

November 2019

Nasdaq: VRNA AIM: VRP

www.veronapharma.com

## Forward-looking statements



This presentation contains "forward-looking" statements that are based on the beliefs and assumptions and on information currently available to management of Verona Pharma plc (together with its consolidated subsidiaries, the "Company"). All statements other than statements of historical fact contained in this presentation are forward-looking statements. Forward-looking statements include information concerning the initiation, timing, progress and results of clinical trials of the Company's product candidate, the timing or likelihood of regulatory filings and approvals for of its product candidate, and estimates regarding the Company's expenses, future revenues and future capital requirements. In some cases, you can identify forward-looking statements by terminology such as "may," "will," "should," "expects," "plans," "anticipates," "believes," "estimates," "predicts," "potential" or "continue" or the negative of these terms or other comparable terminology.

Forward-looking statements involve known and unknown risks, uncertainties and other factors that may cause the Company's actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements. These risks, uncertainties and other factors include those under "Risk Factors" in the Company's annual report on Form 20-F filed with the Securities and Exchange Commission (the "SEC") on March 19, 2019, and in its other reports filed with the SEC. Forward-looking statements represent the Company's beliefs and assumptions only as of the date of this presentation. Although the Company believes that the expectations reflected in the forward-looking statements are reasonable, it cannot guarantee future results, levels of activity, performance or achievements. Except as required by law, the Company assumes no obligation to publicly update any forward-looking statements for any reason after the date of this presentation, or to conform any of the forward-looking statements to actual results or to changes in its expectations.

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# Ensifentrine is a first-in-class candidate for respiratory disease



Unique PDE3 and 4 inhibitor for COPD



## **Investment highlights**

- Both bronchodilator and anti-inflammatory activity in single compound;
   well tolerated in >850 subjects
- Phase 2b data for nebulized ensifentrine expected late 2019/early 2020;
   plan to enter Phase 3 in 2020
- Successful Phase 2 study with DPI formulation in 2019
- Phase 2 data for MDI formulation expected Q1 2020
- Experienced management team; successful COPD and asthma developments
- Capitalized to deliver on key clinical milestones; partnering opportunities

Large US COPD market - A very significant commercial opportunity

## **COPD: A silent epidemic**





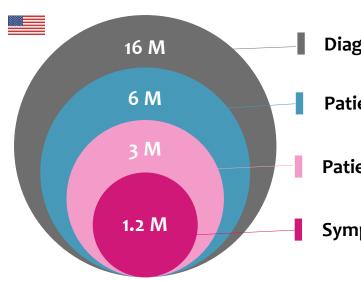
3rd leading cause of death worldwide by 2030 384 million patients worldwide

#### **Breathless**

Millions of patients remain symptomatic despite maximum treatment

## Progressive deterioration

Loss of lung function, leading to hospitalizations and death



Diagnosed in US

**Patients on treatment** 

Patients on dual/triple therapy

Symptomatic patients despite maximum therapy

Cost in US

~\$50 billion/year by 2020 Indirect & direct

## China: Large and growing COPD market



~70 million patients in China (>2x US COPD population)



~7M Treated patients

Forecast to rise to

~16 million treated patients by 2030

Sales partly driven by nebulizer rooms in Tier 1-4 city hospitals

>15,000 established by AstraZeneca

\$2 billion respiratory sales\* - forecast to grow

~40% of sales from nebulized products

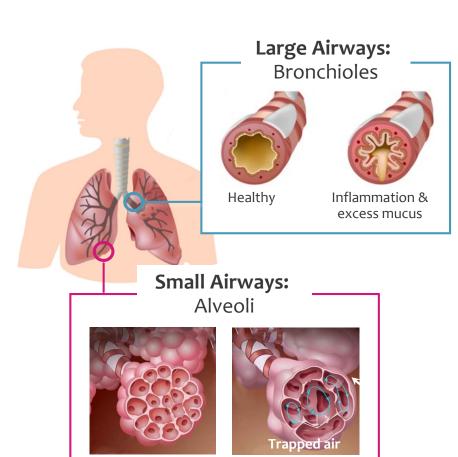
**COPD Maintenance Treatment** 

~30% of physicians report they used nebulized drugs for maintenance

Strategic opportunity for ensifentrine

## COPD: a significant unmet need





Damaged air sacs

Normal air sacs

## **Consequences and symptoms**

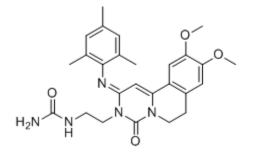
- Debilitating breathlessness
- Coughing, sputum
- Poor lung function
- Fatigue / struggle with daily tasks
- Exacerbations / flare-ups / death

