

### **Investor Presentation**

## Shares Magazine/AJ Bell webinar



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## Agenda

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**Company Overview & Investment Highlights** 

How is Feraccru<sup>®</sup>/Accrufer<sup>®</sup> distinguished from competitors

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US Market Opportunity

Europe/China

Cash

Summary



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# **Company Overview & Investment Highlights**

- AIM-listed biotech company (STX.L)
  - Market capitalisation ~£64m (@15Jan2021)
- Primary focus is on developing and commercialising Feraccru<sup>®</sup>/Accrufer<sup>®</sup>
  - A novel oral therapy for treating iron deficiency (ID) in adults, with or without anaemia
  - Approved in the USA and EU
  - Patent protection until 2035
  - Three positive phase III clinical trials have confirmed effectiveness and tolerability
  - Commercialisation out-licensed to
    - Europe, Australia, New Zealand Norgine in Q4 2018
    - China, Taiwan, Hong Kong, Macau ASK Pharm in Q1 2020
- Development pipeline
  - Feraccru<sup>®</sup>/Accrufer<sup>®</sup> Phase III paediatric study under way
  - PT20 (a phosphate binder for treatment of hyperphosphatemia), requires one phase III study to submit a MAA in Europe and NDA in the USA
- Semi-virtual UK-based company
  - Out-source clinical trials, manufacturing and Europe/China commercialisation
  - Experienced management team
  - 15 employees



# **Investment Highlights**



- Europe commercialisation by Norgine BV, currently marketed in Germany, UK and Scandinavia. Launches in France, Italy and Spain expected in 2021/2022
- China licensed to Beijing Aosaikang Pharmaceutical Co. Ltd ("ASK Pharm"). One further Phase III study required; approval expected 2023

#### Very substantial valuation upside from US opportunity

- ~10 million ID patients suffering from anaemia
- ~10 million monthly prescriptions per year of oral iron salts; ~2.3 million doses annually of intravenous (IV) iron
- Substantial unmet need because existing 1st line generic oral iron salts are poorly tolerated; 2nd line IV iron is inconvenient for patients and expensive

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### Feraccru<sup>®</sup>/Accrufer<sup>®</sup> is a NOVEL ORAL product with broad indication for treatment of ID in adults:

- Three phase III studies confirmed safety, tolerability and effectiveness
- Advantages over both other oral products and intravenous iron therapy
- Patent protection until 2035

#### Accrufer<sup>®</sup> will be launched in the US

- EITHER via a commercialisation out-licence arrangement
- OR via a Shield-led launch



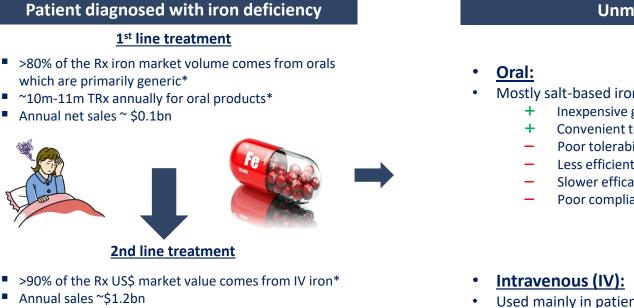


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How is Feraccru<sup>®</sup>/Accrufer<sup>®</sup> distinguished from competitors

## **Current ID treatment paradigm: significant unmet need**



- Comprised of primarily branded products:
  - Injectafer<sup>®</sup>, Feraheme<sup>®</sup>, Monoferric<sup>®</sup>, Venofer<sup>®</sup>,





### **Unmet Need**

- Mostly salt-based iron compounds
  - Inexpensive generics
  - Convenient to take
  - Poor tolerability in the gut
  - Less efficient absorption
  - Slower efficacy
  - Poor compliance

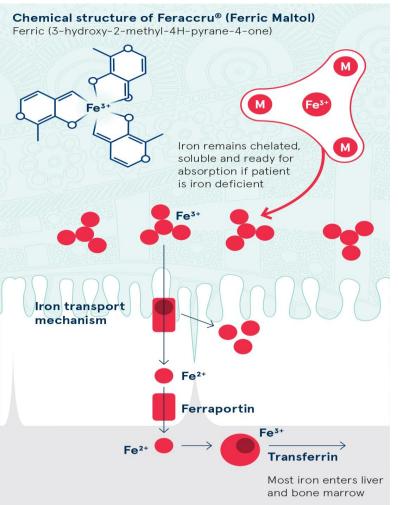
- Used mainly in patients intolerant of oral therapies
  - + Increases iron levels quickly
  - Better bioavailability/absorption
  - No compliance issue
  - Risk of iron overload
  - **Risk of allergic reaction**
  - **Risk of infection**
  - **Requires hospital administration**
  - Inconvenient
  - Expensive

