emyria
(ASX:EMD)

Creating **tomorrow's therapies**
from **today's *patient stories***

Strategic Update & Rights Issue Launch
September 2023 | mwinlo@emyria.com

emyria

OUR MISSION

Set a new standard for global mental health care by blending compassionate care, data insights and pioneering therapies.

7 INVESTMENT HIGHLIGHTS for EMYRIA (ASX : EMD)

Australia is leading the charge globally in new treatments for mental health

The TGA's decision to legalise psychedelics, which came into force in July 2023, puts Emyria and Australia potentially years ahead of other jurisdictions like the US.

A regulatory environment that advantages Emyria

At the forefront of psychedelic assisted treatment

Emyria has the infrastructure (clinics and team) and approved care models needed to provide psychedelic treatments under TGA rules.

Ready to be one of the first ASX companies providing these treatments

Novel MDMA products

Emyria has partnered with UWA to develop a number of novel MDMA-like treatments.

The goal is to modify MDMA and unlock new therapeutics for neuropsychiatric disorders like Parkinson's disease.

Strong IP covering potentially unique medicines

Unparalleled access to patient data

Through our clinics, Emyria has access to opt-in patient data and uses a state-of-the-art data platform - Palantir Foundry - to reveal unique insights.

Data that informs better care practices and drug development opportunities

Clinics delivering revenue

Emyria provides wraparound, multidisciplinary mental health care services to patients.

We made $1.6M last FY, targeting $5.7M this FY.

Revenues subsidise R&D

CBD "Side bets"

Emyria is developing Ultra-Pure CBD for the treatment for anxiety symptoms and pain.

We have secured a commercial partner and are working with others, such as, the National Institutes of Health in the US to advance the program

CBD products in clinical trials

Experienced management team

Emyria's Board and Management are highly qualified in technology-backed clinical services, data and drug development.

Global advisors to support our global ambitions

Rising Demand, Inadequate Solutions

$225 Billion

US Spending (2019) [1]

Despite large costs, a gaping need for affordable, effective and durable treatments persists.

The Promise of Psychedelic-Assisted Therapy

Psychedelic-assisted therapy is showing promising results in large clinical trials. [2]

This is encouraging significant clinical interest and investment, globally.

The Challenge of Psychedelic-Assisted Therapy

Safe delivery of psychedelic-assisted therapy demands cooperation between therapists and psychiatrists, thoughtful preparation of the clinic environment and careful diagnosis, screening, expectation setting and monitoring with patients.

Very few clinical services are prepared for these treatments, limiting patient access.

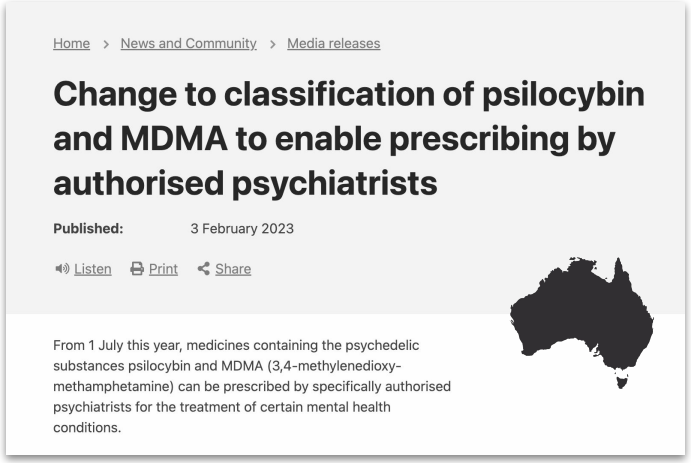
emyria

SOURCES:
1. https://www.behavr.com/mental-wellness
2. Mitchell, J.M., Bogenschutz, M., Lilienstein, A. et al. MDMA-assisted therapy for severe PTSD: a randomized, double-blind, placebo-controlled phase 3 study. Nat Med 27, 1025–1033 (2021)
3. https://www.tga.gov.au/products/unapproved-therapeutic-goods/mdma-and-psilocybin

AUSTRALIA'S FRONTIER | EMBRACING DRUG-ASSISTED THERAPIES

Leading the Global Charge

TGA's recent rescheduling [1] of **MDMA**-assisted therapy (MDMA-AT) for PTSD & **psilocybin**-assisted therapy (P-AT) for treatment resistant depression creates immense potential for innovators in mental health.



Australia's proactive stance on psychedelic therapies places it at least a year ahead of the rest of the world.

Not Just Drugs, But Holistic Care

"For approval to prescribe, psychiatrists will need to demonstrate ***appropriate training,*** *patient selection,* ***evidence-based treatment protocols*** *and* ***patient monitoring.***

Further, ongoing ***psychotherapeutic support remains an essential component*** *of the psychedelic treatment model."*

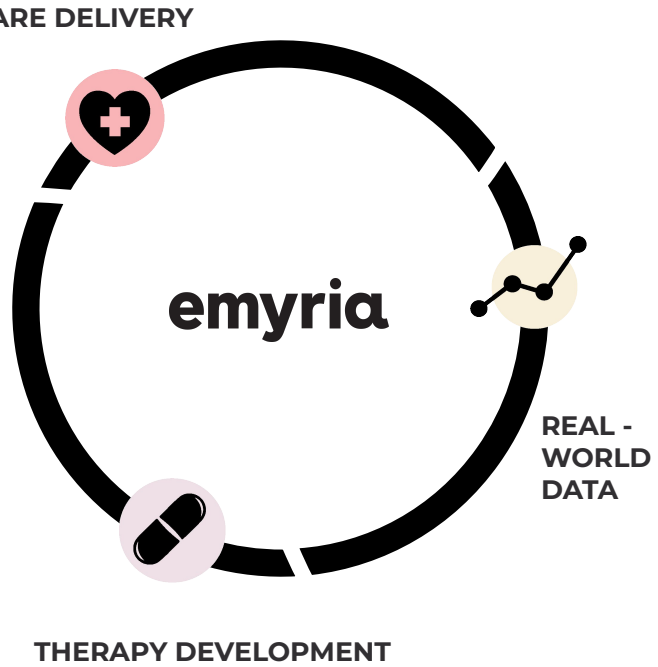
-RANZCP *(College of Psychiatrists)* [2]

The Royal Australian & New Zealand College of Psychiatrists

Emyria's Model is Well Positioned

The future of mental healthcare will intertwine new drugs with new care models.

With unique expertise in drug development & care delivery, underpinned by data, Emyria is uniquely prepared to lead this new frontier.



SOURCES:
1. https://www.tga.gov.au/products/unapproved-therapeutic-goods/mdma-and-psilocybin
2. RANZCP has not provided its consent to be named or for the statement to be included in this Presentation

EMYRIA'S UNIQUE BUSINESS MODEL | MERGING CARE DELIVERY & DRUG DEVELOPMENT

care DELIVERY

- National clinics & telehealth
- 30 clinicians & specialists
- 14,000+ patients treated *so far*
- Innovative care provision:
  - MDMA-AT
  - Cannabinoid medicines

+

real-world DATA

- We track clinical outcomes
- Palantir Foundry as core data platform for analysis
- Remote patient monitoring

+

drug DEVELOPMENT

- MDMA-inspired medicines
- Ultra-Pure CBD medicines

Potential for sustainable service *Revenues & Data*

Potential for *Milestone & License Revenues*

emyria

(1) Solidify Multiple Potential Revenue Streams *Via:*

DIRECT PATIENT TREATMENTS:
Provides potential to generate steady revenues from patients and health payers. We specialise in emerging treatments.

STRATEGIC CLINICAL PARTNERS:
By licensing our methodologies we can potentially unlock additional revenues and foster innovation. [1]

DRUG PROGRAM LICENSES:
As our drug development initiatives mature and succeed, they may present revenue opportunities through licensing and partnerships.

(2) Sustainable National and Global Growth *Via:*

TECH-DRIVEN OPTIMISATION
Leveraging technology ensures efficient operations, better patient outcomes, & scalability.

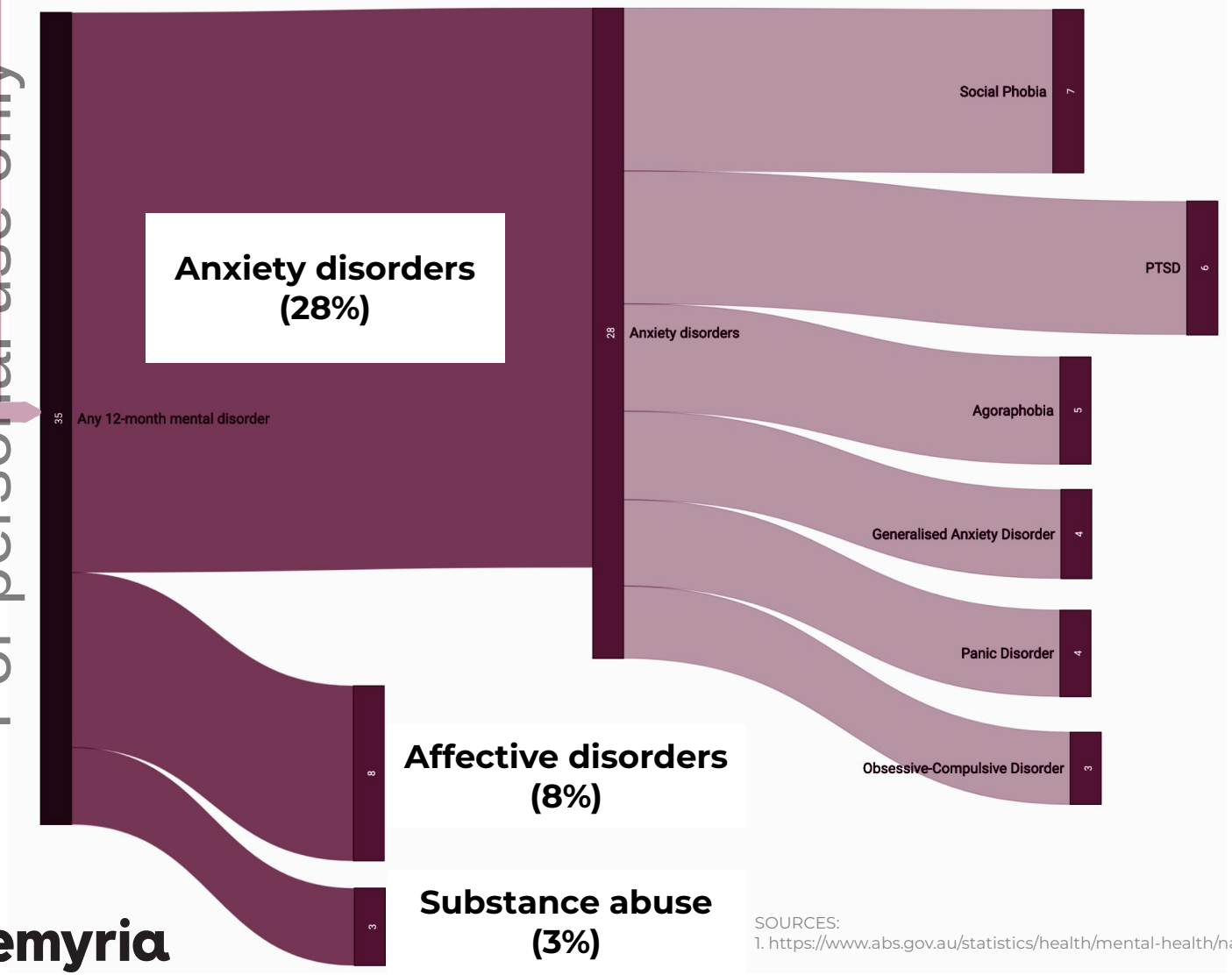
EXTENDING OUR FOOTPRINT:
With a robust model in place, we can expand organically or via strategic partnerships or acquisitions.

