ASX ANNOUNCEMENT

Actinogen Alzheimer's Disease biomarkers - context & history

Sydney, 13 September 2022. Actinogen Medical ASX: ACW ("ACW" or "the Company") is pleased to attach a presentation on the Xanamem® clinical development program that includes some background on the use of biomarkers for the development of drugs in Azheimer's Disease (AD).

This is in the context of the upcoming release before the end of October 2022 of the Company's Phase 2 biomarker study results in people with Mild AD. This study is a prospective analysis of the effects of Xanamem on AD biomarkers and a new analysis of efficacy in biomarker positive patients.

ENDS

Investors

Dr. Steven Gourlay
CEO & Managing Director
P: +61 2 8964 7401
E. steven.gourlay@actinogen.com.au

Michael Roberts
Investor Relations
M: +61 423 866 231
E. michael.roberts@actinogen.com.au

Announcement authorised by the Board of Directors of Actinogen Medical

About Actinogen Medical

Actinogen Medical (ACW) is an ASX-listed, biotechnology company developing a novel therapy for neurological and neuropsychiatric diseases associated with dysregulated brain cortisol. There is a strong association between cortisol and detrimental changes in the brain, affecting cognitive function, harm to brain cells and long-term cognitive health.

Cognitive function means how a person understands, remembers and thinks clearly. Cognitive functions include memory, attention, reasoning, awareness and decision-making.

Actinogen is currently developing its lead compound, Xanamem, as a promising new therapy for Alzheimer's Disease and Depression and hopes to study Fragile X Syndrome and other neurological and psychiatric diseases in the future. Reducing cortisol inside brain cells could have a positive impact in these and many other diseases. The cognitive dysfunction, behavioural abnormalities, and neuropsychological burden associated with these conditions is debilitating for patients, and there is a substantial unmet medical need for new and improved treatments.

® Xanamem is a registered trademark of Actinogen Medical Limited.

About Xanamem

Xanamem's novel mechanism of action is to block the production of cortisol inside cells through the inhibition of the 11β-HSD1 enzyme in the brain. Xanamem is designed to get into the brain after it is absorbed in the intestines upon swallowing its capsule.

Chronically elevated cortisol is associated with cognitive decline in Alzheimer's Disease, and Xanamem has shown the ability to enhance cognition in healthy, older volunteers. Cognitive impairment is also a feature in Depression and many other diseases. Cortisol itself is also associated with depressive symptoms and when targeted via other mechanisms has shown some promise in prior clinical trials.

The Company has studied 11β-HSD1 inhibition by Xanamem in more than 300 volunteers and patients, so far finding a statistically significant improvement in working memory and attention, compared with placebo, in healthy, older volunteers in two consecutive trials. Previously, high levels of target engagement in the brain with doses as low as 5 mg daily have been demonstrated in a human PET imaging study. A series of Phase 2 studies in multiple diseases is being conducted to further confirm and characterize Xanamem's therapeutic potential.

Xanamem is an investigational product and is not approved for use outside of a clinical trial by the FDA or by any global regulatory authority. Xanamem® is a trademark of Actinogen Medical.

Disclaimer

This announcement and attachments may contain certain "forward-looking statements" that are not historical facts; are based on subjective estimates, assumptions and qualifications; and relate to circumstances and events that have not taken place and may not take place. Such forward looking statements should be considered "at-risk statements" - not to be relied upon as they are subject to known and unknown risks, uncertainties and other factors (such as significant business, economic and competitive uncertainties / contingencies and regulatory and clinical development risks, future outcomes and uncertainties) that may lead to actual results being materially different from any forward looking statement or the performance expressed or implied by such forward looking statements. You are cautioned not to place undue reliance on these forward-looking statements that speak only as of the date hereof. Actinogen Medical does not undertake any obligation to revise such statements to reflect events or any change in circumstances arising after the date hereof, or to reflect the occurrence of or non-occurrence of any future events. Past performance is not a reliable indicator of future performance. Actinogen Medical does not make any guarantee, representation or warranty as to the likelihood of achievement or reasonableness of any forward-looking statements and there can be no assurance or guarantee that any forward-looking statements will be realised.

ACTINOGEN MEDICAL ENCOURAGES ALL CURRENT INVESTORS TO GO PAPERLESS BY REGISTERING THEIR DETAILS WITH THE DESIGNATED REGISTRY SERVICE PROVIDER, AUTOMIC GROUP.

Actinogen

Xanamem® Clinical Program Update: Alzheimer's Disease (AD) biomarkers - context and history

Dr. Steven Gourlay MBBS PhD MBA, CEO & MD

13 September 2022

® Xanamem is a registered trademark of Actinogen Medical Limited

Disclaimer

This presentation has been prepared by Actinogen Medical Limited. ("Actinogen" or the "Company") based on information available to it as at the date of this presentation. The information in this presentation is provided in summary form and does not contain all information necessary to make an investment decision.

This presentation does not constitute an offer, invitation, solicitation or recommendation with respect to the purchase or sale of any security in Actinogen, nor does it constitute financial product advice or take into account any individual's investment objectives, taxation situation, financial situation or needs. An investor must not act on the basis of any matter contained in this presentation but must make its own assessment of Actinogen and conduct its own investigations. Before making an investment decision, investors should consider the appropriateness of the information having regard to their own objectives, financial situation and needs, and seek legal, taxation and financial advice appropriate to their jurisdiction and circumstances. Actinogen is not licensed to provide financial product advice in respect of its securities or any other financial products. Cooling off rights do not apply to the acquisition of Actinogen securities.

Although reasonable care has been taken to ensure that the facts stated in this presentation are accurate and that the opinions expressed are fair and reasonable, no representation or warranty, express or implied, is made as to the fairness, accuracy, completeness or correctness of the information, opinions and conclusions contained in this presentation. To the maximum extent permitted by law, none of Actinogen its officers, directors, employees and agents, nor any other person, accepts any responsibility and liability for the content of this presentation including, without limitation, any liability arising from fault or negligence, for any loss arising from the use of or reliance on any of the information contained in this presentation or otherwise arising in connection with it.

The information presented in this presentation is subject to change without notice and Actinogen does not have any responsibility or obligation to inform you of any matter arising or coming to their notice, after the date of this presentation, which may affect any matter referred to in this presentation.

This presentation is not for general distribution or third party reliance or use.

