



Clinical-stage biopharmaceutical company focused on epilepsy;
leader in ion channel drug discovery and development

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Saniona Investment Highlights

- Expanding pipeline in collaboration with partners - Tesofensine targeting market launch in 2024 together with partner, Tesomet (phase 2b), SAN711 (phase 2a) and SAN903 (phase 1) and several pre-clinical assets available for partnering
- Cutting-edge proprietary ion channel drug discovery engine – continuous value creation through generation of new high potential drug candidates for epilepsy and other CNS indications
- Platform validated by leading pharmaceutical companies – SEK +400m received through successful spinouts, partnerships, and licensing agreements with upside potential preserved
- Potential near-term income from partnerships - research funding from existing partnerships, potential milestones, royalty income from tesofensine, new partnering opportunities on clinical assets and platform
- Focused epilepsy pipeline addressing indications with significant medical need including SAN711 (phase 2 POC ready) for potential internal development partly financed through partnership income

Successful partnership history – platform validated by several leading pharmaceutical companies

Partnerships and spinouts

2023



R&D collaboration/license

~4

Milestones + royalties



Joint Venture

~4

33% ownership



R&D collaboration/license

~20

Milestones + royalties



R&D collaboration/license

~20

Regained program



R&D collaboration/license

~111

Regained program



Spinout (shareholding sold)

~126



License (tesofensine)

~25

Milestones + royalties



Grants

~8



Spinout distributed to shareholders

Milestones + royalties



R&D collaboration/license

~16

Regained program



Spinout + R&D collaboration

~53

Earnout + royalties

2012



R&D collaboration/license

~17

Regained program

Total Income (SEKm)

~404

Expanding pipeline of new drug candidates with solid scientific rationale

| Product Candidate | Indication | Research | LOP/CS | Pre-clinical | Phase 1 | Phase 2a | Phase 2b | Phase 3 | Comment |
|----------------------|---------------------------|----------|--------|--------------|---------|----------|----------|---------|---|
| Tesofensine | Obesity | | | | | | | | Potential market launch 2024 – partnership with market leader Medix, representing near-term revenue potential through mid-teens royalties and milestone |
| Tesomet | HO, PWS | | | | | | | | Positioned for partnering following successful phase 2a data (2019) |
| SAN711 | Epilepsy | | | | | | | | Positioned for absence seizures following positive phase 1 data (2022). Value-inflection points in 2024/25 |
| SAN903 | Fibrotic and inflammatory | | | | | | | | Positioned for partnering following successful IND/CTA enabling studies |
| SAN2219 | Epilepsy | | | | | | | | Positioned for acute repetitive seizures with multiple expansion opportunities in rare and severe epilepsy |
| SAN2355 | Epilepsy | | | | | | | | Positioned for focal/generalized epilepsy and paediatric epilepsy |
| SAN2465 | Depressive disorder | | | | | | | | Positioned for partnering following candidate selection for rapid onset major depressive disorder |
| GABA program | Epilepsy | | | | | | | | Positioned for rare pediatric epilepsy syndrome with multiple expansion opportunities in rare and severe epilepsy |
| AstronauTx | Alzheimer's | | | | | | | | Partnership agreement entitling Saniona to milestone payments of up to USD 177m plus royalties |
| Boehringer Ingelheim | Schizophrenia | | | | | | | | Partnership agreement entitling Saniona to milestone payments of up to EUR 76.5m plus royalties |
| Cephagenix | Migraine | | | | | | | | Joint venture, Saniona owns 33% |

Saniona poised for success in epilepsy



Focused epilepsy pipeline addressing indications with significant medical need



Selective ion-channel modulators maximize efficacy and minimize adverse effects



Precision medicines addressing underlying pathology with disease modifying potential



Predictive preclinical models and innovative clinical study design with objective endpoints and on-target biomarkers enhance success rate



Experienced team with deep expertise in CNS and ion-channel drug discovery and development including GABA PAMs and Kv7 activators

Epilepsy – large market driven by new products addressing significant unmet medical need

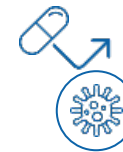
- >20 approved Anti Seizure Medications (ASM) – mostly generics
- Top 10 branded ASM accounted for 80% of sales in 2022¹
- Top branded products and companies expected to change within 5 years¹
- 30% drug resistant >1.5 million patients in 7 Major Markets
- Paediatric Syndromes, often drug resistant to broad spectrum ASM, have devastating life-long consequences for patients and families
- Recently introduced ASMs demonstrate that market remains interesting for products addressing unmet medical needs
 - For adults with generalized/focal onset seizure: Xcopri/Ontozry (SK BIO) and XEN1101 (Xenon) in phase 3 are expected to reach more than USD 1B and USD 750m respectively in 2028
 - For paediatric Orphan Diseases: Epidiolex (Jazz) and Finteplay (UCB) are expected to reach USD 1.2B and USD 800m respectively in 2028

