

# MegaPro Biomedical Co., Ltd.

-505(b)(1) and (2) new drug development company

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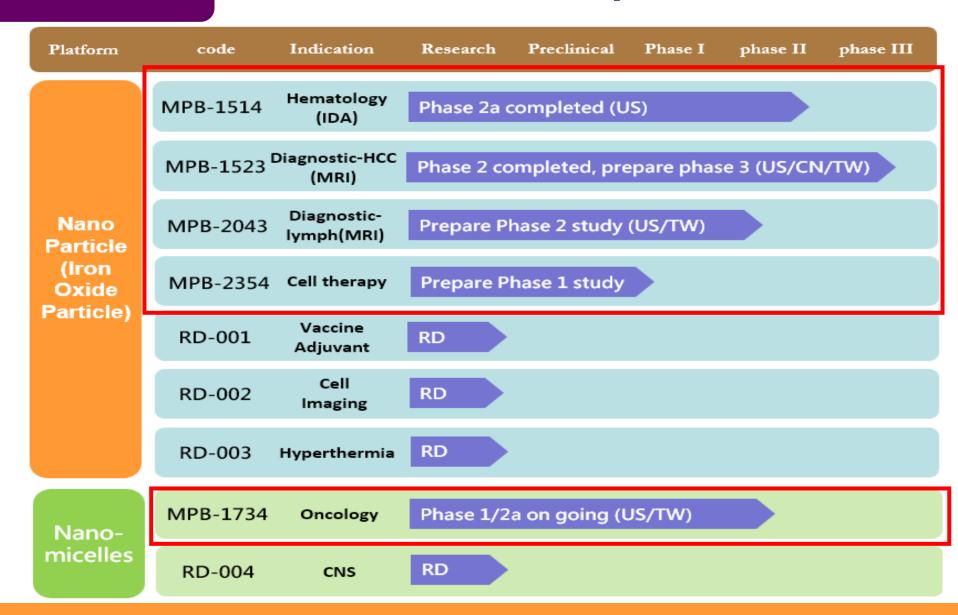
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### **Platform**

## 505(b)(1) & (2) dual platform



### **Nanoparticles**

### 505(b)(1) plantform

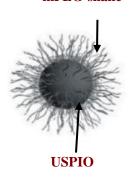
### Key Features:

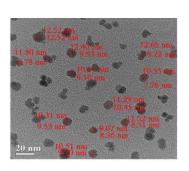
- Non-dextran-based preparations with lower hypersensitivity issues.
- High r2 relaxivity as better T2 weighted MRI contrast agent
- High macrophage uptake efficiency with high conversion of Ferritin and transferrin saturation
- d. Low free/labile iron release and oxidative stress
- Low FGF23 (fibroblast growth factor 23) elevation to avoid severe hypophosphatemia and long-term inflammation.

	IOP Injection	Feraheme	
Size (TEM)	10-12 nm	4.2 nm	
r2 (mM·s) <sup>-1</sup> *	130~170	70	

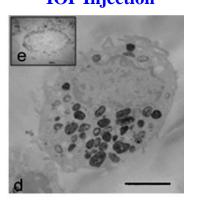
#### **MegaPro: IOP Injection**

mPEG-silane

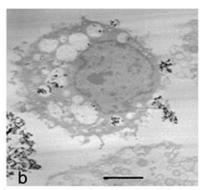




Macrophages uptake efficiency **IOP Injection** 



**Feraheme** 



Status	Phase 2a completed
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High macrophage uptake efficiency with high **Mechanism** conversion of ferritin and transferrin saturation; low labile iron generated



