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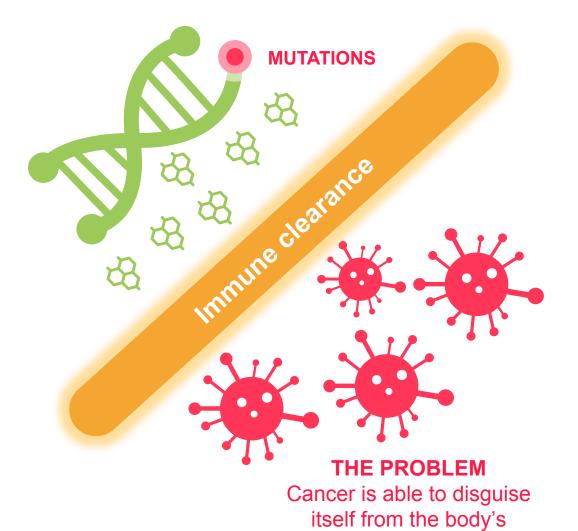
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#### Cancer

Everyone has abnormal cells in their body acquired over time due to environmental exposures and lifestyle.

99.9 % of the time, your immune system quickly and efficiently kills precancerous cells, but failures in this process can lead to uncontrollable growth and which can in turn lead to cancer.



immune system

# Immunotherapy - Science's Global Breakthrough of 2013

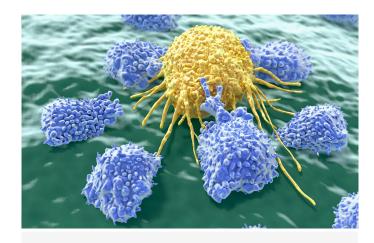
#### The power of the body

Immunotherapy has been described as "The beginning of the End for Cancer"

Cancer immunotherapies use the patient's own immune system to fight cancer

This is done by enabling the host immune system to recognise and destroy cancer cells

Immunotherapies can either induce, enhance, or suppress an immune response as required



Cures in a variety of advanced cancers with ticket for fast track regulatory approval.



**Fast Track** 



**Breakthrough Therapy** 



**Accelerated Approval** 



**Priority Review** 

# **Immunotherapy**

#### Leaders in the field of immuno-oncology

Projected to be \$80 Billion annual market in 2020

SalvaRx seeking to develop drugs to augment drugs from major Pharma Co's

















# **SalvaRx Management Team**

# SalvaR

#### Two Former Bristol-Myers Squibb executives

IAN B. WALTERS MD, MBA: CEO, CMO

19 years in R&D, Developed 30+ compounds, 5 approved.

