

Oncimmune<sup>®</sup>



**Oncimmune**

Beating cancer, one test at a time



## Disclaimer

The information contained in this document (“**Presentation**”) has been prepared by Oncimmune Holdings plc (“**Company**”) to provide background information on the Company, and for no other purpose.

The information in this presentation is confidential. The information and opinions contained in this presentation have not been independently verified, are provided as at the date hereof and are subject to amendment, revision and completion without notice. No person is under any obligation to update or keep current the information contained in this presentation. No representation, warranty or undertaking, express or implied, is made by the Company, its advisers or representatives, or their respective officers, employees or agents as to, and no reliance should be placed on, the fairness, accuracy, completeness, correctness or reasonableness of the information or the opinions contained herein. The Company, its advisers or representatives, or their respective officers, employees and agents expressly disclaim any and all liability which may be based on this and any errors therein or omissions therefrom.

This presentation does not constitute an offer to sell or the solicitation of an offer to subscribe for or buy any security of the Company in any jurisdiction. This Presentation is not an invitation or inducement to engage in investment activity for the purposes of the Financial Services and Markets Act 2000 (UK) (“**FSMA**”). This Presentation has not been approved by an Authorised Person for the purposes of FSMA and is not a financial promotion for the purposes of FISMA. This Presentation has been prepared in accordance with English law and the information disclosed may not be the same as that which would have been disclosed if this presentation had been prepared in accordance with the laws of jurisdictions outside the UK. Any persons who are subject to the laws of any jurisdiction other than the UK should inform themselves about, and observe, any applicable legal requirements.

No representation or warranty, either express or implied, is provided in relation to the accuracy, completeness or reliability of the information contained herein.

No indication of past performance should be relied upon as a guide to future performance. Statements that are not historical facts, including, without limitation, statements concerning future strategy, beliefs, expectations, intentions, prospects, projected profits or revenues, the industry in which the Company operates and commercial potential are forward-looking statements. By their nature, forward-looking statements involve substantial risks and uncertainties because they relate to events and depend on circumstances that may or may not occur in the future. Forward-looking statements accordingly are subject to change at any time. If any of these risks or uncertainties materialise, actual results and developments may differ materially from those expressed or implied by these statements.

The presentation should not be distributed, published or reproduced (in whole or in part) or disclosed by its recipients to any other person for any purpose, other than with the consent of the Company. By accepting receipt of, attending any presentation or delivery of or electronically accessing the presentation, you undertake to keep this presentation and the information contained herein confidential and not to forward the presentation to any other person, or to reproduce or publish the presentation, in whole or in part, for any purpose.



A leader in the development and commercialisation of immunodiagnostics for the screening and detection of cancer





## Foundation for success



### Proprietary immunogenic protein library

Over **8,000** proteins  
patented | advanced | highly validated



**200+** patents  
granted and pending  
**47** territories



**38** reviewed  
publications  
**91** peer-reviewed  
presentations



**12,209**  
in **NHS** trial



**£69.5 million**  
invested



Europe, US, China  
**69** staff



**Lung & liver tests**  
launched  
3+ more in the pipeline



**£42+ million**  
minimum sales  
commitments



Validated multi-format  
performance  
central lab, IVD kit and  
multiplex bead



## Company overview

- Newly appointed management team that has already delivered on core strategic objectives
  - Maintain focus on core business of developing and commercialising clinical tests for early detection of single types
  - Unlocking the existing technology platform through strategic partnerships and acquisitions
- Strategic partnership agreement with US-focused Lung Cancer Specialist, Biodesix, Inc. for EarlyCDT Lung valued at up to \$28 million over next five years with lump sum payments and direct cost savings
- Acquisition of Protagen Diagnostics AG (March 2019)
  - Established revenue-generating company with existing partnerships with leading pharmaceutical multinationals
  - Will accelerates Oncimmune's biomarker discovery process
  - Stratification tools will support drug development, improve treatment strategies and patient management
- Strong Intellectual Property (over 200 patents granted and pending patents)
- Regulatory progress: local regulatory approvals – CLIA laboratory, 510k De Novo3(2019); CE marked kit in EU; NMPA application progressing
- Listed on London Stock Exchange AIM market (ONC:LN)
- Offices in London (UK); Nottingham (UK); Dortmund (Germany); Kansas City (USA); and a partner representative office in Shanghai (China)



## Core scientific principle

Early cancer detection based on autoantibodies

- Autoantibodies produced early in tumour formation – can be detected years ahead of clinical diagnosis<sup>3,4</sup>
- Absent or low concentrations in healthy & benign groups
- Patients with lung cancer can mount an immune response with autoantibodies providing an early measurable signal

