PRESS RELEASE
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Cantargia Announces Start of New Investigator-Initiated Lung Cancer Prevention Study

Cantargia AB (Publ) (Nasdaq Stockholm: CANTA) today reported that the first patient has been dosed in a Phase 2 clinical trial investigating nadunolimab in up to 59 current or previous smokers with multifocal high-risk lung nodules, and therefore at risk of developing lung cancer. The study is an investigator-led initiative in collaboration with Drs. Robert Samstein, Thomas Marron and Miriam Merad at Mount Sinai Tisch Cancer Center, New York.

"*Building on the encouraging clinical findings in patients with solid tumors, together with robust preclinical data, we are eager to evaluate nadunolimab as a preventive treatment in this high#risk population. We are excited that a leading institution such as the Tisch Cancer Institute recognizes nadunolimab as an innovative and promising therapeutic approach, and we look forward to advancing this treatment option further"* said Hilde Steineger, CEO of Cantargia.

"*Lung cancer is a leading cancer killer and while treatment options have improved, most lives are saved by early detection*" said Dr. Robert Samstein, Mount Sinai Tisch Cancer Center. "*The scientific rationale for using a novel IL1RAP-targeting approach with nadunolimab is compelling in this identified high-risk population, and we look forward to starting the study".*

Nadunolimab has been investigated by Cantargia in approximately 300 patients with solid tumor indications and has shown signals of clinical activity in pancreatic cancer and non-small cell lung carcinoma. Researchers at the Tisch Cancer Institute have a long-standing interest in developing new therapies for the treatment of lung cancer and have performed preclinical work strongly implicating IL-1 signaling in tumor initiation and the development of early lung cancer.

The new phase 2 investigator-initiated trial will be conducted at Mount Sinai Tisch Cancer Center, New York. The study, led by principal investigator Dr. Robert Samstein, is designed to investigate nadunolimab monotherapy in the high-risk population for 3 months. The study participants will then be screened repeatedly for 12 months, measuring the response of the lung nodules to treatment. In addition to investigating anticancer effects, the study will include comprehensive correlative studies to understand the effect IL1RAP targeting on inflammation contributing to cancer and other diseases. Details about the study (NCT07284485) are available at **clinicaltrials.gov**.

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About Cantargia
Cantargia AB (publ), reg. no. 556791-6019, is a biotechnology company that develops antibody-based 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 and non-small cell lung cancer. Positive 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. In September 2025, the acquisition of CAN10 by Otsuka Pharmaceutical was completed.

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

About nadunolimab (CAN04)
Nadunolimab is an antibody that binds strongly to its target IL1RAP and functions by inducing ADCC and blocking IL-1α and IL-1β signaling. Nadunolimab can thereby counteract the IL-1 system which contributes to the immune suppressive tumor microenvironment and the development of resistance to chemotherapy. Nadunolimab has been investigated in multiple clinical trials; the phase I/IIa trial CANFOUR, **NCT03267316**, evaluated nadunolimab in combination with standard chemotherapies in patients with pancreatic ductal adenocarcinoma (PDAC) (gemcitabine/nab-paclitaxel) or non-small cell lung cancer (NSCLC) (platinum-based chemotherapies). Positive data show durable responses for combination therapy in 73 PDAC patients, resulting in a median iPFS of 7.2 months and median OS of 13.2 months. An even higher median OS of 14.2 months was observed in a subgroup of patients with high tumor levels of IL1RAP. Intriguing efficacy was observed in a small group of non-squamous NSCLC patients post PD(L)-1 therapy.

Attachments
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