



## ASX: ALA Investor Presentation Dr Michael Baker

February 2022

## Disclaimer

(N) (D)

The information in this presentation does not constitute personal investment advice. The presentation is not intended to be comprehensive or provide all information required by investors to make an informed decision on any investment in Arovella Therapeutics Limited (**Company**). In preparing this presentation, the Company did not take into account the investment objectives, financial situation and particular needs of any particular investor.

Further advice should be obtained from a professional investment adviser before taking any action on any information dealt with in the presentation. Those acting upon any information without advice do so entirely at their own risk.

Whilst this presentation is based on information from sources which are considered reliable, no representation or warranty, express or implied, is made or given by or on behalf of the Company, any of its directors, or any other person about the accuracy, completeness or fairness of the information or opinions contained in this presentation. No responsibility or liability is accepted by any of them for that information or those opinions or for any errors, omissions, misstatements (negligent or otherwise) or for any communication written or otherwise, contained or referred to in this presentation.

Neither the Company nor any of its directors, officers, employees, advisers, associated persons or subsidiaries are liable for any direct, indirect or consequential loss or damage suffered by any person as a result of relying upon any statement in this presentation or any document supplied with this presentation, or by any future communications in connection with those documents and all of those losses and damages are expressly disclaimed.

Any opinions expressed reflect the Company's position at the date of this presentation and are subject to change.

This document does not constitute an offer to sell, or a solicitation of an offer to buy, securities in the United States or any other jurisdiction in which it would be unlawful. In particular, the New Shares and Options have not been, and will not be, registered under the US Securities Act of 1933 (the "US Securities Act") and may not be offered or sold in the United States except in transactions exempt from, or not subject to, the registration requirements of the US Securities Act and applicable US state securities laws. The distribution of this presentation in jurisdictions outside Australia may be restricted by law and any such restrictions should be observed.

The New Shares and Options will be offered and sold in the United States only to (i) institutional accredited investors (as defined in Rule 501(a)(1), (2), (3) and (7) under the US Securities Act); and (ii)dealers or other professional fiduciaries organized or incorporated in the United States that are acting for a discretionary or similar account (other than an estate or trust) held for the benefit or account of persons that are not US persons and for which they exercise investment discretion, within the meaning of Rule 902(k)(2)(i) of Regulation S under the US Securities Act.



## Arovella Therapeutics Highlights



#### **World Leading Partners**

Arovella licenced its iNKT Cell Therapy Platform from Imperial College London and its DKK1 mAb/CAR from MD Anderson



#### Allogeneic Platform, Two Targets

Arovella is developing off the shelf cell therapies for CD19 expressing lymphomas and DKK1 producing cancers



#### Acquiring New Technologies

Arovella continues to focus on sourcing, evaluating and acquiring innovative technologies that align with key focus areas



#### World Class Team

Arovella's leadership group has deep experience in drug development, particularly cell therapies



#### Data Driven

Arovella uses data to drive decision making for its key assets and clinical indications

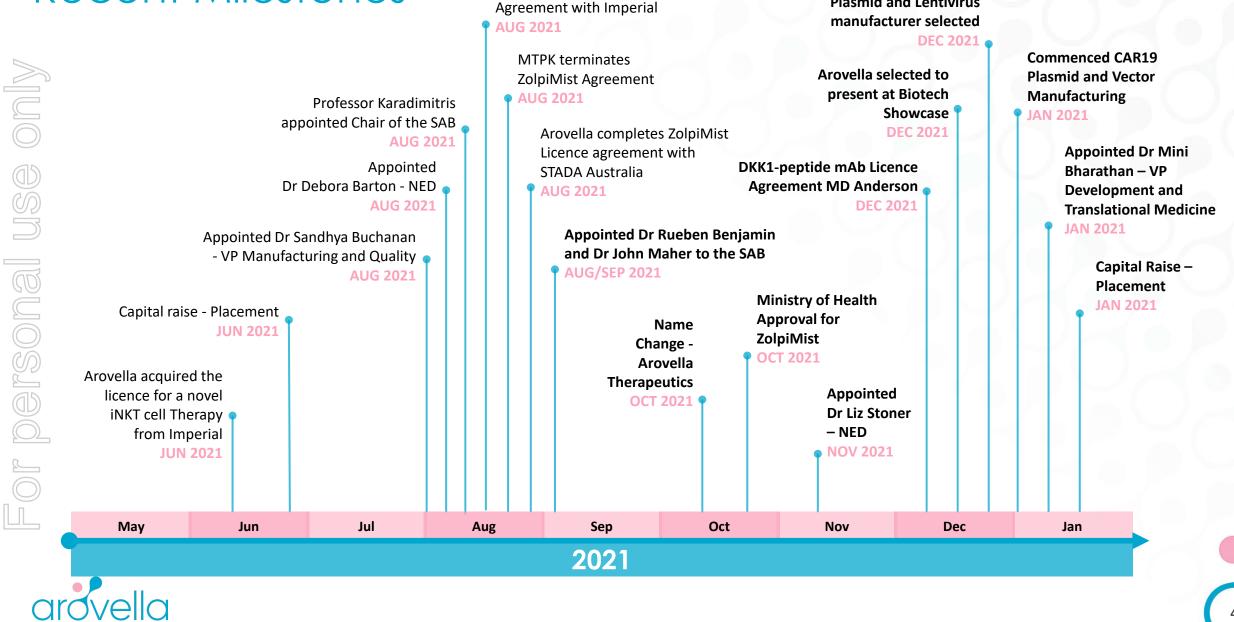


#### **Growth Potential**

Arovella is the only ASX listed company working with an iNKT cell therapy platform and the only company worldwide with CAR technology targeting a DKK1 peptide



## **Recent Milestones**



Arovella enters into Research

Plasmid and Lentivirus

## Arovella Company Overview

#### **Financial Snapshot**



1. As of 31 January 2022 and including shares issued from the Placement announced 24 January 2022

2. Includes the proceeds from the Placement but not the \$1.5m from the underwritten SPP announced 24 January 2022



## **Arovella Board and Senior Leadership**



#### Paul Hopper **CHAIRMAN**

Over 25 years experience in the medical, healthcare & life sciences sectors. Focussed on start-up and rapid growth companies, he has served as either Founder, Chairman, non-executive director or CEO, of more than fifteen companies in the US, Australia and Asia. Mr Hopper has founded, or technology seeded, six companies on the ASX and Nasdag. C RAD





### Dr. Liz Stoner

#### DIRECTOR

Dr. Stoner is a distinguished biopharma executive, who brings decades of international industry experience to her role, including senior roles in Clinical **Development Operations at Merck Research** Laboratories. Liz is an Executive Partner at MPM Capital, and she has held numerous leadership roles at MPM portfolio companies. Liz was previously an Assistant Professor of Paediatrics at Cornell University Medical College.





