

# **RELIEF THERAPEUTICS**

SIX: RLF, OTCQB: RLFTF, RLFTY

CORPORATE PRESENTATION

August 2023



Certain information set forth in this presentation contains "forward-looking information," including "future-oriented financial information" and "financial outlook," under applicable securities laws (collectively referred to herein as "forward-looking statements"). Except for statements of historical fact, the information contained herein constitutes forward-looking statements and includes, but is not limited to, the (i) projected financial performance of the RELIEF THERAPEUTICS Holding SA ("Relief" or the "Company"); (ii) the expected development of the Company's business, projects and joint ventures; (iii) execution of the Company's vision and growth strategy, including with respect to future M&A activity and global growth; (iv) sources and availability of third-party financing for the Company's projects; (v) completion of the Company's projects that are currently underway, in development or otherwise under consideration; (vi) discussion of the Company's material agreements; and (vii) future liquidity, working capital and capital requirements. Forward-looking statements are provided to allow potential investors and other parties the opportunity to understand management's beliefs and opinions in respect of the future so that they may use such beliefs and opinions as one factor in evaluating an investment or other matters.

These statements are not a guarantee of future performance and undue reliance should not be placed on them. Such forward-looking statements necessarily involve known and unknown risks and uncertainties, which may cause actual performance and financial results in future periods to differ materially from any projections of future performance or results expressed or implied by such forward-looking statements.

Although forward-looking statements contained in this presentation are based upon what management of the Company believes are reasonable assumptions, there can be no assurance that forward-looking statements will prove to be accurate, as actual results and future events could differ materially from those anticipated in such statements. The Company undertakes no obligation to update forward-looking statements if circumstances or management's estimates or opinions should change except as required by applicable securities laws. The reader is cautioned not to place undue reliance on forward-looking statements.

# **INVESTOR HIGHLIGHTS**

# We aim to provide relief to patients with unmet medical needs in select specialty and rare diseases

Strategic Development	<ul> <li>Therapeutic focus on rare indications for metabolic, skin, lung &amp; genetic diseases</li> <li>Targeting lucrative niches characterized by high margins and low clinical risk</li> <li>Core competences drive development of differentiated products</li> <li>505(b)(2) preferred development pathway for near-term products</li> <li>Obtain Orphan Drug protection and patent exclusivity</li> </ul>	
Diversified Portfolio	<ul> <li>Marketed, revenue-generating products</li> <li>Highly targeted clinical development pipeline consisting of risk-mitigated assets</li> <li>Several legacy products commercialized via licensing and distribution partners</li> </ul>	
Market Potential	<ul> <li>Optimize therapeutic potential with application of platform technologies, drug delivery systems or novel dosage forms</li> <li>Proprietary, globally patented drug delivery platform technologies</li> <li>Physiomimic Technology™ and Tehclo Nanotechnology® platforms</li> <li>Late-stage development opportunities in other specialty or rare therapeutic areas, partnerships and out-licensing</li> </ul>	
Recent Milestones	<ul> <li>PKU GOLIKE® for phenylketonuria: U.S. launch in late 3Q 2022, new PKU GOLIKE Bar™ in early 1Q 2023, additional products in development</li> <li>OLPRUVA™ for urea cycle disorders: FDA approved in December 2022; launched in U.S. in Q3 2023</li> <li>RLF-TD011 in epidermolysis bullosa: First patients enrolled in investigator-initiated clinical trial in early 2023</li> <li>RLF-100®: Positive 12-month stability data for inhaled and IV formulations; amendment to provisional patent application filing</li> </ul>	
Financials	<ul> <li>U.S. \$12.3 million in cash as of April 30, 2023; CHF 5 million private placement in June 2023; Cash runway into 2024</li> <li>Reverse split implemented in early May; Listing on U.S. stock exchange planned in second half of 2023</li> </ul>	

### **OUR MISSION**

Advance treatment paradigms and deliver improvements in efficacy, safety and convenience to benefit the lives of patients living with chronic, debilitating diseases



Commercial portfolio of legacy Rx products and medical foods

Established, efficient global sales organization focused on rare diseases and specialist prescribers

Share of profit stream from recently approved OLPRUVA™ marketed by ACER

Leverage core drug formulation and drug delivery expertise to advance new assets in rare disorders

Deploy sales force across more rare disease products, which will be sourced via BD and InveniAl collaboration

Launch a disruptive, potentially curative portfolio of genetic medicines (employing gene therapy and/or genome editing)



### **PIPELINE**





Optimized Therapeutic

Additional Indication

Orphan Drug Designation Granted

Orphan Drug Designation Pending

### **INVENIAL Collaboration**

# Leveraging AI and big data analytics to identify drug candidates for optimization & development

#### Collaboration highlights



Initial focus on identification of promising drug candidates to treat rare and specialty diseases with approved APIs (new IP to be owned by Relief Therapeutics)



