

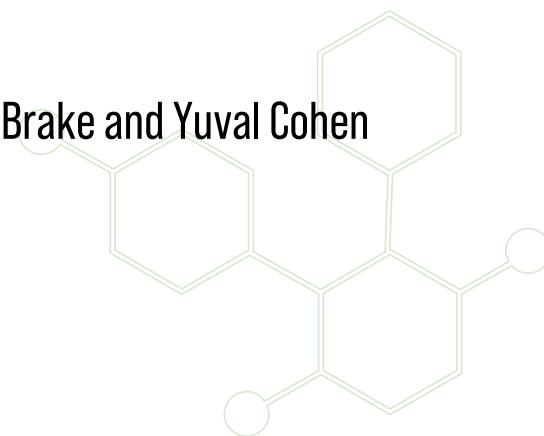


Obesity Week 2023

CRB-913: A Novel Oral Cannabinoid Receptor-1 (CB-1) Inverse Agonist Enhances Tirzepatide and Semaglutide Efficacy in a Diet Induced Obesity Mouse Model

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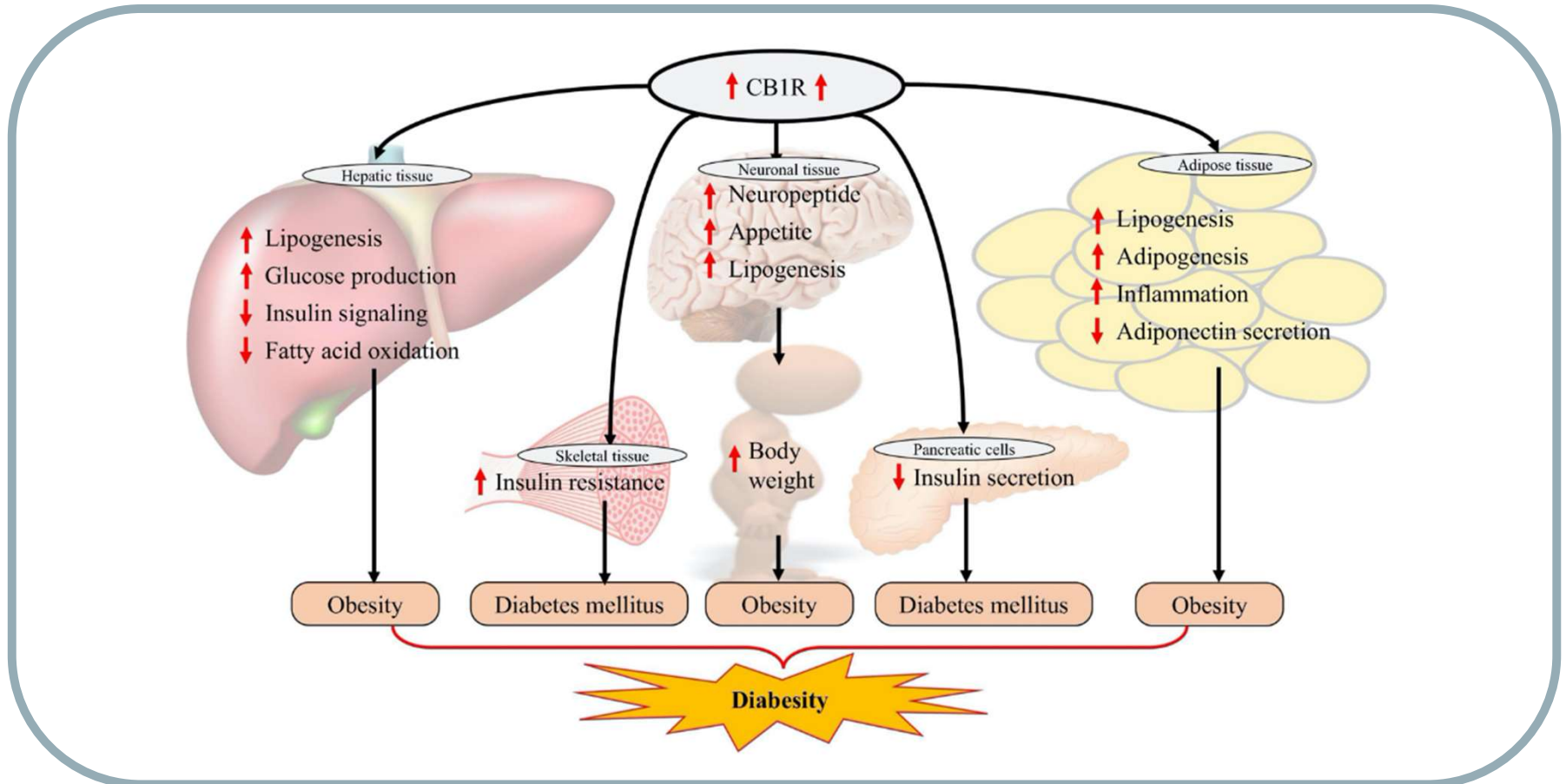
October 16, 2023

FORWARD-LOOKING STATEMENTS



This presentation contains certain 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 and Private Securities Litigation Reform Act, as amended, including those relating to the Company's restructuring, trial results, product development, clinical and regulatory timelines, market opportunity, competitive position, possible or assumed future results of operations, business strategies, potential growth opportunities and other statements that are predictive in nature. These forward-looking statements are based on current expectations, estimates, forecasts and projections about the industry and markets in which we operate and management's current beliefs and assumptions. These statements may be identified by the use of forward-looking expressions, including, but not limited to, "expect," "anticipate," "intend," "plan," "believe," "estimate," "potential," "predict," "project," "should," "would" and similar expressions and the negatives of those terms. These statements relate to future events or our financial performance and involve known and unknown risks, uncertainties, and other factors, including the potential impact of the recent COVID-19 pandemic and the potential impact of sustained social distancing efforts, on our operations, clinical development plans and timelines, which may cause actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements. Such factors include those set forth in the Company's filings with the Securities and Exchange Commission. Prospective investors are cautioned not to place undue reliance on such forward-looking statements, which speak only as of the date of this press release. The Company undertakes no obligation to publicly update any forward-looking statement, whether as a result of new information, future events or otherwise.

