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Investment Highlights

Significant Unmet Need

for effective, well-tolerated iron replacement therapy for iron deficiency, a 15MM patients & 13.4MM annual prescriptions opportunity

Near Term
Value inflection
Catalysts

from expanded reimbursement, increasing sales & commercial partnerships

Potential Best in Class

approved product, Accrufer[®], designed to treat iron deficiency with minimal gastrointestinal adverse events which drive treatment discontinuation & failures

Market Cap¹

~\$65MM as of 1 March 2022 provides an attractive entry point

Experienced
New Executive
Team

to build the business and drive market adoption and revenue growth in the US & Rest of World

Cash and Accrufer®
Market Potential

\$15MM cash as of 31 December 2021 \$2.2B U.S. market opportunity Patent coverage thru 2035



Operational & Financial Highlights

- Awareness of Accrufer® among target prescribers doubled since launch to 65%
- Generated ~2500 prescriptions for Accrufer® since launch in July 2021 with significant quarterly growth
- Payer coverage increased from 40M to 60M commercial lives since last update in December 2021
- 60% (YoY) growth in Feraccru[®] sales volumes in Europe
- Total Revenue of £1.5M
- Cash on Hand Dec 2021: £12.1M



Ex-US Partnerships – Update on Progress

Partner	Geography	Status	
奥赛康	China, Hong Kong, Macau and Taiwan	Pharmacokinetics study completed Enrolling Phase 3 clinical trial	
NORGINE	Europe, Australia and New Zealand	60% Y/Y volume increase (EU) Reimbursement dossier submitted for Spain	
(KP) KOREA PHARMA	Republic of Korea	Program/regulatory strategy in development	
Pharmaceuticals	Canada	Program/regulatory strategy in development	

SHIELD

^{*} Upon regulatory approval in China / Korea

^{**} Shield pays material production cost from royalties

^{***}Feraccru was approved in EU at time of license deal w/ Norgine GBP translated to USD at the time of the deal

U.S. Market for Accrufer®- \$2.2B Opportunity

Iron deficiency with or without anemia

- 15MM patients
- A major source of morbidity and mortality

Adverse events associated with conventional oral iron are

driving an unsatisfactory cycle of switches and discontinuations

Accrufer® is an effective, well tolerated low-dose oral iron with an adverse event and discontinuation rate well below published 40-60% rate for conventional oral iron therapy.

Estimated Peak Net U.S. Sales of \$500MM+ supported by:

- Payor Coverage: Expected to grow beyond 60MM+ covered lives
- Positive Market Feedback: HCPs are interested in using Accrufer® for 1st and 2nd line therapy
- Commercial Plan: Focused on the top 65K prescribers, mainly PCPs and OB/GYNs



Iron Deficiency (ID) without & with Anemia (IDA): 15MM U.S. Patients:

A Source of Morbidity and Mortality

Caused by malnutrition, malabsorption, or bleeding

Associated with many diseases, especially women's health, IBD, CKD, CHF, oncology, aging

Results in numerous signs, symptoms, and negative outcomes across a range of body systems

IDA may further exacerbate

chronic inflammatory conditions, with even mild anemia leading to increased mortality



Increased risk of preterm labor, perinatal complications, newborn and maternal mortality in pregnancy



Higher IBD symptom burden Decreased QoL in IBD



Higher pre-dialysis mortality and ESRD Higher CV hospitalizations in CKD

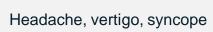


Fatigue, tachycardia, cardiac murmur, angina, dyspnea

Increased hospitalizations



Higher morbidity, mortality, hospital length of stay, and re-admissions in major surgery



Cognitive impairment

Restless legs syndrome



ID, iron deficiency; IDA, iron deficiency anemia; IBD, inflammatory bowel disease; CKD, chronic kidney disease; CHF, congestive heart failure; QoL, quality of life; ESRD, end-stage renal disease; CV, cardiovascular