Global Epilepsy Market



50 million

People affected by epilepsy worldwide²
>6 million people in the US and EU^{3,4}



30%

Resistant to existing therapies⁵



>4%

Annual growth⁶



USD 8 billion market

By 2028⁶

1) Evaluate pharma; 2) World Health Organization; 3) CDC statistics for 2015: Epilepsy Data and Statistics | CDC; 4) Evaluate Pharma; 5) Kwan et al 2000 New England Journal of Medicine; Chen et al 2018 JAMA Neurology; 6) Evaluate Pharma, estimated growth 2022-2028.

Epilepsy has been subject to several recent deals

| Investor | Target | Deal | Year | Transaction size | Comment |
|--|--|---------------|------|------------------|--|
|  |  | Acquisition | 2022 | USD 1.9 billion | Worldwide rights to fenfluramine (Fintepla®) for the treatment of seizures associated with Dravet syndrome |
|  |  | Acquisition | 2021 | USD 7.2 billion | Worldwide rights to cannabidiol (Epidiolex®) for the treatment of seizures associated with Lennox-Gastaut Syndrome, Dravet Syndrome and Tuberous Sclerosis Complex |
|  |  | Acquisition | 2021 | USD 960 million | EU rights of cenobamate (Ontozry®) for the treatment of drug-resistant focal-onset seizures in adults |
|  |  | Collaboration | 2017 | USD 856 million | Total payments of up to USD 856 million incl. USD 196 million upfront and tiered double-digit Royalties on sales for Soticlestat* |

*Soticlestat is a Takeda small molecule in Phase 3 development for Paediatric OD indications – Ovid conducted Phase 2 under a collaboration with Takeda for two orphan diseases (Dravet Syndrome and Lennox-Gastaut)

Subtype selective GABA_A PAMs: maximizing efficacy, minimizing adverse events

GABA_A POSITIVE ALLOSTERIC MODULATORS (PAMs):

- Highly effective anti-epileptics but dose-limited by adverse effects
- Modulates all GABA_A receptors ($\alpha 1$, $\alpha 2$, $\alpha 3$ and $\alpha 5$) non-selectively
- GABA_A $\alpha 1$ pharmacology drives major adverse events: sedation, cognitive impairment, abuse liability and tolerance development (reduced effectiveness over time)
- Saniona assets designed to exert highly differentiated pharmacology, specifically tailored to address the unmet needs of specific indications
- Retaining strong seizure control while avoiding the use-limitations associated with non-selective GABA_A PAMs



| Therapeutic effect of benzodiazepines | GABA _A $\alpha 1$ | GABA _A $\alpha 2$ | GABA _A $\alpha 3$ | GABA _A $\alpha 5$ |
|---------------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|
| Anti-seizure | ++ | ++ | ++ | |
| Analgesia | | ++ | ++ | |
| Anxiolysis | | ++ | + | |
| Sedation | ++ | | | |
| Tolerance | ++ | | | |
| Addiction | ++ | + | | |
| Cognitive impair. | ++ | | | + |

PAM: Positive Allosteric Modulator

Mohler H Diversity in neuronal inhibition, Dial. Clin. Neurosci. 2002; Knabl J, Reversal of pathological pain through specific spinal GABAA receptor subtypes, Nat. Lett. 2008 ; Rudolph U et al., Beyond classical benzodiazepines, novel therapeutic potential of GABAA receptor subtypes, Nat.Rev. Drug Discov. 2012

Saniona GABA_A PAMs: differentiated pharmacology tailored to address unmet need in specific indications

SAN711:

Precision medicine for absence seizures devoid of liability for attentional impairment and birth defects

| Therapeutic effect | GABA _A α1 | GABA _A α2 | GABA _A α3 | GABA _A α5 |
|--------------------|----------------------|----------------------|----------------------|----------------------|
| Anti-seizure | ++ | ++ | ++ | |
| Analgesia | | ++ | ++ | |
| Anxiolysis | | ++ | + | |
| Sedation | ++ | | | |
| Tolerance | ++ | | | |
| Addiction | ++ | + | | |
| Cog. impair | ++ | | | + |

CNS adverse effects

Target for SAN711

SAN2219:

