

Oncoinvent

Transforming cancer care through direct alpha therapy

DNB Healthcare conference
25 November 2025

A unique radiopharmaceutical opportunity

1 Targeted, non-biological, **receptor independent** mode of action with alpha emitter

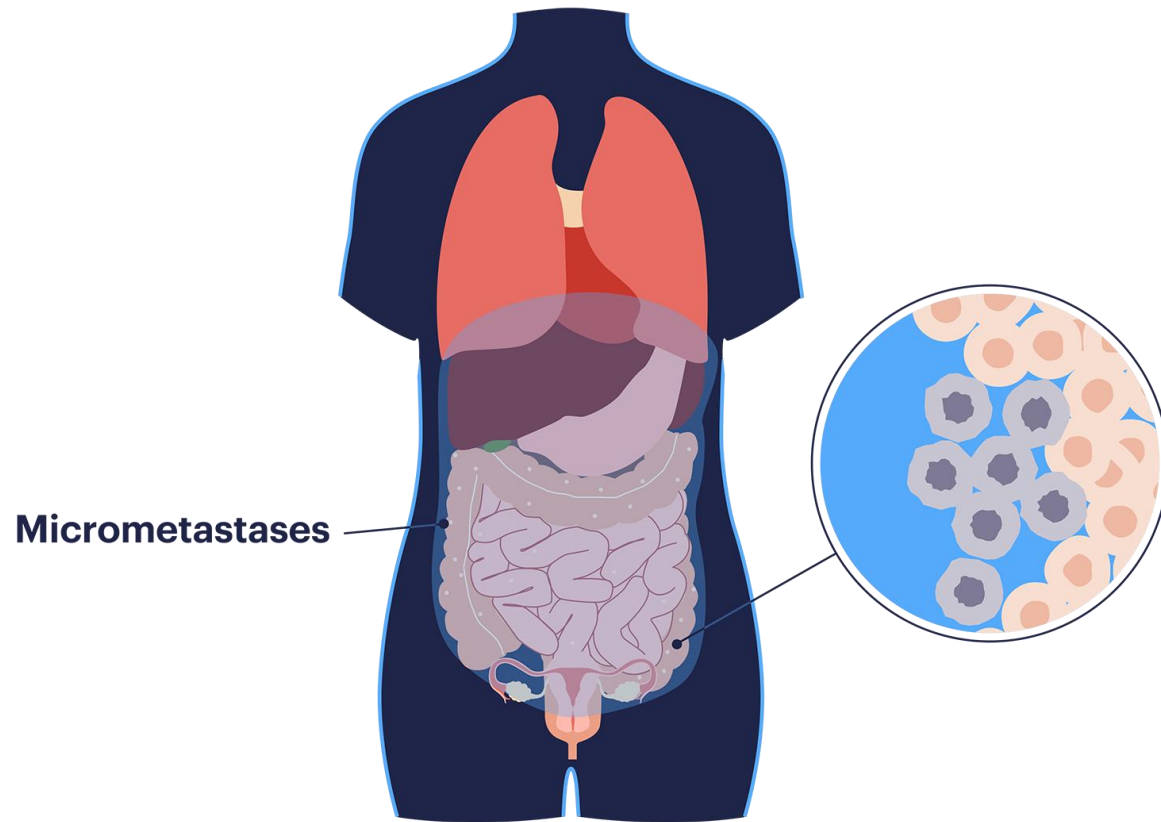
2 **Signals of efficacy:** potential game changer in ovarian and colorectal cancers

3 **In Phase 2** in ovarian cancer

4 **High unmet need** and limited competition

5 Developed by radiopharma **pioneers** and serial-entrepreneurs

Peritoneal metastases - urgent need for novel treatments



- Peritoneal metastases arise from many **different primary cancers**
- Only treatment option with curative intent is **surgery**, effect of systemic therapy is limited
- **Surgery leaves behind micro-metastases** causing disease progression
- Peritoneal metastases are confined to the peritoneum – in effect a '**closed compartment**'

