

November 13, 2025

Capital Markets Update





Welcome

David Augustsson
Head of Communications
and IR, Oncopeptides

Today

09.00 - 09.03 **Welcome**

David Augustsson, Director of IR, Oncopeptides.

09.03-09.20 **Bringing Hope through Science**

Sofia Heigis, CEO, Oncopeptides.

09.20-09.30 **Owner's perspective**

Dr. Björn Odlander, founder and managing partner, HealthCap.

09.30-9.55 **Keynote 1: Multiple myeloma and the unmet medical need**

Prof. Dr. Sebastian Theurich.

9.55-10.01 **From Need to Treatment - A Clinician's Reflection**

Dr. María-Victoria Mateos.

10.01-10.25 **Relapsed, refractory multiple myeloma - clinical experience with Pepaxti - a conversation**

Assoc. Prof. Dr. Claudio Cerchione, Prof. Dr. med. Klaus Fenchel.

10.25-10.35 **BREAK**

10.35-10.44 **Keynote 2: The Japanese Multiple Myeloma landscape**

Prof. Shinsuke Iida.

10.44-10.56 **Keynote 3: The potential of the PDC platform in the U.S.**

Prof. Paul Richardson.

10.56-11.30 **Oncopeptides as an investment case - where do we go from here?**

Sofia Heigis, CEO, Oncopeptides.

11.30-11.45 **Questions and Answers**

11.45-11.50 **Closing remarks**

Sofia Heigis, CEO, Oncopeptides.

NOTE: This slide deck contains Oncopeptides' presentations - for all presentations, please watch the video available on [Oncopeptides.com](https://www.oncopeptides.com)

Disclosures of commercial support

- **Dr. María Victoria Mateos** has served as a consultant for Johnson & Johnson, Amgen, GSK, and Kite. Additionally, she has participated in speaker's bureau activities for Johnson & Johnson, BMS, Amgen, GSK, Sanofi, Pfizer, Oncopeptides, Kite, and Stemline. She has also been a member of scientific advisory boards for Johnson & Johnson, GSK, Sanofi, Pfizer, Oncopeptides, and Stemline.
- **Prof. Paul Richardson** has served on advisory boards and/or as a consultant for Celgene/BMS, Cell Centric, GSK, Karyopharm, Oncopeptides, Regeneron, and Sanofi. Additionally, he has received research support from Oncopeptides and Karyopharm for institutional use only.
- **Assoc. Prof. Dr. Claudio Cerchione** has served as a consultant for Abbvie, Amgen, Astellas, Beigene, BMS, Curis, Glycomimetics, GSK, Immunogen, Janssen, Jazz, Karyopharm, Menarini-Stemline, Oncopeptides, Pfizer, Sanofi, Servier, Skyline DX, and Stemline-Takeda. Additionally, he has participated in speaker's bureau activities for Abbvie, Amgen, Astellas, Beigene, BMS, Curis, Glycomimetics, GSK, Immunogen, Janssen, Jazz, Karyopharm, Menarini-Stemline, Oncopeptides, Pfizer, Sanofi, Servier, Skyline DX, and Stemline-Takeda. He has also been a member of scientific advisory boards for Abbvie, Amgen, Astellas, Beigene, BMS, Curis, Glycomimetics, GSK, Immunogen, Janssen, Jazz, Karyopharm, Menarini-Stemline, Oncopeptides, Pfizer, Sanofi, Servier, Skyline DX, and Stemline-Takeda.
- **Prof. Dr. Sebastian Theurich** has served as a consultant for Amgen, BMS, GSK, Johnson & Johnson, Pfizer, Sanofi, Takeda, Kyowa Kirin, Oncopeptides, and Stemline Menarini. Additionally, honoraria have been received from Amgen, BMS, GSK, Johnson & Johnson, Pfizer, Sanofi, Takeda, Kyowa Kirin, Oncopeptides, and Stemline Menarini.
- **Prof. Shinsuke Iida** has received honoraria from Janssen, Pfizer, Bristol-Myers Squibb, Sanofi, Takeda, Ono, and AstraZeneca. In addition, research grants have been provided by Janssen, Pfizer, Bristol-Myers Squibb, Sanofi, Takeda, Abbvie, Amgen, Daiichi Sankyo, Novartis, Shionogi, and Chugai.
- **Prof. Dr. med. Klaus Fenchel**, has served as an advisor or consultant for Janssen, AstraZeneca, Bristol Myer Squibb, Pierre Fabre, Kedrion, Daiichi Sankyo, Lilly, Pfizer, and Clovis Oncology. They have also received research grants for institutional use from Anwerina, AstraZeneca, Lilly, Pierre Fabre, and Zentiva.

Disclosures

- The scientific experts (Key Opinion Leaders, KOLs) featured in this presentation are independent medical professionals who have been engaged to provide their scientific insights and expert opinions.
- The views expressed by the experts are their own and do not necessarily represent the views, positions, or policies of Oncopeptides.
- The experts have received compensation for their time and contribution in compliance with applicable laws, regulations, and industry codes of conduct.
- Today's presentations are intended solely for informational purposes. It may contain forward-looking statements and should not be construed as investment, legal, or medical advice.

Pepaxti indication

- **Melflufen** is indicated, in combination with dexamethasone, for the treatment of adult patients with multiple myeloma who have received **at least three prior lines of therapies**, whose disease is **refractory to at least one proteasome inhibitor, one immunomodulatory agent, and one anti-CD38 monoclonal antibody**, and who have demonstrated disease progression on or after the last therapy.
- **For patients with a prior autologous stem cell transplantation, the time to progression should be at least 3 years from transplantation.**





