



A Next Generation Stem Cell Therapeutics Company

Managing Director's Presentation

Dr Kilian Kelly

Annual General Meeting

13 November 2023

Important information

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Company highlights

Cynata is a clinical stage biotech developing its proprietary Cymerus platform technology for the scalable manufacture of mesenchymal stem cell (MSC) therapeutic products to treat serious disorders



Unique Manufacturing

Single donation from a single donor
iPSC strategy overcomes suboptimalities in conventional MSC manufacturing



Strong safety and efficacy

Positive pre-clinical and clinical data supporting versatility and efficacy of Cynata's MSCs; including in world-first iPSC trial in aGvHD Phase 1



Multiple clinical trials

- Rich clinical pipeline:**
- **aGvHD** (Phase 2)
 - **DFU** (Phase 1)
 - **Osteoarthritis** (Phase 3)
 - **Renal** (Phase 1)



Large addressable market

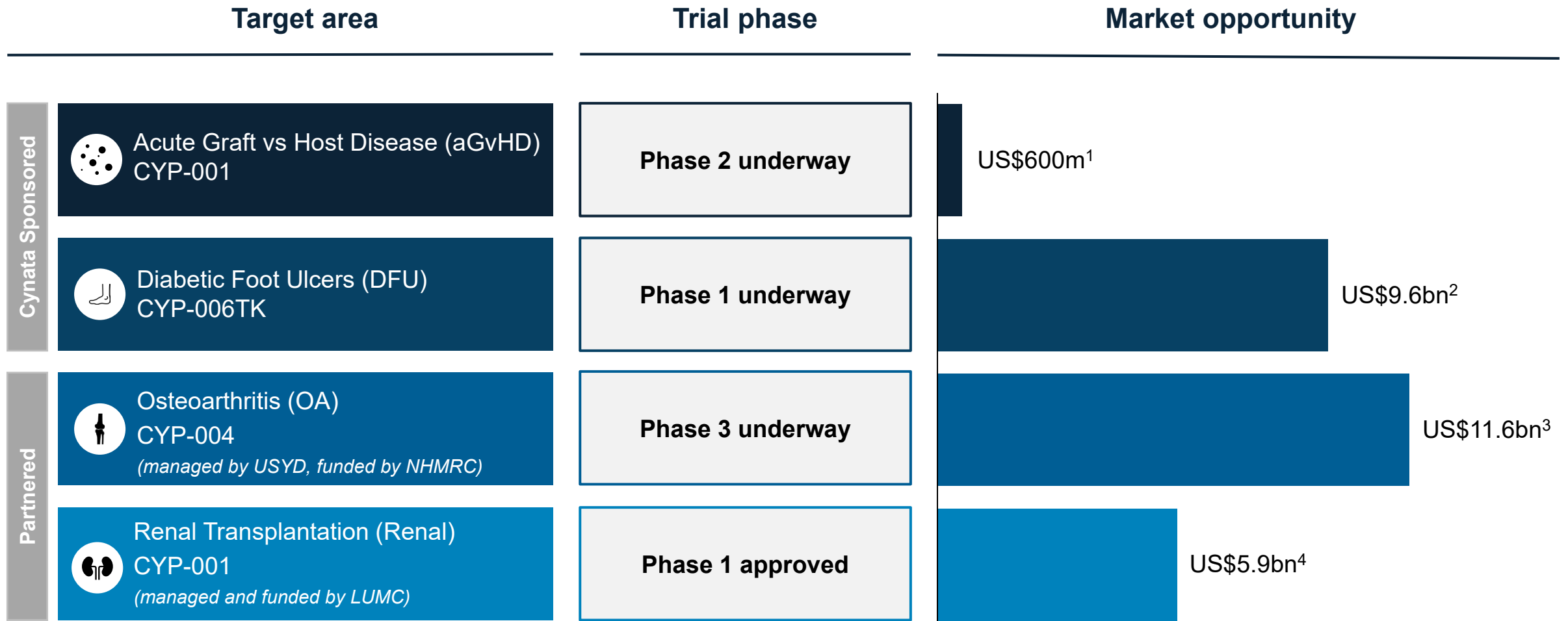
Combined market opportunity of clinical trials underway and in planning is **~US\$28bn¹**



Well funded

Solid funding position, with **~A\$12m in cash²**, and OA and renal trials **funded by external partners**

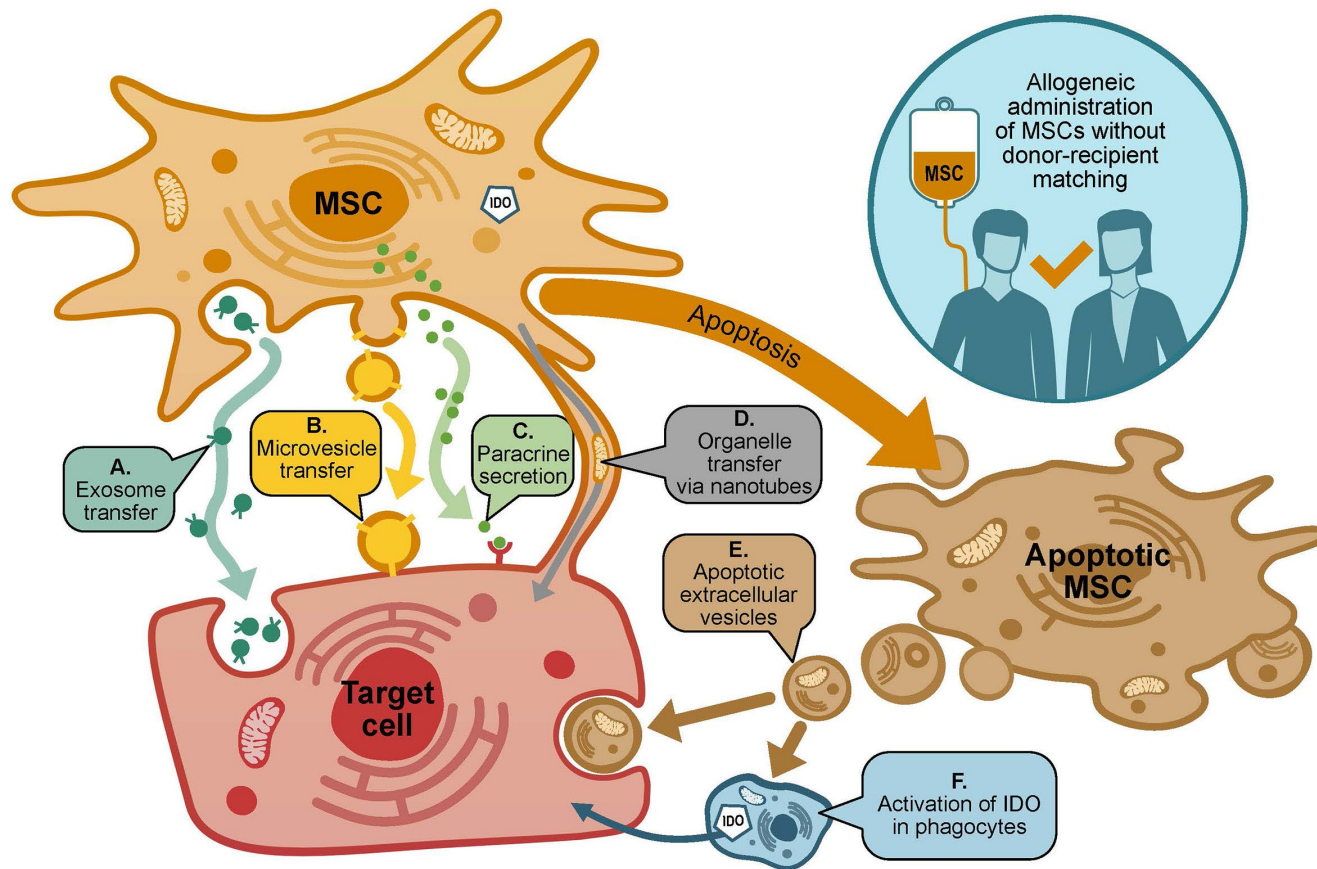
Cynata has an advanced and diverse clinical pipeline



