

Theranexus

SHIFTING THE LINES AGAINST CENTRAL  
NERVOUS SYSTEM DISORDERS

EURONEXT GROWTH



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## Your contacts



**Franck MOUTHON**

Co-founder and Chairman  
and CEO

- Franck Mouthon holds a degree in life sciences from the École Normale Supérieure
- Joined the Life Sciences Department of the French Alternative Energies and Atomic Energy Commission (CEA) in 1995
- Founded CEA spin-off Theranexus in March 2013 with Mathieu Charvériat
- Board member of France Biotech



**Mathieu CHARVÉRIAT**

Deputy CEO and Co-  
founder

- Mathieu Charveriat holds degrees from the Ecole Polytechnique and Mines ParisTech
- PhD in neurosciences from the Université Pierre & Marie Curie
- Joined the neurosciences research laboratory of CEA in 2009
- Founded CEA spin-off Theranexus in March 2013 with Franck Mouthon



**Julien VEYS**

CBDO

- Julien Veys holds a master's degree in biochemistry and in information and intelligence management from Aix-Marseille University
- CBDO at Trophos where he played a key role in its sale to Roche laboratories for €470 million
- Joined Theranexus in 2016



**Thierry LAMBERT**

CFO

- Thierry Lambert holds a degree in business administration from Birmingham University and an MBA from INSEAD
- 4 years of experience in syndicated and corporate finance
- 5 years as Chief Financial Officer for listed companies Naturex and then Safe Orthopaedics
- Joined Theranexus in 2017



# CONTENTS

1

**THERANEXUS: SHIFTING THE LINES AGAINST CENTRAL NERVOUS SYSTEM DISORDERS**

2

A DISRUPTIVE APPROACH TO THE CENTRAL NERVOUS SYSTEM

3

THE CAPACITY TO GENERATE DRUG CANDIDATES TO RESPOND TO UNMET NEEDS WITH THREE DEVELOPMENTS ALREADY UNDERWAY, A BLOCKBUSTER POTENTIAL

4

AN AGILE ORGANIZATION WITH CAREFULLY-MANAGED FINANCING NEEDS

5

SHORT AND MID-TERM VALUE CREATION BACKED BY AN INNOVATIVE PLATFORM

6

TERMS AND CONDITIONS OF THE OFFERING



## WHO WE ARE

A French biotech that specializes in  
the central nervous system

### A DISTINCTIVE *BUSINESS MODEL*

- **AN ATTRACTIVE PROFILE** within the Biotech sector
- Higher likelihood of **SUCCESS**
- **FASTER** access to the market...
- ... at **LOWER COSTS**

### AN ESTABLISHED PORTOFOLIO

- **3 DRUG CANDIDATES\***
- **BLOCKBUSTER POTENTIAL**
- **STRATEGIC MARKETS** for pharmaceutical laboratories

\* 1 in phase II and 2 ready to enter into clinical development



## CENTRAL NERVOUS SYSTEM DISORDERS: A PUBLIC HEALTH PRIORITY

Central Nervous System disorders are one of the **1<sup>st</sup> causes of disability around the world**

More than **one billion** <sup>[1]</sup> **people** are affected, i.e. **nearly 1 person in 5**

The cost in treating these disorders around the world is estimated at **more than €2,000 billion per year**, i.e. the equivalent of the gross domestic product of a country like France <sup>[1]; [2]</sup>



Sleep disorders  
Alzheimer's disease  
Parkinson's disease  
Neuropathic pain  
Dementia  
Epilepsy  
Psychiatric disorders  
Multiple sclerosis  
...

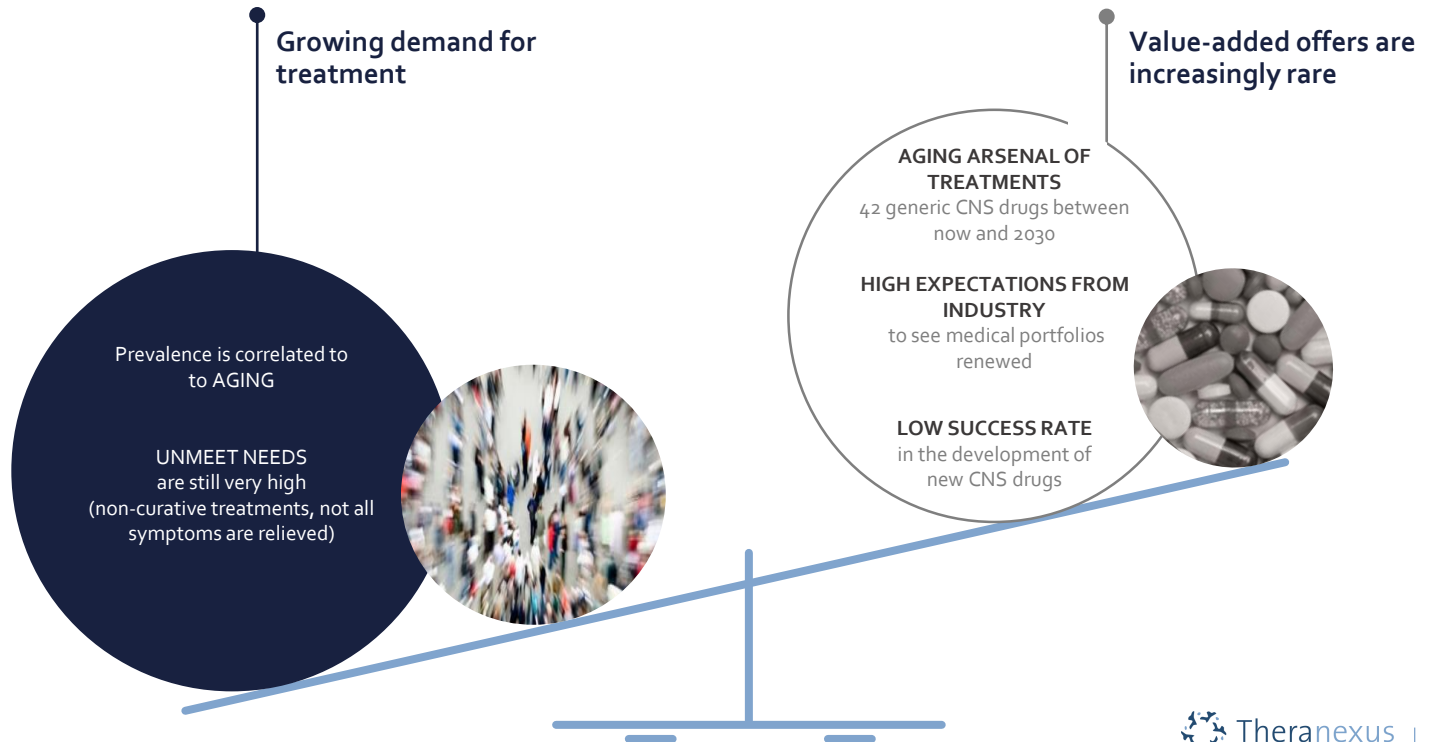
**Unmet medical needs for many major conditions**

[1] WHO / Neurological Disorders: Public Health Challenges 2015

[2] Source: Gustavsson et al., Eur Neuropsychopharmacology 2011



# INDUSTRY INNOVATION FILTERS WHILE MEDICAL NEEDS ARE DRAMATICALLY GROWING





## BREAKTHROUGH INNOVATION AT THE HEART OF THE THERANEXUS APPROACH



### CNS DRUGS:

**1** molecule for **1** action on **1** family of cells (neurons)



### THERANEXUS DRUG CANDIDATES:

**2** separate molecules combined for **2** actions on **2** families of cells (neurons + glial cells)



**INNOVATION:** COMBINATIONS OF MOLECULES TO OPTIMIZE THE EFFICACY OF STANDARD OF CARE TREATMENTS





# THERANEXUS PLATFORM: PROPRIETARY, SCALABLE & VERSATILE

## CNS DRUGS

### DRUG SEEN AS THE 1<sup>ST</sup> LINE-TREATMENT

Condition with a strong unmet need for improved efficacy (with the current arsenal of therapeutics)

