

Clinical Development of iPSC-Derived MSCs

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Important information

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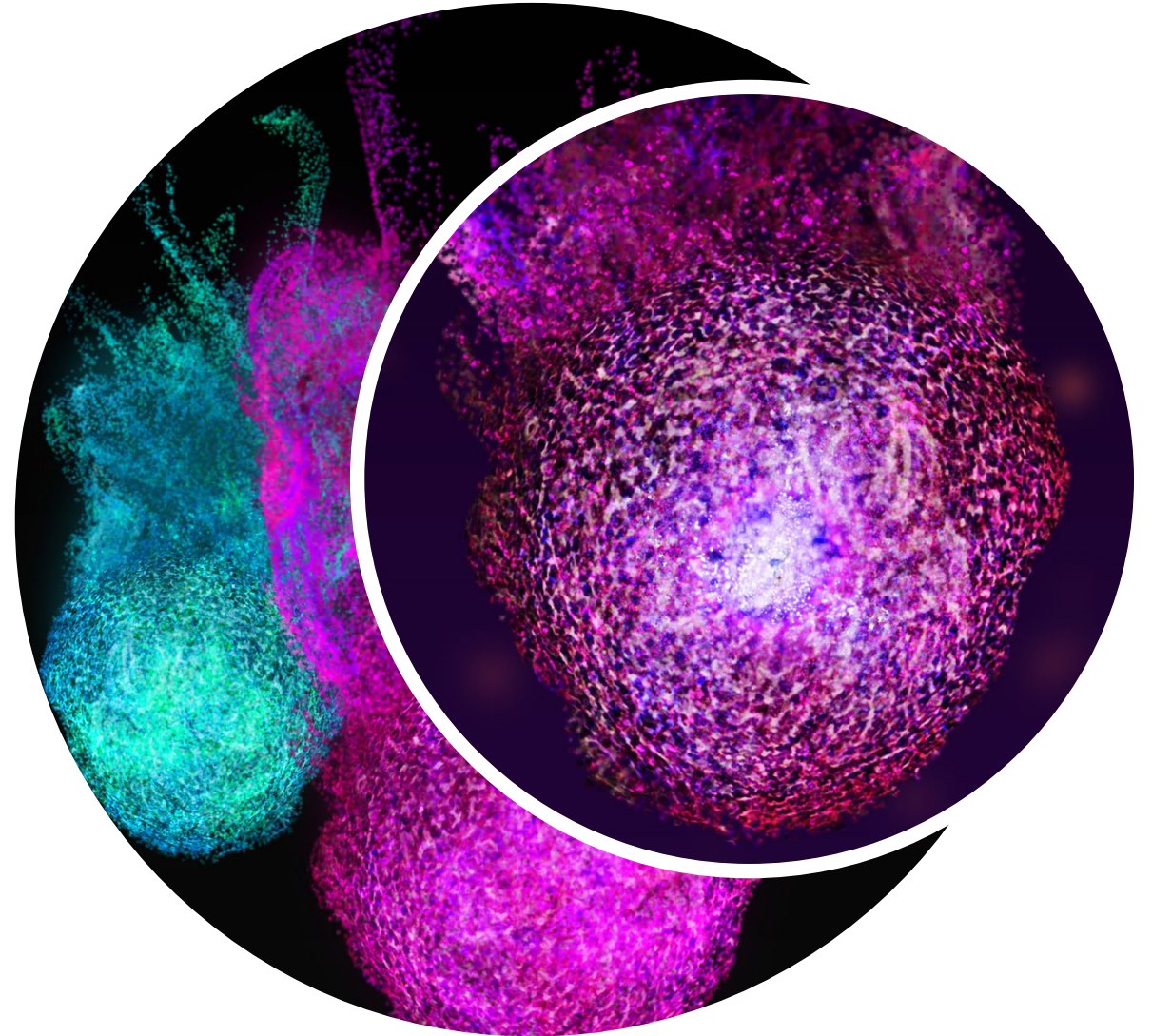
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About Cynata

- ASX-listed company (Ticker: **CYP**), based in Melbourne, Australia
- Exclusively focused on development of **Cymerus™** platform:
 - **iPSC**-based technology for scalable manufacture of consistent, allogeneic **MSC**-based therapeutic products
 - Developing therapies to treat a range of serious disorders with unmet needs
- Positive data in a range of indications
- Completed **world-first** iPSC clinical trial