Why Mesenchymal Stem Cells (MSCs)?

MSCs play a central co-ordinating role in many of the body's mechanisms of defence, repair and regeneration: the "sensor and switcher of the immune system"¹

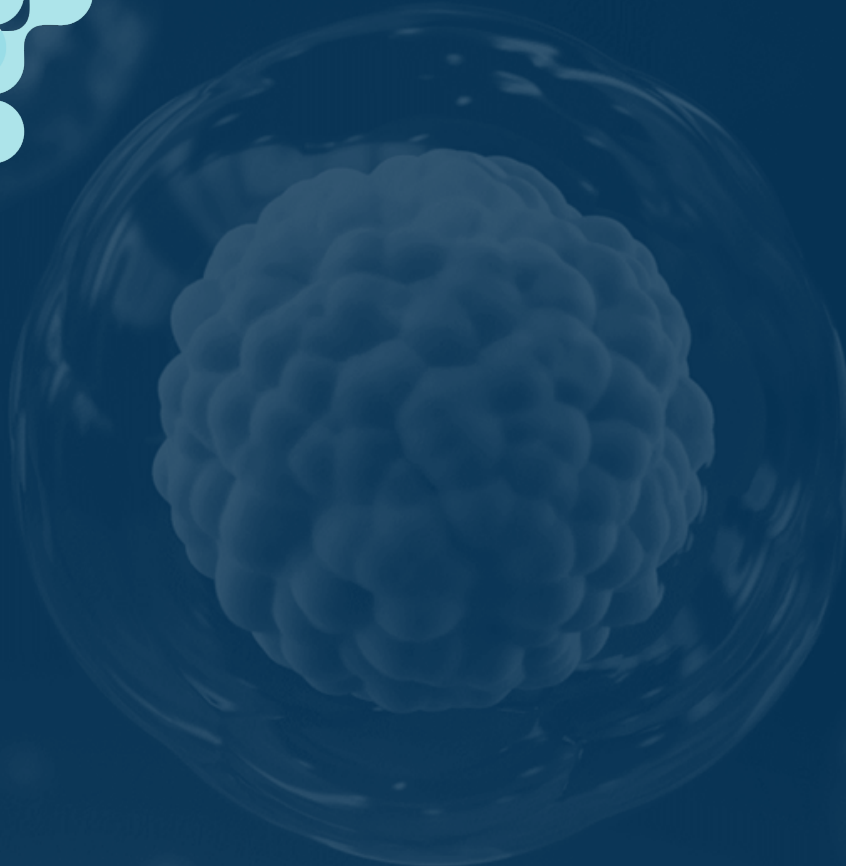
MSCs can be used therapeutically without matching the donor and the recipient



MSCs promote an immunomodulatory and immunoregulatory environment via multifactorial mechanisms, including secretion of proteins / peptides / hormones; transfer of mitochondria; and transfer of exosomes or microvesicles containing RNA and other molecules

cynata

therapeutics



Manufacturing



Cynata's process utilizes induced pluripotent stem cells (iPSCs)

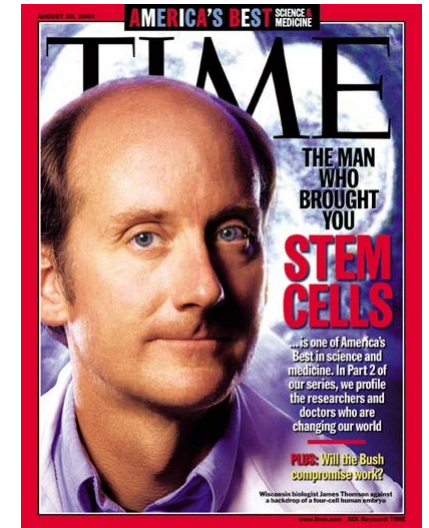
- iPSCs are mature cells from adult donors that are reprogrammed to be capable of:
 - effectively limitless proliferation in cell culture
 - differentiation into any adult cell type (including MSCs)



Thus an ideal starting material for cellular production processes



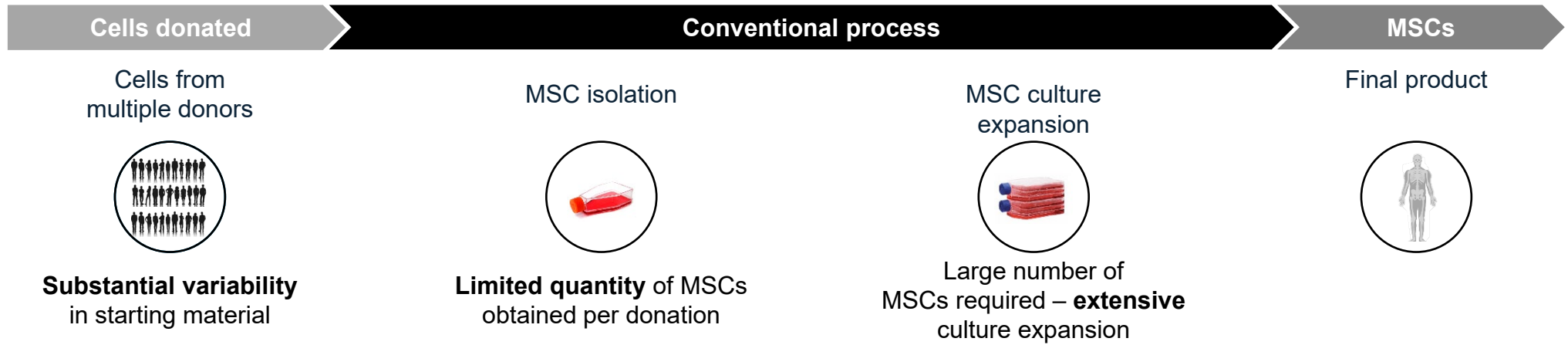
- iPSCs are derived from adult cells, avoiding ethical controversy associated with embryonic stem cells
- Cynata is the most advanced company worldwide developing iPSC-derived cell therapies
- Generation of human iPSCs first reported by two independent groups almost simultaneously:
 - Shinya Yamanaka, Kyoto University (awarded Nobel Prize in 2012)
 - James Thomson, University of Wisconsin-Madison



