

Safe Harbour Statement

The following presentation may include predictions, estimates or other information that might be considered forward-looking. The statements regarding the surrounding world and future circumstances in this presentation reflect Cantargia's current thinking with respect to future events and financial performance. Prospective statements only express the assessments and assumptions the company makes at the time of the presentation. These statements are well-considered, but the audience should note that, as with all prospective assessments, they are associated with risks and uncertainties.

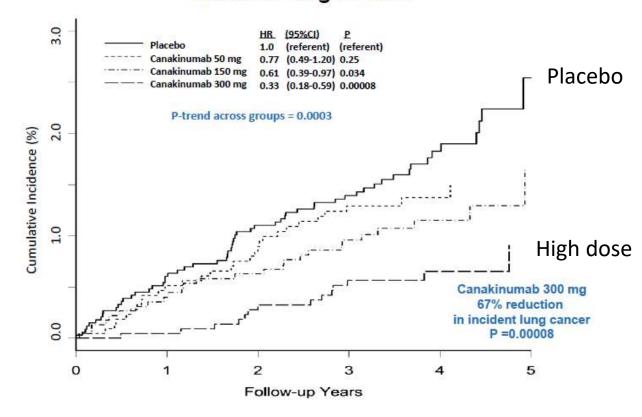


CANTOS IL-1ß blockade - Recent strong clinical data

CANTOS trial

- Canakinumab (Novartis)
- 10 061 patients
- Designed to reduce cardiovascular events in patients with previous myocardial infarction
- Reduced lung cancer incidence by 67 % and death by 77 %.
- Clinical validation of IL-1 pathway
- Novartis to start 3 phase trials in **NSCLC**
- Cantargia's CAN04 has higher potential than Canakinumab

CANTOS: Additional Non-Cardiovascular Clinical Benefits Incident Lung Cancer

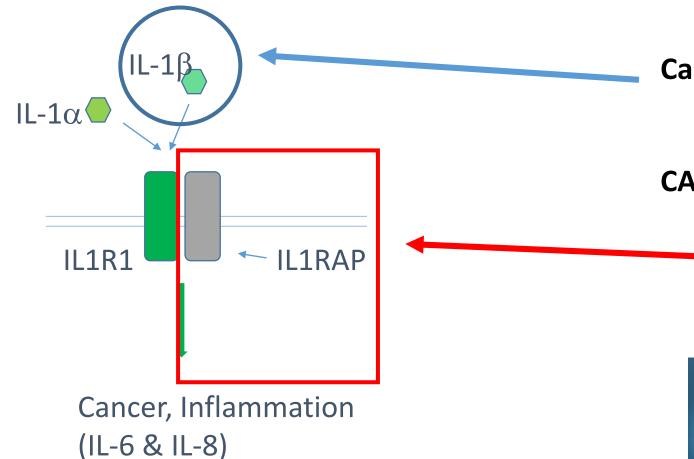




CANTOS additional findings

CANCER decreased risk of death with treatment (high dose)				
Lung cancer	77 %	P=0.0002		
Non-lung cancer	37 %	P=0.06		
Decreased incidence of inflammatory disease (all doses)				
Arthritis	32%	p<0.0001		
Ostheoartritis	28%	P=0.0005		
Gout	53%	p<0.0001		
Biomarker levels (reduction)				
CRP	26-41%	P<0.0001		
IL-6	25-43%	P<0.001		

CAN04 vs Canakinumab

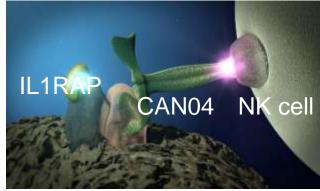


Canakinumab

 Antibody directed against one of the two IL-1 ligands, IL-1β

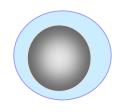
CAN04:

- Binds the common signaling receptor and counteracts both ligands
- Induce killing via the immune system (ADCC)

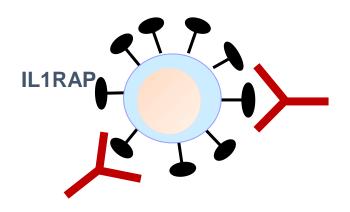


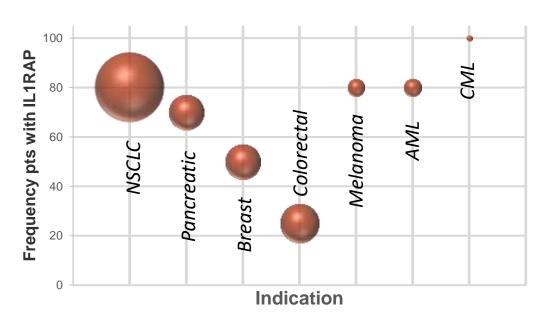
Medical need and IL1RAP

Normal cell



Cancer cell





- Based on in house data, external data, medical need and market size, NSCLC and pancreatic cancer are primary indications.
- Biomarker studies ongoing, to identify patients most likely to respond
- Low levels of IL1RAP in normal tissue (analyzed following FDA and EMA guidelines)



