripheral neuropathy and neutropenia of injectables
- Prolongs effective drug concentration in tumor cells
- Achieves “Chemotherapy at home” to improve patient quality of life and reduces medical care cost
- Improves P-glycoprotein inhibition and drug resistance
- Flexible and timely dose adjustment to reduce patient risks and adverse side effects
- No PS80 to reduce hemotological toxicity

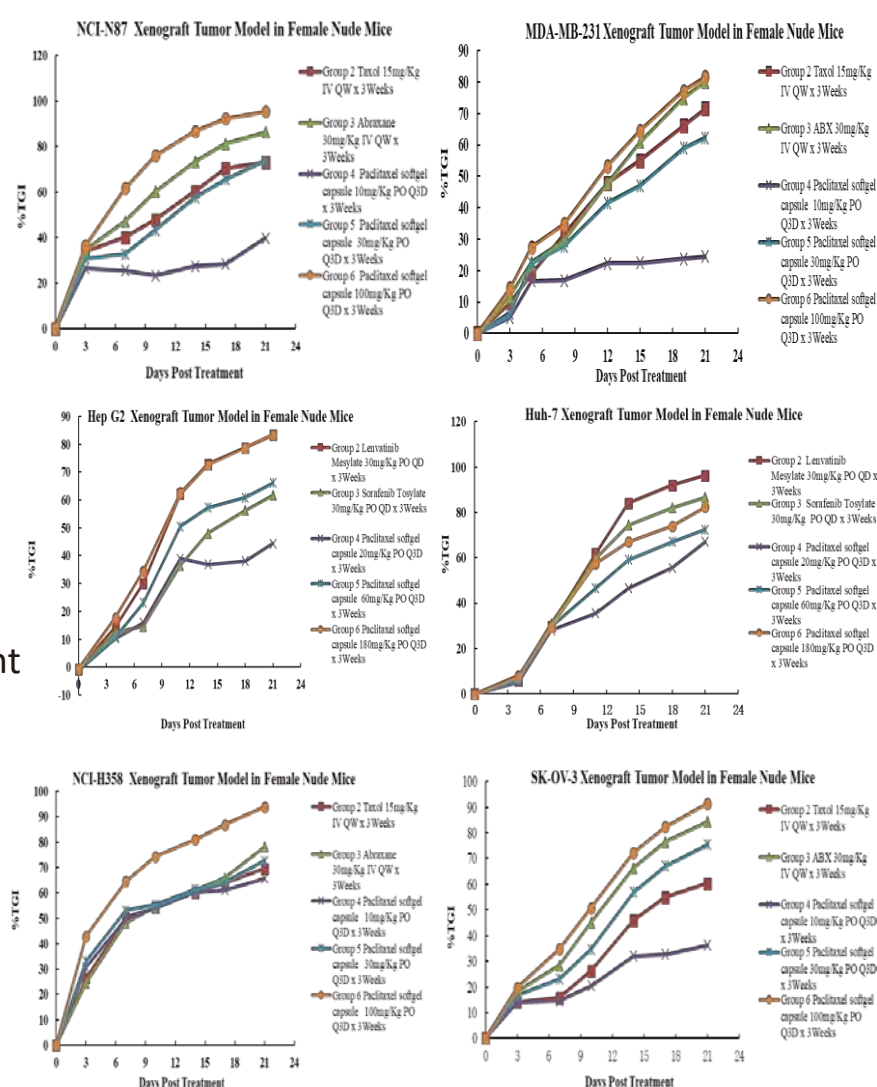
Preclinical Highlights:

- Therapeutic efficacy: Noninferior/superior to Abraxane and significant better than Taxol in multiple PDX mouse models
- Promising therapeutic effects in gastrointestinal tumors not approved in paclitaxel injections
- Good safety and low toxicity in GLP safety studies, significant lower neutropenia than injectables
- Good therapeutic results in tow Labrador Retrievers with advanced Metastatic NSCLC and fibrosarcoma

Planned Clinical Milestones:

- FIH (Phase 1a/1b) in Q1 2026 (multicenter)
- Combination options: with pembrolizumab, PD-1(L1)/VEGF, VEGFR2 antagonist or Lenvatinib
- Objective: Clinical proof-of-concept for Metronomic Q3D novel therapy in solid tumors (world's first)

MJC-001 demonstrates excellent therapeutic efficacy in multiple PDX mouse solid tumor models





- Headquarters: **Hangzhou, China**
- A **clinical stage biotech company** with strong industry recognition targeting unmet medical needs in **cancer and autoimmune diseases**.
- Focus and Innovation Strategy: **ADCs for oncology, and mAb/BsAbs for immunology**.
- Seeking partners to collaborate on pipeline product development via licensing, co-development, or other partnership models.

Innolake Platform

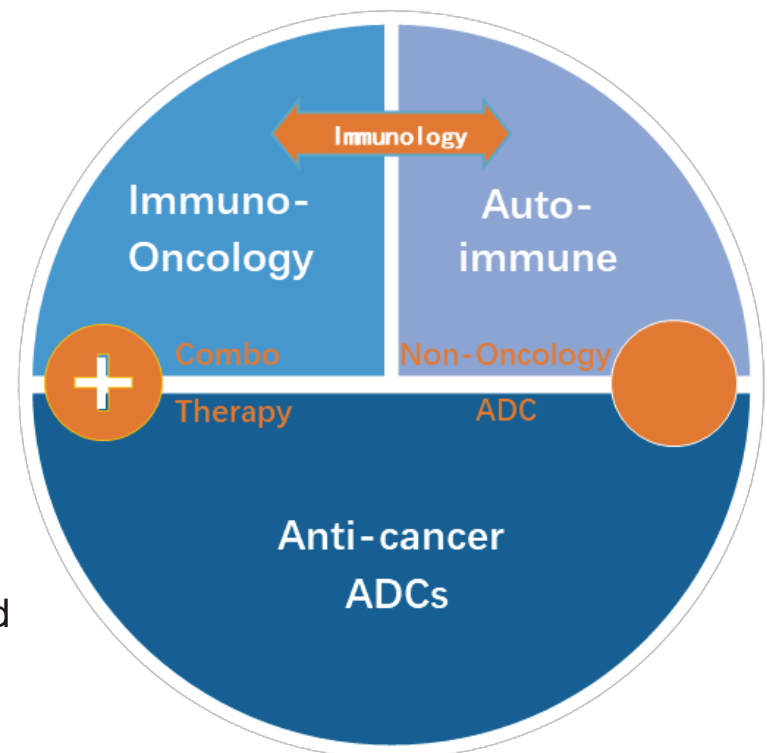
"3+3" R&D Strategy: Focusing on ADCs & Autoimmune mAb/BsAbs

3 Product Categories:











- ✓ **Anti-cancer ADCs + Immuno-oncology + Autoimmune**
- ✓ **Synergy between Immuno-oncology and Autoimmune:**
The flip-side of Immunology.
- ✓ **Synergy between Immuno-oncology and ADCs:**
Combination therapy.

3 Technology Platforms:

- ✓ **In-house ADC platform**, with proprietary linker-payload technology and unique biology-based product design/evaluation.
- ✓ **In-house mAb/BsAb platform**, with efficient bioassay and antibody engineering capabilities.
- ✓ **Small molecule platform thru strategic partnership**, with deep biological and translational understanding in immunology and epigenetics.



Innolake Pipeline

| Category | Program | TA | Target/Modality | Geography | Discovery | Preclinical | Phase I | Phase II | Phase III |
|-------------|----------|----------------------|----------------------------|---|-----------|-------------|---------|----------|-----------|
| ADC | ILB-3101 | Oncology | B7H3-Eribulin ADC |  | | | | | |
| | ILB-3103 | Oncology | DLL-3×B7H3 FIC BsADC |  | | | | | |
| | ILB-3203 | Oncology | PD-L1×VEGF FIC BsADC |  | | | | | |
| IO | ILB-2109 | Oncology | A2aR/Small molecule |  | | | | | |
| | ILB-2101 | Oncology | CD40 Agonist mAb |  | | | | | |
| | ILB-2201 | Oncology | PD-L1/VEGF BsAb |  | | | | | |
| Auto-immune | ILB-2107 | Auto-Immune Diseases | OX40 antagonist |  | | | | | |
| | ILB-2110 | Auto-Immune Diseases | PD-1 agonist mAb |  | | | | | |
| | ILB-2202 | Auto-Immune Diseases | PD-1 Agonist/TNFα FIC BsAb |  | | | | | |
| | ILB-2203 | Auto-Immune Diseases | PD-1 Agonist/OX40 FIC BsAb |  | | | | | |



RabPharma Co., Ltd.
Headquarters: China

RabPharma Co., Ltd. embraces a diverse range of collaboration models. These include **out-licensing, co-development, funding, mergers and acquisitions (M&A), equity investments, and joint clinical development or research programs** focused on novel bone and joint therapies.

- website: <https://www.rabpharma.com/>
- Zhongshan Laibo Ruichen Biomedicine Co., Ltd. (RabPharma Co., Ltd.)

An overview

- **RabPharma** is a clinical-stage company dedicated to the research and development of innovative drugs for the treatment of bone and joint disorders, addressing unmet medical needs for effective treatments in **osteonecrosis, fracture healing, osteoporosis, and inflammatory arthritis (including RA and OA)**.

★Our differences:

➤ Targeted Bone & Cartilage Therapy: A First-in-Class Approach

This innovative therapeutic approach utilizes double-targeting technology, particularly Bone-targeted Peptide Drug Conjugate, to warrant high drug concentration at the bones, thereby minimizing off-target effects.

➤ Unmet Medical Need: Non-Surgical treatments for osteonecrosis

Robust and Innovative Pipeline: Phase I and II Trials

Rab-001: On-going Phase II clinical trial for osteonecrosis; Phase III will start in late-2026.

Rab-001d: IND submission to CDE for Phase Ib clinical trial for the osteoarthritis, which will start in mid-2026.

- **Strong Global Patent Protection:** Strong IP portfolio across the US, China, Japan, and EU, ensuring long-term market potentials.

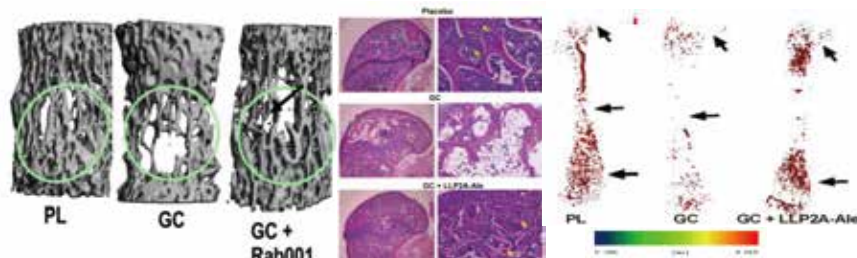


Leading drug candidate

- **Rab-001: First-in-class drug for osteonecrosis in humans**

Pre-clinical efficacy studies

Glucocorticoid-induced osteoporosis and osteonecrosis in mouse



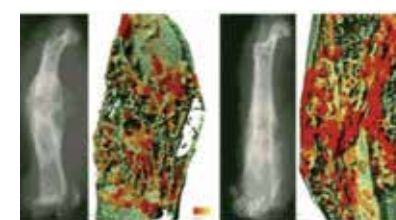
★Rab-001 prevents chronic glucocorticoids' suppression on bone formation, maintains angiogenesis at the necrotic sites, and reduces the incidence of osteonecrosis.

Primary osteoporosis following estrogen deficiency



★Rab-001 increases bone formation, improves bone microstructure, and bone strength.

Fracture healing



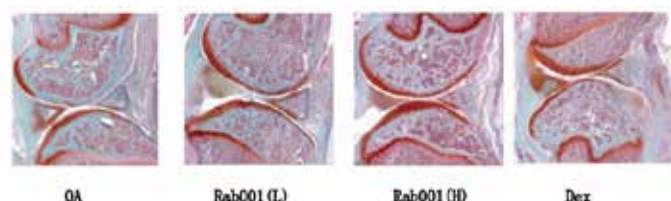
★Rab-001 expedites fracture healing.

Rab-001 has excellent safety and PK profiles in clinical studies (Phase I a & b Studies)

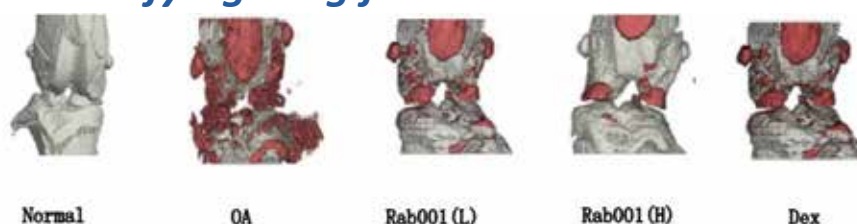
| Country | Subject | Safety | PK |
|---------------------|---------|---|---|
| USA (NCT03197623) | 59 | Rab-001 was well tolerated following multiple doses of intravenous administration in pateints on glucocorticoid with bone loss. The number of subjects with TEAEs or serious TEAEs was similar between the active and placebo treatment groups. | Peak plasma concentrations of Rab-001 increased with the increase in dose,with the absence of accumulation, and achievement of a steady state after 3 I.V. doses. |
| China (CTR20222771) | 16 | Similar safety profiles were observed in the healthy Chinese population, with similar number of subjects with TEAEs reported in either the active or placebo treatment groups. | Similar PK profiles were observed in Ph1 in China.The plasma concentration of the drug increased with increasing dosing,with the absence of accumulation following I.V. injections. |

Phase II Study (for non-traumatic osteonecrosis of femoral head) is on-going (CTR20244223)

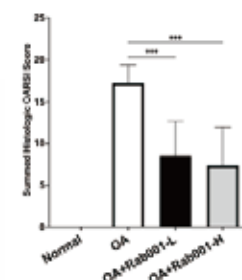
- **Rab-001d: Potential to be the disease-modifying drug for OA**



★Rab-001 intra-articular injection reduces cartilage degeneration and maintains joint integrity.