*CNS drugs  
1<sup>st</sup> line- treatment  
for CNS\* conditions*



Action on the neuron

## GLIAL CELL MODULATOR

### DRUG REPOSITIONED AS A MODULATOR

Optimization of the glial network



*Theranexus library of  
27 glial cell  
modulators*

THN

XXX



## 3 major advantages



**Ambition to achieve superiority at all stages (*Best in class*)**



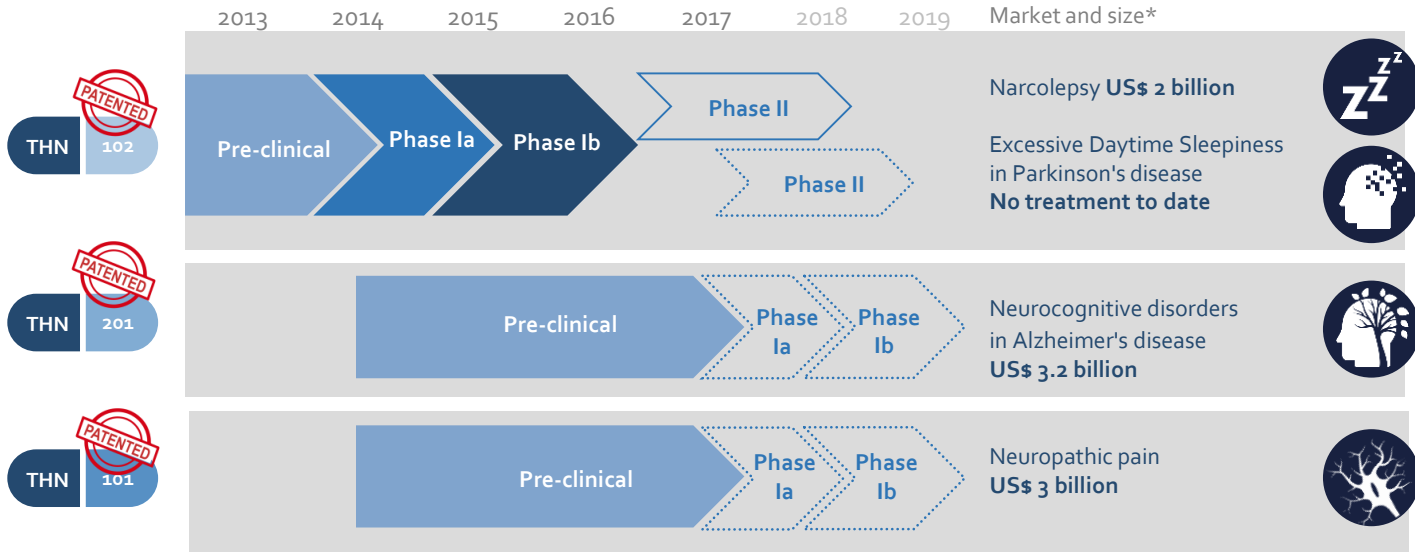
**New monopoly on use (patent)**



**Higher probability of success, greater flexibility and shorter time-to-market**



# 3 DRUG CANDIDATES IN JUST 4 YEARS



Phase in progress — Next phase .....

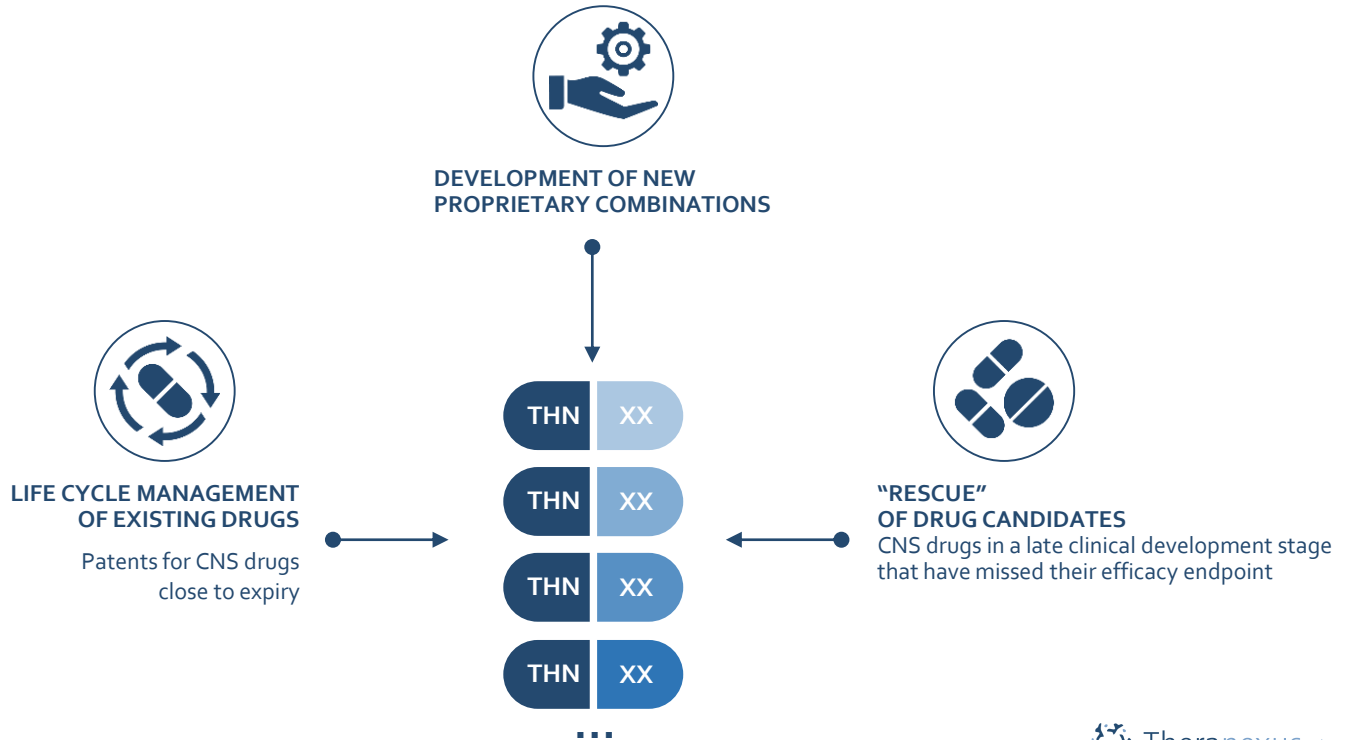
THN xx

**OUR AMBITION: STEADY RELEASE OF NEW DRUG CANDIDATES IN THE YEARS AHEAD**

\*All published figures are taken from Datamonitor reports (NP, dementia) and company annual reports (Jazz Pharmaceuticals, Teva)  
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# A GLOBAL STRATEGY ADAPTED TO THE NEEDS OF PHARMACEUTICAL COMPANIES





# CONTENTS

1

THERANEXUS: SHIFTING THE LINES AGAINST CENTRAL NERVOUS SYSTEM DISORDERS

2

A DISRUPTIVE APPROACH TO THE CENTRAL NERVOUS SYSTEM

3

THE CAPACITY TO GENERATE DRUG CANDIDATES TO RESPOND TO UNMET NEEDS WITH THREE DEVELOPMENTS ALREADY UNDERWAY, A BLOCKBUSTER POTENTIAL

4

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5

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6

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## TWO MAJOR FAMILIES OF CELLS IN THE CENTRAL NERVOUS SYSTEM (CNS)