"When I bend over, I can't breathe. I can't unload the dishwasher, or make a bed ... I wake up but I can't move. I am so short of breath."

John Linnell, Living with COPD

# Ensifentrine: first-in-class candidate with dual bronchodilator and anti-inflammatory effects





Ensifentrine impacts 3 key mechanisms in respiratory disease

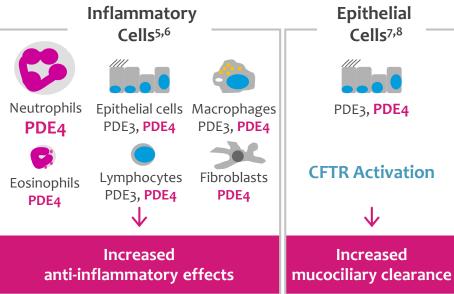
#### Ensifentrine (RPL554): Dual PDE3 and PDE4 enzyme inhibitor









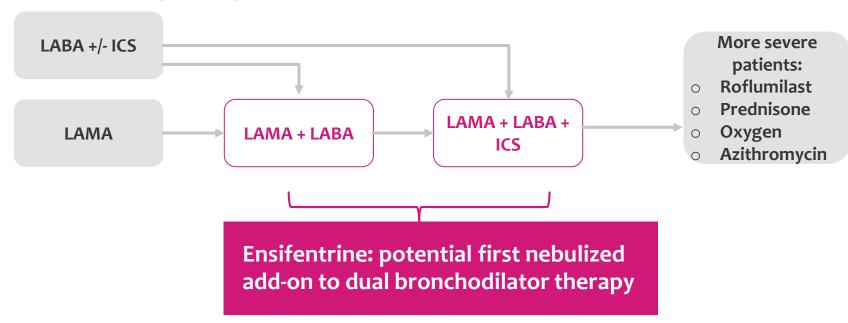


Leads to symptom improvement

# Opportunity for nebulized ensifentrine as add-on for dual/ triple treated patients



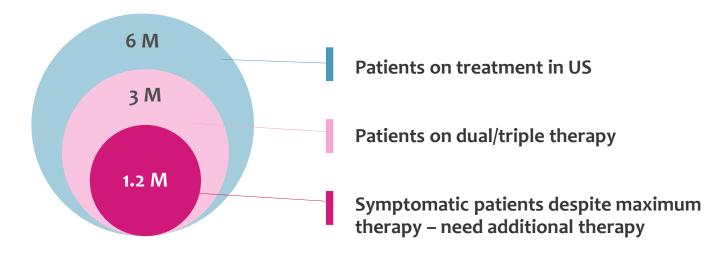
### COPD treatment pathway



~40% of COPD patients on dual/triple therapy are uncontrolled and continue to experience debilitating symptoms of breathlessness and exacerbations<sup>1, 2, 3</sup>

## Compelling US market opportunity for nebulized ensifentrine





Current market data	Potential patient population
About 1/3 of symptomatic patients on maximum therapy use nebulizers	>400,000
Avg. Annual WAC Price of existing nebulized COPD drugs	\$12,000

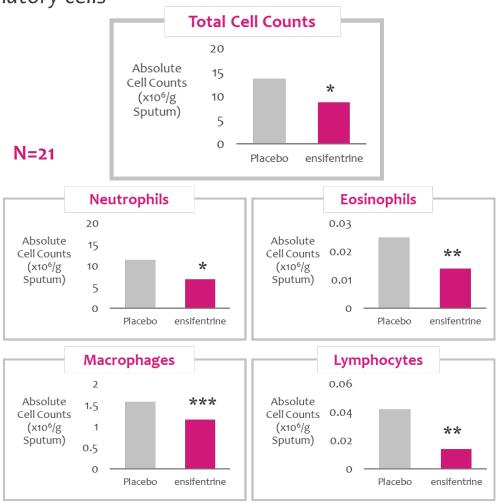
Attractive Medicare Part B Reimbursement

