



# Introduction of JD BIOSCIENCE



Q1 2023



## JD BIOSCIENCE

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- 1 Background
- 2 Experience
- 3 Purpose
- 4 Staff
- 5 Timeline
- 6 Targets and Technology

## Overview



- JD BIOSCIENCE is a bio-venture focused on developing **small molecule** drugs for **metabolic diseases** (NASH, fibrosis, Inflammation, Obesity, and Cancer).  
and expanding research area including **ADC and PROTAC**



- We have robust **first-in-class drug candidates**. (NASH and IBD)
- Growing team of **~30** employees and **~20** with expertise in **medicinal chemistry**. (Established in 2017)
- ~15** external research **collaboration partners**. (Our role: Medicinal chemistry)

Medicinal chemistry



**Jin Hee Ahn, Ph.D.**  
*Chief executive officer*  
*Medicinal chemistry*



**Doo Seop Kim, Ph.D.**  
*Executive advisor*  
*Medicinal chemistry*



Target discovery



**Hail Kim M.D., Ph.D.**  
*Target discovery, mechanism of action, and efficacy tests*



**In-Kyu Lee M.D., Ph.D.**  
*Target discovery, mechanism of action, and efficacy tests*



Stability testing of API



**Myung Ae Bae Ph.D.**  
*Pharmacokinetics and druggability*





★ 5 Licensing out to Pharma



**Januvia**  
(sitagliptin)  
25mg, 50mg, 100mg tablets



Myung Ae Bae



Hail Kim

PDK  
HTR  
★ TPH

2016

Present



In-Kyu Lee

★ GPCR  
2014 2016



Don Haeng Lee

TAZ modulator  
2013 2016

★ DGAT-1  
2010 2013



Hwang, Eun-Sook

★ 11β-HSD1  
2007 2010



Doo Seop Kim

★ DPP-IV  
2004 2008

PPAR<sub>γ</sub>  
2001 2005

PTP-1B  
2000 2004

over **20** YEARS EXPERIENCE

2000

Present

To develop drugs for unmet metabolic disease

## Management Team



### CEO & Founder Jin

Hee Ahn, Ph.D

- Professor, GIST
- Principal Researcher, KRICT



### Executive Advisor

Doo Seop Kim, Ph.D.

- Vice president & CTO, Kainos Medicine
- Chief investigator, Merck & Co for 20 years



### Chemistry Director

Seongrim Byeon, Ph.D

- Director/Healthcare division/R&D, Kainos Medicine
- Research Scientist, KIST



### BD Director

Sungmin Song, Ph.D

- Technology licensing manager, GIST
- Researcher, KRIBB
- Ph.D./post-doc, Biology, Freiburg Univ.



### Innovation Director

Peter Goughnour, Ph.D

- Curigin R&D Director
- Kyung Hee Univ. Research Professor
- Ph.D./Post-Doc, Pharmacology, Seoul Nat. Univ.

## Scientific Advisory Board



### Chief Advisor

Rohit Loomba, M.D, MSHc

- Professor of Medicine, Director of Hepatology, UCSD



### Advisor

Marc Hellerstein, M.D., Ph.D.

- Professor of Nutritional Biochemistry, UC Berkeley



### Advisor

John York, Pharm D, MBA

- Akita Biomedical, Founder, CEO



### Advisor

Joon Yong Park, M.D, Ph.D

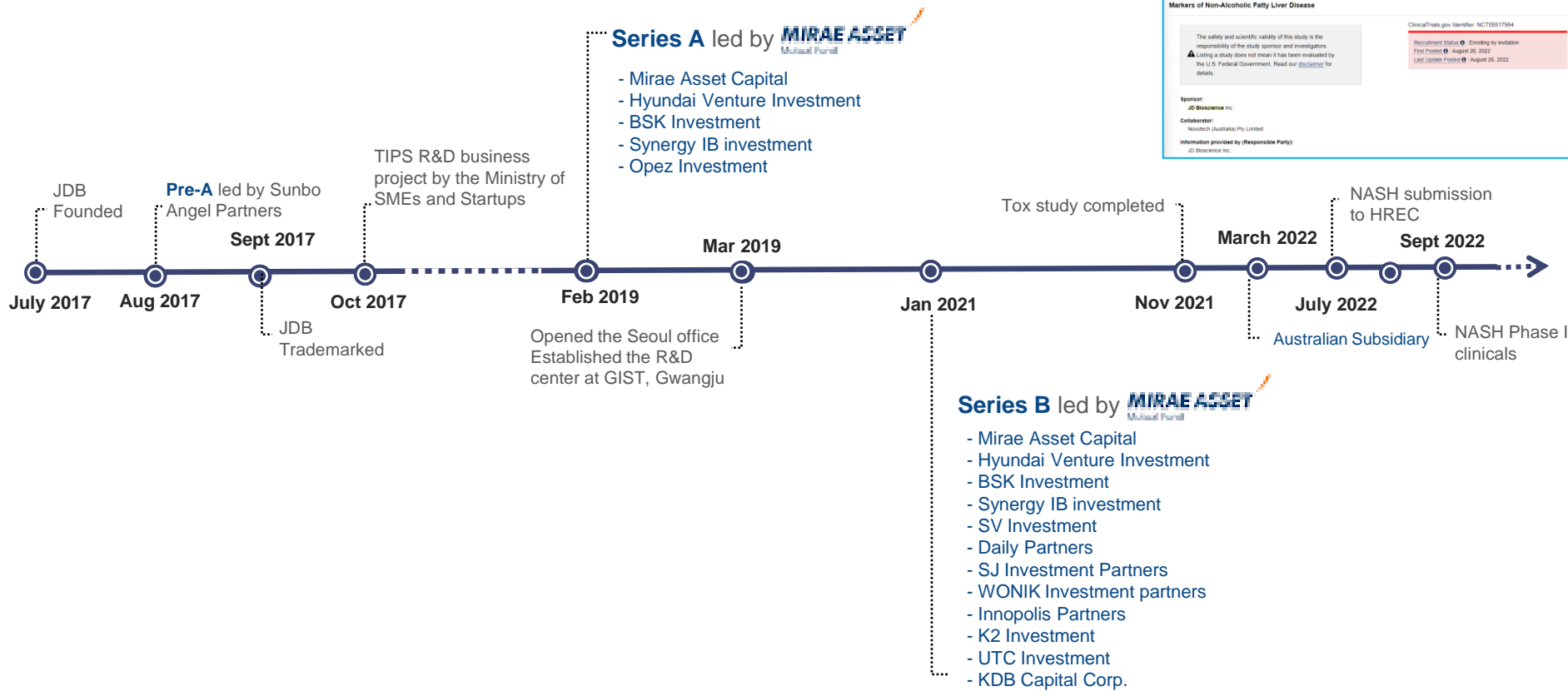
- Yonsei University College of Medicine, Professor,



### Advisor

Jung Il Lee, M.D, Ph.D

- Yonsei University College of Medicine, Professor,



## Vision

To be the leading small molecule company in the field of metabolic related disease



### Our Mission

“Discovering and developing drugs against novel targets to address the unmet medical needs in Metabolism, Fibrotic-related disease, Cardiovascular, and Cancer.”



### Our Goals

- Investigating novel biomarkers for unmet medical needs
- First-in-class drug development
- Bring more pipelines to clinical phase

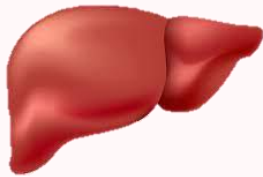
### Our Accomplishments

- Medicinal chemistry services to partners
- Knowhow and experience for novel drug development
- Stable sales revenue
- Phase I Clinical Trials with lead asset



## Diseases

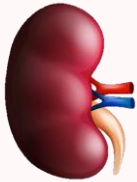
Liver



Heart



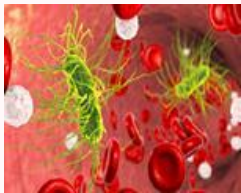
Kidney



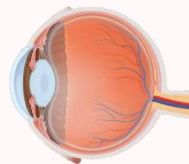
Neural



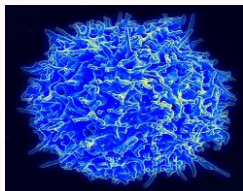
Infection



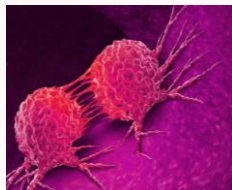
Eye



Immune

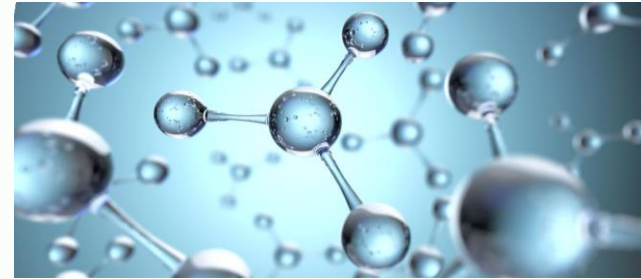


Cancer



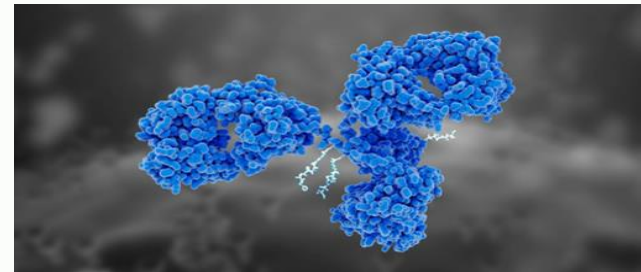
## Platforms

Small Molecule



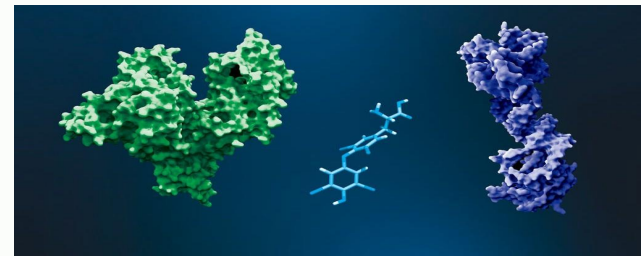
JDB can synthesis any small molecule (SM) as an agonist or antagonist for disease related proteins and receptors

Antibody Drug Conjugate



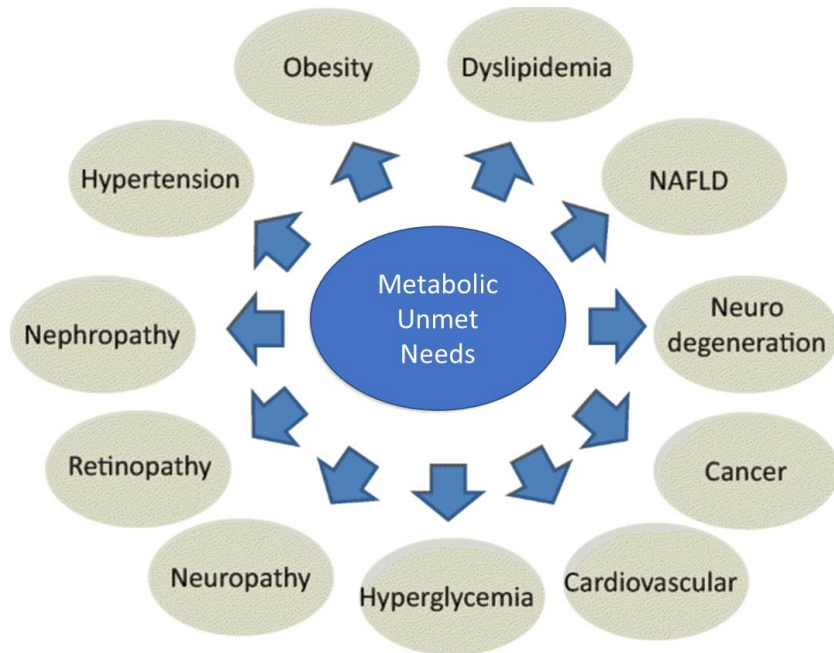
Antibody Drug Conjugate (ADC) that selectively binds to a specific target and releases our payload. JDB can create these novel complexes.

