



Advancing Life Changing Therapies

April 2025

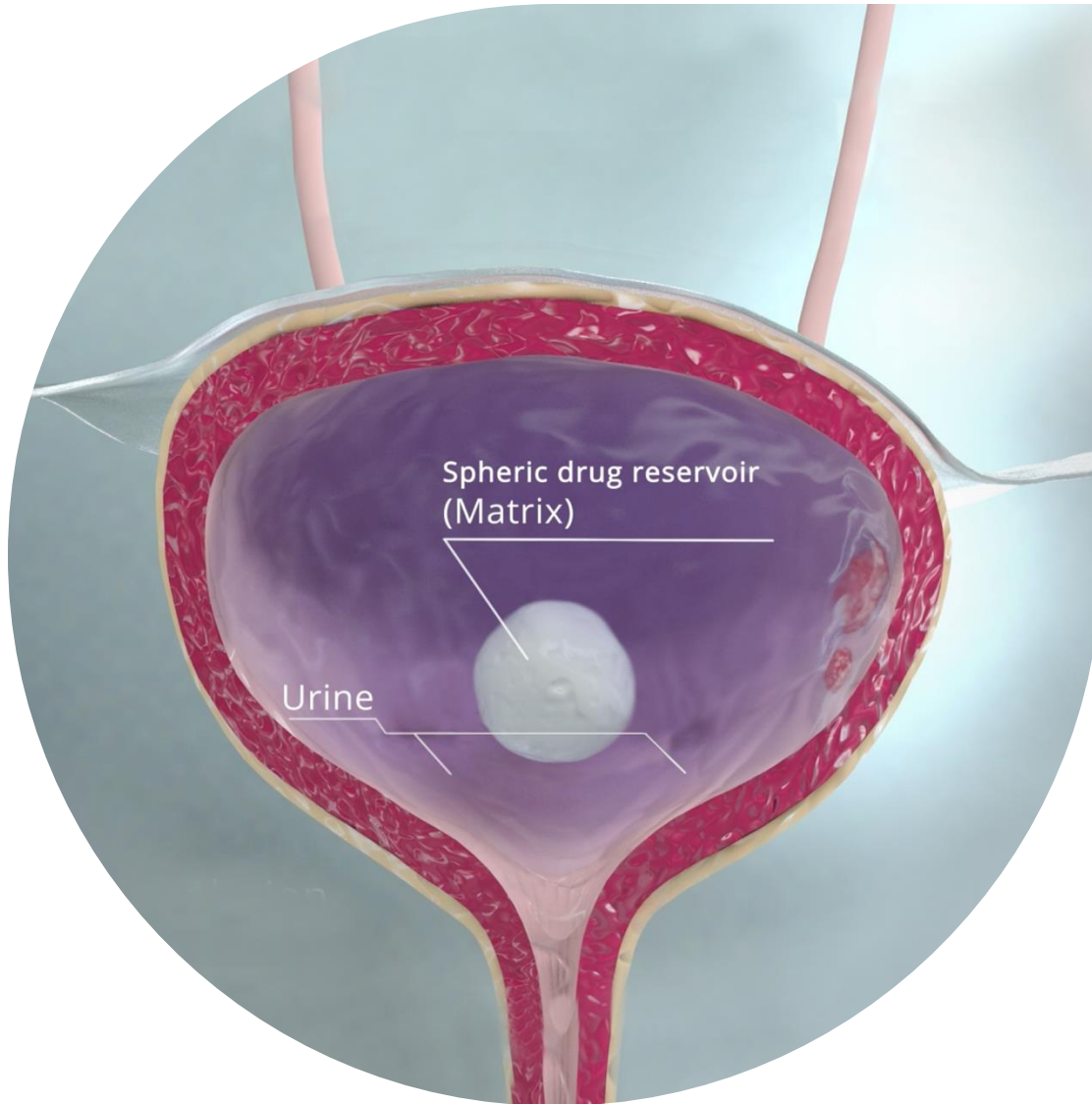
Disclosures

The Private Securities Litigation Reform Act of 1995 provides a safe harbor for forward-looking statements made by us or on our behalf. This press release contains statements which constitute “forward-looking statements” within the meaning of Section 27A of the Securities Act of 1933 and Section 21E of the Securities Exchange Act of 1934. Any statement that is not historical in nature is a forward-looking statement and may be identified by the use of words and phrases such as “if”, “may”, “expects”, “anticipates”, “believes”, “will”, “will likely result”, “will continue”, “plans to”, “potential”, “promising”, and similar expressions. These statements are based on management’s current expectations and beliefs and are subject to a number of risks, uncertainties and assumptions that could cause actual results to differ materially from those described in the forward-looking statements, including potential for Phase 2 NDV-01 data to be presented at an upcoming medical conference, potential for Phase 2 NDV-01 data to deliver positive results supporting further development, potential for clinical trials to deliver statistically and/or clinically significant evidence of efficacy and/or safety, failure of top-line results to accurately reflect the complete results of the trial, failure of planned or ongoing preclinical and clinical studies to demonstrate expected results, potential failure to secure FDA agreement on the regulatory path for sepranolone, and NDV-01, or that future sepranolone, or NDV-01 clinical results will be acceptable