Top-prescribing physicians can be reached with focused salesforce

## 1 week treatment: Significant anti-inflammatory effect



Reduction in inflammatory cells



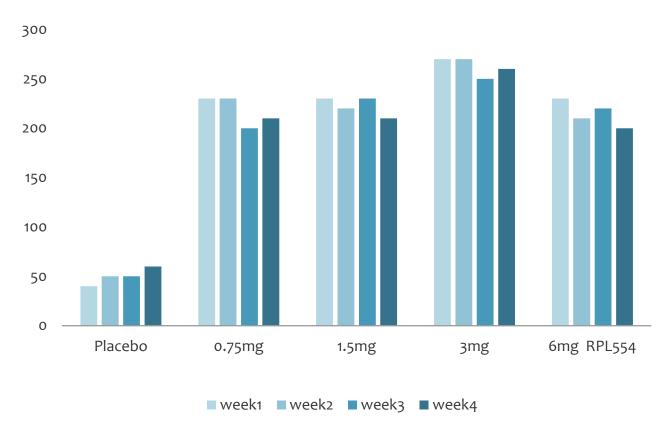
Phase 1 trial in 21 healthy subjects<sup>†</sup>
Cell count in induced sputum \* p= 0.002; \*\* p=0.001; \*\*\*p = 0.044

# 4 week Phase 2b: Rapid, Significant and Clinically Meaningful Bronchodilator Response (N=403)



## **Lung function**

Peak Change  $FEV_1(mL)$ , p<0.001\*



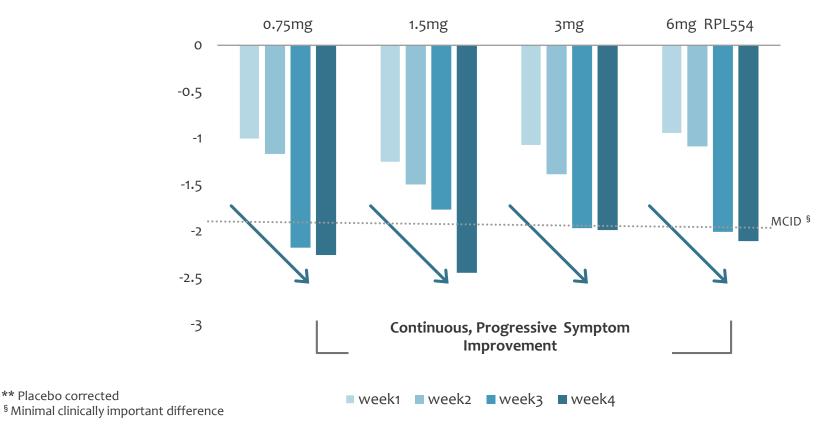
<sup>\*</sup>Peak Change from Day 1 in Baseline in  $FEV_1(mL)$  on Day 28, Week 4, Primary endpoint was met

## 4 Week Phase 2b: Progressive symptom relief



## Symptom relief (N=403)

Total Score E-RS: COPD by Week, p<0.02\*\*



Bronchodilator + anti-inflammatory = Potential to reduce symptoms and exacerbations\*

