# Cereno Scientific

## Innovative treatments in common and rare cardiovascular disease

September 2022

Cereno Scientific

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# More than **200 million** people in the world today are at high risk of having a cardiovascular event

”Previously we used to work ourselves to death, today we rest ourselves to death while eating easily available food”

Inactivity = Smoking

# Cereno develops novel drugs to transform treatments for common and rare cardiovascular diseases

**Introducing**

**Epigenetic modulation** through HDAC inhibition with disease modifying potential

Potent, Selective and Stable PRA

**Lead program CS1** currently in US Phase II in PAH with strong rationale and supportive data:

First patient randomized august 2022

Topline data expected Q1 2023

**Pipeline portfolio:**

CS1: Phase II HDACi, ODD in PAH

CS585: Preclinical Prostacyclin Receptor Agonist

CS014: Preclinical HDACi

**Cereno's global presence**

HQ: Gothenburg, Sweden

US subsidiary: Boston, MA

CS1 Clinical Phase II: 10 centers in the US in collaboration with Abbott

Preclinical R&D collaboration: University of Michigan, MI

Listed on Swedish Spotlight Stock Market since June 2016 (CRNO B)

# Cereno Scientific to transform the treatments of cardiovascular disease

## Pioneering clinical-stage biotech company

- Discovery of the potential of HDAC inhibition

## Strong scientific leadership

- Thought leaders in CVD
- Experienced team and SAB
- Global presence

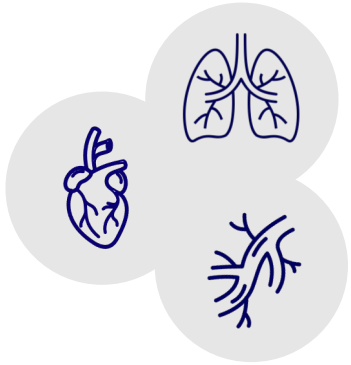
## Innovative drug development

- Epigenetic HDACis
  - CS1 in Phase II
  - CS014 in preclinical
- Prostacyclin Receptor Agonists
  - CS585 in preclinical
- Disease-modifying potential

## Uniquely positioned to make an impact on common and rare CVD

- Without increased risk of bleeding
- Addressing rare disease, and possibly major markets

# Promising programs with potential to transform the CVD treatment landscape



| Program | Indication | Discovery | Preclinical | Phase I | Phase II | Phase III | Next milestone |
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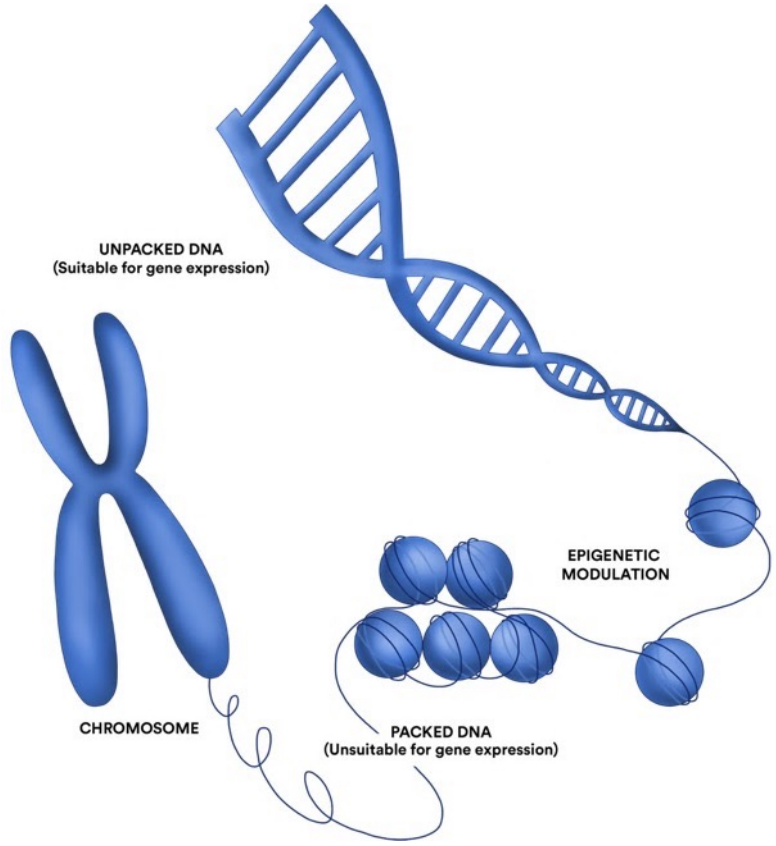
HDACi = Histone deacetylase inhibitor

# HDACi game-changing with epigenetic modulation of cardiovascular disease

## CS1 and preclinical CS014 acts as epigenetic modulators

- Epigenetic modulation is the alteration of gene expression without altering genetic material.
- Epigenetic changes play a significant role in the pathogenesis of many CV diseases.
- Histone deacetylase (HDAC) inhibition plays an important role in epigenetic modulation.
- HDAC inhibition has played a critical role in new cancer therapies, but the use of epigenetic modulation in cardiovascular disease has just begun.
- Cereno's programs holds potential to bring safe, efficacious and **disease-modifying** therapies that will change future CV therapy in general and PAH in particular.