CB1 activation contributes to “Diabetesity”

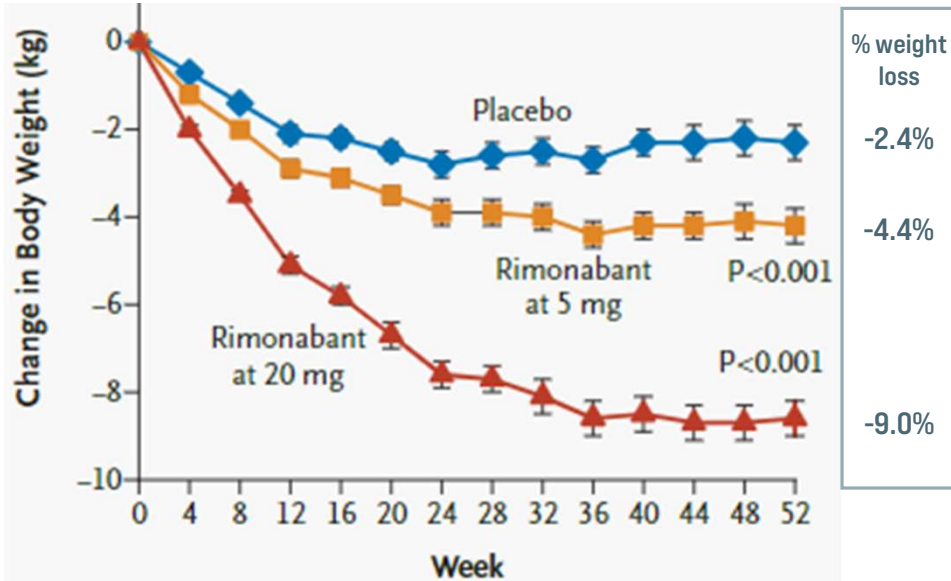


The CB1 MOA is clinically validated in obesity



Rimonabant¹

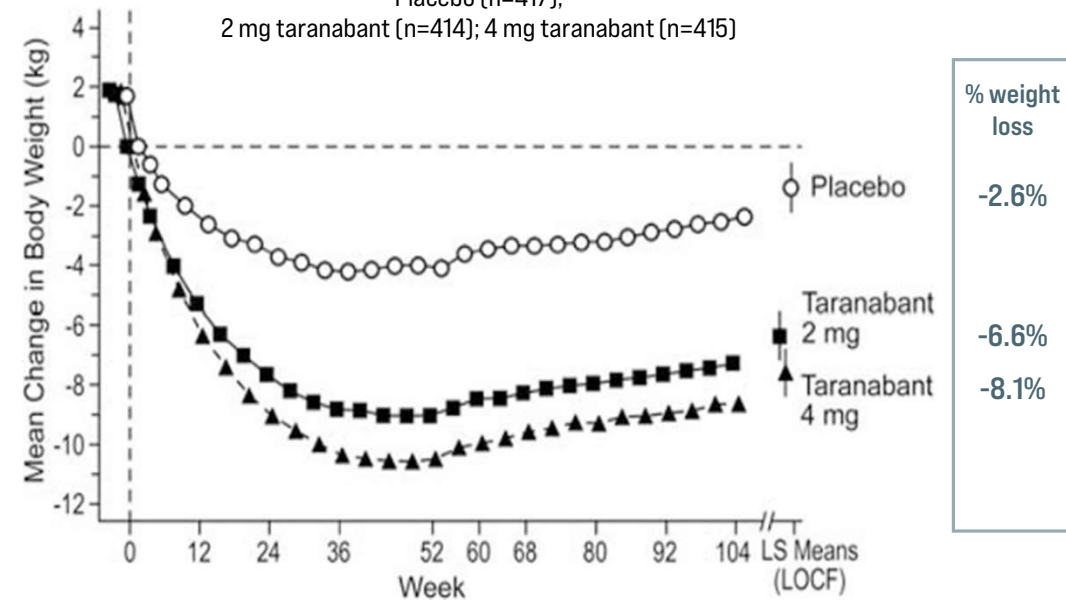
RIO-Lipids Phase 3 study
 Placebo (n=342);
 5 mg rimonabant (n=345); 20 mg rimonabant (n=346)



Approved (2006) → Withdrawn (2008)

Taranabant²

Completed Phase 3 studies (2 and 4 mg) (2 yr)
 Placebo (n=417);
 2 mg taranabant (n=414); 4 mg taranabant (n=415)



Phase 3 completed

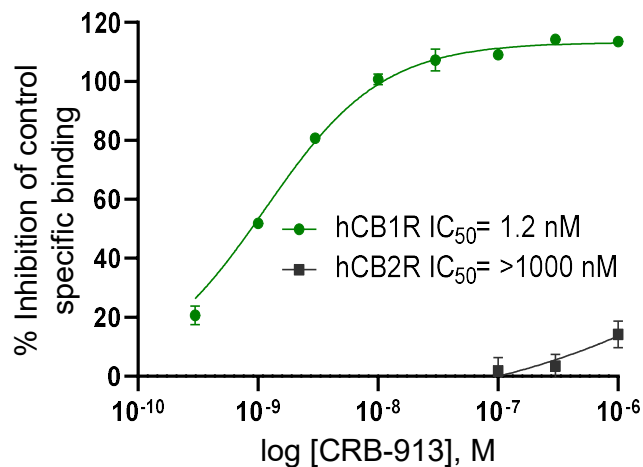
Source(s): 1. Effects of rimonabant on metabolic risk factors in overweight patients with dyslipidemia, Després et al, NEJM, Nov 2005.
 2. A clinical trial assessing the safety and efficacy of taranabant, a CB1R inverse agonist, in obese and overweight patients: a high-dose study, Aronne et al, Nature, Feb 2010.