Company highlights



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**



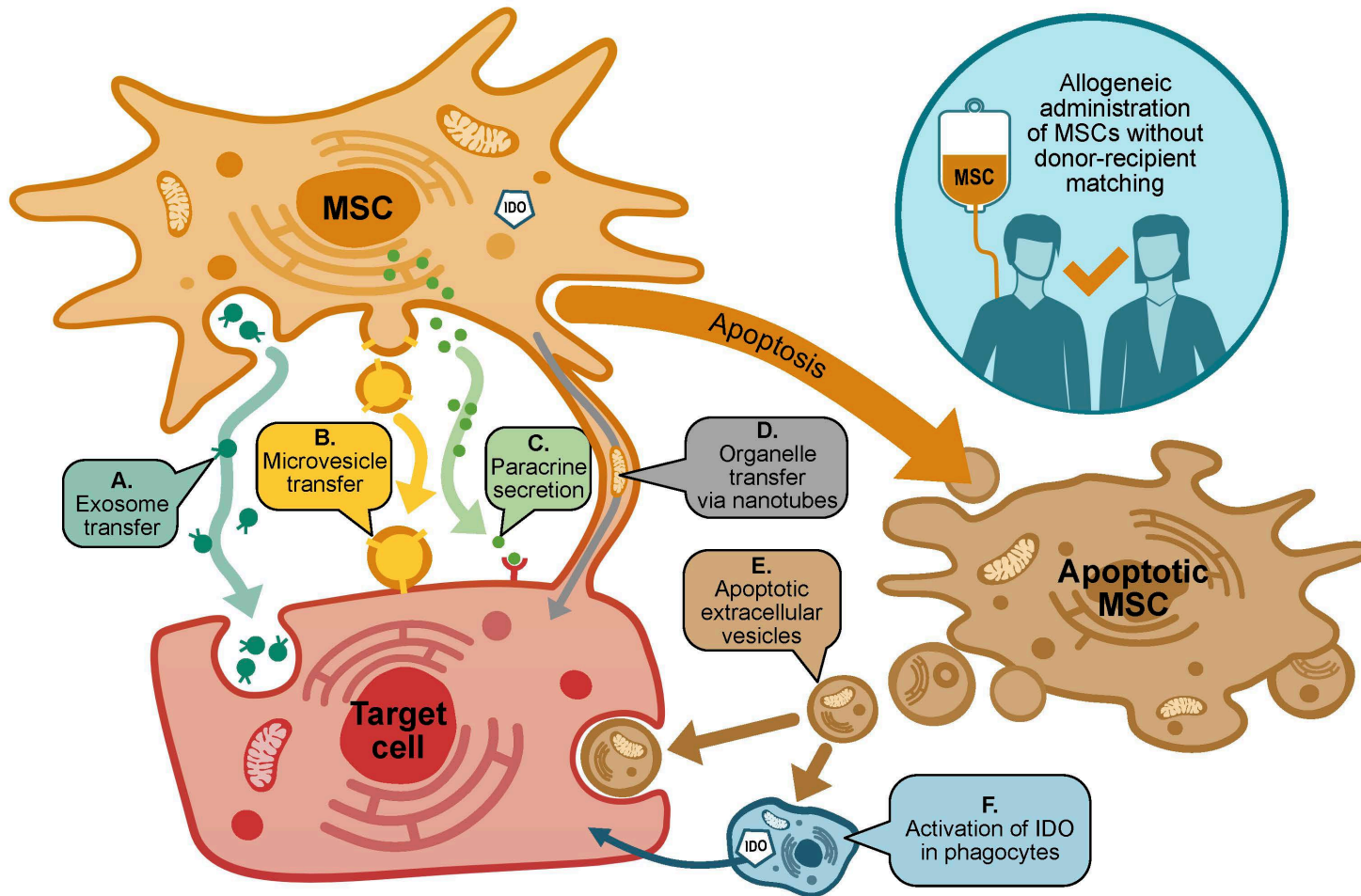
Solid funding position

~A\$11m in cash², and OA and renal trials funded by external partners

Advanced and diverse clinical pipeline

	Indication	Trial phase	Market opportunity
Cynata Sponsored	 Acute Graft vs Host Disease (aGvHD) CYP-001 <i>(FDA Orphan Designation)</i>	Phase 2 underway	US\$600m ¹
	 Diabetic Foot Ulcers (DFU) CYP-006TK	Phase 1 underway	US\$9.6bn ²
Partnered	 Osteoarthritis (OA) CYP-004 <i>(managed by USYD, funded by NHMRC)</i>	Phase 3 underway (recruitment complete)	US\$11.6bn ³
	 Renal Transplantation (Renal) CYP-001 <i>(managed and funded by LUMC)</i>	Phase 1 approved	US\$5.9bn ⁴

