



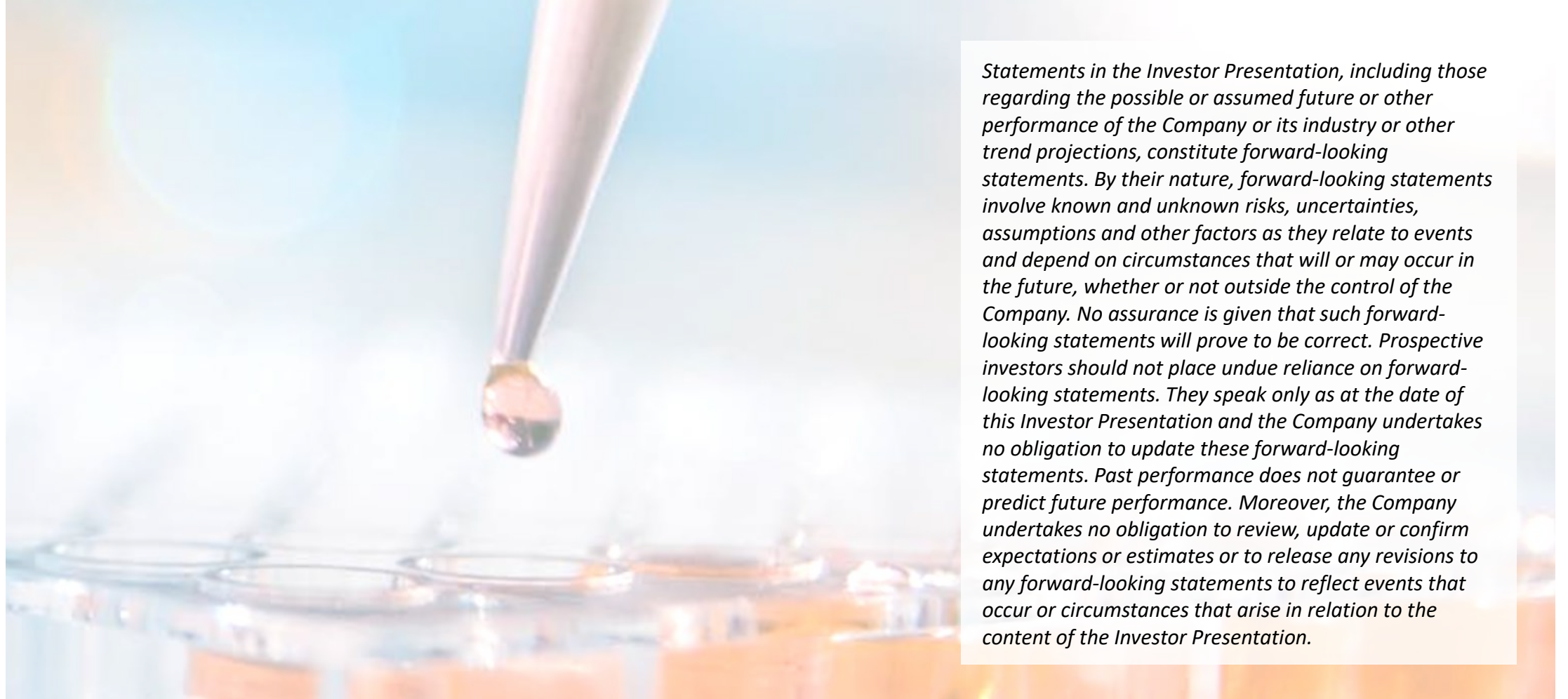
Targeting IL1RAP to address unmet needs in severe cancer and  
autoimmune diseases

