Dimerix

(ASX:DXB)

Investor Presentation

March 2022

Authorised for lodgment by the Board of the Company

Forward looking statements

This presentation includes forward-looking statements that are subject to risks and uncertainties. Such statements involve known and unknown risks and important factors that may cause the actual results, performance or achievements of Dimerix to be materially different from the statements in this presentation.

Actual results could differ materially depending on factors such as the availability of resources, the results of clinical studies, the timing and effects of regulatory actions, the strength of competition, the outcome of legal proceedings and the effectiveness of patent protection.

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About Dimerix

Dimerix is a biopharmaceutical company developing innovative new therapies in areas with unmet medical needs, with a core focus on developing new therapies to treat inflammatory causes of kidney and respiratory disease

FSGS Phase 3 clinical study opening across 12 countries globally[1]

Demonstrated **clinical efficacy**[2]; drug well understood, with **strong safety profile**[2]

Patent protected products with **commercial manufacturing** established

Strong outlook with potential for **significant value**[2] upside

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1 *ASX releases: 28Jan22, 01Feb22*
2 *ASX releases: 12Jul17, 18Oct17, 27Mar18, 29Jul20, 14Sep20, 27Oct20, 28Jan21, 24Mar21, 03Jun21, 07Jun21, 19Jul21*
3 *See slides 10 and 15 for market potential*

Corporate overview

Ticker Symbol	Cash Balance (31Dec21)	Market Capitalisation	Share price	Total ordinary shares on issue	Average volume	Top 20 Shareholders own
ASX:DXB	A$16.3 million	~A$56 million	~A$0.18	320,873,666	512,341	38%

Share price

Top shareholders

Position	Holder Name	Holding	% IC
1	Mr Peter Meurs	44,179,309	13.8%
2	Merchant Group & Nominees	17,925,000	5.6%
3	Mr Andrew Coates & Mrs Melinda Coates	9,500,000	3.0%
4	Bavaria Bay Pty Ltd	7,316,992	2.3%
5	Yodambao Pty Ltd	6,362,603	2.0%
6	Solequest Pty Ltd and Nominees	3,687,302	1.1%
7	Pfleger Family A/C and Nominees	3,137,874	1.0%
8	Tamer Yigit Property Group Pty Ltd	3,000,000	0.9%
9	Mr James Victor Camilleri	2,856,873	0.9%
10	Mr Taylor Nicholas Green	2,500,000	0.8%
10	Rubi Holdings Pty Ltd	2,500,000	0.8%
TOTAL (TOP 10)		**102,965,953**	**32.1%**

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Development pipeline

Program	Indication	Preclinical	Phase 1	Phase 2	Phase 3	Key milestones
DMX-200	Focal Segmental Glomerular Sclerosis (FSGS)					Phase 2a demonstrated encouraging efficacy & safety[1]; Phase 3 underway with regulatory &/or ethics authorisation in multiple countries[2], 1st interim data anticipated H1 23[3]
	Diabetic Kidney Disease					Phase 2 demonstrated promising efficacy and safety[1], planning of next study design anticipated mid-2022 following FSGS start up activities
	Late COVID pneumonia – REMAP-CAP					Study recruitment across Europe[4], recruitment paused pending analysis[5], data analysis underway; anticipated from REMAP-CAP team imminently
	Early COVID respiratory – CLARITY 2.0					Recruitment underway across India[6], ethics approval in Australia[7], data from CLARITY 1.0 study (use of angiotensin receptor blockers in COVID patients) anticipated imminently[8], interim data from India now anticipated Q2 22[3]
DMX-700	Chronic Obstructive Pulmonary Disease (COPD)					Pre-clinical studies underway to support entry into clinical studies; data anticipated Q2 22
DMX-xxx	Undisclosed (multiple)					Additional target opportunities identified using Receptor-HIT; preliminary exploratory work underway

1. *ASX releases: 12Jul17, 18Oct17, 27Mar18, 29Jul20, 14Sep20, 27Oct20, 28Jan21, 24Mar21, 03Jun21, 07Jun21, 19Jul21*
2. *ASX releases: 21Oct21, 01Feb22 (Australia, Denmark); + further countries subsequently approved*
3. *Subject to recruitment*
4. *ASX release: 23Apr21, 16Dec21*
5. *ASX release 28Feb22*
6. *ASX release: 11Jan22*
7. *ASX release: 23Dec21*
8. *CLARITY 1.0 data outcomes may influence study design of CLARITY 2.0 study*

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DMX-200 – working on inflammatory signalling pathway

A CCR2 inhibitor working synergistically alongside the current standard of care (AT1R blocker): G protein-coupled receptor (GPCR)

Small molecule
new chemical entity status with granted patents and applications across key countries

Clear Development Path

FDA/EMA recognising surrogate markers, such as proteinuria and eGFR as registration endpoints[1,2]

