

Intravenous Trappsol® Cyclo™ in  
patients with Niemann Pick Disease type  
C1: Updates on the Results from Phase I  
and Phase I/II studies and the  
international Phase III pivotal Transport  
NPC trial

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Patient Group Meeting  
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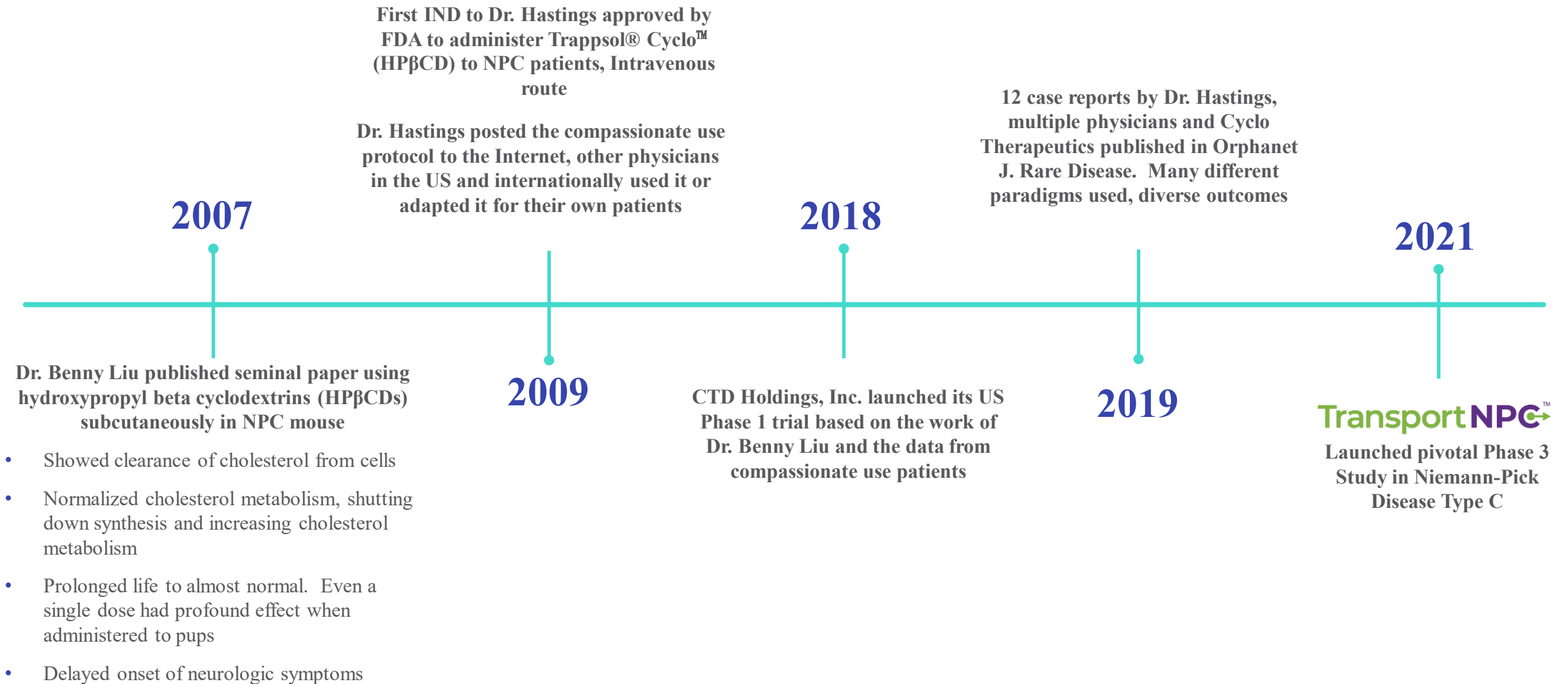
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# Background



# NPC: A Debilitating Disease with Fatal Outcome

- Rare, fatal and progressive genetic disorder affecting notably the brain, liver, spleen and lungs.
- Defect in the NPC1 (95% of patients) or NPC2 (5%) protein affects cholesterol transport
- Accumulation of lipids (cholesterol, sphingomyelin, sphingosine and glycosphingolipids) within the endosome
- Impaired intracellular lipid trafficking in major tissues and organs
- Extreme clinical heterogeneity with variable hepatic, pulmonary, neurological, and psychiatric manifestations at presentation, including auditory loss
- Major impact on QoL

## Incidence

1/100,000 (~35 per year in U.S.)