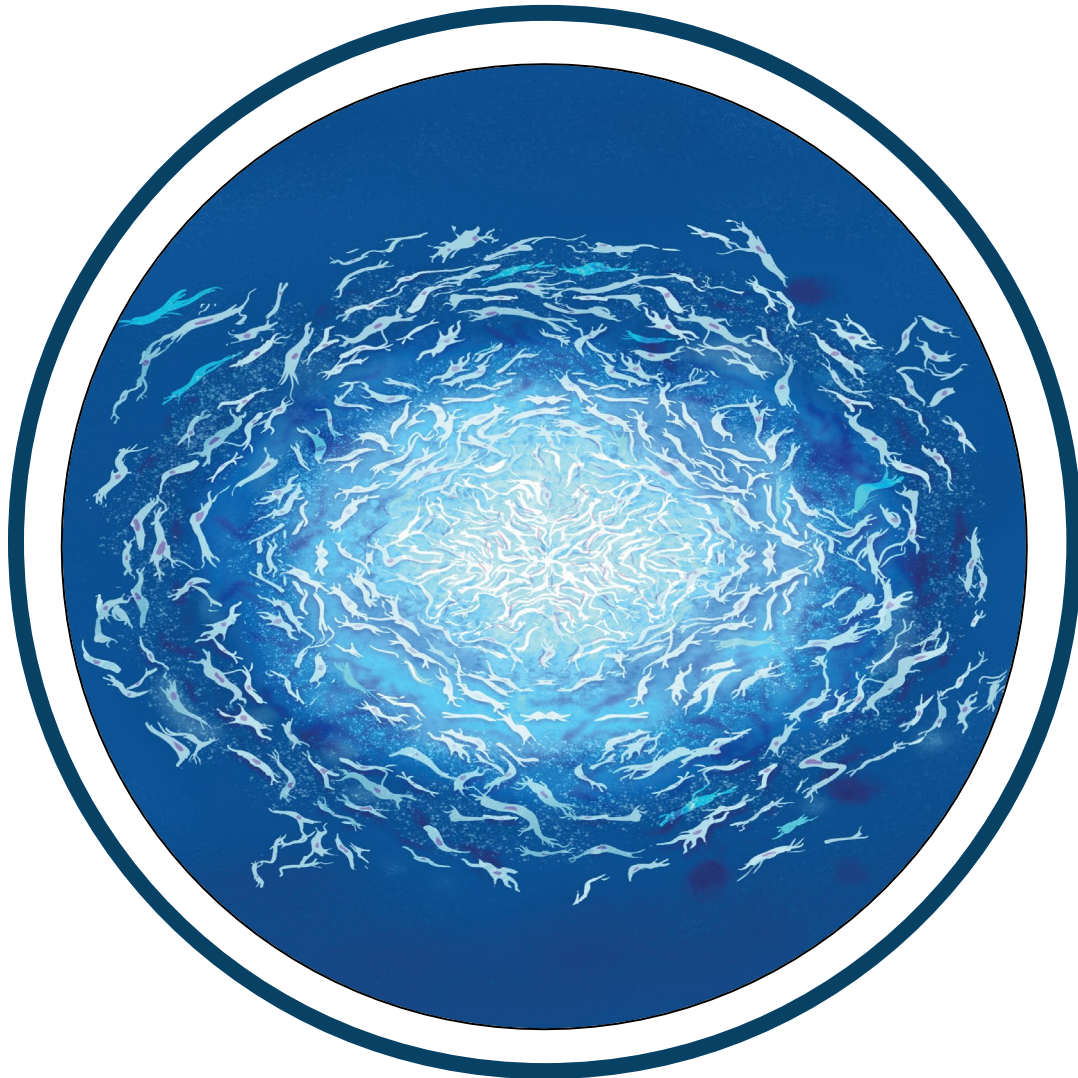
Why MSCs?