#### Dr. Michael Baker **CEO & MANAGING DIRECTOR** Over 15 years experience in scientific research, drug development and venture investing sectors. He was an Investment Manager with the leading Australian life science fund, BioScience Managers. He also conducted due diligence to shortlist

BioScience

Managers



#### Dr. Sandhya Buchanan **VP MANUFACTURING & QUALITY**

investment opportunities and played an

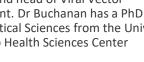
active role in managing portfolio companies.

hexima

Dr Buchanan has more than 20 years' experience working in cell & gene therapy and vaccine development. Dr Buchanan was formerly at Atara Biotherapeutics as the chemistry manufacturing and control technical lead for autologous CAR-T programs and head of Viral Vector Development. Dr Buchanan has a PhD in Pharmaceutical Sciences from the University of Colorado Health Sciences Center



#### Renn Medicine





#### Dr. Debora Barton DIRECTOR

Over 20 years of oncology experience, in academia, as a practicing physician and in the biotechnology / pharmaceutical industry. Served in key senior executive positions, including Carisma Therapeutics where Dr. Barton is currently the Chief Medical Officer, Iovance Biotherapeutics and Advanced Accelerator Applications, acquired by Novartis during Debora's tenure.



#### David Simmonds DIRECTOR

David was a senior audit partner with Ernst & Young from 1989 to 2017. From 2008 to 2013, David led the Capital Markets desk in Australia with responsibility for overseeing or reviewing all Australian cross border fundraisings. David was a member of the Board of MS Research Australia.



## Arovella Therapeutics Pipeline

#### **Cell Therapy** INDICATION DISCOVERY PRECLINICAL PHASE 1 PHASE2/3<sup>1</sup> PARTNER ALA-101 CD19 expressing CD19 Expressing Lymphoma (CAR19-iNKT) cancers ALA-102 Not Disclosed ND ALA-103 Not disclosed ND ALA-104 **Multiple** Multiple Myeloma & Solid Tumours (DKK1-CAR-iNKT) **Myeloma** OroMist COMMERCIAL INDICATION REFORMULATION PRECLINICAL CLINICAL PARTNER Short-term ZolpiMist<sup>®2</sup> Short-term insomnia Teva<sup>3</sup> STADA<sup>4</sup> insomnia ALA-001 Migraine Strides Migraine (Sumatriptan) ALA-018 Solid tumours & Solid Tumours (Anagrelide) thrombocytosis ALA-021 (Pharma DRE<sup>5</sup>, melanoma, Cann Pharma Multiple motion sickness grade Cannabis) Australia ALA-023 (Not ND Not Disclosed Sanofi disclosed) 1. Phase 3 trial may not be required if Phase 2 is a registrational trial

- 2. ZolpiMist has been approved by the Ministry of Health (Chile), TGA (Australia) and the FDA (US) and Arovella holds the rights to ZolpiMist outside of North America
- 3. Arovella is assisting TEVA with regulatory submission and commercialisation efforts
- 4. STADA have the license to commercialise ZolpiMist in Australia

DRE – Drug Resistant Epilepsy

5.

## Cell Therapy Commercial Activity

Transactions		
Parties	Deal Type	Total Value
Gilead / Kite	Acquisition	US\$11.9b
Celgene / Juno	Acquisition	US\$9b
Janssen / Fate	Partnership	US\$3b
Kite / Shoreline Biosciences	Strategic Partnership	US\$2.3b
Atara Bio / Bayer	Strategic Collaboration	~US\$670m
Gilead / Cell Design Labs	Acquisition	US\$567m
Caribou / Abbvie	Collaboration Agreement	US\$340m
Moderna / Carisma Therapeutics	Research Deal	US\$45m <sup>1</sup>

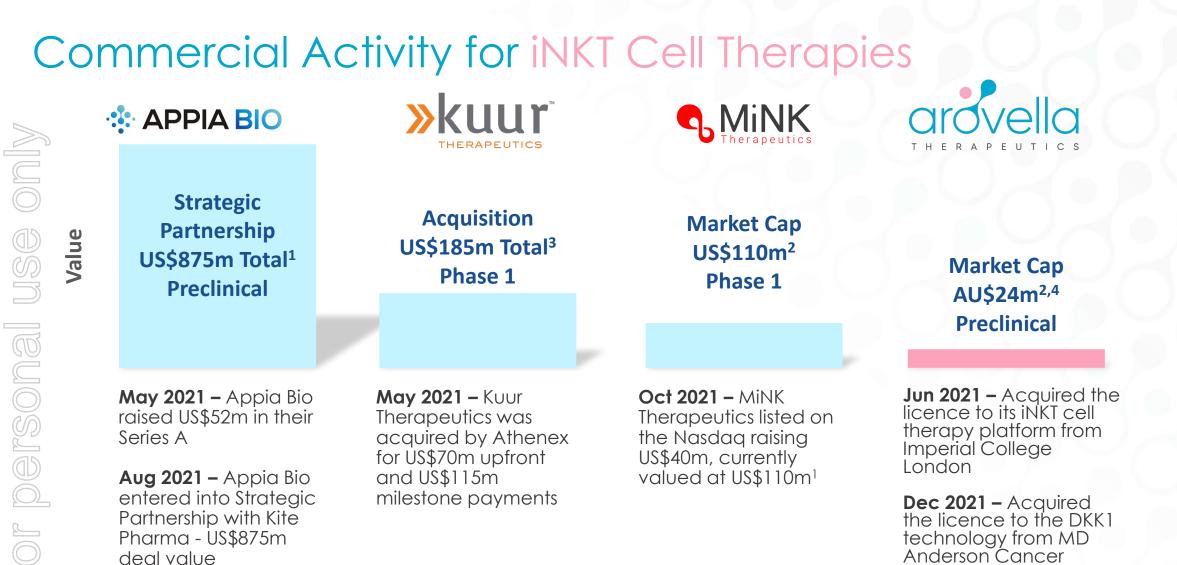
Significant Capital Raises	
Company	Amount Raised
Sana Biotech	US\$675m
Lyell	US\$425m
Legend Biotech	US\$424m
Carsgen	US\$400m
Instil Bio	US\$368m
Century Therapeutics	US\$243m
Gracell	US\$209m