Easy and convenient dosing

2 x 120mg capsule daily

Extensive regulatory engagement
orphan drug designation secured in US, EU and UK[1]

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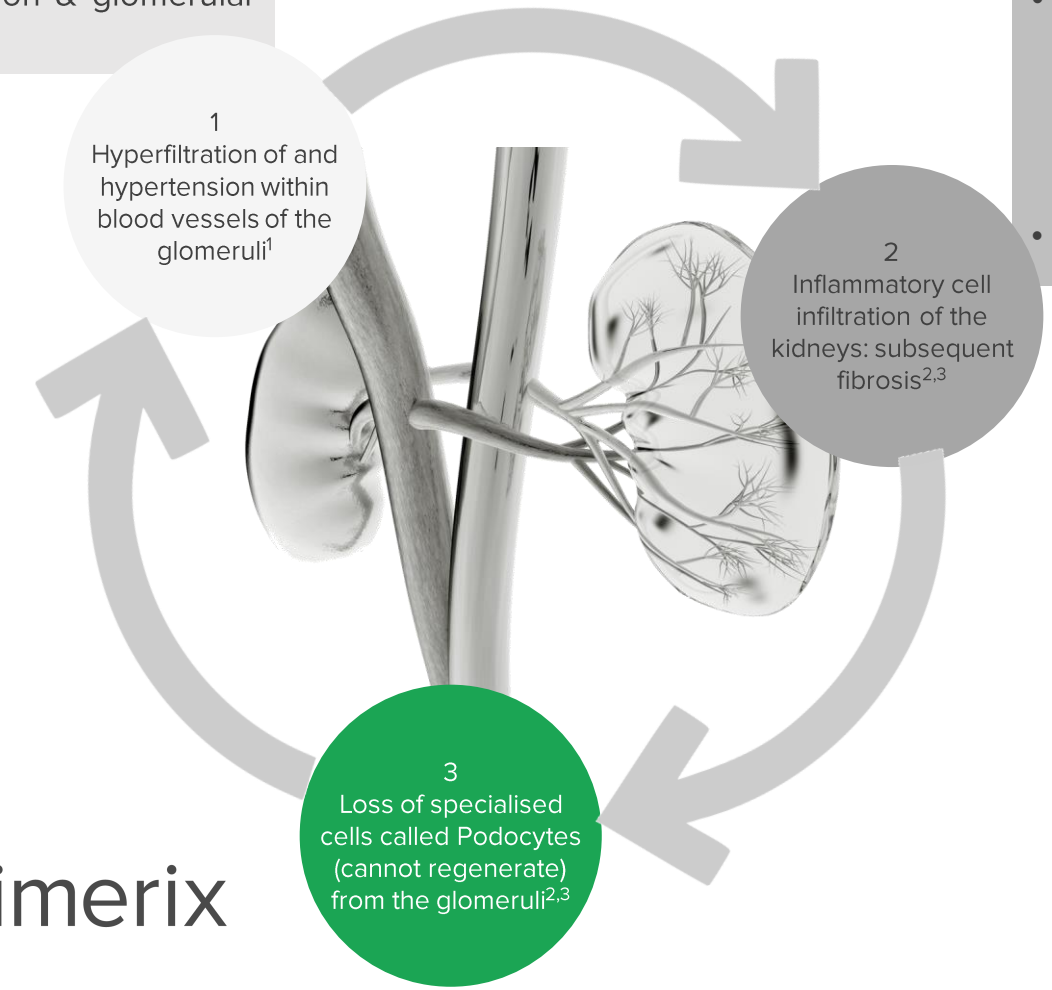
1. *Thompson et al., (2019) CJASN, 14 (3) 469-481; https://doi.org/10.2215/CJN.08600718*
2. *FDA pulication, (2021); FDA approves first drug to decrease urine protein in IgA nephropathy, a rare kidney disease https://www.fda.gov/drugs/fda-approves-first-drug-decrease-urine-protein-iga-nephropathy-rare-kidney-disease*
3. *ASX releases: 14Dec15, 21Nov18, 07Jun21*

DMX-200 proposed mechanism of action

DMX-200 addresses three key mechanisms that causes renal damage and sclerotic kidney disease

Irbesartan blocks angiotensin receptors (AT1R) responsible for hyperfiltration & glomerular hypertension[1]



DMX-200 inhibits chemokine receptor (CCR2) which initiates attraction of inflammatory cells into the kidneys[3]

- Monocyte chemoattractant protein-1 (MCP-1):
  - key chemokine that regulates migration & infiltration of immune cells responsible for inflammation
  - lower levels of MCP-1 translates to less inflammation
- CCR2 is the receptor for MCP-1 [3]

Dimerix' proprietary discovery tool determined a functional interaction between AT1R and CCR2[2]

Certain kidney cells express both receptors, thus using only 1 compound does not block activation and results in only a partial response[2,3]

DMX-200 unique proposition:
total benefit is greater than the sum of the two individual effects[2,3]