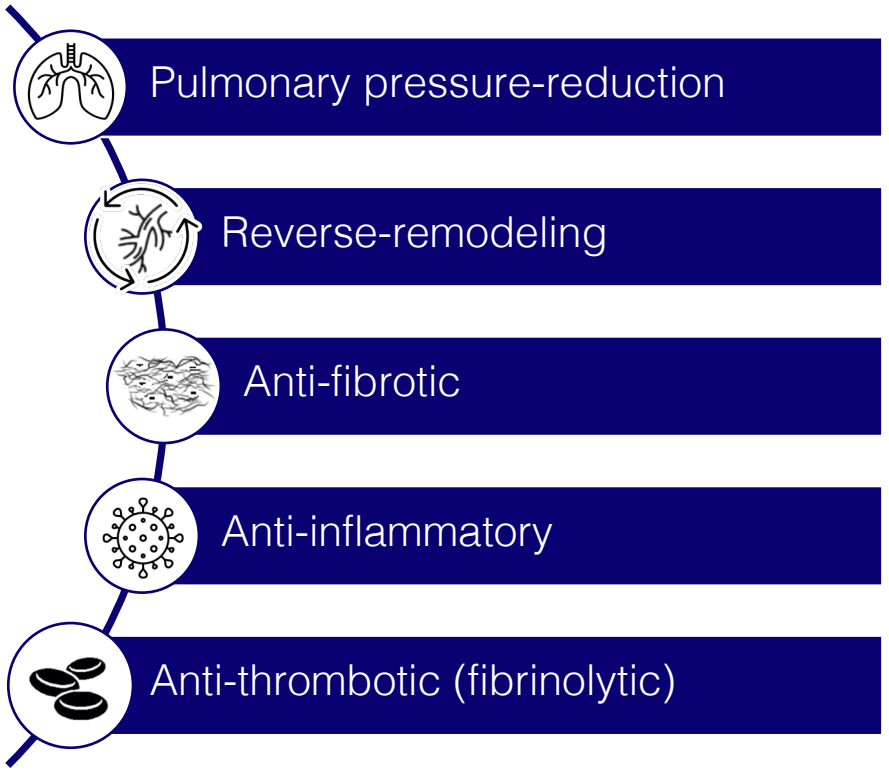


# Phase II CS1: Focus on developing a disease-modifying treatment for the fatal rare disease PAH

**CS1 is a new advanced reformulation and acts as an epigenetic modulator**

- Proven good safety and tolerability in Phase I study.
- CS1's broad efficacy profile makes it a strong alternative to marketed and pipeline PAH drugs due to **reverse remodeling**.
- CS1 could fill the significant need for more efficacious and safer therapies with a **disease-modifying potential** to improve survival and quality of life for PAH patients.*

**CS1's multi-fold efficacy, all relevant for PAH**



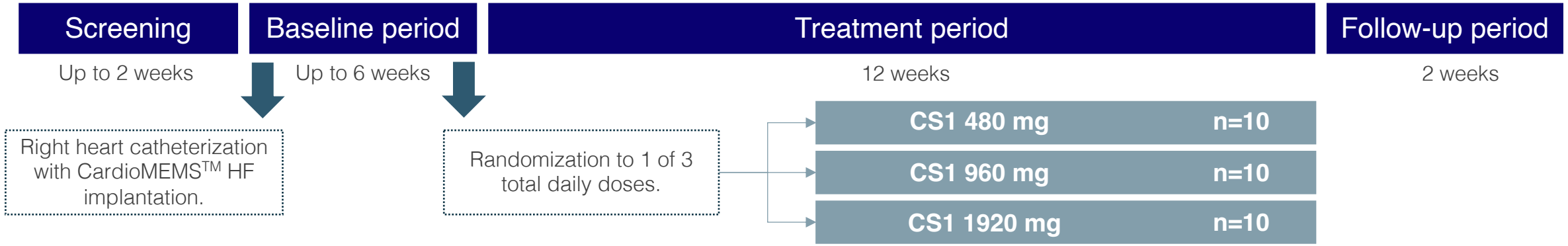

*Currently in Phase II development.