 The global cell and gene therapy market is expected to reach US\$12.9b by 2026<sup>2</sup>

Milestone payments are included but have not been disclosed

https://www.globenewswire.com/news-release/2021/12/08/2348195/0/en/Global-Geneand-Cell-Therapy-Market-Size-Points-22-3-CAGR-Projected-to-Reach-USD-12-9-Billion-by-2026-Facts-Factors.html





1. <u>https://www.gilead.com/news-and-press/press-room/press-releases/2021/8/kite-and-appia-bio-announce-collaboration-to-research-and-develop-allogeneic-cell-therapies-for-cancer</u>

- 2. As of 31 January 2022
- 3. https://ir.athenex.com/news-releases/news-release-details/athenex-acquire-kuur-therapeutics-expand-cell-therapy
- 4. Including shares issued from the Placement announced 24 January 2022

Jan 2022 - Placement and SPP

Center

# NKT Cell Therapy Platform

# Imperial College





## **Overview of CAR-iNKT Cell Therapy**

## **Blood Collection and Immune Cell Harvesting**

Following blood collection from a healthy donor at a hospital or clinic, immune cells are collected

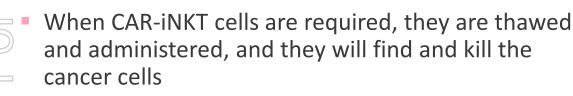
## Isolation and re-programming of immune cells

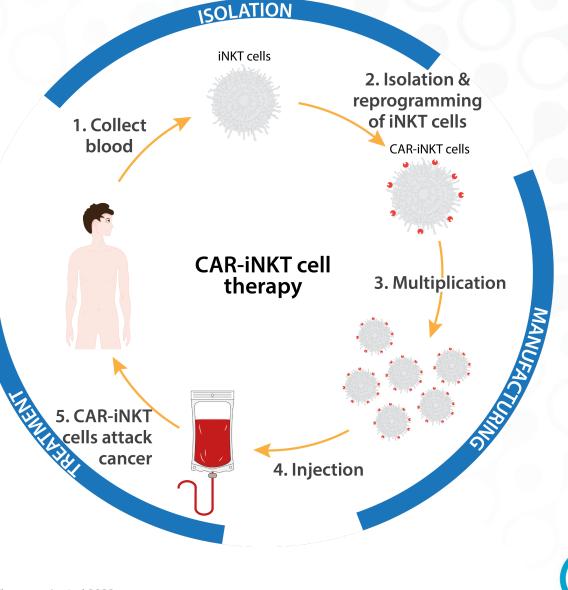
Isolated iNKT cells are genetically re-programmed to produce a chimeric antigen receptor (CAR) that will attack specific markers on cancers

## **Multiplication of cells**

The CAR-iNKT cells are grown up to sufficient numbers for patient treatment and stored frozen

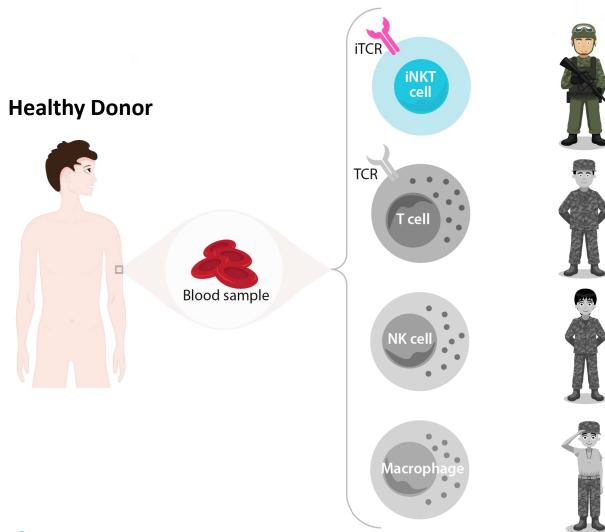
## Cells are administered to the patient







## Expand the Cell Therapy Revolution: iNKT Cells



## **iNKT Cell Benefits**

- They are one of the most potent, naturally occurring immune cells
- They bridge the innate and adaptive immune system
- They naturally target and kill cancer cells
- They activate other beneficial immune cells
- They can be used "off the shelf" as they suppress graft versus host disease (GVHD)
- They show significantly improved killing of CD1d producing cancers over T cells when combined with chimeric antigen receptors (CARs)



