

ASLAN004 MAD interim data

Atopic dermatitis (AD)

1 March 2021



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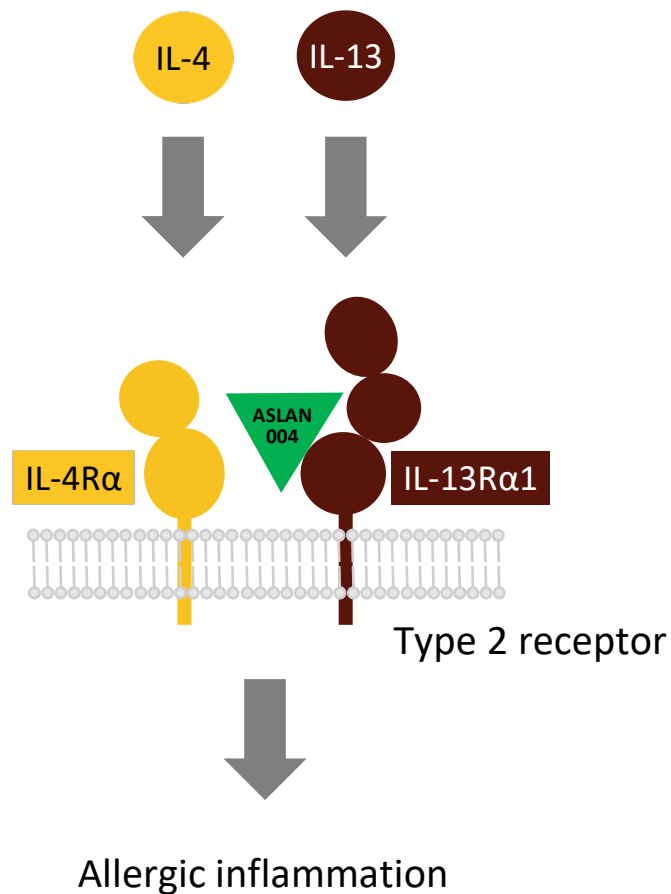
Executive summary – positive interim data

- We believe dermatologists and patients looking for additional AD treatment options – opportunity to improve on efficacy, safety and dose regimen
- ASLAN004 is a novel, first-in-class antibody targeting IL-13R, blocking both IL-4 and IL-13 signalling through the Type 2 receptor
- Emerging clinical data demonstrate competitive profile with the potential to differentiate over existing therapies
- Robust dose dependent efficacy profile showing improvement compared to placebo across all efficacy endpoints
- Well-tolerated at all doses tested
- Expansion cohort continues to recruit with full study readout expected in mid-2021, Phase 2b anticipated to initiate in 2H 2021

Interim data demonstrates a robust and differentiated safety and efficacy profile.



ASLAN004 is a potential first-in-class IL-13R antibody that selectively blocks the Type 2 receptor



ASLAN004 is the only monoclonal antibody in the clinic targeting IL-13R α 1

- IL-4 and IL-13 are central to triggering allergy and symptoms of atopic dermatitis
- ASLAN004 blocks the Type 2 receptor, preventing signalling through both IL-4 and IL-13

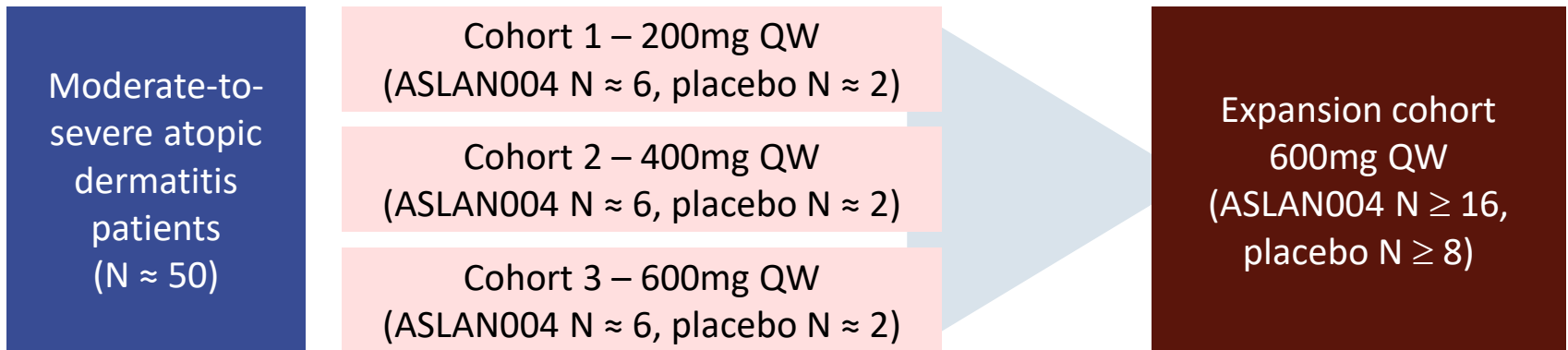
Potential for improved efficacy, safety and dose regimen:

- Selectively targets the Type 2 receptor. Blocking the Type 1 receptor may lead to unwanted effects
- Stronger binding to receptor than *dupilumab* relative to its respective ligand, so pathway inhibition may be maintained at low drug concentrations



Trial design of MAD / PoC study in moderate-severe AD

- Double-blind, randomised, placebo-controlled study
- Patients dosed weekly via subcutaneous injection for 8 weeks with a 12-week recovery period
- Interim data from cohorts 1 to 3



Primary endpoints are safety and tolerability

Secondary endpoints include percentage change from baseline in EASI score, pruritus score and IGA, and biomarkers TARC and IgE

