Neuren (NEU) – ASX Announcement **4 February 2026**

Neuren receives US FDA meeting feedback for NNZ-2591 clinical development in HIE and PTHS

Melbourne, Australia: Neuren Pharmaceuticals (ASX: NEU) today provided an update following meetings with the US Food and Drug Administration (FDA) regarding the next steps in development of NNZ-2591 for each of hypoxic ischemic encephalopathy (HIE) and Pitt Hopkins syndrome.

Neuren requested a Type B pre-Investigational New Drug (IND) meeting for HIE and a Type C meeting for Pitt Hopkins syndrome. FDA determined that both meetings would be conducted as Written Responses Only (WRO).

Neuren CEO Jon Pilcher commented: "We received useful guidance from FDA for our programs in Pitt Hopkins syndrome and HIE and are incorporating the feedback into our plans, although we were disappointed that in both cases the guidance was received as Written Responses Only and was delayed relative to FDA's goal dates. Overall, we have a clear path forward and remain well positioned to fund the programs, with minimal financial impact from the feedback. We remain committed to advancing NNZ-2591 as a potential treatment option for both the HIE and Pitt Hopkins communities, which have such urgent unmet need. In the meantime, we anticipate being able to provide an update shortly on progress in the ongoing Koala Phase 3 trial in Phelan-McDermid syndrome, our lead program for NNZ-2591."

HIE

Neuren received feedback on its plan to submit an IND application for the treatment of HIE and the proposed initial clinical study of the pharmacokinetics, tolerability and safety of NNZ-2591 for one month in neonates and infants with HIE to open the IND. FDA generally accepted this IND-opening clinical study and the doses of NNZ-2591 to be evaluated, providing some guidance on the inclusion/exclusion criteria and safety monitoring. FDA requested that Neuren provides additional juvenile animal study data to support NNZ-2591 dosing in neonatal participants prior to initiating the clinical study. Neuren plans to generate this data before submitting the IND application and commencing the clinical study later in 2026. In parallel, Neuren is continuing to advance the logistical requirements for study execution. FDA also encouraged Neuren to submit a future meeting request to discuss appropriate endpoints, study population, and safety monitoring for a subsequent study, which Neuren intends will support registration. Overall, the feedback provided a clear path forward for the HIE program.

Pitt Hopkins syndrome (PTHS)

The FDA feedback regarding PTHS indicated that in a controlled trial to demonstrate efficacy of NNZ-2591, a PTHS-specific clinical global impression (CGI) scale may be used as a co-primary endpoint if it is accompanied by an observer-reported functional outcome measure. This is similar to the approach that

was agreed and is being implemented in Neuren's ongoing Phase 3 trial in Phelan McDermid syndrome (PMS). Neuren is currently assessing alternative trial designs and endpoint analysis methodologies to accommodate that PTHS is significantly more rare and generally more profoundly disabling than PMS. A further interaction with the FDA will likely be required to finalise this assessment. Neuren still intends to initiate the next trial in 2026.

About hypoxic ischemic encephalopathy (HIE)

HIE is a potentially devastating type of brain injury caused when a baby's brain does not receive enough oxygen or blood flow before or shortly after birth. Many thousands of children experience HIE every year, with an incidence of 2-3 per 1,000 births in high income countries. It is one of the leading causes of neonatal death and neurodevelopmental disability worldwide. HIE can lead to a range of symptoms in surviving children, including developmental delays, cognitive impairment, cerebral palsy, and seizures. Some children develop serious long-term complications that can affect them well into adulthood. Further information about HIE is available at: www.hopeforhie.org.

About Pitt Hopkins syndrome (PTHS)

PTHS is a neurodevelopmental condition caused by the loss of one copy or a mutation of the TCF4 gene on chromosome 18. The incidence of PTHS has been estimated at between 1 in 34,000 and 1 in 41,000 people. Characteristics of PTHS are a range of developmental delays with moderate-to-severe intellectual disability and behavioral differences, lack of speech, hyperventilation and/or breath-holding while awake, seizures, gastrointestinal issues, sleep disturbance, stereotypic hand movements and distinctive facial features. Some individuals with PTHS are diagnosed with autism. Further information about PTHS is available at: www.pitthopkins.org.

About Neuren

Neuren is developing new drug therapies to treat multiple serious neurological disorders that emerge in early childhood and have no or limited approved treatment options.

DAYBUE® (trofinetide) and DAYBUE STIX (trofinetide) are approved by the US Food and Drug Administration (FDA) for the treatment of Rett syndrome. Neuren has granted an exclusive worldwide licence to Acadia Pharmaceuticals Inc. for the development and commercialisation of trofinetide.

Neuren's second drug candidate, NNZ-2591, is in development for multiple neurodevelopmental disorders, with positive results achieved in Phase 2 clinical trials in Phelan-McDermid syndrome, Pitt Hopkins syndrome and Angelman syndrome. Recognising the urgent unmet need, each program has been granted "orphan drug" designation in the United States and the European Union. Orphan drug designation provides incentives to encourage development of therapies for rare and serious diseases.

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ASX Listing Rules information

This announcement was authorized to be given to the ASX by the Board of Neuren Pharmaceuticals Limited, Suite 1.01, 117 Camberwell Road, Hawthorn East, VIC 3123

Forward-looking Statements

This announcement contains 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 Neuren to be materially different from the statements in this announcement.