Proteolysis Targeting Chimera



Proteolysis Targeting Chimera (PROTAC), JDB can synthesize moiety and linker for any protein target.

➔ **Metabolic diseases have high unmet medical needs**



Jacob Bar-Tana Rev Endocr Metab Disord, 2020 (Modified)



**New medications are needed**



**JD BIOSCIENCE**

- 1 Lead Pipelines
- 2 NASH
- 3 IBD
- 4 Discovery Stage

## Drug Pipelines

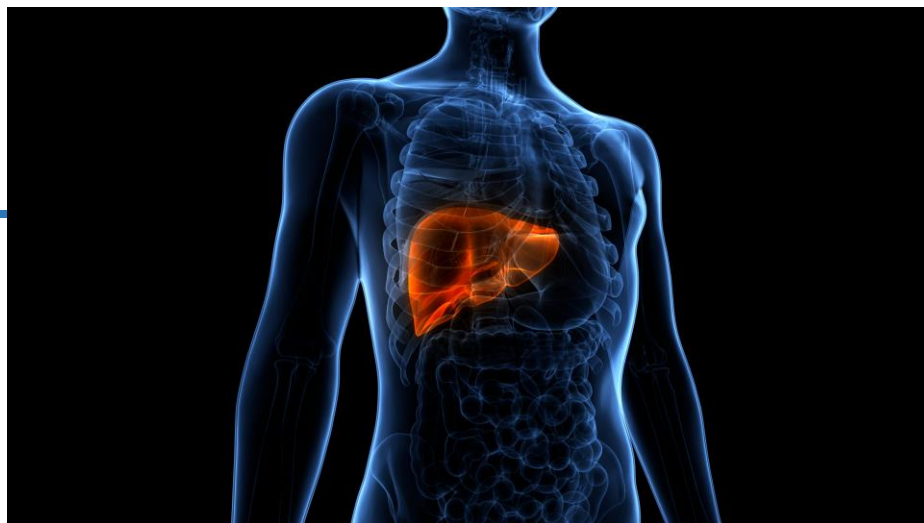


Pipeline	Code	Indication	Target	Discovery	Pre-clinic	Phase 1	Phase 2	Plans for BD
1	GM60106	NASH	HTR	➡				L/O for USA or other territories at Phase I
	GM60***	NASH	HTR	➡				Backup of GM60106
2	GM10395	Inflammation Heart disease Cancer	PDK	➡				L/O for USA or other territories at preclinical stage
	GM-X2	Pancreatitis/ Heart disease	PDK	➡				
3	-	Sepsis Septic shock	confidential				➡	Commercialize in Korea market
4	-	NASH	confidential				➡	Commercialize in Korea market
5	-	Cancer	confidential	➡				ADC Partners
6	-	Undruggable Targets	confidential	➡				PROTAC Partners

HTR-5HT(Serotonin) Receptor  
PDK-Pyruvate Dehydrogenase Kinase  
ADC-Antibody Drug Conjugate  
PROTAC-Proteolysis Targeting Chimera

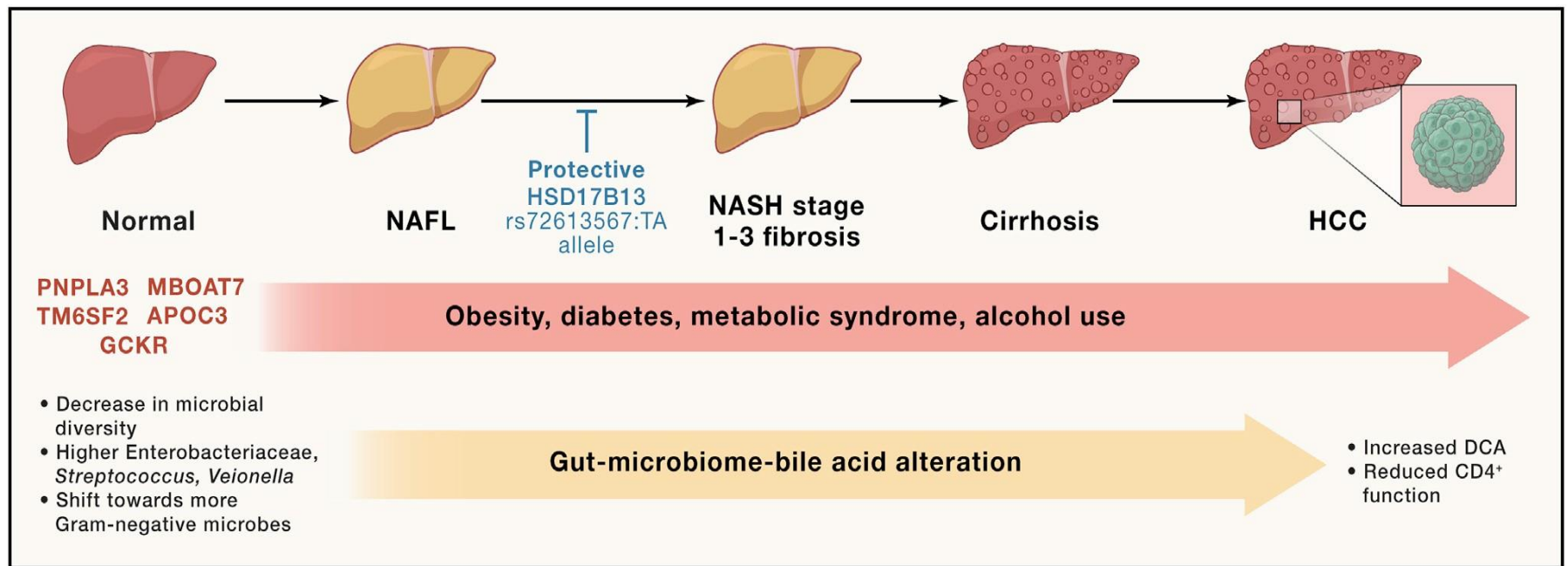
➡ Lead Candidate  
➡ Back-up

# Non-Alcoholic Steatohepatitis



## Risk factors and progression of NASH

- NASH, an advanced form of non-alcoholic fatty liver disease (NAFLD), can progress to liver fibrosis, cirrhosis, and hepatocellular carcinoma
- Genetic factors, environmental factors, and microbiome alterations are mainly involved in disease progression

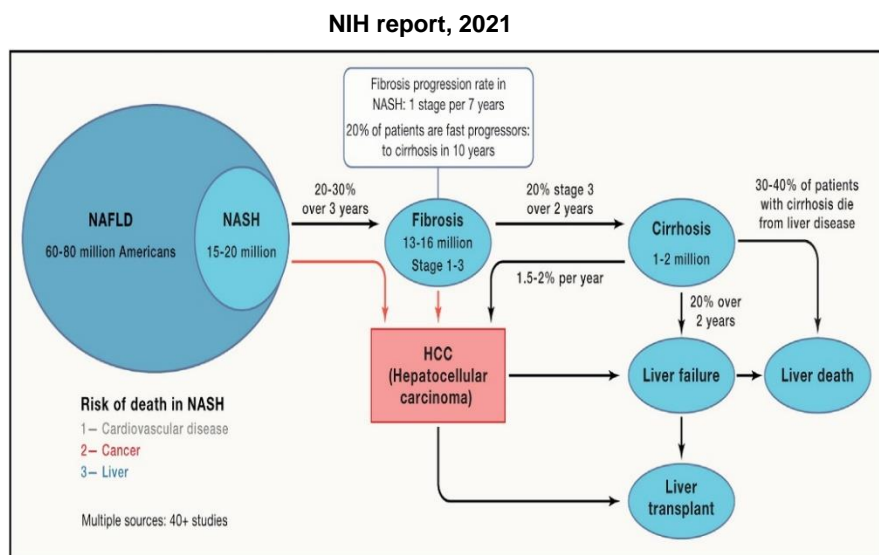


Loomba and Shulman, 2021



## NASH population

- Experts estimated that **24%** of U.S. adults have NAFLD
- **6.5%** of NAFLD have NASH
- **20~ 30%** of patients with NASH progress to liver fibrosis in **7** years
- **20%** of them progress to cirrhosis within two years

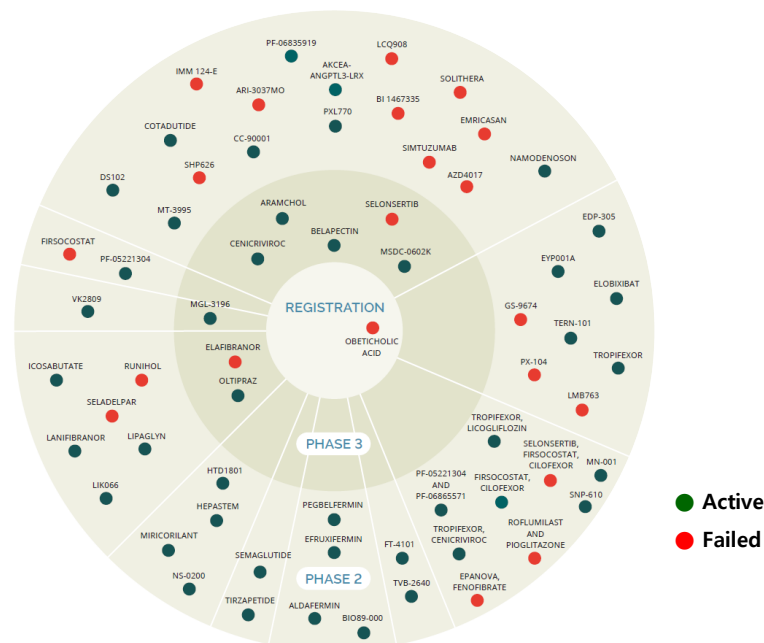


Loomba and Shulman, 2021

## Unmet Need

More than 100 drug candidates are currently in clinical trials

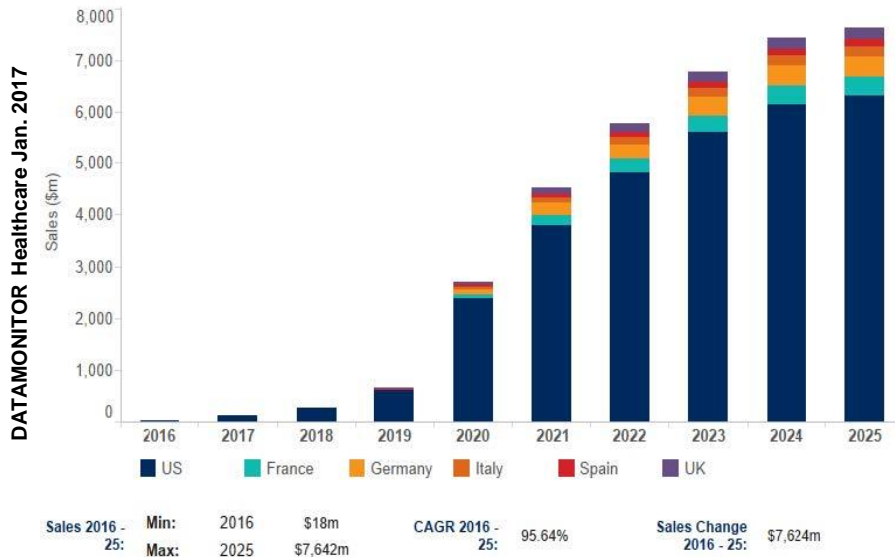
**NO** drugs for NASH are commercially available



