

April 3, 2019



SCYNEXIS's Ibrexafungerp Shows Favorable Clinical Activity in Resistant Fungal Infections, Including *Candida auris* Cases from the CARES Study, in Data to be Presented at the 29th ECCMID

Six presentations will provide additional evidence of the potent and broad antifungal activity of oral ibrexafungerp, including new clinical case studies from the CARES and FURI trials as well as promising preclinical data

Case studies from the CARES trial, the first study of an investigational agent to treat patients with *Candida auris* infections, show favorable outcomes following treatment with oral ibrexafungerp

Ibrexafungerp shows strong clinical activity in difficult-to-treat patients with resistant *Candida* pathogens in a variety of infections, including esophageal candidiasis and spondylodiscitis (FURI study)

JERSEY CITY, N.J., April 3, 2019 /PRNewswire/ -- SCYNEXIS, Inc. (NASDAQ: SCYX), a biotechnology company delivering innovative therapies for difficult-to-treat and often life-threatening infections, today announced data demonstrating the potential use of ibrexafungerp as an agent to address multiple serious fungal infections, including many that have shown resistance to existing therapies. The collection of data will be presented in one oral and five poster presentations at the 29th European Congress of Clinical Microbiology and Infectious Diseases (ECCMID), April 13-16, 2019, in Amsterdam, Netherlands.

"We are pleased and proud to have a total of six presentations, including three late-breakers, accepted by ECCMID 2019, contributing to a growing body of evidence supporting the strong clinical activity of oral ibrexafungerp in difficult-to-treat and resistant *Candida* infections and its versatility in addressing unmet needs in multiple settings," said David Angulo, M.D., Chief Medical Officer of SCYNEXIS. "Our ability to enroll and successfully treat patients in the FURI and CARES studies shows that there is a clear unmet medical need for a novel and more potent antifungal therapy, particularly an oral agent, to treat patients with these devastating fungal infections."

Ibrexafungerp, the first representative of a novel family of compounds referred to as "fungers" (antifungal triterpenoids), is being developed for oral and intravenous (IV) administration and is in clinical development for the treatment of several serious fungal

infections, including vulvovaginal candidiasis (VVC), invasive candidiasis (IC), invasive aspergillosis (IA) and refractory invasive fungal infections.

ECCMID, as one of the world's premier clinical microbiology and infectious disease events, brings together experts to present their latest findings, guidelines and experiences. Details of the six ibrexafungerp presentations are as follows:

Oral Presentation

Title: [Favorable Response to Oral Ibrexafungerp \(formerly SCY-078\) in Patients with Refractory Fungal Diseases, Interim Analysis by Pathogen from a Phase 3 Open-label Study \(FURI\)](#)

Presenter: Oliver Cornely, MD

Date and Time: Tuesday, April 16, from 11:00-12:00 CET

Oral Presentation #: L0010

Session: Recent clinical trials

The presentation showcases results from the first interim analysis of 20 patients with various *Candida* infections from the FURI study, an open-label trial of oral ibrexafungerp in patients with refractory fungal infections. 11 patients (55%) achieved complete or partial response, 6 patients (30%) maintained stable disease, 2 patients (10%) experienced progression of disease and one case was considered as indeterminate. Of particular interest, the patients enrolled in the FURI study predominantly had non-*albicans* *Candida* spp. infections, which are more resistant and difficult-to-treat with current marketed antifungal agents, reflecting the need for new antifungal therapies.

Poster Presentations

Title: [Successful Treatment of Two Patients with *Candida auris* Candidemia with the Investigational Agent, Oral Ibrexafungerp \(formerly SCY-078\) from the CARES Study](#)

Presenter: Deven Juneja, MD

Date and Time: Saturday, April 13, from 15:30-16:30 CET

Poster Presentation #: L0028

Session: Other issues and diverse late breaker aspects

The poster presents clinical findings of two patients with *Candida auris* candidemia enrolled in the CARES study, who were successfully treated with oral ibrexafungerp. Both patients had multiple co-morbidities, were admitted to ICU and were diagnosed with *Candida auris* in the bloodstream, a pathogen defined by the Center of Disease Control (CDC) as "an emerging fungus that presents a serious global health threat." Both of these difficult-to-treat candidemia cases responded positively to oral ibrexafungerp, with clearance of the *C. auris* infection at the end of treatment. Ibrexafungerp was well-tolerated by both patients.

Title: [Favourable Clinical Outcome of Two Patients with *Candida* spp. Spondylodiscitis Treated with Oral Ibrexafungerp \(formerly SCY-078\) from the FURI Study](#)

Presenter: Philipp Koehler, MD

Date and Time: Saturday, April 13, from 15:30-16:30 CET

Poster Presentation #: L0033

Session: Other issues and diverse late breaker aspects

The poster presents two patients with *Candida* spondylodiscitis, a rare and difficult-to-treat infection of the intervertebral disc space and vertebral bone that requires months-long courses of therapy. Both patients were enrolled into the FURI study, with one patient being intolerant to azole therapy and the other patient failing standard therapy. The patients have received >290 days and >100 days of ibrexafungerp therapy, with one patient showing significant improvement and one complete resolution. Long-term treatment with ibrexafungerp has been well tolerated by these patients.