Strong seizure control devoid of GABA_A α1 use limitations for acute repetitive seizures

| GABA _A α1 | GABA _A α2 | GABA _A α3 | GABA _A α5 |
|----------------------|----------------------|----------------------|----------------------|
| ++ | ++ | ++ | |
| | ++ | ++ | |
| | ++ | + | |
| ++ | | | |
| ++ | | | |
| ++ | + | | |
| ++ | | | + |

Target for SAN2219

GABA program:

Strong seizure control with additional antiseizure efficacy to treat severe pediatric syndrome





| GABA _A α1 | GABA _A α2 | GABA _A α3 | GABA _A α5 |
|----------------------|----------------------|----------------------|----------------------|
| ++ | ++ | ++ | |
| | ++ | ++ | |
| | ++ | + | |
| ++ | | | |
| ++ | | | |
| ++ | + | | |
| ++ | | | + |

Target for GABA program

PAM: Positive Allosteric Modulator

Mohler H Diversity in neuronal inhibition, Dial. Clin. Neurosci. 2002; Knabl J, Reversal of pathological pain through specific spinal GABA_A receptor subtypes, Nat. Lett. 2008 ; Rudolph U et al., Beyond classical benzodiazepines, novel therapeutic potential of GABA_A receptor subtypes, Nat.Rev. Drug Discov. 2012

Epilepsy Pipeline






| Product Candidate | Indication | Expansion opportunity | Research | LOP/CS | Pre-clinical | Phase 1 | Phase 2 | Status |
|--|----------------------------------|---|--|--------|--------------|---------|---------|---|
| SAN711 GABA α 3 PAM | Absence seizures | Generalized idiopathic epilepsy |  | | | | | Positive Phase 1 data reported w/ target engagement imaging biomarker |
| SAN2219 GABA α 2/3/5 PAM | On demand repetitive seizures | Refractory Focal onset epilepsy |  | | | | | Ready for Preclinical Development |
| GABA program GABA α 1/2/3/5 PAM | Rare pediatric DEE-SWAS syndrome | Rare genetically defined loss of function mutations |  | | | | | Ready for Preclinical Development |
| SAN2355 Kv7.2/Kv7.3 | Refractory Focal onset epilepsy | Rare genetically defined seizures |  | | | | | Lead Optimization / Candidate selection |

LOP: Lead Optimization Phase

CS: Candidate selection

DEE-SWAS: Developmental Epileptic Encephalopathy with Spike Wave activation during Slow wave sleep

Portfolio of precision medicines for epilepsy indications with significant unmet medical need and potential to be first approved and/or first-in-class therapies

| Pipeline asset | SAN711 | SAN2219 | GABA program | SAN2355 |
|--|--|--|--|--|
|  Indication | Absence seizures (CAE + JAE) | Acute on demand seizure control (ARS) | Developmental epileptic encephalopathy with Spike Wave activation during sleep (DEE-SWAS) | Treatment refractory focal onset seizures |
|  Prevalent population | CAE, US*: 47-80K (add: 16-26K) JAE, US*: 60-90K (add: 40-60K) | > 300K*** | 2.4-7K (US)* | FOS, US**: 1.8M (add: 600K) |
|  Potential Market position | First-in-class Potential to become first-line based on highly differentiated profile | First-in-class Differentiated profile vs. approved Benzodiazepines | First approved treatment Rare pediatric syndrome with high unmet need | Best-in-class Differentiated profile vs. XEN1101 |
|  Key therapeutic value proposition | Precision pharmacology targeting the root cause of the disease pathophysiology without attentional impairment and embryofetal risk | Acute on demand remedy devoid of benzodiazepine use limitations incl. restrictions on treatment frequency | Precision pharmacology targeting the root cause of the seizure physiology with potential to prevent neurodevelopmental disabilities. Devoid of high-dose benzodiazepine- and steroid use limitations | Precision pharmacology reestablishing neuronal inhibition with limited CNS adverse effects, urinary retention problems and retinal abnormalities |
|  Mechanism | GABA _A α 3 PAM targeting SWDs to prevent absence seizures | GABA _A α 2/ α 3/ α 5 PAM reestablishing neuronal inhibition to arrest cluster seizures | GABA _A α 2/ α 3/ α 5 PAM targeting SWDs and reestablishing neuronal inhibition in relevant brain circuits | Kv7.2/Kv7.3 activator selectively dampening neuronal hyperexcitability in relevant circuits |

Add: Addressable patients; ARS: Acute repetitive seizures; CAE: childhood absence epilepsy; JAE: juvenile absence epilepsy; DEE: Developmental epileptic encephalopathy; FOS: Focal onset seizures; PAM: positive allosteric modulator; SWDs: Spike-Wave-Discharges

