20 Years of Experience and Growing Fast

Investor Presentation
September 2025

CURATIS
Innovative Specialist Medicines

Overview

- The company was founded in 2002
- Solid portfolio with 40 products in distribution, recently contracted 4 new products with Phoenix Labs
- Several products in development pipeline with C-PTBE-01 (peritumoral brain edema) as late stage lead product candidate, Phase 3 ready
- Haemopressin (Terlipressin) was developed as a pharmaceutical product, launched internationally and sold to a European pharmaceutical company
- Experienced management with significant stake in company (founder controlled)
- Curatis Holding AG has been listed on SIX since April 2024 (SIX:CURN)

Vision: We are a leading provider of specialist medicines in Europe and beyond

We search for innovative medicines for the prevention, diagnosis and treatment of rare diseases and other niche areas. We commercialize and bring products to market.

CURATIS
Innovative Specialist Medicines

Distribution of specialist medicines

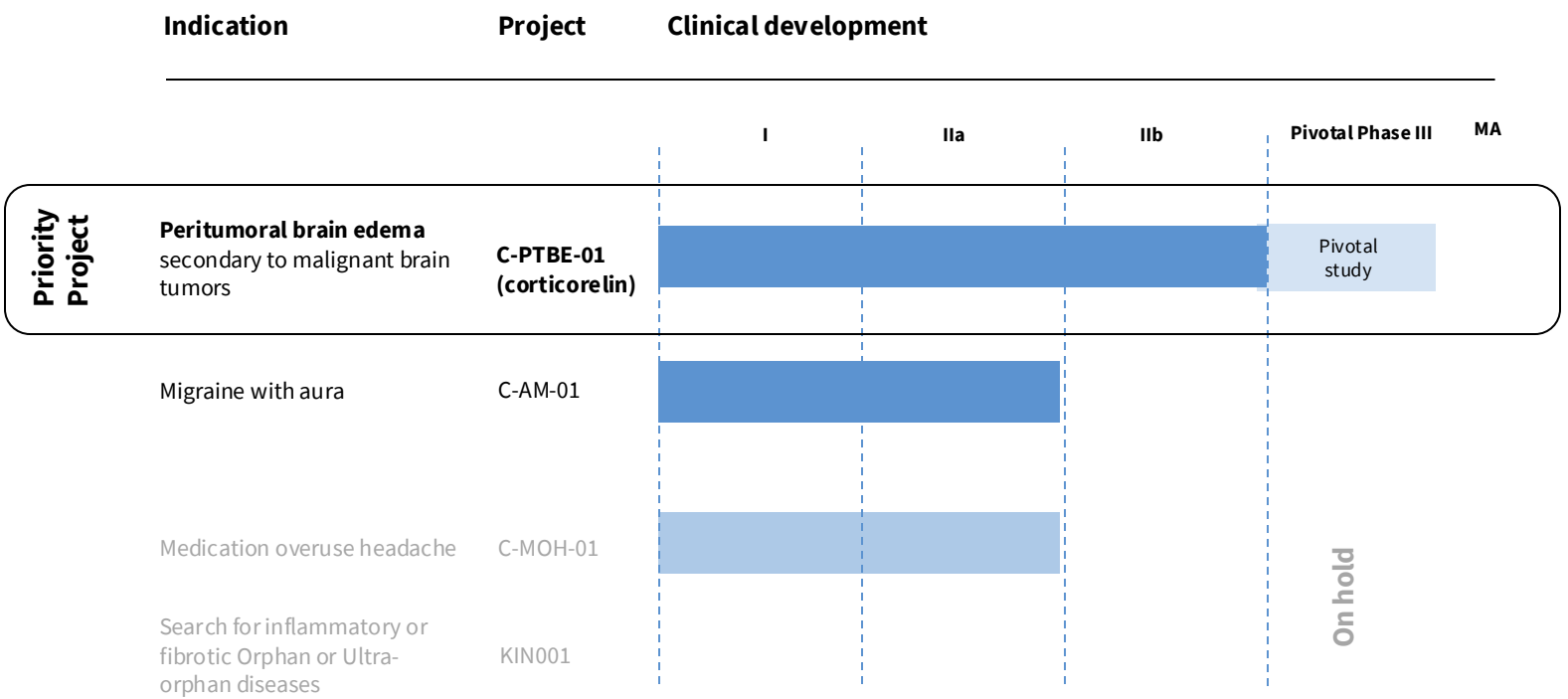
Growing and profitable distribution business Switzerland

- Curatis sales business currently focused on Switzerland
- >40 products distributed in Switzerland
- Sales growth H1 2025: 14%
- Estimated revenues in 2025: >10m CHF
- Announced distribution contract with Phoenix Labs for 4 new products
- Several others under review