The main cause of death in ovarian cancer



70% of all ovarian cancer patients have peritoneal metastasis at diagnosis



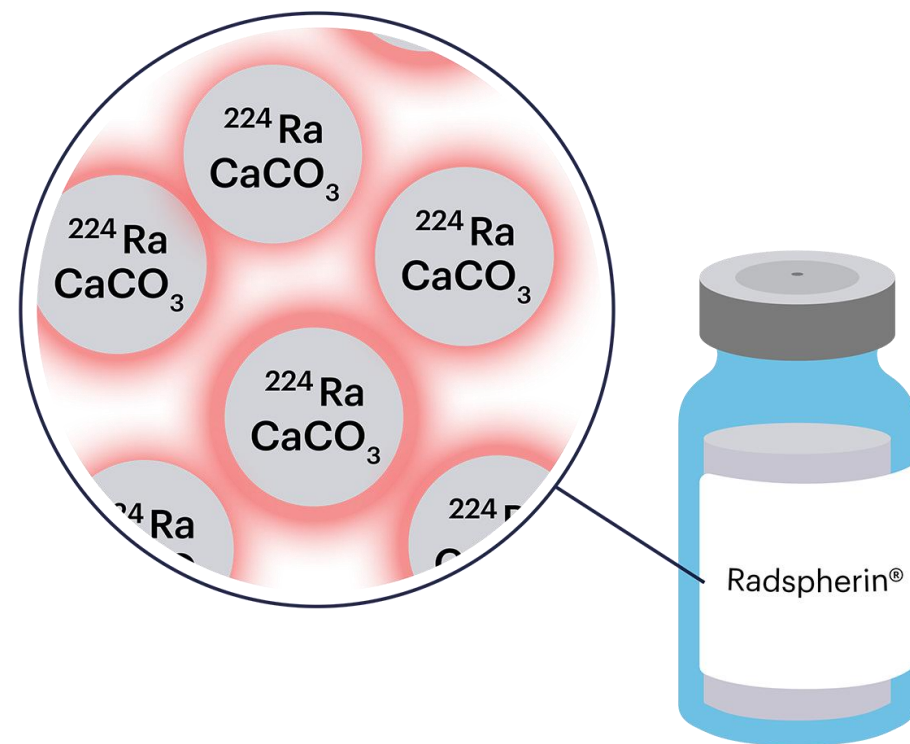
Up to 85% relapse after surgical resection

- The majority of patients experience disease recurrence
- Recurrences are almost exclusively **confined to the peritoneum**
- Local control in the peritoneum is key to improving life expectancy
- FDA Fast Track

Radspherin® - alpha therapy targeted to and retained in the peritoneum

Radspherin®

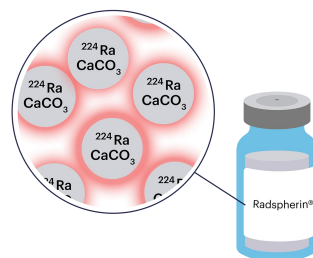
- Combining **alpha-emitting ^{224}Ra** with **CaCO_3 microparticles**
- Half-life 3.6 days
- **Therapy with depot effect** - 75% of radiation dose delivered the first week
- Shelf life 8 days allowing for **centralized manufacturing**



Radspherin® - alpha therapy targeted to and retained in the peritoneum

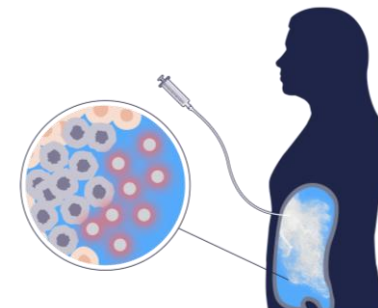
Radspherin®

- Combining **alpha-emitting ^{224}Ra** with **CaCO_3 microparticles**
- Half-life 3.6 days
- **Therapy with depot effect** - 75% of radiation dose delivered the first week
- Shelf life 8 days allowing for **centralized manufacturing**