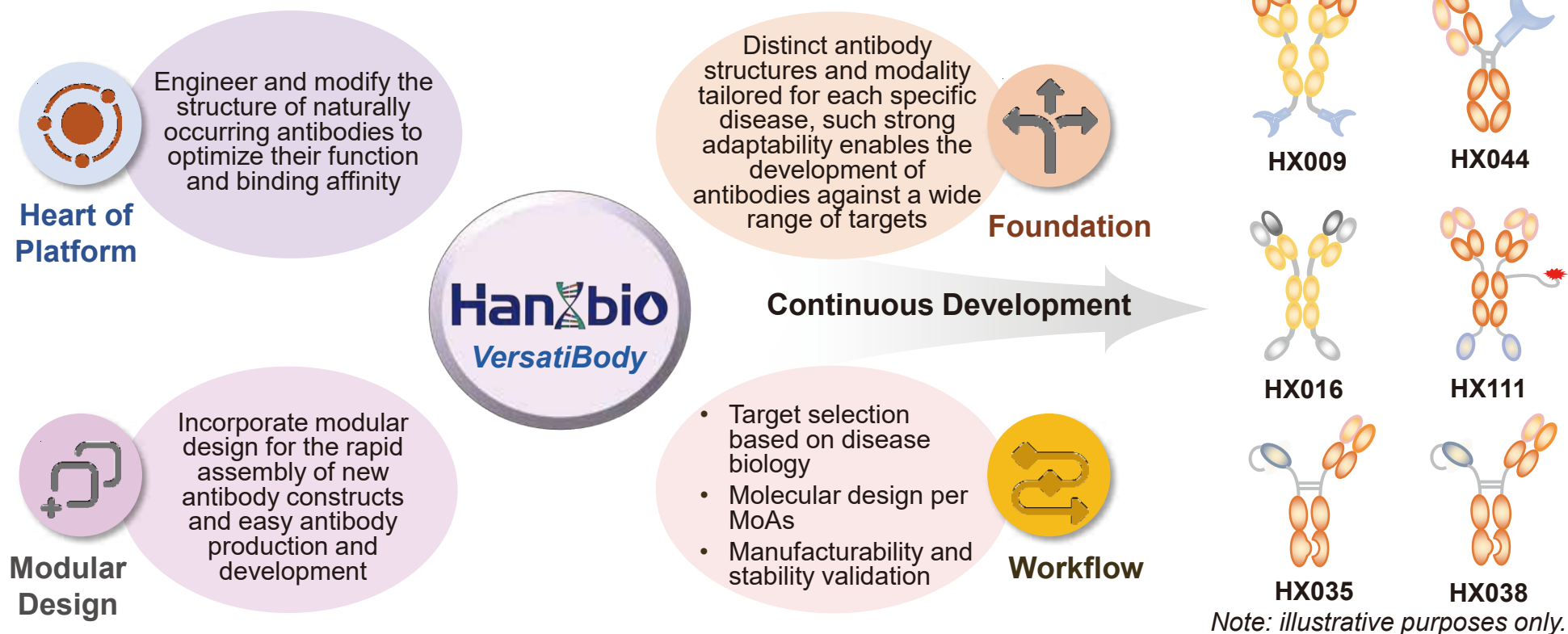
★Intra-articular injection of Rab-001 reduces subchondral trabecular bone loss caused by OA, reduces osteophyte formation in the knee joints, and improves the overall osteoarthritis score.





- Headquarters: Wuhan, China
- Committed to the discovery and development of antibody-based therapies (BsAb, ADC, BsAb-ADC, etc.) for the treatment of oncology and autoimmune diseases.
- Seeking for partnership for clinical development (licensing, co-development and/or collaboration) of multiple bispecific antibodies and ADCs in our pipeline.

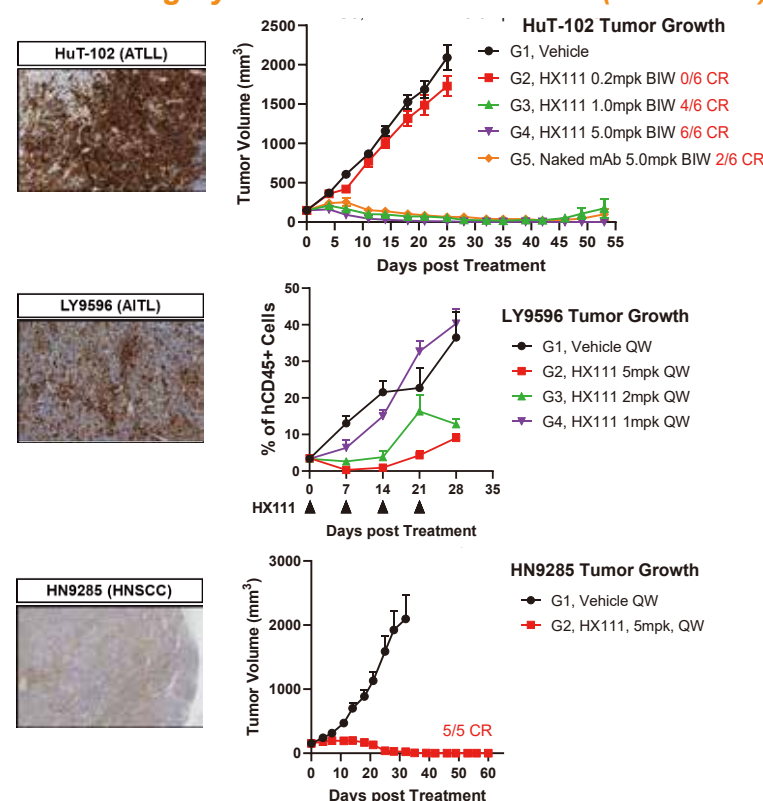
VersatiBody Platform



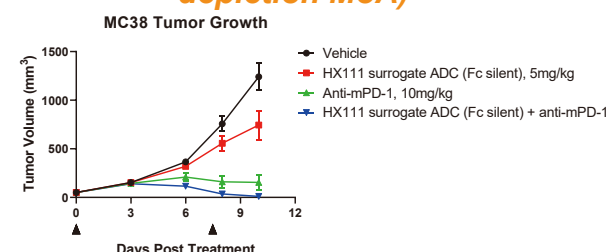
Lead ADC Program – HX111

- HX111: a “FIC” ADC targeting OX40
- **Indications:** selected types of T-cell or B-cell lymphoma as well as certain types of solid tumors
- **Differentiation:**
 - A “FIC” OX40-ADC with dual-modalities: 1). ADC-based robust and durable anti-tumor effects on selected types of lymphoma (most PTCL) and solid tumors; 2). Immunotherapy for pan-solid tumors featured with potent Treg-depleting activities.
- **Target Biology**
 - Over-expressed in selected lymphoma and leukemia (L/L), including nearly all ATLL, AITL, NK/T, Histiocytic lymphoma, and some EBV+ DLBCLs, etc.
 - Also expressed in significant portion of solid tumors, e.g. selected types of H&NSCC, breast, cervical cancer
 - Little expression among normal tissues, including normal lymphocytes, with potentially minimal “off-target” toxicities.
- **Pharmacology Highlights:**
 - Potent efficacy in multiple OX40+ mouse models.
 - Confirmed potent Treg-depletion activities, enabling its anti-tumor immunity.
 - Similar spectrum of toxicities as other MMAE based ADC in cyno-monkeys, enabling easy toxicity management in clinical trials.
- **Planned Clinical Milestones:**
 - IND approved
 - FIH (Phase 1a/1b) in early 1Q 2026 (multi-center)
 - Combination options with other immunotherapies

HX111 is highly active in OX40+ tumors (ADC MoA)



HX111 is also active in OX40- tumor model (Treg-depletion MoA)





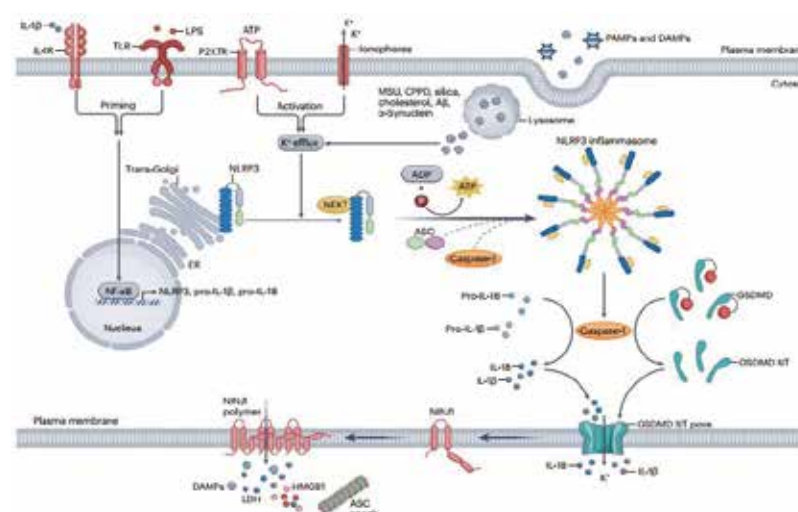
- Headquartered in Chengdu, China
- Committed to pioneering drug discovery through structural biology & artificial intelligence
- Seeking partnership for clinical development of ZL-65 (licensing, co-development and/or collaboration); global rights available
- Point of contact: Neil Wang – Chief of Staff & Director of BD, neilwang@zenitar.cn

NLRP3 as a Therapeutic Target

- **NLRP3 Inflammasome:** A clinically validated target in chronic inflammatory & neurodegenerative diseases.

- **Roles played by NLRP3 in CNS disorders & CAPS¹:**

- In **neuroinflammatory and neurodegenerative disorders**, pathogenic protein aggregates (e.g., amyloid- β and α -synuclein) can aberrantly activate CNS NLRP3 inflammasome signaling, amplifying neuroinflammation and contributing to neuronal injury.
- In **CAPS**, NLRP3 gain-of-function mutations drive excessive IL-1 β and systemic inflammation.
- An NLRP3 inhibitor could suppress downstream **IL-1 β signaling** by Inhibiting NLRP3 inflammasome.



Lead Program – ZL-65

- **An oral, highly potent and highly selective, brain-penetrant NLRP3 inflammasome inhibitor with Best-In-Class potential.**
- **Lead Indications:** NLRP3-driven **CAPS**, and neuroinflammatory disorders including **PD, MS, and ALS**.
- **MoA:** By binding to the NACHT domain of NLRP3, ZL-65 selectively inhibits NLRP3 inflammasome activation, thereby blocking ASC oligomerization and caspase-1 activation, and **suppressing the maturation and release of IL-1 β and IL-18**, ultimately modulating inflammatory responses.

- **Key Differentiations:**

- **Structurally differentiated, highly potent; brain-penetrant** with robust CNS exposure in both rats and dogs.
- **Highly selective for NLRP3**, with no activity on other inflammasome pathways (e.g., NLRC4, AIM2).
- **Safety margin of ~120 \times** , derived from the IC₉₀ and C_{max} at NOAEL, representing an approximately **10 \times wider therapeutic index than VTX3232**, a key CNS-penetrant NLRP3 comparator.

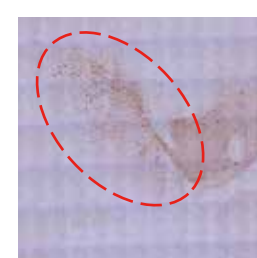
- **Preclinical Highlights:**

- **Broad dose-dependent efficacy with functional benefits** across multiple disease models (CAPS/PD/MS/ALS); **favorable PK and safety margin** in acute and chronic tox studies.
- **Best-in-class CNS exposure:** Robust CSF penetration across species with CSF/free plasma ratio ~0.5–1.0 in rat (1–8h) and ~1.2 in dog (2h).
- In various disease models, ZL-65 consistently showed **encouraging biomarker modulation (e.g., CRP/IL-6)**, good tolerability (minimal body-weight impact), and **histopathological improvements** (e.g., preserved TH in SNpc, improved myelin integrity).

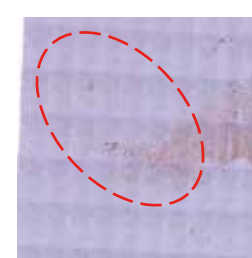
- **Planned Clinical Milestones:**

- GLP tox completed.
- FIH (Phase 1) in H1 2026 (multi-center in China and Australia).
- Objective: To assess safety and tolerability in health volunteers, characterize PK/PD, explore target-engagement / biomarkers, and support dose selection for subsequent patient studies.

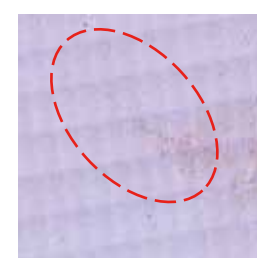
ZL-65 Shows Neuroprotective Effects in SNpc of 6-OHDA PD Rat Models



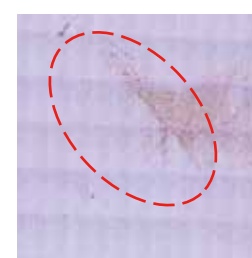
Sham (control)



Model



Levodopa
15 mg/kg



ZL-65
100 mg/kg

Levodopa as the reference drug: The first-line treatment for early-stage PD, particularly effective in alleviating tremors, rigidity, and cognitive decline.

¹ Vande, L. & Lamkanfi, M. Nat Rev Drug Discov 23, 43–66 (2024).



- Headquarters: Lunan Pharmaceutical Group, China
- Dedicated to the research and development of mAbs, ADCs, TCEs and fusion proteins for treatment of oncology, immune and chronic diseases.
- Seeking for partnership for clinical development (licensing, co-development and/or collaboration) of biologics.