# CS1 Phase II study aims to evaluate safety, tolerability and exploratory efficacy in PAH

- Primary endpoint: Safety and tolerability.
- Other variables including all standard efficacy endpoints for this patient group (6MWT etc.), a calculated validated risk score, pharmacokinetics, and dose-finding based on mPAP changes.
- Abbott's CardioMEMS™ HF System technology for monitoring pulmonary pressure and pulmonary/RH hemodynamics.
- Includes 30 patients, at 10 different US clinical sites.

**Study status**

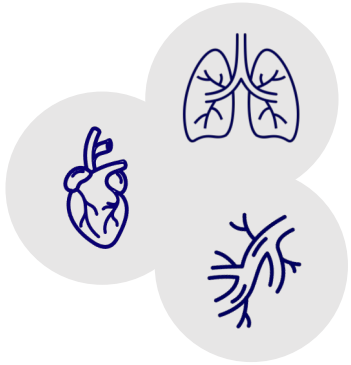
- First site activated: 14 Mar 2022
- First patient screened: 5 July 2022
- First patient randomized: 25 Aug 2022
- Activation of clinical sites is ongoing continuing throughout early autumn
- Top-line results are expected Q1 2023



# Leaving a mark in the medical community through abstracts accepted at top congresses

| June 9-12, 2022 | June, 22-26 2022 | August 26-29, 2022 | October 16-19, 2022 |
|---|---|---|---|
| **CS585 is a first-in-class compound targeting the IP receptor for prevention of thrombosis without increased risk of bleeding**<br>S. Lambert, R. Adili, P. Yalavarthi, N. Rhoads, B. Dahlöf, A. White, N. Bergh, M. Holinstat<br>- Presented by M. Holinstat | **Investigation of efficacy, safety and optimal dose of CS1 in subjects with pulmonary arterial hypertension: a prospective, randomized, multicenter, parallel-group phase II study**<br>R. Benza, N. Bergh, P. Adamson, B. Dahlöf<br>- Presented by R. Benza | **CS014 is a novel HDAC inhibitor regulating platelet activity, fibrinolysis and clot stability for prevention of thrombosis without increased risk of bleeding**<br>M. Holinstat, R. Adili, L. Stanger, T. Hoang, S. Lambert, N. Rhoads, B. Dahlöf, N. Bergh<br>- Presented by M. Holinstat | **An innovative phase 2 clinical trial design for the assessment of CS1 - a novel therapy in the treatment of pulmonary arterial hypertension**<br>R. Benza, N. Bergh, P. Adamson, B. Dahlöf<br>- To be presented by R. Benza |

# Promising programs with potential to transform the CVD treatment landscape



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HDACi = Histone deacetylase inhibitor

# Most deaths worldwide are caused by cardiovascular disease

Cardiovascular disease (CVD) is a group of disorders of the heart and blood vessels.

## 22.2 million people

are expected to die annually due to CVD by 2030.

## 80% of CVD deaths

are due to heart attacks and strokes.

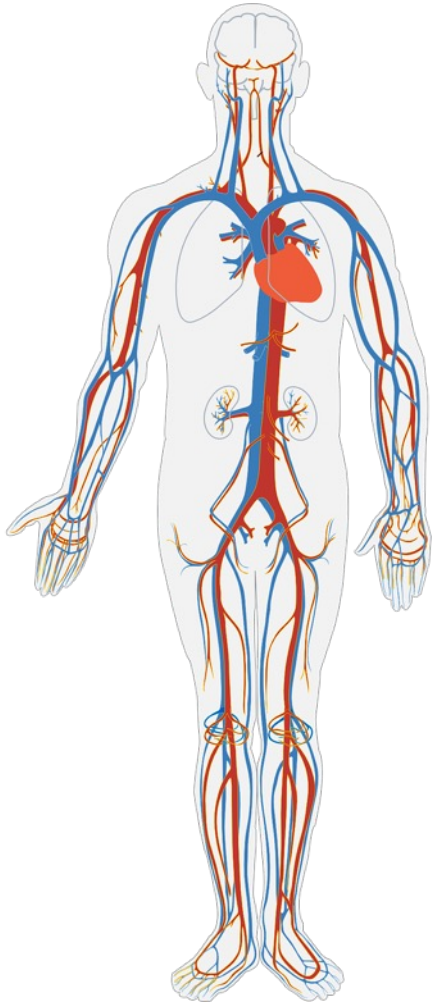
## WHY?

