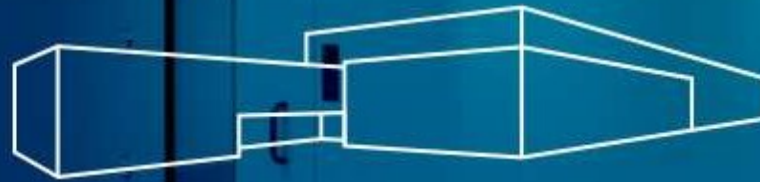


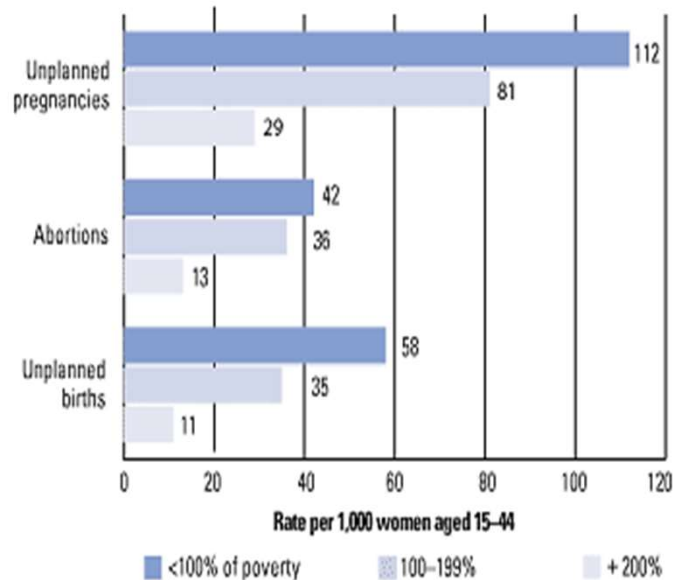
Les clés du succès : l'innovation contraceptive, ophtalmologique, immunitaire ou exosomiale



Jean-Michel Foidart

Professeur extraordinaire honoraire Université de Liège
Verviers, 30 janvier 2023

Efficacité Contraceptive : une affaire de santé publique



Près de la moitié des 6,7 millions de grossesses aux États-Unis chaque année ne sont pas désirées (Finer, 2014).

Les conséquences néfastes sur la santé des grossesses non désirées sont bien documentées et les grossesses non désirées ont un impact disproportionné sur les femmes pauvres aux États-Unis.

Le taux de grossesses non désirées chez les femmes pauvres en 2008 était de 137/1 000 femmes, contre 26/1 000 chez les femmes à revenu élevé (Finer, 2014).

En 2008, les femmes pauvres avaient un taux de naissances non désirées près de 6 fois plus élevé que celui des femmes à revenu plus élevé (Finer, 2014).

Les femmes pauvres ont l'un des taux d'avortement les plus élevés (52/1000 femmes), tandis que les femmes à revenu élevé ont un taux d'avortement de 9/1000 (Jones, 2011).



Le bon choix??



Vaginal ring



Natural family planning



Female condoms



Male condoms



Contraceptive patch



Oral contraceptives



Intrauterine devices



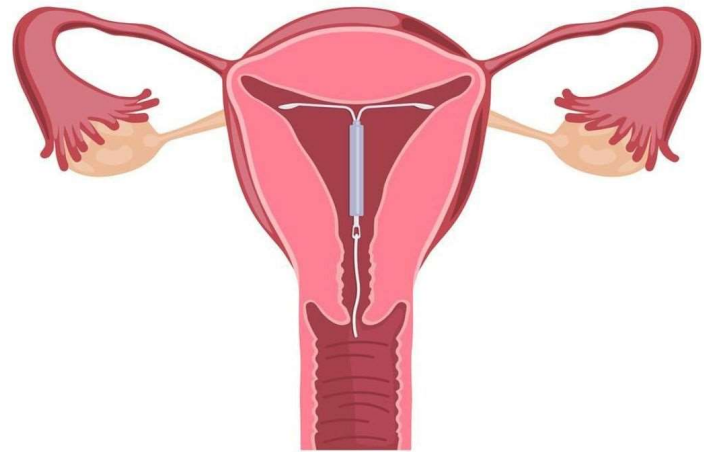
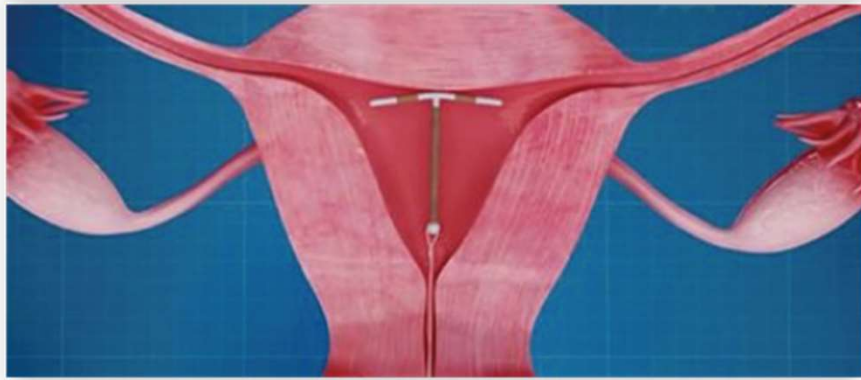
Injectables



Les femmes disposent d'un choix considérable de méthodes contraceptives efficaces, chaque méthode nécessitant différents niveaux d'implication de l'utilisatrice.

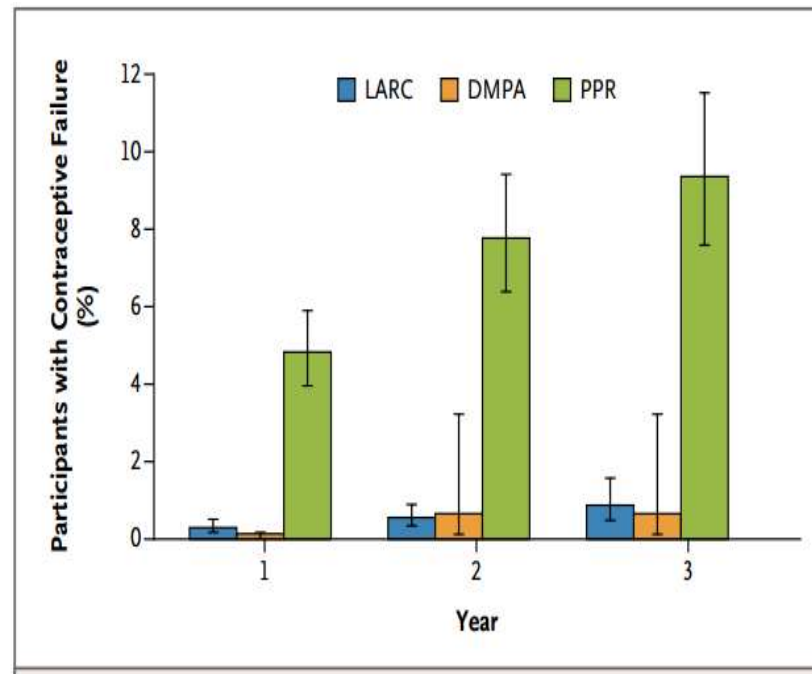
Les méthodes de barrière, telles que les préservatifs, doivent être utilisées à chaque rapport sexuel, et les contraceptifs oraux doivent être administrés quotidiennement.

Les contraceptifs réversibles à longue durée d'action (LARC), qui comprennent les dispositifs intra-utérins (DIU), les implants progestatifs seuls et les injections progestatives seules, nécessitent le moins de participation de l'utilisateur.



Les LARC ont les taux d'échec les plus bas des méthodes contraceptives réversibles

Les méthodes contraceptives les plus efficaces ne dépendent pas de l'action régulière de l'utilisateur.



Le taux d'échec de la contraception chez les utilisatrices des LARC est de 0,27/100 années-participantes, contre 4,55/100 années-participantes chez les femmes utilisant d'autres méthodes



Les effets secondaires des LARC
sous-cutanés entraînent une
mauvaise adhérence et un faible
taux de continuation (33%)



*(Blumenthal et al. Eur J Contracept Reprod Health
Care. 2008;13 Suppl 1:29–36).*



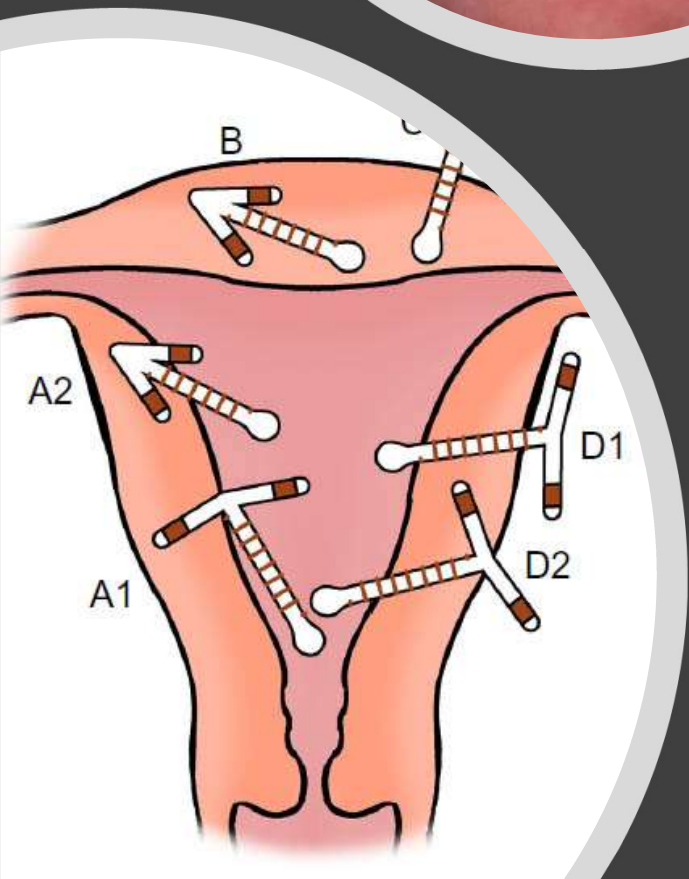
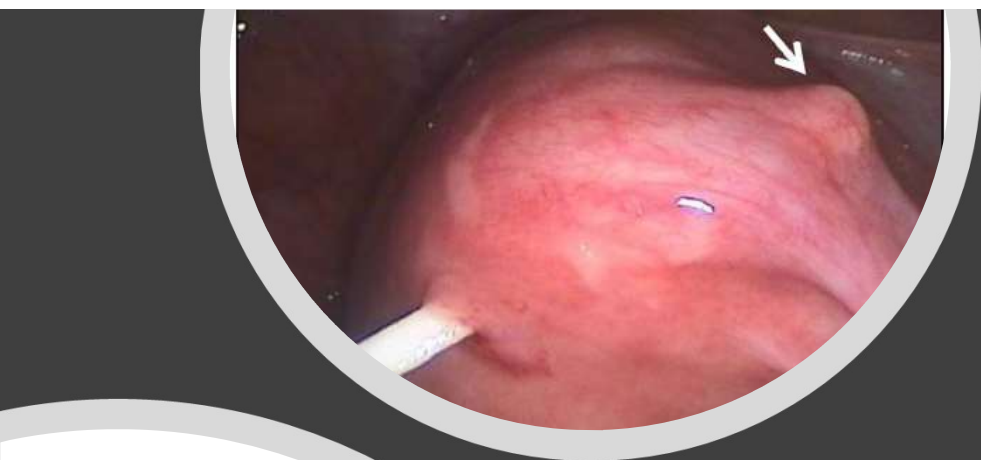
Effets secondaires et pièges actuels avec les DIU au cuivre à éviter lors de la conception d'un nouveau IU LARC

Douleur excessive, saignement, expulsions et/ou retrait

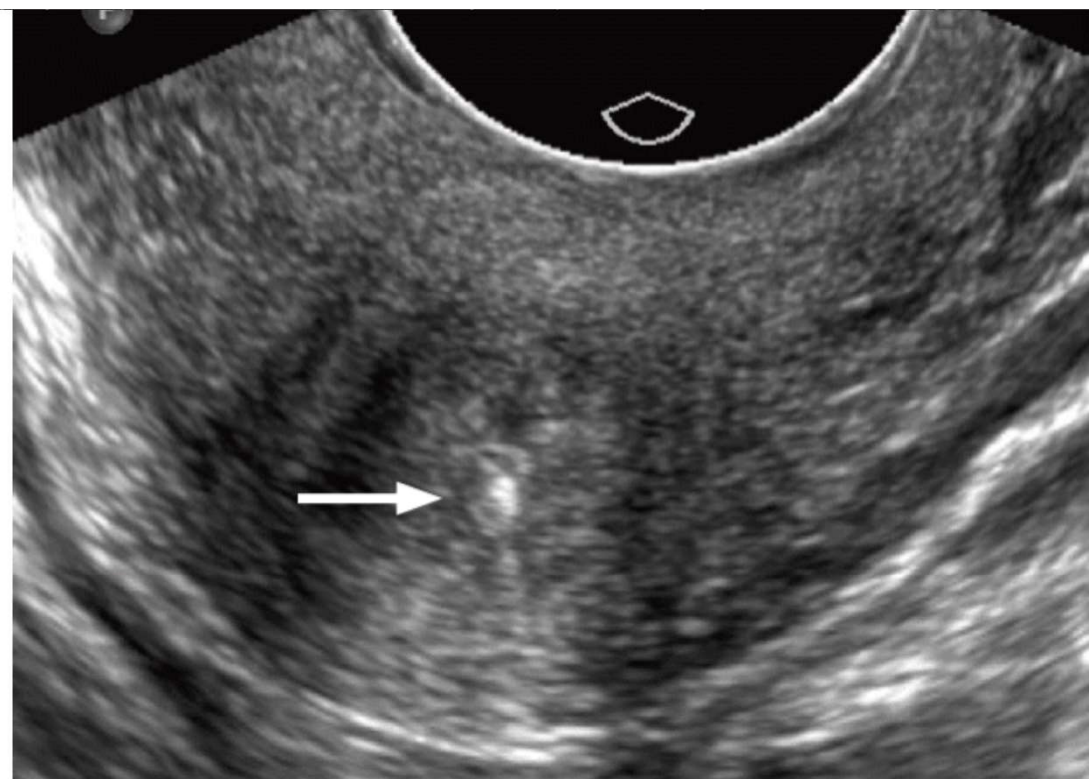
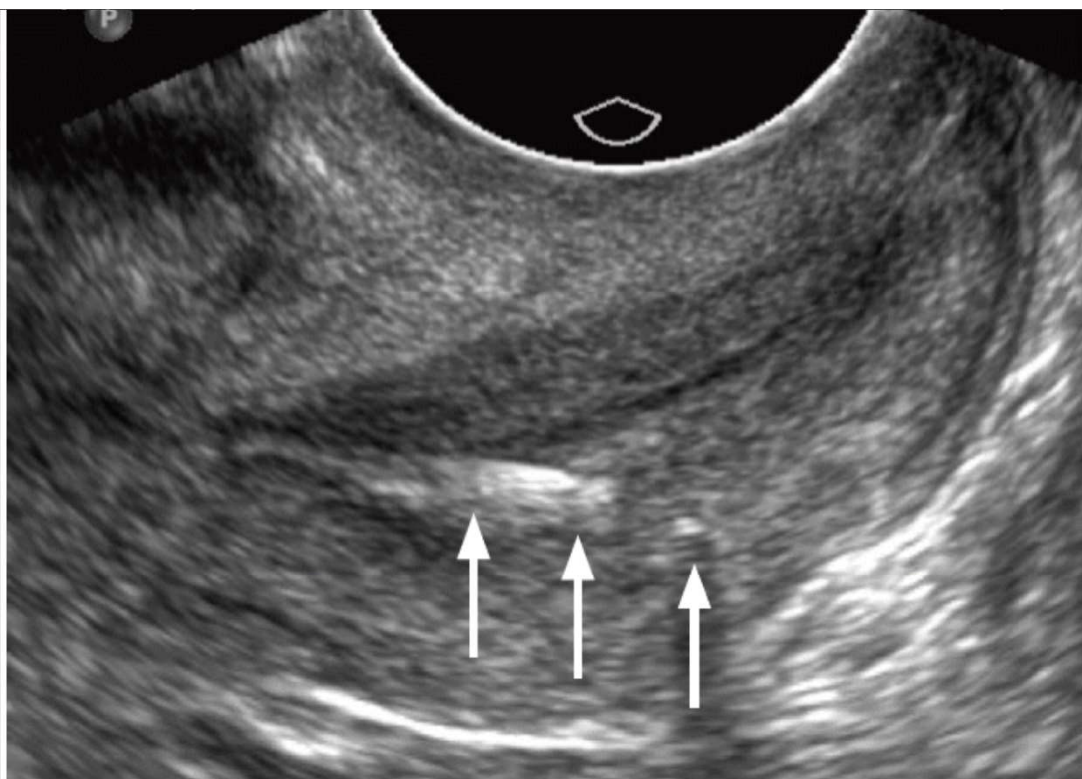
Les femmes nullipares connaissent des taux plus élevés d'expulsion et de retrait de DIU au cuivre pour saignement et/ou douleur par rapport aux femmes multipares.