Back Bay Life Science Advisors, 2020

## NASH market overview

- Current market size of NASH treatment **<\$1 billion** due to a lack of drug options
- The sale volume of NASH drugs is expected to **grow rapidly**



NASH drug sales (2016 to 2025)

## Licensing Deals

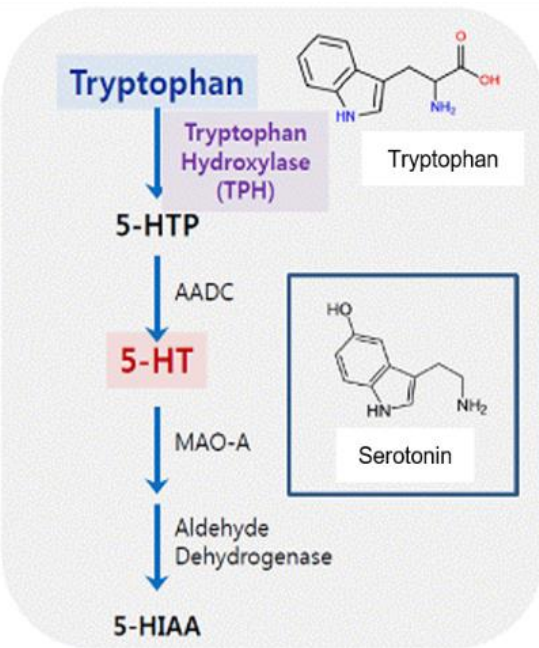
- NASH assets (> \$100 million)
- Majority of these assets are small molecules.

Year	Licensor	Licensee	Active ingredient	Stage	Licensing fees
2014. 12.	Phenix	Gilead	FXR agonist	P2	\$470M
2015. 05.	Pharmaxis	B.I.	SSAO/VAP-1	P1	\$600M (upfront: \$31M)
2016. 09.	Akarna Therapeutics	Allergan	FXR agonist	P.C.	Unknown (upfront: \$50M)
2016. 09.	Tobira Therapeutics	Allergan	CCR2/5 antagonist	P2	\$1.7B
2019. 01.	Yuhan Corp.	Gilead	Small molecules (undisclosed)	P.C.	\$785M (upfront: \$15M)
2019. 07.	Yuhan Corp.	B.I.	GLP-1/FGF21 dual agonist	P.C.	\$870M (upfront: \$40M)
2019.12.	Pliant Therapeutics	Novartis	$\alpha$ V $\beta$ 1 integrin agonist	P.C.	Undisclosed (upfront: \$80M)
2020. 08.	Thera Biosciences	LG Chem	VAP-1 antagonist	P.C.	\$350M
2020. 08.	Hanmi Pharma	Merck & Co.	GLP-1/GCG dual agonist	P2	\$870M (upfront: \$10M)
2020. 11.	Enleofen	B.I.	IL-11 AB	P.C.	\$1B
2020. 12.	Aligos Therapeutics	Merck & Co.	Oligo nucleotide	P1	\$458M

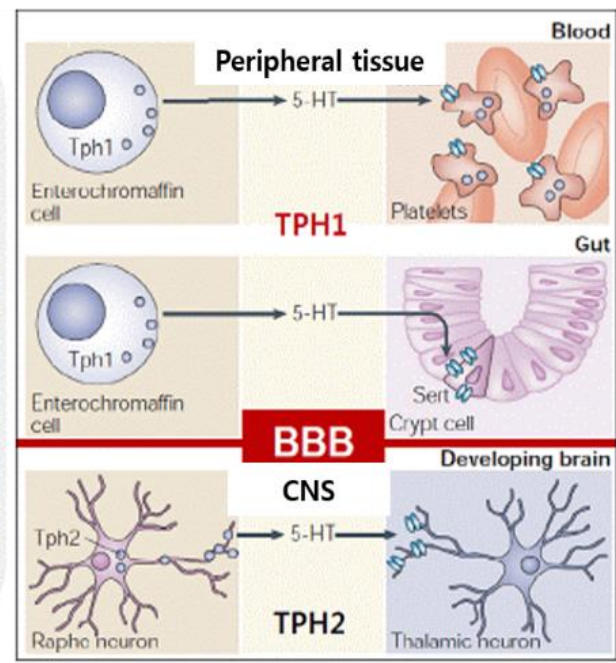
Licensing deals (2014 to 2020)



Serotonin plays an important role in our gut


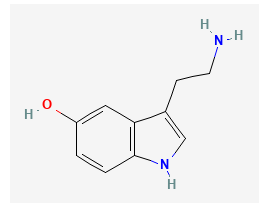

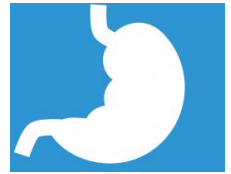


Côté PNAS, 2003



Walther and Bader Biochem Pharmacol, 2003

**90%**

**of SEROTONIN is in the GUT**

Berger M Annu Rev Med, 2009

*Involved in storage of lipid in White adipose tissue*

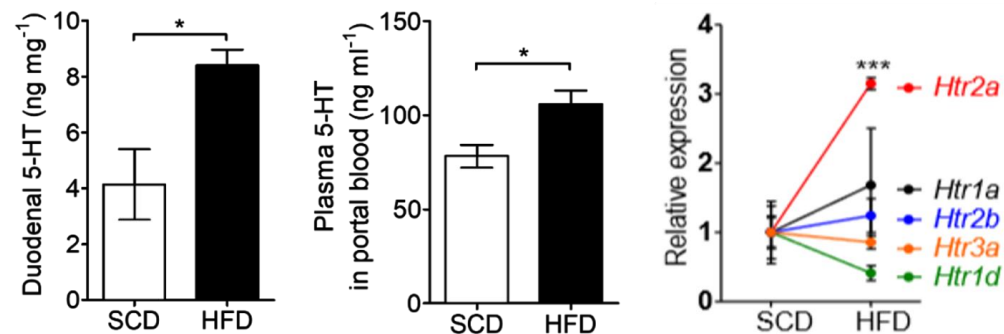
*Neurotransmitter*

5HT-Serotonin  
TPH-Tryptophan Hydroxylase

## Highlights

- In a mouse model, a high-fat diet (HFD) increases both serotonin (5-hydroxytryptophan, 5-HT) levels in the plasma levels (portal blood) and serotonin receptor (5-HT receptor 2a, HTR2a) expressions in the liver.
- Activation of the serotonin receptor induces lipogenic gene expression, which in turn enhances lipid storage in hepatocytes
- GM-60106 can effectively reduce lipogenesis, inflammation, and fibrosis in the liver and doesn't induce any BBB-mediated side effects.

Expression of serotonin and its receptors in peripheral tissues

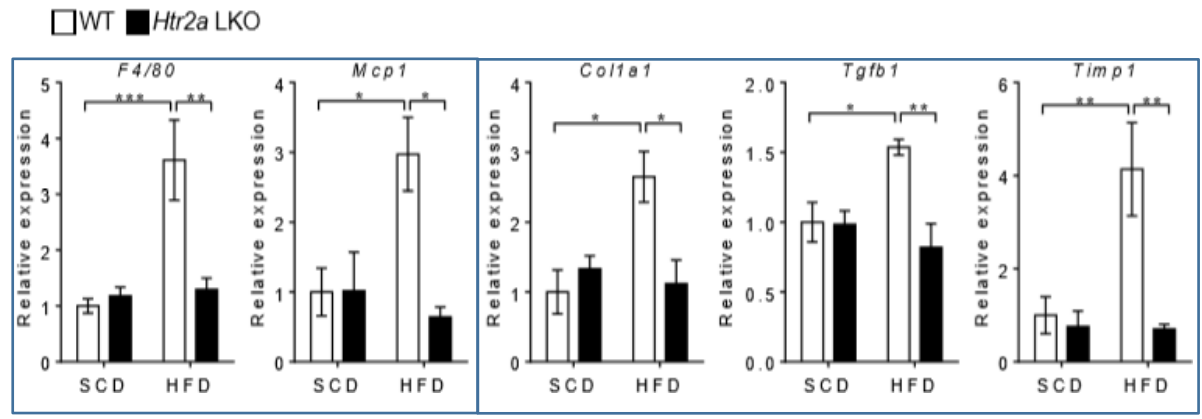


SCD-Standard Chow Diet

HFD-High Fat Diet

Htr-5HT (serotonin) receptor

• Reduction in inflammation and fibrosis-related gene expression in the liver transcriptome



These results clearly indicates that **HTR2a** is important for hepatic steatosis

**Inflammation marker genes**

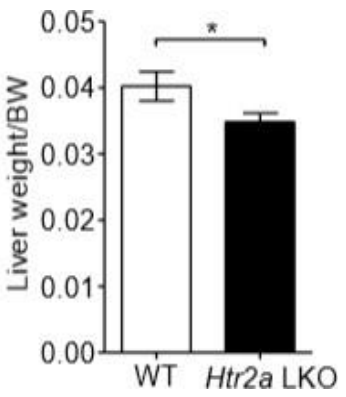
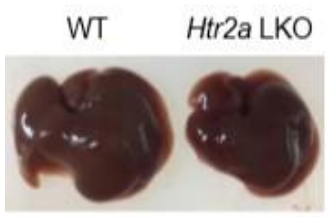
**F4/80**-Macrophage marker  
**MCP1**-Monocyte chemoattractant protein1

**Fibrosis marker genes**

**Col1**-Collagen 1  
**Tgfb1**-Transforming growth factor beta 1  
**Timp1**-tissue inhibitor of matrix metalloproteinase 1

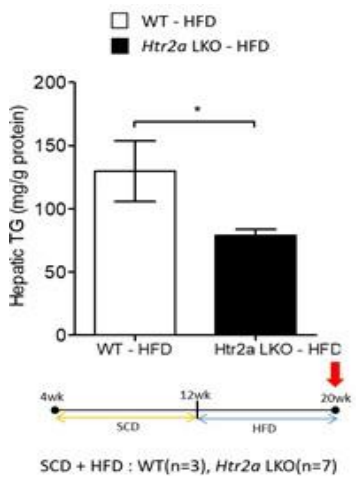
• Reduction in hepatic steatosis and the NAFLD activity score

