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Ascletis Pharma Inc. 歌禮製藥有限公司 (incorporated in the Cayman Islands with limited liability) (Stock Code: 1672)

## **VOLUNTARY ANNOUNCEMENT**

## GANNEX PUBLISHED PHASE I DATA OF ASC42, A NOVEL FARNESOID X RECEPTOR AGONIST ON THE JOURNAL DRUGS IN R&D

This announcement is made by Ascletis Pharma Inc. (the "**Company**" or "**Ascletis**", together with its subsidiaries, the "**Group**") on a voluntary basis for the purpose of keeping the shareholders of the Company and potential investors abreast of the latest business development of the Group.

The board of directors (the "**Board**") of the Company announces that the safety, pharmacokinetics (PK), and pharmacodynamics (PD) data of ASC42, a novel farnesoid X receptor (FXR) agonist, in healthy subjects have been published on the journal *Drugs in R&D*. ASC42 is a drug candidate of Gannex Pharma Co., Ltd. (甘萊製藥有限公司, "Gannex"), a wholly-owned subsidiary of the Company.

In-house developed by Gannex, ASC42 is a novel non-steroidal, selective, potent FXR agonist with best-in-class potential and global intellectual property.

This study shows that ASC42 was in general safe and well tolerated when administered as single doses up to 100 mg and multiple daily doses for 14 days up to 15 mg in healthy subjects. ASC42 at therapeutic dose range (5 mg to 15 mg) had an acceptable safety profile and showed no drug-induced pruritus or transient elevations in serum alanine aminotransferase (ALT), aspartate aminotransferase (AST), or  $\gamma$ -glutamyl transferase (GGT). Furthermore, ASC42 showed effective FXR target engagement in dose-dependent elevations in Fibroblast Growth Factor 19 (FGF19) and reduction in 7 $\alpha$ -hydroxy-4-cholesten-3-one (C4), and caused no significant changes in total cholesterol (TC), high density lipoprotein cholesterol (HDL-C), and low density lipoprotein cholesterol (LDL-C) levels in healthy subjects up to 3 weeks following daily dosing for 14 days. Results of this study support the continued investigation of ASC42 in patients with non-alcoholic fatty liver disease (NAFLD)/non-alcoholic steatohepatitis (NASH)/primary biliary cholangitis (PBC).

An epidemiology study showed that there were approximately 656,000 PBC patients in China, including 440,000 in females over age 40<sup>[1]</sup>. Ursodeoxycholic acid (UDCA) is the only drug which is approved in China for treatment of PBC and approximately 40% of PBC patients have an inadequate response to or are unable to tolerate UDCA<sup>[2]</sup>. Obsticholic Acid (OCA), which is not approved in China, is the only approved medicine in the U.S. for PBC patients who have an inadequate response to or are unable to tolerate UDCA. However, there are significantly increased pruritus rates and LDL-C levels in patients with OCA treatment<sup>[3]</sup>.

On July 20, 2023, Gannex announced the completion of patient enrollment for Phase II clinical trial of ASC42 for PBC.

- <sup>[1]</sup> Chinese Rheumatology Association (中華醫學會風濕病學分會), "Recommendations for diagnosis and treatment of primary biliary cholangitis in China (2021)"(原發性膽汁性膽管炎診療規範(2021)) [J]. Zhong Hua Nei Ke Za Zhi. (中華內科雜誌), 2021, 60(8): 709-15. DOI: 10.3760/cma.j.cn112138-20210520-00360.
- <sup>[2]</sup> Lindor K D, Bowlus C L, Boyer J, et al. Primary Biliary Cholangitis: 2018 Practice Guidance from the American Association for the Study of Liver Diseases [J]. Hepatology 2019, 69(1): 394-419. DOI: 10.1002/ hep.30145.
- <sup>[3]</sup> Nevens, Frederik et al. "A Placebo-Controlled Trial of Obeticholic Acid in Primary Biliary Cholangitis." The New England journal of medicine vol. 375,7 (2016): 631-43. doi:10.1056/NEJMoa1509840.

**Cautionary Statement required by Rule 18A.05 of the Rules Governing the Listing of Securities on The Stock Exchange of Hong Kong Limited:** We cannot guarantee that we will be able to ultimately commercialize ASC42 successfully.

> By order of the Board Ascletis Pharma Inc. 歌禮製藥有限公司 Jinzi Jason WU Chairman

Hangzhou, the People's Republic of China November 6, 2023

As at the date of this announcement, the Board comprises Dr. Jinzi Jason WU and Mrs. Judy Hejingdao WU, as executive Directors; and Dr. Yizhen WEI, Mr. Jiong GU and Ms. Lin HUA, as independent non-executive Directors.