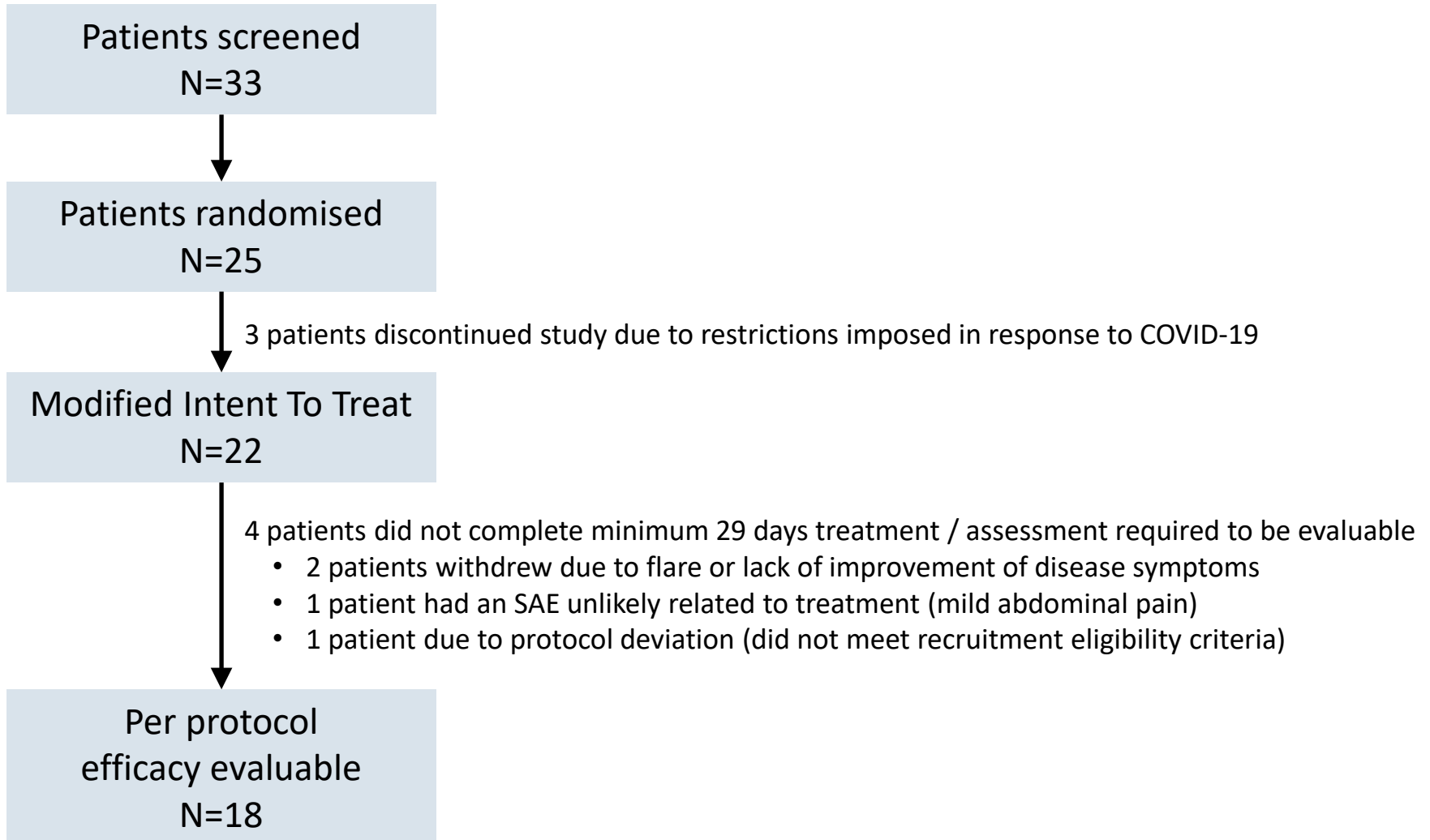
Key inclusion criteria:

- Chronic AD present for ≥ 3 years before screening visit
- EASI score ≥ 16 at screening and baseline
- IGA score ≥ 3 (scale of 0 to 4) at screening and baseline
- $\geq 10\%$ body surface area (BSA) of AD involvement at screening and baseline

Study has 80% power to detect 39% improvement in EASI from baseline, compared to placebo, based on a one-sided 5% significance level



Study recruitment



Selected baseline patient characteristics

Per protocol efficacy evaluable (N=18)	200mg (N=4)	400mg (N=6)	600mg (N=3)	Placebo (N=5)
Age (years)	32.5	28.3	42.0	33.8
Mean EASI score	32.9	30.9	32.5	33.9
Mean BMI	25.8	25.4	24.2	25.4
Patients with IGA 3 / IGA 4	50 / 50 %	83 / 17 %	33 / 67 %	40 / 60 %
Mean BSA	55.5%	59.8%	56.3%	59.8%
Mean peak pruritus NRS score	7.4	7.3	6.4*	7.4