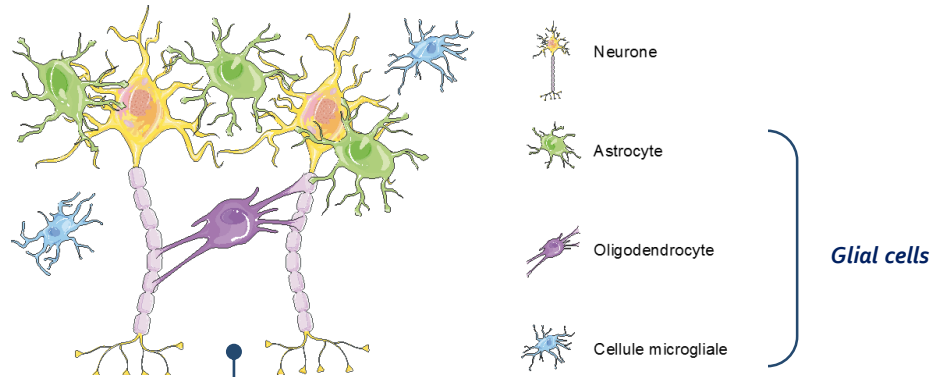
### Neurons:

Cellular components that control our emotions, our mental activity, our memory, our senses, the way we feel pain, and even our motricity, etc.

### Glial cells:

Able to respond quickly to neuron needs by providing the molecules needed for their metabolism

**Astrocytes** play a key role in neuronal communication



**NEURONS DO NOT WORK INDEPENDENTLY BUT AS PARTS OF A CELLULAR CONTEXT**



# A DISCOVERY STEMMING FROM 10 YEARS OF RESEARCH

## NEURON CENTRIC APPROACH

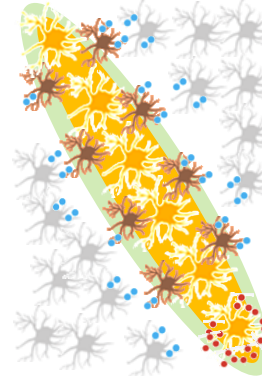
Suboptimal glial network  
Limits the efficacy of the CNS drug



Neuronal and glial network with outside stimulation (psychotropic drug) leading to the over-development of the glial network (suboptimal) which limits the efficacy of the drug

## Theranexus

Glial network close to natural state  
Improves the efficacy of the CNS drug



Neuronal and glial network with outside stimulation and connexin modulator (drug candidate)



OPTIMIZED SIZE FOR THE GLIAL NETWORK (ASTROGLIAL CELLS) WHICH IS FUNDAMENTAL FOR REGULAR NEURONAL ACTIVITY



# TRANSFORMING RESEARCH TO INNOVATION

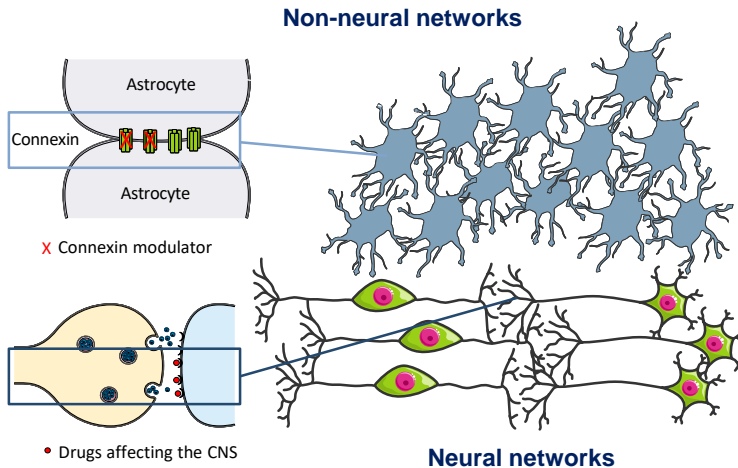
## PRINCIPLE:

Enhance neuron action with the modulation of glial cells

## APPLICATION:

Combine medication that targets neurons with a medication that optimizes neuroglial interaction

Connexin modulator



The modulation of glial connexins optimizes the neuroglial interface to **improve the way in which neurons react to CNS drugs**

*Giaume et al., Nat Rev Neurosci, 2010*

*Rouach et al., Science, 2008*

*Picoli et al., J Biomol Screen, 2012*

*Duchêne et al., Sleep, 2016*

*Charvériat et al. Front Cell Neuro, 2017*

CNS drug  
(Psychostimulant, antidepressant, anxiolytic, etc.)

Action on neurotransmitter systems

**THE CHALLENGE: MAXIMISE NEURON RESPONSE TO EXISTING DRUGS BY TARGETING THE ENVIRONMENT**



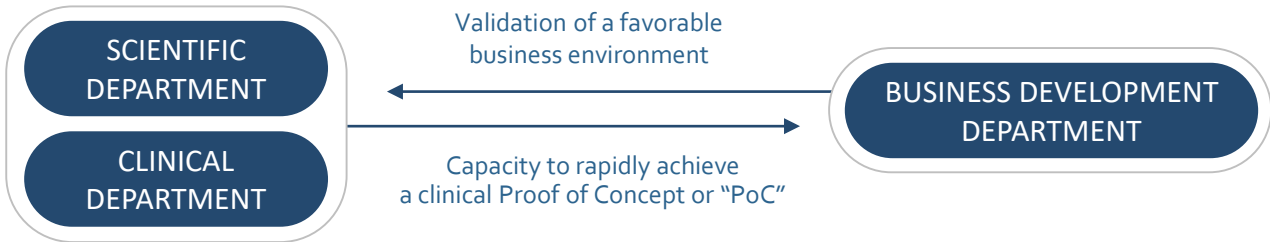
# CONTENTS

- 1 THERANEXUS: SHIFTING THE LINES AGAINST CENTRAL NERVOUS SYSTEM DISORDERS
- 2 A DISRUPTIVE APPROACH TO THE CENTRAL NERVOUS SYSTEM
- 3 THE CAPACITY TO GENERATE DRUG CANDIDATES TO RESPOND TO UNMET NEEDS WITH THREE DEVELOPMENTS ALREADY UNDERWAY, A BLOCKBUSTER POTENTIAL
- 4 AN AGILE ORGANIZATION WITH CAREFULLY-MANAGED FINANCING NEEDS
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- 6 TERMS AND CONDITIONS OF THE OFFERING





## DRUG CANDIDATES SELECTED FOR THEIR CLINICAL AND ECONOMIC VALUE



### 4 selection criteria

- Patent-free CNS drug as the 1<sup>st</sup>-line treatment
- Demonstrated efficacy
- Clear room for improvement
- PoC within reach

**IN VIVO SELECTION OF THE BEST COMBINATION** of CNS drugs selected with a glial cell modulator



# THN102: A DRUG CANDIDATE FOR 2 CONDITIONS

Modafinil



Flecainide



## Narcolepsy

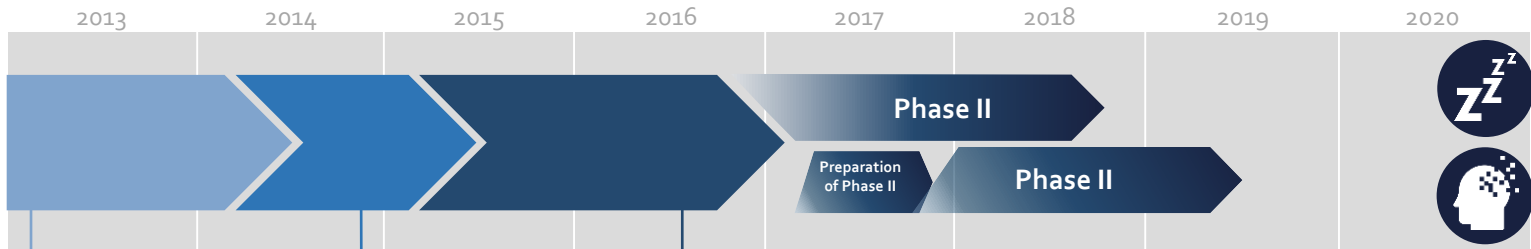


## Parkinson's disease

Excessive daytime sleepiness ± cataplexy	SYMPTOMS	Excessive daytime sleepiness
<b>Orphan disease: 300,000+ patients</b> (France, Germany, United Kingdom, Italy, Spain, United States)	PREVALENCE	Close to <b>1 million patients</b> (G7) <b>30 to 50%</b> of patients diagnosed with Parkinson's
<b>Modafinil</b> 4 drugs on the market, none of which fully address both symptoms	STANDARD OF CARE TREATMENT	<b>NONE</b>  <b>No approved treatment to date</b>
<b>US\$ 2 billion</b> (annual treatment cost/patient of around US\$ 20k)	MARKET	-
<b>7 drug candidates undergoing clinical trials</b> <b>None of which aim to prove their superiority over the standard of care treatments</b>	RESEARCH	<b>4 drug candidates undergoing clinical trials, all of which only target neurons.</b>