CRB-913 is a potent and selective CB1 receptor inverse agonist

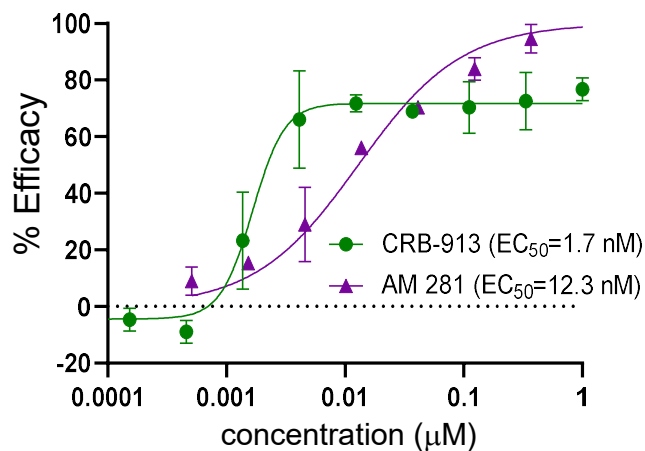


- High selectivity over the CB2 isoform, improved potency across binding and functional assays vs. rimonabant

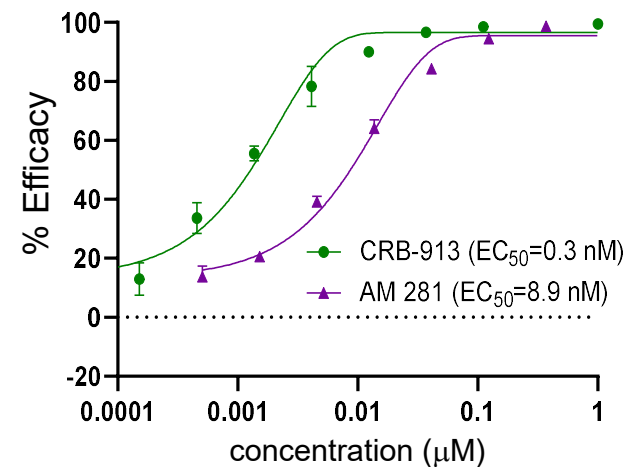
Receptor Binding Affinity



cAMP

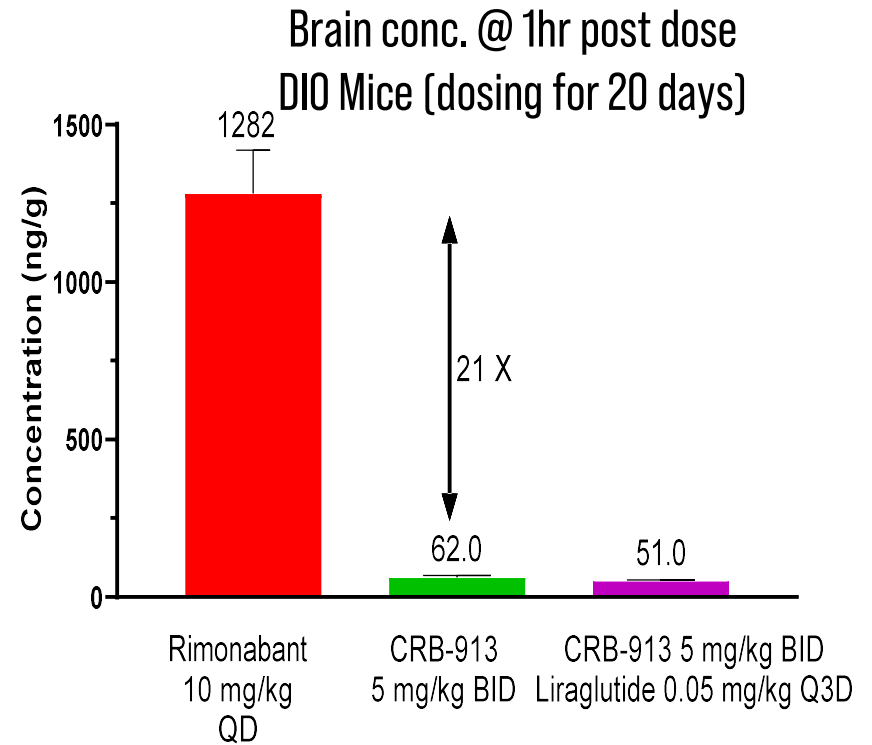
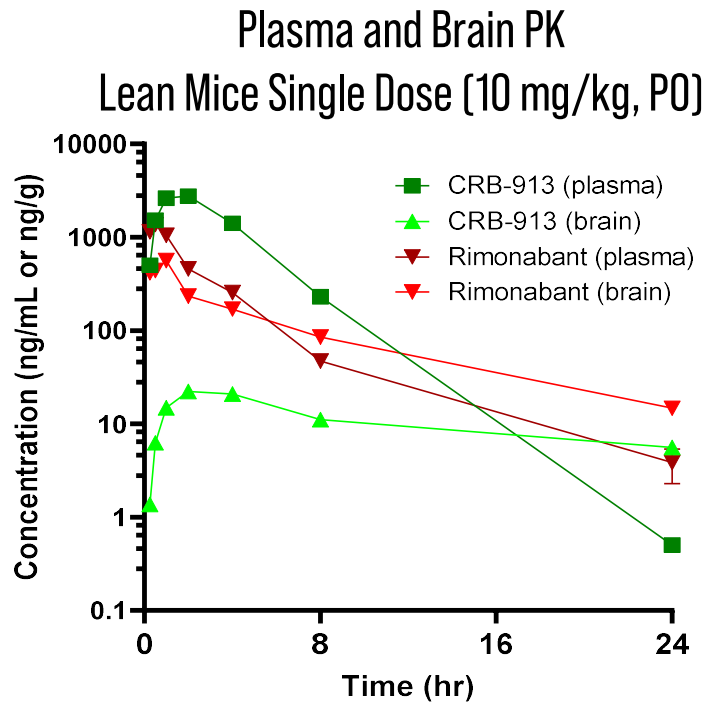