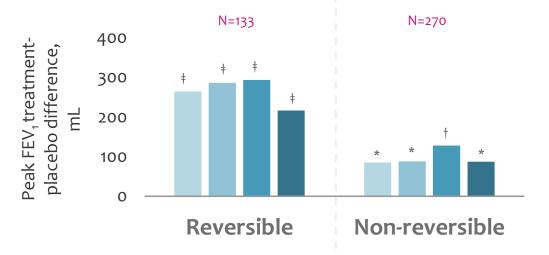
\*\* Placebo corrected

# Effective symptom improvement in both reversible and non-reversible patients with COPD



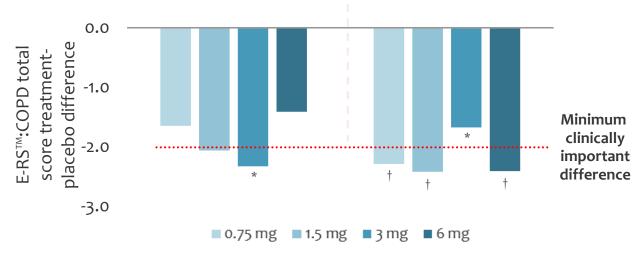
Symptom improvement appears unrelated to magnitude of bronchodilation

Lung function
Peak FEV, at Week 4



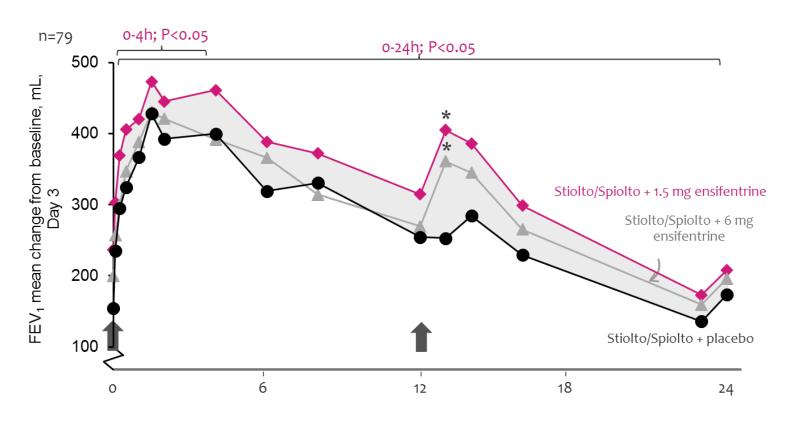
Reversibility defined as pre- to post-salbutamol change in FEV1 at screening of ≥200 mL and ≥12%.

Symptom relief (E-RS™:COPD total score at Week 4)



# 24h lung function improvement as <u>add-on to dual and triple</u> COPD therapy



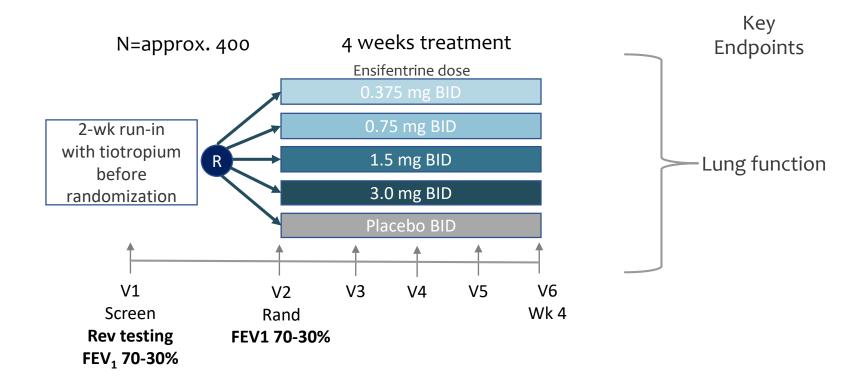


Additional significant bronchodilation throughout 24h Well tolerated

## Ongoing Phase 2b trial to inform Ph3 dose selection



Purpose: Investigate the dose response of ensifentrine in patients with moderate to severe COPD and on tiotropium medication