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1. *Lewis, E. J. et al. (2001), New Engl J Medicine 345, 851–860*
2. *ASX releases from 09Feb2016 through to 29Feb2022*
3. *Ayoub MA, et al. (2015) PLoS ONE 10(3): e0119803*

Kidney Disease Development Overview

Focal Segmental Glomerulosclerosis

- A rare disease that attacks part of the kidney, causing inflammation and irreversible scarring[1];
- Leads to permanent kidney damage and eventual end-stage kidney failure, requiring dialysis or transplantation

Focal = **some**

Segmental = **sections**

Glomerulo = **of the kidney filtering units**

Sclerosis = **are scarred**

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1. Guruswamy Sangameswaran KD, Baradhi KM. Focal Segmental Glomerulosclerosis (July 2021), online: https://www.ncbi.nlm.nih.gov/books/NBK532272/

FSGS: unmet need and market potential

No therapies yet approved for FSGS

~40,000
people in the US are diagnosed with **FSGS**[1]

50%
of patients with FSGS will progress to kidney failure[2]

~1000
FSGS patients in US receive a kidney transplant each year[2]

>US$7,000
cost of average orphan drug per month in US[5] (US$84,000/yr)

20,000
FSGS patients in US have kidney failure[2]

2x
more common in males[4]

>5,400
patients in the US are diagnosed with FSGS each year[1]

20%
of child nephrotic syndrome cases caused by FSGS[2]

60%
patients have reoccurring FSGS after first kidney transplant[3]

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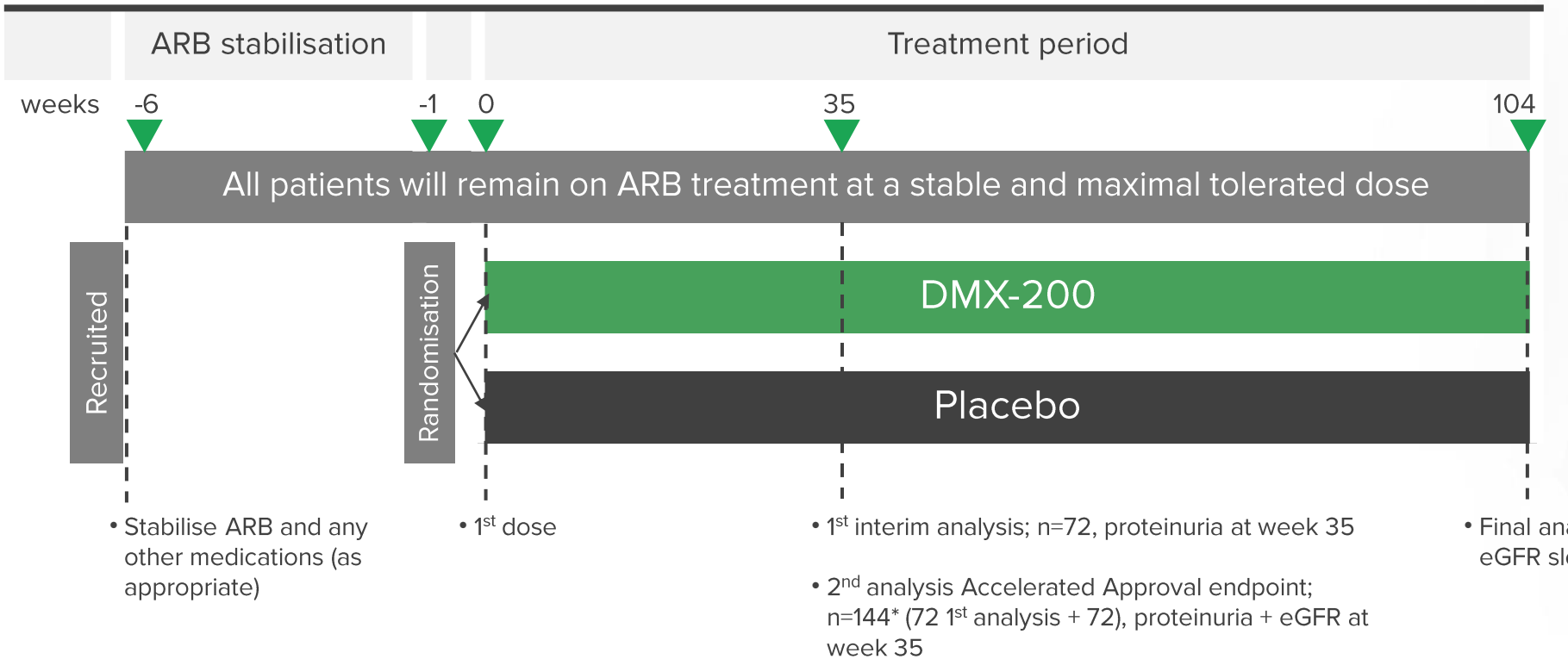
1. *Nephcure Understanding FSGS 2022: https://nephcure.org/livingwithkidneydisease/ns-and-other-glomerular-diseases/understanding-fsgs/*
2. *Nephcure FSGS factsheet 2022: https://2eu46v1q93c11mayx1nfvwg6-wpengine.netdna-ssl.com/wp-content/uploads/2021/02/nc.factSheet.FSGS_210106.pdf*
3. *Front. Immunol., 17 July 2019 | https://doi.org/10.3389/fimmu.2019.01669*
4. *Nephron 2020;144:413-427, https://doi.org/10.1159/000508099*
5. *2018, IQVIA , Orphan Drugs in the United States: Growth Trends in Rare Disease Treatments*

