

Innovating Chronic Disease Treatment and Management





Problem: Chronic Inflammatory Diseases

Reactive oxygen and nitrogen species (RONS) are linked to several inflammatory diseases; yet, measuring RONS in both lab and clinic requires expensive instruments, time, and expertise.

Respiratory Diseases

- COPD and Asthma affect millions globally
- Hydrogen Peroxide (H₂O₂) is a marker of neutrophilic and eosinophilic airway inflammation
- Exacerbations are the largest cost burden

Cardiovascular Diseases

- Cardiovascular disease leading cause of death
- Nitric Oxide (NO) is a marker of endothelial dysfunction and regulates cardiovascular health
- NO has been an impactful therapy target for over a century with different therapies for varying levels of NO

Urgent need to identify & predict diseases early, monitor progression, and ultimately personalize treatment.













R&D Solutions: Services and Assay Kits for Precision Medicine

Novel, highly-sensitive chemiluminescent techniques to accelerate pharmaceutical development.

Expertise and specializations

World-class chemiluminescent methods

Biomarker measurements

Determine efficacy of novel compounds

Identify mechanism of action

Biomarker Testing

Custom Assays

Reactive Oxygen and Nitrogen Species (RONS)

H₂O₂ Hydrogen Peroxide Testing

NO Nitric Oxide

Peroxynitrite

Reactivity and activity of compounds

Clinical studies

Breath Analysis Services

Airway Inflammation and Oxidative Stress

Powered By
Tunable
Chemiluminescent
Technology

3 active pharmaceutical customers

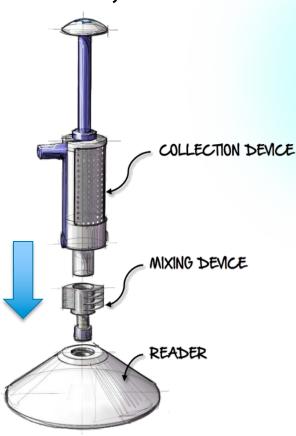




Clinical Solutions: Biomarker Platform for Disease Management

Respiratory

Asthma, COPD

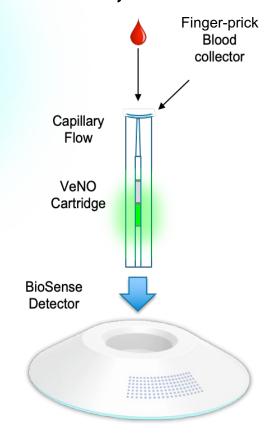


Long-term
Clinical & RPM Product Vision

- 1. Identify
- 2. Monitor
- 3. Predict
- 4. Personalize

Cardiovascular

PAH, HF



BioSense VeNO - Blood

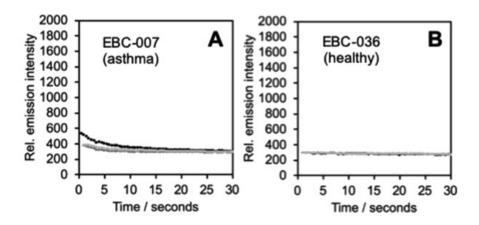
BioSense H₂O₂ – EBC



Proof of Concept: Feasible and Validated

Respiratory

- Clinical Study with John Peter Smith Hospital
- Validated in 60 asthma patients and healthy participants
- H₂O₂ higher in asthma patients
- H₂O₂ lower with use of rescue inhaler



Quimbar, M. E.; Davis, S. Q.; Al-Farra, S. T.; Hayes, A.; Jovic, V.; Masuda, M.; Lippert, A. R. *Anal. Chem.* **2020**, 92, 14594-14600.