Abbreviations

EASI: Eczema Area and Severity Index

IGA: Investigator Global Assessment

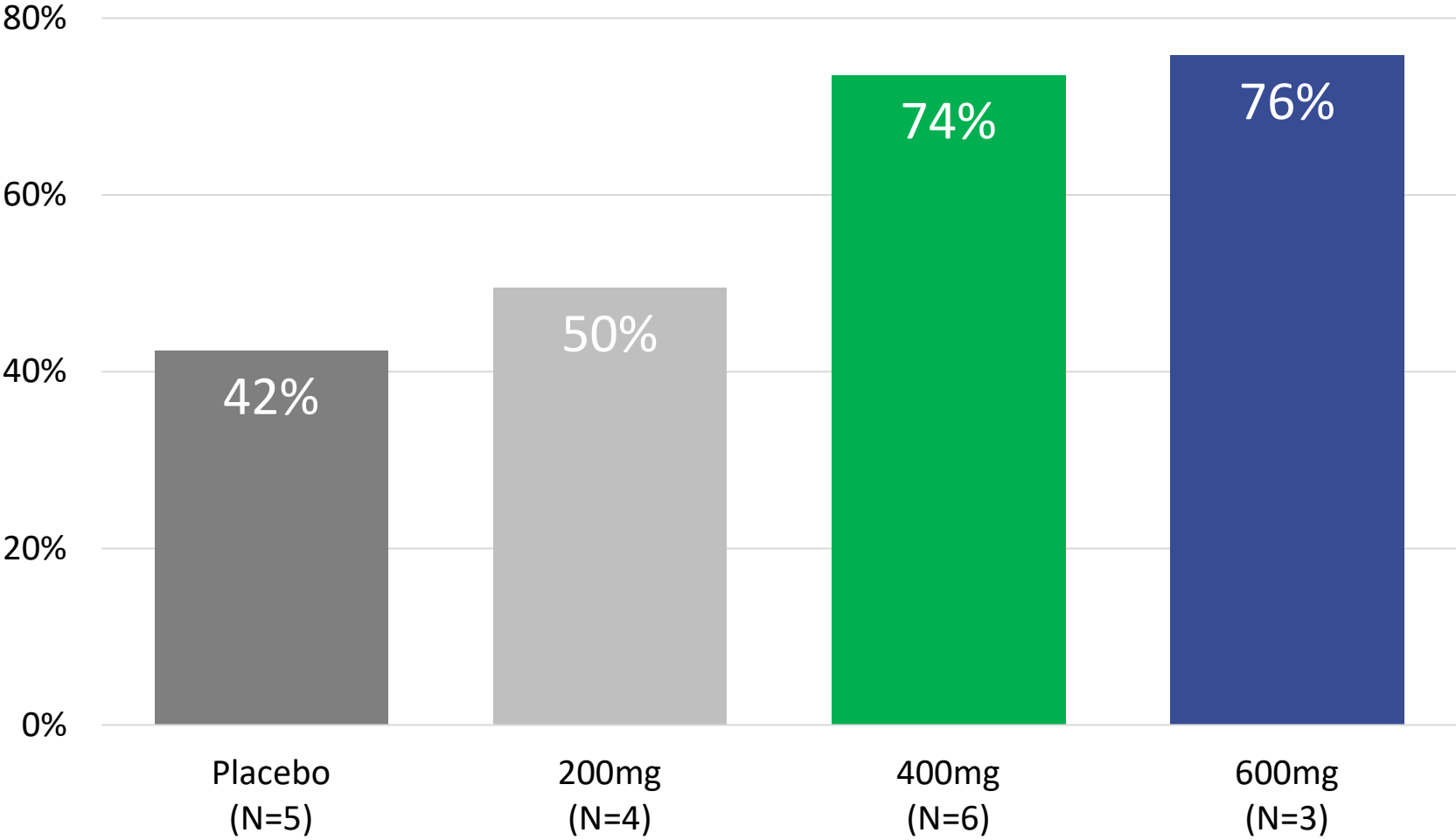
BSA: Body Surface Area

NRS: Numerical Rating Scale

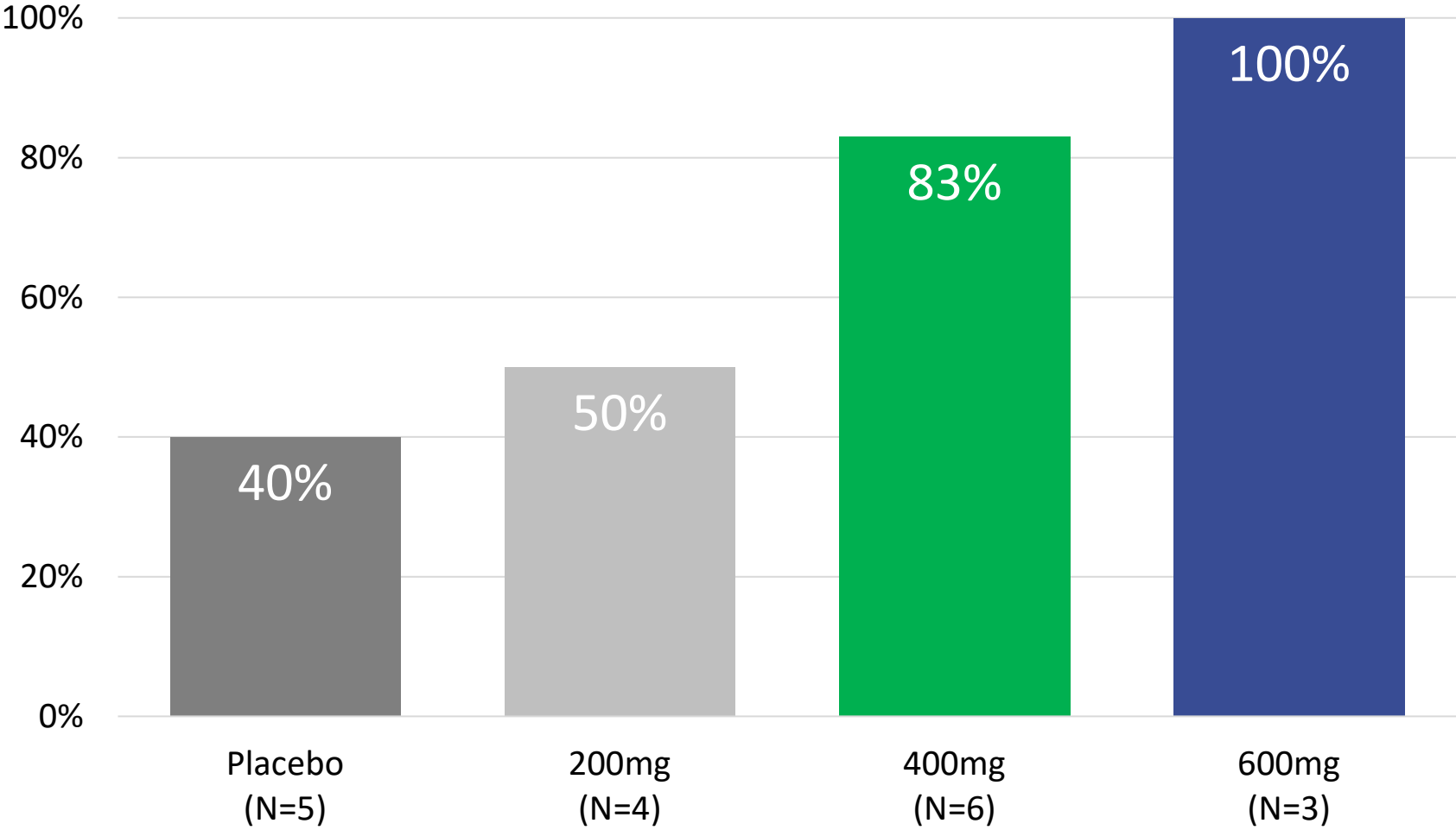
* N=2 as one subject did not have a baseline value



