PRESS RELEASE
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Cantargia reports phase I clinical progress in the CAN10 project

Cantargia (Cantargia AB; Nasdaq Stockholm: CANTA) today reported encouraging progress in the ongoing phase I clinical trial of the CAN10 antibody. The study proceeds according to plan, with the four initial dose groups concluded without any safety concerns. In addition, as predicted from preclinical models, CAN10 binds to its target, IL1RAP, on immune cells from the study subjects in a dose dependent manner.

"We are very pleased to report progress in Cantargia's second clinical program, CAN10. The data generated around safety and receptor binding is encouraging and confirms our predictions. We look forward to the continued evaluation in healthy subjects ahead of studies in patients," said Göran Forsberg, CEO of Cantargia.

CAN10 is one of two clinical projects in the Cantargia pipeline. The CAN10 antibody has been designed for treatment of autoimmune/inflammatory diseases with lead indications being systemic sclerosis and myocarditis. The phase I clinical trial initially investigates increasing levels of CAN10 as single dose administration in healthy subjects followed by studies of multiple dosing in patients with psoriasis. The primary endpoint relates to safety. Details on the trial can be found at **https://clinicaltrials.gov/study/NCT06143371**.

The first four dose groups in healthy subjects have now concluded the treatment period. No safety concerns have been observed and the fifth dose group has started in accordance with the protocol. In addition, a receptor occupancy study shows that already at initial dose levels, the majority of IL1RAP molecules on immune cells are binding CAN10 in a dose dependent manner. This is in line with predictions from preclinical studies. Furthermore, biomarker samples taken during the study are currently analyzed to document blocking of IL-1 and IL-36 stimulation of immune cells. The first results from such studies are expected during Q2 2024. Studies in patients with psoriasis are expected to start H2 2024.

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This information is information that Cantargia is obliged to make public pursuant to the EU Market Abuse Regulation. The information was submitted for publication, through the agency of the contact persons set out above, at 2024-01-09 17:30 CET.

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About Cantargia
Cantargia AB (publ), reg. no. 556791-6019, is a biotechnology company that develops antibody-based treatments for life-threatening diseases and has established a platform based on the protein IL1RAP, involved in a number of cancer forms and inflammatory diseases. The main program, the antibody nadunolimab (CAN04), is being studied clinically primarily in combination with chemotherapy with a focus on pancreatic cancer, non-small cell lung cancer and triple-negative breast cancer. Positive interim data for the combinations indicate stronger efficacy than would be expected from chemotherapy alone. Cantargia's second development program, the antibody CAN10, blocks signaling via IL1RAP in a different manner than nadunolimab and addresses treatment of serious autoimmune /inflammatory diseases, with initial focus on systemic sclerosis and myocarditis.

Cantargia is listed on Nasdaq Stockholm (ticker: CANTA). More information about Cantargia is available at **www.cantargia.com**.

About CAN10
The CAN10 antibody binds strongly to its target IL1RAP and has a unique capability to simultaneously inhibit signaling via IL-1, IL-33 and IL-36. Inhibition of these signals can be of significant value in the treatment of several inflammatory or autoimmune diseases. The initial focus of CAN10 will be on two severe diseases: myocarditis and systemic sclerosis. In preclinical in vivo models of myocarditis, a CAN10 surrogate antibody significantly reduced the development of inflammation and fibrosis, and significantly counteracted the deterioration of the cardiac function. The CAN10 surrogate also inhibited disease development in models of systemic sclerosis, psoriasis, psoriatic arthritis, atherosclerosis and peritonitis. CAN10 is currently evaluated in a phase I clinical trial, with initial data expected in 2024.

Attachments
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