Current ID Treatment Options: 90% of Prescriptions are Oral





Poor Tolerability/Inconvenience Drives Poor Adherence



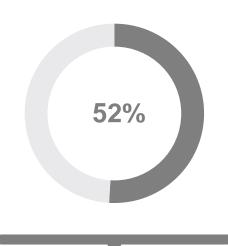
Adverse Events Associated with Current Oral Iron Treatments Can Limit Patient Adherence



Estimated overall adherence with oral iron for IDA due to *all* AEs¹



Estimated overall adherence with oral iron for IDA due to GI AEs²



Of IBD patients with IDA reduce or withdraw oral iron dose due to AEs³

Non-adherence Can Lead to Substantial Treatment Failures²



Iron Deficiency Treatment Algorithm

An Unsatisfactory Cycle of Switches and Discontinuations

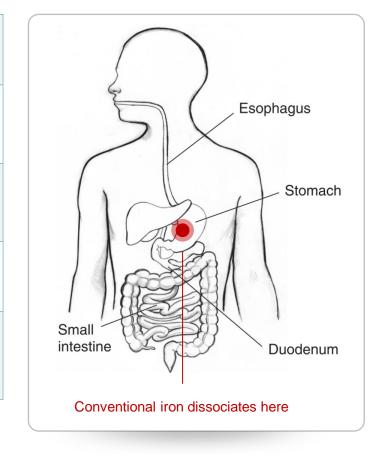


Patients and Health Care Providers (HCPs) are Seeking a Well-Tolerated and Effective Oral Iron Replacement Therapy



Design of Conventional Ferrous Iron Products Require High Doses of Iron

Conventional Iron	Formulated as a ferrous salt taken 1-3X/day		
~300 mg daily dose of elemental iron required to achieve therapeu hemoglobin increase			
The Problem	(1) Ferrous salts dissociate prior to intestinal uptake ¹ (2) Inefficient absorption results in residual free iron in the gastro-intestinal tract ²		
The Conventional Solution	Increase the dose of elemental iron		
Impact	(1) Higher doses of elemental iron generate reactive oxygen species (2) This damages the gastric mucosa & increases the risk of GI adverse events ³		



The Math on Conventional Oral Iron Supplements

The Product	Elemental Iron per Tablet	Daily Dosing Frequency	Elemental Iron Delivered
Ferrous Salts	~106 mg	1-3X	~300mg



Source: https://www.niddk.nih.gov/news/media-library/8269

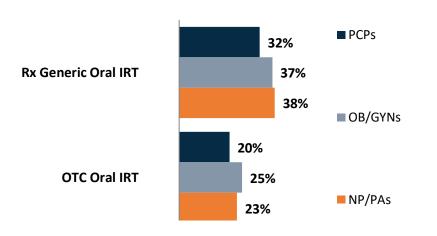
^{1.} Khoury, A., Pagan, K. A., & Farland, M. Z. (2021). Ferric Maltol: A New Oral Iron Formulation for the Treatment of Iron Deficiency in Adults. Annals of Pharmacotherapy, 55(2), 222–229. https://doi.org/10.1177/1060028020941014 2. Tenenbein M. (1998). Toxicokinetics and toxicodynamics of iron poisoning. Toxicology letters, 102-103, 653–656. https://doi.org/10.1016/s0378-4274(98)00279-3

^{3.} BokemeyerB, Krummenerl A, Maaser C, et al. Randomized open-label phase 1 study of the pharmacokinetics of ferric maltol in inflammatory bowel disease patients with iron deficiency. Eur J Drug Metab Pharmacokinet. 2017;42:229-238.

