

Corporate Presentation October 2024

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Forward looking statement

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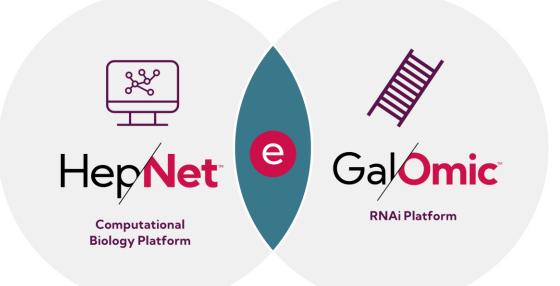
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Introduction to ETX

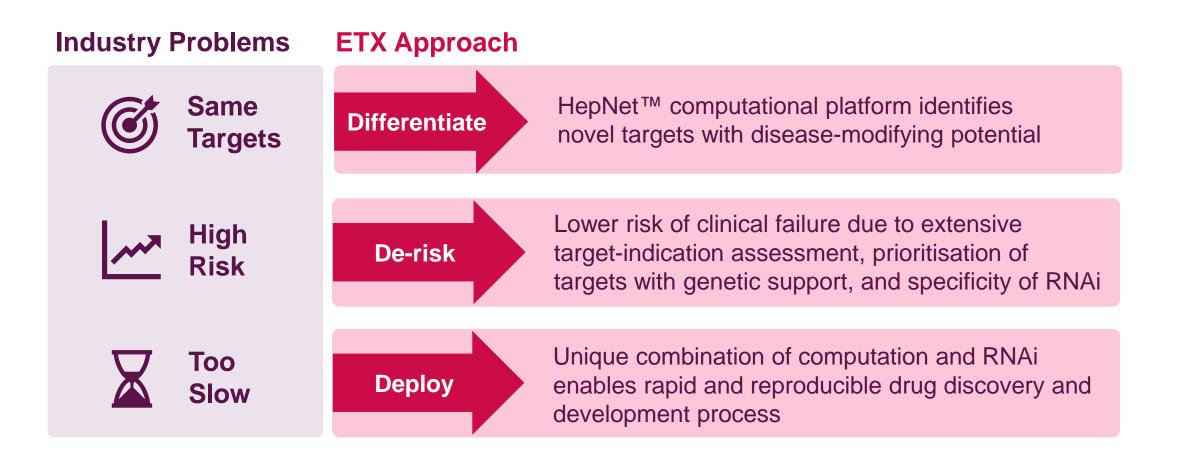
We leverage computation and AI to discover and develop life-transforming RNAi medicines



Uniting advanced computation and AI with RNAi, ETX accelerates the path from discovery through development and makes better medicines faster

We Aim To Improve Key Traditional R&D Issues

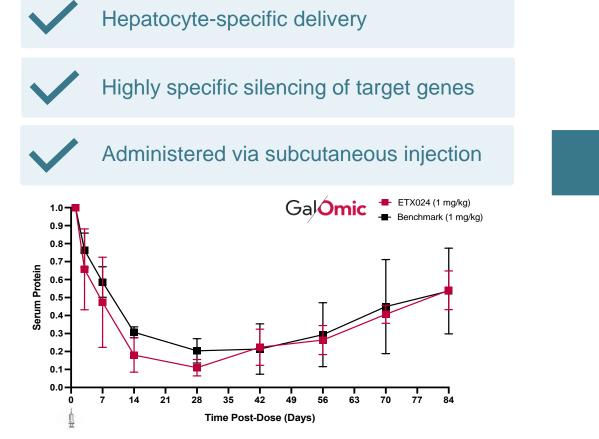
Combining computation and RNAi to revolutionise research and development



GalOmic Therapies For Selective and Effective Gene Silencing

Proprietary RNAi chemistry platform enables rapid generation of potent hepatocyte-targeting siRNAs

Properties of Galomic Therapies



Typical performance profile of GalOmic[™] constructs in non-human primate is at least equivalent to market lead across multiple genes

