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EDDING GENOR GROUP HOLDINGS LIMITED

亿腾嘉和醫藥集團有限公司

(Incorporated in the Cayman Islands with limited liability)

(Stock Code: 6998)

VOLUNTARY ANNOUNCEMENT
IND APPROVALS OF GB268 FROM THE NMPA FOR PHASE IB/II CLINICAL TRIAL IN NSCLC AND PHASE II/III CLINICAL TRIAL IN BTC

This announcement is made by Edding Genor Group Holdings Limited (the "**Company**", together with its subsidiaries, the "**Group**") on a voluntary basis to inform the shareholders and potential investors of the Company about the latest business advancement of the Group. References are made to the announcements of the Company dated 2 July, 6 August, 11 October and 23 October 2026 in relation to the progress of GB268.

The board (the "**Board**") of directors (the "**Director(s)**") of the Company is pleased to announce that the investigational new drug application (the "**IND**") for a Phase Ib/II clinical trial of GB268, the Company's highly differentiated and innovative PD-1/CTLA-4/VEGF trispecific antibody, as monotherapy or in combination therapy for the treatment of metastatic (stage IV) non-small cell lung cancer ("**NSCLC**"), and the IND for a Phase II/III clinical trial of GB268 in combination with chemotherapy as first-line treatment for locally advanced or metastatic biliary tract cancer ("**BTC**") that is not amenable to curative surgical resection, were approved by the China National Medical Products Administration (the "**NMPA**") on 12 November 2026. These two milestones mark preliminary regulatory recognition of the clinical development plan for GB268 and represent a further step in the in-depth development of GB268 across multiple tumour types.

Lung cancer ranks first in both incidence and mortality among malignant tumours globally and in China, with NSCLC accounting for approximately 80% to 85% of cases. Although immunotherapy has brought significant advances in the treatment of lung cancer compared with the chemotherapy era, the prognosis for advanced lung cancer remains unsatisfactory, underscoring the necessity of further improving first-line treatment outcomes. Patients with metastatic NSCLC generally have a poor prognosis and resistance to immunotherapy is common. Following disease progression on first-line treatment, second-line treatment options are limited, the duration of response is short and overall survival remains unsatisfactory. There is therefore an urgent clinical need for new treatment strategies that improve efficacy, prolong survival and have manageable toxicity, so as to improve survival outcomes for patients with advanced NSCLC. Through the fine-tuned modulation of the activities of its PD-1/CTLA-4/VEGF arms, GB268 improves the tumour immune microenvironment, promotes T-cell infiltration and inhibits angiogenesis. It has shown the potential to overcome the barrier of immunotherapy resistance in metastatic NSCLC and has the potential to reshape the first-line treatment landscape for advanced NSCLC.

Advanced BTC is highly malignant and is characterised by a highly immunosuppressive tumour microenvironment. Although immunotherapy in combination with chemotherapy has become the standard first-line systemic treatment for advanced BTC, the depth and durability of response remain limited, and most patients still experience disease progression within a short period of time with limited long-term survival benefit, representing a significant unmet clinical need. GB268 in combination with chemotherapy for the treatment of patients with advanced BTC has the potential to further improve the objective response rate, achieve deep and durable tumour regression and prolong overall survival, providing a new strategy for the first-line treatment of patients with BTC.

About GB268 (a PD-1/CTLA-4/VEGF trispecific antibody)

GB268 received NMPA approval for a first-in-human clinical trial in July 2025. Preliminary data from the Phase I monotherapy study demonstrated that GB268 was well tolerated across the full dose range in previously treated patients with advanced solid tumours, with broad preliminary anti-tumour activity observed across multiple tumour types. The relevant clinical data were presented at the European Society for Medical Oncology ("**ESMO**") Congress 2026 in October 2026.

In June 2026, GB268 received approval from the NMPA for a Phase Ib/II clinical trial for the treatment of locally advanced unresectable or metastatic breast cancer, including triple-negative breast cancer (TNBC) and hormone receptor-positive/HER2-negative (HR+/HER2-) breast cancer, to explore monotherapy, immunotherapy in combination with chemotherapy and immunotherapy in combination with antibody-drug conjugates. In October 2026, GB268 received approval from the NMPA for a Phase II clinical trial in combination with chemotherapy as first-line treatment for advanced colorectal cancer. GB268 is expected to undergo Phase II clinical studies as monotherapy or in combination therapy in multiple solid tumours.

By Order of the Board
Edding Genor Group Holdings Limited
Mr. Ni Xin
Chairman and Executive Director

Hong Kong, 16 November 2026

As of the date of this announcement, the Board comprises Mr. Ni Xin and Dr. Han Shuhua as executive Directors; Dr. David Guowei Wang and Mr. Yu Tieming as non-executive Directors; and Dr. Xu Qing, Mr. Chen Wen and Ms. Zheng Jingjing as independent non-executive Directors.