Cardiovascular

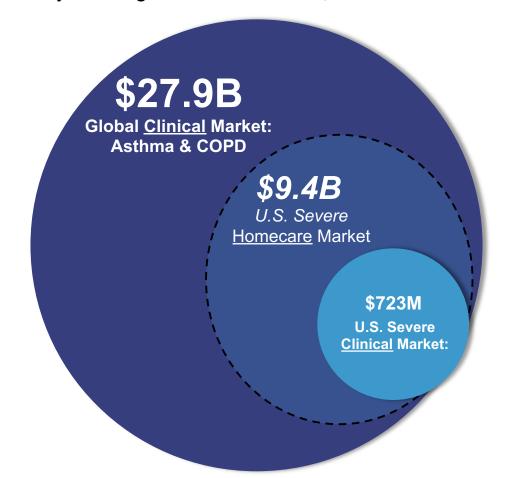
- Feasibility Study funded by Bayer Pharmaceuticals
- Assay detects NO in buffer with picomolar sensitivity
- Assay detects NO in plasma with low nanomolar sensitivity
- Current NIH Phase 1 grant to complete VeNO Assay Kit

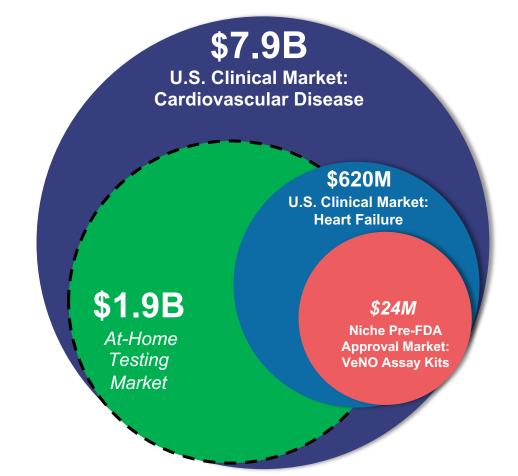
| Limit of Detection (LoD) of the chemiluminescent assay formulations. | | | | | | |
|--|-------------|---------|--------------------|----------------------|------------------|--|
| Assay | Donor | Analyte | Limit of Detection | Calibration Range | Reaction Media | |
| Reagent Set 1 | DEA NONOate | NO | 3–12 μM | 0–25 μΜ | PBS (pH 7.4) | |
| Reagent Set 2 | DEA NONOate | NO | 0.4-5.5 nM | 0-50 nM | PBS (pH 7.4) | |
| Reagent Set 2 | DEA NONOate | NO | 40-95 nM | 0–1000 nM | 10% plasma (v/v) | |



Market Opportunity

- Total Addressable Market: 1, 4, or 12 annual tests (\$15) for controlled (75%), moderate (20%), or severe patients (5%).
- Homecare Market: Severe patients take 2-4 weekly tests for early warning of exacerbation. 1,600 Patients = \$5M revenue
- U.S. Total Addressable Clinical Market: 1 annual test (\$50) for at-risk patients (47% of Americans).
 - Niche Market: <u>Pre-FDA</u> sales of research assay kits. 12,000 VeNO studies/year x 4 kits (\$500) per study.







Business Model & Pricing



Interviews with 70+ Healthcare Specialists















Pharmaceutical Partnerships (Bayer, Novo Nordisk, others)

Stage 1: Initial R&D revenues

Generate revenues developing custom assays for pharma research partners

- 1. Provide attractive research kits (\$550-\$950/kit) to measure Reactive Oxygen and Nitrogen Species (RONS) for drug discovery, development, studies.
- 2. Establish clinical evidence and acceptance of biomarkers.
- 3. Identify patients who will benefit from specific therapies.

Specialist Physicians (Dr. Pristas, Leon, Davis)

Stage 2: Commercial Clinical Sales

- 5. Commercialize BioSense clinical tests with 'razor and blades' business model through sale of platform sensor (\$1,500, 10% margin) and single-use disposable test cartridges (\$15-\$50, 67% margin).
- 6. Majority of early profits will be driven through high volume clinics

Hospitals & Primary Care Physicians (JPS Hospital, Texas Children's)

Stage 3: Clinical Sales Growth

Most asthma treatment occurs in the primary care setting

Inclusion in GINA, GOLD, ACC/AHA guidelines for treatment & management:

- 7. Expand BioSense usage in hospital and ER settings, providing significant cost savings for healthcare system.
- 8. Repeat disposable test sales

Homecare

(Severe, Frequent Exacerbators)

Stage 4: At-Home Sales

Early diagnosis & monitoring with frequent, objective measurements of disease control.

At-home Testing & Long-term Monitoring



9. Recurring sales from severe, exacerbation-prone patients that require frequent home monitoring.

Patients can monitor disease progression & predict exacerbations *before* they occur.



Novel IP Portfolio

Unique combination of chemistry, biological sample collection devices, and hardware that allows for protection and significant value.