Mesenchymal stem (or stromal) cells (MSCs):

- promote an **immunomodulatory** environment via multifactorial mechanisms¹
- the “sensor and switcher of the immune system”²
- promote **tissue repair and regeneration**
- can be used **without** donor/recipient matching
- can be **engineered** to express other functional/therapeutic molecules

Why iPSCs?



Induced pluripotent stem cells (iPSCs):

- mature cells from adult donors, reprogrammed to become pluripotent
 - effectively limitless proliferation in cell culture
 - potential to differentiate into any adult cell type (including MSCs)
 - avoids ethical controversy associated with embryonic stem cells
- **ideal** starting material for large scale production of cellular products

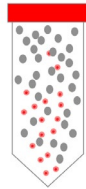
Conventional MSC process

Ongoing need
for new donors



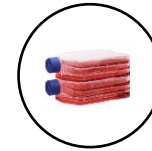
Substantial inter-donor **variability**

MSC isolation



Small number of MSCs
per donation

Culture expansion



Extensive MSC
culture expansion

Major challenges:

- inter-donor **variability**
- MSCs have **limited expansion potential**
- MSCs undergo **functional changes** during extensive culture expansion

Cymerus™ iPSC-based process

One donor,
one time

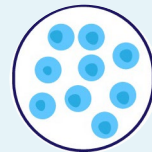


Avoids inter-donor
variability

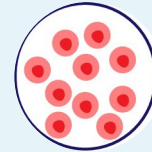
Reprogramming &
iPSC expansion



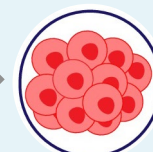
Effectively limitless
Expansion potential



Differentiation into MSCs
& culture expansion



Minimal MSC
culture expansion



Cymerus platform:

- Harnesses **effectively limitless** iPSC expansion potential
- **Avoids** inter-donor variability
- **Avoids** extensive MSC expansion

Strategic partnership with Fujifilm

- Fujifilm: one of largest conglomerates globally, with significant assets in biotechnology sector, bolstered by recent multi-billion dollar investments
- 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



Preclinical studies with Cymerus MSCs

Large body of data in wide range of preclinical models, in partnership with leading research groups worldwide:

- GvHD
- Diabetic wounds
- Critical limb ischaemia
- Organ transplant rejection
- Osteoarthritis
- Respiratory disorders (including asthma, pulmonary fibrosis, acute respiratory distress syndrome)
- Sepsis
- Cardiovascular disorders (including coronary artery disease, myocardial infarction)
- Cytokine release syndrome
- Glioblastoma



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MSC source affects properties

Comparative analysis of MSCs from various sources¹

- Source is primary driver of MSC heterogeneity
- Cymerus MSCs exhibit less batch-batch and intra-population variability than tissue-derived MSCs
- Cymerus MSCs successfully bypass much of the inherent variability that affects tissue-derived MSCs