*Corporate Presentation*

*Mar 2023*

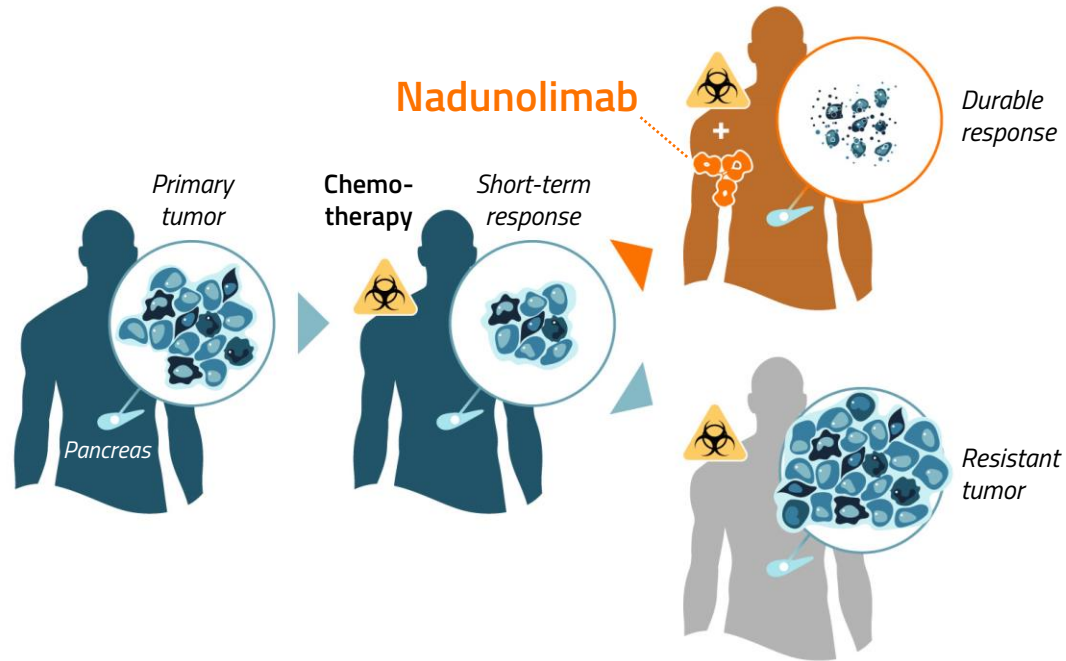
**NASDAQ STOCKHOLM MAIN LIST (CANTA.ST)**

# Safe Harbor Statement



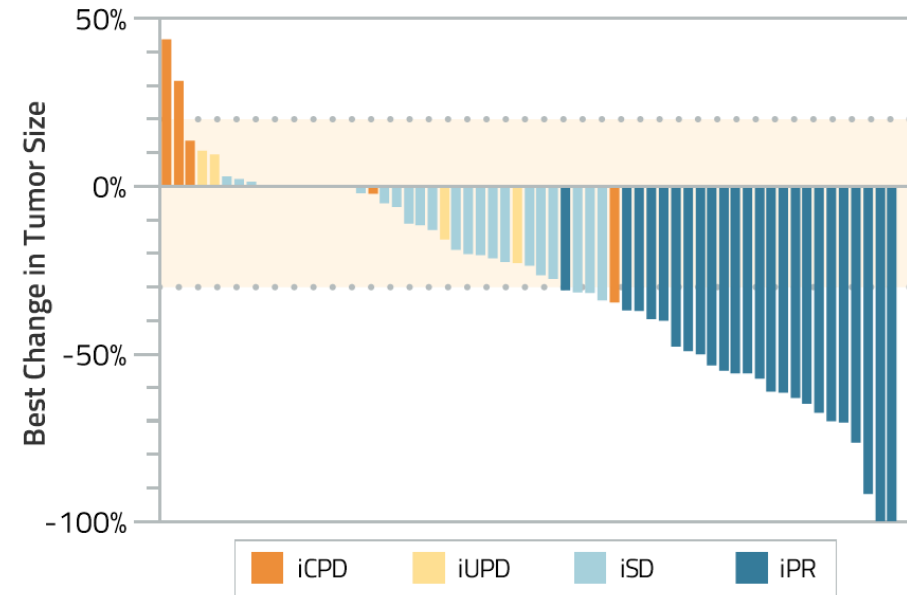
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# New strategy to treat cancer supported by clinical results



