

Forward looking statement



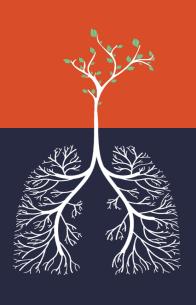
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Study Design

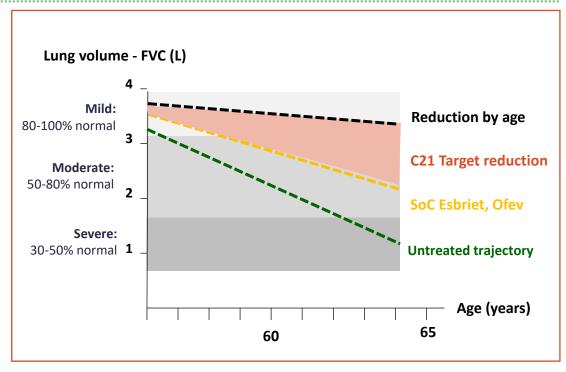




C21 - Phase II AIR trial in IPF



- Multicenter, open-label, single-arm trial
- 60 subjects with IPF
 - Central reader of HRCT to secure IPF diagnosis
 - Gold standard FVC measurement
- Primary endpoint safety
- Primary efficacy endpoint change in FVC at week 24 from baseline
- Treatment naïve patients, without SoC
- Untreated patients decline 120 ml/24 weeks





Baseline data from Kolb, 2017

Recruitment status and analysis



• Enrolled: 25

Evaluable at time of analysis: 21

36-week data: 7

24-week data: 9

• 12-week data: 13

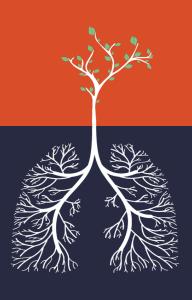
• 4-week data: 18

2-week data: 21

- Slope analysis based on observed values
- Statistical analysis is based on estimated 24-week slopes
- For missing values, data was imputed (i.e., missing data is replaced with substituted values)
 - Conservative approach for imputation. Historical control data for untreated IPF patients was used, meaning an FVC decline with -240ml/y (-60 ml/12 weeks).



Interim Analysis After 21 Evaluable Patients





C21 is safe and well tolerated



- No related serious adverse events
- No acute exacerbations
- No gastrointestinal signals
- The safety profile is supported by previous and other ongoing trials:
 - 3 phase 1 studies
 - Phase 2 mechanistic study in SSc
 - Phase 2 COVID-19
 - Phase 3 COVID-19 (ongoing)







Reference	Title	Mean change in FVC from baseline at 24 weeks (ml)	No. of patients in placebo group	Treatment period (weeks)
King et al. N Engl J Med 2014; 370:2083-2092	A Phase 3 Trial of Pirfenidone in Patients with Idiopathic Pulmonary Fibrosis	-129	277	52
Richeldi et al. Lancet Respir Med. 2020 Jan;8(1):25-33	Pamrevlumab, an anti-connective tissue growth factor therapy, for idiopathic pulmonary fibrosis (PRAISE): a phase 2, randomised, double-blind, placebo-controlled trial	-150	53	48
Brown et al. Respir. Med. 2019; 146: 42-48	Lung function outcomes in the INPULSIS® trials of nintedanib in idiopathic pulmonary fibrosis	-103	423	52
Maher et al. Lancet Respir Med. 2019 Sep;7(9):771-779	Biomarkers of extracellular matrix turnover in patients with idiopathic pulmonary fibrosis given nintedanib (INMARK study): a randomised, placebo-controlled study	-140	231	12