# THN102: THE MOST ADVANCED COMBINATION OF THE PORTFOLIO



## Pre-clinical safety

Safety pharmacology study over a period of 24 hours

>> **Proof of efficacy in pre-clinical models in the treatment of sleepiness and cataplexy, proof of tolerance**

## Phase Ia

Randomized double blind trial on 9 healthy volunteers to compare THN102 with Modafinil and a placebo

>> **Proof of tolerance in human subjects**

## Phase Ib / Proof of concept

Cross-over study (3 treatments out of 5) carried out at the Hôpital des Armées using 20 healthy volunteers deprived of sleep for 40 consecutive hours

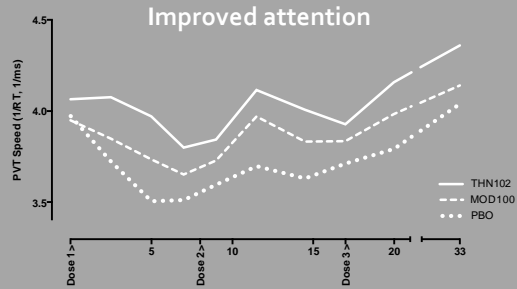
>> **Clinical proof that the combination is superior to the standard of care treatments (Modafinil used alone)**



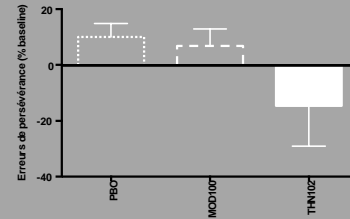
# THN102: SUPERIOR RESULTS OF THE COMBINATION OVER MODAFINIL ALONE AT THE END OF PHASE IB

## EFFICACY

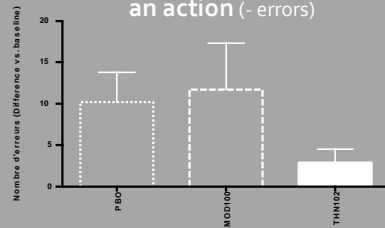
(sleep deprivation) vs placebo and Modafinil



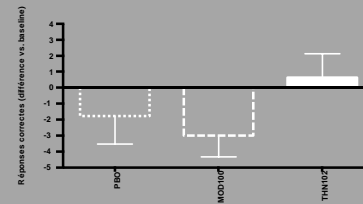
### Improved mental flexibility (- repeated errors)



### Improved capacity to repress/moderate an action (- errors)



### Improved working memory



## TOLERANCE vs Modafinil

	MOD 100 (n=12)	THN102 (n=35)
Fatigue	83%	70%
Headache	50%	23%
Nausea	33%	14%

**SIGNIFICANT IMPROVEMENT IN AWARENESS AND ATTENTION AND GOOD TOLERANCE OF THE PRODUCT**



# THN102: 1<sup>ST</sup> DRUG CANDIDATE IN PHASE II

**BEST IN CLASS**

Modafinil

**Narcolepsy**

**Launch of the study Phase IIa in 2016**

**Double blind trial to compare 3 treatments:**  
Modafinil 300 mg/day alone or combined with two doses of FLECAINIDE, 3 and 27 mg/day

**Cross-over study over three periods:** each patient is randomly given each of the three treatments over three periods of two weeks each

**Primary efficacy endpoint :** ESS (Epworth Sleepiness Scale)

Trial carried out on **42 narcoleptic patients**  
**20 patients already recruited** on 3 sites

**Results expected in Q3 2018 (Narcolepsy)**



**BEST IN CLASS**

Flecaïnide

**Excessive daytime sleepiness in patients diagnosed with Parkinson's**

**Regulatory package ready for a start to Phase IIa in Q4 2017**

**Double blind trial to compare 2 doses of THN102 to the placebo**

**Cross-over study over three periods:** each patient is randomly given THN102 or the placebo over three periods of two weeks each

**Primary efficacy endpoint :** ESS (Epworth Sleepiness Scale)

Study carried out on **60 patients** diagnosed with Parkinson's (some of whom possibly in the United States)

**Results expected in Q2 2019 (Parkinson's)**



# THN102: DRUG CANDIDATE AS A FIRST-LINE TREATMENT

**4 drugs on the market:**  
Inadequate response to both symptoms (sleepiness + cataplexy)



	Provigil® Modafinil	Nuvigil® ArModafinil	Xyrem® SOX	Wakix® Pitolisant	Target label THN102	Target THN102
Sleepiness	Yes	Yes	Yes	Yes	Yes	↗MOD
Marketing authorization label (1) (2) (3) (4)	No	No	Yes	Yes	Yes	→SOX/PIT.
Administration	2 doses / day	1 dose / day	2 doses / night	1 dose / day	-	1 dose / day
ANSM (5) drug database	N/A	-	Class III	N/A	-	N/A
HAS* efficacy/safety ratio (1) (3) (4)	High	-	High	Moderate	High	
Price in the EU (US\$/year) (6) (average in 5 countries)	2,600	-	11,850	12,250		
Price in the US (US\$/year) (7)	36,000	8,600	120,500	-		
Sales peak (US\$ million) (8)	2,100		1,108	ND		

**BLOCKBUSTER  
POTENTIAL,  
EFFECTIVE ON THE  
TWO MAIN  
SYMPTOMS**

Estimate of benefits/risks of products currently on the market compared with the target profile for THN102 and the annual cost of treatments on the market (US\$ - rounded figures)  
\* French National Authority for Health



(1) Transparency Commission Recommendation, CT-4626  
(2) FDA Label  
(3) Transparency Commission Recommendation, CT-2921  
(4) Transparency Commission Recommendation, CT-14970

(5) ANSM drug database at 15/06/2017, includes GHB and its salts  
(6) France: Cnamts; UK: BNF; Italy: AIFA; Spain: MSSSI; Germany: Apoteke  
(7) US Rx List internet drug index  
(8) Jazz Pharmaceuticals Investor Presentation of 06/06/2017





# THN<sub>201</sub> & THN<sub>101</sub>: TWO NEW MAJOR CONDITIONS TARGETED WITH VERY HIGH INDUSTRIAL STAKES

THN 201	THN 101
 <b>Neurocognitive disorders linked to Alzheimer's disease</b>	 <b>Neuropathic pain</b>
Impairment of memory, judgment, orientation	Permanent background pain, with occasional stabbing pains, burning sensation and twinges
<b>15 million patients</b> in 2015 (G7) <b>19 million</b> between now and 2030 <b>45%</b> undiagnosed patients	<b>70 million patients</b> (Europe, US, Japan)
DONEPEZIL	AMITRIPTYLINE
<b>US\$3.2 billion</b> (annual cost of treatment/patient US\$4-5k)	<b>US\$3 billion</b> (annual cost of treatment/ patient US\$3-4k)
<b>23 drug candidates in clinical trials</b>	<b>32 drug candidates in clinical trials</b>