## PROMISING DATA IN PANCREATIC CANCER

- Stronger efficacy than expected from chemotherapy
- Patients with higher IL1RAP benefit more



SEVERAL LINES OF EVIDENCE SUGGEST NADUNOLIMAB COUNTERACTS CHEMORESISTANCE

# IL1RAP: Broad application in cancer and autoimmune disease

Project	Disease	Type of treatment	Discovery phase	Preclinical phase	Clinical phase I	Clinical phase II	Clinical phase III
Nadunolimab	PDAC	1 <sup>st</sup> line	Gemcitabine/nab-paclitaxel				
	Non-squamous NSCLC	1 <sup>st</sup> /2 <sup>nd</sup> line	Carboplatin/pemetrexed				
	TNBC	1 <sup>st</sup> /2 <sup>nd</sup> line	Carboplatin/gemcitabine				
CAN10	Myocarditis, Systemic sclerosis						
CANxx	New opportunities within IL1RAP platform						

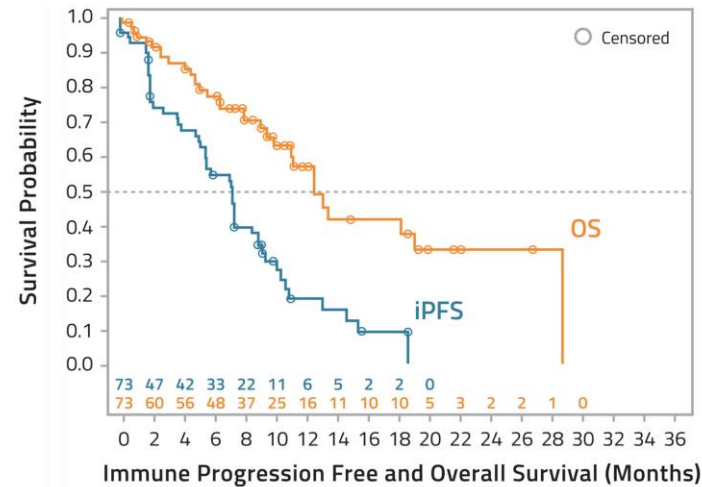
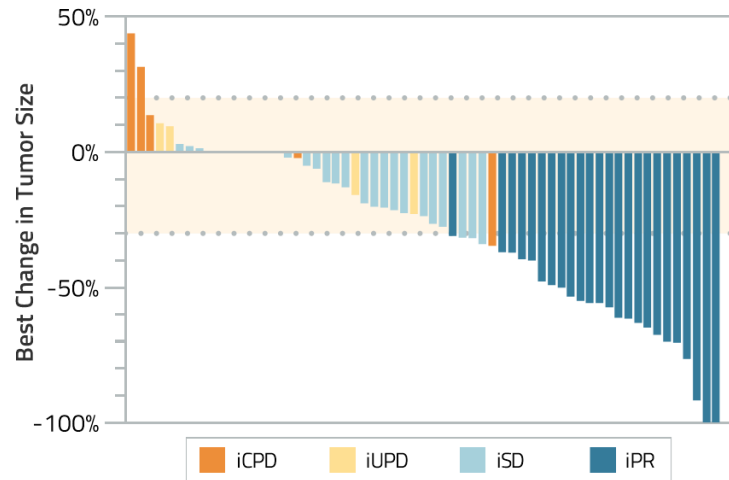
PDAC – pancreatic cancer; NSCLC – non-small cell lung cancer; TNBC – triple-negative breast cancer



A microscopic view of several pollen grains, showing their intricate, textured surface. The grains are spherical and have a complex, reticulated pattern. The background is a soft, out-of-focus blue-green color.

