

# FY2021 First-Half Results Briefing Session —Research and Development Highlights—




November 2, 2021

JCR Pharmaceuticals Co., Ltd

- Research and Development Topics(Period : June to October 2021)
- Lysosome treatment pipeline
  - JR-171
  - JR-141
  - Others, Expected timeline
- Growth hormone, Regenerative medicine area
  - JR-401X
  - Others, Expected timeline

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2021

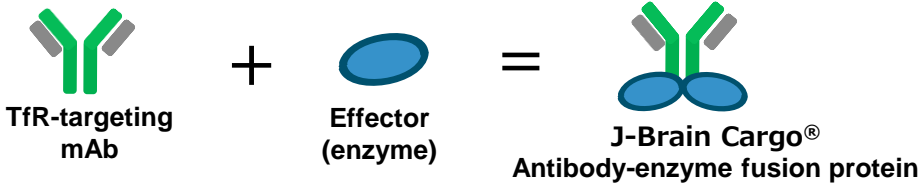
- ◆ Jul. Presentation at 16th International Symposium on MPS and Related Diseases (MPS2021)  
Development pipeline for lysosomal storage diseases which apply the J-Brain Cargo® (JR-141, 171, 441, 446) were conducted oral and poster presentations in MPS2021.
  
- ◆ Sep. Conclusion of **an exclusive co-development and commercialization agreement for JR-141 with Takeda Pharmaceutical Co., Ltd** in certain regions.  
The two companies will collaborate to bring this therapy to patients as quickly as possible upon completion of the global Phase 3 program, which will be conducted by JCR.  × 
  
- ◆ Sep. **JR-171** was granted **Fast Track Designation** from US FDA.   
Fast track is a process that expedite the review of drugs to treat serious conditions and fill an unmet medical need, so accelerated clinical development and early approval can be expected.
  
- ◆ Oct. **JR-141** was granted **PRIME Designation** from the EMA.   
PRIME is a scheme launched by EMA to enhance support for the development of medicines that target an unmet medical need. With PRIME designation, JCR can expect to be eligible for accelerated assessment of JR-141 at the time of application for a marketing authorization in Europe.

Code	Indication		Preclinical	Cinical Trials	Filed	Approved	Remarks	
<b>JR-141</b>	MPS type II (Hunter Syndrome)		<b>Filed</b>					<ul style="list-style-type: none"> <li>ERT</li> <li>J-Brain Cargo®</li> </ul>
			<b>Phase 3</b>					
<b>JR-171</b>	MPS type I (Hurler Syndrome etc.)		<b>Phase 1/2</b>					<ul style="list-style-type: none"> <li>ERT</li> <li>J-Brain Cargo®</li> <li>J-MIG System®</li> </ul>
<b>JR-162</b>	Pompe disease		<b>Preclinical</b>				<ul style="list-style-type: none"> <li>ERT</li> <li>J-Brain Cargo®</li> </ul>	
<b>JR-441</b>	MPS type IIIA (Sanfilippo A Syndrome)		<b>Preclinical</b>				<ul style="list-style-type: none"> <li>ERT</li> <li>J-Brain Cargo®</li> </ul>	
<b>JR-443</b>	MPS type VII (Sly Syndrome)		<b>Preclinical</b>				<ul style="list-style-type: none"> <li>ERT</li> <li>J-Brain Cargo®</li> </ul>	
<b>JR-446</b>	MPS type IIIB (Sanfilippo B Syndrome)		<b>Preclinical</b>				<ul style="list-style-type: none"> <li>ERT</li> <li>J-Brain Cargo®</li> </ul>	
<b>JR-401X</b>	SHOX deficiency		<b>Phase 3</b>					<ul style="list-style-type: none"> <li>Expanded indication of GROWJECT®</li> </ul>
<b>JR-142</b>	Pediatric growth hormone deficiency		<b>Phase 2</b>					<ul style="list-style-type: none"> <li>J-MIG System®</li> <li>Recombinant long-acting GH</li> </ul>
<b>JR-031HIE</b>	Hypoxic ischemic encephalopathy in neonates		<b>Phase 1/2</b>					<ul style="list-style-type: none"> <li>Expanded indication of TEMCELL®HS Inj.</li> </ul>
<b>JTR-161/ JR-161</b>	Acute cerebral infarction		<b>Phase 1/2</b>					<ul style="list-style-type: none"> <li>Co-developed with Teijin Limited</li> </ul>

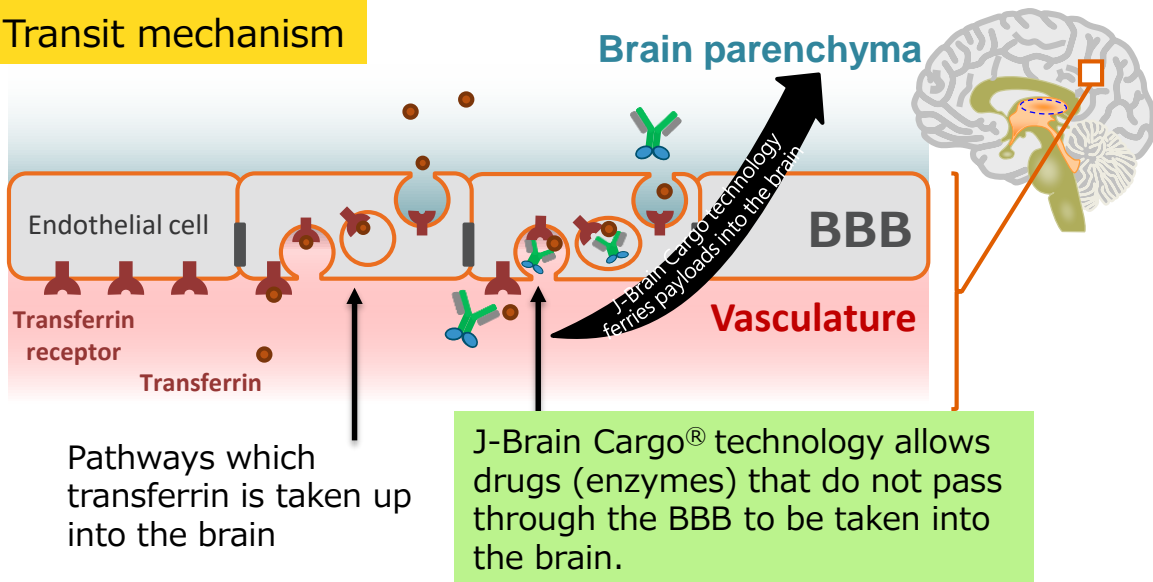
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# Penetrating BBB through transferrin receptor to deliver the active ingredient into the brain