This presentation contains certain budget information, forecasts and forward looking statements that are based on the Company's management's beliefs, assumptions and expectations and on information currently available to management in respect of which there is NO guarantee of future performance. Such budget information, forecasts and forward looking statements involve known and unknown risks, uncertainties, and other factors which may cause the actual results or performance of Actinogen to be materially different from the results or performance expressed or implied by such forward looking statements. These risks and uncertainties include, but are not limited to the performance of Actinogen in its clinical trials including whether it's technology proves to be a safe and effective treatment, market penetration, competition from any other similar products, intellectual property risks (including securing rights in technology and patents) and global economic conditions. Furthermore, Actinogen's research, product development, testing, pricing, marketing and other operations are subject to extensive regulation by domestic and foreign government regulatory authorities. There is no guarantee that Actinogen will obtain the required approvals, licences and registrations from the relevant authorities in jurisdictions in which it operates. Actinogen or others could identify product and efficacy issues relating to the safety of our technology. Accordingly, all forward looking statements are based on numerous assumptions regarding the Company's present and future business strategies and the political and economic environment in which Actinogen will operate in the future, which are subject to change without notice. Past performance is not necessarily a guide to future performance and no representation or warranty is made as to the likelihood of achievement or reasonableness of any forward looking statements or other forecast. There is no guarantee that Actinogen will achieve its stated objectives/milestones, that any of its forecasts will be met or that forward looking statements will be realised. You are cautioned not to place undue reliance on these forward-looking statements that speak only as of the date hereof, and we do not undertake any obligation to revise and disseminate forward-looking statements to reflect events or circumstances after the date hereof, or to reflect the occurrence of or non-occurrence of any events.

Neither Actinogen nor any other entity or person in or associated with Actinogen guarantee any return (whether capital or income) or generally the performance of Actinogen or the price at which its securities may trade. Any investment in Actinogen is subject to investment risks including the possibility of loss of capital invested and no return of income or payment of any dividends.

To the maximum extent permitted at law, Actinogen and all of its representatives, directors, officers, partners, employees or professional advisers (Parties) exclude all direct and indirect liability arising out of or in connection with any use or reliance of the information contained or described within this presentation. Other than to the extent required by law (and only to that extent), the Parties do not make any representation or give any assurance, guarantee or warranty (express or implied) as to, nor assume any responsibility or liability for, the authenticity, origin, validity, accuracy, suitability or completeness of, or any errors in or omissions from, any information, statement or opinion contained in this presentation or any accompanying, previous or subsequent material or presentation.

Actinogen snapshot

Actinogen Medical (ASX:ACW) is developing a novel oral treatment with rapid onset of clinical activity to improve cognition and quality of life

Favourable pharmaceutical properties

- ✓ Demonstrated target engagement in brain and HPA axis[1] in human trials
- ✓ **Low dose, ≤10mg**
- ✓ Low drug-drug interaction potential suitable for combination therapy

Substantial clinical data

- ✓ **>300 subjects or patients safely treated**
- ✓ Cognitive enhancement activity (attention & working memory) confirmed in two consecutive well-controlled trials (5 mg, 10 mg & 20 mg dose levels vs. placebo)

Attractive disease indications and rationale

- ✓ **Strong cortisol rationale for treatment of multiple diseases**: early stages of Alzheimer's Disease; Depression & related cognitive impairment; Fragile X Syndrome; and many others

Protected and funded

- ✓ Molecule in-licensed from U Edinburgh in 2014
- ✓ Comprehensive patents in place[2]
- ✓ **Cash position A$16.4M at 30 Jun 2022**

High functioning semi-virtual company model

- ✓ Core team of 10 fulltime employees based in Australia
- ✓ Leveraging senior consultants in various fields in Australia, Asia, UK and USA
- ✓ **Australian-based operations gains 43.5% as cash rebate**

1. Hypothalamic-Pituitary-Adrenal axis (body's system to regulate blood levels of cortisol)
2. Composition of matter to 2031 plus 5-year extension in most countries, new patents published and in process