## NADUNOLIMAB CLINICAL RESULTS

# Positive interim data in 1<sup>st</sup> line pancreatic cancer



## Nadunolimab combination with Gem/Abraxane in 1<sup>st</sup> line (n=73):

- 33% response rate with long PFS and OS
  - Additional 5 (7%) pts had on-treatment benefit beyond progression)
- Promising PFS (7.2 mo), DCR (73%) and OS (12.7 mo<sup>1</sup>)
- 12 pts still on treatment – Data update planned for Q2 2023

<sup>1</sup>42% events

### Benchmark efficacy Gem/Abraxane:

ORR 23%; DCR 48%; PFS 5.3 mo; OS 8.5 mo (Von Hoff et al, N Engl J Med 2013)

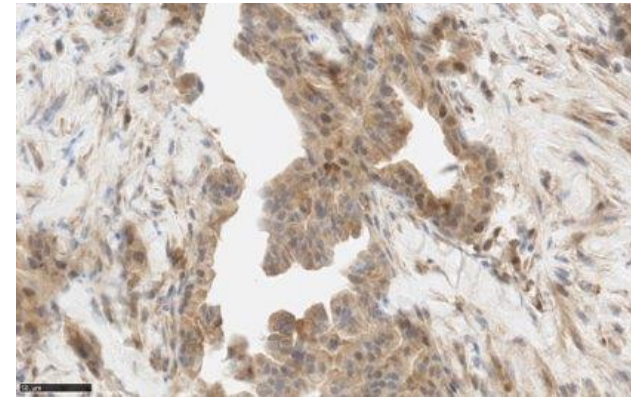
ORR 36%; DCR 62%; PFS 5.6 mo; OS 9.2 mo (NAPOLI 3 trial, ASCO GI 2023)

PFS AND OS LONGER THAN EXPECTED GIVEN HISTORICAL CONTROL IN PDAC – PHASE 2/3 TRIAL WITH PANCAN IN PREPARATION

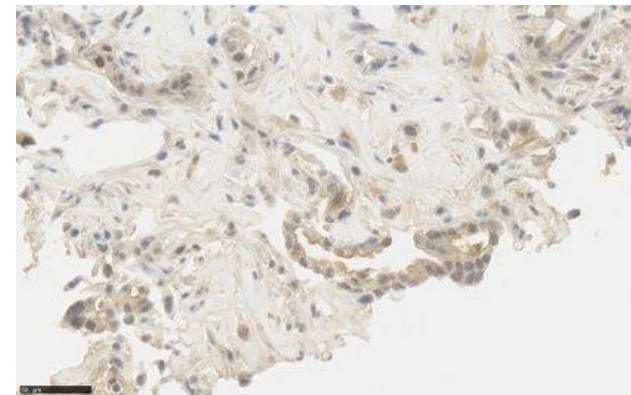
# IL1RAP levels correlate with response – New results to be presented at AACR 2023

## Analysis of IL1RAP in pancreatic cancer biopsies and correlations to clinical efficacy:

- Patients with highest IL1RAP levels benefitted most from nadunolimab and Gem/Abraxane
- Full dataset to be presented at AACR April 17, 2023
- Strong support for nadunolimab and the development in pancreatic cancer