Les taux d'abandon cumulés sont de un sur quatre à un sur deux sur 5 ans d'utilisation, avec des taux significativement plus élevés chez les adolescentes.

Des taux de douleur et d'expulsion plus élevés ont également été trouvés dans des études avec le SIU-LNG (Mirena) menées chez des adolescentes.



Pièges à éviter lors de la
conception d'un nouveau LARC IU
Perforation, expulsion, hémorragie



Malposition et
encastrement partiel

Comment améliorer
l'observance chez les
femmes nullipares et
adolescentes ?



Rigidité versus Plasticité

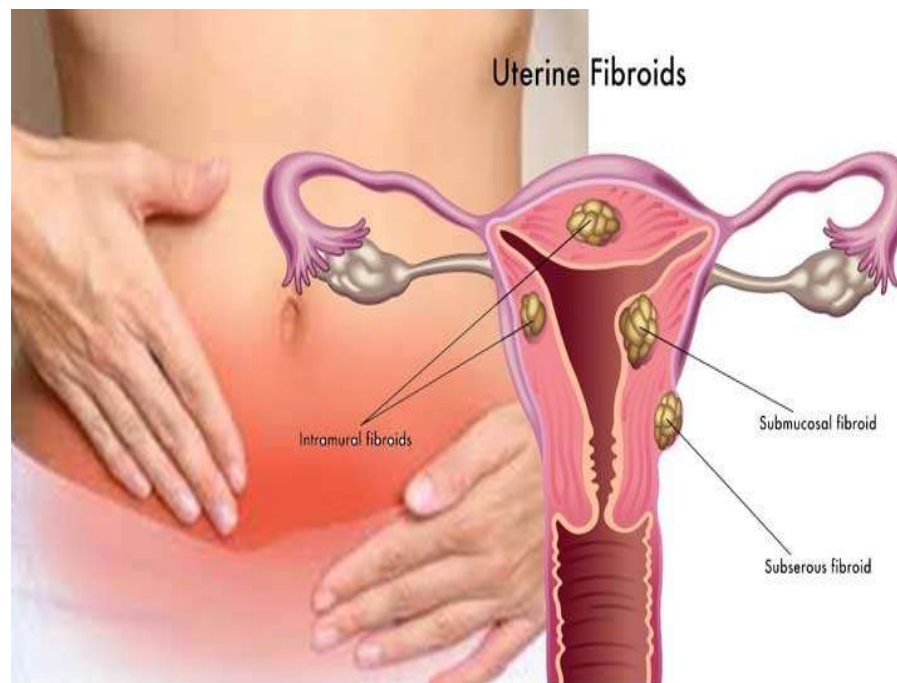
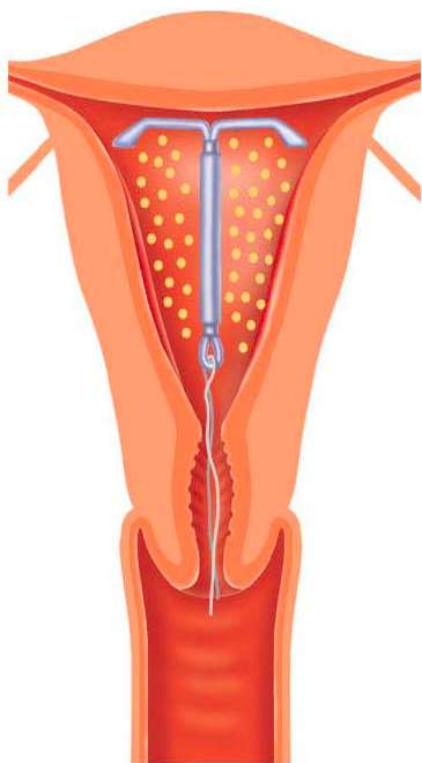
La propriété viscoélastique du cadre en T détermine la déformabilité et la capacité à s'adapter à la paroi utérine



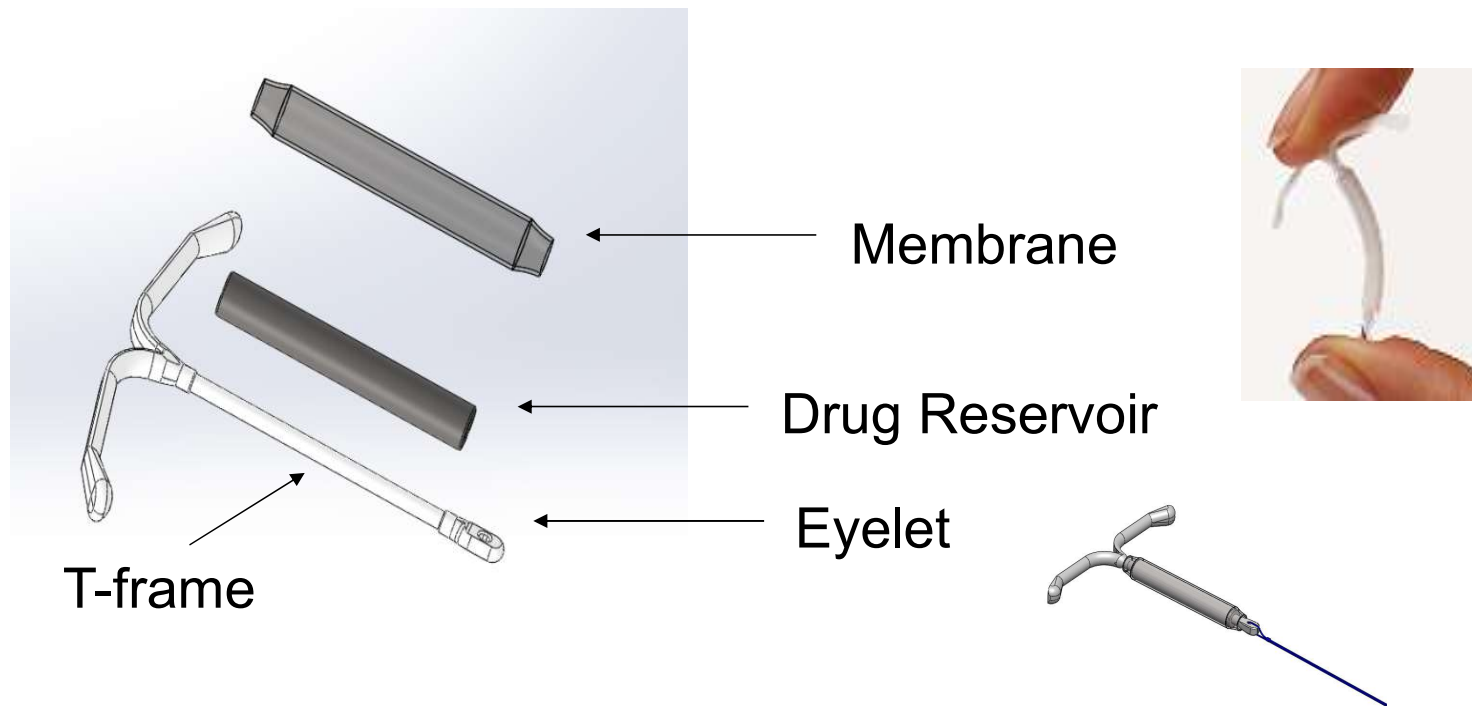


Une collaboration avec les ingénieurs et le Centre SIRRIS

Rigidity versus Plasticity



Conception des caractéristiques mécaniques de Levosert pour améliorer l'observance chez les femmes nullipares et adolescentes





Comment introduire une hormone dans du plastic ?



©Image Point Fr / Shutterstock.com

Quality by design (QbD) - Qualité par conception (QbD)

L'objectif de ce concept est que la qualité doit être intégrée à un produit avec une compréhension du produit et du processus par lesquels il est développé et fabriqué, ainsi qu'une connaissance des risques liés à la fabrication du produit et de la meilleure façon d'atténuer ces risques.

L'initiative QbD (2011) fournit des conseils sur le développement pharmaceutique pour faciliter la conception de produits et de processus qui maximisent l'efficacité et le profil d'innocuité du produit tout en améliorant la fabricabilité du produit.

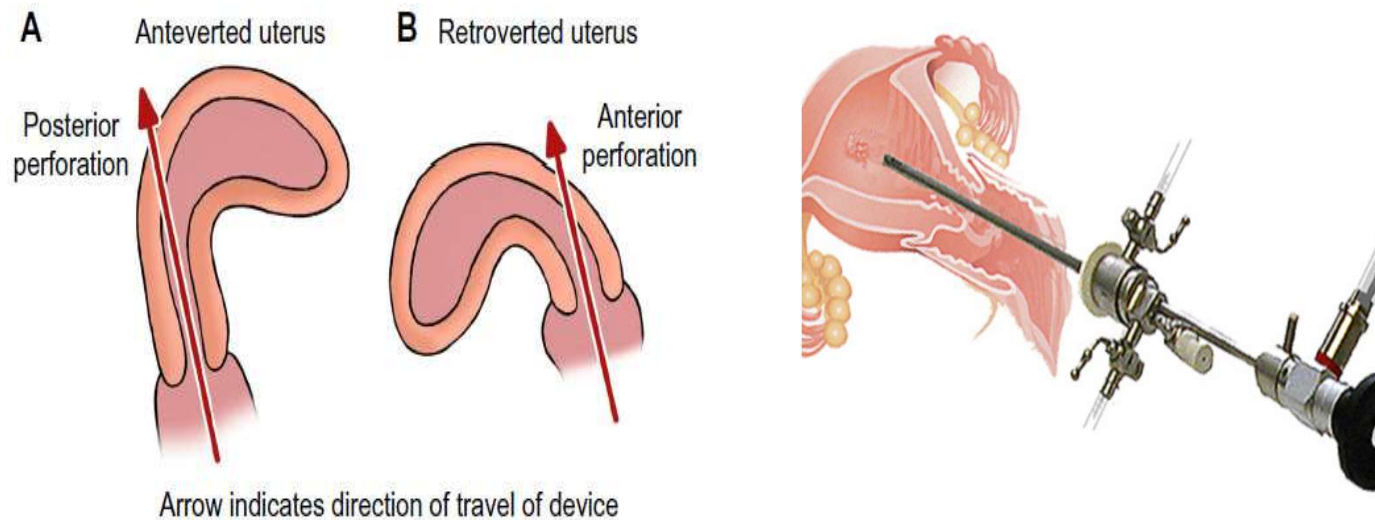


Manufacturing site

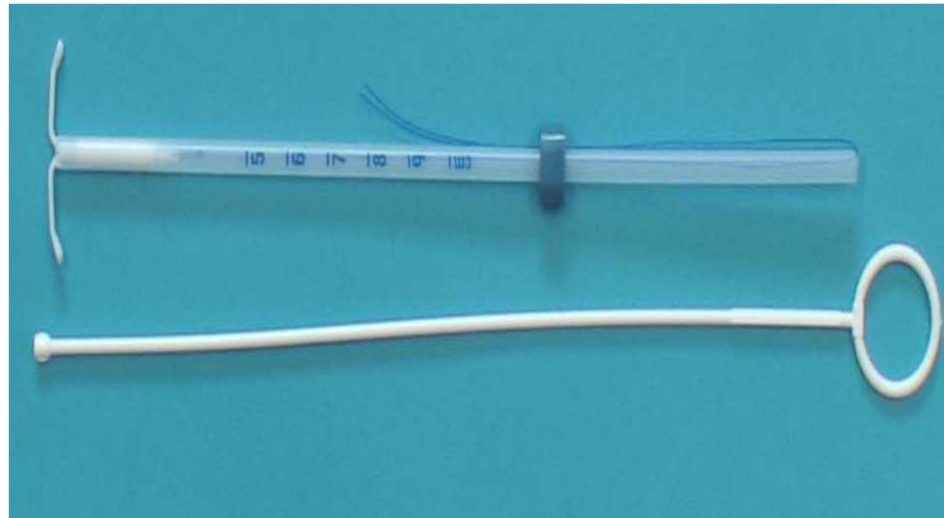
Odyssea Pharma, Grace-Hollogne, Belgium



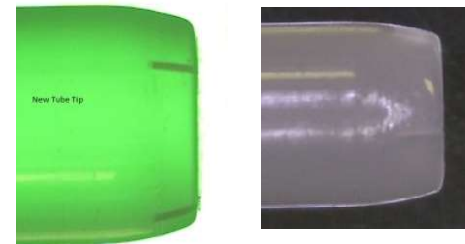
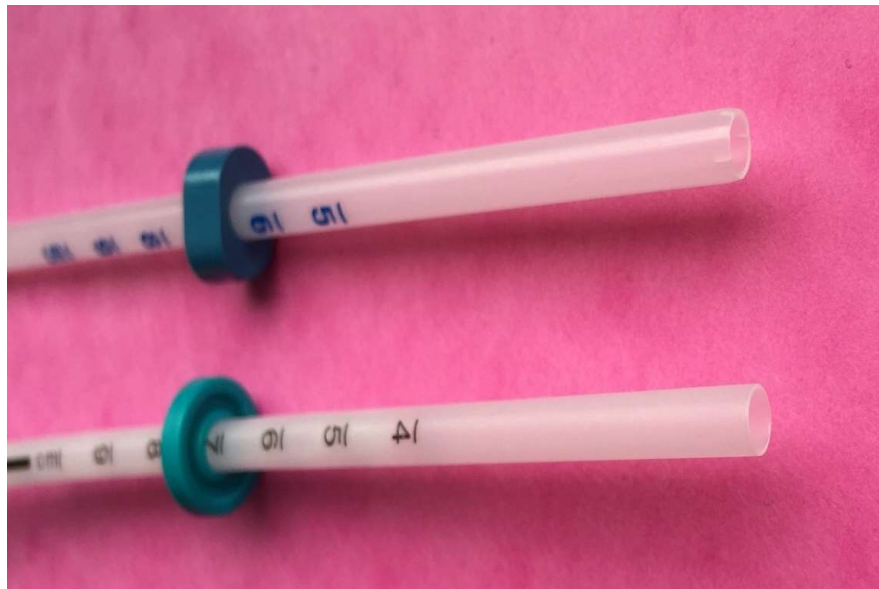
Les propriétés mécaniques de l'inséreuse sont également cruciales pour éviter la perforation



L'insertion est rapide, facile et réussie dans 99 % des tentatives, y compris les jeunes femmes nullipares



Process of the tipping was especially developed to reduce the sharpness of the inserter tube.