Molecular concept



Transit mechanism

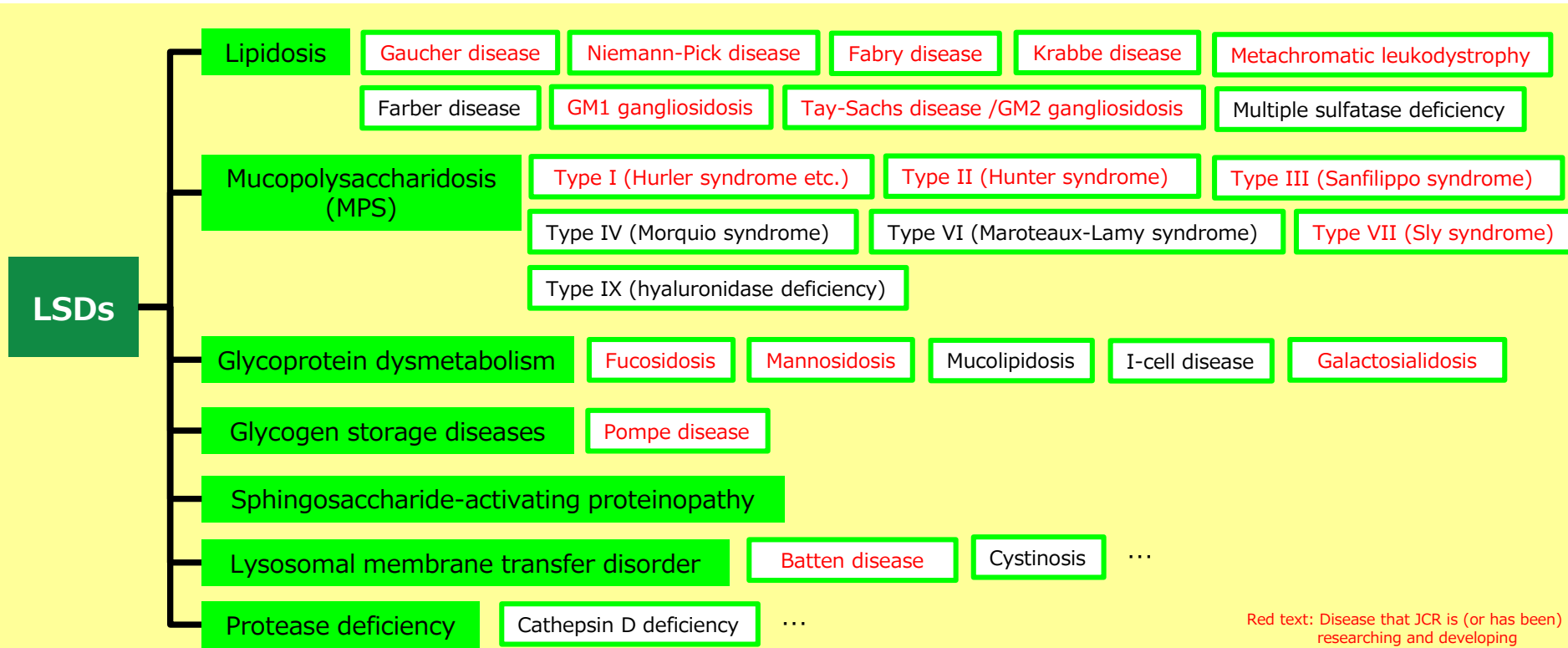


Possibility of development

- Lysosomal storage diseases
- Alzheimer's disease
- Parkinson's disease
- Neuro-Oncology
- Neuro-Inflammation

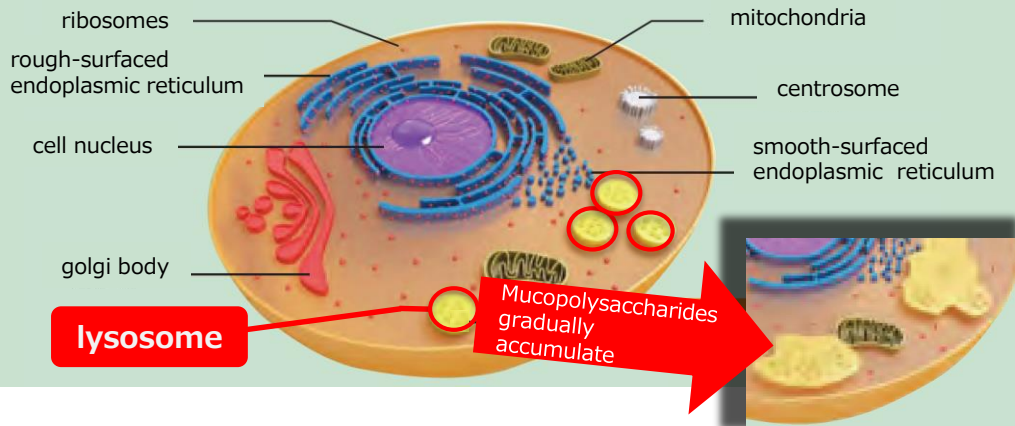
# Lysosomal Storage diseases (LSDs)

LSD is a group of rare inherited diseases in which one of enzymes in the lysosomes is congenitally missing or functionally deficient, resulting in the accumulation of metabolic waste-which fails to dissolve. Symptoms vary depending on the affected enzymes and the accumulated substrates.



# MPS (Mucopolysaccharidosis)

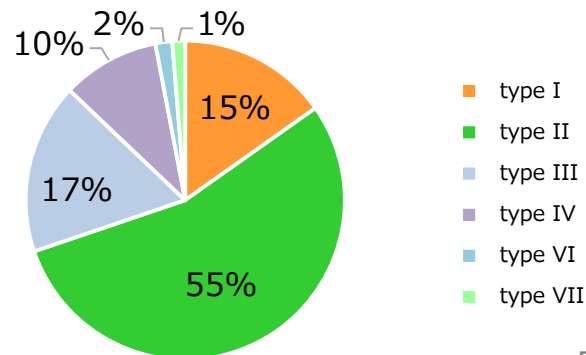
MPS is a group of LSD in which mucopolysaccharides such as dermatan sulfate (DS) and heparan sulfate (HS) accumulate. Accumulation of mucopolysaccharides causes severe central nervous system (CNS) disorders, organ enlargement, soft tissue disorders, osteoarthritis, and cartilage disorders.