Cymerus™ iPSC-based manufacturing process

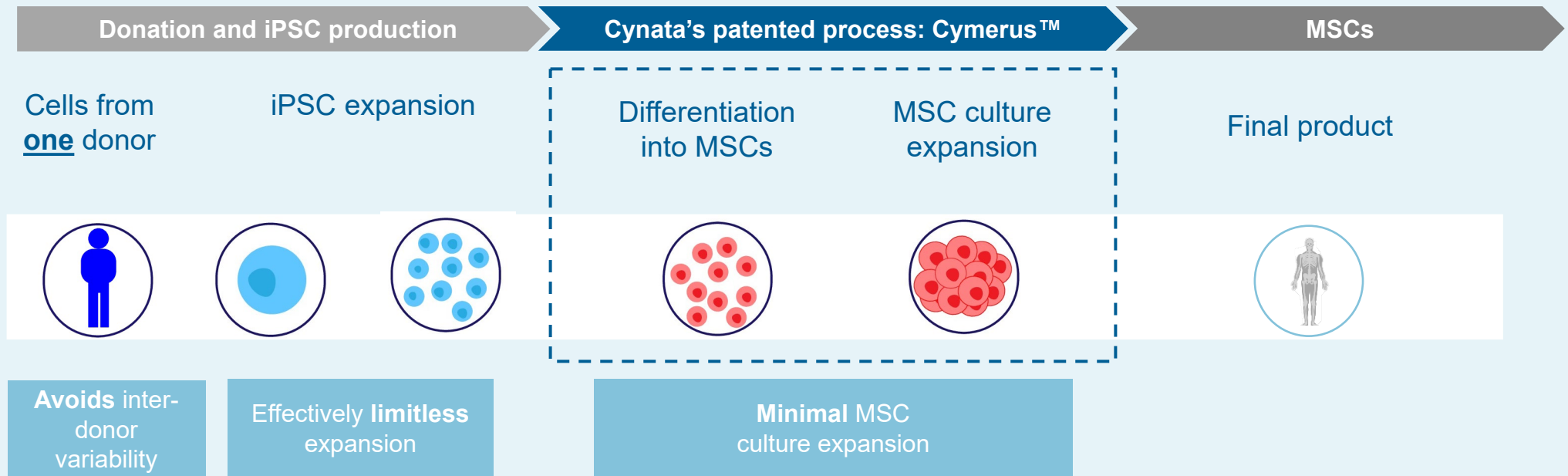
Conventional process

Major challenges include inter-donor variability and functional changes during MSC expansion



Cynata's Cymerus™ iPSC-based process

Avoids inter-donor variability and need for extensive MSC expansion



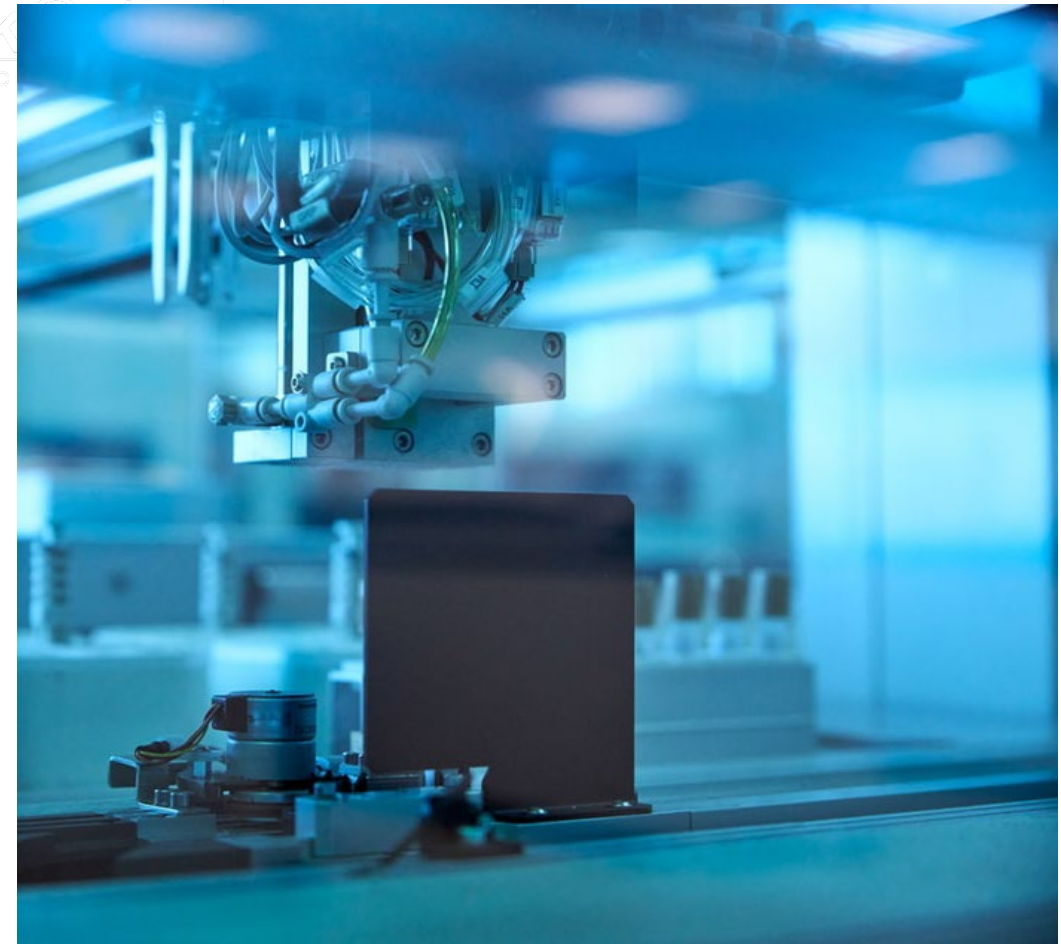
Strategic partnership with Fujifilm provides commercial benefits