Position High dose intravenous iron (IV iron) with higher

potency and better safety profile

**Indication** Iron deficiency anemia (IDA)

Patent Comprehensive global patent portfolio

# **Iron Deficiency Anemia Market Overview**

# **Indications** (Patients number )

**CKD** 

**USD 684M** 

**Oncology** 

**USD 571M** 

**IBD** 

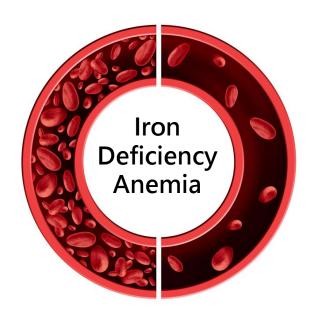
**USD 456M** 

**Heart Disease** 

**USD 214M** 

**Others** 

**USD 303M** 



2020 Total I.V iron Market \$2,228M CAGR rate : 9.3% I.V iron product

**Ferinject** 

**USD 1,351M** 

Venofer

**USD 371M** 

Monofer

**USD 46M** 

**Feraheme** 

**USD 73M** 

**Others** 

**USD 387M** 

### **Intravenous Iron Products Overview**

Stock Code:6827

**Best** 

	Venofer	Feraheme	Ferinject/ Injectafer	Monofer	MPB-1514
Approved(US)	2000	2009	2013	2020	Phase 2a
Type of Iron	Ferric hydroxide	Iron oxide	Ferric hydroxide	Ferric hydroxide	Iron oxide
Coating material	sucrose	dextran	Carboxy- maltose	Isomaltosid e-1000	PEG
Dose	100mg x 10	510 mg × 2	$750 \text{ mg} \times 2$	1000mg~ 2000mg	250 mg <b>x</b> 2
Hb (g/dL)	0.3-0.8	$0.82 \pm 1.24$	$1.13 \pm 1.04$	0.5-1.22	1.7 ± 1.27
Induced Hypo- phosphatemia	~4%	<2%	40-70%	4-8%	Not observed

<sup>.</sup> Results were adopted from FDA assessment report of Feraheme

<sup>2.</sup> Results were adopted from Injectafer's label

### Liver-specific MRI contrast agent (505b1)

Stock Code:6827

**Status** Clinical Phase II completed (in the US and Taiwan).

USFDA End of Phase 2 (EOP2) achieved. Clinical Phase III IND submission is

expected in the second half of 2024 (in the US, China, and Taiwan).

**Indications** Primary hepatocellular carcinoma and metastatic liver cancer diagnosis.

Mechanism
 Excellent phagocytic activity of liver parenchymal immune cells.

• High relaxivity (R2).

Position
 Non-heavy metal liver-specific MRI contrast agent.

• Excellent safety profile with superior imaging performance and diagnostic rates.

Regulatory Pathway

• 505(b)(1) New Drug Application.

Orphan Drug Designation (USFDA): Liver cancer monitoring.

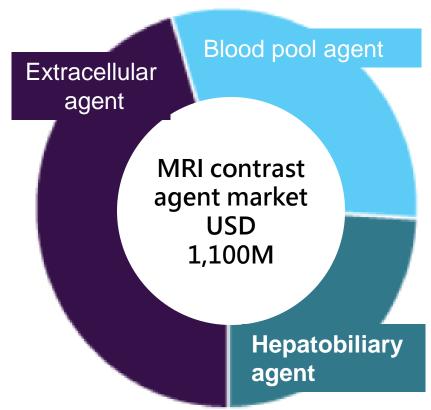
Market (China)

Potential usage approximately 3.6 million times, RMB 700 per dose, with an estimated market share of 15%, totaling around RMB 380 million.

Liscense Progress

Completed due diligence (DD) and term sheet with a listed company in China, currently under negotiation.

#### **Under-estimated market**



Source: www.grandviewresearch.com

- Gadolinium-based Contrast Agent
   Dominate MRI Contrast Agent Market
- ➤ Linear Gadolinium-based contrast agent not suitable for patients with eGFR<30 (potential Nephrogenic Systemic Fibrosis, NSF).
- EMA's final opinion confirms restrictions on use of linear gadolinium agents in body scan
   21 July 2017

...... The intravenous linear agents gadoxetic acid and gadobenic acid can continue to be used for liver scans because they are taken up in the liver and meet an important diagnostic need. .........

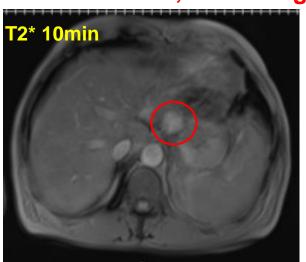
MPB-1523 has got orphan drug designation by the US FDA in June 2023 and approved for the tracking of hepatocellular carcinoma.