emyria

1. No licensing or partnership agreements have been entered as at the date of the presentation but it is a focus point of the Company in the near term to progress negotiations for such agreements

OUR CURRENT FOCUS | COMPLEX MENTAL HEALTH

35% of Australian adults experienced at least 1 mental health challenge in the last 12 months [1]



PTSD (6%)

Amidst Australia's mental health landscape, we're prioritising unmet needs in **anxiety disorders** with proprietary dose forms of **cannabinoids** and **MDMA-AT for complex & chronic PTSD.**

As PTSD shares substantial symptom overlap with **depression** and **chronic pain**, we believe our approach has the potential to positively impact these adjacent mental health conditions.

Given the recent TGA changes and our multidisciplinary team, *Emyria is starting with MDMA-AT for PTSD.*

emyria

SOURCES:
1. https://www.abs.gov.au/statistics/health/mental-health/national-study-mental-health-and-wellbeing/latest-release#key-statistics

WHAT IS POST-TRAUMATIC STRESS DISORDER (PTSD)? [1]

A chronic, debilitating mental health disorder that can occur following a traumatic event

Symptoms

Re-experiencing:
Intrusive memories, flashbacks, and nightmares

Avoidance:
Evading reminders of the trauma and feeling detached

Increased arousal:
Irritability, sleep issues, and being easily startled

Mood & cognition:
Persistent negative emotions and distorted blame

Physical symptoms:
Palpitations, sweating, and gastrointestinal issues

Current Treatments

TREATMENT OPTIONS FOR PTSD

COUNSELLING & PSYCHOTHERAPY

PRESCRIPTION

EXPOSURE THERAPY
Re-imagining events in a safe environment

GROUP THERAPY

Up to 50% treatment resistance [2]

Market for MDMA-AT [3]

Total Addressable Market (TAM)
In any 12 month period, PTSD affects 6% of Australian adults
~1,000,000 (much greater globally)

Serviceable Addressable Market (SAM)
50% of sufferers have treatment chronic/severe PTSD; ~22% not suitable
Eligible for MDMA-AT ~400,000

Early Target Market
1-10% of patients suitable for MDMA-AT in Western Australia:
~300 to 3,000 patients

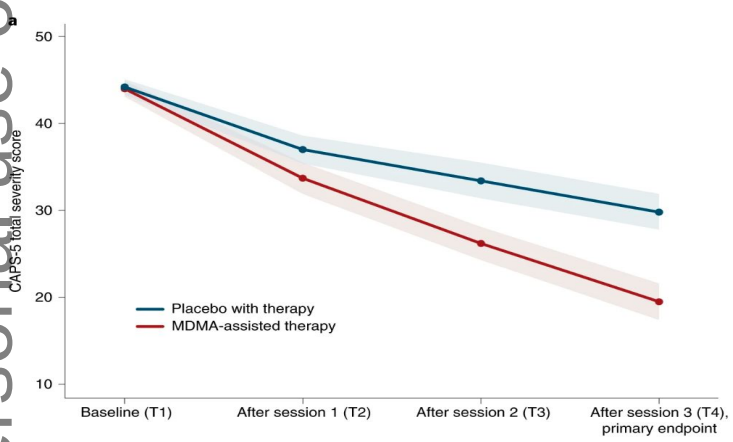
At ~$30k/pt for three MDMA-AT sessions, there exists an opportunity for transformative healing for patients and a promising revenue stream to support our growth

emyria

SOURCES:
1. Davis LL, Schein J, Cloutier M, et al. The economic burden of posttraumatic stress disorder in the United States from a societal perspective. J Clin Psychiatry. 2022;83(3):21m14116
2. Committee on the Assessment of Ongoing Efforts in the Treatment of Posttraumatic Stress Disorder; Board on the Health of Select Populations; Institute of Medicine. Washington (DC): National Academies Press (US); 2014 Jun 17.
3. See workings on SLIDE 31

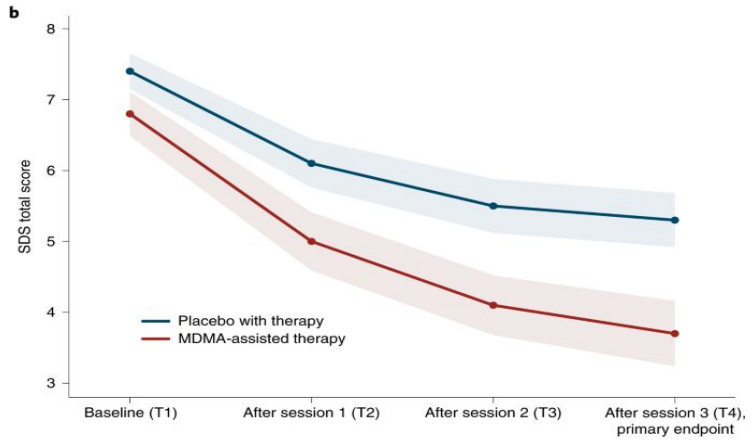
MDMA-ASSISTED THERAPY (MDMA-AT) SHOWING REMARKABLE PROMISE FOR PTSD [1]

Improves *symptoms*



MDMA-AT significantly attenuated PTSD symptomology, as shown by the change in CAPS-5 total severity score from baseline to 18 weeks after baseline[1]

Improves *function*



MDMA-AT significantly reduced clinician-rated functional impairment, implying an improved quality of life, as shown by the change in Sheehan Disability Scale score from baseline to 18 weeks after baseline[1]

Durable *benefits*

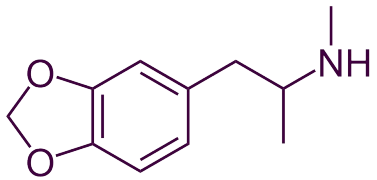
> ***"The majority of participants reported lasting benefits at Long Term Follow-Up, and over half reported benefits continued to grow, suggesting participants were able to successfully integrate therapeutic experiences into their daily lives to cultivate continued healing and growth" [1]***

emyria

SOURCES:
1. Mitchell, J.M., Bogenschutz, M., Lilienstein, A. et al. MDMA-assisted therapy for severe PTSD: a randomized, double-blind, placebo-controlled phase 3 study. Nat Med 27, 1025–1033 (2021)

HOW DOES MDMA-AT WORK?

MDMA



MDMA *(3,4-methylenedioxymethamphetamine or "ecstasy")*

Causes release of 3 neurotransmitters:

Serotonin
contributes to mood, prosocial effects

Dopamine
associated with reward, euphoria

Noradrenaline
stimulant activity, attention

Clinical Effects of MDMA

MDMA is an "entactogen" - drugs that produce feelings of emotional communion, oneness, relatedness, emotional openness & fear extinction.

INCREASES
- feelings of wellbeing
- sociability & extroversion
- interpersonal trust

AN ALERT STATE OF CONSCIOUSNESS

DECREASES
- feelings of fear & defensiveness

Role in Therapy

MDMA is thought to assist patients access traumatic memories without overwhelming distress.

The improved feelings of trust and wellbeing while under the influence of the medication can support open communication and strengthen the therapeutic alliance between patient and therapist.

Reduced defensiveness is thought to facilitate more honest introspection and acceptance of therapeutic guidance.

Ultimately, these features are believed to improve the efficacy of skilled psychotherapy.

Risks & Exclusions

Patients with cardiovascular disease or psychotic disease are generally excluded from therapy. The main side effects of therapy can include anxiety, restlessness, fatigue, jaw-clenching, headache and transient increases in blood pressure - all of which are closely monitored during therapy.

emyria

EMYRIA'S MDMA-AT MODEL

Ethics-Approved Care Model [1]

Fit-for-purpose clinical space

Trained multidisciplinary team

Stringent clinical governance & oversight

Two therapists for all sessions

GMP-grade medicine & tight supply chain

PRE-TREATMENT PERIOD
2-12 weeks

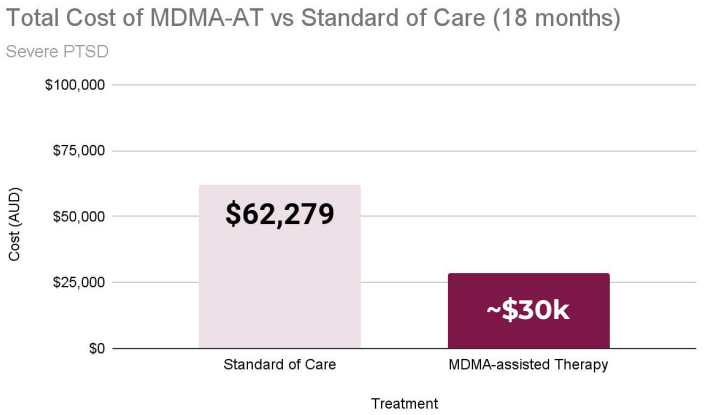
↓

3 CONSECUTIVE TREATMENT & INTEGRATION PERIODS
(12 weeks)

↓

FOLLOW-UP PERIOD
(12 months from last Treatment Session)

Anticipated Cost-Effective Compared to Standard Care[2]



MDMA-AT anticipated to be cost effective especially for severe PTSD over an 18 month time period. [2]

Avenceña et al noted that increased access to MDMA-AT could save lives and improve the health of patients with chronic and severe PTSD, while reducing healthcare costs. [3]

Who Might Pay For MDMA-AT?