The poor tolerability of salt-based oral iron therapies and the cost/inconvenience of IV iron together create significant unmet need and commercial opportunity for Feraccru<sup>®</sup>/Accrufer<sup>®</sup>



\* Source:IQVIA/IMS

# Feraccru<sup>®</sup>/Accrufer<sup>®</sup> is a novel and different oral formulation

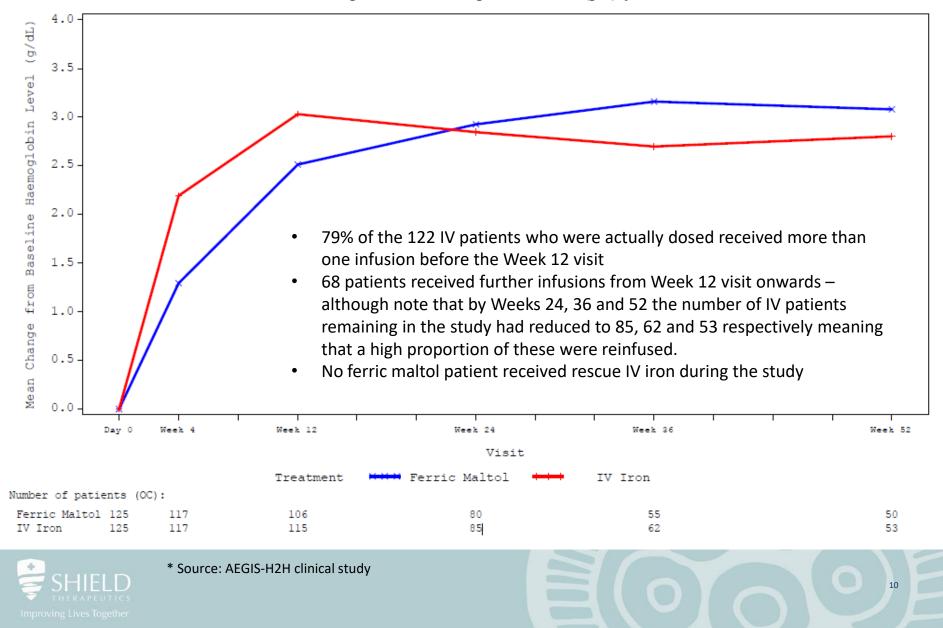


- **Feraccru**<sup>®</sup> **mechanism of action:** • Feraccru<sup>®</sup> is a low dose oral formulation of a non-salt complex of Fe<sup>3+</sup>, which is stable in the GI tract
  - 30mg capsules, 2x daily
  - Other oral irons are salts and require the Fe to dissociate to be absorbed (e.g. 65mg, 3x daily)
  - This causes formation of insoluble products in the GI tract, causing intolerance in patients
  - The Fe<sup>3+</sup> in Feraccru<sup>®</sup> remains in complex with maltol until absorbed in the duodenum and the iron is delivered to the bloodstream where it binds to transferrin
    - Maltol gets metabolised and excreted in urine
    - Unabsorbed Feraccru<sup>®</sup> passes through the digestive system in the benign complex and is excreted in faeces
  - Feraccru<sup>®</sup> is a well tolerated oral iron replacement therapy
    - Potential for use as a first line treatment for patients with iron deficiency or as an alternative to IV iron in patients failing existing oral iron salts