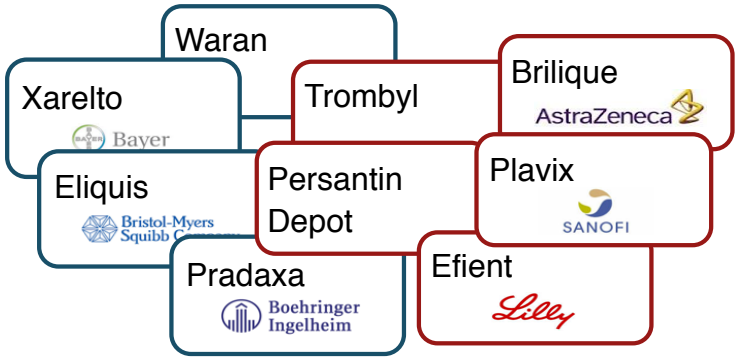
Most CVD complications happen because of thrombus formation – blood clots obstructing the cardiovascular system.

Existing treatment options are insufficient.

Sources: WHO Fact Sheet (link), European Heart Network (link), American Heart Association (link)

# Current anti-thrombosis/blood thinning treatment involves the risk of serious bleedings






Systemic inhibition of coagulation/platelet function

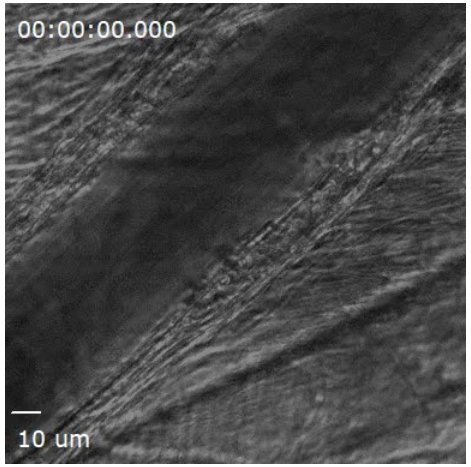
↘

Increased risk of bleeding
Insufficient preventive effect

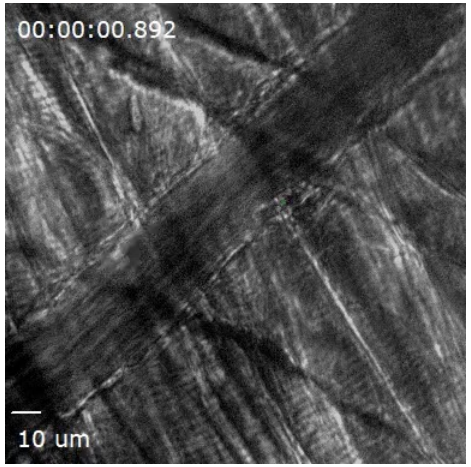
↘

**Need for new preventive strategies**

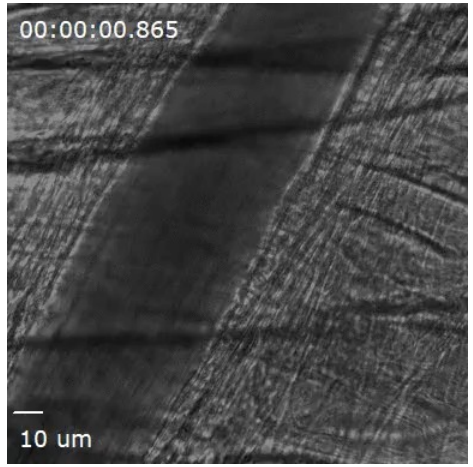
# CS585 inhibits platelet clot formation following injury and represents a new approach for prevention of thrombosis without increased bleeding