Capital-efficient & risk-mitigated approach to product development: initial up-front payment of U.S. \$500,000, success-based opt-in fees and milestone payments, sales-based royalty payments of 3%



Complementary to Relief Therapeutics' existing capabilities in research, drug development & internal business development



InveniAI is responsible for conducting initial validation of the product concepts for presentation to Relief Therapeutics



Pursuing additional opportunities in rare and specialty diseases through business development partnerships

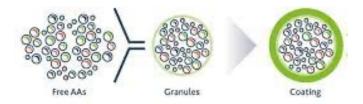




# OPTIMIZING THERAPEUTIC POTENTIAL

Physiomimic<sup>™</sup> and Tehclo <sup>™</sup> technologies

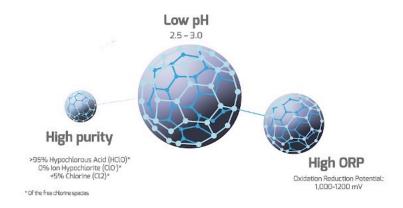




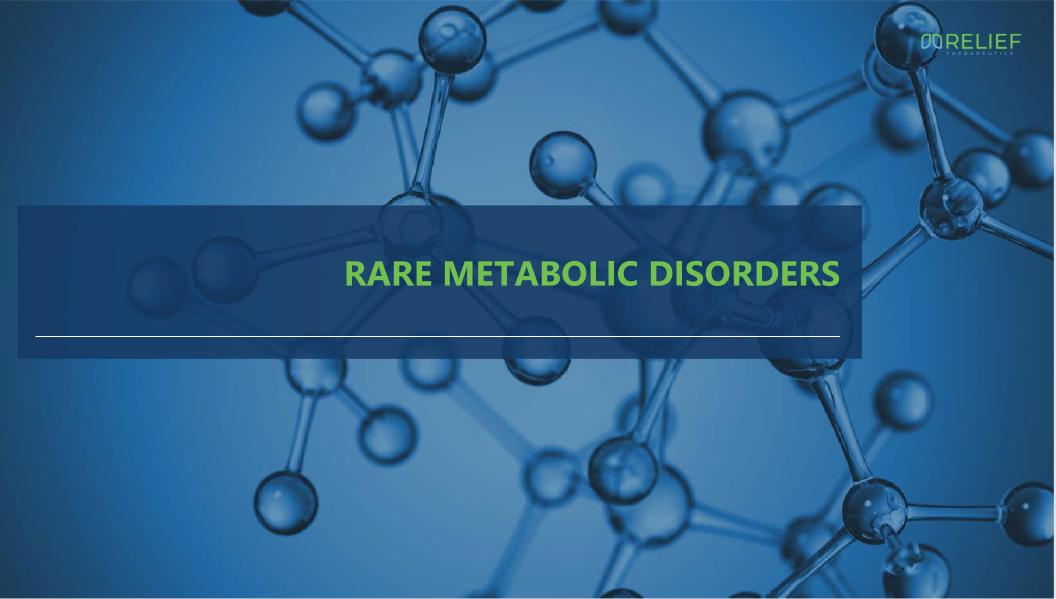
Free amino acids are coated with two plant-based ingredients

Coating acts as a barrier, helping to ensure prolonged release and physiological absorption









# PHENYLKETONURIA (PKU): A LIFELONG METABOLIC DISEASE

### Requires limited diet to preserve neurologic function

- PKU is an inborn error of metabolism (IEM) condition identified via newborn screening, which involves an inability to metabolize the amino acid phenylalanine (Phe) found in many foods
- Untreated PKU can lead to irreversible brain damage and marked intellectual disability in newborns (neurological problems e.g., seizures, tremors; behavioral/emotional in older children, adults)
- Patients require supplementation of amino acid-based foods for special medical purposes (FSMPs) to prevent protein deficiency and optimize metabolic control
- Compliance suffers as current FSMPs have poor taste and unpleasant odor, leading to diminished social interaction
- Chronic medical nutrition therapy required to maintain blood Phe levels of 120-360  $\mu$ mol/L

### PKU in U.S. and Europe

#### Incidence:

- 1 in 10,000-15,000 births
- ~500 newborns/year

#### Number treated:

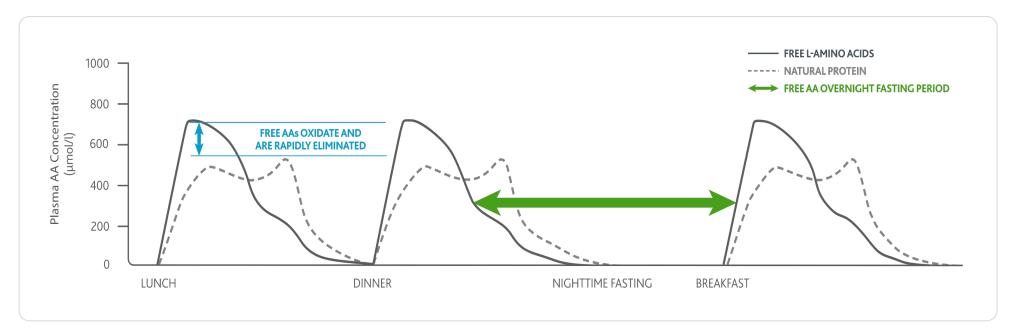
- ~35,000-40,000 total patients
- ~12,000-15,000 require regular care