Cynata executed a Strategic Partnership Agreement with Fujifilm, with Fujifilm involved in the path to market¹

Strategic benefits for Cynata

- ✓ Fujifilm is one of the largest conglomerates in the world with a significant network and assets in the biotechnology space and recent multi-billion dollar investments in expanding its business as a comprehensive healthcare company
- ✓ Fujifilm Cellular Dynamics Inc (FCDI: subsidiary of Fujifilm) developed the original iPSC line used in Cynata's Cymerus manufacturing process
- ✓ Parties now working towards establishing Cymerus manufacturing process at FCDI with Cynata's progress showcasing Fujifilm's iPSC platform
- ✓ Significant institutional shareholder; representing a 4.5% shareholding














FUJIFILM
Value from Innovation





Preclinical Data

Cymerus MSCs: Completed Preclinical Studies

Indication	Partner	Key highlights	References
Graft versus Host Disease	 University of Massachusetts Amherst	Cymerus MSCs attenuated disease severity and prolonged survival in a humanised mouse model of GvHD	Ozay et al, Stem Cell Res 2019;35:101401
Diabetic Wounds	 Cell Therapy Manufacturing	Novel wound dressing seeded with Cymerus MSCs led to significantly improved wound healing in mouse model	
Osteoarthritis	 THE UNIVERSITY OF SYDNEY	Cymerus MSCs reduced pain as measured by tactile allodynia in mouse model of OA	
Organ Transplantation		Cymerus MSCs upregulated Tregs, IL-5, IL-10, and IL-15, which augmented graft microvascular blood flow and oxygenation, and maintained healthy graft and prevented subepithelial collagen deposition	Khan et al, Stem Cell Research & Therapy 2019;10:290
Critical Limb Ischaemia	 WISCONSIN UNIVERSITY OF WISCONSIN-MADISON	Cymerus MSCs improved limb blood flow and reduced necrosis and cellular damage, while maintaining muscle mass and gross muscle appearance, in mouse model	Koch et al, Cytotherapy 2016;18:219-228
Acute Respiratory Distress Syndrome	 Critical Care RESEARCH GROUP	Cymerus MSCs reduced lung injury, inflammation and circumstances leading to circulatory shock in sheep model	Millar et al, Am J Crit Care Med 2020;202(3):383-392
Myocardial infarction	 THE UNIVERSITY OF SYDNEY	Cymerus MSCs reduced left ventricular end-systolic diameter compared to placebo and bone marrow (BM)-MSCs. Cymerus MSCs (but not BM-MSCs) enhanced arteriogenesis in peri-infarct zone. Expression of a number of cytokines by Cymerus MSCs was 2-to 4-fold higher than BM-MSCs	Thavapalachandran et al, Cytotherapy 2021;23(12):1074-1084
Coronary Artery Disease	 UNSW SYDNEY	Modification of cell culture matrix primes Cymerus MSCs and enhances their pro-angiogenic and immunomodulatory properties	Romanazzo et al, J Tissue Eng Regen Med 2022;16(11):1008-1018
Glioblastoma	 HSC HARVARD STEM CELL INSTITUTE	Cymerus platform successfully engineered to express transgenes in a stable manner; engineered Cymerus MSCs reduce viability of human glioblastoma cells, and slowed tumour progression in mouse model	
Asthma	 MONASH University	Cymerus MSCs demonstrated significant beneficial effects on three key components of asthma: airway hyper-responsiveness, inflammation and airway remodelling	Royce et al. FASEB J 2017;31(9):4168-4178; Royce et al. FASEB J 2019;33(5):6402-6411
Idiopathic pulmonary fibrosis	 MONASH University	Cymerus MSCs improved dynamic lung compliance, airway resistance, interstitial lung inflammation, fibrosis and epithelial and sub-epithelial thickness	
Cytokine Release Syndrome	 University of Massachusetts Amherst	Cymerus MSCs significantly ameliorated the effects of Cytokine Release Syndrome, a potentially severe and life-threatening adverse reaction to cancer immunotherapy	
Sepsis	 RCSI	Cymerus MSCs increased blood oxygen levels and respiratory static compliance, and reduced alveolar neutrophil infiltration, barrier permeability and inflammation	

MSCs from different sources have different properties

MONASH University

A comparative analysis of the MSC transcriptome: Human iPSC-derived MSCs and their tissue-derived counterparts

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Background

- Multipotent mesenchymal stromal cells (MSCs) have considerable therapeutic potential and are one of the most popular and versatile cell therapies¹.
- Traditionally sourced from tissue donations, clinical translation is affected by donor-dependence and significant batch-batch, source-based, and intra-population heterogeneity. This limits

MSCs cluster primarily by tissue/ source.

UMAP clustering of MSC transcriptomes indicates that tissue/ source of origin accounts for most MSC heterogeneity (Fig.3A). MSC tissue/ sources formed clades within themselves. BM.MSC and AT.MSCs branched latest while IMSC and UC.MSCs branched earlier indicating comparatively less similarity (Fig.3B).

Differentially expressed (DE) genes were identified between IMSC and tissue-derived MSCs.

820 genes were upregulated in tissue-derived MSCs (tMSCs) while 5491 genes were upregulated in iMSCs (Fig. 4A). Gene Ontology (GO) term enrichment analysis was used to query DE genes for enriched Biological Processes (BP). BP including telomere maintenance and RNA catabolism processes were enriched in genes upregulated in iMSCs, while genes downregulated in iMSCs were enriched for humoral immune response and complement processes (Fig. 4B).

Intrapopulation variance was quantified as a factor of cell-cell gene variance within the top 200 most variable genes.

Mean cell-cell transcriptomic variance was observed to be significantly lower in iMSCs than tMSCs. Furthermore, mean cell-cell variance was comparable between iMSC populations while tMSC populations showed significant donor-donor differences.