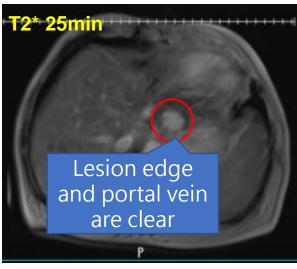
# Primovist confirmed vs MPB-1523

MPB1523 MR T2\* image (excellent contrast, lesion edge is clear)

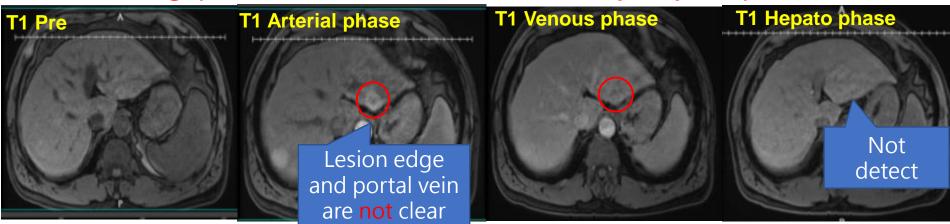
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#### Primovist image(The lesion doesn't be detected in hepato pahse)



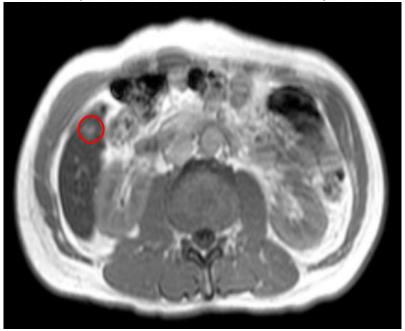
# **Detect Small HCC (<1.0 cm) with** Stock Code:6827 **Well/Moderate Differentiated Type**

In well-differentiated HCC, Kupffer cell density would be maintained but Kupffer cell function could be reduced compared to surrounding liver. However, MPB-1523 still can detect small HCC (<1.0 cm) with well/moderate differentiated type.

Size: 1.5 cm \* 1.0 cm (well differentiated)



Size 0.9 cm \*0.7 cm (moderate differentiated)



# Focuses on diagnosing tumor cell lymph node metastasis

Stock Code:6827

**Status** 

Investigator-initiated trial (TFDA), expected to commence patient enrollment in the second half of 2024

**Indications** 

Focuses on diagnosing tumor cell lymph node metastasis.

Mechanism

- Excellent phagocytic activity of liver parenchymal immune cells.
- High relaxivity (R2).

**Position** 

- Currently, there are no clinically available diagnostic reagents for this purpose.
- This diagnostic reagent meets an unmet need and offers high safety and diagnostic rates.

Regulatory

**Pathway** 

Market (China)

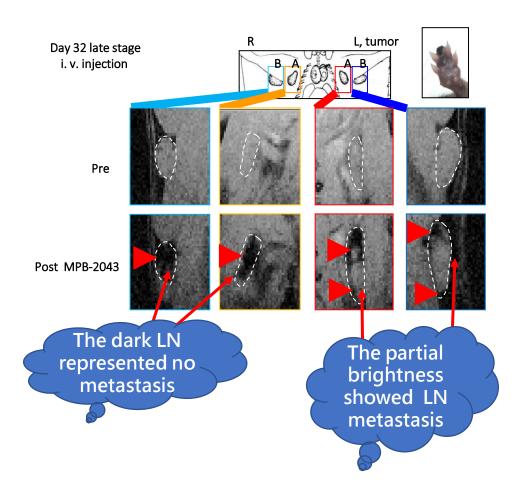
505(b)(1) New Drug Application.

Accurate lymph node metastasis diagnosis is crucial for breast cancer, prostate cancer, head and neck cancer, lung cancer, and others, with a potential market exceeding \$1 billion USD.

Liscense Progress

- Completed due diligence (DD) and term sheet with a listed company in China, currently under negotiation.
- Discussions are also ongoing with a major Japanese contrast agent manufacturer.