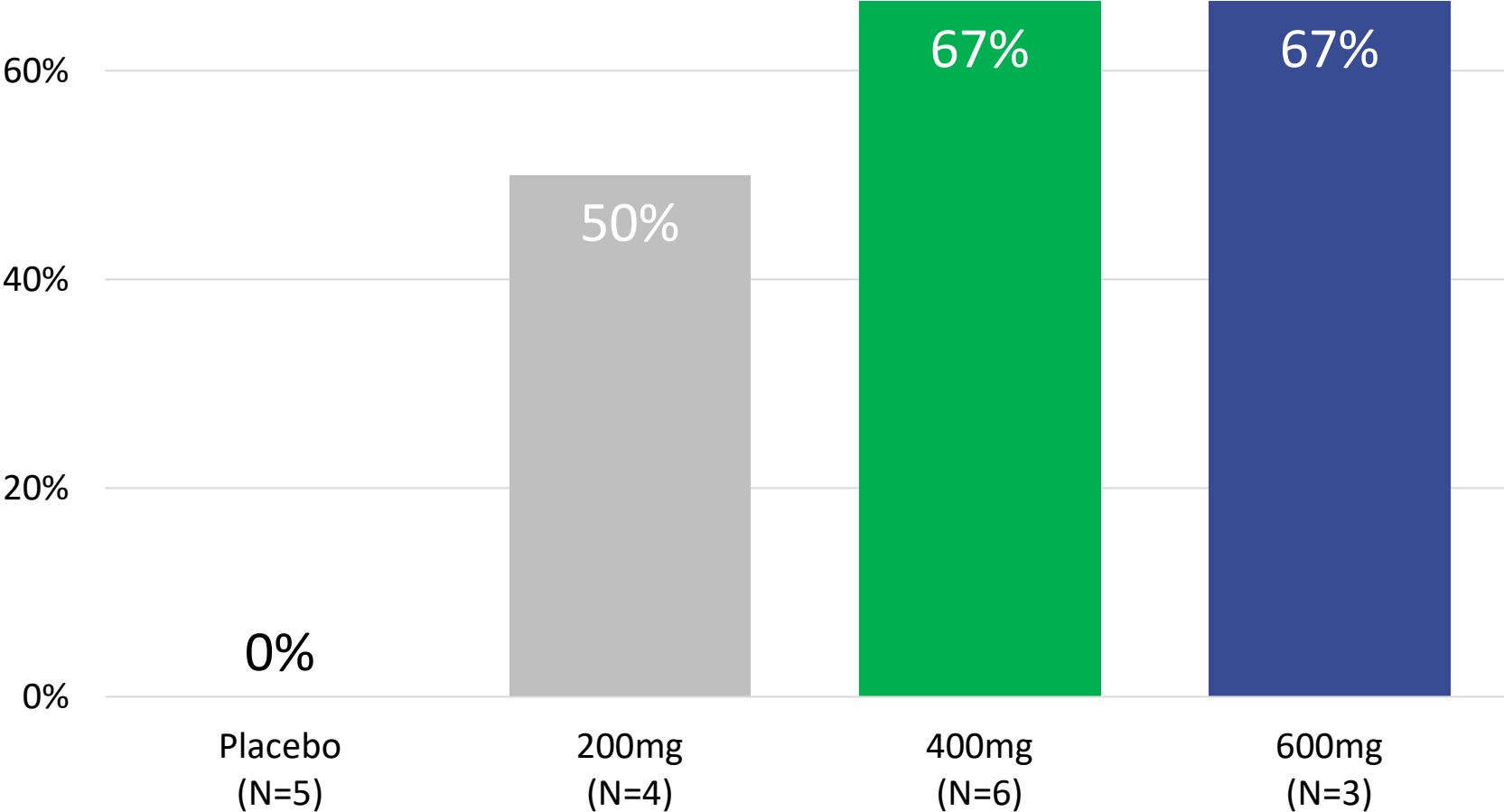
Mean reduction in EASI from baseline (Week 8)



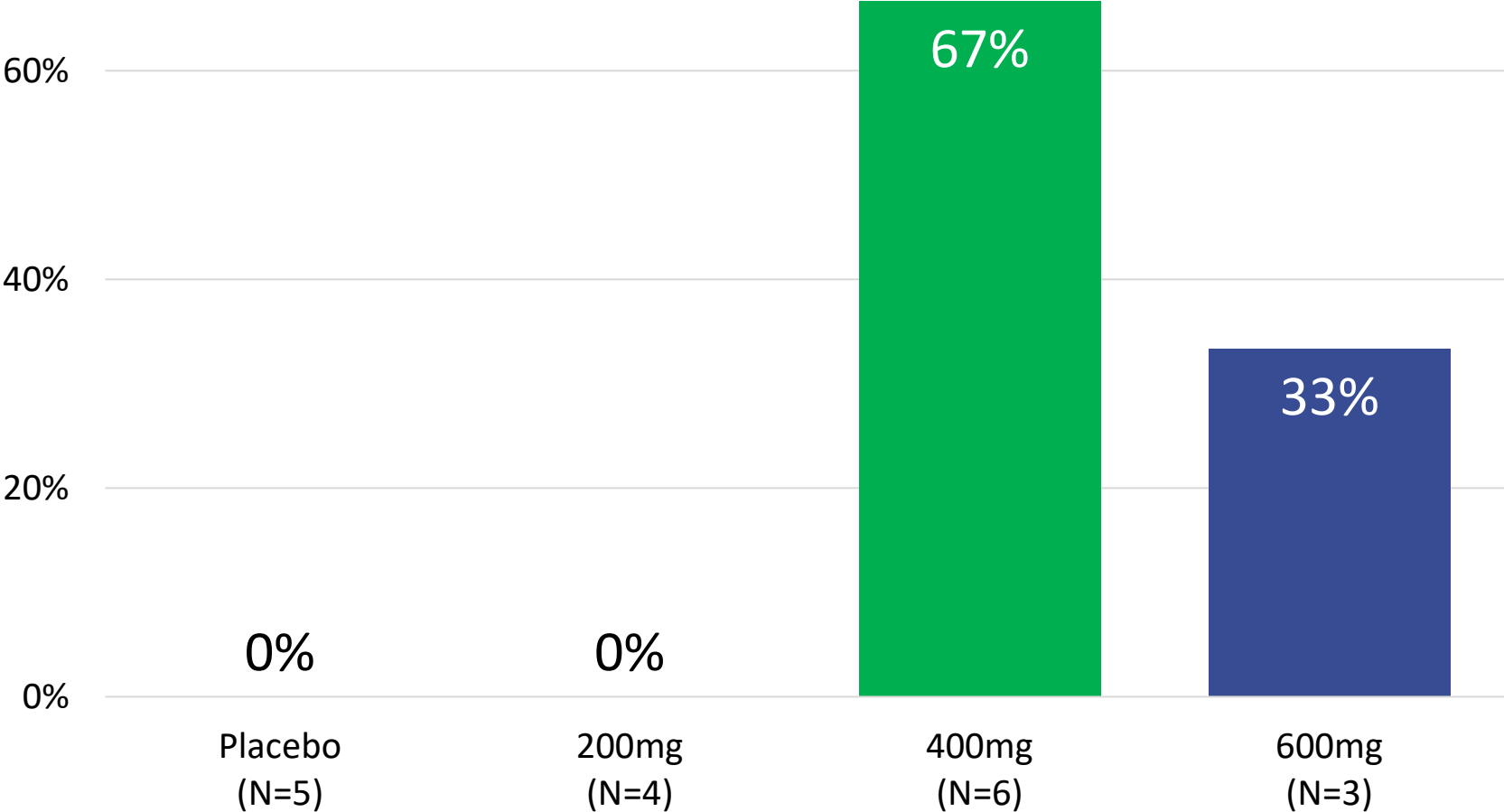
EASI-50 (Week 8)