Expansion of distribution

- Expansion of rare disease and specialty medicines knowledge into the following countries is planned:
  - Germany
  - France
  - Italy
  - United Kingdom

Development pipeline



PTBE secondary to brain cancer

Brain cancer: prevalent & high need population

Brain Cancer

Metastatic

- Is the most prevalent type of brain cancer in adults
- Major impact on patient's quality of life
- Estimates of up to 400.000 prevalent patients in US alone [1]
- Most common primary sites are [1,2]:
  - pulmonary (39–56%)
  - breast (13–30%)
  - skin (8–11%)
  - gastrointestinal (6–9%)
  - renal cancer (2–6%)
- Overall survival generally exceeds 6 months, with a range of 8-16 months [3]
- Association with PTBE in most cases [4]
- Brain metastases in children are extremely rare, but can be seen secondary to neuroblastoma

Primary

- High mortality despite often early diagnosis
- Major impact on patient's quality of life
- In the US alone ~180.000 prevalent patients reported for 2022 [5]
- Association with PTBE of up to 60% of cases dependent on the subtype of brain cancer
- Most common adult primary brain tumors are [6]:
  - glioblastoma (49%)
  - other gliomas with CNS parenchyma infiltration (30%)
  - primary CNS lymphoma (7%)
- Most common pediatric primary brain tumors are [7]:
  - Medulloblastoma (20%)
  - high-grade gliomas (15%)
  - Ependymoma (10%)

Sources: [1] Schroeder et al. J Neuro Oncol 2020, [2] Lamba et al, Neuro Oncol 2021, [3] Shih et al. UpToDate *accessed 21May2025*, [4] Hong Toh et al. Front Oncol 2021, [5] US SEER database *accessed 15May2025*, [7] Schaff et al. JAMA 2023, [7] Thorbinson et al Cancers 2021

Metastatic brain cancer: US prevalence

Metastatic Brain Cancer

Cancer Origin	US Prevalence [1]	US Prevalence Presenting with Brain metastases [2]
Lung	635,547	101,688
Melanoma	1,504,676	22,570
Breast	4,091,181	12,274
Colorectal	1,416,499	4,249

Sources: [1] SEER seer.cancer.gov › statfacts (accessed May 1, 2025) [2] Miccio JA et al. Commun Med (Lond) 2024 Feb 22;4(1):27

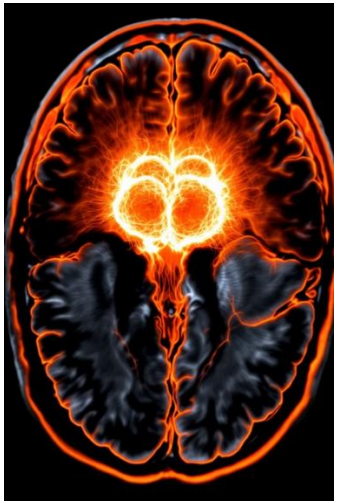
Peritumoral Brain Edema : Understanding the Challenge

Definition

PTBE is associated with many primary and metastatic brain tumours, which through the accumulation of extracellular fluid around the tumour results in compression of brain tissue and subsequent impairment of brain function(s)

Impact

PTBE significantly compounds the morbidity of brain tumors, causing headaches, seizures, cognitive impairment, and potentially life-threatening increased intracranial pressure.



PTBE represents a critical challenge in neuro-oncology, as it both exacerbates tumor symptoms and limits treatment options. Managing this condition effectively without harmful side effects could transform patient outcomes and quality of life.

PTBE secondary to brain cancer: US prevalence

PTBE secondary to metastatic brain tumor	
Lung, Melanoma, Breast, Colorectal, Kidney	**~100,000**

PTBE secondary to primary brain tumor	
Gliomas	**~90,000**

Standard Treatment of PTBE

- The standard treatment for PTBE are corticosteroids, developed first in 1948 [1], which often cause significant side effects
  - such as severe myopathy, muscle wasting, impaired glucose metabolism, immunosuppression, glucose intolerance, abnormal weight gain, osteoporosis, gastritis, gastrointestinal bleeding, hypertension and personality changes

- Corticosteroids can also hamper the effect of certain cancer therapies such as chemotherapy or modern immunotherapies

- There are no other approved pharmacologic PTBE treatments, and more tolerable alternatives are highly needed
  - Bevacizumab is used off-label based on Phase 2 efficacy data, but is also known to have severe side-effects

As overall survival in malignant brain tumors continues to improve due to earlier detection and innovative treatments, there is a critical and growing need for PTBE treatments with significantly more tolerable safety profiles

Sources: [1] William Andrew Publishing (22 October 2013). Pharmaceutical Manufacturing Encyclopedia, 3rd Edition. Elsevier. pp. 1642–1643. ISBN 978-0-8155-1856-3.