Vehicle control




CS585 3mg/kg

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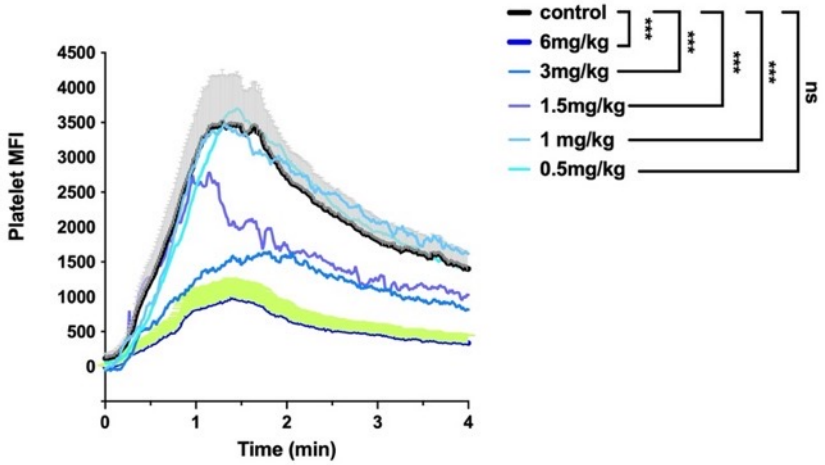
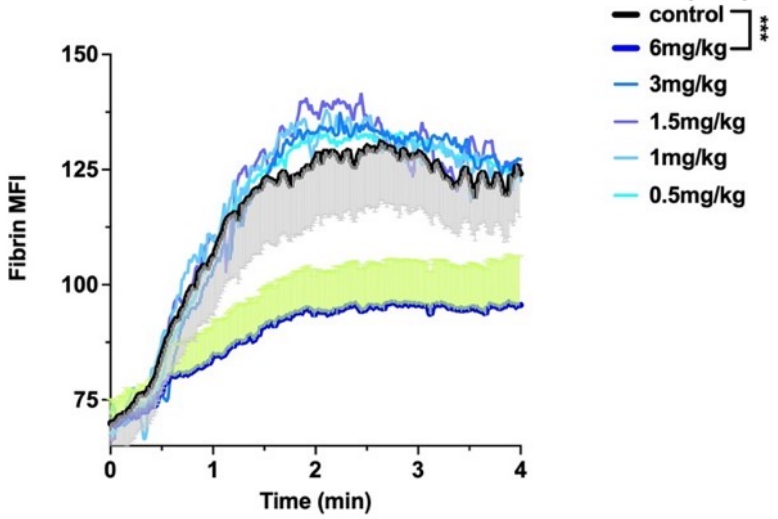
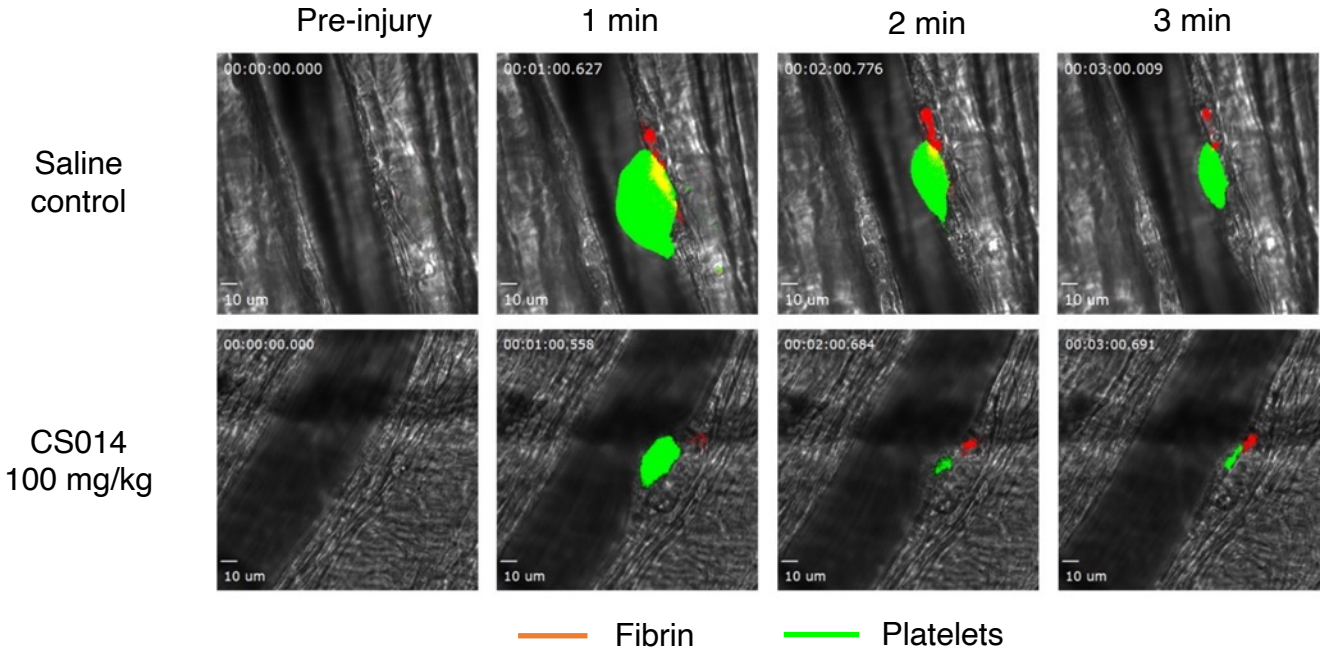
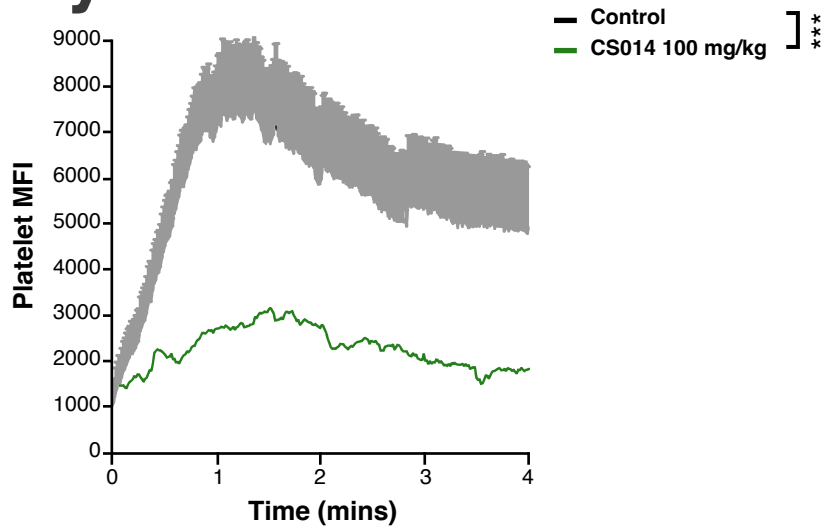
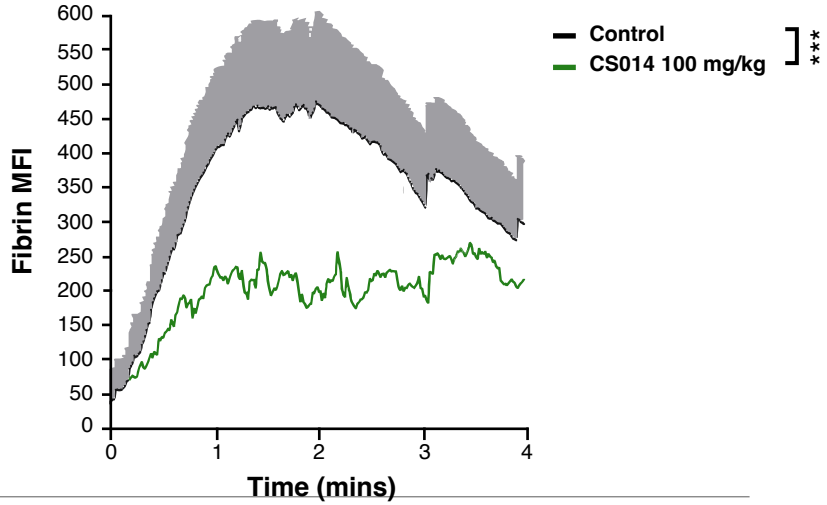