Robust Biologics Pipeline

| Type | Project | Indication | Lead | Preclinical | IND | Phase1 | Phase2 | Phase3 | Launch |
|------------|---------------------------|---------------|------|-------------|-----|--------|--------|--------|------------------|
| Biosimilar | Pegfilgrastim | Oncology | | | | | | | |
| Biosimilar | Insulin Glargine | Diabetes | | | | | | | |
| Biosimilar | Rituximab | Oncology | | | | | | | |
| TCE | F182112 (BCMA-CD3) | Oncology, AID | | | | | | | FDA IND Approval |
| Fusion | F008 (rNIF-NHH)* | AIS | | | | | | | |
| Fusion | F012 (PEG-UHC)* | Gout, HUA | | | | | | | |
| TCE | LNF2007 (Claudin18.2-CD3) | Oncology | | | | | | | FDA IND Approval |
| mAb | LNF2102 (FGFR2b) | Oncology | | | | | | | |
| TCE | LNF1904 (CD19-CD3) | Oncology, AID | | | | | | | FDA IND Approval |
| Fusion | LNF2003 (GLP1/FGF21) | MASH | | | | | | | |
| Protein | LNF2401 (KLK1) | AIS | | | | | | | |
| ADC | LNF2105 (NECTIN4) | Oncology | | | | | | | |

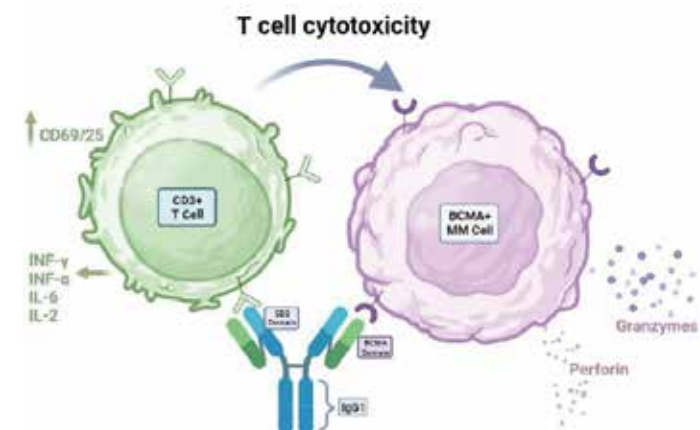
*.F008 is Recombinant Neutrophil Inhibitory Factor and Hirulog Hybrid
F012 is PEG-Uricase of Human-Canine

SAFETY AND EFFICACY OF F182112 IN PATIENTS WITH RRMM

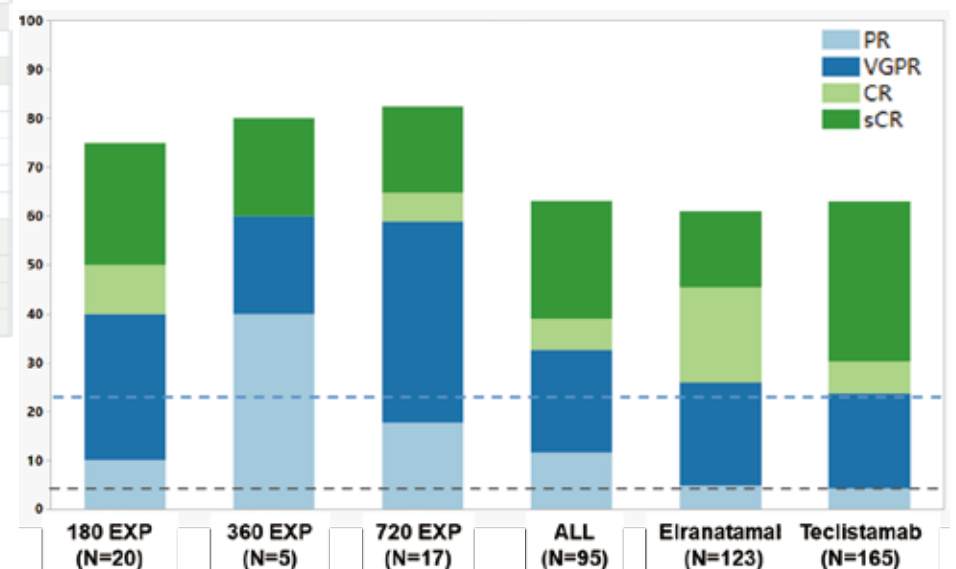
- **Product information:** A bispecific T-cell engaging antibody that binds to CD3 receptor expressed on the surface of T-cells and BCMA expressed on the surface of multiple myeloma cells.
- **Clinical trial information:** NCT04984434.
- **Clinical code name:** F182112-001
- **Manageable Safety Profile:**
 - The most common TRAEs were CRS. All CRS events were Grade 1 or 2.

| | F182112-001 | | MajestEC-1 (Tecvayli) | | MagnetisMM-3 (Elranatamab) | |
|-----------------------------|---------------------|-------------|-----------------------|------------|----------------------------|-----------|
| | All grade | ≥Grade 3 | All grade | ≥Grade 3 | All grade | ≥Grade 3 |
| | no. of patients (%) | | | | | |
| Any adverse event (TEAE) | 107 (99.70) | 100 (92.59) | 165 (100) | 156 (94.5) | 123 (100) | 87 (70.7) |
| Hematologic (≥20%) | | | | | | |
| Neutropenia | 75 (71.96) | 62 (57.94) | 117 (70.9) | 106 (64.2) | 60 (48.8) | 60 (48.8) |
| Anemia | 68 (63.55) | 26 (24.30) | 86 (52.1) | 61 (37.0) | 60 (48.8) | 46 (37.4) |
| Thrombocytopenia | 61 (57.01) | 24 (22.43) | 66 (40.0) | 35 (21.2) | 38 (30.9) | 29 (23.6) |
| Lymphopenia | 79 (73.83) | 72 (67.29) | 57 (34.5) | 54 (32.7) | 33 (26.8) | 31 (25.2) |
| Leukopenia | 71 (66.36) | 48 (44.86) | 29 (17.6) | 12 (7.3) | -- | -- |
| Cytokine release syndrome | 74 (69.16) | 0 | 119 (72.1) | 1 (0.6) | 71 (57.7) | 0 |
| Neurotoxic event | 1 (0.93) | 0 | 24 (14.5) | 1 (0.6) | 4 (3.4) | 0 |
| Infections and infestations | 81 (75.7) | 46 (42.99) | 126 (76.4) | 74 (44.8) | 86 (69.9) | 49 (39.8) |
| Tumor Lysis Syndrome | 1 (0.93) | | | | | |

- **Competitive Efficacy:**
 - The ORR of F182112 180μg/kg dose was 75%. 65% achieved at least a VGPR and were evaluable for MRD. The median PFS was 11 months.



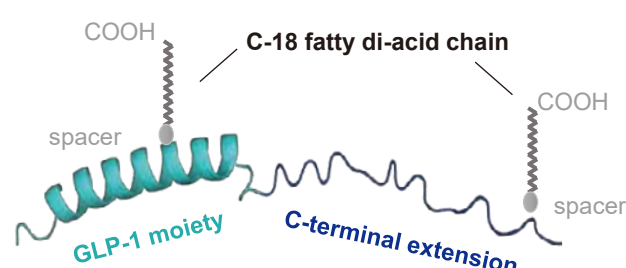
F182112 is 2+2 Symmetric Format Without ADCC and CDC activity



Zovaglutide: QL Biopharm's Novel **Once-a-Month GLP-1 RA** for Obesity & Other Metabolic Diseases



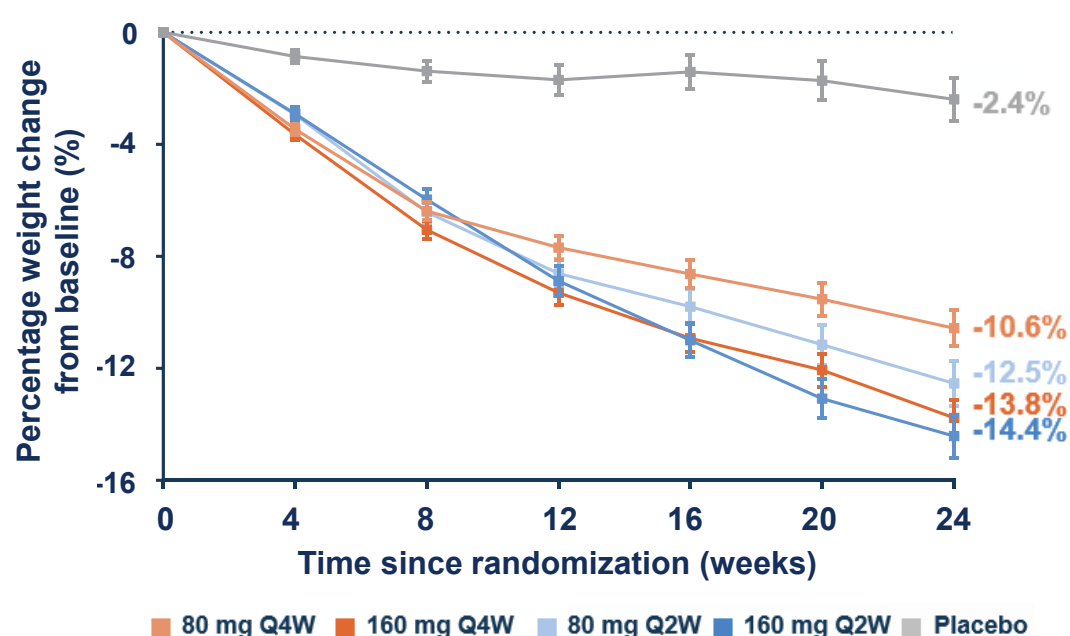
Zovaglutide: An ultra-long acting GLP-1 RA with PK to support monthly dosing



Enhanced GLP-1 receptor and human serum albumin (HSA) binding affinity with extended half-life in humans

| GLP-1 | GLP-1R binding K_D | HSA binding K_D | Human $T_{1/2}$ |
|--------------------|----------------------|-------------------------------|-----------------|
| semaglutide | 59 nM | 2.06 μ M | 7 days |
| zovaglutide | 49 nM | 0.18 μM | 12 days |

Zovaglutide promoted weight loss extent comparable to marketed GLP-1s (Phase 2 study)



Zovaglutide exhibits a safety profile comparable to other obesity therapeutics

| | Zovaglutide | | | | Semaglutide | Tirzepatide | MariTide |
|---|-------------------|--------------------|-------------------|--------------------|---------------|-------------------|------------------------------|
| | 80 mg Q4W N=75 | 160 mg Q4W N=76 | 80 mg Q2W N=50 | 160 mg Q2W N=51 | 2.4 mg STEP 1 | 15 mg SURMOUNT-CN | 420 mg Q4W with 12-W DE Ph 2 |
| AE leading to treatment discontinuation | 1.3% | 5.3% | 2.0% | 0 | 7% | 7% | 12% |
| GI-AE leading to discontinuation | 1.3% | 0 | 0 | 0 | 4.5% | 4.2% | 8% |
| GI disorders | 68.0% | 72.4% | 68.0% | 60.8% | 74.2% | NA | NA |
| Nausea | 38.7% | 50.0% | 44.0% | 37.3% | 44.2% | 32.4% | 73% |
| Diarrhea | 34.7% | 36.8% | 38.0% | 29.4% | 31.5% | 40.8% | 19% |
| Vomiting | 36.0% | 35.5% | 26.0% | 23.5% | 24.8% | 19.7% | 44% |
| Constipation | 5.3% | 5.3% | 10.0% | 2.0% | 23.4% | <10% | 21% |

QL seeks a partner to advance zovaglutide + additional QL programs worldwide

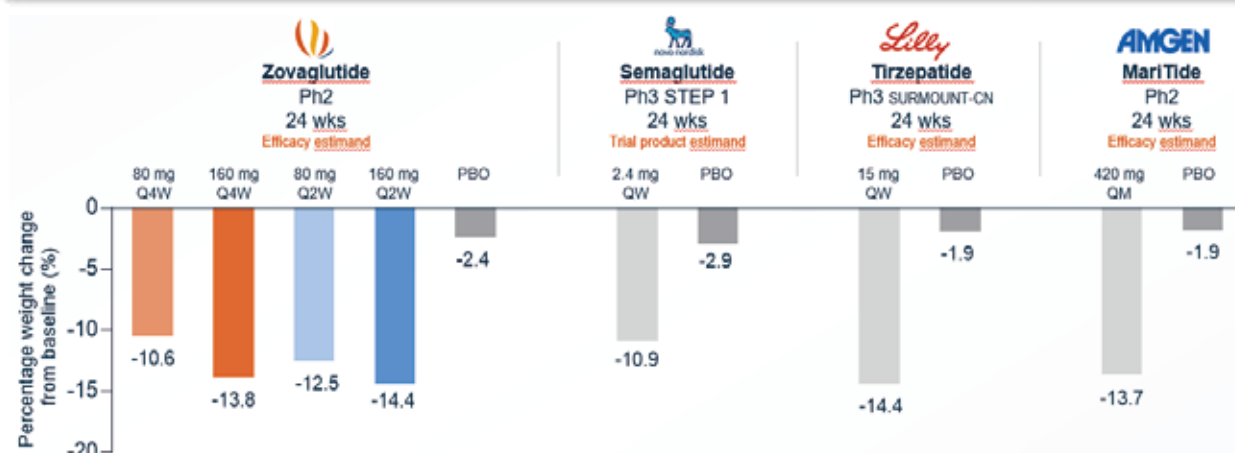
-> Zovaglutide (ZT002) is a first-in-class, monthly dosed GLP-1 with efficacy & tolerability comparable to marketed GLP-1 RAs, as shown in recent Phase 2 study in overweight & obese patients conducted by QL Biopharm (QL)

-> QL's *E. coli*-based manufacturing processes for GMP-compliant material are established & allow for low COGS & high scale efficiency

-> Timeline for critical regulatory & other development activities is fully mapped for evaluation in China

-> We are seeking motivated partners to co-develop & co-commercialize lead program ZT002 in US + Europe

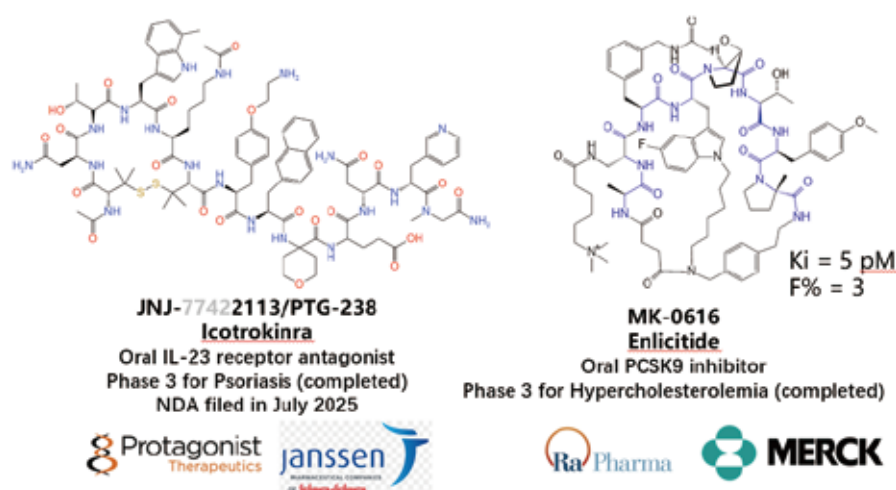
Zovaglutide demonstrates efficacy comparable to other GLP-1 RAs (& other obesity treatments under evaluation)



- Headquarters: Shenzhen, CHINA
- Committed to the discovery and development of Oral Cyclic Peptide PCSK9 Inhibitor
- Seeking for partnership for clinical development (licensing, co-development and/or collaboration) of Oral Cyclic Peptide PCSK9 Inhibitor SG-6001

Oral Cyclic Peptide

- **Oral Cyclic Peptides** are engineered, ring-shaped peptide molecules designed to combine the target specificity of biologics with the oral delivery of small pills. While achieving effective oral absorption remains a formidable engineering challenge, advances in chemistry and design are making them a rapidly emerging and exciting class of modern medicines.
- **JNJ-2113 (icotrokinra) and MK-0616** are two prominent and advanced examples of oral cyclic peptides currently in late-stage clinical development. They illustrate how this technology is being applied to different chronic diseases where patient-friendly oral dosing can be a significant advantage.