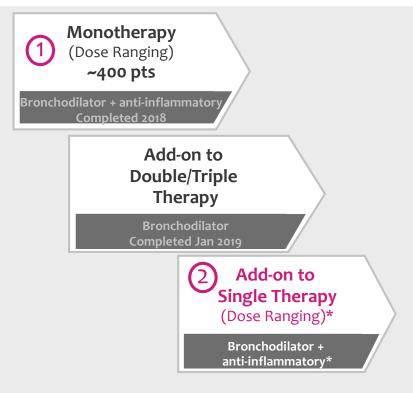


Fully enrolled – data expected around year end

# Nebulized ensifentrine: Plan to enter Phase 3 with differentiated profile



### Phase 2: Establish activity + profile



#### Proposed Phase 3 design and endpoints

A. Regulatory studies:

2 trials of 6 month duration, one with 6 month safety extension

None or single bronchodilator Background 1+2

FEV1 and symptom improvement, explore exacerbations in pooled data

B. <u>Positioning study:</u> Inform physicians and payors

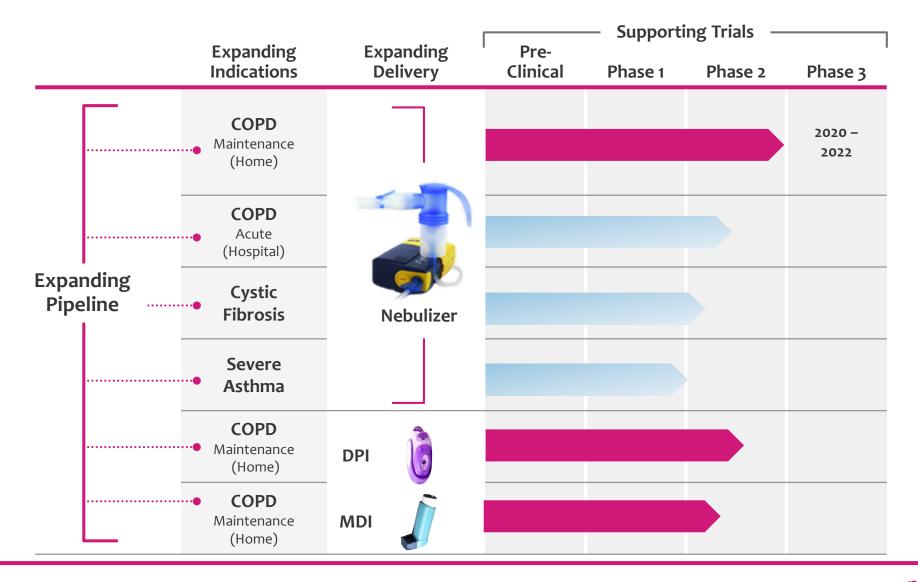
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End of Phase 2 Meeting with FDA, target H1 2020

Add-on treatment to dual bronchodilators

## **Ensifentrine: Pipeline of indications and formulations**

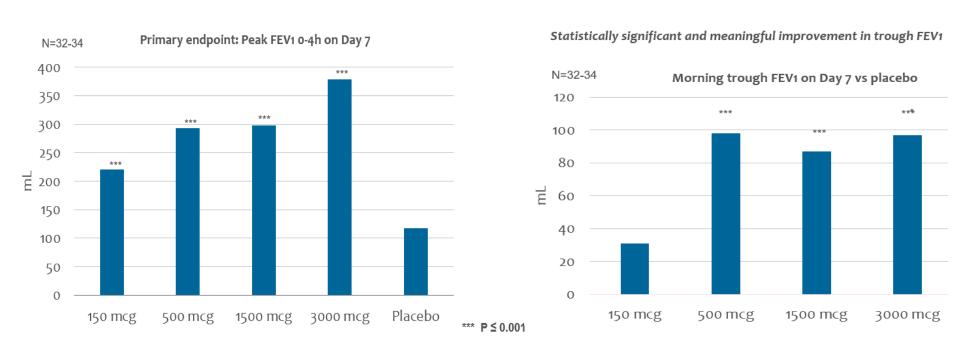




## DPI formulation delivers positive Ph2 COPD results



## Clinically meaningful, statistically significant & dose-dependent bronchodilation



DPI/ MDI partnering opportunity could significantly expand commercial potential

## Blue chip shareholder base with long-term focus



#### Financial overview Sep 30, 2019

Cash and cash equivalents	\$50.5M¹
Operating expenses 9M19	\$41.5M <sup>1</sup>
Market cap	\$62.4M <sup>2</sup>























'Exchange rate used (US dollars per pound sterling): September 30, 2019: \$1.2305
Cash and cash equivalents comprises cash + cash deposits > 3 months maturity
Cash and equivalents at September 30, 2019 amounted to £41.1M (\$50.5M)

