Powering Relentless Science™

Corporate Fact Sheet

EXECUTIVE TEAM:

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CEO & Director

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Founder, Chairman & Chief Operating Officer

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Co-Founder, Chief Scientific Officer & Medical Director

Wayne I. Danson, CPA
Chief Financial Officer & Treasurer

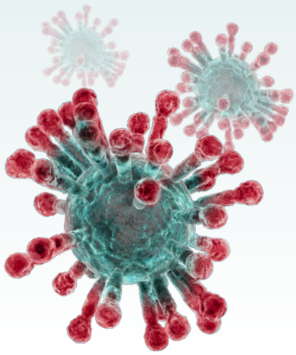
EOM Pharmaceuticals: Powering Relentless Science™

EOM Pharmaceuticals is a privately held, clinical-stage company led by an accomplished team of scientists and pharmaceutical executives with a deep legacy in multiple therapeutic areas. EOM is focused on developing and advancing first-in-class treatments to address urgent and unmet medical needs and to help better the quality of life for people with debilitating and potentially fatal diseases, such as COVID-19 and other infectious diseases; autoimmune diseases including rheumatoid arthritis; cachexia associated with AIDS and cancer; and retinal diseases. EOM's scientists, clinicians, and business leaders have significant experience in drug development, novel formulations, regulatory strategy, and effective clinical approaches.

EOM's pipeline is built on proprietary innovations designed to rescue, repair, and restore health. These innovations include the development of the first-and-only dual-acting, broad-spectrum immunomodulator EOM613, which has the potential to treat the most severe effects of COVID-19, and its advanced formulation of EOM147, being studied to treat serious retinal diseases without the need for intraocular injection. Multiple previously conducted Phase 2 trials suggest EOM613 and EOM147 have improved relevant clinical measures and are well tolerated.

About EOM613

EOM613 is an investigational, first-in-class, dual-acting, broad-spectrum immunomodulator designed to provide both an anti-inflammatory effect at the site of cytokine and chemokine overactivity, and a pro-inflammatory effect, when needed. EOM613 is designed to counteract the most severe inflammatory effects of viruses, such as cytokine storm or hyperimmune response following infection with the novel coronavirus that causes COVID-19, autoimmune attacks that cause joint damage and pain associated with rheumatoid arthritis, and chemokine-related body-wasting syndromes such as cachexia. By re-establishing balance, EOM613 may rescue, repair, and restore an immune system that has been confronted by an invading antigen, pathogen, or virus. This dual-acting, broad-spectrum approach may overcome a key limitation of conventional immunomodulators. It is administered as a subcutaneous injection, unlike conventional immunomodulators which often require intravenous infusion. EOM613 has already demonstrated clinical improvements in various disease states and immune-related biomarkers and general tolerability across five Phase 2 clinical trials in patients with cachexia associated with AIDS and cancer, and in patients with rheumatoid arthritis. EOM613 is efficiently manufactured from readily available materials.



Spotlight On Our COVID-19 Efforts

COVID-19 tissue and organ damage that leads to patient fatalities may be associated with hyperinflammatory effects and the release of large amounts of cytokines and chemokines in the body. Phase 2 clinical trials for EOM613 are planned for Q1 2021 to address the most severe effects of COVID-19.

The potential regulatory pathway for approval includes Compassionate Use, Emergency Use Authorization (EUA) and Fast Track Designation by the U.S. Food and Drug Administration (FDA).

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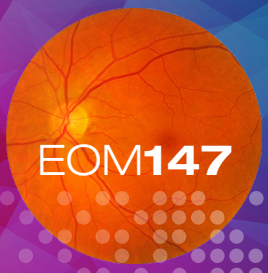

About EOM147

EOM147 is a first-in-class small molecule anti-angiogenic drug with a novel intracellular mechanism of action for the treatment of proliferative diabetic retinopathy, diabetic macular edema, branch and central retinal vein occlusions, and wet age-related macular degeneration (AMD). EOM147 is being developed as proprietary, newly reformulated eye drop, containing a steroid-polyamine conjugate compound with broad-spectrum antimicrobial activity and anti-angiogenic activity. Additional monotherapy clinical trials in India and Mexico are planned to evaluate EOM147 in the treatment of several retinal diseases that can lead to blindness. The novel formulation represents a potential breakthrough because it does not require intraocular injection into the eye and, if approved, would be the first topically administered eye drop to treat retinal diseases.

ANTICIPATED CLINICAL MILESTONES

EOM613

- U.S. Phase 2 clinical trials for EOM613 for the most severe effects of COVID-19
- Expanded U.S. Phase 2b/3 trial for EOM613 for the most severe effects of COVID-19
- U.S. Phase 2b/3 clinical trial for EOM613 in cancer cachexia

EOM147

- Phase 2 clinical trials initiated for EOM147 eye drop for AMD and diabetic retinopathy in India and Mexico

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Spotlight on Age-Related Macular Degeneration (AMD) and Diabetic Retinopathy (DR)

AMD in the U.S.

As many as **11 million people** in the United States have some form of age-related macular degeneration. This number is expected to double to nearly **22 million by 2050**.[1]

AMD Worldwide

The number of people living with macular degeneration is expected to reach **196 million worldwide by 2020** and increase to **288 million by 2040**.[2]

Globally, **AMD ranks third as a cause of blindness after cataract and glaucoma**. It is the primary cause in industrialized countries. The main risk factor is ageing. Other risk factors may include the use of tobacco, genetic tendencies, the degree of pigmentation (with light coloured eyes being at higher risk), arterial hypertension, the ultraviolet rays, and consumption of a non-balanced diet.[3]

DR in the U.S.

Diabetic retinopathy affects **7.7 million Americans**, and that number is projected to increase to **more than 14.6 million people by 2030**.[4]

Diabetes is the leading cause of new cases of blindness in adults. **About 1 in 3 people with diabetes have Diabetic Retinopathy,** affecting almost one-third of adults over age 40 years with diabetes, and more than one-third of African-Americans and Mexican Americans.[5]

DR Worldwide:

As stated by the International Diabetes Federation (IDF), **the global prevalence of DR from 2015 to 2019 was around 27%**. The lowest prevalence was in Europe at 20.6% and South East Asia at 12.5% and highest in Africa at 33.8%, Middle East and North Africa 33.8%, and the Western Pacific region at 36.2%.[6]

1. Bright Focus Foundation, January 2019
2. Bright Focus Foundation, January 2019
3. World Health Organization
4. NIH - National Eye Institute
5. CDC
6. International Diabetes Federation

Our Mission: To restore health and save lives

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