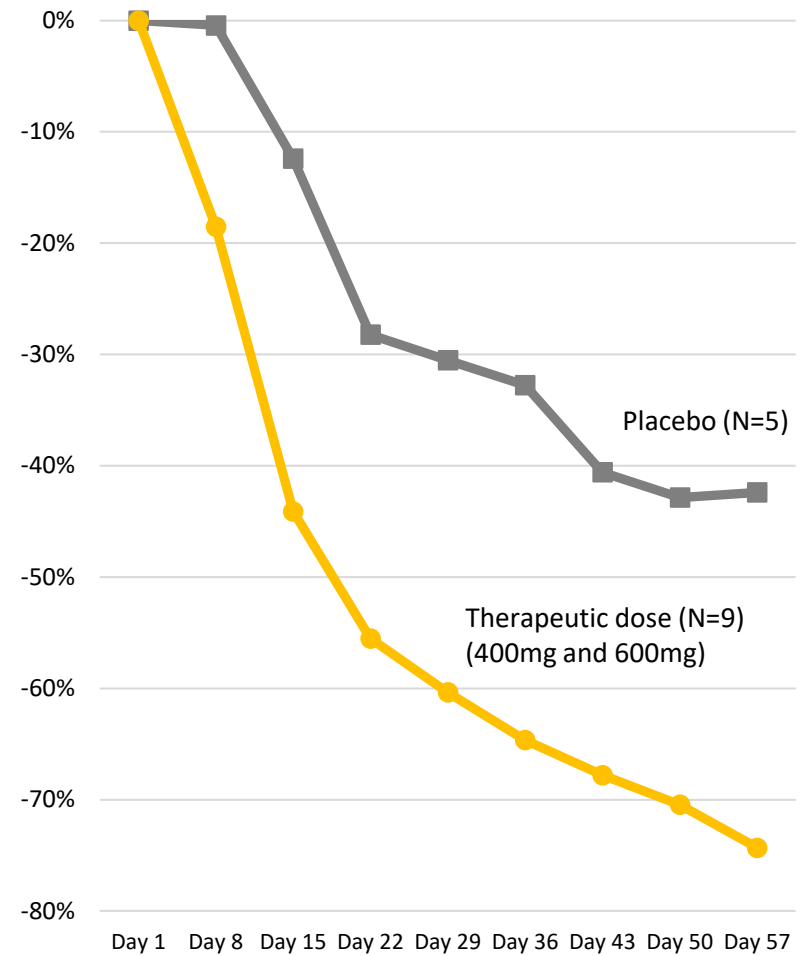
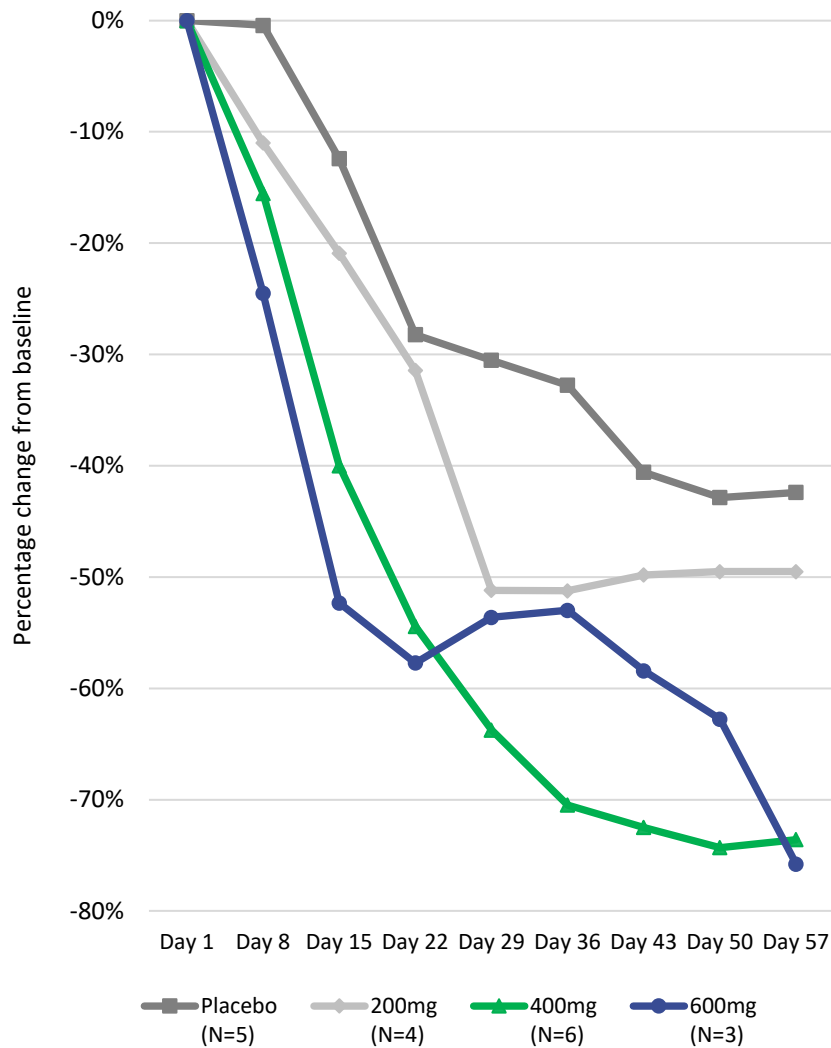
EASI-75 (Week 8)