Dersonal

## CAR-iNKT Cells are Engineered to Enhance Activity

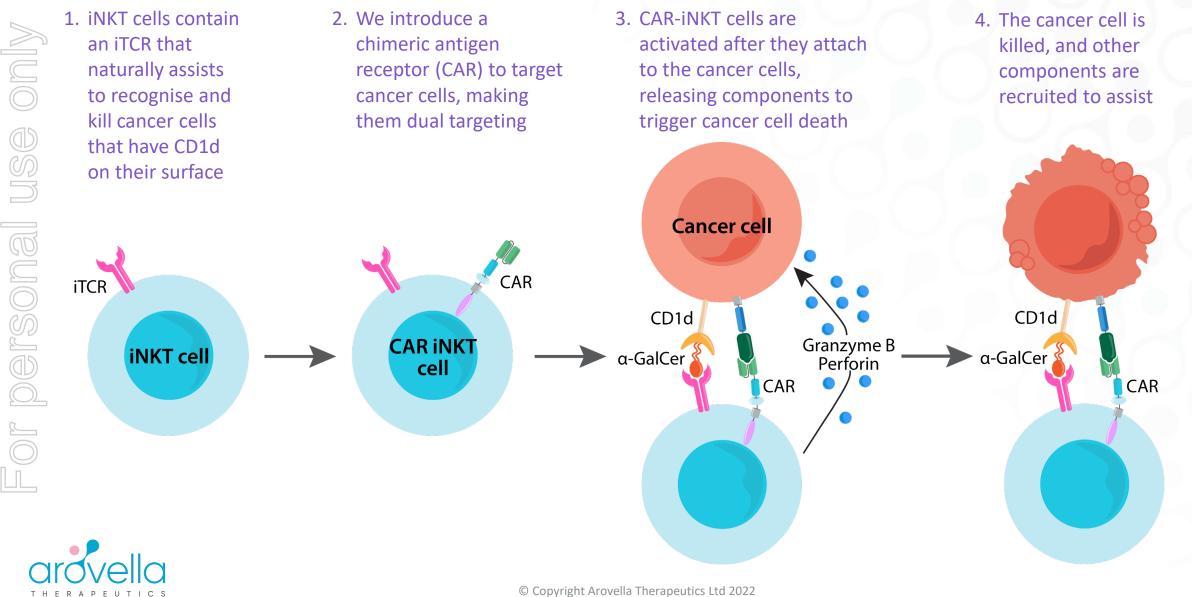
	APPROVED CAR-T CELLS	CAR-NK CELLS	CAR-INKT CELLS
Subpopulation of T cells with NK cell properties	×	×	✓ (
Intrinsic anti-cancer receptor (dual targeting)	×	×	~
Persistence	$\checkmark$	TBD	TBD <sup>1</sup>
Minimal genetic engineering for off the shelf	×	$\checkmark$	$\checkmark$
Naturally suppress GVHD	×	×	$\checkmark$
Low risk of CRS or neurotoxicity	×	$\checkmark$	$\checkmark$
Allogeneic, 'off-the-shelf' dosing	×	✓	$\checkmark$

CAR – Chimeric Antigen Receptor; iNKT – invariant Natural Killer T Cell; CRS – Cytokine Release Syndrome; TBD – To Be Determined 1. Spontaneous secondary remission observed in preclinical animal models



Dersonal

## How does the CAR-iNKT Cell Therapy Platform Work?



## ALA-101: CAR19-iNKT Cells to Treat Blood Cancers

Day 0

3 Days after

ALA-101 is anticipated to be an effective, off-the-shelf cell therapy for the treatment of CD19 expressing cancers

We have demonstrated robust activity against CD19 expressing cancers

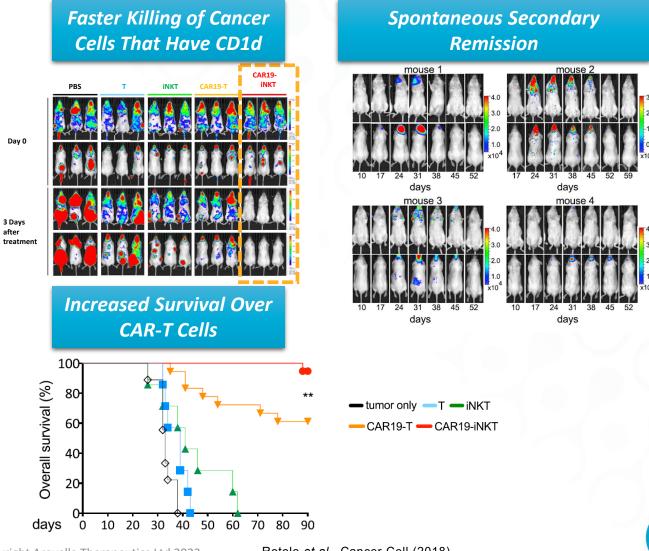
ALA-101 is more efficient at clearing tumour cells than conventional cell therapies when the cancers produce CD1d

Our therapy results in better animal survival than conventional cell therapies

Our data validates the use of iNKT cells as a treatment for CD19 expressing cancer types

We commenced the manufacturing of the plasmid and lentivirus in Q1 2022

## **CAR19-iNKT Outperforms Conventional Therapies**





## Pipeline Expansion ALA-104



DEISONAI

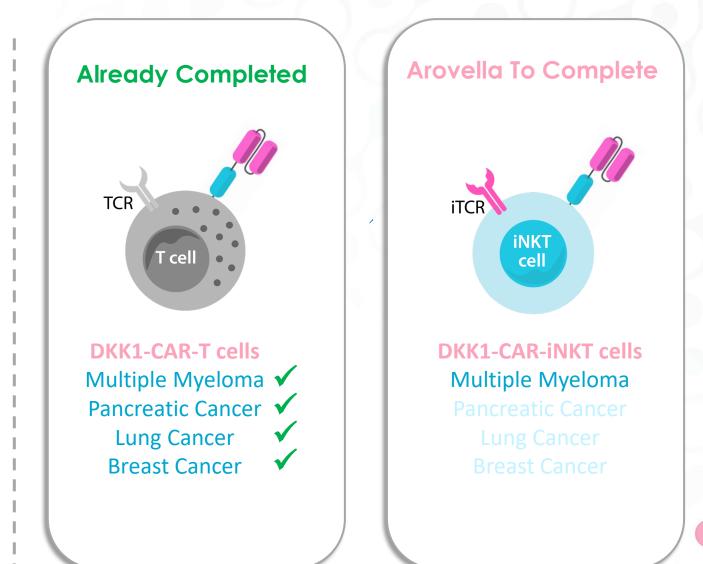
## Development of DKK1-CAR to Date

The DKK1 mAb was developed at MD Anderson and can be incorporated into a chimeric antigen receptor (CAR)

The DKK1 peptide-targeting mAb has demonstrated activity against multiple myeloma and breast cancer

The DKK1 peptide-targeting scFv has been incorporated into CAR-T cells, and has excellent activity against blood cancers and solid tumours (unpublished data)

