

# AC4R – Is cortisol still a valid target?

*A novel approach to treating cognitive impairment  
and Alzheimer's disease*

Dr. Bill Ketelbey: CEO & MD

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**Actinogen**  
Medical

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# XanADu Phase II clinical trial

Double-blind, randomised, placebo-controlled study to assess the efficacy and safety of Xanamem in subjects with mild Alzheimer's disease<sup>1</sup>



Xanamem treatment course  
**12 weeks**



**186** patients with mild Alzheimer's  
disease (enrolment complete)<sup>2</sup>



**10mg daily**  
Xanamem for 12 weeks (vs. placebo)



Trial conducted at 25 sites in  
**AUS, USA and UK**

**Largest AD global clinical trial run by an Australian biotech**

1. Study registered on Clinicaltrials.gov: NCT02727699
2. Fully enrolled 26 November 2018

# Comprehensive Xanamem Clinical Development Program

The ongoing comprehensive review of the data and results from XanADu and the additional studies will inform the optimal clinical development path



*Multiple endpoints and sub analyses will allow insight into Xanamem's potential and where it is most effective*



## Phase I Target Occupancy, & Homogenate Binding Studies

*Measures effects of different Xanamem doses on inhibiting the 11 $\beta$ -HSD1 enzyme in the brain*



**Totality of results**  
assessed by  
Actinogen and expert  
Clinical Advisory  
Board



*Assess safety and tolerability of higher doses (to allow higher doses in future trials), with an efficacy assessment included*



## Additional Toxicology Studies

*Pre-clinical safety and toxicology studies to allow for longer treatment periods*

**The totality of results will inform further Xanamem development**

Single blind placebo-controlled, dose escalation study to assess safety, tolerability and efficacy of Xanamem in healthy elderly subjects – full results expected in 4Q CY2019



## 12 weeks

Xanamem treatment course  
Trial conducted at 1 site in Australia



## 42

Healthy elderly subjects  
(no cognitive impairment)



## 20mg daily

Xanamem 30 subjects  
Placebo 12 subjects



## Cognition assessed

Through computerised efficacy tests  
(Cogstate CTB<sup>1</sup>)

**Key objective to expand the Xanamem safety dataset and evaluate potential for higher dosage in future clinical trials**

1.Cogstate Cognitive Test Battery

XanaHES included a cognition endpoint to evaluate the cognitive efficacy of Xanamem using the Cogstate Cognitive Test Battery which evaluated six domains. Cognitive improvement demonstrated in three domains

## XanaHES 20mg Cogstate Cognitive Test Battery: p values and Cohen's d effect size

Cognitive Evaluation (Test)	p value			Treatment Effect Size: Cohen's d			
	All	Male	Female	Week 2	Week 4	Week 8	Week 12
Working Memory (One Back Test)	<0.01*	<0.01*	0.03*	0.64#	0.78#	0.64#	0.83 <sup>Δ</sup>
Visual Attention (Identification Test)	0.05*	0.04*	0.60	0.19	0.67#	0.62#	0.67#
Psychomotor Function (Detection Test)	0.09	0.94	0.13	0.47	0.65#	1.12 <sup>Δ</sup>	0.76#
Paired Associate Learning (CPAL <sup>1</sup> Test)	0.21	0.34	0.49	0.87 <sup>Δ</sup>	0.01	0.66#	0.08
Memory (CPAL <sup>1</sup> – Delayed Test)	0.50	0.55	0.21	0.34	0.23	0.06	0.48
Visual Learning (One Card Learning Test)	0.92	0.41	0.64	0.11	0.12	0.60#	0.19

*Additional details on slide 5*

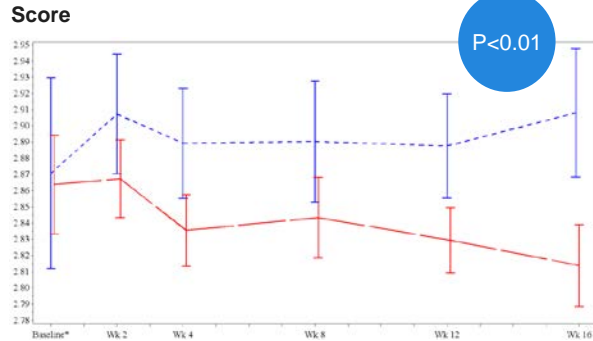
Notes: \* statistical significance achieved; # effect size >0.5 (moderate treatment effect); <sup>Δ</sup> effect size >0.8 (large treatment effect)