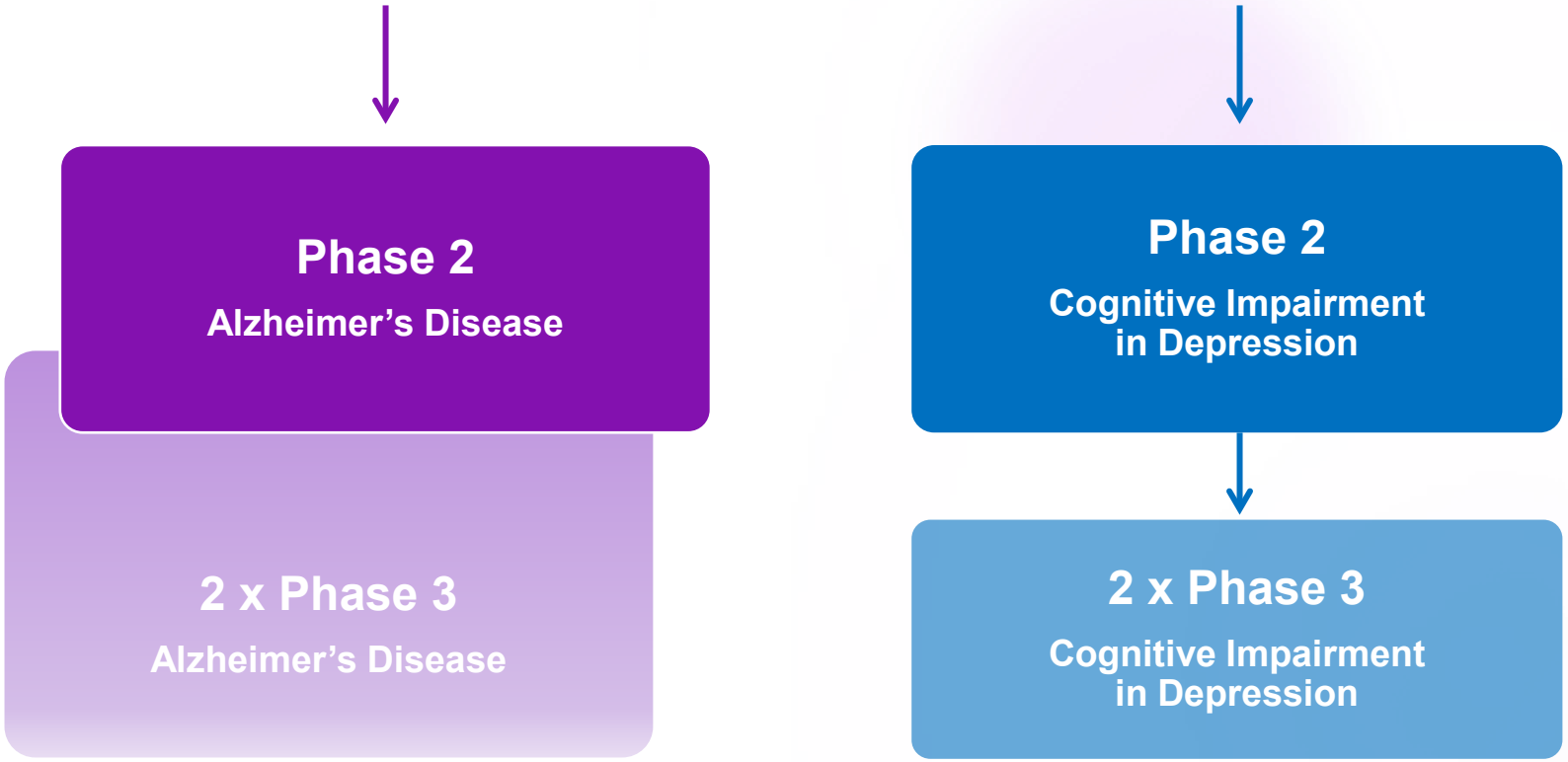
Xanamem Clinical Development Pipeline

	Phase 2 Pathway	Outlook
Cognitive impairment in early **Alzheimer's disease**	**Biomarker analysis in** patients with mild AD - Phase 2 dataset of 10mg vs. placebo over 12 weeks, H2 2022 **Cognitive benefit** in patients with early stages of AD - Phase 2 XanaMIA Part B commencing H2 2022	*"Big-to-market"* *Multiple Phase 2b/3 trials*
Cognitive Impairment in Depressive Disorder	**Depression and cognitive impairment placebo-controlled trial** - Phase 2 XanaCIDD trial to commence in Q4 2022	*Potential to treat both depression and related cognitive impairment*
Anxiety, sleep & behavioural problems in **Fragile X Syndrome**	**XanaFX (open IND with Phase 2 protocol)** - Phase 2 proof-of-concept in adolescent and young adult males	*Pending alternative funding or partnership*

Clinical trials program overview

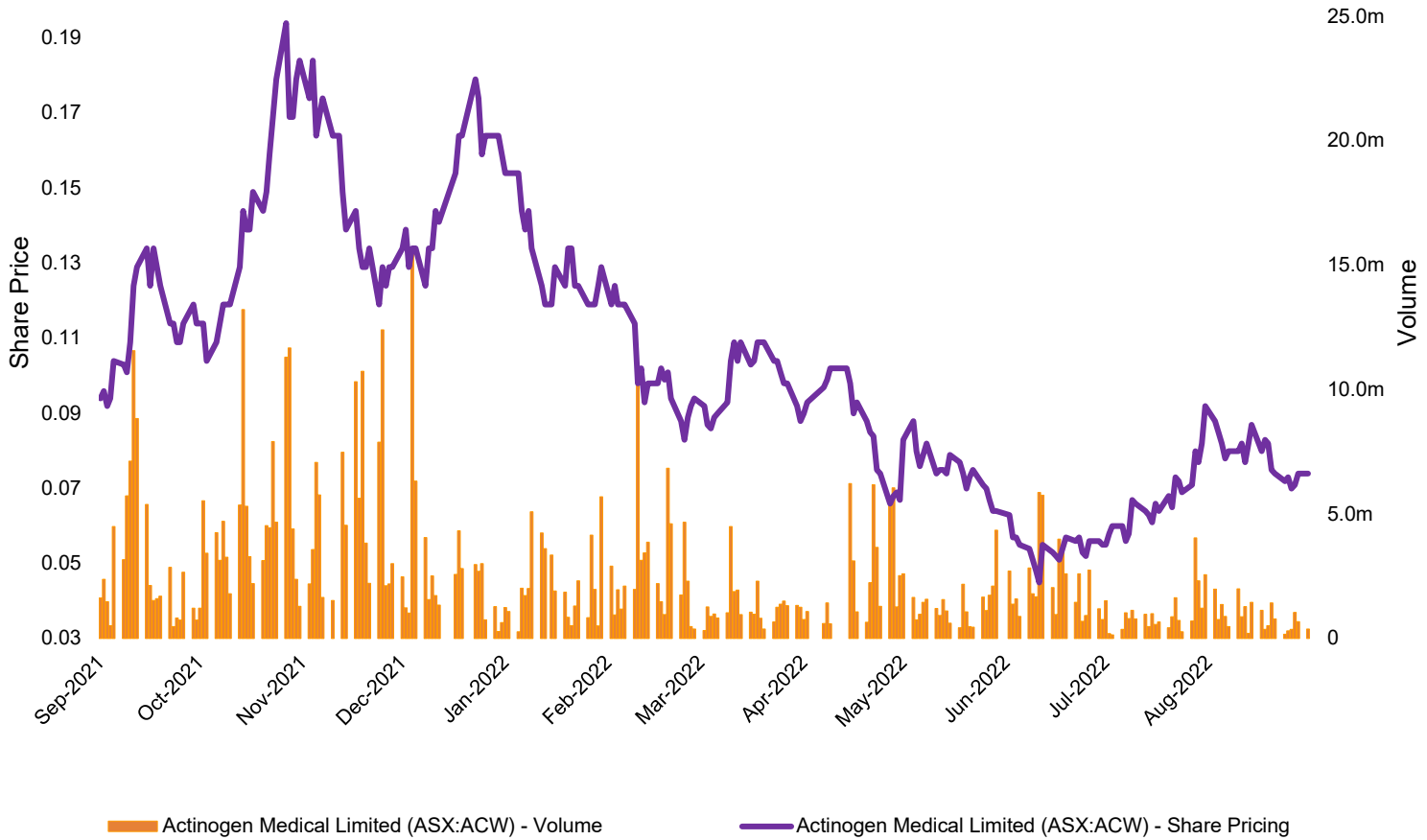
Phase 2 and 3 trials to achieve marketing approvals

Current Phase 1 & 2 datasets
Safety, cognition activity (n~300)



ACW top stockholders and stock price

Share price chart at 12 Sep 2022

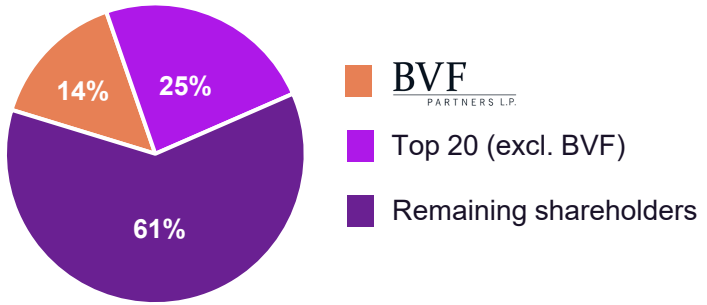


Trading Information

52 week high	A$0.20
52 week low	A$0.04
Number of issued shares	1,796M
Market capitalisation (12 Sep 2022)	A$126M
Cash Balance at 30 Jun 2022	A$16.4M

Major Shareholders

BVF Partners	13.9%
Steven Gourlay	3.7%
Edinburgh Technology Fund	2.7%



Leadership and Management

Extensive drug development and commercial experience

Experienced Board of Directors...