# CURRENT FSMPS LIMITED BY QUICK PROTEIN ABSORPTION

### Extended periods of low protein absorption may lead to muscle break down

- Free amino acids (AAs) in medical foods not absorbed like natural proteins
- Quick absorption of free AAs results in rapid oxidation and elimination
- This can lead to low plasma concentration of AAs for extended periods, particularly overnight\*





# PKU GOLIKE™ OVERCOMES ISSUES WITH CURRENT FSMPS

Convenient nutrition for patients with PKU

Contains all 19 amino acids that people with PKU need to maintain neurological and muscular health

Fortified with 27 essential vitamins and minerals, including ones normally found in protein-rich foods like iron, calcium, and vitamin B12

Convenient, easy to carry bars and sachets help active kids support their nutritional needs

# Go further with PKU GOLIKE

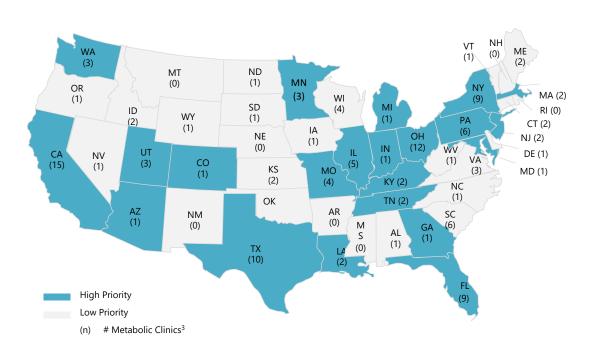






### PKU GOLIKE® WELL-POSITIONED IN AN ATTRACTIVE MARKET

### 85% of PKU Patients are managed in 22 states



Catalyst Center. States Statutes and Regulations on Dietary Treatment of Disorders Identified through Newborn Screening. 2015; 2. US Provider PKU Claims Data. 2021. and state population data; 3. www.npkua.org/Resources/Find-a-Clinic; 4. US Provider UCD Claims data. 2021.

### Market Opportunity

Approximately 350,000 people suffer from PKU\* globally Global PKU FSMP market totals ~\$400 million annually

#### Differentiated Profile

First FSMP developed with our Physiomimic™ technology Potential best-in-class

Offers diversity in food options, improved metabolic management & better compliance for PKU patients of all age groups

#### Commercialization

U.S. Commercial launch October 2022 Experienced, focused market access team (4 territories) PKU GOLIKE® commercial rollout ongoing in Europe, favorable reimbursement



### RLF-OD032

### Liquid formulation of existing prescription medication for the treatment of PKU

- RLF-OD032 has potential to:
  - Increase patient acceptance & compliance among current patients
  - Enable easier administration by the patient or caregiver



- Advantages of liquid suspension over powdered formulation
  - Portable, ready-to-use vs mixed, time sensitive administration
  - Convenient small volume dosing of 3 ml-6 ml orange flavored liquid vs. powder packets mixed into 4-8 oz of water or juice or high volume of tablets
  - Packaged in a 30 ml bottle with room temperature storage



- Status
  - Relief holds global rights, pursuing development, regulatory approvals ex-U.K.
  - Potential value driver in 2025
  - Annual revenue potential ~\$50M (gross)
  - Additional details to be announced in 2H 2023







### **UREA CYCLE DISORDERS**

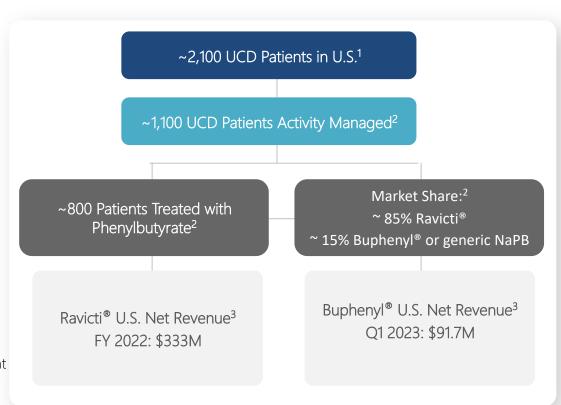
### Rare metabolic genetic diseases that lead to toxic build-up of NH4+ (ammonia)