## THN<sub>201</sub> & THN<sub>101</sub>: TWO NEW MAJOR CONDITIONS TARGETED WITH VERY HIGH INDUSTRIAL STAKES

### DONEPEZIL | MEFLOQUINE

THN 201

Target profile:

Label for **neurocognitive disorders linked to Alzheimer's**

Performance target: THN<sub>201</sub> versus DONEPEZIL:

- **Improved cognitive function**
- **Delayed need for institutionalization**

### AMITRIPTYLINE | MEFLOQUINE

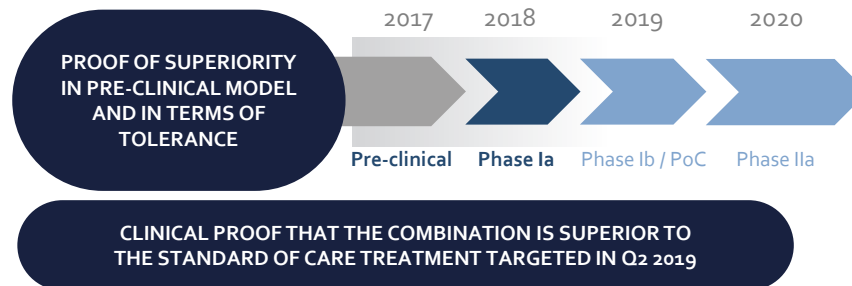
THN 101

Target profile:

Label for **neuropathic pain**

Performance target: THN<sub>101</sub> versus AMITRIPTYLINE:

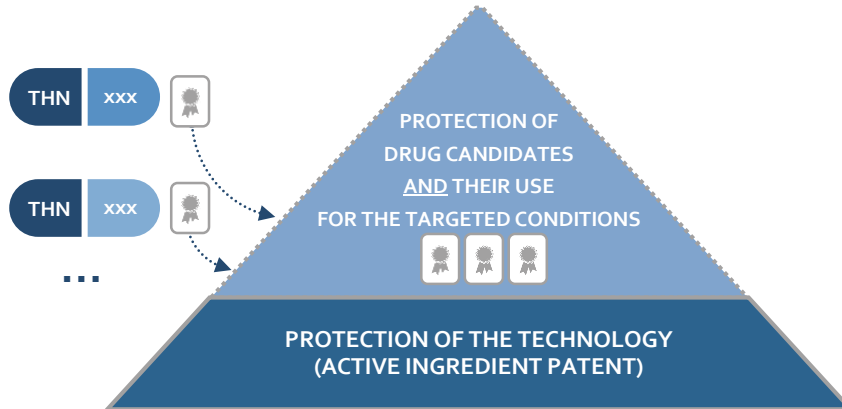
- **Reduction in pain intensity**
- **Increase in the number of patients experiencing a 50% reduction in pain**
- **Better tolerance profile**







# INNOVATION THAT IS FIRMLY PROTECTED BY AN INTELLECTUAL PROPERTY STRATEGY



	Family of patents 1 (platform patent)	Family of patents 2	Family of patents 3	Family of patents 4
Products	Anti-connexin agent + psychotropic molecule	THN201 Dementia	THN102 Narcolepsy / Parkinson's	THN101 Neuropathic pain
Expiry date	2029	2032	2034	2036
Geographic regions targeted				

FREEDOM TO EXPLOIT DRUG CANDIDATES  
FREEDOM TO DEVELOP NEW COMBINATIONS



# CONTENTS

1

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3

THE CAPACITY TO GENERATE DRUG CANDIDATES TO RESPOND TO UNMET NEEDS WITH THREE DEVELOPMENTS ALREADY UNDERWAY, A BLOCKBUSTER POTENTIAL

4

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6

TERMS AND CONDITIONS OF THE OFFERING



# A COMPLEMENTARY TEAM IN AN AGILE ORGANIZATION



**Franck Mouthon** CHAIRMAN & CEO



**Werner Rein** CMO



**Mathieu Charvériat** CSO



**Julien Veys** CBDO



**Thierry Lambert** CFO



## High profile partners

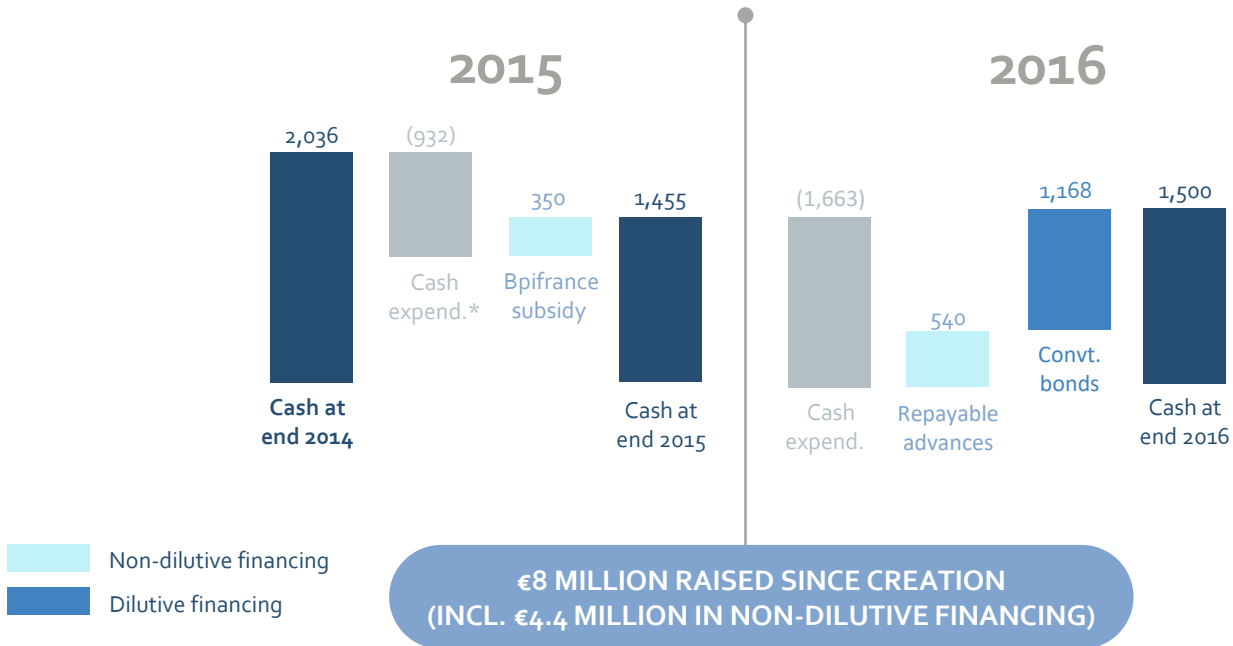


11 EMPLOYEES DEDICATED TO KEY FUNCTIONS



## CONTROLLED CASH EXPENDITURE

2015 & 2016 cash flows (in € thousands)



