

Revolutionizing Treatment of Chronic Diseases

Brett Baker

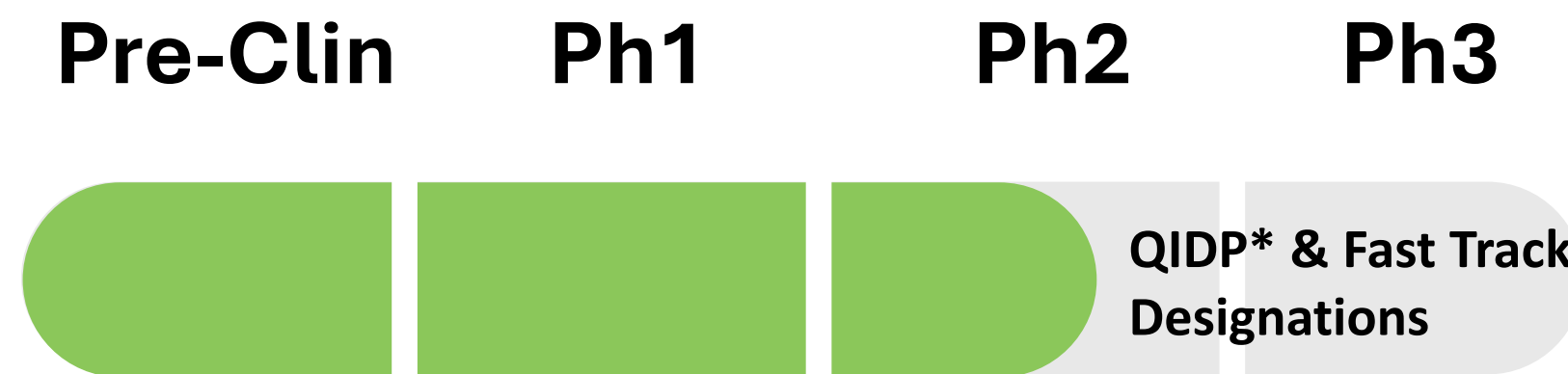
Founder and Chief Innovation Officer



Company Pipeline

Topical Pravibismane for Diabetic Foot Infections (DFI)

Moderate Diabetic Foot Ulcer infections



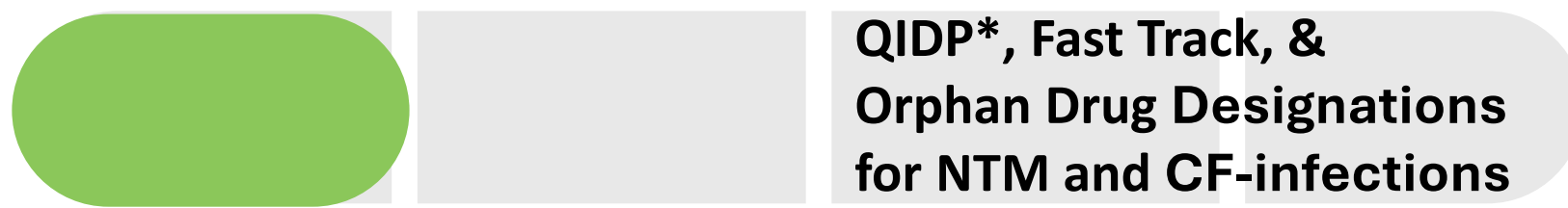
Local Pravibismane for Orthopedic Infections