*Saniona sponsored Market analysis (Back Bay Life Science Advisors lead indication report aug-oct 2020); **CDC statistics for 2015: Epilepsy Data and Statistics | CDC and assuming 30% difficult to treat; ***Mesraoua et al J. Drug Assess, 2021,

- **ABSENCE SEIZURES** – short episodes of impairment of consciousness caused by aberrant Spike-Wave-Discharges
- First line therapy impairs cognition and carries risk for women of childbearing potential
- Characteristics of Absence seizures¹
 - Cause short period of “blinking out”/staring into space
 - Person suddenly stops all activity
 - Eyes may turn upwards and eyelids flutter
 - Seizures usually last <10 seconds
 - Majority of absence seizures begin during childhood, most commonly from age 4 – 14



Up to 10%
Of all childhood epilepsy²



20%
Are drug resistant²



40%
Continue to have seizures into adulthood²



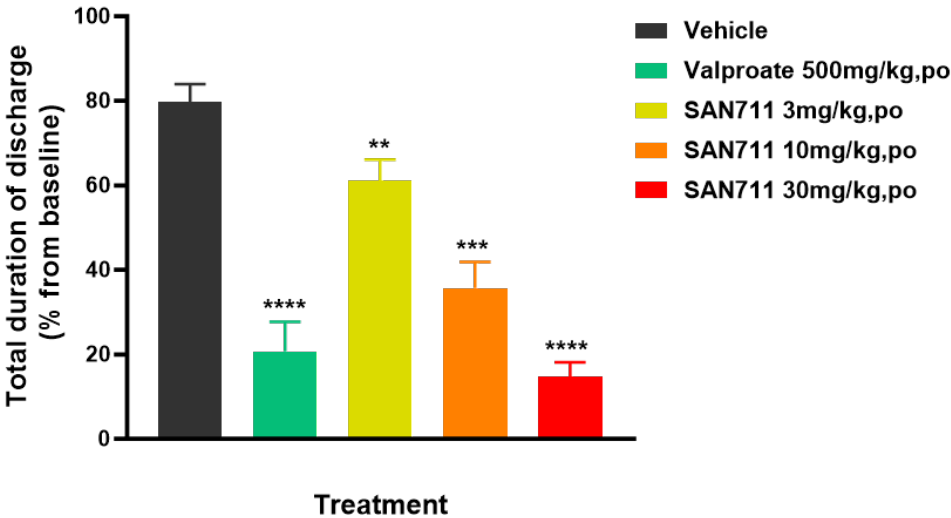
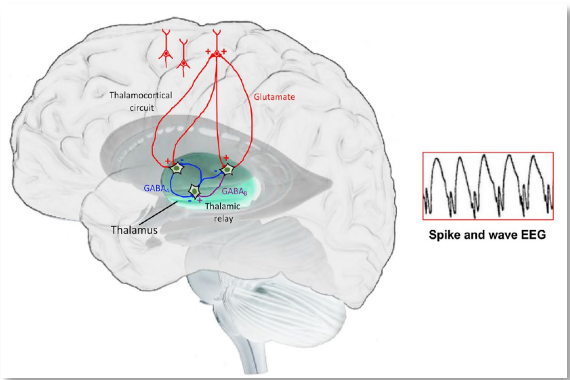
33%
Have cognitive impairment (attention deficits)²

1) epilepsy.com/what-is-epilepsy/seizure-types/absence-seizures; 2) Trinka E et al., Absences in adult seizure disorders. Acta Neurol Scand 2005, Physiol Rev. vol 103, 2023; Glauser T.A et al., Ethosuximide valproate and lamotrigine in childhood absence epilepsy New Engl. J. Med. 2010

Precision medicine by selectively targeting disease pathophysiology

Strong effects in a highly predictable rodent model for absence seizures

- Robust effects obtained in two independent studies (academia and CRO)
- SAN711 precision pharmacology prevents absence seizures by abolishing SWDs in specific brain networks
- No detrimental effects on cognition is anticipated
- Specific contribution of GABA_A α3 in SWD prevention established^{1,2}



n = 11 per condition / ****/****/**** p < 0.05/0.01/0.001 as compared to vehicle (two way RM ANOVA, post hoc Fishers test)
Data averaged between 70 and 190 min after administration and normalized for baseline values.

| Therapeutic effect | GABA _A α1 | GABA _A α2 | GABA _A α3 | GABA _A α5 |
|--------------------|----------------------|----------------------|----------------------|----------------------|
| Anti-seizure | ++ | ++ | ++ | |
| Analgesia | | ++ | ++ | |
| Anxiolysis | | ++ | + | |
| Sedation | ++ | | | |
| Tolerance | ++ | | | |
| Addiction | ++ | + | | |
| Cog. impair | ++ | | | + |