Title: [Use of Ibrexafungerp \(formerly SCY-078\) to Treat Severe Azole-refractory Oesophageal Candidiasis: A Case Report from the FURI Study](#)

Presenter: Jose Vazquez, MD

Date and Time: Saturday, April 13, from 15:30-16:30 CET

Poster Presentation #: P0125

Session: Clinical pharmacokinetics, treatment strategies and prescribing of antifungals

The poster presents a patient from the FURI study, a 63-year-old male with a 10-year history of painful esophageal constriction and recurrent esophageal candidiasis, requiring a percutaneous gastroenterostomy feeding tube due to his inability to swallow and eat. Multiple courses of antifungals were unsuccessful in treating this fluconazole-resistant *C. glabrata* infection, and the patient was enrolled in the FURI study with severe esophagitis at baseline. After 54 days of oral ibrexafungerp treatment, the infection fully resolved. The patient remained asymptomatic during the follow-up period and the feeding tube was able to be removed.

Title: [Penetration of Ibrexafungerp \(formerly SCY-078\) versus Micafungin at the Site of Infection in an Intra-abdominal Candidiasis Mouse Model](#)

Presenter: Annie Lee, PhD

Date and Time: Monday, April 15, from 11:42-11:47 CET

Poster Presentation #: O0740

Session: Antifungals: novel drugs, novel dosing?

The oral E-poster presents results from a study designed to test ibrexafungerp's penetration in a mouse model of intra-abdominal candidiasis (IAC). IAC is a common invasive fungal infection with high mortality. Echinocandins, the current gold standard for treatment for invasive candidiasis, are not ideal treatment options for IAC given their poor penetration into intra-abdominal tissue and abscesses. In this study, Perlin et al., showed that ibrexafungerp penetrates significantly better into intra-abdominal abscesses as compared to micafungin. It holds promise as a potential therapeutic option for IAC patients.

Title: [Efficacy of Ibrexafungerp \(formerly SCY-078\) against Pneumocystis Pneumonia in a Murine Therapeutic Model](#)

Presenter: Stephen Barat, PhD

Date and Time: Monday, April 15, from 11:00-11:05 CET

Poster Presentation #: O0733

Session: Antifungals: novel drugs, novel dosing?

The oral E-poster presents results from an *in vivo* study designed to evaluate the therapeutic activity of oral ibrexafungerp against *Pneumocystis* pneumonia (PCP), a significant risk for immunocompromised patients. Oral ibrexafungerp was evaluated at two dose levels (15mg/kg or 30mg/kg, twice daily), compared to trimethoprim/sulfamethoxazole

50/250mg/kg three times weekly, the current standard of care, and vehicle control. At each dose level, oral ibrexafungerp demonstrated activity against *Pneumocystis*, as determined by a reduction in organism burden and improved survival, supporting future clinical studies of ibrexafungerp for both treatment of PCP and prophylactic use as a single oral agent in immunocompromised patients.

The ECCMID 2019 posters will be available on the [SCYNEXIS website](#) following the event and on the [ECCMID 2019](#) website.

About SCYNEXIS

SCYNEXIS, Inc. (NASDAQ:SCYX) is a biotechnology company committed to positively impacting the lives of patients suffering from difficult-to-treat and often life-threatening infections by developing innovative therapies. The [SCYNEXIS team](#) has extensive experience in the life sciences industry, having discovered and developed more than 30 innovative medicines over a broad range of therapeutic areas. SCYNEXIS's lead product candidate, ibrexafungerp (formerly known as SCY-078), is a novel IV/oral antifungal agent in Phase 3 clinical and preclinical development for the treatment of multiple serious and life-threatening invasive fungal infections caused by *Candida*, *Aspergillus* and *Pneumocystis* species. For more information, visit www.scynexis.com.

Forward Looking Statement

Statements contained in this press release regarding expected future events or results are "forward-looking statements" within the meaning of the Private Securities Litigation Reform Act of 1995. Because such statements are subject to risks and uncertainties, actual results may differ materially from those expressed or implied by such forward-looking statements. These risks and uncertainties include, but are not limited to, risks inherent in SCYNEXIS's ability to successfully develop and obtain FDA approval for ibrexafungerp. These and other risks are described more fully in SCYNEXIS's filings with the Securities and Exchange Commission, including without limitation, its most recent Annual Report on Form 10-K under the caption "Risk Factors" and other documents subsequently filed with or furnished to the Securities and Exchange Commission. All forward-looking statements contained in this press release speak only as of the date on which they were made. SCYNEXIS undertakes no obligation to update such statements to reflect events that occur or circumstances that exist after the date on which they were made.

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