1: CPAL – Continuous Paired Associate Learning

Breakthrough results demonstrated statistically significant cognitive efficacy signal in multiple cognition domains – based on Cogstate Cognitive Test Battery

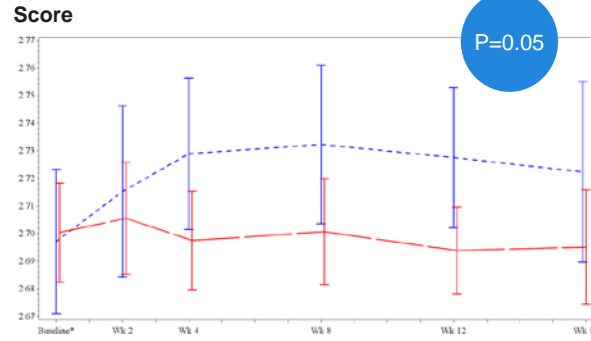
## Working memory (One Back Test)

**Strongly statistically significant result**



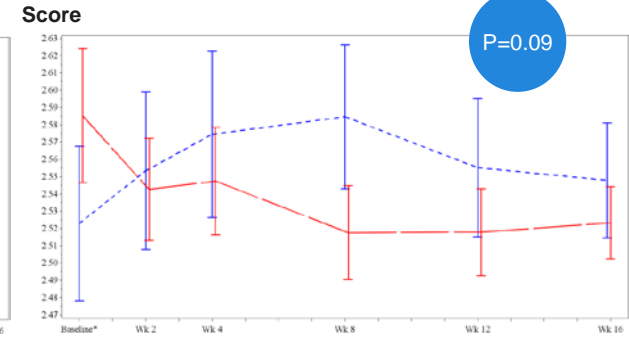
## Visual attention (Identification Test)

**Statistically positive signal**



## Psychomotor function (Detection Test)

**Good trend to a positive result**



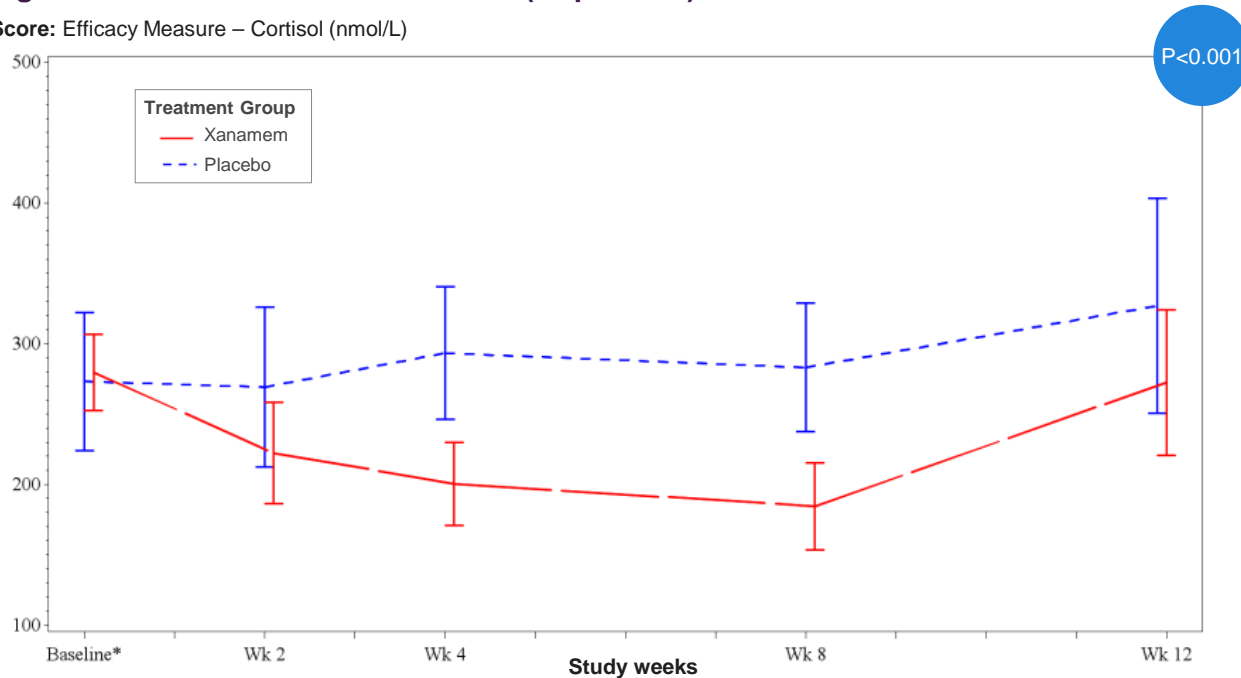
**Treatment Group**  
— Xanamem    - - - Placebo