## Classification of MPS (some excerpts)

MPS type	Enzyme deficiency	Accumulated substances
I	$\alpha$ -L-iduronidase	HS, DS
II	Iduronate-2-sulfatase	HS, DS
IIIA	Heparan N-sulfatase	HS
IIIB	$\alpha$ -N-acetylglucosaminidase	HS
VII	$\beta$ -glucuronidase	DS, HS

## Frequency of Incidence by MPS Type (Japan)\*



\*折居 忠夫ら,  $\Delta$ 多糖症 UPDATE, E-N MEDIX, 第1版第1刷, 2011: 1-2, P.8

# MPS type I (Hurler, Hurler-Scheie, Scheie syndrome)

MPS I (ratio) *1	Symptoms*2	Central nervous system symptoms (CNS)*2	Conventional treatments*3
Hurler (≒60%)	the most severe form, symptoms emerge shortly after birth and progress rapidly	significant developmental delay and cognitive decline	HSCT* ERT**
Hurler-Scheie (≒20%)	an intermediate phenotype	mild cognitive impairment	
Scheie (≒10%)	typically milder symptoms and a slower disease progression	mostly normal intelligence	

※Approximately 10% of patients were classified as having an unknown or undetermined phenotype.

\*HSCT: Hematopoietic Stem Cell Transplantation

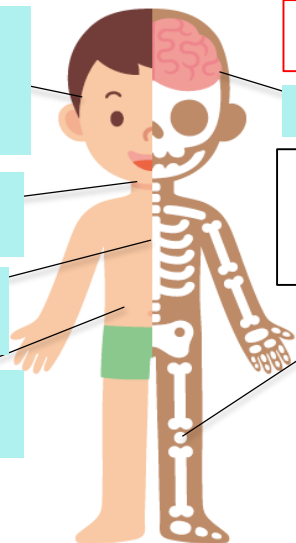
\*\*ERT: Enzyme Replacement Therapy

characteristic coarse facial features  
corneal clouding  
hearing loss

airway obstruction  
→ respiratory failure

heart valve disease  
→ cardiac failure

hepatosplenomegaly  
umbilical hernia



## Main symptoms\*2

### CNS symptoms

Develop symptoms such as psychomotor retardation.  
The developmental age peaks at 2-3 years of age.

short stature  
cervical spine compression  
joint stiffness and contractures

◆ It greatly reduces quality of life (QOL) in patients with CNS or systemic symptoms.

JR-171



Drugs are delivered to both the body and the brains, by adapting **J-Brain Cargo®** and passing the BBB, can be **expected to improve** the systemic symptoms and **CNS symptoms**.

\*1:Tomatsu S, Lavery C, Giugliani R, Harmatz P, Scarpa M, Wegrzyn G, et al. Mucopolysaccharidoses Update (2 Volume set); 2018. Chapter 9, Mucopolysaccharidosis type I: clinical features biochemistry, diagnosis, genetics, and treatment. Mucopolysaccharidoses update; p. 143-64.

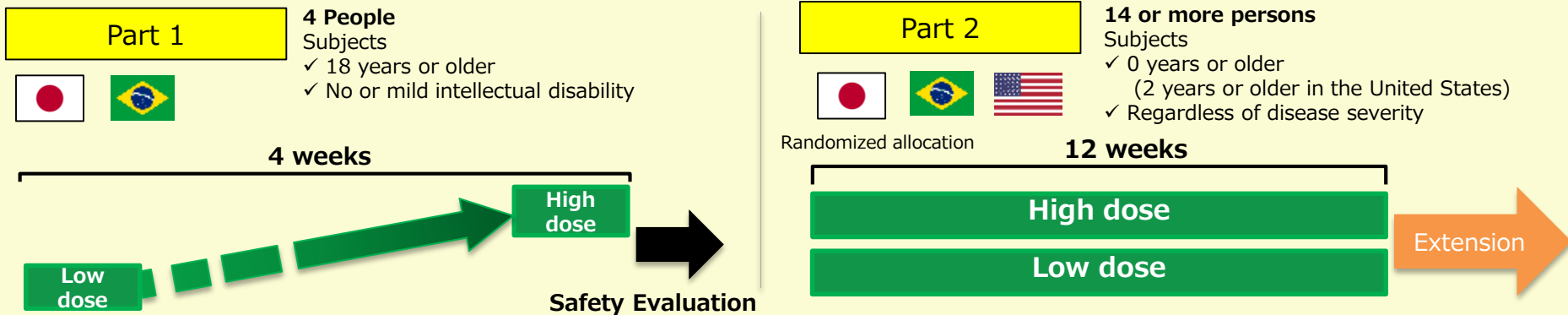
\*2:折居 忠夫ら, △口多糖症 UPDATE, E-N MEDIX, 第1版第1刷, 2011: P.xii,2,102-103

\*3:Michael Beck, MD, The natural history of MPS I: global perspectives from the MPS I Registry, Genetics in Medicine, October 2014: P.759-765.



### Phase 1/2 Global Clinical Trial (JR-171-101) : Brief Summary

◆ JR-171 was granted Fast Track Designation from US FDA in Sep. 2021.