## Age at Time of Diagnosis

- ~ 3% are age 3 and below
- ~ 97% are age 3 and above
- ~ 60% age 16 and above

## Median Survival

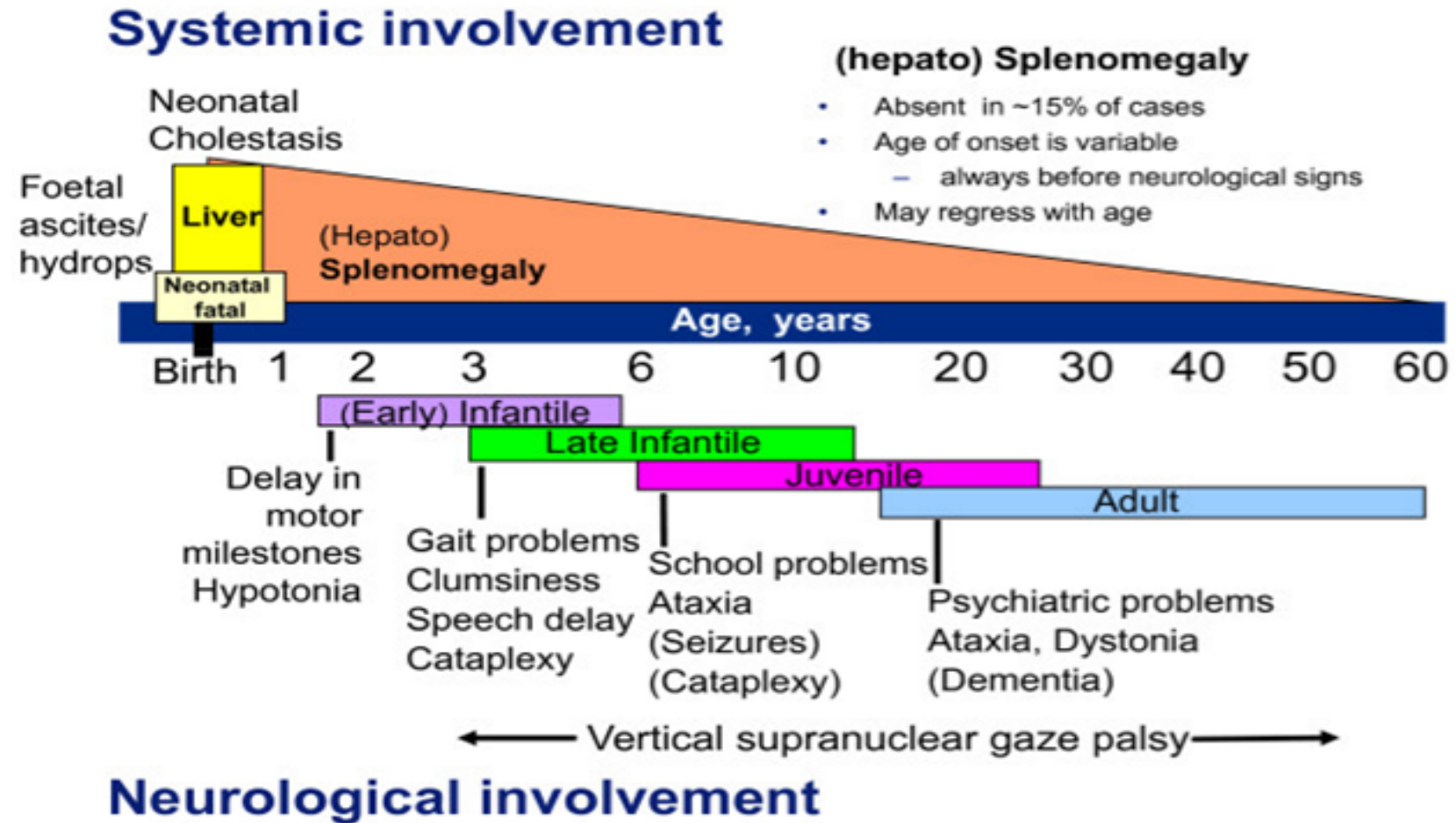
- Early Infantile (2m-2): 4.6y
- Late Infantile (3-6): 9.4y
- Juvenile (7-15): 15.4y
- Adolescent/Adult (16+): 12.2y

0 U.S. Approved NPC Therapies

1 EU Approved Therapy with no systemic effects

# NPC -Systemic Manifestations Disease Presentation and Progression

- Foetal ascites/hydrops
- Neonatal Hepatic Cholestasis
- Prolonged jaundice
- Hepatomegaly
- Hepatic steatosis
- Splenomegaly
- Splenic lipid accumulation in
- Abdominal pain and tenderness
- Thrombocytopenia
- Pulmonary infiltrates
- Recurrent pneumonia
- Loss of appetite
- Failure to thrive
- Impaired growth



Vanier 2010

# NPC – Neurological Clinical Signs and Symptoms

## Central Effects

Basal Ganglia, Brain Stem, Cerebellum

- Apraxia
- Cerebellar Ataxia
- Vertical Supranuclear Gaze Palsy (VSGP)
- Dysarthria/Dysphagia
- Cataplexy
- Deafness

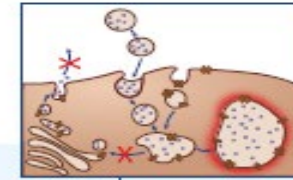
## Cortical

- Psychiatric Disorders
- Dementia
- Epilepsy

## Neurological Disease Impact

### Cellular pathology

Impaired intracellular transport and accumulation of sphingolipids and cholesterol