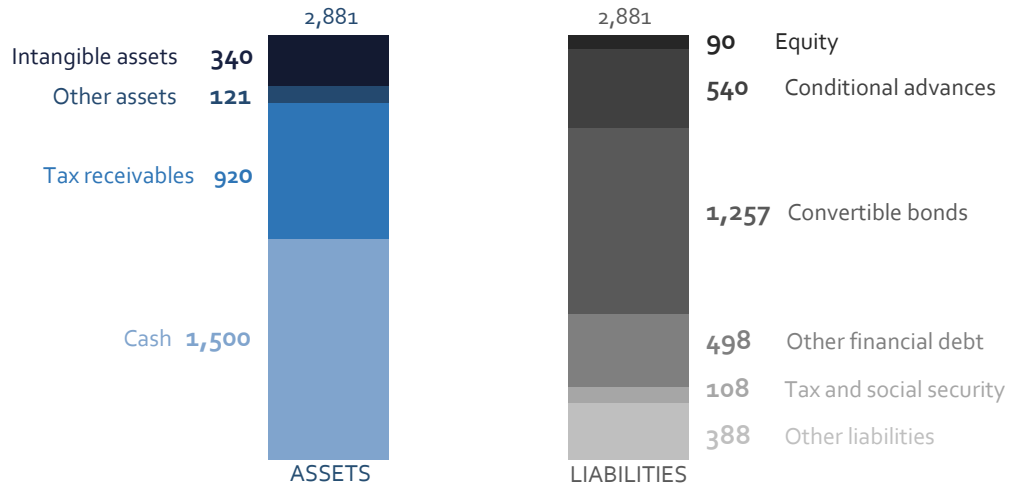
\* Net flows from operations + Net flows from investments + Financial interest paid + Repayments of loans

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## BALANCE SHEET STRUCTURE

Balance sheet at 31/12/2016 (in € thousands)



A HEALTHY AND ROBUST FINANCIAL STRUCTURE



# GOVERNANCE & SHAREHOLDERS

## BOARD OF DIRECTORS



**Franck Mouthon**  
Theranexus, Chairman and CEO



**Mathieu Charvériat**  
Theranexus, Deputy CEO



**Dominique Costantini**  
Independent director



**Luc-André Granier**  
Independent director



**AURIGA**  
AMORÇAGE TECHNOLOGIQUE  
**Auriga**, represented  
by **Florian Denis**



**cea investissement**  
AMORÇAGE TECHNOLOGIQUE  
**CEA-Investissement**,  
represented by **Celia Hart**

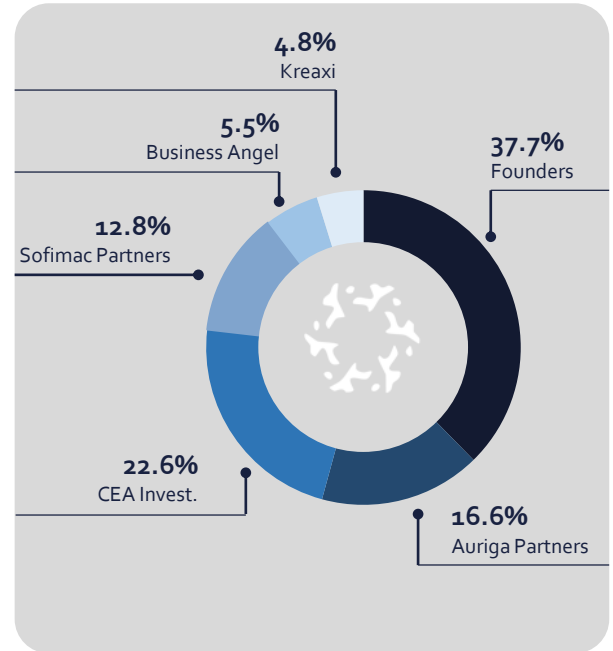


**SOFIMAC partners**  
capital investissement  
**Sofimac Partner**, represented  
by **François Miceli**



**kreaxi**  
**Kreaxi**, represented  
by **Gwenaël Hamon**  
(non-voting member)

## SHAREHOLDERS





# CONTENTS

- 1 THERANEXUS: SHIFTING THE LINES AGAINST CENTRAL NERVOUS SYSTEM DISORDERS
- 2 A DISRUPTIVE APPROACH TO THE CENTRAL NERVOUS SYSTEM
- 3 THE CAPACITY TO GENERATE DRUG CANDIDATES TO RESPOND TO UNMET NEEDS WITH THREE DEVELOPMENTS ALREADY UNDERWAY, A BLOCKBUSTER POTENTIAL
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## STRONG INTEREST AMONG INDUSTRY PLAYERS FOR THE FIRST 3 CONDITIONS TARGETED

CONDITION	DATE	SELLER	BUYER	PROFILE	DEVELOPMENT STAGE	UP FRONT (US\$ m)	MILESTONES (US\$ m)	ROYALTIES (US\$ m)
Narcolepsy	2014	Aerial	Jazz	NCE <sup>[1]</sup>	Phase II	125	272	NC
	2013	Concert	Jazz	LCM <sup>[2]</sup>	Pre-clinical	5	115	NC
Neuropathic pain	2015	Convergence	Biogen	NCE	Phase II	200	475	NC
	2015	Spinifex	Novartis	NCE	Phase II	200	500	NC
	2012	Concert	Avanir	LCM	Phase I	NC	200	NC
Alzheimer's disease	2016	Chase Pharma	Allergan	Combination	Phase I/II	125	875	NC
	2013	Lundbeck	Otsuka	NCE	Phase II	150	675	NC
	2012	Adamas	Forest	Combination	Phase II	60	95	NC
Other neurological disorders	2014	Avanir	Otsuka	Combination	Market	3,500	-	-

TURNING POINT IN VALUE AT THE END OF PHASE II  
(BETTER RATIO OF DEVELOPMENT COSTS  
TO IMMEDIATE AND SUBSEQUENT REVENUES)

