

## INTERIM PHASE 1 SAFETY REPORT CONFIRMS SAFETY OF ARG-007

#### **Highlights:**

- Phase 1 interim safety report confirms single intravenous doses of ARG-007 at all doses administered are safe and well tolerated with no serious adverse events observed.
- The only adverse events observed during the trial were mild to moderate and these were observed in both the ARG-007 treatment groups and placebo group, with a greater percentage seen in the placebo group.
- No clinically significant findings were reported in laboratory parameters, vital signs, physical examination and heart monitoring.
- Immune dysregulation biomarkers confirm administration of ARG-007 does not cause an immune reaction in healthy participants.
- Argenica will continue to work with Linear to finalise the Phase 1 clinical trial report for inclusion in Argenica's ethics submission for a Phase 2 clinical trial in ischaemic stroke patients.

**Perth, Australia; 6 March 2023** - Argenica Therapeutics Limited (ASX: AGN) ("Argenica" or the "Company"), a biotechnology company developing novel neuroprotective therapeutics, is pleased to announce the release of the safety data for its Phase 1 clinical trial of ARG-007 in healthy human volunteers.

The safety report, provided by Linear Clinical Research (Linear) who ran the Phase 1 trial, confirms that overall, single intravenous doses of ARG-007 at all doses administered were considered to be safe and well tolerated in this Phase 1 study.

The safety data provides details of all adverse events observed in both ARG-007 treated groups and placebo groups. An adverse event observed following the commencement of ARG-007 or placebo (saline) administration (termed treatment emergent adverse events or TEAEs), may or may not be related to the administration of the drug. Of all TEAEs observed, 54.2% of ARG-007 treated participants experienced at least one mild or moderate TEAE, whereas 62.5% of the placebo group experienced at least one mild or moderate TEAE.

There was a total of 31 reported TEAEs in all participants, however only 10 of these were considered "related" to the administration of ARG-007. Further, these related TEAEs were not dependent on the dose of ARG-007 administered, the highest dose did not result in any adverse events related to ARG-007 administration.

# Therefore, the safety data report concluded there were <u>no clinically significant adverse</u> <u>events</u> seen in the ARG-007 dosed participants at any of the doses tested.

The data also provided an evaluation of laboratory parameters, vital signs, physical findings, and other observations related to safety, notably monitoring heart conditions through electrocardiograms (ECG). No clinically significant findings were observed in any of these measures.

In addition, the data provides findings on the presence of nine different cytokines which are typical immune dysfunction biomarkers, to investigate whether ARG-007 caused an immune reaction. There were no notable trends in changes from baseline levels over time within any of the treatment groups or as the dose increased, meaning **ARG-007 does not induce an immune reaction when administered at any of the four doses tested.** 

# These safety results will be included in Argenica's ethics submission for Phase 2 clinical trial in stroke patients later in CY2023.

Dr Liz Dallimore, Argenica's Managing Director, said "We're delighted to receive this data package from Linear confirming the safety and tolerability of ARG-007. Receiving the unblinded data and comparing the treatment groups with the placebo groups in our Phase 1 clinical trial shows that we are not seeing any clinically significant adverse events related to administration of ARG-007. We can now work with Linear to finalise the trial report in preparation for our ethics submission to commence our Phase 2 trial in ischaemic stroke. Pleasingly, the data generated from the safety report, will also be able to be used for a number of other phase II trials in additional indications."

Further detail on the Phase 1 interim data, including detailed commentary on TEAEs is presented in Appendix 1.

Argenica will now work with Linear to finalise the clinical trial report in collaboration with an experienced medical writer to include in the ethics submission for the Phase 2 clinical trial in stroke patients.

### This announcement has been approved for release by the Board of Argenica

For more information please contact: info@argenica.com.au

### **ABOUT ARGENICA**

Argenica (ASX: AGN) is developing novel therapeutics to reduce brain tissue death after stroke and other types of brain injury and neurodegenerative diseases to improve patient outcomes. Our lead neuroprotective peptide candidate, ARG-007, has been successfully demonstrated to improve outcomes in pre-clinical stroke models, traumatic brain injury (TBI) and hypoxic ischaemic encephalopathy (HIE). The Company has recently completed a Phase 1 clinical trial in healthy human volunteers to assess the safety and tolerability of a single dose of ARG-007. Argenica is now progressing towards a Phase 2 clinical trial in ischaemic stroke patients, as well as continuing to generate preclinical data in other neurological conditions, including in TBI, HIE and Alzheimer's Disease.