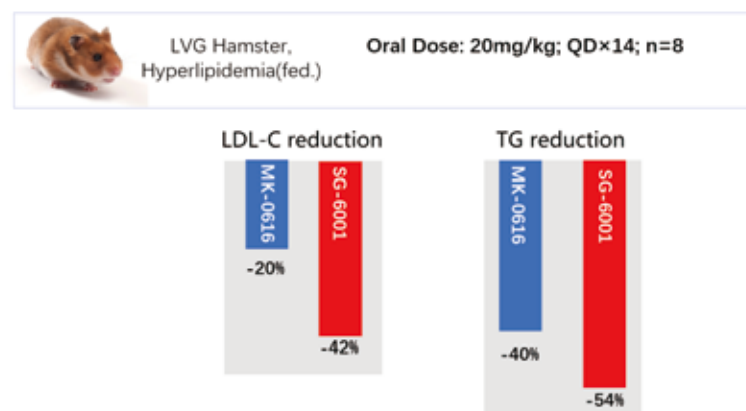


Lead Program – SG-6001

- **SG-6001: Oral Cyclic Peptide PCSK9 Inhibitor**
- **Indications:** Treatment of hypercholesterolemia in adults to lower low-density lipoprotein cholesterol (LDL-C)

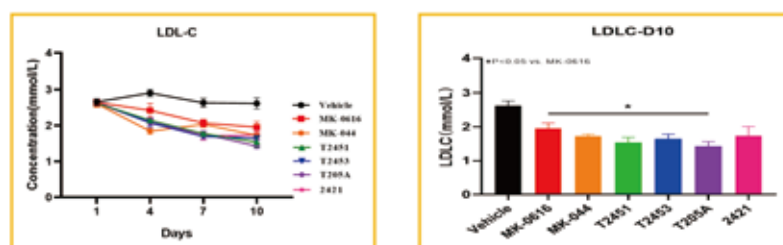
- **Key Points:**
 - Picomolar potency
 - Orally bioavailable in rat, dog and monkey
 - High efficacy in hamster and monkey via oral dosing
 - Preclinical studies on going
 - IND planned for 2026

SG6001: Oral Efficacy Study in Hyperlipidemia LVG Hamster



Efficacy study in mice (intraperitoneal injection)

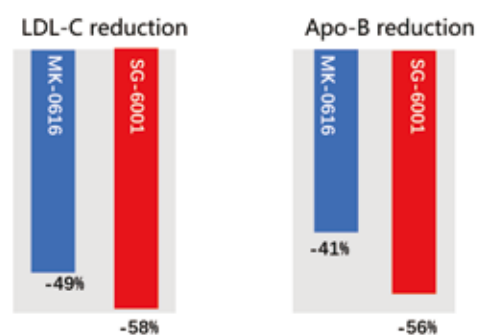
Dosage: 1mg/kg; 5 mice per group are intraperitoneally injected daily for 10 consecutive days



SG6001: Oral Efficacy Study in Hyperlipidemia in Rhesus macaque



Oral Dose: 1mg/kg; QD×28; n=3





- Headquarters: Chongqing, China
- A platform biotech, committed to providing high quality recombinant biological drugs with better efficacy and more affordability to patients in need
- Seeking for partnership for clinical development (licensing, co-development and/or collaboration) of PN20 (PJ004).

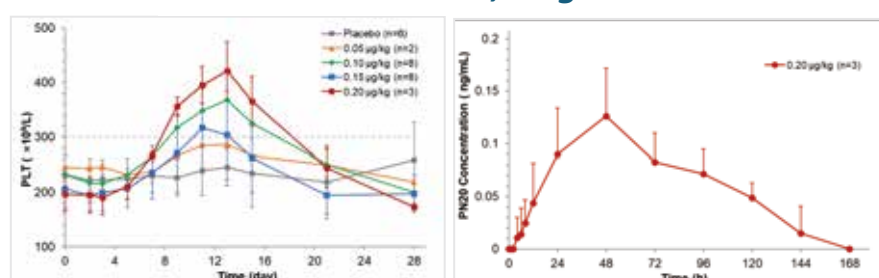
Tandem Expression of PEPTides (TE-PEP®) Platform

- **Design of Peptide Sequence** to support tandem expression of 4~8 target peptides in one expression vector, then cleaved by specific enzymes during harvest;
- **High-level Consistent Manufacturing of Peptide API through Tandem Expression**, featuring:
 - High expression efficiency
 - High purity
 - Low production cost
 - Proprietary IP
- **Mature Drug Delivery** (long-acting, both oral & injectable):
 - Long-acting (fatty-acid chain, PEGylation)
 - Suitable for both oral & injectables

Lead Program – PN20

- **PN20**: PEGylated thrombopoietin for injection, a next-generation recombinant thrombopoietin receptor agonist (TPO-RA), featuring long-acting & stable elevated platelet count with high safety profile
- **Indications**:
 - Chemotherapy-induced thrombocytopenia (CIT), once per chemo cycle (21 days)
 - Thrombocytopenia in chronic liver disease patients (CLDT), one injection pre invasive surgery
 - Immune thrombocytopenia (ITP), once weekly
- **PCT Patent** submitted (PCT/CN2025/130866)

Phase Ia PLT count, single dose



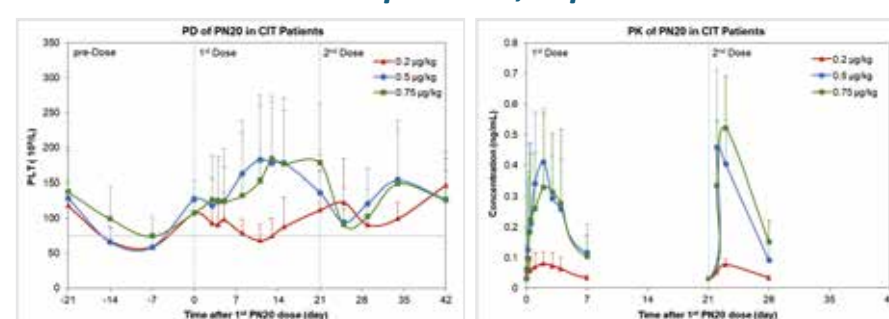
Phase I Clinical Highlights

- **Good safety profile**: No PN20-related adverse events, bleeding event or venous thromboembolism observed.
- **ADA**: No anti-NPC (peptide part) antibody observed. Only 2/21 developed extremely low titer non-neutralizing anti-PEG antibodies with no clinical significance.
- **PD & PK**: Fully compatible with 21-day chemotherapy, demonstrating a very promising treatment option of one injection per chemo cycle.

Planned Clinical Milestones

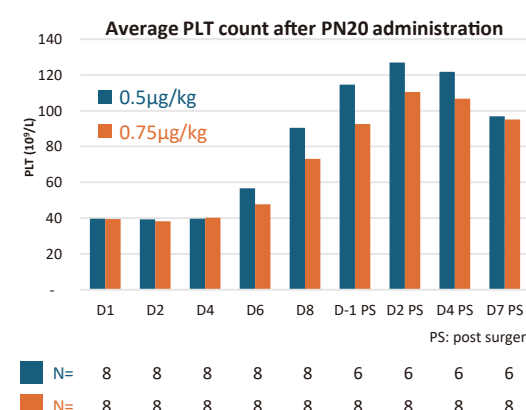
- CIT: Phase II ongoing (multicenter), enrollment completion in Q3 2026; Phase III in Q4 2026 (multicenter).
- CIT: IND filing with the US FDA ongoing.

Phase Ib in CIT patients, repeated doses



| Dosage (µg/kg) | Cycle 1 | | | Cycle 2 | | |
|----------------|--------------------------------|--------------------------------|---------------------------------|--------------------------------|--------------------------------|---------------------------------|
| | Any PLT <75×10 ⁹ /L | D21-PLT ≥75×10 ⁹ /L | D21-PLT ≥100×10 ⁹ /L | Any PLT <75×10 ⁹ /L | D21-PLT ≥75×10 ⁹ /L | D21-PLT ≥100×10 ⁹ /L |
| 0.2 | 75% (6/8) | 63% (5/8) | 63% (5/8) | 75% (3/4) | 100% (4/4) | 75% (3/4) |
| 0.5 | 25% (2/8) | 100% (8/8) | 88% (7/8) | 33% (2/6) | 83% (5/6) | 50% (3/6) |
| 0.75 | 50% (4/8) | 100% (6/6) | 83% (5/6) | 25% (1/4) | 100% (4/4) | 75% (3/4) |

Phase Ib in CLDT patients, single dose



Efficacy of PN20 in raising PLT to ≥50×10⁹/L:

- **0.5 µg/kg**: 75% (6/8) of patients responded within 3–7 days.
- **0.75 µg/kg**: 100% (8/8) of patients responded within 5–7 days.

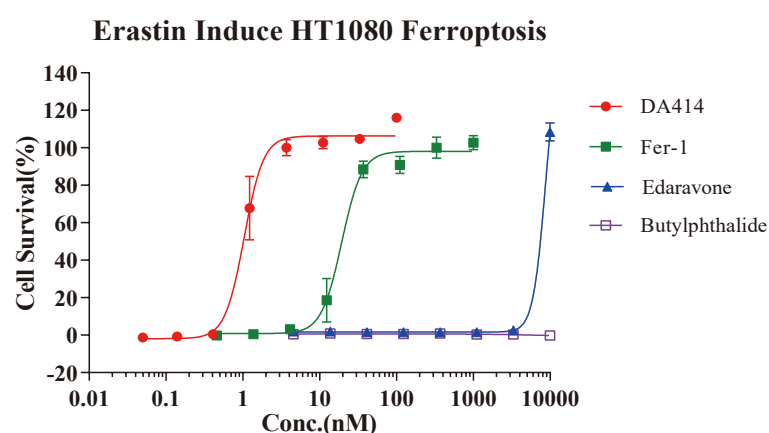


- Headquarters: Chengdu, China
- Comprehensive pharmaceutical group, focusing on the research and development, production, and sales of drugs.
- Seeking for partnership for clinical development (licensing, co-development and/or collaboration) .

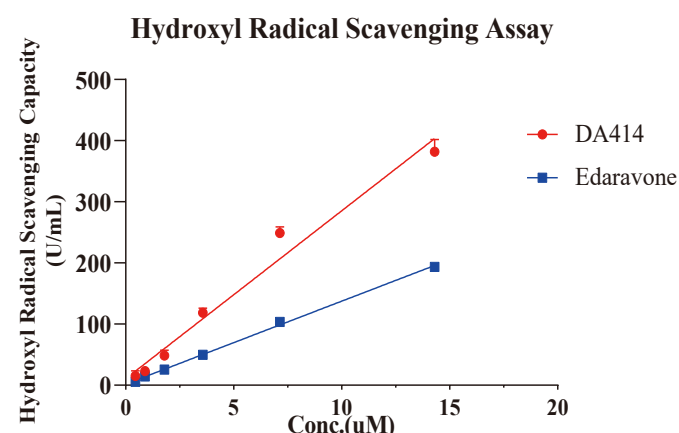
DA414: A Novel Neuroprotective Agent For Ischemic Stroke Treatment

First-in-Class, Phase I Completed, Initiation for Phase II is underway

MOA: Ferroptosis Inhibitor and Free Radical Scavenger



DA414 demonstrates significant efficacy in inhibiting ferroptosis, triggered by both different ferroptosis inducers and iron overload



DA414 exhibits potent free radical scavenging activity, effectively scavenging DPPH radicals, ABTS radicals, hydroxyl radicals, and reactive oxygen species (ROS)

Highlights

◆ Tremendous Market Demand and Potential

Stroke Characterized with high incidence, high disability rate, high mortality rate, high recurrence rate, and high treatment costs

◆ Potential to surpass currently mainstream therapies

Non-clinical studies have shown that DA414 demonstrates superior efficacy compared to Edaravone Injection, Edaravone and Dexbomeol Injection, Butylphthalide Injection, and oral Butylphthalide