FSGS phase 3 study design

ACTION3
FSGS CLINICAL STUDY

A randomised, double-blind, multi-centre, placebo-controlled study of renal outcomes of DMX-200 in patients with primary FSGS receiving an ARB



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ARB: Angiotensin Receptor Blocker
**Subject to recruitment rate and conditional power*
Accelerated endpoint: Marketing approval for serious conditions that fill an unmet medical need based on a surrogate or an intermediate clinical endpoint

FSGS phase 3 study locations

ACTION3

FSGS CLINICAL STUDY

A randomised, double-blind, multi-centre, placebo-controlled study of renal outcomes of DMX-200 in patients with primary FSGS receiving an ARB

Global study with ~70 sites in 12 countries:

Country	Regulatory and/or ethics approval
Australia	✓
Argentina	✓
Brazil	✓
Denmark	✓
France	✓
Hong Kong	✓
New Zealand	✓
South Korea	✓
Spain	✓
Taiwan	✓
UK	✓
USA	

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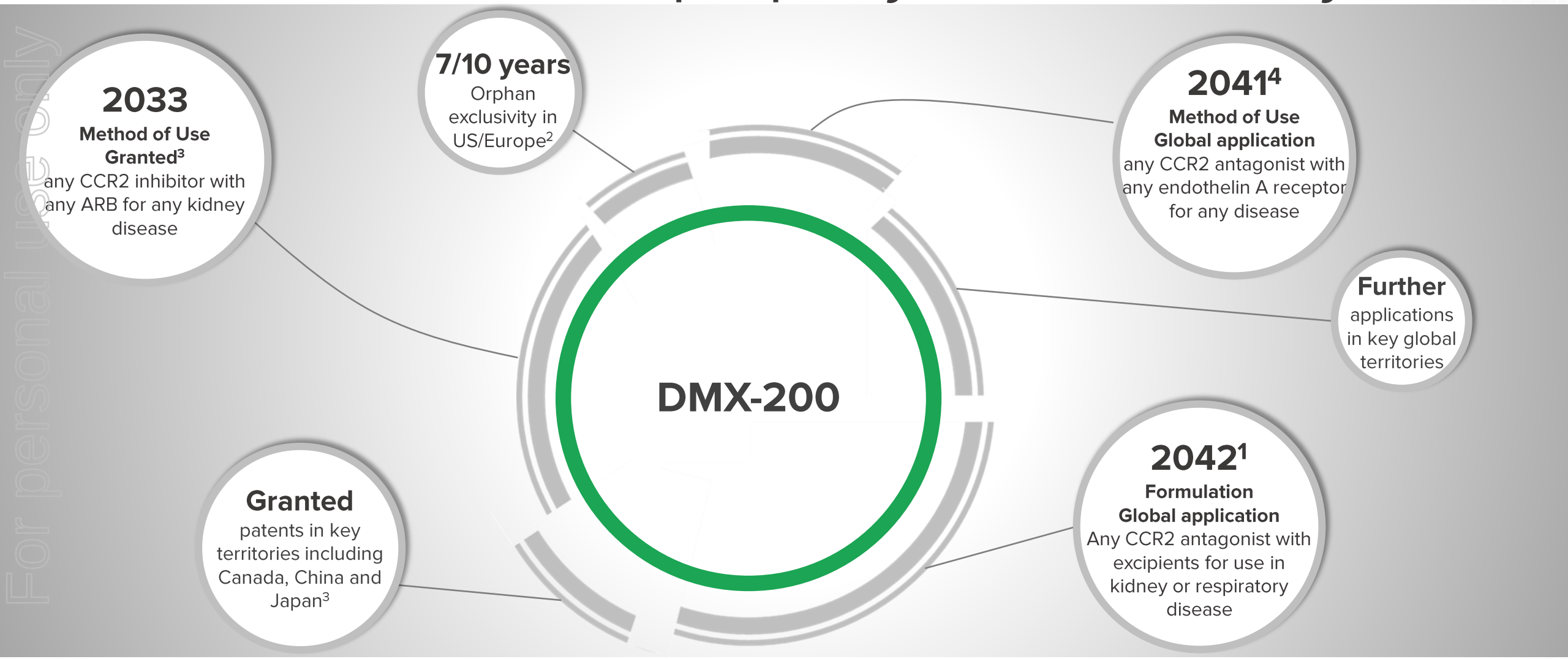
DMX-200 Intellectual property and exclusivity