β arrestin

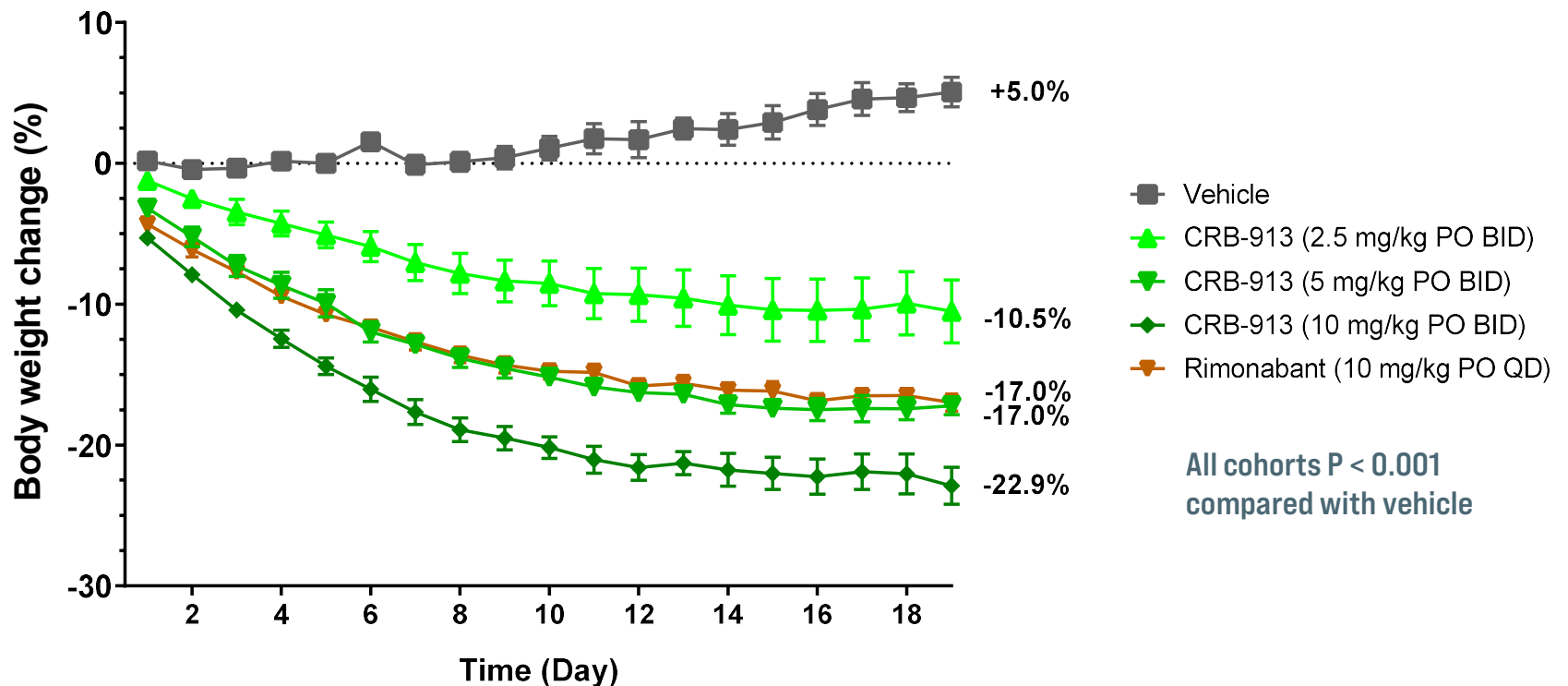


	CB1 EC_{50} cAMP Inverse Agonist (nM)	CB1 IC_{50} (nM)	CB2 IC_{50} (nM)
Rimonabant	51	4.1	1,600
CRB-913	1.7	1.2	>1,000

CRB-913 PK demonstrates 21-fold lower brain exposure than rimonabant



CRB-913 induces significant dose dependent reduction in body weight



Data were presented as Mean \pm Sem; Two way ANOVA followed by Dunnett test by Prism GraphPad; n=6