**Efficacy results of particular interest, reflecting high quality and consistent data in a small study population**

Efficacy results complemented by the statistically significant reduction in serum cortisol observed in the trial

## Significant reduction in cortisol levels (all patients)

Score: Efficacy Measure – Cortisol (nmol/L)



***Xanamem achieved an average decrease of 73.2 vs. placebo ( $p < 0.001$ )***

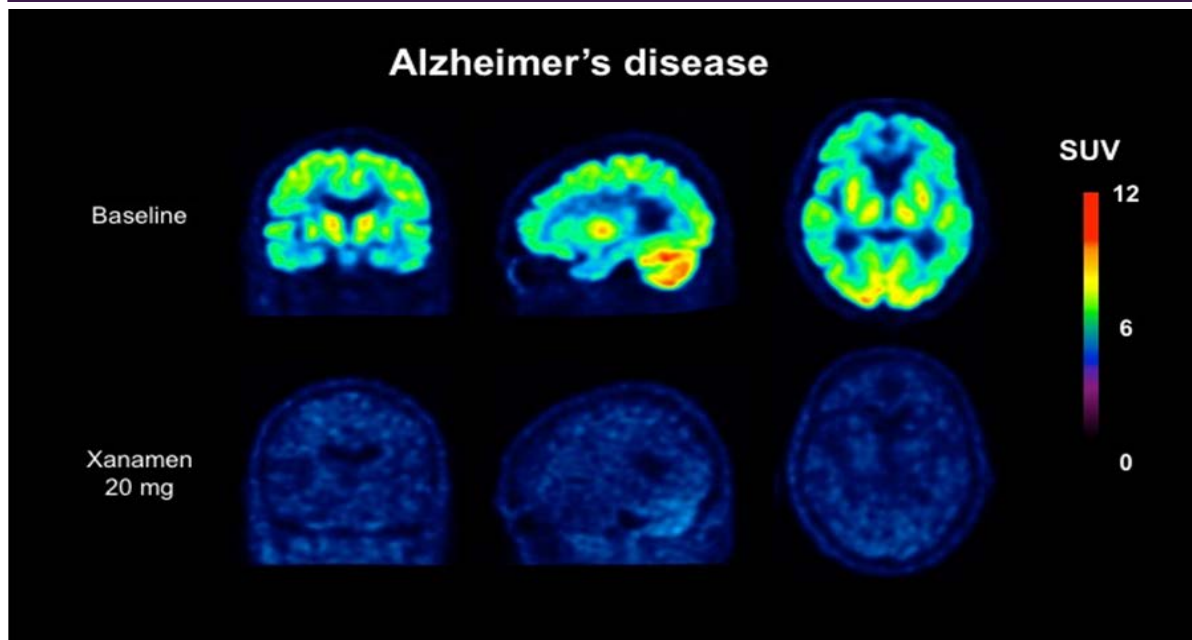
***These breakthrough results support the cortisol hypothesis that lowering persistently raised cortisol levels in the brain is expected to positively enhance cognition***

Baseline \* Mean of Observed Data



# Target Occupancy Study: Preliminary Results

Phase I target occupancy study demonstrates that 10-30mg Xanamem dosed for seven days significantly occupies neuronal 11 $\beta$ -HSD1 throughout the brain



**50% to 85% occupancy, dependent upon brain region, dosage and study subject**

Further study data available in 4Q CY2019

Additional ongoing cohorts at 5mg Xanamem and 10mg with delayed PET imaging

Phase I Target Occupancy supports Xanamem as a potent, orally bioavailable and brain-penetrant 11 $\beta$ -HSD1 inhibitor