Session One

Bringing hope through science

Sofia Heigis

CEO, Oncopeptides

Purpose of today



Get external
perspectives on our
business

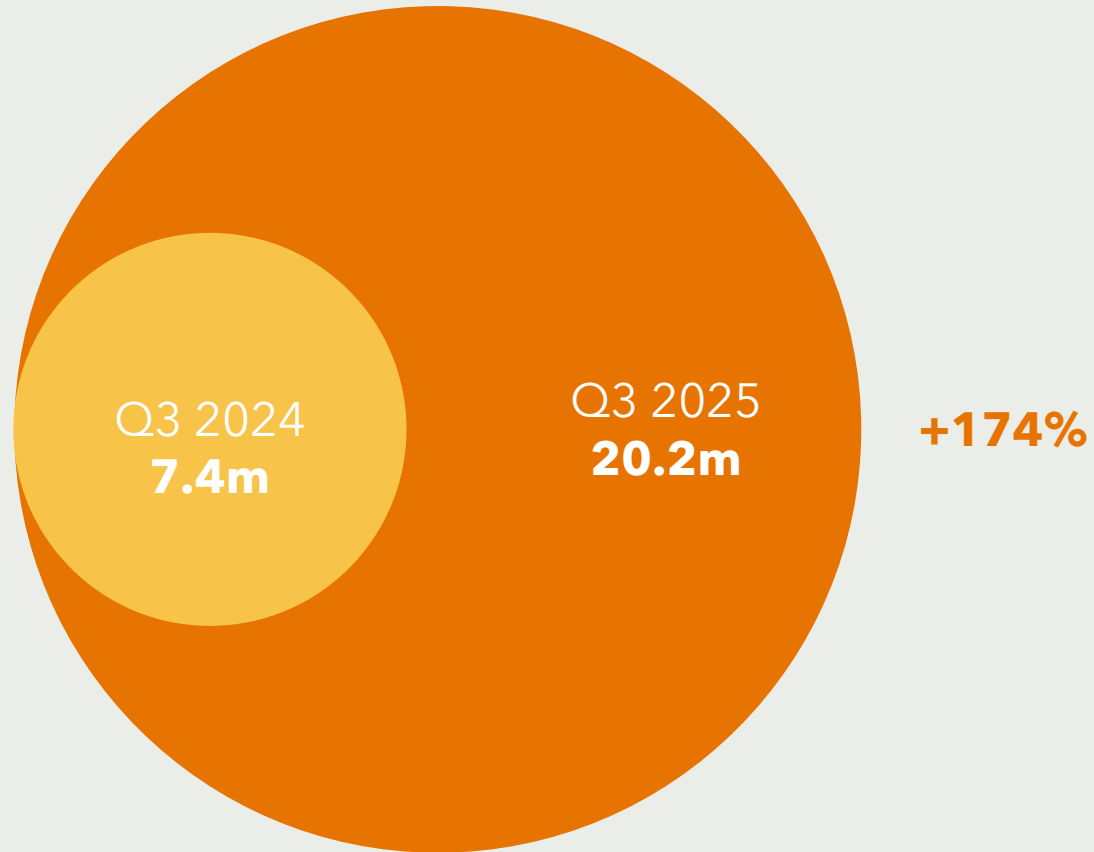


Enhance
understanding of our
core business

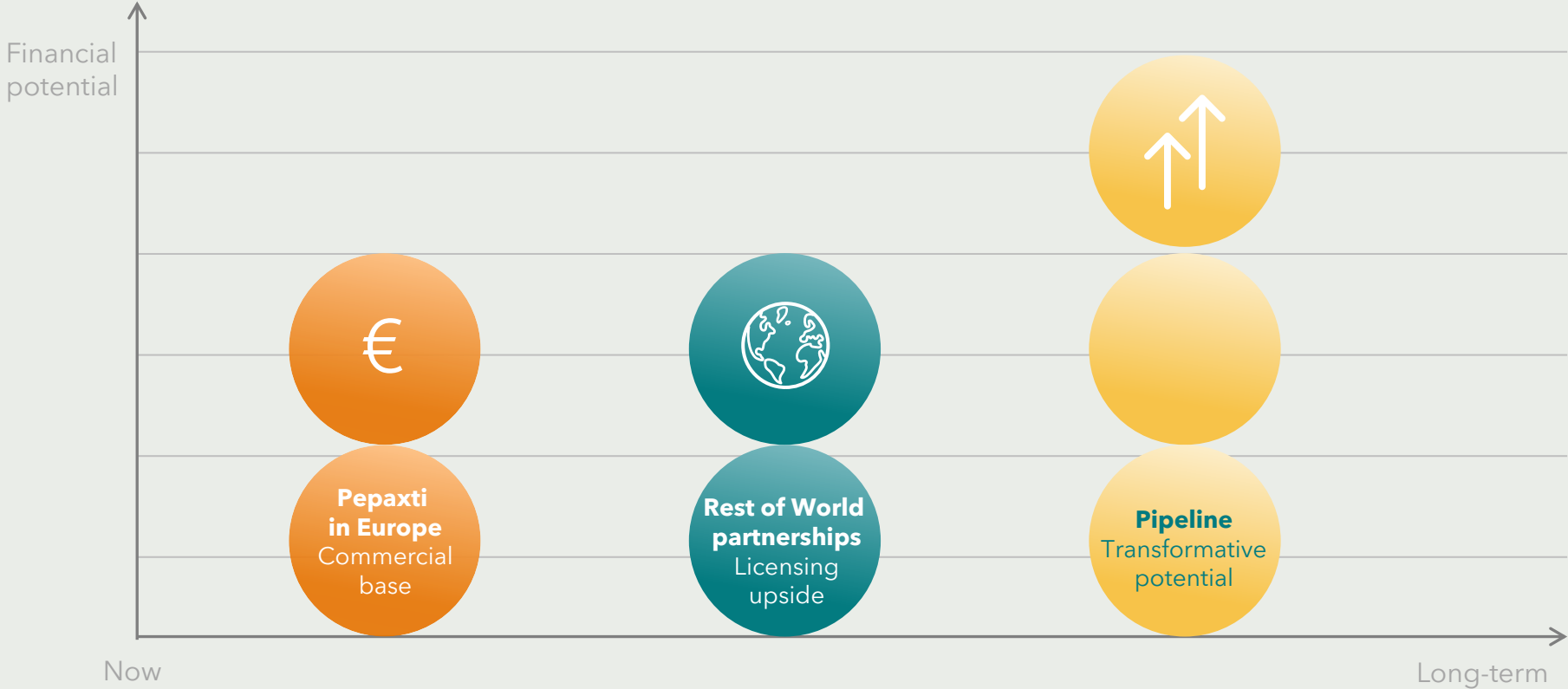


Increase knowledge of
the opportunities in
our pipeline

Where we are right now

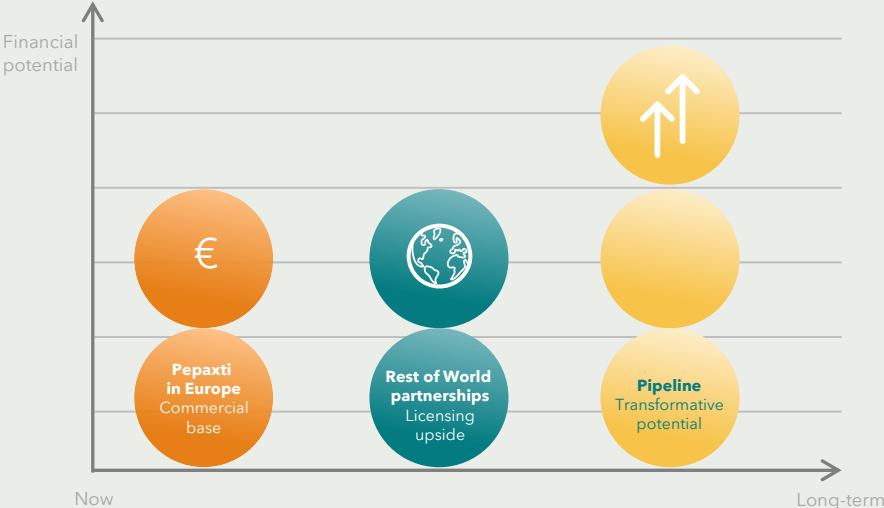


Our potential



A global biotech with a marketed product, expanding indications, and a proprietary platform unlocking future therapies

Our potential



A global biotech with a marketed product, expanding indications, and a proprietary platform unlocking future therapies

A woman with dark hair pulled back, wearing glasses and a light blue t-shirt, is shown from the chest up, smiling and looking to the right. She is seated in a wheelchair, with the black handle visible. The image is framed by a large, semi-transparent circular graphic that is split vertically. The left half of the circle shows the woman, while the right half is a blurred, darker version of the same scene. The text "European commercialization" is overlaid on the left side of the circle in a white, sans-serif font.

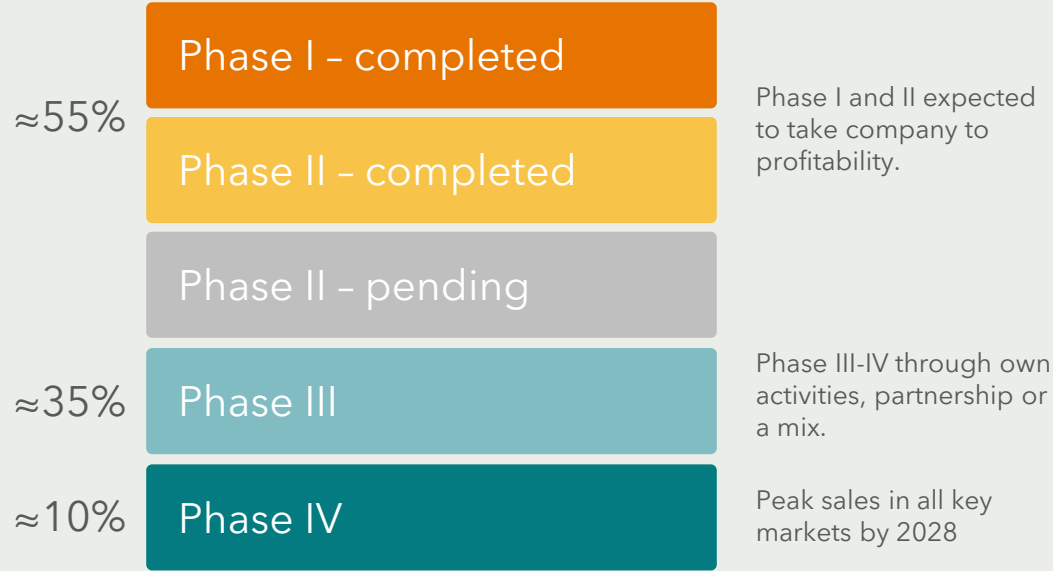
**European
commercialization**



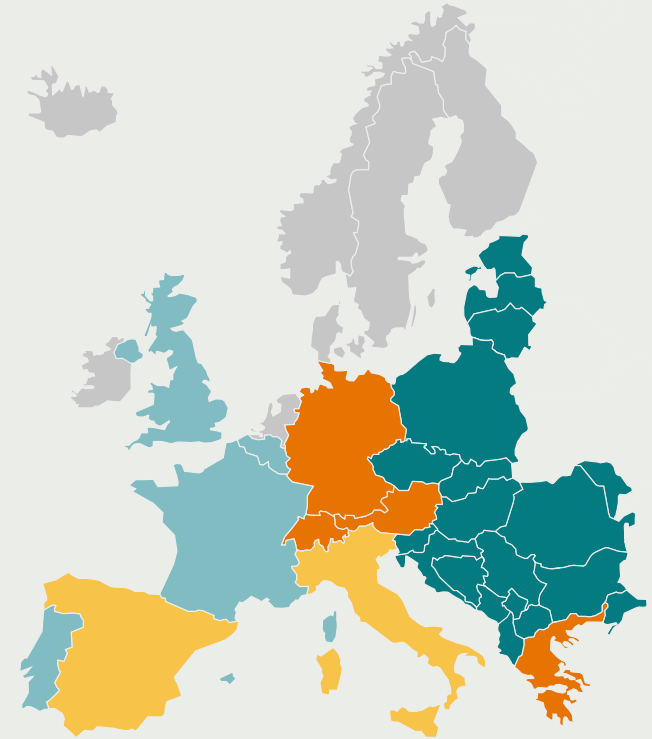
Our ambition:

launch as fast as possible with a price reflecting our innovation - providing patient and shareholder value.