Comparison between Levosert and Mirena tips

Essai clinique

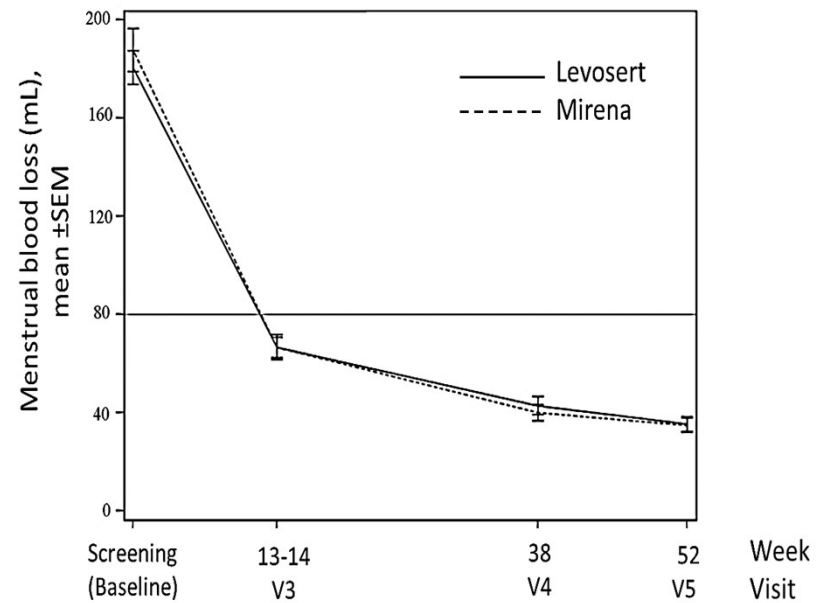
400 à 450 périodes de règles par vie de femme.

Les pertes menstruelles normales augmentent avec l'âge, en particulier chez la femme en périménopause.

Les ménorragies touchent 10 à 35 % de femmes, affectent la qualité de vie des femmes (hémorragies chroniques, carence en fer, anémie (fatigue, dyspnée, malaise))



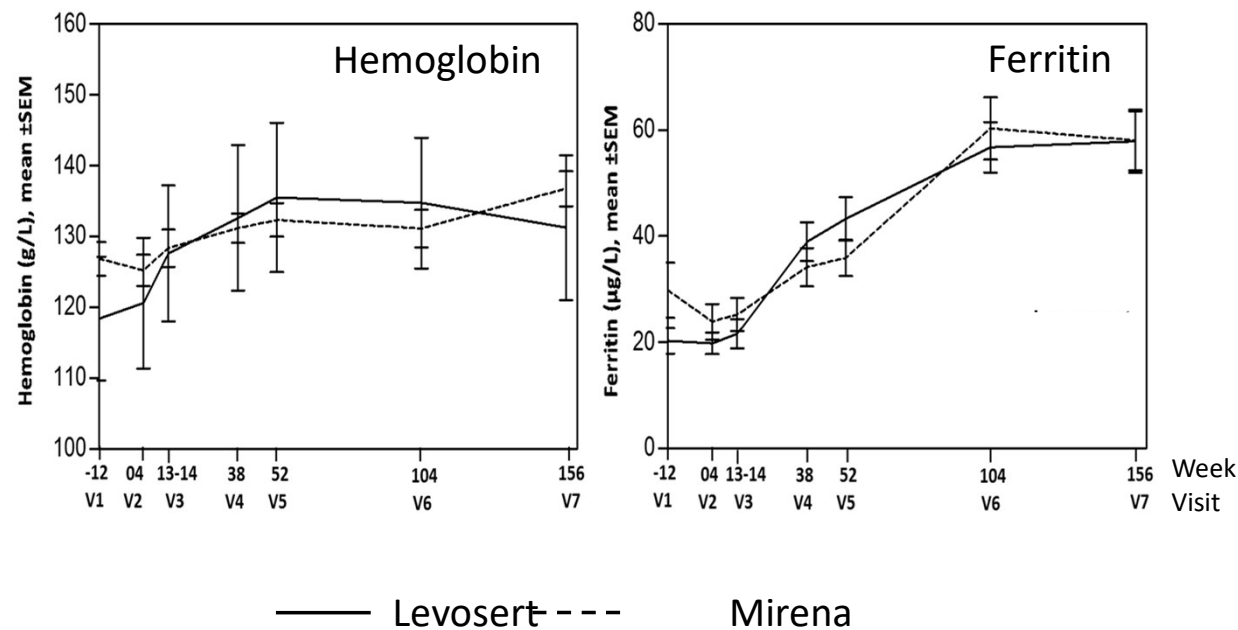
Levosert: Effect on menstrual blood loss



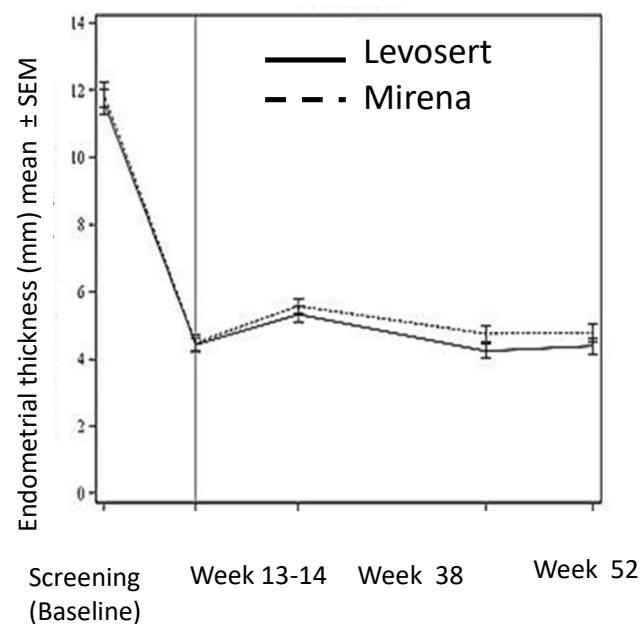
Item	Levosert®	Mirena®	Levosert®-Mirena® difference	
			Estimate (95%CI)	p-value
Menstrual blood loss (mL)				
ITT population				
Baseline, mean ± SD	180.6 ± 81.9	187.7 ± 103.4	-4.1 (-13.5 – 5.4)	0.3972
End of study, mean ± SD	35.4 ± 33.6	34.9 ± 33.5		
Change from baseline, least squares mean (95%CI)	142.3 (135.7 – 148.9)	146.4 (139.6 – 153.1)		

Levosert: Effect on hemoglobin and ferritin levels

Extension Phase ($\pm$ SEM; ITT Population)



Effect on endometrial thickness, measured by 2D TVUS



LNG gradually reduces the endometrial thickness and stabilizes the endometrium

Item	Levosert®	Mirena®	Levosert®-Mirena® difference	
			Estimate (95%CI)	p-value
Endometrial thickness (mm)				
ITT population				
Baseline, mean ± SD	11.7 ± 4.4	11.9 ± 4.6	0.1 (−0.3 – 1.1)	0.2282
End of study, mean ± SD	4.4 ± 2.7	4.8 ± 3.0		
Change from baseline, least squares mean (95%CI)	7.3 (6.8 – 7.8)	6.9 (6.4 – 7.4)		



Warren Buffett



Warren Buffett en 2015.

Fonction

Directeur général
Berkshire Hathaway

depuis 1970

Our Global Access team is currently attending the International Conference on Family Planning from November 14-17. Stop by our booth to connect!

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YOUR JOURNEY.
YOUR CHOICE.

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LILETTA PATIENT SAVINGS
PROGRAM® [here](#) >

*LILETTA is an intrauterine system, or IUS, otherwise
known as an IUD, intrauterine device



THE FIRST HORMONAL IUS*
APPROVED IN THE U.S. FOR
UP TO **6 YEARS**
OF PREGNANCY
PREVENTION

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PATIENT BROCHURE



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LILETTA



Understanding My
Birth Control Options



How Much Does
LILETTA Cost?

US Contraceptive Med 360 L102 study

	Levosert Total
Overall (n)	1751
Age 16-35 years	1600
Age 36-45 years	151

ACCESS IUS (A Comprehensive Contraceptive Efficacy and Safety Study of an IUS) was designed to assess efficacy and safety of a branded levonorgestrel-releasing IUS (LNG20) for up to 7 years of contraception in a diverse population of women.

The study population is the largest phase 3 U.S. study of nulliparous women in which an IUS was assessed for contraceptive efficacy and safety. It is representative of the U.S. population (race, ethnicity and weight/BMI).

Pearl Indices of Long-Acting Reversible Contraceptives

	Pearl Index			
	1 year	Upper 95% CI	3 years (cumulative)	Upper 95% CI
LNG20 IUS	0.15	0.55	0.22	0.44
Mirena^[1]	0.19	0.70	NA	NA
Skyla^[2]	0.41	0.96	0.33	0.60
Implanon^[3]	0.27	0.96	0.38	0.82
LNG-IUS 12	0.16	0.58	0.45	1.14
[4]				

[1] Mirena SBA (FDA, 2000); 3-year data are not available. [2] Skyla SBA (FDA, 2012)

[3] Implanon SBA (FDA, 2006) [4] European Journal of Obstetrics & Gynecology and Reproductive Biology 210 (2017) 22–28

Manufacturing site

Odyssea Pharma, Grace-Hollogne, Belgium



30 janvier 2023

Mithra
2013-2014

2015-2023
EyeD pharma,
Imcyse, Exo-Biologics





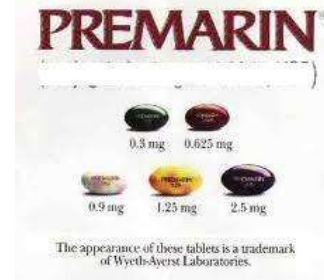
1929: Butenandt and Doisy discover the first
estrogen (Estrone)



1930 Estriol



1936 Estradiol



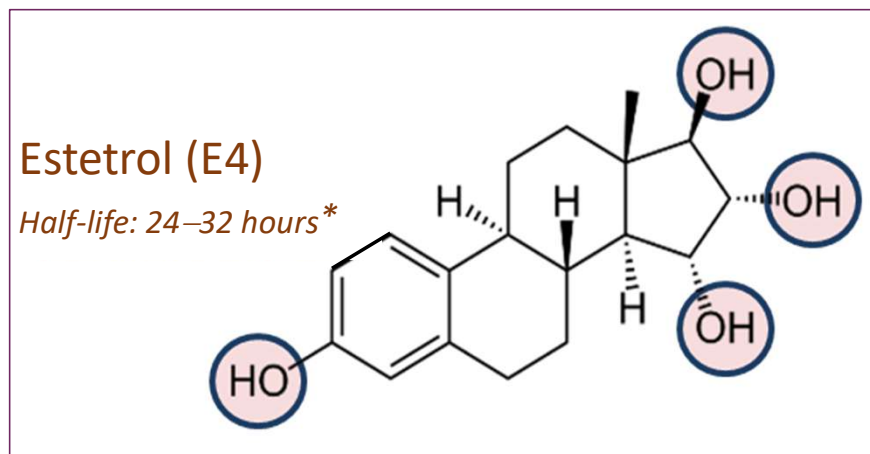
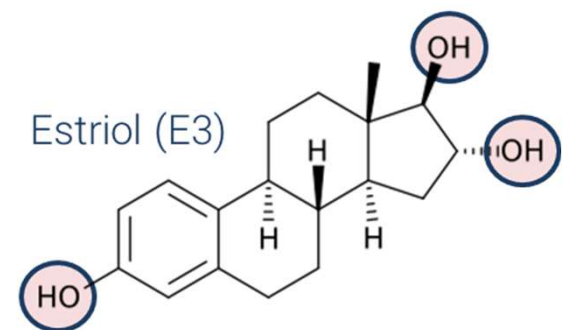
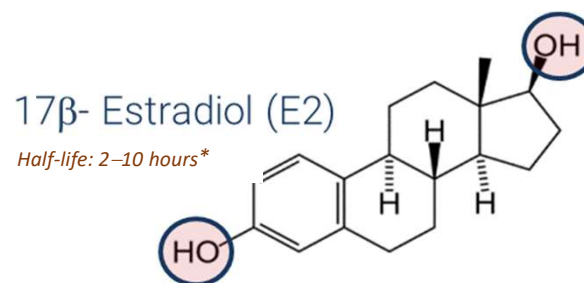
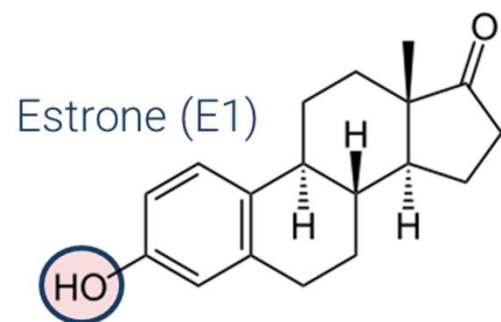
1941 Conjugated
Estrogens



1943 Ethinylestradiol

1 and 7 years later, all natural adult estrogens enter the therapeutic domain
No significant improvement for almost 80 years

Natural human estrogens



*Extensive variable data / depending on particle size

1

What is E4?

2

3

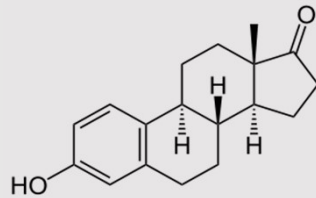
4

5

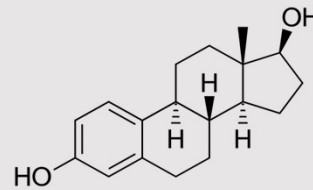
6

Propriétés du 4e Estrogène naturel

Estrone, E1

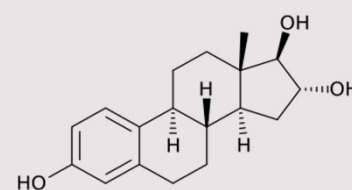


Estradiol, E2

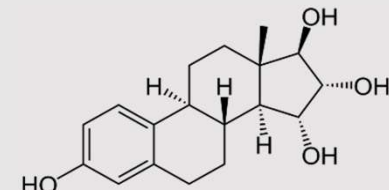


t1/2: 2h

Estriol, E3



Estetrol, E4



t1/2: 28h

- ❖ Découvert en 1965 par E. Diczfaluzi et ses collaborateurs (Karolinska)
- ❖ Produit uniquement par le foie fœtal (nécessite la 15- et 16 α hydroxylase)
- ❖ Spécifique aux primates
- ❖ Traverse le placenta
- ❖ Les concentrations plasmatiques augmentent avec le temps
- ❖ Grande variabilité inter-sujets
- ❖ Concentrations lors d'une grossesse à terme :



4,500 – 14,000 pg/mL



400 – 1,200 pg/mL

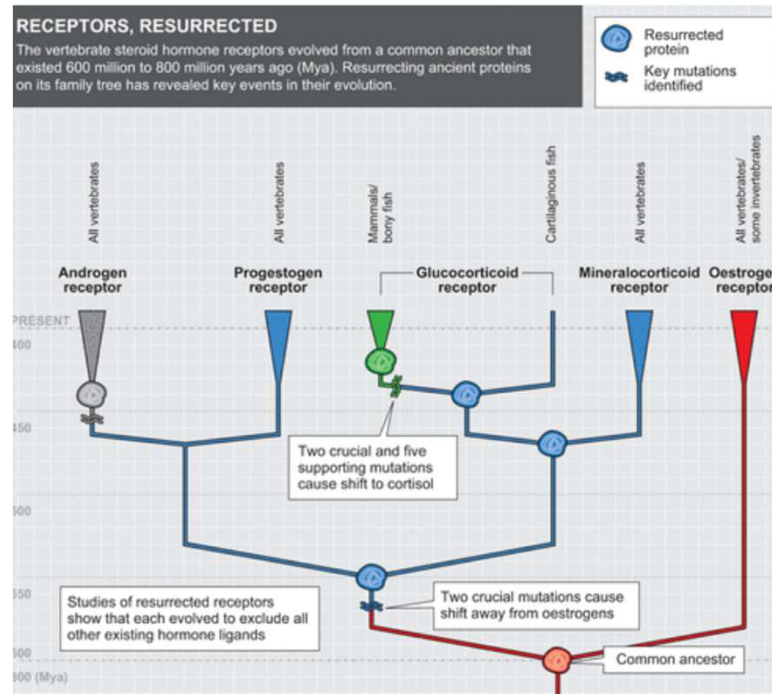
Estetrol (E4)

- Produit par le foie fœtal humain ^{1,2}
- Détecté à partir de la 9ème semaine de gestation dans l'urine maternelle ³
- Taux plasmatiques fœtaux 12 fois supérieurs à ceux de la mère⁴
- Demi-vie longue (24-32h)⁵
- Conçu par la nature, synthétisé à partir d'une source végétale
- Oestrogène naturel à action sélective dans les tissus ^{6,7}

¹Cantineau R et al. J Steroid Biochem 1985 | ²Hagen AA et al. Acta Endocrinol 1965 | ³Heikkilä J. et al. J. Steroid Biochem 1971 | ⁴Holinka CF et al. J. Steroid Biochem Mol Biol 2008 | ⁵Visser M et al. Climateric 2008 | ⁶Foidart JM et al. 2019 In: Brinton RD et al. (eds.) 2019. Sex Steroids' Effects on Brain, Heart and Vessels. ISGE Series | ⁷Arnal JF et al. Physiol Rev 2017



Estrogens have multiple actions because Estrogen Receptors were the first steroid receptors to appear 600-800 million years ago. They are ubiquitous and pervasive.