- Xanamem 10mg-30mg effectively achieves target occupancy (50-80%) of 11 $\beta$ -HSD1 enzyme in the brain
- Xanamem 10mg and 20mg inhibits cortisol production and Xanamem 20mg achieves statistically significant reduction in serum cortisol
- Xanamem 10mg and 20mg – no serious adverse events reported after 12 weeks therapy
- **Xanamem 20mg - statistically significant cognitive improvement in healthy volunteers after 12 weeks therapy. Effect apparent after only 4 weeks, and sustained**

A person is shown from the chest up, standing at a podium and speaking into a microphone. The person is wearing a dark suit jacket. The background is blurred, showing what appears to be an indoor setting with a window and some plants. The entire image is overlaid with a semi-transparent purple gradient, which is darker on the right side and lighter on the left side. The text 'Appendix: Background information' is written in white, bold, sans-serif font in the upper left corner.

# Appendix: Background information

# Summary

Actinogen is developing innovative treatments for cognitive impairment associated with neurological and metabolic diseases with an initial focus on Alzheimer's disease



## Xanamem - lead compound

Differentiated with a novel mechanism of action

First-in-class, brain penetrant, orally active, small molecule, inhibitor of 11 $\beta$ -HSD1 enzyme  
Xanamem mechanism of action validated by independent research on the cortisol hypothesis



## Targeted strategic market focus

Initially focused on developing a treatment for Alzheimer's disease  
Addressable market worth >US\$7.5bn with unmet needs and potential upside.  
Target indication underpinned by efficacy results from animal model studies.  
Mood disorders and schizophrenia identified as additional opportunities



## Clinical stage asset

Advanced clinical stage program assessing Xanamem in Alzheimer's disease and cognitive impairment in other neurological conditions. Complementary higher dose and target occupancy phase I studies will inform future development



## Potential value upside

Totality of existing studies will inform further development and commercial potential of Xanamem



## De-risked opportunity

Fully funded programs  
Initial data from additional studies indicate brain penetration, good target occupancy and safety profile



## Experienced leadership

Board and Management with significant drug development and corporate experience, supported by key opinion leaders and Xanamem discovery team

# Corporate overview ASX:ACW

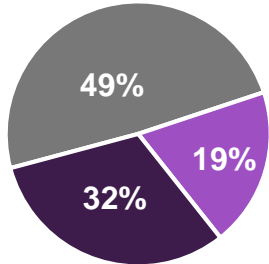


Actinogen is an ASX-listed biotech company focused on innovative approaches to treating cognitive impairment associated with neurological and metabolic diseases

## Overview

- Actinogen is developing Xanamem, a novel therapy for Alzheimer's disease, mood disorders and schizophrenia, with significant market potential
- Xanamem - lead drug, designed to inhibit cortisol production in the brain, with the potential to treat cognitive impairment
- Actinogen has completed a Phase II double-blind, 12 week, randomised, placebo-controlled study of Xanamem in Alzheimer's disease (XanADu)

## Key shareholding metrics



- BVF Partners**
- Top 20 (excl. BVF Partners)**
- 

## Board of Directors

	<p><b>Dr. Geoff Brooke</b> <i>Chairman</i> MBBS; MBA</p>		<p><b>Dr. Bill Ketelbey</b> <i>CEO &amp; MD</i> MBBCh; FFPM; MBA; GAICD</p>
<ul style="list-style-type: none"> <li><b>30+ years experience</b> in the healthcare investment industry</li> <li>Founder and MD of Medvest Inc and GBS Venture Partners</li> </ul>		<ul style="list-style-type: none"> <li><b>30+ years experience</b> in healthcare, biotech and pharmaceutical industries</li> <li>Formerly senior international roles at Pfizer and Director at Westmead Institute of Medical Research</li> </ul>	
	<p><b>Dr. George Morstyn</b> <i>Non-executive director</i> MBBS; PhD; FRACP; MAICD</p>		<p><b>Mr. Malcolm McComas</b> <i>Non-executive director</i> BEc, LLB; FAICD; SF Fin</p>
<ul style="list-style-type: none"> <li><b>25+ years experience</b> in biotech investment and drug development</li> <li>Board member of Biomedivc, Cancer Therapeutics and Symbio; Former Senior VP and SMO at Amgen</li> </ul>		<ul style="list-style-type: none"> <li><b>25+ years experience</b> in the financial services industry</li> <li>Chairman of Pharmaxis and Fitzroy River Corporation; formerly senior leadership roles in investment banking</li> </ul>	