# Business background VC, Corporate Development, licensing, M&A, MBA from the Wharton School.













# ROBERT KRAMER

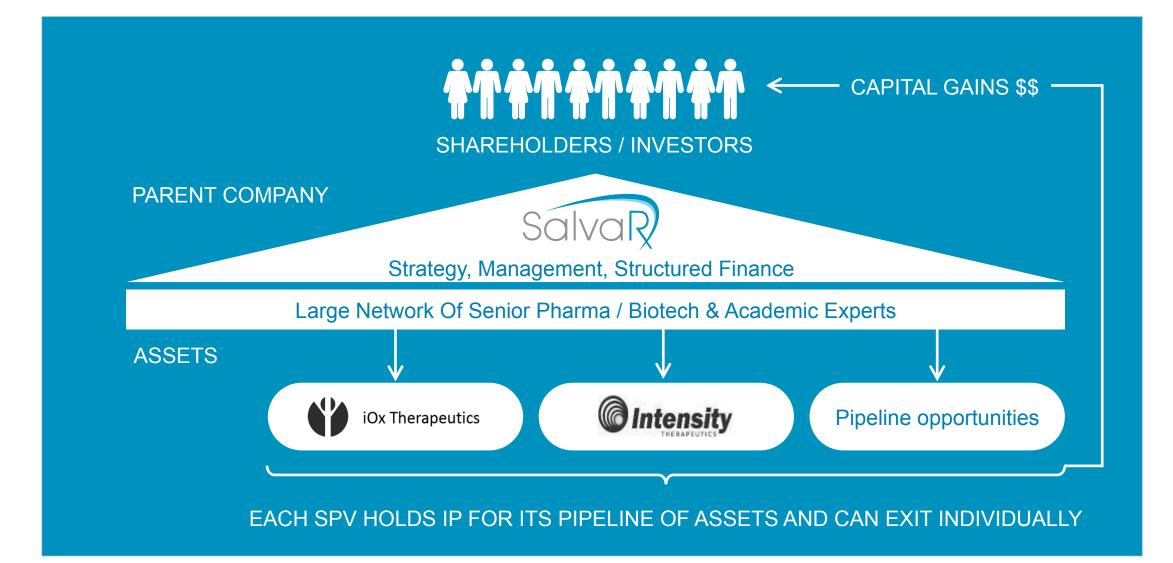
PhD: CSO

24 years in the pharmaceutical industry: Transitioned 35 drugs from discovery into the clinic.

#### **Academic**

Postdoc at the National Cancer Institute, Assistant Professorship at Harvard Medical School.

Formed SalvaRx to develop the **next generation** of Immunotherapy



#### **Current Portfolio**



#### iOx



Based on ground breaking scientific research by **Professor Vincenzo Cerundolo** on invariant natural killer t-cells (iNKT).

SalvaRx acquired a 60% interest iOx on 1 July, 2015.

LUDWIG INSTITUTE FOR CANCER RESEARCH

Ludwig Institute for Cancer Research has managed the early pharmaceutical development work.

- > Formulation to make the drug
- > Preliminary regulatory guidance
- > Clear plan to the clinic



IMM60 funded through to Phase 2

> Oxford University funds a 60 patient Phase 1/2 trial.

IMM65 funded through two Phase 1 trials

> EC grant covers all development costs.

iOx: small investment progresses 2 products into humans and set for discussions with partners

#### **Current Portfolio**

# SalvaR

## **Intensity Therapeutics**



M.I.T. engineer discovered technique of reformulating drugs to improve activity.

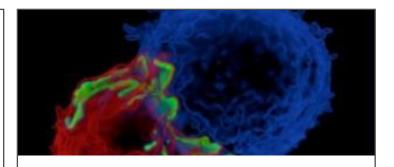
SalvaRx invested to acquire 9.2% stake April, 2016.



Collaborative Research and Development Agreement (CRADA) with the NCI.

Laboratory has reproduced.

Results, and is helping to improve technology.

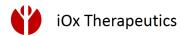


Technology is injected directly into the tumor but stimulates a systemic immune response.

Easy to obtain proof of concept in the clinic, expected within 1 year.

Entering the clinic late 2016, applicable to many solid tumors

# **SalvaRx Diverse Pipeline**



Indication(s)	Program	Discovery	Preclinical	Phase I	Phase II	Phase III
Melanoma	IMM60			1/11	trial planned¹	
Lung cancer	IMM60					
Vaccines	IMM47					
Bladder/Ovarian/Lung/Prostate	IMM65 <sup>2</sup>			planned <sup>1</sup>		
Discovery	IMM70 IMM80					



Colid Turnoro	INT230-6			
Solid Tumors	IIN I 23U-0			
			1	

- Operationalized and funded by Oxford University
   Grant covers development and 2 planned Phase 1 trials

# **Major Milestones**





Since August 2014, SalvaRx has been collaborating with the iOx team. SalvaRx closed its investment in iOx on June 2015 and has negotiated two very advantageous collaborative funding agreements.



**Structure** 

Reverse takeover of 3legs Resources PLC in March 2016 with £1.95M raise. SalvaRx is now listed on AIM: SALV.

SALV



**Investment** 

Opportunities

Reviewed 100's of therapeutic opportunities.
Others are still under active review.