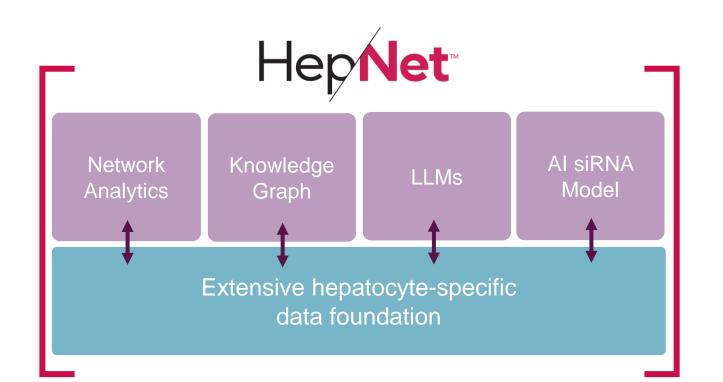


Effective, patient-friendly treatments

- Safe specific gene silencing in single cell type limits unwanted side effects
- Low treatment burden at least quarterly dosing regimen expected in humans (4 doses/year)
- Low risk commercial-stage modality with large body of safety data and proven high probability of success in clinic

HepNet Computational Platform

Using data and AI to power discovery of GalOmic therapies

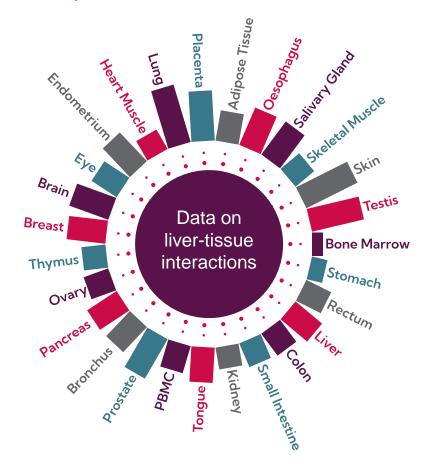


HepNet's computational approaches translate data and information into:

- Novel gene targets
- Target-indication risk scores
- Potent and long-acting siRNA sequences

Data-driven Discovery

HepNet is underpinned by our extensive hepatocyte-specific data foundation containing proprietary data and curated public and licensed data



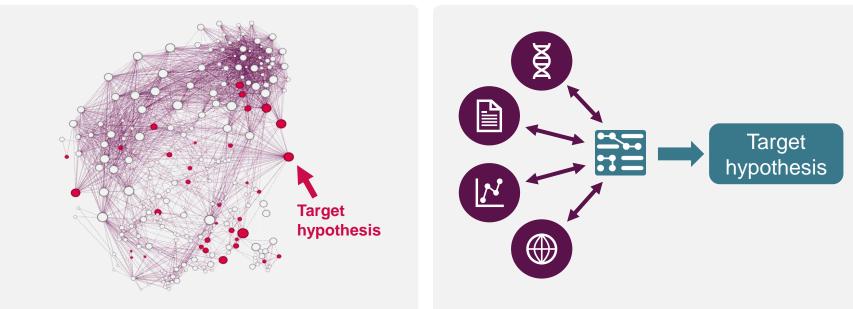
HepNet knowledgebase contains:

14 million hepatocyte-specific data points
20,000 coding and non-coding genes
3,000 hepatocyte-associated diseases

Robust data integration ensures the integrity of our computational outputs

Differentiate: Uncovering Transformational Novel Targets

HepNet's network analytics and AI approaches enhance our understanding of biology to identify high-quality targets that are not being pursued by any other RNAi company



Network analytics provide a comprehensive, holistic view of the biological systems we are targeting

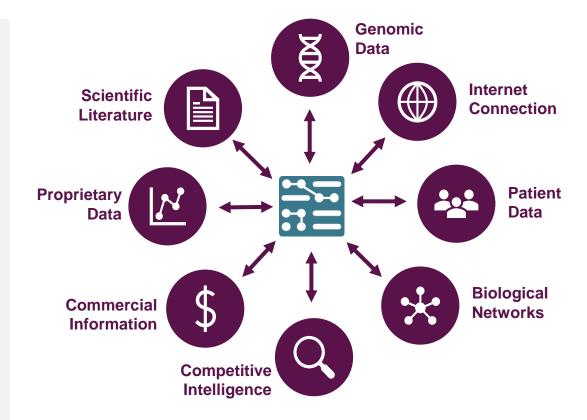
Large language models (LLMs) enhance understanding and insights from vast and disparate data sources

De-risk: Innovating with Insight

We improve probability of success by pairing RNAi and LLM-enhanced target-indication assessment

We pair our **low-risk RNAi technology** with the **right novel targets** by extensively assessing potential target-indication pairs and only **nominating high-conviction programs** to our pipeline.