### **Urea Cycle Disorders (UCDs)**

- UCDs are caused by mutations that result in a deficiency of 1 of 6 enzymes or 2 transporters of the urea cycle
- These enzymes are responsible for removing ammonia from the bloodstream
- Long-term toxic ammonia levels can lead to liver and brain damage, severe ketoacidosis, and can even be fatal when left untreated
- Non-compliance with current therapies is a major issue

### Maple Syrup Urine Disease (MSUD)

- Metabolic genetic disease that leads to toxic build-up of leucine and other branched-chain amino acids
- ~800 eligible patients in the U.S.
- Advantageous orphan pricing with robust program to support patient access and reimbursement
- No approved MSUD treatments





<sup>2</sup> HealthVerity Payer claims data analysis



<sup>3</sup> https://ir.horizontherapeutics.com

### CURRENT UCD TREATMENTS HAVE CHALLENGES

### Patients and physicians desire effective, tolerable & affordable options

### Sodium Phenylbutyrate (BUPHENYL®, generics)

Aversive taste and odor<sup>2</sup>

64% of patients reported difficulty due to taste<sup>3</sup>

Physicians reported 25-33% of patients took less than target dose due to tolerability<sup>3</sup>

Only 25% of patients indicated that they never miss a dose<sup>3</sup>

46% of patients reported taste as the reason for discontinuation<sup>3</sup>

#### RAVICTI®

Consistently listed as one of the "10 Most Expensive Drugs in the World"<sup>4</sup>

Pricing has risen to levels considered challenging<sup>5</sup>

Reports of difficult access, unaffordability, and forced switches back to sodium phenylbutyrate<sup>5</sup>

Some patients are not meeting the treatment goal of <0.5 ULN (~17.5  $\mu$ mol/L)<sup>6</sup>



<sup>1</sup> PHEBURANE is approved by FDA for UCDs but not currently marketed in the U.S. (based on available information)

<sup>2</sup> Peña-Quintana L, et al. Profile of sodium phenylbutyrate granules for the treatment of urea-cycle disorders: patient perspectives. Patient Prefer Adherence. 2017 Sep 6;11:1489-1496.

<sup>3</sup> Shchelochkov et al., *Molecular Genetics and Metabolism Reports* 8 (2016) 43-47. 4https://pharmaoffer.com/blog/10-most-expensive-drugs-in-the-world/

<sup>5</sup> Acer Therapeutics Market Research

<sup>6</sup> Nicola Longo & Robert J. Holt (2017) Expert Opinion on Orphan Drugs, 5:12, 999-1010.

### OLPRUVA™: DIFFERENTIATED ON TASTE & ACCESS

	Phenylbutyrate Formulations		
	Approved	Marketed Products	
	OLPRUVA <sup>1</sup>	RAVICTI	BUPHENYL <sup>2</sup>
Efficacy/Safety in UCDs	✓	✓	✓
Palatability/Compliance	✓	✓	<b>*</b> **
Pricing (per patient/per year)	~\$600,000	Avg \$950K***	Avg \$300K***
Formulation	Polymer-coated (packets)	Oil (tablespoons)	Powder Tablets (up to 40 tables/day)
Packaging	Portable pre-measured packets	Bottle and syringe (bulk container)	Bottle (bottle container)

Pricing projected to be significantly lower than current RAVICTI® price

Robust patient support services program to address barriers to care

Payer engagement strategy to support adoption

Commitment to support the UCD community and on-going IEM research



<sup>1</sup> OLPRUVA is approved by the U.S. FDA for UCDs (Dec. 22, 2022)

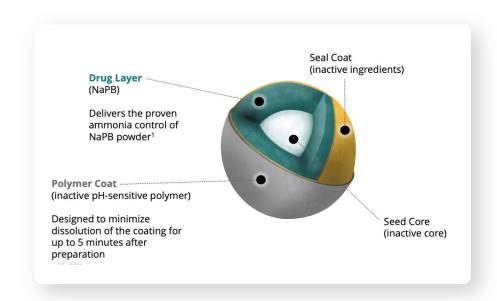
<sup>2</sup> PHEBURANE is approved by U.S. FDA for UCDs but not currently marketed in the US (based on available information)

<sup>\*\*</sup> Shchelochkov et al., Molecular Genetics and Metabolism Reports 8 (2016) 43-47

<sup>\*\*\*</sup> RAVICTI® and BUPHENYL® annualized price per patient is based on patient weight and WAC price

# OLPRUVA™ (SODIUM PHENYLBUTYRATE) PACKETS

Taste-masked, immediate-release formulation of sodium phenylbutyrate (NaPB)



#### Profile

Small molecule

Microparticles consisting of core center, layer of active drug and tastemasking coating that quickly dissolves in the stomach but persists for up to five minutes in the mouth

Avoids bitter taste while allowing for rapid systemic release Can be taken in fed or fasted state