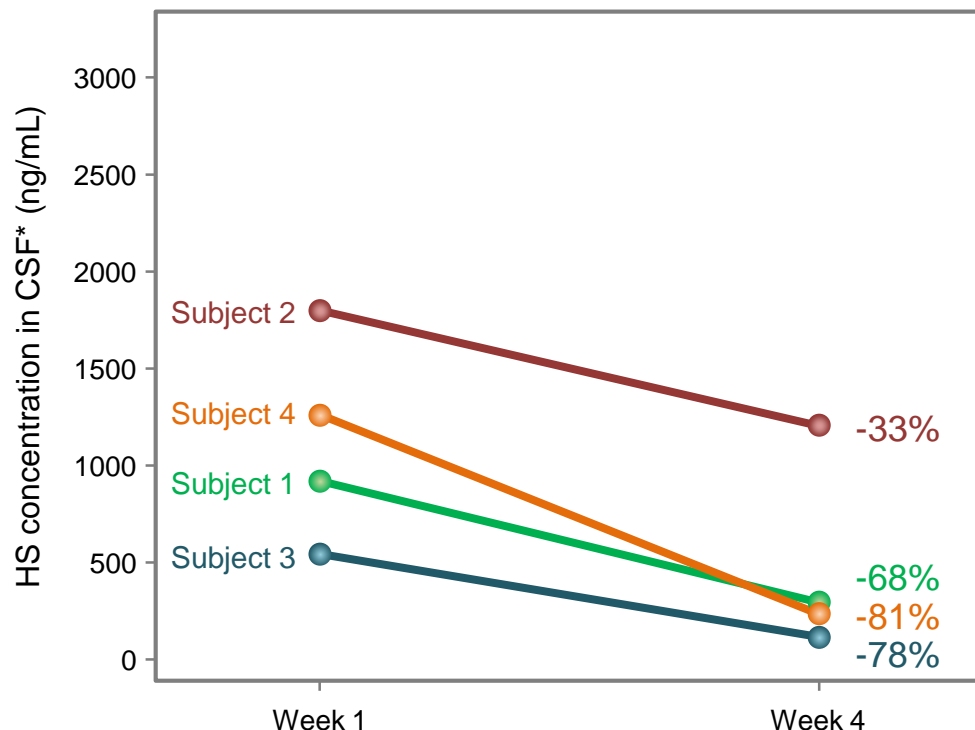


	Part 1	Part 2
Primary endpoint	Safety	
Secondary and exploratory endpoints	• Plasma drug concentrations and pharmacokinetic parameters • Exploratory Efficacy for Central Nervous System Symptoms and Systemic Symptoms	
Allocation	Japan•Brazil	Japan•Brazil•USA
Summary	clinicaltrials.gov Identifier : <a href="https://clinicaltrials.gov/ct2/show/study/NCT04227600">NCT04227600</a>	



### Phase 1/2 Global Clinical Trial (JR-171-101) : CSF\*-heparan sulfate (HS) levels in Part 1 subjects

\*CSF: Cerebrospinal fluid



### Subjects background (N=4)

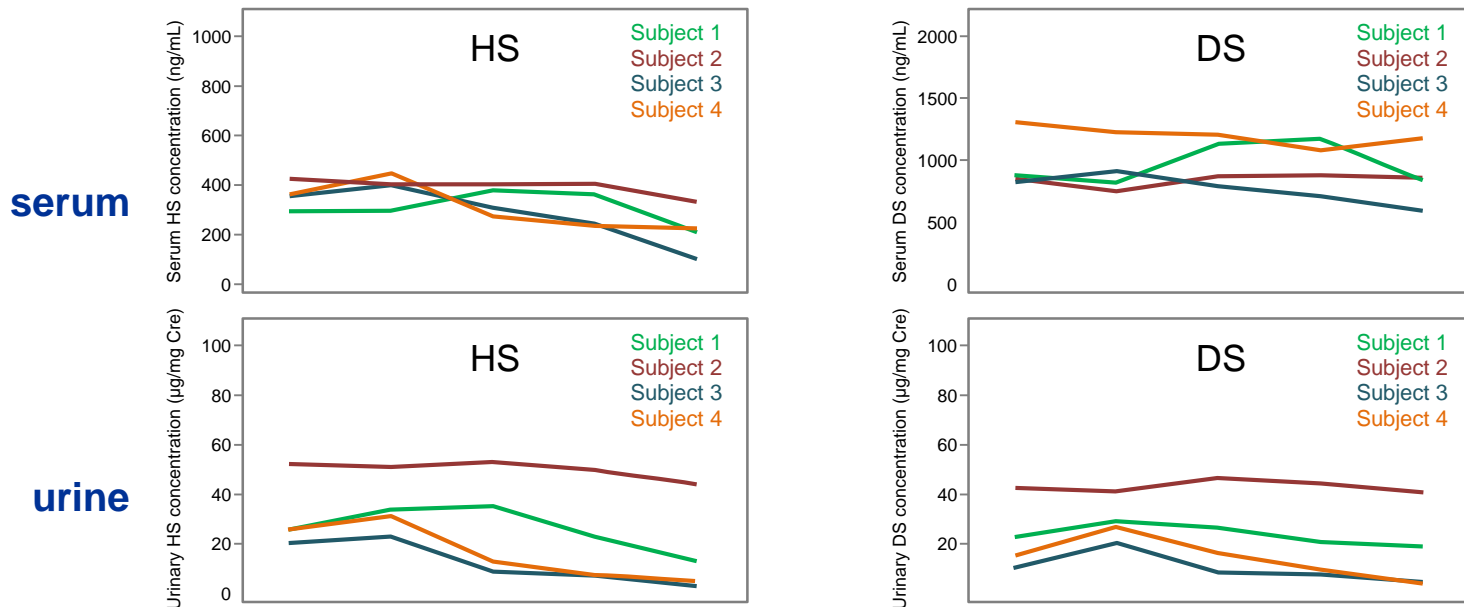
- Scheie syndrome
- No intellectual disability
- Prior treatment with existing ERT
- No history of HSCT

### Results

CSF HS concentrations **decreased in all subjects** (mean decrease of 65%)



### Phase 1/2 Global Clinical Trial (JR-171-101) : heparan sulfate/dermatan sulfate (HS/DS) levels in Part1 subjects



### Results

HS/DS concentrations remained stable in all subjects throughout the treatment period.

**Phase 1/2 Global Clinical Trial (JR-171-101) : Brief Summary****Part1 : Summary**

- CSF HS levels decreased from baseline in all subjects
- There were no serious safety concerns.

**Current Status and Future Planning**

- JR-171-101 Part 2 with a 12-week treatment is in progress.
- Phase 3 pivotal study to confirm long-term safety and efficacy of JR-171 is planned

IZCARGO® (Brand name in Japan)  
pabinafusp alfa (BBB-penetrating iduronate-2-sulfatase, rDNA origin)

### JR-141 Clinical Development Package



**Japan**

- Phase 1/2 clinical trial
- Phase 3 clinical trial



Manufacturing and marketing approval  
(Mar. 23, 2021)  
Listed in the National Health Insurance  
(NHI) reimbursement price list and  
launched  
(May 19, 2021)



**Post-marketing clinical  
trials (approx. 10 years)  
in progress**

Clinical trials for  
application for  
manufacturing  
and marketing  
approval

Clinical trials to  
obtain long-term  
clinical data



**Brazil**

- Phase 2 clinical trial



**Application for  
marketing approval  
(Dec. 22, 2020)**



**Long-term administration  
study ongoing**



**Global**

(US, Brazil, UK, France,  
Germany, Spain)