# Advisory Boards

World's premier academics involved in the development of Xanamem and as a novel treatment for Alzheimer's disease

## Clinical Advisory Board (Alzheimer's disease)

*Positions Xanamem at the forefront of Alzheimer's drug development*



**Prof. Craig Ritchie**  
*Chair*



THE UNIVERSITY  
of EDINBURGH



**Prof. Colin Masters**  
*AO*



THE UNIVERSITY OF  
MELBOURNE



The Royal  
Melbourne Hospital



THE  
**FLOREY**  
INSTITUTE OF NEUROSCIENCE & MENTAL HEALTH



**Prof. Jeffrey Cummings**



**Cleveland  
Clinic**

## Scientific Advisory Board


*Combining deep understanding of cortisol, 11β-HSD1 and drug discovery*




**Prof. Jonathan Seckl**



THE UNIVERSITY  
of EDINBURGH



**Prof. Brian Walker**



**Newcastle  
University**



**Prof. Scott Webster**

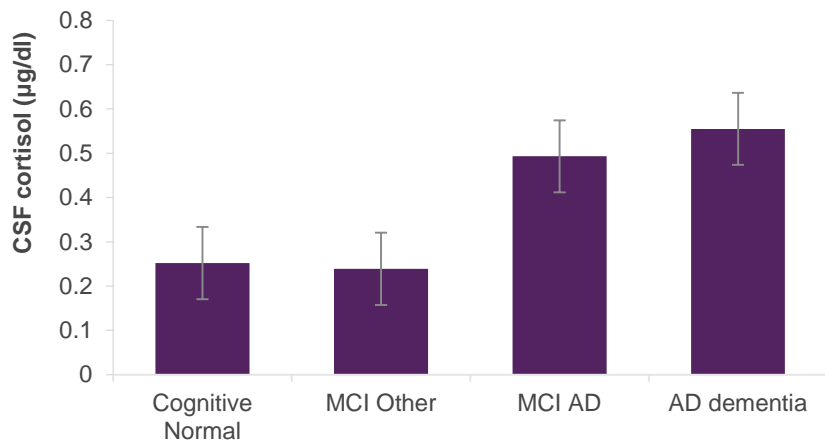


THE UNIVERSITY  
of EDINBURGH

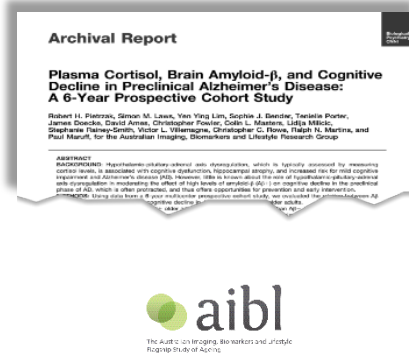
# Alzheimer's strategic focus underpinned by medical research

A growing body of medical literature supports the association between cortisol and Alzheimer's disease

## Raised cortisol associated with Alzheimer's disease<sup>1</sup>



## Supported by growing body of medical literature



Many studies support the association between **cortisol and Alzheimer's disease development and progression<sup>2</sup>**

A recent AIBL<sup>3</sup> study provided compelling evidence that elderly subjects with **higher plasma cortisol levels are at much greater risk of developing Alzheimer's disease**

This study<sup>3</sup> also demonstrated that **50% of those aged 65+ have raised cortisol levels**

**Research suggests that lowering cortisol levels may prevent the development / progression of Alzheimer's disease**

1. MCI: mild cognitive impairment; AD: Alzheimer's Disease
2. Recent studies also support the association between cortisol and cognitive impairment associated with neuroendocrine dysfunction
3. Plasma Cortisol, Brain Amyloid- $\beta$ , and Cognitive Decline in Preclinical Alzheimer's Disease: a 6-Year Prospective Cohort Study. Pietrzak et al., 2017. Biological Psychiatry: Cognitive Neuroscience and Neuroimaging 2:45-52

A novel drug designed to inhibit cortisol production in the brain, with the potential to treat cognitive impairment



## Well researched

>15 years of R&D completed



## Well tolerated

Dosed >200 patients with acceptable clinical safety, toxicity & PK / PD<sup>1</sup> profile