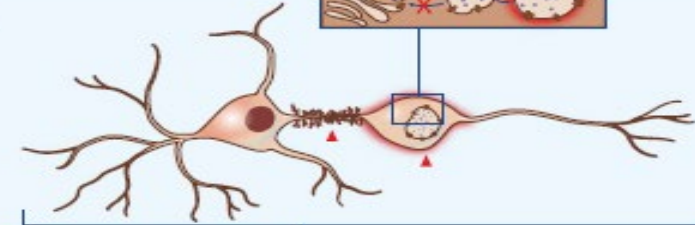


### Neuronal damage

Atypical neural dendrites

Meganeurites

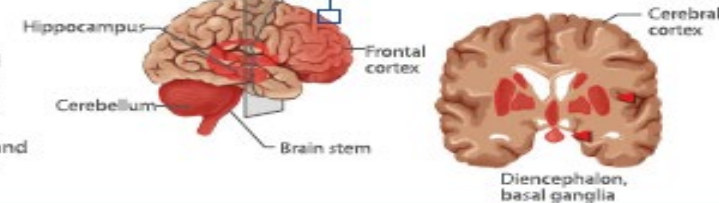
Neuronal cell death



### Brain substance changes

Various morphological brain changes affecting multiple brain regions

E.g. reduction of grey and white matter volumes



### Neurological symptoms

Multi-symptomatic and complex clinical picture involving various body functions

Developmental delay



### Psychiatric manifestations

Cognitive impairment

Atypical or early-onset schizophrenia

Mood disorders



### Premature death

Aspiration pneumonia following impaired swallowing = most common cause of death in NP-C

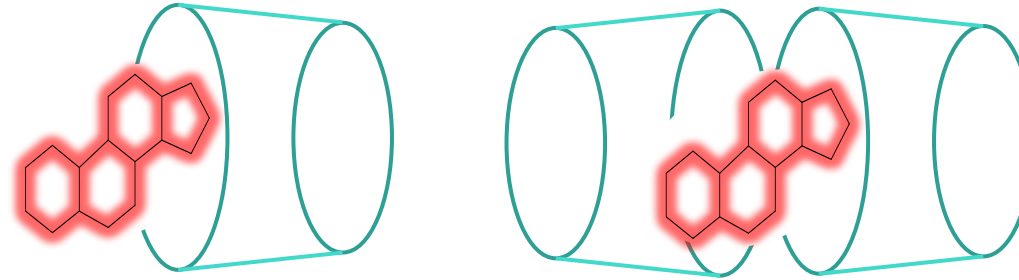
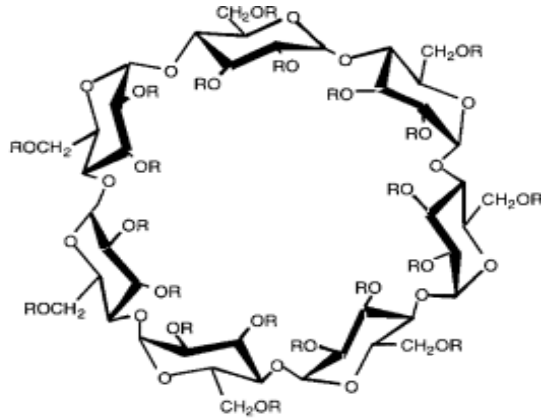
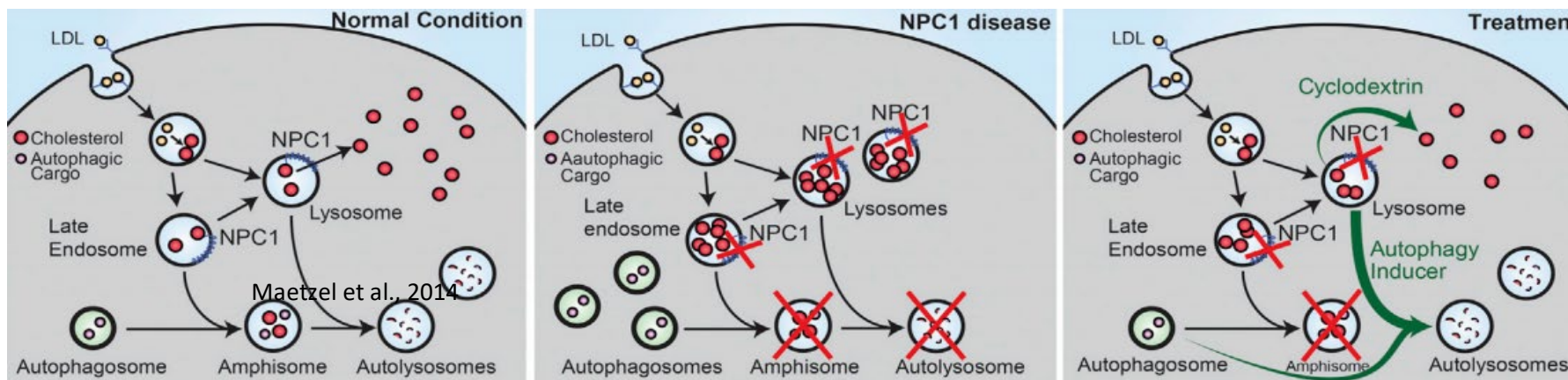