Assessment is enhanced through use of Hep**Net's LLM ecosystem** to improve speed, scale, and objectivity of assessment.



LLM agent connects and infers from disparate datasets to assess a target-indication pair's biological relevance and developability and produce an objective risk score

Deploy: Our Rapid and Reproducible Process

Using the ETX approach to make better medicines faster



proof-of-concept in < 12 months

Computing the Future of Medicine - Today

The tangible products of our innovative approach to drug discovery



first-in-class GalOmic therapies in preclinical development



GalOmic therapies with complete preclinical proof-of-concept data **3** GalOmic therapies at IND-enabling stage

< 12 months

from target nomination to completion of preclinical proof-of-concept

Multiple

highly differentiated targets identified for in-house programs and collaborations

Competitive

depth and duration of target knockdown across GalOmic therapies

GalOmic Therapeutic Pipeline

Broad pipeline of GalOmic therapies targeting novel genes, with discovery powered by HepNet

Therapeutic Area	Program	Indication	Target ID	Drug Design	Proof-Of- Concept	IND-enabling
	ETX-312	MASH			IND 2025	
Liver	ETX-394	MASH				
Rare	ETX-148	Bleeding Disorders			IND 20	26
Immune-mediated	ETX-407	Dry AMD				
Cardiovascular	ETX-291	Cardiometabolic Disease				
	ETX-258	Heart Failure				
	Multiple targets					

A Broad Range of Opportunities

Each GalOmic therapy is a potential highly differentiated treatment for a disease with high unmet need

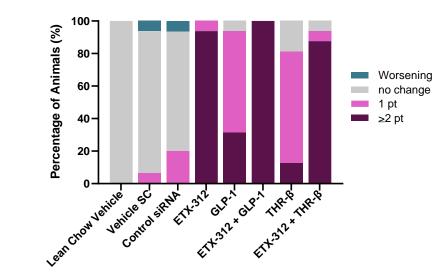
	Program	Prevalence	ETX Opportunity
	ETX-312 MASH	^^^ ^ ^^^^ ^^^	An effective monotherapy or combination treatment with low treatment burden
0	ETX-148 Haemophilia		An effective pan-haemophilia treatment with superior safety profile and low treatment burden
	ETX-407 Dry AMD	*** ****** ******	A systemic approach to treatment through subcutaneous injections
K	ETX-291 Cardiometabolic Disease	ŤŤŤ ŤŤŤŤŤ ŤŤŤŤŤŤ	Impacts wide spectrum of cardiometabolic disease drivers, resulting in more effective cardiovascular risk reduction

ETX-312 for the Treatment of MASH: From Computation to Clinic

Lead asset ETX-312 demonstrates significant therapeutic benefit in the Gubra DIO-MASH mouse model

ETX-312 computational discovery				
\checkmark	Novel gene target identified through HepNet's network analysis of MASH			
\checkmark	siRNA sequence designed and ranked <i>in silico</i> using HepNet's Al-driven drug design model			
Preclinical data includes:				
\checkmark	Comparison and combination with THR-β agonist in DIO MASH model			
\checkmark	Comparison and combination with GLP-1 receptor agonist in DIO MASH model			
Program Status				
\checkmark	IND-enabling studies ongoing			
2025	IND submission			

ETX-312 Preclinical Data: NAFLD Activity Score

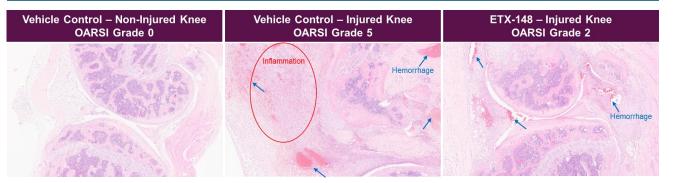


- ETX-312 dramatically improved the NAFLD Activity Score alone or in combination with either a GLP-1 or THR- β agonist
- ETX-312 treatment improves liver function
- Significant reduction in ALT and AST levels was observed with ETX-312 treatment alone or in combination

ETX-148 for the Treatment of Haemophilia: From Computation to Clinic

ETX-148 is a potential safe and effective pan-haemophilia treatment with low treatment burden, emergency treatment compatibility, and the ability to prevent haemarthrosis