# MRI Contrast Agent for Lymph Stock Code:6827 Node Image



- ✓ Staging of cancer is dependent upon identification of LN meta.
- ✓ Precision lymphadenectomy is important to avoid the burden from the over-surgery.
- ✓ Not all LN can be reached by biopsy. The swollen LN can have many causes.
- ✓ Thus LN meta diagnosis remained to be the clinical unmet needs.

### Will begin to enroll in 2024H2



- TFDA has approved the IIT trial.
- Collaboration with National Taiwan University Hospital
- There exists an unmet clinical need for lymph node imaging.



IOP Injection infused 60 mins

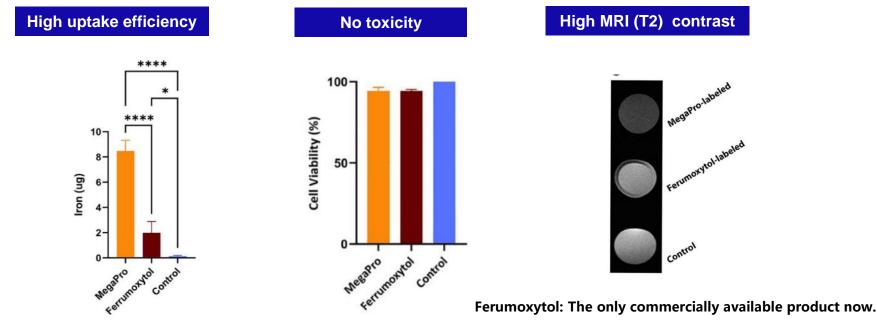
3T MR Scan T1/T2/T2\*

Lymphadenectomy

Ex vivo MRI For Specimen Lymph nodes histopathology

### **Cell tracking platform**

- MRI is considered the best imaging tool for in vivo cell tracking (no penetration depth issues, repeatable examinations...).
- Currently, there are limitations in the sensitivity and detection time for cellular MRI imaging.



**Key features of the Macrocellular Imaging Platform:** 

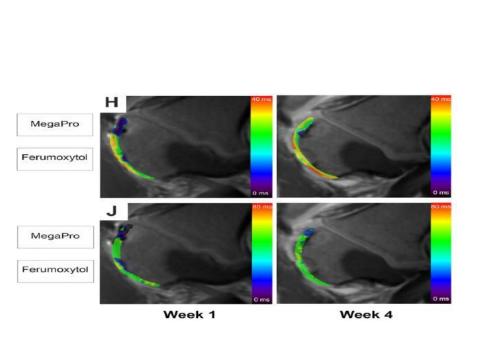
- High cellular uptake of IOP without cytotoxicity, preserving cell phenotype.
- High sensitivity in cellular MRI detection, with extended detection time upon implantation.
- IOP possesses comprehensive safety data in both animals and humans, supporting rapid clinical translation of relevant cellular applications.

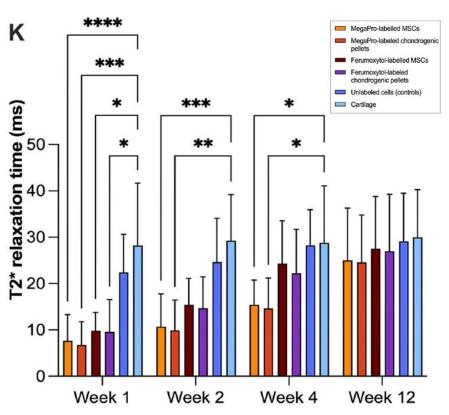
# Tracking Chondrogenic Stem Cells for Cartilage Repair in Minipigs (Stanford U.)

Stock Code:6827

#### Current findings

- Both IOP and Ferumoxytol showed hypointense (dark) signal at week 1.
- Ferumoxytol signal rapid loss at week 2 while IOP maintain signals for week 4.