#### **APPENDIX 1:**

#### Summary of Treatment Emergent Adverse Events (TEAEs)

Overall, in both the ARG-007 treated groups (24 volunteers) and the placebo groups (8 volunteers), a total of 17 (53.1%) subjects reported a total of 26 mild TEAEs and three (9.4%) subjects reported a total of five moderate TEAEs. There were no severe, life threatening or fatal TEAEs reported during the study.

Of all the TEAEs reported, only 10 TEAEs (from 7 treated subjects) were considered by the investigator to be possibly, likely or definitely related to the administration of ARG-007. The remaining TEAEs were deemed not to be related to ARG-007 administration.

Across all volunteers that were confirmed to have received a dose of ARG-007, 13 subjects (54.2%) reported at least 1 TEAE. From the pooled placebo group (2 volunteers per dose cohort or 8 subjects in total), 62.5% of these subjects reported TEAEs, despite receiving no drug at all. Across all ARG-007 recipients, only 8.3% of recipients reported 3 moderate TEAE's, an average of 1.5 moderate TEAE per person reporting. In the placebo group, 12.5% of volunteers reported 2 moderate TEAE's (2.0 moderate TEAE's per reporter).

In the volunteers that were confirmed to have received a dose of ARG-007, the proportion of subjects reporting TEAEs did not appear to be dose related with the lowest proportion in the highest dose group (33.3% of subjects).

Overall, 18 (56.3%) of subjects (from the treatment groups and placebo groups) reported at least 1 treatment emergent adverse event (TEAE), with 7 (21.9%) subjects reporting at least 1 treatment-related TEAE. There were no serious or severe TEAEs. There were no TEAEs that lead to death, study discontinuation or investigational product withdrawal.

There were no trends noted in the incidence of treatment related TEAEs, with these TEAEs reported in all treatment groups with the exception of the highest dose group.

The 2 most frequently reported TEAEs during the study, from both the placebo and treatment groups, were headaches (5 subjects reporting 5 events in total) and dermatitis (5 subjects reporting 6 events in total). The incidence of headaches did not appear to be dose related. Dermatitis was most frequently noted in the pooled placebo group, observed in 37.5% of subjects. For the ARG-007 treatment groups, dermatitis was only noted in the second highest dosed group (33.3% of subjects). All other frequently reported events (site bruising, presyncope, hypotension, upper respiratory tract infection and back pain) were reported by single subjects in the treatment groups and did not appear to be dose related.

There were no other TEAEs that occurred during the study that were considered significant.

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#### **Evaluation of Laboratory Parameter**

Review of hematology, clinical chemistry, coagulation and urinalysis overtime revealed no dose-related trend in changes over time for any treatment groups. There were no individual subject changes to clinical laboratory parameters that were considered by the investigator to be clinically significant and none of the minor changes were captured as TEAEs.

#### Vital Signs, Physical Findings, and Other Observations Related to Safety

There was no evidence of dose-related trends in changes over time in vital sign parameters and no trends in vital sign abnormalities observed in any treatment group or study part. There were no clinically significant ECG findings reported during the study and no TEAEs associated with abnormal ECG findings.

In each treatment group (ARG-007 and placebo) there were abnormal ECG findings noted at the majority of timepoints that were deemed by the investigator to be not clinically significant.

There were no clinically significant physical examination findings reported.

#### Analysis of Immune Response

The presence of cytokines (TNF $\alpha$ , INF $\gamma$ , IL-1 $\beta$ , IL-2, IL-4, IL-6, IL-8, IL-10 and IL-12) were analyzed to investigate whether ARG-007 caused an immune reaction. The only cytokines that were detected at levels above the defined limit of quantification for the majority of subjects were INF $\gamma$  and IL-8.

There were no notable trends in changes from baseline in  $INF\gamma$  or IL-8 levels over time within any of the treatment groups or as dose increased.