Key Findings include:

- Source is the primary driver of MSC heterogeneity (variability)
- Cymerus MSCs differ from tissue-derived MSCs by upregulation of biological processes linked to telomere maintenance and RNA catabolism, and downregulation of humoral immune response and complement processes
- Cymerus MSCs exhibit less batch-batch variability than tissue-derived MSCs, and significantly less intra-population variability
- Cymerus MSCs successfully bypass much of the inherent variability that affects tissue-derived MSCs

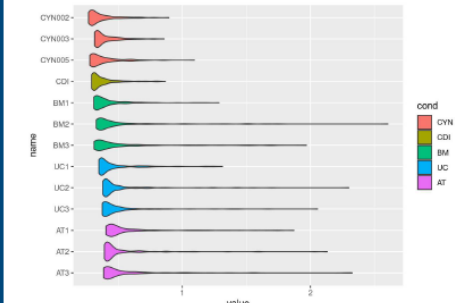
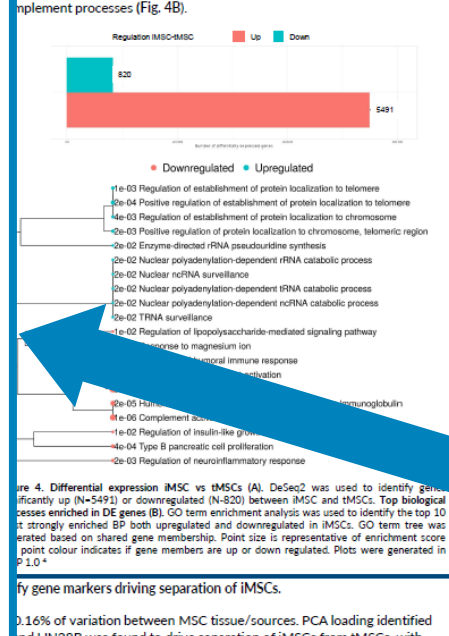


Figure 6. Violin plots of cell-cell variance across top 200 most variable genes. The top 200 most variable genes were identified using DESeq2. Gene-wise variance from the median was calculated for each cell and single-cell. Variance scores (x) are presented as a violin plot. Tissue/ source is indicated by colour. Plot was produced using Seurat.

Conclusions

Key Findings:

- Tissue/ source is the primary driver of MSC heterogeneity.
- iMSCs are most closely related to UC.MSCs, while BM.MSCs and AT.MSCs are more closely related to each other.
- Cymerus MSCs differ from tissue-derived MSCs by the upregulation of biological processes linked to telomere maintenance and RNA catabolism, and downregulation of humoral immune response and complement processes.
- iMSCs exhibit less batch-batch heterogeneity than tissue-derived MSCs, furthermore they also exhibit significantly less intra-population variation.

This data set provides a comprehensive profile of MSC transcriptomes at a single-cell level, allowing us to develop a better understanding of the sources of MSC heterogeneity and improve predictability of clinical outcomes. Moreover, this study confirms that iMSCs successfully bypass much of the inherent heterogeneity that affects the clinical application of tissue-derived MSCs, validating their promise as an off-the-shelf cell therapy.

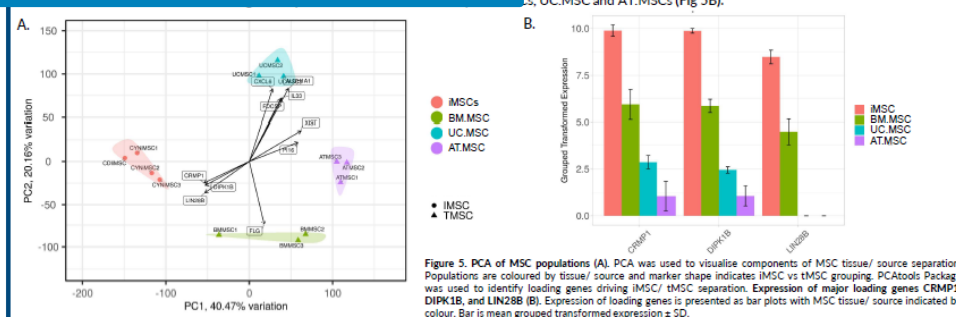
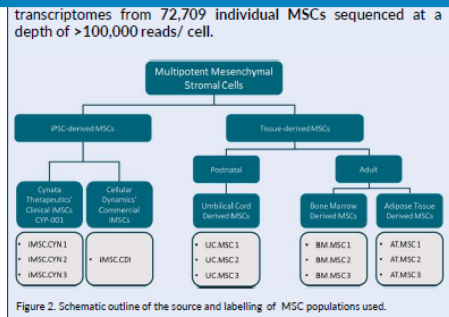
References and Acknowledgments

- ClinicalTrials.gov. Search of: Mesenchymal Stem Cell - List Results - ClinicalTrials.gov. <https://clinicaltrials.gov/ct2/results?term=Mesenchymal+Stem+Cell&rank=1&list=1&list=1&list=1>
- Wilson, A., Hodgson-Garms, M., Frith, J. E. & Genevrey, P. Multiplicity of mesenchymal stromal cells: Finding the right route to therapy. *Front. Immunol.* 10, (2019).
- Domingo, M. et al. 2006. Minimal criteria for defining multipotent mesenchymal stromal cells. The International Society for Cellular Therapy position statement. *Cytotherapy* 8(4), pp.215-217.
- Ge, S. X., Sun, E. W. & Yao, R. IDEP: an integrated web application for differential expression and pathway analysis of RNA-seq data. *BMC Bioinformatics*, 2018 19:1-24 (2018).

This project was supported by: Australian Govt. RTP Dipend Monash University Dpt. of Materials Science and Engineering Monash University Graduate Research Completion Award

MONASH University

Cynata Therapeutics, RMP, ARMI, flowcore, Ritchie, CCRM



MSC source also influences performance in preclinical models

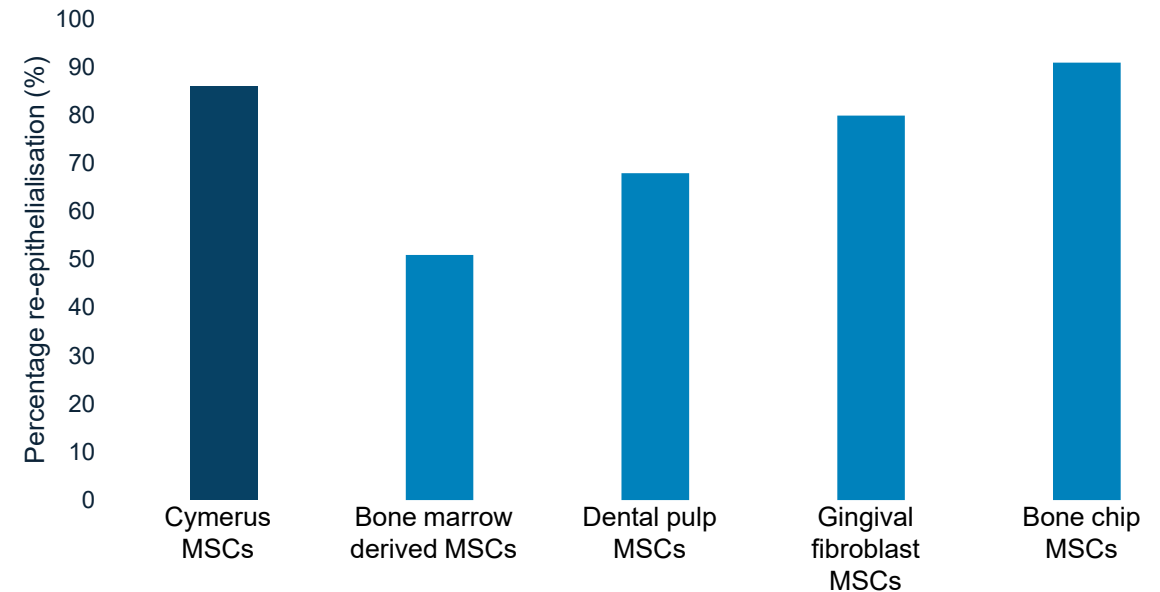
Pre-clinical rat model of myocardial ischemia-reperfusion (heart attack)¹