[1] New Chemical Entity

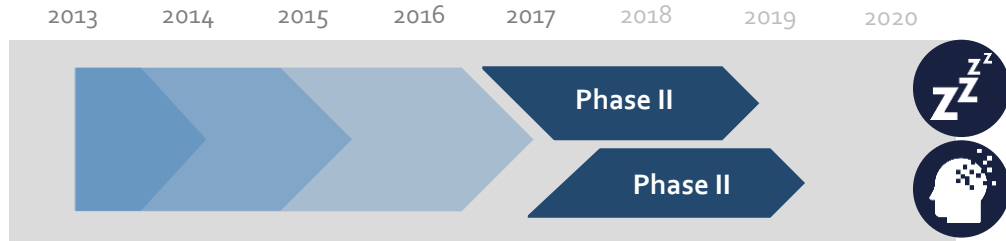
[2] Life Cycle Management

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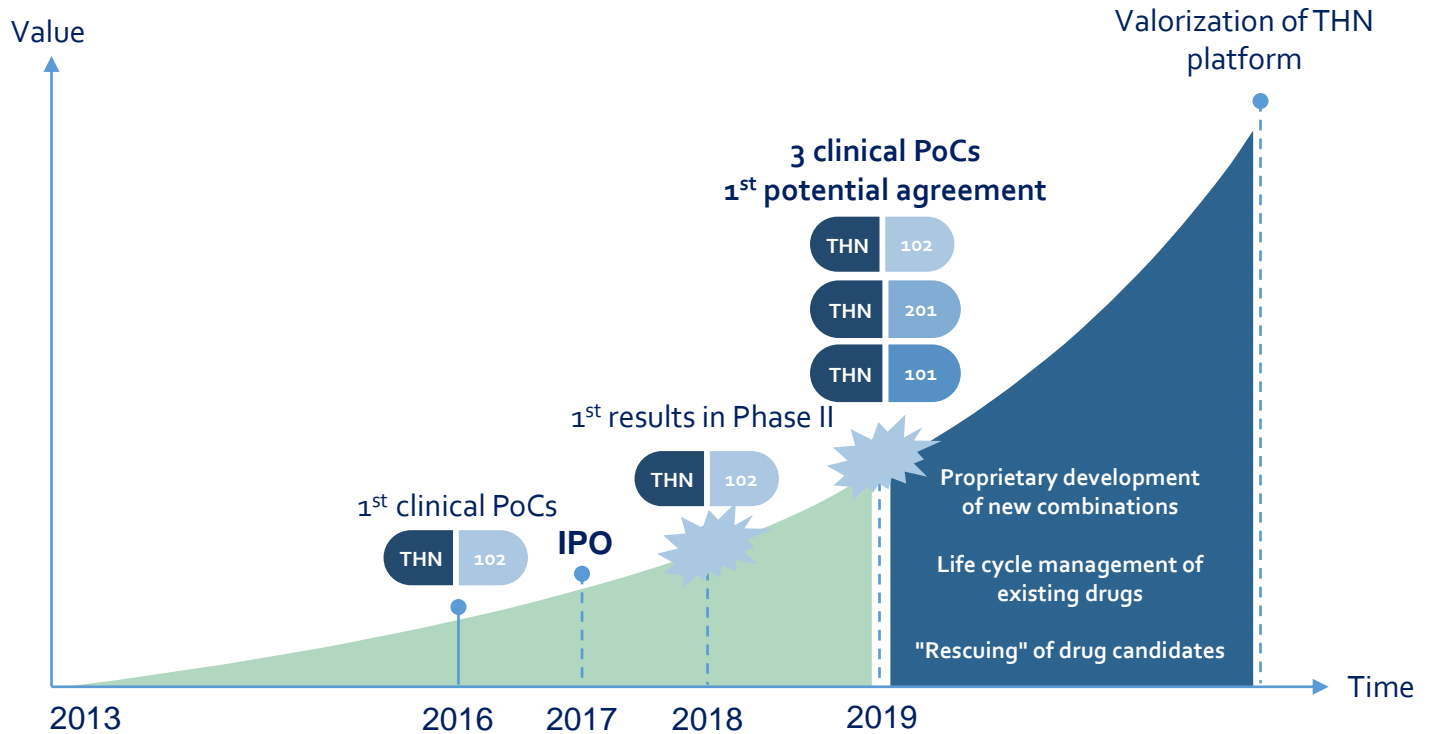
# THN102: A FIRST SOURCE OF VALUE CREATION



**OPPORTUNITY FOR STRONG VALUE CREATION BETWEEN NOW AND 2019**



## A DUAL SOURCE OF VALUE CREATION IN THE SHORT AND MEDIUM TERM





## 5 REASONS TO BECOME A SHAREHOLDER

1

A **PATENTED** unique approach to the **CENTRAL NERVOUS SYSTEM** in the treatment of CNS disorders

2

A **TECHNOLOGICAL PLATFORM** capable of delivering several "*best in class*" candidates

3

A clinical development profile to optimize the **COMBINATION OF SPEED / PROBABILITY OF SIGNIFICANT SUCCESS**

4

A 1<sup>st</sup> drug candidate (**THN102**) with **BLOCKBUSTER** market potential

5

A company structured around **EXPERT PROFILES** and supported by **TIER ONE SHAREHOLDERS**



# CONTENTS

- 1 THERANEXUS: SHIFTING THE LINES AGAINST CENTRAL NERVOUS SYSTEM DISORDERS
- 2 A DISRUPTIVE APPROACH TO THE CENTRAL NERVOUS SYSTEM
- 3 THE CAPACITY TO GENERATE DRUG CANDIDATES TO RESPOND TO UNMET NEEDS WITH THREE DEVELOPMENTS ALREADY UNDERWAY, A BLOCKBUSTER POTENTIAL
- 4 AN AGILE ORGANIZATION WITH CAREFULLY-MANAGED FINANCING NEEDS
- 5 SHORT AND MID-TERM VALUE CREATION BACKED BY AN INNOVATIVE PLATFORM
- 6 TERMS AND CONDITIONS OF THE OFFERING



## KEY CHARACTERISTICS OF THE OFFERING

### MARKET / CODES

Euronext Growth (Paris)  
Codes: FR0013286259 - ALTHX

### PRICE RANGE

Between €14.00 and €18.80 per share

### TERMS OF THE OFFERING

Public placement in France (**OPO**) & **Global Placement** reserved for institutional investors  
**1,097,560 new shares** to be issued as part of a cash capital increase  
**1,262,194 new shares** in the event of the full exercise of the Extension Clause  
**1,451,523 new shares** in the event of the full exercise of the Extension Clause and Over-allotment Option

### SIZE OF THE OPERATION

**€18 million** capital increase based on the offer's midpoint price of €16.40 per share, which may be increased to **€23.8 million** in the event of the full exercise of the Extension Clause and Over-allotment Option

### SUBSCRIPTION COMMITMENTS

**€10.9 million in subscription commitments:**

- €5.4 million in subscription commitments at any price from historical shareholders
- €4.0 million in subscription commitments from Financière Arbevel capped at a maximum price of €18.80 per share
- €1.5 million in subscription commitments from Alto Invest capped at a maximum price of €15.52 per share

### ABSTENTION, OWNERSHIP AND HOLDING COMMITMENTS

Franck Mouthon and Mathieu Charvériat, co-founders: holding commitment of 365 days  
Historical shareholders: holding commitment of 365 days  
Theranexus: abstention commitment of 180 days



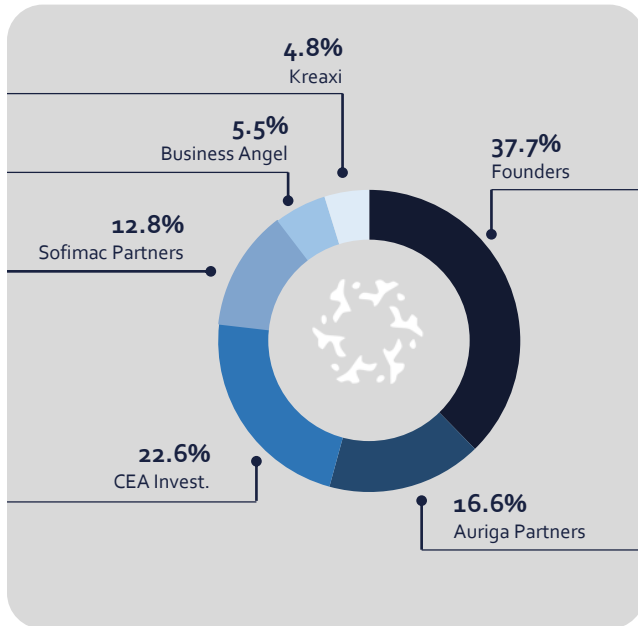
## PROVISIONAL CALENDAR

Approval of the Prospectus by the AMF	Tuesday 10 October 2017
Opening of subscription period	Wednesday 11 October 2017
Closing of subscription period	Tuesday 24 October 2017 at 5pm
Closing of Global Placement Setting of price and allocation of shares	Wednesday 25 October 2017
Settlement-delivery	Friday 27 October 2017
Start of trading on Euronext Growth	Monday 30 October 2017
Expiry of exercise period for Over-allotment Option / End of the stabilization period (where applicable)	Friday 24 November 2017



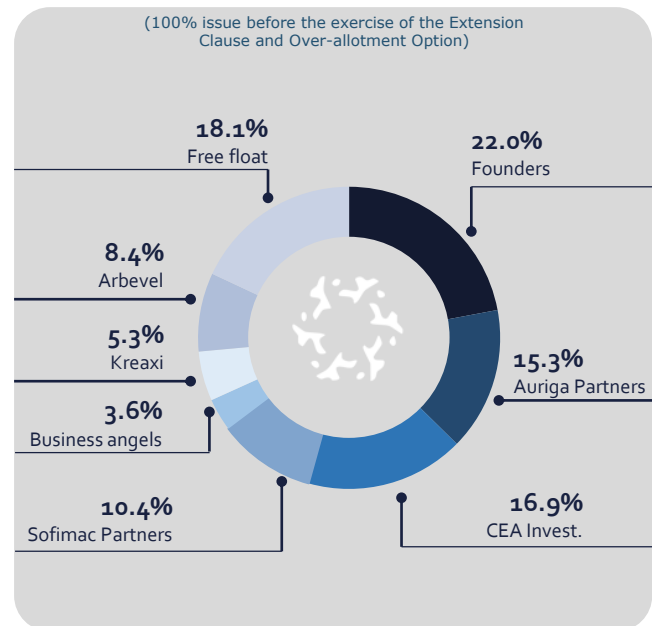
## BREAKDOWN IN CAPITAL

CAPITAL BEFORE OPERATION\*



CAPITAL AFTER OPERATION

(100% issue before the exercise of the Extension Clause and Over-allotment Option)