**Funding** 

Assembled management / governance teams.



SalvaRx made an investment in Intensity Therapeutics yesterday.



#### **Opportunity**

> Cancer immunotherapy is a fast growing and new therapeutic area, which is expected to grow to \$80 billion worldwide by 2020



#### People

> Strong management team with a proven track record of discovering and commercialising drugs in the area of cancer immunotherapy



#### **Objective**

> Invest in a portfolio of companies involved in novel cancer immunotherapies and develop them through clinical proof of concept

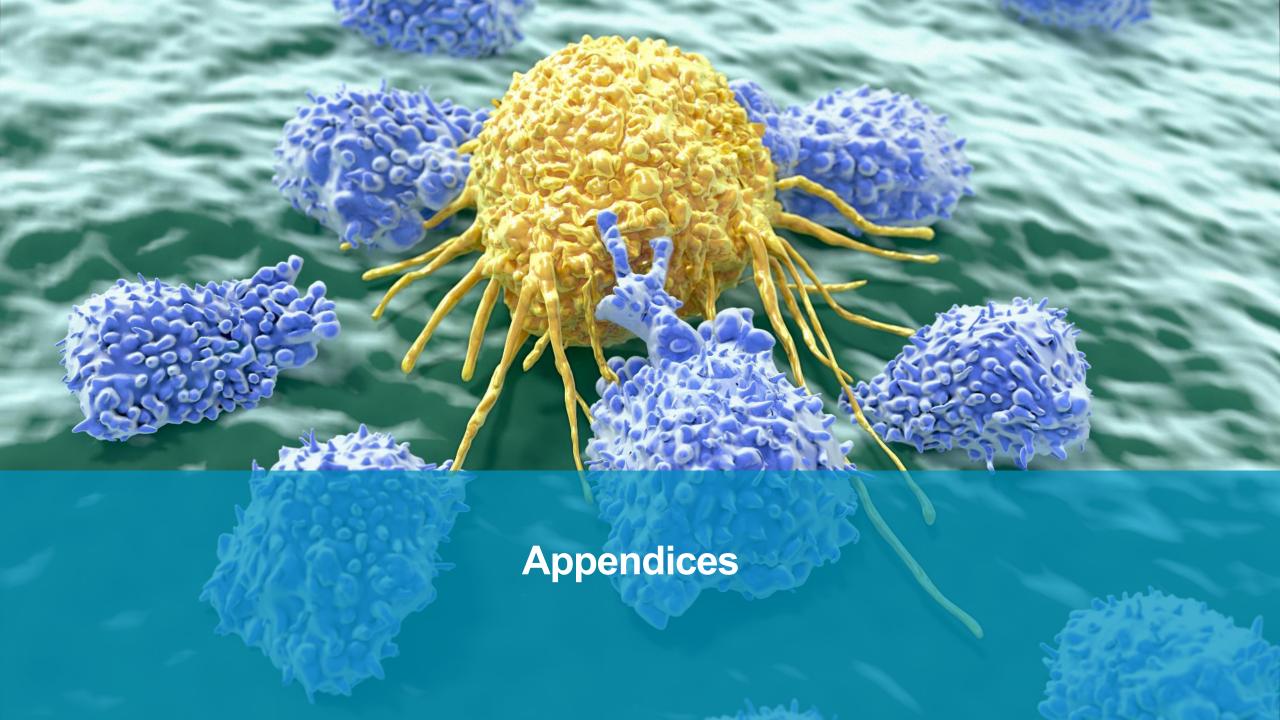


#### **Value**

> Acute need for therapies in cancer may allow early exit opportunities if programs are successful. Multiple programs provide near-term value drivers



