

Welcome to Funding for Innovation



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Founder, VarmX

VarmX

Developing a universal reversal agent for bleeding complications induced by Factor Xa Direct Oral Anticoagulants

Company Introduction – Confidential Information

Hemostasis







Unmet medical need



Direct oral anticoagulants are rapidly replacing indirect anticoagulants. Alarmingly, there is no safe reversal agent that restores blood clotting (coagulation) if patients bleed.

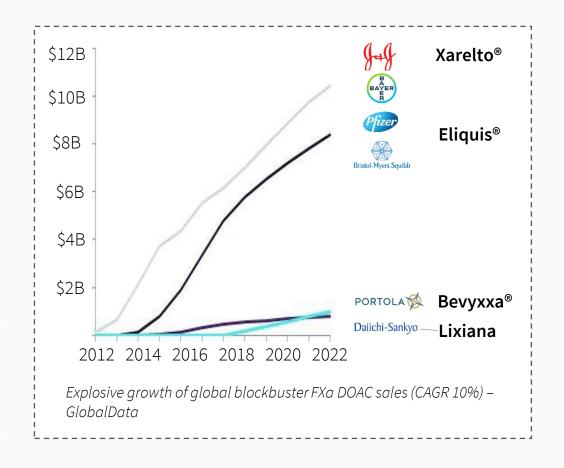
- DOACs are rapidly gaining market share over indirect coagulants because they are safer and easier to use.
- In the US and EU combined, 10 million patients use Factor Xa Direct Oral Anticoagulants (FXa-DOAC). A population rapidly increasing with 10% per year.
- 2-3% of DOAC users bleeds annually of which 8-10% of bleedings is fatal
- With ~250.000 hospitalizations and 20.000 deaths in the EU and US combined this represents a major health burden. By 2027, these numbers incline to 450.000 hospital admissions and 35.000 deaths per year



FX-DOACs can cause excessive and uncontrolled bleeding



No safe reversal agent to restore coagulation



Eastern Brown Snake Unique Venom

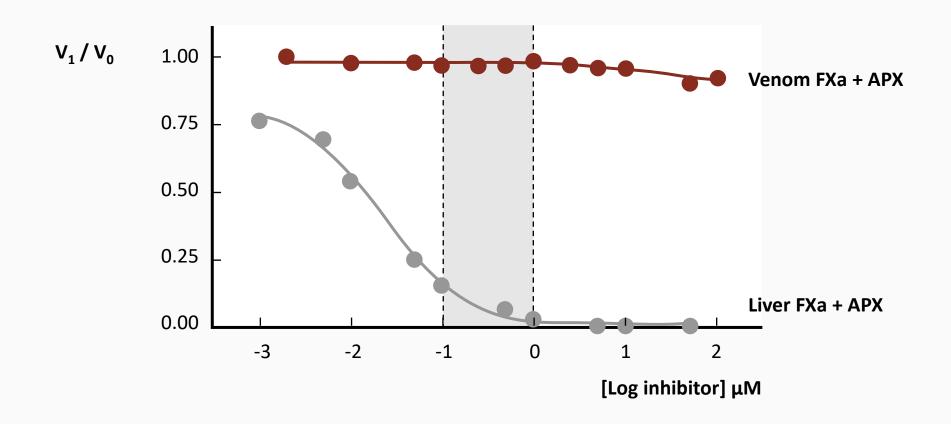




Eastern Brown Snake (*Pseudonaja* textiles) carries Factor Va and Factor Xa in its venom

Venom Factor Xa Insensitive to Apixaban



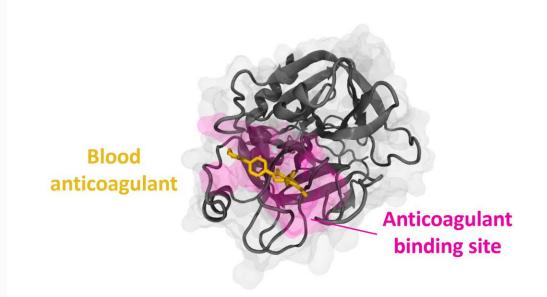


The rate of peptidyl conversion by purified venom factor Xa or liver factor Xa was determined in the absence (V_0) or presence (V_i) of increasing apixaban (APX) concentrations. The grey area indicates the concentration range in the blood of patients who take Apixaban.