Target for SAN711

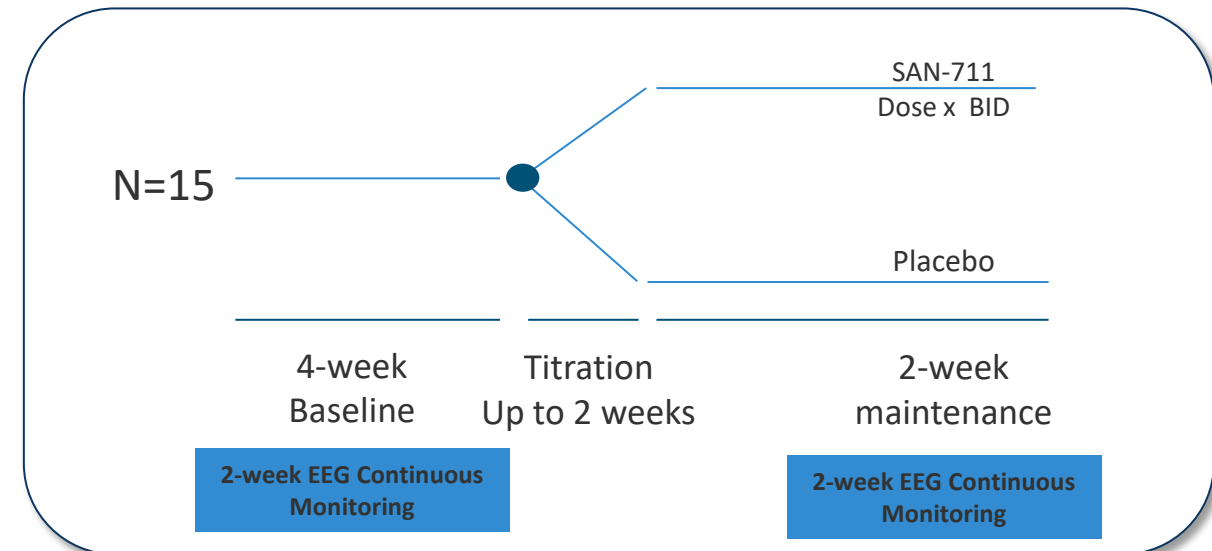
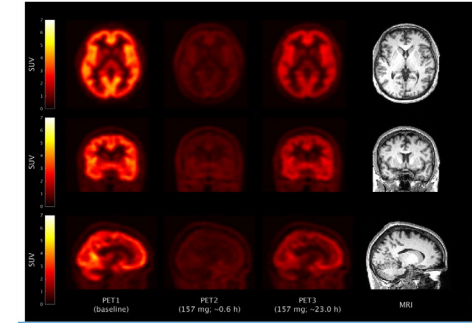
1) Duveau et al., CNS neurosci. Ther. 2019; 2) <https://ir.avenuetx.com/news-events/press-releases/detail/73/avenue-therapeutics-announces-high-potency-and-full>

Innovative trial design for Proof of Concept

Objective Endpoint with Dose Selected based on Target Engagement Biomarker

SAN711

- PoC– Single Country (BE) - multi-centre (Brussels, Leuven, Gent)
 - Double-blind, placebo controlled, parallel-group study to assess Effect on EEG and Absence Seizures using a validated device¹
- N=15 patients randomized 2:1
 - Active dose selected based on available PK-RO data (PET Imaging Target Engagement)
 - ~2-week titration + 2-week maintenance period



1) Swinnen et al. Accurate Detection of Typical Absence Seizures in Adults and Children Using a Two Channel EEG Wearable. Epilepsia 2021

Focused profile targeting GABA_A α2 and α3 receptors: a clear differentiating potential vs. current standard of care for acute, on demand seizures control devoid of use limitations

SAN2219

- **ACUTE REPETITIVE SEIZURES (ARS)** are bouts of seizures over a short period of time despite preventive antiseizure medication
- Can evolve into status epilepticus if not arrested
- Benzodiazepines are most common treatment for ARS
- Use of benzodiazepines are restricted due to GABA_A α1 driven adverse effects
- SAN2219 focused profile provide strong seizure control by potent GABA_A α2 and α3 potentiation
- Synergistic effects demonstrated when combined with Standard-of-care with different mode-of-actions, indicting ability to arrest break-through seizures
- No use limitations anticipated due to lack of GABA_A α1 activation

| Rodent model | Seizure type | Activity |
|--------------------|-----------------------------------|----------|
| 6 Hz test | Focal seizures | ✓ |
| PTZ threshold test | Generalized myoclonic seizures | ✓ |
| MEST test | Generalized Tonic Clonic seizures | ✓ |
| PTZ bolus test | Absence seizures | ✓ |

