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Industry: Pharmaceuticals

- *Rheumatoid Arthritis*

Management:

- *Executive Leadership*

Caroline Dealy, PhD
co-Founder and CEO
Assoc Professor UConn Health
Depts of Biomedical Engineering,
Orthopedic Surgery, Cell Biology &
Reconstructive Sciences

- *Advisors and Key Collaborators*

Nita Maihle, PhD
co-Founder
Professor and Director,
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Tom Gerson, MBA
Strategic Advisor, finance

Susan Froshauer, PhD
Strategic Advisor, drug development

S. Lakshminarayanan, MD
Clinical Advisor
John Dempsey Hospital
Chief, Rheumatology

Thuryya Arayysi, MD
Clinical Advisor
Weill-Cornell Medical Center
Director, MERAC: Middle East
Rheumatoid Arthritis Consortium

Finance:

- Current funding: \$100,000 from UConn & coFounders
- Seeking \$300,000-\$400,00 in seed funds to reach year one commercial and technical milestones

Intellectual Property:

- We anticipate filing a provisional patent on the commercial product within 6 months, and full patent within 1 year.

Executive Summary: Rheumatoid arthritis (RA) is a serious, systemic, inflammatory disease that causes pain, mobility loss and permanent joint damage for 1.5M adults in the US¹. The disease tends to strike in mid-life, and affects women 3 times more often than men¹. As there is no cure, the goal of treatment is remission from active disease signs. In many patients, disease signs are controlled by available drugs for only a few years, leading to chronic relapse². Current treatments suppress the immune system but are not designed to target disease signs in the joints. We are developing a transformative biotherapeutic for rheumatoid arthritis that targets a key, validated, disease mechanism in the joints. Our treatment will be used as an *adjunct* to immunosuppression, to achieve better disease control, and to reduce chronic relapse that causes disabling pain and joint damage for rheumatoid arthritis patients.

Market Opportunity: The clinical challenge of RA treatment leads to an economic burden of \$39B in annual US healthcare and disability costs³, and drives an \$18B US market for RA drugs (2017). The US & Europe RA market has a 4% CAGR and will reach \$29B by 2025⁴.

Products in Pipeline: Our product is a biologic (protein-based) drug. It is based on a natural human protein. The commercial stabilized version of the protein will confer optimal activity and a clinical dosing regimen in the range of other rheumatoid arthritis drugs, administered by sub-cutaneous self-injection every 2-4 weeks.

Commercial / Technical Milestones: Year one commercial milestone: produce the commercial product and file IP. Year one technical milestone modify the protein to prolong stability, and confirm continued activity in cell and animal models.

Competition: No RA therapeutics are yet designed to specifically target disease signs in the joints⁴. As an *adjunct* therapeutic, our product will be used as a partner product to existing immunosuppressants, suggesting a future opportunity for strategic alliance or acquisition.

Financial Projections: With IND and FDA approvals, successful Phase I safety profile and demonstrated efficacy in Phase 2a trials, based on comparables, we anticipate acquisition at \$300-500M in 7-8 years.

1. *Arthritis by the Numbers*; Arthritis Foundation; <https://www.arthritis.org>

2. *Relapse rates in patients with rheumatoid arthritis in stable remission: interim results from the prospective randomized controlled RETRO study*"; Hasckal et al., *Annals of the Rheumatic Diseases*; 75.1 (2016): S. 45-51.

3. Current Medical Research Opinion. *Societal cost of rheumatoid arthritis patients in the US*; Birnbaum et al, 2010; 26(1): 77-90.

4. <https://www.globaldata.com/store/report/gdhc143pidr--pharmapoint-rheumatoid-arthritis-global-drug-forecast-and-market-analysis-to-2025/>

5. *Fibroblasts as therapeutic targets in rheumatoid arthritis and cancer*. Juarez et al; *Swiss Med Weekly* 2012, 142: w13529

6. *Synovial fibroblasts 2017*. Ospelt C. *Rheumatic & Musculoskeletal Diseases*. RMD Open 2017;3: e000471.