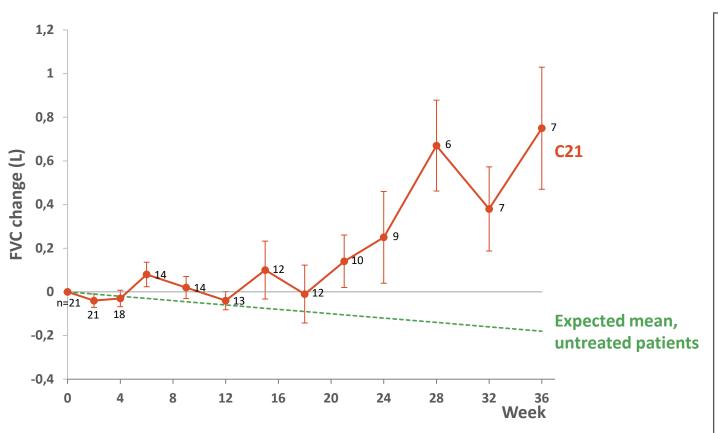
Average: -131 ml







Mean change (SEM) from baseline in FVC over time, observed values

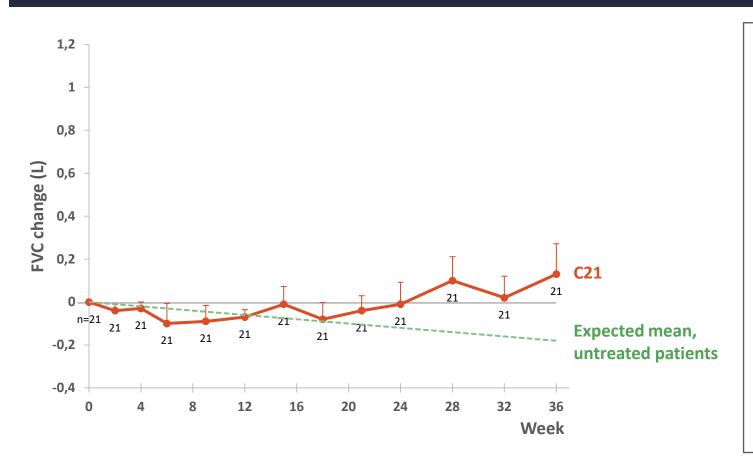


- After an initial stabilization there is an increase in FVC.
- At 24w, FVC increase is +251 ml vs. an expected change of -120 ml in untreated patients. At 36 weeks the FVC increase is +750 ml.
- Slope values at 28w, 32w and 36w are statistically significant (p=0.016 at 36w) vs. the expected mean for untreated patients.



C21 stabilizes IPF and increase lung volume - Observed and imputed values

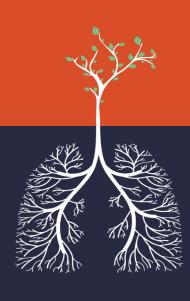
Mean change (SEM) from baseline in FVC over time with <u>observed and imputed values</u>



- Imputed values used are based on historical decline in untreated patients (-120ml/24w).
- Even with this conservative approach, the slope is still positive.



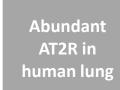
C21 - Mode of Action

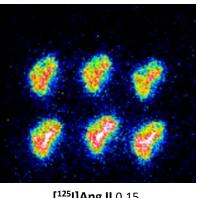




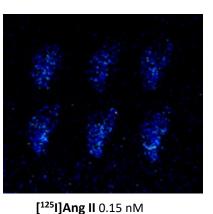




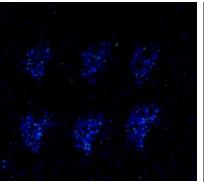




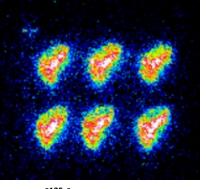
[¹²⁵**I]Ang II** 0.15 nM (Ki AT2R 0.1 nM)



+
Ang II 1 μM



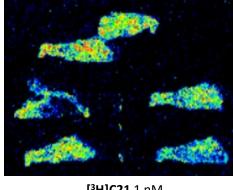
[¹²⁵I]Ang II 0.15 nM + C21 0.75 μM (Ki AT2R 1-2 nM)



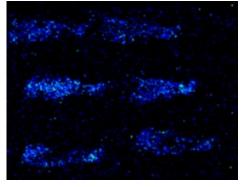
[¹²⁵I]Ang II 0.15 nM + Valsartan 1 μM (Ki AT1R 2-3 nM)

- Receptor
 autoradiography
 performed with human
 lung tissue. slices shows
 abundant AT2 receptor
 expression
- No or little AT1R





[³H]C21 1 nM (Ki AT2R 1-2 nM)



[³H]C21 1 nM + C21 0.75 μM

- Receptor

 autoradiography
 performed with human
 lung tissue
- Significant and specific C21 receptor binding at 1 nM.