Positive effects were observed with both Cymerus MSCs and bone marrow MSCs, but some effects were different between the two MSC groups:

- Left ventricle function was significantly improved in Cymerus MSC group (P=0.01) compared to placebo controls, but not in bone marrow MSC group (P=0.63)
- Arteriogenesis (formation of new arteries) around the infarct zone was significantly improved in Cymerus MSC group compared to both placebo controls and bone marrow MSC group (P=0.01)
- Expression of a number of relevant cytokines by Cymerus MSCs was **2-4x higher** than by bone marrow MSCs

1. Thavapalachandran et al. Pluripotent stem cell-derived mesenchymal stromal cells improve cardiac function and vascularity after myocardial infarction. *Cytotherapy* 2021;23(12):1074-1084

Preclinical mouse model of diabetic wounds, using novel MSC-seeded dressing



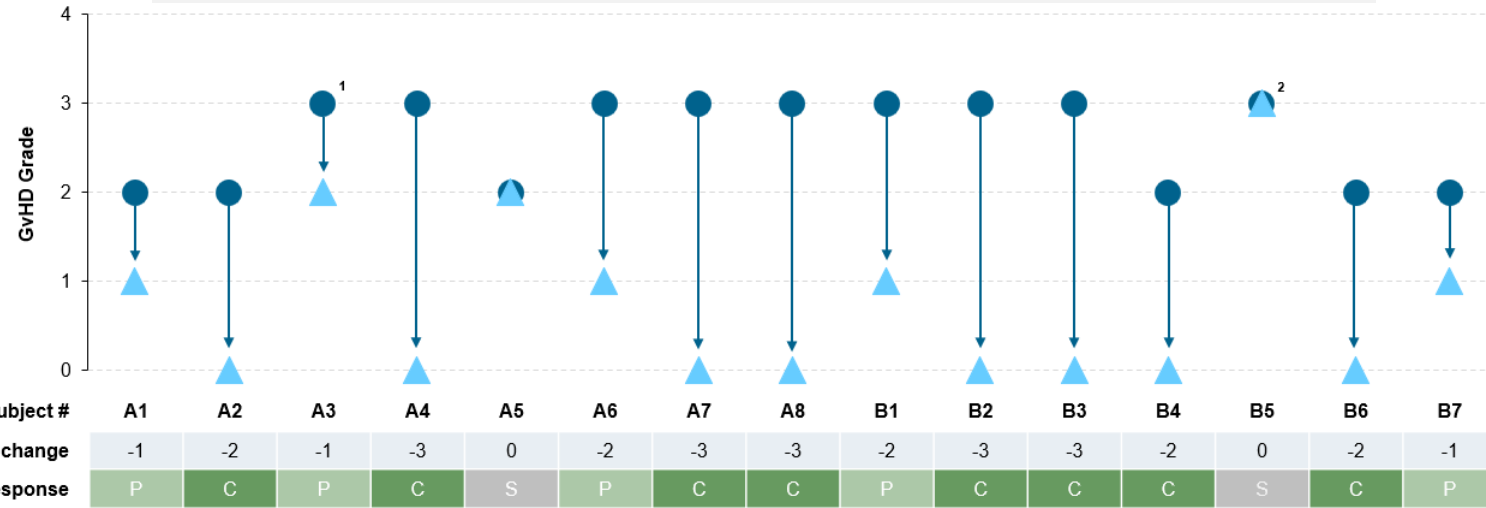
- Cymerus MSCs resulted in significantly greater re-epithelialisation (86%) compared with bone marrow MSCs (51%)
- Although gingival fibroblast and bone chip MSCs produced similar results, there are major challenges associated with producing clinical-grade cells from those sources



Clinical Trials

aGvHD | Phase 1 clinical trial (completed)

The first completed clinical trial of an iPSC-derived product

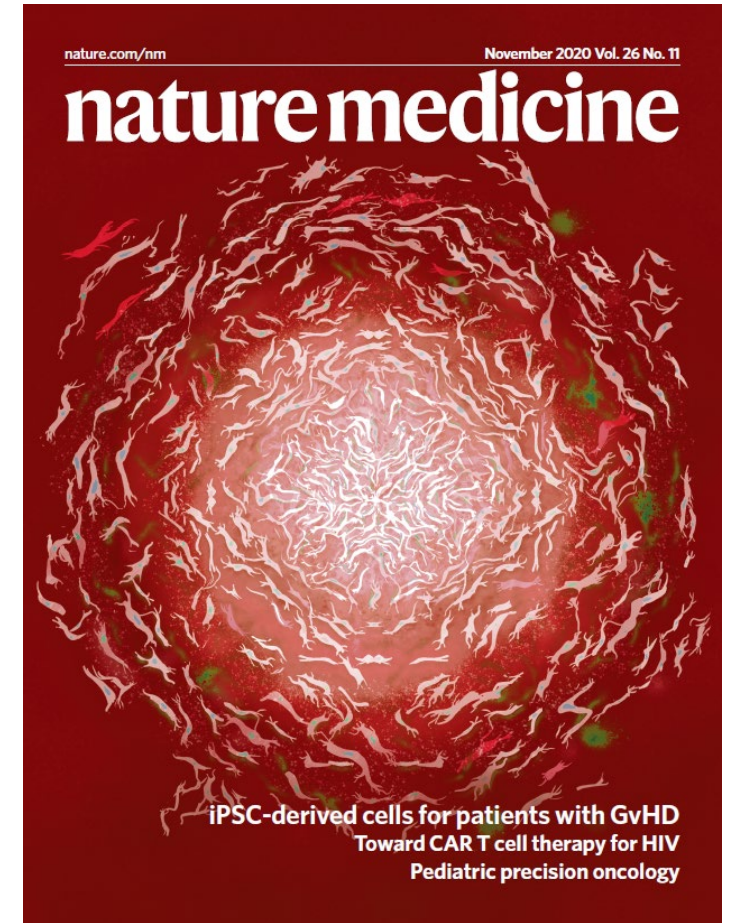


Legend

● GvHD Grade: Day 0	▲ GvHD Grade: Best Response	C Complete Response	P Partial Response	S Stable Disease
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No treatment-related serious adverse events or safety concerns identified

