

Thanks to a completely new patented therapeutic approach

From Osteoarthritis





Back to a happy & fulfilled live







Large unmet medical need to inhibit bone loss and joint pain

- Affected 57 million in Europe and 650 million people worldwide
- associated with chronic pain and bone loss
- every second women and every third men >65 years of age

No curative treatment/Disease-Modifying-OA-Drug (DMOAD) available



Foto: Fotolia/Sebastian Kaulitzk

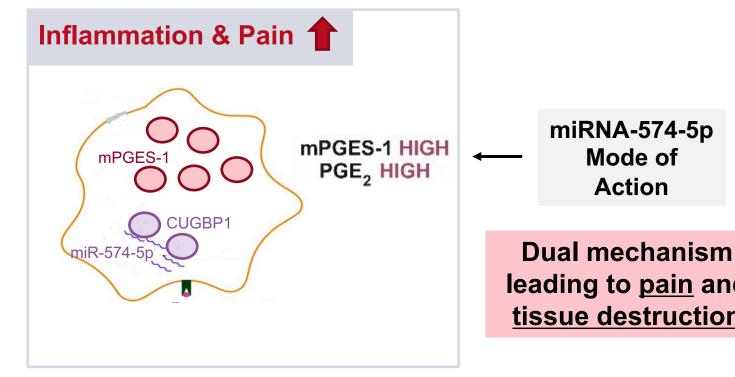




Osteoclast

3

miRNA-574-5p is an ideal target for pharmacological intervention in the treatment of OA



leading to pain and tissue destruction Osteoclast differentiation HIGH Bone resorption HIGH PGE₂: Prostaglandin E₂, mPGES-1: microsomal prostaglandin E synthase 2; CUGBP1: CUG RNA binding protein 1; TLR: toll like receptor

Saul et al., FASEB J (2019); Emmerich et al., Front Pharmacol (2020); Hegewald et al., Front Immunol (2020)

CURNOVA

Bone resorption 1

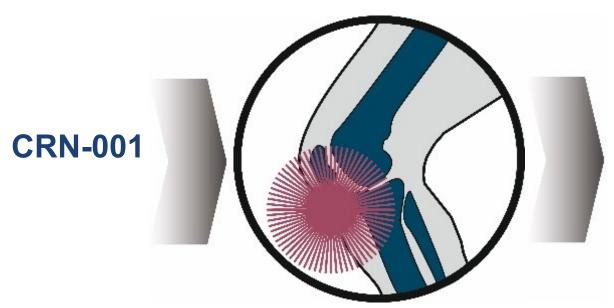
↓ TLR7

interacts with TLR 7/8

THE SOLUTION: OUR NEW APPROACH



The miRNA-574-5p inhibitor CRN-001 has potential as first in class OA disease modifier



Unique value proposition: Fast track approval

Preserves joint function

> Bone Resorption

Inhibits inflammation and pain



Improves quality of life!





Patented drug design for intra-articular application



Patient benefit

CELL PENETRATING PEPTIDE

(CPP)

PEPTIDE NUCLEIC ACID
(PNA)



- Increases PNA solubility
- Efficient membrane permeation
- Cartilage-penetrating
- Long residence time in joint space

- Directly reaches the site of action
- Long-lasting effect
- Improves quality of life

- Highly sequence specific
- Nuclease and protease resistant
- Long half-life

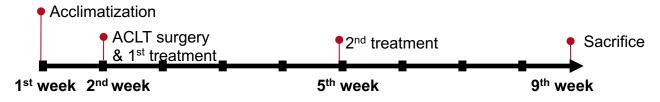
- Less side effects
- Fewer injections (once quarterly)
- Functional improvement

CRN-001

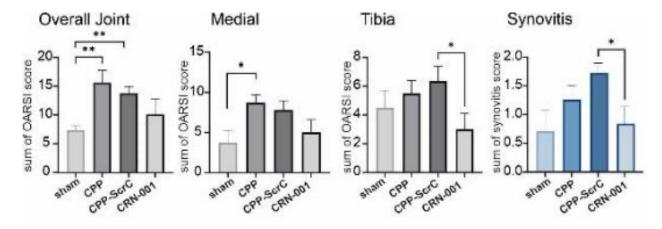


In-vivo proof of concept in a rodent model of OA

In-vivo study in anterior cruciate ligament transection (ACLT) mouse model

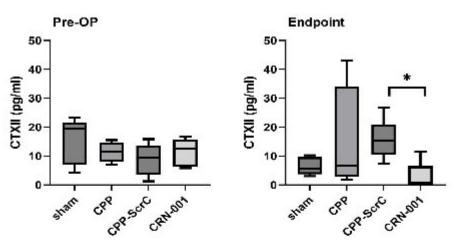


CRN-001 in ACLT mouse model compared with sham-operated, CPP alone, or CPP-coupled to scrambled PNA sequence (CPP-ScrC) treated mice (4 nmol per injection).