Dr. Geoff Brooke

Chairman

MBBS; MBA

- **30+ years experience** in the healthcare investment industry
- Founder and MD of Medvest Inc and GBS Ventures, Chairman of Cynata Therapeutics, Board Member of Acrux

Dr. George Morstyn

Non-Executive Director

MBBS; PhD; FRACP; MAICD

- **25+ years experience** in biotech investment and drug development
- Board member of Cancer Therapeutics and Symbio

Mr. Malcolm McComas

Non-Executive Director

BEc, LLB; FAICD; SF Fin

- **25+ years experience** in the financial services industry
- Chairman of Pharmaxis and Fitzroy River Corporation

…with a talented management team in place

Dr. Steven Gourlay

CEO & MD

MBBS; FRACP; PhD; MBA

- **30+ years experience** in development of novel therapeutics
- Former founding CMO at US-based Principia Biopharma Inc

See full team and bios at: https://actinogen.com.au/our-company/#about-us

Jeff Carter

Chief Financial Officer

B. Fin Admin; M. App. Fin; CA

Tamara Miller

SVP Product Development

M.Med Sci; BSc; MSc; PMP; CPPM

Dr Paul Rolan

Chief Medical Officer

MD, FRACP

Cheryl Townsend

VP Clinical Operations

RN, M Health Law

Dr Christian Toouli

Head of Business Development

PhD; GAICD

Note: All logos and brands are registered trademarks of their respective owners.

International Cognition Clinical Advisory Board

Global thought leaders in clinical trials for assessment of cognition

Prof. John Harrison

Metis Cognition Ltd

- Expert psychologist with a special interest in cognition
- Chartered psychologist with two PhDs and author/co-author of more than 80 books and scientific articles
- Principal Consultant at Metis Cognition, which advises on selection and integration of cognitive testing into therapeutic development programs

Dr Dana C. Hilt

FREQUENCY THERAPEUTICS

- 25+ years of drug development experience, primarily of Central Nervous System (CNS) drugs
- Deep experience in Phases 1 to 4 drug development
- CMO at Frequency Therapeutics and has held senior management positions as Chief Medical Officer at various pharmaceutical companies

Dr Christina Kurre Olsen

ORPHAZYME

- 20+ years research expertise in neuroscience, neuropsychopharmacology, CNS therapeutics and monoclonal antibody immunotherapy
- Strong hands-on knowledge across drug development value chain and a passion for cognition
- Medical Director at Orphazyme A/S

Prof. Paul Maruff

Cogstate

- Chief Innovation Officer at Cogstate Ltd
- Professor in Neuroscience at the Florey Institute of Neuroscience and in Psychology Monash University, Melbourne Australia
- Senior management committee of the Australian Imaging, Biomarkers and Lifestyle (AIBL) study of Alzheimer's Disease
- Involved in the development and approval of 13 new drugs that affect cognition including most recently esketamine for treatment resistant depression

Note: All logos and brands are registered trademarks of their respective owners.

AD biomarker fundamentals

Xanamem biomarker profile to be assessed September/October 2022

The Xanamem program in AD is based on the proven use of clinical endpoints of cognition and function for regulatory approvals without reliance on biomarkers. AD biomarkers have no relevance to the Depression program.

Biomarkers have three important uses:

Confirming clinical activity & dose

Clinical activity at a given dose and schedule & disease-modifying potential

Choosing patients with a disease or likely treatment benefit

Confirming patients have AD and are likely to progress

In regulatory submissions as "surrogate" endpoints prior to more definitive Phase 3 trials

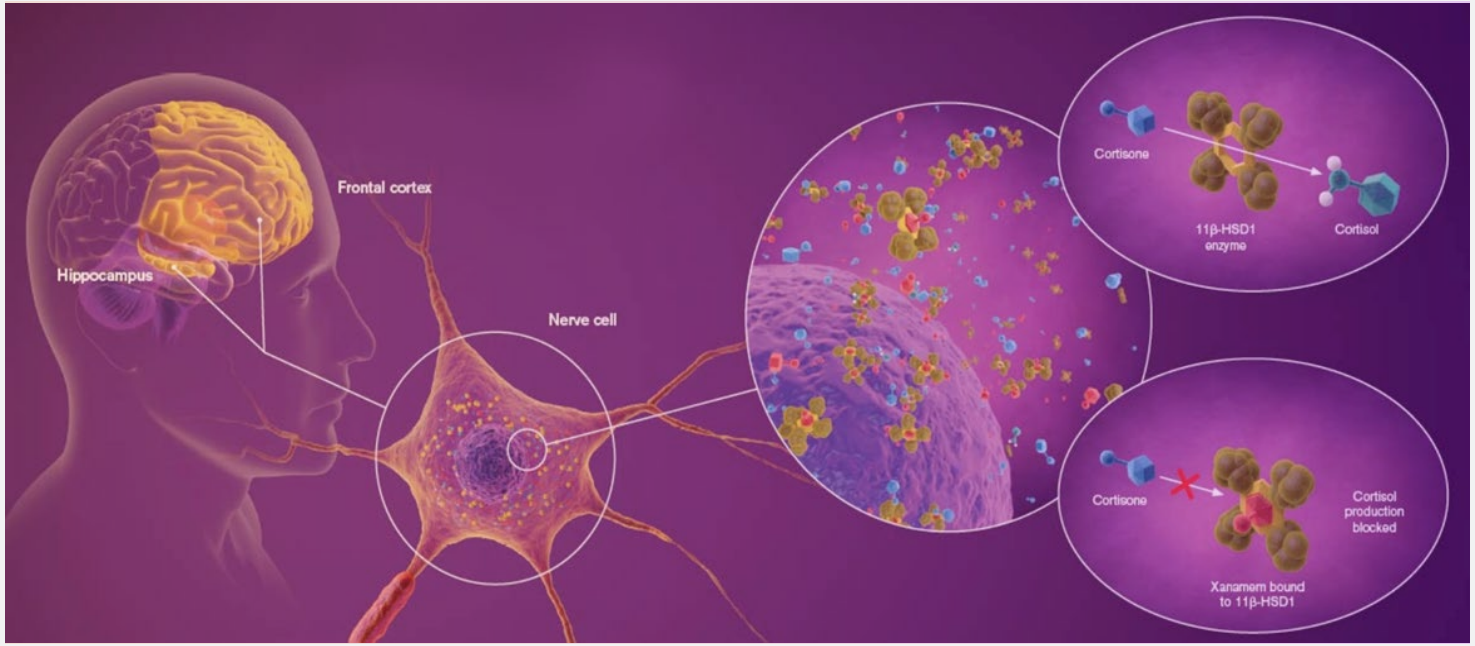
e.g. accelerated approvals to shave time off marketing approvals for serious diseases like cancer and AD

Xanamem: Oral, low dose, once-a-day treatment with a unique mechanism in Phase 2

Brain penetrant 11β-HSD1 small molecule enzyme inhibitor reduces cortisol inside brain cells - modulating signaling pathways and underlying disease processes[1,2]

Potential to be:

- Rapidly cognitive enhancing
- Disease-modifying (slow or halt progression) in AD