Thank you



# **Immunotherapy**

### Success spurring large deals for early phase products

TARGET	ACQUIRER	DEAL VALUE	CATEGORY	STAGE
MERCK	Pfizer	\$850m upfront, \$2b total	anti-PD-L1 antibody	Phase 1
JUNO MARKATAN	(Celgene	\$1b total	CAR-T	Phase 1
<b>⊚</b> cCAM	MERCK	\$605m Total, \$95m upfront	CEACAM1 Inhibitor, Monoclonal Ab	Phase 1
FLEXUS BIOSCIENCES	Bristol-Myers Squibb	\$800m upfront, \$1.25b total	IDO Inhibitor	Preclinical
ADURO BIOTECH.	U NOVARTIS	\$200m upfront, \$750 total	STING inhibitors	Preclinical
cel·lectis	Pfizer	\$265m Total, \$80m upfront	CAR-T	Preclinical
Five <u>Príme</u>	Bristol-Myers Squibb	\$350m upfront, \$1.7B total	Anti-CSF1 antibody	Preclinical

# **Immunotherapy Recent IPOs**

COMPANY	POST IPO VALUATION	TECHNOLOGY	IPO DATE	STAGE
Blueprint medicines (BPMC)	\$850M	Small molecule kinase inhibitors	May 15	Preclinical
Juno Therapeutic (JUNO)	\$3B	CAR-T	Dec 14	Phase 1
Nantkworks (NK)	\$3B	CAR-NK	July 15	Phase 1
CytomX (CTMX)	\$400M	probodies	Oct 15	Preclinical
Aduro (ADRO)	\$2B	vaccine	April 15	Phase 2
Adaptimmune (ADAP)	\$1.3B	T-cell receptors	May 15	Phase 1

- > Opportunities to access public markets at early stages
- > Large valuations for early immunotherapy companies

#### **Publications**

- 1. Cutting Edge: Nonglycosidic CD1d Lipid Ligands Activate Human and Murine Invariant NKT Cells. Silk et al. J Immunol 2008; 180:6452-6456.
- 2. Invariant NKT cells reduce the immunosuppressive activity of influenza A virus-induced myeloid-derived suppressor cells in mice and humans. De Santo et al. J Clin Invest. 2008;118(12):4036-48.
- 3. Nonglycosidic agonists of invariant NKT cells for use as vaccine adjuvants. Reddy et al. ChemMedChem. 2009 Feb; 4(2):171-5.
- 4. T Cell Receptor CDR2b and CDR3b Loops Collaborate Functionally to Shape the iNKT Cell Repertoire. Mallevaey et al. Immunity 31, 60–71, July 17, 2009.
- 5. Synthesis and biological activity of α-galactosyl ceramide KRN7000 and galactosyl (α1→2) galactosyl ceramide. Veerapen et al. Bioorg Med Chem Lett. Aug 1, 2009; 19(15): 4288–4291.
- 6. Synthesis of truncated analogues of the iNKT cell agonist, α-galactosyl ceramide (KRN7000), and their biological evaluation. Veerapen et al. Bioorg Med Chem. Jan 1, 2011;19(1): 221–228.
- 7. Preparation, Characterisation and Entrapment of a Non-glycosidic Threitol Ceramide into Liposomes for Presentation to Invariant Natural Killer T Cells. Kaur et al. J. Pharma Science, Vol 100, No.7. July 2011.
- 8. Towards multivalent CD1d ligands: synthesis and biological activity of homodimeric α-galactosyl ceramide analogues. Jervis et al. Carbohydr Res. Jul 15, 2012; 356(9-10): 152–162.
- 9. Amide Analogues of CD1d Agonists Modulate iNKT-Cell-Mediated Cytokine Production. Wojno et al. ACS Chem. Biol. 2012, 7, 847–855.
- 10. Interaction between Invariant NKT Cells and Myeloid-derived Suppressor Cells in Cancer Patients: Evidence and Therapeutic Opportunities. Mussai, J et al. J. Immunother. Volume 35, Number 6, July–August 2012.
- 11. Design, Synthesis, and Functional Activity of Labeled CD1d Glycolipid Agonists. Jervis et al. Bioconjugate Chem. 2013, 24, 586–594.