# CS014 developed as an HDAC inhibitor with the ability to inhibit platelet clot formation following vascular injury




CS014 inhibits thrombosis by attenuating platelet activation and clot formation at site of injury; and significantly reducing fibrin formed at the site of injury.

**CS014 represents a potentially new drug class for the prevention of thrombosis without increased bleeding.**

# Cereno will enter one of the largest pharmaceutical markets with a profile which will impact thrombosis management

| | Warfarin | NOACs/ Antiplatelets | CS585 | CS1, CS014 |
|---|---|---|---|---|
| Dose monitoring not required | Required | ✓ | ✓ | ✓ |
| Anti-thrombotic efficacy | ✓ | ✓ | ✓ | ✓ |
| Lower risk of bleeding | Increased bleeding | Increased bleeding | ✓ | ✓ |
| Organ protection | Not documented | Not documented | Not documented | ✓¤ |

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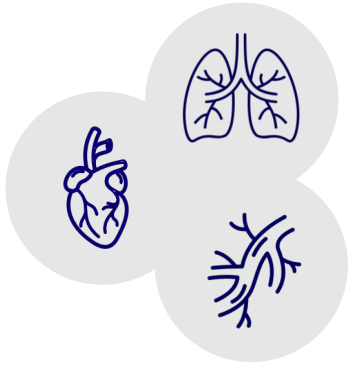
¤ and anti-fibrotic,reverse remodeling, anti-inflammatory, CV protective e,g, in MI and stroke, neuroprotective, reduction pulmonary pressure shown for VPA