1. Xanamem® is a CNS (Central Nervous System) penetrant small molecule based on human PET scan evidence and cerebrospinal fluid (CSF) measurements
2. Sooy et al. 2015 showing effects on amyloid plaque reduction in an aged mouse model after 28 days associated with increases in insulin degrading enzyme; Popoli et al. 2011 microglial cell modulation in rats, effects on glutamate, cannabinoid and other signalling pathways

A brief history of Alzheimer's Disease drug development

See also Actinogen Clinical Trials Science Forum August 2022

https://youtu.be/Bm9ATZx1zEk

A small number of drugs to tackle cognition have worked and been approved in AD

Actinogen

Approved on clinical scales[1] in mild-moderate AD, 6-month trials

Mechanism	First Approval	Benefit	Comments
Oral anticholinesterase inhibitors e.g. donepezil, rivastigmine, galantamine	1996	Cognitive & functional scales	Gastrointestinal side effects Multiple trials
Oral NMDA inhibitors e.g. memantine, some in development	2003	Cognitive & functional scales	Gastrointestinal side effects Multiple trials
Oral serotonin reuptake inhibition (vortioxetine)	2018	Executive function scale	DSST vs. placebo Multiple trials
Oral oligomannate (GV-971, brown algae)	2019 China only	Cognitive & functional scales	Single positive trial

The primary Xanamem strategy is to follow this proven clinical pathway

1. Clinical scales measure how a patient feels, performs and functions

In 2021 the FDA opened the door to an ‘accelerated’ approval pathway in AD, previously used for cancer, using biomarkers as endpoints

Actinogen is investigating the use of this strategy for Xanamem with a panel of blood biomarkers to choose the right patients for trials and further hasten approval timelines

Amyloid measured by Positron Emission Tomography (PET) brain scan used for FDA approvals

Actinogen

Use of blood and cerebrospinal fluid (CSF) levels is in development

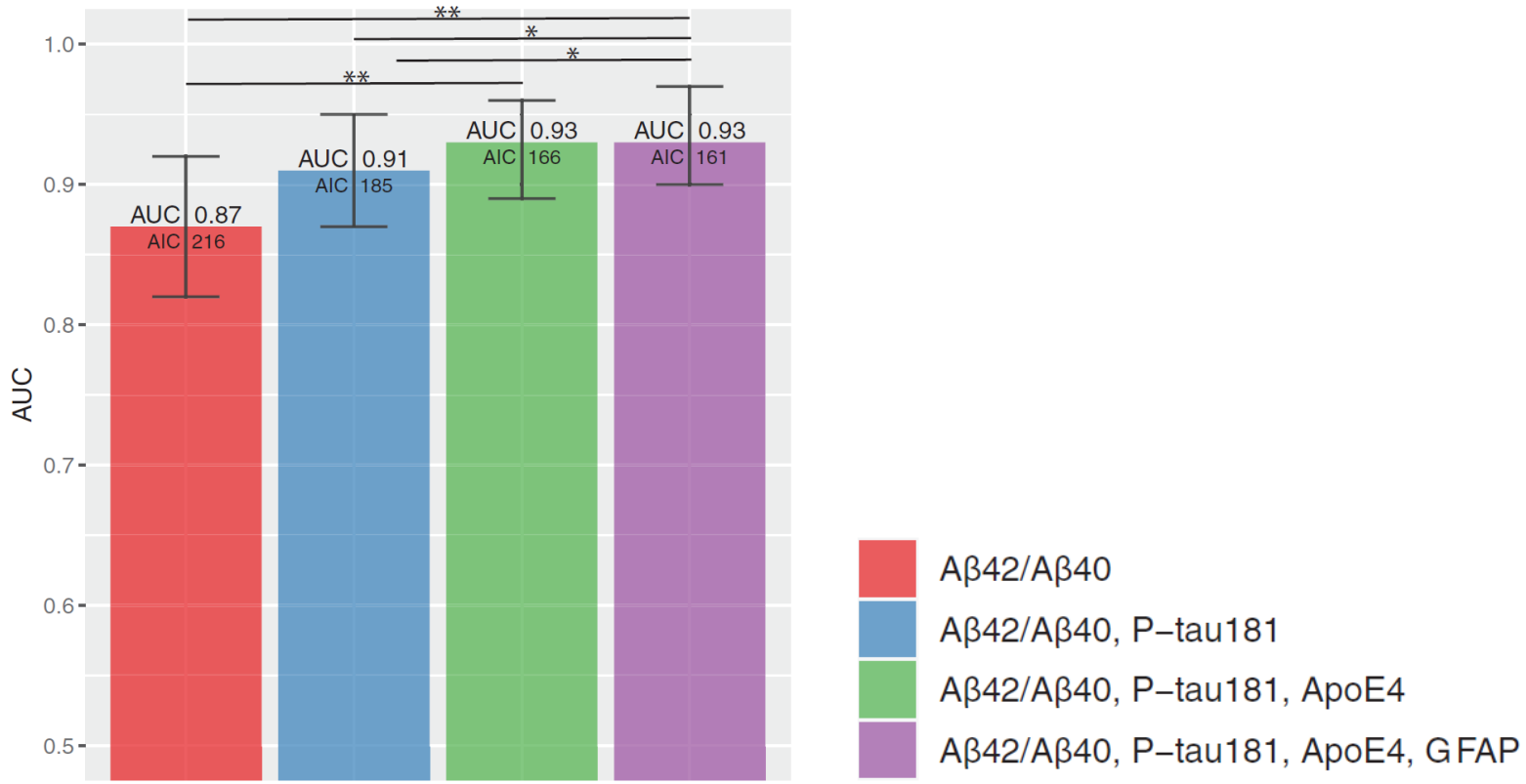
Predictive biomarker	How measured	Observations	FDA	Impact of drug treatment for target
Brain amyloid	PET scan	Aducanumab - major amyloid reduction[1]	✓	Minor clinical benefit
	PET scan	Second gen antibodies – under consideration by FDA	✓	New clinical trials pending
CSF amyloid	Spinal tap	Part of ATN[2] diagnostic criteria for AD, prediction evolving		
Blood amyloid	Blood test	Promising as alternative to spinal tap for CSF or imaging		

FDA may allow blood biomarkers as surrogate endpoints as it did for amyloid scans