All cohorts P < 0.001 compared with vehicle

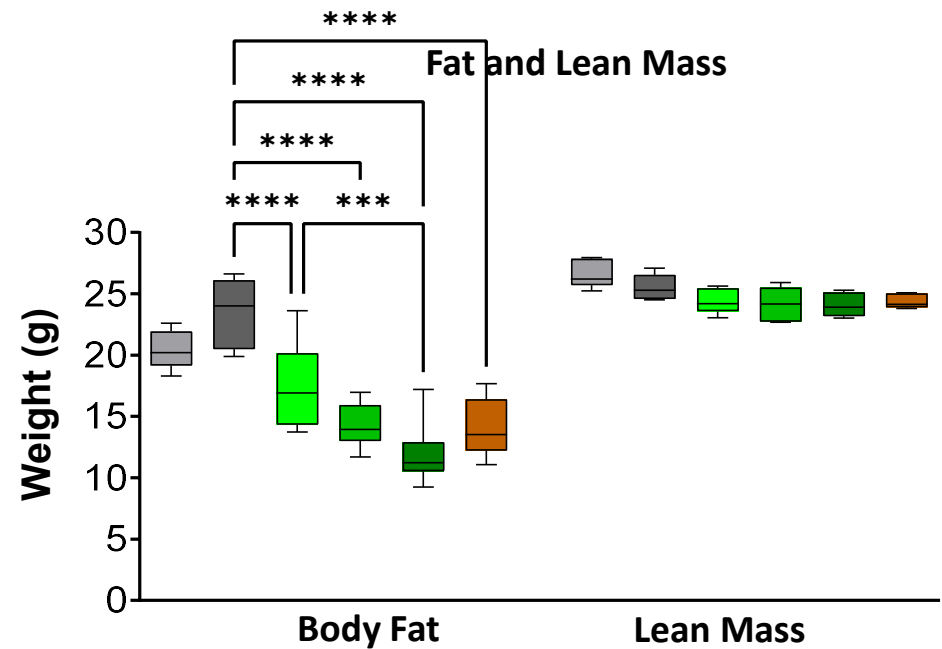
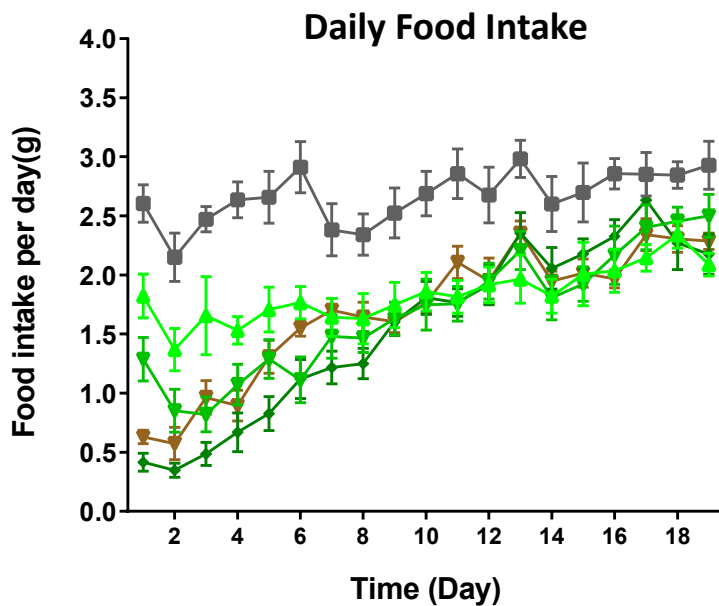
- DIO mouse model with C57BL6/J mice (n=6/gp) fed a continuous high fat diet for 22 weeks prior to treatment with CRB-913

Weight loss is related to reduced food consumption and results in reduced body fat content but not lean mass



Vehicle (Day 0)
 Vehicle (Day 20)
 Rimonabant (10 mg/kg PO QD)

CRB-913 (2.5 mg/kg PO BID)
 CRB-913 (5 mg/kg PO BID)
 CRB-913 (10 mg/kg PO BID)

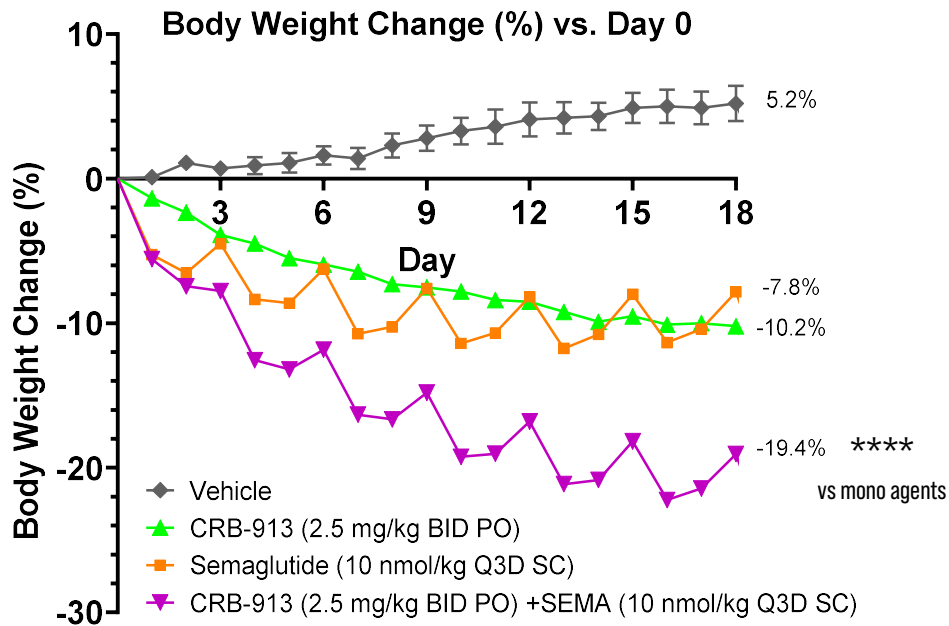


- DIO mouse model with C57BL6/J mice (n=6) fed a continuous high fat diet for 22 weeks prior to CRB-913 treatment
- Body fat by MRI determined on Day 20

