



From research to revenues
AJ Bell "Shares" event, July 2024

Transforming kidney transplant outcomes

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What is the risk of rejection?

Current practice:

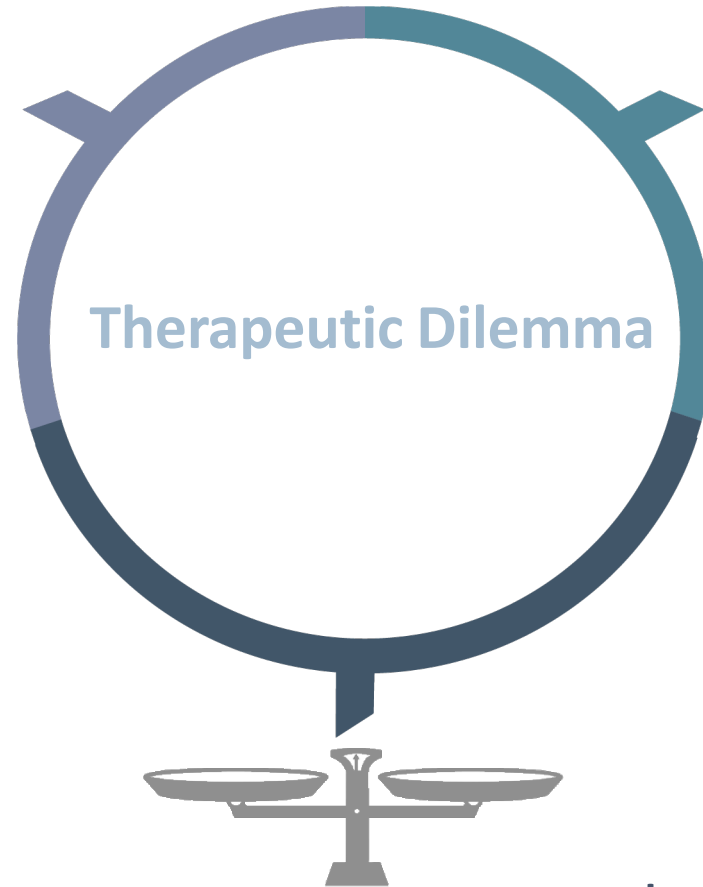
Broad Clinical Factors/Score

- Too general and largely ignored

No prognostic information

- “One Size Fits All” therapy protocol

Under-treatment can lead to
Immune System-caused rejection



Therapeutic Dilemma

Is the graft being rejected or damaged?

Current practice:

Standard of Care

- Misses 30% of all cases

Competitive tests

- cfDNA is non-specific
- Measures the “debris” after damage has occurred

Over-treatment can result in
drug toxicity, viral infections and malignancy

Clinicians needs better diagnostics to replace the guesswork

RNA is a flexible molecule that carries instructions from DNA and plays a central role in turning genetic information into your body's proteins.

These proteins perform an important role in cell function and signaling in biological pathways.





clarava™

Pre-Transplant Prognostic

mRNA 10 gene Signature

Advantages:

- Provides risk score for early acute rejection within the first 6 months
- Informs therapeutic modulation
- No current competitors



Patients now can
be prescribed
treatment at an
appropriate level



protega™

Fibrosis/Long-term Prognostic

mRNA 9 gene Signature

Advantages:

- Replaces biopsy on a monitoring basis



tutivia™

Post-Transplant Prognostic

mRNA 17 gene Signature

Advantages:

- Specific real time diagnostic of immune activation before irreversible damage occurs
- Sequencing is more accessible and stable than microarray

AUTO-IMMUNE DISEASES

PRE-TRANSPLANT | EARLY-STAGE DAMAGE | LATE-STAGE DAMAGE

clarava → tutivia™ → protega

New Technology

Other development
e.g. Urine Program

New Technology

Clinician's Platform

Core Kidney Transplant business

Opportunity to expand into Other Organs

Data generated can be used for Research Collaborations

We have transitioned from research company to focus on monetisation of diversified revenue lines

Core Testing Business

PRE-TRANSPLANT

EARLY-STAGE DAMAGE

LATE-STAGE DAMAGE

☑️ clarava

- Deceased Donor
- Living Donor

Licensing Revenues

☑️ tutivia™

- Existing claims
- Delayed Graft Function (DGF)
- Monitoring

Direct Revenues

protega

- Fibrosis and long term outcome

To Be Determined

Services Business

Research Asset

- Wet Lab
- Samples and Data
- Other RNA-based
- Other Bioinformatic

Services Revenues

INCOME STREAMS

Other product development: Urine program, other organs, autoimmune



- Completed transfer milestones for Clarava™ to Thermo Fisher, generating cash inflows and recognised revenue.
- Thermo Fisher presented the rebranded Pre-Transplant Risk Assessment (“PTRA”), formerly Clarava™, to the clinical community at the American Transplant Conference (“ATC”) in June.
- Remaining milestones on track, subject to launch plans of Thermo Fisher.

2. Direct revenues: Tutivia™ is meeting critical clinical needs for early, reliable and actionable information



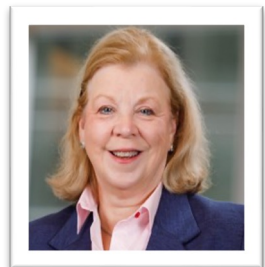
“In the first few months post-transplant there are many rejection events and yet in my opinion we have not really had a biomarker that can assist at this critical time. Tutivia™ is able to give the clinician reliable test results as soon as the first week post transplant and so is an early biomarker test which addresses this critical need”

Dr Nicolae Leca Professor, Medical Director, Kidney and Pancreas Transplant - University of Washington



“Having a risk score is helpful in clinic time management. Low risk patients can be monitored under standard protocols, but the high-risk patients will need more focus and more time from the clinician who has the expertise to give the patient the best treatment possible. Tutivia™ demonstrated that a patient reporting a high-risk score was six times more likely to have a rejection than the patient with a low-risk score in a trial where the study design was of a high level and the results could be trusted to be representative of what we experience in our clinics”

Dr Rich Formica, Professor of Medicine (Nephrology) and Professor of Surgery (Transplant), Director of Transplant Medicine - Yale University



“Tutivia™ has been demonstrated to accurately predict the development of early acute rejection in the kidney transplant recipient, with an impressive positive predictive value of 60%, even better than our usual monitoring tool of serum creatinine. This test performance means that patients may be monitored with a blood test, with more convenience and ease, giving both patient and physician information that is both reassuring and actionable.”

Dr. Roslyn Bernstein Mannon is a Professor of Medicine, Pathology and Microbiology at the University of Nebraska Medical Center, Vice-Chair for Research and Associate Chief of Nephrology for Research.



- 12-month visits complete.
- Team now in the process of data cleaning with analysis due in 1H 2025.
- Cohort expanded for the 24-month visits and some samples already collected.

Urine program, other organs, autoimmune

- Medium to longer term product development.

Research Asset

- Urine agreement with Thermo Fisher proves the value in our data.
- Collaboration opportunities expand our recognition and reach.
 - Research project funded via a 4-year federal research grant to The Westmead Institute for Medical Research in Australia.
 - Other collaborations at various stages, and some are confidential.



Strong track record of delivery



Tests commercialized with pipeline



Diversified revenue streams



Large addressable market and critical need



Advanced regulatory and reimbursement



aims to be at the centre of RNA Signature testing

clarava™

tutivia™

protega™