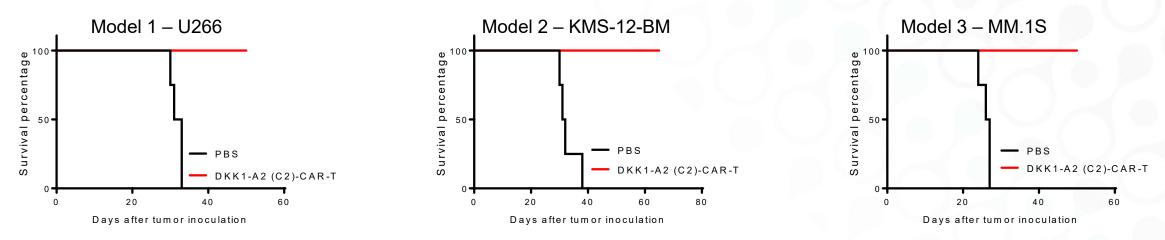
Arovella will combine the DKK1-CAR with its iNKT cell therapy platform and initially target multiple myeloma, where DKK1 is highly expressed





## DKK1-CAR-T Cell Activity in Multiple Myeloma

DKK1-CAR T cells were tested in three different animal models for multiple myeloma, displaying robust activity in all standard models



All treated mice were alive at 50-60 days, while untreated mice succumbed to the cancer at 30-40 days



Multiple myeloma cells also express CD1d, so including DKK1-CAR into iNKT cells will make them dual targeting



S D

DKK1-CAR-T cells also have activity in animal models for **lung**, **pancreatic** and **triple negative breast** cancer

## DKK1-CAR-T Preclinical Safety

Prof Qing Yi at Houston Methodist has demonstrated:

- They only kill cells that have the DKK1 peptide presented in an HLA-A2 complex on their surface
- They do not kill healthy blood cells
- That the DKK1-CAR-T cells are considered safe using *in vivo* models
- The DKK1 mAb targeted only 1 out of 35 normal tissues tested (tonsil)

## Arovella will confirm:

- That the DKK1 technology does not target or attack healthy cells
- The ability to combine DKK1-CAR with Arovella's iNKT cell therapy platform





## The Inventor – Professor Qing Yi













Professor Qing Yi is a trained medical immunologist with over 25 years of experience. He is one of the leading investigators in the fields of tumor immunology and immunotherapy in multiple myeloma and other cancers. He has trained at the **Karolinska Institute**, **MD Anderson**, the **Cleveland Clinic** and is now at **Houston Methodist**.



Professor Yi is the Director for the Center for Translational Research in Hematological Malignancies and Associate Director for the Cancer Center Basic Research Programs, Cancer Center Houston Methodist.



Professor Yi has been awarded 9 R01 grants, 1 project and 1 core grant in the MD Anderson Myeloma SPORE (P50), 4 R01-type translational grants from the LLS, 4 Senior Researcher Awards from the MMRF, 2 K99/R00 grants, and numerous intramural and industry grants. Dr Yi was recruited to Houston Methodist through an Established Investigator Award from CPRIT with a total grant amount of ~\$6 million.



Professor Yi and colleagues have published more than 160 peer-reviewed research articles, with 45 being in top-tier journals with an impact factor of greater than 10.

## DKK1's Role in Cancer





2021

<u>Oncogene</u>, 2021 Jul 01; 40(26)

The dickkopf1 and FOXM1 positive feedback loop promotes tumor growth in Pancreatic and Esophageal Cancers

2018



#### <u>Oncogene</u>, 2018 Mar 18; 37(26)

Activation of the dickkopf1-CKAP4 pathway is associated with poor prognosis of Esophageal Cancer and anti-CKAP4 antibody may be a new therapeutic drug



#### 2019

Cancer Research

Clinical Oncolor

Annals of translational

medicine.

2019 Dec 21; 146(2)

Crosstalk of estrogen receptors

and wnt/β-catenin signaling in

Endometrial Cancer

2017

Cell cycle,

2017 Jul 27; 16(17)

The role of dickkopf-1 as a

potential prognostic marker in

Pancreatic ductal

adenocarcinoma



#### <u>Oncogene</u>, 2019 Dec 06: 38

2019

Dickkopf-1 contributes to Hepatocellular Carcinoma tumorigenesis by activating the Wnt/β-catenin signaling pathway



#### <u>Oncotarget,</u> 2016 Sep 06; 7(43)

Dickkopf-1 expression is associated with tumorigenity and lymphatic metastasis in human hilar Cholangiocarcinoma



2019

Dickkopf-1 (DKK1) promotes tumor growth via aktphosphorylation and independently of wnt-axis in barrett's associated Esophageal Adenocarcinoma

2016



Journal of cellular and molecular medicine, 2016 May 31; 20(9)

Dickkopf-1-promoted vasculogenic mimicry in Non-small Cell Lung Cancer is associated with EMT and development of a cancer stem-like cell phenotype



#### Clinical & experimental medicine, 2018 Sep 2035(8)

Dickkopf-1 (Dkk1) protein expression in Breast Cancer with special reference to Bone Metastases

## 

2015

<u>Oncotarget</u>, 2015 Jun 19; 6(23)

Serum dickkopf-1 is a novel serological biomarker for the diagnosis and prognosis of Pancreatic Cancer

- DKK1 is overproduced in a number of cancer types, including pancreatic, oesophageal, hepatocellular, breast, lung cancer and multiple myeloma
- Overexpression of DKK1 can indicate poor overall survival and shorter disease-free survival<sup>1</sup>
- DKK1 has recently emerged as a potential biomarker of cancer progression and prognosis for several types of malignancies<sup>2</sup>
- There is growing evidence that DKK1 plays an essential role in cancer progression<sup>2</sup>

1. Zhu et al., 2021

2. Chu et al., 2021



21

## **Robust Intellectual Property**



#### Patent life until 2039

- As the first DKK1-CAR product, it has a robust patent position
- Title: Monoclonal Antibodies Against MHC-Bound Human Dickkopf-1 Peptides and Uses Thereof
- Applicant: Board of Regents, The University of Texas System
- Patent applications have been filed in the US, Europe, Canada, China, and Australia
- Favorable Search Report

(12) INTERNATIONAL APPLICATION PUBLISHED UNDER THE PATENT COOPERATION TREATY (PCT)

WIPO PCT

(19) World Intellectual Property Organization International Bureau

(43) International Publication Date 06 August 2020 (06.08.2020)

 (51) International Patent Classification:

 A61K 39/395 (2006.01)
 A61P 35/00 (2006.01)

 C07K 16/28 (2006.01)
 C07K 14/705 (2006.01)

(21) International Application Number:

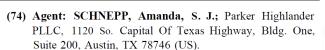
PCT/US2020/0 16364

(22) International Filing Date:

03 February 2020 (03.02.2020)

(25) Filing Language:	English
(26) Publication Language:	English

- (30) Priority Data: 62/800,007 01 February 2019 (01.02.2019) US
- (71) Applicant: BOARD OF REGENTS, THE UNIVERSITY OF TEXAS SYSTEM [US/US]; 210 West 7th St., Austin, TX 78701 (US).
- (72) Inventors: YL, Qing; C/o The University Of Texas Md Anderson, Cancer Center, 1515 Flolcombe Blvd., Hous¬ ton, TX 77030 (US). QIAN, Jianfei; C/o The University Of Texas MD Anderson, Cancer Center, 1515 Flolcombe Blvd., Houston, TX 77030 (US).