HCPs have low satisfaction rates with available oral iron treatments

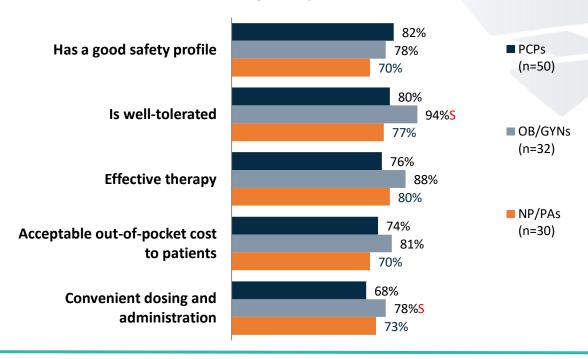
Satisfaction with Iron Deficiency Treatment

% rating 6,7 (Top-2 Box)



Stated Importance When Selecting IRT (Top Mentions)

% rating 6,7 (Top-2 Box)



Reasons for Oral IRT Discontinuation

- Roughly two-of-five patients discontinue oral IRT, usually due to GI side effects.
- Patients are likely encouraged to continue therapy and manage side effects, though Specialists more often switch patients from an oral to IV therapy.

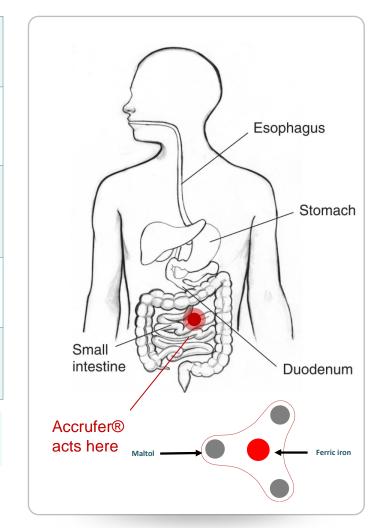
Top GI Side Effects Experienced

- Constipation
- Nausea
- Abdominal Pain

Accrufer® is a Novel Formulation of Oral Iron

Accrufer®	Proprietary maltol formulation, dosed 2X/day ¹		
Dose	Daily doses of ~60 mg of elemental iron significantly increased hemoglobin levels over 12 weeks, maintained over 52 and 64 weeks across studies ¹		
Well Tolerated	Good tolerability, bioavailability and absorption ¹ <5% adverse event & discontinuation rate ¹ , well below published 40-60% discontinuation rate for conventional oral iron therapy		
Safety	Neither short- nor long-term treatment led to iron overload ¹		
Accrufer®	Effective at One-Fifth the Dose of Convention Oral Iron		

The Product	Elemental Iron per Tablet	Daily Dosing Frequency	Elemental Iron Delivered
Ferric maltol ¹	30 mg	2X	60mg
Ferrous salt	~106mg	1-3X	~300 mg





ACCRUFeR® US Launch (ferric maltol)