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1. *If patent applications are granted: PCT/AU2022/050013;*
2. *DMX-200 is a New Chemical Entity (NCE): an active moiety not approved before which can attract exclusivity periods in various territories*
3. *Granted patents US9,314,450; US10,058,555; US10,525,038; CN2012800046165; CA2,821,985; EP12734251.7; HK 4104477.8; IL227414; JP2013-547780; SA203/5897; AU2012206945*
4. *If patent applications are granted: PCT/AU2022/50249*

ARB: angiotensin receptor blocker; CCR2: chemokine receptor 2 inhibitor

Infection Related Pneumonia

Pneumonia (including COVID-19) market potential

3 million
deaths annually caused by lower respiratory tract infections pre-COVID[1]

US$17 billion
pre-COVID: Pneumonia responsible for US$17 billion in healthcare costs each year in the US[1]

US$18.5 billion
market forecast expected by 2029, growing at 10%/year[3]

4.5 million:
COVID-19: caused 476 million cases globally to date, resulting in >6.1 million deaths *and counting*[2]

20-30%
of all patients with pneumonia require admission to Intensive Care Units[1]

$ 2,300-4,600
The cost of treatment with Tocilizumab (IL-6 receptor antagonist used for COVID-19): IV single dose[4]

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1. *REMAP-CAP background: https://www.remapcap.org/background*
2. *WHO COVID dashboard: https://covid19.who.int/*
3. *Data Bridge Market Research 2022, https://www.databridgemarketresearch.com/reports/global-acute-respiratory-distress-syndrome-ards-market*
4. *Dose and therefore cost varies with patient weight; PharmacoEconomics & Outcomes News 2021; volume 879, p.28*

Potential benefits of DMX-200

Antiviral medications:

Typically effective at preventing damage caused by a virus when administered

within 3-5 days of infection[1]

when many are asymptomatic

DMX-200:

Does not rely on early inhibition of viral replication

–

DMX-200 aims to prevent damaging immune response regardless of vaccination or antiviral treatment

DMX-200:

May be beneficial for patients with a wide range of respiratory diseases in addition to COVID[2]

Antivirals are usually very specific for a virus and sometimes even the particular strain of the virus[1]

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1. *Brown L et al (2021) Early antiviral treatment in outpatients with COVID-19 (FLARE): a structured summary of a study protocol for a randomised controlled trial: DOI: 10.1186/s13063-021-05139-2*
2. *Based on Szabo, et al., 2020; Merad, et al., 2020; Xiong, et al, 2020; Wu, et al., 2021; Chen, et al., 2009; Yong, et al., 2016*

Two investigator-led phase 3 studies in COVID-19 patients

- **REMAP-CAP analysis underway and will be reported as soon as received by Dimerix - anticipated imminently;**
- **Further recruitment paused pending interim data analysis[1]**

REMAP-CAP

Population: COVID-19 pneumonia in ICU
- ~779 patients recruited to the study domain
- WHO endorsed study
- Primary endpoint = 21 day mortality

Patients were randomised patients to receive one of:

1. Angiotensin receptor blocker (ARB) alone
2. Angiotensin converting enzyme (ACE) inhibitor alone
3. **ARB simultaneously with DMX-200**
4. No RAS inhibitor (no placebo)

- **CLARITY 1.0 analysis to be published imminently;**
- **CLARITY 2.0 analysis to report after initial 80 patients – now anticipated Q2 22**

CLARITY

Population: COVID-19 respiratory complications
- Recruiting >600 patients in India and Australia
- Primary endpoint = 14 day WHO Clinical Health Score
- Interim analysis once first 80 patients recruited

Patients randomised patients to receive one of:

1. Angiotensin receptor blocker (ARB) + Placebo
2. **ARB simultaneously with DMX-200**
3. Placebo + Placebo

Secondary endpoints: recovery and quality of life post hospitalisation (long-COVID assessment)

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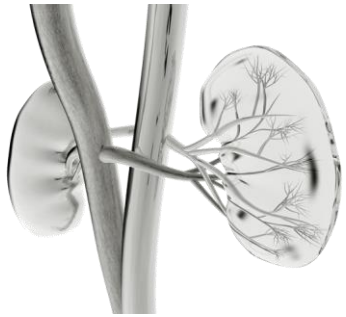
1. ASX release 28Feb22

Additional longer term propositions

Additional asset value propositions

Longer term opportunities



DMX-200

Diabetic Kidney Disease

Addressable market

US$1.1 billion*

Key driver is the rise in diabetes global incidence

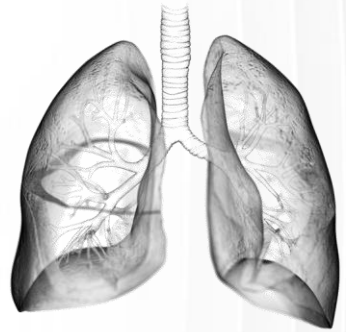
Diversifying risk and potential sources of revenue