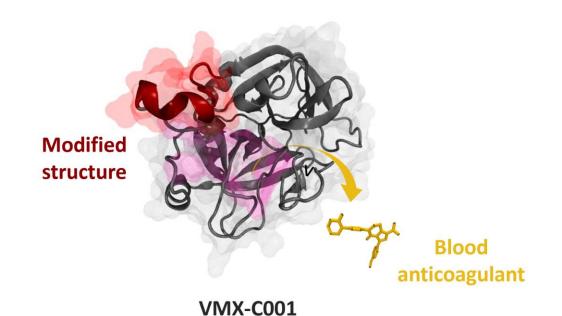
VarmX Solution – VMX-C001



- VMX-C001 is a synthetic form of human Factor X which contains <u>a small insert</u> derived from a sequence present in snake venom Factor Xa
- VMX-C001 is not inhibited by Factor Xa DOACs and instantly restores blood coagulation and stems bleeding

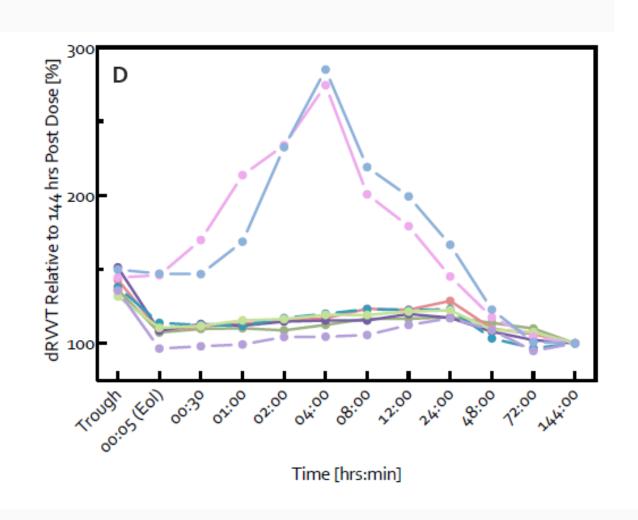


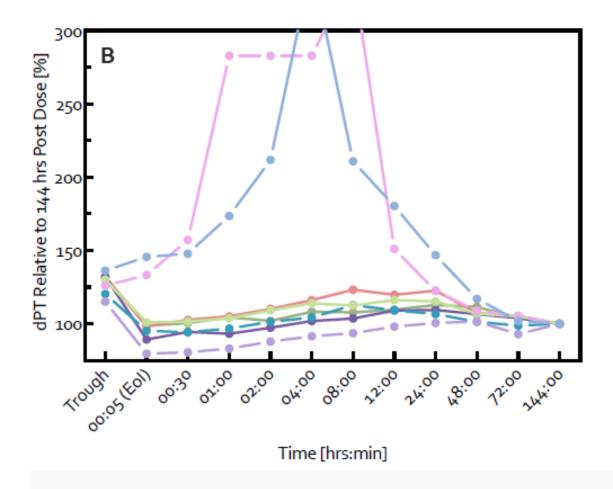




Restoration of blood coagulation in volunteers







Timelines





Technical and business development experience



Jeff Lawson Chief Executive Officer



- Vascular Surgeon
- PhD in blood coagulation
- Vice chair surgery at Duke
- Co-founder InnAVasc
- CEO Humacyte

Pieter Reitsma Founder, KOL



- Professor Thrombosis and Hemostasis Leiden University
- Editor In Chief at Journal of Thrombosis and Haemostasis
- Head, Eindhoven Laboratory for Experimental Vascular Medicine

Arnoud Dijkstra Chief Business Officer



- Acting CBO Staten Biotechnology
- CBO ProFibrix
- CBO PanGenetics
- Director Business Development Actelion
- Closed deals with a combined value of €670M

Bo Persson SVP CMC Development & Project Management



- CMC expert
- Project Director Biopharm API Management Novo Nordisk A/S
- SVP Project Management and Process Development, CMC Biologics (now AGC)

Ged Short Chief Medical Officer



- SVP Clinical & Regulatory, Freeline
- Global Clinical Development Team Lead, Genzyme
- Medical Manager Rheumatology / Gastroenterology, Novartis
- Category medical manager, Pfizer

Company history



Spin-out Leiden University Medical Center

- Founded in 2016
- Seed financing in 2017
- Series A financing in 2018, € 12.5 M
- Series B financing in 2020, € 32.0 M
- Series B2 financing 2023, € 30.0 M

Investors

- UNIIQ/UL
- InnovationQuarter
- Biogeneration Ventures
- INKEF
- Ysios
- Life Science Partners
- Lundbeckfond
- Sound Bioventures
- EIC Accelerator