◆ Favorable oral PK characteristics

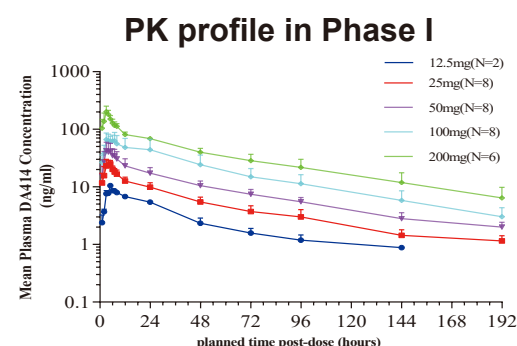
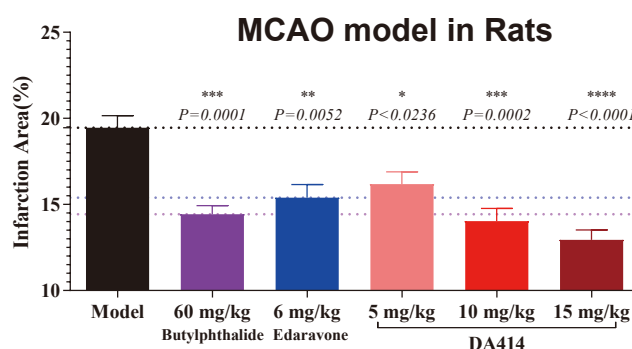
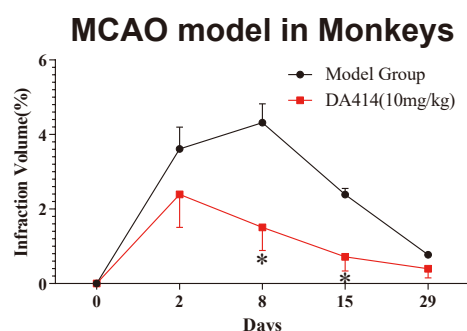
Allowing for once-daily (QD) dosing. No food effect. Loading dose regimen enables rapid onset of action, effectively meeting the therapeutic needs of both acute and recovery phases

◆ Favorable safety and tolerability

No discontinuation due to AEs and no SAEs reported in SAD and MAD study

◆ Strong Global IP Protection

Comprehensive global patent strategy in place



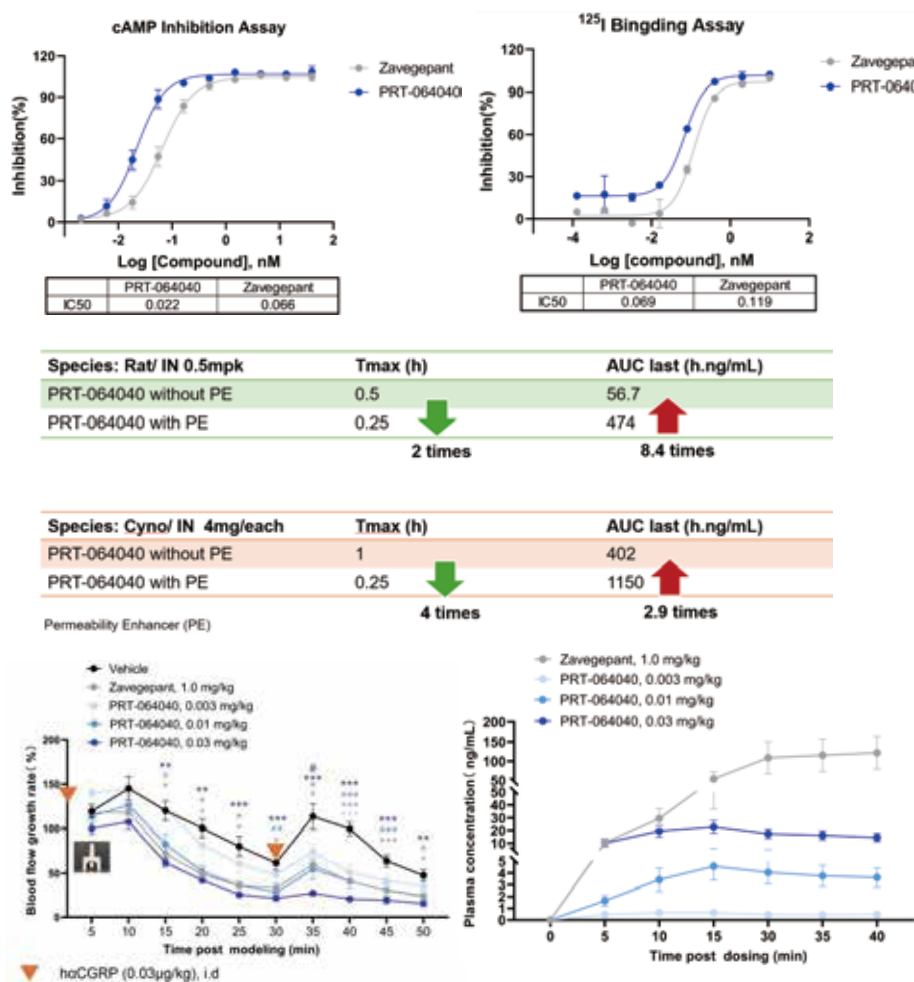


PRT-064040: A nasal spray of novel, potent and selective calcitonin gene-related peptide receptor antagonist for migraine treatment

Migraine Treatment Landscape

- Migraine is a prevalent neurological disorder, which is characterized by recurrent, moderate to severe unilateral pulsatile headaches.
- Calcitonin gene-related peptide (CGRP) and its receptor are clinical approved targets for pain alleviation.
- Faster pain relief remains an unmet need for migraine patients.
- ZAVZPRET, the first and only CGRP receptor antagonist nasal spray with frequently adverse events- **Dysgeusia** [21% ZAVZPRET vs 5% placebo]

Outstanding Profile of PRT-064040



- PRT-064040 exhibited better inhibitory activity (blocking CGRP-CGRP receptor activation) and higher binding affinity with CGRP receptor than Zavegepant (ZAZPRET).
- The permeability enhancer in PRT-064040 formulation promoted a higher systemic exposure (AUC) and faster absorption (Tmax).
- PRT-064040 displayed more sustainable efficacy than Zavegepant in a Cynomolgus hCGRP-induced dermal blood model, even at lower dose (lower plasma exposure).

| Drug | Clinic Study | Dose | Common Adverse Drug Reaction | |
|-------------|---------------------|-------------|------------------------------|------------------|
| | | | Dysgeusia | Nasal discomfort |
| PRT-064040* | Health subjects SAD | Dose 1 | 0 | 0 |
| | | Dose 2 | 0 | 0 |
| | | Dose 3 | 0 | 0 |
| | | Dose 4 | 0 | 0 |
| | | Dose 5 | 0 | 0 |
| | | Dose 6 | 0 | 0 |
| Zavegepant | Health subjects MAD | Dose 4/7d | 0 | 0 |
| | | Dose 5/7d | 0 | 0 |
| | Health subjects SAD | 0.1~40 mg | 2.8% | / |
| | Health subjects SAD | 5~40 mg/14d | 66.1% | 10.7% |
| | BHV3500-301 Study | 10 mg | 21% | 4% |
| | | 5 mg | 13.9% | 1.3% |
| | | 10 mg | 13.5% | 1.3% |
| | | 20 mg | 16.1% | 5.2% |
| | BHV3500-202 Study | 10 mg/52wks | 39.1% | 10.3% |

*: Derived from unblinded data.

- PRT-064040 was well-tolerated and no dysgeusia reported in a completed Phase I study [NCT07016516]. The safety and PK support clinical advancement [CTR20254825]



Lesheng Pharmaceutical

- Lesheng Pharmaceutical. Headquartered in Shanghai, China, R&D Center in Suzhou, China and Boston, USA.
- Dedicated to the R&D of innovative drugs. Focusing on anti-gout drugs and siRNA drugs.
- Seeking for partnership for clinical development (Licensing the rights and interests of HY-0902, a Class I anti-gout drug outside great China region ; co-development and/or collaboration of HY-1012 and HY-1013).

Platform for siRNA Drugs

- Advanced model for screening high effective siRNAs. combined AI with novel screening model for finding effective siRNAs targeting specific diseases.
- Advanced chemical modification of siRNA molecules. Modifying siRNAs using specific groups, Increasing the stability, decreasing toxicity of siRNAs.
- An innovative delivery system. a peptide-based extrahepatic delivery system; Targeted delivery of siRNAs to pancreatic, renal tissue by linking targeted peptides etc with siRNA molecules.

Leading Products

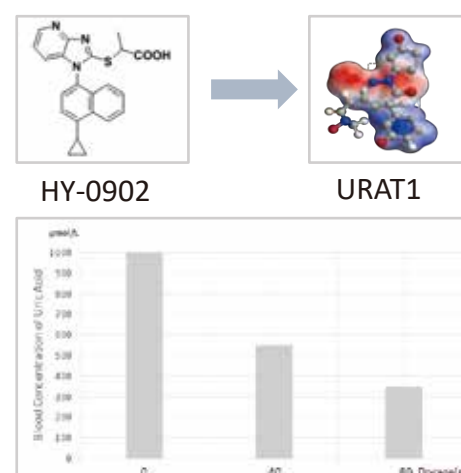
◆ HY-0902

Indications: gout and hyperuricemia. Class I drug, independently developed by Lesheng Pharm.

Differentiation: Targeting URAT1 , a specific uric acid excretion protein, specifically and effectively. Compared with the drugs developed worldwide, high efficacy and low toxicity.

Phase II clinical trial highlights. Higher safety and efficacy; Blood uric acid concentration less than 360 $\mu\text{mol/L}$ in the high-dose group; Almost no side effect for kidney.

Phase III clinical trial will be performed in 2026 in China, and phase I clinical trial will be also performed in USA.

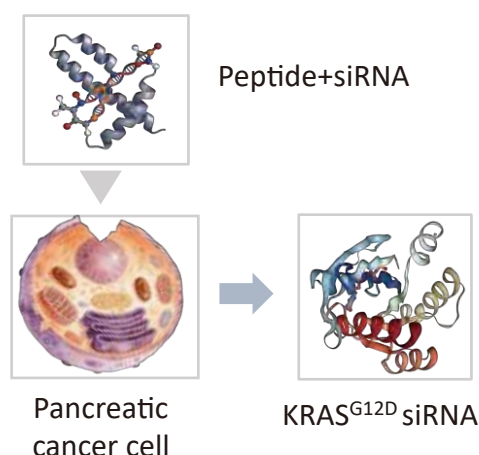


◆ HY-1012

Indications: pancreatic cancer, lung cancer.

Differentiation: Targeting the mutated KRAS gene (KRAS^{G12D}) by targeting the KRAS^{G12D} using siRNA. Compared with the drug developed worldwide, 20% higher inhibitory rate on KRAS^{G12D} expression. A novel strategy for the delivery of KRAS^{G12D} siRNA to the pancreatic tissue by linking targeted peptide and KRAS^{G12D} siRNA.

Preclinical highlights: Potent efficacy to inhibit the KRAS^{G12D} mRNA expression in pancreatic cancer cells, No obvious toxicity in mouse (up to).

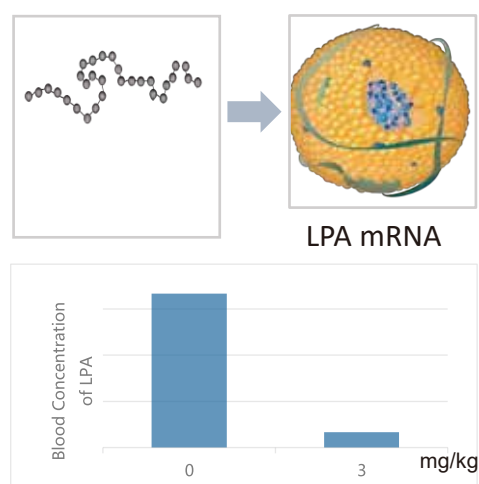


◆ HY-1013

Indications: Atherosclerotic cardiovascular disease, HLD (hyperlipidemia).

Differentiation: Targeting LPA mRNA using siRNA specifically. Decreasing the blood concentration of LPA effectively with only one time injection in six months Compared with the drug developed worldwide, HY-1013 displays higher efficacy; 15% higher inhibitory rate than that developed by others.

Preclinical highlights: Potent efficacy to decrease the blood concentration of LPA in mouse and monkey. No obvious toxicity in monkeys (3 mg/kg of HY-1013). One time every week for two weeks, decreasing 90% of the blood concentration of LPA.

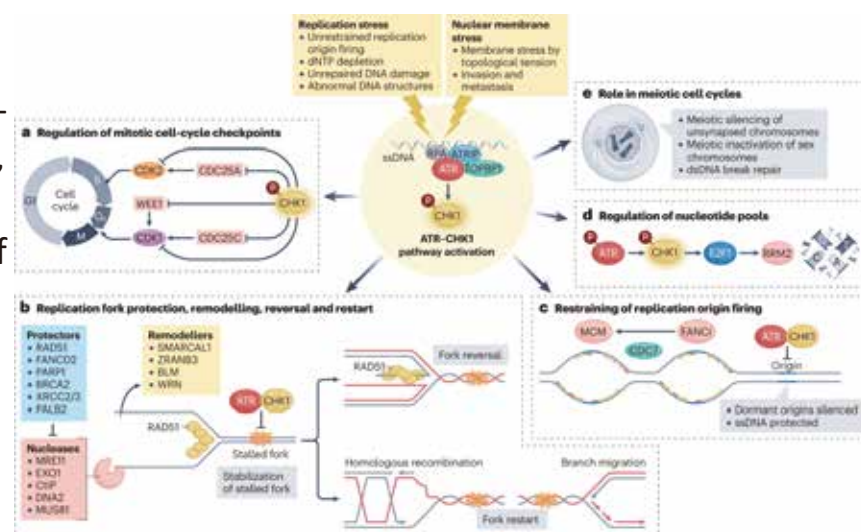




- Headquarters: Nanjing, China
- Committed to the discovery and development of synthetic lethality for the treatment of oncology
- Seeking for partnership for clinical development (licensing, co-development and/or collaboration) of ATRi.