Core patent and trade secrets fully owned by BioLum.

Validated Differentiation

Our attorneys have determined path is clear, International Searching Authority (ISA) recognized all 53 claims as novel.

Patent Strategy

Freedom-to-operate complete

Filed large initial patent and will file supporting patents as we continue to develop our IP portfolio, alongside our trade secret formulas.







Respiratory & Cardiovascular Competitive Landscape

| Company | Description | BioLum's Advantage |
|--|--|---|
| Aerocrine | First to Market device for exhaled fractional nitric oxide. Acquired by Circassia for \$215M with \$25M revenue. | Neutrophilic asthma & COPD Simple breathing maneuvers |
| | Homecare breath nitric oxide device. Acquired by Caire for undisclosed amount with \$1.5M revenue. | Differentiate smokers |
| Exhalation Technology | Developed technology for H_2O_2 measurement in COPD patients. EU, UK market. | Specificity of chemiluminescence Focused on U.S. market Established clinical evidence |
| WORLD PRECISION INSTRUMENTS Instrumenting scientific ideas | Measures nitric oxide in liquid samples with toxic ozone gas. Electrochemical real-time measurements in liquid samples. | Simpler methodDirect measurementClinical viability |



Biomarker Assay Pipeline and Status

| Product Pipeline | Concept | Feasibility | Prototype | Validation | FDA Pre- sub | Finalized Device | Clinical Trials | Commercial Sales |
|--------------------------|---------|-------------|-----------|-----------------------------------|---|---------------------|-----------------------|---------------------|
| H2O2 | | | | | | cortex | a design | Clinical Sales |
| (Hydrogen peroxide) | | | | | cortex design Research Sales \$550-\$950/kit | ₩ | > \$5M for M&A | |
| NO (Nitric oxide) | | | | | 1 | | | |
| | | | | | | | | |
| ONOO- (Peroxynitrite) | | | | | 1 | | | |
| | | : | | Research Sales \$550-\$950/kit | | | | |
| | | | | | | | | |

Business

Science













- O CTO
- 20 papers, 2 patents

- Jack Reynolds, CEO SMU
- Startup experience Finance & marketing expertise

- Dr. Alex Lippert, CSO
- Leading Expert in Luminescence
- 20 years, 50 papers, >\$3M federal funding



PEGASUS PARK



Centered in Care Powered by Pride

















Key Advisor/Potential Officer



- Tom Sundelin
- Sales Director at Aerocrine 2000-2009
- Proven record of commercialization, growth, and profitability relating to respiratory medical devices
- Distribution & sales channels



Advisory Team



Dr. Michael Devoy
Chief Medical Officer, Bayer
EVP Medical Affairs &
Pharmacovigilance
for Pharmaceuticals Division



Elisa Maldonado-Holmertz Clinical Development Lead at Aerocrine, Pfizer, Pharmaco



Scott Giambalvo
Former Commercialization
Specialist at Stryker
Medical Advisor of NTEC



Jonathan Crowder \$70M exit, Choose Energy



Dr. Steven Davis M.D.

Head Pulmonologist at
John Peter Smith Hospital
Internal Medicine Chairman



Dr. Artin AtabakiFranchise (COPD) Manager, Bayer



Kevin Coker CEO at ProximaCRO Led 500+ Clinical Trials 25 Drugs FDA Approved



Dr. Adrian Pristas M.D.
Pulmonologist at
Hackensack Meridian Health
Riverview Medical Center



Dr. Rene Leon M.D.
Allergist/Immunologist at
Methodist Southlake Hospital
Baylor Scott & White



Eric Nordstrom

Medical Device Sales Manager

4 Medical Device Exits



Funding for Platform Development

Current Raise: \$1.2M bridge round to hit final respiratory product milestones (technical co-lead investor/partner secured) and scale NO research assay kit sales

Funding for BioSense AMD

Product Finalization: \$357,000 (Quote from Cortex Design)

Breath collection integration, automated sample metering

Initial Manufacturing & Tooling, Quality Management System: \$400,000

VeNO Assay Kit Commercial Launch: \$400,000

Future Funding

AMD Clinical Trials and FDA: \$1,766,000

Previous Funding: \$1.09M (non-dilutive prizes & grants, angel, VC, R&D contracts)