to the FDA, failure to secure adequate sepranolone, or NDV-01 drug supply and the other risk factors described under the heading “Risk Factors” set forth in the Company’s reports filed with the SEC from time to time. No forward-looking statement can be guaranteed, and actual results may differ materially from those projected. Relmada undertakes no obligation to publicly update any forward-looking statement, whether as a result of new information, future events, or otherwise. Readers are cautioned that it is not possible to predict or identify all the risks, uncertainties and other factors that may affect future results and that the risks described herein should not be a complete list.

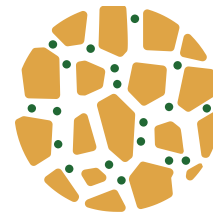
**NDV-01 is an
investigational
intravesical therapy
designed for the
extended release of
gemcitabine and
docetaxel**

- NDV-01 is an in-situ drug reservoir inside the bladder
- NDV-01 delivers simultaneously a fixed dose combination of gemcitabine (1000mg) and docetaxel (40mg)
- NDV-01 releases a drugs into the bladder continuously for over 10 days
- NDV-01 is biodegradable, gradually disintegrates, and safely excreted in urine
- NDV-01 has been demonstrated in interim Phase 2 data, to be safe and highly tolerable resulting in good patient compliance
- NDV-01 is supplied as prefilled syringe ready for use, easily instilled manually in less then 10 minutes

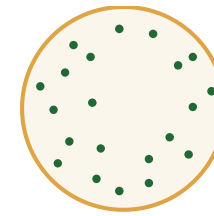
Targeted intravesical therapy



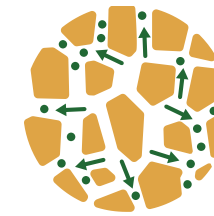
Bladder-targeted solid matrix drives sustained tumor exposure to the cytotoxic drug combination through controlled release and gradual erosion