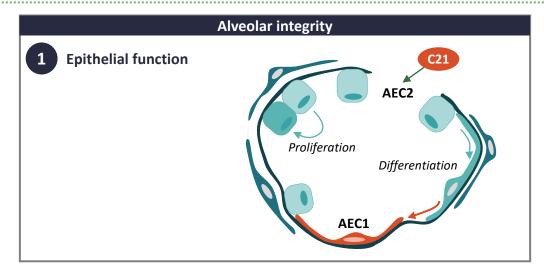


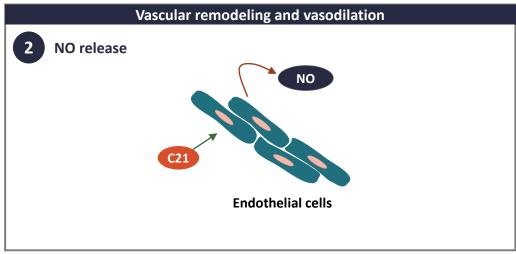
Abundant AT2R in human lung enable multiple points of attack for C21

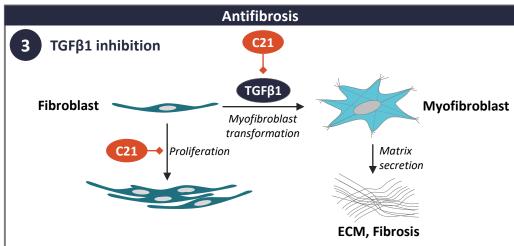
Source: Vicore data on file. 12

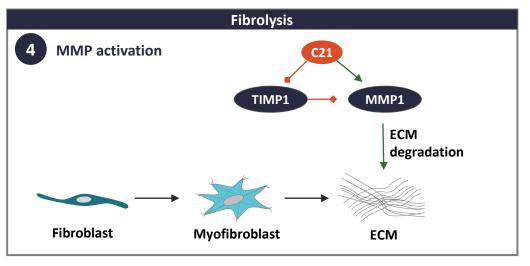
Multiple mechanisms mediating AT2R agonist effects







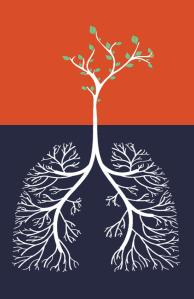






Multiple mechanisms can possibly contribute to the observed effect in IPF

Idiopatic Pulmonary Fibrosis (IPF)



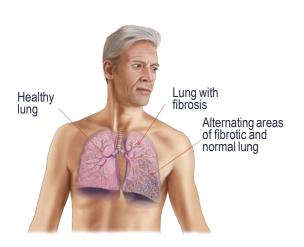


A devastating disease with significant unmet need



A rare interstitial pulmonary disease with unknown etiology

- Life expectancy 3-5 years. Progressive loss of lung function, pulmonary hypertension, cardiac failure
- Fibrosis and vasculopathy are hallmarks of the disease
- Rapid decline, therapies rarely improve disease or quality of life
- No approved drugs for ILD/IPF cough or for IPF/PF anxiety
- Orphan disease: ~250 000 patients in the US and Europe



Alveolus in fibrosis



Fibrosis between alveoli decreases gas exchange so that less oxygen is transferred to the bloodstream

Healthy alveolus



Opportunity for market leadership

Market expected to grow to \$5.2 Bn in 2027

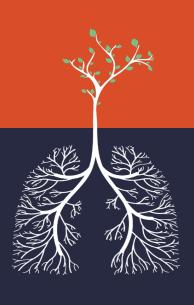
- Esbriet approved since 2011/2014 and Ofev since 2014/2015 in Europe and the US
- \$4.0 billion combined global sales 2021 (estimated); 70% in US (1)
- \$5.2 billion Market projection IPF 2027⁽²⁾

Significant unmet need

- Approved IPF drugs highly unsatisfactory due to limited efficacy together with GI and other side-effects
 - 40% of US IPF patients not on approved drugs; 11% discontinue (3)
 - Market potential much larger than existing market due to large share of untreated patients
- C21 aiming at going head-to-head with current SoC to establish new first-line SoC



Conclusions





Conclusions



AIR interim data

- Treatment was safe and well tolerated with no exacerbations
- C21 stabilizes IPF disease without further decrease in lung function
- From week 18 to 24 there is an increase in lung function (n=9)
- At 24 weeks the slope is +251 ml
- Between week 24 and 36, five patients continue to improve and two remain stable (n=7)

MoA

- There is an abundance of AT2R on different cell types in the human lung
- C21 receptor binding in the human lung show multiple points of attack
- There are multiple mechanisms that possibly can contribute to the observed effect in IPF

Next steps

Accelerate planning of a double-blind placebo-controlled dose finding study for start Q4 2022