#### **Economics**

60% / 40% profit split in favor of Relief in U.S., Brazil, Turkey and Japan Acer is responsible for all U.S. commercial infrastructure Relief Therapeutics to pay Acer a 15% royalty on net sales in ROW

### FDA Approved

U.S. FDA approved in December 2022 for UCD indication Orphan Drug designation in U.S. and EU for MSUD indication





# EPIDERMOLYSIS BULLOSA (EB)

A rare, debilitating skin disease





Epidermolysis Bullosa (EB) is a group of rare, genetic, life-threatening connective tissue disorders

Characterized by skin blistering throughout the body

Risk of severe impact to internal organs

EB afflicts ~30,000 patients in the EU and ~20,000 patients in the U.S. (EB Research Partnership)



### RLF-TD011: POTENTIAL BEST-IN-CLASS

### Differentiated profile

- RLF-TD011 is a proprietary formulation of hypochlorous acid (HClO) sprayable solution
  - First product specifically developed for EB patients
  - Combines powerful anti-microbial action with anti-inflammatory properties
  - Provides a complete treatment to prevent/reduce infections and inflammation via modulation of the wound microenvironment to accelerate a faster physiological wound healing rate
  - Touch-free topical dosing
- Shown to be well-tolerated in multiple clinical trials for wound care, favorable safety profile
- Orphan Drug designation by the U.S. FDA
- Investigator-initiated clinical trial was initiated in February 2023
- High margin opportunity in rare dermatology
- Estimated ~\$1B/year market potential in the U.S.\*



### RLF-TD011: EPIDERMOLYSIS BULLOSA CASE STUDY

### Demonstrated improvement in skin blistering, tissue repair

A 32-year-old junctional EB (JEB) patient had a two-year-old chronic, lower leg wound that was unsuccessfully treated with the following: Amukina, Citrizan gel, Iruxol, Gentalyn beta, Adaptic, Fitostimoline dressing – with no positive benefits

RLF-TD011 was applied twice-daily in conjunction with an inactive dressing such as Adaptic





#### After only two weeks of treatment (applied twice-daily):

- Complete wound healing
- Skin irritation improvement
- Strong reduction of itching

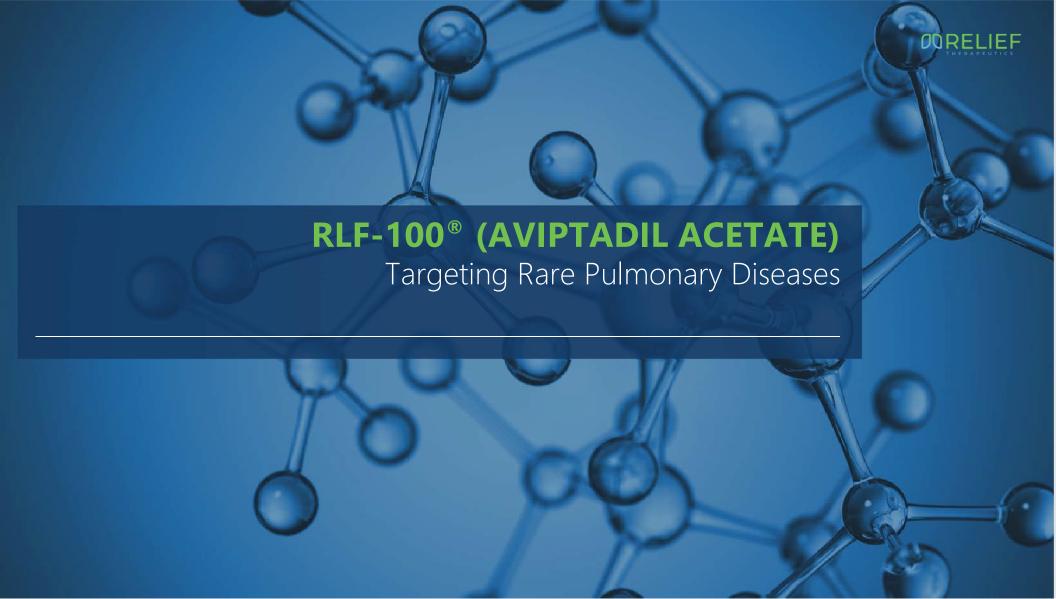




#### After four weeks of treatment.

- Wound area is clearly improved with increased presence of granulation tissue
- Inflammation and exudate are strongly reduced
- Patient reports a reduction of pain and burning sensation at and around the wound site and a preference for RLF-TD011's easy-to-use spray dosage form for wound management





# VASOACTIVE INTESTINAL PEPTIDE (VIP)

### A polypeptide comprised of 28 amino acids affecting the diameter of blood vessels

VIP is a widely distributed neuropeptide

First identified in 1970 in the intestine and in the central and peripheral nervous system; acts as a neurotransmitter or neuromodulator in many organs and tissues, including heart, lung, thyroid gland, kidney, immune system, urinary tract and genital organs (Mukherjee et. Al., 2021).