## Well protected

Composition of matter IP coverage, patents granted in all major markets



## Validated in Alzheimer's disease

Symptomatic and disease modifying effects (in vivo) and demonstrated effect of cortisol hypothesis (in humans)

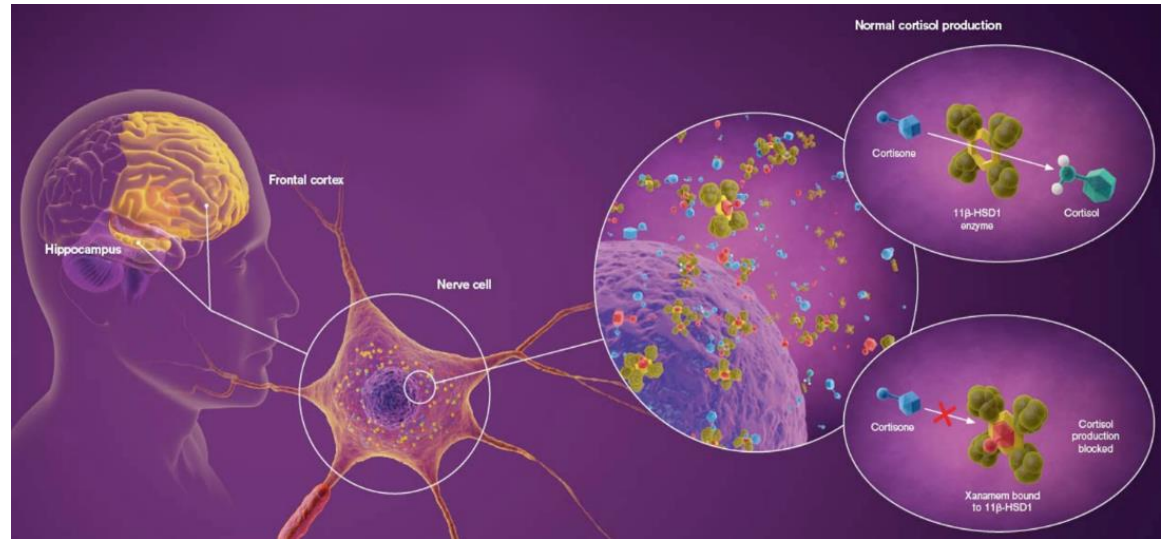


## Potential in other diseases

Secondary focus on cognitive impairment in mood disorders and schizophrenia

## Differentiated mechanism of action

Highly selective 11 $\beta$ -HSD1 inhibitor in the brain which reduces excess cortisol production









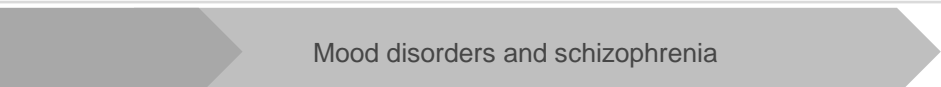

**Xanamem is a novel, first-in-class, potent, orally bioavailable and brain-penetrant 11 $\beta$ -HSD1 inhibitor**

1. PK / PD: pharmacokinetic / pharmacodynamic



# Development Pipeline and Upcoming Catalysts

Multiple studies currently underway with significant upcoming milestones in the near term

Studies	1Q CY2019	2Q CY2019	3Q CY2019	4Q CY2019	Key Catalysts
 XanADu					Completed study report 3Q CY2019
Phase I Target Occupancy & Homogenate Binding studies					Preliminary data received Further results in 3Q & 4Q CY2019
 Phase I higher dose safety study					Interim results released. Full results for 20mg expected in 4Q CY2019
Pre-clinical Toxicology studies					Results expected over 2H CY2019 and 1H CY2020
New Indications	 Mood disorders and schizophrenia				Design of clinical development plan
Strategic Development					Ongoing

*Future strategy for Xanamem drug development will be informed by these studies*

**Actinogen is fully funded to complete all current studies**

# XanADu: Phase II Clinical Trial Completed

Double-blind, randomised, placebo-controlled study to assess the efficacy and safety of Xanamem in subjects with mild Alzheimer's disease<sup>1</sup>, with initial results announced 7th May 2019

## XanADu initial results

- Efficacy end points were not achieved
- Potent pharmacodynamic modulation of cortisol-related hormones achieved
- Xanamem is well-tolerated with no safety concerns
- Sub-analyses of results currently underway