Cantargia at a glance

- Specialized in antibody therapy/immunology, with initial focus on oncology
- Granted IP around therapeutic target and drug candidates
- Lead antibody CAN04 in clinical development
- Strong management team with proven track record in clinical development and business development
- IPO March 2015 (Nasdaq First North, Stockholm), preparations for listing on main market ongoing
- More than 3000 shareholders
- Based in Lund, Sweden
- New share issue of 232 MSEK Dec 15 2017

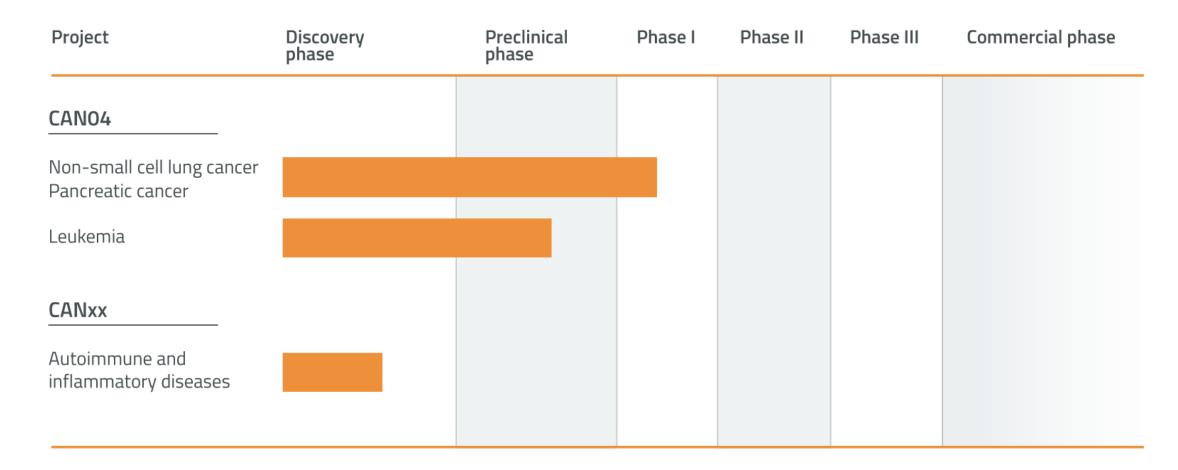
Financial highlights

- Share price: 7.00 SEK (0.86 USD), Feb 21, 2018
- Market cap: 463 MSEK (57.1 MUSD), Feb 21, 2018
- Cash: 52.4 MSEK (6.7 MUSD), Sep 30 2017 (excl new financing)

Current owners (Jan 19, 2018)			
Sunstone	9.0%		
1st AP fund	6.9%		
LU Bio	6.1%		
Avanza Pension	5.6%		
4th AP fund	4.2%		
2nd AP fund	3.3%		
SEB S.A. clients	3.0%		
Mats Invest AB	1.8%		
Tibia konsult	1.7%		
Brushamn Invest	1.6%		
SHB Pharm Fund	1.5%		
Others	55.2%		



Cantargia pipeline



Tumor inflammation – key to cancer progression

Enablers

Genomic instability and mutation (2000)



Tumor-promoting inflammation (2011)

Deregulating cellular energetics

Sustaining proliferative signaling

Evading growth suppressors

Resisting cell death

Enabling replicative immortality

Inducing angiogenesis

Activating invasion and metastasis

Avoiding immune destruction

The inflammatory cytokine IL-1 – Well established role in cancer progression:

Cancer hallmarks

Tumor cells

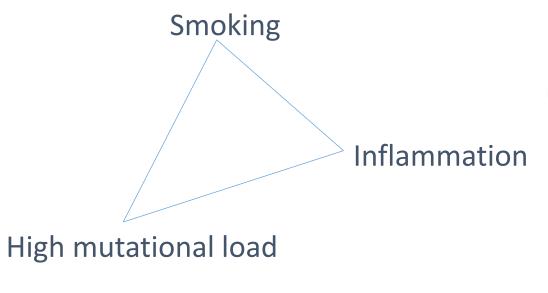
- Signaling/proliferation of cancer cells
- Chemoresistance