(10) International Publication Number WO 2020/160532 A1

- (81) Designated States (unless otherwise indicated, for every kind of national protection available): AE, AG, AL, AM, AO, AT, AU, AZ, BA, BB, BG, BH, BN, BR, BW, BY, BZ, CA, CH, CL, CN, CO, CR, CU, CZ, DE, DJ, DK, DM, DO, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GT, HN, HR, HU, ID, IL, IN, IR, IS, JO, JP, KE, KG, KH, KN, KP, KR, KW, KZ, LA, LC, LK, LR, LS, LU, LY, MA, MD, ME, MG, MK, MN, MW, MX, MY, MZ, NA, NG, NI, NO, NZ, OM, PA, PE, PG, PH, PL, PT, QA, RO, RS, RU, RW, SA, SC, SD, SE, SG, SK, SL, ST, SV, SY, TH, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, WS, ZA, ZM, ZW.
- (84) Designated States (unless otherwise indicated, for every kind of regional protection available): ARIPO (BW, GH, GM, KE, LR, LS, MW, MZ, NA, RW, SD, SL, ST, SZ, TZ, UG, ZM, ZW), Eurasian (AM, AZ, BY, KG, KZ, RU, TJ, TM), European (AL, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HR, HU, IE, IS, IT, LT, LU, LV, MC, MK, MT, NL, NO, PL, PT, RO, RS, SE, SI, SK, SM,



## CAR-iNKT Cell Therapy Development

- Acquire the license to additional CARs/Technologies complementary to the iNKT cell therapy platform
- Dose first patient in Phase 1 clinical trial for CD19 producing cancers
- FDA IND clearance for CAR19-iNKT program
- Complete GMP manufacturing of CAR19-iNKT cells for phase 1 clinical trial
- Define Manufacturing strategy for DKK1-CAR-iNKT cells
- Demonstrate activity of DKK1-CAR-iNKT cells in models for multiple myeloma, and potentially solid tumours
- Confirm Safety and Specificity of the DKK1-CAR and combine with the iNKT cell platform
- Select GMP manufacturer to produce CAR19-iNKT cells
- Recruit cell therapy translation and development expert
- Select GMP manufacturer for plasmid and lentivirus for CAR19
- Acquire the license to another complementary CAR
- Recruit cell therapy manufacturing expert Dr. Sandhya Buchanan
- Enter into Research Agreement with Imperial College London

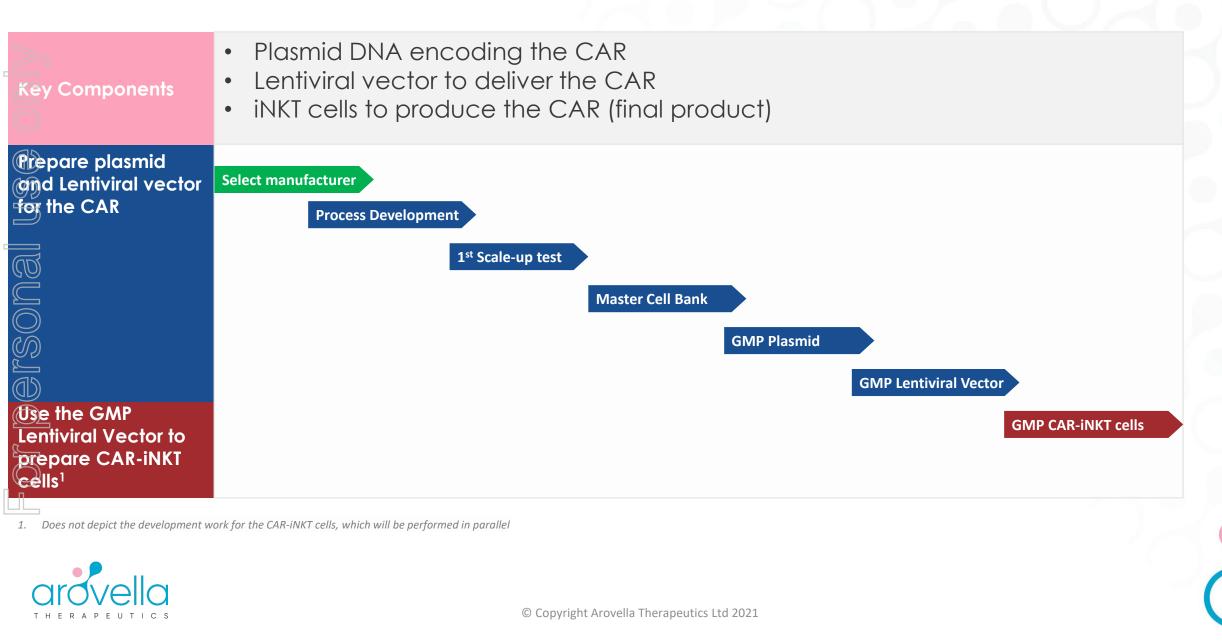


S

month

24

## CAR-iNKT Cell Manufacturing Pathway



24

# Thank You

**Dr Michael Baker** CEO & Managing Director

Email: mbaker@arovella.com Mobile: +61 403 468 187



Appendices Dersonal ardvella THERAPEUTICS

## Cancer Continues to be a Major Health Issue

Worldwide, an estimated 19.3 million new cancer cases (18.1 million excluding nonmelanoma skin cancer)) occurred in 2020 <sup>1</sup>	Cancer is a leading cause of death worldwide, accounting for nearly 10 million deaths in 2020 <sup>2</sup>	The global cancer biologics market should reach \$143.0 billion by 2026 from \$77.5 billion in 2021 at a (CAGR) of 13.0% <sup>3</sup>