→ OA progression and synovitis is significantly reduced by CRN-001 (histology analysis)

CTXII measurement in blood samples from in vivo study



- → Cartilage degeneration significantly reduced by CRN-001 (CTXII = cartilage degeneration marker in blood)
- In vitro: Dose-dependent reduction of osteoclastogenesis
- Low cytotoxicity even at high concentrations

CRN-001



Unique value proposition

TARGET PATIENT POPULATION

Mid-stage OA (KL grade 2-3, moderate to severe pain) primarily affecting one or two joints and no widespread pain

→ Combination of **joint preservation** and **symptom alleviation**

POSITIONING

No comparable therapeutic approach on the market or in development Simultaneously targets two unmet medical needs in OA: Bone resorption and inflammatory pain (structure and symptoms) Possible biomarker-enabled therapy:

- Circulating miRNA 574-5p as potential biomarker for patient stratification and treatment response (target engagement)
- Use of biomarkers to establish target population with a bone OA phenotype

The present innovation is protected by the following **international patent application and patent:**

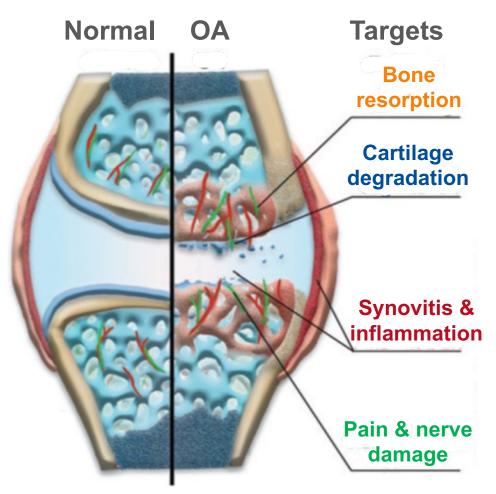
I.) "Inhibition of miR-574-5p as novel therapeutic strategy to reduce bone resorption in arthritis disease" (PCT/EP2020/073023)

II.) "MiRNA-574-5p as a biomarker for stratification of prostaglandin E-dependent tumors" (FH59330EP)

One **further patent application** is in preparation.

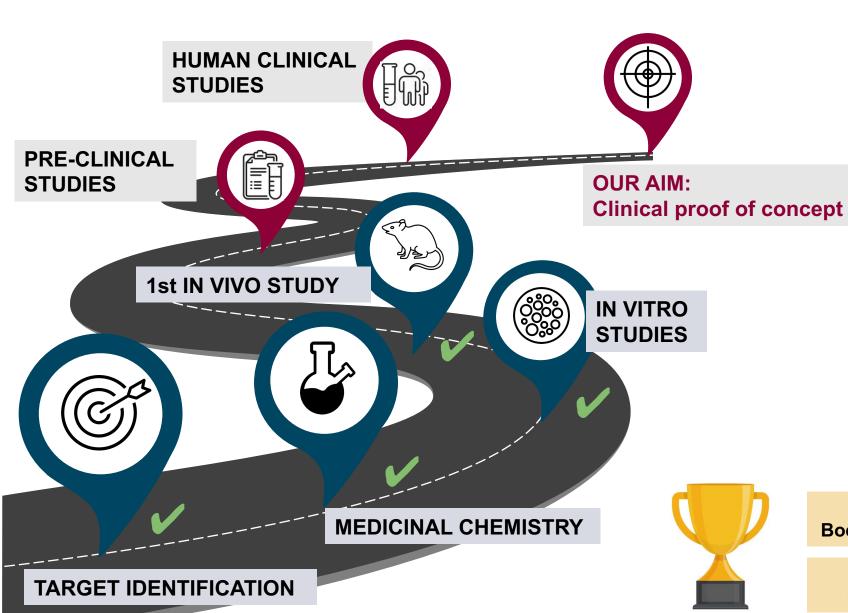
COMPETITORS LART, APPLICATION





	Bone resorption	Synovitis Inflamma- tion	Pain Nerve damage	Cartilage degeneration
Curnova (CRN-001)	(+)1	$(+)^3$	(+) ³	(+)2
Bisphosphonates	(+)	(o)	(o)	(o)
Hyaluronic acid	(o)	(o)	(+/-)	(+/-)
Adavivint (Wnt inhibitor)	(o)	(0)	(o)	(+)
GEC-TGFβ1	(o)	(o)	(o)	(+)
Corticosteroids	(-)	(+)	(+)	(-)
Lorecivivint SM04690	(o)	(0)	(+)	(+)
(+) positive effect	(o) no effe	ct (-)	negative eff	ect