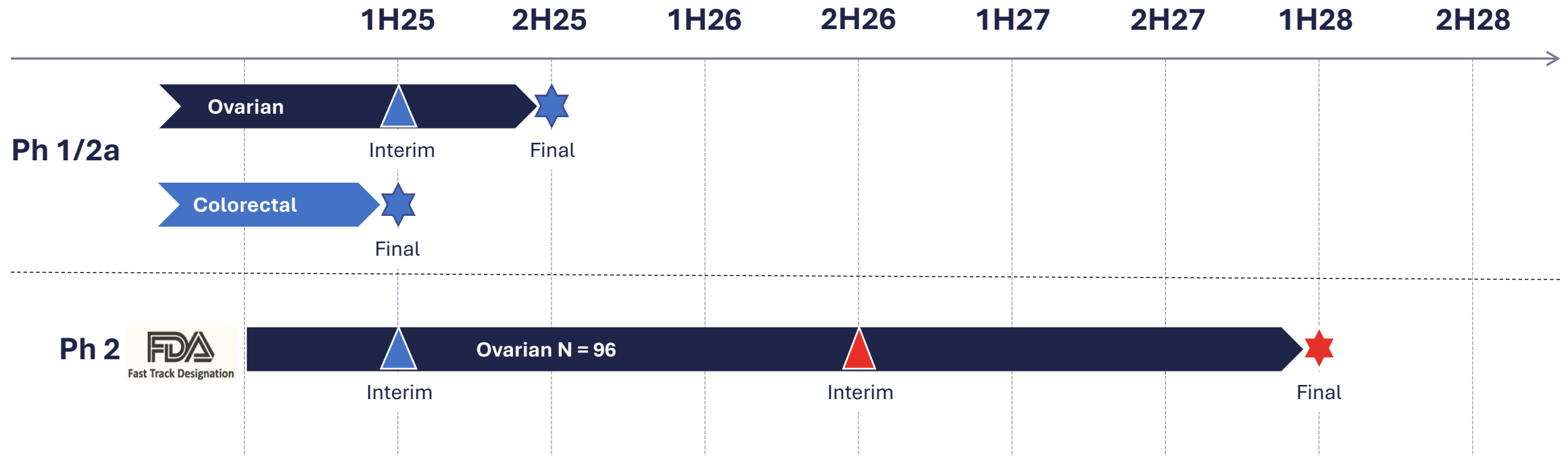


How does it work?

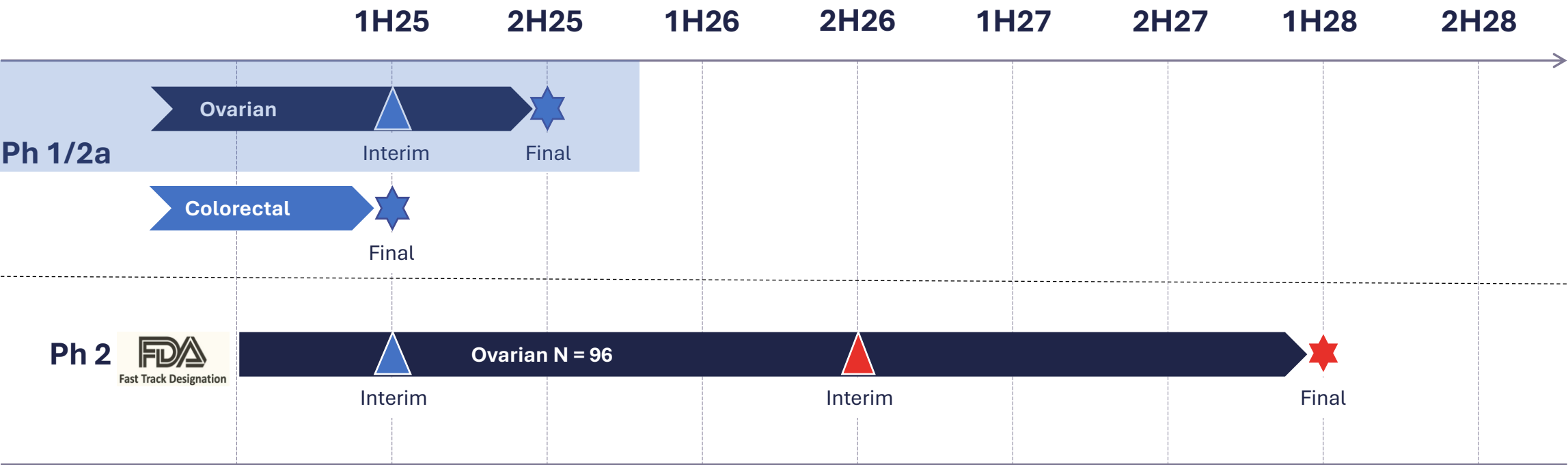
- Delivering a high dose of alpha-radiation directly to the peritoneum through an in-dwelling catheter
- Administration **1-3 days** post-surgery while patient is still at the hospital
- High energy and short radiation range enables effective killing of the targeted metastases **while sparing the surrounding normal tissue**