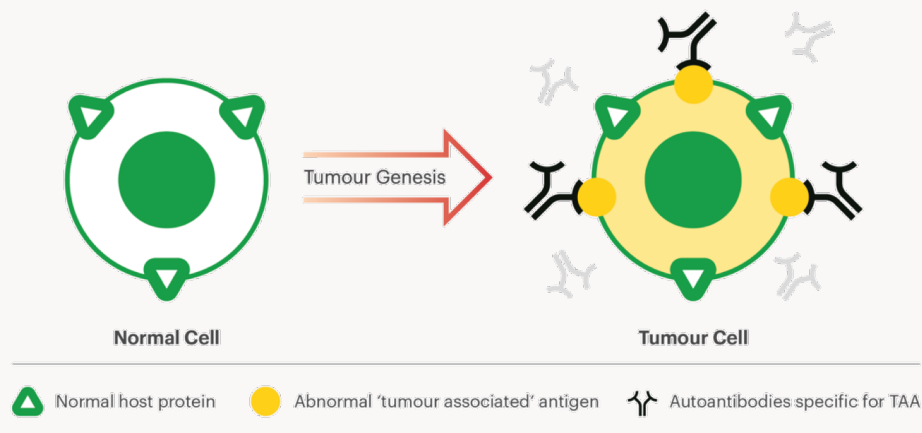
Proven cancer detection methodology

## Antibody capture technology

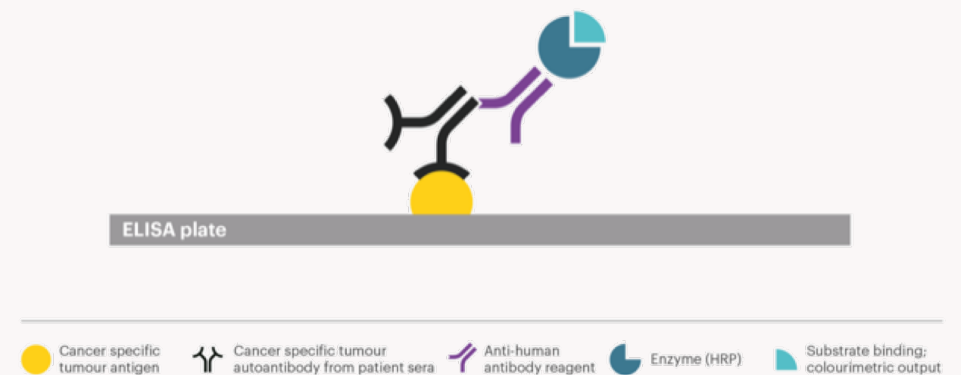
Proprietary immunogenic protein library

- Over 8,000 immunogenic proteins
- Enzyme-Linked ImmunoSorbent Assay (ELISA)
- Multi-analyte panels developed to cover disease heterogeneity
- Cut-offs established to return a positive result on single analyte

### Core Scientific Principle



### Oncimmune's Autoantibody ELISA



<sup>3</sup> Zhong L, et al. Profiling tumour-associated antibodies for early detection of non-small cell lung cancer. *J Thor Oncol* 2006; 1:513-519.

<sup>4</sup> Jett J, et al. Determination of the detection lead time for autoantibody biomarkers in early stage lung cancer using the UKCTOCS cohort. *J Thor Oncol* 2017; 12(11):S2170.