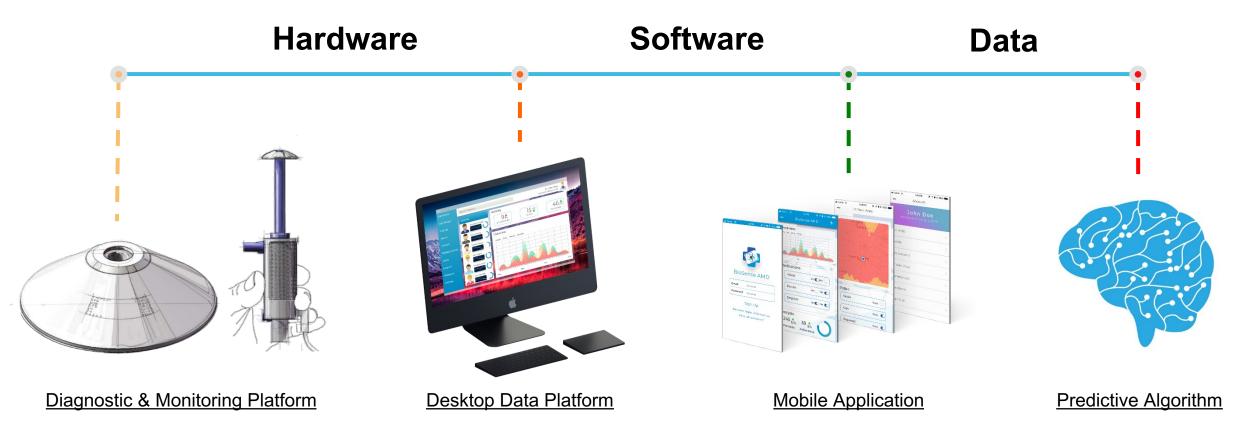


Appendix: Additional Supporting Information

CEO Jack Reynolds jpreynolds@biolumsciences.com (720) 985-3131 www.biolumsciences.com



System Components



- Instant indication of lung function
- Automatic data upload
- Easy-to-use

- Personalized treatment program
- Comprehensive treatment platform
- Automated patient records

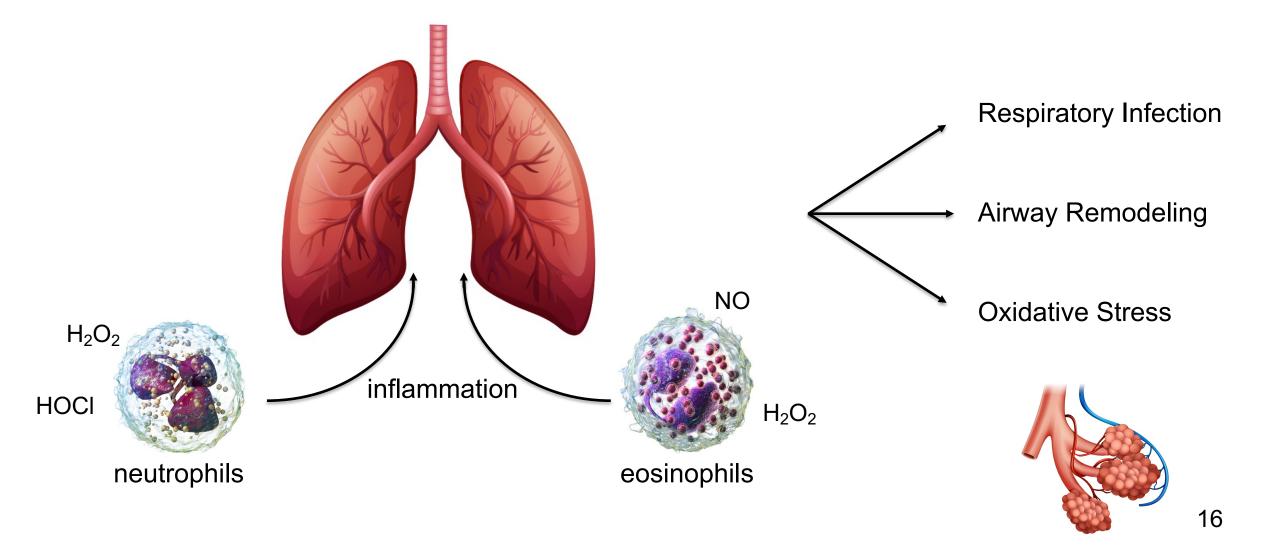
- Remotely monitor patient health
- Create objective data points
- Identify at risk patients

- Prevent exacerbations
- Medication reminders
- Decision support algorithms



eH2O2: Airway Inflammation, Neutrophils, & Disease

How can airway inflammation be tracked non-invasively?