- Phase 3 clinical trial



**Initiated recruitment for  
Global Phase 3 clinical trial  
(2022)**

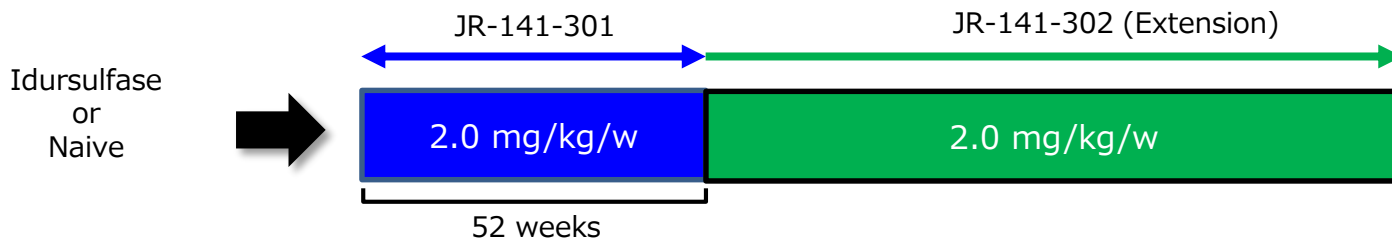
## JR-141

IZCARGO® (Brand name in Japan)

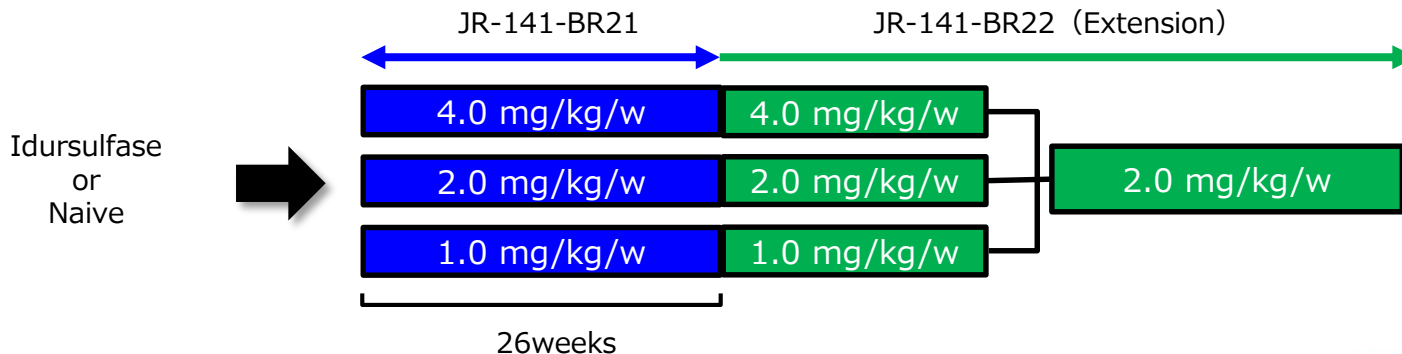
pabinafusp alfa (BBB-penetrating iduronate-2-sulfatase, rDNA origin)



### JR-141-301(phase 2/3) and JR-141-302(Extension) clinical trials in Japan



### JR-141-BR21(phase 2) and JR-141-BR22(Extension) clinical trials in Brazil



IZCARGO® (Brand name in Japan)

pabinafusp alfa (BBB-penetrating iduronate-2-sulfatase, rDNA origin)

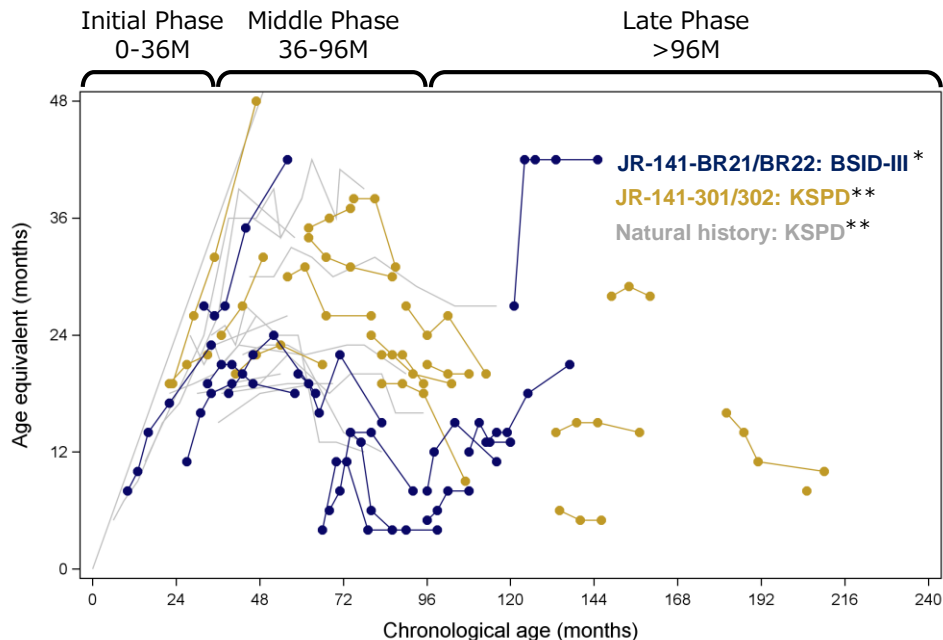


Phase 3 clinical trials in Japan (JR-141-301/302)



Phase 2 clinical trials in Brazil (JR-141-BR21/BR22)

### Merged age equivalent score in severe patients overlaid with the natural history



- Subjects who began treatment with JR-141 in infancy showed long-term improvement over the trials period.
- It showed that stable developmental trends for up to 2 years, in contrast to the natural history of severe MPS type II.

\*BSID-III (The Bayley Scales of Infant and Toddler Development, Third Edition) : Assessment of cognitive, language, motor, social-emotional, and adaptive behaviors in infants aged 1-42 months

\*\*KSPD (Kyoto. Scale of Psychological. Development) : Observations and evaluations of responses to test items arranged by age group for three domains: postural motor, cognitive/adaptive, and language/social.