DMX-700

Chronic Obstructive Pulmonary Disease

Global COPD treatment market (2017)

US$14 billion**



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* *2017 IQVIA ARB prescription and pricing data;*

** *https://www.marketwatch.com/press-release/chronic-obstructive-pulmonary-disease-copd-therapeutics-market-global-industry-analysis-trends-market-size-and-forecasts-up-to-2030-2021-11-10?tesla=y*

Corporate Outlook

Potential value driving events

2021 → 2022

- ✓ DMX-200 demonstrated **encouraging clinical efficacy** and **strong safety profile** across multiple Phase 2 renal clinical studies
- ✓ Consistent advice received from **FDA, EMA and UK MHRA** on FSGS Phase 3 study design
- ✓ Orphan Drug Designation/**accelerated approval pathway** granted by US FDA, EU EMA and UK MHRA for FSGS
- ✓ Two independent Phase 3 clinical studies underway in patients with **COVID-19 respiratory complications**
- ✓ DMX-200 **manufacturing process optimised** to improve commercial scalability and global logistics
- ✓ DMX-700 in COPD progressed further towards **clinical development**
- ✓ Expansion of **IP portfolio**
- ✓ Strong **financial position**

- ✓ FSGS **ethics approval** and clinical **site initiations**
- ☐ FSGS Phase 3 study **recruitment** and first patient **first dose**
- ☐ REMAP-CAP Phase 3 COVID-19 study recruitment and **top line data**
- ☐ CLARITY 2.0 Phase 3 COVID-19 study recruitment and **top line data**
- ☐ DMX-700 for Chronic Obstructive Pulmonary Disease progression towards **clinical study**
- ☐ Diabetic kidney disease **clinical study** design and next steps
- ✓ Further expansion of **IP portfolio**
- ☐ FSGS **Phase 3 study Part 1 analysis** and progression to Part 2

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A biopharmaceutical company developing innovative new therapies in areas with unmet medical needs, with a core focus on inflammatory disease treatments such as kidney and respiratory diseases.

Advancing three Phase 3 opportunities

Well positioned to deliver against strategic plan

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ESG Statement

Dimerix is committed to integrating Environmental, Social and Governance (ESG) considerations across the development cycle of its programs, processes and decision making. The Dimerix commitment to improve its ESG performance demonstrate a strong, well-informed management attitude and a values led culture that is both alert and responsive to the challenges and opportunities of doing business responsibly and sustainably.

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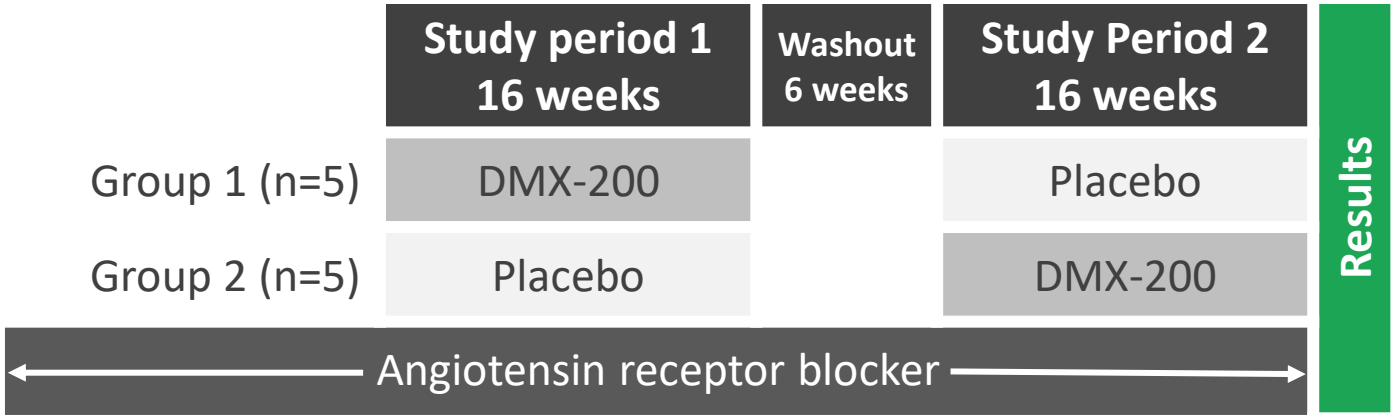
Appendix

Phase 2a trial in FSGS completed

Phase 2a DMX-200-202 (ACTION for FSGS): Phase 2a, Double-blind, Randomised, Placebo-Controlled, **Crossover** Study Evaluating the Safety and Efficacy of DMX-200 in Patients with Primary Focal Segmental Glomerulosclerosis who are Receiving Irbesartan