C-PTBE-01

Corticorelin

Lead Project C-PTBE-01: Addressing high unmet medical need

High unmet medical need

- Medicine to treat PTBE effectively without the severe, systemic side effects of corticosteroids that does not impair underlying chemo- or modern immunotherapies in adult or pediatric cancer patients with PTBE secondary to malignant brain tumors

Goal of therapy:

- Completely replace or significantly reduce corticosteroid use in patients with PTBE
- Significantly improved tolerability resulting in improved quality of life
- Avoid impairment of certain chemotherapies or modern immunotherapies potentially enhancing their efficacy

Lead Project C-PTBE-01: Characteristics and benefits of corticorelin

- The active substance of C-PTBE-01 is Corticorelin (hCRF), an endogenous neuropeptide of of 41 amino acids sequence
- Corticorelin can positively impact the in PTBE disrupted blood-brain barrier. In preclinical studies it showed an anti-angiogenetic and anti-VGEF effect and anti-tumor effect.
- Corticorelin has shown a strong steroid-sparing effect in both preclinical and importantly in two clinical safety and efficacy studies, demonstrating the potential for a significant reduction or complete replacement of steroid use. This in turn may reduce or avoid the severe glucocorticoid-related side effects and thus improve the quality of life of patients.
- By being able to lower the dose or replace corticosteroids completely, there is also the potential to maintain the efficacy of novel tumor therapies for PTBE patients currently treated with corticosteroids.
- C-PTBE-01 is classified as biologic in the USA. Curatis will submit a biologics license application which benefits from 12 years of market exclusivity.

Corticorelin Key Clinical Data in PTBE Highlights Potential

A completed phase 3 clinical trial & open label extension evaluated corticorelin in PTBE in patients with malignant brain tumors which demonstrated:

50% Of PTBE Patiens could stop corticosteroids for at least one month [1]

40% clinically meaningful difference in sub analysis of primary endpoint in patients with PTBE secondary to brain metastases (70.0% vs 30.4% p<0.01) [2]

In addition, corticorelin acetate:

- Was well tolerated and highly safe with AEs of note: infusion site reactions and flushing [1, 2]
- Demonstrated consistent and dose-dependent neurological improvement. [1]
- The reduction in steroid requirement for patients with PTBE was associated with a reduction in the incidence and severity of common steroid adverse effects. [2]

Sources: (1) data on file [2] Recht et al. J Clin Oncol. 2013 Mar 20;31(9):1182-7.

The Market / Market exclusivity

Significant Market Opportunity

- More than 150,000 patients are affected by peritumoral brain edema in the USA
- Globally around 500,000 patients may suffer from peritumoral brain edema
- Estimated peak sales: >1 billion USD

Strong IP & Exclusivity Protection

- **Biologics License Application: 12 years of market exclusivity in the USA**
- Data Protection: 10 yrs. in Europe, 8 yrs. in Japan
- Orphan Drug Status: USA 7 years, EU 10 years, Japan 10 years; efforts ongoing

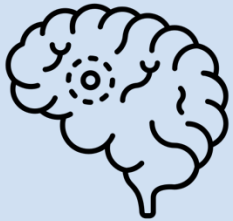
Lead Project C-PTBE-01: Near-term milestones and next steps

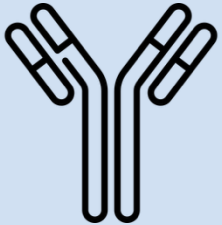
- Type B meeting held with FDA on 9 September 2025
  - Proceeding without delay to a regulatory submission for a pivotal Phase 3 study
  - Adaptive trial design with dose optimization lead-in phase, followed by confirmatory segment
- Partnering process for C-PTBE-01 initiated in Q3 2025 (focus on Global Leaders in Oncology and Specialty Care)
- Next Step: Preparation of a pivotal Phase 3 study

Life cycle opportunities

Potential Expansion Indications

- Primary brain tumors in children and adults
- Potentiation of anti-VGEF tumor therapies
- Anti-tumor therapy and/or potentiation thereof





C-AM-01

Pipeline C-AM-01: For migraine with aura

- **Description of the disease**
  - There are 2 types of migraine: migraine with aura (20%) and migraine without aura (80%)
  - An aura is a temporary visual disturbance such as flashes of light, flickering, zigzag lines or blind spots, tingling or numbness in the hands, arms or face, speech disorders, dizziness, partial paralysis. These symptoms, sometimes similar to signs of a stroke, can be debilitating and frightening to patients
  - Migraine with aura can have a massive impact on patients' lives
  - There is currently no specific preventive treatment → large unmet medical need
- **C-AM-01 is an oral platelet aggregation inhibitor**
- **Two phase IIa clinical proof-of-concept studies indicate a reduction in the number of attacks**
- **Peak sales potential: approx. US$ 500m**
  - Migraine prevalence is approx. 15-20% of the total population; approx. 15-30% of migraine patients experience aura symptoms
  - Curatis focuses on serious cases
- **IP/ patent protection**
  - USA: Use and dosage regimen patent granted in Nov. 2021
  - EU: 10 yrs. data protection
  - Japan: 8 yrs. data protection