IZCARGO® (Brand name in Japan)

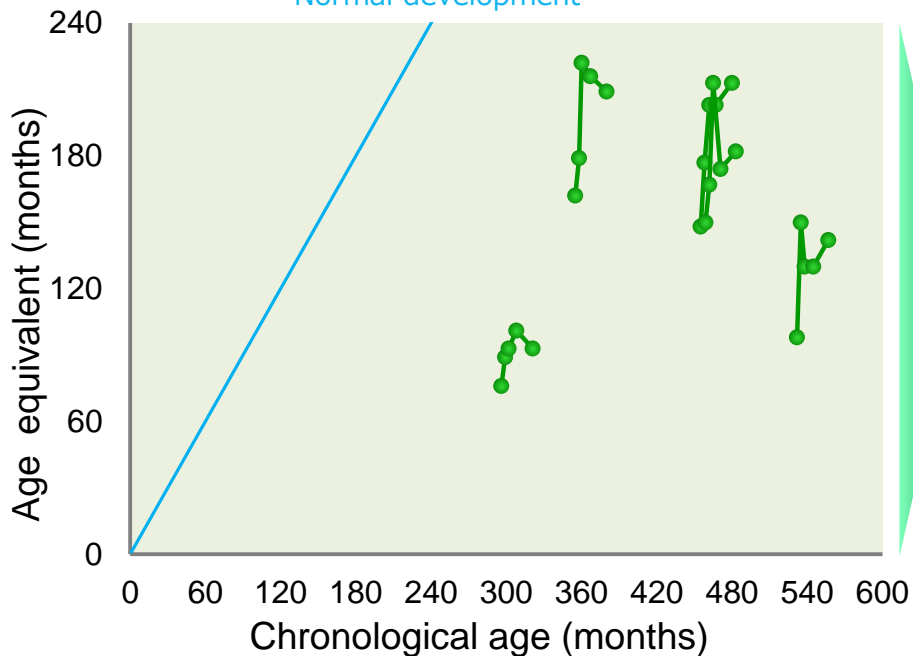
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### Phase 2 clinical trials in Brazil (JR-141-BR21/BR22)

#### Kaufman (KABCII)\* Assessment in subjects with attenuated symptoms.

Normal development



#### Observations and conclusions:

- Mean AE in attenuated subjects changed by ~41 months during a 24- months treatment period, indicating a neurological improvement in this adult population

#### Absolute change from baseline

VISIT	Mean (SD)	Median [min - max]
Week 52	37.7 (15.3)	32.2 [23.4 – 54.8]
Week 104	40.9 (17.9)	44.0 [16.8 – 64.8]

\*KABCII is a test that measures intelligence from two measures: "cognitive processing ability" and "mastery" in children from 2 years and 6 months to 18 years of age. Cognitive processing is focused on "successive, concurrent, planning, and learning" and learning is focused on "word record, reading, writing, and arithmetic".

IZCARGO® (Brand name in Japan)

pabinafusp alfa (BBB-penetrating iduronate-2-sulfatase, rDNA origin)

**Narrative Reports (JR-141-301 and JR-141-BR22)****Japan (JR-141-301)****Language**

- 12/18 of narrative reports from severe patients showed an improvement in language.
- Changes observed include increase word count, increased number of conversations, and resumed singing.

**Liveliness/Expression**

- 11/18 of narrative reports demonstrated an improvement in liveliness/expression
- Changes observed include increase in activity, richer facial expression

**Brazil (JR-141-BR21/BR22)****General changes observed**

- Generally positive changes were found in language, motor skills and liveliness/ expression
- Even the patients without marked improvement in language or motor function showed positive changes in liveliness/ expression



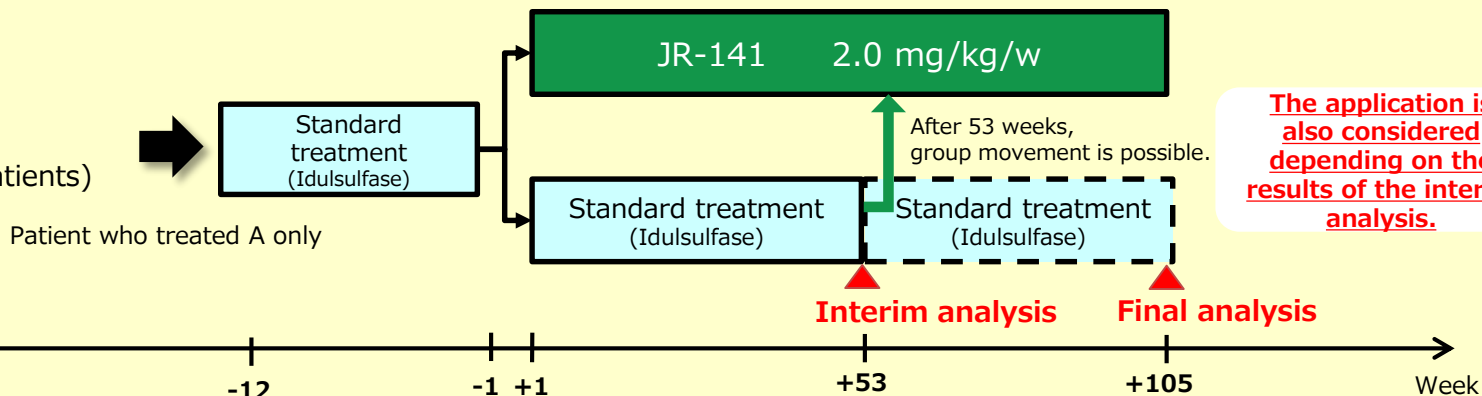
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◆ Designation of PRIME from the EMA in Oct. 2021

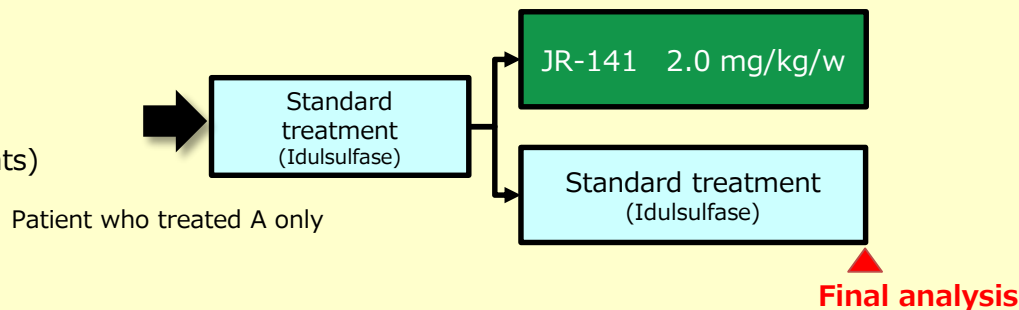
(Summary)

◆ Cohort A :  
(Neuronopathic patients)



The application is also considered depending on the results of the interim analysis.