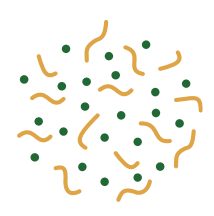
**Diffusion
through
pores**



**Diffusion
through the
polymer**



**Osmotic
pumping**



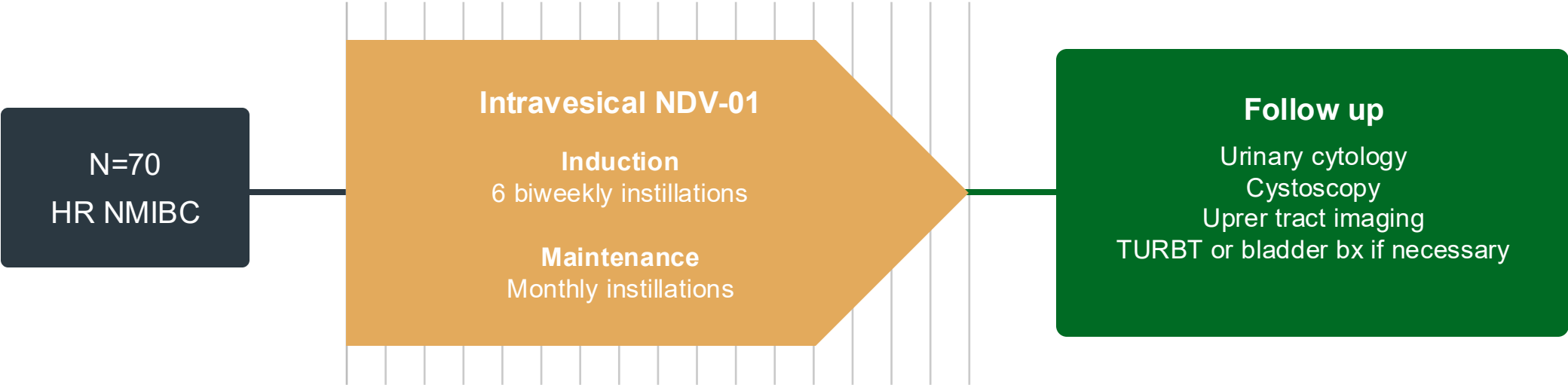
Erosion

Ongoing TRCG-011 study in high-risk NMIBC patients

An open-label, single-arm single-center study to evaluates safety and efficacy of NDV-01 in HR NMIBC patients

Inclusion criteria	Purpose	Primary endpoint	Secondary endpoint	Other
<ul style="list-style-type: none">• High-grade disease with Ta, Tis/CIS, T1 tumors• BCG naïve, BCG unresponsive, intolerant and experienced patients	Evaluate the potential of NDV-01 as a safe and effective treatment for patients with high-risk NMIBC	<ul style="list-style-type: none">• Safety• CRR at 12 months	<ul style="list-style-type: none">• DOR• EFS	<ul style="list-style-type: none">• PK

Study design



Demographic data

Characteristics	N=26	%
Age		
Median {IQR}, yr	72.4 {66.9-78.3} yr	
Sex		
Male	22	84.6%
Female	4	15.4%
Race		
Caucasian	26	100%
Smoking status		
Never	13	50%
Former	7	27%
Current	6	23%
ECOG PS		
0	19	73%
1	7	27%

