

January 2024

# **CORPORATE PRESENTATION**

(NASDAQ:FWBI)

Targeted, Non-Systemic Therapeutics for Gastrointestinal Diseases

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## **Overview**

## Three therapeutic assets and multiple Phase 2-ready clinical indications

**First Wave BioPharma** is a clinical stage biotechnology company currently focused on the development of targeted, non-systemic therapies for gastrointestinal diseases

**ADRULIPASE** 

**CAPESEROD** 

**NICLOSAMIDE** 

Recombinant enzyme; lipase biologic for the treatment of Exocrine Pancreatic Insufficiency (EPI)

- EPI in Cystic Fibrosis (CF) and Chronic Pancreatitis (CP); new enteric microgranule formulation
- Phase 2 Bridging Study initiated Jan. 2023, topline data 2H'23

Re-purposed selective 5-HT4 receptor partial agonist for gastrointestinal indications

- Asset in-licensed from Sanofi
- Phase 2 Gastroparesis trial initiation anticipated in 2025

Re-purposed small molecule drug with potent anti-inflammatory properties, proprietary micronized formulation

- IBD: Ulcerative Colitis-Proctitis and Immune Checkpoint Inhibitor-Associated Colitis
- Non-Binding Term Sheet Signed for Sale of Niclosamide Asset (December 2023)

Robust IP portfolio covering method, formulation and use indications; key patents secure for 15-20 years

Pipeline of gut-targeted GI therapies address significant unmet medical needs in billion-dollar markets



# First Wave BioPharma Management Team

## Combined Experience in Developing and Launching more than 25 Drugs















- Led Gilead's launch of Tenofovir/ Viread
- Director of BMS International Infectious Disease Group
- Founder of Tobira, sold to Allergan for \$1.7B



Sarah Romano
Chief Financial Officer



Martin Krusin
SVP Corporate Development





# **ADRULIPASE**

Exocrine Pancreatic Insufficiency in Cystic Fibrosis & Chronic Pancreatitis

# **CAPESEROD**

New GI Orphan Disease Opportunity In-Licensed from Sanofi

# **NICLOSAMIDE**

Non-Steroidal, Anti-Inflammatories for Mild-to-Moderate IBD

## **Adrulipase: Exocrine Pancreatic Insufficiency (EPI)**

A chronic nutritional deficiency – the pancreas is damaged and does not produce the digestive enzymes needed to break up food in the GI tract so that nutrients can be absorbed

## **EPI related morbidities**

- Poor fat absorption
- Unable to gain or retain weight
- Frequent bowel movements & diarrhea
- Abdominal discomfort and pain

## Focus on two patient populations requiring treatment for EPI

## **Cystic Fibrosis**

#### **Genetic disease**

- ~40,000 patients U.S.,
   ~100K-160K\* worldwide
- Treatment begins for patients in first six months of life

## **Chronic Pancreatitis**

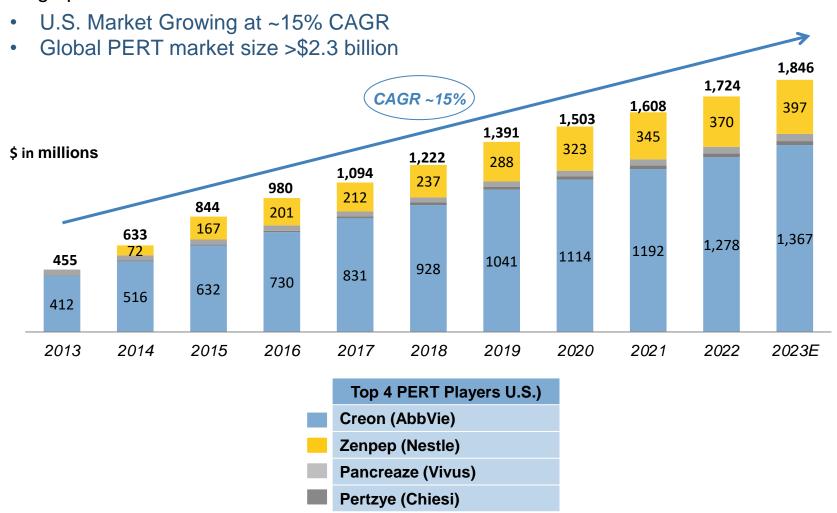
## Heterogeneous disease

- ~95,000 patients U.S.,
  - ~450K-600K worldwide
- Alcoholism
- Pancreatic cancer
- Pancreatic surgery