ETX-148 Preclinical Data: Haemarthrosis



- Administration of ETX-148 resulted in **improved** ٠ haemarthrosis knee joint pathology, reduced inflammation, and resulted in smaller areas of haemorrhage
- Additional studies have demonstrated safe administration of **ETX-148** in combination with recombinant Factor therapies in Haemophilia A & B mice (not shown)

ETX-148 computational discovery

- Novel gene target identified through HepNet's network analysis of coagulation pathway
- siRNA sequence designed and ranked in silico using HepNet's Al-driven drug design model

Preclinical data includes:

- Data from animal model of haemarthrosis in haemophilia A and B
 - Safety data alone and in combination with factor treatments or bypassing agents

Program status

Exploring expansion opportunities – studies in additional rare bleeding disorders ongoing

IND-enabling studies initiated

2026 **IND** submission

Proven Today, Pioneering Tomorrow

Leveraging our validated cutting-edge platforms to make better medicines faster





Proven ability to identify novel gene targets that significantly impact diseases *in vivo*



Routinely progressing programs from target nomination to preclinical proof-of-concept in < 12 months

Computing the future of medicine[™] is more than a slogan, **it's our reality** Advancing multiple highly-differentiated pipeline programs for broad range of diseases, with impressive success rate



Continually innovating on HepNet and GalOmic, incorporating the latest advancements in AI and RNAi chemistry

ETX Overview

Factsheet



Multi-disciplinary team: specialists in chemistry, computation, biology, drug development, and Al

Locations







Leadership Team



Ali Mortazavi Chief Executive Officer



Alan Whitmore Chief Scientific Officer



Laura Roca-Alonso Chief Operating & Business Officer



Timothy Bretherton Chief Financial Officer

Natalie Pursell VP, Head of Early-stage Development



Lee Clewley VP, Head of Applied AI & Informatics

Board of Directors

Lord David Prior Non-Executive Chairman

Professor Trevor Jones CBE Non-Executive Director

Michael Bretherton Non-Executive Director

Jeremy Punnett Non-Executive Director

Ali Mortazavi Chief Executive Officer





Computing the Future of Medicine[™]

e therapeutics™

Appendix <u>GalOmic™</u> <u>HepNet™</u> ETX-312 ETX-407 ETX-148 ETX-291

GalOmic™



Gene Silencing with GalNAc-siRNAs

Clinically validated high-precision therapeutics that can drug "undruggable" targets



GalNAc-siRNA binds to ASGPR receptor on surface of hepatocyte

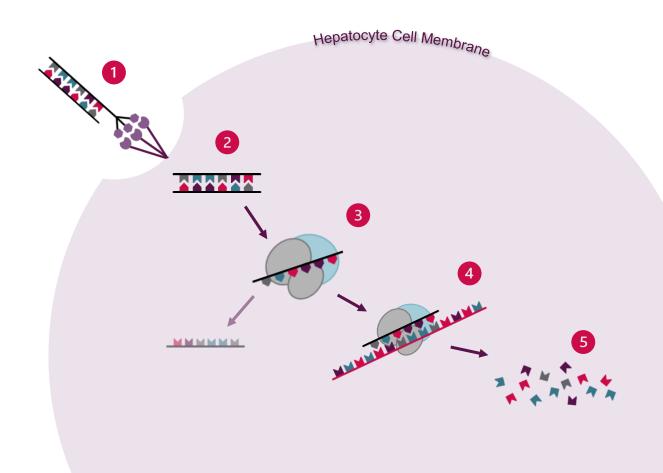
siRNA enters hepatocyte

3 siRNA enters RNA-induced silencing complex (RISC) and unzips

RISC binds to target mRNA

Resulting in degradation of target mRNA

GalNAc - N-acetylgalactosamine | **siRNA** - small-interfering RNA | **mRNA** – messenger RNA | **ASGPR** – asialoglycoprotein receptor | **RISC** – RNA-induced silencing complex



GalOmic: Our RNAi Platform

Proprietary RNAi chemistry enables rapid generation of potent hepatocyte-targeting siRNAs



Ø

- Hepatocyte-specific delivery
- Highly specific silencing of any target gene

Administered via subcutaneous
injection

Long duration of action with quarterly dosing



Modality demonstrates increased probability of success in the clinic

We go from target nomination to completion of preclinical proof-of-concept in 12 months

14

Days Post-Dose

21

28

0.0-

ETX-312 Knockdown in

Healthy Mice

e therapeutics™

1 mg/kg ETX-312 - 3 mg/kg ETX-312

HepNet™



Using HepNet to Differentiate, De-risk, and Deploy GalOmic Therapies

Computation and AI approaches are applied at every stage of discovery and development