1st Pre-Submission meeting to validate regulatory plan

Completed: FDA recommends 510(k) for BioSense AMD

- 2nd Pre-Submission meeting to validate study design
- 100 patient study over 3 sites (3 Months)
- 500-1000 patients to establish baseline values for eH₂O₂ (9 Months)
- File FDA 510(k) application (Product Code: MXA)





Respiratory Assumptions & References

*Altered Treatment Decision Assumptions: COPD & asthma are inflammatory airway diseases. There is limited data available on the effect of airway inflammation testing on COPD treatment decisions and more research is needed to understand the impact that it will have on overall treatment plans. Studies 11, 12, & 13 highlight the value of airway inflammation testing when selecting therapies for COPD patients. A key assumption in the TPP model is that airway inflammation testing will have a similar impact on COPD treatment decisions as it has in asthma management (31-33%). Further studies will be needed to validate this assumption.

*Reduced Exacerbation Rate Assumptions: Studies 9 & 13 show a significant difference in asthma exacerbation rates between patients using airway inflammation testing in a clinical setting vs. those using the current standard of care. These values range from a 40-58% difference in exacerbation rates, and we assume a 25% reduction in exacerbation rates given this data. There is limited data on the effects of airway inflammation testing on COPD exacerbations, but the literature supports our assumption that exacerbation and a rise in inflammation can be identified early using our technology. Further studies will be needed to validate this assumption. Study 14 shows an improvement in COPD exacerbation detection and readmission rates using only a telehealth remote monitoring system (questionnaires, blood oximetry, blood pressure).

- 1. https://www.ncbi.nlm.nih.gov/pubmed/26108382
- 2. https://www.jmcp.org/doi/pdf/10.18553/jmcp.2016.22.7.848
- 3. https://www.aaaai.org/global/latest-research-summaries/New-Research-from-JACI-In-Practice/refractory-asthma
- 4. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3694800/
- 5. https://www.aafa.org/asthma-facts/
- 6. https://www.hcup-us.ahrq.gov/reports/statbriefs/sb106.pdf
- 7. https://www.ncbi.nlm.nih.gov/pubmed/29408317
- 8. https://www.ncbi.nlm.nih.gov/pubmed/25060819
- 9. https://www.ncbi.nlm.nih.gov/pubmed/27825189
- 10. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6357290/
- 11. https://www.ncbi.nlm.nih.gov/pubmed/20210889
- 12. https://journals.lww.com/md-journal/FullText/2018/11210/Treatment of chronic obstructive pulmonary disease.1.aspx
- 13. https://www.ncbi.nlm.nih.gov/pubmed/23601567
- 14. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5382257/





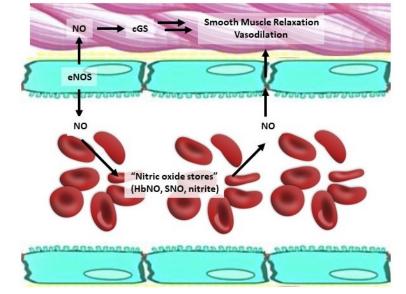
Nitric Oxide Signaling

Targeting nitric oxide signaling

- NO is critically important to human health, and NO-signaling has been an impactful therapy target for >100 years
- Multiple classes of therapy: direct NO donors, PDE5 inhibitors, & soluble guanylyl cyclase stimulators
- Low NO is central factor in HF, hypertension, atherosclerosis, diabetes, erectile dysfunction, and other diseases