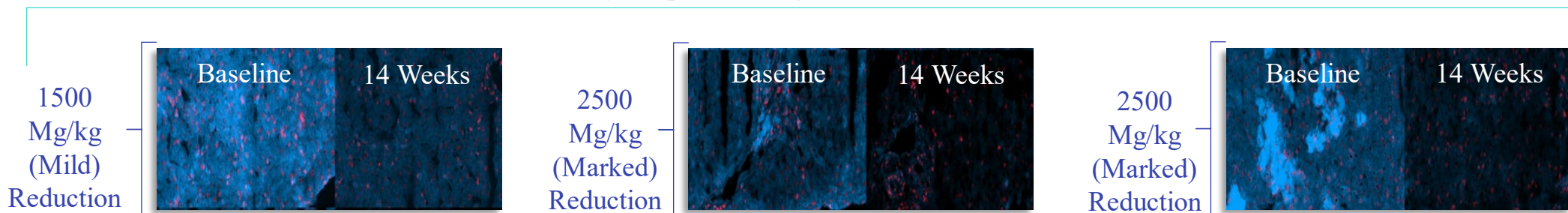
Figure is courtesy of David Begley, Kings College

- Proprietary formulation of hydroxypropyl-beta-cyclodextrin (HPBCD)
- Affinity for cholesterol
- What distinguishes the clinical program is the *Intravenous* Route of Administration allowing the drug to reach major peripheral organs
  - . . . and centrally, demonstrated in data from our completed trials (data on file)

## Enables the Effective Transport of Cholesterol Out of Cells



Cholesterol as measured by Filipin staining at Baseline and after 7 doses over 14 weeks



The lack of light blue represents the clearing of cholesterol from cells



# Expanded Access with Intravenous Hydroxypropyl- $\beta$ -Cyclodextrin to Treat Children and Young Adults with Niemann-Pick Disease Type C1: A Case Report Analysis

Hastings C, Vieira C, Liu B, Bascon C, Goa C, Wang RY, Casey A, Hrynkow S, Orphanet J Rare Dis 2019

- IV HP $\beta$ CD has been administered to >20 patients worldwide
  - Acceptable tolerability profile amongst patients treated to date
  - Safety profile enabling physicians to continue treatment >8 years
- Individual patients exhibit objective CNS/Systemic responses
  - Reduction in hepatic size and improvement in transaminases
  - Restoration of language skills
  - Resolution of interstitial lung disease
  - Improvement in fine and gross motor skills
  - Improvement of quality of life (communication, focus)
- Clinical experience warrants further investigation of intravenous HP $\beta$ CD in the management of NPC
  - Treatment of clinical manifestations, systemic and neurologic
  - Halting or slowing the rate of disease progression
  - No added benefit of IT HP $\beta$ CD (except hearing improvement in our 2 patients!)

# Trappsol® Cyclo™ Summary of Completed Clinical Studies NPC

## Study 101

Phase 1 study in NPC patients age  $\geq 18$  years showed Trappsol® Cyclo™ was well-tolerated with an acceptable safety and tolerability profile, for further testing in phase 3 trial

- After IV infusion, the drug is detectable in the cerebrospinal fluid within hours after the start of infusion
- Cholesterol synthesis and metabolism affected, and cholesterol cleared from cells, mimicking effects from nonclinical studies (in vitro and in vivo) in NPC models
- *Hastings C., et al; Mol Genet Metab (2022)*

## Study 201

Consistent pharmacodynamic effects and safety profile observed in a 48-week Phase 1/2 study in NPC patients aged 2 years and older

- 100% of patients assessed by treating physicians to be either stable or improved
- 89% (8 of 9 patients who completed the study), experienced clinically meaningful improvements in one or more efficacy endpoints, assessed by the 17 Domain NPC Severity Scale
- Based on totality of data from the Phase 1 and Phase 2 studies, the 2000 mg/kg dose was selected for the Phase 3 study
- *Hastings C., et al; Mol Genet Metab Reports (2023)*

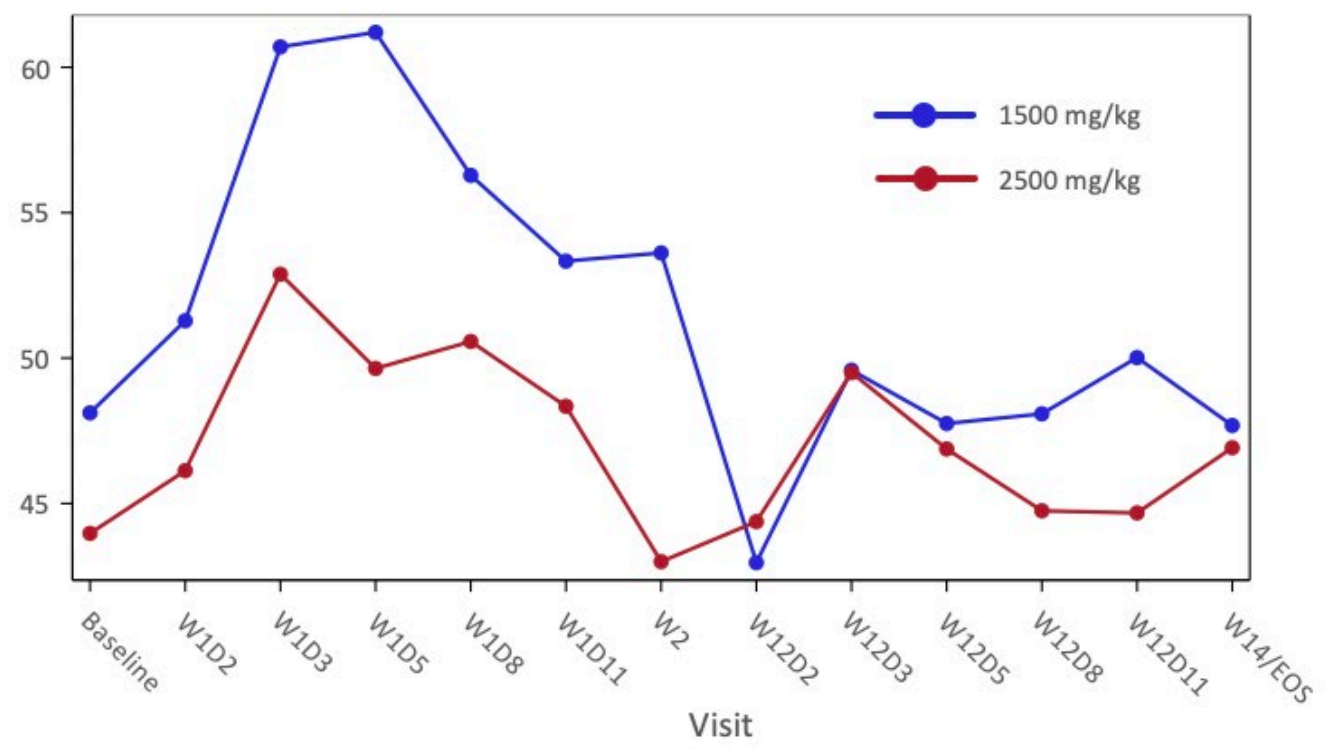
The observed safety and tolerability profile consistent across studies and treatment duration, irrespectively of age spectrum and disease severity