Breast

Stimulates epithelial breast cells proliferation but promotes breast cancer

Hemostasis

Increases the synthesis of coagulation factors and the VTE risk

Brain

Body temperature
Memory, prevention of neurodegenerative disorders
Libido, Cognitive function

Uterus

Trophicity
Endometrial proliferation
Angiogenesis

Heart

Heart rate
Healthy lining of blood vessels
Lower Cholesterol

Liver

Cholesterol regulation
Stimulates the synthesis of carrier proteins and angiotensinogen

Bowel

Maintains function
Helps with gut microbiome

Vagina

Lubrication
Reduces bacterial overgrowth

Skin

Collagen production
Reduce moisture loss

Bones

Bone strength

Nerves

Nerve transmission

Joints & Muscles

Anti-inflammatory
Muscle strength
Flexibility
Joint lubrication

Bladder

Reduces risk of infection
Controls bladder function

Existing impact

- Uterus
- Vagina
- Bone
- Cardiovascular (heart disease)

Unique impact of E4

- Liver
- Breast
- Cardiovascular (VTE)

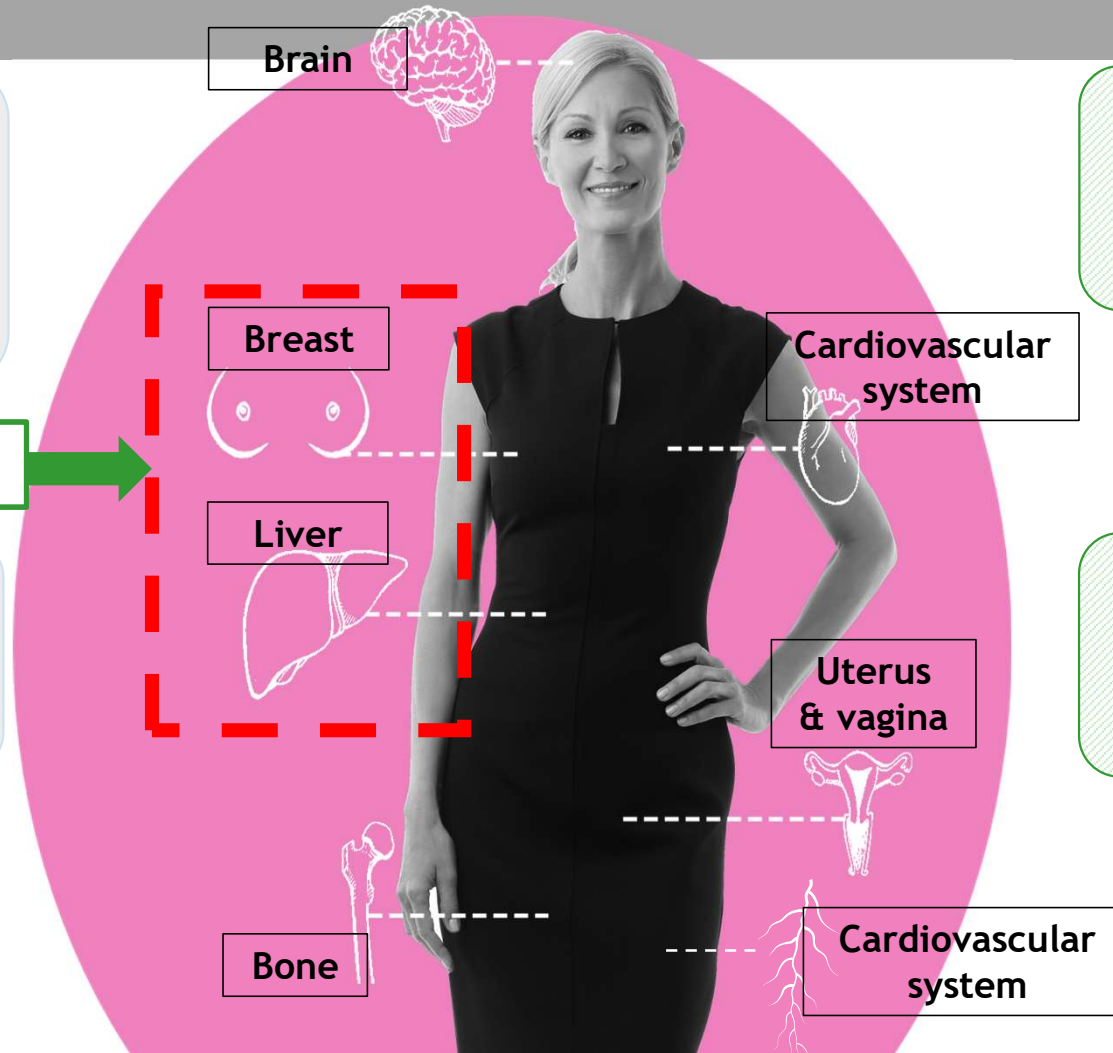
Potential impact of E4

Mental Impact

- Quality of life
- Neurodegeneration

Aesthetic Impact

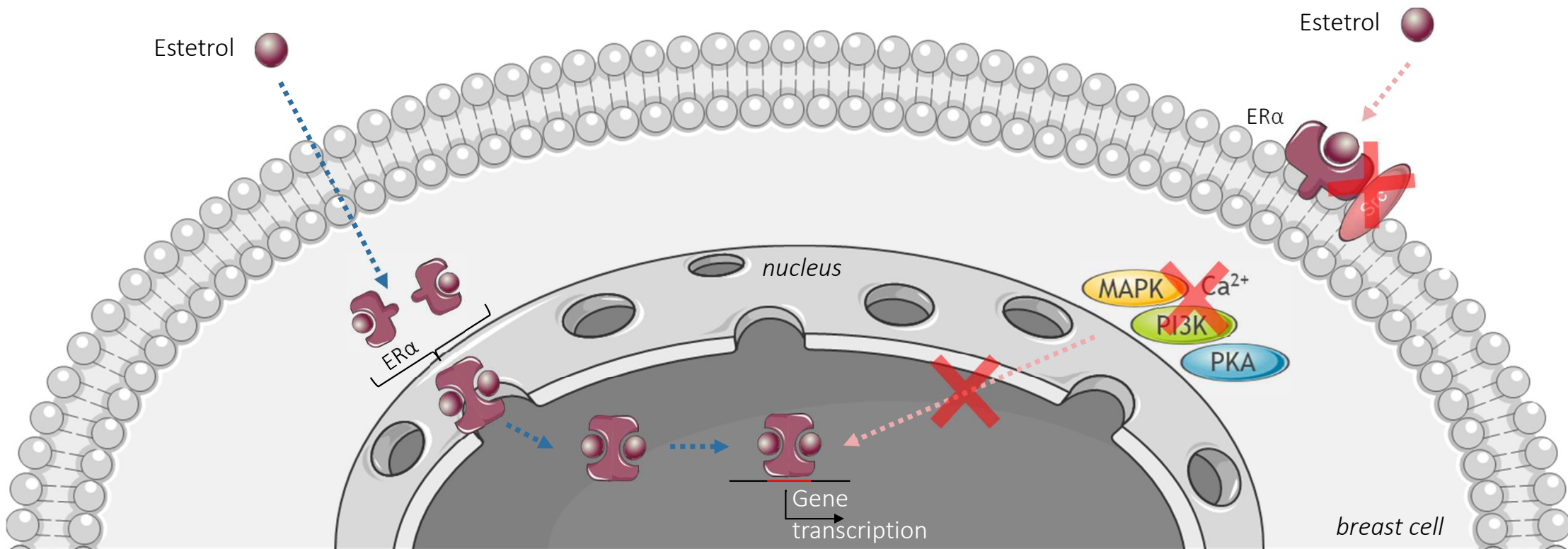
- Skin
- Hair



E4 has a unique Mode of Action

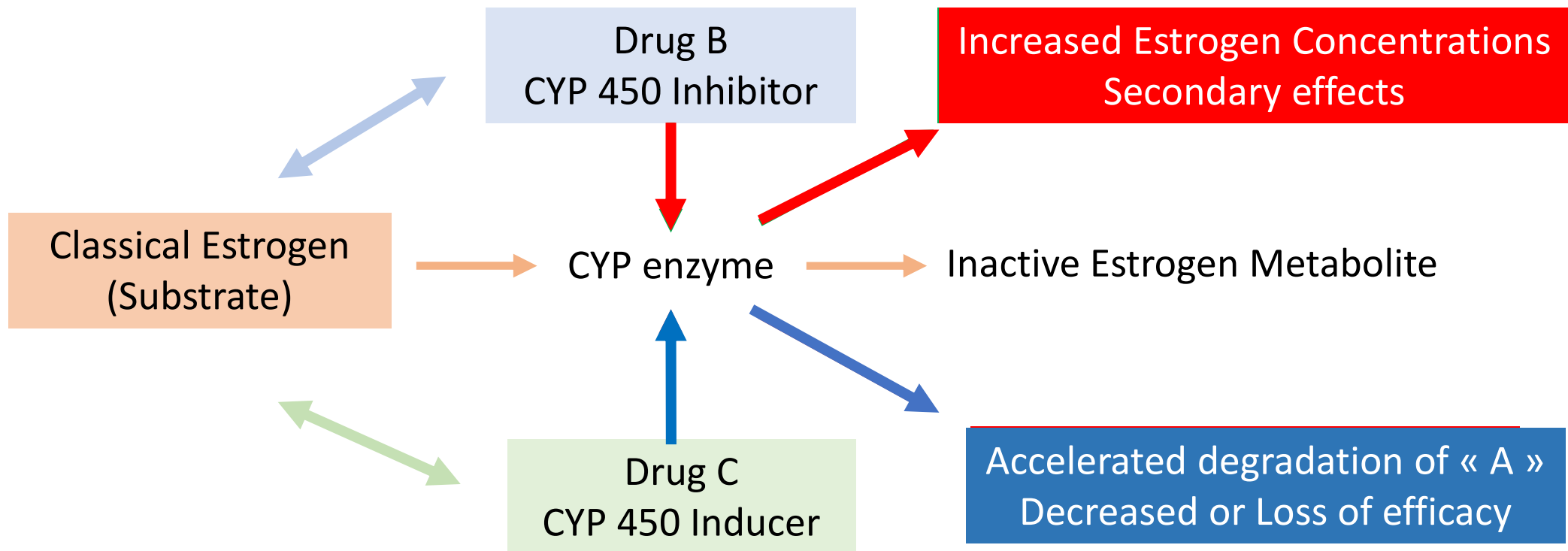
E4-ER α interaction results in:

- **Nuclear**-initiated steroid signaling (NISS):
- **Blockade of membrane-initiated** steroid signaling (MISS):



Abot et al. 2014 EMBO Mol Med; Giretti et al. 2014 Frontiers in Endocrinol; Gérard et al. 2022 Expert Rev Clin Pharmacol

Drug- Drug interaction with classical estrogens (E2, EE, E2 valerate...)



Phase I reactions: Cytochrome P450 enzymes oxidize or reduce drugs.



Drug Interactions

■ Estradiol, Ethinyl Estradiol, Testosterone levels are ***INCREASED*** by:

- | | |
|------------------|-----------------------|
| ■ Nefazodone | Isoniazid |
| ■ Fluvoxamine | Fluoxetine |
| ■ Indinavir | Efavirenz |
| ■ Sertraline | Paroxetine |
| ■ Diltiazem | Verapamil |
| ■ Cimetidine | Astemizole |
| ■ Itraconazole | Ketoconazole |
| ■ Fluconazole | Miconazole |
| ■ Clarythromycin | Erythromycin |
| ■ Grapefruit | Triacetyloleandomycin |

**FAT-SOLUBLE
Toxins**

Phase 1

(Cytochrome P450 Enzymes)

Oxidation
Reduction
Hydrolysis
Hydration
Dehalogenation

INTERMEDIARY
METABOLISM

Phase 2

(Conjugation Pathways)

Glucuronidation
Sulfation
Glutathione conjugation
Acetylation
Amino Acid conjugation
Methylation