European commercialization



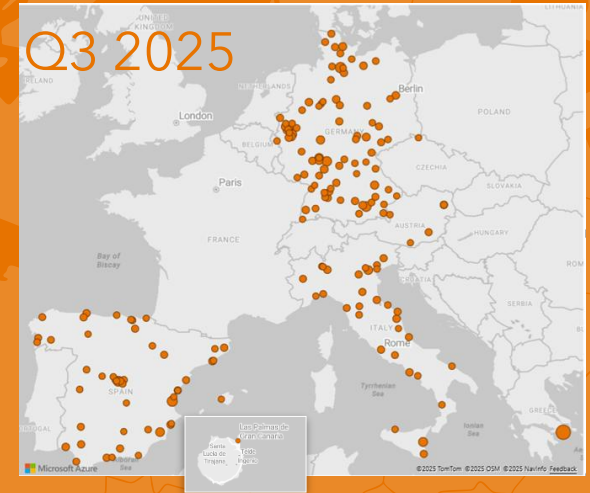
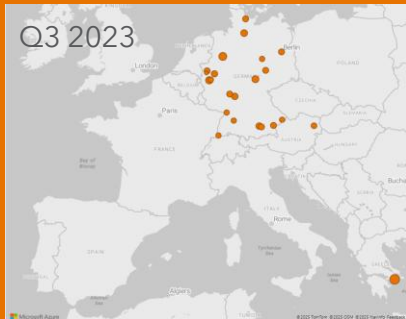
% of market potential per phase out of SEK ≈1.5 billion estimated annual market potential.



Key markets

European commercialization update

Accumulated total sales, by end of quarter.



More than 550* patients treated since EMA approval in 2022

Positive clinical experience triggers RWD publication to support peer-to-peer recommendations.

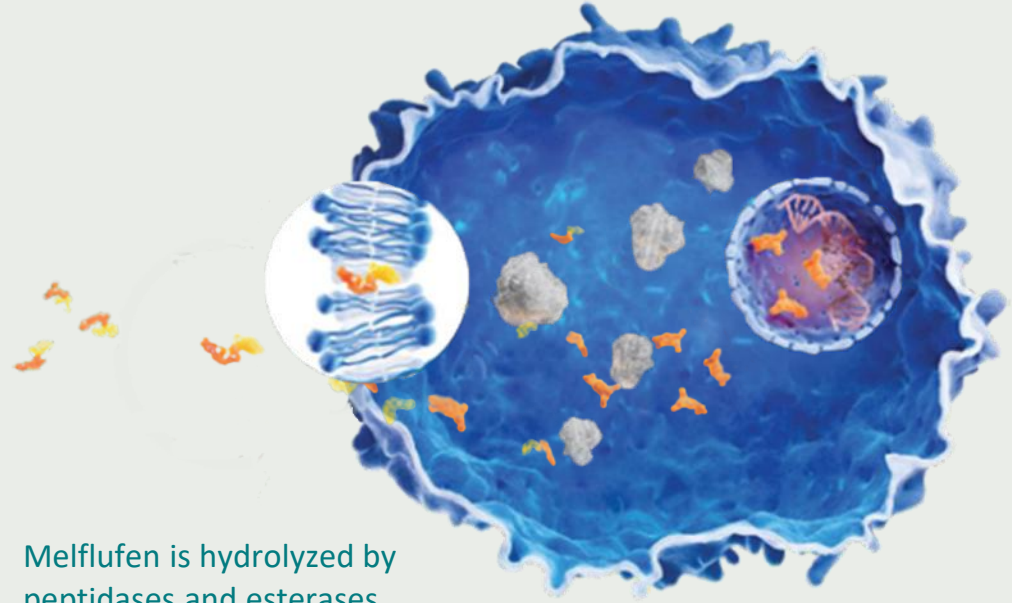
Inclusion in updated EHA/EMN guidelines, in our wanted position with 1B recommendation, is driving awareness, advocacy and clarifying the Pepaxti position which all are key success factors for the launch.

A woman with short red hair and glasses, wearing a green sweater, is painting on a canvas mounted on a wooden easel. She is holding a paintbrush in her right hand and a palette in her left. The scene is set in a bright, indoor environment with a blurred background of plants and a window.

**Our flagship
drug: Pepaxti**

PDC's mode of action provides improved alkylation

Melflufen enters the cell due to its lipophilicity ¹

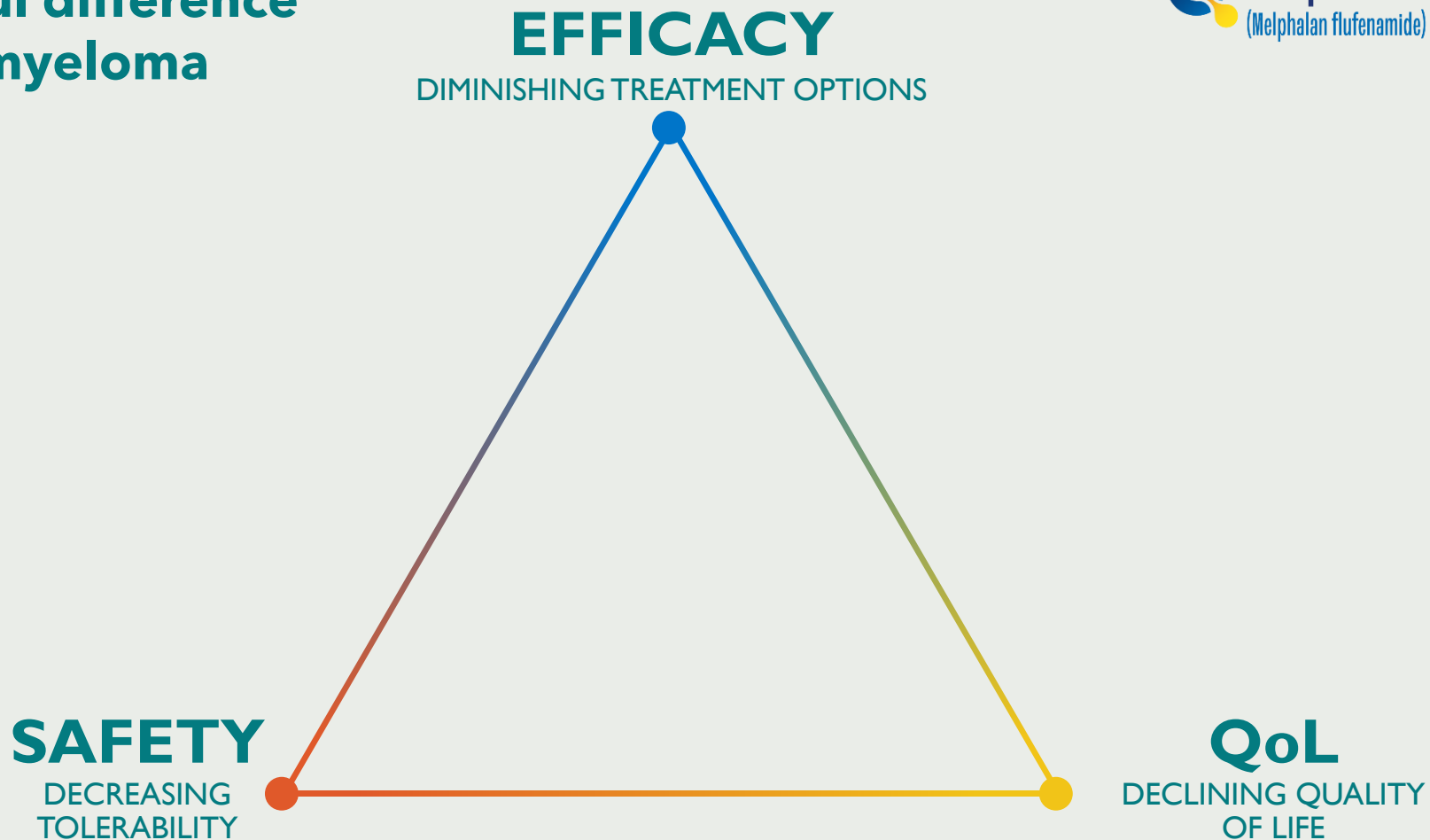


Melflufen is hydrolyzed by peptidases and esterases, releasing the cytotoxic payload^{1,2}