Prepare for Launch with an Integrated Approach

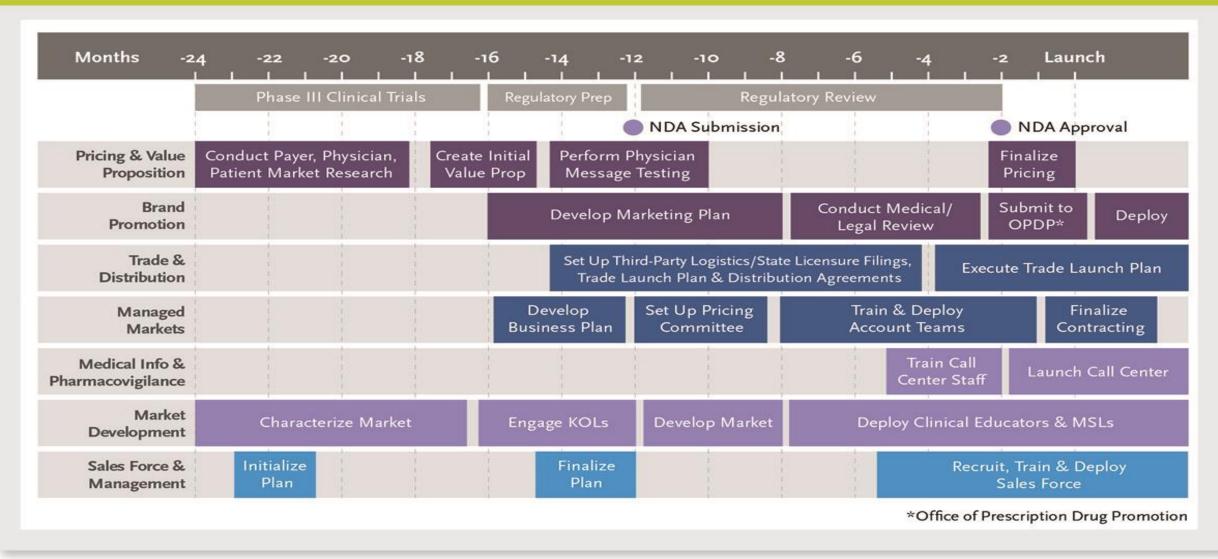


Fig. 2: Quintiles' timeline for a commercial launch starts 24 months prior to launch. Credit: Quintiles



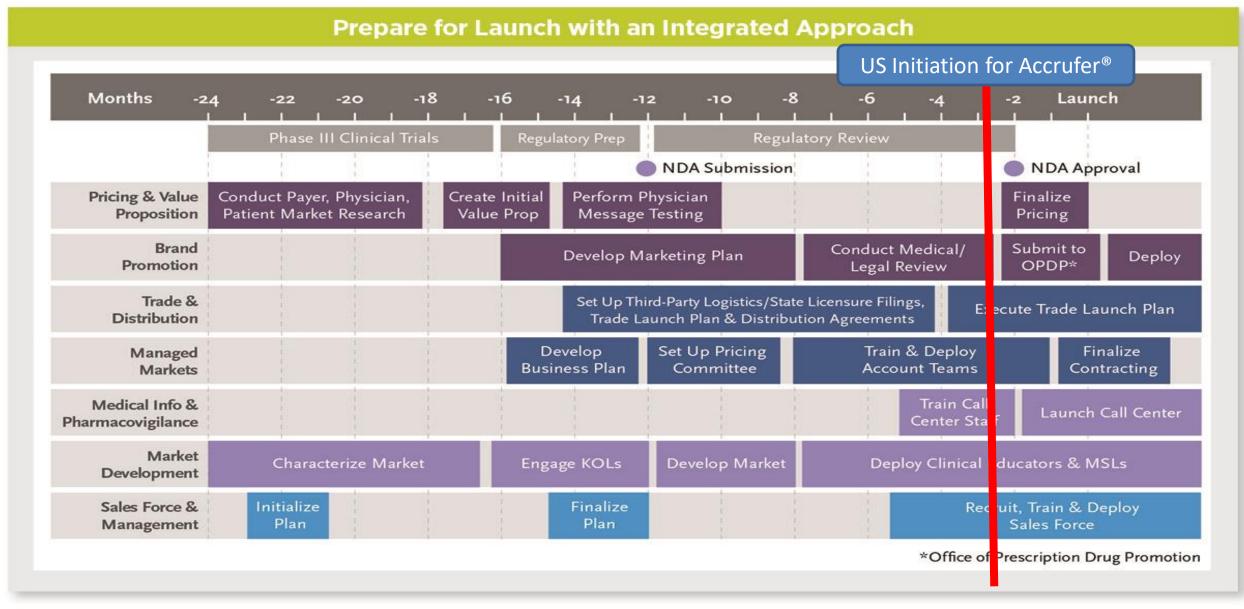


Fig. 2: Quintiles' timeline for a commercial launch starts 24 months prior to launch. Credit: Quintiles