◆ Cohort B :  
(Attenuated patients)



# Lysosomal diseases : Expected timeline

Note: Information after 2022 is a plan at this stage and is subject to change

	2021	2022	2023	2024	
<b>JR-141</b> pabinafusp alfa (MPS II)	Brazil : Filed <b>Global : Initiation of Phase 3 trial</b>			<ul style="list-style-type: none"> <li>• SAKIGAKE (PMDA)</li> <li>• Orphan Drug (PMDA)</li> <li>• Orphan Drug (FDA)</li> <li>• Fast Track (FDA)</li> <li>• Orphan Drug (EC)</li> <li>• PRIME (EMA)</li> </ul>	
<b>JR-171</b> (MPS I)	<b>Global : Phase 1/2 trial (Ongoing)</b>		Initiation of Phase 3 trial		<ul style="list-style-type: none"> <li>• Orphan Drug (FDA)</li> <li>• Fast Track (FDA)</li> <li>• Orphan Drug (EC)</li> </ul>
<b>JR-441</b> (MPS IIIA)	<b>Non-clinical (Ongoing)</b>	Initiation of Phase 1/2 trial			
<b>JR-162</b> (Pompe disease)	<b>Non-clinical (Ongoing)</b>		Initiation of Phase 1/2 trial		
<b>JR-443</b> (MPS VII)	<b>Non-clinical (Ongoing)</b>		Initiation of Phase 1/2 trial		
<b>JR-446</b> (MPS IIIB)	<b>Non-clinical (Ongoing)</b>		Initiation of Phase 1/2 trial		

# JCR's 17 ERT pipeline for Lysosome diseases

★ : Presentation at 18th Annual **WORLDSymposium™2022**    □ : Project with progress in development stage since May 2021

	Indications with existing somatic ERT (Worldwide)	Indications with no established standard of care (Worldwide)
Filed	<div style="border: 1px solid green; border-radius: 10px; padding: 5px; display: inline-block;"> <span style="background-color: yellow; border-radius: 50%; padding: 2px 5px;">JR-141</span> <b>MPS II (Hunter)</b> ★         </div>	
Clinical	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid green; border-radius: 10px; padding: 5px; display: inline-block;"> <span style="background-color: yellow; border-radius: 50%; padding: 2px 5px;">JR-171</span> <b>MPS I (Hurler etc.)</b> ★         </div> <div style="border: 1px solid green; border-radius: 10px; padding: 5px; display: inline-block;"> <span style="background-color: yellow; border-radius: 50%; padding: 2px 5px;">JR-141</span> <b>MPS II (Hunter)</b> </div> </div>	
Non-clinical	<div style="border: 1px solid green; border-radius: 10px; padding: 5px; display: inline-block;"> <span style="background-color: yellow; border-radius: 50%; padding: 2px 5px;">JR-162</span> <b>Pompe</b> </div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid green; border-radius: 10px; padding: 5px; display: inline-block;"> <span style="background-color: yellow; border-radius: 50%; padding: 2px 5px;">JR-441</span> <b>MPS IIIA (Sanfilippo A)</b> ★         </div> <div style="border: 1px solid red; border-radius: 10px; padding: 5px; display: inline-block;"> <span style="background-color: yellow; border-radius: 50%; padding: 2px 5px;">JR-446</span> <b>MPS IIIB (Sanfilippo B)</b> </div> </div>
Process development	<div style="border: 1px solid green; border-radius: 10px; padding: 5px; display: inline-block;"> <span style="background-color: yellow; border-radius: 50%; padding: 2px 5px;">JR-443</span> <b>MPS VII (Sly)</b> </div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid green; border-radius: 10px; padding: 5px; display: inline-block;">Fucosidosis</div> <div style="border: 1px solid red; border-radius: 10px; padding: 5px; display: inline-block;">Krabbe disease</div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid red; border-radius: 10px; padding: 5px; display: inline-block;">Batten, Infantile (CLN1)</div> <div style="border: 1px solid red; border-radius: 10px; padding: 5px; display: inline-block;">Tay-Sachs disease</div> </div>
PoC in model mouse	<div style="border: 1px solid green; border-radius: 10px; padding: 5px; display: inline-block; margin-right: 20px;">Niemann-Pick</div> <div style="border: 1px solid green; border-radius: 10px; padding: 5px; display: inline-block;">Batten, Late-infantile</div>	<div style="border: 1px solid green; border-radius: 10px; padding: 5px; display: inline-block; margin-right: 20px;">GM1 Gangliosidosis</div> <div style="border: 1px solid green; border-radius: 10px; padding: 5px; display: inline-block;">MLD</div>
Basie Res.	<div style="border: 1px solid green; border-radius: 10px; padding: 5px; display: inline-block;">Gaucher</div>	<div style="border: 1px solid red; border-radius: 10px; padding: 5px; display: inline-block;">Galactosialidosis</div>

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## JR-401X

Expanded indication of GROWJECT® : SHOX deficiency

- ◆ SHOX deficiency is a congenital disorder caused by micro deletions, duplications, or mutations that result in loss of function of a growth-gene SHOX (Short stature homeobox containing gene) present on the sex chromosomes.
- ◆ The potential number of patients in Japan is expected to range from 450 to 500 patients/year, but the number of patients diagnosed in clinical practice is extremely small, because of necessary for genetic diagnosis.

Recombinant Human Growth Hormone

## GROWJECT®



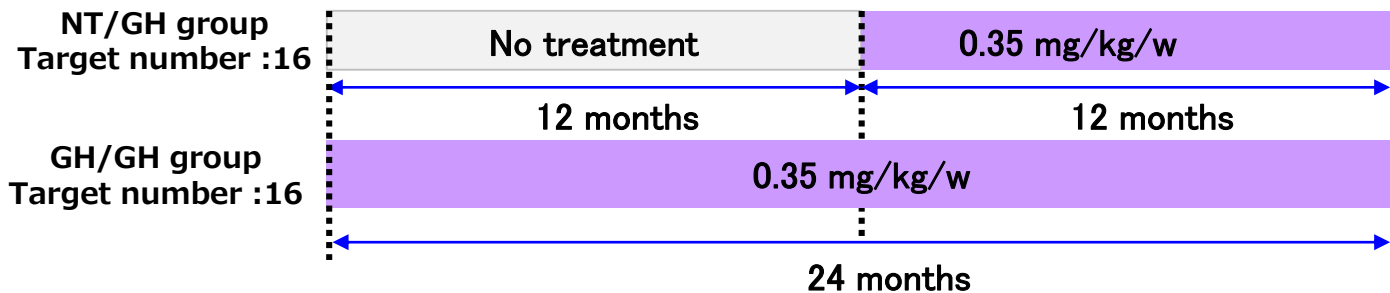
Indications (As of Nov. 2021)

- Growth Hormone Deficiency
- Turner Syndrome
- Adult Growth Hormone Deficiency
- Small for Gestational Age