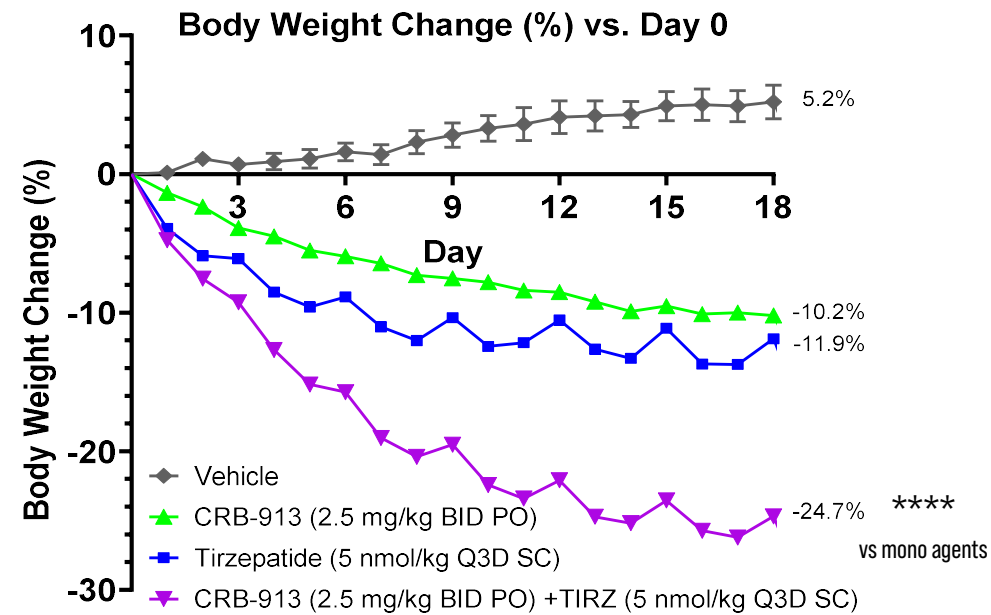
CRB-913: additive weight loss in combination with semaglutide & tirzepatide



semaglutide



tirzepatide

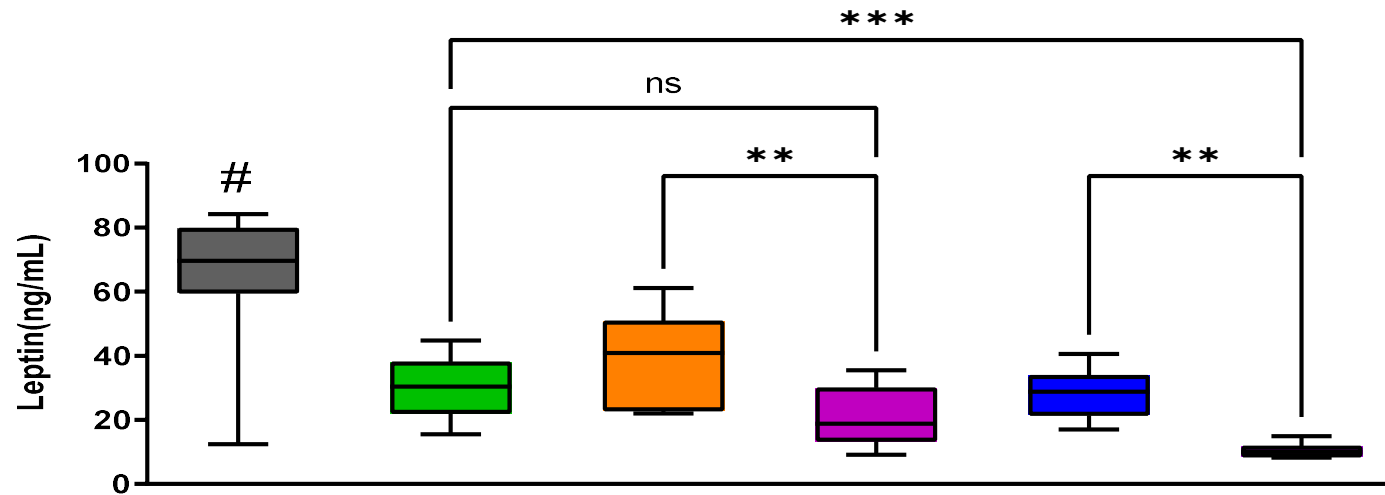


Data were presented as Mean \pm Sem; Two-way ANOVA followed by Dunnett test by Prism GraphPad; n=6. *P<0.05, ****P<0.0001

DIO mouse model with C57BL6/J mice (n=10) fed a continuous high fat diet for 22 weeks prior

[CB1 and GLP-1 Receptors Cross Talk Provides New Therapies for Obesity. Diabetes, 70, 415-422, 2021](#)

CRB-913 reduces leptin levels alone and in combination with incretin therapies



CRB-913	-	+	-	+	-	+
Incretin	vehicle		semaglutide		tirzepatide	

Data were presented as Mean \pm Sem; Two-way ANOVA followed by Dunnett test by Prism GraphPad; n=6.
*P<0.05, ****P<0.0001

