PULMOTECT

Pulmotect is developing PUL-042, a clinical stage, novel, pathogen-agnostic, inhaled compound (TLR 2/6 and 9 agonists) for the prevention and early treatment of viral and bacterial respiratory infections in patients with chronic debilitating conditions.

MARKET SEGMENTS

Even with current vaccines, anti-virals and antibiotics, significant unmet needs remain to better prevent and treat respiratory infections. Pulmotect technology has demonstrated activity and completed Phase I clinical trials to address these unmet needs.

COPD

- Major unmet need
- One of the 5 priorities mentioned by the WHO in Respiratory medicine
- No new treatments for exacerbations
- 24M people in U.S.
- Responsible for 5% of deaths worldwide
- 3rd cause of deaths in U.S.
- $50B direct/indirect costs

INFLUENZA

- 710,000 hospitalizations in 2014-2015
- 310,000 in 2015-2016 seasons
- 2017 = 50/100,000 pop/ week
- PUL-042 is effective against pandemic flu strains - a public health threat
- PUL-042 exhibits superior efficacy vs olsetamivir

PNEUMONIA

- Cancer patients
  - High unmet needs
  - Ongoing focus area
- Cystic Fibrosis Patients
  - Frequent respiratory infections by pseudomonas
  - Projected growth to exceed $7B by 2025
  - Potential orphan drug
- VAP/HAP

SOLUTION: PUL-042

PUL-042 is an inhaled anti-infective that has demonstrated activity against a number of respiratory infections: anthrax, SARS, Influenza, pneumococcus, pseudomonas, sendai virus and others.

- Effective in prophylaxis and treatment models – either as monotherapy or in combination with standard of care
- No indication to cause treatment-resistant strains due to its unique host-directed mechanism of action
- Multiple potential indications: reduction of exacerbations in CF and COPD, reduction of pneumonia in cancer patients, and severe hospitalized influenza (government opportunity)
- Maximum tolerated dose identified characterizing the safety profile in man in two Phase I trials
- Non-complicated manufacture and administration

POTENTIAL BENEFITS

Patients

- Reduce morbidity / mortality
- Lower costs
- No resistance expected

Physicians

- Better patient outcomes
- Ease of administration

Health Care Systems

- Decrease length of hospital stay
- Reduce disease burden

PULMOTECT

www.pulmotect.com

PUL-042 has been well-tolerated in two Phase I studies - 49 subjects dosed

STUDY 001 - SAD

- 3+3 Design
  Doubling doses from 4.2/3.9 to 68/46.4μg
- Dose related decrease in FEV_1
- Dose related increase in ANC and CRP
- Maximum tolerated dose identified
  59.5/40.6ug defined by reductions in FEV_1
- No serious adverse events;
  Most common adverse events included
  cough, secretions, minor irritations

STUDY 003 - MAD

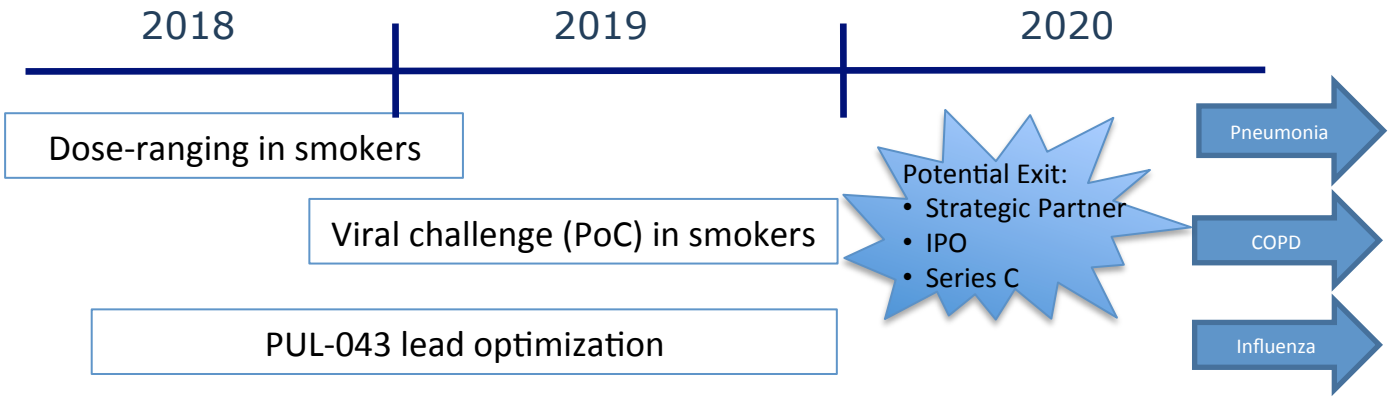
- Multiple dose cross-over design
  Used 29.8/20.3μg/day twice a week
  (projected therapeutic regimen)
- Projected minimum effective dose TBD
  likely < 29.8/20.3 μg/day
- No serious adverse events;
  Most common adverse events included
  cough, secretions, minor irritations

FUNDING HISTORY

$18M Grants
$2M Angels
$2.1M Series A

With animal efficacy and human safety milestones completed, the next objective is to gain Proof-of-Concept in man through a viral challenge study. With that foundation, optionality to go public or partner with a strategic partner will be considered to address the multiple respiratory markets for this broad-spectrum, pathogen-agnostic, host-directed breakthrough technology.

MILESTONE TIMELINE



SERIES B: $12M

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