Mouse model of diabetic wounds, using novel MSC-seeded dressing³

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

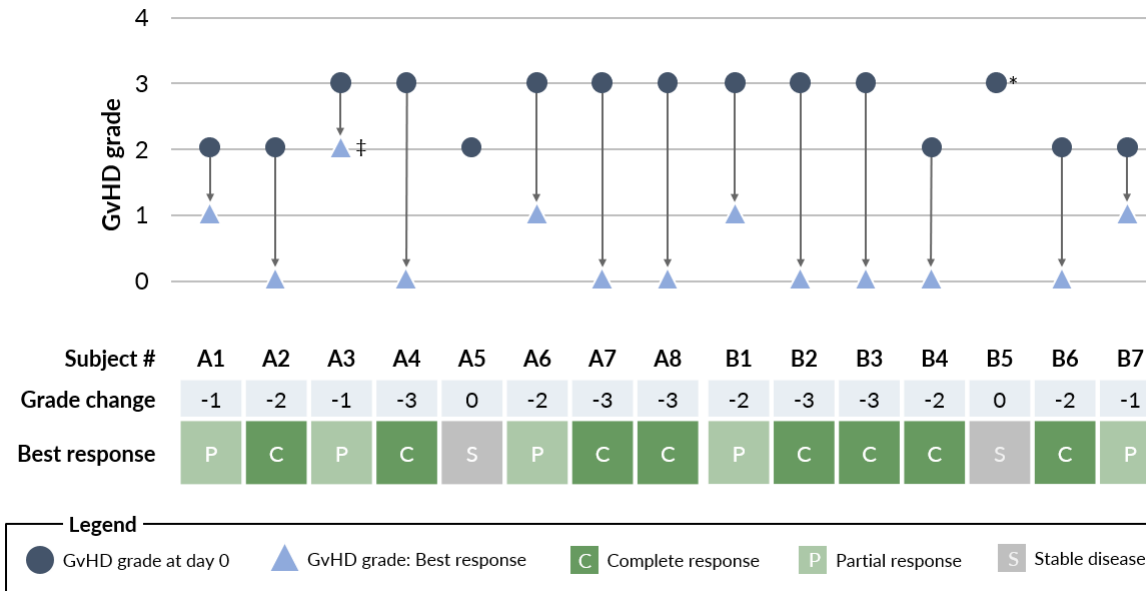
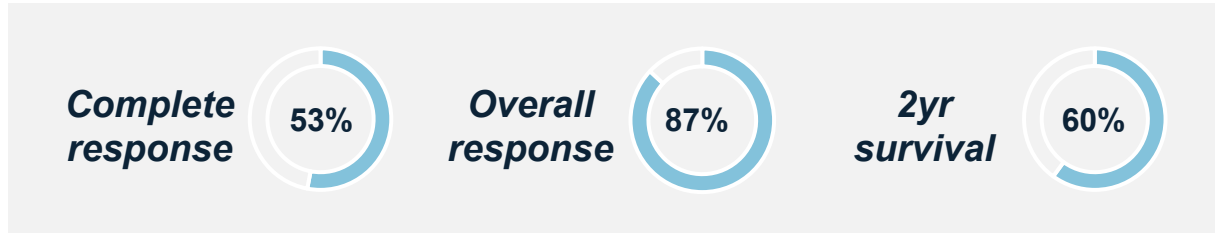
Pre-clinical rat model of myocardial ischemia-reperfusion²

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

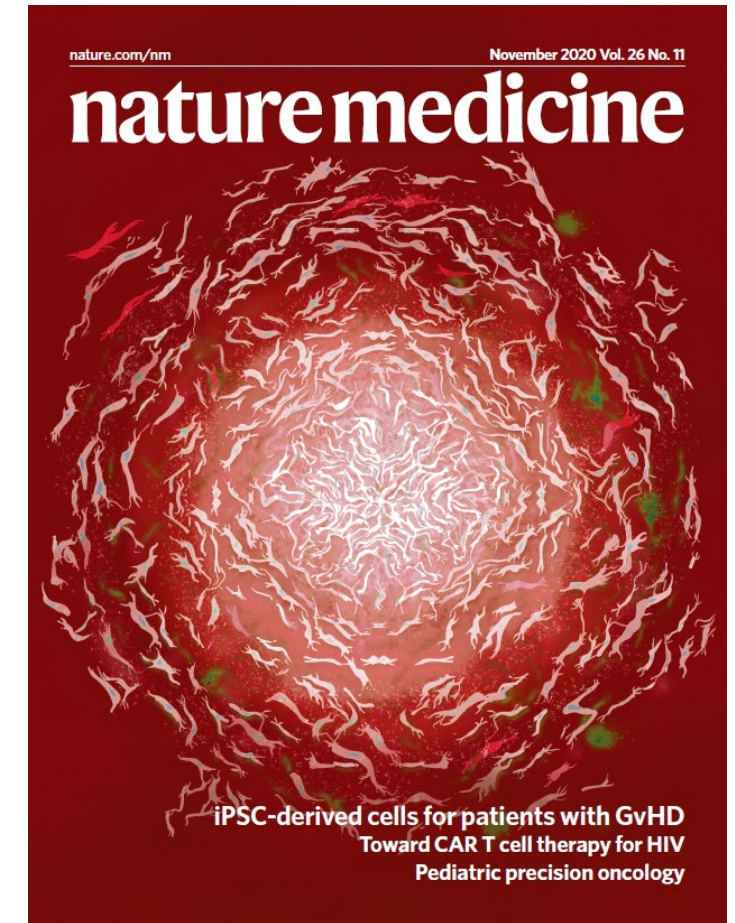
- Left ventricle function significantly improved in Cymerus MSC group (P=0.01) compared to placebo, but not in bone marrow MSC group (P=0.63)
- Arteriogenesis around infarct zone significantly improved in Cymerus MSC group compared to both placebo and bone marrow MSC group (P=0.01)
- Expression of a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

aGvHD | Phase 1 clinical trial

First completed clinical trial worldwide with any iPSC-derived product



Published in Nature Medicine¹



No treatment-related serious adverse events or safety concerns identified



- 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

‡ Subject A3 showed a PR at Days 14 and 21 but died due to pneumonia on Day 28; * Subject B5 withdrew from the trial on Day 22 to commence palliative care