With different physiological activities

The widespread distribution of VIP is correlated with its involvement in a variety of physiological activities.

VIP plays a key role in the lungs

70% of VIP is localized in the lungs and its deficiency is linked to lung diseases.

The key role is being conducted in the alveoli, as it exhibits homeostatic functions in the respiratory system.\* It has also bronchodilator and vasodilator effects and can induce housekeeping mucus secretion via submucosal origin.\*\*

Immunomodulator activity

>> It has an immunomodulatory action due to the high expression of its receptor by all immune cells.



### AVIPTADIL ACETATE: A SYNTHETIC FORM OF VIP

### 20-year history of safe use

#### A Multi-Modal Mechanism of Action (MOA)

#### In chronic granulomatous lung diseases

- Aviptadil acetate is the only endogenous, NfKB selective inhibitor able to reduce and inactivate Th1 and Th17 in CD4+ cells
- CD4+ cells are at the basis of cytokine storm and granuloma formation in certain lung diseases
- Sarcoidosis, berylliosis and checkpoint inhibitorinduced pneumonitis (CIP) are similar in the pathogenesis of granulomatous diseases of the lung

#### In acute respiratory distress syndrome (ARDS)

- Able to protect and restore the alveolar functionality
- Heavily concentrated in the lung and binds specifically its VPAC1 receptor on alveolar type II cells
- Specific activity on target cells involved in ARDS



# Potential pipeline-in-a-product for multiple respiratory disorders

TWO FORMULATIONS	<ul> <li>Proprietary, patent-protected inhaled and intravenous (IV) formulations</li> <li>For use in intensive care units (ICUs) or chronic contexts for specific lung diseases</li> <li>Cost-effective manufacturing that can be rapidly scaled up</li> </ul>
INHALED FOR CHRONIC LUNG DISEASES	<ul> <li>Maximize clinical benefits in the target affected organ (lung)</li> <li>Minimize adverse events related to systemic activity of aviptadil acetate (e.g., hypotension)</li> <li>Home-based treatment → patient-friendly</li> </ul>
INTRAVENOUS (IV) FOR ARDS	<ul> <li>Secure an efficient delivery of the active compound in severe conditions</li> <li>Adverse events under control in hospital setting</li> <li>Hospital-based treatment → HCP-friendly</li> </ul>

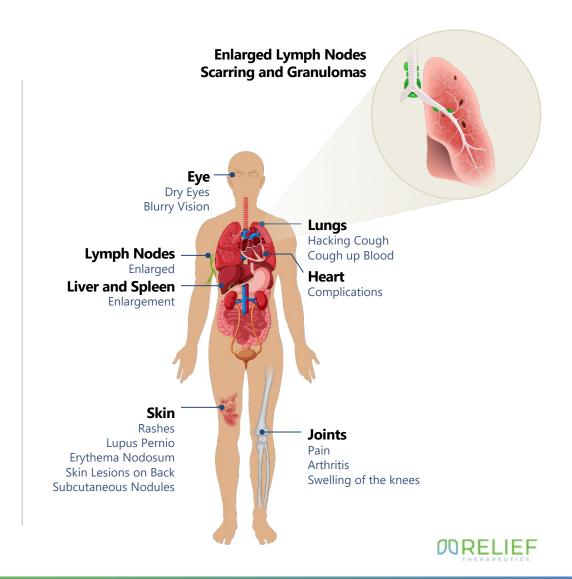


# **PULMONARY SARCOIDOSIS**

Sarcoidosis is a rare disease in which the inflammatory process involves the alveoli (air sacs), small bronchi, and small blood vessels

As sarcoidosis progresses, small lumps, or granulomas, appear in the affected tissues which tend to remain inflamed and become scarred (fibrotic)

Granulomas are structured masses composed of activated immunological cells



### Demonstrated anti-inflammatory properties in sarcoidosis

# Inhaled Vasoactive Intestinal Peptide Exerts Immunoregulatory Effects in Sarcoidosis

Antje Prasse<sup>1</sup>, Gernot Zissel<sup>1</sup>, Niklas Lützen<sup>1</sup>, Jonas Schupp<sup>1</sup>, Rene Schmiedlin<sup>1</sup>, Elena Gonzalez-Rey<sup>2</sup>, Anne Rensing-Ehl<sup>3</sup>, Gerald Bacher<sup>4</sup>, Vera Cavalli<sup>4</sup>, Dorian Bevec<sup>4</sup>, Mario Delgado<sup>2\*</sup>, and Joachim Müller-Quernheim<sup>1\*</sup>

#### **TRIAL**

- An open-label proof-of-concept trial (Avisarco II) in 20 patients with histologically proved sarcoidosis and active disease
- Nebulized RLF-100® was administered for 4 weeks
- Study not designed to quantify cough and dyspnea by symptom score:
  - o 12 out of 20 patients suffered from cough
  - o 14 out of 20 patients suffered from dyspnea on exertion