1. Aduhelm US Product Information
2. ATN: Amyloid, Tau, Neurodegeneration

Blood biomarkers predict brain amyloid in AD

High specificity and sensitivity approaching the maximum ROC AUC[1] of 1.0

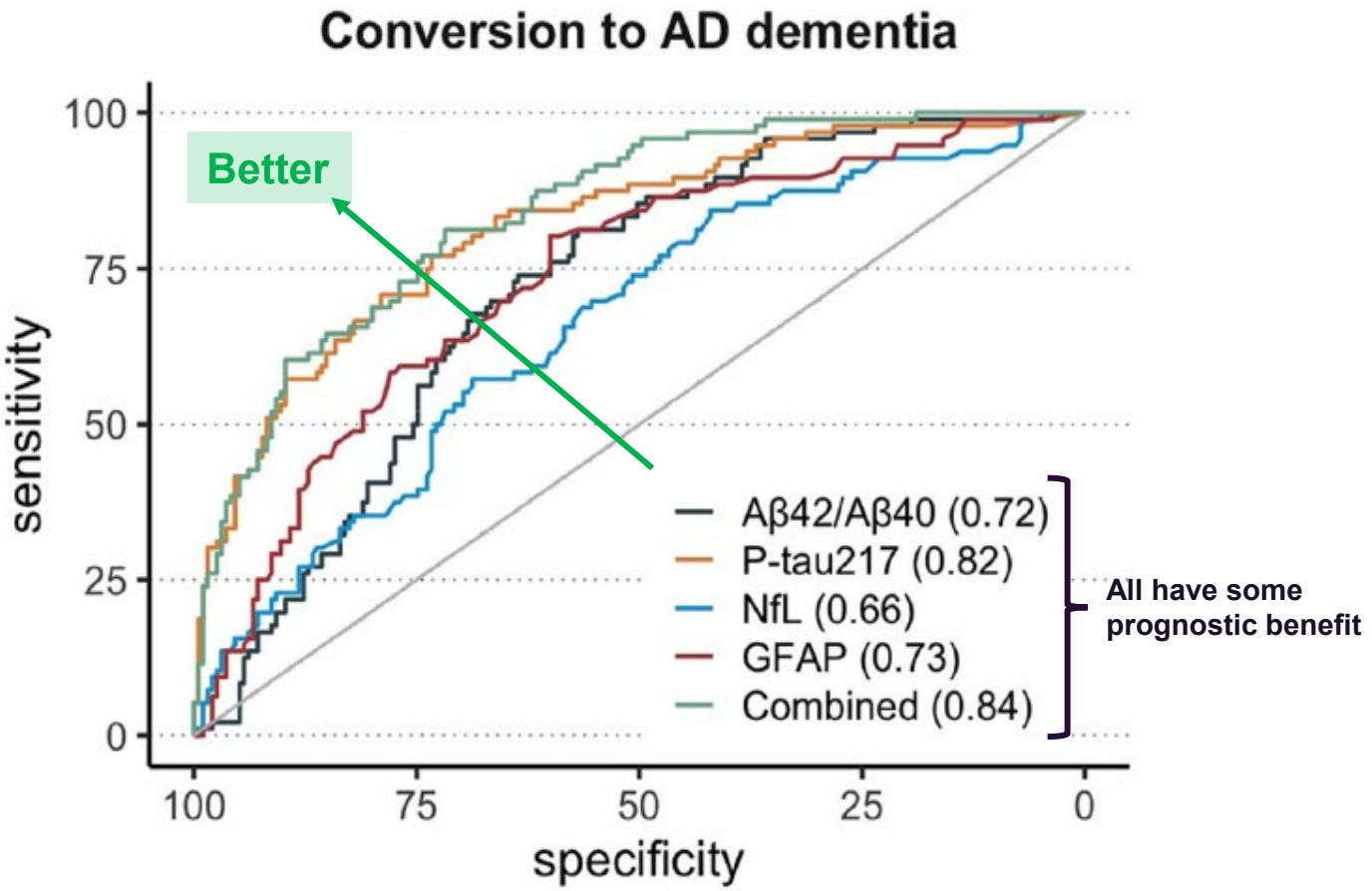


Actinogen's biomarker study includes amyloid (Aβ42 & 40), p-tau181 and GFAP. Blood biomarkers may replace brain scanning in the near future.

Palmqvist et al. 2022; similar findings Karikari et al. 2021 * p < 0.05 ** p< 0.01

1. ROC AUC: Receiver Operating Curve Area Under the Curve

Blood P-tau is the best single predictor of progression in early stages of AD[1]



Improving biomarkers likely to predict clinical response to treatment in AD

1. Data shown from Cullen et al. 2022; similar findings Cullen et al. 2021, Aβ amyloid beta; P-tau phosphorylated tau protein; NfL neurofilament light (a nerve protein); GFAP Glian Fibrilliary Acidic Protein (only in brain)

Actinogen has the only non-amyloid mechanism drug in development with credible cognitive data

It is potentially* one of only three worldwide AD clinical trial programs for an oral medication with credible cognitive activity data and biomarker improvement data

Mechanism	Stage	Benefit to date	Cognitive endpoint	Company market cap. ($AU)[1]
Oral Xanamem to lower brain **cortisol** (**Actinogen**)	Phase 2	**Cognition (AD biomarkers tbc)**	Cognitive test battery	126 million
Oral inhibition filamin A to stop Aβ42 **amyloid** signal to TLR/α7nicR (**Cassava** Sciences)	Phase 3	**Cognition & AD biomarkers**	Cognitive test battery	1.9 billion
Oral QPCT inhibitor to prevent toxic **amyloid** formation (**Vivoryon**)	Phase 2	**Cognition & new biomarkers**	Cognitive test battery	238 million

*** Xanamem biomarker data pending September/October 2022**

[1] at 13 Sep 2022

Upcoming plasma biomarker study design

Actinogen

Phase 2 trial (XanADu)

- **185 people with mild AD** (MMSE 20-26)
- Placebo-controlled
- 12 weeks
- 10 mg Xanamem vs. placebo

~70 patients with stored blood samples

- Plasma stored at -80°C
- Consent to use samples

Evaluate change in disease biomarkers

- **pTau181**
- **Amyloid** 42 & 40 and 42/40 ratio
- **Ratio of pTau/tTau**
- **NfL, GFAP**

Assess efficacy trends on clinical endpoints

- Include baseline biomarker levels
- Include baseline severity
- **Evaluate subscales of ADAS-Cog most sensitive to change** in a mild AD population

Valuable data relating to patient selection and efficacy in a mild AD population

Biomarker conclusions

Xanamem biomarker profile to be assessed September-October 2022

The Xanamem program in AD is focused on the proven use of clinical endpoints of cognition and function for regulatory approvals