**Liver Weight**

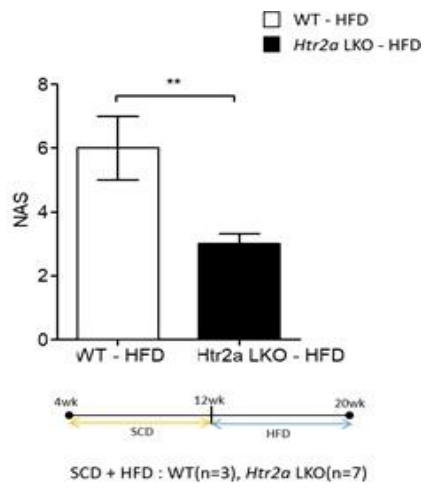


**WT**-Wild type  
**HFD**-High Fat Diet  
**Htr**-5HT (serotonin) receptor  
**LKO**-limited knock out  
**NAFLD**-Non-alcoholic fatty liver disease

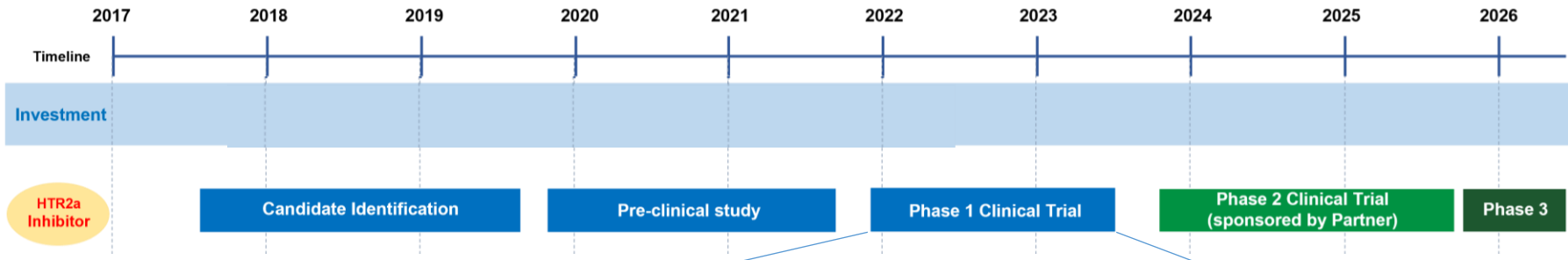
**Hepatic Triglycerides**



**NAFLD activity score**



Code	<i>In vitro</i> (cellular assay)	Solubility/PPB/ CLogP	Chemical stability	Hepatocyte stability (3 hrs)	Plasma stability
<b>GM60106</b>	<b>14 nM</b>	1.3 mg/mL pH = 6.8/ 97.5 % (m) 96.7 % (r) 97.1 % (h) /3.16	99.8 % (25 °C, 3 weeks) 99.6 % (60 °C, 3 weeks) No form change	94 % (human) 88.5 % (dog) 84.6 % (monkey) 68.9 % (rat) 75.0 % (mouse)	>99.9 % (m) >99.9 % (r) >98.6 ± 11.7 % (h) (% remaining after 4 hrs)
<b>Cytotoxicity (IC<sub>50</sub>)</b>	<b>AMES</b>	<b>Acute Toxicity</b>	<b>CYP inhibition (at 10 μM)</b>	<b><i>In vivo</i> PK (rat)</b>	<b><i>In vivo</i> PK (dog)</b>
VERO > 100 μM HFL-1 > 100 μM L929 > 100 μM NIH3T3 > 100 μM CHO-K1 > 100μM	Negative	LD <sub>50</sub> > 1000 mpk	1A2: < 1 % 2C9: 3.17 % 2C19: 6.83 % 2D6: 26.3 % 3A4: 17.6 %	IV (5mpk) Oral (10mpk) T1/2: 4.14 h AUC: 2.88 ug.h/ml CL: 2.82 L/h/kg V: 8.86 L/kg <b>BA 61 %</b>	IV (5mpk) Oral (5mpk) T1/2: 8.6h AUC: 19.11 ug.h/ml CL: 0.42 L/h/kg V: 4.36 L/kg <b>BA 73 %</b>
<b><i>In vivo</i> efficacy in normal with high fat</b>	<b><i>In vivo</i> efficacy in DIO mice</b>	<b>NASH in MCD diet in db/db mice</b>	<b>STAM mice</b>	<b>Dog telemetry</b>	<b>BBB permeability</b>
Body weight gain reduction, Reduced fat accumulation 5, 10 mpk	Body weight gain reduction, Reduced fat accumulation in liver 5,10 mpk	Reduced inflammation, fibrosis and fat accumulation in liver 5 mpk	Reduced inflammation and fibrosis in liver 5, 10 mpk	Cardiovascular Radiotelemetry Assessment in Conscious Dogs 50,100, 200 mpk (No change)	BQL (below lower limit) in Brain based on tissue distribution of [14C]-GM-60106



ClinicalTrials.gov

<https://clinicaltrials.gov/ct2/show/NCT05517564>

U.S. National Library of Medicine  
**ClinicalTrials.gov**  
 Find Studies | About Studies | Submit Studies | Resources | About Site | PRS Login

Home > Search Results > Study Record Detail Save this study

Trial record 1 of 1 for: jd bioscience  
 Previous Study | [Return to List](#) | Next Study

**First-in-Human Study of GM-60106 in Healthy Adults and Otherwise Healthy Adults With an Increased Body Mass Index and Markers of Non-Alcoholic Fatty Liver Disease**

ClinicalTrials.gov Identifier: NCT05517564

Recruitment Status: Enrolling by invitation  
 First Posted: August 26, 2022  
 Last Update Posted: August 26, 2022

The safety and scientific validity of this study is the responsibility of the study sponsor and investigators. Listing a study does not mean it has been evaluated by the U.S. Federal Government. Read our [disclaimer](#) for details.

**Sponsor:** JD Bioscience Inc.  
**Collaborator:** Novotech (Australia) Pty Limited  
**Information provided by (Responsible Party):** JD Bioscience Inc.

SAD-Single Administration Dosing  
 MAD-Multiple Administration Dosing

- Since NASH is a multifaceted disease caused by various cellular and signaling events, combination therapies that can target multiple cellular signaling pathways might be crucial for developing effective drugs for NASH.
- Hence, diverse combination studies are at the clinical stage.

## We are seeking opportunities to develop additional combination therapies.

“We expect that treatment response can be enhanced by **strategically combining multiple agents targeting distinct metabolic pathways** to not only achieve resolution of NASH and improvement in fibrosis but also a reduction in cardiovascular disease risk and future risk of cancer.”

Loomba and Shulman Cell, 2021

1. Cenicriviroc (CCR2/5 receptor inhibitor, Allergan) + Tropifexor (FXR agonist, Novartis)
2. Semaglutide (GLP-1 agonist, Novo Nordisk) + Cilofexor (FXR agonist, Gilead)  
+ Firsocostat (ACC inhibitor, Gilead)
3. Firsocostat (ACC inhibitor, Gilead) + Fenofibrate (PPAR-α, Abbvie)
4. Cilofexor (FXR agonist, Gilead) + Firsocostat (ACC inhibitor, Gilead)  
+ Selonsertib (ASK1 inhibitor, Gilead)
5. Licogliflozin (SGLT1/2 inhibitor, Novartis) + Tropifexor (FXR agonist, Novartis)
6. PF-05221304 (ACC1/2 inhibitor, Pfizer) + PF-06865571 (DGAT2 inhibitor, Pfizer)

CCR-Chemokine Receptor  
FXR-Farnesoid X Receptor  
GLP-glucagon-like peptide  
ACC-Acetyl-CoA Carboxylase

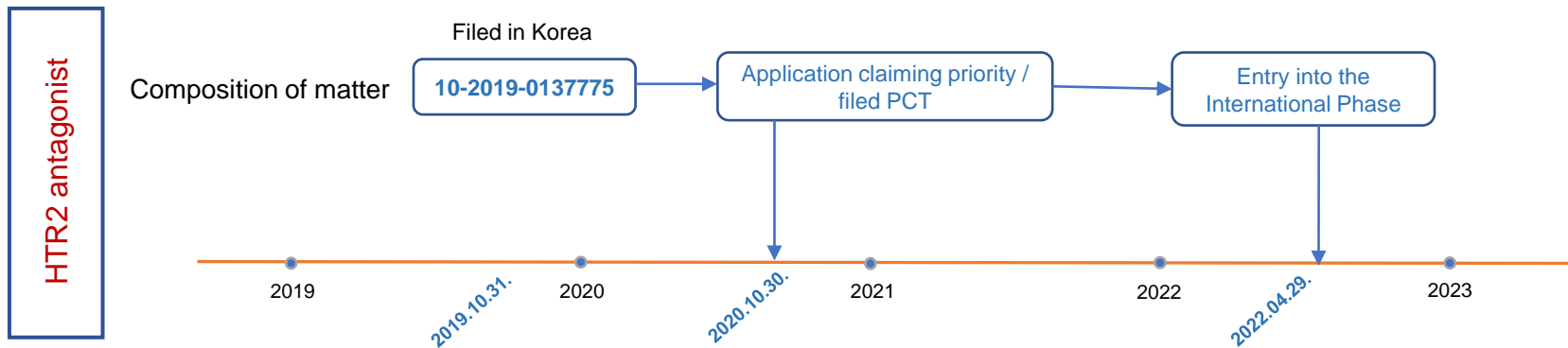
PPAR-Peroxisome Proliferator-Activated Receptor  
ASK1-Apoptosis Signal-regulating Kinase  
SGLT-Sodium-glucose Cotransporter  
DGAT- Diglyceride acyltransferase

## Intellectual property management plan

Patent for a composition of matter was filed in 2019

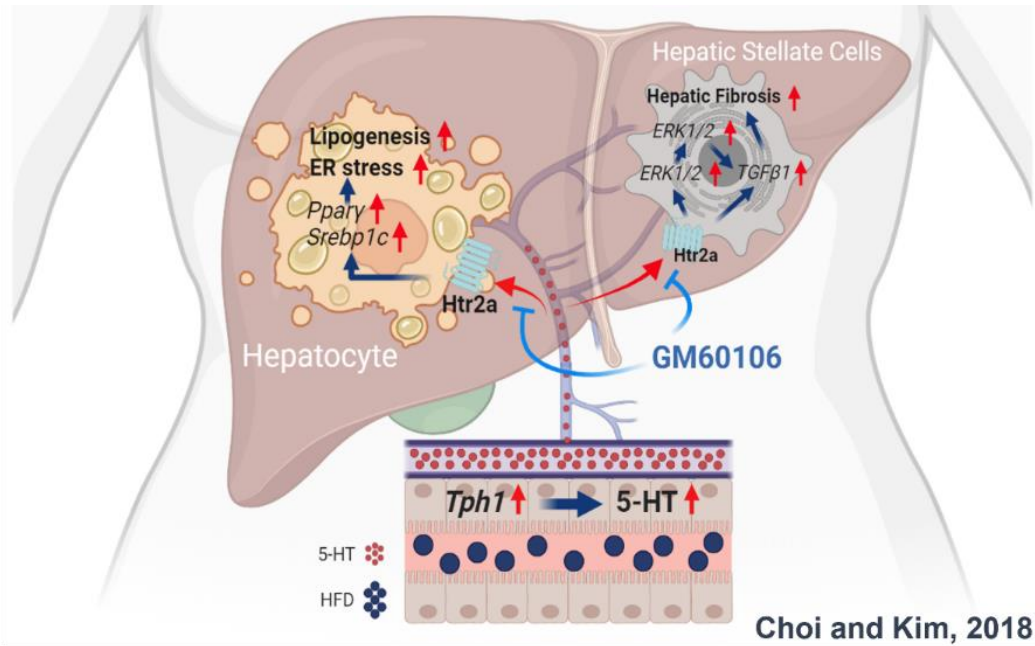
International Patents were filed in 2022