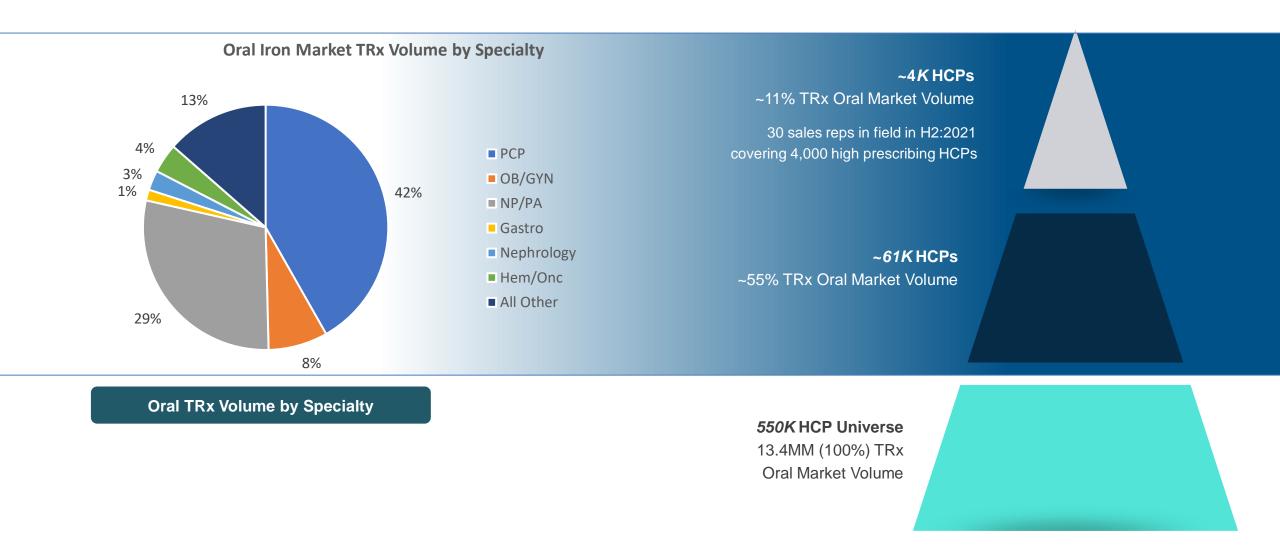
Accrufer® Launch Priorities



Long Term Future: Brand Leader in Oral Iron Therapy

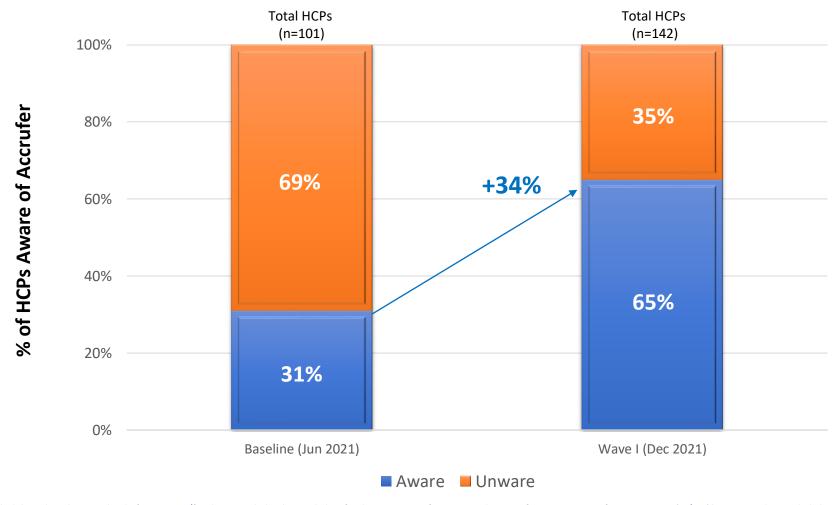


HCP Targeting Launch Strategy





Positive Increase in Awareness Among Targeted HCPs





HCP Multi-Channel Engagement

Media & Digital Platforms

Objective: drive brand awareness & education

Utilize media mix to reach clinicians

- Targeted Display
- Search
- Newsletters
- Endemic Site Placements
- Content Sponsorships
- EMR/EHR