## Early detection landscape

### 1. Early detection potential in multiple cancers



### 2. Retrospective evidence of performance indicating downstream potential for survival impact



### 3. Launched application with evidenced performance in highly prevalent cancer with clinical unmet need

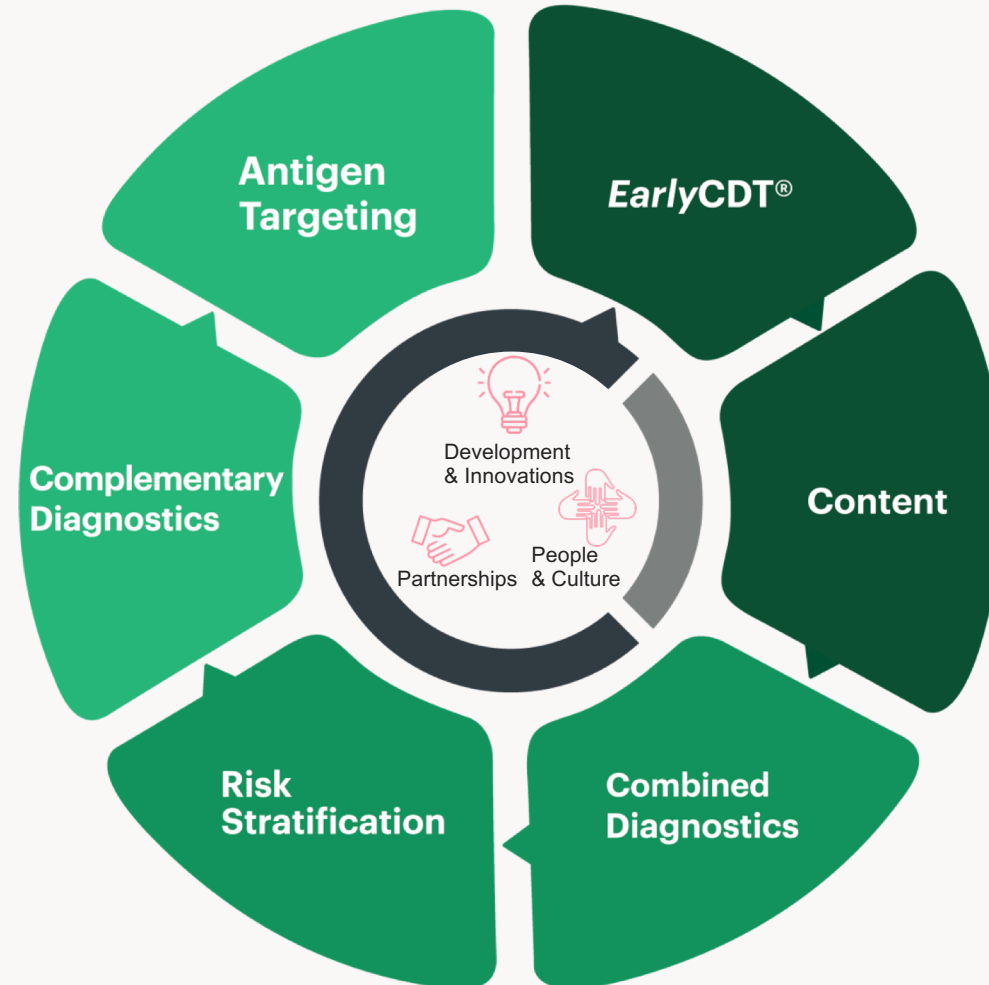


### 4. Prospectively evidenced application with positive impact on outcomes in existing clinical unmet need





## Unlocking the broad value of our technology through our core strengths



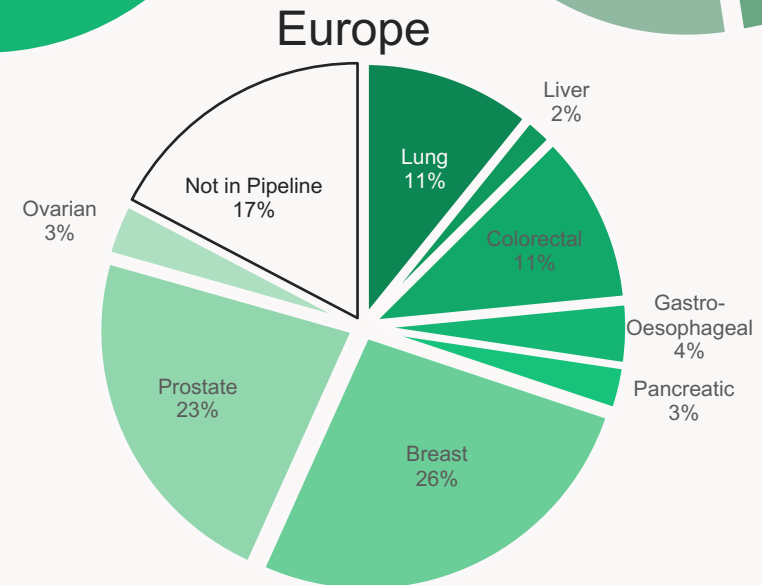
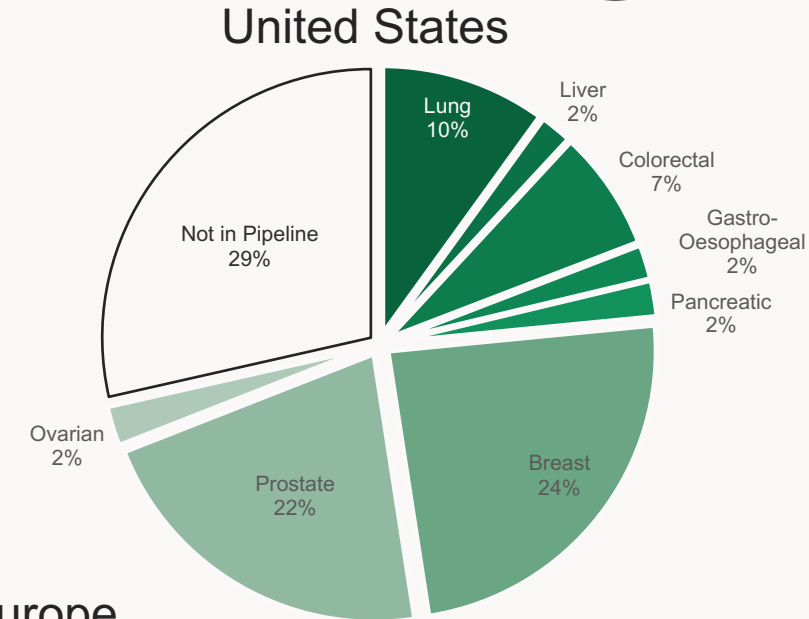
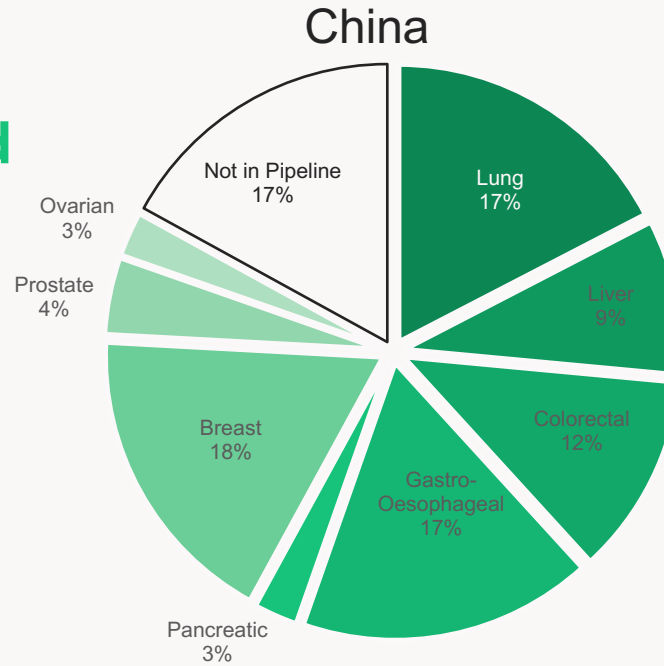


**Market overview &  
corporate strategy**



**Portfolio and pipeline designed to address many cancer types**

**2,100,000** lung  
&  
**840,000** liver  
new cancer cases  
annually



Cancer incidence – age standardised rate for all cancers (inc NMSC)<sup>5</sup>

<sup>5</sup> International Agency for Research on Cancer, WHO; The Global Cancer Observatory, Globocan 2018 <https://gco.iarc.fr/today/home>



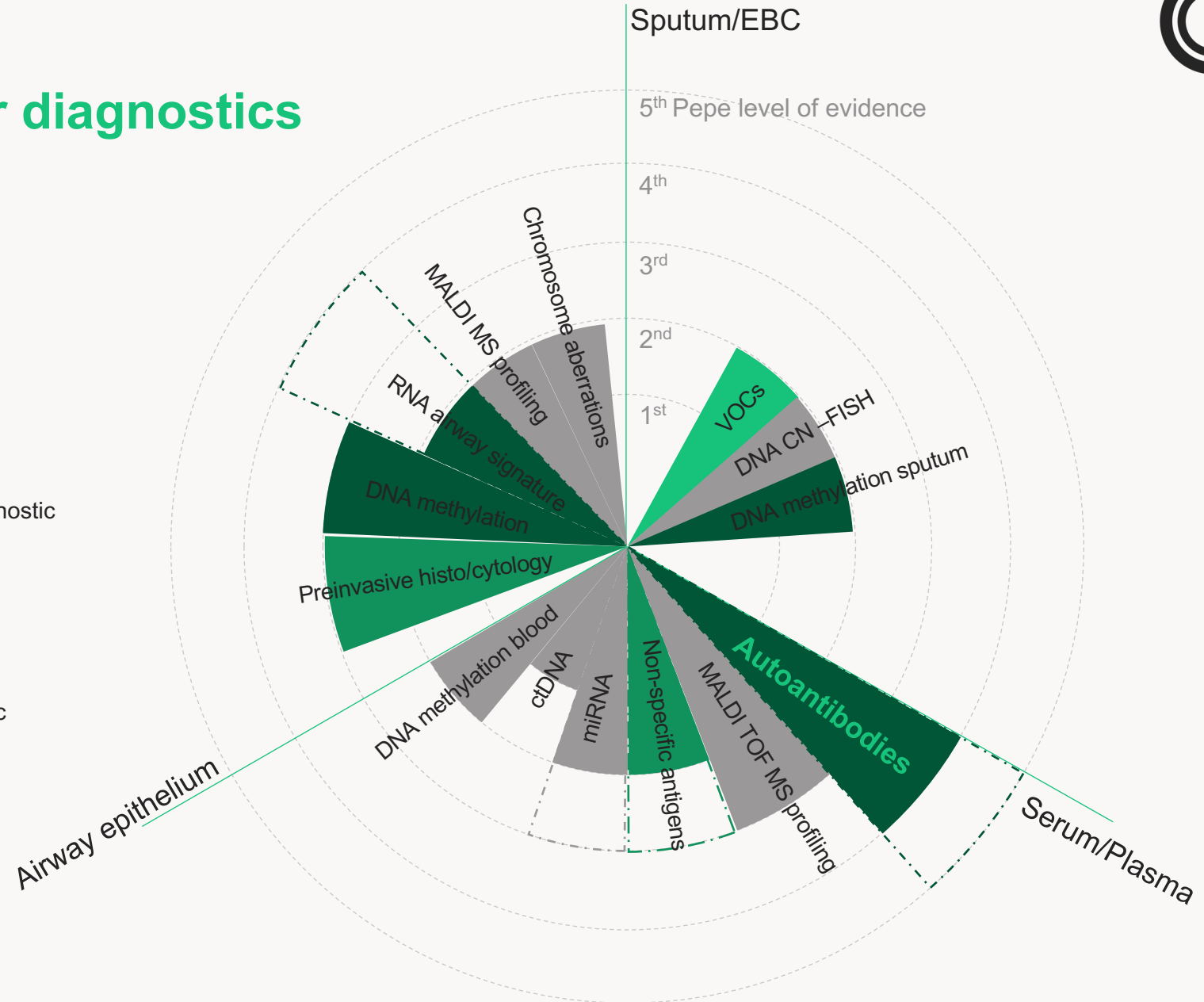
## EarlyCDT clinical test portfolio & roadmap