Next step:

- Partnering readiness and partner search

Team

Board of Directors and Management

Board of Directors

Dr. Marian Borovsky

- Non-executive Chairman of the Board of Directors
- Former General Counsel of Actelion

Dr. Silvio Inderbitzin

- Non-executive member of the Board of Directors
- Former CEO of Spirig

Günter Graubach

- Founder and executive member of the Board of Directors
- Formerly: Roche, Santhera

Dr. Roland Rutschmann

- Executive member of the Board of Directors
- Formerly: Roche, Actelion, Recordati (Orphan Europe)

Executive Management

Dr. Roland Rutschmann

- CEO

François Bersier

- COO
- Formerly Organon, Roche, Sanofi, Alexion

Günter Graubach

- CCDO (Chief Corporate Development Officer)

Dr. Kirsty Crame – van Nierop

- CMO
- Formerly VP Strategy & Development Medigene
- >12 year of clinical development experience in immune oncology and targeted therapies

Patrick Ramsauer

- CFO
- Formerly UBS (M&A and Corporate Finance) and Partner at YUMA Capital

Advisory Board

Advisory Board

Stewart Goldman, MD

- Internationally renowned pediatric oncologist, Chair of the Department of Child Health at the University of Arizona College of Medicine, Phoenix, Arizona, Senior Vice President of Research at Phoenix Children's' and Sybil B Harrington Endowed Chair of Oncology
- Accomplished leader in brain tumor research, with significant contributions to the medical and scientific communities
- Published more than 170 peer-reviewed articles

Prof. Dr. med. Andreas Gantenbein

- Expert in neurology, including electroencephalography, electroneuro-myography, sleep diagnostics and pain medicine
- From 2010 to 2012, head of the Headache and Pain Unit at the University Hospital of Zurich, from 2012 - 2021 at the rehabilitation center RehaClinic Bad Zurzach (Chief Physician of Neurology)
- Focus on clinical studies, including medication overuse headache, menstrual migraine, and CGRP-antibodies
- Former president of the Swiss Headache Society with more than 100 articles in peer-reviewed journals

Dr. Anthony Man, B.Med Sci, MB, BS, FRCP (UK)

- Physician specialized in internal medicine and oncology
- Experience in international clinical research and drug development through all clinical stages of new drug development from Investigational New Drug to Life Cycle Management in multiple therapeutic areas including oncology, infectious disease, rheumatology, metabolic disease, respiratory, cardiovascular, ophthalmology and transplantation medicine
- Lederle, Roche, Ciba Geigy and Novartis, from 2000-2013 Chief Executive Office of Basilea

Arnim Pause, M.Sc., Ph.D.

- Professor of Biochemistry at McGill University's Goodman Cancer Institute and the Department of Biochemistry in Montreal, Canada (2002–present)
- Held leadership roles in R&D at Boehringer Ingelheim and the Max-Planck Institute for Biochemistry
- His research expertise spans molecular medicine, with a focus on cancer biology, virology, and metabolic diseases

H1 2025

Group H1 2025 financials and recent developments

in mCHF	H1 2025	H1 2024
Revenues	5.2	2.0
Operating Results	-1.3	-3.9
Of which non-cash effects	0.2	-3.6
Of which external research and development cost and non operating result	1.2	0.5
Cash and cash equivalents	3.5	3.5

- Double digit organic growth in revenues due to strong product growth
- Significant revenue growth due to new products from Phoenix Labs from October 1, 2025
- Several other products under evaluation as ongoing business development
- Significant investments in C-PTBE-01 in preparation for the planned Phase 3 clinical trial
- Significant milestone of FDA meeting achieved
- Outlook: Break even targeted in 2026 on higher revenues

Takeaways

Lead Project C-PTBE-01 (Corticorelin) with blockbuster potential	▪ High unmet medical need in the treatment of PTBE ▪ Favorable read-outs from previous clinical trials ▪ Type B Meeting with FDA held on 9 September 2025 ▪ Market size >1 billion USD
Cash flow from operating activities	▪ Profitable distribution business ▪ Strong growth in sales
Outlook	▪ Partnering process initiated in Q3 2025 ▪ 2026: Break even result should be achieved based on significantly higher revenues independent of partnering ▪ Preparation of pivotal study and EMA meeting

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