Published in Nature Medicine³



- Subjects received 1×10^6 cells/kg (max 1×10^8 cells) or 2×10^6 cells/kg (max 2×10^8 cells) by IV infusion on D0 and D7
 - Eight subjects were enrolled in each cohort, but one subject in Cohort B withdrew prior to infusion of CYP-001
 1. Subject A3 showed a PR at Days 14 and 21 but died due to pneumonia on Day 28; 2. Subject B5 withdrew from the trial on Day 22 to commence palliative care
 3. Bloor et al. Production, safety and efficacy of iPSC-derived mesenchymal stromal cells in acute steroid-resistant graft versus host disease: a phase I, multicenter, open-label, dose-escalation study. Nat Med 2020;26:1720-1725.

aGvHD | Phase 2 clinical trial

Product

- CYP-001 (Cymerus™ iPSC-derived MSCs for intravenous infusion)

Indication

- Acute graft versus host disease (aGvHD) may occur after bone marrow transplantation and similar procedures, due to donor immune cells (from the “graft”) attacking the transplant recipient (the “host”)

Trial Details

- Randomised controlled trial in ~60 patients with High Risk aGvHD
- Clinical sites in USA, Europe and Australia
- Primary objective: to assess efficacy of CYP-001 based on Overall Response Rate at Day 28

Start-up

- Regulatory/ethics approvals secured in Australia and USA; European regulatory process ongoing
- Site startup activities ongoing

Recruitment

- Commenced August 2023
- Anticipate 5-6 sites open for recruitment by end CY 2023, with remainder to open in 2024 (staggered opening of sites has already been factored into recruitment projections)
- Aiming to complete recruitment by end CY 2024

Results

- Aiming to report primary evaluation results in 2H CY 2025

DFU | Phase 1 clinical trial

Product

- CYP-006TK (Novel silicone dressing seeded with Cymerus™ iPSC-derived MSCs)

Indication

- Diabetic Foot Ulcers (DFU) are wounds on the feet of patients with diabetes

Trial Details

- Randomised controlled trial in ~30 patients with DFU
- Clinical sites in Australia (Adelaide and Perth)
- Primary objective is safety; efficacy outcome measures include wound healing, pain & quality of life

Start-up

- Complete

Recruitment

- Commenced March 2022
- Additional sites added earlier in 2023 to increase recruitment rate; ~threefold increase in recruitment rate in current financial year
- Aiming to conclude recruitment by end CY 2023

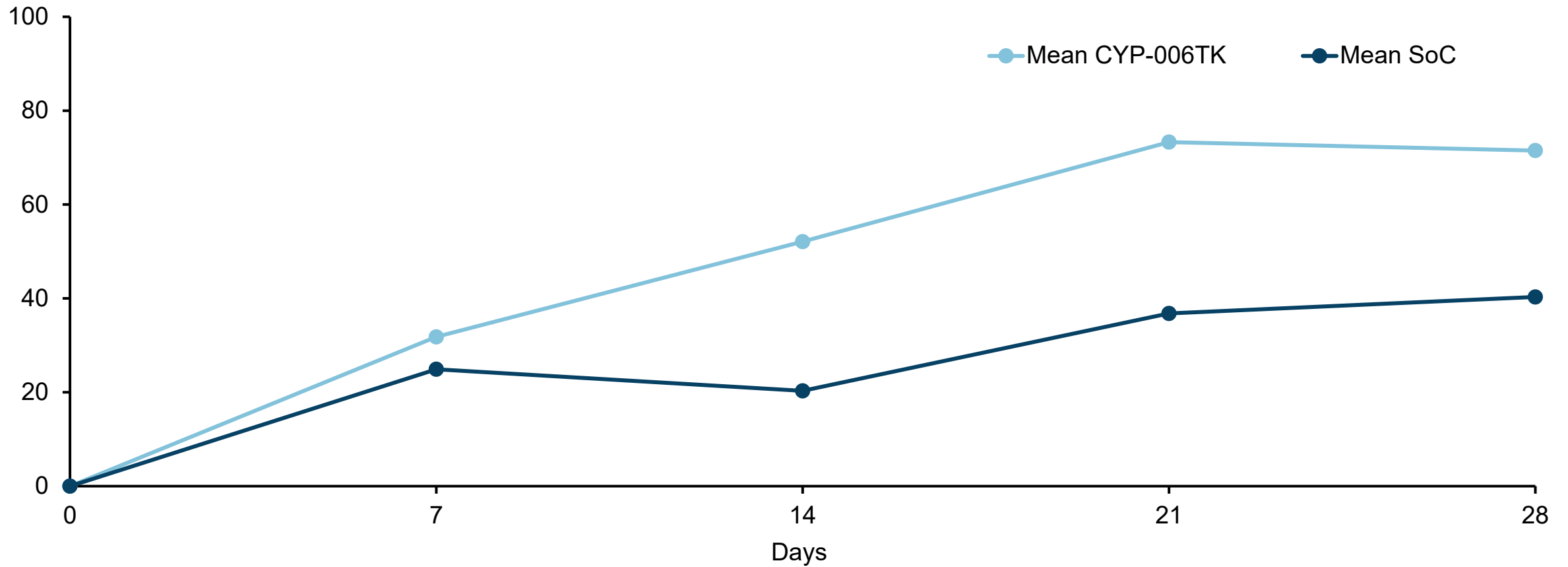
Results

- Positive initial results from first 6 patients reported in 2023 (see next slide)
- Aiming to report initial results from full dataset in mid CY 2024

DFU | CYP-006TK initial treatment data

Great ulcer surface area healed in CYP-006TK group compared to standard of care (SoC)

Mean % ulcer surface area healed over time (%)¹; n=6 (3 in each group)



OA | Phase 3 clinical trial¹

Product

- CYP-004 (Cymerus™ iPSC-derived MSCs for intra-articular injection)

Indication

- Osteoarthritis (OA) occurs when the cartilage in a joint wears away. It causes pain, inflammation, swelling and difficulty with movement.