The cytotoxic payload irreversibly damages tumor DNA and induces apoptosis ^{3,4}

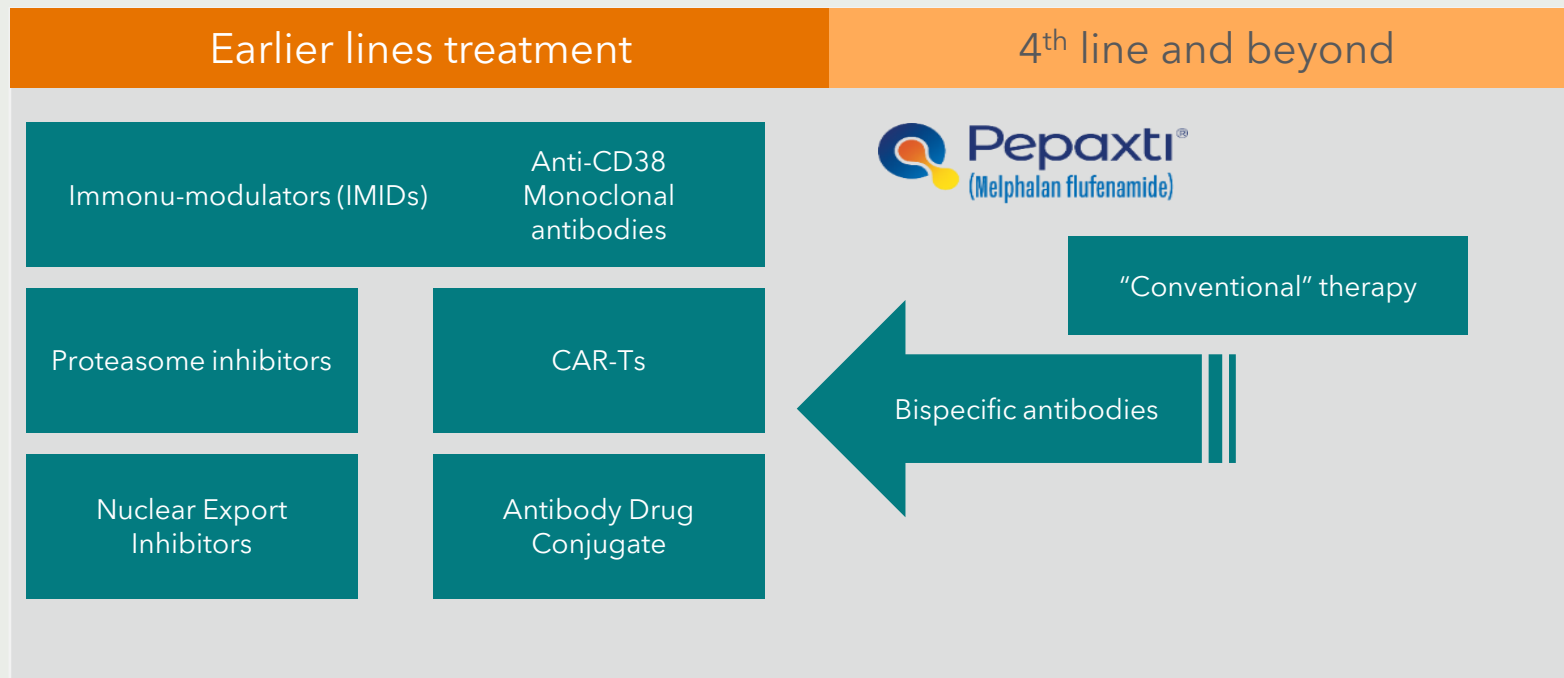
1. Wickström M, et al. *Oncotarget*. 2017;8(39):66641- 66655. doi: 10.18632/oncotarget.18420.
2. Wickström M, et al. *Biochem Pharmacol*. 2010;79(9):1281-1290. doi: 10.1016/j.bcp.2009.12.022.
3. Chauhan D, et al. *Clin Cancer Res*. 2013;19(11):3019-3031. doi: 10.1158/1078-0432.CCR-12-3752.
4. Ray A, et al. *Br J Haematol*. 2016;174(3):397-409. doi: 10.1111/bjh.14065.

A meaningful difference in multiple myeloma



Treatment landscape support

Pepaxti need



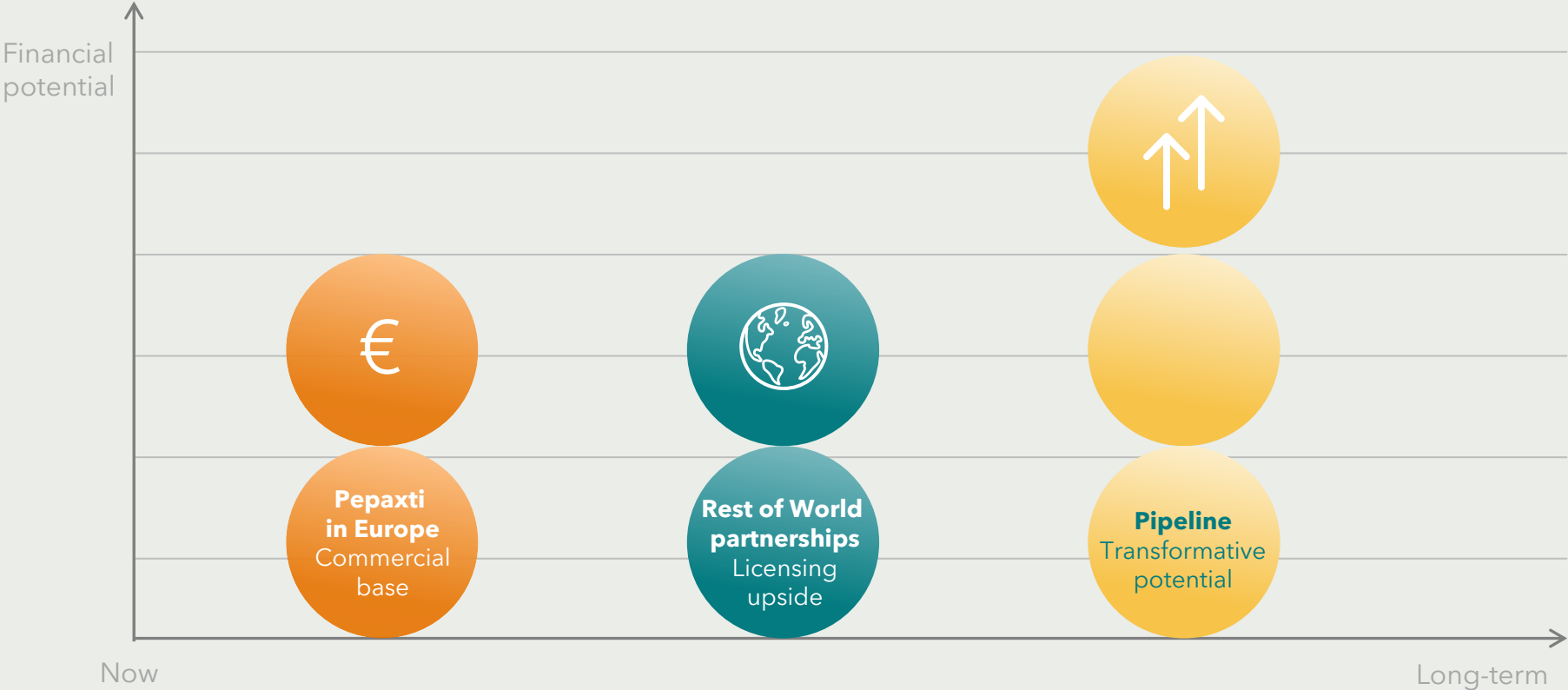


Session Eight

Oncopeptides as an investment case - where do we go from here?