Health insurers and government
We will approach payers to offer our support in the evaluation cost-effectiveness for these new treatment approaches.

Individual patients - patients will not be expected to pay while participants in clinical trials, however, once Authorised Prescriber status has been obtained there is the possibility to offer access to patients able to pay out-of-pocket

emyria

SOURCES:
1. See ASX release 08 June 2023
2. Cost estimates from internal evaluation. Majority of costs related to Standard of Care related to in-patient treatment costs. Majority of costs related to MDMA-AT related to length of therapist engagement
3. See Avanceña, A.L.V., et al. The Costs and Health Benefits of Expanded Access to MDMA-assisted Therapy for Chronic and Severe PTSD in the USA: A Modeling Study. Clin Drug Investig 42, 243–252 (2022) AND

OUR TEAM'S ADVANTAGES | LEADERS IN *CARE*, *DATA* and *DRUG DEVELOPMENT*

Innovative Care Delivery

Our team has experience across clinical care, consulting, and academia. With backgrounds ranging from specialist medical practitioners with esteemed roles in primary health care and medical councils, our team understands the challenges and intricacies of sustainable healthcare delivery.

emerald clinics
BLACK SWAN HEALTH LTD
Bupa
PaxCentre
Oak St. Health

Data, Research & Technology

With experience at from Silicon Valley tech giants to innovative healthcare tech startups, our team understands the world of complex data integration and analysis. With experience advising the FDA on tech initiatives and leadership roles in healthcare data firms, we understand the potential for modern tech and data to revolutionise mental health care.

Palantir
DeepMind
The Academy of Medical Sciences
THE UNIVERSITY OF WESTERN AUSTRALIA
Stanford University

Global Drug Development Success

Our team has experience across the vast spectrum of the drug development lifecycle. With involvement in numerous clinical trials, major regulatory approvals across continents, and leadership in global biotech firms, we have the breadth and depth of knowledge to navigate the intricate pathways of drug innovation.

Jazz Pharmaceuticals
linear
botanix PHARMACEUTICALS
ortho cell
advancing tissue repair & regeneration

OUR BOARD

CHAIRMAN
Dr Stewart Washer
PhD (Microbiology)
Serial entrepreneur
Multiple ASX listings

NE-DIRECTOR
Prof Sir John Tooke
FRCP, FMedSci
Clinician-researcher
Expert in learning health systems

E-DIRECTOR
Dr Karen Smith
MD, PhD, MBA, LLM
US-based biopharma executive. Multiple FDA approvals

MANAGING DIRECTOR
Dr Michael Winlo
MBBS(Hons), MBA
Entrepreneur, big data, clinical trials and drug development

NE-DIRECTOR
Dr Mohit Kaushal
Technology enabled clinical services, strategy and investment

MEDICAL DIRECTOR
C/Prof Alistair Vickery
MBBS, FRACGP, FCHSM
Medical Director
Epidemiological researcher

CLINICAL & SCIENTIFIC LEADERSHIP

Claire Kullak
BSc (Nursing)
Trauma-specialist and nationally recognised trainer

Dr Jon Laugharne
MBBS, FRCP (UK), FRANZCP
Consultant psychiatrist & therapist

Dr Jenny Morgan
MBBS, FRANZCA
Consultant pain specialist

Prof Matt Piggott
BSc, PhD (Chemistry)
Specialist in amphetamine chemistry and novel drug design

Dr David Gunn
MBBS, FRACGP
Cannabinoid expert
Substance abuse & mental health treatment

Dr Jeremy Tannenbaum
BSc, MBBS (Hons), FRANZCP
Consultant Pain Specialist
Consultant Psychiatrist

PROVEN MOMENTUM | TRACTION TO DATE

Key Milestones Achieved

MDMA-assisted therapy (MDMA-AT)
Ethics-approved protocol, training completed & drug supply secured [1]

>150 Novel MDMA analogues
Created and screened large library of unique MDMA-like compounds [2]

3 proprietary dose forms of CBD
In preclinical and clinical trials [3]

Commercial partner
Secured Aspen Pharmacare for sales and distribution of EMD-RX5 pending successful registration with the TGA [4]

aspen AUSTRALIA

Robust Patient Outcomes

14,000
Patients treated through our clinical services network

30% reduction in opioids
After 6 months care at Emerald Clinics [5]

emerald clinics

4 years of symptom improvement
Across anxiety, depression, stress & sleep [6]

Strategic Growth Initiatives

PaxCentre

Acquisition of Australia's leading, multidisciplinary psychological trauma treatment centre [7]

Palantir

Member the Foundry For Builders Program providing access to the world's most advanced data platforms [8]

Future:
Launch new care programs
Advance drug development programs
Clinical partnerships

emyria

SOURCES:
1. See ASX release 08 June 2023
2. See ASX release 20 March 2023
3. See ASX release 04 April 2023
4. See ASX release 04 April 2023

SOURCES:
5. See ASX release 07 June 2021
6. Vickery AW, et al (2022) A large Australian longitudinal cohort registry demonstrates sustained safety and efficacy of oral medicinal cannabis for at least two years. PLOS ONE 17(11): e0272241

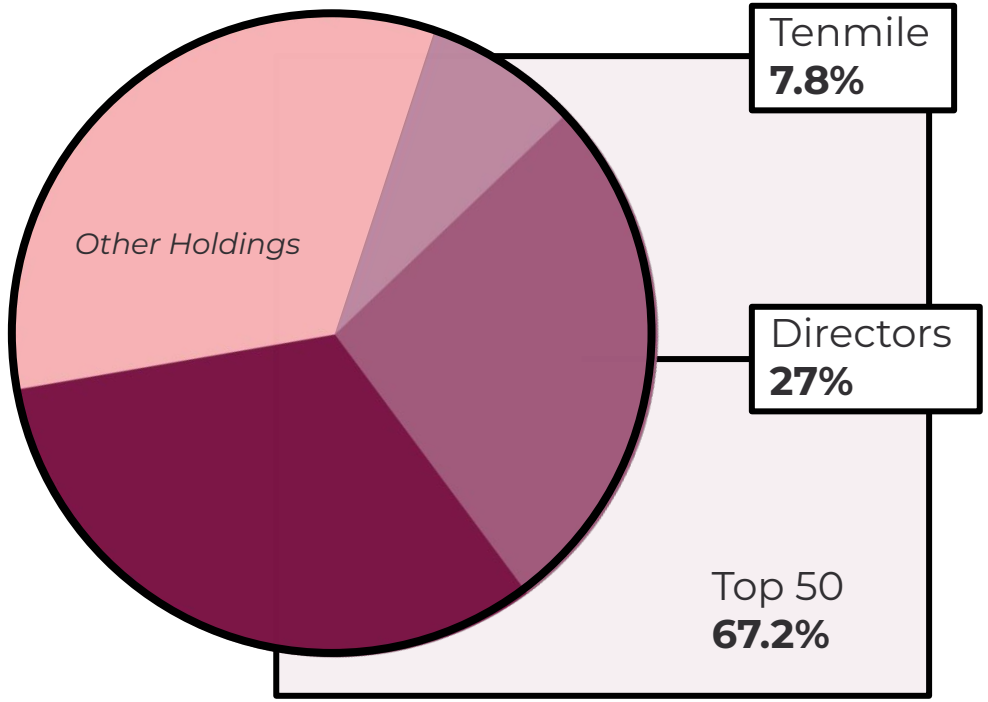
SOURCES:
7. See ASX release 03 July 2023
8. See ASX release 07 October 2021

OUR ROADMAP

#	PROGRAM	MILESTONE 1	MILESTONE 2	MILESTONE 3	*OTHERS*
1	**Deliver MDMA-AT**	Begin treatment on first patient (MDMA)	Emyria psychiatrists obtain Authorised Prescriber status	Complete patient recruitment for Phase 2b trial (MDMA)	Complete Phase 2b trial for MDMA
2	**Develop Novel MDMA Treatments**	Animal study results for fast-acting MDMA analogue	Animal study results for Parkinson's MDMA analogue	Identify lead drug candidates for Phase 1 trial	
3	**Expand to Psilocybin & Ketamine Therapies**	Approval for ketamine assisted therapy protocol	Begin treatment on first patient (ketamine)	Secure key approvals for psilocybin use	Begin treatment on first patient (psilocybin)
4	**CBD "Side Bet" Clinical Trials**	Recommence Phase 3 trial of low-dose CBD for stress & anxiety	Begin Phase 1 trial of high-potency CBD treatments	Results of Phase 1 trial of high-potency CBD treatments	
5	**Scale Clinical Health Services & Engage Payers**	Secure a major payer partnership	Licence a care model to a clinical partner	Open a new clinic or form new clinical partnership	
6	**Expand Intellectual Property & Build Partnerships**	Receive Clear Search Report from international patent examiner	Secure granted patents in national phase	File new patent family provisionals	Updated commercial license with UWA