1. https://pubmed.ncbi.nlm.nih.gov/33538338/

2. https://www.who.int/news-room/fact-sheets/detail/cancer

3. https://www.businesswire.com/news/home/20211004005398/en/Global-Market-for-Biological-Therapies-for-Cancer-2021-2026---ResearchAndMarkets.com

## Chimeric Antigen Receptor (CAR) Cell Therapy Revolution

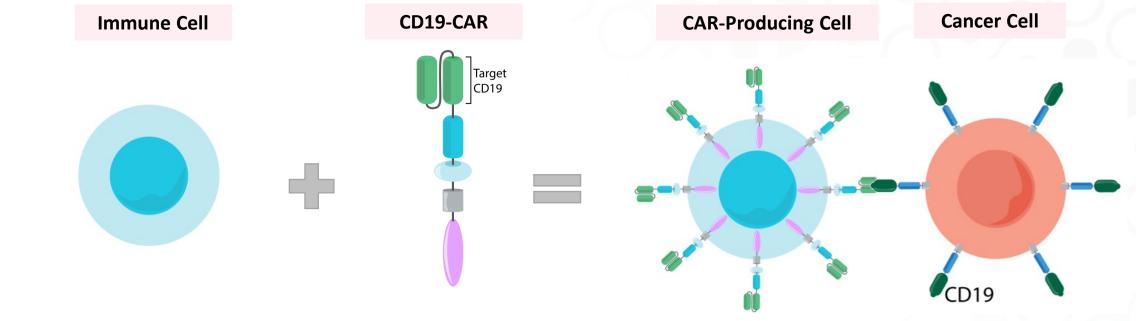
## **CAR-T** Revolution

Due to their impressive cure rates, CAR-T cell therapies have revolutionised the treatment of cancer. As of October 2021, there are five approved CAR-T products to treat a number of haematological malignancies



Approval Year	2020 Revenue
2017	US\$474m <sup>1</sup>
2017	US\$563m <sup>2</sup>
2020	US\$44m <sup>2</sup>
2021	NA
2021	NA
	2017 2017 2020 2021

## What are Chimeric Antigen Receptors (CARs)?



Speci Speci the the fro L

Specific immune cells for the therapy are collected from a patient or a healthy volunteer The immune cells are genetically re-programmed with a CAR, supercharging them to seek out and destroy specific cancer cells

Once administered to the cancer patient, the CARproducing cells can seek out and destroy the cancer cells



## Preclinical In Vivo Safety Evaluation of CAR19-iNKT cells

## CAR19-iNKT cells do not elicit adverse effects in preclinical mouse tumour models

- No body weight loss
- Data in mouse models did not show off-target effects
- No histological changes in normal tissues

Beside the profound anti-lymphoma effect of CAR19-iNKT cells, there was no evidence of negative pathology findings, clinically or as determined by extensive histopathological analysis

#### 150 CAR19-iNKT tumor only CAR19-T 140 PBS control iNKT +30percentage weight change +20+10200 150 Q 100--20 50 -40 60 35 42 49 56 63 70 0 14 21 28 77

Mice Body Weight

Rotolo et al., Cancer Cell (2018)



06[S0h

## iNKT Cells Protect Against Graft Versus Host Disease

2015

A party of three: iNKT

cells in GVHD

prevention



nvariant Natural Killer T Cells As Suppressors of Graft-versus-Host **Disease in Allogeneic** Hematopoietic Stem Cell Transplantation

2014



#### 2014 Nov 20;124(22):3320-3328

CD4<sup>+</sup> invariant natural killer T cells protect from murine GVHD lethality through expansion of donor CD4+CD25+FoxP3+ regulatory T cells





Leukemia 2017 Apr;31(4):903-912

Pre-transplant donor CD4<sup>-</sup> invariant NKT cell expansion capacity predicts the occurrence of acute graftversus-host disease

2012



Blood 2012 May 24;119(21):5030-6

Graft invariant natural killer T-cell dose predicts risk of acute graftversus-host disease in allogeneic hematopoietic stem cell transplantation

# 2016



2016 Apr 7;127(14):1828-35 2015 May 28;125(22):3374-3375 Larger number of invariant natural killer T cells in PBSC allografts correlates with

2011

improved GVHD-free and

progression-free survival

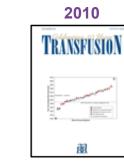
blood

3



2011 Mar 17;117(11):3220-3229

Low doses of natural killer T cells provide protection from acute graft-versus-host disease via an IL-4-dependent mechanism



Transfusion 2010 Feb;50(2):407-17

Adoptive therapy by transfusing expanded donor murine natural killer T cells can suppress acute graft-versus-host disease in allogeneic bone marrow transplantation



2015 May 28;125(22):3491-3500 Third-party CD4+ invariant natural killer T cells protect from murine GVHD lethality



J Immunol. 2008 Sep 1;181(5):3268-76

Human Invariant NKT Cells Display Alloreactivity Instructed by Invariant TCR-CD1d Interaction and Killer Ig Receptors

#### **Conventional CAR-T cell therapies** are limited to autologous products due to the potential for acute graft versus host disease (GVHD)

- Allogeneic CAR-T cell products require additional genetic engineering
- Invariant Natural Killer T (iNKT) cells have been shown to intrinsically protect against GVHD
- Arovella's CAR-iNKT cell therapies will be developed as allogeneic products, requiring minimal genetic engineering

## Use of iNKT Cells in Clinical Trials



2020 Nov;26(11):1686-1690 Anti-GD2 CAR-NKT cells in patients with relapsed or refractory neuroblastoma: an interim analysis

2020

2009



#### J Immunol. 2009 Feb 15;182(4):2492-501

A Phase I-II Study of α-Galactosylceramide-Pulsed IL-2/GM-CSF-Cultured PBMCs in Patients with Advanced and Recurrent NSCLC





Clin Cancer Res. 2017 Jul 15;23(14):3510-3519

Adoptive Transfer of Invariant NKT Cells as Immunotherapy for Advanced Melanoma: A Phase I Clinical Trial