'Current issued 105.3M shares or 13.2m ADSs, share price £0.46, exchange rate of \$1.2885
As disclosed to the Company in accordance with AIM Rule 26, or through \$80 notices and 13F and 13G fillings

## Ensifentrine: multiple opportunities for value-creation



### In COPD

#### **Nebulized formulation in US**

 1.2 million symptomatic patients on dual bronchodilator/triple therapy need additional treatment

#### **Nebulized formulation in China**

 Prevalence ~70 million COPD patients; potential large market for nebulized drugs as about 90% of drug sales are in the hospital

#### **DPI or MDI formulation for COPD**

Large market, >5 million patients in US;
 partnering opportunity

### In other indications

#### **Cystic fibrosis**

 Potential first anti-inflammatory drug, independent of CF mutation status

#### **Severe Asthma**

 Bronchodilator and antiinflammatory agent, possibly before initiating more restrictive biologics treatments

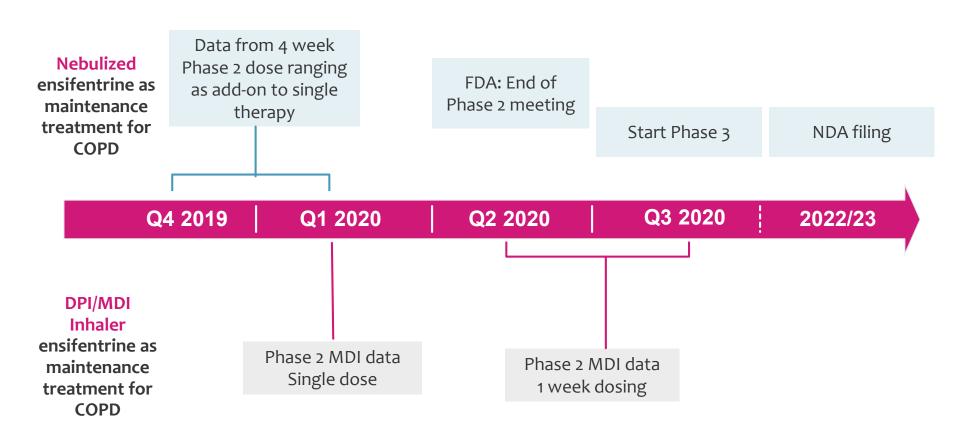
### Chronic cough

 Anti-inflammatory mechanism reduces cough and improves mucociliary clearance

Nebulizer Phase 3 planned to start in US in 2020 Upside potential: China, DPI/MDI formulations and additional indications

# Anticipated milestones as ensifentrine advances towards Phase 3 in 2020





Phase 3 trial design similar to Phase 2b to increase likelihood of regulatory success

## Ensifentrine: promising novel therapy for patients with COPD



### Unique product profile

- Bronchodilator and anti-inflammatory, rapid onset of action
- Improves symptoms in moderate to severe, symptomatic COPD
- Well tolerated in >850 subjects to date
- Additive benefit on top of existing therapies

### Significant commercial opportunity

- >1 million symptomatic COPD patients in the US, despite max treatment
- Direct sales in US + partnering opportunities
- Upside potential in China and additional indications and formulations

Plan to enter Phase 3 in 2020



## IP estate for ensifentrine



Verona Pharma owns global rights

## Robust patent portfolio

>200 issued patents in key countries; >50 applications to potentially extend protection

- Polymorph patent granted US, EU, Japan, other; expires 2031
- Suspension formulation granted US, EU, other; expires 2035
- Manufacturing/API, use, salt forms, and combination patents: granted and pending in US, EU, and other territories; expiries 2031 – 2037
- Composition of matter granted US, EU, Japan, other; expires 2020
- Proprietary know-how and IP opportunities to expand IP

## New chemical entity (NCE) protections

- US: Market exclusivity up to 5 years post NDA approval
- EU: Market & data exclusivity up to 10 years post approval