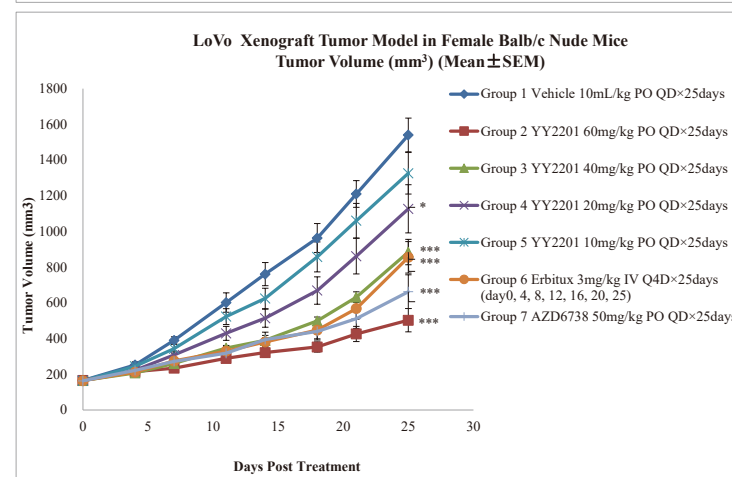
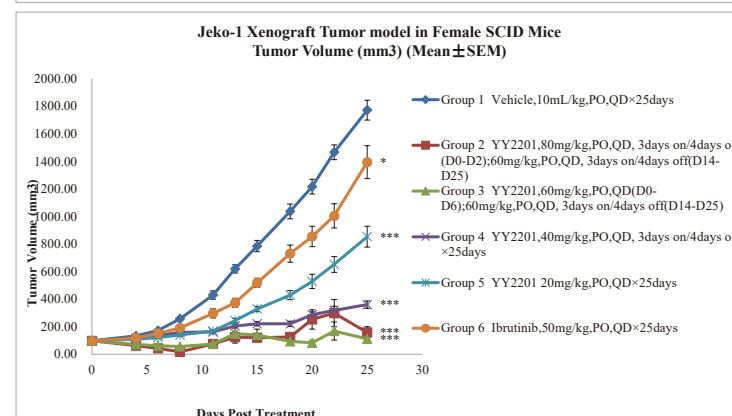
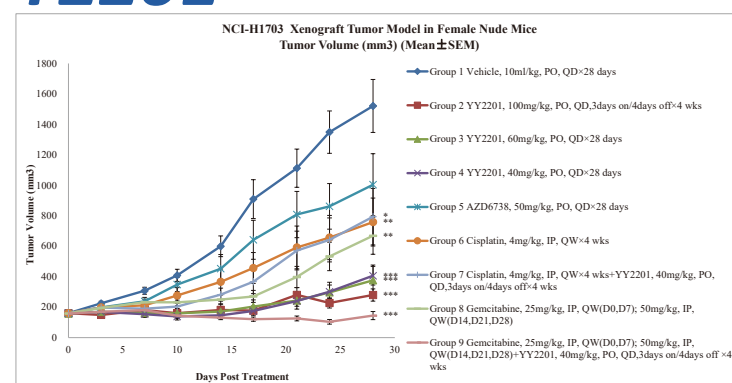
Synthetic lethality

- **Synthetic lethality:** a genetic phenomenon where the combined disruption of two non-lethal mutations leads to cell death, but each mutation alone is viable.
- **Key Features:**
 - Dual non-lethal gene disruption: Two independent, non-lethal genetic alterations or mutations, when combined, result in cell death
 - Genetic redundancy exploitation: Relies on the failure of compensatory pathways in cells with pre-existing mutations (e.g., BRCA-deficient tumor cells).
 - Competitive ADCC (antibody-dependent cell-mediated cytotoxicity)
 - Selective targeting: Specifically kills cells with specific genetic defects while sparing normal cells with intact pathways.



Lead Program - YY2201

- **YY2201: ATRi**
- **Indications:** advanced solid tumor
- **Differentiation:**
 - YY2201 shows better ATR Enzyme inhibition activity than AZD6738 and BAY1895344.
 - YY2201 showed better anti-cancer activities than AZD6738 in vitro in Prostate cancer, Breast cancer, and Ovarian cancer cell lines.
- **Preclinical Highlights:**
 - YY2201 showed better anti-cancer activity and lower in vivo toxicity than AZD6738 in NSCLC CDX model.
 - YY2201 showed lower toxicity than AZD6738 in Colorectal cancer CDX model as it had little effect on the weight of mice.
 - YY2201 demonstrates a suitable therapeutic window compared to other drugs targeting the same pathway.
 - YY2201 has a half-life of approximately 4 hours, which is longer than that of other drugs in the same class targeting the same therapeutic site.
- **Planned Clinical Milestones:**
 - YY2201 has received regulatory approvals for clinical trials from both NMPA(CXHL2400631) and FDA(IND173030).
 - The Phase I clinical trial in China commenced in Q3 2025
 - Objective: Evaluate the safety and preliminary efficacy of YY2201 in patients with solid tumors and identify responsive tumor types.



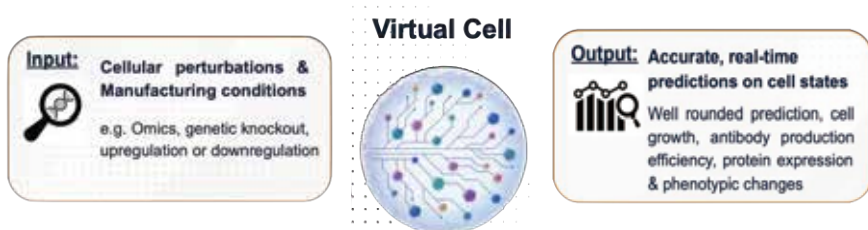
ChemT Biotech Revolutionize Biomanufacture – CelMo™: A virtual cell model for cellular control with tunable precision

Introduction

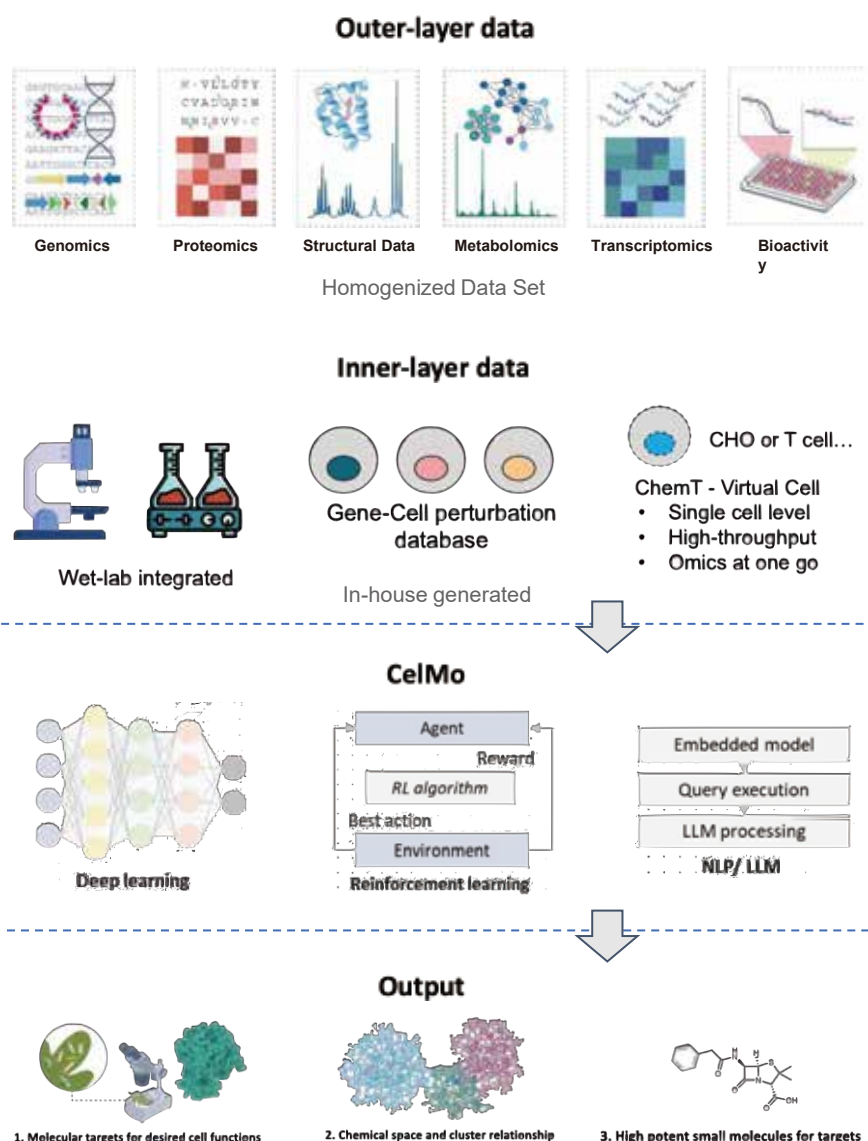
In Biomanufacturing, increasing productivity without triggering stress, metabolic imbalance, or quality drift remains a major challenge. **CelMo™**, our AI-driven Virtual Cell platform, addresses this by integrating multi-omics data with large-scale literature mining to identify high-value, druggable, and novel control points in cell biology.

CelMo™ models how cells respond to different nutrients, stresses, and perturbations, revealing levers that improve viable cell density, productivity, and metabolic stability. This enables gene target discovery and molecule design to act on the targets that deliver higher, more consistent, and scalable performance across manufacturing systems — keeping cells in an optimized productive state without changing production by a new cell line, cell line gene editing, or cell adaptation.

Method



CelMo: A Virtual Cell Platform For Target discovery and “Drug for Cell” generation



Case 1: CelMo identifies Gene targets to enhance CHO cells for antibody production

• Gene targets simulation outcome and prediction summary by CelMo

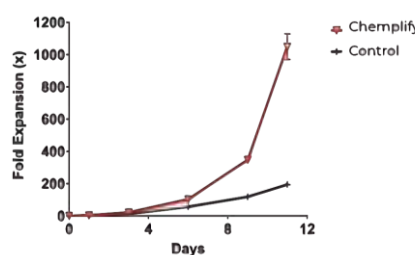
| Knockout Type | Gene(s) Knocked Out | Predicted Effect | Likelihood Score | Shortlisted |
|---------------|---------------------|----------------------------------|------------------|-------------|
| Single Gene | Gene 1 | ↑ BCAA, ↑ mTORC1, ↑ productivity | 0.72 | Yes |
| Single Gene | Gene 2 | ↑ BCAA, ↓ redox efficiency | 0.55 | No |
| Single Gene | | ↓ BCAA import, ↓ mTORC1 | 0.43 | No |
| Double Gene | Gene 1 + Gene 2 | ↑ BCAA retention, ↑ productivity | 0.84 | Yes |
| Double Gene | | ↑ cytosolic BCAA, mixed effects | 0.68 | No |

• Wet lab validation on the gene target identified by CelMo (Gene 1 KO)

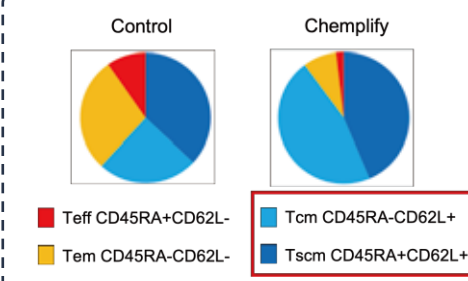


Case 2: Chemplify™ designed by CelMo enhances T cell production, quality, and efficacy

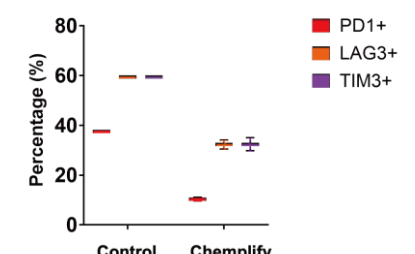
T cell expansion



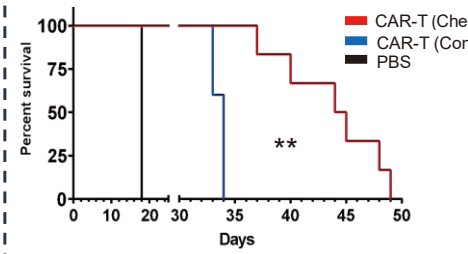
Memory phenotype



Exhaustion Markers

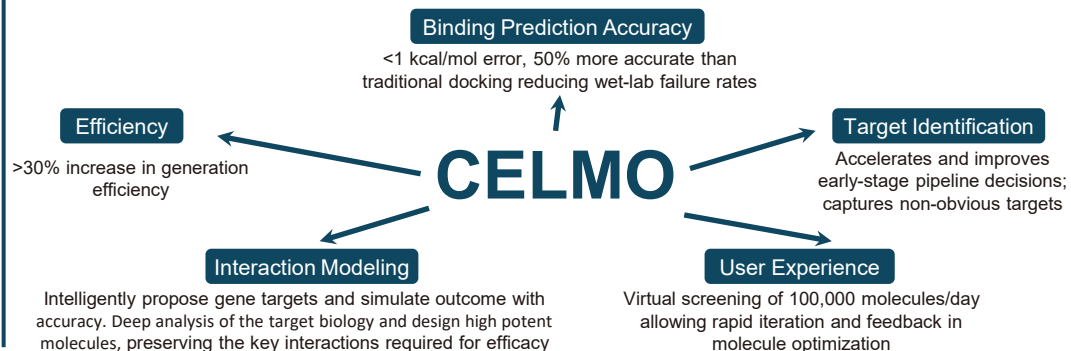


In vivo efficacy



Chemplify™ is a small molecule product designed by CelMo, with novel mechanism that addressing T cell senescence, a universal challenge with limited solutions. Chemplify™ has been widely adopted by leading T cell companies, CDMOs, and hospitals.

Summary





CHENGDU HUITAI
BIOMEDICINE CO., LTD.

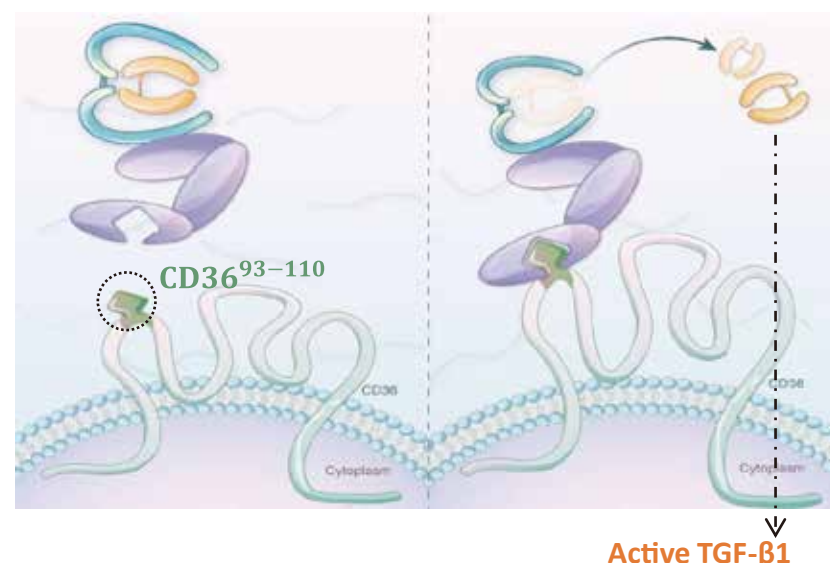
- Headquarter: Chengdu, China
- A clinical-stage biotech company focused on developing pan anti-fibrotic peptides through novel TGF- β technology
- Seeking for investment and partnership for clinical development (licensing, co-development and/or collaboration) of inhaled peptide HTPEP-001.