Ongoing clinical development



Ongoing clinical development



Completed

Upcoming milestones

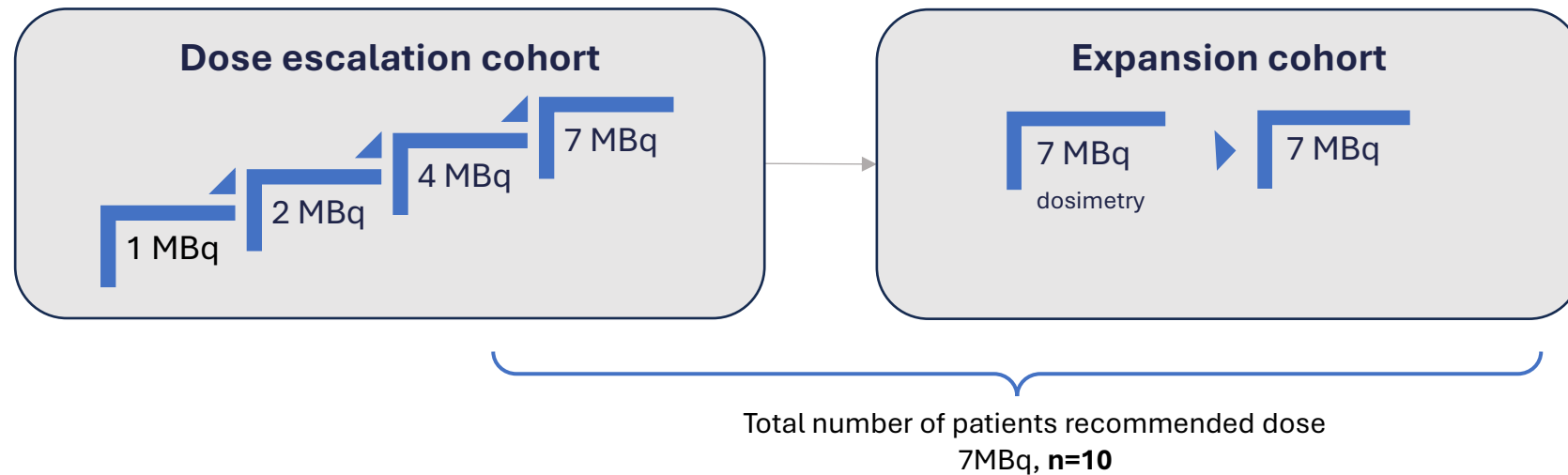
Radspherin® - phase 1 study in ovarian cancer

RAD-18-001: in patients after secondary debulking surgery of platinum-sensitive recurrent ovarian cancer

- single-arm open label study
- 3 + 3 dose-escalation (1, 2, 4, 7 MBq)
- 24 months follow-up

4 clinical sites:

- Oslo, Norway (PI: Yun Wang)
- Leuven, Belgium (PI: Els van Nieuwenhuysen)
- Madrid, Spain (PI: Luis Chiva)
- Pamplona, Spain (PI: Luis Chiva)



Ovarian cancer: Preventing disease progression

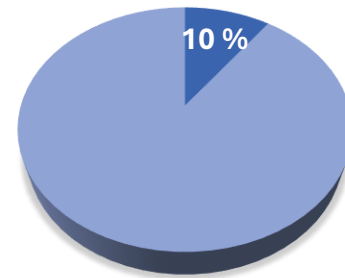
24 months data from 10 patients receiving 7 MBq dose *vs historical recurrence rates*

“These final results are **truly encouraging**, suggesting that Radspherin® could help **delay disease progression and offer patients hope for longer, healthier lives.**”

