

Syntara expands SNT-9465 skin scarring study

- SNT-9465 Phase 1b study in hypertrophic sternotomy scars approaches completion of initial 20-participant cohort recruitment
- Study to be expanded to 30 participants, with blinded design maintained, to support a larger and robust dataset
- The Skin Hospital, Sydney, added as additional clinical site
- Top-line results expected in Q1 2027
- SNT-6302 exploratory keloid scar study: six participants complete 12-week treatment period; preliminary biological findings directionally consistent with observations from SOLARIA2

Syntara Limited (ASX: SNT), a clinical-stage drug development company, is pleased to announce an update on its skin scarring programs, led by the Phase 1b study of SNT-9465, its second-generation topical pan-lysyl oxidase (pan-LOX) inhibitor.

SNT-9465 Phase 1b Study Cohort Expanded

SNT-9465 is being evaluated in a Phase 1b clinical study in participants with hypertrophic scars following sternotomy surgery. With recruitment of the initial 20-participant cohort nearing completion, Syntara has elected to expand the double-blind, placebo-controlled study to 30 participants following encouraging feedback from clinical sites and participant engagement. The expansion is designed to provide a larger safety, tolerability and exploratory activity dataset and, with the study remaining blinded, is not based on treatment efficacy data.

During the study, the protocol has been refined to optimise product application and consistency in treatment across participants. The Skin Hospital in Sydney has been added as an additional clinical site to support timely recruitment of the expanded cohort. Top-line study results are now expected in Q1 2027.

The study is designed to assess the safety and tolerability of topical SNT-9465, alongside exploratory measures of biological and clinical activity. Under the blinded study design, each participant receives SNT-9465 and placebo treatment on comparable areas of their scar. This enables assessment of treatment-related

differences within participants while reducing the influence of variation in scar characteristics between participants.

SNT-9465 was designed as a second-generation topical pan-LOX inhibitor to improve tolerability while retaining the intended pan-LOX pharmacology of Syntara's first-generation compound, SNT-6302. The additional tolerability observations from the exploratory SNT-6302 study outlined below further support the rationale for progressing SNT-9465.

Syntara CEO Gary Phillips said:

"We are pleased with the strong engagement from participants and clinical sites in the SNT-9465 Phase 1b study. This has supported our decision to expand recruitment from 20 to 30 participants to ensure we capture the maximum learnings, while maintaining the study's blinded design."

"Expanding the study at this stage is very cost effective and will deliver more robust results in Q1 2027. Hypertrophic scarring remains an area of significant unmet need, and we look forward to evaluating whether the biological rationale for pan-LOX inhibition translates into an acceptable safety and tolerability profile and evidence of clinical activity in this study."

Exploratory SNT-6302 Investigator-Initiated Study

Syntara also provides an update on the exploratory investigator-initiated SATELLITE study being conducted with University of Western Australia and the Fiona Wood Foundation. The study is evaluating SNT-6302, Syntara's first-generation topical pan-LOX inhibitor, to characterise the biological and clinical effects of pan-LOX inhibition in keloid scars.

Six participants have completed the 12-week treatment period and remain in follow-up. Assessments are planned to continue for nine months after treatment has concluded. Preliminary findings in these participants included an increase in blood-vessel area density at Week 12. This observation is directionally consistent with findings in hypertrophic-scar participants in the SOLARIA2 study. No observable differences in Patient and Observer Scar Assessment Scale (POSAS) scores or scar stiffness were identified at Week 12.

Several participants experienced mild, reversible local skin reactions after one month or more of treatment. Eight participants discontinued treatment due to these reactions. This tolerability profile, with mainly erythema and pruritus reactions, is consistent with observations in the earlier SOLARIA2 study of SNT-6302 and further supports Syntara's rationale for progressing its second-generation topical pan-LOX inhibitor, SNT-9465.

Interpretation of these preliminary findings in keloid scarring is limited by the exploratory nature of the study, the small number of participants completing treatment, and substantial heterogeneity in baseline scar size, anatomical location and scar age.

Further end-of-treatment and follow-up data remain outstanding and are expected to be the subject of a future scientific presentation or publication. Syntara and Professor Wood will subsequently review the complete dataset and consider how the findings may inform the design of a potential follow-on study in keloid scars.

**** ENDS ****

About Syntara

Syntara Limited (ABN: 75 082 811 630) is a clinical stage drug development company targeting extracellular matrix dysfunction with its world-leading expertise in amine oxidase chemistry and other technologies to develop novel medicines for blood cancers and conditions linked to inflammation and fibrosis.

Lead candidate amsulostat (also known as SNT-5505 and previously as PXS-5505) is for the bone marrow cancer myelofibrosis which causes a build-up of scar tissue that leads to loss of red and white blood cells and platelets. Amsulostat has been granted Fast Track Designation, having already achieved FDA Orphan Drug Designation and clearance under an Investigational New Drug Application for development in myelofibrosis. Amsulostat has now completed a Phase 2a trial in myelofibrosis in which it was dosed as monotherapy and in combination with a JAK inhibitor. Two Phase 1c/2 studies with amsulostat in patients with a blood cancer called myelodysplastic syndrome have been initiated.

Syntara is also advancing topical pan-LOX inhibitors with SNT-9465 in a Phase 1a/b study of hypertrophic scars and continuing the ongoing collaboration with Professor Fiona Wood and the University of Western Australia studying SNT-6302 in keloid scars. SNT-4728 is being studied in collaboration with Parkinson's UK as a best-in-class SSAO/MAO-B inhibitor to treat sleep disorders and slow progression of neurodegenerative diseases like Parkinson's by reducing neuroinflammation.

Other Syntara drug candidates target fibrotic and inflammatory diseases such as kidney fibrosis, MASH, pulmonary fibrosis and cardiac fibrosis.

Syntara developed two respiratory products available in world markets (Bronchitol® for cystic fibrosis and Aridol® - a lung function test), which it sold in October 2023.

Syntara is listed on the Australian Securities Exchange, code SNT. The company's management and scientific discovery team are based in Sydney, Australia. www.syntaraTX.com.au.

SOURCE:

Syntara Limited (ASX: SNT),
Sydney, Australia
(ABN: 75 082 811 630)

AUTHORISED FOR RELEASE TO ASX BY:
Syntara Limited Disclosure Committee.

CONTACT:

Syntara investor / media relations:

Matthew Wright
NWR Communications
+61 451 896 420
matt@nwrcommunications.com.au

JOIN THE SYNTARA MAILING LIST [HERE](#)