HepNet	Target ID	Target-Indication Assessment	GalOmic™ siRNA Design
HepNet™ Data Foundation	Proprietary hepatocyte-specific knowledgebase	Extensive proprietary and public data	siRNA sequences with GalOmic™ modification patterns
HepNet™	Network analytics		AI siRNA design and efficacy prediction model
Computational Approach	Hepatocyte k		
Output	Novel gene targets	Target-indication pair risk score	siRNA sequences ranked by efficacy

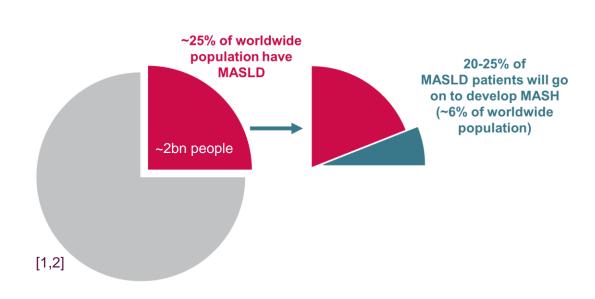
We continually innovate, iterate, and improve our HepNet platform, leveraging the latest advances in computation and Al

ETX-312 for the Treatment of MASH

ETX-312 for the Treatment of MASH

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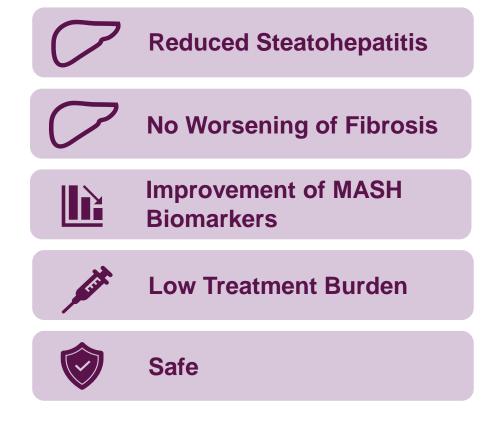
A safe and effective GalOmic siRNA treatment for a prevalent disease with high unmet need



Rezdiffra (THR-β agonist) is the only FDA-approved treatment and a large percentage of patients do not achieve clinically meaningful outcomes when treated with the drug.

*MASH - metabolic dysfunction-associated steatohepatitis is now the replacement term for NASH

Target Product Profile

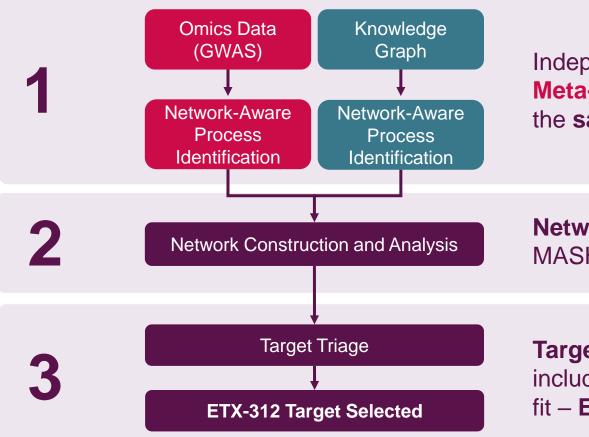


[1] Younossi, Zobair M.*; Koenig, Aaron B.; Abdelatif, Dinan; Fazel, Yousef; Henry, Linda; Wymer, Mark. Global epidemiology of nonalcoholic fatty liver disease—Meta-analytic assessment of prevalence, incidence, and outcomes. Hepatology 64(1):p 73-84, July 2016. | DOI: 10.1002/hep.28431

[2] Bellentani S. The epidemiology of non-alcoholic fatty liver disease. Liver Int. 2017 Jan;37 Suppl 1:81-84. doi: 10.1111/liv.13299. PMID: 28052624.

