

Cantargia reports further progress in ongoing phase 1 clinical trial with CAN10

Cantargia (Cantargia AB; Nasdaq Stockholm: CANTA) today reported progress in the ongoing phase 1 clinical trial of the CAN10 antibody. Seven dose groups have now been concluded without any safety concerns. Furthermore, additional receptor occupancy studies confirm that CAN10 saturates its target molecule, IL1RAP, on immune cells from the study participants. The study follows timelines with the next dose group starting immediately, followed by the first group investigating multiple dosing, planned to start during Q3.

"The CAN10 program has passed another important milestone, and the new data strengthen our confidence in the program. With its unique mechanism of action addressing the disease promoting activity of the IL-1 family, CAN10 has huge potential to treat a large number of autoimmune/inflammatory diseases. We look forward to the continued evaluation including upcoming studies in patients," said Göran Forsberg, CEO of Cantargia.

CAN10 is one of two clinical projects in the Cantargia pipeline. The CAN10 antibody has been designed for treatment of autoimmune/inflammatory diseases and has "pipeline in a pill" potential with several possible target indications. The phase 1 clinical trial investigates increasing levels of CAN10 as single dose administration in healthy subjects followed by studies of multiple dosing in participants with mild to moderate psoriasis. The primary endpoint relates to safety. Details on the trial can be found at https://clinicaltrials.gov/study/NCT06143371.

The first seven dose groups in healthy volunteers have now concluded the treatment period. No safety concerns have been observed and the eighth dose group is about to start in accordance with the protocol. In addition, the important receptor occupancy study continues to follow predictions from preclinical studies and complete target saturation has now been documented on both monocytes and neutrophils. Biomarker samples taken during the study are being analyzed to document a dose dependent inhibition of IL-1 and IL-36 stimulated release of biomarkers from immune cells. Additional biomarker results based on the first seven dose groups are expected mid-2024. Dosing in participants with psoriasis are expected to start Q3 2024 ahead of phase 2 in 2025.

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This information is information that Cantargia is obliged to make public pursuant to the EU Market Abuse Regulation. The information was submitted for publication, through the agency of the contact persons set out above, at 2024-06-14 11:05 CEST.



About Cantargia

Cantargia AB (publ), reg. no. 556791-6019, is a biotechnology company that develops antibodybased treatments for life-threatening diseases and has established a platform based on the protein IL1RAP, involved in a number of cancer forms and inflammatory diseases. Cantargia's oncology program, the antibody nadunolimab (CAN04), is being studied clinically primarily in combination with chemotherapy with a focus on pancreatic cancer, non-small cell lung cancer and triple-negative breast cancer. Positive interim data for the combinations indicate stronger efficacy than would be expected from chemotherapy alone. Cantargia's second development program, the antibody CAN10, blocks signaling via IL1RAP in a different manner than nadunolimab and addresses treatment of serious autoimmune/inflammatory diseases, with initial focus on systemic sclerosis and myocarditis.

Cantargia is listed on Nasdaq Stockholm (ticker: CANTA). More information about Cantargia is available at www.cantargia.com.

About CAN10

The CAN10 antibody binds strongly to its target IL1RAP and has a unique capability to simultaneously inhibit signaling via IL-1, IL-33 and IL-36. Inhibition of these signals can be of significant value in the treatment of several inflammatory or autoimmune diseases. The initial focus of CAN10 will be on two severe diseases: myocarditis and systemic sclerosis. In preclinical in vivo models of myocarditis, a CAN10 surrogate antibody significantly reduced the development of inflammation and fibrosis, and significantly counteracted the deterioration of the cardiac function. The CAN10 surrogate also inhibited disease development in models of systemic sclerosis, psoriasis, psoriatic arthritis, atherosclerosis and peritonitis. A clinical phase I study, investigating CAN10 in healthy volunteers and psoriasis patients, is ongoing. Up to 80 subjects may be included in the trial, the first clinical data set shows good safety. Additional data from the trial are expected continuously during 2024.

Attachments

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