## IP Country Filing





## Summary



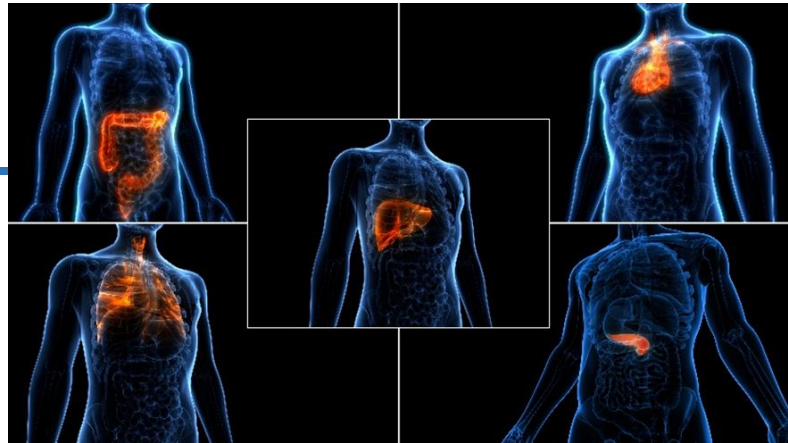
- Discovered unknown roles for HTR receptor-mediated serotonin signaling in liver, which is related to the progression of NASH and liver fibrosis.
- GM-60106 compound was synthesized a chemical compound that directly inhibits HTR2a receptors on liver cells.
- GM-60106 preclinical studies were completed showing reduction in lipid accumulation in the liver, fibrosis, and steatosis.
- Proprietary compounds are IP protected







# Inflammation



# Inflammatory Bowel Disease

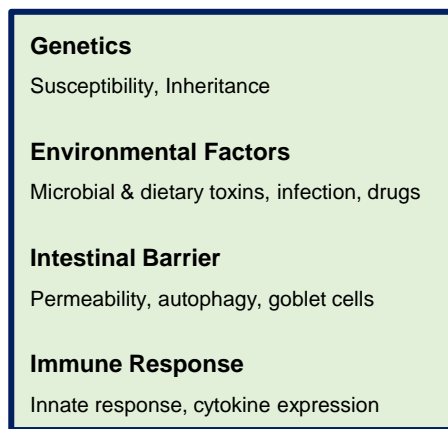
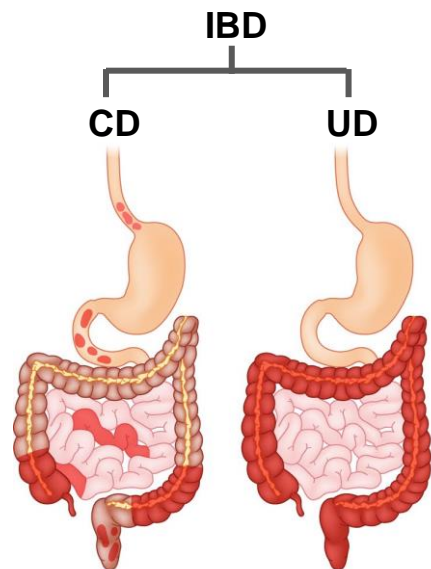


JD BIOSCIENCE



## Inflammatory Bowel Disease (IBD)

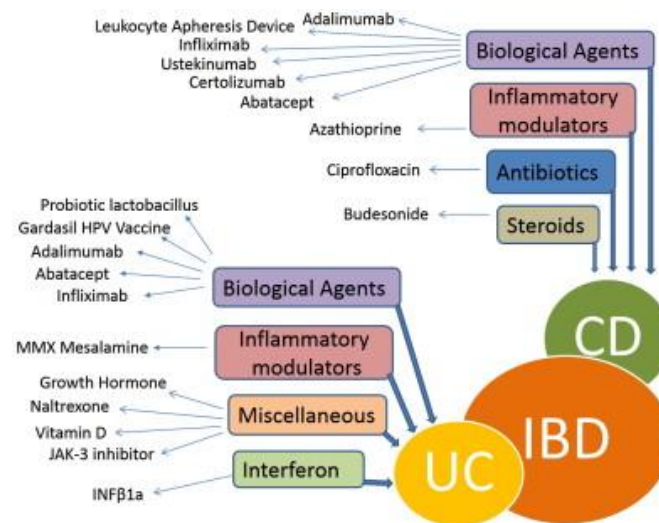
- Caused by Genetics and Environmental Factors
- Experts estimated that 1.2% of U.S. adults have IBD and the incidence rate of this population is rapidly rising.
- Pro-inflammatory cytokines, such as TNF, IL-6, produced by the activated immune cells are suggested to drive the perpetuation of inflammation and tissue damage.



Neurath 2019, Nat. Immunol.

## Unmet Need

- Unresponsive to biologics (anti-TNF $\alpha$ , anti-integrin, IL12/IL23): approximately 30% of patients
- Losing response among previous responders: up to 10%/year
- Significant infectious and neoplastic side effects with current IBD medications



Chandel 2015, Pharm. Rep.

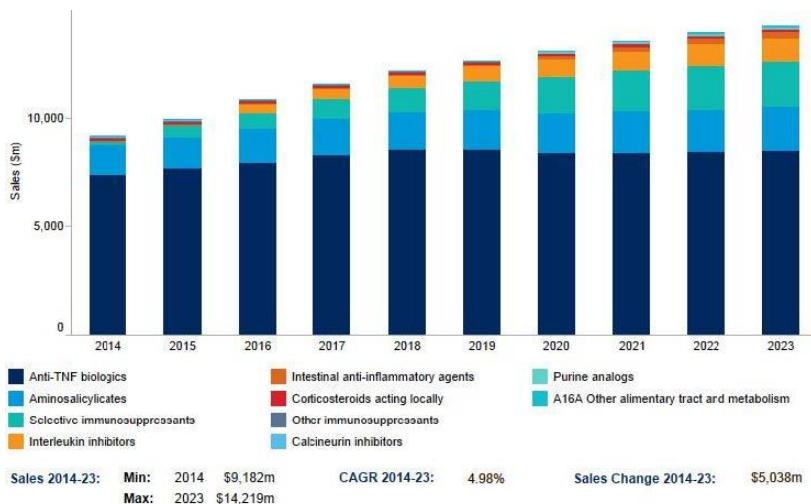
## IBD market overview

- Current market size of IBD treatment **>10 BIL USD**
- The sale volume of IBD drugs is expected to **grow rapidly**

## Licensing Deals

- Anti-TNF antibodies hold the largest market share in the IBD therapeutics market.
- While the market share of interleukin inhibitors and chemical antagonists are **increasing**.

DATAMONITOR Healthcare Jan. 2016

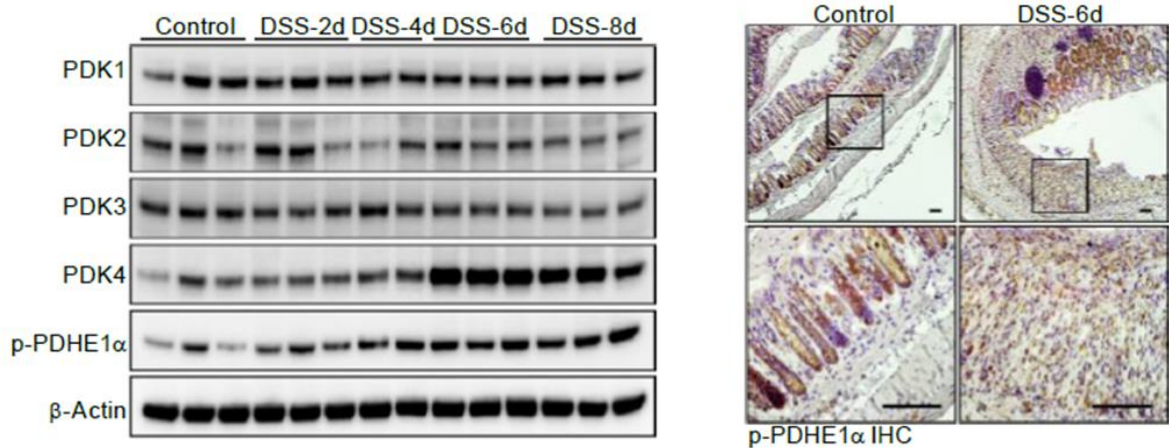


CAGR = compound annual growth rate

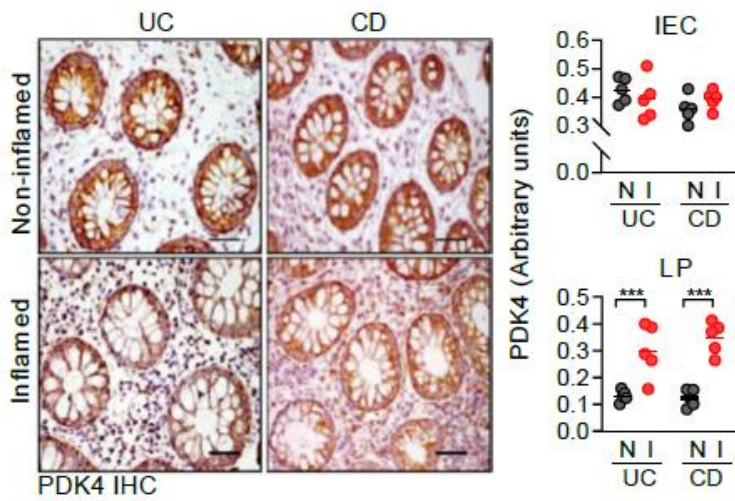
2014 to 2023 IBD drug sales in the seven countries

Year	Licensor	Licensee	Active ingredient	Stage	Licensing fees
2016. 10.	AstraZeneca	Allergan	IL-23 AB	P2	\$1.27B (upfront: \$250M)
2017. 04.	Finch Therapeutics	Takeda	FIN-524 microbiomes	P.C.	Undisclosed (upfront: \$10M)
2017. 05.	Protagonist	J&J	IL-23 inhibitor (oral peptide)	P.C.	\$0.99B (upfront: \$50M)
2017. 09.	Janssen	Provention Bio	CSF-1R antagonist, TLR3 AB	P1/P.C.	Undisclosed
2018. 12.	Bridge Bio	Daewoong Pharma	Pelliono-1 Antagonist	P1	\$40M
2019. 04.	IFM therapeutics	Novartis	NLRP3 Antagonist portfolio	P.C.-P1	\$310M ~ \$16B
2019. 07.	Alfasigma	Innovation Pharma	Brilacidin (non-corticosteroid)	P2	\$24M + upfront
2019. 09.	Prometheus Biosciences	Takeda	(>200,000) Patient samples	Discovery	\$420
2020. 05.	Gossamer Bio	Aerpio Pharma	HIF-1a stabilizer	P.C.	\$90M (upfront: \$15M)