ETX-312: From Computation to Clinic

HepNet data foundation and analytical functionality deployed for target ID



Independent network analysis of two data sources, Meta-GWAS Data and Knowledge Graph, identified the same key biological process in MASH

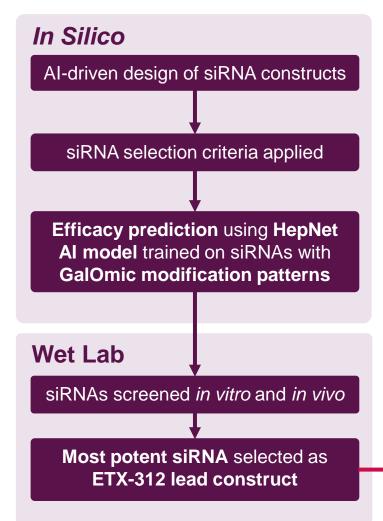
Networks of this **key biological process** in context of MASH constructed using **proprietary ETX interactome**

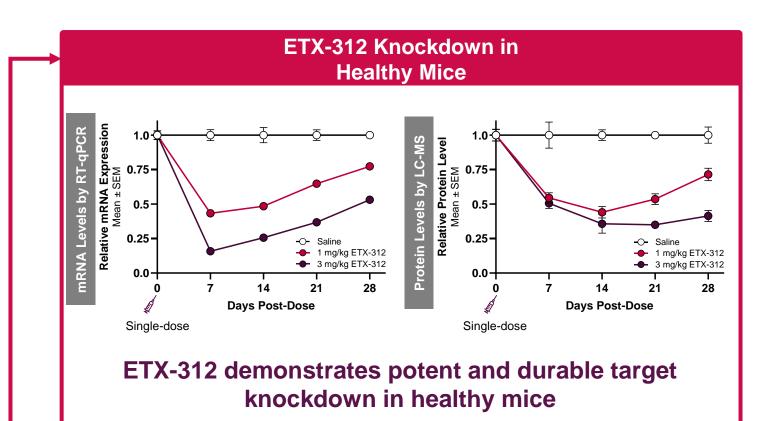
Targets ranked based on key characteristics including expression profile, modality fit, and strategic fit – **ETX-312 target selected**



ETX-312: From Computation to Clinic

Efficacy of all possible constructs ranked in silico using AI model trained on GalOmic siRNA chemistry

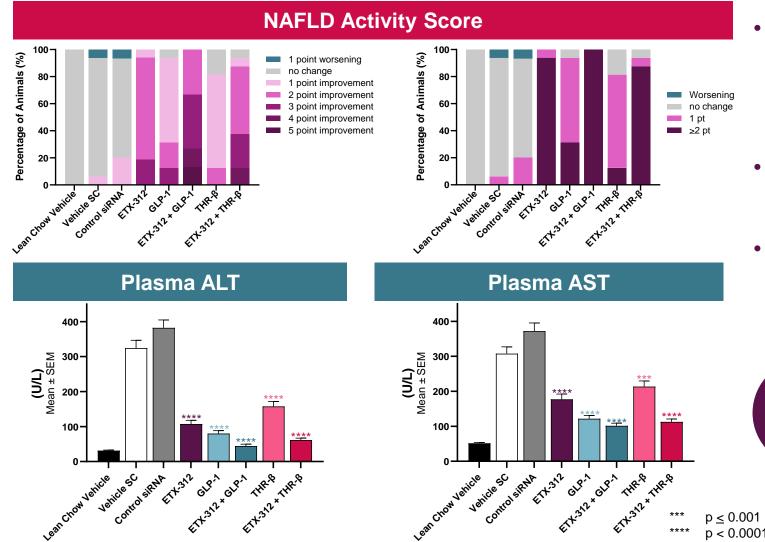




ETX-312: From Computation to Clinic



ETX-312 demonstrates significant therapeutic benefit in the Gubra DIO-MASH mouse model



- ETX-312 dramatically improved the NAFLD Activity Score alone or in combination with either a GLP-1 or THR-β agonist
- ETX-312 treatment improves liver function
- Significant reduction in ALT and AST levels was observed with ETX-312 treatment alone or in combination

ETX-312 nominatin IND-e

ETX-312 clinical candidate nominated and being tested in IND-enabling studies

ETX-407 for the Treatment of Dry AMD



ETX-407 for the Treatment of Dry AMD

Providing an effective alternative to invasive intravitreal injections



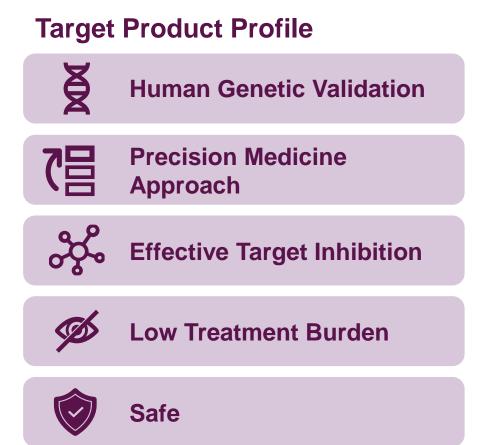




288 million people worldwide projected to have AMD by 2040 ^[1]