Patients and methods

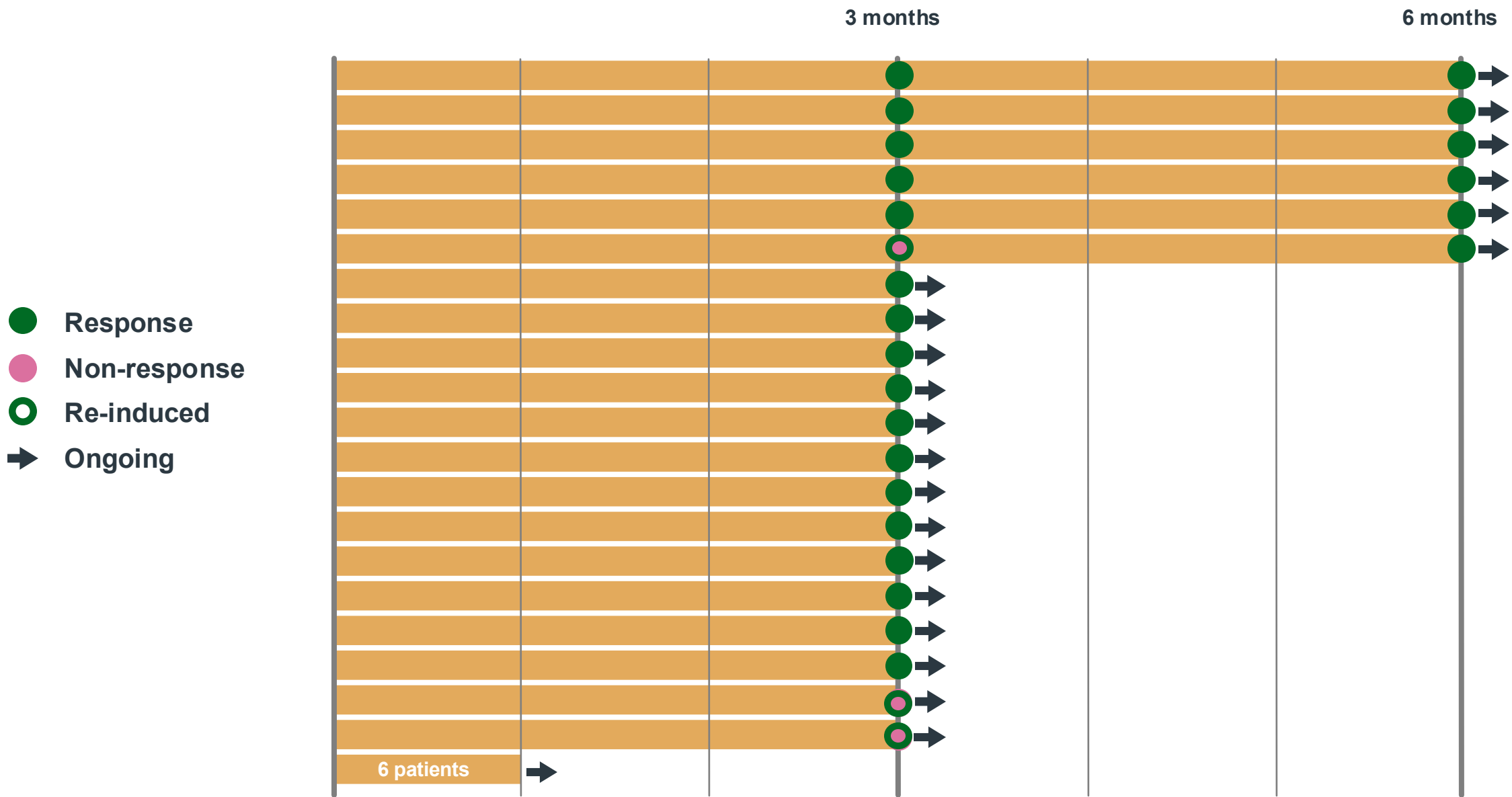
Pathology	N=26	%
CIS	3	11.5%
Ta HG	16	61.5%
T1 HG	7	27.0%