Licensing deals of IBD assets from 2016 to 2020



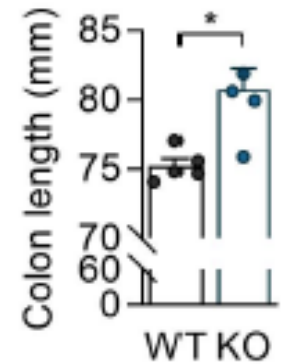
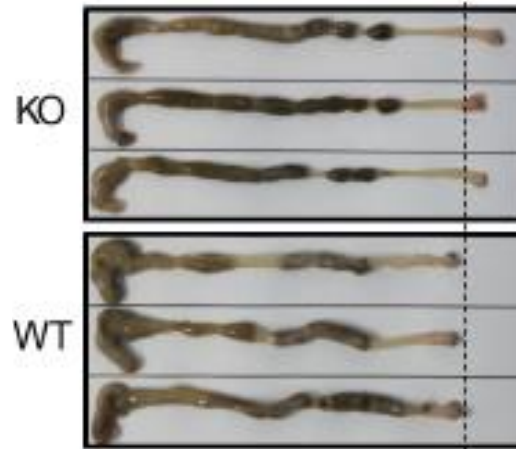
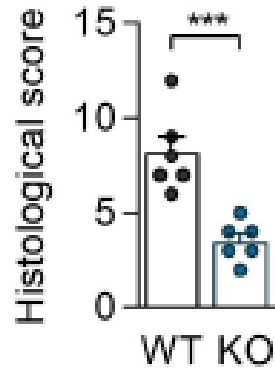
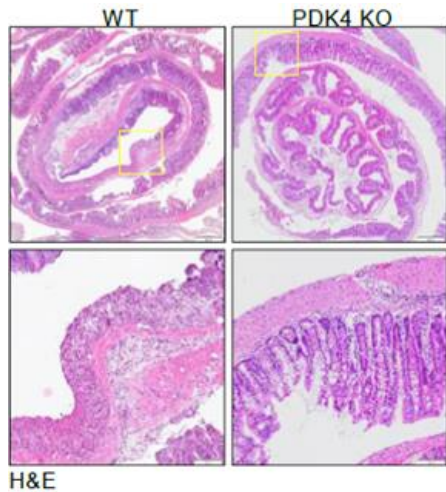
**In vivo colitis mouse model**



**PDK is over expressed in inflammatory bowel Disease**

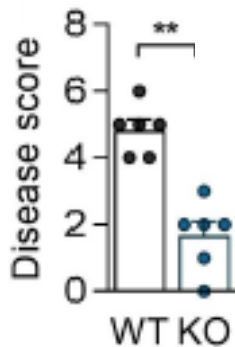
**PDK**-Pyruvate Dehydrogenase Kinase  
**PDHE1**-Pyruvate dehydrogenase E1  
**DSS**-Dextran sulfate sodium  
**CD**-Crohn's Disease  
**UC**-Ulcerative colitis

**Human patients**

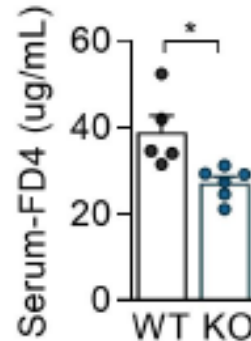


Protection of epithelial lining and reduced inflammation

Colon length was not shortened



Disease scores decreased

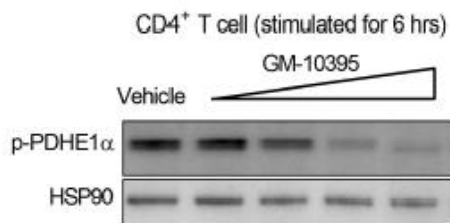


Permeability decreased

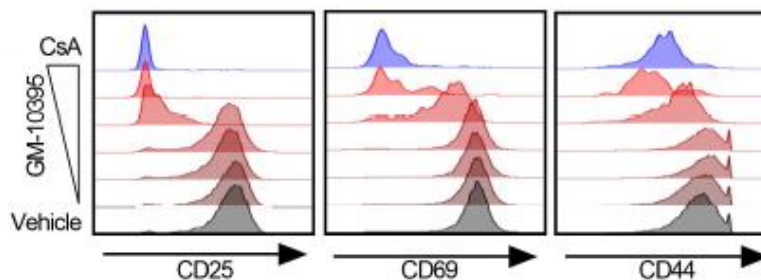
Deletion of PDK4 from CD4+ T cells protects against DSS-induced colitis

WT-Wild Type  
 KO-Knock out  
 FD4-fluorescein isothiocyanate dextran  
 DSS-Dextran sulfate sodium

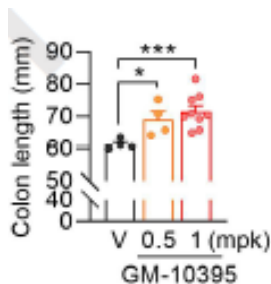
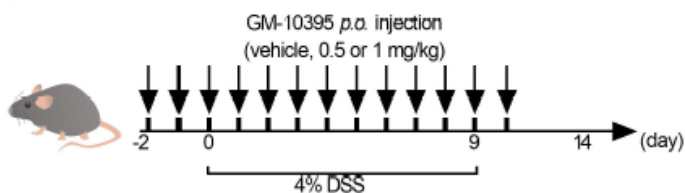




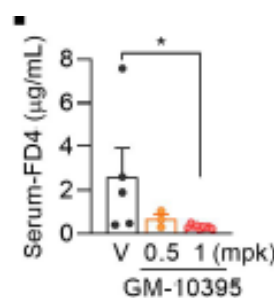
GM-10395 reduces p-PDHE1 in a dose dependent manner



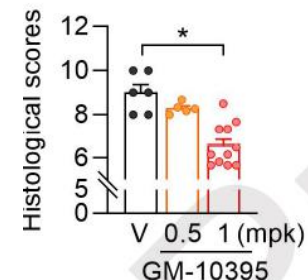
T cell activation markers reduced in a dose dependent manner



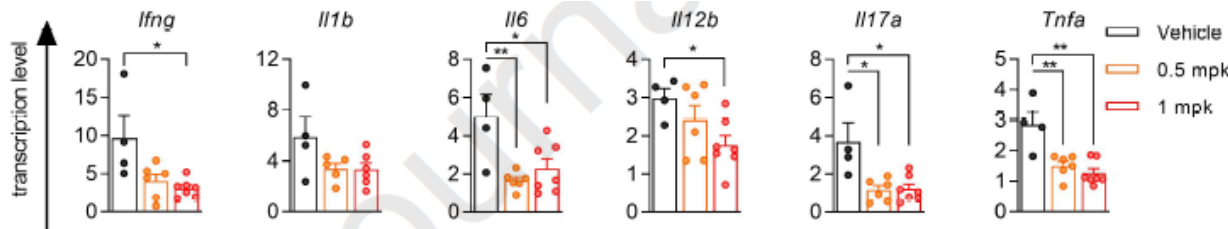
Colon length remained normal



Permeability decreased



Histological Scores improved

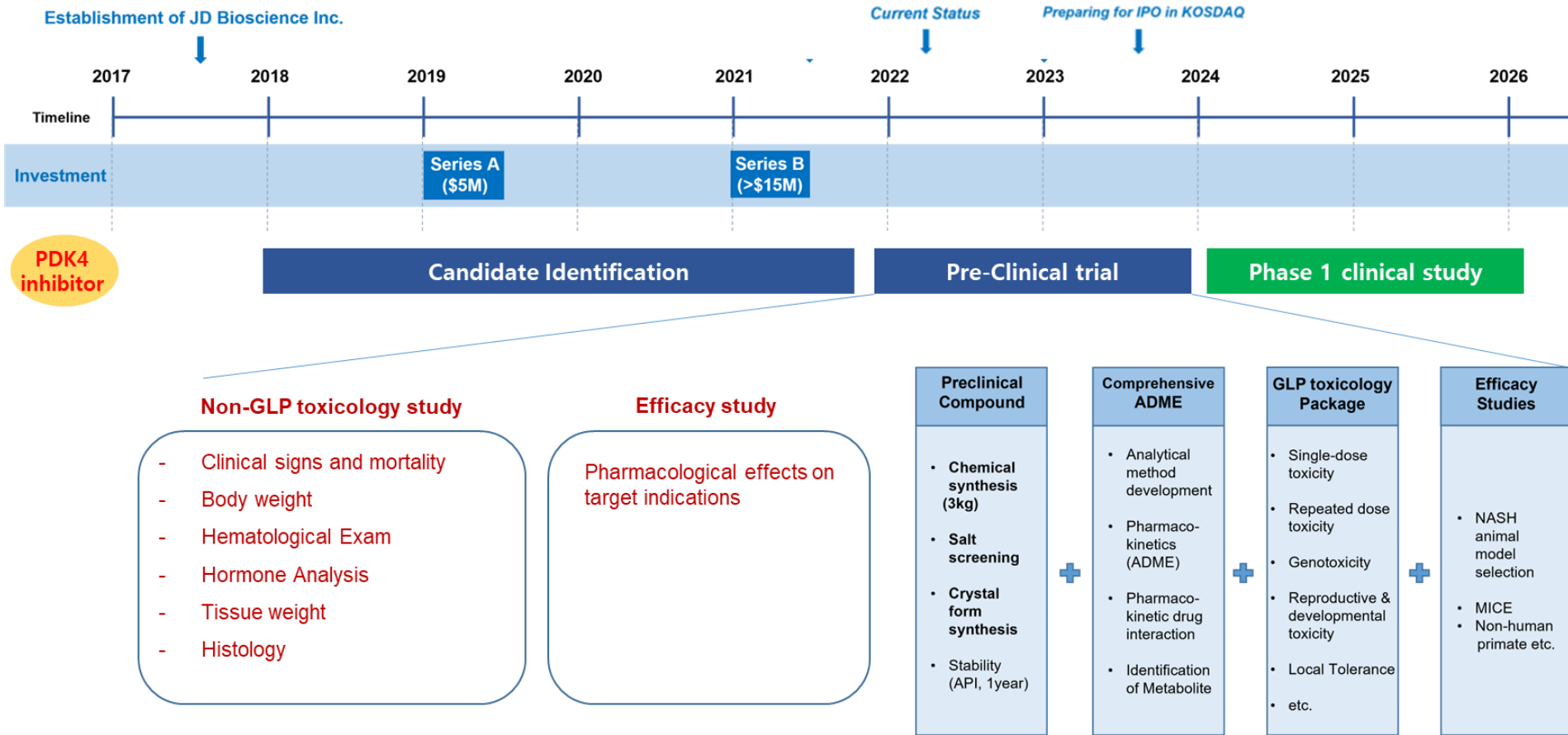


Inflammation markers reduced

WT-Wild Type  
 KO-Knock out  
 FD4-fluorescein isothiocyanate dextran  
 DSS-Dextran sulfate sodium

### Plan for pre-clinical and clinical study

- Non-GLP toxicology study in progress
- Will start GLP in Q1 of 2023





Code	Inhibitor Class	In vitro (cellular Assay)	Recovery of mitochondria function		
GM-1039506	Allosteric inhibitor	Inhibition of PDHE1 $\alpha$ Phosphorylation 159nM(IC <sub>50</sub> )	<p>GM10395 recovered Mitochondria function with Dose dependent manner</p>		
CYP inhibition (IC <sub>50</sub> $\mu$ M)	HERG inhibition	PPB	Plasma stability (4hr incubation)	AMES test	Acute toxicity
IA2: 33.69 2C9: 12.64 2C19: 12.18 2D6: 7.94 3A4: 7.72	32.8% at 10 $\mu$ M	99.3%(m) 99.5%(m)	Human 89%	Negative	LD50> 1000mpk
In vivo PK	In vivo IBD study	In vivo Anti-cancer efficacy	In vivo efficacy (anti-diabetes)	Structure	
IV(5mpk) Ora (10mpk) T1/2: 5.15h AUC:1.76 $\mu$ g/ml(IV) BA: 48%	Improved histological Score colon length In vivo at 1mpk	Reduced tumor Volume In xenograft mice At 10mpk dose	Glucose AUC reduction (OGTT) Oral administration		

