

# **CORPORATE PROFILE**

April 2024

**TME Pharma** is a biotech company focused on developing novel therapies for treatment of the most aggressive cancers. We specialize in approaches targeting the **tumor microenvironment (TME)**. Our unique technology breaks tumor protection barriers against the immune system and blocks tumor repair by neutralizing chemokines in the TME. *TME Pharma*'s approach works in combination with other forms of treatment to weaken tumor defenses and enable

greater therapeutic impact. *TME Pharma*'s mission is to improve treatment outcomes for patients with cancer where the tumor microenvironment significantly limits survival.

The lead compound **NOX-A12** acts in two distinct mechanisms of action, presenting great potential for developing this asset in various oncology indications. Currently, *TME Pharma* is focused on **brain cancer (glioblastoma, GBM)**, with promising topline clinical results.

#### Market potential & timing

Indication	Clinical Phase	target population US & EU <sup>2</sup>	total addressable market	next inflection points
NOX-A12 + radiotherapy Brain cancer / glioblastoma <sup>1</sup>	Ph 1/2 ongoing Ph 2 & Fast Track approved by FDA	29,000	\$2.5 bn	Financing & initiation of randomized Phase 2
NOX-A12 + immunotherapy Pancreatic cancer	Ph 1/2 completed Ph 2 approved in FR, ES, US	69,000	\$6 bn	Financing & initiation of randomized Phase 2

<sup>1.</sup> Orphan drug status US & EU; expansion arms + anti-VEGF, + anti-PD-1 2. New cases per year

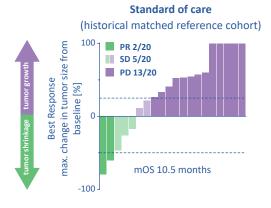
#### Glioblastoma – Ground-Breaking Top Line Phase 1/2 Data

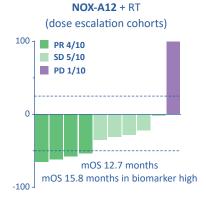
Glioblastoma is a devastating orphan brain cancer where the TME plays a significant role. Following radiotherapy (RT) treatment that kills tumor cells and destroys the local blood vessels, **NOX-A12** blocks the revascularization of the tumor area, thus preventing tumor cells

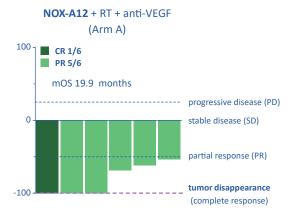
from growing and proliferating again and enhances the anti-cancer immune response by increasing the number activated, proliferating cytotoxic T-cells to the tumor tissue.

Cohort therapy	Patients with tumor size reduction	Tumor reduction ≥ 50%³
Standard of care (chemotherapy + RT) (n=20)	25%	10%
NOX-A12 + RT (n=10)	90%	40%
NOX-A12 + RT + anti-VEGF (n=6)	100%	100%5

<sup>3.</sup> radiographic partial response 4. Wick, W. (2013) J. Clin. Oncol. Vol 31, 15 suppl 2002 5. 83% of patients maintained mRANO (modified Response Assessment in Neuro-Oncology)







### Clinical highlights

Exciting results of NOX-A12 + RT + anti-VEGF combination:

- final 19.9 months median overall survival (mOS)
- 10-fold improvement in 21-month survival vs. standard of care (50% vs 5%)
- 100% PR and 83% durable PR, 50% of patients (3 of 6) with >99% tumor size reduction including 1 complete response

## Regulatory milestones

Complete regulatory package for development in GBM:

- FDA clearance of an IND application for a Phase 2 trial
- Fast Track designation awarded by FDA for NOX-A12 in combination with radiotherapy and bevacizumab in glioblastoma
- Orphan Drug Designation granted in the EU and US

market	EuroNext Growth Paris	market cap	~ €8.9 M*
ticker	ALTME	liquidity contract	Invest securities
ISIN shares	NL0015000YE1	no. of shares	28,453,373*
ISIN warrents	NL0015001SR3	no. of warrants Z	3,326,104*

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