Tumor microenvironment

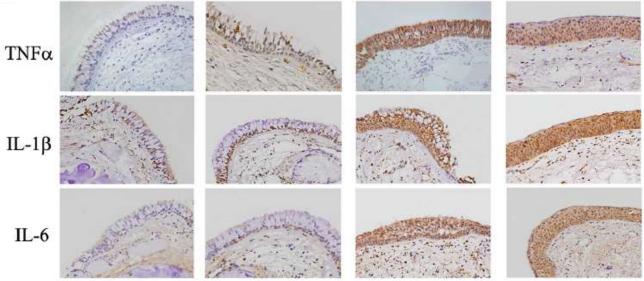
- Metastasis
- Crosstalk between tumor cells and stroma
- Inflammation and local suppression of the immune system



Non-small cell lung cancer (NSCLC)



Inflammation drives metaplasia and is a hallmark of active lung cancer



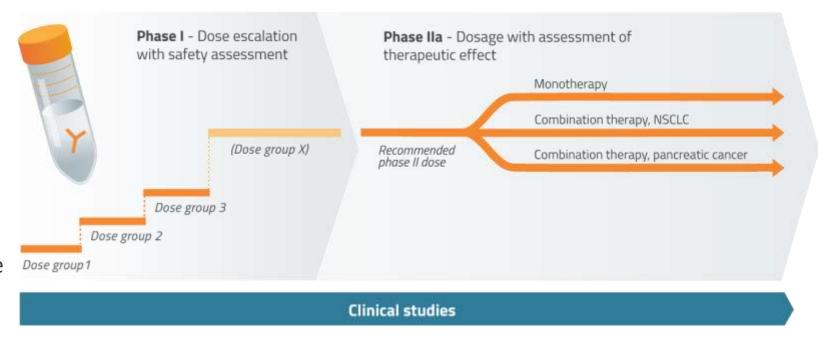
NormalCancer

Herfs et.al, Proinflammatory Cytokines Induce Bronchial Hyperplasia and Squamous Metaplasia in Smokers, Am J Respir Cell Mol Biol 2012



CANO4 – CANFOUR clinical trial

- Phase I/IIa trial NSCLC and pancreatic cancer
 - Recruitment in Norway, Denmark Netherlands and Belgium
 - Well renowned centres (Jules Bordet, Brussels; Erasmus Rotterdam, NKI, Amsterdam; Rigshospitalet, Copenhagen; Radiumhospitalet, Oslo)
 - Dose group 1, safety evaluation completed
 - Phase I: carried out in NSCLC, pancreatic cancer, colon cancer, triple negative breast cancer
 - Phase IIa: focused on NSCLC and pancreatic cancer
 - Monotherapy
 - Combination with existing therapy



Summer 2018 End 2019



Pancreatic cancer – chemotherapy insensitivity

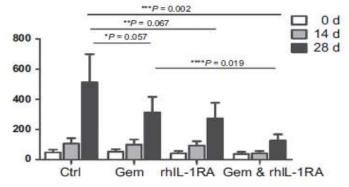
- Gemcitabine insensitivity caused by NFκB/IL-1
- IL-1 blockade reverse the effect
- Synergistic antitumor effect of combination

Patients with high IL-1 respond poorly to gemcitabine



IL-6/IL-1β classification	N	Median OS (95%CI) (days)
IL-6 ^{Low} /IL-1β ^{Low}	25	306 (228–355)
IL-6 ^{Low} /IL-1β ^{High}	5	246 (97–346)
IL-6 ^{High} /IL-1β ^{Low}	15	140 (83–334)
IL-6 ^{High} /IL-1 β ^{High}	15	79 (61–134)

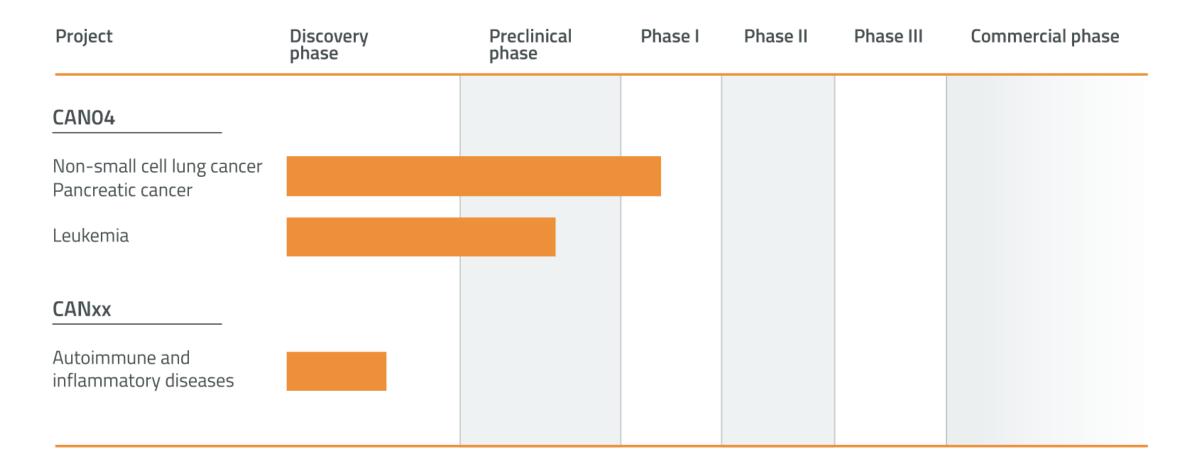
National Cancer Centre, Chiba, Japan Mitsunaga et.al, Br. J. Cancer, 2013