¹ Hegewald et al., Front Immunol (2020); ²Yue et al., Mol Med Rep (2021); ³Saul et al., FASEB J (2019); ³Emmerich et al., Front Pharmacol (2020)





ROAD MAP

Marked development From 800 M - 2,4 Bn / Year

As an IPO or with a joint venture and in cooperation with pharma enterprises

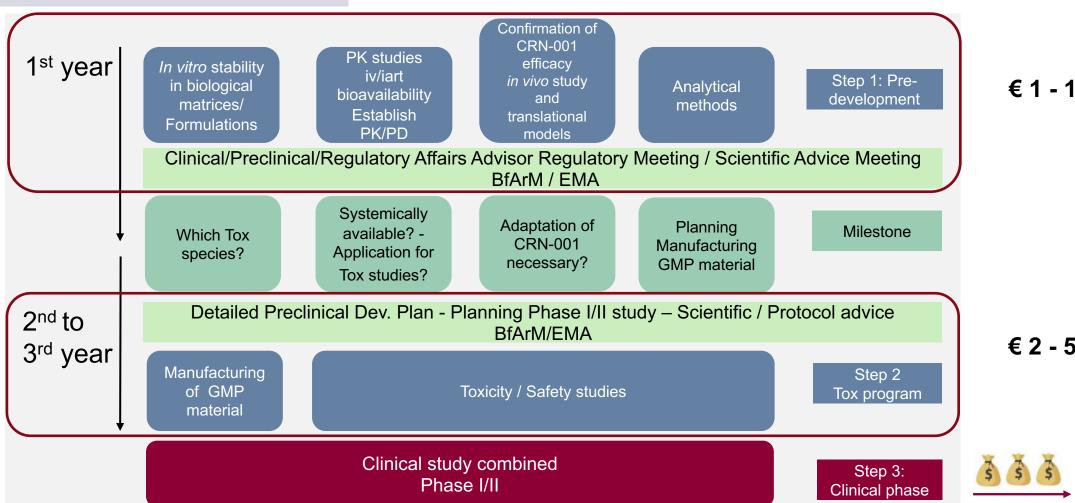
Winner of the Boehringer Ingelheim Innovation Award 2023

Finalist in the Science Start-ups / Falling Walls Venture / Global Call 2023

WORK PLAN



Overview



€ 1 - 1.5 M

€ 2 - 5 M*



Possible IPO or joint venture with Pharma Corporate

^{*}Depending on the results of Step 1 and the discussion with the authorities



ESTIMATION OF MARKET SIZE AND TURNOVER

Total addressable market: >650M patients with OA world-wide

Addressable market: >100M patients with OA in major markets (US, EU, JP)

Serviceable available market: patients with OA pre-dominantly in one or two joints (>20M patients in major markets)

Serviceable obtainable market: Subgroup characterised by high miR-574-5p levels and bone phenotype biomarkers

Projected sales assuming

- 2% share of addressable market: >2M patients
- €100-300 per injection
- 4 injections per year

→ € 800 M-2.4 Bn per year

OUR TEAM



Complementary team of experts in drug development and business management



PD DR. MEIKE SAUL

- Discovered miR-574-5p as a therapeutic target
- Conceived the process of CRN-001 development



DR. DOROTHEE KRONE CEO/CFO

- Expert in business management
- Founding of a start-up and successful merger
- Expert in preclinical/clinical analytics and ADME (ASTA Medica)



PD DR. AIMO KANNT
Scientific Advisor

- Expert in drug research and development (Sanofi)
- Expert in pharma project management



PROF. DR. DIETER STEINHILBER
Scientific Advisor

- Expert in pharmacology
- Identified with Dr. Saul the regulatory mechanism of miR-574-5p on PGE₂ synthesis
- Founding of a start-up and successful exit

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