1. 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

High risk acute graft versus host disease (aGvHD)¹

Study Design

- Randomised controlled trial in ~60 adults (steroids + CYP-001 vs steroids + placebo)
- Primary objective: to assess efficacy of CYP-001 based on Overall Response Rate at Day 28

Study Conduct

- Clinical sites in USA, Europe and Australia
- Regulatory/ethics approvals secured in Australia, USA and Turkey; EU regulatory process ongoing
- Numerous sites now open for recruitment, with remainder expected to open in 2024
- First patient enrolled – March 2024
- Aiming to complete recruitment by end of calendar year 2024

Results

Primary evaluation results expected in 2H CY 2025

DFU | Phase 1 clinical trial

Product

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

Indication

Non-healing diabetic foot ulcers (DFU)

Study Design

- Randomised controlled trial in ~30 adults
- Patients randomised to receive either standard of care or CYP-006TK for 4 weeks, followed by standard of care
- Primary objective is safety; efficacy outcome measures include wound healing, pain & quality of life

Study Conduct

- Clinical sites in Australia (Adelaide and Perth)
- Recruitment ~85% complete – completion expected in near future

Results

- Positive initial results from first 16 patients – median reduction in wound surface area after 10 weeks was **87.6%** in CYP-006TK group compared to **51.1%** in controls (n=8 per group)
- Final results expected by end of calendar year 2024

OA | Phase 3 clinical trial¹

Product

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

Indication

Osteoarthritis (OA) of the knee (Kellgren-Lawrence Grade 2-3)

Study Design

- Randomised, double-blind placebo-controlled trial in ~320 adults
- 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

Study Conduct

- Trial conducted by University of Sydney, funded by Australian Government NHMRC grant
- Clinical centres in Australia (Sydney and Hobart)
- Recruitment complete (commenced November 2020; completed in November 2023)
- Last patient last visit expected ~November 2025

Results

- Results expected in H1 CY 2026

Renal transplant | Phase 1 clinical trial

Product

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

Indication

Prevention of kidney transplant rejection

Study Design

- ~16 patients to receive CYP-001 after kidney 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 calcineurin inhibitors (anti-rejection medication; Cohort 3)