Kadans Innovation Summit Funding for Innovation

November 2023



BGV: leading early-stage VC in European Biotech

Since 2006 AuM € 400+ M

European biotech opportunity





Impacting the future of medicine

Track record of success

- 4 approved products
- 15 products in clinic



novo holdings

Lonza

Strategic partners



Bristol-Myers Squibb



Universiteit Leiden





BGV active portfolio

Oncology



















Metabolic / fibrosis





Autoimmune / Neurodegeneration







CNS









Rare Diseases





Hematology



Ophthalmology



Nephrology



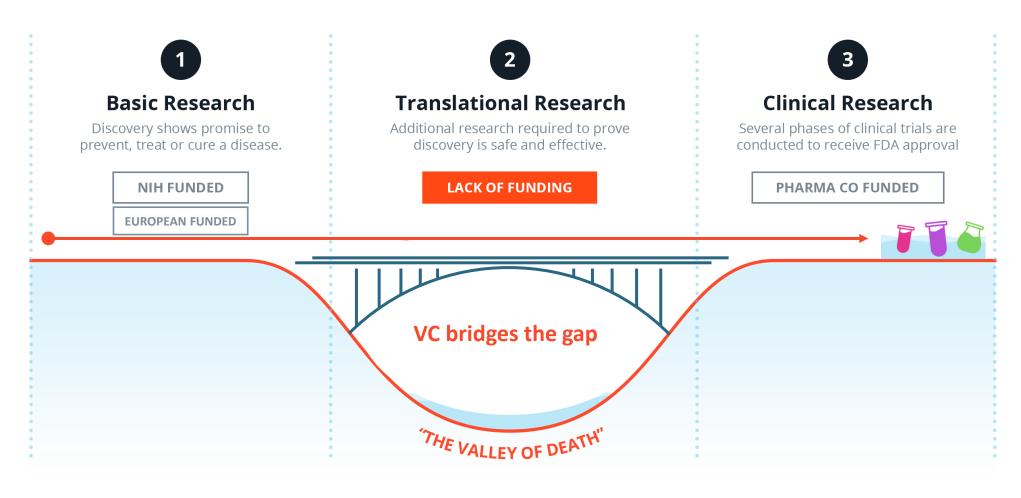


Venture Capital: what is its role?





Venture Capital: bridging the equity gap



Of newly approved drugs > 75% originates from small VC-backed companies

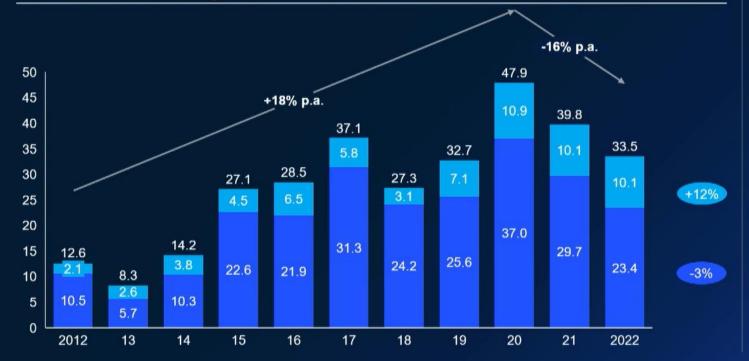


The VC market

Looking at healthcare VCs, the level of capital raised in 2022 was similar to 2019 with increased share of early-stage funds









While the capital raised by VCs has been declining since its peak in 2020, it remains a significant amount with USD ~30bn raised in 2022, similar to 2019 levels

The share of early-stage funds is increasing (32% in 2022 vs 22% in 2019) at the expense of late-stage funds (share of 68% in 2022 vs 78% in 2019)

Source: Pregin (Apr 2023)