OUR CORPORATE STRUCTURE

KEY METRICS	VALUE
Market Capitalisation	**~A$31M**
Last reported cash (at 30 Jun 2023)	**A$2.73M** + $2m Placement (Sep) + $3.1m Rights Issue (Oct)



emyria

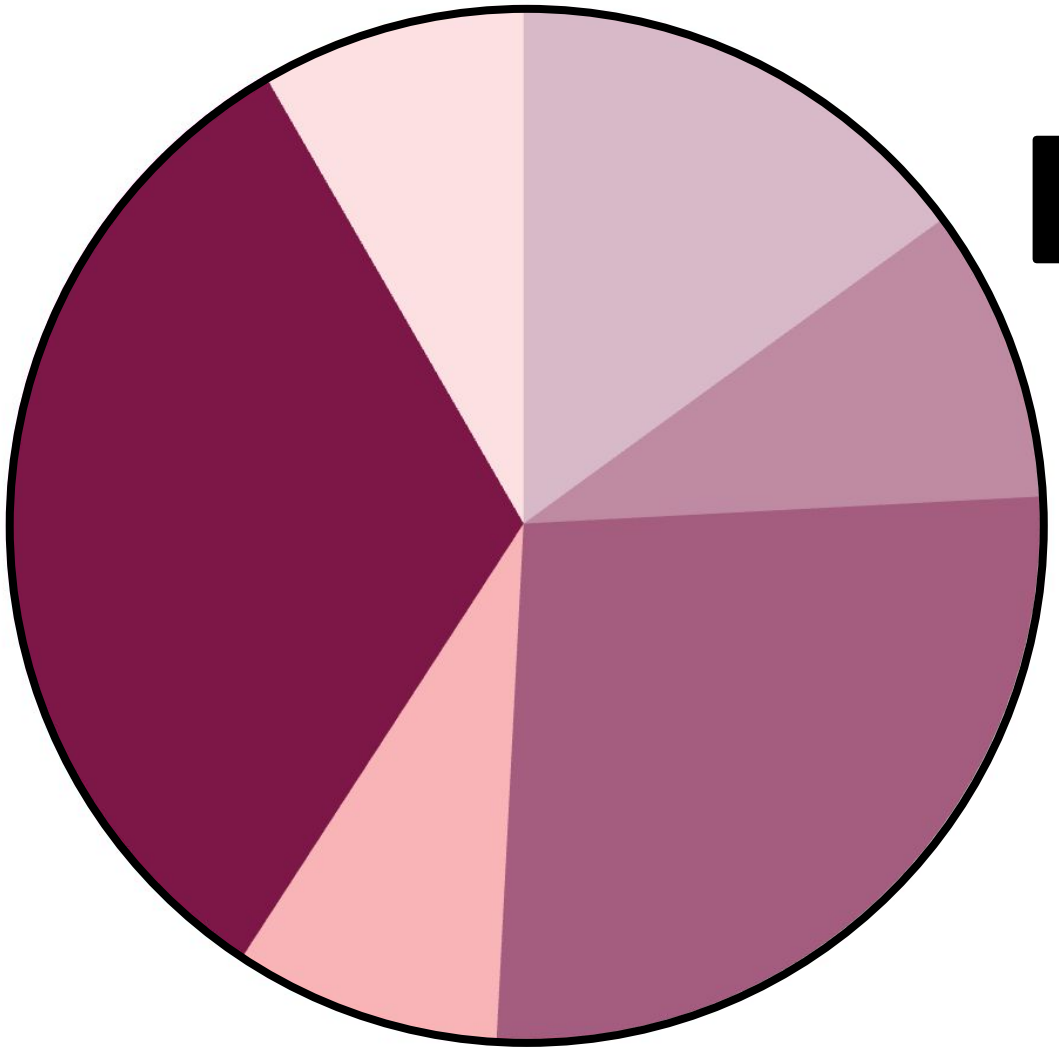
ENTITLEMENT OFFER TO RAISE $3.1m

ENTITLEMENT OFFER | OVERVIEW

Emyria (EMD) is launching a Entitlement Offer ("Offer") to provide existing shareholders the opportunity to invest in advancing the next phases of our highly promising clinical programs.

- Offer is expected to raise $3.1m (before costs) to fund Emyria's leading programs.
- Under the Offer, all shareholders holding Emyria shares by the Record Date (Wed, Sep 13th) will be eligible to participate.
- Full Details and Prospectus available 6 September 2023.
- For every 7.5 shares held by the Record Date, shareholders will be eligible to apply for 1 shared priced at $0.075.
- New shares issues will rank *pari passu* with existing shares from their date of issue.
- In addition, each successful applicant will be entitled to 1 free attaching, unlisted option for every 2 shares purchased under the Offer.

ENTITLEMENT OFFER | USE OF FUNDS



$3.1m

PROPOSED EXPENDITURE

CARE DELIVERY	
Finalise Pax Acquisition	$500,000
Authorised prescriber launch	$375,000
Service expansion (ketamine)	$775,000
DRUG DEVELOPMENT	
CBD drug optimisation	$350,000
MDMA-analogues 1 lead series to animal studies	$793,300
DATA	$250,000
OFFER FEES	$56,700

emyria

ENTITLEMENT OFFER | INDICATIVE TIMETABLE

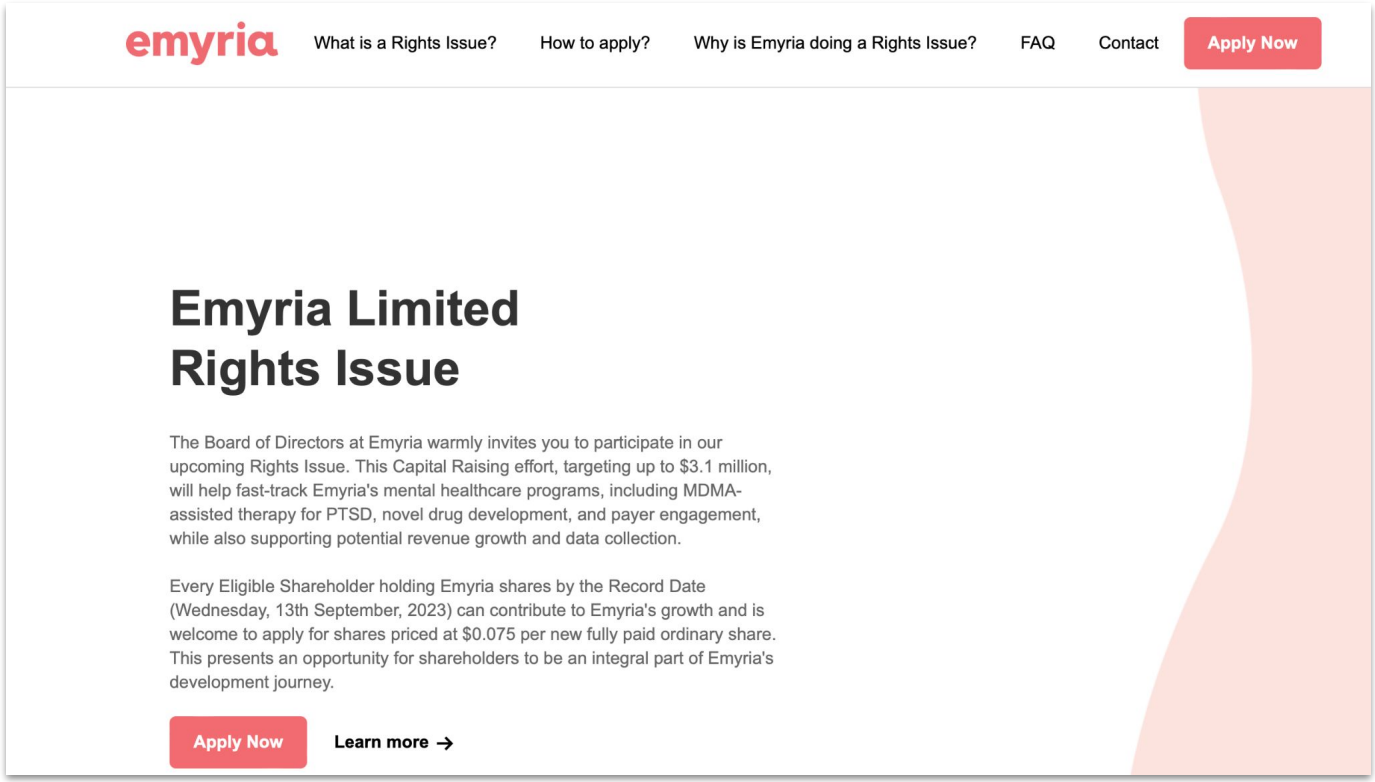
Event	Date (2023)
Lodgement of Entitlement Offer Prospectus with ASIC	5 September
Announcement of Entitlement Offer Prospectus and investor presentation on ASX	6 September
Entitlement Offer "Ex" date Expected date for quotation of new shares issued under the Placement	12 September
Record Date to identify security holders entitled to participate in the Entitlement Offer	13 September
Entitlement Offer Prospectus and personalised entitlement and acceptance forms made available to persons entitled and announcement that this has occurred Entitlement Offer opening date	18 September
Entitlement Offer closes at 5:00pm (AWST)	28 September
Announcement of the results of the Entitlement Offer Appendix 2A and 3G for Entitlement Offer	5 October

* Emyria retains the discretion to alter any or all of these dates

emyria

ENTITLEMENT OFFER (RIGHTS ISSUE) | WEBSITE EXPLAINING THE OFFER

OFFER.EMYRIA.COM



emyria

ENTITLEMENT OFFER | DISCLAIMER

In accordance with section 734(6) of the Corporations Act, the Company notes that:

- the Entitlement Offer will be undertaken pursuant to a disclosure document issued by the Company in accordance with section 713 of the Corporations Act (the Prospectus);
- the Prospectus is available on the Company's website (www.emyria.com) and the ASX Market Announcements Platform under the Company's ASX code "EMD";
- participants in the Entitlement Offer should consider the Prospectus in full before deciding to participate and acquire securities under the Entitlement Offer; and
- any participants in the Entitlement Offer will be required to complete the application form that will be in or will accompany the Prospectus.