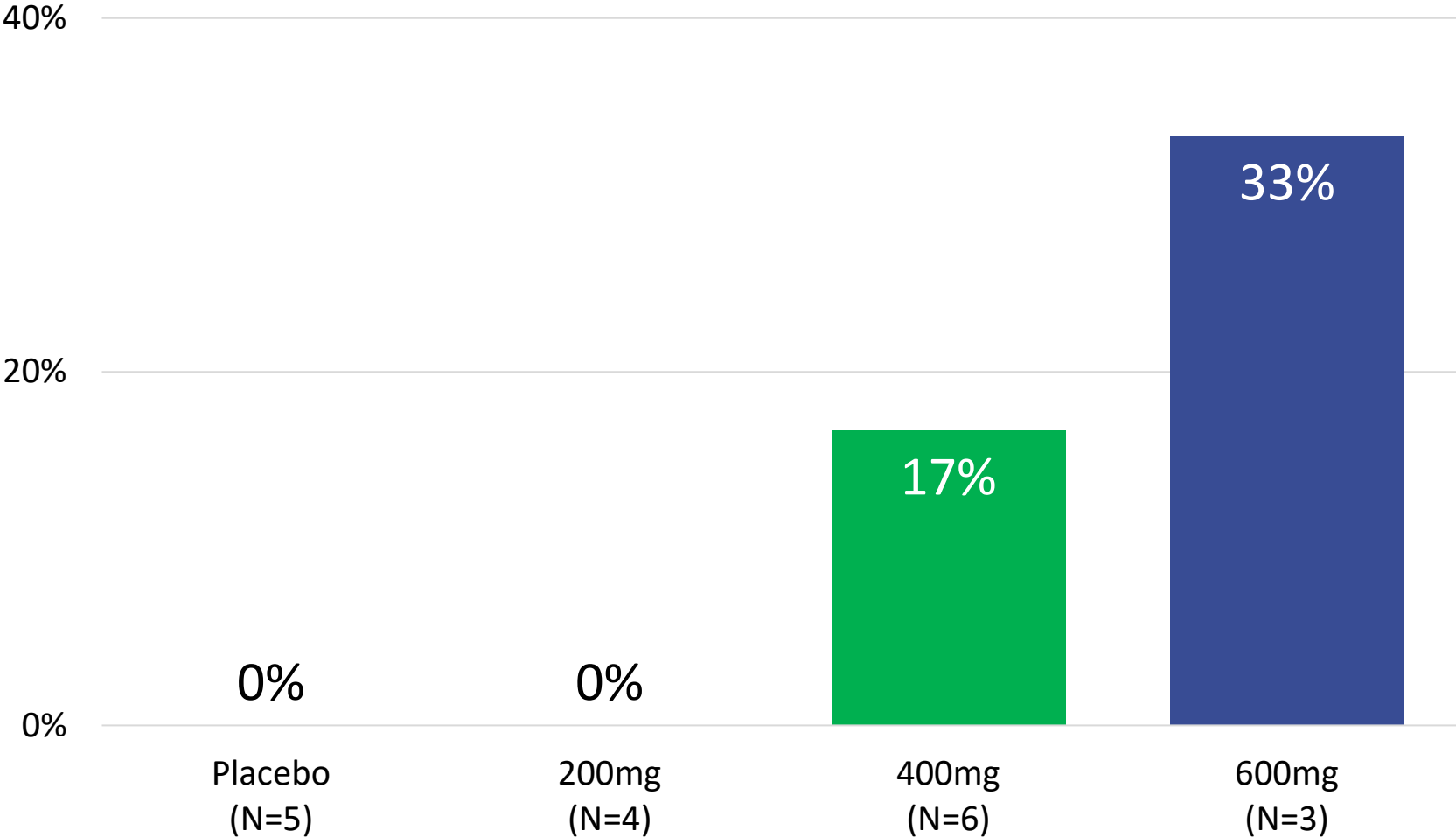
EASI-90 (Week 8)