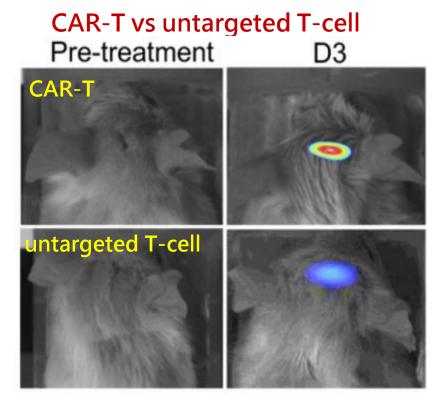


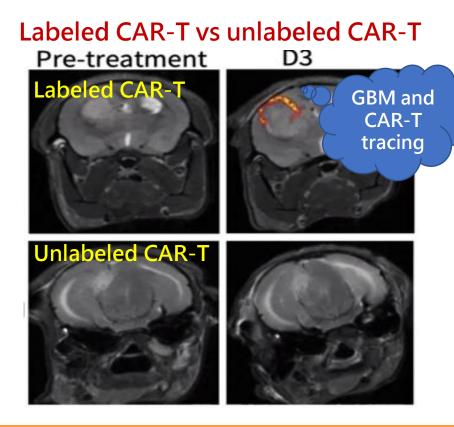


### **CAR-T**

# Real Time Cell Tracking - Collaboration with Stanford U.

- ✓ The absence of a clinically viable tracking technique for CAR T-cells has been recognized as a main hurdle to optimize CAR T cell therapy for solid tumors.
- ✓ Multimodal in vivo tracking of CAR T-cells in preclinical glioblastoma models by MPB-1523 (*Investigative Radiology, 2022*)





### Allogeneic stem cell with dual functions of enhanced Stock Code:6827 anti-inflammatory effect and in vivo cell tracking

Status

Pre-clinical studies (begin Phase 1 clinical trials in 2025)

**Indications** 

Inflammatory and autoimmune disorders.

Mechanism

- By using IOP to enhance the expression of IDO in stem cells, the antiinflammatory effects can be improved.
- The in vivo tracking function helps reduce treatment disparities and individual differences, thereby enhancing treatment efficacy.

**Position** 

- Current allogeneic stem cell therapies have not met expectations, with no method for predicting efficacy.
- MPB-2354 offers both therapeutic enhancement and in vivo tracking capabilities, potentially improving treatment outcomes and addressing the current inability to predict treatment efficacy.

Regulatory **Pathway** 

505(b)(1) New Drug Application.

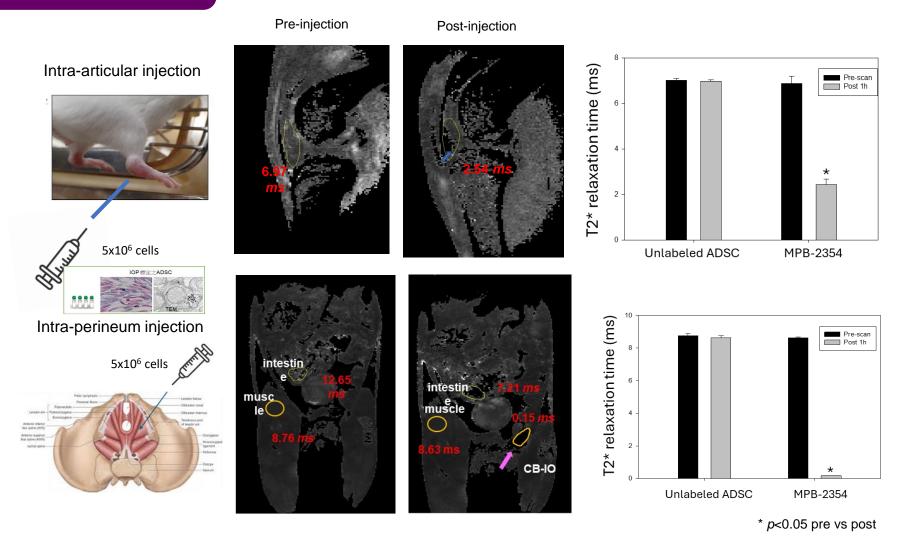
**Patent** 

A PCT patent application has been completed.