	Preclinical exploratory	Clinical assay and validation	Retrospective longitudinal	Prospective screening	Cancer control <sup>6</sup>	
Commercialised clinical tests	Lung					Launched 2012 – Rule-in for pulmonary nodules and screening applications
	Liver					Launched 2018 Initiating commercial delivery
Clinical tests in development	Ovarian		Sub-screening application launch			Performance validated
	Breast					Data generated
	Prostate					Data generated
	Colorectal					Proof of concept – panel discovery
	Gastro Oesophageal					Proof of concept – panel discovery
	Pancreatic					
				Screening application launch		



## Progress of biomarker diagnostics

- ▶ **1<sup>st</sup> generation clinical biomarkers**
  - Minimal benefit
  - Poorly reimbursed
  - Increased risk
  - A data trend
  - Descriptive
  
- ▶ **2<sup>nd</sup> generation clinical biomarkers**
  - Known benefit - subset
  - Value-based reimbursement
  - Unique to person multi-measures
  - Predictive, prescriptive and potentially prognostic
  
- ▶ **3<sup>rd</sup> generation clinical biomarkers**
  - Great potential benefit
  - Challenging reimbursement mechanism
  - A personal profile
  - Predictive, prescriptive and likely prognostic
  
- ▶ **4<sup>th</sup> generation clinical biomarkers**
  - Transformational benefit to rapid diagnosis
  - Unknown reimbursement mechanism
  - N=1, longitudinal, dynamic personal profile
  - Predictive, possibly prescriptive

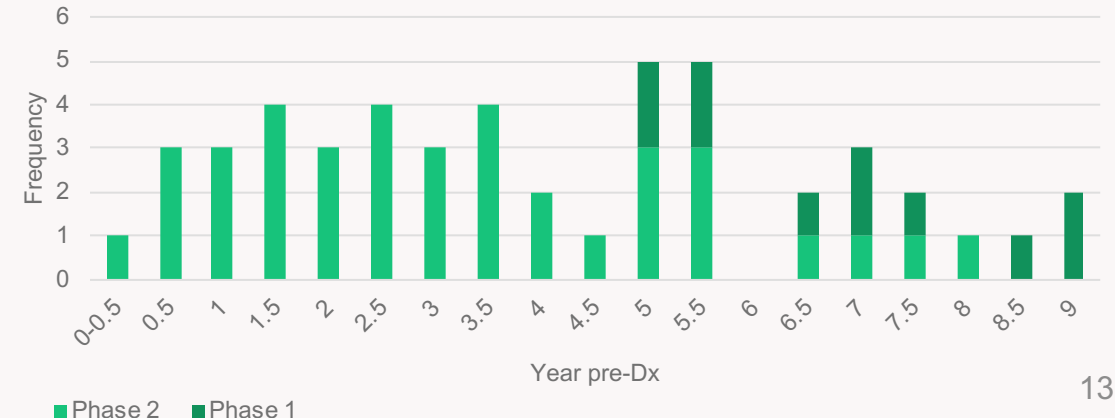
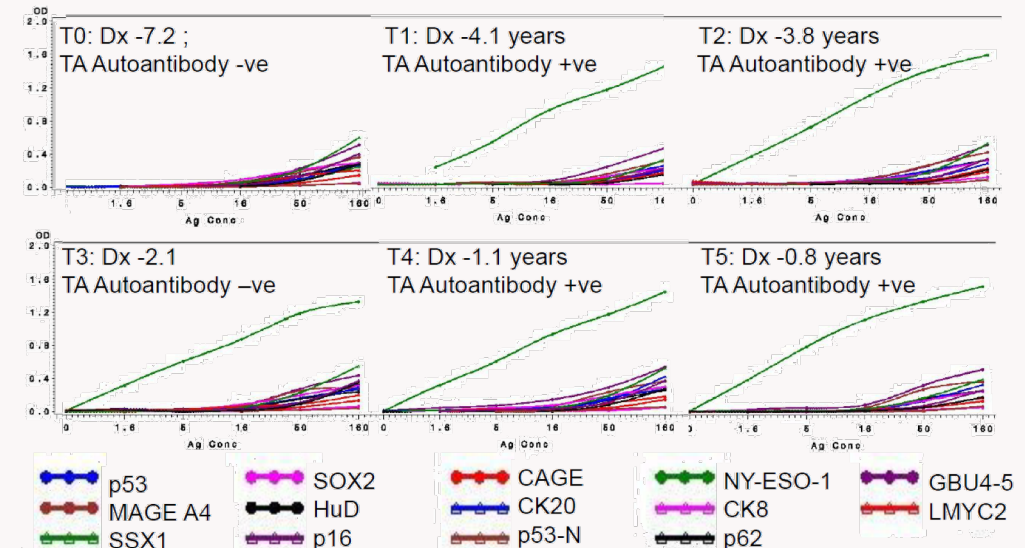