Treatment-Emergent Adverse Events majority mild to moderate in severity, manageable and monitorable and most considered unrelated to Trappsol® Cyclo™

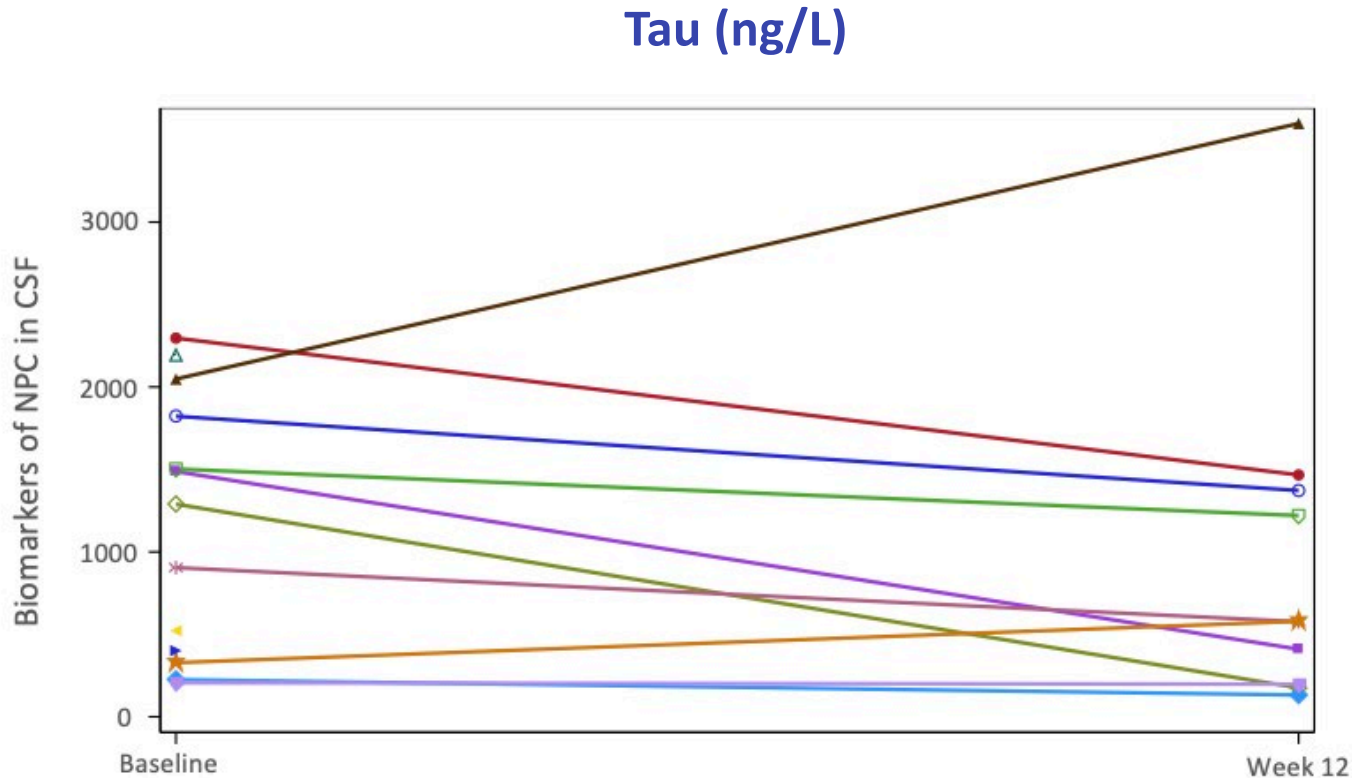
# Increased Serum 24S-Hydroxycholesterol Levels Signals Removal of Excess Cholesterol From the Brain