### Intellectual property management plan

Patent for a composition of matter was filed in 2022

- Will fill international patents in 2024

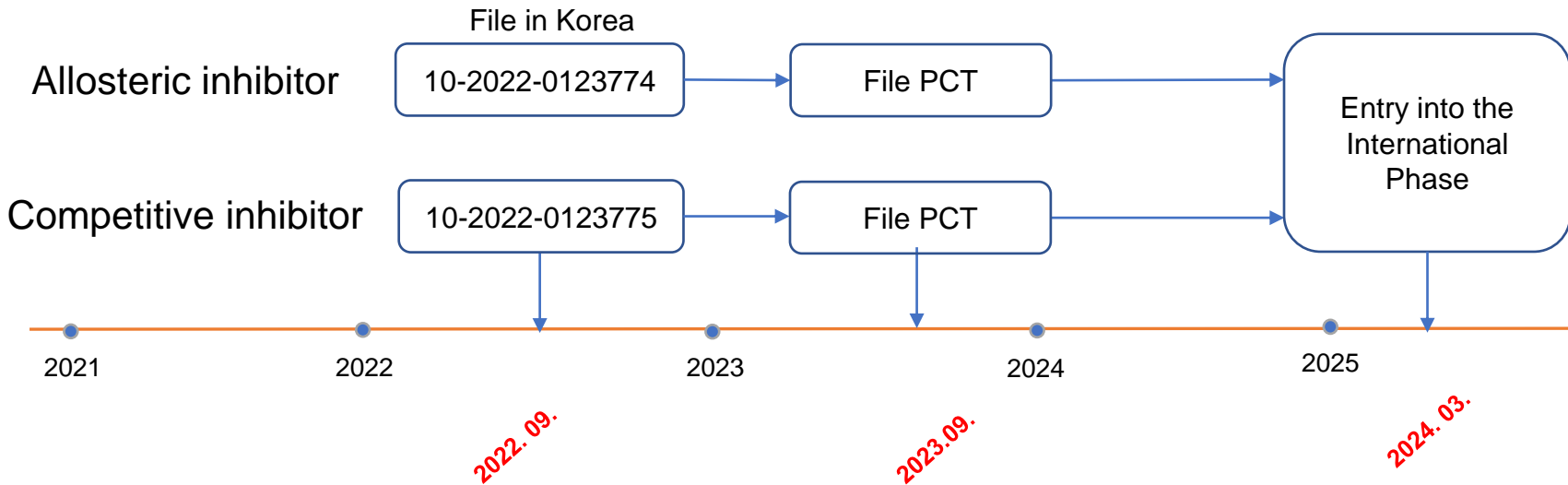
Backup compound was also prepared

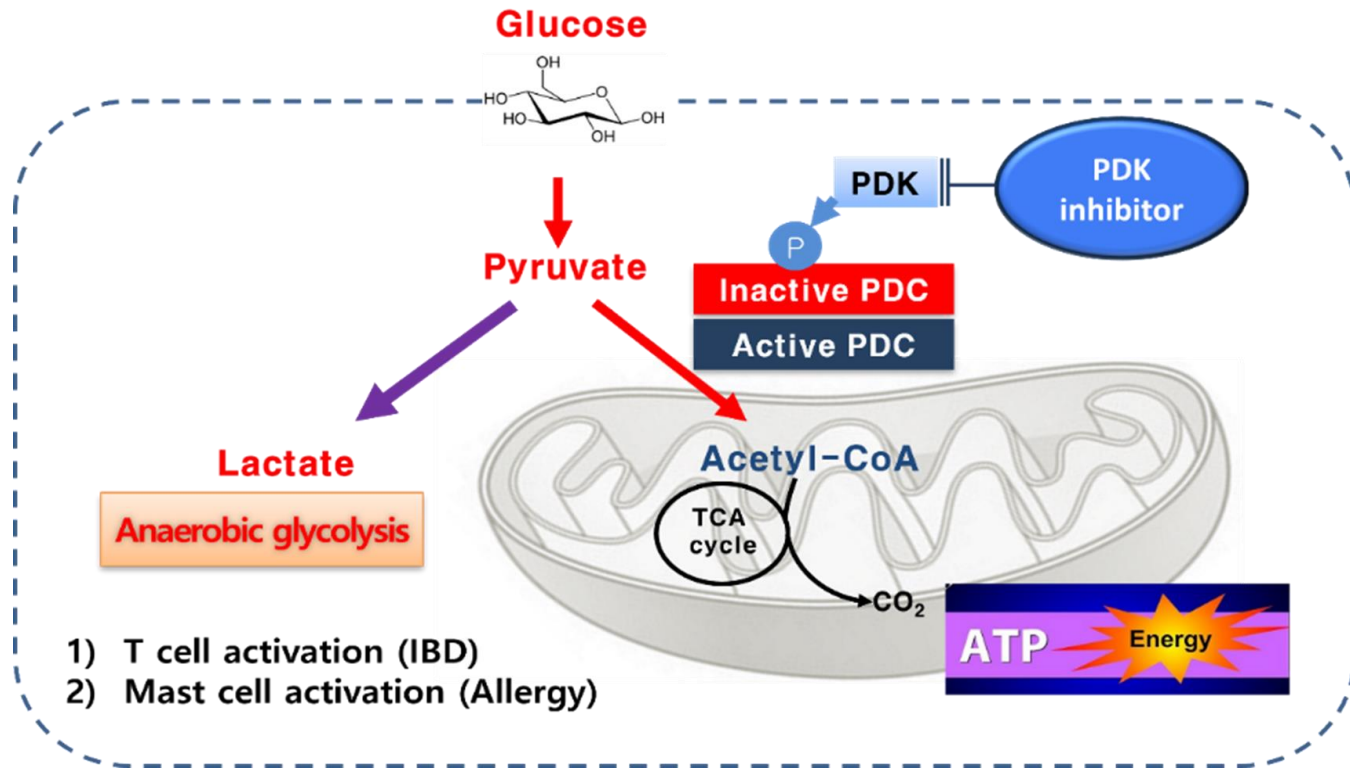
- Patent was filed in 2022.

### Planned IP Country Filing



PDK antagonists





- 1) T cell activation (IBD)
- 2) Mast cell activation (Allergy)

## Summary

Hoyul Lee Cell Mol Gastroenterol Hepatol, 2022

- Discovered unknown roles for PDK in CD4+ T cells , which is related to the progression of IBD.
- GM-10395 compound directly inhibits PDK signaling in CD4+ T cells.
- GM-10395 preclinical studies show a reduction in colitis.
- Proprietary compounds are IP protected.

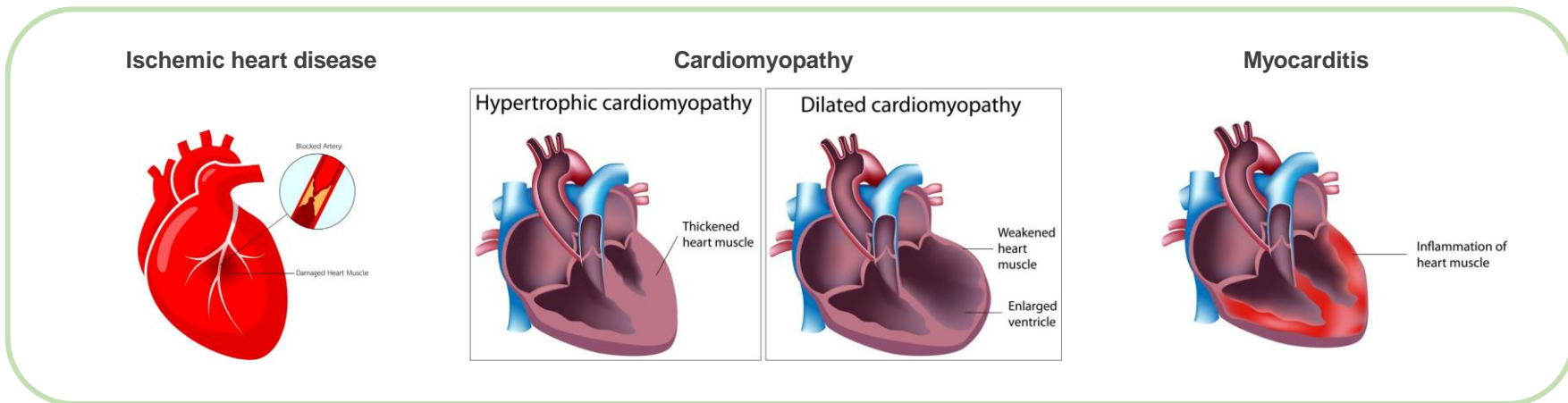




## Heart



- Heart disease, a leading cause of death globally, can be categorized into ischemic heart disease, cardiomyopathy, and myocarditis.
- Ischemic heart disease is involved in the reduction of blood flow due to the accumulation of fatty deposits in the coronary arteries. Cardiomyopathy, including hypertrophic or dilated cardiomyopathy, is a disease of the heart muscle that can occur due to various risk factors. Finally, myocarditis is characterized by the inflammation of the heart muscle, which often occurs due to a viral infection. All of these can ultimately lead to fatal heart failure.

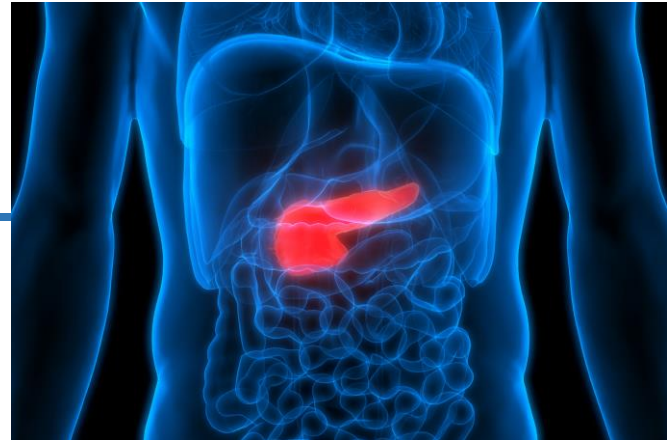


- Different types of medication are available to treat heart disease, for example, cholesterol-lowering medications, beta-blockers, nitroglycerin, and calcium channel blockers. However, none of these can rescue the function of cardiomyocytes once heart failure is in progression.