## EarlyCDT – scientifically proven earlier detection technology

Longitudinal study of autoantibody detection lead time

- 202,000 women followed for 14 years (UKCTOCS)
- 142 lung cancer cases with longitudinal sampling up to 10 years prior to diagnosis
- Median detection of lung cancer by EarlyCDT Lung four years before standard diagnosis





## Intended Uses

1. **Reflex test on human patients to further assess the risk of lung cancer being present where indeterminate lung nodules have been detected but have not been diagnosed as malignant**
2. Primary screen of human patients at high risk of lung cancer:
  - $\geq 50$  years of age with at least a 20 pack year smoking history
  - 40-49 years of age with at least a 20 pack year history plus at least one additional risk factor

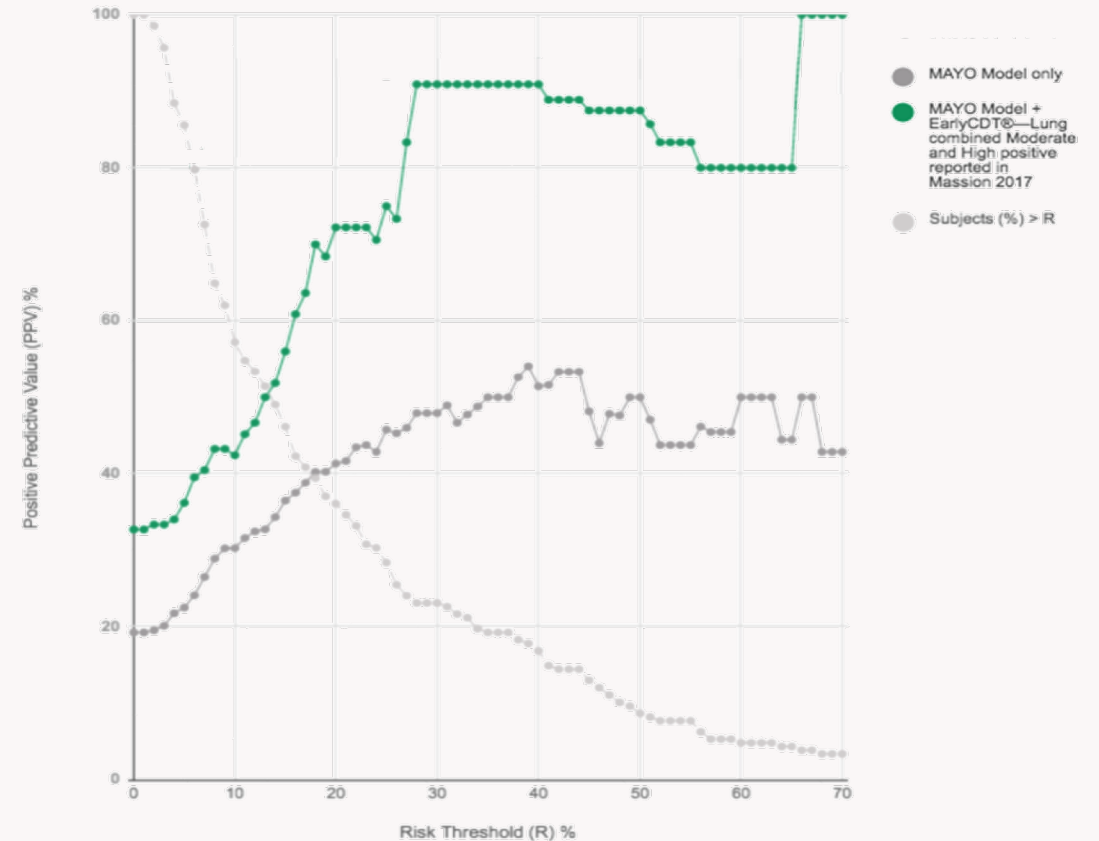




## Application as a rule in test for indeterminate pulmonary nodules

EarlyCDT Lung vastly improves predictive risk of imaging in lung cancer

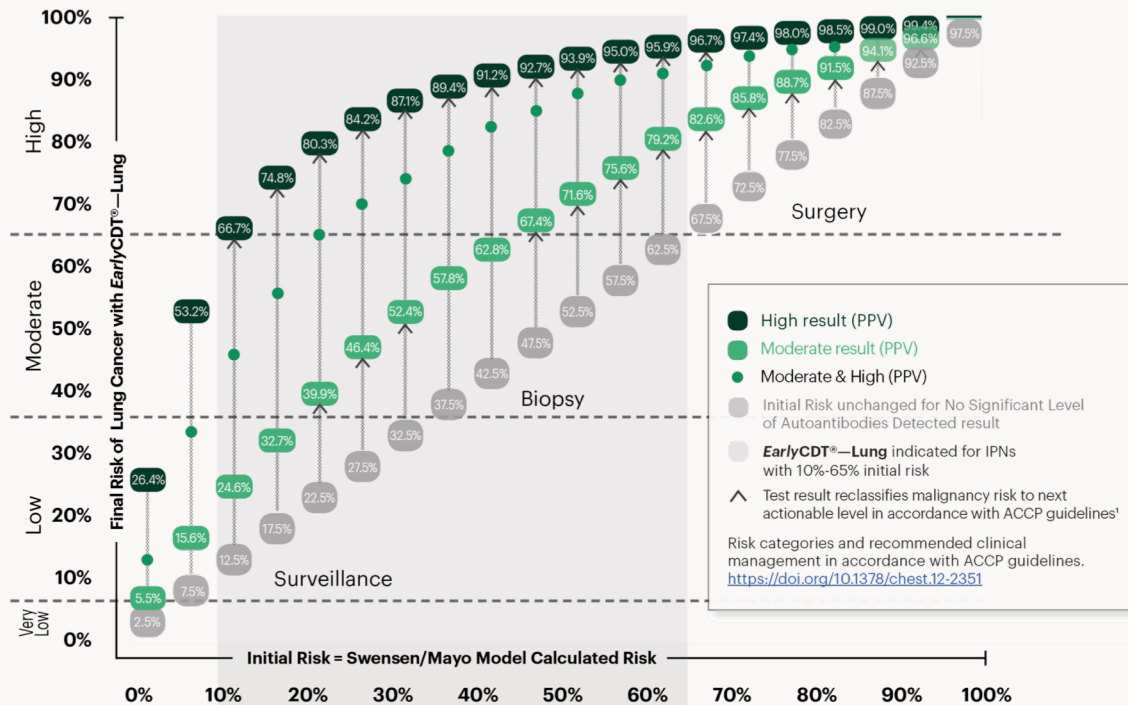
Improved diagnostic performance of MAYO CT risk model in combination with EarlyCDT Lung<sup>10</sup>