CD36 Derivative Peptide Platform

- **CD36[93-110] motif:** is responsible for TSP-1 binding thus releasing activated TGF- β 1

- **Mechanism:**

- CD36[93-110] is a sequence motif of human CD36, a functional domain with the specificity at the domain scale.
- CD36[93-110] is responsible for CD36 and L-TGF- β -TSP-1 binding, and this interaction directly releases the Active TGF- β 1.
- Through modulating Active TGF- β 1, CD36⁹³⁻¹¹⁰ motif is a promising candidate for treating Fibrotic Diseases, Inflammatory and Cancers.



Lead Program - HTPEP-001

- **HTPEP-001: inhaled small peptide (11aa)**
- **Indications: IPF, PF-ILD**
- **Preclinical Highlights:**
 - Significantly suppresses active TGF- β 1 production;
 - Reduces downstream signals like p-Smad2/3;
 - Reverses hydroproline deposition;
 - Downregulates inflammatory and fibrotic factors;
 - Obviously reduces the level inflammation and fibrosis;
 - Substantially wider safety margin vs. Nintedanib.

- **CMC Highlights:**

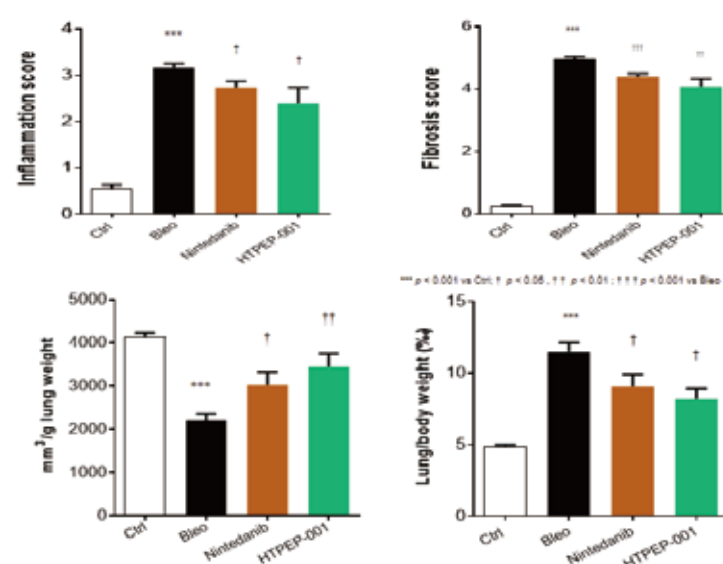
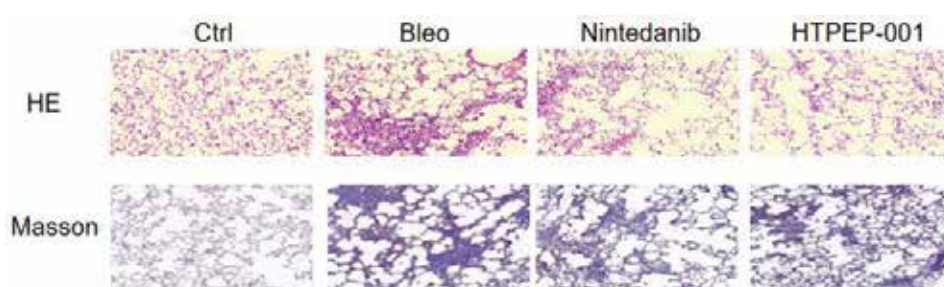
- Formulation ideal for aerosol inhalation:
2 < MMAD < 4 μ m & GSD = 1-3

- **Clinical Milestones:**

- Phase I clinical trial completed in Beijing China;
- None of the tested doses led to SAEs or treatment discontinuations;
- No Adverse Effects of systemic inhibition of TGF- β signaling pathways;
- No distortion of sense of taste, cough and other common AEs associated with Inhalation;
- Phase II trial on IPF patients is scheduled in 2026.

HTPEP-001 decreases active TGF- β 1 level and reduces Inflammation and fibrosis in Bleomycin Rat models

| Compound | Target | Selectivity | Safety Margin |
|------------------------------------|---------------------------|-----------------|---------------|
| Nintedanib Oral Small Molecule | PDGF/FGF/ VEGF | NO | 2.6 |
| Inhaled HTPEP-001 Small Peptide | L-TGF- β - TSP-1 | Domain level | 47.55 |





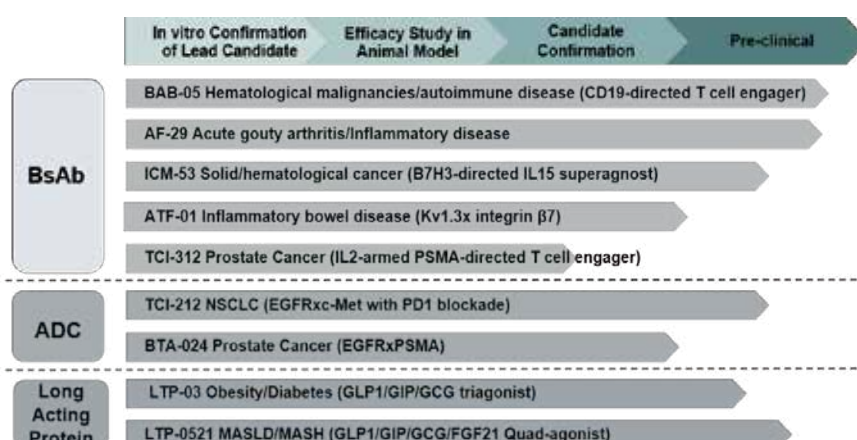
- Headquarters: Nantong, China
- Mission: To discover and develop therapeutic solutions for unmet medical needs. Primarily focusing on the development of novel bispecific antibody constructs to better treat a wide spectrum of medical conditions ranging from cancer to autoimmune disease

Company Introduction

YiChenBio(<https://yichenbiotech.com/>) has established a suite of technology platforms, including innovative **bispecific antibodies**, **bispecific antibody-drug conjugates**, **epitope-directed monoclonal antibodies** and **long-acting protein therapeutics**, and developed a diverse products pipeline.

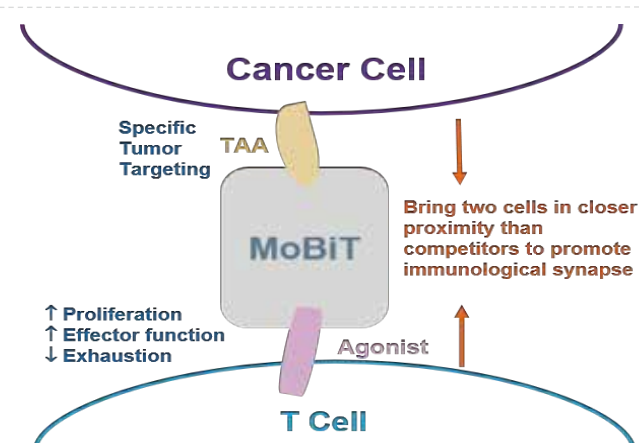
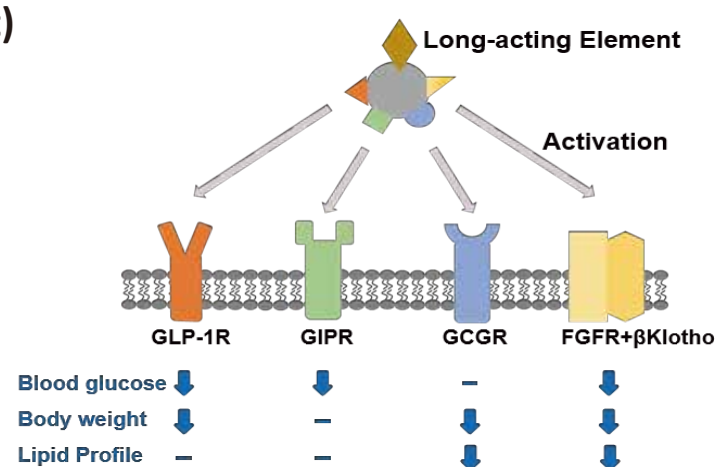
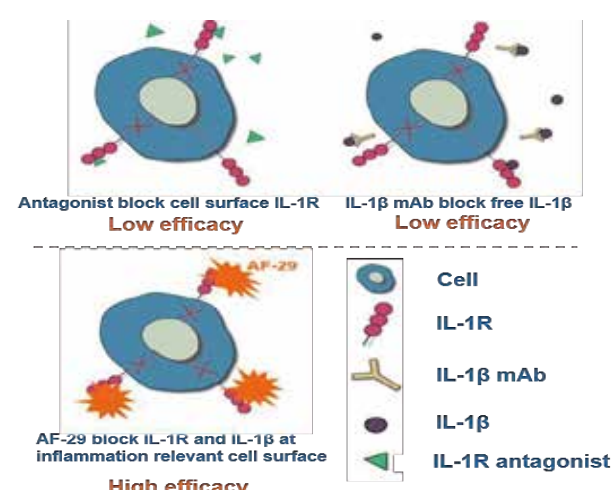
YiChenBio has successfully completed its Angel and Series A financing rounds and is advancing a focused portfolio of preclinical programs, including 4 candidates currently in IND-enabling studies.

The company is actively seeking opportunities to leverage its proprietary technologies in co-development partnerships for therapeutic products beyond its internal pipeline.



Lead Programs

- **AF29 (A First-in-Class, Selective IL-1 Signaling Blocker)**
 - Superior efficacy than approved IL-1 neutralizing drugs
 - Enhanced efficacy and reduced systemic exposure
 - Manufacturing process development completed
 - Optimal PK profiles in rodents and NHPs
 - No signs of toxicity observed at 150 mg/kg in monkeys
 - Optimized half-lives of two binding motifs to balance efficacy and side effects, supporting Q4W dosing
 - Potential treatment for multiple inflammatory/autoimmune indications
 - Expected IND filing in 2026Q2
- **LTP0521 (A Best-in-Class, GLP-1/GIP/GCG/FGF-21 Quad-Agonist)**
 - Balanced GLP-1R and GCGR activation, and enhanced GIPR activation
 - Optimized PK profile supporting Q1W or Q2W dosing
 - Monovalent analogs with natural amino acids
 - Induced modest appetite inhibition despite more potent body weight loss than Tirzepatide
 - Great improvements in anti-MASH effects
 - No significant toxicity was observed in single dose of 1mg/kg in NHP for 2 weeks, 3 mg/kg dose is ongoing
 - Under manufacturing process development
 - Expected IND filing in 2026Q3
- **MoBiT (Monovalent Bi-Targeting Antibody)**
 - IP protection, easily adaptable to various therapeutic target pairs
 - No heavy/light chain mis-pairing issues
 - Manufacturability and pharmacological properties similar to mAbs
 - Balanced potency and safety
 - Enhanced therapeutic window, prolonged half-life
 - Potentially armed with toxic payload conjugation, cytokine agonist or immune checkpoint blockers
 - Leading candidates: TCI-212 (EGFRxMetxPDL1xPDL2-toxic payload), TCI-312(CD3xPSMAxIL-2),TCI-3192(CD3xCD19xIL2)





- Headquarters: Kaifeng, China
- To develop innovative, targeted therapies for STAT3-driven cancers
- Seeking partnerships for clinical development, co-development, or licensing opportunities.

Mechanism:

- **Mechanism:** a therapeutic strategy where dual-site inhibition of STAT3 phosphorylation disrupts oncogenic signaling, downregulates key survival and immune evasion genes, and selectively induces tumor cell death.

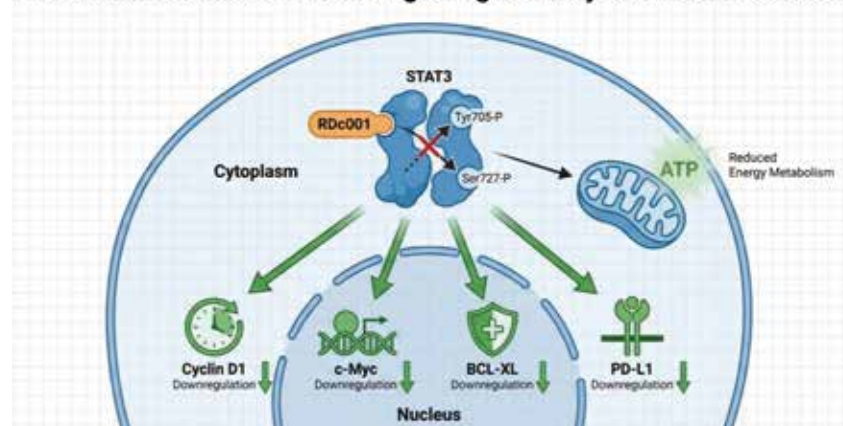
Key Features:

Direct STAT3 SH2 domain binding: High-affinity interaction inhibits phosphorylation at both Tyr705 and Ser727.

Broad-spectrum anticancer activity: Effective against multiple solid and hematological tumors, including resistant models.

Favorable safety profile: Preclinical studies show tumor regression at low doses with minimal toxicity to normal tissues.

Molecular Mechanism: STAT3 Signaling Pathway & RDc001 Inhibition



Lead Program - RDc001

- **RDc001: STAT3i**
- **Indications:** advanced solid tumor and hematologic malignancies

Differentiation:

Broad therapeutic potential: Active across a wide range of malignancies with high unmet need.

Overcomes resistance: Effective in EGFR-TKI resistant and chemotherapy-resistant models.

Therapeutic window: High NOAEL/exposure ratio supports clinical dosing flexibility.

Preclinical Highlights:

Achieved >99% tumor inhibition in myeloma models at 3 mg/kg, with 60% complete tumor regression.