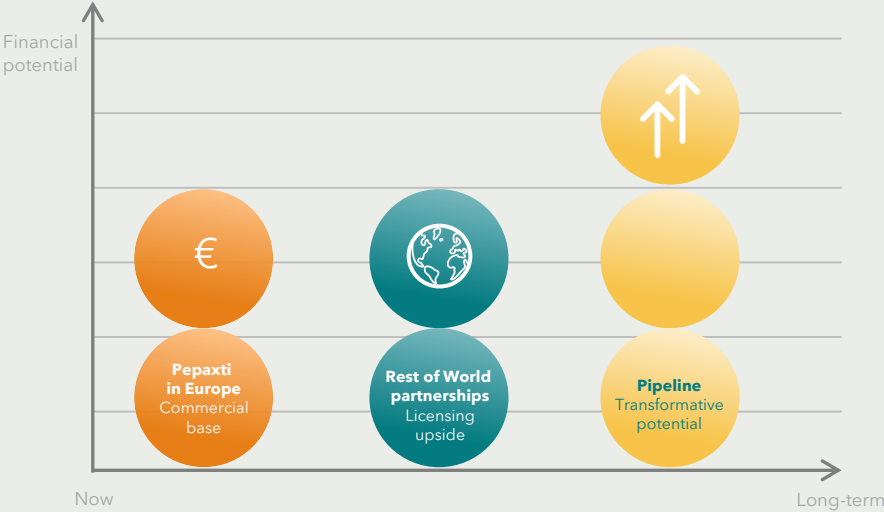
Sofia Heigis
CEO, Oncopeptides

Our potential



A global biotech with a marketed product, expanding indications, and a proprietary platform unlocking future therapies

Our potential

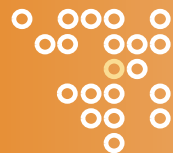


A global biotech with a marketed product, expanding indications, and a proprietary platform unlocking future therapies

Why invest in Oncopeptides?



**Growth
momentum**



**Pepaxti fully
approved
in Europe**



**SEK ≈1.5
billion/year market
potential**



Strategic expansion

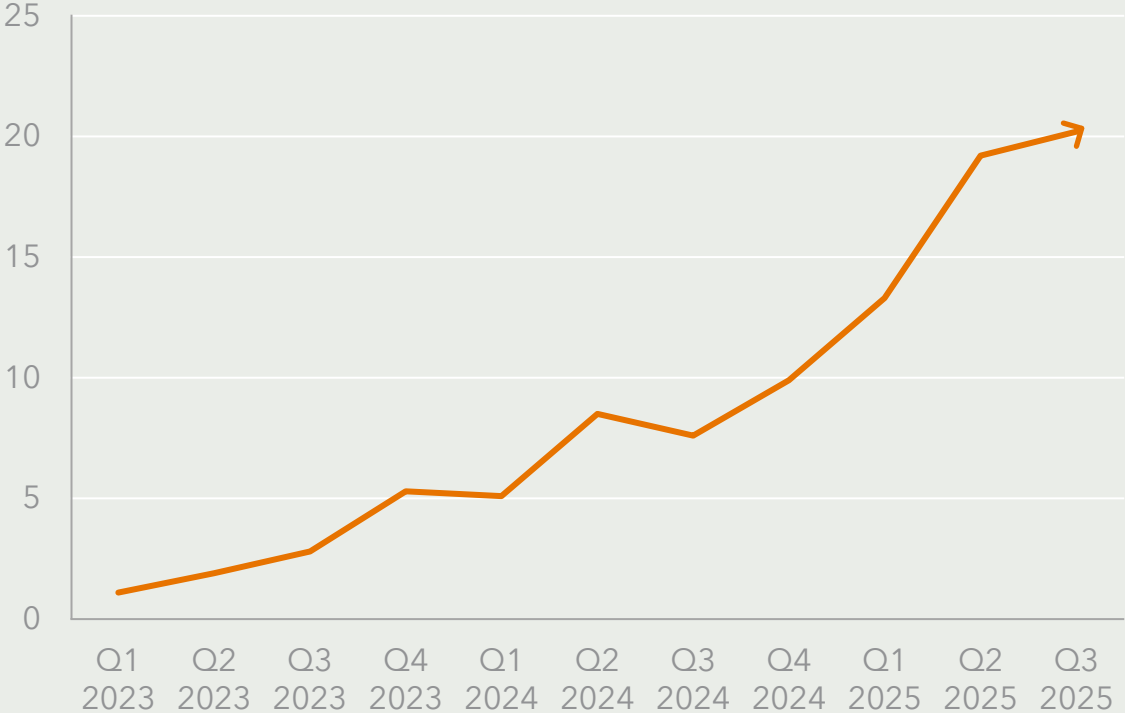


**Pipeline value
drivers**

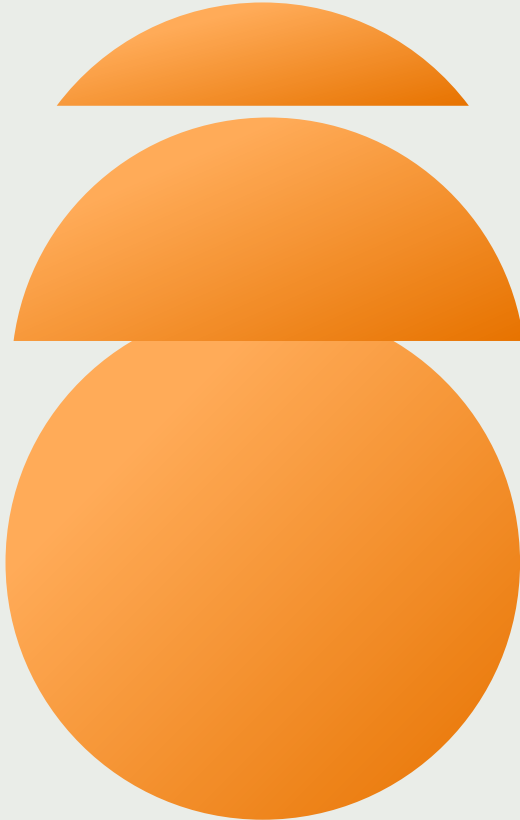


European potential

Drivers of European growth



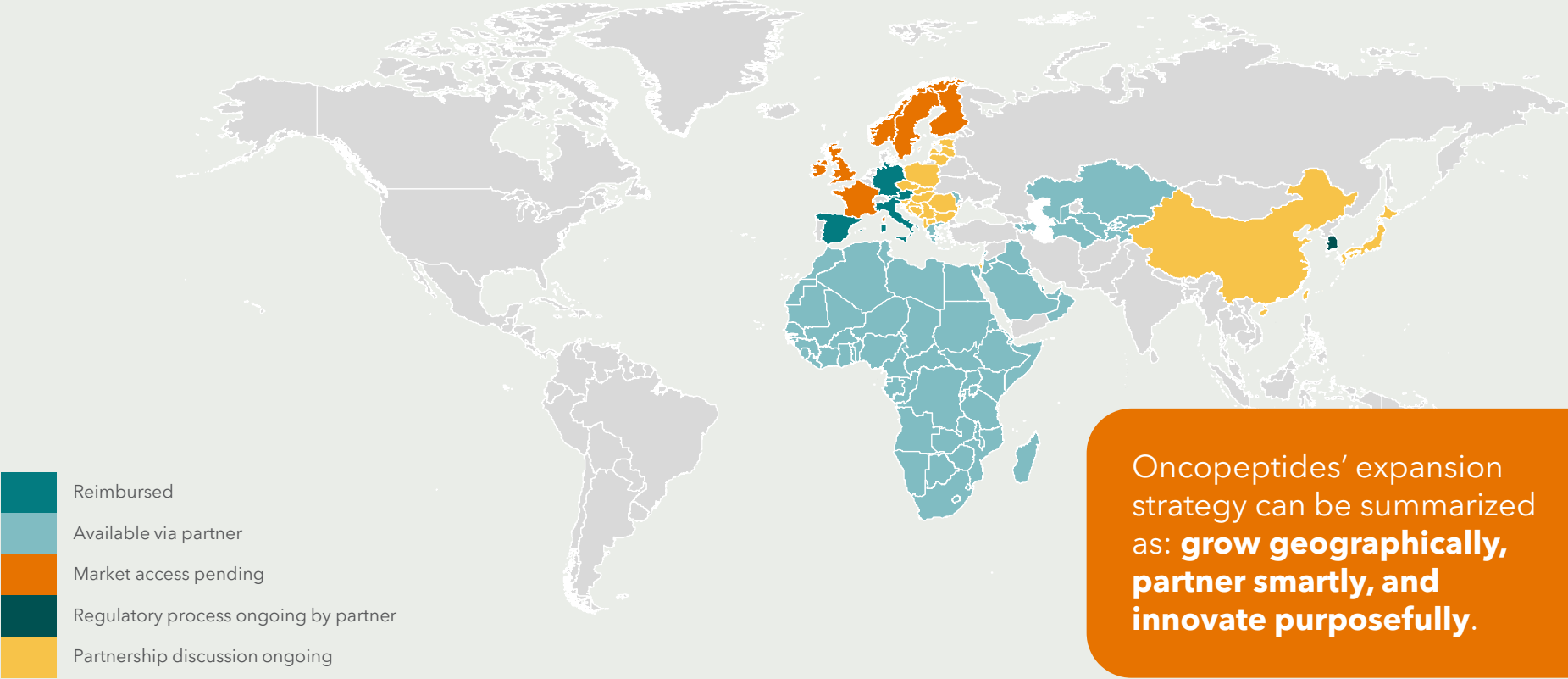
Revenue, European sales, million SEK





Partnerships

Pepaxti commercialization and partnership landscape



Oncopeptides' expansion strategy can be summarized as: **grow geographically, partner smartly, and innovate purposefully.**