Liver

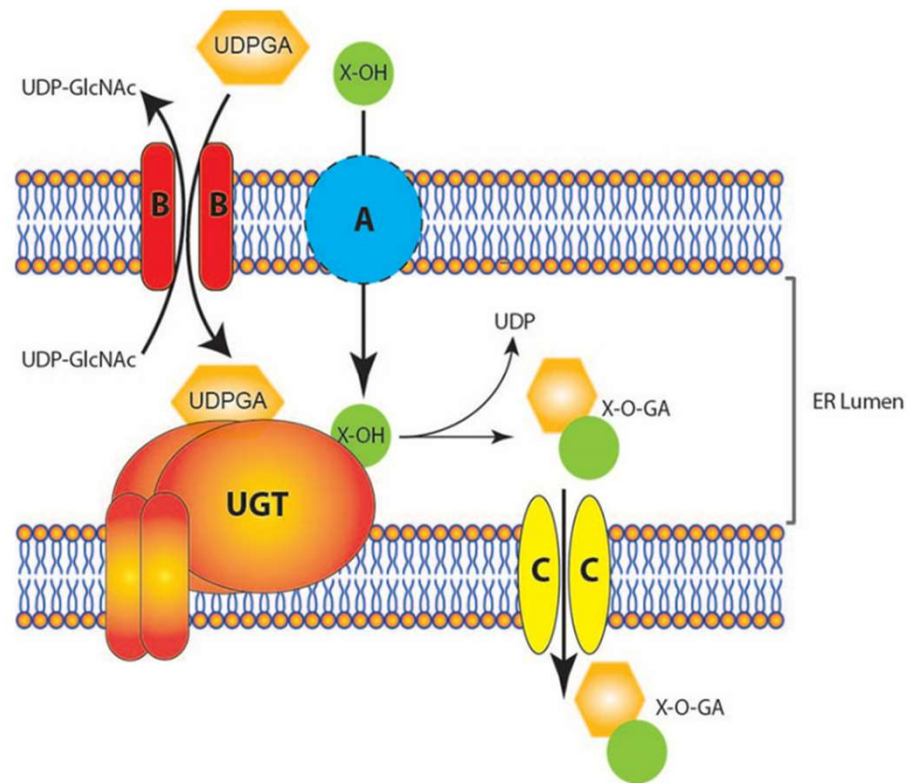
**WATER-SOLUBLE
WASTE**

Urine

Bile

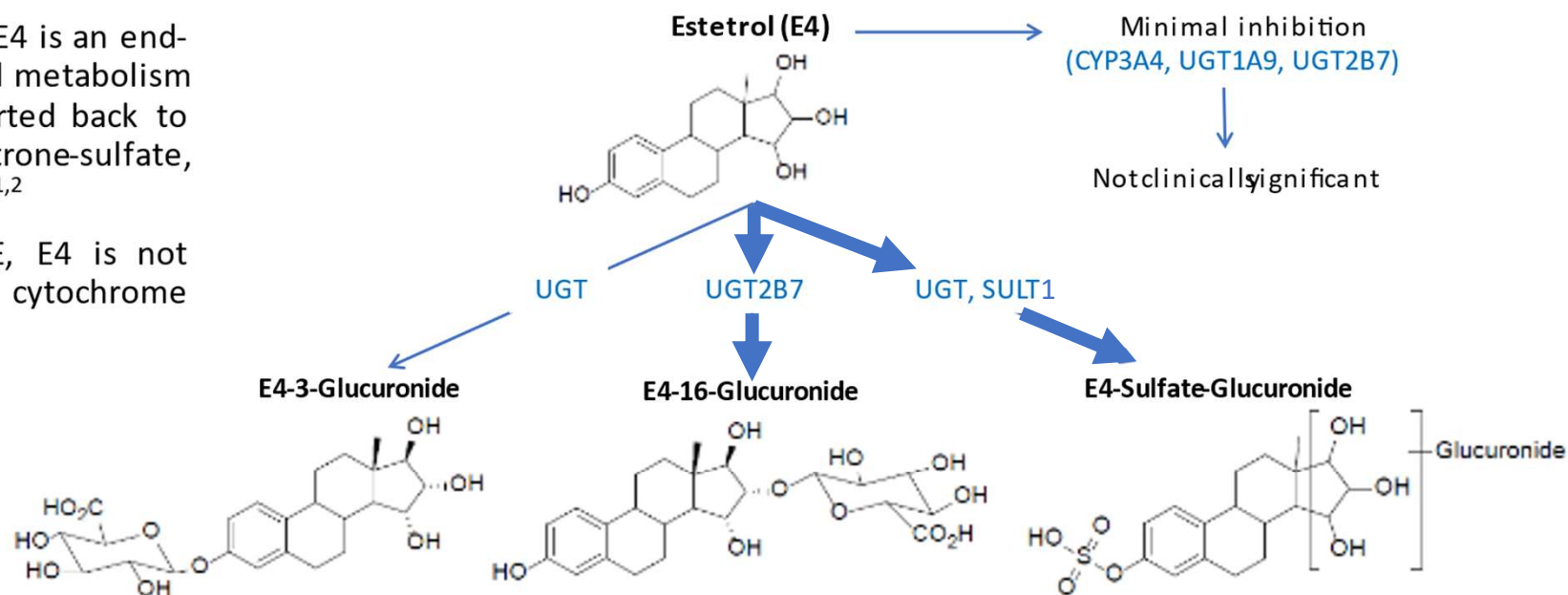
Stool

Estetrol is conjugated : sulfo- and glucurono-conjugation



Estetrol (E4): Unique metabolism

- In contrast to E2, E4 is an end-product of steroid metabolism and is not converted back to estrone, estrone-sulfate, estradiol or estriol^{1,2}
- Unlike E2 and EE, E4 is not metabolised by cytochrome P450 enzymes^{2,3}

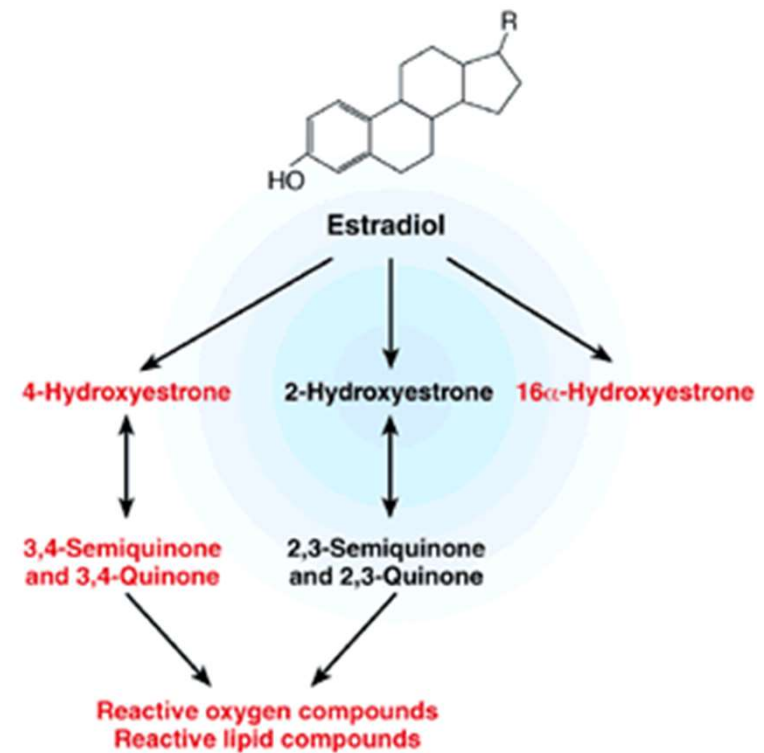
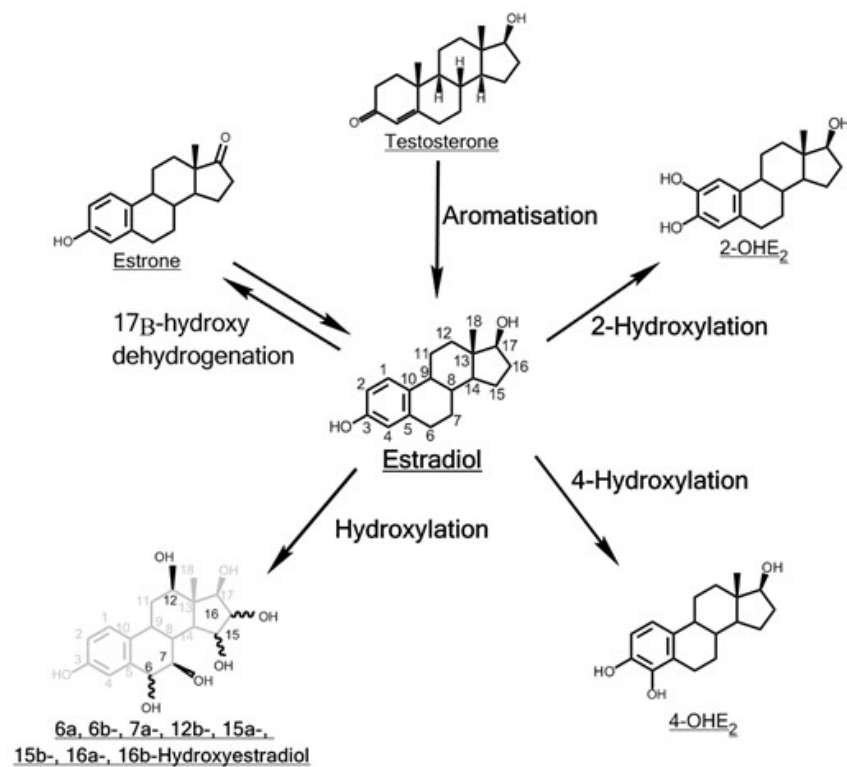


E2, estradiol; E4, estetrol; SULT, sulphotransferase;
UGT, uridine 5'-diphosphoglucuronosyltransferase

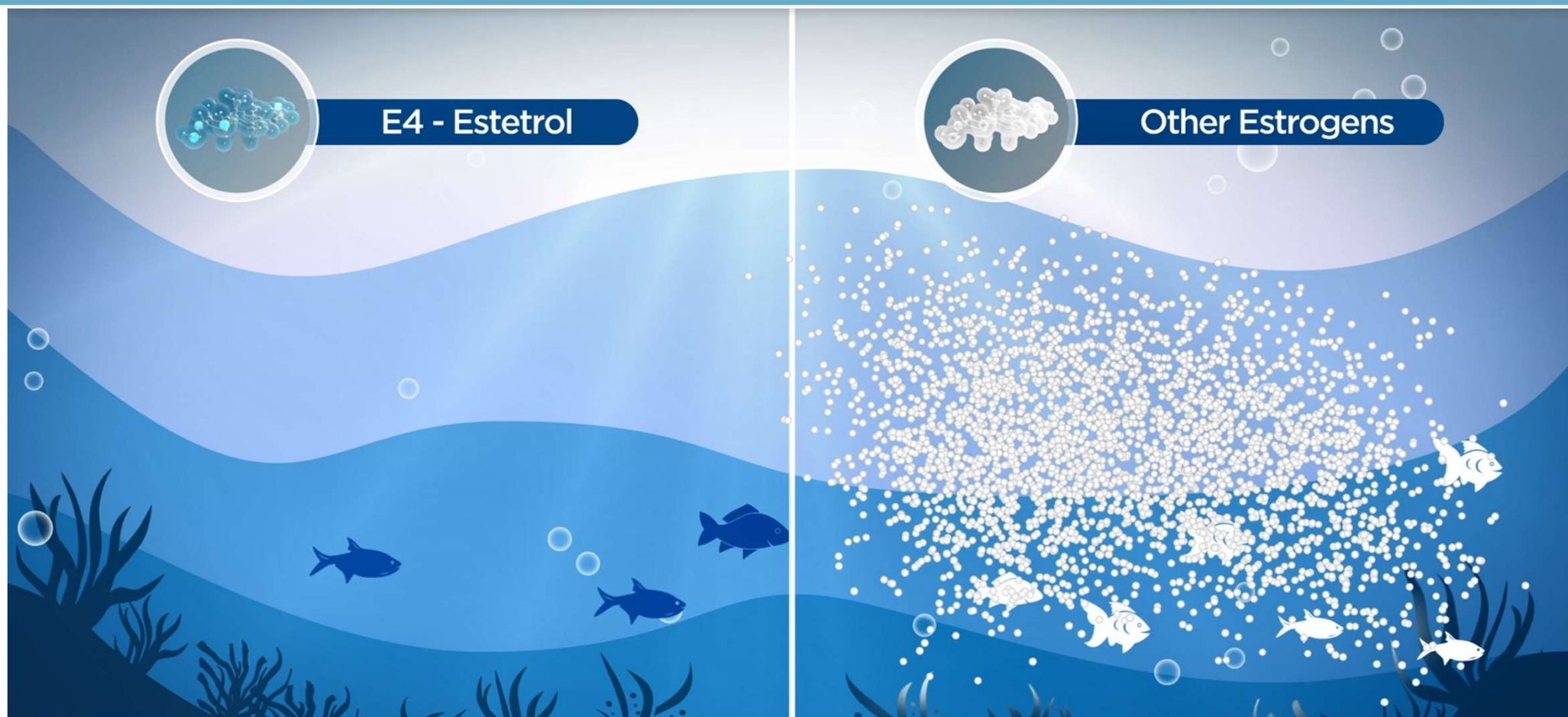
1. Data on file. CSR MIT -Es0001 -C105 (QCL114621), July 2016
2. Visser M, et al. Climacteric 2008;11(Suppl.1):64 –68
3. Coelingh Bennink HJ, et al. Climacteric 2008;11 Suppl 1:47 –58

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Carcinogenic metabolites of Estradiol are produced by CYP enzymes



E4 and its impact on environment



Why are these male Fish growing Eggs?

- Estrogens (E1,E2 or EE 1ng/L) in lakes¹
 - reduce eggs production or testicular growth
 - delay sexual maturation
 - feminize populations and promote sexual ambiguity
- E4 does not accumulate in living organisms, surface water, groundwater, or sediment²
- Only 2.5% of ingested E4 is released in the urine as biologically active E4²



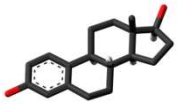
85% of male small mouth bass in National wildlife refuges in the Northeastern U.S. have eggs growing in their testes²

NATIONAL
GEOGRAPHIC

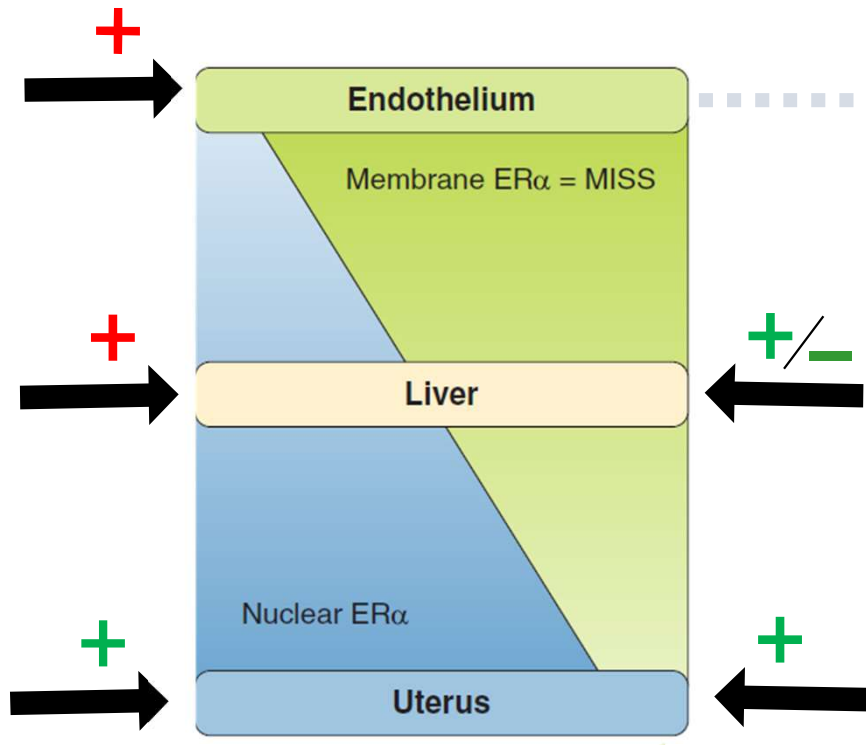
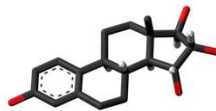


Tissue-specific activity of E4

Estradiol (E2)



Estetrol (E4)



- E2 and E4 exert physiological actions in the uterus, a tissue with dominant ERα nuclear activity
- The endothelium with exclusively membrane ERα is insensitive to E4
- The liver is more sensitive to E2, depending on both membrane and nuclear ER effects

Estetrol and contraception : In case of forgotten pills

Estetrol has a 70 % bioavailability, (versus 1% for E2, does not bind to SHBG and has a very long half-life (28–32 hours) → prolonged tissue exposure.

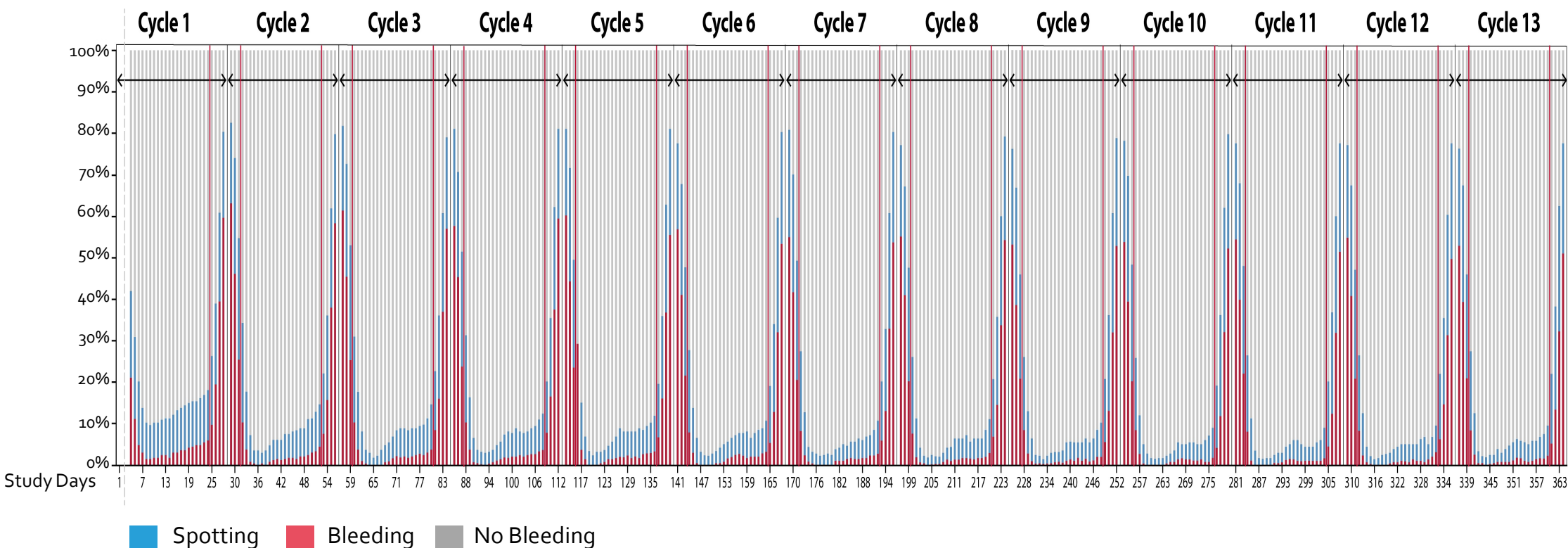
Drospirenone has also a long half-life (25-33 hours)



Combined EU and US phase 3 studies
3,027 participants, (26,455 at-risk cycles of use)
Pearl Index of 1.52 (95% CI 1.04–2.16).