## Possible reasons behind XanADu results

- Recurrent challenges seen in AD drug development
- Xanamem dose / study duration

## Ongoing development

- Phase I **target occupancy** studies
- **XanaHES** dose escalation study
- Long-term animal **toxicology** studies
- New indications for future focus selected: mood disorders (such as **bipolar disorder**) and **schizophrenia**

1. ADAS-COG14: Alzheimer's Disease Assessment Scales – Cognitive Subscale Score (version 14); ADCOMs: AD COMposite Scores (composite data derived from ADAS-COG14, CDR-SOB and MMSE); CDR-SOB: Clinical Dementia Rating Scale – Sum of Boxes; RAVLT: Rey Auditory Verbal Learning Test; MMSE: Mini-Mental Status Examination; NTB: Neuropsychological Test Batteries; NPI: Neuropsychiatric Inventory

# XanADu: Possible Reasons Behind XanADu results

Likely due to the recurrent challenges seen in Alzheimer's disease drug development



## Conceptual model of the disease

- Causality unknown; cortisol as a target is a hypothesis
- Diagnoses largely based on highly subjective tools



## Stage of disease

- Wrong patient population (“too early” or “too late”)
- High heterogeneity as to the real biological drivers behind each individual's disease state



## Outcome/endpoint measures

- Absence of valid biomarkers
- Subjectivity of outcome assessments flawed



## Patient recruitment and retention

- Overall patient population may have been too heterogeneous to generalise results

## Xanamem

- Dose: too low or too high?
- Dosing regimen: may need bi-daily dosing?
- Treatment duration: may need to treat for longer?



# Xanamem: Phase I Target Occupancy Study & Homogenate Binding Studies

To assist with confirming and optimising Xanamem dosing



## Aim

To accurately demonstrate the effects different doses of Xanamem have on inhibiting the 11 $\beta$ -HSD1 enzyme in the human brain.

### Phase I Target Occupancy studies

- Competitive binding, radio-labelled tracer PET imaging assay
- Subject cohorts tested with Xanamem at 5mg, 10mg, 20mg, and 30mg doses.
- Data available from 10-30mg dosing cohorts

### In vitro Homogenate Binding Studies

- Enzyme occupancy competition studies, saturation binding studies, and enzyme activity assays in rat and human brain sections (ongoing)
- To correlate enzyme occupancy and enzyme activity at incremental doses of Xanamem

**Key studies to help interpret XanADu results and support future clinical development strategy**



## Aim

Evaluate safety and toxicology in rodent (six months) and dog (nine months) studies in preparation for longer term clinical studies

- Studies **required by all regulators - FDA**
- Will allow future **clinical studies beyond 12 weeks**
- Studies **ongoing**
- **No substantive safety issues** observed to date

**Key study to support future clinical development strategy**

# Market dynamics of Alzheimer's disease

Presents a compelling commercial opportunity for Actinogen to target initially

## Substantial target market with significant upside<sup>1</sup>

Cortisol-high, cognition normal	Subjective memory decline	Cognitive and functional decline fulfilling dementia		
At-risk	Prodromal	Mild	Moderate	Severe
~25.0m (50% over 65 yrs)	~4.0m	~1.5m	~1.7m	~2.5m

Upside potential for earlier use      Key focus

  
**>US\$7.5bn**

Target annual peak sales (mild AD)<sup>2</sup>

Source: Drugs.com, Biogen, Roche, Datamonitor, Alzheimer's Association

1. Target market statistics based on the current US treatment landscape

2. Base case annual peak sales assumes: (1) Launch: US 2024, EU5, JP and ROW 2025; (2) Penetration: 30% of mild AD market in 5 years (i.e. ~470,000 in the US); (3) Pricing: US – US\$19/day gross (US\$12/day net), ROW: 50% of US price

## Underpinned by favourable market dynamics

- ✓ Targeting **large addressable** markets (US, EU5, JP)
- ✓ All **currently approved drugs are symptomatic treatments** (that do not affect disease progression) **providing limited benefit**
- ✓ Treatment **prices are robust** (despite generic competition) – with users paying for modest clinical efficacy

## US branded products (gross price)



US\$10/day



US\$8/day



US\$18/day

# Big Pharma interest

Global Big Pharma demonstrating strong M&A interest in acquiring or partnering with companies and licensing novel mechanism of action assets with Alzheimer's disease as the lead/key indication