MEST: Maximal electroshock threshold test; PTZ: Pentylenetetrazole

<https://www.epilepsyfoundationmn.org/2020/01/14/acute-repetitive-seizures-ars-or-cluster-seizures/>, NICE National Institute for Health and Care Excellence

| Therapeutic effect | GABA _A α1 | GABA _A α2 | GABA _A α3 | GABA _A α5 |
|--------------------|----------------------|----------------------|----------------------|----------------------|
| Anti-seizure | ++ | ++ | ++ | |
| Analgesia | | ++ | ++ | |
| Anxiolysis | | ++ | + | |
| Sedation | ++ | | | |
| Tolerance | ++ | | | |
| Addiction | ++ | + | | |
| Cog. impair | ++ | | | + |

Target for
SAN2219

Balanced pharmacology optimized for additional seizure control

Potential to be the first approved treatment for SWAS

GABA
program

- **SPIKE-WAVE ACTIVATION DURING SLEEP (SWAS)** – rare infant onset syndrome with no approved treatment
- Results in cognitive- and developmental regression
- Successful early treatment improve cognitive and developmental outcome
- Highly resistant to standard of care with benzodiazepines, steroids or brain surgery
- GABA program targeting the root cause of the seizure physiology and concurrently
- Potential to prevent neurodevelopmental disabilities
- Devoid of high-dose benzodiazepine- and steroid use limitations

| Rodent model | Seizure type | Activity |
|--------------------|--------------------------------|----------|
| 6 Hz | Focal seizures | ✓ |
| PTZ threshold test | Generalized myoclonic seizures | ✓ |
| PTZ bolus test | Absence seizures | ✓ |

PTZ: Pentylentetrazole

| Therapeutic effect | GABA _A α1 | GABA _A α2 | GABA _A α3 | GABA _A α5 |
|--------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Anti-seizure | ++ | ++ | ++ | |
| Analgesia | | ++ | ++ | |
| Anxiolysis | | ++ | + | |
| Sedation | ++ | | | |
| Tolerance | ++ | | | |
| Addiction | ++ | + | | |
| Cog. impair | ++ | | | + |

Target for
GABA program

SWAS: spike-wave activation during Sleep
Baumer FM et al., Treatment practices and outcomes in CSWS: a multicenter collaboration, J. Pediatr. 2022

Saniona Kv7 activators: Unique subtype selective Kv7.2-7.3 activators with potential to be devoid of dose-limiting CNS adverse effects and blue discolorations

SAN2355

Kv7 ACTIVATORS:

- Non-selective activators proven effective in treatment refractory focal onset epilepsy (Retigabine, Trobalt®/Ezogabine®)
- Withdrawn in 2017: blue discoloring of skin, retinal abnormalities caused by unstable chemistry, urinary retention, CNS adverse effects
- Saniona's subtype selective assets shows unique differentiated profiles with strong antiseizure control maintained while adverse effect profiles superior to non-selective comparators
- New chemistry avoiding unstable metabolite (blue discolorations)



| | Kv7.1 | Kv7.2 | Kv7.3 | Kv7.4 | Kv7.5 |
|--|-------|-------|-------|-------|-------|
| Regulator of neuronal activity in the brain | | ++ | ++ | | + |
| Regulator of electrical activity in the heart | ++ | | | | |
| Regulator of bladder smooth muscle cell activity | | | | ++ | + |

AE: adverse effects, Brickel et al., Epilep. Behav. 2020; Ioannou P et al., Brain Behav. 2022, Kwan P et al., Epilepsia 2010, Laxer KD et al., Epilepsia and Behavior 2014, <https://www.neurologylive.com/view/anticonvulsant-potiga-discontinued-june-2017>

- **DRUG REFRACTORY FOCAL ONSET EPILEPSY** evades standard antiseizure medication
- 30 % unable to achieve seizure freedom
- Severely increases the disease burden:
 - increased premature mortality, increased morbidity, lower quality of life than controlled epilepsy
- Kv7 Program unique selectivity profile retaining strong anti-seizure activity while avoiding CNS- urinary retention adverse effects and adverse events caused by metabolic instability (retinal- and skin discoloration)

| Rodent model | Seizure type | Activity |
|--------------|---|----------|
| 6 Hz | Focal seizures | ✓ |
| MEST test | Generalized Tonic Clonic seizures | ✓ |
| Asset | Fold difference between effect and CNS AEs* | |
| XEN1101 | approx. 2-4 | |
| Kv7 program | Approx. 25 | |