## Pulmonary nodule risk assessment with EarlyCDT Lung

**EarlyCDT<sup>®</sup>—Lung** Reclassifies Malignancy Risk  
in Nodules with 10%-65% Initial Risk



- “High level” result

- Accurately requalifies moderate risk patients with this result into high risk
- Alters recommended course of action to intervention

- “Moderate level” result

- Qualifies a patient at an additional 25% risk of disease
- Most patients with this result will be moved to intervention

A nodule risk calculator combining the Swensen/Mayo model with **EarlyCDT<sup>®</sup>—Lung** is available at <http://oncimmune.com/nodule-calculator>  
 1. Risk calculations: Healey GF, Macdonald IK, Reynolds C, et al. Tumor-Associated Autoantibodies: Re-Optimization of **EarlyCDT<sup>®</sup>—Lung** Diagnostic Performance and its Application to Indeterminate Pulmonary Nodules *J Cancer Ther.* 2017; 8:506-517.



## Intended Uses

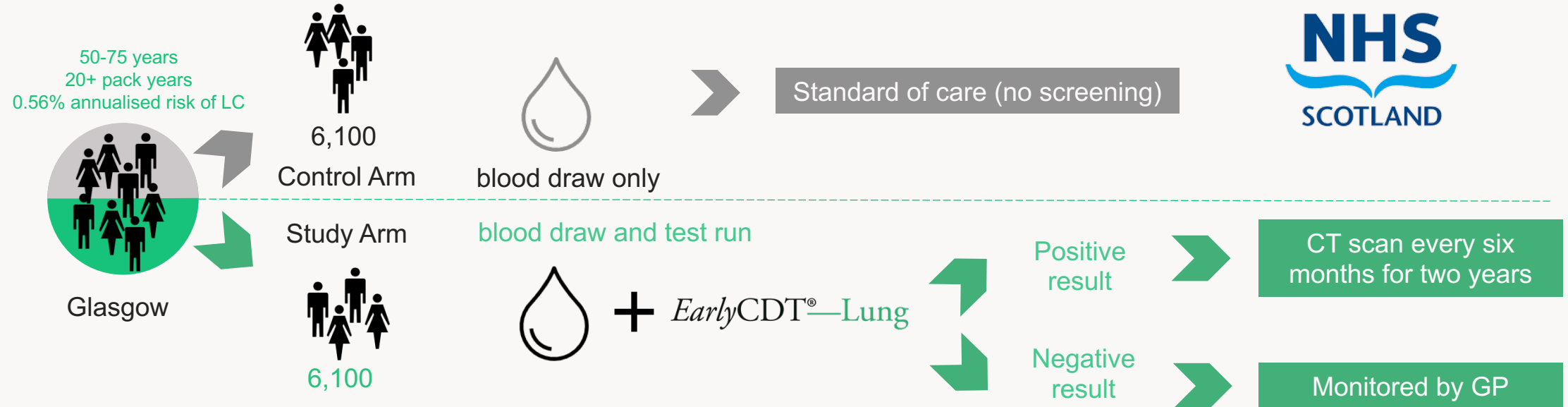
1. Reflex test on human patients to further assess the risk of lung cancer being present where indeterminate lung nodules have been detected but have not been diagnosed as malignant
2. **Primary screen of human patients at high risk of lung cancer**
  - ≥50 years of age with at least a 20 pack year smoking history
  - 40-49 years of age with at least a 20 pack year history plus at least one additional risk factor





## ECLS<sup>12</sup> study in collaboration with NHS Scotland – top line results met primary end point

- Primary endpoint: assess the effectiveness of EarlyCDT Lung test in reducing the incidence of patients with late-stage lung cancer at diagnosis compared with standard clinical practice



- It is estimated that 18.7% of the world’s population will be smokers by 2028<sup>13</sup>; Scotland alone has over 800,000 smokers<sup>14</sup>
- We estimate early stage detection saves c.£40,000 in treatment costs per patient<sup>15</sup>

12 ECLS: Early Cancer detection test – Lung cancer Scotland. Believed to be the largest

13 Tobacco Free Initiative WHO; Global Report on trends in tobacco smoking 2000-2025 Trends, Second Edition

14 Mid-year Population Estimates Scotland (Mid-2017); Fastfacts – Smoking in Scotland No.1 (published in October 2018 by Ash Scotland)