No. 1 cause of blindness in adults aged 60 yrs and older ^[2]

- Dry AMD severely impacts vision and daily life for millions – 16% of patients progress to legal blindness within two years of diagnosis. ^[3]
- All approved treatments for dry AMD are intravitreally injected – urgent need for lower burden treatment



Wong, W.L. et al. (2014) "Global prevalence of age-related macular degeneration and disease burden projection for 2020 and 2040: a systematic review and meta-analysis," The Lancet Global Health, 2(2), pp. e106–e116. Available at: https://doi.org/10.1016/s2214-109x(13)70145-1.
 VISION 2020 Global Initiative for the Elimination of Avoidable Blindness: Action plan 2006-2011. World Health Organization, 2007. World Health Organization report called: "Global data on visual impairment 2010" (WHO/NMH/PBD/12.01)
 Chakravarthy U, et al. (2018) Ophthalmology, 125(6):842-849.

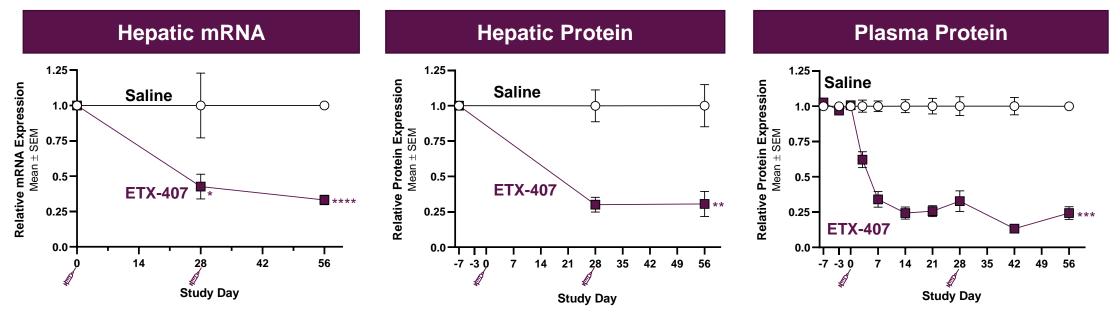


ETX-407 Lead Candidate Selected Based on NHP Study Results



ETX-407 demonstrates the applicability of ETX's hepatocyte-targeting GalOmic platform in indications affecting distal organs

ETX-407 constructs were tested *in vivo* in *Cynomolgus macaques*



- ETX-407 effectively reduces target mRNA and protein in the liver following 1and 2 doses (3mg/kg)
- Deep knockdown of circulating, as well as ocular, protein levels confirmed



ETX-407 clinical candidate nominated and proceeding to IND-enabling studies

* $p \le 0.05$ ** $p \le 0.01$ *** $p \le 0.001$ **** p < 0.0001

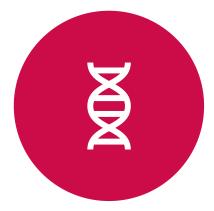
ETX-148 for the Treatment of Haemophilia



ETX-148: A HepNet[™] Identified Pan-Haemophilia Target

Pursuing a novel pan-haemophilia rebalancing agent with good joint protection and leading safety profile

HepNet[™] established link between the target and haemophilia through haemostasis network analysis