*Fold difference in free plasma concentration between efficacious doses and doses causing CNS adverse effects

| | Kv7.1 | Kv7.2 | Kv7.3 | Kv7.4 | Kv7.5 |
|--|-------|-------|-------|-------|-------|
| Regulator of neuronal activity in the brain | | ++ | ++ | | + |
| Regulator of electrical activity in the heart | ++ | | | | |
| Regulator of bladder smooth muscle cell activity | | | | ++ | + |

Target for Kv7 program

Urinary retention

CNS AEs

CNS: Central Nervous System; AE: Adverse Effect; Ioannou P et al., Brain Behav. 2022, Kwan P et al., Epilepsia 2010, Laxer KD et al., Epilepsia and Behavior 2014, <https://www.neurologylive.com/view/anticonvulsant-potiga-discontinued-june-2017>

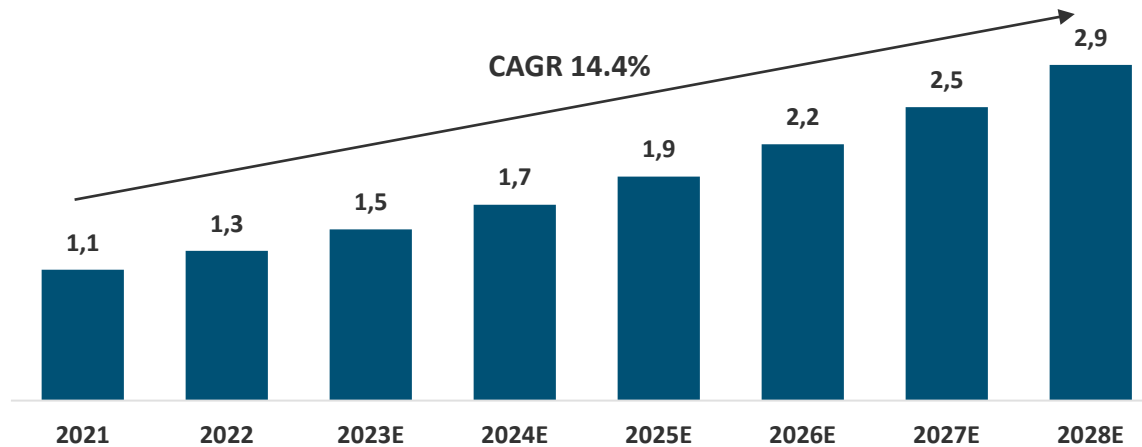
Advancing current epilepsy pipeline – potential to close valuation gap to peers

| | Market cap (USDm) ¹ | Comment |
|----------------------------|--------------------------------|---|
| Cerevel Therapeutics | 4.049 | Dopamine agonist for Parkinson's (Phase 3) and GABA 2/3 PAM (Darigabat) for epilepsy (Phase 2) |
| Biohaven | 2.149 | Glutamate program for ataxia and OCD (Phase 3) and Kv7 program for epilepsy and bipolar disorder (Phase 1) |
| Xenon Pharmaceuticals | 1.980 | Kv7 program (X1101) for focal onset seizures (Phase 3) |
| Sage Therapeutics | 1.061 | GABA and NMDA platform for various indications and clinical stages. Old GABA PAM (steroid) product recently approved for postpartum depression |
| Marinus Pharmaceuticals | 357 | Ganaxolone, old GABA PAM (steroid), for various epilepsy indications incl. CDKL5 disorder (approved), Status Epilepticus (Phase 3), Tuberous Sclerosis (Phase 3) |
| Ovid Therapeutics | 231 | Partner (Takeda) in Phase 3 for epilepsy syndrome Internal programs in Phase 1 or pre-clinical |
| Praxis Precision Medicines | 129 | Na blocker and type-T calcium channel blocker in Phase 1/2 for epilepsy and essential tremors |
| Saniona | 31 | Three GABA PAM programs (SAN711 (phase 2 ready), SAN2219 (preclinical), GABA program (preclinical) and a Kv7 program (SAN2355, preclinical) |

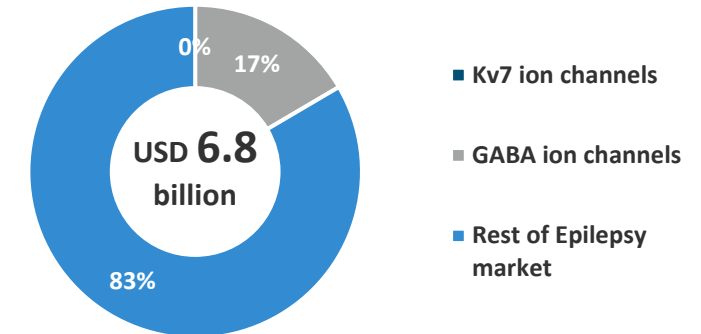
GABA and Kv7 ion channel compounds expected to outgrow the Epilepsy market