Missing active pills	Pregnancies
0	0.09%,
1	0.25%,
2	0.83%,
> 2	1.60%

E4 15 mg + DRSP 3 mg: regular and predictable bleeding pattern



Diapositive 51

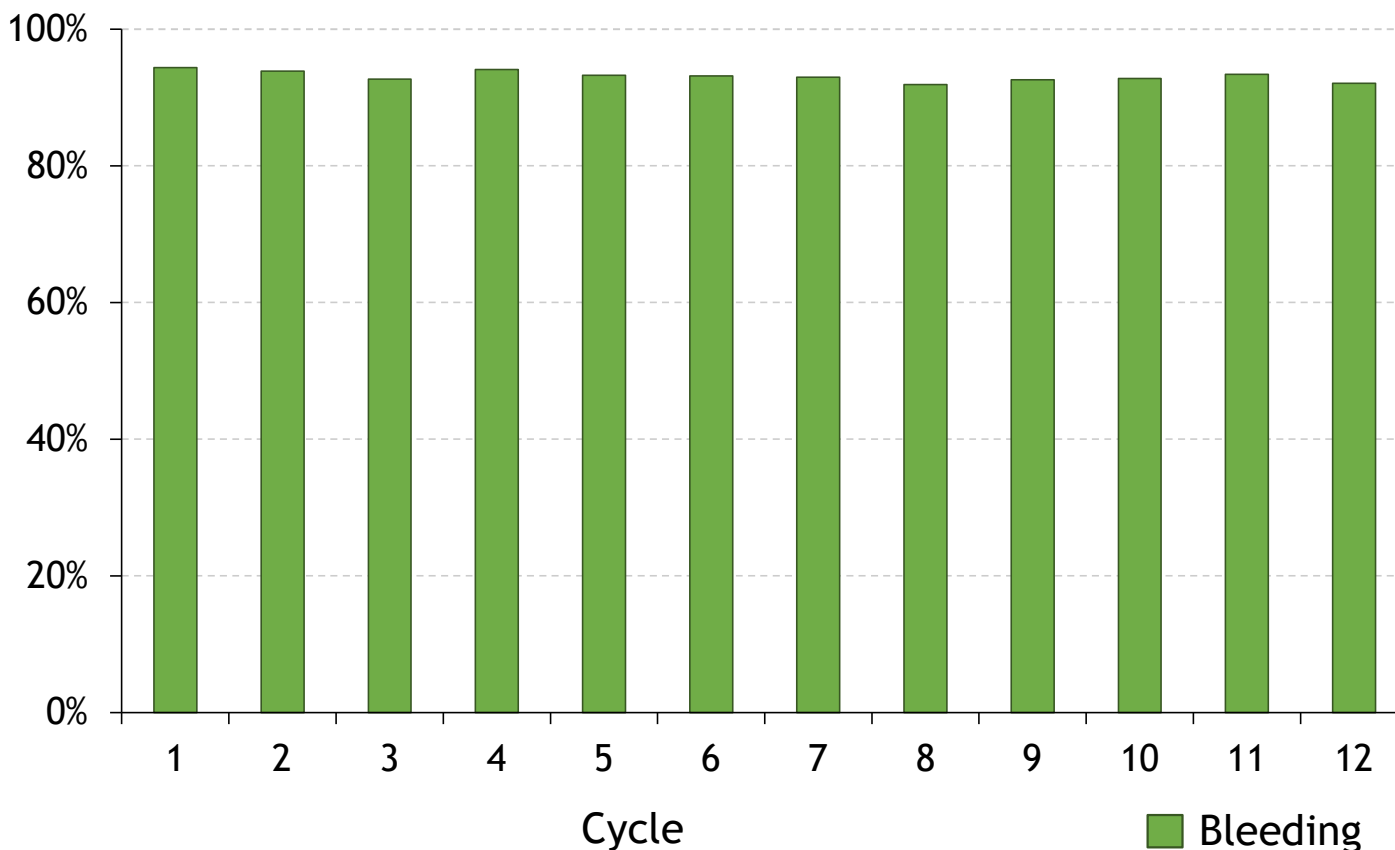
Y01

Dear Prof Foidart, could we remove EU/RUS from title? see footnote/reference

Yvonne Oligschläger; 03-05-22

>92% of participants with E4 15 mg + DRSP 3 mg had a stable and regular scheduled bleeding pattern – EU/RUS Phase 3

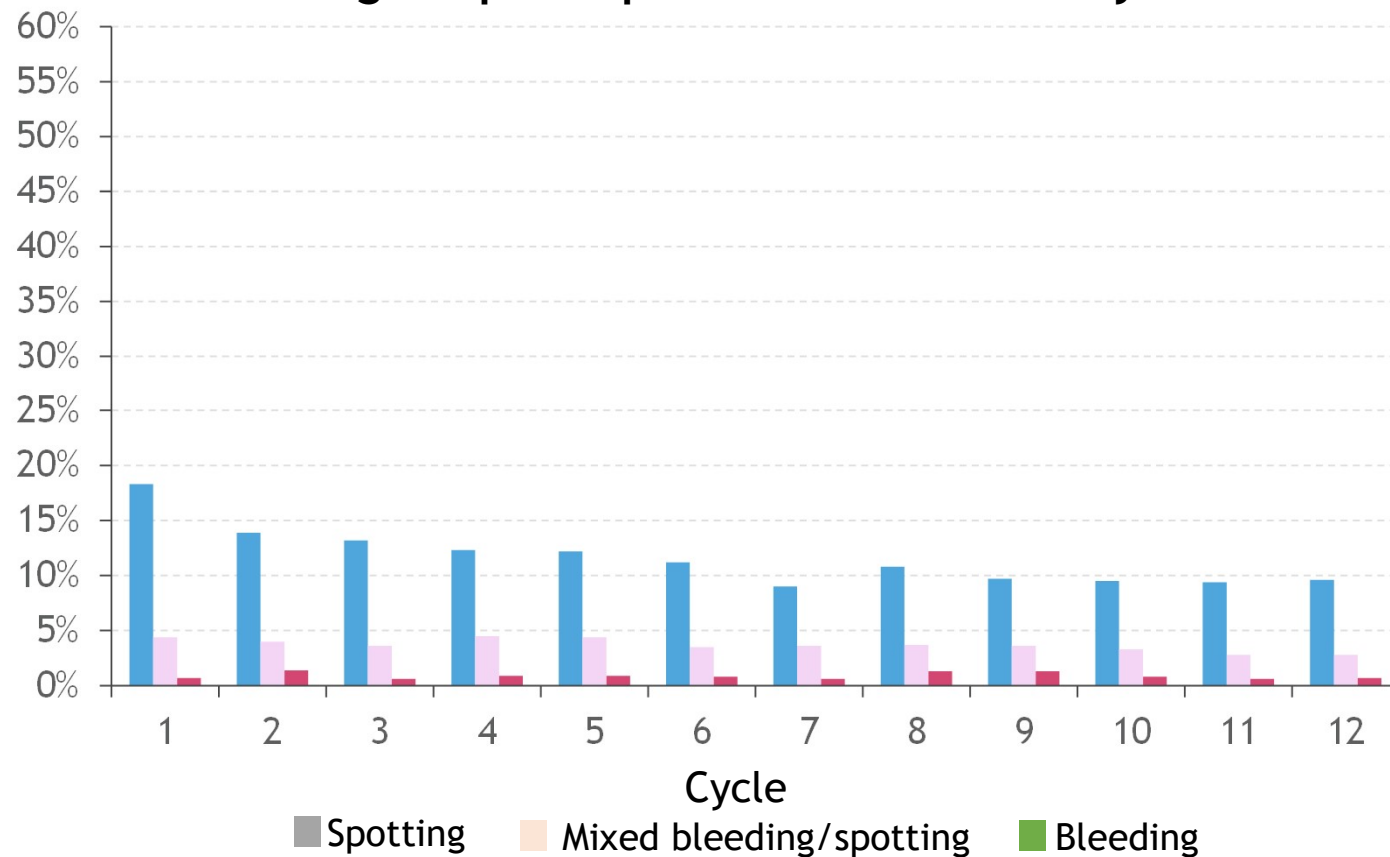
Percentage of participants with evaluable cycles



- Over **92%** of participants had scheduled bleeding
- Median episode length was **4 – 5 days**
- Absence of withdrawal bleeding
 - Occurred at least **once** during study: 38%
 - Occurred at least **twice** during study: 15%
 - Occurred during 10-12 cycles: <1%

Predictable bleeding pattern with minimal unscheduled bleeding in women with E4 15 mg + DRSP 3 mg – Phase 3

Percentage of participants with evaluable cycles



- Proportion with only scheduled bleeding:
 - Cycle 1: **76.5%**
 - Cycle 12: **87.0%**
- **Most** participants (75%) with unscheduled bleeding/spotting had episodes **≤2 cycles/year**
- Median duration unscheduled bleeding/spotting: **3 days**
- **Most** participants (66% – 78%) reporting unscheduled bleeding reported **spotting-only**

Combined Oral Contraceptives and Hemostasis

Recent concepts...