Status	N=26	%
BCG-naïve	9	34.6%
BCG-unresponsive	14	53.9%
BCG-intolerant	3	11.5%

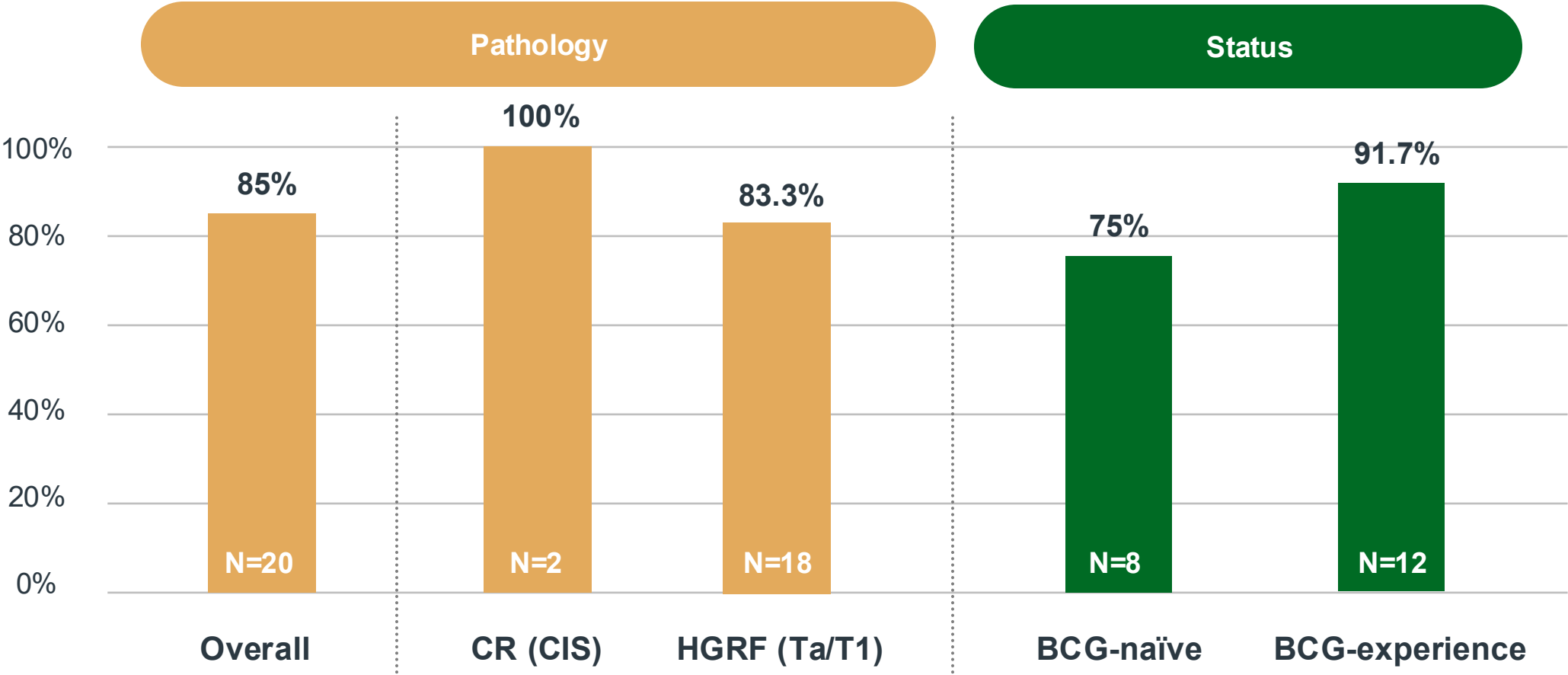
Treatment emergent AE and tolerability (n=26)

- 8 cases (30.7%) G1 dysuria resolved during two days
- 5 cases (19.2%) of G1 unspecific flank pain probably of musculoskeletal origin resolved during 24 hours
- BCG Unresponsive / Intolerant Patients Quality of Life Score improved by 25.8 points