## FINANCIAL INTERMEDIARIES AND ADVISORS

Consulting firm



Global Coordinator, Lead Manager,  
Book Runner



Co-Lead Manager, Book Runner



Auditors



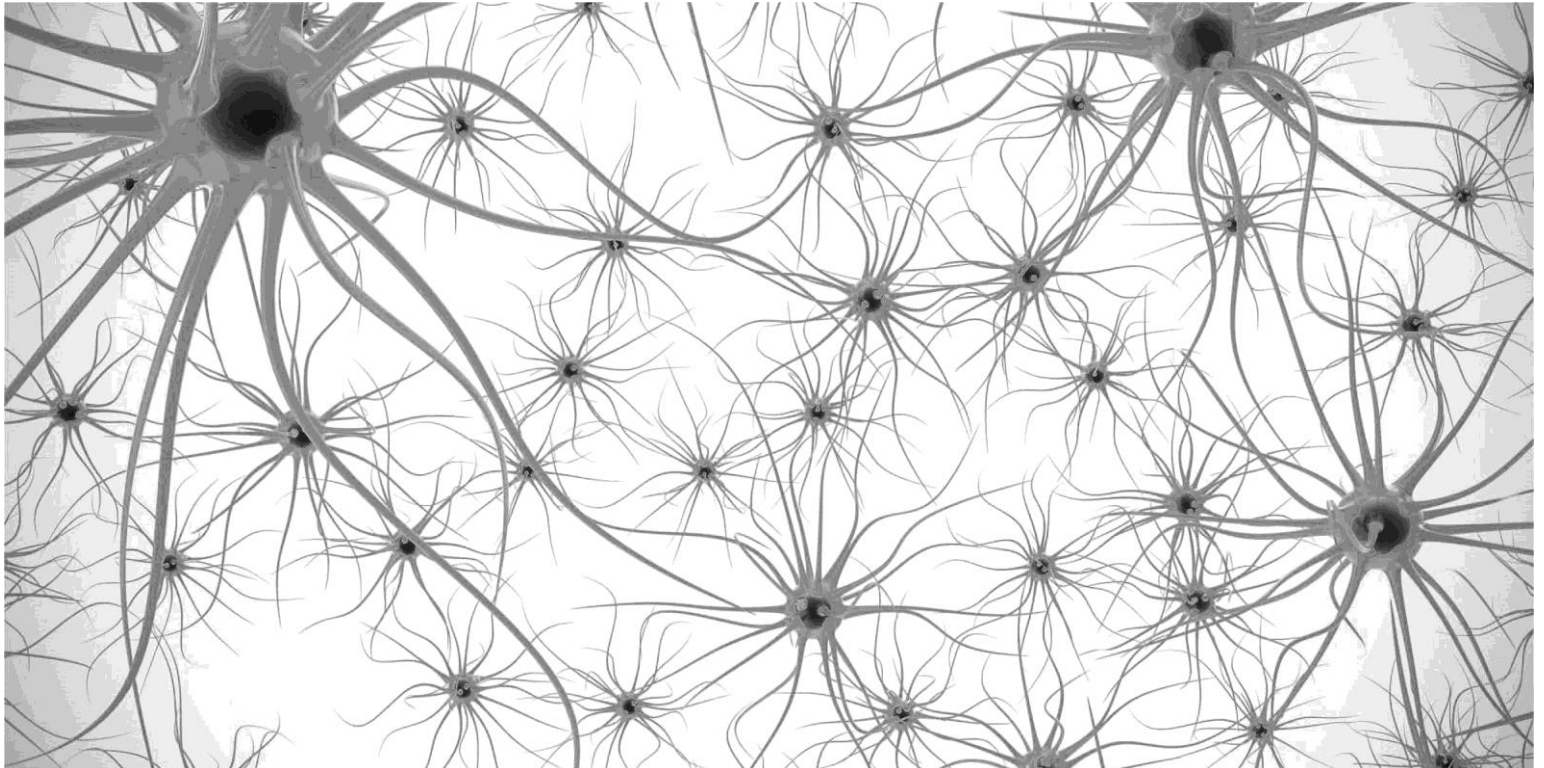
Legal advice



Financial communications







Theranexus

IPO  
ON EURONEXT GROWTH



# Epworth Sleepiness Scale (ESS)

Situation <input checked="" type="checkbox"/> Please tick box	0 No chance of dozing	1 Slight chance	2 Moderate chance	3 Definitely would doze
Sitting and reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Watching TV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sitting inactive in a public place (e.g. Theatre or a meeting)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As a passenger in a car for an hour without a break	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lying down to rest in the afternoon when circumstances permit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sitting and talking to someone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sitting quietly after lunch without alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In a car, while stopped for a few minutes in traffic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Scored from 0 (no sleepiness) to 24 (highly severe sleepiness)
  - Below 8: you have a healthy level of daytime sleepiness.
  - From 9 to 14: you have a sleep debt, you need to improve your sleep hygiene.
  - More than 15: you have a high level of excessive daytime sleepiness. You need to improve your sleep hygiene and consult your doctor for further medical help
- The average score for an untreated patient with narcolepsy is 18



## THN102 competitive landscape: 7 drug candidates for the treatment of narcolepsy undergoing clinical trials



Company	Molecule	Brand	Dev. stage	Mechanism of action
Jazz pharma	JZP-110	-	P <sub>3</sub>	NA / DA recapture inhibitor
Jazz pharma	JZP-258	-	P <sub>3</sub>	Xyrem® with reduced sodium content
Avadel	FT218	-	P <sub>3</sub>	Xyrem with sustained release
Taisho pharma	TS-091	-	P <sub>2</sub>	HIS H <sub>3</sub> receptor inverse agonist
Balance Tptx	BTD-001	-	P <sub>2</sub>	GABA-A blocker
Jazz pharma	JZP-507	-	P <sub>1</sub>	Xyrem® with reduced sodium content
Jazz pharma	JZP-386	-	P <sub>1</sub>	Deuterated Xyrem

*Principal drugs and drug candidates indicated for the treatment of narcolepsy (source: informa Medtrack – June 2017) – Com: marketed; GABA: gamma-aminobutyric acid; HIS: histamine; NA: noradrenaline; DA: dopamine; 5HT: serotonin.*

NONE OF WHICH OUTPERFORMS MODAFINIL IN CLINICAL TRIALS



## THN102 competitive landscape : 4 drug candidates for the treatment of excessive daytime sleepiness in Parkinson's disease undergoing clinical trials



Company	Molecule	Brand	Dev. stage	Mechanism of action
Jazz pharma	JZP-110	-	P2	NA / DA recapture inhibitor
Benevolent AI	Bavisant	-	P2	HIS H <sub>3</sub> receptor agonist
Novartis	LML134	-	P1	HIS H <sub>3</sub> receptor inverse agonist
Eli Lilly	LY3154207	-	P1	RD1 allosteric modulator

Principal drugs and drug candidates indicated for the treatment of excessive daytime sleepiness in Parkinson's disease (informa Medtrack – clinicaltrials.gov July 2017); HIS: histamine ; NA: noradrenaline; DA: dopamine ; D<sub>1</sub>R: dopamine receptor D<sub>1</sub>.

NO PROJECTS AT A LATER STAGE THAN THN102  
COMBINATIONS AND DRUG CANDIDATES THAT ONLY TARGET NEURONS