Japan partnership potential

**Growing
patient
population**

**Fast market
access**

**Comparable to
German market
potential**

**Favorable
regulatory
landscape**

**High unmet
need in 4L+
setting**



Oncopeptides' pipeline

Pipeline assets



PDC: A global, multi-indication opportunity building onto our existing innovation

SPiKE: A platform with exciting potential globally and in multiple disease areas

Pipeline assets



PDC: A global, multi-indication opportunity building onto our existing innovation

OPD5 - Global opportunity with potential for additional indications.

OPDC3 - Designed for enhanced selectivity, global opportunity with potential in solid tumors.

SPiKE: A platform with exciting potential globally and in multiple disease areas

OPSP1 - A differentiated innovative immunotherapy.

Pipeline assets



PDC: A global, multi-indication opportunity building onto our existing innovation

Next steps:

- Commercial expansion of Pepaxti in Europe and through partnerships elsewhere.
- Find partner to develop OPD5 combination for RRMM.
- Generate pre-clinical data to further inform OPD5 opportunity in glioblastoma.
- Explore OPDC3 partnership options for solid tumors.

SPiKE: A platform with exciting potential globally and in multiple disease areas

Next steps:

- Candidate drug OPSP1 selected. Own R&D continues in parallel with partnership discussions.

What does progress in pre-clinic mean?



Pharmacology & pre-clinical proof of concept.



Pharmacokinetics and Pharmacodynamics



Safety & Toxicology



Chemistry, Manufacturing, and Controls (CMC)

Strategic value:

Preclinical development can **shorten time-to-market** and ensure the **right target populations** of the drug which is a **major competitive advantage**



The PDC platform

The PDC platform



Clinical proof of concept and **complements immunotherapies.**

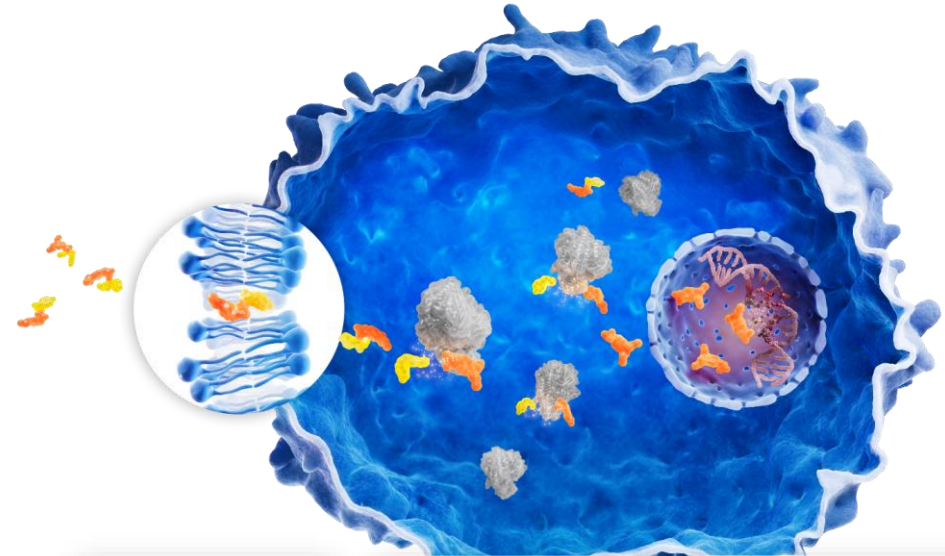
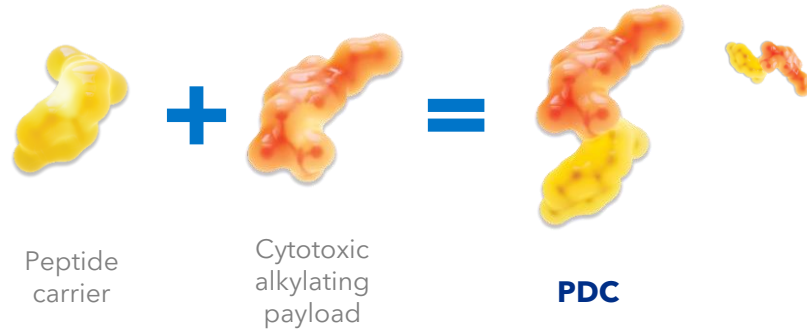


The **only improved alkylator platform** in the market and in development.



Combinable assets with potential for both **hematologic** and **solid tumors.**

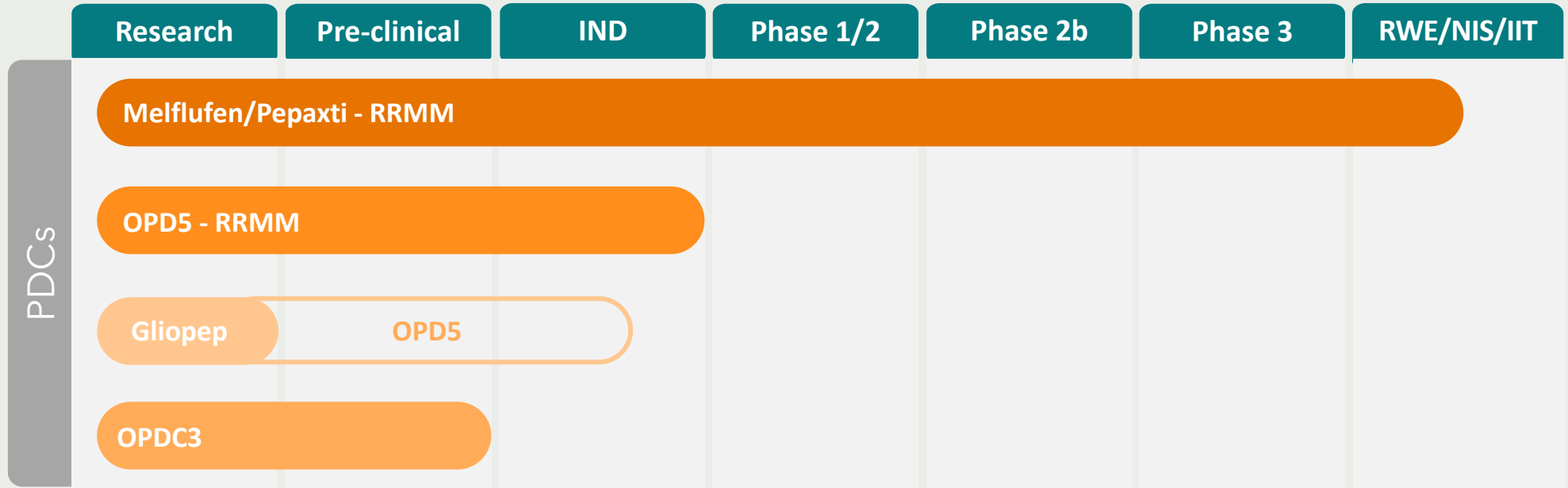
The mode of action of PDCs enhances alkylation by linking a peptide carrier to a cytotoxic payload, resulting in a lipophilic compound



1. Wickström M, et al. *Oncotarget*. 2017;8(39):66641- 66655. 2. Wickström M, et al. *Biochem Pharmacol*. 2010;79(9):1281-1290. 3. Chauhan D, et al. *Clin Cancer Res*. 2013;19(11):3019-3031. 4. Ray A, et al. *Br J Haematol*. 2016;174(3):397-409.

R&D status of the PDC platform pipeline assets

Demonstrates **broad potential**, with evidence indicating that OPD5 may be effective in diseases such as **multiple myeloma, AL amyloidosis** and **glioblastoma**; while OPDC3 shows promise in diseases such as **AML, breast cancer** and **ovarian cancer**



PDC platform: Highlights of OPD5 in RRMM



Global opportunity as a combination PDC



Significantly de-risked asset



Clear regulatory path in U.S.