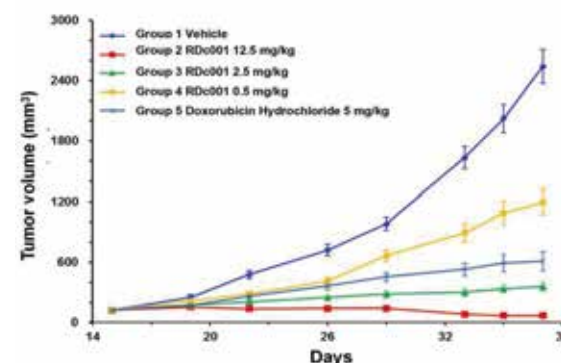
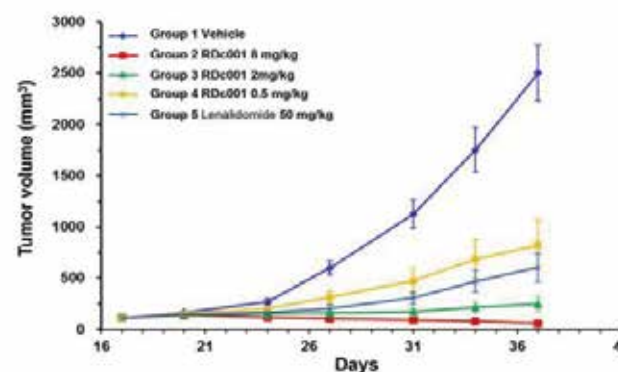
Showed 83–85% tumor inhibition in pancreatic and gastric cancer models at 7.5 mg/kg, outperforming standard chemotherapies.

Superior efficacy and safety compared to existing STAT3 inhibitors and conventional therapies in multiple CDX models.

Planned Clinical Milestones:

The Phase I clinical trial in China commenced in Q1 2026

Objective: Evaluate the safety, PK, PD, and preliminary efficacy in patients with advanced solid tumors and hematologic malignancies.



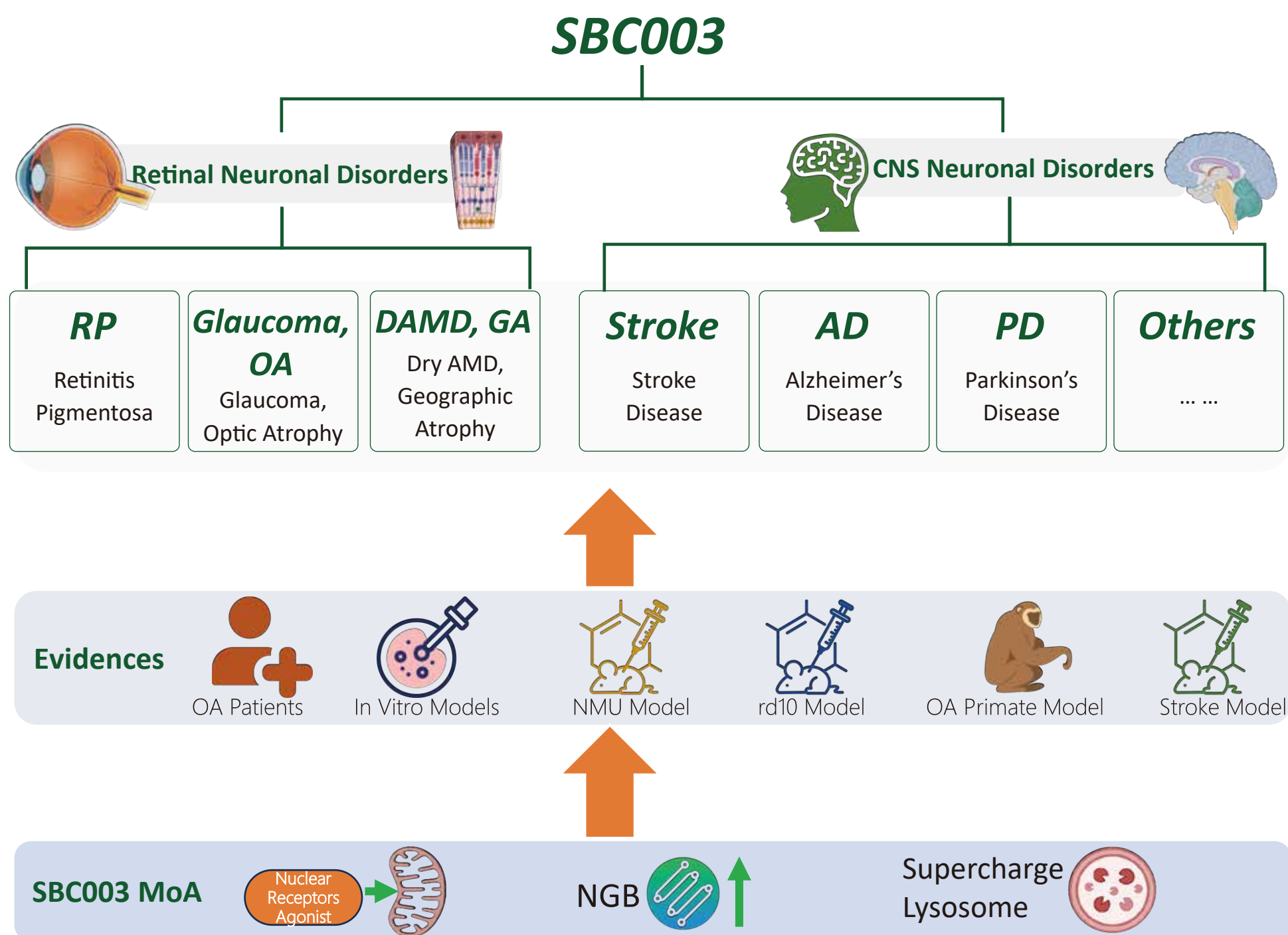
SunRegen

SunRegen Healthcare AG

- Headquarters: Basel, Switzerland
- focus on innovative treatments for patients with severe ophthalmic and neurological diseases.
- Seeking for partnership for clinical development (investment, licensing, co-development and/or collaboration) of SBC003.

Lead Program – SBC003

- SBC003: a groundbreaking small molecule poised to redefine treatment for neuronal disorders through its unique dual action: neuroprotection and neuro-rescuing.
- MoA: Supported by 20+ in-vivo and in-vitro studies, SBC003 acts through three synergized distinct targets/pathways to protect and rescue neurons—offering a unified solution across retinal and brain disorders.
- Indications: Retinitis Pigmentosa (RP), dry macular degeneration (dry AMD), optic atrophy, Stroke, AD, PD etc.



SunRegen Healthcare AG

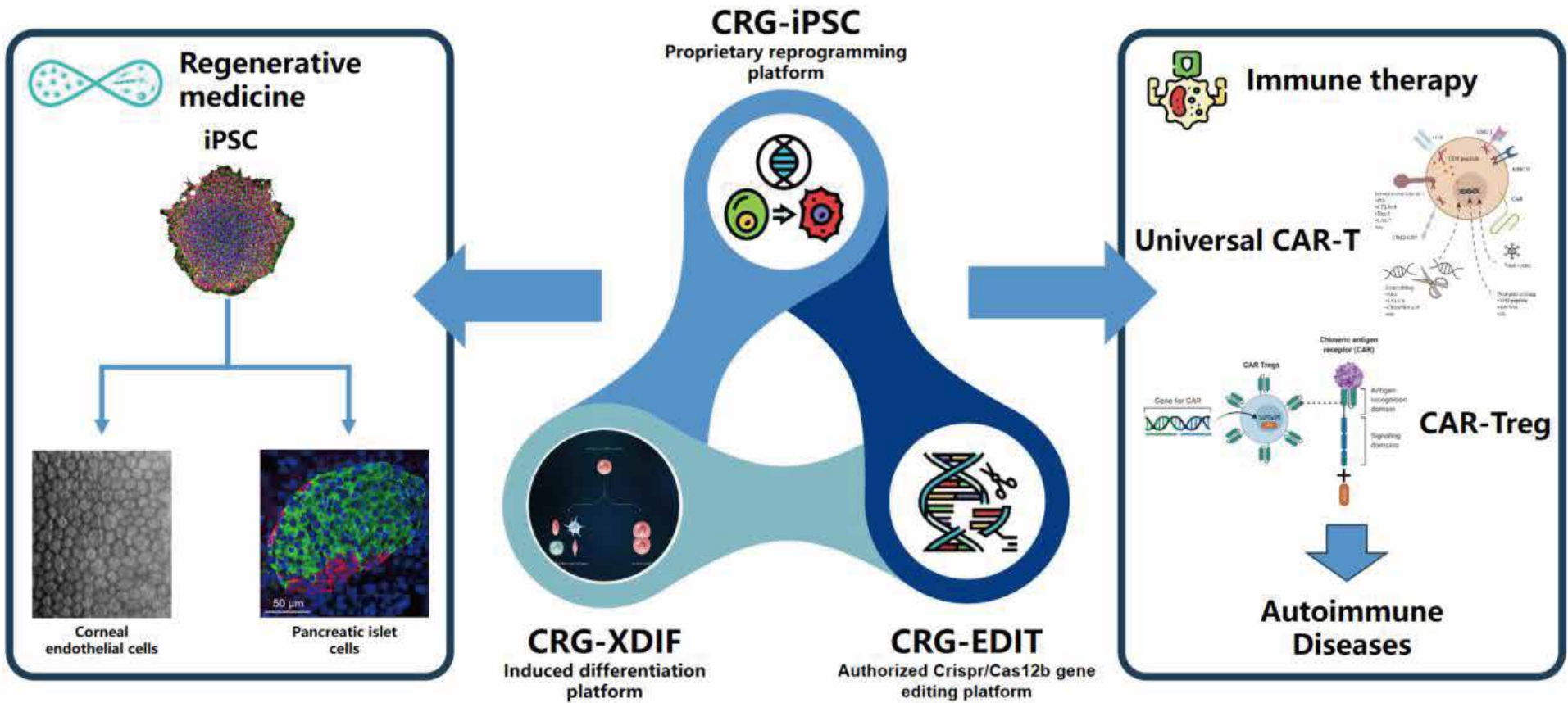
Robinienweg 51, 4153 Reinach, BL, Switzerland

Email: info@sunregen.ch; Website: <https://www.sunregen.ch>



Cellular therapies with curative potentials

Synergistic proprietary platforms covering development of edgy cellular therapies



Pipeline development - Initial Human Data readout for 3 Assets Expected in H1 2026

| | Pipelines | Indications | POC | CMC | Preclinical | IIT | IND | Clinical study |
|-----------------------|------------------------------|-------------|-----|-----|-------------|-----|-----|----------------|
| Regenerative medicine | CRG-101 (iPSC-CEC) | BP | | | | | | |
| | CRG-002 (Islet suspension) | T1DM | | | | | | |
| | CRG-002 (Encapsulated islet) | | | | | | | |
| | CRG-002 (Hypoimmune) | | | | | | | |
| Immune Therapy | CRG-001 (CAR-Treg) | AID | | | | | | |
| | CRG-003 (UCAR-T) | AID | | | | | | |

CEC: Corneal Endothelial Cells; BP: Bullous Karetopathy; T1DM: Type 1 Diabetes Mellitus; AID: Autoimmune diseases



- * Headquarters: Guangzhou, China
- * Dedicated to the discovery and development of therapeutic antibodies for cancer, cardiovascular, autoimmune and other diseases.
- * Seeking for partnership for clinical development (licensing) of Secukinumab, Mepolizumab and Pembrolizumab

Secukinumab

Secukinumab (an anti-IL-17A monoclonal antibody) can be used to treat plaque psoriasis, psoriatic arthritis, ankylosing spondylitis, and hidradenitis suppurativa.

Indications

- * Moderate to severe plaque psoriasis
- * Active Psoriatic Arthritis (PsA)
- * Adults with active Ankylosing Spondylitis (AS)

Secukinumab

BAT2306

Dosage Forms

75 mg /0.5mL (PFS); 300 mg/2mL (PFS,AI)



150mg/mL (PFS,AI)



125mg/5mL (Vial)



Mepolizumab

Mepolizumab (an anti-IL-5 monoclonal antibody) can be used to treat adult eosinophilic granulomatosis with polyangiitis (EGPA), eosinophilic severe asthma, and other related conditions.

Indications

- * Severe asthma
- * Chronic Rhinosinusitis with Nasal Polyps (CRSwNP)
- * Eosinophilic Granulomatosis with Polyangiitis (EGPA)

Mepolizumab

BAT2606

Dosage Forms

100 mg/1mL PFS

PF-PEN



PF-PEN

40 mg/0.4mL PFS



Pembrolizumab

Pembrolizumab is a humanized monoclonal antibody and an immune checkpoint inhibitor. It specifically binds to the PD-1 receptor on lymphocytes and blocks its interaction with the ligands PD-L1 and PD-L2, thereby relieving tumor-induced immunosuppression on T cells, reactivating T-cell immune responses against tumor cells, and ultimately achieving therapeutic effects across various cancer types.

Indications

- *Melanoma
- *Non-Small Cell Lung Cancer (NSCLC)
- *Malignant Pleural Mesothelioma (MPM)
- *Ehead and Neck Squamous Cell Cancer (HNSCC)
- *Classical Hodgkin Lymphoma (cHL)
- *Primary Mediastinal Large B-Cell Lymphoma (PMBCL)
- *Etc

Pembrolizumab

BAT3306

Dosage Forms

100mg/4mL (Vial)



Manufacturing Facilities

✓ Manufacturing Plant (Huangpu, Guangzhou)

- DS Bioreactor Capacity - 66,500L
- GMP Compliance (lot size - 40,000 m², facility space over 53,000 m²)

| | | | |
|---------------|---------------------------|----------------|-------------------|
| 1,500L | (Disposable - 3 x 500L) | 7,000L | (SS - 2 x 3,500L) |
| 6,000L | (Disposable - 3 x 2,000L) | 16,000L | (SS - 4 x 4,000L) |
| | | 36,000L | (SS - 6 x 6,000L) |

➤ 3 Fill-Finish Plants

| | | |
|--------------------|-------------|----------------|
| pre-filled syringe | liquid vial | lyophilization |
|--------------------|-------------|----------------|

➤ ADC Conjugation





MEDICILON

Website: www.medicilon.com

Email: marketing@medicilon.com

USA: 20 Maguire Road, Suite 103, Lexington, MA 02421, USA

China: 585 Chuanda Road, Pudong, Shanghai, 201299, China