Trial Details

- Trial conducted by University of Sydney, funded by Australian Government National Health and Medical Research Council (NHMRC) grant
- Randomised, double-blind placebo-controlled trial in ~320 patients with OA of the knee
- Each participant receives 3 injections over 12 months; follow-up of 24 months from first dose
- Co-primary endpoints: reduction of knee symptoms and measure of cartilage loss

Start-up

- Complete

Recruitment

- Commenced November 2020
- Target sample size has been reached; recruitment expected to close in November 2023

Results

- Primary evaluation results expected to be received in H1 CY 2026

Renal transplantation | Phase 1 clinical trial

Product

- CYP-001 (Cymerus™ iPSC-derived MSCs for intravenous infusion)

Indication

- Current standard of care after kidney transplantation involves long-term requirement for anti-rejection drugs, which often cause serious toxicities

Trial Details

- Trial to be conducted and funded by Leiden University Medical Center, Netherlands
- 16 renal transplant patients to receive Cymerus MSCs after transplantation: cohort 1 (n=3); cohort 2 (n=3); cohort 3 (n=10)
- Trial will evaluate safety (all cohorts) and efficacy of MSCs in facilitating reduction of anti-rejection medication (Cohort 3)

Start-up

- Regulatory approval in place
- Final trial start-up activities ongoing

Recruitment

- Aiming to commence in Q1 2024
- Aiming to complete recruitment of Cohort 1 in Q2 2024
- Timing of further cohorts TBC

Results

- Results of Cohort 1 anticipated in late 2024/early 2025



Corporate Information

Board & Senior Management

Highly skilled and experienced senior leadership team with decades of experience



Dr Kilian Kelly
Chief Executive Officer &
Managing Director

- 20+ years' experience in biopharma R&D
- Previous roles at Biota Pharmaceuticals, Mesoblast, Amgen & AstraZeneca



Dr Geoff Brooke
Independent Non-Executive Chair

- 30+ years' experience in the healthcare investment industry
- Founder and MD of Medvest Inc and GBS Venture Partners



Dr Paul Wotton
Independent Non-Executive Director

- 30+ years' experience in senior positions of life sciences companies
- Previously President and CEO of Ocata Therapeutics, Inc



Ms Janine Rolfe
Independent Non-Executive Director

- 20+ years legal, governance and management experience across multiple sectors
- Founder of Company Matters



Dr Darryl Maher
Independent Non-Executive Director

- Former Vice President, R&D and Medical Affairs at CSL Behring
- Former President of Australian Pharmaceutical Physicians Association and Director of Vaccine Solutions



Dr Jolanta Airey
Chief Medical Officer

- 25+ years' experience in respiratory, rheumatology, dermatology, biologicals and listed companies
- Previously Director, Translational Development at CSL



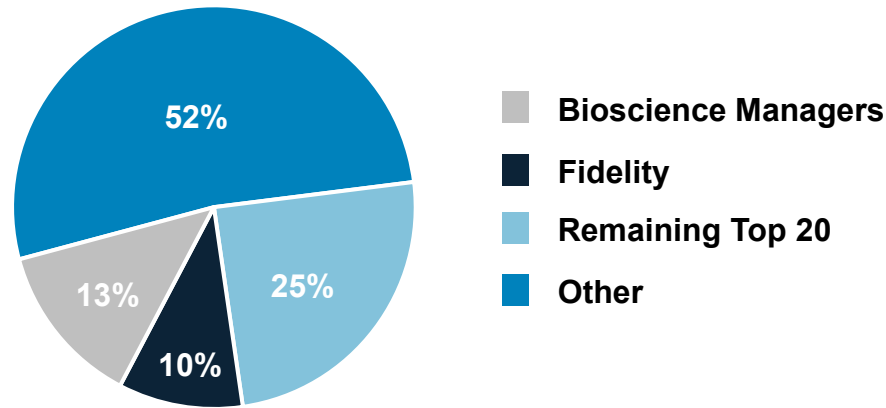
Mr Peter Webse
Company Secretary

- 25+ years company secretarial experience
- Director of Governance Corporate Pty Ltd

Corporate overview

Cynata has been listed on the Australian Securities Exchange (ASX) since 2013 (Ticker: CYP)

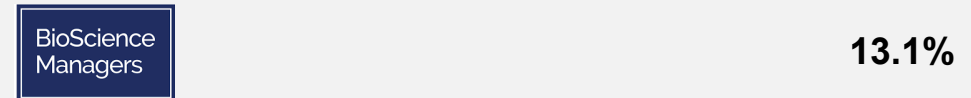
Shareholder distribution



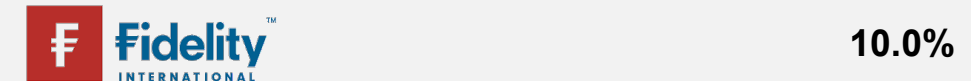
Financial information

Share price (9 November 2023)	A\$0.135
Shares on issue	179m
Market capitalisation	~A\$24m
Cash ¹	~A\$12m

Substantial shareholders (>5%)








BioScience Managers is an international healthcare investment firm headquarter in Melbourne that finances and enables innovative science and technology with the potential to transform healthcare.



Fidelity International is a world leading investment and asset management firm that invests A\$556.7 billion globally on behalf of clients in Asia-Pacific, UK, Europe, the Middle East and South America.

Investment summary

 Next generation stem cell company	<ul style="list-style-type: none">• Leading technology in burgeoning stem cell sector• Diverse and highly credentialed leadership team with proven clinical and commercial experience across a range of health sciences at leading institutions
 Scalable manufacturing process	<ul style="list-style-type: none">• Patented Cymerus manufacturing technology enables commercial-scale production of MSCs from a single donation from a single donor, overcoming multiple issues with conventional approaches• Cymerus MSCs have demonstrated higher potency versus conventionally manufactured MSCs
 Successful clinical trial results	<ul style="list-style-type: none">• Very encouraging safety and efficacy results from Phase 1 trial of Cymerus MSCs in aGvHD• Highly encouraging initial DFU patient data
 Robust and attractive pipeline	<ul style="list-style-type: none">• Broad and diverse clinical stage MSC pipeline with active clinical programs in aGvHD, DFU, OA, and renal transplantation• FDA cleared IND for Phase 2 aGvHD clinical trial; study open for recruitment
 Significant growth potential	<ul style="list-style-type: none">• Pipeline has significant commercial opportunities: global estimated market opportunity across targeted indications of ~US\$28bn• Continued focus on indications where there is significant unmet need• Proactive B-2-B outreach to drive partnering strategy

Contact Us

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