2008

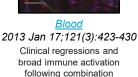


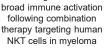
Cancer Immunol Immunother. 2008 Mar:57(3):337-45

Phase I study of αgalactosylceramide-pulsed antigen presenting cells administration to the nasal submucosa in unresectable or recurrent HNC



2013







Clin Cancer Res 2006 Oct 15;12(20 Pt 1):6079-86

> A Phase I Study of In vitro Expanded Natural Killer T Cells in Patients with Advanced and Recurrent Non-Small Cell Lung Cancer

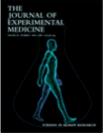




J Clin Immunol 2012 Apr 26;32(5):1071-81 Accumulation of

Activated Invariant Natural Killer T Cells in the tumour Microenvironment after α-Galactosylceramide-Pulsed Antigen Presenting Cells

#### 2005



J Exp Med. 2005 May 2;201(9):1503-17

Sustained expansion of NKT cells and antigenspecific T cells after injection of α-galactosvlceramide loaded mature dendritic cells in cancer patients

#### 2011



Clin Cancer Res 2011 Aug 1; 17(15):5140-51 Comparison of Clinical and Immunological Effects of Intravenous and Intradermal Administration of α-GalactosvlCeramide (KRN7000)-Pulsed Dendritic Cells



Clin Cancer Res. 2005 Mar 1;11(5):1910-17

> A Phase I Study of α-Galactosylceramide (KRN7000)-Pulsed Dendritic Cells in Patients with Advanced and Recurrent NSCLC

#### iNKT cells, in the presence and absence of CARs, have been used in numerous clinical trials against a range of tumour types, including blood cancers and solid tumours

Efficacy data is encouraging in both solid tumour and haematological malignancies

The side effect profile is encouraging with low risk of neurotoxicity and cytokine release syndrome with no evidence of GVHD for allogeneic iNKT cell products

## A Novel Cancer Target - DKK1 (ALA-104)

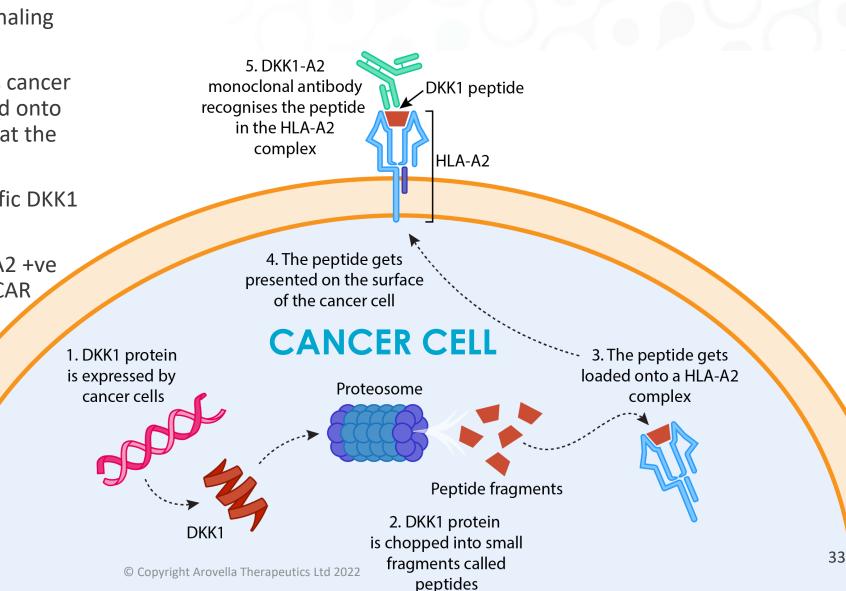
DKK1 is a secreted protein that functions as a negative regulator of the Wnt signaling pathway

DKK1 is overproduced in numerous cancer types and DKK1 peptides are loaded onto immune complexes and presented at the surface of cancer cells

Our DKK1 mAb/CAR targets a specific DKK1 peptide in an HLA-A2 complex

~40-50% of the population is HLA-A2 +ve meaning the market for the DKK1-CAR could be quite large





## Understanding Immunology and Cell Therapy

- Antigen = Any substance that induces the immune system to produce antibodies against it is called an antigen. Any foreign invaders, such as pathogens (bacteria and viruses), chemicals, toxins, and pollens, can be antigens.
- **CAR** = Chimeric Antigen Receptor can be introduced into immune cells to target cancer cells.
- **CAR-T** = Chimeric Antigen Receptor T Cell.
- **iNKT** = invariant Natural Killer T cells are components of the immune system that seek and destroy foreign or abnormal cells.
- TCR = T Cell Receptors are group of proteins found on immune cells that recognise fragments of antigens as peptides bound to MHC complexes.
- CD1d = Cluster of differentiation 1, which is expressed on some immune cells and cancer cells.
- CD19 = Cluster of Differentiation 19 is a protein that is expressed in a B cells and many cancer cell types.
- **Cell Therapy =** The use of intact cells to lessen or cure a disease. Cells may be from the patient (autologous) or from a healthy donor (allogenic). **Immuno-oncology** = The use of the immune system to treat cancer.
- Invariant = Never changing.
- In vitro = Work completed in a test tube or outside of an animal.
- In vivo = work completed using an organism (i.e. mouse, human).
- Lymphomas = Lymphoma is a cancer of the lymphatic system, which is part of the body's germ-fighting network.
- Novel = Of new or unusual kind.
- Platform = A systematic method to leverage prior knowledge for a given new therapy.



)CID



# THERAPEUTICS

## Committed to helping people live longer and healthier lives

#### **Patient-Centric**

It starts with the end in mind. In our case, it is our patients. At Arovella, we are invested in making a positive difference in helping patients live longer and healthier lives. Creating a brighter future for people is our driving force.

#### **Data-driven and Milestone Focused**

Behind all life-changing therapies is excellent, ground-breaking science. We utilise data to shape our decisions to enable us to reach our set milestones

#### Accountable, Honest and We Act With Integrity

Our mission of helping patients focuses us. We hold ourselves to account for our actions. We strive to do what is right for all of our stakeholders.

#### We Are Persistent and Never Give Up

Drug development is a challenging arena. We are committed to our mission of helping patients, and we will continue to push each other through positive and challenging times in the pursuit of developing life-changing therapeutics.