- *Primary endpoint: safety. Secondary endpoint: proteinuria and biomarker analysis.*
- *Patient population: Patients with primary FSGS who are receiving irbesartan*



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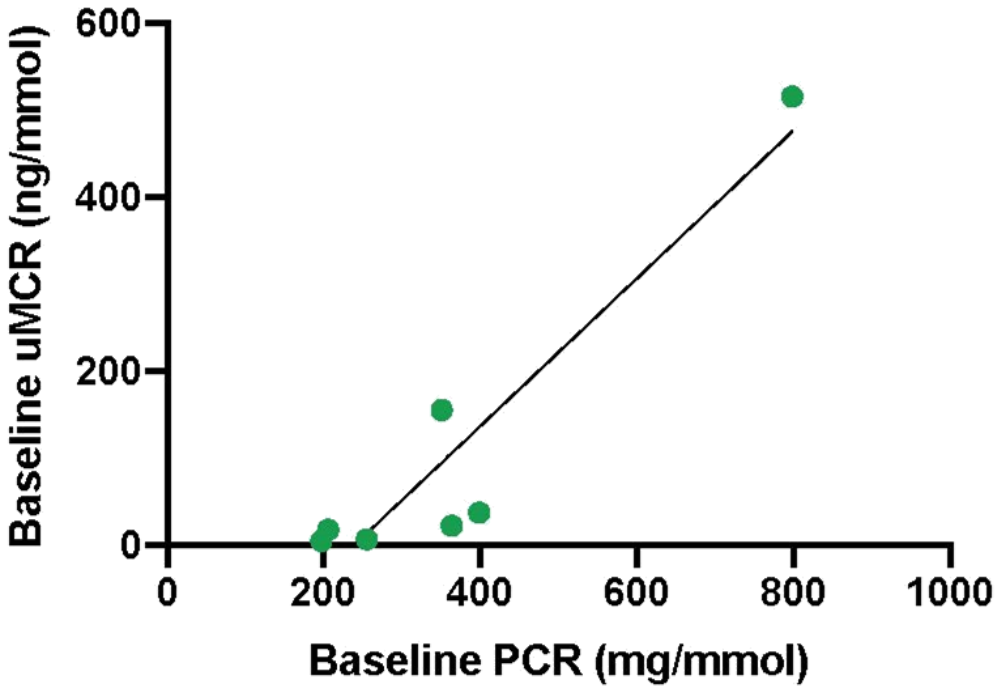
10 patients enrolled, 7 patients qualified for the evaluable population and final analysis

DMX-200 inflammatory biomarker

Average baseline MCP-1 versus average baseline proteinuria



DMX-200 Phase 2 study confirmed high MCP-1 correlates to high proteinuria in FSGS patients

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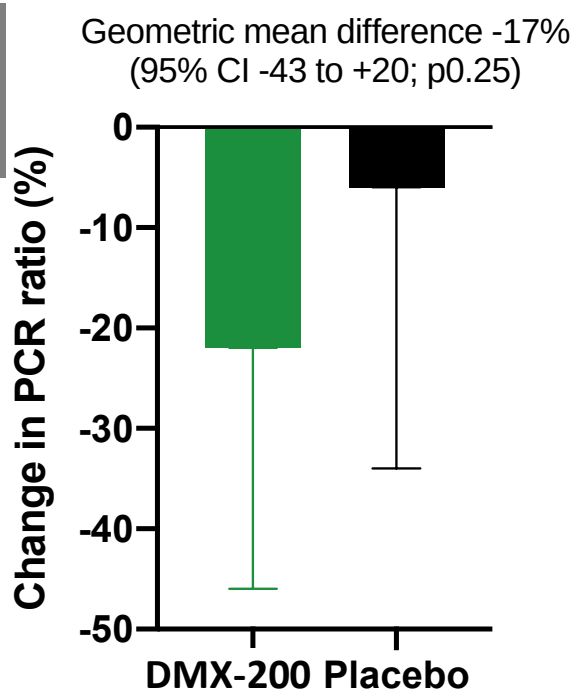
uMCR = Urinary MCP-1 creatine ratio
PCR = protein creatinine ratio

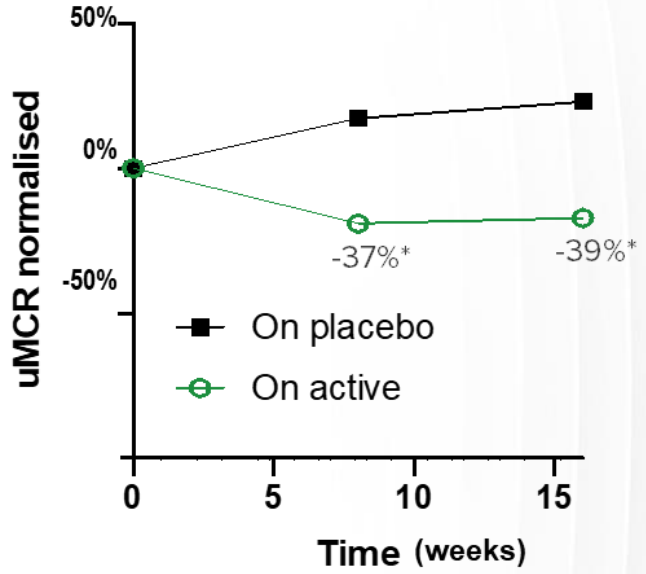
DMX-200 PCR summary

Change in uPCR over time on DMX-200 versus placebo

(repeat measures mixed model)