IL1RAP High



IL1RAP Low

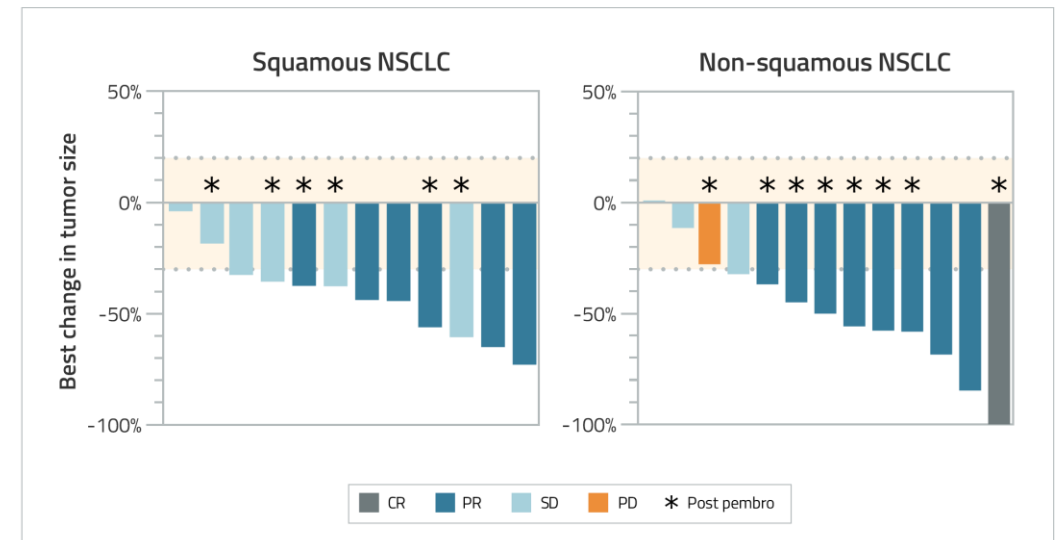
NEW DATA SUPPORT ONGOING DEVELOPMENT AND OPEN FOR NEW OPPORTUNITIES

# Combination strategy in NSCLC – Promising efficacy

## Nadunolimab combination with Gem/Cis in 1<sup>st</sup>/2<sup>nd</sup> line:

- 16 of 30 pts with objective response incl. 1 complete response (ORR 53%) (historical control data of 22-28%)
- Generally well tolerated; neutropenia freq. higher than expected from chemo (managed by dose reductions or G-CSF)

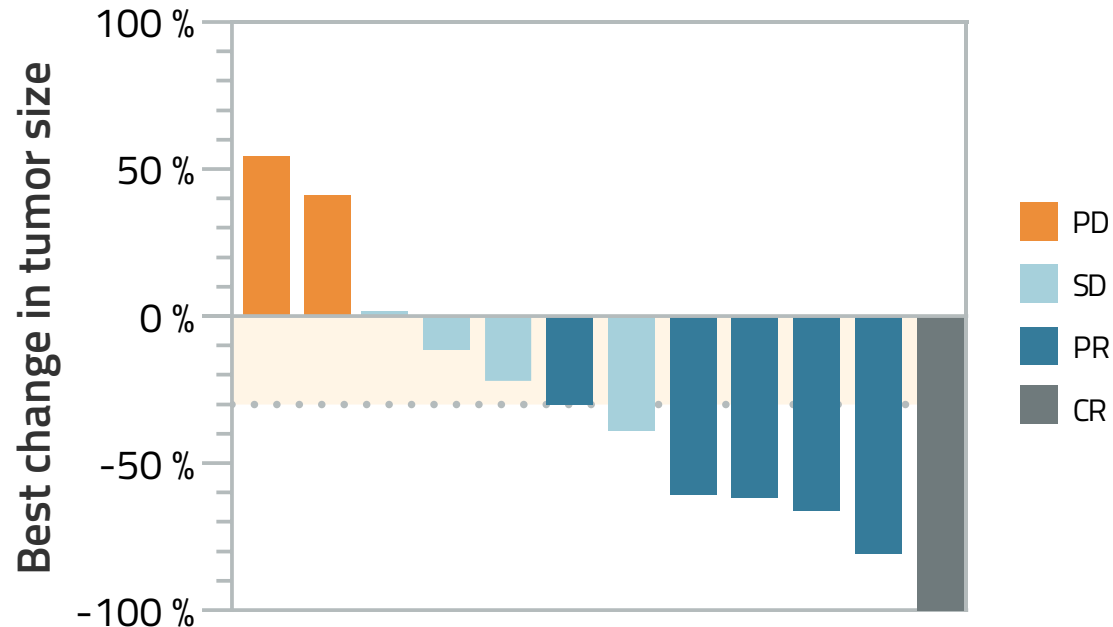
	All n=30	Historical control <sup>1,2</sup>	Non-sq NSCLC n=16	Historical control <sup>3</sup>
ORR	<b>53%</b>	22-28%	<b>56%</b>	19%
Median resp. duration	<b>5.8 mo</b>	5.1 mo	<b>11.2 mo</b>	7.8 mo
PFS	<b>6.8 mo</b>	5.1 mo	<b>7.3 mo</b>	4.9 mo
Median survival	<b>13.7 mo</b>	10.3 mo	<b>ND (pending additional events)</b>	11.3 mo