15 NHS



## Decrease in frequency of late stage detection

Number of late stage lung cancers at diagnosis 2 years after randomisation

### 2 year follow-up

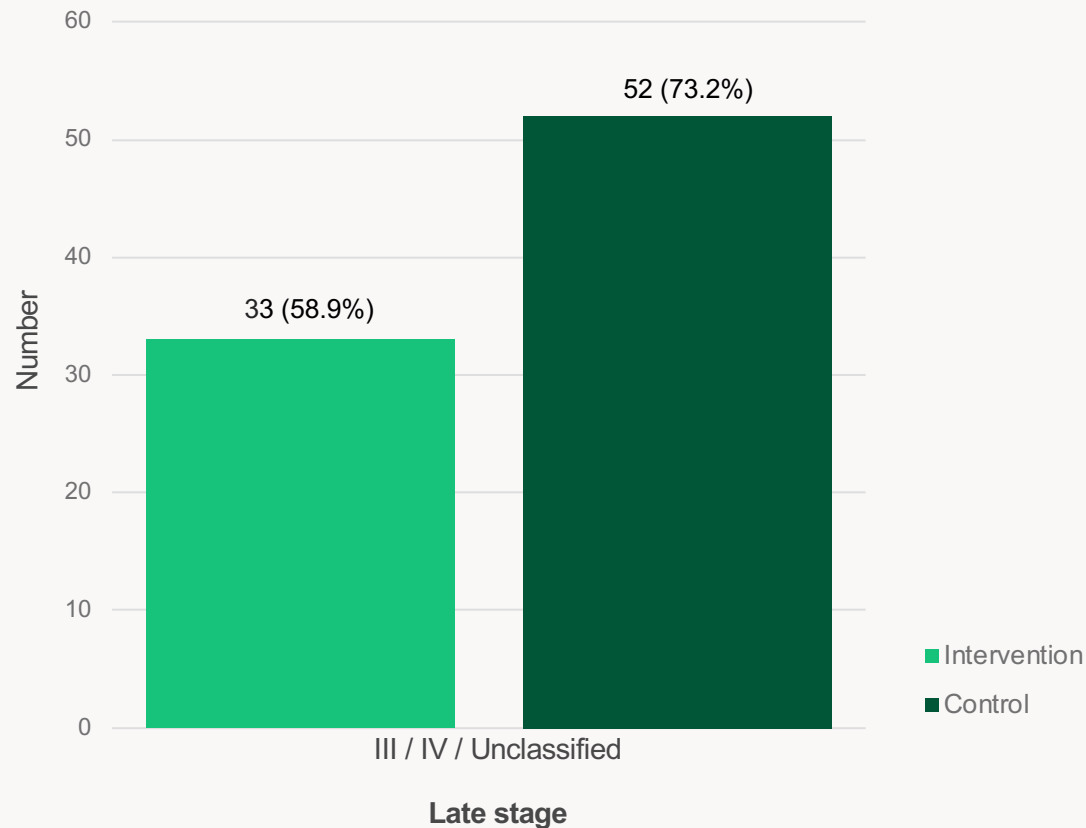
Specificity 90.4%

Sensitivity 32.7% all  
52.2% early

### 1 year follow-up (post-hoc)

Specificity 90.4%

Sensitivity 45.5% all  
69.2% early





## Performance and positive predictive value

EarlyCDT

	Early stage	Overall
Sensitivity	59.3%	40%
Specificity	90.2%	
PPV	4.0%*	

Double positive; EarlyCDT followed by CT

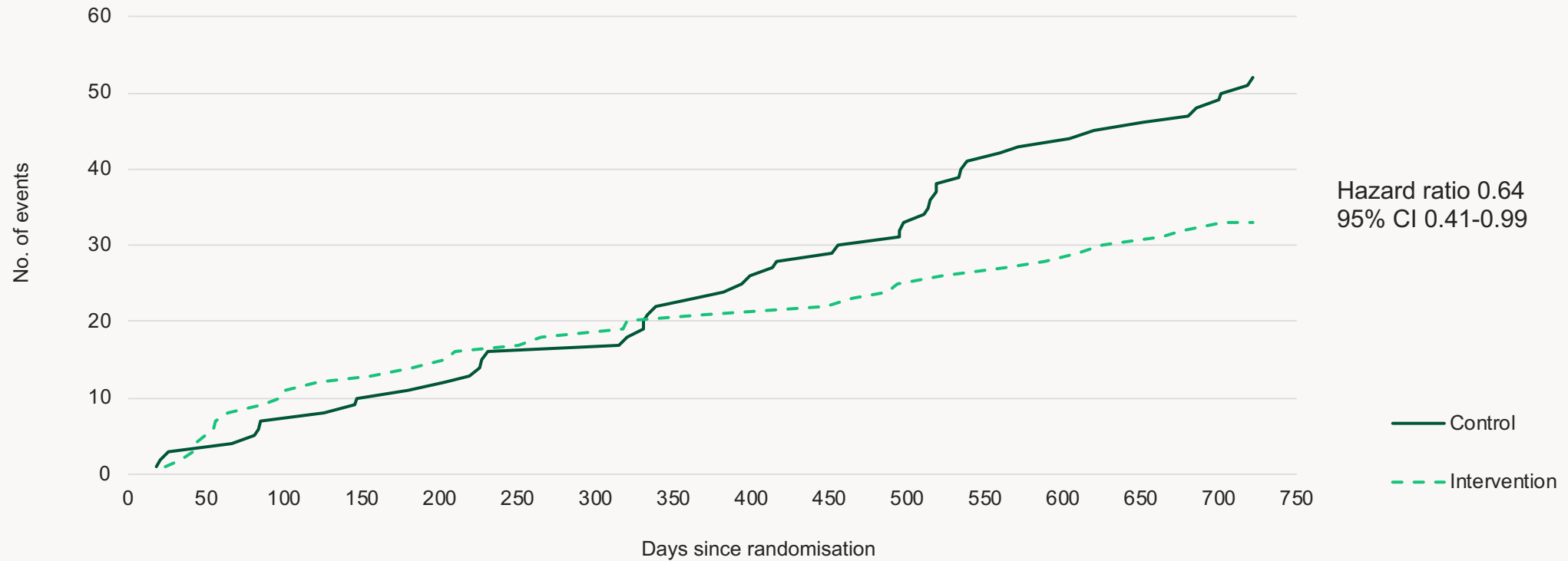
	Early stage	Overall
Sensitivity	55.7%	37.6%
Specificity	97.3%	
PPV (double positive)	12.2%	