- 24S-hydroxycholesterol, a cholesterol metabolite from CNS transported across the BBB
- Play a major role in maintaining cholesterol metabolism in the brain
- Evidence that Trappsol® Cyclo™ active in the brain

24S-Hydroxycholesterol (mg/L)



# IV Trappsol® Cyclo™ Reduces Rate of Apoptosis of Cells in the CNS



*Tau: A protein related to onset and disease progression in NPC*

- Tau levels measured in the CSF from 10 NPC patients pre- and post IV dosing Trappsol® Cyclo™
- 60% of patients had a reduction in Tau levels, 20% remained stable, and 20% increased
- Suggestive of a neuroprotective benefit in CNS

Source: CTD-TCNPC- Study 101

# Study 201- 9 Patients to Complete Study Met Primary Outcome Measures for Efficacy

- **Efficacy Outcome Measure 1:**

At least a one-point reduction (or improvement) in two or more of the 17-Domain NPC Clinical Severity Scale measure.

- 8 of 9 patients met this endpoint (89% of those who completed)

- **17-domain NPC Severity Scoring Tool developed by NIH to measure clinical signs and symptoms in:**

- **9 major domains** – ambulation, cognition, eye movement, fine motor, hearing, memory, seizures, speech, swallowing
- Major domains are scored 0 - 5, with 0 as no disability
- **8 minor domains** – auditory brainstem response, behavior, gelastic cataplexy, hyperreflexia, incontinence, narcolepsy, psychiatric, respiratory problems
  - Minor domains add points for severity of condition up to 2 additional points per domain
  - Patients not receiving any intervention beyond Standard of Care would be expected to worsen in total score by **1.4 points** over one year\*



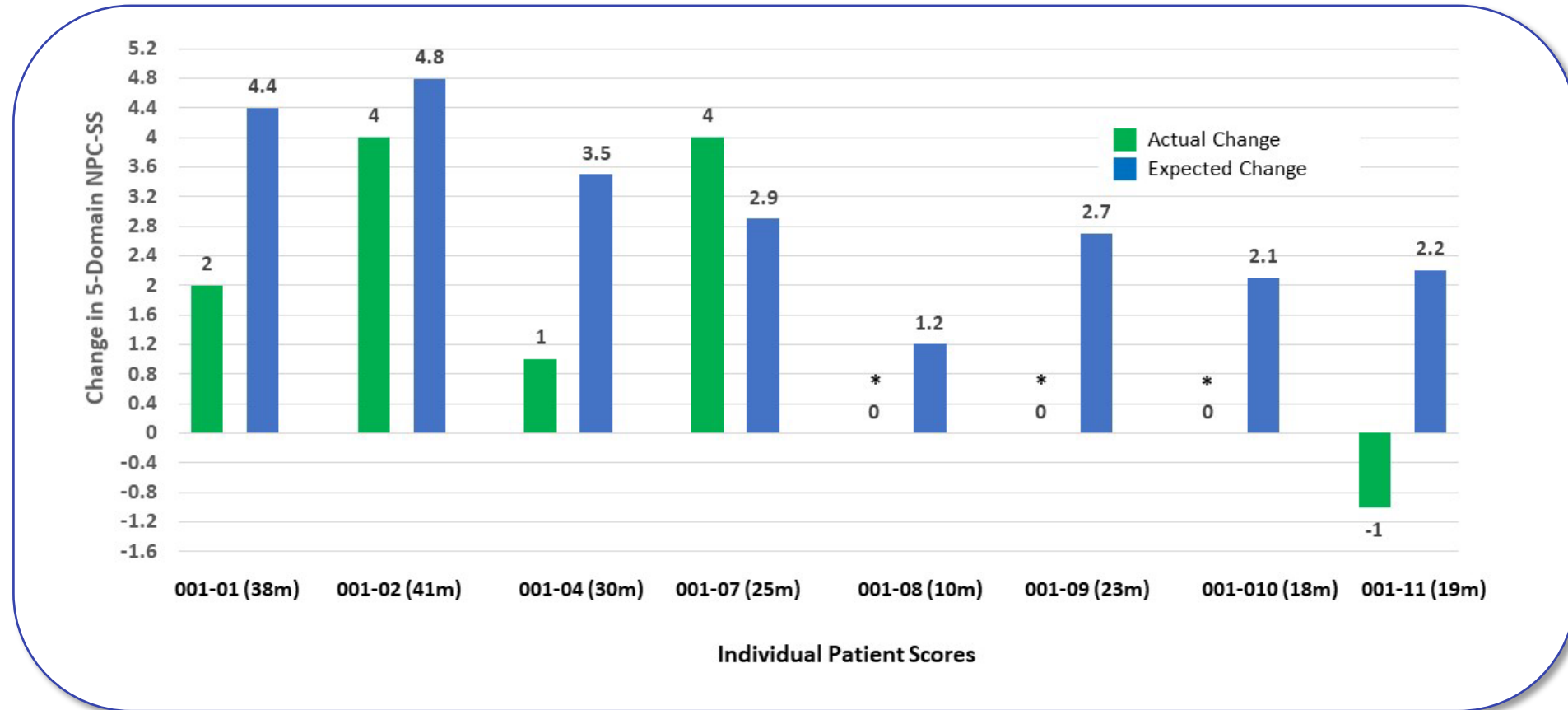
# Efficacy Outcome Measure 1: Domains in which 8 Patients Improved