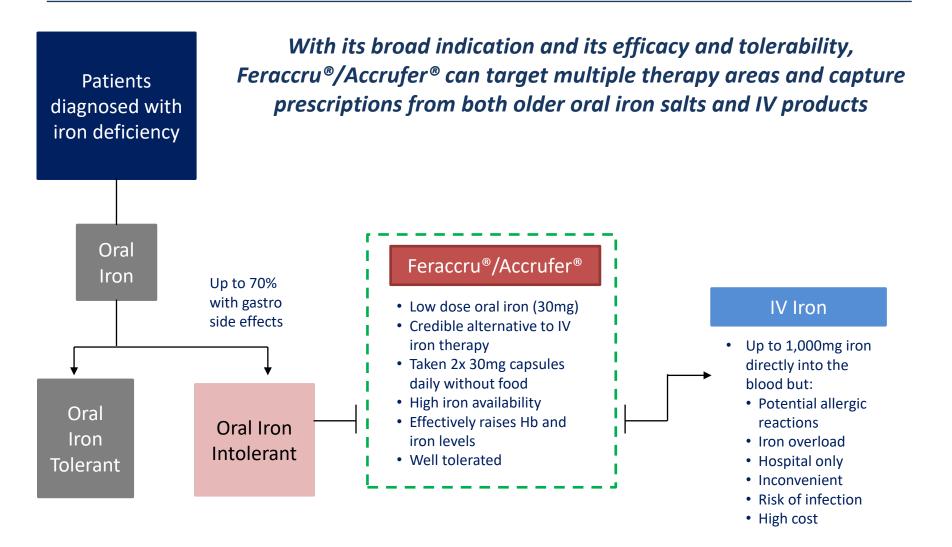


# Head-to-head study – comparison with leading IV therapy\*

Post-Hoc September 2020 Figure 14.2.1.2.1 Mean Change from Baseline Haemoglobin Concentration (g/dL) by Visit



## Feraccru<sup>®</sup>/Accrufer<sup>®</sup> positioning to address both oral and IV segments







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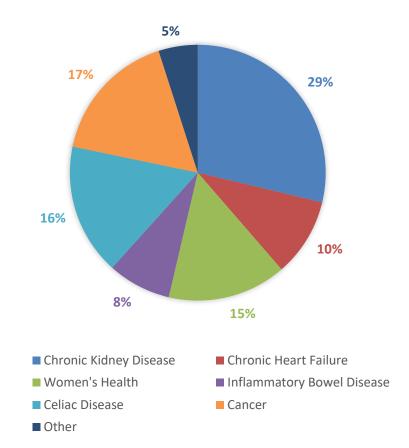
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# **US Market Opportunity**

## ~10M Patients suffer from IDA<sup>1</sup> across multiple therapeutic areas in the US

## ~10-11 million oral Rx annually; ~2.3 million IV doses annually

- Chronic Kidney Disease (CKD)
  - 37m patients (dialysis & non-dialysis)<sup>2</sup>
  - ~50% of patients at risk<sup>3</sup>
  - ~2.5m patients have Stage 3 or 4 CKD with IDA<sup>3</sup>
- Women's Health
  - 1 in 5 women of childbearing age<sup>4</sup>
  - Heavy uterine or post partum bleeding
- Gastrointestinal Disorders
  - Inflammatory Bowel Disease (IBD)
    - IDA affects up to 76% of patients<sup>5</sup>
  - Celiac Disease
    - 10%-20% of patients at risk<sup>6</sup>
- Oncology
  - Solid tumors & hematological malignancies
  - 32%-60% of cancer patients at risk<sup>7</sup>
- Cardiology
  - 17% of chronic heart failure patients may be affected<sup>8</sup>



Sources: 1) "Iron Deficiency Anemia" Cold Spring Harb Perspect Med 2013; 3 :a011866 2) Centers for Disease Control and Prevention. Chronic Kidney Disease in the US, 2019. Available at: <u>https://www.cdc.gov/kidneydisease/publications-resources/2019-national-facts.html</u> 3) Stauffer ME, Fan T (2014) "Prevalence of Anemia in Chronic Kidney Disease in the US" PLoS ONE 9(1); e84843. doi:10.1371/journal.pone.0084943 4) Your Guide to Anemia. National Heart, Lung and Blood Institute website. <u>https://www.nhlbi.nih.gov/files/docs/public/blood/anemia-ya.pdf</u>. September, 2011 5) Stein J, Hartmann F, Dignass AU. "Diagnosis and management of iron deficiency anemia in patients with IBD" Nat Rev Gastroenterol Hepatol.2010; 7(11):599-610 6) Daya H, Lebwohl B, Lewis S, and Green P. (2013) "Celiac Disease Patients Presenting with Anemia Have More Severe Disease Than Those Presenting with Diarrhea" Clinical Gastroenterology and Hepatology 2013;11:1472-1477 7) Lima J, Gago P, Rocha M, et al. "Role of intravenous iron in the treatment of anemia in patients with gastrointestinal tract tumors undergoing chemotherapy: a single-center, observational study" Int J Gen Med 2018 Aug 22;11:331-336. doi: 10.2147/IJGM.S165947. collection 2018 8) Klip IT, Comin-Colet J, Voors AA, et al. "Iron deficiency in chronic heart failure; an international pooled analysis" Am Heart J. 2013; 165(4):575-582.e3.