Full media plan began 10/1/2021



Medscape



epocrates[®]











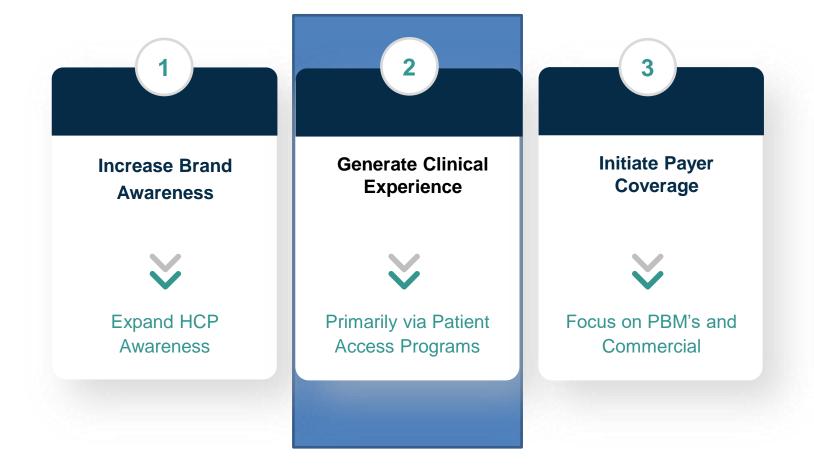








Accrufer® Launch Priorities



Long Term Future: Brand Leader in Oral Iron Therapy



Driving Clinical Experience through Patient Assistance Program





Automated Accrufer® therapy initiation and prescription fulfillment for your commercially insured patients



E-prescribe Accrufer script to CoAssist Pharmacy

- eRx: NCPDP: 5733604 or NPI: 1588101356
- . Phone: 855-382-2533 | Fax: 833-596-2174
- Monday Friday, 9 AM 5 PM ET



Benefit investigation is automated through an exclusive technology-driven pharmacy platform

 A benefit investigation is conducted at the point of prescription to access the most up-to-date information and paver requirements



Script is routed to best fulfillment option for patient

- CoAssist pharmacy ensures access to prescribed therapy and is a patient affordability-centered pharmacy model
- Your patient will receive a welcome text from CoAssist within 1 business day of receiving the prescription letting them know the prescription was received and it is being processed
- CoAssist will also text or call the patient if additional insurance information is required and to collect any copay amount



Script is dispensed to patient

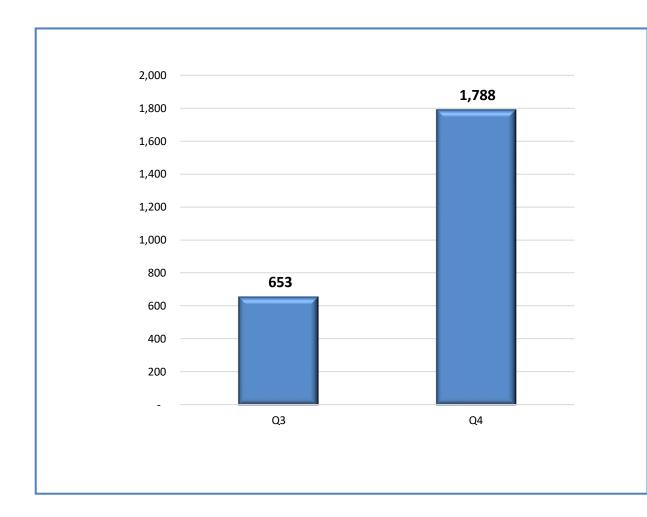
- Accrufer is delivered for FREE straight to your patient's door in 3 to 5 business days from the day of patient consent and payment
- Your patient will receive text notifications and tracking information for their delivery, as well as ongoing medication refill reminders

