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Shaanxi Micot Pharmaceutical Technology Co., Ltd.
陝西麥科奧特醫藥科技股份有限公司

(A joint stock company incorporated in the People's Republic of China with limited liability)
(Stock Code: 02335)

VOLUNTARY ANNOUNCEMENT

**FIRST PATIENT ENROLLED IN PHASE II CLINICAL TRIAL OF
MT1002 FOR ANTICOAGULATION IN HEMODIALYSIS (HD) PATIENTS**

The board of directors (the “**Board**”) of Shaanxi Micot Pharmaceutical Technology Co., Ltd. (the “**Company**”, together with its subsidiaries, the “**Group**”) is pleased to announce that the first patient has been successfully enrolled recently in the Phase II clinical study (MT1002-II-C05) of the Group’s independently developed drug candidate MT1002 for anticoagulation in HD patients, marking that this clinical study has officially entered the substantive execution stage.

MT1002-II-C05 is a two-part, multicentre Phase II clinical trial conducted in China to evaluate the anticoagulant efficacy and safety of MT1002 in HD patients. Part 1 is a single-arm dose-finding stage to identify the optimal effective dose of MT1002. Part 2 is a randomized, active-controlled (unfractionated heparin) stage to evaluate the superiority of MT1002 over heparin in terms of anticoagulant efficacy. The first patient enrollment referred to in this announcement was achieved in Part 1 of this Phase II clinical trial.

About MT1002

To the knowledge of the Company, MT1002 is the world’s first dual-functional antithrombotic peptide drug with both anticoagulant and antiplatelet activities to enter clinical development. It simultaneously antagonizes coagulation factor II and GPIIb/IIIa, possessing dual effects of anticoagulation and antiplatelet aggregation. It inhibits thrombosis through dual pathways and has clinical advantages such as early onset, convenient administration, no need for frequent monitoring, no dose adjustment required in patients with hepatic or renal impairment, and prompt recovery of parameters after discontinuation without affecting normal coagulation and platelet function.

About Anticoagulation in HD

Chronic kidney disease (CKD) is a progressive loss of glomerular function caused by a long-standing renal parenchymal disease. End-stage renal disease (ESRD) is the final stage (stage five) of CKD and has become a growing global public health concern, imposing a substantial economic burden on both families and society. The main treatment modalities for patients with ESRD include HD, peritoneal dialysis (PD), and kidney transplantation (KT). Among these, HD is the predominant treatment approach. HD plays a role in clearing toxins, removing excess water, maintaining electrolyte and acid-base balance, and providing temporary renal replacement therapy through diffusion, convection, and other methods, and is becoming increasingly widely used in clinical practice.

As set out in the prospectus of the Company, according to Frost & Sullivan, the number of patients receiving HD treatment worldwide increased from 3.3 million in 2020 to 3.7 million in 2025. It is projected to reach 4.6 million by 2030 and 5.5 million by 2035. In China, the number of patients receiving HD treatment grew from 0.7 million in 2020 to 1.1 million in 2025 at a CAGR of 10.1% and is projected to reach 1.8 million by 2030 and 2.8 million by 2035.

This announcement is being made by the Company on a voluntary basis to update the investing public on the Group's latest business development, and does not constitute, and is not intended to be, an advertisement regarding the use of any medicine, surgical appliance, treatment or orally consumed product.

By Order of the Board
Shaanxi Micot Pharmaceutical Technology Co., Ltd.
Dr. Wang Bing
Chairman, Chief Executive Officer and Executive Director

Xi'an, Shaanxi, the PRC, 9 July 2026

As of the date of this announcement, the Board comprises (i) Dr. Wang Bing and Dr. Yu Weiping as executive Directors; (ii) Dr. Wang Mei, Mr. You Xiangdong, Dr. Song Gaoguang and Dr. Wang Nayi as non-executive Directors; and (iii) Dr. Xiangli Liuxu, Mr. Zhang Wenqiang and Mr. Wang Kaifeng as independent non-executive Directors.