Orthopedic device-related infections



Inhaled Pravibismane for Lung Diseases

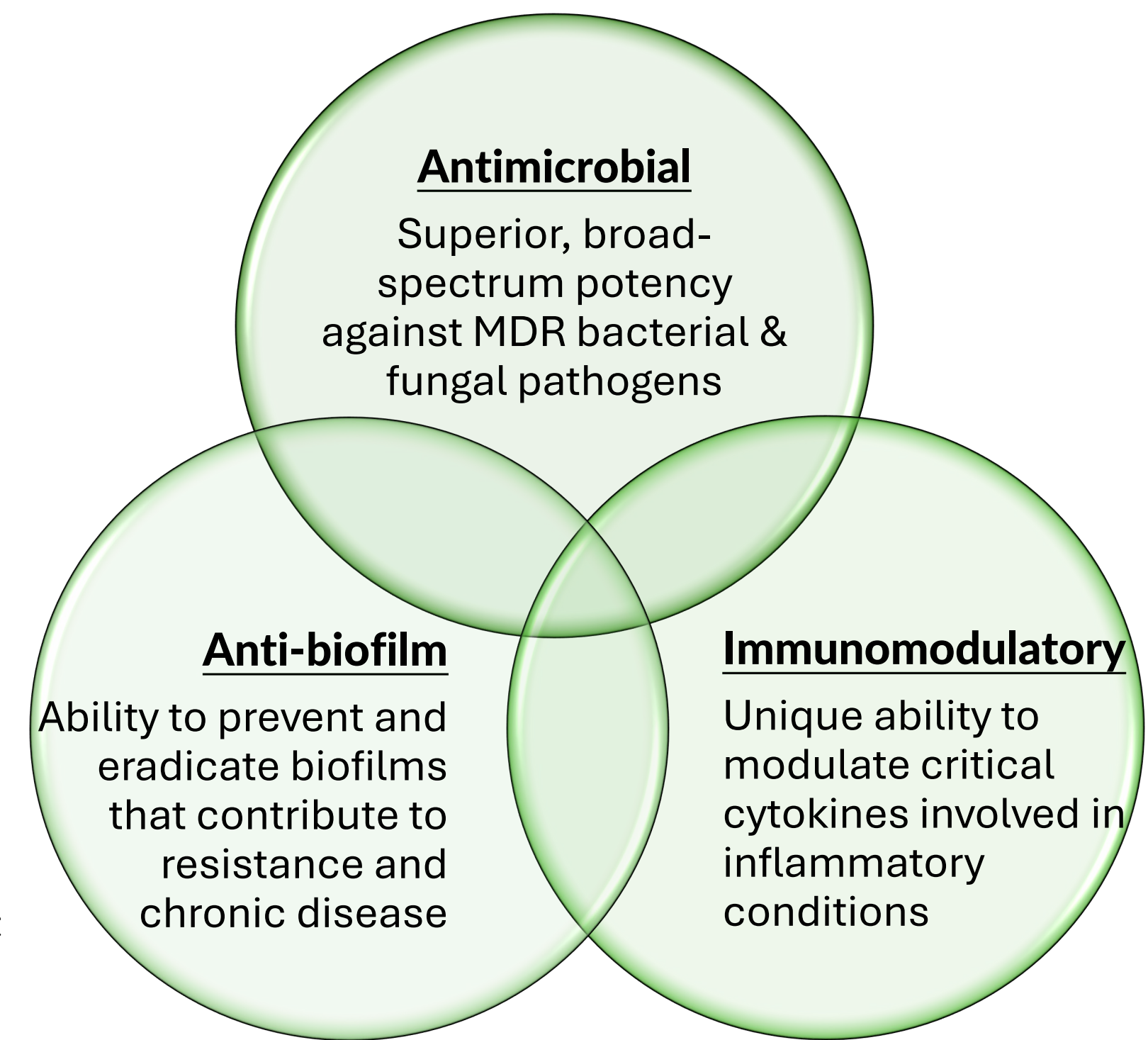
NTM-, CF-related lung infections, inflammatory lung disease



Topical pravibismane well tolerated in >325 subjects

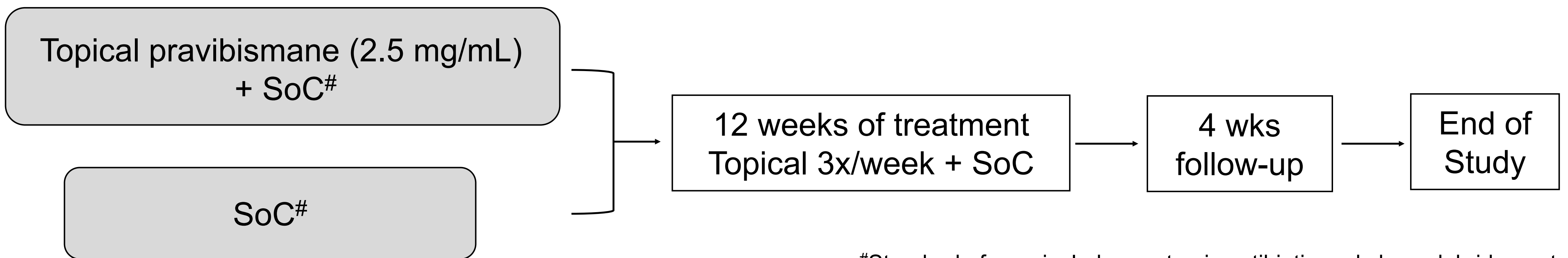
*QIDP – Qualified Infectious Disease Product

Pravibismane synergistic activities



SAFETY OF TOPICAL PRAVIBISMANE IN DIABETIC FOOT ULCER INFECTIONS (PHASE 2A)

- The primary objective of the randomized, open label, controlled, multi-center Phase 2 study is to assess safety and tolerability, and secondarily efficacy of topical pravibismane to treat DFI
- Microbion completed enrollment of subjects; data analysis ongoing



#Standard of care includes systemic antibiotic and sharp debridement

ADVANTAGES OF TOPICAL PRAVIBISMANE FOR WOUND CARE IN WARFIGHTERS

- Topical pravibismane may address the military health concern in the **treatment of antibiotic-resistant, biofilm-forming infections in open injuries** contaminated with environmental materials
- Pravibismane has the potential to:
 - ✓ improve the rates of wound closure and resolution of infection
 - ✓ prevent and treat bacterial biofilm formation
 - ✓ reduce the rate of infection-related amputations
 - ✓ prevent extended courses of systemic antibiotic treatment
- No refrigeration required**, means topical pravibismane can be a part of the medical field kits and could be continued in a hospital setting

SAFETY OF TOPICAL PRAVIBISMANE IN DIABETIC FOOT ULCER INFECTIONS (PHASE 1B)



Reduction in wound size in subject treated with 7.5 µg/cm² pravibismane

- Pravibismane was **safe and well-tolerated** at all doses tested
- Pravibismane treated subjects exhibited **~3-fold reduction in wound size** compared to placebo (85% vs 30%) and **~6-fold lower incidence of ulcer-related limb amputations** (2.6% vs 15.4%)*

* study was not powered to demonstrate statistical significance



Scan to view published study

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