## JR-401X

GROWJECT® additional indication: SHOX deficiency

JR-401X-301 : Design (JAPIC trial ID : [JapicCTI-183946](https://www.clinicaltrials.gov/ct2/show/study/NCT02183946))



### Efficacy endpoints

- Primary endpoint
  - ✓  $\Delta$  chronological age - equivalent height SDS (for 12 months after the start of the study)
- Secondary endpoints
 

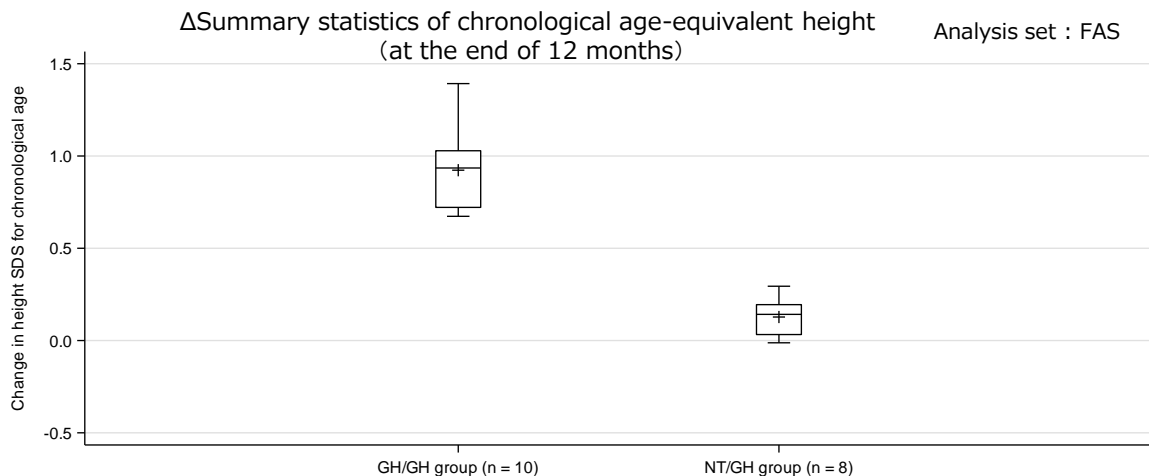
✓ chronological age - equivalent height SDS	✓ bone age	✓ bone age - equivalent height SDS
✓ chronological age - growth velocity SDS	✓ $\Delta$ bone age	✓ $\Delta$ bone age - equivalent height SDS
✓ $\Delta$ chronological age - growth velocity SDS	✓ $\Delta$ bone age / $\Delta$ chronological age	✓ IGF-I SDS in serum
✓ growth velocity		

## JR-401X

Long-acting recombinant growth hormone  
 Growject<sup>®</sup> additional indication: SHOX deficiency

		GH/GH group N=10	NT/GH group N=9	Difference
Change in height SDS for chronological age	N	10	8	
	mean(SD)	0.932(0.213)	0.127(0.105)	0.796(0.174)
	median	0.935	0.142	p<0.001
	[min-max]	[0.67 - 1.39]	[-0.01 - 0.29]	
	95%CI	0.771 - 1.075	0.040 - 0.215	0.621 - 0.971

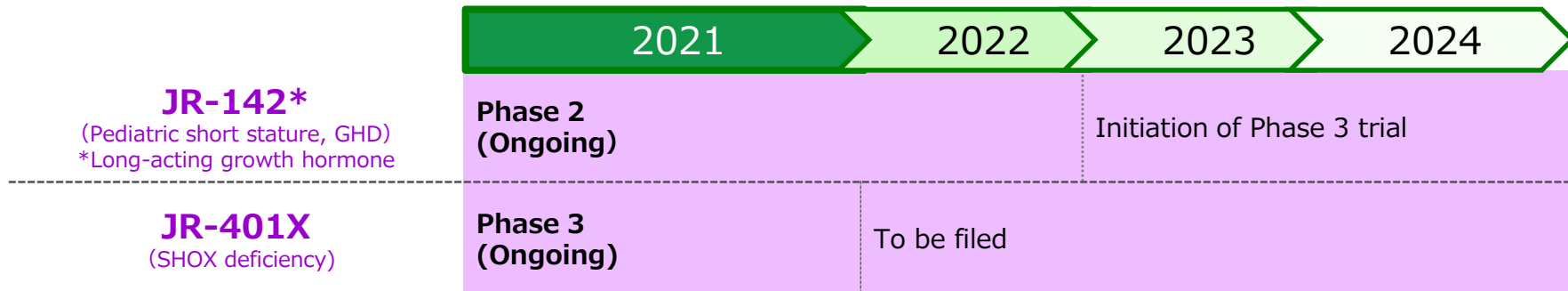
CI : confidence interval, SD : standard deviation



Statistically significant differences were observed in the primary and secondary endpoints between the GROWJECT<sup>®</sup> group and the no-treatment group.

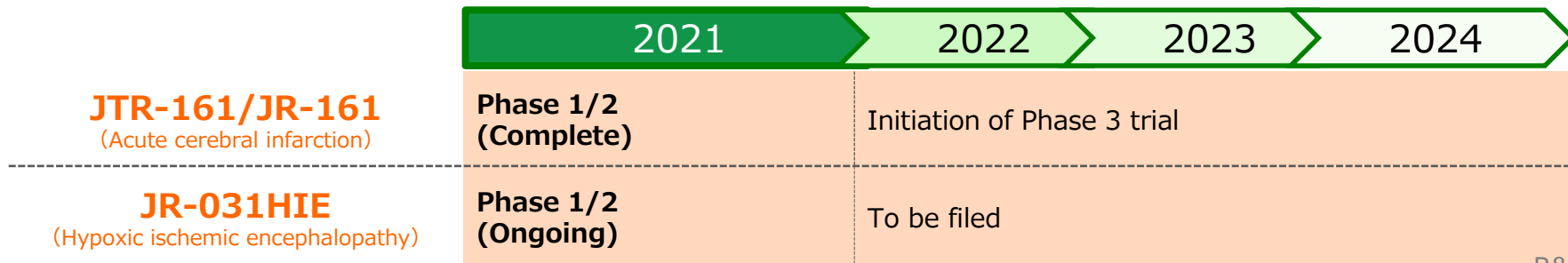
# Other pipeline (Growth Hormone and regenerative medicine area)

## Expected timeline (Growth Hormone area)



Note: Information after 2022 is a plan at this stage and is subject to change

## Expected timeline (regenerative medicine area)



Note: Information after 2022 is a plan at this stage and is subject to change



– REVOLUTION into the Future –