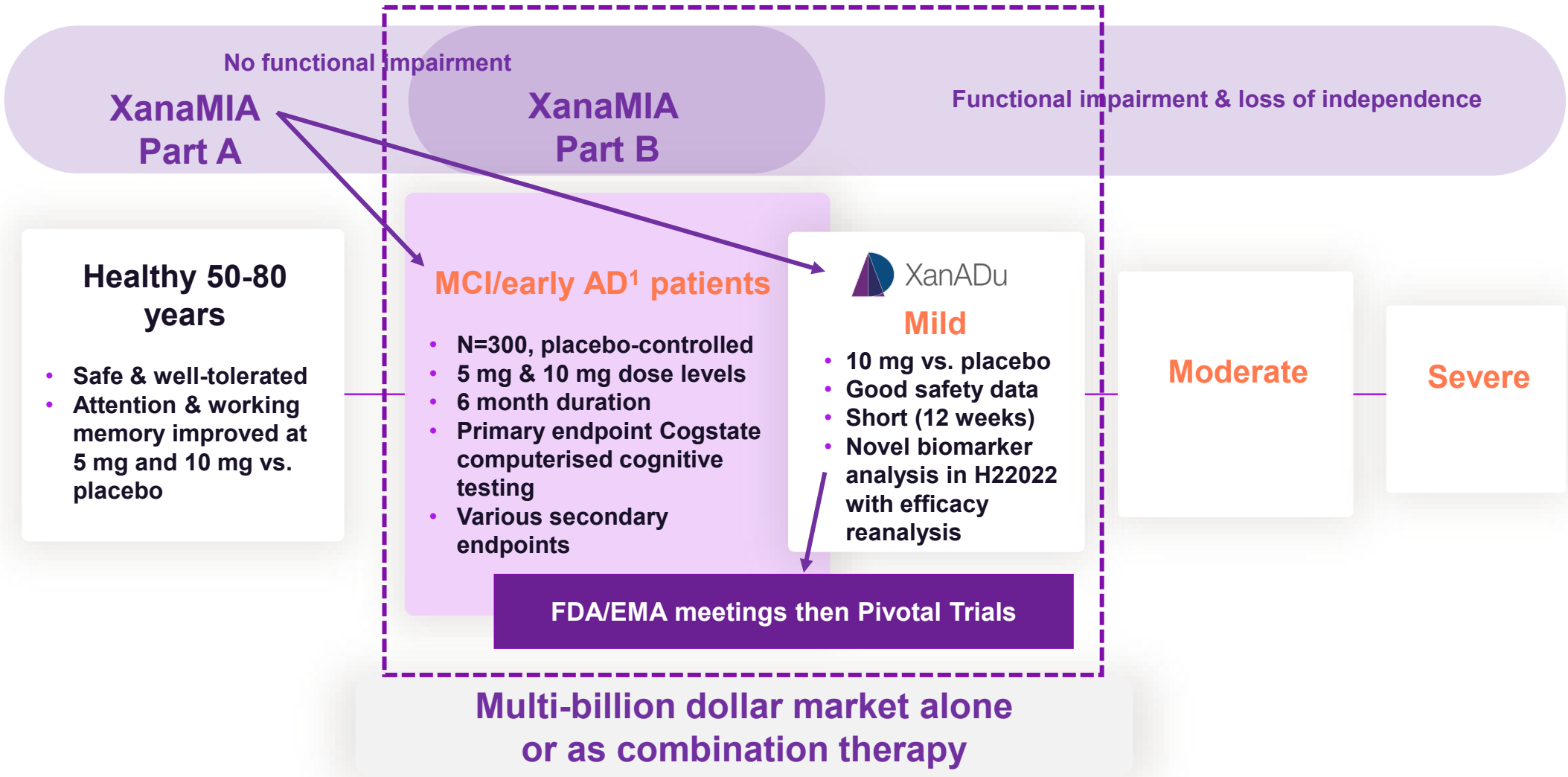
However, blood biomarkers show promise to aid drug development in AD and will be fully explored by Actinogen, along with brain scan methods

Almost certainly, blood biomarker profiles at baseline will inform patient selection in the program

A positive biomarker treatment profile for Xanamem versus placebo would:

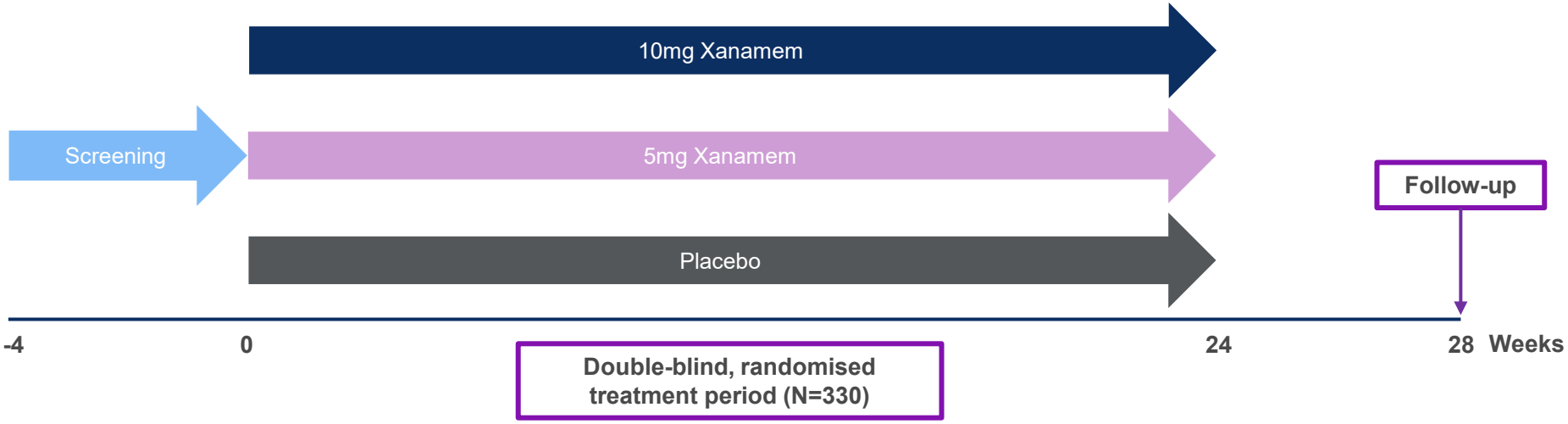
- ✓ **Indicate potential human biologic activity for disease-modification**
- ✓ **Position Xanamem to explore the accelerated approval pathway**
- ✓ **Facilitate interactions with regulators, potential commercial and academic partners**

Regulatory consultations and pivotal Phase 3 trials



1. Mild Cognitive Impairment (MCI): memory, executive function deterioration with retained functional abilities; very mild AD with some functional impairment

XanaMIA Part B trial Phase 2 trial design & implementation model



Key inclusion/exclusion criteria	Primary Endpoints	Key Secondary Endpoints	Key Implementation Features
• Clinical diagnosis of **MCI or mild dementia** due to AD (NIA-AA) • Positive plasma AD biomarker signature (**P-tau181 ± amyloid)** • Cognitive impairment relative to demographic norms	• **Cogstate CTB attentional composite** (attention and working memory)	• **Amsterdam Activity of Daily Living** scale • Cogstate **Executive Function & Episodic Memory** Function Composites • Individual tests • Carer questionnaire / Patient Global Improvement	• **Australian trial sites plus selected international locations** • **Actinogen "hands-on" operational model** • Optimized for scalable addition of international sites as required

iDSST=international Digit Symbol Substitution Test - Symbols ; IQCODE=Informant Questionnaire on Cognitive Decline in the Elderly; MCI=mild cognitive impairment; NIA-AA=National Institute of Aging - Alzheimer's Association; RBANS=Repeatable Battery for the Assessment of Neuropsychological Status;