## **Execution-driven leadership team**



## Management

Jan-Anders Karlsson, PhD Chief Executive Officer	S*BIO BAYER RHÔNE-POULENC RORER
<b>Piers Morgan, MA, ACA</b> Chief Financial Officer	uniQure  C4X Discovery  C4X Discovery
Kathy Rickard, MD Chief Medical Officer	gsk
Richard Hennings, BSc Commercial Director	
<b>Peter Spargo, PhD</b> SVP CMC	Pfizer CREABILIS NOVEXE
Claire Poll, LLB Legal Counsel	KING&WOD MALLESONS inmarsat
<b>Desiree Luthman, DDS</b> VP Regulatory Affairs	Celgene SANOFI Bristol-Myers Squibb
<b>Tara Rheault, PhD</b> VP R&D Ops & Global Proj Mgmt	MS Health & Quintiles are now  INS Health & Quintiles are now

Verona's executives highly experienced in developing /commercializing many COPD drugs including:



# Maintenance COPD: Substantial Market with Premium Pricing in Nebulized Segment



US Sales of common bronchodilators	Administration	Class	Avg monthly \$ WAC price <sup>1</sup>	US only sales \$M²
Brovana (Sunovion)	Nebulizer - open	LABA	1,030	457
Perforomist (Mylan)	Nebulizer - open	LABA	972	210
Lonhala (Sunovion)	Nebulizer - closed	LAMA	1,133	-
Yupelri (Mylan/Theravance) <sup>3</sup>	Nebulizer - open	LAMA	1,030	>1,000 <sup>3</sup>
Advair (GSK)	Inhaler	LABA / ICS	394	1,561
Spiriva (Boehringer)	Inhaler	LAMA	429	2,453
Anoro (GSK)	Inhaler	LAMA / LABA	410	870
Trelegy (GSK)	Inhaler	LAMA / LABA / ICS	546	337
Breo (GSK)	Inhaler	LABA/ICS	351	895
Symbicort (AZ)	Inhaler	LABA/ICS	346	1,271

<sup>1.</sup> PriceRx; accessed April 2019

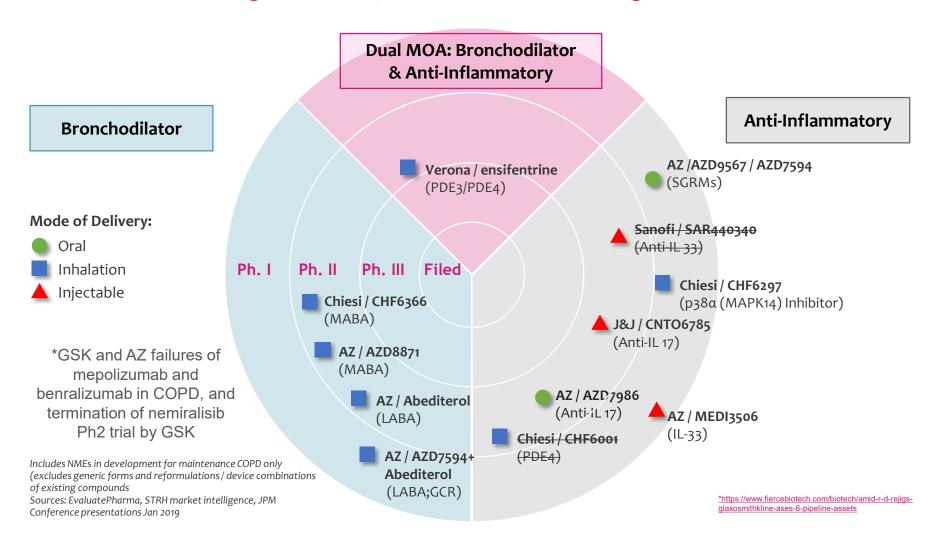
<sup>2.</sup> January 2018 – December 2018; COPD diagnosis only