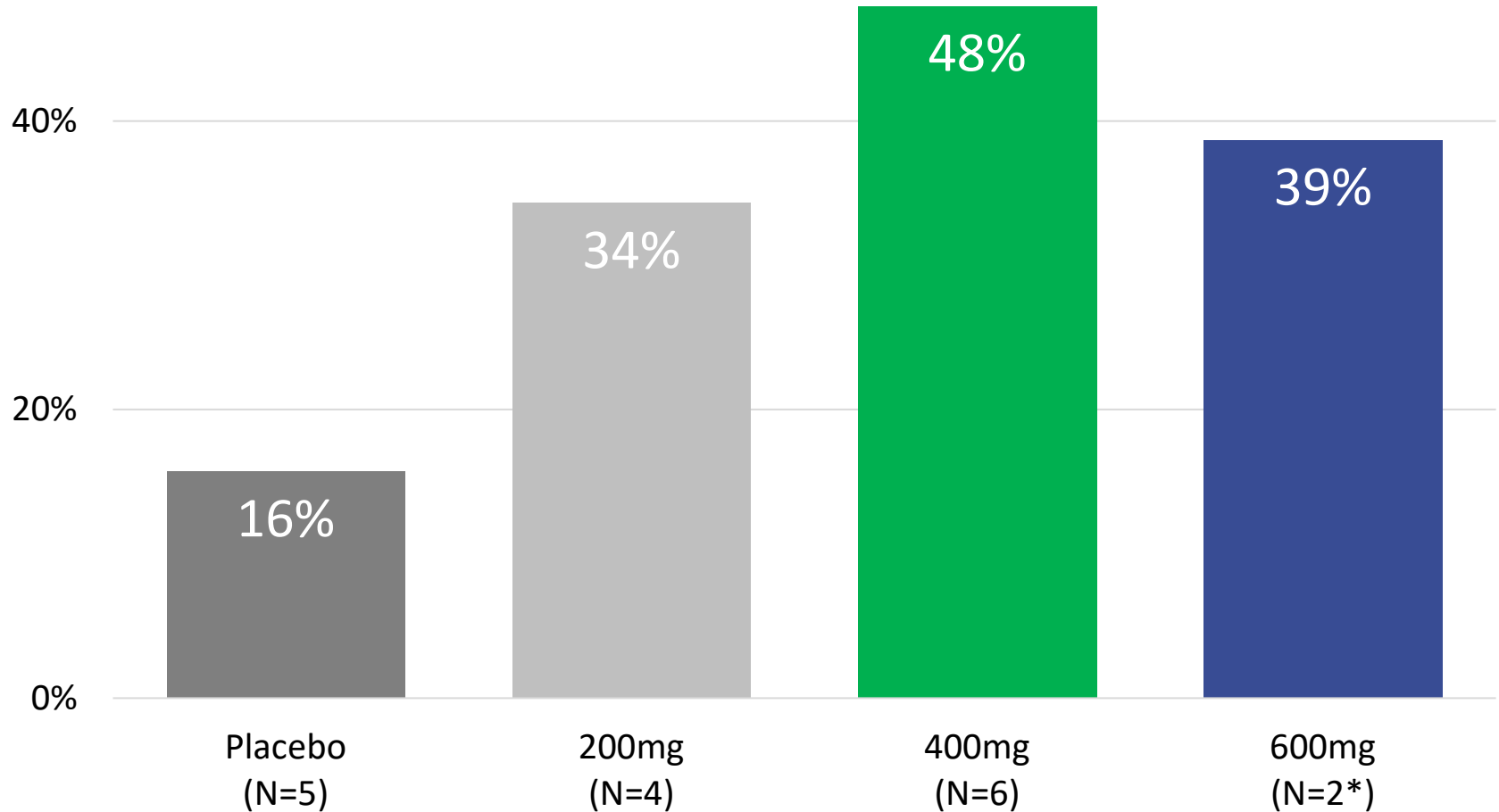
EASI score over time



Patients achieving IGA 0/1 (Week 8)



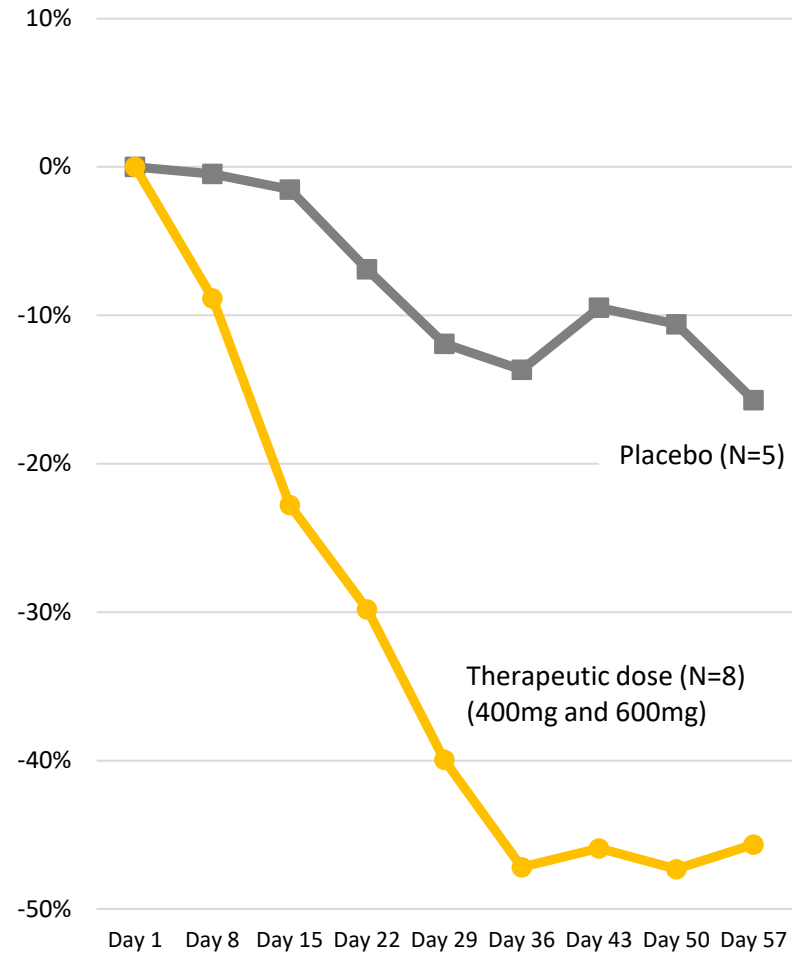
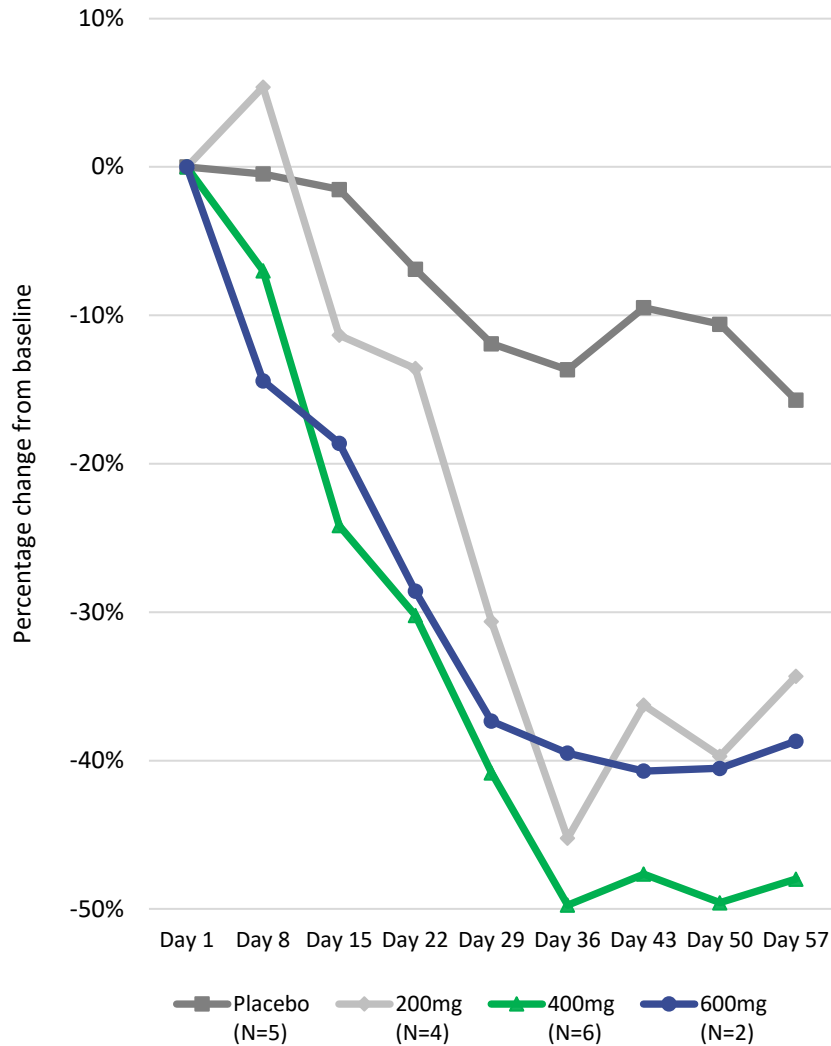
Mean reduction in peak P-NRS from baseline (Week 8)