*Dr Luis Chiva, Principal Investigator
and Director of Department of
Obstetrics and Gynecology Clinica
Universidad de Navarra*

Recurrence rate

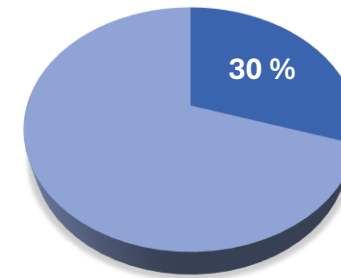
RAD-18-001



10%

Peritoneal recurrence rate

- One patient with recurrence



30%

Overall recurrence rate

- Additionally, two lymph node recurrences

Ovarian cancer: Preventing disease progression

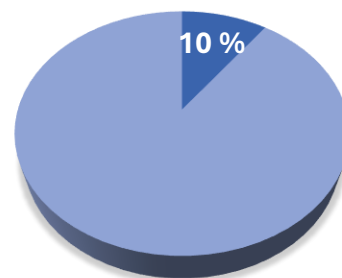
24 months data from 10 patients receiving 7 MBq dose *vs historical recurrence rates*

“These final results are **truly encouraging**, suggesting that Radspherin® could help **delay disease progression and offer patients hope for longer, healthier lives.**”

Dr Luis Chiva, Principal Investigator and Director of Department of Obstetrics and Gynecology Clinica Universidad de Navarra

Recurrence rate

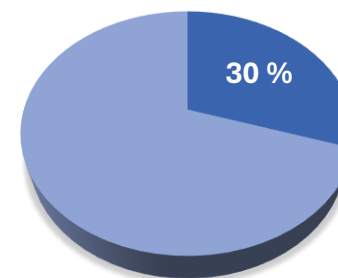
RAD-18-001



10%

Peritoneal recurrence rate

- One patient with recurrence

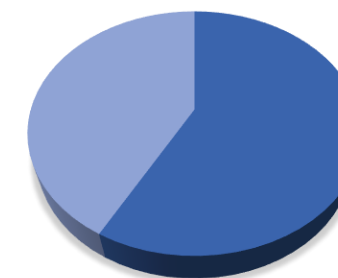


30%

Overall recurrence rate

- Additionally, two lymph node recurrences

Historical controls

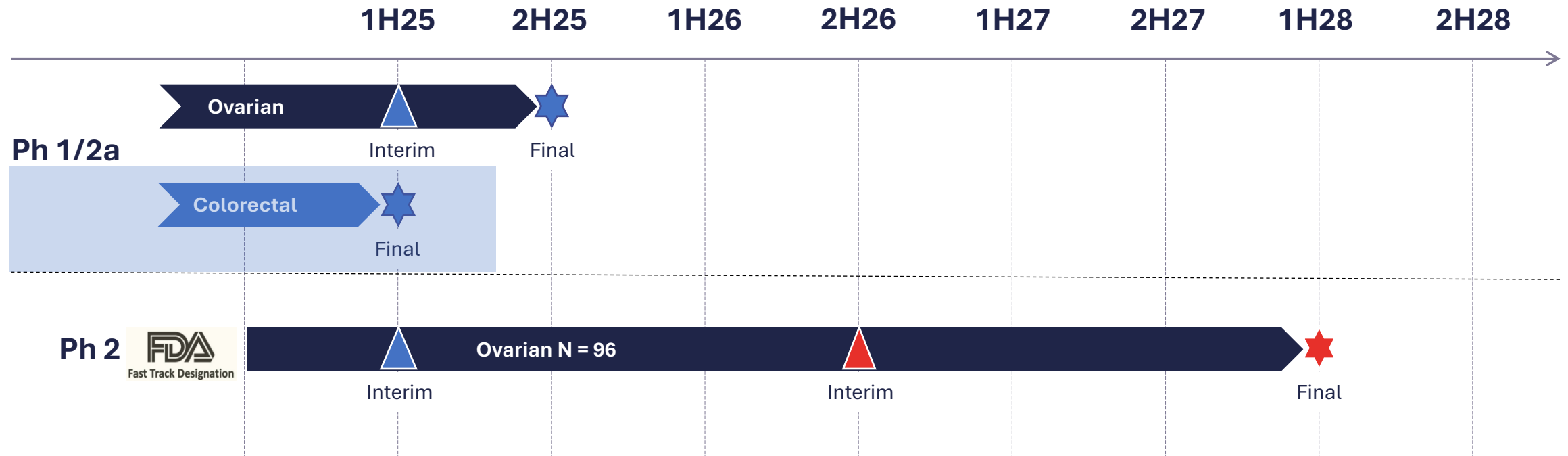


~55-60%

Overall recurrence rate*

*Peritoneal recurrence rates or distribution of recurrences not available in historical control