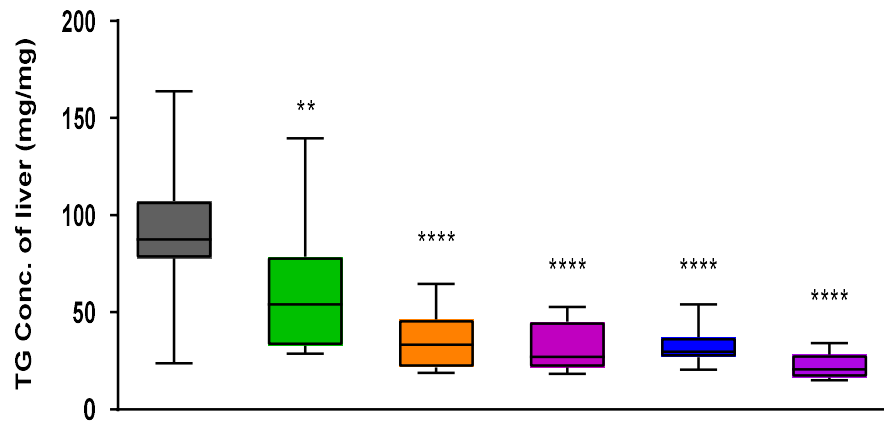
All cohorts P < 0.001 compared with vehicle

- DIO mouse model with C57BL6/J mice (n=10) fed a continuous high fat diet for 22 weeks prior
- Determined on Day 29 after 5 h fasting and 2 h post final dose

CRB-913 reduces liver triglycerides alone and in combination with incretin therapies

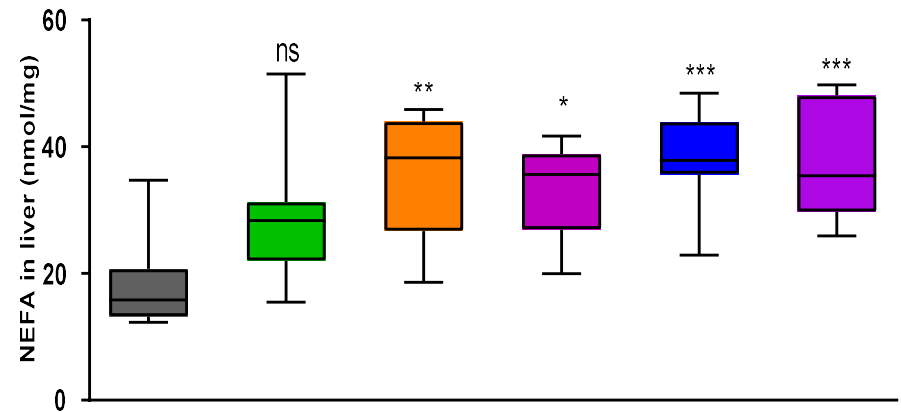


Triglycerides (liver)



CRB-913	-	+	-	+	-	+
Incretin	vehicle		semaglutide		tirzepatide	

Non-esterified fatty acid (liver)

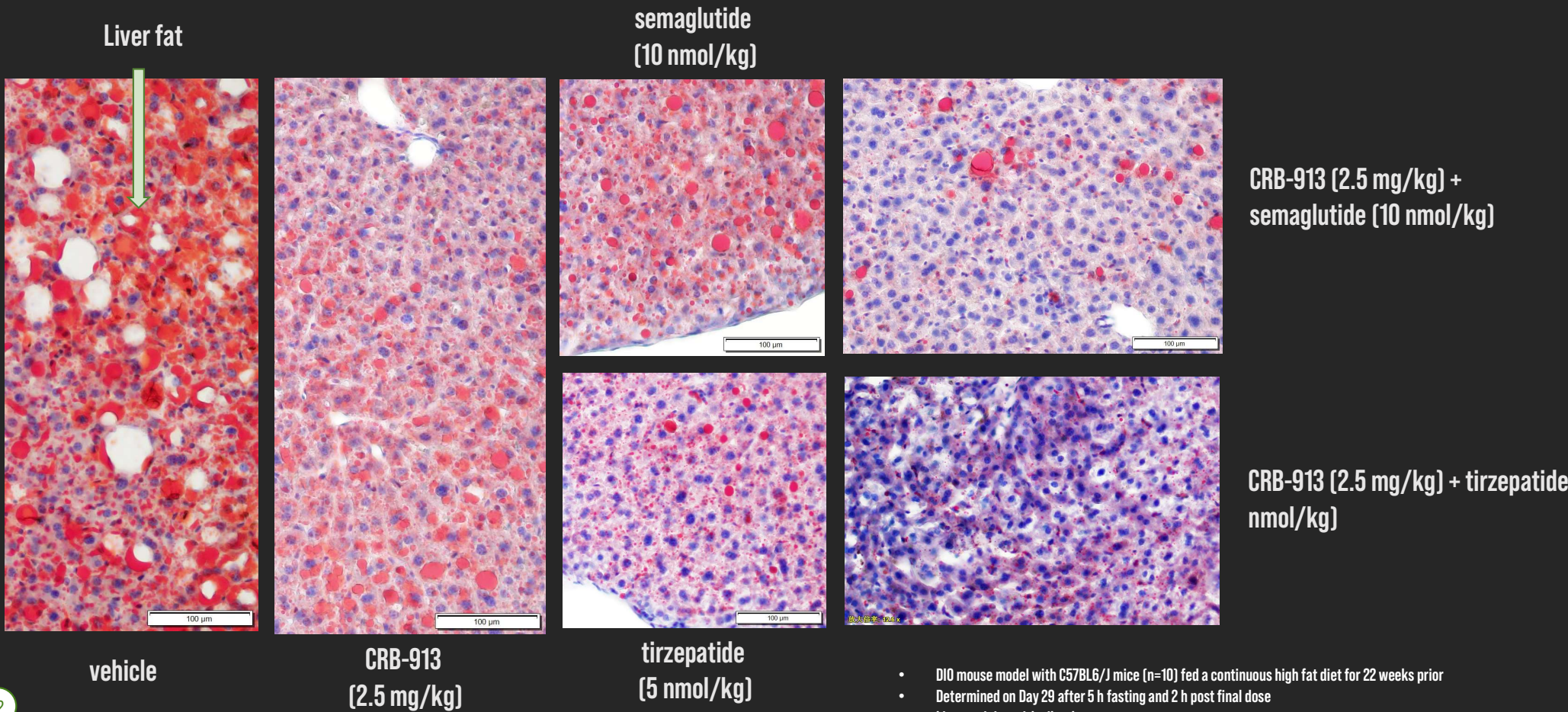


CRB-913	-	+	-	+	-	+
Incretin	vehicle		semaglutide		tirzepatide	

Data were presented as Mean \pm Sem; Two-way ANOVA followed by Dunnett test by Prism GraphPad; n=6.
*P<0.05, ****P<0.0001 vs Vehicle