PDC platform: Highlights of OPDC3



Even more entrapment inside cells than with melflufen



Preclinical data support OPDC3 being highly active in e.g. AML, lymphoma, triple-neg breast and ovarian cancer cells



Combination synergies demonstrated with immunotherapies and cytotoxics



Global opportunity with patent expiry 2042 (without extension)



**Beyond
Multiple
Myeloma**

Beyond MM - Examples of opportunities

● Global Market Value 2024
● Global Market Value 2035

PDC Platform

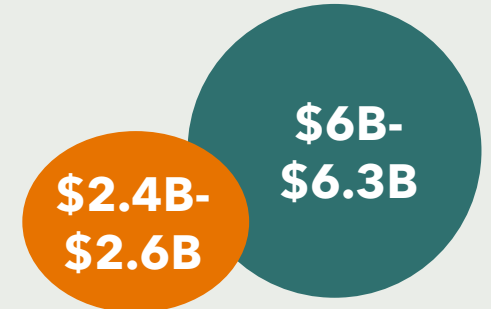
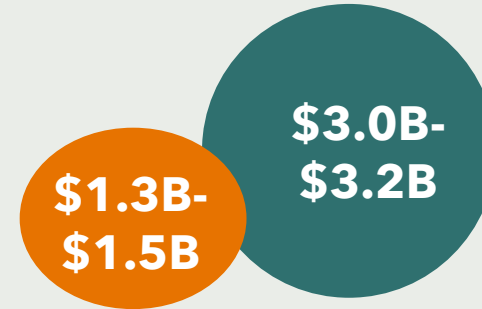
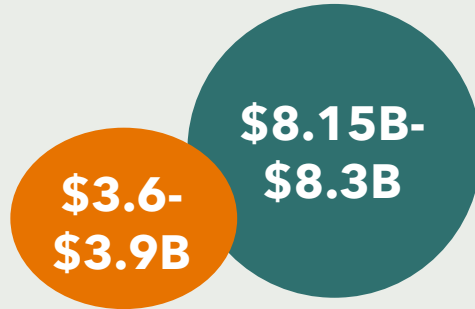
Pepaxti OPD5 OPDC3

Multiple Myeloma

Glioblastoma

CTD-ILD

Lupus Nephritis



OPSP1

SPiKE Platform



Glioblastoma

Glioblastoma: brain tumor with high unmet need & growing market potential

Most aggressive brain cancer – grows fast, invariably relapses, and has no cure.

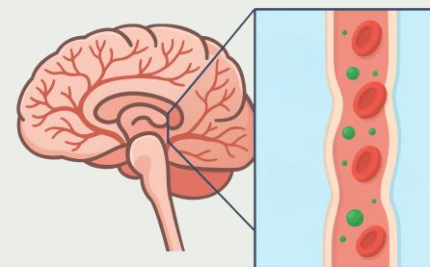
Rare but severe – affects about 2-3 people per 100,000 each year, usually above the age of 60.

Poor survival – even with treatment, patients live only about 12-15 months after diagnosis.

New, brain-penetrating therapies are urgently needed.



Glioblastoma



Blood brain barrier

Glioblastoma: a major unmet need

- new therapies urgently needed

Old treatments still dominate

Few new options

Most drugs can't reach the brain

Short survival

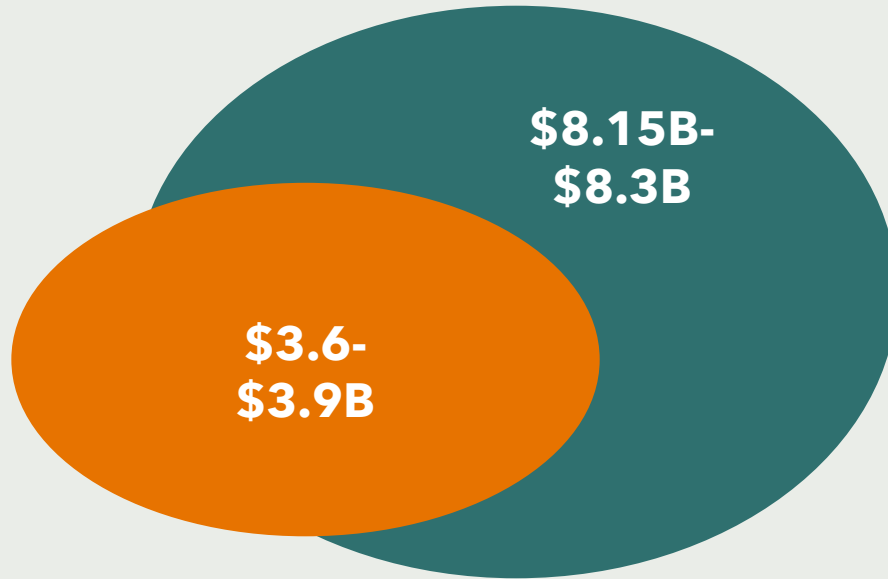
Only some patients respond

Immunotherapy hasn't worked



Glioblastoma market potential

- Global Market Value 2024
- Global Market Value 2035



Fast-to-market opportunity

- High unmet medical need and very modest efficacy of existing therapies
- High probability of an accelerated approval based on single-arm Ph1/2 data in relapsed glioblastoma

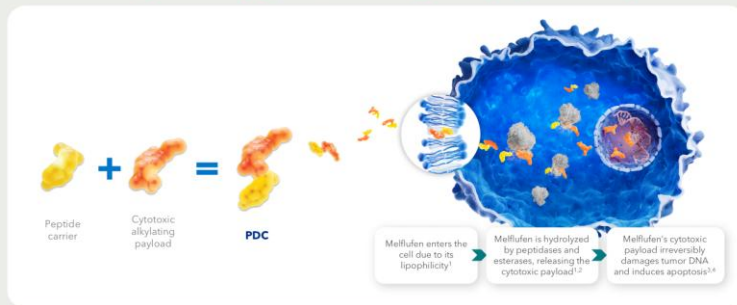
PDCs have potential to help patients with brain tumors, such as glioblastoma

Critical BBB passage confirmed

- OPD5 has shown promising preclinical data
- OPD5 has shown an efficient blood-brain barrier penetration and strong tumor reduction in preclinical models

Reminder:

The mode of action of PDCs enhances alkylation by linking a peptide carrier to a cytotoxic payload, resulting in a lipophilic compound



1. Wickstrom M, et al. Oncotarget. 2017;8(25):44441-44455. 2. Wickstrom M, et al. Biochem Pharmacol. 2015;79(5):1281-1290.
3. Cheah D, et al. Clin Cancer Res. 2013;19(11):3019-3031. 4. Ray A, et al. Br J Haematol. 2016;176(3):397-409.

oncopeptides

Summary: OPD5 in glioblastoma

Very high **unmet need** and **market potential**

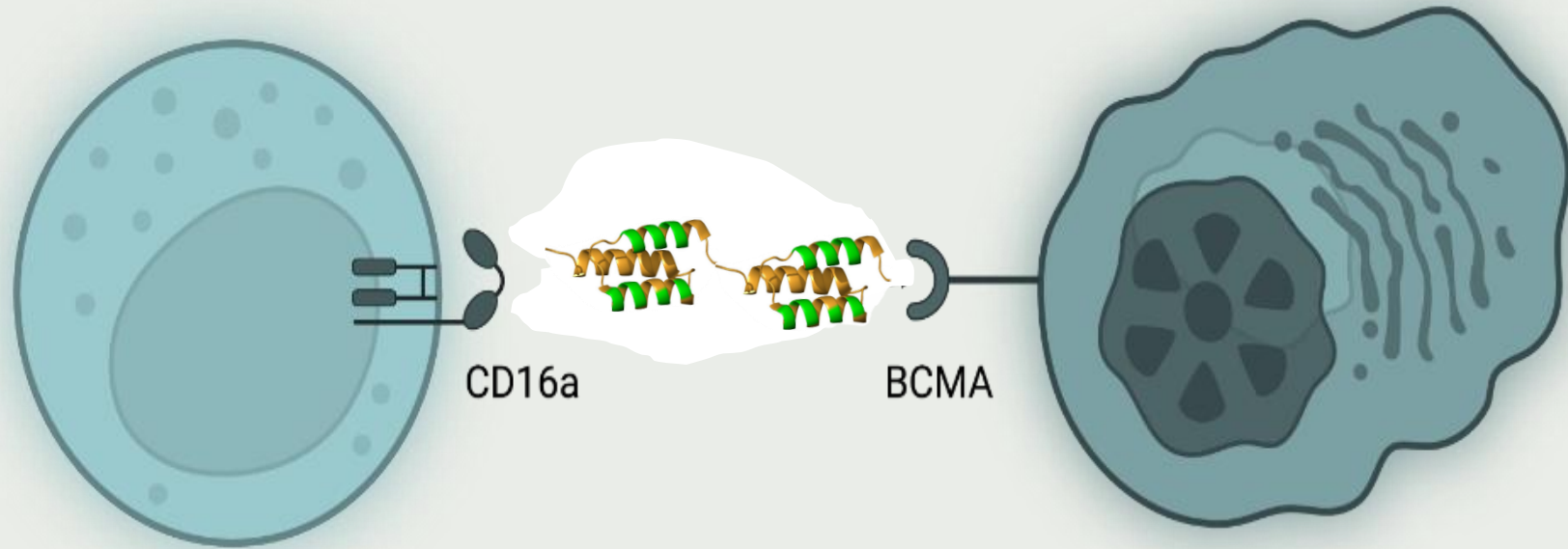
Strong **therapeutic rationale** and **differentiated mode of action**