# Market research confirms the unmet need\*

# *Physicians believe there is an unmet need in the market.....*

- Iron replacement therapy is generally considered an area of unmet need
- Key needs are effectiveness and GI tolerability

### ....and see Product X (Accrufer®) as delivering a high level of clinical improvement over existing therapies

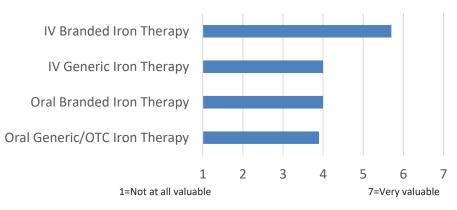
- Accrufer<sup>®</sup> was viewed favorably as a significant clinical improvement
  - Good tolerability profile and efficacy data are key benefits
  - Potential first line use if allowed by insurance plans

### Payer research indicates

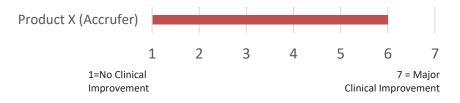
- Accrufer<sup>®</sup> would have few restrictions at tested price points ensuring good patient access
- Net sales price \$200-\$250 per pack is achievable (after discounts e.g. patient co-pay, insurance chargebacks, distribution fees, etc)



### Existing Therapy Avg. Value Ratings



### Level of Clinical Improvement Rating



### COVID-19

Many ID/IDA patients have an underlying condition making them more susceptible to COVID-19 including:

- Chronic kidney disease
- Cancer
- Heart failure
- Those taking immunosuppressant drugs
- The elderly

COVID 19 is changing healthcare delivery and recommendations for the care of at-risk patients

- Taking extra precautions for clinic visits
- Consider providing home treatments
- Switching patients from IV to oral therapies to minimize exposure

Nearly 1 in 3 chronically ill patients report being afraid to leave their home because of COVID-19\*

The efficacy, safety, tolerability and convenient dosing of Accrufer<sup>®</sup> make it the ideal iron replacement therapy for higher risk ID/IDA patients

### Launch of HIF inhibitors

A new oral class of agents for the treatment of anaemia in CKD

Stimulate endogenous erythropoietin production, a necessary agent for production of Hb

Iron replacement will still be required in many patients – oral iron therapy likely to be preferable as HIFs are orally administered

Suggests an increasing place for the tolerability and effectiveness of Accrufer®

# The 1st HIF inhibitor is expected to launch in the USA in 2021



## **US** commercialisation options

### Out-licence to 3<sup>rd</sup> party

### **Financial terms**

- Licence upfront one-off receipt on signing
- Sales royalties based on annual sales typical royalty rates ranging from 10%-25% depending on sales tiers
- Sales milestones one-off receipts when annual sales reach specified targets for 1<sup>st</sup> time

### **Key issues**

- Is the upfront big enough to ensure licensee is committed and has skin in the game?
- Will the licensee commercialise successfully? In particular, will they exploit the full breadth of Accrufer<sup>®</sup>'s potential
- Will the licensee be committed for the long term e.g. until 2035 patent expiry

### **Current activities**

 Ongoing early stage discussions with a number of potential licensees

### Shield-led launch

### Summary

- Shield retains full control over Accrufer<sup>®</sup> in US
- Also retains full ownership of Accrufer<sup>®</sup> profits
- Potential to sub-licence to 1-2 companies for broadening reach into specific therapy areas
- Shield clearly 100% committed

### **Key issues**

- Overcome doubts that Shield can execute commercialisation as well as a potential licensee
- Finance required estimated \$30m-\$40m to reach Group cash breakeven, expected during 2022

### **Current activities**

• Detailed planning underway (see later slide)