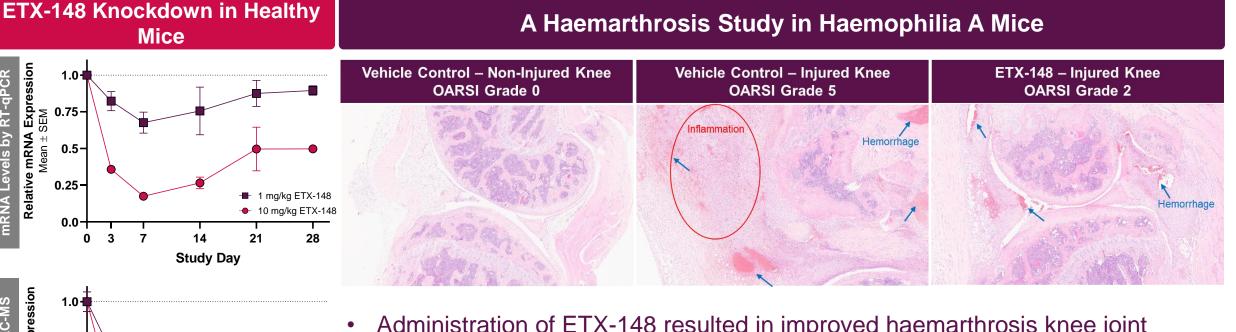
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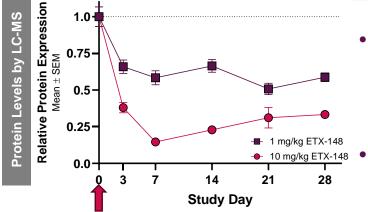
Human genetic evidence suggests reduced target expression not linked to increased risk of thrombosis unlike other rebalancing agents

Target Product Profile

- Combining good joint protection and a long duration of action (aiming for quarterly+ duration)
- Safe in combination with
 Factor replacement (for emergency use)
- **Patient-friendly** subcutaneous administration
- Using ETX's proprietary GalOmic[™] GalNAcsiRNA technology

ETX-148 is a Potent siRNA That Demonstrates Joint Protective **Effects in a Haemophilia A Haemarthrosis Mouse Model**





Administration of ETX-148 resulted in improved haemarthrosis knee joint pathology, reduced inflammation, and resulted in smaller areas of haemorrhage

Additional studies have demonstrated safe administration of ETX-148 in combination with Factor Replacement in Haemophilia A mice (not shown)

Data normalised to saline-treated mice on Study Day 0

e therapeutics™

mRNA Levels by RT-qPCR

ETX-291 for the Treatment of Cardiometabolic Disease

ETX-291: A HepNet[™] Identified Target for CVD Risk

Pursuing a novel target with human validation and mechanism of action beyond LDL-C modulation



HepNet[™] predicted link between the target and metabolic disease risk



Hep

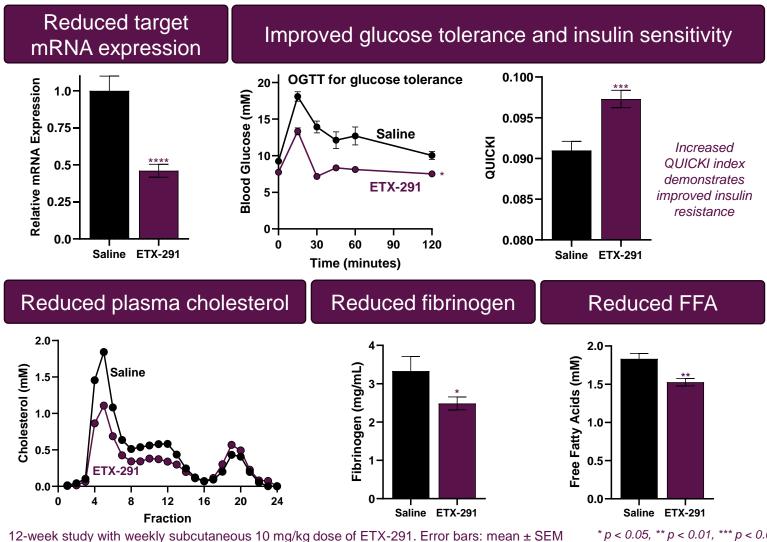
Human genetic evidence links target to reduced cardiovascular disease risk in otherwise healthy individuals

Target Product Profile:

- Meaningful CVD risk reduction independent of statins and PCSK9s
- Holistic treatment potential for metabolic co-morbidities by modulating insulin sensitivity, promising applicability beyond LDL-C modulation
- Ease of use: **long-acting**, aiming for quarterly+ duration of action
- Using ETX's **GalOmic™ GalNAc-siRNA** technology for highly specific liver targeting

Pleiotropic Effects of ETX-291 on Key Cardiometabolic Risk Factors

Results from a 12-week study in an ApoE*3L.CETP mouse model of metabolic syndrome



Treatment with ETX-291 provides a holistic treatment potential for cardiometabolic diseases beyond LDL-C modulation

* *p* < 0.05, ** *p* < 0.01, *** *p* < 0.001, **** *p* < 0.0001