- Saniona's GABA-program and Kv7-program have potential to provide significant value
- Development of GABA and Kv7-program prioritized by Saniona
- Current Kv7-programs highly valued
 - Xenon's Phase 3 Kv7-program XEN1101 – NPV of USD 2 billion¹
 - Biohaven's Phase 1 Kv7-program – NPV of USD 795 million²

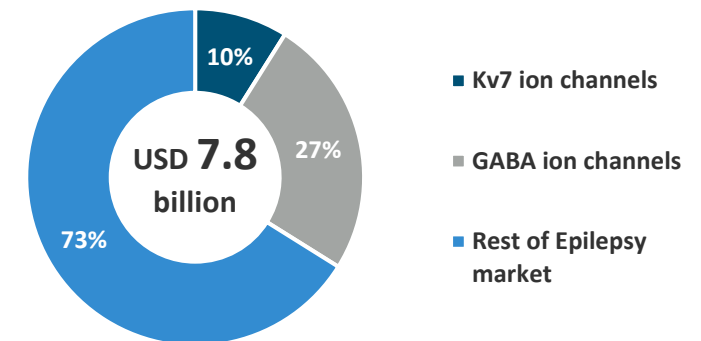
GABA & Kv7 ion channel compounds combined market size³
(USD billion)



Epilepsy market 2021



Epilepsy market 2028



1) Evaluate Pharma, Company | Xenon Pharmaceuticals | Report, 2023-10-17; 2) Evaluate Pharma, Company | Biohaven | Report, 2023-10-17; 3) Evaluate Pharma, Market Value by MoA, 2023-10-17

Eating disorders candidates – targeting market launch and partnering

- **Tesofensine** – targeting market launch 2024

- Q1 2023 Mexican regulatory authority expressed favorable opinion¹ for treatment of obesity
- Partnership – market leader Medix 
 - Near-term revenue potential in 2024
- Initially targeting obesity market in Mexico with potential to expand into other territories

Mexican obesity market

- 75% of Mexican people are obese or overweight²
 - Huge unmet need
- USD 190m by 2023³
- 16% CAGR³



- **Tesomet** – positioned for partnering following successful phase 2a data (2019)

- Orphan designated drug targeting two rare diseases

- Hypothalamic obesity (HO)
 - Impacts up to 65,000 people in the US and EU^{4,5,6}
- Prader-Willi syndrome (PWS)
 - Impacts up to 84,000 people in the US and EU^{7,8}

1) "Saniona's partner Medix receives favorable opinion for tesofensine for the treatment of obesity and weight management in Mexico"; 2) 2018 data on Mexico by ENSANUT (the National Survey on Health and Nutrition); 3) Medix estimates; 4) Bunin et al. The descriptive epidemiology of craniopharyngioma. J Neurosurg, 89 547-551 (1998). doi:10.3171/jns.1998.89.4.0547; 5) Zacharia et al. Incidence, treatment and survival of patients with craniopharyngioma in the surveillance, epidemiology and end results program. Neuro-Oncology, 14 1070-1078. (2012). doi:10.1093/neuonc/nos142; 6) NIH GARD: rarediseases.info.nih.gov/diseases/6463/hypothalamic-obesity; 7) Manzardo et al. Survival trends from the Prader-Willi Syndrome Association (USA) 40-year mortality survey, Genet Med 20, 24–30 (2018) doi:10.1038/gim.2017.92; 8) National organization of Rare Diseases: rarediseases.org/rare-diseases/prader-willi-syndrome/

Saniona Investment Highlights

- Expanding pipeline in collaboration with partners - Tesofensine targeting market launch in 2024 together with partner, Tesomet (phase 2b), SAN711 (phase 2a) and SAN903 (phase 1) and several pre-clinical assets available for partnering
- Cutting-edge proprietary ion channel drug discovery engine – continuous value creation through generation of new high potential drug candidates for epilepsy and other CNS indications
- Platform validated by leading pharmaceutical companies – SEK +400m received through successful spinouts, partnerships, and licensing agreements with upside potential preserved
- Potential near-term income from partnerships - research funding from existing partnerships, potential milestones, royalty income from tesofensine, new partnering opportunities on clinical assets and platform
- Focused epilepsy pipeline addressing indications with significant medical need including SAN711 (phase 2 POC ready) for potential internal development partly financed through partnership income



Thank You