# Promising programs with potential to transform the CVD treatment landscape



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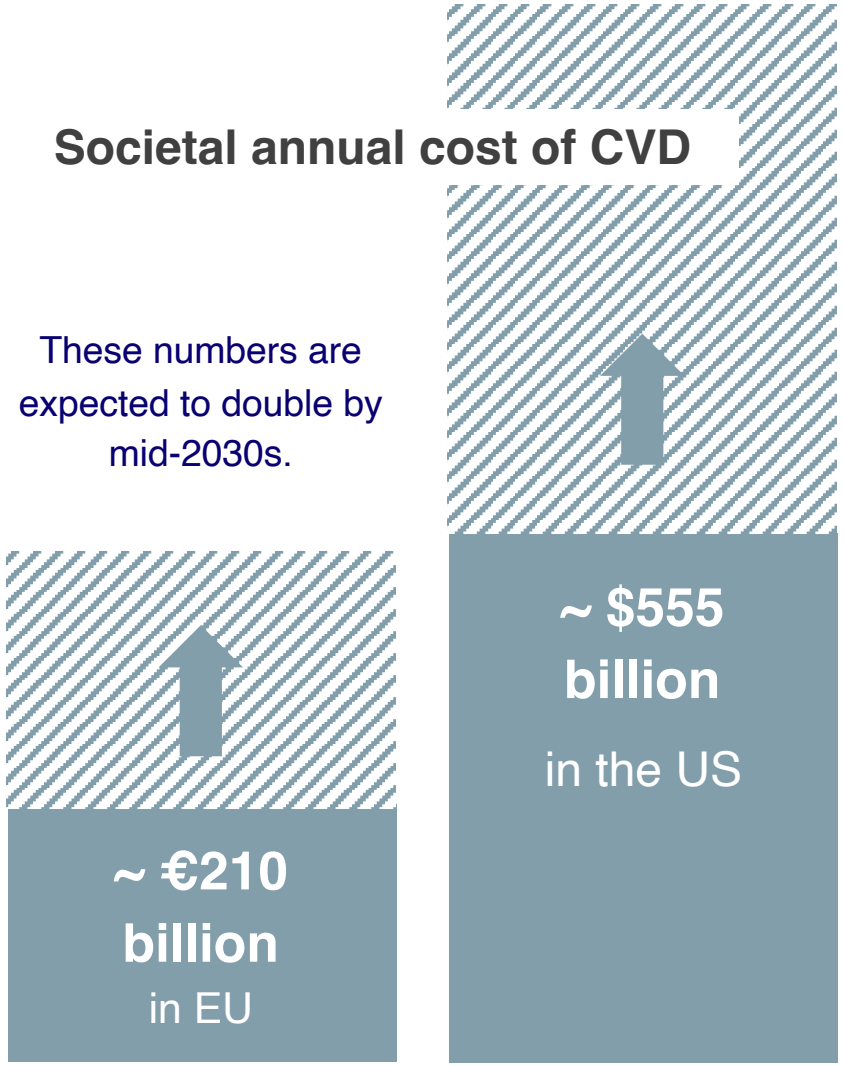
# Cardiovascular disease equals exorbitant costs for patients, their families and society

- **Common and rare CVDs result in significant markets** due to their mortality threat and adverse effect on the quality of life of patients
- The **global anti-thrombotic drug market** is estimated to grow on average **7.5%** per year, resulting in a **$43.4 billion** market by **2025.**
- **$USD 11.7 billion** is the estimated global market size in 2027 for rare disease PAH – a Cereno target indication
  - **6.2%** is the estimated market increase for 2021–2027.
  - Growth is expected to be driven by increasing prevalence rates as well as government support for development of orphan drugs.

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Sources: European Heart Network (link), American Heart Association (link) – 2017 data, Epigenetic Modulation for Cardiovascular Disease. Infogence Global Research (2021) “Global Pulmonary Arterial Hypertension (2021-2027)”, MSC Nordics analysis.