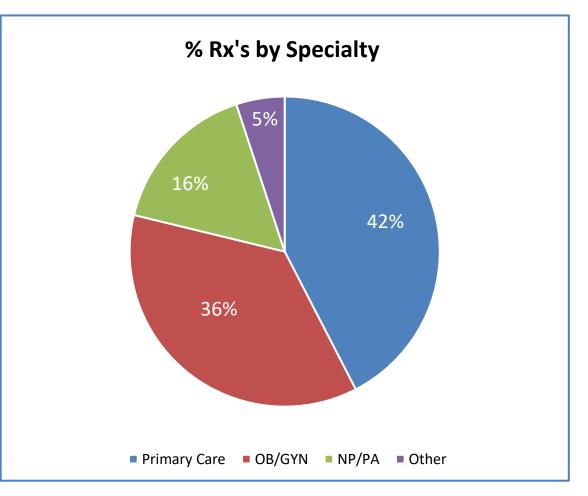






Health Care Professionals (HCPs) Demand Increasing





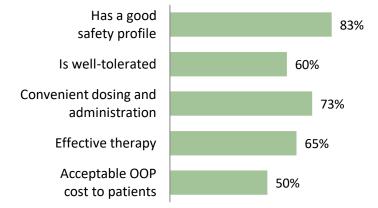


HCPs report Accrufer® performs WELL where it matters most

Accrufer® Performance

% rating 5, 6,7 (Top-3 Box)

Among Attributes Rated as Most Important (n=40)



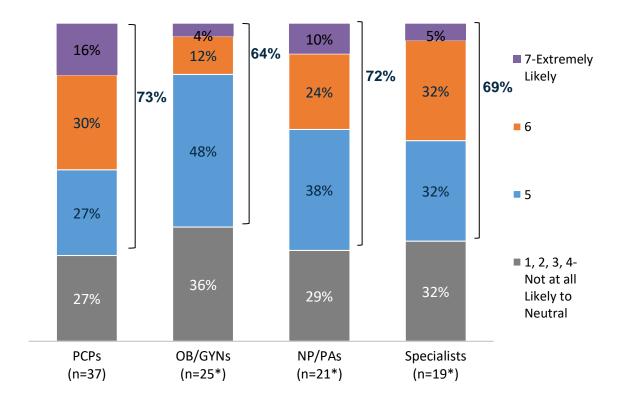




HCP's who have never used Accrufer® indicate they are likely to prescribe

Accrufer Non-Users

Likelihood to Prescribe Accrufer





Accrufer® Launch Priorities



Long Term Future: Brand Leader in Oral Iron Therapy



Payer Access Increased in January – 40m (Dec) up to now 60M+ Lives Covered

December 2021









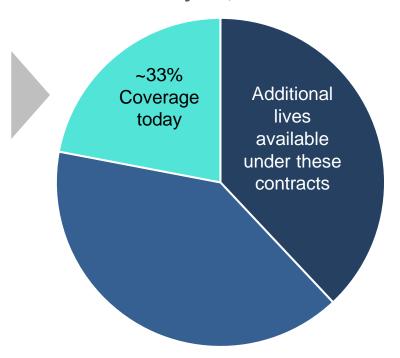








Commercial Payers, % Covered Lives





Observations and Insights from First Six Months

- Accrufer® Awareness is critical while increasing, a lot of room to grow
- Key messages around tolerability and effectiveness is on point continue to reinforce
- Payer coverage continues to grow
- Evolution of the organization and approach on-going



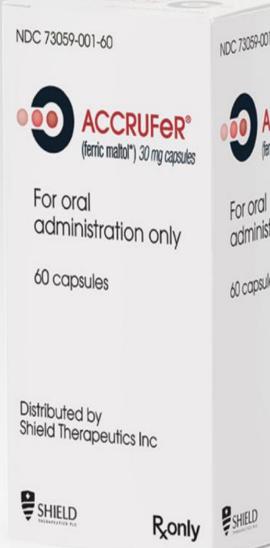
Accrufer® 2022 Priorities





Q&A Discussion







Ro

NDC 73059-001-60

60 capsules