Ongoing clinical development



Colorectal cancer: final phase 1/2a data confirm peritoneal control

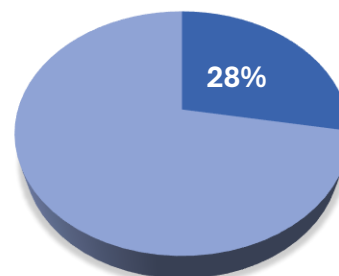
Topline 18-months data of 36 patients receiving 7 MBq dose vs historical recurrence rates

Peritoneal recurrence rate

"It's highly encouraging to see patients treated with Radspherin achieving **outcomes that exceed expectations** for this challenging population."

*Dr. Stein Gunnar Larsen
Principal Investigator at the Oslo
University Hospital, Norway*

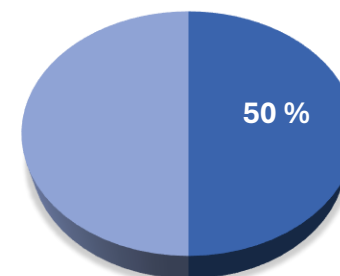
Radspherin®



28%

Peritoneal recurrence rate

Historical control

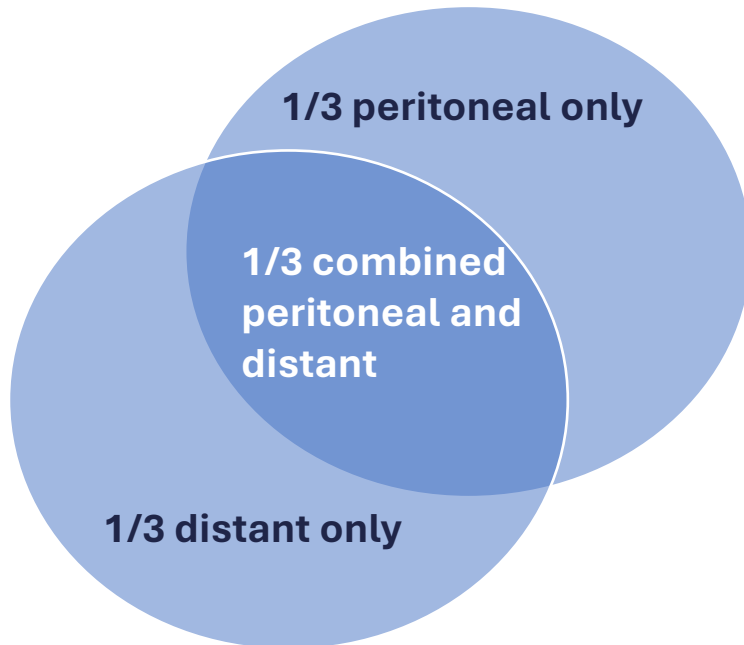


~50%

Peritoneal recurrence rate

Controlling peritoneal disease may significantly improve survival in colorectal cancer

First disease recurrence after treatment ¹



Impact of site of first site of recurrence ¹

Median overall survival - from the time of recurrence:

- After distant metastasis only: 44 months
- After peritoneal metastasis: 22 months

5-year overall survival – from the time of treatment

- Distant metastasis only: 53 %
- Peritoneal metastasis: 19 %

Strong safety profile demonstrated in the completed phase 1/2a studies in ovarian and colorectal cancer

✓ Well tolerated and safe to use

- No dose limiting toxicity
- Only two SAEs possibly related to Radspherin*

✓ No evidence of systemic radiation toxicity

- Radiation dose retained in the peritoneal cavity
- Absorbed doses to other organs well below toxicity levels