Cognitive Impairment in Depression is a major unmet medical need

See also Actinogen Clinical Trials Science Forum August 2022

https://youtu.be/Bm9ATZx1zEk

Science behind the Xanamem Depression Program

Unmet medical need for rapid, safe treatment

- ✓ 80-90% report neurocognitive symptoms[1]
- ✓ Cognitive symptoms often persist during remission[1]
- ✓ Elevated cortisol associated with severe, melancholic depression[2]
- ✓ Cortisol associated with treatment outcomes, relapse, & cognition[3]
- ✓ Positive effects with GR receptor antagonism with mifepristone[4]
- ✓ Meta-analysis of clinical cortisol approaches[5]
- ✓ Xanamem & improved human cognition[6]

1. 3-year prospective study and review, Conradi et al. 2011
2. Quantitative summary of four decades of research, Stetler & Miller 2011
3. Depression literature review, Malhi & Mann 2018; HPA axis in major depression, Keller et al. 2016
4. GR, **glucocorticoid receptor;** Combined analysis of mifepristone for psychotic depression, Block et al. 2018; mifepristone effects on depression in biopolar disorder, Young et al. 2004; Evidence from clinical studies with CRH_1 receptor antagonists, Holsboer & Ising 2008
5. Meta-analysis of prior trials aimed at reducing cortisol effects, Ding et. al 2021
6. Xanamem placebo-controlled trial working memory & attention (Actinogen data on file)

The Xanamem opportunity in depression

Current anti-depressants

work slowly (3 weeks) and initial suicide risk

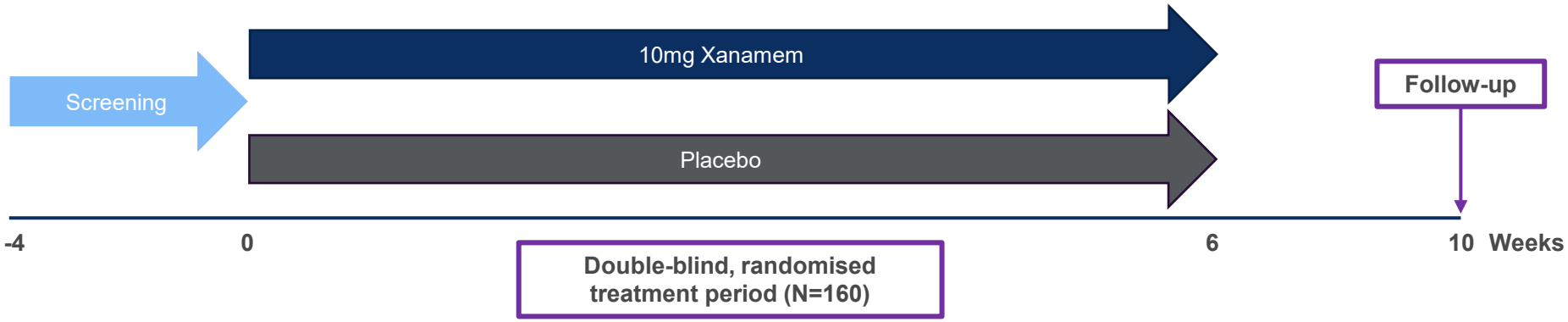
do not target cognition

multiple adverse effects
blood pressure, sexual function, appetite…

Xanamem improves cognition quickly

Xanamem may improve both depression and cognitive impairment

XanaCIDD trial design & implementation model



Key inclusion/exclusion criteria	Primary Endpoints	Key Secondary Endpoints	Key Implementation Features
• Primary diagnosis of **MDD** • **Persistent depressive symptoms despite existing therapy** • **Cognitive impairment** relative to demographic norms	• **Cogstate CTB attentional composite** (attention and working memory)	• Montgomery-Åsberg Depression Rating Scale (**MADRS**) • **Executive Function** Cognitive Composite • **Memory Function** Cognitive Composite	• **Australian trial sites** • **Actinogen "hands-on" operational model**

Timeline for Xanamem data & catalysts

Actinogen

2022

- September/October **Biomarker data** (disease-modification, efficacy)
- November **CTAD XanaMIA presentation**
- Q4 New **trials commence** in Alzheimer's Disease and Cognition/Depression
- Q4 Key global **regulatory** submissions/meetings with FDA, EMA

2023

- **XanaMIA Part B** enrollment
- **XanaCIDD** enrollment ± topline results
- **Presentations & publications**

2024

- XanaMIA **Part B topline results**
- **Expand Cognitive/Depression** program
- **Expand Alzheimer's Disease** program

Selected glossary

11β-HSD1 11 beta HydroxySteroid Dehydrogenase-1 enzyme

Aβ Amyloid beta – a type of amyloid protein associated with Alzheimer's Disease

ADAS-Cog Alzheimer's Disease Assessment Score- Cognition

ApoE4 Apoprotein genotype associated with genetic risk of Alzheimer's Disease

ATN Amyloid, Tau, Neurodegeneration

Clinical scales Measure how a patient feels, performs and functions

CNS Central nervous system

CTAD Clinical Trials on Alzheimer's Disease (conference)

CTB Cognitive Test Battery of computerized tests

Double-blind Investigators, participants and company do not know who has active vs placebo treatment during a trial

EMA European Medicines Agency

FDA US Food & Drug Administration

GFAP Glial Fibrilliary Acidic Protein – a marker of microglial cell activation in the brain

Filamen A a protein believed to relate to amyloid toxicity

IDSST International Digit Symbol Substitution Test of cognition

Selected glossary (cont.)

IQCODE Informant Questionnaire on Cognitive Decline in the Elderly

MCI Mild Cognitive Impairment – memory, executive function deterioration with retained functional abilities

MDD Major Depressive Disorder

MMSE Mini Mental State Examination – a 30 point scale of simple questions to assess mental abilities

NfL Neurofilament Light – a nerve protein in the brain and the body

NIA-AA National Institutes of Aging and Alzheimer's Association

NMDA – a type of receptor for glutamate in the brain

PET Positron Emission Tomography – a type of scan

Placebo controlled Non-active treatment for double-blind design

p-Tau181 or 217 AD biomarker of phosphorylated Tau protein

QPCT Glutaminyl-peptide cyclotransferase is an enzyme proposed to create toxic amyloid species

RBANS Repeatable Battery for the Assessment of Neuropsychological Status (a test of mental abilities)

ROC AUC Receiver Operating Curve Area Under the Curve (1.0 ideal) – a type of statistical test to compare two methods of measurement

Tau – a brain protein

Ttau – total tau levels including both phosphorylated and non-phosphorylated tau