- Estrogen induces hypercoagulability
- Progestin has impact as well

Procoagulant

Clotting factors ↑
Protein S ↓↓
Antithrombin ↓↓



Anticoagulant

Protein C ↑↑
 α_1 -Antitrypsin ↑↑
Plasminogen ↑↑

Unbalanced hemostasis

2

COC, overview

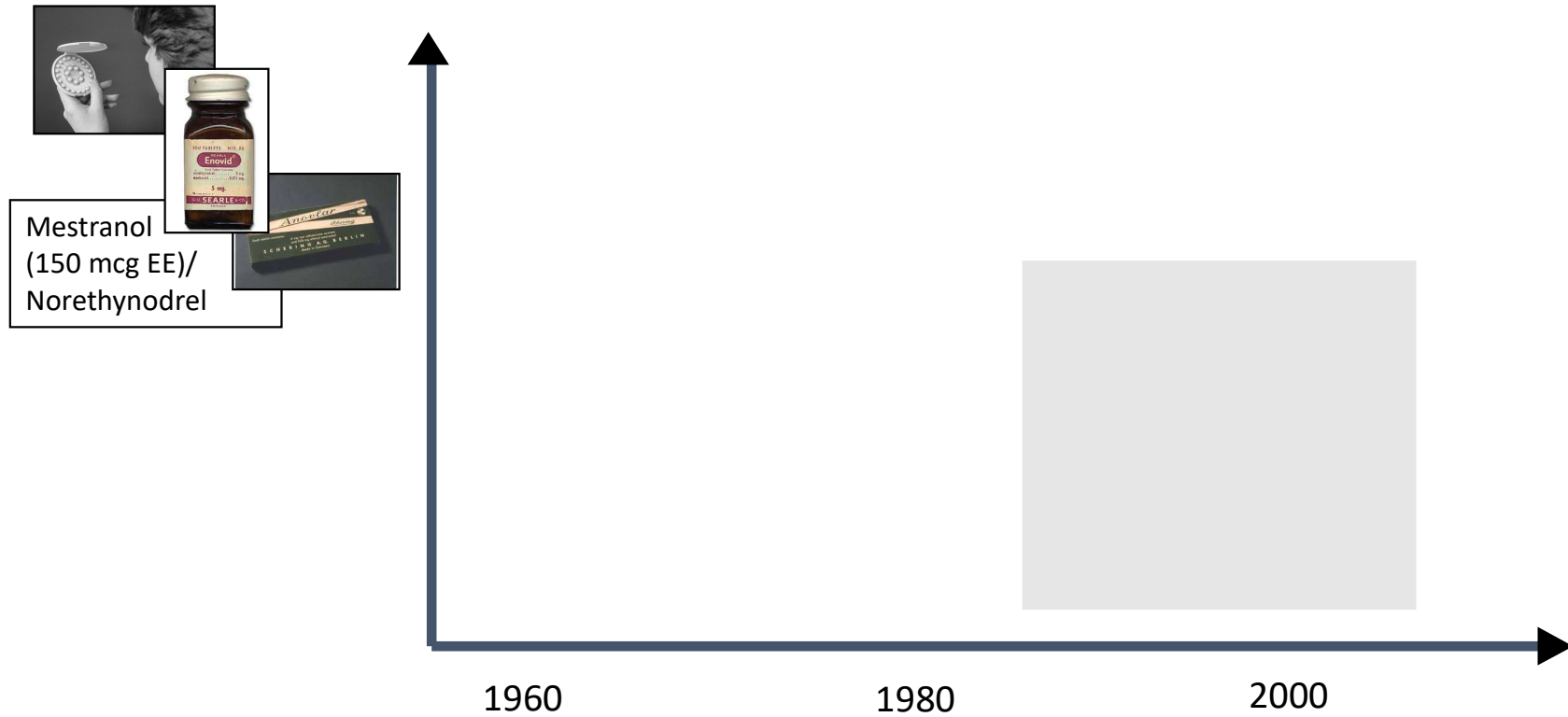
3

4

5

6

Evolution of a Blockbuster



2

COC, overview

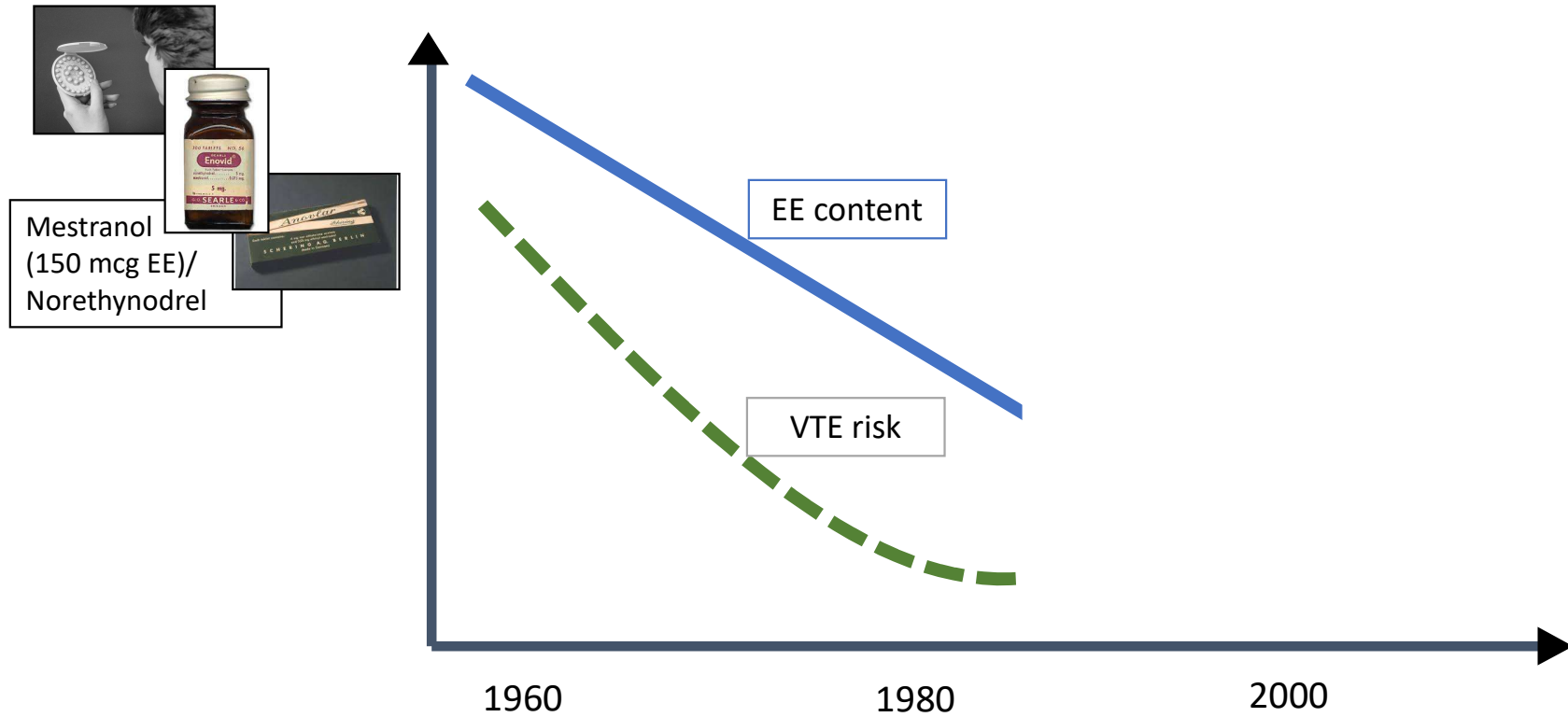
3

4

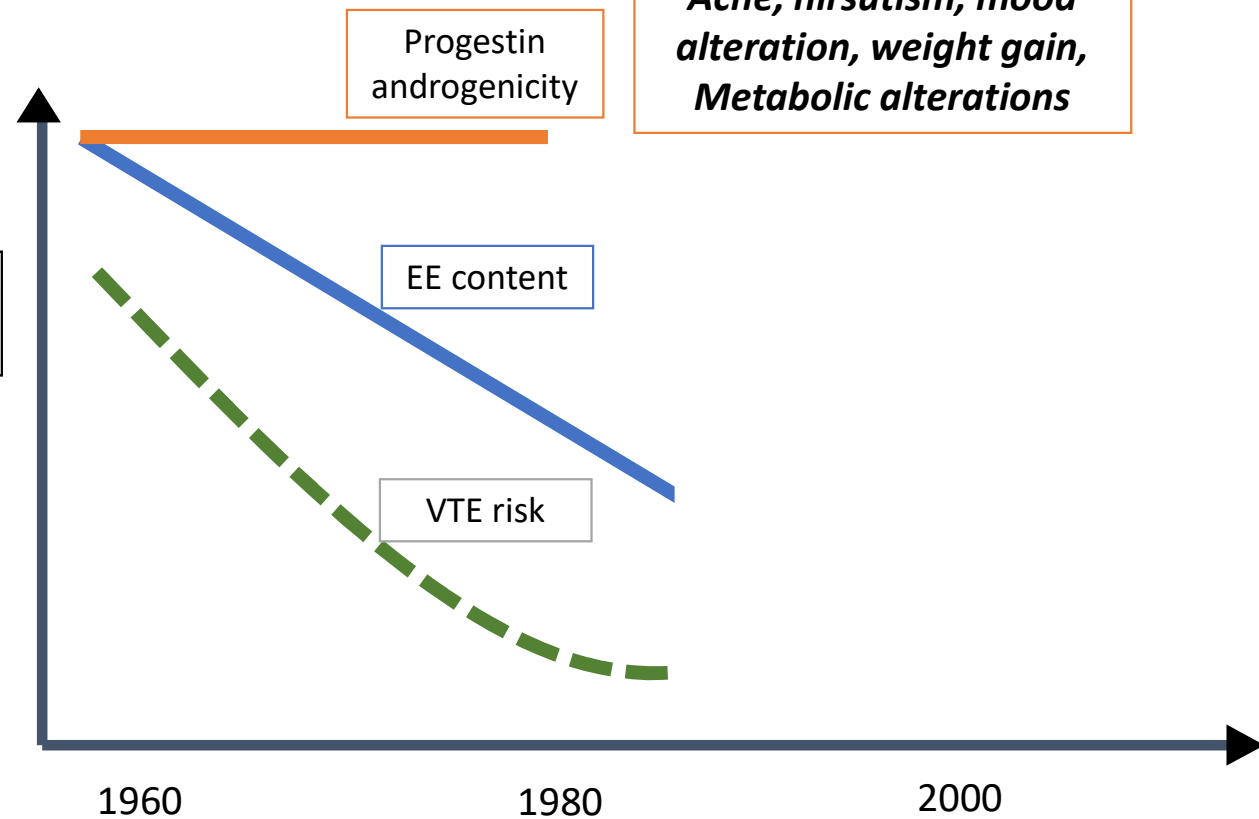
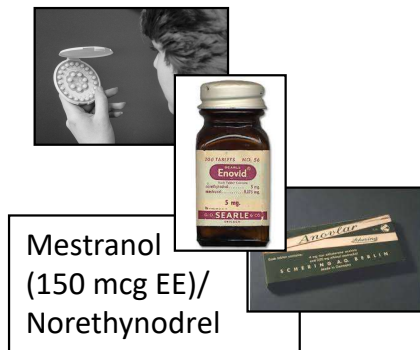
5

6

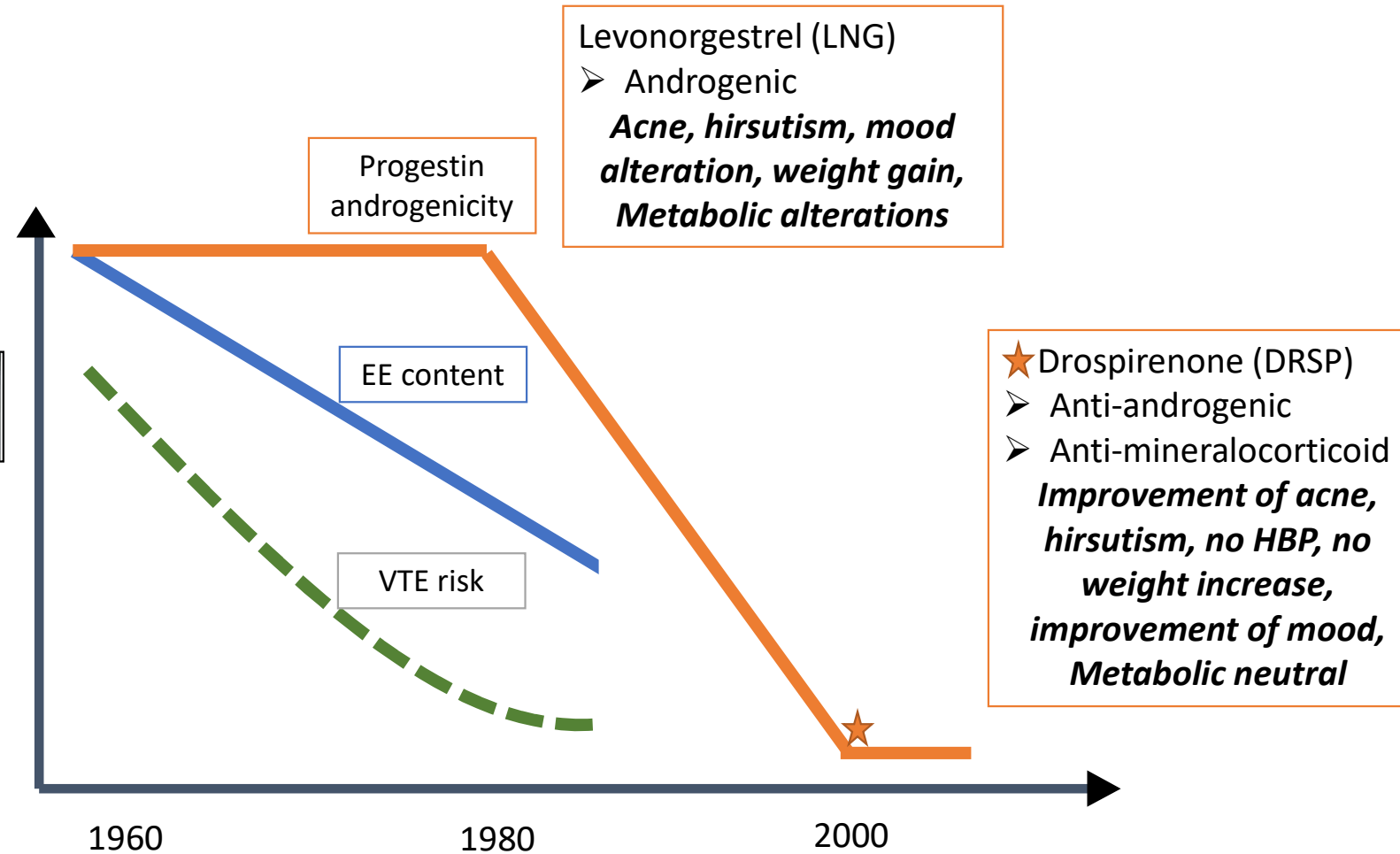
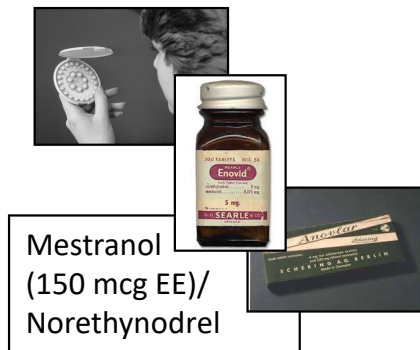
Evolution of a Blockbuster



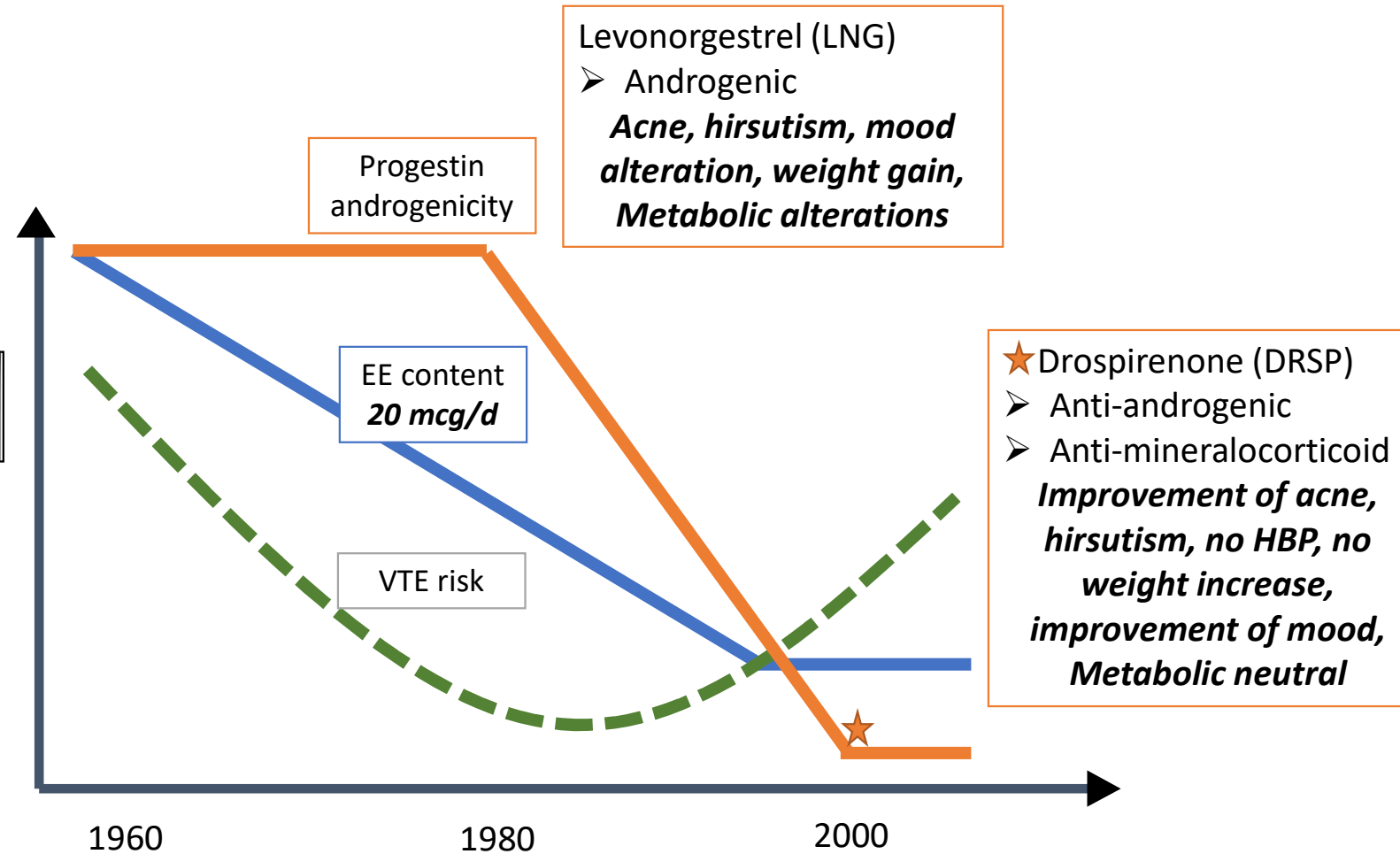
Evolution of a Blockbuster



Evolution of a Blockbuster



Evolution of a Blockbuster



2

COC, overview

3

4

5

6

VTE risk and Estrogenicity of a COC

Sex hormone binding globulin

Non-user



VTE relative risk:

3.7 vte/10,000 wy

VTE risk and Estrogenicity of a COC

Sex hormone binding globulin

Non-user



Progestin alone
(e.g. POP)



VTE relative risk:

3.7 vte/10,000 wy

0.64 (0.29 to 1.42)

2

COC, overview

3

4

5

6

VTE risk and Estrogenicity of a COC

Sex hormone binding globulin

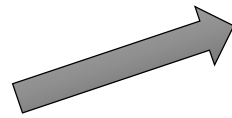
Non-user



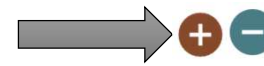
Progestin alone
(e.g. POP)



Ethinylestradiol



Androgenic
progestin (e.g. LNG)



VTE relative risk:

3.7 vte/10,000 wy

0.64 (0.29 to 1.42)

2.19 (1.74 to 2.75)

2

COC, overview

3

4

5

6

VTE risk and Estrogenicity of a COC

Sex hormone binding globulin

Non-user



VTE relative risk:

3.7 vte/10,000 wy

Progestin alone
(e.g. POP)

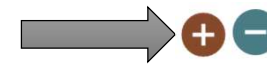


0.64 (0.29 to 1.42)

Ethinylestradiol

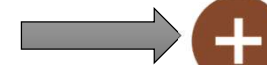


Androgenic
progestin (e.g. LNG)



2.19 (1.74 to 2.75)

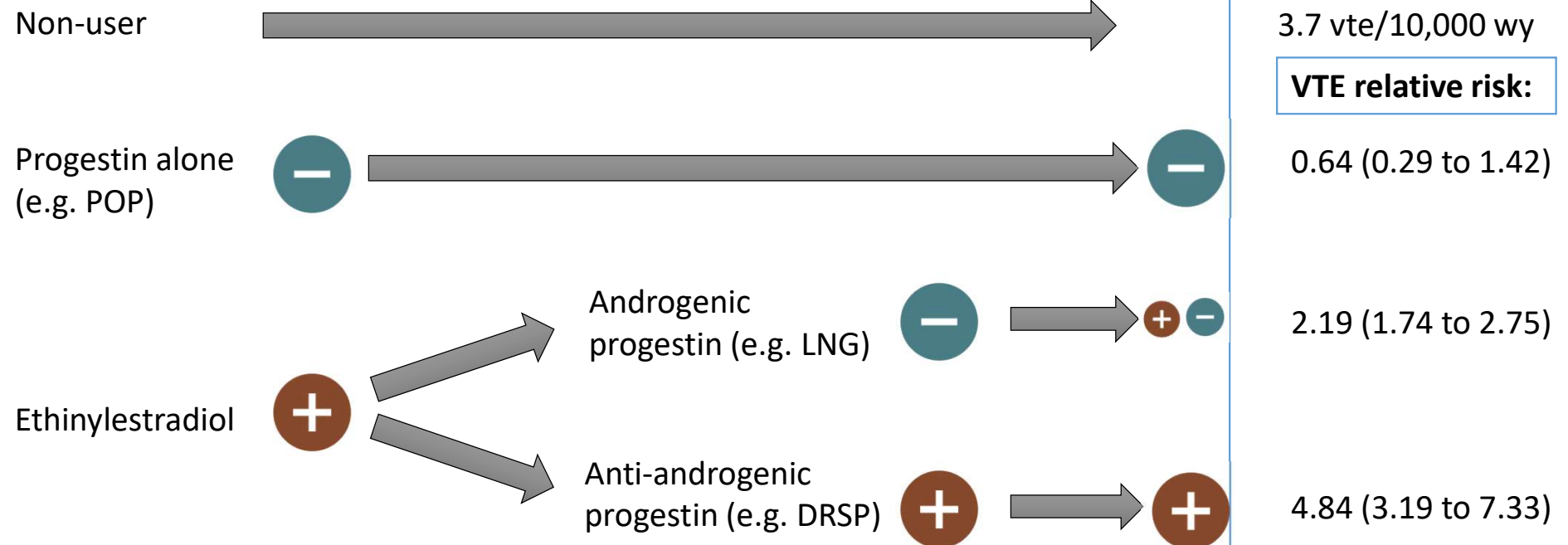
Anti-androgenic
progestin (e.g. DRSP)