#### **RESULTS**

- RLF-100® significantly restored immune tolerance by promoting regulatory T-lymphocytes, improved CD4/CD8 ratio and normalized TNF-α production
- Improvement was also seen in sarcoidosis-relevant biomarkers
  - 9 of 12 patients who suffered chronic cough, 6 of 14 patients with dyspnea reported cough symptoms
  - No deterioration reported in either cough or dyspnea
- RLF-100<sup>®</sup> shown to be safe and well-tolerated



### Future U.S. commercial perspectives



#### **REGULATORY**

- U.S. FDA Orphan Drug designation in pulmonary sarcoidosis (granted); berylliosis (pending); checkpoint Inhibitor-induced pneumonitis (pending); Potential for Orphan drug pricing
- Potential pivotal development initiation in early 2025
- Potential NDA submission in late 2026



#### **COMMERCIAL OPPORTUNITY**

- Both IV & inhaled formulations demonstrated 12-months of stability, demonstrating high purity levels at all temperatures tested, which is critical milestone toward potential commercialization
- Issued patent covering RFL-100<sup>®</sup> formulations valid in U.S. until 2029
- Possibility to obtain additional patent protection around novel formulations to extend commercial window beyond 2040



Relief to explore **PARTNERSHIPS** and **DISTRIBUTION AGREEMENTS** to facilitate access to RLF-100® as broadly as possible in regions wherein it does not intend to establish its own commercial infrastructure (e.g., emerging markets)



#### Additional indications

#### Berylliosis / Chronic Beryllium Disease (CBD)

An orphan lung disease caused by the inhalation of beryllium particles, dust or fumes in the workplace, resulting in severe inflammation of the lungs, coughing and increasing breathlessness (dyspnea). CBD is a clinical phenocopy of sarcoidosis. Currently there are no treatments approved for berylliosis.

The *ex-vivo* effect of RLF-100 on mononuclear cells in the setting of CBD is currently being evaluated. Together with the results from the Phase 2b sarcoidosis trial, these results would justify the therapeutic use of inhaled RLF-100 in CBD, providing a rationale for the clinical trial design in this indication.

#### Checkpoint Inhibitor-Induced Pneumonitis (CIP)

A rare, potentially fatal form of lung inflammation following treatment with immune checkpoint inhibitors (ICIs). ICIs are a type of immune therapy used to treat cancer. CIP can result in cough, dyspnea, fever, chest pain, and in severe cases, lack of oxygen in the lungs (hypoxia) and respiratory distress

The use of inhaled RLF-100 for this indication will be further evaluated to explore whether such use could enhance compliance with chemotherapy and improve outcomes for cancer patients.

#### Infectious acute respiratory distress syndrome (ARDS)

A potentially life-threatening condition in which the lungs become severely inflamed, leading to buildup of fluid in the lungs, preventing oxygen from getting to the bloodstream and the rest of the body. Infectious ARDS results from an injury or an infection (such as pneumonia, severe flu, sepsis, etc.) of the air sacs in the lung.

Inhaled RLF-100 is currently being studied in a European investigator-initiated trial for the prevention of ARDS associated with COVID-19 (Leuppi/NCT04536350), which is at an advanced stage of recruitment and slated to report top-line data in Q4 2023. Clinical trials of RLF-100 for the treatment of infectious ARDS are in development.





# WELL-ESTABLISHED INTERNATIONAL LEADERSHIP

### **Executive Management Team**



#### Jack Weinstein, Chief Executive Officer

30+ year veteran of financial sector and healthcare industry. 18 years experience in healthcare-focused investment banking on Wall Street. Former CFO of Catalyst Pharmaceuticals, a Nasdaq-listed biopharma.



#### Paolo Galfetti, Chief Operating Officer, President of Relief Europe

More than 20 years of life science experience, including managerial, R&D, business development, licensing, and strategic planning. Nearly 17 years as CEO of APR Applied Pharma Research S.A.. Chartered financial analyst.



#### Jeremy Meinen, Chief Financial Officer and Treasurer

Swiss-certified public accountant. Expertise in financial consulting and controlling functions in various industries, former licensed audit expert.



#### Marco Marotta, Chief Business Officer

International experience in operations, sales and business development within the pharmaceutical sector. Former corporate director, business development and licensing at APR Applied Pharma Research S A



#### Serene Forte, M.D., MPH, Senior Vice President, Head of Genetic Medicine

Accomplished scientific and clinical leader with more than 20 years of direct leadership experience. Successful record blending scientific education and business acumen to drive global medical affairs, commercial strategy and patient advocacy. Extensive experience in the field of genetic medicines with direct involvement in the strategic launch for several gene therapy companies.