\* PPV CT in NLST at 1.2% annualised risk of lung cancer = 3.8%



## Analysis of primary endpoint

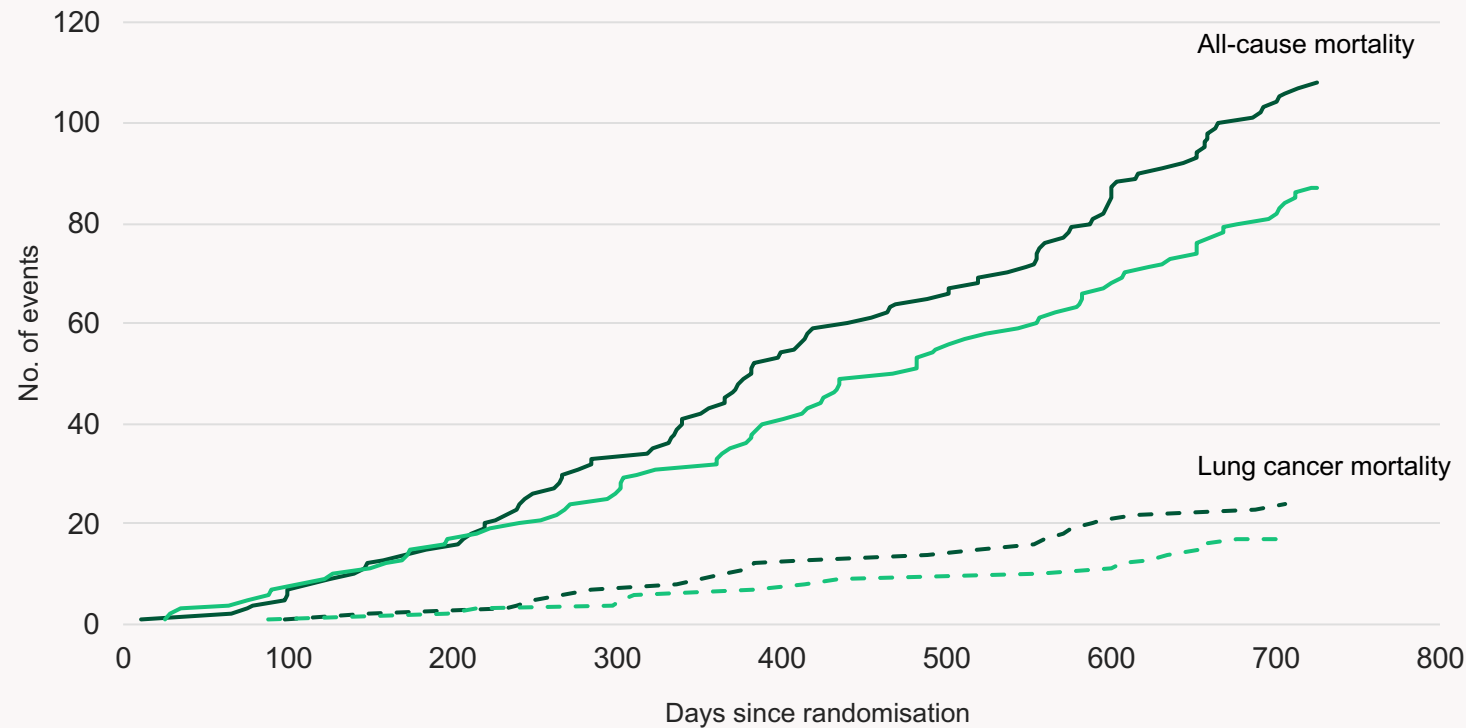
Diagnosis of stage 3/4 and unspecified lung cancers 2 years after randomisation





## Encouraging trend in mortality benefit

### Mortality 2 years after randomisation



- Trend towards reduced mortality rates in intervention group after just two years of follow-up since enrolment
  - All cause 87 v. 108
  - Lung cancer 17 v. 24
- Interaction with health service for lung cancer screening helps to identify and address comorbidities
- Planned mortality analyses
  - at 3 years (data already collected, awaiting analysis)
  - at 5 years

— Control  
- - - Intervention



## Follow on activities for ECLS

- A submission on the full ECLS study is being prepared for a leading peer-reviewed medical publication
- Preparations are underway to move to a larger population based evaluation in up to 200,000 patients to assess the implications of diagnosis with EarlyCDT Lung on survival and mortality in real-world setting
- Each participant will be tested with EarlyCDT Lung, to be supplied by Oncimmune on negotiated commercial terms



# Outlook and summary



## Commercial update

- Currently distribution agreements in force across 18 countries globally, with minimum sale commitments of £42m+ over next 5 years – most require initial regulatory approvals – expect sales to build towards the end of these agreements
- Recently signed strategic commercial agreement for EarlyCDT Lung in the US with Biodesix – valued at up to \$28 million over next 5 years
- Recently signed distribution partnership with R-Pharm in Russia for use of EarlyCDT Lung in screening – valued at up to £5 million plus £3.5 million investment by R-Pharm
- Our Spanish distributor signs Quirónsalud Group and Vithas Group, Spain's largest private hospital groups – launched EarlyCDT Lung as a nodule and screening test



## Commercial update

- Gene Group agreement signed to sell EarlyCDT Lung in Hainan, China ahead of NMPA approval and product shipped
- Emerging revenues reflects the early stage of portfolio of distribution agreements
  - Cash (c.£5m) at year end will be materially above expectations
  - Operating costs for FY2019 materially lower than expectations
- Protagen integration progressing well with the first commercial service contract since acquisition having been signed and a growing pipeline of opportunities
- Landmark ECLS study: Results presented at the 2019 World Conference on Lung Cancer
  - Selected as top seven abstract and present at the Presidential Symposium
- Phase V population-based evaluation using EarlyCDT Lung expected to follow ECLS Study and deliver material revenues and profits



## Summary

- Phase 5 population-based evaluation using Early CDT Lung expected to follow ECLS Study and deliver material revenues and profits
- Tumour-related antibody platform with proprietary 8,000+ immunogenic protein library at its core
- Strong IP with 200 granted and pending patents covering 47 territories, two commercial tests and over £42m+ of sales commitments
- Outstanding delivery capability underpinned by a combination of leading development and innovation; growing pipeline of multi-industry partnerships and acquisitions – Biodesix and Protagen
- A high-potential platform with the capability to drive rapid revenue growth through supporting critical clinical decision making across the care pathway
- Strength of Oncimmune's platform and breadth of addressable cancer detection opportunities, means significant medium term potential to deliver value to shareholders
- Strong pipeline of early cancer detection across the board

Oncimmune<sup>®</sup>



**Oncimmune**

Beating cancer, one test at a time