

Vicore Announces Presentations at the European Respiratory Society Congress 2025

Stockholm, September 23, 2025 - Vicore Pharma Holding AB (STO: VICO), unlocking the potential of a novel class of drugs, angiotensin II type 2 receptor agonists (ATRAGs), today announced that the company will present at the European Respiratory Society (ERS) Congress 2025, taking place in Amsterdam, the Netherlands, from September 27 - October 1, 2025.

Vicore will present new findings from the 36-week Phase 2a AIR trial of buloxibutid in idiopathic pulmonary fibrosis (IPF), including a synthetic control arm (SCA) analysis. This analysis, using SCAs generated from a real-world database of over 10,000 IPF patients, strongly supports buloxibutid's beneficial treatment effect. Among patients with comparable baseline characteristics, buloxibutid showed statistically significant improvement in forced vital capacity (FVC) at 36 weeks relative to both baseline and synthetic control, confirming the disease-modifying signal observed in the AIR trial.

Vicore will also share data on Almee™, a digital cognitive behavioral therapy in development, demonstrating its impact on general life satisfaction and quality of life in patients with pulmonary fibrosis in the United States.

Oral Presentations

 The novel angiotensin II type 2 receptor agonist buloxibutid improves lung function in IPF compared to real-world external IPF control arms (OA1249)

Session 108: Emerging clinical trials in pulmonary fibrosis

Date: Sunday, September 28, 2025 Presentation Time: 11:00 AM CEST

Location: Elicium 1

• Effects on life satisfaction using a digital therapy in individuals with pulmonary fibrosis randomised controlled investigation (OA2347)

Session 202: Shaping the future of respiratory care through artificial intelligence and evidence-

based digital strategies

Date: Sunday, September 28, 2025 Presentation Time: 4:05 PM CEST

Location: 3B

Late-Breaking Poster Presentation

. Synthetic arm generation utilizing real-world patient data demonstrates treatment effect in the Phase 2a AIR trial of buloxibutid in IPF (PA3043)

Session 246: Alveolar filling disorders and autoimmune lung diseases

Date: Monday, September 29, 2025

Poster Session Time: 8:00 - 9:30 AM CEST

Location: PS-37



Following the presentations, the poster will be available on the Publications page of Vicore's website.

For further information, please contact:

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About Vicore Pharma

Vicore Pharma Holding AB is a clinical-stage pharmaceutical company unlocking the potential of a new class of drugs with disease-modifying potential in respiratory and fibrotic diseases, including idiopathic pulmonary fibrosis (IPF). The company's lead program, buloxibutid, is a first-in-class oral small molecule angiotensin II type 2 receptor agonist, which has received Orphan Drug and Fast Track designation from the United States Food and Drug Administration and is currently being investigated in the global 52-week Phase 2b ASPIRE trial in IPF.

The company is publicly listed on the Nasdaq Stockholm exchange (VICO). www.vicorepharma.com

About Idiopathic Pulmonary Fibrosis (IPF)

IPF is a progressive and lethal fibrotic lung disease impacting approximately 250,000 people across the United States and Europe. The average life expectancy following diagnosis is 3-5 years, and currently approved therapies only slow the decline of lung function. While there are two anti-fibrotic therapies available today, a large proportion of patients do not initiate treatment, and those who do often discontinue due to limited efficacy and significant tolerability issues. With a growing patient population, there is a clear need for new disease-modifying treatments.

About the Phase 2b ASPIRE Trial

ASPIRE is an ongoing global 52-week Phase 2b, randomized, double-blind, placebo-controlled clinical trial designed to assess the efficacy and safety of buloxibutid in IPF patients who are either not currently on treatment or receiving background nintedanib standard of care. Participants are randomized to receive one of two doses of buloxibutid (100 mg or 50 mg taken orally twice daily) or placebo. The primary endpoint is change from baseline in forced vital capacity, the registrational endpoint for IPF. Secondary endpoints include safety, tolerability, and the proportion of patients with disease progression over the trial period. The trial will enroll 270 patients from approximately 100 sites across 14 countries, including the United States.

Attachments

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