Change in MCP-1 over time on DMX-200 versus placebo



16 weeks treatment with DMX-200 vs placebo:

- **17% reduction of uPCR:** mixed model, repeat measures statistical test; *(grouped analysis model shows a 25% drop in uPCR)*
- **39% reduction inflammatory biomarker MCP-1**:
  - DMX-200 blocks receptor responsible for inflammation
  - translates to reduced inflammation and subsequent fibrosis (scarring) in the kidney

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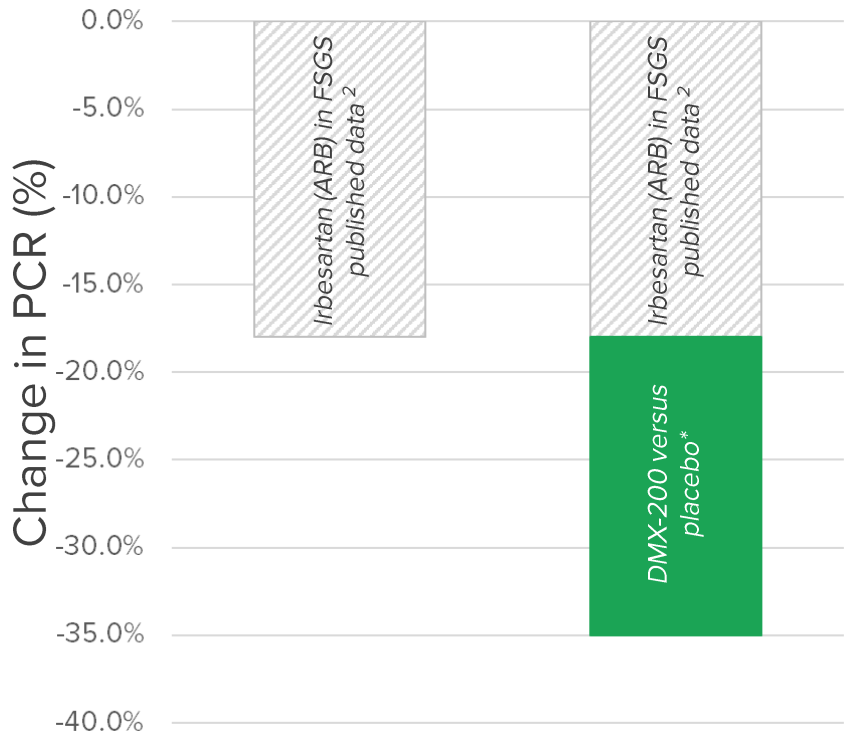
uMCR = Urinary MCP-1 creatine ratio
PCR = protein creatinine ratio
**placebo adjusted difference*

DMX-200 treatment group met primary and secondary endpoints

Average reduction in proteinuria after 16 weeks treatment on DMX-200 versus placebo compared to standard of care alone in FSGS patients[1]



- DMX-200 demonstrated clear benefit to patients with FSGS
  - 86% of patients demonstrated reduced proteinuria on DMX-200 versus placebo
  - 29% of patients demonstrated >40% reduction in proteinuria
  - Results comparable to other compounds in development[2]
- DMX-200 was safe and well-tolerated
- DMX-200 may be complementary to other development compounds, such as sparsentan[3]

No safety concerns – reduced development risk

DMX-200 compares favourably to compounds currently in development[2,4]

PCR = protein creatinine ratio
ARB = angiotensin receptor blocker

1. Repeated measures mixed model analysis; top line data was reported as grouped analysis
2.Trachtman, et al., 2018. J Amer Soc Nephrology 29(11):2745-2754
3.ASX release 24Mar21
4.Based on: a) https://lupkynispro.com/safety/; b) https://www.reatapharma.com/investors/news/news-details/2021/Reata-Pharmaceuticals-Announces-Outcome-of-FDA-Advisory-Committee-Meeting-of-Bardoxolone-for-the-Treatment-of-Patients-with-Chronic-Kidney-Disease-Caused-by-Alport-Syndrome/default.aspx; c) https://pubmed.ncbi.nlm.nih.gov/31343124/; https://www.goldfinchbio.com/news-features/goldfinch-bio-presents-clinical-data-from-phase-1-trial-supporting-advancement-of-gfb-887-as-a-precision-medicine-for-patients-with-kidney-diseases/

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