NDV-01 has shown durable response over time

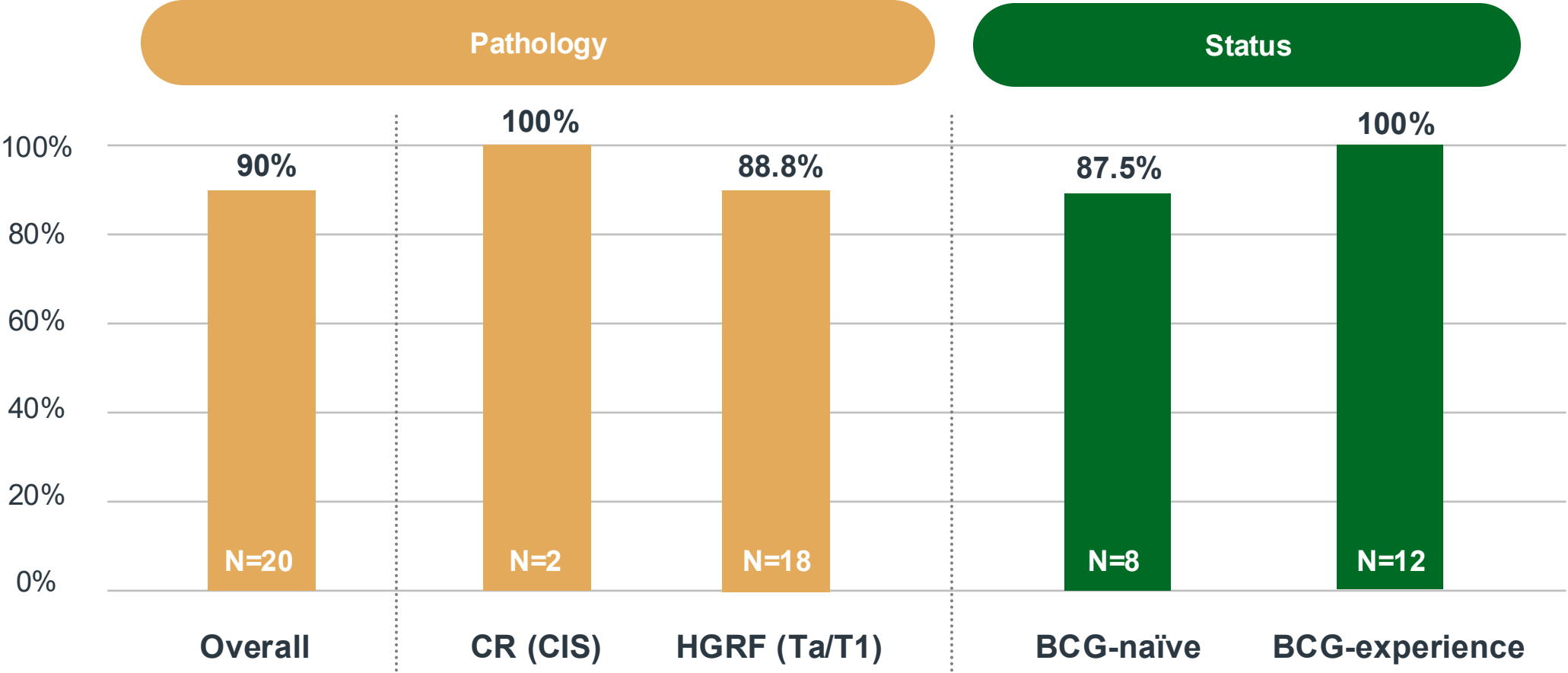


Clinical activity at 3 months time point



NDV-01 demonstrated significant clinical activity at 3 months. The complete response rate in CIS patients was 100%, indicating a strong initial response. Additionally, 83.3% of patients with high-grade papillary disease achieved a high-grade recurrence-free status. These results underscore the therapeutic potential of NDV-01 in managing HR NMIBC and improving patient outcomes.

Clinical activity at any time



NDV-01 demonstrated significant clinical activity at any time. The complete response rate in CIS patients was 100%, indicating a strong initial response. Additionally, 88.8% of patients with high-grade papillary disease achieved a high-grade recurrence-free status. One patient who did not respond in 3 months was re-induced and become a responder at 6 months.

NDV-01 is uniquely designed for busy urology practices

Workflow integration

- GEM/DOCE frequently used and well understood by urologists
- Intravesical administration via standard urinary catheter

Ease of administration for clinicians

- Ready to use in pre-filled syringe presentation
- Doesn't require dedicated ancillaries
- No biosafety requirements

Ease of administration for patients

- Short administration procedure (10 minutes)
- No need for burdensome removal procedure
- Safe and well tolerated with good patient compliance

Key takeaways

Preparations are underway to advance the NDV-01 program towards registrational studies

- 1 NMIBC represents a **multi-billion dollar opportunity**, based on a US prevalence of 600,000 patients. Current treatment options are limited
- 2 Today, Relmada presented **positive initial, three-month Phase 2 data** for NDV-01, an investigational, sustained release formulation of gemcitabine/docetaxol (**GEM/DOCE**)
- 3 **90% of patients treated with NDV-01 achieved high-grade disease-free status at any time point** following treatment, including **88% HGRFS in papillary patients** and a **100% complete response in patients with CIS**
- 4 We believe NDV-01 has the potential to become the class-leading therapy for NMIBC across a wide spectrum of patients based on compelling proof-of-concept for NDV-01 as a bladder-sparing therapy
- 5 We are enthusiastic about advancing this differentiated, ready-to-use GEM/DOCE formulation to improve patient outcomes and expand treatment options in NMIBC



Thank you