#### Stock Code:6827

### **MPB-2354**

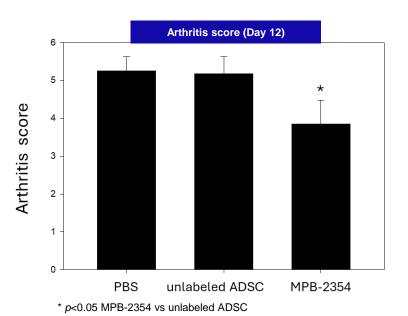
### In vivo imaging by MRI



7T MRI scanning showed a significant decline of the T2\*-signal in injection site

# MPB-2354 In vivo efficacy

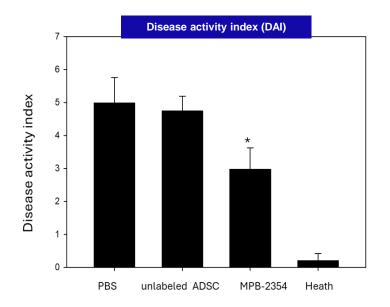
Rheumatoid arthritis (RA)
Collagen-induced Arthritis (CIA) rat model



Inflammatory Bowel Disease (IBD)

Dextran sulphate sodium (DSS) induced colitis

mice model



- MPB-2354 demonstrated superior efficacy to unlabeled ADSCs
- Treg cells infiltration  $\uparrow$ , TGF- $\beta\uparrow$  and IL-10 $\uparrow$ , proinflammatory cytokines IL-6  $\downarrow$  in RA bone tissue. (vs unlabeled ADSC)

### Nanomicelle

# The best hydrophobic drug injectabl Stock Code:6827 nanocarrier technology on the market







#### Nanomicelle

- Physical encapsulation, high loading capacity for hydrophobic drugs (>20%).
- Excellent tumor penetration ability (<70nm).</li>
- Can be combined with targeting ligands.

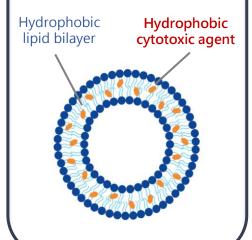
Targeting ligand(Optional)

Amphiphilic Polymer

Hydrophobic cytotoxic agent

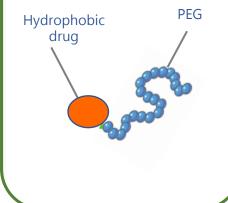
#### Liposome

- Physical encapsulation, hydrophobic drug loading capacity of approximately 3~5%.
- Typical particle size range is 100–200 nm



#### **PEGylation**

- Chemical bonding, more complex process.
- A single polymer can only bond 1~4 molecules



Sanofi

### **MPB-1734**

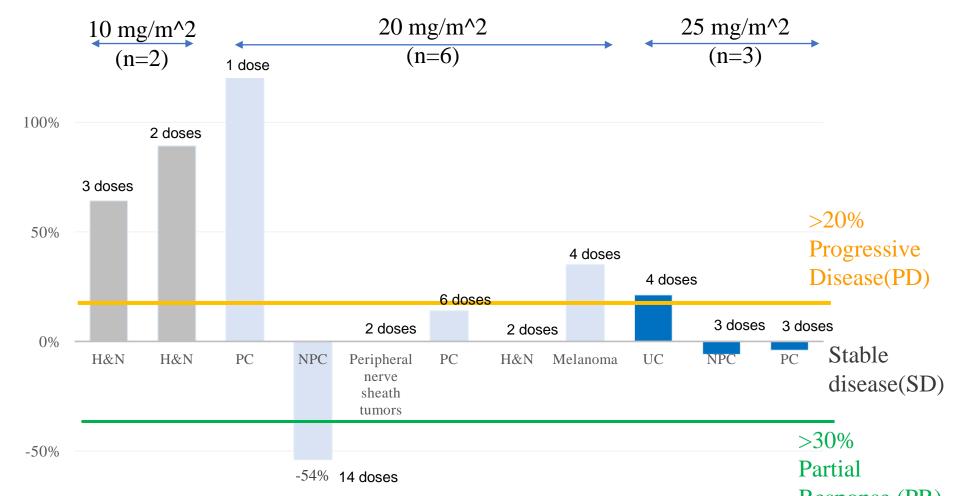
# Jevtana (Cabazitaxel) Second generation taxane to overcome taxane resistance