**Bolded** domains are those which patients and families believe contribute greatest to quality of life

## Pt No. Improvement in Individual Domains

2	Eye Movement-1, <b>Fine Motor Skills-1</b> , Psychiatric-1
3	<b>Swallow-1</b> , Seizures-2, Gelastic Cataplexy-1, Incontinence-1
4	<b>Ambulation-1, Swallow-2</b> , Gelastic Cataplexy-2, Hyperreflexia-1, Narcolepsy-1, Incontinence-1, Behavior-1
5	<b>Ambulation-3, Fine Motor Skills-1</b>
6	Eye Movement-1, <b>Cognition-2</b>
7	Eye Movement-1, <b>Speech-1</b>
9	Gelastic Cataplexy -1, Incontinence-1
11	Gelastic Cataplexy-1, ABR-1

# Ongoing Extension Study (102) with Trappsol® Cyclo™ In NPC – Disease Progression Slower than Expected



Eight patients who completed the CTD-TCNPC-101 Phase 1 trial had the opportunity to participate in an extension trial, CTD-TCNPC-102; all enrolled. Green bars are actual change in 5D-NPC-CSS from baseline (at start of Phase 1 trial) through last data point available in extension protocol. Blue bars are expected changes without intervention using 1.4 point change per year after Yanjanin et al. 2010.

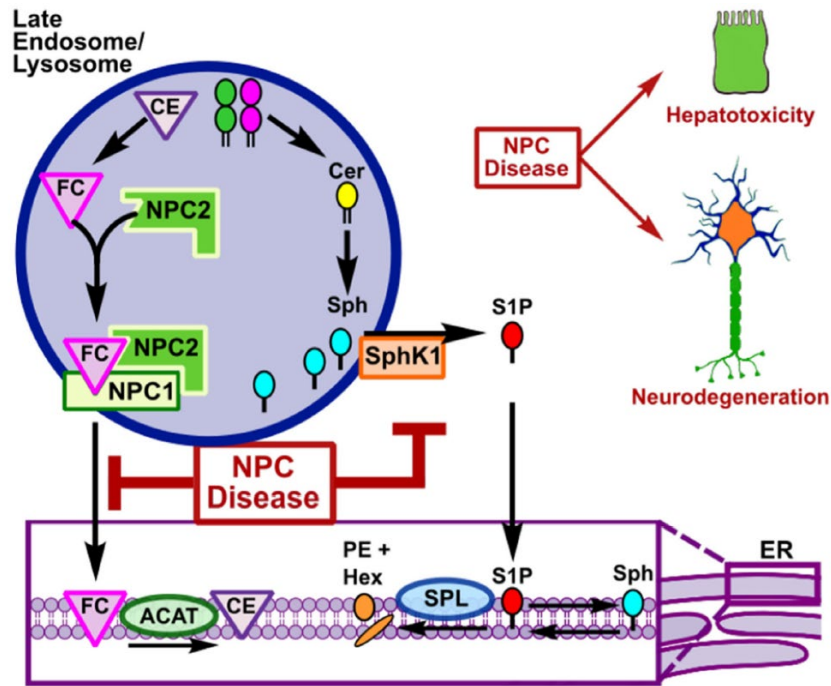
\* = no change observed. Patient 001-09 added miglustat after 1 year with no change to 5-D score or overall disease progression. Mean change in this group overall is 0.4 points per year.

# Long Term Treatment with Trappsol® Cyclo™ IV – Overall Well Tolerated

- The observed safety and tolerability profile consistent across studies and treatment duration, irrespectively of age spectrum and disease severity
- 
- Treatment-Emergent Adverse Events majority mild to moderate in severity, manageable and monitorable and most considered unrelated to Trappsol Cyclo
  - No evidence of any untoward effects of Trappsol Cyclo on core organ systems (cardiovascular, respiratory, renal, hepatic, gastrointestinal systems or CNS)
- 
- Hearing loss and infusion reactions (most localized) are adverse events of interest
  - Events of hearing loss resolved in most patients, with hearing returning to baseline levels or improved and stabilized while patients continued on study drug
  - A degree of hearing impairment remained at the last available auditory assessment in a limited number of patients
  - The effect on hearing will continue to be monitored closely in the ongoing studies



# Trappsol® Cyclo™ Targets Primary Pathophysiology of NPC



- Compelling direct and indirect data that Trappsol Cyclo releases accumulated cholesterol from cells in peripheral organs and the CNS and restores cholesterol homeostasis in NPC patients
- The marked reduction in filipin staining in liver cells after treatment with Trappsol Cyclo indicates the clearing of stored cholesterol
- Decrease in the serum level of the cholesterol precursor, lathosterol and an increase in the cholesterol metabolite,  $4\beta$ -hydroxycholesterol
  - Expected feedback mechanisms when the block in cholesterol trafficking relieved, and more cholesterol becomes available for cell metabolism
- Increased serum levels of the brain-specific cholesterol metabolite,  $24S$ -hydroxycholesterol supports Trappsol Cyclo active in the brain and restores the normal export of cholesterol transport across the blood-brain-barrier