# Planning for successful Shield US launch

- Shield has recruited 4 experienced US commercial executives to plan and lead US launch
  - Currently on fixed term consultancy contracts pending firm decision for Shield to launch in US, at which
    point the intention is that they will become Shield US employees
  - Specific areas of expertise cover market access, marketing, medical affairs and operations/supply chain logistics
  - Each has 20+ years pharmaceutical experience
  - Extensive knowledge of Accrufer<sup>®</sup> built while working for a company which was seeking to licence Accrufer<sup>®</sup>
- Detailed planning underway for Q2 2021 launch covering:
  - Supply chain and operations e.g.
    - Planning supply of packs from Europe to pharmacies throughout USA, identifying warehousing and wholesalers, logistics providers
  - Market research and marketing e.g.
    - Brand planning, assessing agencies, developing further market research requirements
  - Sales force recruitment and training
    - Planning to target the top 30% of iron prescribers about 15,000 physicians who in aggregate write at least 70% of all iron prescriptions\*
    - Likely to need 30-60 sales reps to reach these prescribers, utilising both face-to-face and on-line meetings
    - Assessing whether to recruit in-house or outsource
    - Developing training materials
  - Market access e.g.
    - US Government pricing & managed services, insurance pricing and contract strategy, co-pay/patient assistance strategy,

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- Medical affairs e.g.
  - KOL Advisory Boards, scientific message platform, pharmacovigilance
- Exploring potential to sub-licence to, or co-promote with, one or two therapy area specialists



\* Source: IQVIA National Prescription Audit accessed November 2020

- On average, patients assumed to take 4-5 months' Accrufer<sup>®</sup> to allow time for restoration and maintenance of normal Hb levels
- At \$200-\$250 net sales price per pack => \$1,000 per patient per year

### Potential Year 5 sales

- Sales of \$200m pa therefore require 200,000 patients treated annually
  - only 2% of 10 million IDA patients\*
  - ~10% of current total oral prescriptions without any expansion of the market
  - <10% of the 2.3 million IV doses\*</p>
  - <20% of current \$1.2bn market\* size BUT market likely to grow significantly</p>
- Shield launch scenario potential profit/cash flow by Year 5
- 90% gross margin, after manufacturing costs and Vitra 5% royalty
   ⇒ \$180m gross margin
- US SG&A costs 2021 forecast to be ~\$25m-\$30m, rising to ~\$40m-\$45m by Year 5
   ⇒ Year 5 US profit and cash generation ~ \$130m

### Licence scenario (Year 5) – royalty flow

- Assume average royalty of 20% => \$40m royalty
- Less 5% net sales (\$10m) payable to Vitra => net income to Shield \$30m



\* Source: IQVIA/IMS





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# Europe/China

# Feraccru<sup>®</sup> in Europe & China

## **Europe**

Licensed to Norgine

- Sales royalties 25%-40% (Shield pays cost of goods)
- Sales milestones up to €50m
- On market in Germany, England & Scandinavia
- 2020 sales volumes in Germany/UK up 70% vs 2019 - £0.7m royalties
- Pricing & reimbursement negotiations in France, Italy, Spain expected in 2021

# China

## Licensed to ASK Pharm

- IND application submitted likely to require only one Phase III 12-week study in 120 IBD patients
- Potential approval & launch in 2023
- \$11.4m milestone due on approval
- Sales royalties 10%-15% (ASK pays cost of goods)
- Sales milestones up to \$40m

On assumption that aggregate net sales in Europe + China rise to \$150m- \$200m by 2030, Shield's current market valuation is supported entirely by Europe and China licence deals





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# **Cash position**

Summary

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# **Cash position**

- Cash at 31 December 2020 £2.9m
- Convertible loan facilities agreed with shareholders AOP (10.7%) and Dr Christian Schweiger (3.5%, also a board member)
  - ~£4.4m in total
  - 1<sup>st</sup> 50% tranche available 1 February 2021, 2<sup>nd</sup> 50% tranche available if needed during rest of 2021
  - Interest of 10% payable on tranches drawn down
  - Arrangement fee of 2%
- Loans extend cash runway (excluding substantial US spend) until end 2021
  - Protects the company if no licence deal or other fundraise in short/medium term
  - Shows commitment of significant shareholders





# Summary

- Feraccru<sup>®</sup>/Accrufer<sup>®</sup> has unique attributes of efficacy, tolerability and breadth of application in ID
- ID is a large global market, including in the USA
- We are evaluating both out-licence and Shield-led launch alternatives
- To prepare for a Shield launch scenario, we have recruited 4 experienced US commercial managers who are planning the proposed launch in detail
- Clarity as to course of action likely during Q1 2021
- Today's market capitalisation does not reflect any value for US commercialisation
- Announcement of either a US licence deal or Shield-led launch is likely to lead to a rapid re-rating

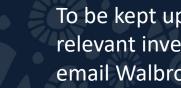








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