# Adrulipase: Large Established U.S. Market Of ~\$1.8 Billion<sup>(1)</sup>

All lipase products are pig derived and are less active at the pH in humans resulting in a large pill burden

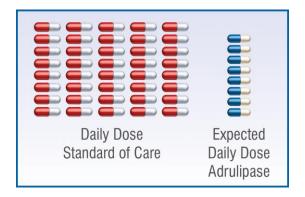


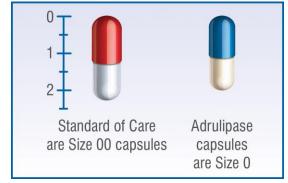
Sources: Global Market Size: Symphony Health 2019. The CorStar Group (2019). U.S. Market Size: Creon 2013-2023 AbbVie 10-K's, 2021 Mgmt. Estimate; Zenpep, Allergan 2014-2020 10-Ks, 2021 Mgmt. Estimate; Vivus and Pertzye.



# Adrulipase: Fulfilling an Unmet Medical Need

	PERT	ADRULIPASE		
Drug Substance	<ul> <li>Porcine-derived         pancreatic enzyme         replacement therapy         (PERT)</li> </ul>	<ul> <li>Recombinant yeast         (Yarrowia lipolytica) lipase- derived replacement therapy</li> </ul>		
Safety	<ul> <li>Adverse event: fibrosing colonopathy at high doses</li> <li>FDA black box warning</li> <li>~30% of CF patients are not well controlled on PERT</li> </ul>	<ul> <li>Safe and well tolerated to date</li> <li>No fibrosing colonopathy</li> <li>No porcine allergies</li> </ul>		
Pill Burden	■ 25-40 pills per day (CF)	■ 5-8 pills per day (CF)		
Sourcing & Supply	<ul> <li>Subject to pig herd management</li> <li>Risk of transmission of animal pathogens</li> <li>Manufacturing + supply chain inconsistency</li> </ul>	<ul> <li>GRAS (Generally Regarded as Safe)</li> <li>No risk of animal pathogens</li> <li>Manufacturing + supply chain consistency</li> </ul>		





Differentiated mechanism of action

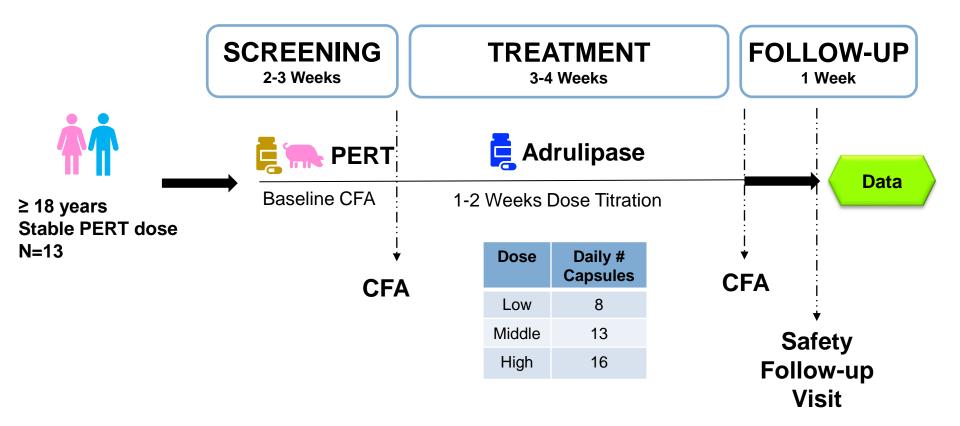
No dose-limiting safety issues to date on ~100 patients

Sources: Results from the Company's clinical trials, internal studies and management estimates.



## Adrulipase: Phase 2 SPAN Bridging Study Trial Initiated Jan. 2023, Completed July 2023

A Phase 2, Open Label, Multicenter, Pilot Study to Assess Safety and Efficacy of an Enteric Microgranule Formulation of Adrulipase in Patients with Exocrine Pancreatic Insufficiency (EPI) due to Cystic Fibrosis (CF)





## **Adrulipase: Summary**

- Targeting patients with Cystic Fibrosis (CF) and Chronic Pancreatitis (CP)
- Addressing an established PERT global market (>\$2 billion)

- Recombinant alternative to porcine pancreatic enzyme replacement therapy (PERT)
- A safer and more convenient therapy with a reduced daily pill burden
- Pursuing parallel monotherapy and combination therapy clinical pathways
- New enteric microgranule formulation developed
- Phase 2 bridging study completed, topline data July 2023
- FDA Type-C Meeting request to be scheduled in Q1'24