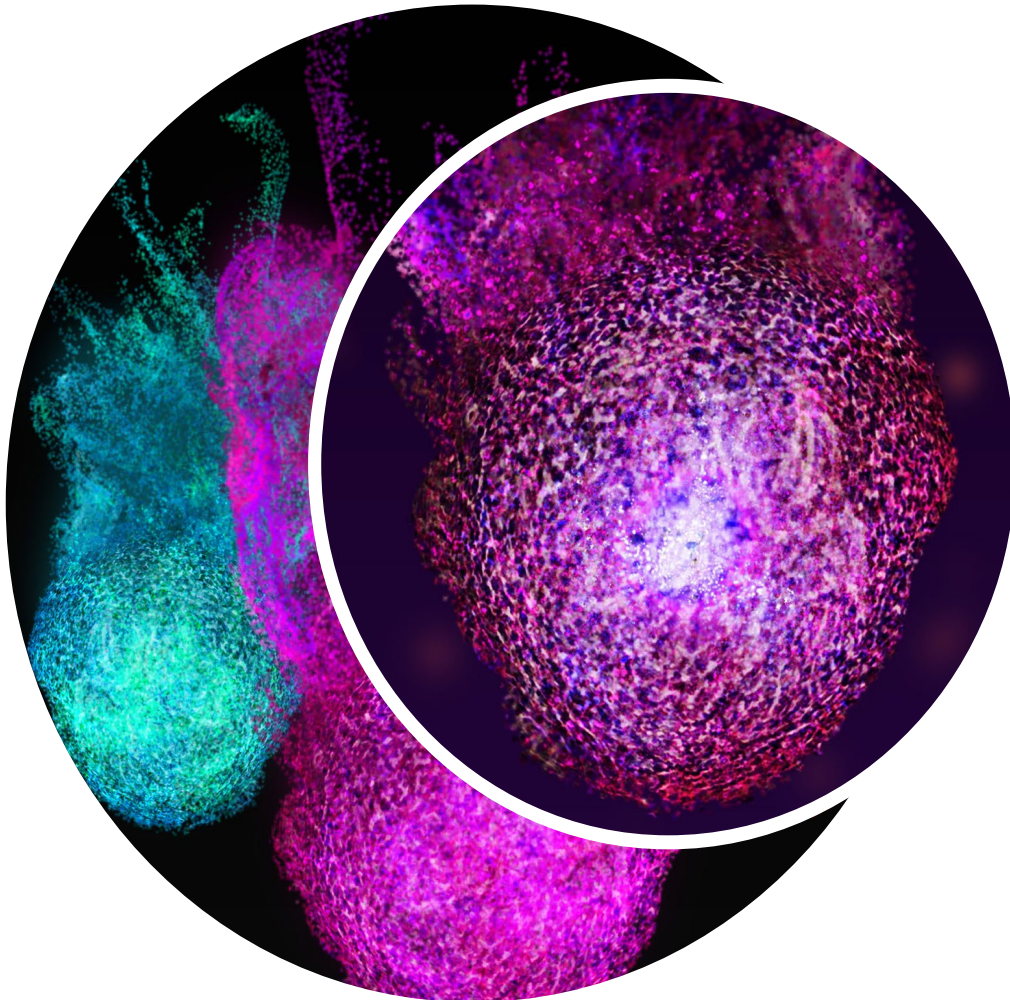
Study Conduct

- Trial to be conducted and funded by Leiden University Medical Center, Netherlands
- Regulatory and ethics approvals in place; final trial start-up activities ongoing
- Aiming to commence recruitment in Q1 2024
- Timing of further cohorts TBC

Results

Results of Cohort 1 anticipated in late 2024

Partnering



Cynata is pursuing a partnership-driven business model



Proactive outreach ongoing, aimed at development partners for existing clinical assets

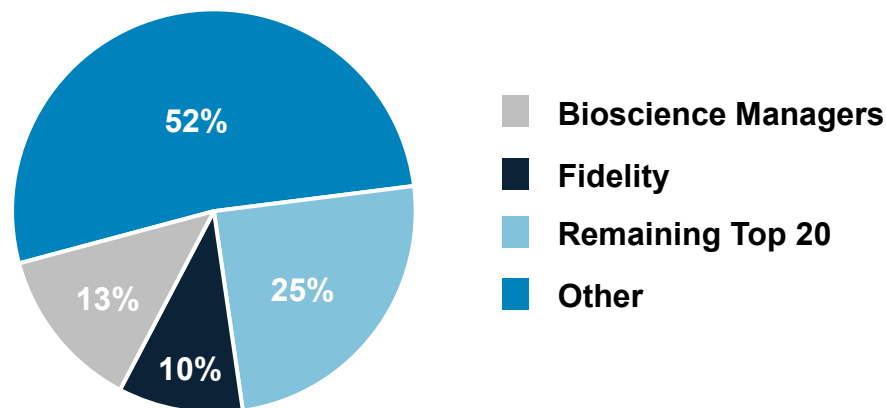


Cymerus platform also available for other indications and/or engineered MSC applications

Corporate overview

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

Shareholder distribution



Financial information

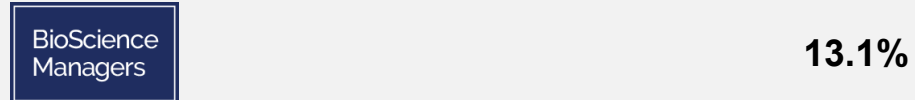
Share price (14 March 2024) A\$0.175

Shares on issue 179m

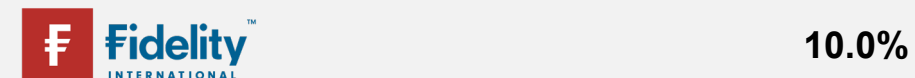
Market capitalisation ~A\$31.3m

Cash¹ ~A\$11m

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, responsible for total client assets of >US\$750 billion, from clients across Asia Pacific, Europe, the Middle East, South America and Canada.

Summary



Next generation stem cell company

- Leading platform 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

- Patented Cymerus manufacturing technology enables scalable production of consistent MSCs from a single donation from a single donor, overcoming issues with conventional approaches



Successful clinical trial results

- 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

- 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 underway



Significant growth potential

- 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



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