PROMISING EFFICACY – LONG TERM RESULTS PLANNED TO BE PRESENTED Q2 2023



# Promising early safety and efficacy in TNBC



## Nadunolimab combination with Gem/Carbo in 1<sup>st</sup>/2<sup>nd</sup> line metastatic TNBC:

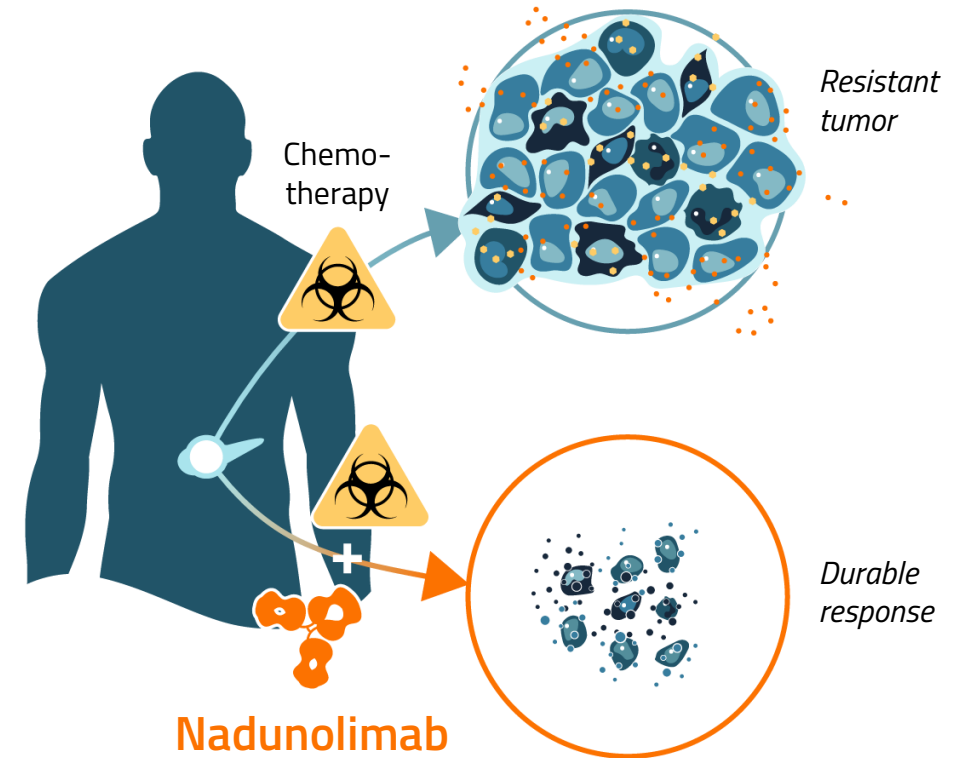
### 15 pts enrolled in the dose-escalation phase

- Acceptable safety profile (G-CSF given prophylactically to control neutropenia)
- 12 pts treated long enough for initial efficacy evaluation:
  - **Preliminary ORR: 50%** (1 CR, 5 PR, 4 SD, 2 PD)
- Proceeds to randomized phase including up to 98 additional patients (n=49 per arm)
- Interim futility analysis planned for Q4 2023

RESPONSE RATE OF NADUNOLIMAB COMBINATION THERAPY WELL ABOVE HISTORICAL DATA FOR CHEMOTHERAPY ONLY<sup>1</sup>

# Key messages

- Most chemotherapies induce chemoresistance already after a few months of therapy. Chemotherapy can upregulate both IL-1 $\alpha$  and IL-1 $\beta$ .
- Unlike other IL-1 blocking compounds, nadunolimab blocks both IL-1 $\alpha$  and IL-1 $\beta$  signalling and improves chemotherapy efficacy and tolerability in preclinical models.
- Current results are in sharp contrast to canakinumab data.
- Clinical results strongly support potential unique first-in-class opportunities in PDAC, TNBC and NSCLC.



