DEVELOPING PERSONALISED MEDICINES TO BEAT CANCER.

Prescient Therapeutics Limited (ASX: PTX)
Finance News Network Investor Series
May 2019
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INVESTMENT SUMMARY

ASX code: PTX

- 2 clinical stage drugs with multiple shots on goal
- Only exposure to hot personalised medicine industry on ASX
- Excellent team with successful track record
- Collaborations with leading clinicians and hospitals
- Funding in place with $9.1m recently raised
- Backing from life-science focussed funds in US and Australia
- Overlapping catalysts
Cells divide over and over

Sometimes mistakes are made

MUTATIONS

CANCER
DEEP, CLINICAL STAGE PRODUCT PIPELINE

- Deep clinical pipeline with 4 data readouts expected in the next 18 months

**DISCOVERY** | **SCREENING** | **PRE-CLINICAL** | **PHASE 1** | **PHASE 1B** | **PHASE 2** | **PHASE 3**

**PTX-200**
- **BREAST CANCER**
  - (Ph2 pt1 readout Q4 2019)

**PTX-200**
- **AML**
  - (Ph1b readout Q3/Q4 2019)

**PTX-200**
- **OVARIAN**
  - (Ph1b readout Q4 2019)

**Novel formulations**
- **COLLABORATION**

**PTX-100**
- **SOLID TUMORS**
  - (completed Ph1)

Confirmed safety, focus now on RhoA/Ras

**PTX-100**
- **RhoA & Ras MUTANT CANCERS**
  - (Ph1b readout Q2 2020)
WHY IS PERSONALISED MEDICINE CHANGING THE INDUSTRY?
PROBLEMS WITH CURRENT “ONE SIZE FITS ALL” APPROACHES

• Without precision medicine, patients are treated the same regardless of the differences between individuals.

• A “one size fits all” approach leads to poor outcomes, and exposure to serious risks
• Personalized medicine takes into account individual tumour variability
  » Different tumours have different drivers!
• This precise, targeted personalized therapy is a more effective way of treating cancer patients
• Huge area of industry growth (US$93B by 2023)
# Examples of Personalised Medicine Approaches

<table>
<thead>
<tr>
<th>Disease</th>
<th>Target</th>
<th>Drug</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic Myeloid Leukemia</td>
<td>Bcr-Abl</td>
<td>Gleevec</td>
<td>Gleevec has increased 5-year survival rate for CML from 31% to 90% (1990s-2012)</td>
</tr>
<tr>
<td></td>
<td>(95% of patients)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acute Myeloid Leukemia</td>
<td>FLT3</td>
<td>Gilteritinib</td>
<td>NDA filed for R/R FLT3-positive AML</td>
</tr>
<tr>
<td></td>
<td>(25% of AML patients)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acute Myeloid Leukemia</td>
<td>IDH2</td>
<td>Enasidenib</td>
<td>Received FDA approval in 2017 for R/R AML with IDH2 mutations</td>
</tr>
<tr>
<td></td>
<td>(8% of AML patients)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Many cancer types</td>
<td>TRK fusions</td>
<td>LOXO-101</td>
<td>NDA filed for cancers with TRK fusion</td>
</tr>
<tr>
<td></td>
<td>(various %s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Many cancer types</td>
<td>High p-Akt</td>
<td>PTX-200</td>
<td>In development for cancers with high p-Akt levels (regardless of the genetic defect that causes high p-Akt)</td>
</tr>
<tr>
<td></td>
<td>(various %s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Various Lymphomas</td>
<td>RhoA mutations</td>
<td>PTX-100</td>
<td>In development for cancers with RhoA mutations</td>
</tr>
<tr>
<td></td>
<td>(up to 70%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gastric and pancreatic cancers</td>
<td>KRas mutations</td>
<td>PTX-100</td>
<td>In development for cancers with KRas mutations</td>
</tr>
<tr>
<td></td>
<td>(up to 95%)</td>
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</tbody>
</table>
BIG VALUATIONS AND DEAL ACTIVITY IN THIS SPACE

- **ARRAY BIOPHARMA**: US$5B
- **LOXO ONCOLOGY**: US$8B buyout by Eli Lilly, Jan 2019
- **TESARO**: US$5.1B buyout by GSK, Dec 2018
- **Prescient Therapeutics**: US$3.3B
- **Incyte**: US$18B
- **Epizyme**: US$964M
PTX-200

NOVEL AKT INHIBITION

BREAST CANCER
ACUTE MYELOID LEUKEMIA
OVARIAN CANCER
80% of breast cancers are HER2- but this is still underserved by new drugs.
PHASE 1B RESULTS VERY ENCOURAGING

Typical expectation with current treatments

25% OVERALL RESPONSE RATE

In PTX’s trial we saw

50% OVERALL RESPONSE RATE IN ALL EVALUABLE PATIENTS

100% OVERALL RESPONSE RATE IN LOCALLY ADVANCED PATIENTS

Visual representation of response by breast cancer sub-type

PD SD PR pCR/CR

PCR=PATHOLOGICAL COMPLETE RESPONSE; CR=COMPLETE RESPONSE; PR=PARTIAL RESPONSE; SD=STABLE DISEASE; PD=PROGRESSIVE DISEASE; ORR=OVERALL RESPONSE RATE (=pCR/CR + PR)
PTX-100
PHASE 1 IN SOLID TUMORS COMPLETED
NOW PURSUING A TRANSFORMATIVE OPPORTUNITY IN RAS AND RHO MUTANT CANCERS
BASKET TRIALS: TAKING TARGETED THERAPIES TO THE NEXT LEVEL

• Group patients according to the mutational profile of their tumours, not on the location of tumours
• “Basket” trial bundles identifies patients carrying this mutation, and switch it off with a particular targeted therapy
• Focussed, intelligent design; faster development
• The future of clinical trials - for the drugs that suit this approach
PTX-100 THE ONLY DRUG TARGETING RHOA

- PTX-100 has a unique position in RhoA mutant malignancies
  - Only clinical stage RhoA inhibitor globally
- Phase 1 trial in solid tumours completed – safety profile established
- Basket PK/PD study expected to begin in Q2 2019; readout Q2 2020:
  - Myeloma
  - Lymphoma
  - Gastric cancer
  - Pancreatic cancer

- Given unmet need, it is possible only one pivotal trial post successful Phase 1b may be required
  - “Loxo-style” Basket heme and/or basket solid cancers enriched for RhoA & Ras mutations
  - Faster path to commercialisation
  - Small patient population but large potential market value
CASE STUDY – LOXO ONCOLOGY (NASDAQ:LOXO)

• Lead drug Larotrectnib: targeted therapy for cancers with TRK fusions
• An unmet need in small patient population (2,500-3,000 cases/year in US)
• Pioneered “one trial to launch” basket study
• Only 4 years from initiating Phase 1 2014 through to approval in 2018
• Bought by Eli Lilly in January 2019 for US$8 B
INVESTMENT SUMMARY

A GREAT LAUNCH PAD FOR TRANSFORMATION

• PTX: only exposure to hot personalised medicine industry on ASX

• 2 clinical stage drugs with multiple shots on goal
  » Encouraging data already unfolding in breast cancer with PTX-200
  » Moonshot on PTX-100

• Excellent team with successful track record

• Collaborations with leading clinicians and hospitals

• Funding in place with $9.1m recently raised

• Backing from life-science focussed funds in US and Australia

• Overlapping catalysts