	<b>旦生</b>	Sanoti		
	MPB-1734	Jevtana		
	Morphology (TEM)	For intravenous use (infusion) AFTER final dilution cabazitaxel  1 vial of 1.5 ml concentrate and 1 vial of 4.5 ml solvent.  CYT  Mute with solvent  SCNOFI  Walter  With Schange leadled		
Patent	Obtained a composition patent in 2022 in US	Expired		
Solubility	>1000 x solubility increased	Very low water solubility		
Hypersensitivity	No steroid pre- treatment required.	Hypersensitivity is mainly caused by excipient Tween 80(Black box warning)		
Severe low neutropenia	Reduction of neutropenia	80% patients experienced life- threatening neutropenia (Black box warning)		
Indication	Focus on Head & neck and Prostate cancer	Only Prostate cancer, the sales peak is USD 633M in 2020		

-100%

# Preliminary tumor change analysis in clinical trials

Stock Code:6827

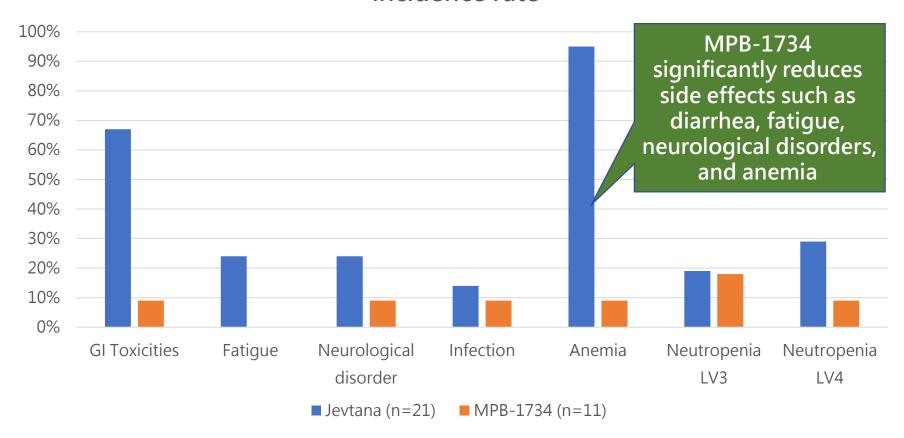


• The above data for MPB-1734 are preliminary internal company data. The data still need to be based on the CSR report.

 Tumor changes assessed based on RECIST 1.1: The extent of reduction in the sum of the diameters of the lesions compared to the baseline."

# Significantly improve the safety of the Jevtana

# Jevtana vs MPB-1734\* Phase 1 clinical adverse reaction incidence rate



\*The above data for MPB-1734 are preliminary internal company data. The data still need to be based on the CSR report.

# MPB-1734 Summary

- 1. USFDA/TFDA approved MPB-1734 phase I/IIa clinical study.
- 2. Will enroll advanced solid tumor patients (including ovarian, SCHNN, prostate cancer). Up to 2023, the 4th cohort (30 mg/m²) is enrolling (Jevetana only approved 20 mg/m²), and no drug related AE were reported. The 2nd/3rd cohort (20 & 25 mg/m²) has four subjects with their conditions under control and are currently receiving medication.
- 3. The phase 2a clinical trial will assess prostate cancer and head and neck cancer. It will explore the possibility of combination therapy with anti-PD-1 and hormonal drugs.
- 4. MPB-1734 obtains the government grant and will receive NTD 14,370K.
- 5. MPB-1734 has begun to prepare the global licensing.

### Goals

## **Development Strategy**



#### **Short Term**

- To out-license and collaborate with MNC on MPB1523/1514 NDA development
- By using a multi-country and multi-center approach, obtain drug approval for MPB-1523 and MPB-1514 through licensing or co-development models.
- Complete MPB-2043 IIT data.



#### **Mid Term**

- Enter into Immuno and Cell Therapy Domain
- To apply NDA by MegaPro



### **Long Term**

- Become a Specialty Pharmaceutical Company
- Double Engine to develop product pipeline and NDA application