NADUNOLIMAB IS ADVANCING INTO RANDOMIZED CLINICAL TRIALS

The background of the slide is a microscopic image of cells, likely lymphocytes, with a strong blue color cast. The cells are out of focus, with some showing a distinct nucleus. A semi-transparent dark blue horizontal band is overlaid across the middle of the image, containing the text.

CAN10 – OPPORTUNITY IN AUTOIMMUNE/INFLAMMATORY DISEASE

# CAN10 – Project status

## GLP toxicity study – Completed

- CAN10 given i.v. once weekly for six weeks at doses up to 50 mg/kg or s.c. at 5 mg/kg
- No adverse findings related to CAN10 at/above clinically relevant (pharmacologically active) dose levels

## Clinical phase I study – Study start planned for H1 2023

- CTA submission to regulatory authorities planned for Q1 2023
- Treatment of healthy volunteers could be initiated as early as H1 2023
- Phase I plan in healthy volunteers (SAD) followed by psoriasis patients (MAD)



FINANCIALS, MILESTONES & SUMMARY



# Several upcoming value inflection points

## Newsflow over next quarters

### Nadunolimab (CAN04)

- Update of results for PDAC, NSCLC, TNBC and Keytruda combination
- Start phase II/III Precision Promise<sup>SM</sup> (PDAC)
- New preclinical and translational results
- New clinical data (efficacy and safety)
  - CAPAFour PDAC FOLFIRINOX
  - CESTAFour Basket trial (NSCLC, CRC, BTC)

### CAN10

- Preclinical progress
- Development milestones
- ...and initiation of clinical trial as early as first half of 2023



**SIGNIFICANT DATA TO SECURE NEWSFLOW**

# Solid financial position with strong shareholder support

- Cash and cash equivalents SEK 427 M (~\$41M) at end of Q4 2022
- Runway until mid 2024
- Operating expenses SEK 382 M (~\$37M) in 2022
  - R&D - 96% of operating expenses
  - 27 full-time employees
  - Market cap appr 1.1 BSEK, 110 MUSD Mar 15, 2023

## Current owners (Dec 31, 2022)

<b>4th AP fund</b>	8.8%
<b>Alecta</b>	7.3%
<b>Avanza Pension</b>	6.7%
<b>1st AP fund</b>	6.3%
<b>Swedbank Robur Funds</b>	4.9%
<b>Six Sis AG</b>	4.7%
<b>Handelsbanken fonder</b>	4.3%
<b>Goldman Sachs</b>	3.2%
<b>Nordnet Pensionförs.</b>	1.4%
<b>Brushamn Invest</b>	1.2%
<b>Other</b>	51.1%

# Cantargia: Investment highlights



## NOVEL IL1RAP ANTIBODIES, POTENTIAL TO ADDRESS CANCER & INFLAMMATORY DISEASE

- IL1RAP elevated in most solid and liquid tumors
- Potential to breakdown resistance to cancer treatment, enabled by unique dual action approach – nadunolimab
- Additional key target for inflammatory diseases – CAN10



## DEVELOPING THERAPIES IN AREAS OF HIGH UNMET NEED; WITH UPCOMING CATALYSTS

- Strong clinical interim results in PDAC and NSCLC, and promising initial results in TNBC; >200 pts treated
- Upcoming randomized trials in pancreatic, NSCLC & triple negative breast cancer in 2023



## CORPORATE STRENGTH DRIVING INNOVATION

- Solid cash position with runway to mid 2024+ (427 MSEK cash & equivalents at Q4 2022)
- Robust patent portfolio: antibody target in oncology (2032), nadunolimab (2035) and CAN10 (2041)