| Class | Drug | Disease ^a | | |
|---------------------|--|--|--|--|
| Nitric oxide donors | Nitroglycerin | Approved: angina pectoris | | |
| | Isosobide mononitrate (Imdur) | Approved: angina pectoris | | |
| | Isosorbide dinitrate/hydralazine (BiDil) | Approved: Heart failure | | |
| | Nitroprusside | Approved: hypertensive crisis Approved: reduce bleeding during surgery Approved: acute heart failure | | |
| | Inhaled NO | Approved: infant PAH | | |
| PDE5 inhibitors | Sildenafil | Approved: erectile dysfunction Approved: PAH | | |
| | Vardenafil | Approved: erectile dysfunction | | |
| | Tadalafil | Approved: erectile dysfunction Approved: PAH Approved: benign prostatic hyperplasia Phase 4: diabetic cardiomyopathy | | |
| sGC stimulators | Riociguat | Approved: PAH Approved: CTEPH Phase 2: heart failure | | |
| | Vericiguat | Phase 3: HFrEF Phase 2b: HFpEF | | |
| | Nelociguat | Phase 2: erectile dysfunction | | |
| | Praliciguat | Phase 2: diabetes/hypertension Phase 2: HFpEF | | |
| | Olinciguat | Phase 2: achalasia Phase 2: sickle cell disease | | |

^aPAH: pulmonary arterial hypertension; CTEPH: chronic thromboembolic pulmonary hypertension; HFrEF: heart failure with reduced ejection fraction; HFpEF: heart failure with preserved ejection fraction;



Competition - no way to measure nitric oxide in clinic

- NO measurement requires expensive instrumentation & expertise
- Many methods are indirect & measure NO metabolites
- There is no way to measure NO in the clinic & indirect methods in the lab are prohibitively expensive

Table 2. Comparison of nitric oxide measurement methods.

| | VeNO | EPR | Electrochemistry | Fluorometry | Griess Assay | Ozone CL |
|---------------|--|--|--|---|---|--------------------------------------|
| Advantages | Direct, potentially continuous and quantitative | Direct Considered most specific | Direct Real-time Portable | Direct Fluorescence response | Cheap Commercial kits available | Established use in blood |
| Disadvantages | Sensitivity and use in blood need to be investigated | Specialized equipment Technical Expertise Spin traps | Difficult calibration Variability Biofouling | Uncertain specificity Semiquantitative Blood interferes with fluorescence | Indirect Measures nitrite Dietary interferences Limited to plasma | Indirect Specialized equipment |
| Cost | \$2,000 (device + \$25 cartridges) | \$183,365ª | \$6,591 ^b | \$2,970 ^{c,d} | \$1,110 ^{d,e} | \$51,724 ^f |



Expansion on Dr. Lippert

<u>Dr. Alex Lippert - Chief Science Officer</u> - Alex is a globally recognized expert in chemiluminescence bioimaging with 20 years of experience in synthetic chemistry and the development of optical techniques for imaging biological analytes in living cells, animals, and clinical samples.

He has filed five patents, published more than 50 papers, and has been awarded nearly \$3M in funding from the National Institutes of Health, National Science Foundation, and several private research foundations. Alex's scientific knowledge and mindset has been a strong driving force for BioLum's product development.

Dr. Lippert Publications:

View List of Dr. Lipperts Publications on Reactive Oxygen and Nitrogen Species



Strategic Partnership Opportunities

1. Precision Medicine R&D Partnership

- a. Accelerate development by measuring and validating efficacy of novel therapeutic compounds
- b. Maximize potential of therapeutic assets

2. Co-development and Commercialization Partnership

- a. Custom assay services
- b. Expand lines of future products that include RPM device + digital for cardiovascular and respiratory patient conditions
- c. Assay component sourcing and/or clinical development of assays/products, sales platform and distribution channels

3. Strategic Corporate Venture Investment, In-licensing, Acquisition

- a. <u>Explore novel biomarker assays</u> with BioLum's scalable chemiluminescent solution
- b. Expand commercial reach with research and clinical sales in key therapy areas/segments
- c. Explore and identify complementary/companion diagnostics (CDx)

4. Clinical Study Collaboration - Enhance therapy development and clinical trials

- a. Stratify patients with additional clinical endpoints (nitric oxide bioavailability and neutrophilic airway inflammation)
- b. Improve patient selection and Likelihood of Approval (LOA)
- c. Monitor response to treatment

Commercialize biomarker assays to improve therapies and the lives of those living with chronic diseases alongside global strategic partners.



Innovating Chronic Disease Treatment and Management