#### Jean-Philippe Maréchal, Global Director of Marketing & Sales (ex-U.S.)

Seasoned marketing and sales executive with 23+ years of success in the pharmaceutical and biotech industry. Previously served as immunology therapeutic unit head & integrated solution lead at UCB France Also formerly held positions at Recordati Rare Diseases, AOP Orphan in Vienna, Bayer, LEO Pharma, Servier & Sanofi.



#### Chris Wick, U.S. Country Lead

Proven pharmaceutical sales professional with over 20 years' experience in big pharma. Formerly regional sales director for Alexion Pharmaceuticals, leading the launch of Soliris®. Previously with GlaxoSmithKline and Novartis



# EXTENSIVELY EXPERIENCED, ACTIVE BOARD

#### **Board of Directors**



Ram Selvaraju, Ph.D., M.B.A. Chairman of the Board

Managing director & senior healthcare analyst, H.C. Wainwright & Co., equity research division

17 years of exceptional experience as a leading biopharma sell-side equity research analyst on Wall Street

Ranked #1 across all sectors for portfolio return by TipRanks in 2021

Former award-winning drug discovery pharmaceutical researcher at Serono in Switzerland (acquired by Merck KGaA for \$15.6 billion in 2006)



**Tom Plitz, Ph.D.**Board Member

Former CEO of Chord Therapeutics SA, a privately-held biopharma firm that Merck KGaA acquired in December 2021

20+ years of R&D experience in senior management positions in the pharmaceutical industry Former chief scientific officer at Wilson Therapeutics, a rare diseasefocused firm acquired in 2018 by Alexion (now part of AstraZeneca) for \$855 million



**Patrice Jean, Ph.D.**Board Member

Chair of Hughes Hubbard's Life Sciences group

More than a decade of experience counseling leading pharmaceutical, chemical, and startup biotechnology companies in all areas of patent law



# **Michelle Lock**Board Member

COO of Covis Pharma Group
Nearly 30 years of
biopharmaceutical strategic,
operational and commercial
experience, including 24 years at
Bristol-Myers Squibb and
subsequently as head of Europe
and International at Acceleron
Pharma, which Merck acquired
for \$11.5 billion in late 2021
Honorary ambassador between
Switzerland and the U.S. since
2018



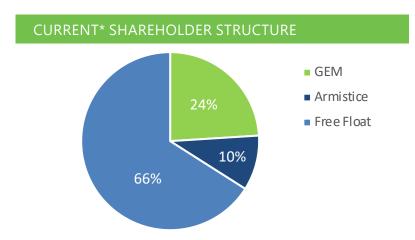
### CORPORATE INFORMATION

Sufficient resources to support current clinical development programs across multiple indications

RELIEF SHARES – LISTED ON SIX AND U.S. OTCQB			
FIGURES*			
SIX	RLF		
OTCQB:	RLFTF		
OTCQB: (U.S. ADR)	RLFTY		
Shares outstanding**	12,218,439		
Options outstanding	182,283		
Warrants outstanding	1,800,000		

#### **FINANCING PLANS / OPTIONS**

- Equity transactions
- Share subscription facility of up to CHF 50M (U.S.~\$50M) in place
- Additional development and commercialization partnerships



- Available cash position as of April 30, 2023: ~U.S \$12.3M
- CHF 5M private placement completed in June 2023
- Cash runway into 2024
- Low effective tax rate (Swiss Domicile): 14%



U.S. stock market exchange listing 2H 2023

Operating cash flow breakeven by Q1 2026 driven by revenue from PKU GOLIKE®, OLPRUVA™ and other products



### **UPCOMING CATALYSTS**

### News flow and inflection points

#### **Q2**<sup>23</sup>

- RLF-100® (aviptadil acetate) 12-month stability data
- New GMP-compliant lab in Balerna operational and approved by Swissmedic
- CHF 5M U.S. private placement
- Long-term, exclusive distribution agreement with WODA for PKU GOLIKE® in the Middle East

#### Q3<sup>23</sup>

- Expanded U.S. distribution agreement with Pentec Health for PKU GOLIKE®
- OLPRUVA™ U.S. commercial launch
- Initiation of pilot bioequivalence study for RLF-OD032 for the treatment of PKU
- FDA pre-IND meeting for RLF-OD032 for the treatment of PKU
- Initiation of toxicological studies in RLF-100<sup>®</sup> (aviptadil acetate)

#### Q4<sup>23</sup>

- Data release from PKU GOLIKE<sup>®</sup> clinical trial(s)
- Data release from pilot bioequivalence study with RLF-0D032 for the treatment of PKU
- U.S. Nasdaq listing

#### Q1`24

- RLF-TD011 IIT in pilot study data in EB (Paller / NCT05533866)
- Initiation of pivotal bioequivalence clinical program with RLF-OD032 for treatment of PKU
- Initiation of enrollment in RLF-100<sup>®</sup> (aviptadil acetate) Phase 1 trial in sarcoidosis as required by FDA