✓ Low exposure for hospital staff

- Low radioactivity dose in blood and urine
- No precautions related to external exposure required

*Per cut-off date of annual DSUR March 2025

- one event of small bowel perforation, 72 days after Radspherin administration

- one event of procedural complication during Radspherin administration (disconnection syringe-catheter)

Near-term significant milestone

Phase 2 ovarian cancer

- 2H26: First randomized interim data
- 2028: Final data



Phase 1 ovarian cancer

- Final 24 months data
- 10 patients 7 MBq
- October 2025



Phase 1/2a colorectal cancer

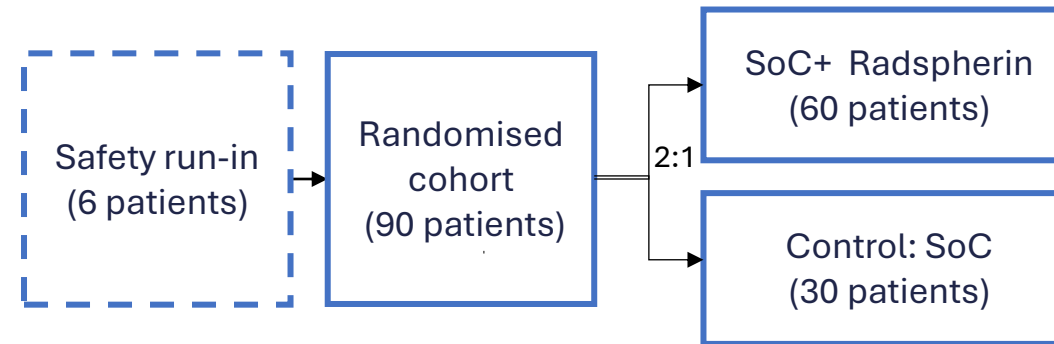
- Final 18 months data
- 36 patients 7 MBq
- June 2025

Phase 2 study in ovarian cancer – enrollment on track

6 centers active – more sites to be included

Patients

- with peritoneal metastases
- after neoadjuvant chemotherapy
- eligible for complete resection (R0)
- with HRD negative ovarian cancer