CONTACT INFORMATION

Michael Winlo	mwinlo@emyria.com
Investors	investors@emyria.com
Media	media@emyria.com
General	info@emyria.com

INVESTOR HUB:

https://investorhub.emyria.com/

APPENDIX:

DISCLAIMER to presentation

This presentation has been prepared by Emyria Limited ACN 625 085 734 (Company or Emyria). This presentation is not a financial product or investment advice or recommendation, offer or invitation by any person or to any person to sell or purchase securities in Emyria in any jurisdiction. This presentation contains general information only and does not consider the investment objectives, financial situation and needs of individual investors. Investors should make their own independent assessment of the information in this presentation and obtain their own independent advice from a qualified financial adviser having regard to their personal objectives, financial situation and needs before taking any action. No representation or warranty, express or implied, is made as to the accuracy, completeness, reliability or adequacy of any statements, estimates, opinions or other information, or the reasonableness of any assumption or other statement, contained in this presentation. Nor is any representation or warranty (express or implied) given as to the accuracy, completeness, likelihood of achievement or reasonableness of any forecasts, prospective statements or returns contained in this presentation. Such forecasts, prospective statements or returns are by their nature subject to significant uncertainties and contingencies, many of which are outside the control of Emyria. To the maximum extent permitted by law, Emyria and its related bodies corporate, directors, officers, employees, advisers and agents disclaim all liability and responsibility (including without limitation any liability arising from fault or negligence) for any direct or indirect loss or damage which may arise or be suffered through use or reliance on anything contained in, or omitted from, this presentation. An investment in Emyria securities should be considered speculative and is subject to investment and other known and unknown risks, some of which are beyond the control of Emyria. Emyria does not guarantee any rate of return or the absolute or relative investment performance of Emyria securities. The distribution of this presentation including in jurisdictions outside Australia, may be restricted by law. Any person who receives this presentation must seek advice on and observe any such restrictions.

This release may contain certain forward-looking statements with respect to matters including but not limited to the financial condition, results of operations and business of Emyria and certain of the plans and objectives of Emyria with respect to these items. These forward-looking statements are not historical facts but rather are based on Emyria's current expectations, estimates and projections about the industry in which Emyria operates, and its beliefs and assumptions. Words such as "anticipates," "expects," "intends," "plans," "believes," "seeks," "estimates", "guidance" and similar expressions are intended to identify forward looking statements and should be considered an at-risk statement. Such statements are subject to certain risks and uncertainties, particularly those risks or uncertainties inherent in the process of developing technology and in the endeavour of building a business around such products and services. These statements are not guarantees of future performance and are subject to known and unknown risks, uncertainties and other factors, some of which are beyond the control of Emyria, are difficult to predict and could cause actual results to differ materially from those expressed or forecasted in the forward looking statements. Emyria cautions shareholders and prospective shareholders not to place undue reliance on these forward-looking statements, which reflect the view of Emyria only as of the date of this release. The forward-looking statements made in this announcement relate only to events as of the date on which the statements are made. Emyria will not undertake any obligation to release publicly any revisions or updates to these forward-looking statements to reflect events, circumstances or unanticipated events occurring after the date of this announcement except as required by law or by any appropriate regulatory authority.

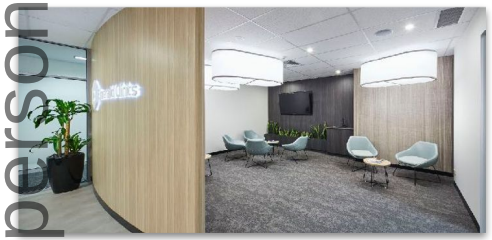
Presentation release authorised by Michael Winlo, CEO and Managing Director

emyria

EMYRIA CLINICS | OUR EXPANDING MENTAL HEALTH FOOTPRINT

We offer a **suite of solutions & ongoing support**, not just a single service

A data-centric clinic working with newly rescheduled treatments like THC & CBD. We monitor & care for patients when "nothing else has worked"



emerald clinics

- **GP-led** clinical service
- **~10,000+** patients
- **40+** clinical conditions
- **Cannabinoid-based medicine** specialists
- **World's largest data registry** on cannabinoid-based therapies and outcomes [1]
- Leveraging Palantir **Foundry** [2]

Australia's leading, multidisciplinary treatment centre for psychological trauma

PaxCentre

- **Psychiatrist**-led service for **complex trauma care** [1]
- **Diverse service offering**
- **19 clinicians:** psychiatrists, mental health nurses, psychologists, counsellors, OTs & social workers, physical therapists
- Ethics-approved **psychedelic - assisted therapy model** [2]

emyria

SOURCES:
1. Arkell TR, et al. Assessment of Medical Cannabis and Health-Related Quality of Life. JAMA Netw Open. 2023;6(5):e2312522. doi:10.1001/jamanetworkopen.2023.12522
2. See ASX 22 Oct 2021

EMYRIA CLINICS | A PERSONALISED PATH TO MENTAL WELLNESS

We offer **wraparound care** before, during and after treatment

ACTIVE ASSESSMENT, DATA COLLECTION & REVIEW

Neuropsychiatric disorders share an overlapping imprint of poor body health [1] which is why Emyria's care models prioritise both physical and mental well-being.
By providing comprehensive care we can achieve and measure exceptional health outcomes as well as develop new therapies and approaches, **including our own.**

EVIDENCE-BASED CARE	EMERGING TREATMENTS	CLINICAL TRIALS

Rapid **intake** and **assessment**

Evidence-based care led by **psychiatrists** & managed by **GPs** and specially-trained **therapists**

TMS and / or **Cannabinoid** Therapy

Psychedelic-assisted Therapy

Experimental Treatments

emyria

SOURCE:
1. Tian YE, et al Evaluation of Brain-Body Health in Individuals With Common Neuropsychiatric Disorders. JAMA Psychiatry. 2023 Apr 26

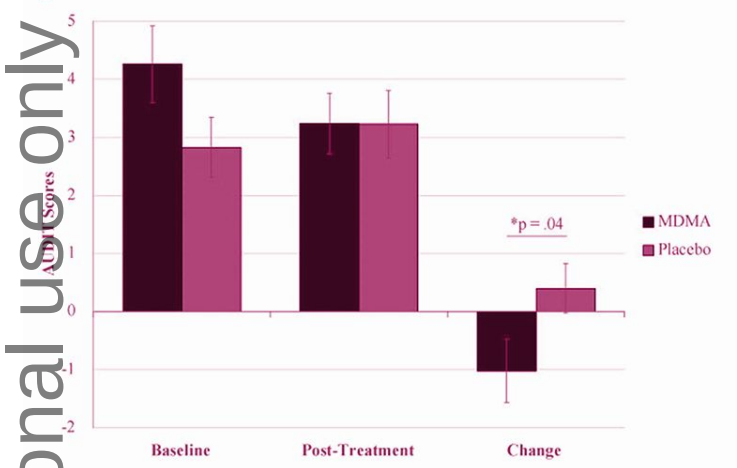
EMYRIA CLINICS | MULTIDISCIPLINARY MODEL

SERVICE MODEL	KEY STRENGTHS	KEY LIMITATIONS	EMYRIA ADVANTAGES
GP Clinics	Accessible, generalised care	Limited support; not specialised	✓ Provides specialised care with robust support
Specialists	High-level, specialised care	Often do not address physical health	✓ Offers multidisciplinary care covering mental & physical health
***"Single service"* clinics** (eg. "Ketamine Clinics")	Specialised service	Referral risk for clinicians. "*Where do my patients go if treatment fails?*"	✓ Offers a suite of services before, during & after care
Academic & Research Centers	Cutting-edge research and treatments	Not focused on scalable, cost effective delivery	✓ Combines innovative approaches that translate to the community cost effectively
EMYRIA MODEL	Multidisciplinary, data-driven, revenue-generating	---	✓ **The infrastructure and team to deliver new and emerging treatments while collecting data to support ongoing innovation and development**

emyria

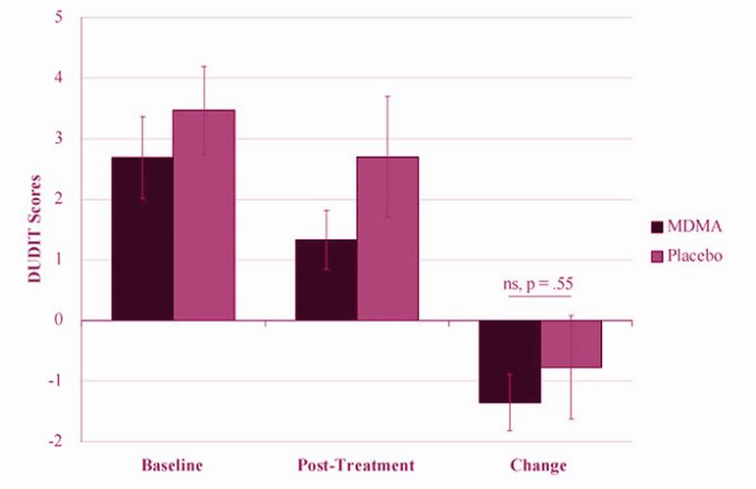
MDMA-AT EFFECTS On Alcohol and Substance Disorder (“ASUD”) & Suicidality

MDMA-AT may lead to subclinical improvements in alcohol use



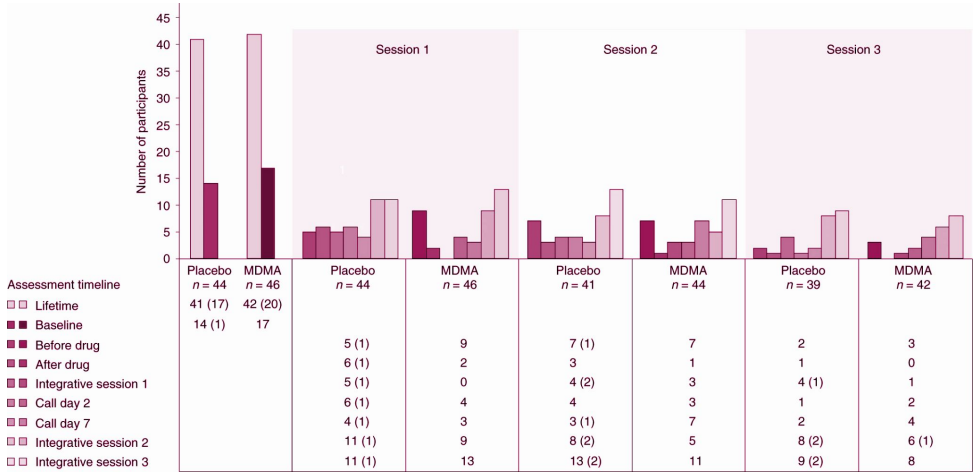
Compared to Placebo+therapy, MDMA-AT was associated with a significantly greater reduction in mean AUDIT change scores as compared to placebo.[1,2]