Potential for **accelerated approval**

A composite image featuring three overlapping circular frames. The leftmost frame shows a gloved hand adjusting a microscope. The middle frame shows a microscope objective lens with technical specifications: 'N 100X/1.25 Oil' and '∞/0.17'. The rightmost frame shows a gloved hand near the microscope. The background is a light, neutral color.

The SPiKE Platform

SPIKEs are small polypeptide based innate killer engagers



Potential for a small NK-cell engager



Activity

Closer binding with potential for higher activity



Tolerability

Less risk for CRS and ICANS compared to T-cell engagers



Tissue Penetration

SPIKEs distribute well into target tissue



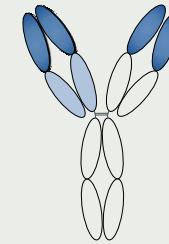
Multiple disease areas

Oncology, Hematology, Immunology

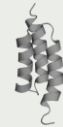


Durability

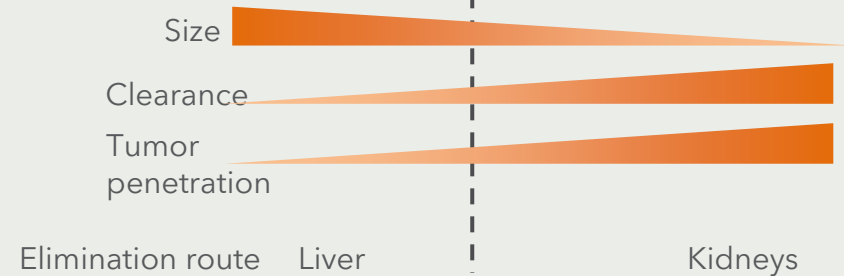
Intermittent dosing ensures retained cytotoxic capability of NK-cells



Antibody



Affibody



A composite image of a scientist in a lab coat and safety glasses, split into three circular segments. The scientist is looking down and to the right. The word "Immunology" is overlaid on the leftmost segment.

Immunology

Autoimmune disease: a significant OPSP1 opportunity

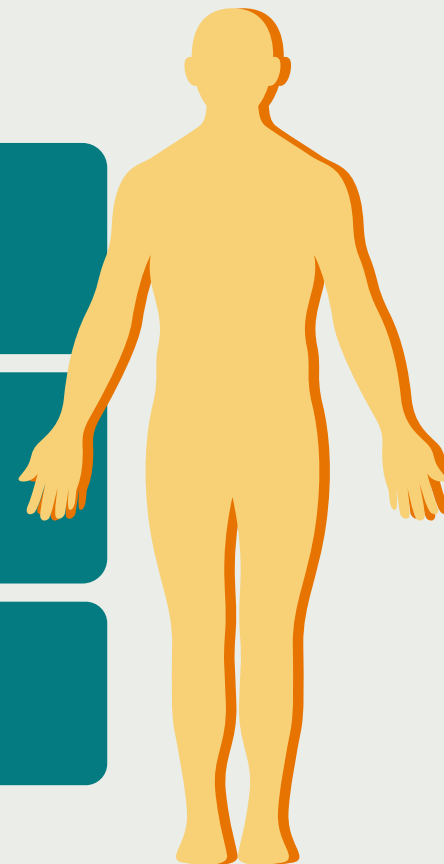
- Autoimmune disease covers a wide range of conditions, many with a high unmet medical need.
- Bispecific engagers developed for treatment of cancer has potential in autoimmune diseases. Effective in clearing self-targeting antibodies (autoantibodies).
- Most competitors focus on CD19/CD20 targets, whereas OPSP1 targets BCMA.
- To target BCMA provides better targeting of antibody producing plasma cells while sparing other B-cells.

Why SPiKEs in autoimmune disease?

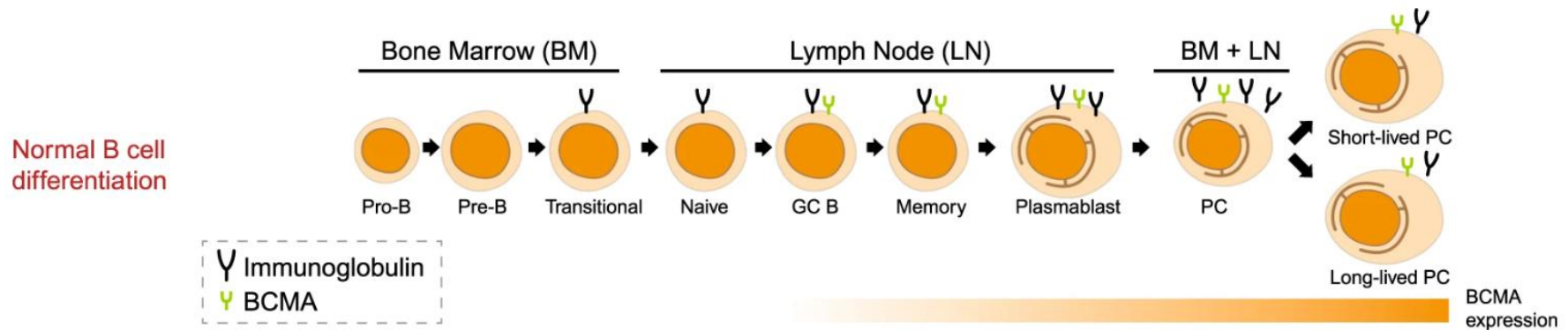
Autoimmune disease is characterized by low short-term mortality but substantial long-term morbidity

Anti-BCMA T-cell engagers are characterized by high levels of immediate activity, high degree of side-effects

Anti-BCMA NK-cell engagers - SPiKE - have the potential to provide an immunotherapy with durable efficacy that is more tolerable which match the characteristics of autoimmune disease



BCMA positive plasma cells are major drivers in autoantibody driven diseases and BCMA directed drugs one of the most promising targets



- Both short- and long-lived plasma cells express BCMA.
- Anti-BCMA will spare the naïve B cell pool that is BCMA negative.
- Systemic Lupus Erythematosus (SLE) with Lupus Nephritis (LN), and autoimmune Connective Tissue Disease with associated Interstitial Lung Disease (CTD-ILD) are two examples of where a BCMA directed immunotherapy could be effective in clearing autoantibodies.

Market potential for two of the potential indications for OPSP-1

Lupus Nephritis

**\$2.4B-
\$2.6B**

**\$6B-
\$6.3B**

- Lupus nephritis (LN) patients suffer from severe and life-threatening manifestations
- Limited efficacy of current treatments

CTD-ILD

**\$1.3B-
\$1.5B**

**\$3.0B-
\$3.2B**

- CTD-ILD is a result of underlying connective tissue disease and leads to varying degrees of irreversible lung damage due to fibrosis, with the potential of respiratory failure
- Lack of targeted therapies

Summary: potential for SPiKEs in autoimmune disease

Large **unmet need**
and **market**
potential

Novel and unique
platform
differentiated from
all other
immunotherapy

Multiple disease
areas and indications

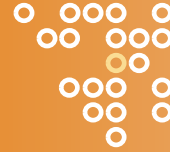


In closing

Why invest in Oncopeptides?



**Growth
momentum**



**Pepaxti fully
approved
in Europe**



**SEK ≈1.5
billion/year market
potential**



Strategic expansion



**Pipeline value
drivers**



Closing remarks

Recap: Purpose of today



Get external
perspectives on our
business



Enhance
understanding of our
core business



Increase knowledge of
the opportunities in
our pipeline



**Bringing hope
through science**

