PRESS RELEASE
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Cantargia results showing efficacy of CAN10 in models of myocarditis published in Circulation: Heart Failure

Cantargia (Cantargia AB; Nasdaq Stockholm: CANTA) today announced the publication of CAN10 results in disease models of myocarditis in the scientific journal Circulation: Heart Failure. Key results relate to strong treatment effects in both viral as well as autoimmune myocarditis. CAN10, simultaneously targeting IL-1, IL-33 and IL-36, generated much stronger effects than treatment blocking only IL-1. CAN10 is in phase 1 clinical development.

"CAN10 has generated strong preclinical results in models of myocarditis which is a disease with very high medical need. We are pleased that these important results are now published in an impactful scientific journal," said Göran Forsberg, CEO of Cantargia.

The IL1RAP-binding antibody CAN10 has shown strong efficacy in various inflammatory and autoimmune disease models and is now in phase 1 clinical development. The clinical data so far indicate good safety, receptor binding and a potent pharmacodynamic effect counteracting inflammatory immune cell responses in healthy subjects. Currently, safety, pharmacokinetics and biomarker effects are investigated in participants with psoriasis in a multiple ascending dose setting. Phase 2 clinical development is planned to start H2 2025.

Myocarditis is a life-threatening disease characterized by inflammation of the heart muscle and impaired heart function. It may result from autoimmunity or as a side effect to certain pharmaceuticals (including checkpoint inhibitors), but is most commonly caused by viral infections, and rates of myocarditis increased during the COVID-19 pandemic. The data published in Circulation: Heart Failure show potent efficacy of the CAN10 mouse surrogate antibody in in vivo models of both viral and autoimmune myocarditis. Notably, CAN10 counteracted disease development in both models and the treatment effect was much stronger than blockade of IL-1 signaling only. CAN10 counteracted both inflammation in the heart muscle as well fibrosis and preserved heart function. This clearly highlights the unique and powerful function of CAN10, resulting in a broad mode of action which is beneficial in complex inflammatory and fibrotic diseases such as myocarditis. The key results have previously been reported as posters at scientific conferences.

The research has been carried out as collaborations with Prof. Daniela Cihakova at the Johns Hopkins University, Baltimore, MD, USA and Associate Prof. Alexandru Schiopu at Lund University, Sweden. The article by Diego A. Lema et al. can be accessed through the journal's webpage **www.ahajournals.org**.

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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, non-small cell lung cancer and triple-negative breast 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, with initial focus on hidradenitis suppurativa and systemic sclerosis.

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: hidradenitis suppurativa (HS) and systemic sclerosis. In preclinical in vivo models of inflammatory diseases, such as systemic sclerosis, psoriasis, psoriatic arthritis, atherosclerosis, myocarditis and peritonitis, a CAN10 surrogate antibody significantly reduced the development of the disease. A clinical phase 1 study, investigating CAN10 in healthy volunteers and psoriasis patients, is ongoing. Up to 80 subjects may be included in the trial. Good safety is shown at the completed dose levels, and additional data from the trial are expected continuously during 2024 and 2025.

Attachments
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