* One subject did not have a baseline value



Peak P-NRS over time



ASLAN004 well-tolerated at all dose levels

Treatment Emergent Adverse Event (TEAE) by category	200mg (N=5)	400mg (N=8)	600mg (N=5)	All doses (N=18)	Placebo (N=7)
Any	5 (100%)	8 (100%)	3 (60.0%)	16 (88.9%)	5 (71.4%)
Related	5 (100%)	6 (75.0%)	2 (40.0%)	13 (72.2%)	5 (71.4%)
Moderate/severe	2 (40.0%)	2 (25.0%)	1 (20.0%)	5 (27.8%)	3 (42.9%)
Serious adverse event (SAE)	0 (0%)	1 (12.5%)	0 (0%)	1 (5.6%)	0 (0%)
Drug-related AEs of interest*:					
Injection site reaction	1 (20.0%)	3 (37.5%)	0 (0%)	4 (22.2%)	2 (28.6%)
Conjunctivitis	0 (0%)	1 (12.5%)	1 (20.0%)	2 (11.1%)	0 (0%)

- There were no drug-related TEAEs that led to discontinuation
- SAE was mild abdominal pain, classified as unlikely related
- Conjunctivitis was classified as mild. Patients had prior history of allergy or allergic conjunctivitis.

* Drug-related defined as definitely related, probably related or possibly related



Opportunity for better treatment options for patients

	Categories	Dupilumab Ph3 ¹ (300mg QW)		Dupilumab Ph3 ¹ (300mg Q2W)		Lebrikizumab Ph2b ⁵ (250mg Q2W)		
		SOLO1	SOLO2	SOLO1	SOLO2			
Baseline characteristics	Age (years) – mean	39.3 vs 39.5 ²	37.1 vs 37.4 ⁴	39.8 vs 39.5 ²	36.9 vs 37.4 ⁴	38.9 vs 42.2		
	EASI score – mean	33.2 vs 34.5 ²	31.9 vs 33.6 ⁴	33.0 vs 34.5 ²	31.8 vs 33.6 ⁴	25.5 vs 28.9		
	Patients with IGA 4	48% vs 49%	47% vs 49%	48% vs 49%	49% vs 49%	29% vs 39%		
	BSA – mean	56% vs 58% ²	52% vs 54% ⁴	55% vs 58% ²	53% vs 54% ⁴	40% vs 47%		
	Pruritis NRS – mean	7.2 vs 7.4 ²	7.5 vs 7.5 ⁴	7.2 vs 7.4 ²	7.6 vs 7.5 ⁴	7.6 vs 7.4		
Efficacy	Efficacy at	16 weeks	16 weeks	16 weeks	16 weeks	4 weeks	8 weeks	16 weeks
	% change in EASI	-72% vs -38%	-69% vs -31%	-72% vs -38%	-67% vs -31%	-50% vs -25% ⁶	-64% vs -31% ⁶	-73% vs -41% ⁶
	EASI-50	61% vs 25%	61% vs 22%	69% vs 25%	65% vs 22%	NA	NA	81% vs 46%
	EASI-75	52% vs 15%	48% vs 12%	51% vs 15%	44% vs 12%	30% vs 3% ⁶	46% vs 17% ⁶	61% vs 24% ⁶
	EASI-90	33% vs 8%	31% vs 7%	36% vs 8%	30% vs 7%	14% vs 1% ⁶	30% vs 4% ⁶	44% vs 11% ⁶
	Patients achieving IGA 0/1	37% vs 10%	36% vs 8%	38% vs 10%	36% vs 8%	14% vs 0% ⁶	31% vs 5% ⁶	45% vs 15% ⁶
	% change in Pruritis NRS	-49% vs -26%	-48% vs -15%	-51% vs -26%	-44% vs -15%	-39% vs -25% ⁶	-46% vs -22% ⁶	-62% vs 7% ⁶
Safety and tolerability	Serious AE	1% vs 5%	3% vs 6%	3% vs 5%	2% vs 6%	3% vs 4%		
	Conjunctivitis	8% vs 2% ³	7% vs 2% ³	12% vs 2% ³	7% vs 2% ³	3% vs 0% ⁷		

Numbers in table refer to drug vs placebo

¹ Simpson et. al, NEJM 1 October 2016 (unless otherwise stated)

² <https://clinicaltrials.gov/ct2/show/results/NCT02277743>

³ Includes allergic conjunctivitis, conjunctivitis, conjunctivitis bacterial and conjunctivitis viral as reported in the supplementary appendix of the source document

⁴ <https://clinicaltrials.gov/ct2/show/results/NCT02277769>

⁵ Guttman-Yassky et al, JAMA Dermatology, 26 Feb 2020 (unless otherwise stated)

⁶ Lebrikizumab Program Update, 17 October 2019 by Dermira

⁷ Includes conjunctivitis, conjunctivitis bacterial and conjunctivitis allergic as reported in the source document



Summary of positive interim data and next steps

Interim analysis summary

- 74% average reduction in EASI from baseline at therapeutic doses (400mg and 600mg) after 8 weeks
 - 89% of patients achieved EASI-50
 - 56% achieved EASI-90
- Data supportive of ASLAN004's potential as a novel, first-in-class antibody targeting IL-13R with differentiated efficacy and safety profile

Next steps

- Expansion cohort ongoing
 - Targeting the recruitment of at least 24 patients
 - Readout expected mid-2021
- Phase 2b planning underway, expected to initiate in 2H 2021
- Prioritising additional indications for potential new studies in 2H 2021

