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# **CohBar Announces Preclinical Collaboration with NIAID to Evaluate Potential of CB5064 Analogs for Treatment of COVID-19 ARDS**

MENLO PARK, Calif., Jan. 11, 2021 (GLOBE NEWSWIRE) -- CohBar, Inc. (NASDAQ: CWBR), a clinical stage biotechnology company developing mitochondria based therapeutics to treat chronic diseases and extend healthy lifespan, today announced it has signed a Non-Clinical Evaluation Agreement (NCEA) with the National Institute of Allergy and Infectious Diseases (NIAID) to evaluate the potential of CB5064 Analogs for the treatment of COVID-19 associated Acute Respiratory Distress Syndrome (ARDS). The company is developing its CB5064 Analogs for potential treatment of ARDS, including COVID-19 associated ARDS. This program has shown positive results in models of acute lung injury, which included reduced levels of fluid accumulation, neutrophil infiltration, and cytokine secretion.

CohBar, Inc. will be utilizing the non-clinical and pre-clinical services program offered by the National Institute of Allergy and Infectious Diseases. The NIAID will be responsible for any study conducted under the NCEA. Under the agreement, NIAID will be provided with CohBar's CB5064 Analogs to test in preclinical models of COVID-19, such as the golden Syrian hamster SARS-CoV-2 model. This model has been used in the assessment of other COVID-19 therapeutics and demonstrates clinical features, viral kinetics, histopathological changes, and immune responses similar to mild to moderate disease seen in human COVID-19 patients.<sup>i</sup>

Previously, CohBar submitted its CB5064 Analog program to Accelerating COVID-19 Therapeutic Interventions and Vaccines (ACTIV), a public-private partnership led by the National Institutes of Health (NIH) and coordinated by the Foundation for the National Institutes of Health (FNIH) to develop a research strategy for prioritizing and speeding development of the most promising COVID-19 vaccines and treatments. Discussion with NIAID was initiated following review of the program by ACTIV/FNIH.

"We are pleased to collaborate with NIAID to provide further evaluation of our CB5064 Analogs in a model of COVID-19 ARDS," stated Dr. Kenneth Cundy, CohBar's Chief Scientific Officer. "CohBar's mitochondrial based therapeutics may generate entirely new approaches to diseases, which we believe complements the pioneering work being conducted by NIAID. We look forward to working with NIAID on this research program."

A division of the National Institutes of Health (NIH), NIAID conducts and supports basic and applied research to better understand, treat, and ultimately prevent infectious, immunologic, and allergic diseases.

## **About CohBar**

CohBar (NASDAQ: CWBR) is a clinical stage biotechnology company focused on the research and development of mitochondria based therapeutics, an emerging class of drugs for the treatment of chronic and age-related diseases. Mitochondria based therapeutics originate from the discovery by CohBar's founders of a novel group of naturally occurring peptide sequences within the mitochondrial genome, some of which have been shown to have the potential to regulate key processes in multiple systems and organs in the body. To date, the company has discovered more than 100 mitochondrial derived peptides and generated over 1,000 analogs. CohBar's efforts focus on the development of these peptides into therapeutics that offer the potential to address a broad range of diseases because of the underlying impact of mitochondrial dysfunction. The company's lead compound, CB4211, is in the Phase 1b stage of a Phase 1a/1b clinical trial for NASH and obesity. In addition, CohBar has four preclinical programs: CB5138 Analogs for fibrotic diseases, CB5064 Analogs for COVID-19 associated ARDS, CB5046 Analogs for CXCR4-related cancer and orphan diseases, and MBT3 Analogs for cancer immunotherapy.

For additional company information, please visit [www.cohbar.com](http://www.cohbar.com).

## **Forward-Looking Statements**

This news release contains forward-looking statements which are not historical facts within the meaning of the Private Securities Litigation Reform Act of 1995. Forward-looking statements are based only on our current beliefs, expectations and assumptions regarding the future of our business, future plans and strategies, projections, anticipated events and other future conditions. In some cases you can identify these statements by forward-looking words such as "believe," "may," "will," "estimate," "continue," "anticipate," "intend," "could," "should," "would," "project," "plan," "expect," "goal," "seek," "future," "likely" or the negative or plural of these words or similar expressions. Examples of such forward-looking statements include but are not limited to statements regarding anticipated outcomes of research and clinical trials for our mitochondria based therapeutic (MBT) candidates; expectations regarding the anticipated outcomes of non-clinical and pre-clinical services program for our MBT candidates; expectations regarding the growth of MBTs as a significant future class of drug products; and statements regarding anticipated therapeutic properties and potential of our mitochondrial peptide analogs, MBTs and other potential therapies, including but not limited to in the treatment of IPF and COVID-19 associated ARDS. You are cautioned that such statements are not guarantees of future performance and that actual results or developments may differ materially from those set forth in these forward-looking statements. Factors that could cause actual results to differ materially from these forward-looking statements include: our ability to successfully advance drug discovery and development programs and collaborations, including the delay or termination of ongoing clinical trials; our possible inability to mitigate the prevalence and/or persistence of the injection site reactions, receipt of unfavorable feedback from regulators regarding the safety or tolerability of CB4211 or the possibility of other developments affecting the viability of CB4211 as a clinical candidate or its commercial potential; results that are different from earlier data results including less favorable than and that may not support further clinical development; our ability to raise additional capital when necessary to continue our operations; our ability to recruit and retain key management and scientific personnel; the risk that our intellectual property may not be adequately protected; our ability to establish and maintain partnerships

with corporate and industry partners; and risks related to the impact on our business of the COVID-19 pandemic or similar public health crises. Additional assumptions, risks and uncertainties are described in detail in our registration statements, reports and other filings with the Securities and Exchange Commission and applicable Canadian securities regulators, which are available on our website, and at [www.sec.gov](http://www.sec.gov) or [www.sedar.com](http://www.sedar.com).

You are cautioned that such statements are not guarantees of future performance and that our actual results may differ materially from those set forth in the forward-looking statements. The forward-looking statements and other information contained in this news release are made as of the date hereof and CohBar does not undertake any obligation to update publicly or revise any forward-looking statements or information, whether as a result of new information, future events or otherwise, unless so required by applicable securities laws. Nothing herein shall constitute an offer to sell or the solicitation of an offer to buy any securities.

<sup>i</sup> Hewitt, Judith A., et al. "ACTIVating Resources for the COVID-19 Pandemic: In Vivo Models for Vaccines and Therapeutics." *Cell Host & Microbe*, 16 Sept. 2020, pp. 646–659., doi:<https://doi.org/10.1016/j.chom.2020.09.016>.

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