MDMA-AT does not increase risk of illicit drug use



Changes in DUDIT scores were not significantly different between treatment groups.[1]

MDMA-AT may reduce the risk of suicidality



Serious suicidal ideation (a score of 4 or 5 on the C-SSRS) was minimal during the MAPP1 study and occurred almost entirely in the placebo arm.[1]

Sources:

1. Nicholas CR, Wang JB, Coker A, Mitchell JM, Klaire SS, Yazar-Klosinski B, Emerson A, Brown RT, Doblin R. The effects of MDMA-assisted therapy on alcohol and substance use in a phase 3 trial for treatment of severe PTSD. Drug Alcohol Depend. 2022 Apr 1;233:109356. doi: 10.1016/j.drugalcdep.2022.109356. Epub 2022 Feb 11. PMID: 35286849; PMCID: PMC9750500.
2. Mitchell, J.M., Bogenschutz, M., Lilienstein, A. et al. MDMA-assisted therapy for severe PTSD: a randomized, double-blind, placebo-controlled phase 3 study. Nat Med 27, 1025–1033 (2021). https://doi.org/10.1038/s41591-021-01336-3

EPIDEMIOLOGY OF POST-TRAUMATIC STRESS DISORDER [1]

	Adults aged > 18 (millions)	% with current PTSD	Adults with PTSD	% with chronic and severe	Adult PTSD cases that are chronic or severe	% with disqualifying condition	Adult PTSD cases eligible for MDMA-AT	Cost to Treat	TAM
USA	250.5	3.60%	9,018,000	50%	4,509,000	22%	3,517,020	$30,000	$105,510,600,000
AUSTRALIA	20.7	3.60%	745,200	50%	372,600	22%	290,628	$30,000	$8,718,840,000
WESTERN AUSTRALIA	2.07	3.60%	74,520	50%	37,260	22%	29,063	$30,000	$871,884,000

Sources:

1. https://link.springer.com/article/10.1007/s40261-022-01122-0#Fig2
2. Phoenix Australia

emyria

Completed

In Active Development

MEDICINE-ASSISTED THERAPIES

MDMA-ASSISTED THERAPIES

Trained Team	Ethics-Approved Care Model	Drug Supply Secured	First Patient Consented	First Patient Treated
✓	✓	✓	✓	●

KETAMINE-ASSISTED THERAPIES [1]

Trained Team	Ethics-Approved Care Model	Drug Supply Secured	First Patient Consented	First Patient Treated
✓	●	●	●	●

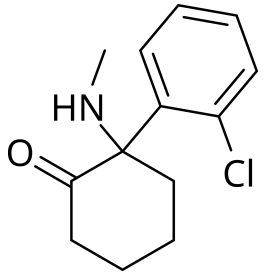
PSILOCYBIN-ASSISTED THERAPIES [2]

Trained Team	Ethics-Approved Care Model	Drug Supply Secured	First Patient Consented	First Patient Treated
✓	●	●	●	●

Sources:

1. See ASX release 08 August 2023
2. See ASX release 18 April 2023

KETAMINE



A dissociative anesthetic

Has a complex influence...

1

NMDA Receptor Antagonism: Blocks NMDA receptors in the brain, involved in pain signaling and synaptic plasticity

2

Enhances Neuroplasticity: Stimulates the growth and formation of synapses

3

Release of Neurotransmitters: Including glutamate, which then activates AMPA receptors and contributes to antidepressant effects

Clinical Effects

Clinical effects of ketamine can vary depending on the dose, route of administration, and individual patient factors. In general, main effects are:

1

Anesthesia and Analgesia: Used for pain relief and producing a trance-like unresponsiveness

2

Neuronal Growth & Anti-inflammatory: Stimulates neuroplasticity and promotes brain cell regrowth

3

Antidepressant Yields rapid mood uplift, especially in treatment-resistant depression.

Role in Therapy

Ketamine induces a brief dissociative state, allowing patients to view memories or thoughts differently.

Its fast-acting antidepressant effects create an immediate therapeutic window, enhancing patient engagement in therapy.

Ketamine's stimulation of neuronal growth may reinforce and consolidate therapeutic insights.

Together, these unique features of ketamine treatment are believed to enhance the therapeutic process, leading to more lasting benefits.

Risks & Exclusions

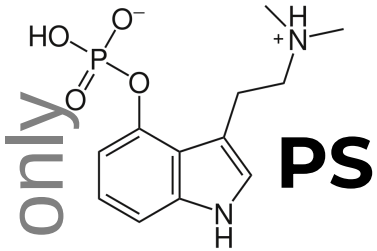
Some individuals might experience challenging emotional responses or unsettling hallucinations. Additionally, patients with a history of psychosis, certain heart conditions, or on specific medications might be excluded from its use

emyria

Key Recent Research:

1. Loo, C., et al (2023). Efficacy and safety of a 4-week course of repeated subcutaneous ketamine injections for treatment-resistant depression (KADS study): Randomised double-blind active-controlled trial. The British Journal of Psychiatry, 1-9. doi:10.1192/bjp.2023.79
2. Anand, A., et al (2023). Ketamine versus ECT for Nonpsychotic Treatment-Resistant Major Depression. New England Journal of Medicine, 2023; 388:2315-2325 DOI: 10.1056/NEJMoa2302399

WHAT'S NEXT? Psilocybin-AT



PSILOCYBIN

Hallucinogenic

Main biological effects

1

5-HT2A Receptor Agonism:
Psilocybin and metabolite, psilocin, act as agonists at the 5-HT2A receptors. Believed to be central to hallucinations

2

5-HT1A Receptor Agonism:
Psilocin also shows affinity for 5-HT1A, which might contribute to the overall experience induced by psilocybin.

3

Dopamine Release:
Psilocybin might have an effect on dopamine D2 receptors, although this is less pronounced than its effect on serotonin (5HT) receptors.

Clinical Effects

The clinical effects of psilocybin can vary depending on the dose, route of administration, and individual patient factors. In general, main effects are:

1

Altered Perception:
Psilocybin leads to hallucinations and a distorted sense of time.

2

Emotional Release:
Users often experience intense emotions, facilitating therapeutic breakthroughs

3

Sense of Connection:
Psilocybin can induce feelings of unity, diminished ego, and enhanced empathy, valuable in therapeutic contexts.

Role in Therapy

Psilocybin is understood to amplify emotional understanding and connection, making it easier for people to revisit and heal from tough memories.

It also gives many a feeling of unity and interconnectedness, offering a fresh perspective that can break negative thought cycles. Additionally, psilocybin seems to enhance the brain's adaptability, making it more receptive to positive change.

Some people even describe profound, meaningful experiences during sessions, which can leave a lasting sense of purpose and interconnectedness. All these effects combined can be transformative, especially when guided by trained therapists in a safe environment.

Risks & Exclusions

Some individuals might experience challenging emotional responses or unsettling hallucinations. Additionally, patients with a history of psychosis, certain heart conditions, or on specific medications might be excluded from its use

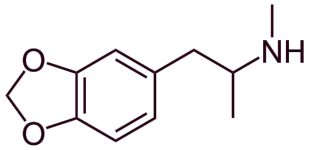
Key Recent Research:

1. von R, R., et al (2022). Single-dose psilocybin-assisted therapy in major depressive disorder: a placebo-controlled, double-blind, randomised clinical trial eClinicalMedicine, Volume 56, 101809
Goodwin, G.M., et al. Psilocybin for treatment resistant depression in patients taking a concomitant SSRI medication. Neuropsychopharmacol. 48, 1492–1499 (2023). https://doi.org/10.1038/s41386-023-01648-7

emyria

EMYRIA DRUG DEVELOPMENT | MDMA-ANALOGUES

One of the **world's largest libraries of MDMA analogues** developed **with** THE UNIVERSITY OF WESTERN AUSTRALIA



MDMA as inspiration

Proprietary analogue library

Screened for selective modulation of major neurotransmitters

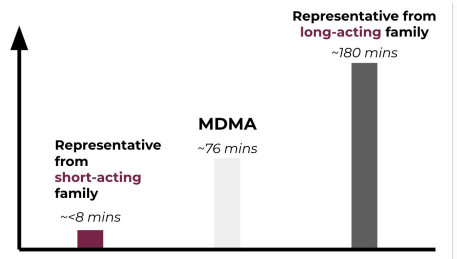
Dopamine
associated with feelings of *pleasure and satisfaction*

Serotonin
thought to contribute to feelings of *well-being*

Noradrenaline
affects attention and related to *"fight or flight" response*

EMD-MX1

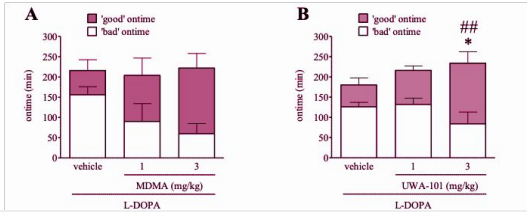
Increasing versatility of drug-assisted therapy for mental health disorders



We have created MDMA-like molecules with rapid *and* extended half-lives.

EMD-MX2

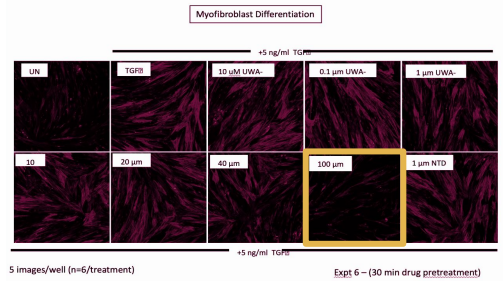
Selective serotonin & dopamine releasers to help symptoms of L-DOPA induced dyskinesia (LID)



LID affects up to 80% of all Parkinson's disease sufferers.