MD Anderson Cancer Centre, Houston Zhuang et.al, Clin Cancer Res 2016

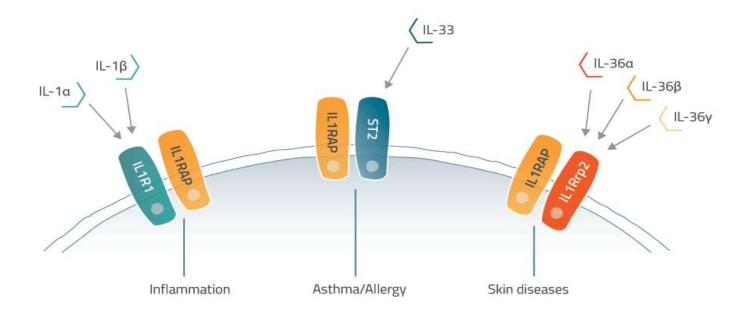


Cantargia pipeline



IL1RAP - additional potential indications to leverage the value of our asset

- Three different systems signal through IL1RAP
- These systems contribute to various inflammatory diseases
- Can be blocked by Cantargia's antibodies against IL1RAP



Strategic partnership with Panorama Research Inc

Panorama Research Inc.

- Privately-owned biomedical R&D company in Silicon Valley California
- Leader in antibody technology, managed by Dr James W. Larrick

Deal structure: Panorama share risk in exchange for a fraction of future incomes



Panorama Research, Inc.

A Biotechnology Research & Development Company

- Development of new antibody binding IL1RAP with high affinity/potent inhibition of signaling
- Focus on autoimmune/inflammatory disease
- Selection of clinical candidate 2019
- Cantargia IL1RAP antibody, affinity matured and humanized using Panorama's proprietary technology
- Panorama also generates cell lines optimized for high level GMP production
- Cantargia responsible for subsequent development



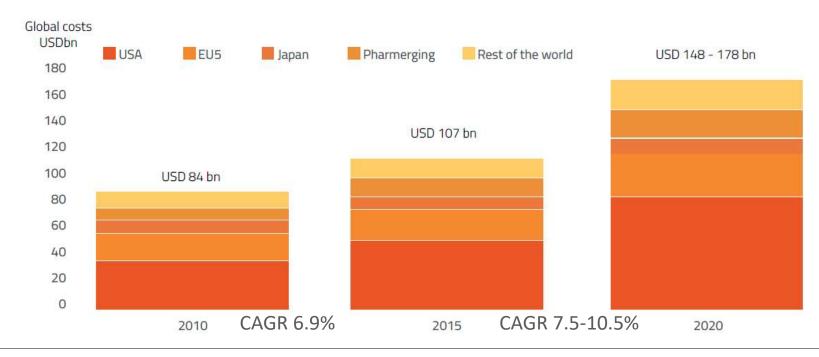
Significant value inflection points ahead

2018

- Preclinical data on combination therapy
- Clinical progress
- Preclinical studies
- Phase I clinical data (summer 2018)
- Initiation of Phase IIa portion of the clinical trial (summer 2018)
- US regulatory and clinical strategy
- Application for listing on main market



Lead project CAN04 in the highest growth segment— Oncology antibodies



World's most sold cancer drugs are antibodies 2017 (2016)

Immuno-oncology driving market growth 2017 (2016)

 Rituxan/MabThera
 \$7.87bn
 (\$8.58bn)

 Avastin
 \$7.13bn
 (\$6.75bn)

 Herceptin
 \$7.47bn
 (\$6.75bn)

Opdivo \$4.95bn (\$3.77bn) Keytruda \$3.81bn (\$1.40bn)

Why invest in Cantargia?

- Focus on immuno-oncology the strongest growing pharmaceutical segment
 - Taking advantage of established antibody technology to design novel pharmaceuticals
- Lead candidate antibody CAN04 with double mechanism of action in clinical trial with multiple value inflection points 2018-2019
 - Initial development in NSCLC and pancreatic cancer (cancer forms with poor prognosis)
 - Recent external validation of pathway
- Second generation antibodies for autoimmune disease
- Unique and strong IP
- Strong lead investors with high competence and well known track record
- Recent new share issue of 232 MSEK funding until mid 2020.
- Preparations for listing on main market