6 study sites actively enrolling:
NO, BE, ES (2), UK, US



More sites to be included

Assessment
every 3
months up to
24 months,
including
CT/MRI

Long-term follow-up
for up to 5 years
according to standard
of care

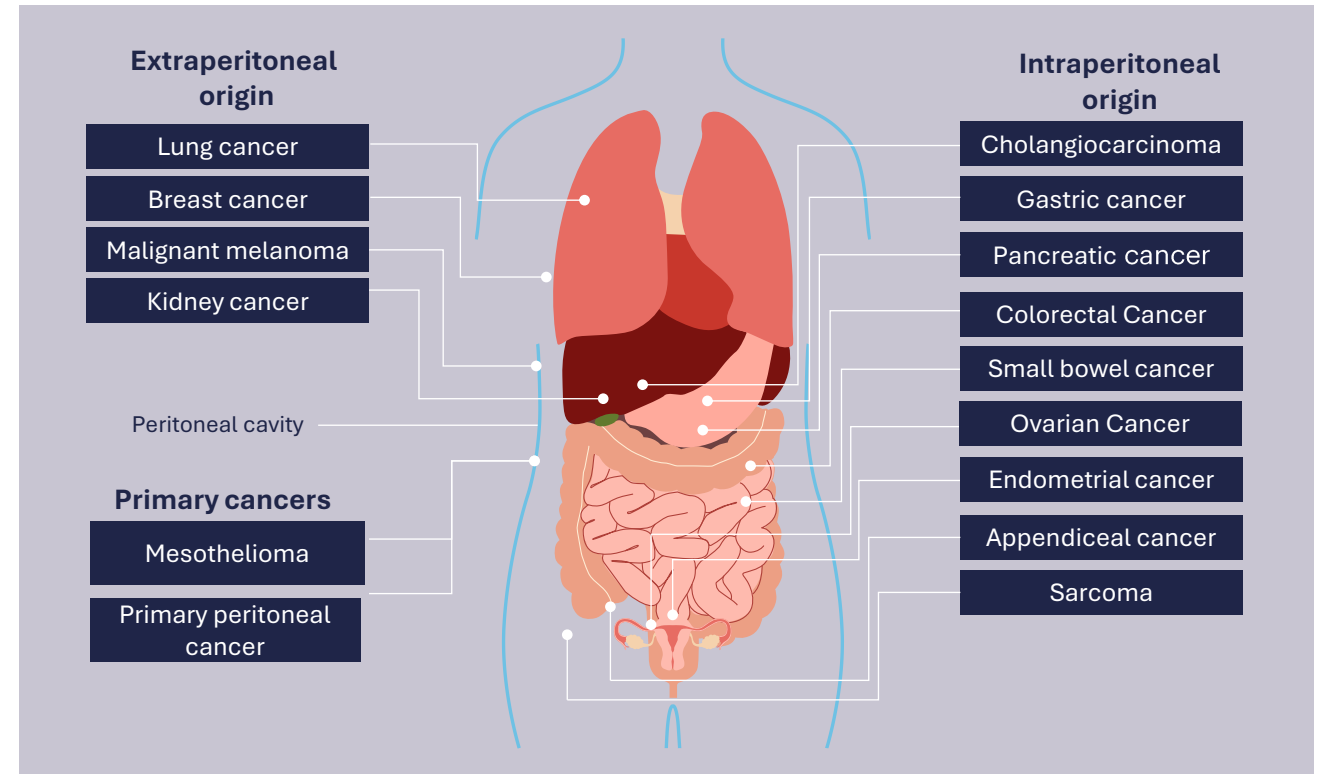
PFS

pPFS
OS
TFST
TSST

Safety
AESI
QoL
Biomarkers

Pipeline in one product - broad clinical application

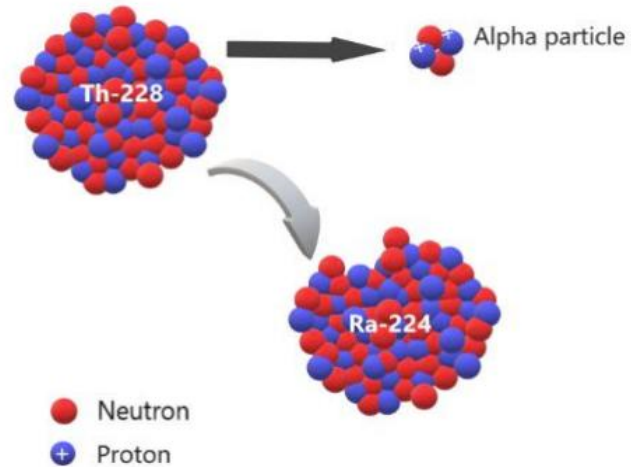
- Peritoneal metastases arise from many different cancers
- Radspherin® is a **receptor-independent** treatment:
 - *effective regardless of the origin of the primary malignancy*



In-house GMP pilot plant with attractive capabilities



Oncoinvent has in-house GMP production capability



^{224}Ra produced from ^{228}Th , which has multiple sources



Microparticles and finished goods produced in-house

- Capacity of ~200 doses Radspherin annually, outsourcing and scale-up required for phase 3
 - On selective basis offer GMP laboratory services to similar non-competing companies

Radiopharmaceutical expertise at all levels

Scientific founders



Roy Larsen



Øyvind Bruland



Management



Oystein Soug
Chief Executive Officer



Gro Hjellum
Chief Operations Officer



Anne-Kirsti Aksnes
Chief Clinical Officer



Kari Myren
Chief Medical Officer



Tore Kvam
Chief Financial Officer



Kristine Lofthus
Chief Production Officer



Stian Brekke
Head of Regulatory Affairs



Board



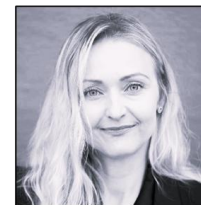
Gillies O'Bryan-Tear
Chair



Kari Grønås



Hilde Steineger



Ingrid Teigland Akay



Orlando Oliveira



Johan Häggblad



Anne Cecilie Alvik



Olav Hellebo



A unique radiopharmaceutical opportunity