# Niemann-Pick Disease Type C

Ongoing Pivotal **Transport NPC**<sup>™</sup>  
Phase 3 Study



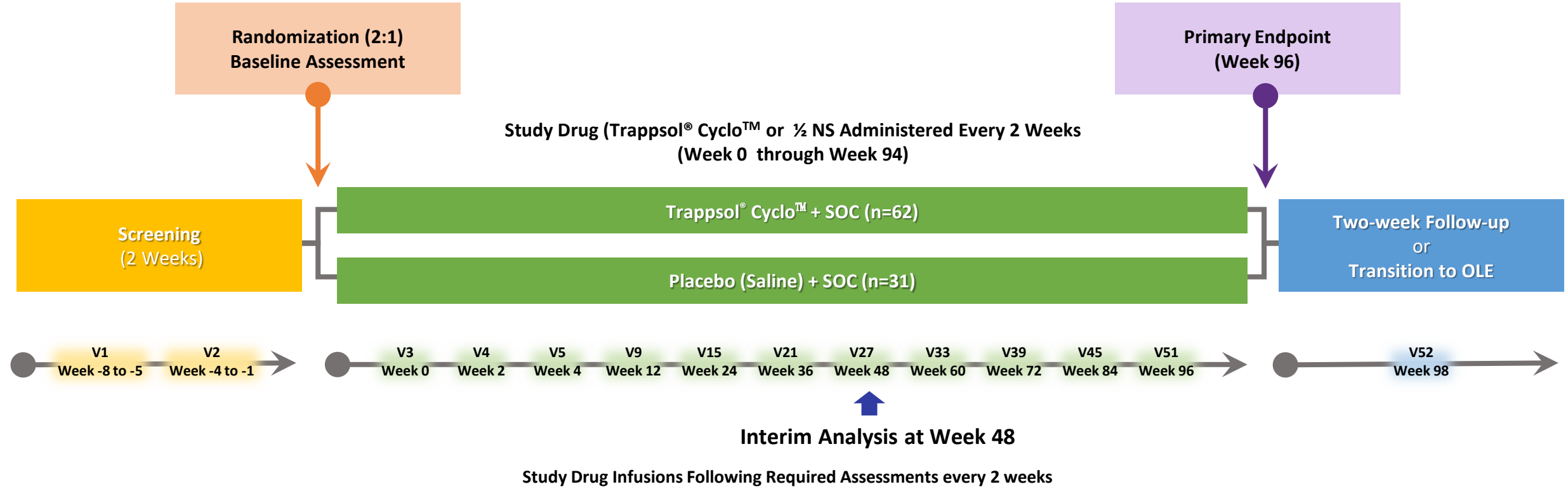
# TransportNPC<sup>TM</sup> Ongoing Pivotal Phase 3 Study in Niemann-Pick Disease Type C

*Double-blind, Randomized, Placebo-controlled, Parallel-group study and is currently the most advanced clinical research program underway to identify a treatment for NPC*

Number of Subjects	93, aged $\geq 3$ years	
Current Sites	23 across 9 countries	Incl. United States, United Kingdom, Italy, Germany, Spain, France, Poland, Israel, Brazil and Australia
Duration	96-week trial, with Interim Analysis at 48 weeks	
Dose	2000 mg/kg via IV infusion	
Primary Endpoint	NPC Composite Severity Score	
Secondary Endpoints	SCAFI, Swallow, Vineland-2	
Exploratory Endpoints	Inclusive of Speech, Liver and Lung function	

# Trial Design- Transport NPC

## *Global Randomized, Controlled Phase 3 Pivotal Registration Trial*



Abbreviations: 1/2 NS= Half-normal Saline (0.45 %) ; n=Number; OLE=Open-label Extension, SOC=Standard of Care; V=Visit

# Open-Label Extension Study -Trial Design

Trappsol® Cyclo™ Administered Every 2 Weeks  
(Week 96 through Week 190)



**Study Drug Infusions Following Required Assessments at every 2 weeks**

Abbreviations: 1/2 NS= Half-normal Saline; n=Number; OLE=Open-label Extension, SOC=Standard of Care; V=Visit

# Sub-Study in Patients < 3 years of Age-Trial Design, outside US only

- Sub-study requested by EMA to evaluate Trappsol® Cyclo™ as a potential preventative treatment and is being conducted ex-US only
- Safety and efficacy results from the sub-study to be analyzed separately from the main study cohort

## Objective

To evaluate the safety, tolerability, and preliminary efficacy of Trappsol® Cyclo™.

## Population

Up to 12 subjects <3 years of age with confirmed NPC1, who may be symptomatic or asymptomatic, are eligible to receive open-label Trappsol® Cyclo™ for up to 4 years



We support advocacy  
around the world



# Advocacy Resources from Cyclo



## NPC Spotlight

Home

Living  
with NPC

Diagnosis &  
Treatment

TransportNPC  
Clinical Trial

Helpful  
Resources

NPC  
Community

## Spotlight on Niemann-Pick disease type C

With a diagnosis of Niemann-Pick disease type C, patients and families can have many questions:



**Lori McKenna Gorski**

**lori.gorski@cyclodex.com**

**Head, Global Patient Advocacy**

**Experience in NPC, Gaucher and many other lysosomal storage disorders**



# A Special Thank You

*To all of the patients, families and physicians who support Cyclo Therapeutics, Inc. ongoing clinical trials and who provided their data from compassionate use programs early on, making our trials possible.*