## Capeserod: Unique Mechanism of Action Applicable to New GI Indications

- Capeserod, a selective 5-HT4 receptor partial agonist small molecule, was in-licensed from Sanofi in September 2023
- In previous Sanofi Phase 1 and Phase 2 CNS trials, involving over 600 patients, Capeserod appeared safe and well-tolerated
- Research on Capeserod and subsequent artificial intelligence (AI)empowered analyses suggest that the drug possesses a unique prokinetic mechanism of action that increases gastric motility that is applicable to several GI indications underserved by currently available therapeutics in multi-billion dollar markets.
- First Wave will repurpose Capeserod for gastrointestinal (GI) indications, and plans to initiate a Phase 2 gastroparesis clinical development program
- Sanofi retains the right of first refusal (ROFR) to develop and commercialize Capeserod



# Niclosamide: Significant Unmet Need in IBD Large Multi-Billion Dollar Mild-to-Moderate IBD Market Opportunity

■ Large Mild-to-Moderate market size (U.S.)<sup>2</sup>

Mild-to-Moderate	Prevalence	Market Size
Ulcerative Colitis	~700K	\$4.6B
Crohn's Disease	~500K	\$4.3B

Current mild-to-moderate treatments are ineffective: 5-ASA (oral, rectal, or both together) in the hope of inducing and maintaining remission

- Remission fails to occur in patients all too often
  - ~54% fail remission with oral 5-ASA3
  - ~59% fail remission with rectal 5-ASA4

<sup>&</sup>lt;sup>4</sup>Ham, M. and Moss, C. Mesalamine in the treatment and maintenance of remission of ulcerative colitis. <u>Expert Rev Clin Pharmacol. 2012</u> Mar: 5(2): 113–123.



<sup>&</sup>lt;sup>1</sup> Crohns and Colitis Foundation 2022

<sup>&</sup>lt;sup>2</sup> GlobalData Ulcerative Colitis Global Drug Forecast and Market Analysis to 2026: US Adults. 2018; GlobalData Crohn's Disease Global Drug Forecast and Market Analysis to 2029: US. 2020

<sup>&</sup>lt;sup>3</sup>Wang, Y. et al. Oral 5-aminosalicylic acid for induction of remission in ulcerative colitis. *Cochrane Database of Systematic Reviews*. August 2020.; Feagan, B. and Macdonald, J. Oral 5-aminosalicylic acid for induction of remission in ulcerative colitis. *Cochrane Database Syst Rev.* 2012 Oct 17;10:CD000543.

## Niclosamide: Ideal profile for a GI-targeted agent Multiple Phase 2 ready IBD indications

- FDA approved (1982) small molecule anthelmintic drug used for intestinal tapeworm infections; clean safety history
- Low oral bio-availability with minimal systemic exposure
  - Pharmacology ideal for local bowel disease; not absorbed from GI tract
- Niclosamide inhibits pro-inflammatory pathways
  - Mechanism of action is to impair oxidative phosphorylation
  - Non-steroidal anti-inflammatory option
  - Opportunities for combinations with standard of care for multiple indications without systemic immunosuppression
- Data from Phase 1b study of niclosamide in ulcerative proctitis/proctosigmoiditis (UP/UPS) shows promising results
  - Clinical remission efficacy of 59% compares favorably to steroids (38-44% remission rate for budesonide)
- Niclosamide IP portfolio purchased in 2021

First Wave

 Multiple Phase 2 ready IBD indications (UP/UPS, Ulcerative Colitis, Immune-Checkpoint Inhibitor-Associated Colitis)

# Three therapeutic assets and multiple Phase 2-ready clinical indications

Program	Preclinical	Phase 1	Phase 2	Phase 3	Next milestone		
Adrulipase							
Monotherapy (FW-EPI)	Exocrine pancreatic insufficiency in cystic fibrosis – enteric microgranule formulation Phase 2 Bridging Study				FDA Type-C Meeting Request 1H'24*		
Combination (FW-EPI+ PERT)	Severe exocrin cystic fibrosis Phase 2 Topline						
Capeserod							
	Gastroparesis				Phase 2a Initiation*		
Niclosamide							
FW-UP	IBD: Ulcerative Phase 2 Initiation	e colitis-proctitis on: Q3'21	3		Phase 2 Topline data: 2H'22		
FW-ICI-AC	Immune check Phase 2 IND cl	point inhibitor of earance: Q4'21	colitis		Phase 2a Initiation*		

<sup>∨</sup>C \* Anticipated