- DIO mouse model with C57BL6/J mice (n=10) fed a continuous high fat diet for 22 weeks prior
- Determined on Day 29 after 5 h fasting and 2 h post final dose

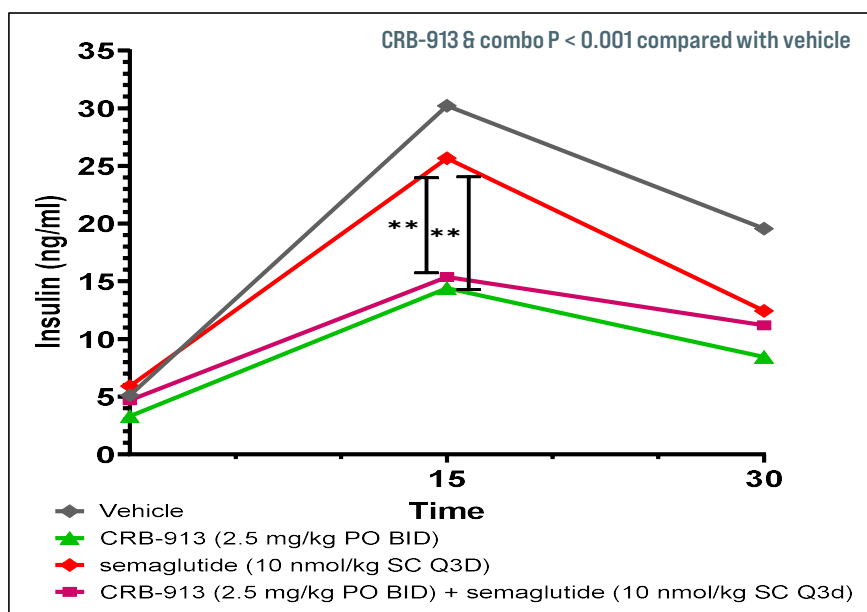
CRB-913 treatment reduces liver fat storage alone and in combination with incretin therapies



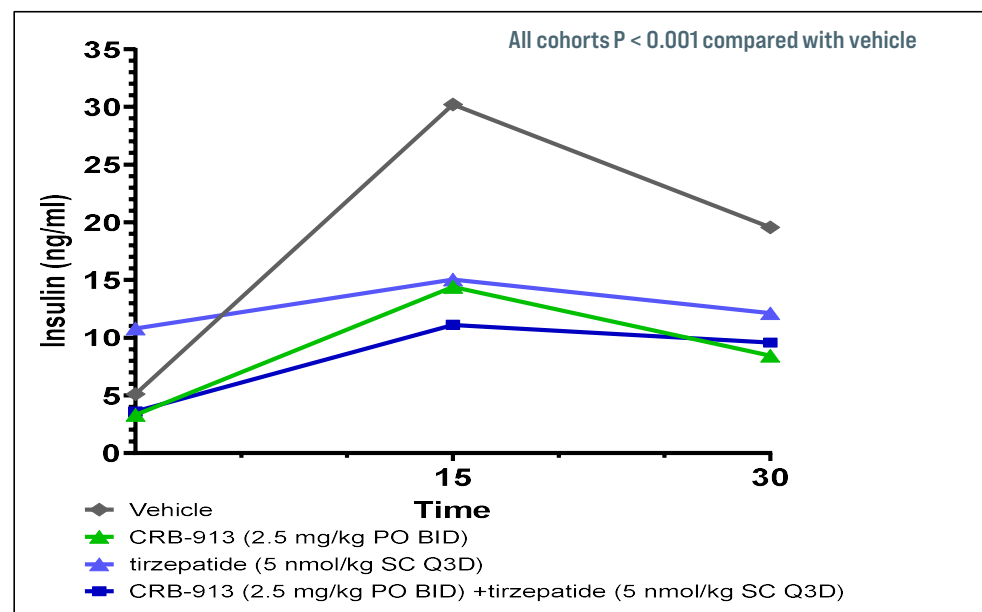
CRB-913 reduces peak insulin alone or in combination with semaglutide or tirzepatide in oGTT



semaglutide



tirzepatide



- DIO mouse model with C57BL6/J mice (n=10) fed a continuous high fat diet for 22 weeks prior
- Determined on treatment Day 21 by fasting after evening dosing and 1h post morning dosing
- Oral gavage with glucose at 2g/kg at a dose volume of 5ml/kg
- Reduced fasting glucose levels in CRB-913 and incretin treated groups and reduced glucose AUC0-120min



- Orally available small molecule CB1 inverse agonist with dose dependent weight loss in preclinical animal models, attributed to reduced food intake and body fat content
- Highly differentiated brain and plasma PK from 1st gen CB1 inverse agonists
- Additive efficacy in driving weight loss when administered in combination with incretin therapies
 - Reduced leptinemia, liver lipid storage, and insulin release (oGTT)
- Potential as an adjunctive therapy to improve current incretin regimes or add to novel GLP1/GIP oral therapies in development

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