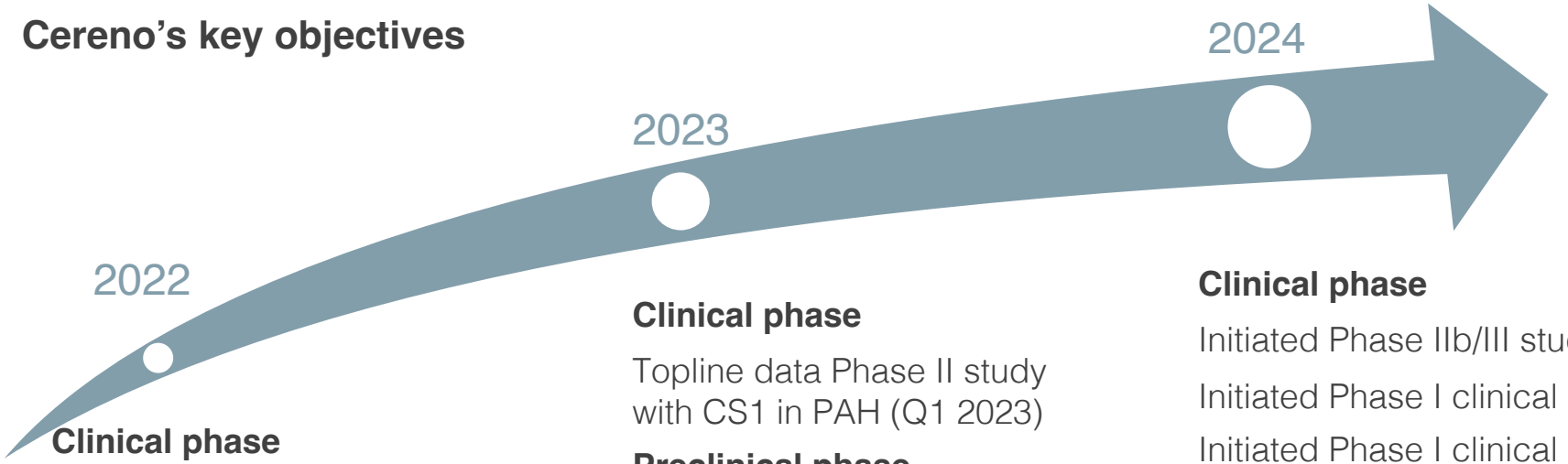
# Full steam ahead in 2022

Key 2022 achievements and upcoming milestones

- ✓ CS585 and CS014 nominated in Q2 as CDs for further development towards IND submission for clinical programs
- ✓ CS585 thrombosis data (*prevention of thrombosis without increased risk of bleeding*) accepted for EHA June 2022
- ✓ CS014 thrombosis data (*prevention of thrombosis without increased risk of bleeding*) accepted for ESC Aug 2022
- ✓ First patient dosed in CS1's Phase II study in PAH in collaboration with Abbott
- ✓ Solidified IP position with two new patents across two of CS1's three patent families
- ✓ Executive management team strengthened with hiring of Head of Clinical Operations and Head of Preclinical Development
- ✓ Hosted a Capital Markets Day on Aug 30 with key thought leaders and parts of the management team
- ✓ Strengthened IP for CS585 that broadens and extends future commercial potential in the US
- New financing with approximately SEK 65.6 million from exercise of warrants of series TO2 – Q3, 2022
- Topline data from CS1's Phase II study in PAH – Q1, 2023

# Cereno's strategy to provide value for patients and stakeholders

**Cereno's key objectives**




**2022**

**Clinical phase**

Start Phase II study in PAH with CS1

**Preclinical phase**

Ongoing development programs for CS014

Ongoing development programs for CS585

**2023**

**Clinical phase**

Topline data Phase II study with CS1 in PAH (Q1 2023)

**Preclinical phase**

IND submission Phase I for CS014

IND submission Phase I for CS585

**2024**

**Clinical phase**

Initiated Phase IIb/III study in PAH with CS1

Initiated Phase I clinical studies with CS014

Initiated Phase I clinical studies with CS585

Utilizing the project portfolio's full potential on profitable markets within cardiovascular disease.

Cereno Scientific is a clinical stage biotech company within cardiovascular diseases. The lead drug candidate, CS1, is a Phase II candidate in development for the treatment of the rare disease pulmonary arterial hypertension (PAH). CS1 is an HDAC (histone deacetylase) inhibitor that acts as an epigenetic modulator with pressure-reducing, reverse-remodeling, anti-inflammatory, anti-fibrotic and anti-thrombotic properties, all relevant for PAH. A clinical Phase II study is ongoing to evaluate CS1's safety, tolerability, and efficacy in patients with PAH. A collaboration agreement with global healthcare company Abbott allows Cereno to use their cutting-edge technology CardioMEMS HF System in the study. Cereno also has two promising preclinical drug candidates in development for cardiovascular disease through research collaborations with the University of Michigan. Drug candidate CS585 is a stable, selective, and potent prostacyclin receptor agonist. In preclinical studies CS585 has been documented to target the IP receptor for prevention of thrombosis without increased risk of bleeding. Drug candidate CS014 is a novel HDAC inhibitor with epigenetic effects. In preclinical studies CS014 has been documented to regulate platelet activity, fibrinolysis and clot stability for prevention of thrombosis without increased risk of bleeding. Cereno Scientific is headquartered in Gothenburg, Sweden, and has a US subsidiary Cereno Scientific Inc. based in Kendall Square in Boston, Massachusetts, US. Cereno is listed on the Swedish Spotlight Stock Market (CRNO B).