<sup>3.</sup> Launched December 2018; analyst estimate of potential peak sales

## Compelling need for therapy with new mode of action for COPD



... but few such drugs in development for COPD, and high rate of failure\*

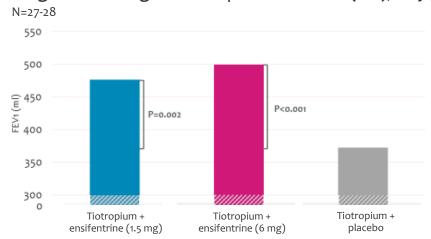


# Ensifentrine improved lung function as add-on to LAMA (tiotropium / Spiriva®)

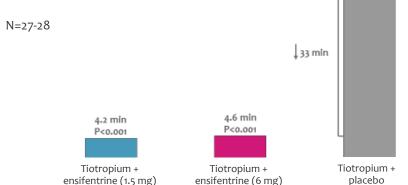
(Reported Sep 2017)



#### Change in Morning Peak FEV, from Baseline (mL), Day 3

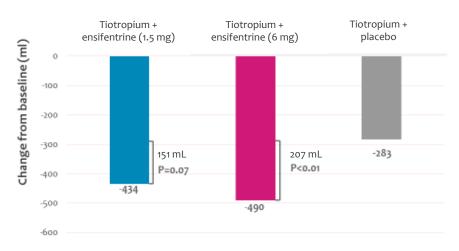


## Shortened Median Time to Onset on Day 3 (≥ 10% Improvement in FEV₁; mins)



#### Reduced Hyperinflation (mL) on Day 2 (Morning)

N=27-28



- Additional improvement in peak FEV1
- Reduction of hyperinflation typically correlated with improvement in symptoms
- Rapid onset of action
- Well tolerated

## Post hoc analysis informs Ph<sub>3</sub> clinical study

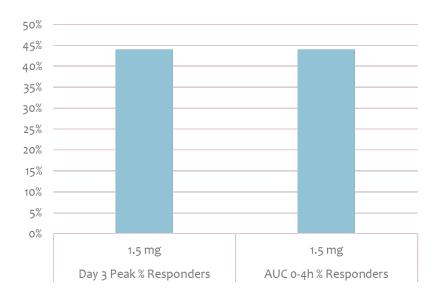


Substantial group of patients show significant response, >100mL improvement in Peak FEV<sub>1</sub>

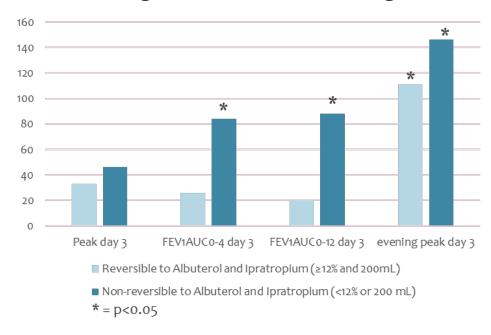
Greater response seen in patients who are less responsive to existing classes of bronchodilators

mL

>40% of patients had ≥ 100 mL increase in peak FEV1 vs placebo

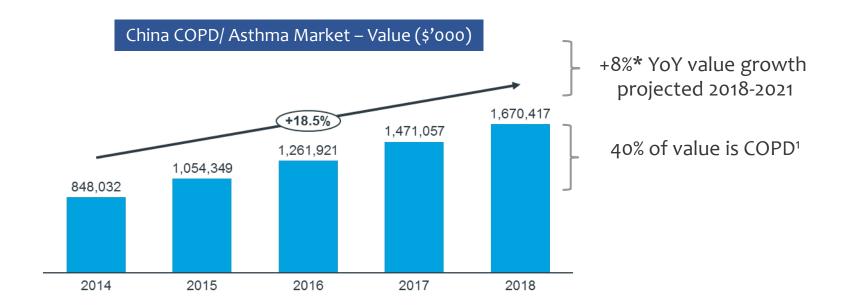


1.5 mg ensifentrine: additional response in non-reversible patients vs. those reversible to beta2 agonist and muscarinic antagonist



## **China: Large and Fast Growing COPD Market**





- Treated COPD population: ~8 million (vs US 6M) cigarette smoking and air pollution leading causes
- Hospital driven market ~90% of sales in terms of value (vs. US ~80% in retail channel)
- ~15,000 hospital 'nebulizer rooms' supporting annual ~\$500M Pulmicort nebulized market