**JDB is developing a novel drug candidate for heart disease that can rescue heart function at a cellular level, and can eventually help improving heart function**

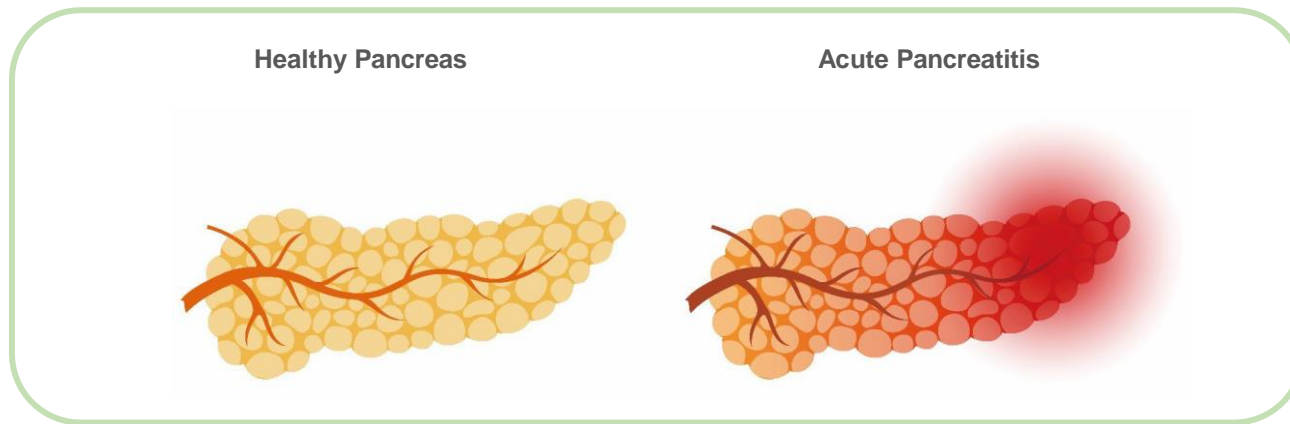


## Pancreas



## Risk factor and causes of Pancreatitis

- Acute pancreatitis (AP) is characterized by the sudden inflammation of the pancreas and occurs when digestive enzymes within the pancreas are abnormally activated. The main risk factors of AP are gallstones, which make up 40% of cases, and alcohol misuse, which makes up 30% of cases. Recent findings also indicate that type 2 diabetes or smoking can increase the risk of non-gallstone-related AP.
- AP was the second-highest cause of total hospital stay and the fifth leading cause of in-hospital death in the USA in 2015. However, to date, no specific causal treatment for AP is available. Instead, supportive care, such as pain control, is the only available treatment.

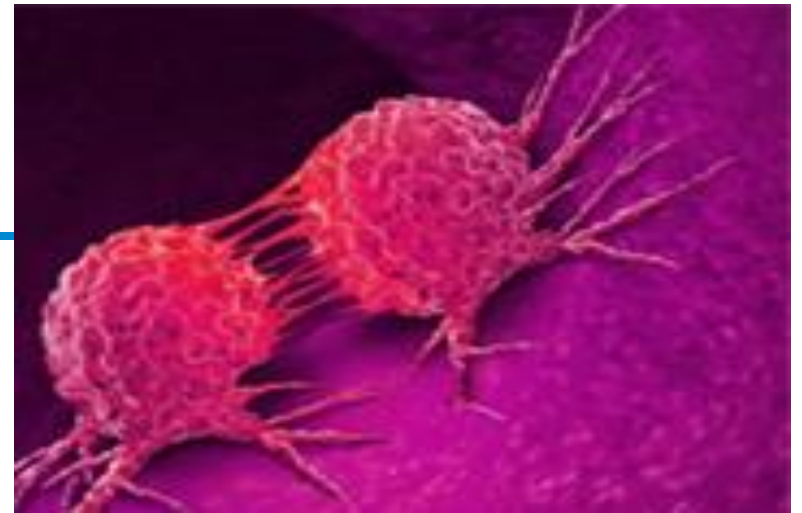


**JDB is developing a novel drug candidate for acute pancreatitis that can effectively reduce inflammation of the pancreas by modulating mitochondrial functions in pancreatic cells.**



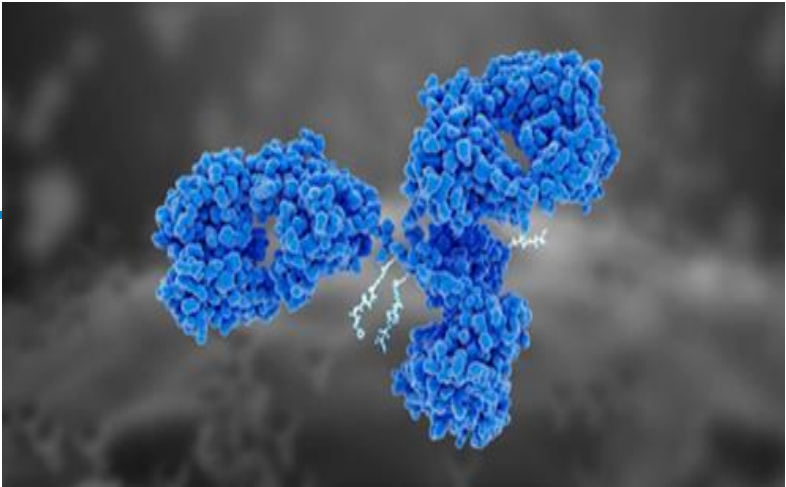
- 1 ADC
- 2 PROTAC

## Cancer

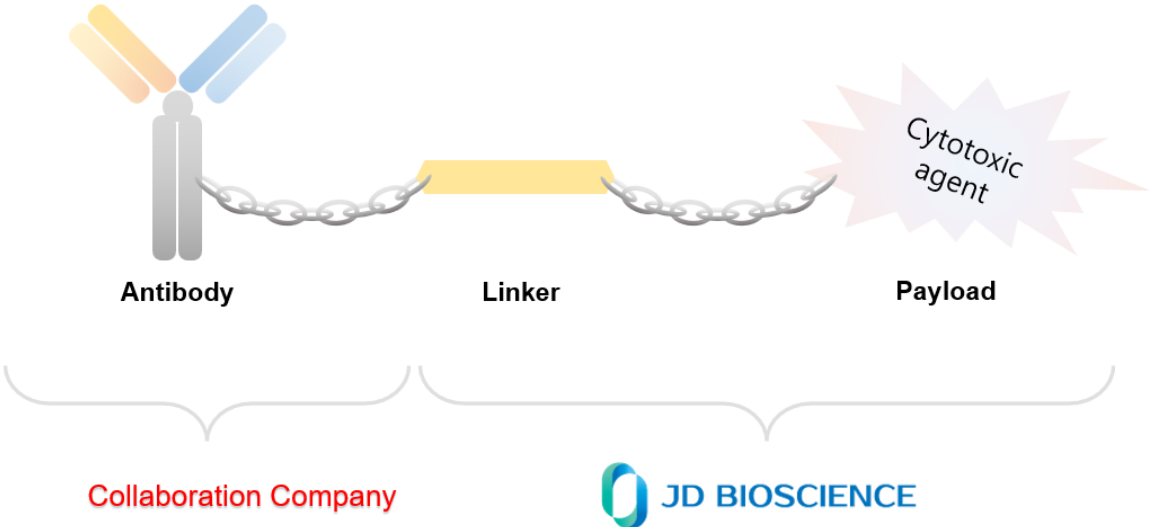




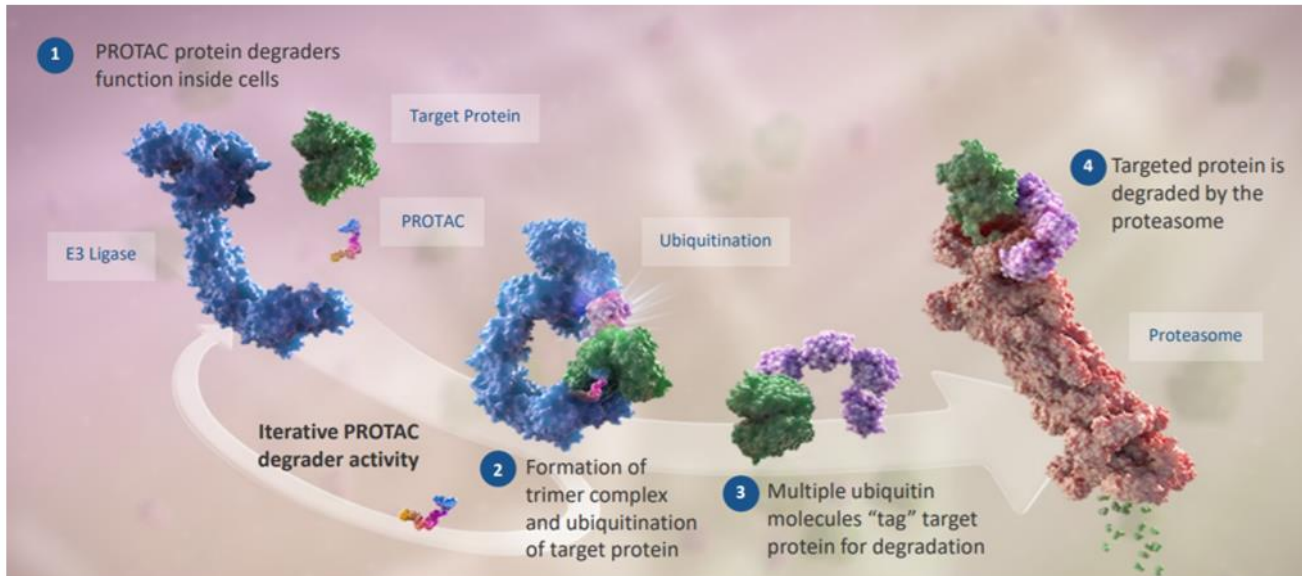
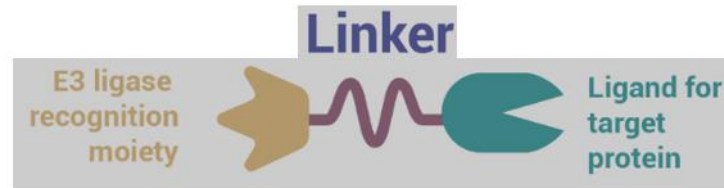
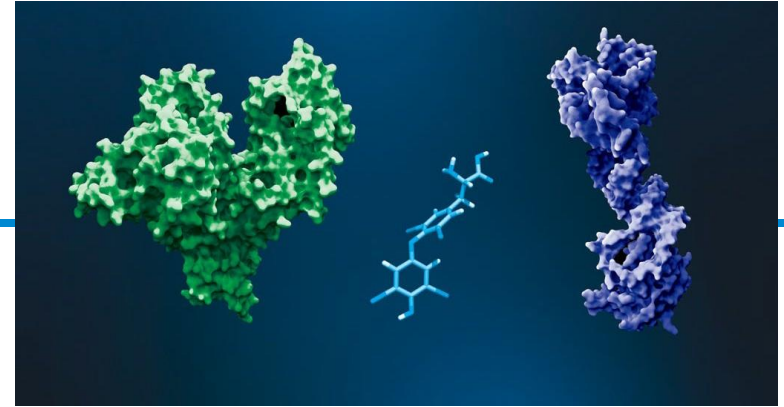
# ADC



## Antibody-Drug Conjugates (ADCs)



# PROTAC



# JD Bioscience's Strategic Alignment

## Licensing out GM60106, GM-10395

- Exclusive and/or Territorial rights



## Partnership to lead metabolic disease & inflammatory disease market



### GM-60106

- ✓ Innovative First-in-Class Technology: HRT2a
- ✓ Mechanism for NASH-related fibrosis
- ✓ Safe, NO CNS-mediated safety issues

### GM-10395

- ✓ Innovative First-in-Class Technology: PDK
- ✓ Mechanism for IBD inflammation
- ✓ NO adverse side effects in animal model

# THANK YOU



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