EMD-MX3

Highly specific transporter binding molecules for range of indications.



We have novel molecules that are potent antagonists of 5HT2B, involved in fibrosis.

emyria

SOURCES:
For details on our MDMA-analogue program, please see webinar given October 2022

MX1 | multiple | POTENTIALLY SHORTER-ACTING MDMA-LIKE MEDICINES

Target Indication & Market

MDMA looks very promising as an adjunct with psychotherapy for PTSD.

However...

Half-life (~6 h): requires long clinical sessions which increase costs
Stimulant features: can cause anxiety when coming on and at low doses increases blood pressure and heart rate
Euphorigenic: an abuse liability (is euphoria necessary for psychotherapy?)

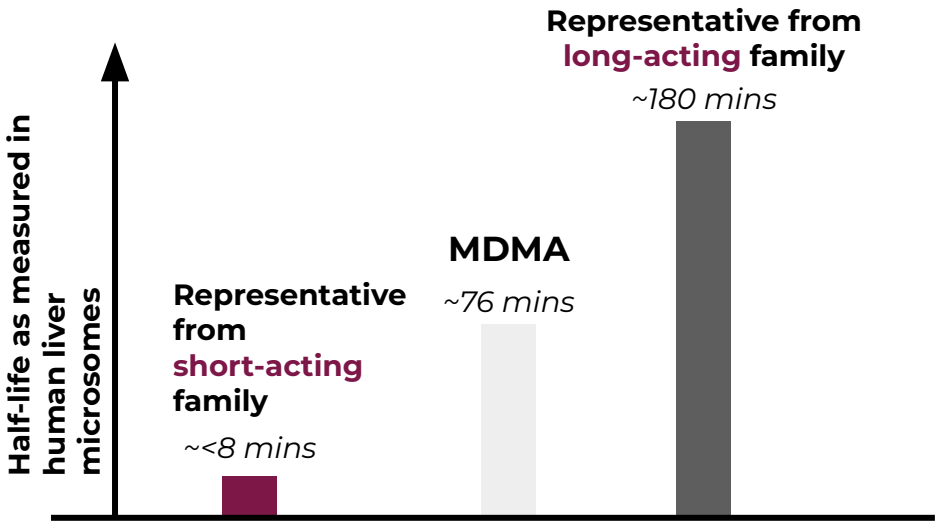
MX1 Program Goals
SERT reversal ⇨ serotonin release ⇨ prosocial, fear extinguishing effects ✅

NET reversal ⇨ noradrenaline release ⇨ stimulant activity ❌

DAT reversal ⇨ dopamine release ⇨ euphoria ❌

Key Preclinical Results

Metabolic studies performed to-date demonstrate Emyria's compound library contains novel MDMA analogues with both short-, and long-, acting metabolism profiles.



Select compounds from **Emyria's MDMA Analogue Library**

Next Steps

Emyria and partner the University of Western Australia (UWA) are developing a broad set of candidates inspired by these insights and we are actively developing new compounds inspired by the unique Structure Activity Relationships (SARs) observed in the compounds tested to take.

The creation of these new compounds is underway at UWA.

These next generation compounds will be screened for unwanted or "off-target" effects and sent for further metabolic studies.

emyria

MX2 | UWA-101 | POTENTIAL TREATMENT L-DOPA INDUCED DYSKINESIA (LID)

Target Indication & Market

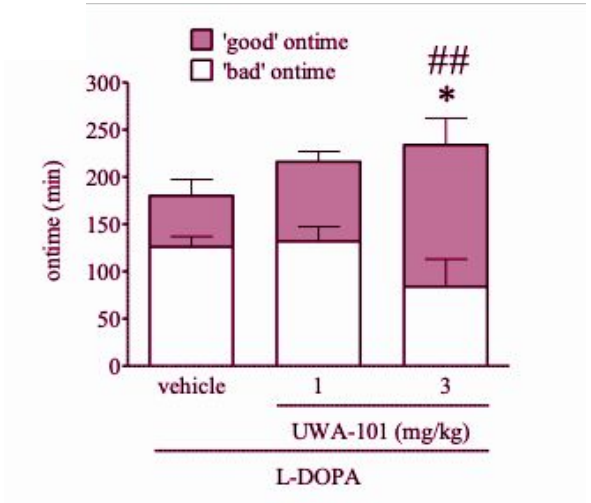
Parkinson's Disease (PD) is the world's fastest growing neurological disorder. The most common treatment for PD is to replace the depletion of dopamine with a precursor called levodopa (L-DOPA). However, prolonged treatment with L-DOPA can lead to a movement disorder called L-DOPA induced dyskinesia (LID). 80% of PD patients will develop LID, 30% within just 3 years. Globally, this is 5-6m individuals. [1]

There is a significant unmet need for a medication that can improve the symptoms of LID.

The most recently approved treatment - OngentysTM (opicapone) - only increases **good** "ON-time" by ~6% over 24 hours. [2]

Key Preclinical Result

In a gold-standard primate model of Parkinson's Disease, MDMA-analogue UWA-101, had a significant effect on increasing the duration of **total** and **good** ON-time.



UWA-101 increased the **total** duration of L-DOPA-induced antiparkinsonian benefit (total ON-time) by up to **30%**. In addition, UWA-101 (3 mg/kg) significantly increased the duration of **good** quality ON-time by 178%.

Next Steps

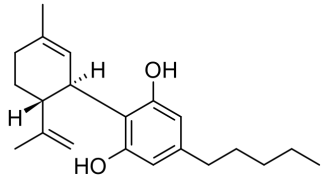
Emyria and partner the University of Western Australia (UWA) are developing a broad set of candidates inspired by the insights of UWA-101. Some of these compounds are currently being evaluated in global laboratories.

The best performing compounds identified will then progress to animal models with partners at the University of Sydney. Set-up of those experiments is underway.

emyria

SOURCES:
1. https://www.who.int/news-room/fact-sheets/detail/parkinson-disease
2. Pandey S, et al Levodopa-induced Dyskinesia: Clinical Features, Pathophysiology, and Medical Management. Ann Indian Acad Neurol. 2017 Jul-Sep;20(3):190-198. doi: 10.4103/aian.AIAN_239_17. PMID: 28904447; PMCID: PMC5586110.

EMYRIA DRUG DEVELOPMENT | ULTRA-PURE CBD



We've developed multiple dose forms targeting registration as capsule medicines

EMD-RX5

An Ultra-Pure CBD capsule for **over-the-counter** treatment of anxiety and stress symptoms.

15% of all adults. [1]

In **Phase 3** clinical trials.

Commercialised to Aspen Pharmacare Australia. [2]

EMD-RX7

High bioavailability Ultra-Pure CBD for **prescription** indications, like opioid-sparing.

Opioid use disorder is a **$471.0 billion** expense in the US. [3]

In preclinical screening in USA.

Currently being assessed by the **NIH (USA)** in their Preclinical Screening Program for Pain (PSPP) program. [4]

EMD-RX9

High potency, high bioavailability Ultra-Pure CBD for **prescription** indications. [5]

Market leader: **Epidiolex ($1B/yr)** [6]

Preparing for Phase 1 clinical trials.

Seeking commercialisation partners.

emyria

SOURCES:
1. Australian Institute of Health and Welfare 2018. Australia's health 2018. Australia's health series no. 16. AUS 221.
2. See ASX release 04 April 2023
3. https://www.cdc.gov/injury/features/health-econ-cost-of-injury/index.html
4. See ASX release 28 Nov 2022
5. See ASX release 24 April 2023
6. https://investor.jazzpharma.com/news-releases/news-release-details/jazz-pharmaceuticals-announces-full-year-and-fourth-quarter-2022

EMD-RX5 PRODUCT DEVELOPMENT UPDATE

Update

During routine quality assessments a difference in dissolution rates between two batches of EMD-RX5 was identified. For clarity, "dissolution rates" refer to how quickly a substance dissolves in a simulated solvent.

For all products seeking registration, consistency in the dissolution rates is expected between batches of the same product as well as over time. In this case, Batch 1, used for the first half of the trial, and the newly introduced Batch 2 showed a discrepancy in their dissolution rates (see Fig 1). It's important to note that both Batches still met all stringent guidelines for safety and CBD purity and that there are no safety concerns; the issue is solely with the dissolution rates.

Having used all of Batch 1 in the trial, the Company has paused recruitment to investigate the matter with Batch 2 further, in line with the rigorous standards set by the Therapeutic Goods Administration (“TGA”). Our preliminary investigations indicate that the issue is likely a manufacturing variation affecting one of the excipients (inactive substances used as carriers for the active ingredients). The Company has ruled out other potential causes (for example chemical changes or the outer capsules).

Data

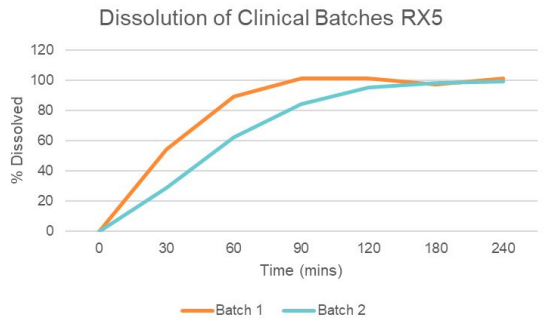


Figure 1: Difference in dissolution rates between Batch 1 and Batch 2 of EMD-RX5 at 6 months

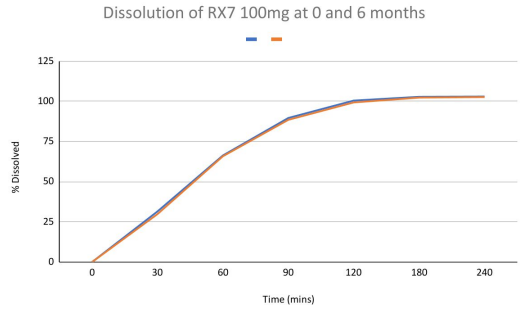


Figure 2: No difference in dissolution rates between a single batch of EMD-RX7 showing tight consistency over time

Next steps

A new manufacturing method is being developed, using an updated manufacturing process and a new batch will be produced and monitored for stability. An update on this program is expected towards end of H2, 2023. In the meantime, Emyria’s Contract Research Organisation (“CRO”) is conducting a full quality review of all study data gathered to date (~50% recruitment), to ensure readiness for analysis when appropriate.