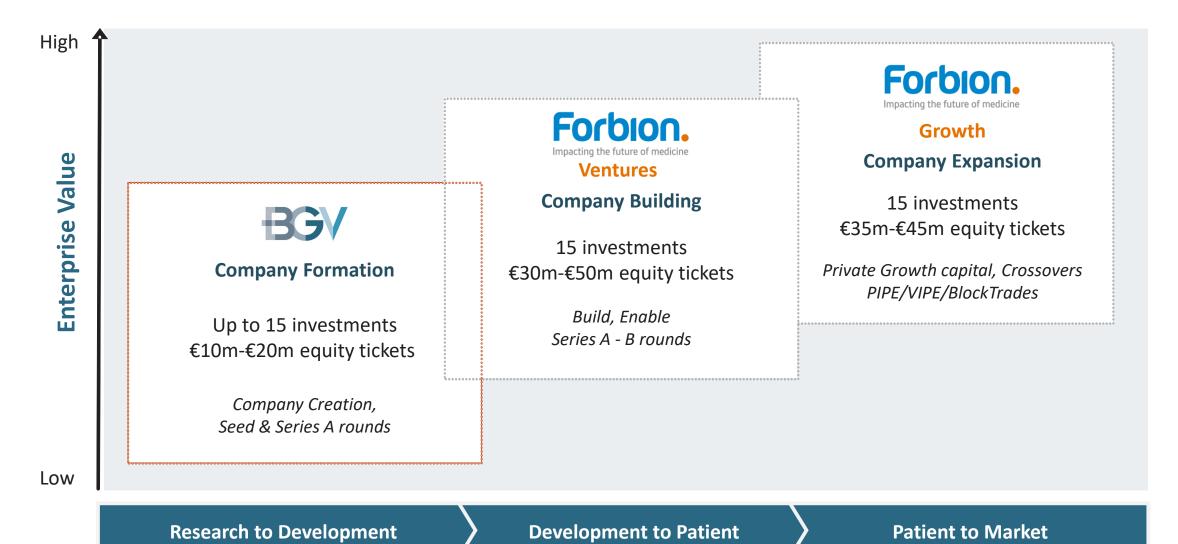
McKinsey & Company



Funds with core industry healthcare. Based on final close size by fund closing year. Excluding funds that are smaller than USD 5 mn. In total, in Europe there were 74 early-stage and 109 late-stage funds set up, in the US, there were 227 early-stage funds and 377 late-stage funds set up, and in China there were 104 early-stage funds set up in 2012–22

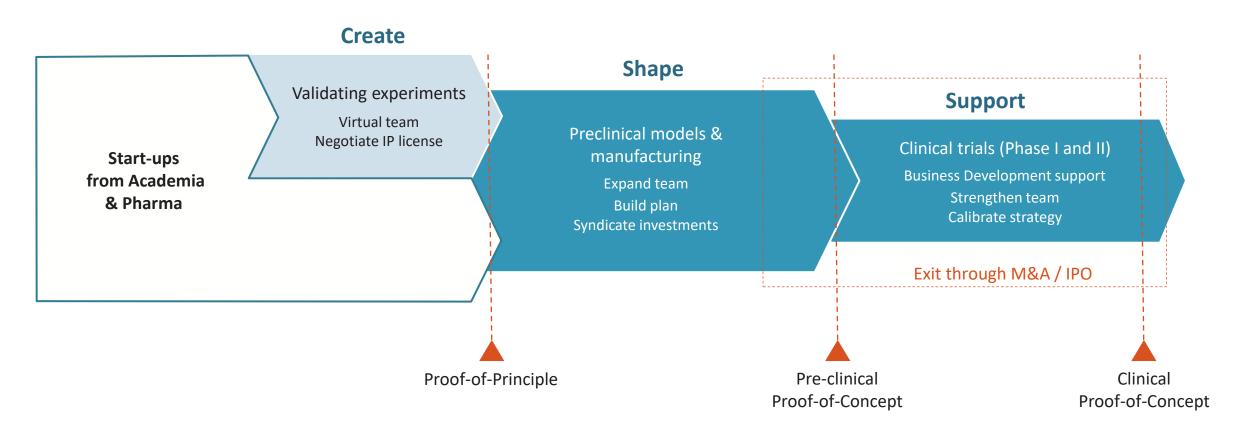
^{2.} Includes: Late stage, growth, and general funds

BGV is part of the ForbionBGV platform of funds





Early vs late-stage venture capital





What do we want to see when assessing a deal?

Team

- Domain expertise
- History of success
- Willingness to collaborate
- Quick turnaround and sense of urgency

Market

- High unmet medical need
- Market potential
- Competition

Technology / Scientific data

Defensible data and IP that is protected and differentiating



What to consider in your fundraising strategy?

1. Development plan

- In vivo POC
- Candidate selection/lead
- IND ready
- Clinical Development

2. Funding requirements

- Milestones (efficacy, safety)
- Lab infrastructure vs. Virtual
- Team
- License fees
- IP position

3. Other factors

- Stage of Development until Exit potential
- Shareholding %
- Investor Syndicate
- Reputation of the Investors
- Industry Interest
- Value inflection points



To develop an integrated plan, these various components need to be considered and incorporated into your thought process.



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Thanks for joining!