Emyria’s portfolio also includes two other Ultra-Pure CBD capsules, RX7 and RX9. These products remain unaffected by stability or dissolution issues. RX7 has shown remarkable stability and bioavailability (the rate at which a drug is absorbed into the bloodstream), outperforming other registered CBD products in preclinical assessment. RX9 is also progressing well, with method development underway. Both candidates hold promise as high potency, highly bioavailable, solid oral dose forms of Ultra-Pure CBD nearing readiness for Phase 1 clinical trials.

AIP Features

AI-Optimized Data Foundation

Run LLMs and other AI on a secure, real-time, multi-modal foundation.

AIP Assist

Build everything from pipelines to applications faster, with human-AI collaboration.

AIP Logic

Author no-code functions that use LLMs. Manage, chain and wield those functions in custom applications.

Agents

Define LLM agents to pursue specific, scoped goals.

Action Graph

Implement decisions across your underlying operational systems.

AIP Automate

Monitor the activity of AI agents in real-time, with fine-grain control over both user-approved and autonomous tasks.

Control Panel

Monitor, govern, and control the activity and reach of LLMs and other AI in real-time.

Safe AI Handoff

Connect LLMs to trusted models across your enterprise with safe handoff functions.

Digital Footprint

Audit the full trail of all AI prompts, outputs, explanations, recommendations, and actions.

Human-in-the-Loop

Dictate when decisions require human input, including multi-stakeholder checks.

Decision Capture & Learning

Capture decisions and outcomes for continuous AI validation and improvement.

EMYRIA DATA | EMERALD CARE MODEL IMPROVES QUALITY OF LIFE SYMPTOMS

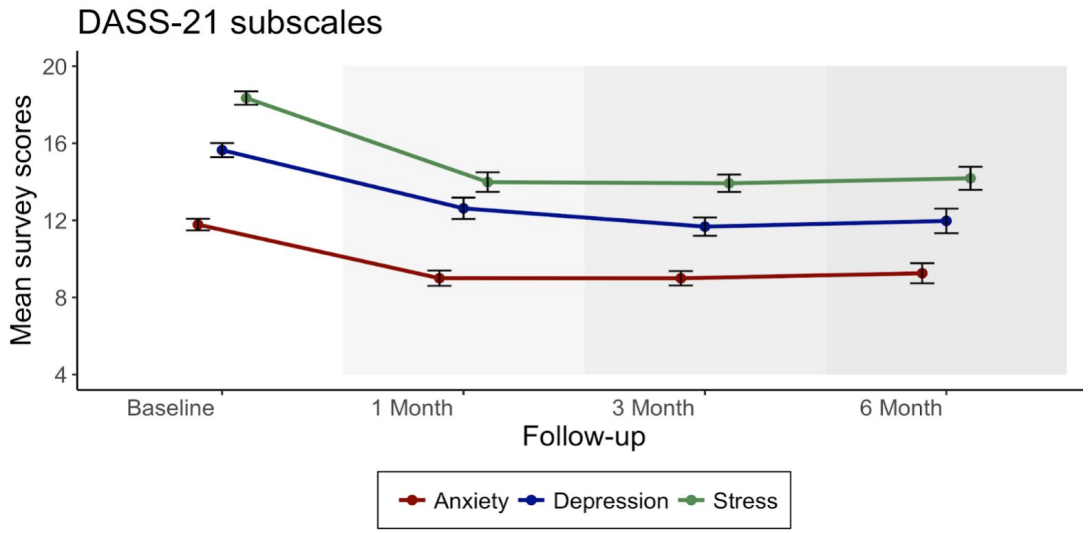
We are experienced in **tracking clinical outcomes** & **personalising care**

emerald clinics

% of patients with "moderate" to "severe"
ANXIETY, DEPRESSION, STRESS

TOP 10 indications:	**ANXIETY** [1]	**DEPRESSION** [1]	**STRESS** [1]	**INSOMNIA** [2]
Chronic non-cancer pain	73	52	39	60
Insomnia	76	49	42	95
Cancer pain	75	37	24	75
Anxiety	57	70	73	85
PTSD	42	82	76	95
Autism	68	54	80	77
Depression	76	71	67	83
Migraine/headache	74	44	40	84
Irritable bowel syndrome	62	45	42	85
Parkinson's disease	59	52	43	89

CLINICAL IMPACT EXAMPLE:
Our Cannabinoid-Based Care Model Can Improve Symptoms Of *Psychological Distress* Across A Range Of Diagnoses



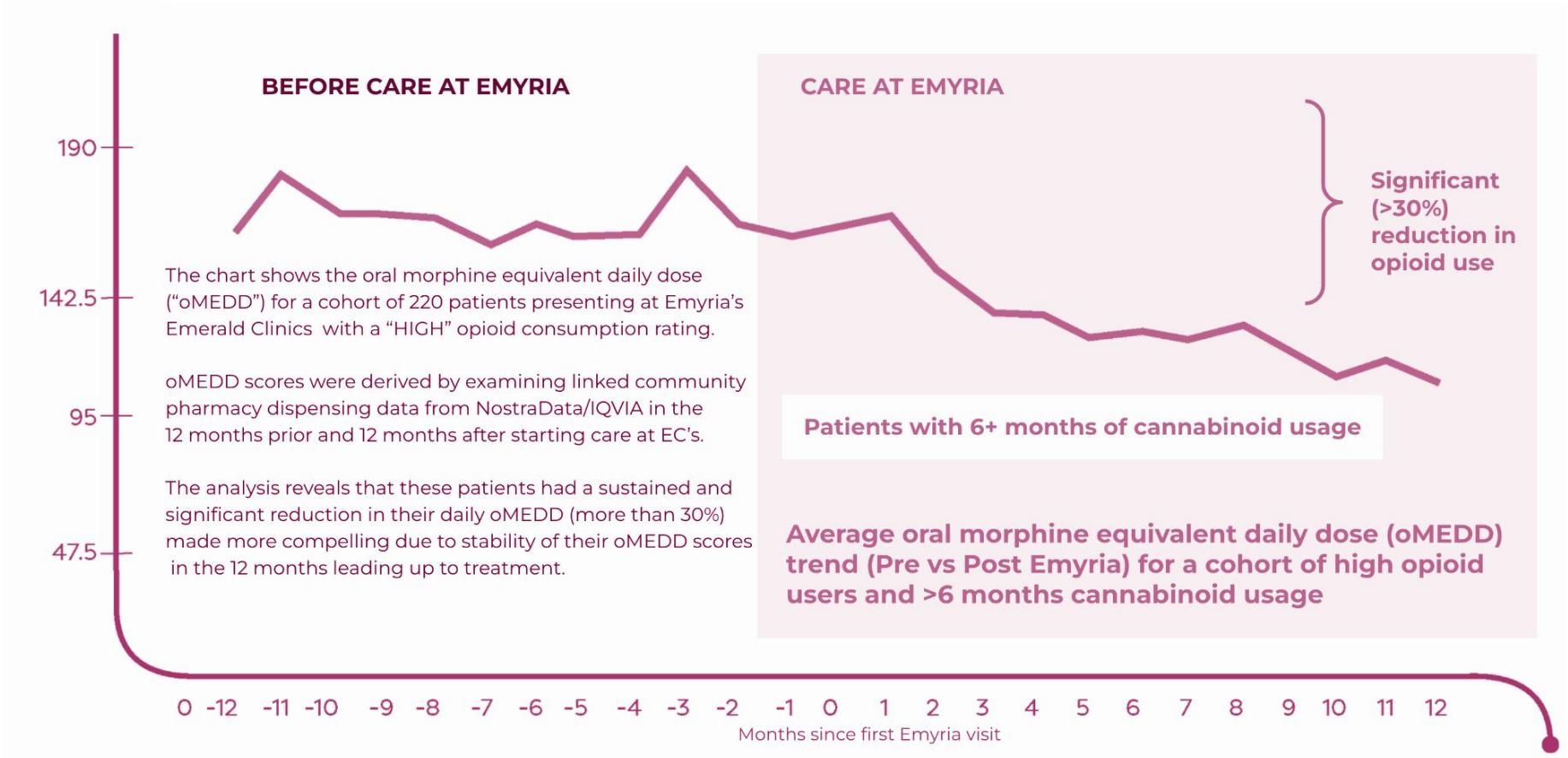
emyria

SOURCES:
1. As measured using the validated DASS-21 assessment tool
2. As measured using the validated Insomnia Severity Index (ISI) tool

EMYRIA DATA | EMERALD CARE MODEL REDUCES OPIOID USE

We are experienced in **tracking clinical outcomes** & **personalising care**

CLINICAL IMPACT EXAMPLE: OUR CANNABINOID-BASED CARE MODEL CAN REDUCE OPIOID USE [1]



emyria

SOURCES:
1. See ASX release 18 Jun 2021

EMYRIA INTELLECTUAL PROPERTY

TITLE	OFFICIAL NO.	STATUS
MDMA Analogues	2021903836	PCT filed *(search report due '23)*
Cannabidiol Dosing Regime	2021902001	PCT filed
Cannabinoid Dosage Form	2022900479	PCT filed
Use of Cannabidiol for the Treatment of Psychological Distress	2020904152	PCT filed
Use Of Cannabidiol for the Treatment of Psychological Distress	2021901086	Provisional filed
Use Of Cannabidiol for the Treatment of Irritable Bowel Syndrome Symptoms	2021901672	Provisional filed
Use Of Cannabinoid Combination for the Treatment of Irritable Bowel Syndrome Symptoms	2021901674	Provisional filed
Others in development covering unique delivery platforms, dose responses and clinical indications	*Additional provisionals expected*	

emyria