4.84 (3.19 to 7.33)

VTE risk and Estrogenicity of a COC

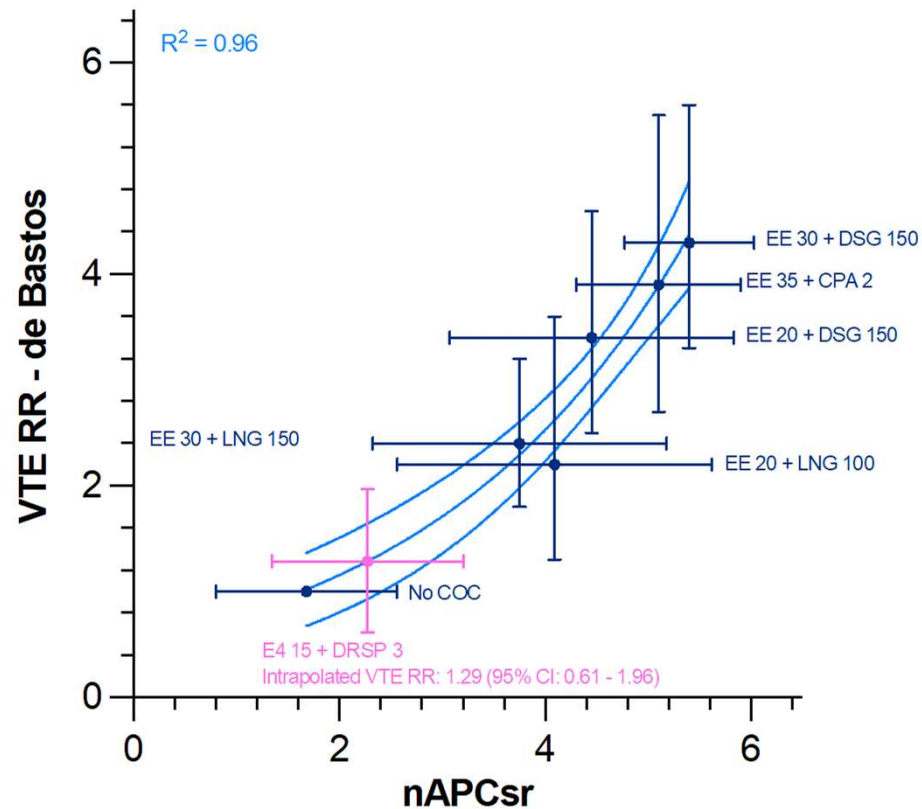
Sex hormone binding globulin



SHBG:

- Hepatic production proportional to the estrogenicity
- Suggested as surrogate marker of the VTE risk

The ETP-based APC resistance assay



Douxfls J, Klipping C, Duijkers I. Contraception. 2020 | Morimont, L., Dogné J-M., and Douxfls J. Thrombosis Research 2020 | E4: Estetrol 15 mg | E4/DRSP: Estetrol 15 mg/drospirenone 3 mg | EE/LNG: ethinylestradiol 30 µg/ levonorgestrel 150 µg | EE/DRSP: ethinylestradiol 20 µg/ DRSP 3 mg | APC: activated protein C APCr: activated protein C resistance | HPP: healthy pooled plasma | nAPCsr: normalized activated protein C sensitivity ratio | COC: combined oral contraceptive | ETP: endogenous thrombin potential

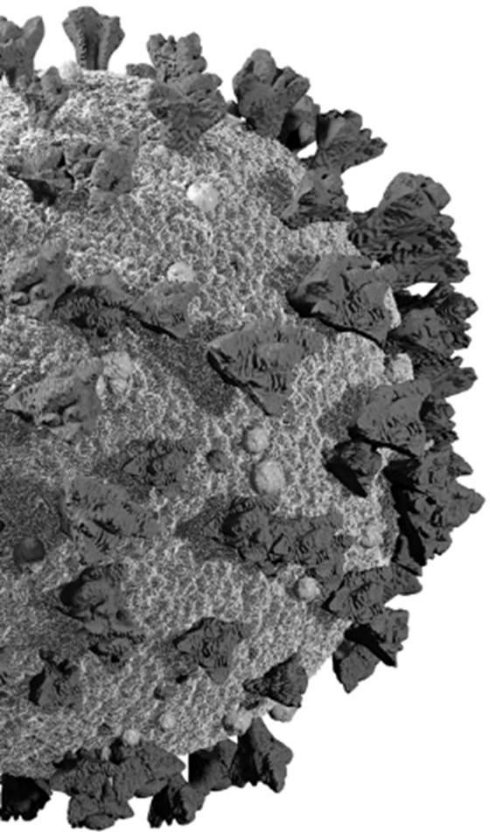
Venous thromboembolic (VTE) risk – EU/RUS Phase 3

Contraceptive	EE 10 µg/ NETA 1 mg ³	EE 13 µg/ SGA 150 µg ⁴	EE 30 µg/ LNG 120 µg ⁵	E4 15 mg/ DRSP 3 mg ²	E4 15 mg/ DRSP 3 mg ¹
Type of contraceptive	COC	Vaginal ring	Patch	COC	COC
Country	US	US	US	US/CAN	EU/RUS
Number of subjects	1,683	1,188	2,031	1,524	1,553
• BMI > 30 kg/m ²	18%	Unknown (mean BMI 24.4 kg/m ²)	35%	23%	13%
• VTE cases	3 (0.18%)	4 (0.34%)	4 (0.20%)	0	1 (0.06%)

Large phase 4 studies needed to confirm the phase 2 and 3 findings that suggest E4/DRSP use is associated with low clinical thrombosis risk

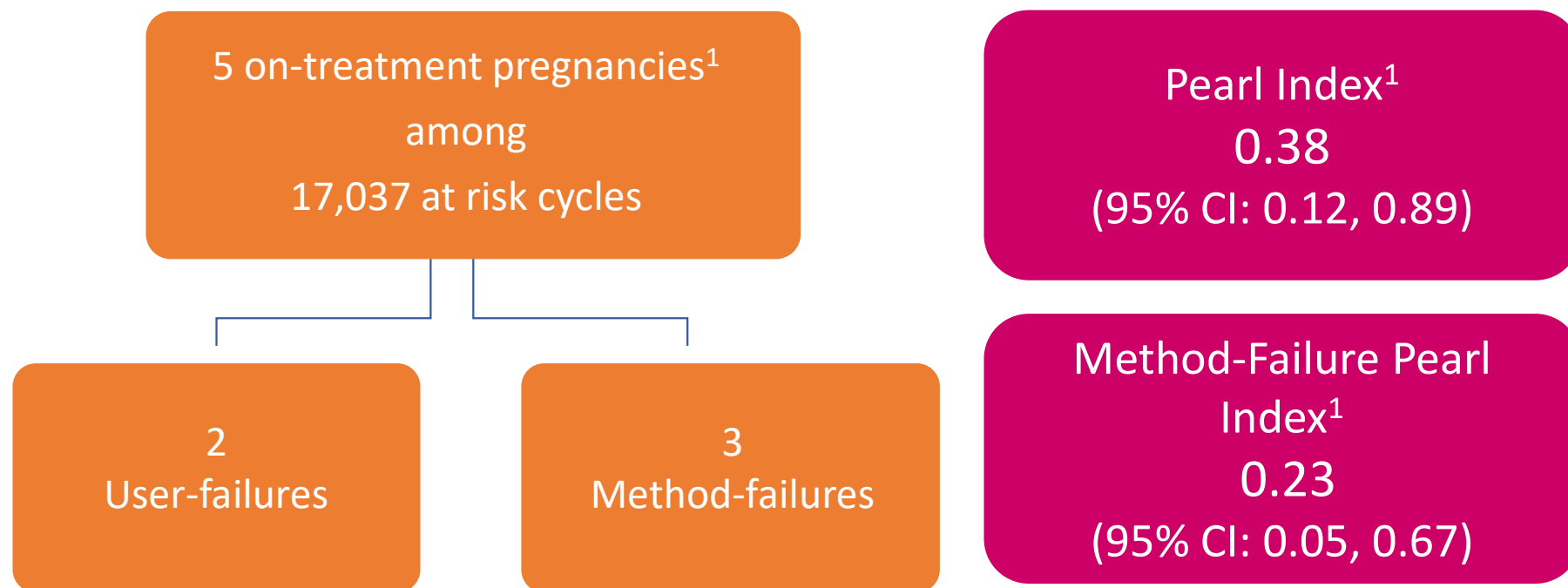
¹Gemzell Danielsson et al., BJOG 2021 | ²Creinin et al., Contraception 2021 | ³Archer et al., Obstet Gynecol.2013 | ⁴Gemzell Danielsson et al., Contraception 2019 | ⁵Nelson et al., Contraception 2021

Hemostasis in Covid-19 patients



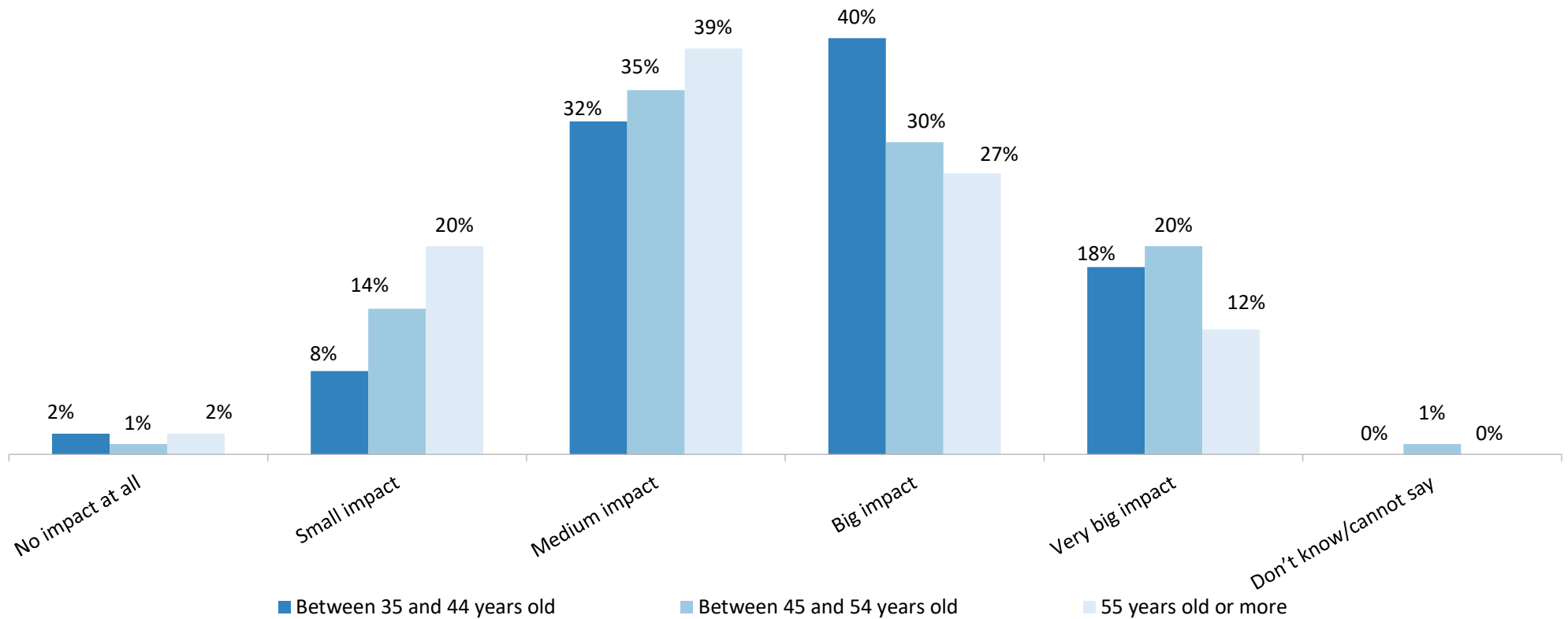
- Would you administer Estrogens to aged patients (60-85 years old) with diabetes, hypertension, CHD, and acute DVT and PE?
- We administered 15 mg E4/d for 21 days to such a high risk population of covid patients with severe comorbidities and in a few ongoing DVT.
- No clinical nor haemostatic changes versus placebo were observed !

Pearl Index (18–50 years) – EU/RUS



¹No other methods of birth control used
(EMA definition)

...and impacts Women's QoL across all age groups



Source: Berenberg . Q6: How much of an impact have these symptoms on your daily life? BASE: (Between 35 and 44 years old: N = 176; Between 45 and 54 years old: N = 742; 55 years old or more: N = 1082)

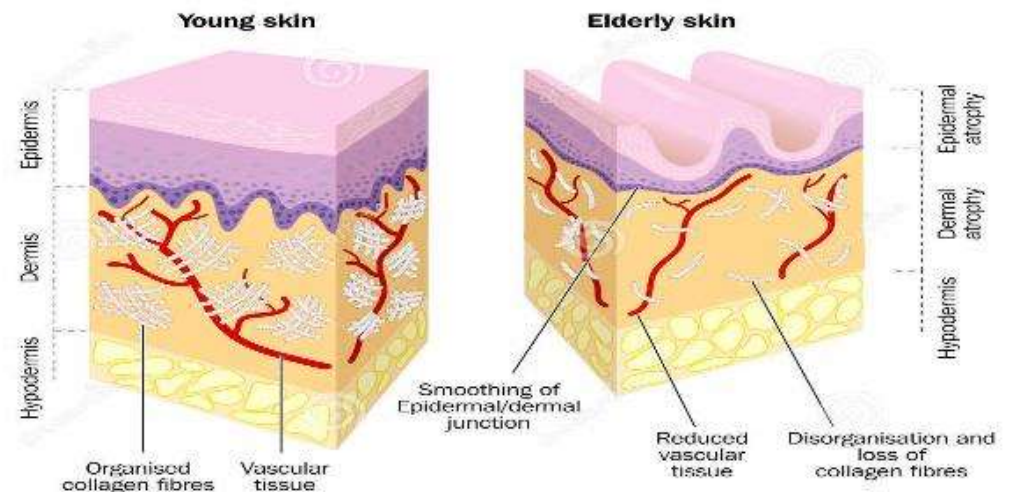
ENTRACTE

Postmenopausal estrogen-deficiency is associated with a dramatic reduction in skin health

HT slows down this aging process but requires a chronic treatment



Biological aging is the skin's process of aging after menopause. It becomes more lax in tone, the expression lines become deeper from muscles moving the same underneath the skin over many years, the skin becomes more dry and there is a generalized overall thinning.



Decreased estrogen slows down mitotic activity in the epidermal basal layer, reduces the synthesis of collagen elastin and proteoglycans. Skin atrophy, hyperseborrhea, increased pilosity on the cheeks and upper lip, loss of scalp hair, increase in degeneration of elastic tissue, atrophy and dryness of the vaginal mucosa are all features of menopause-related aging.

Acceleration of wound healing

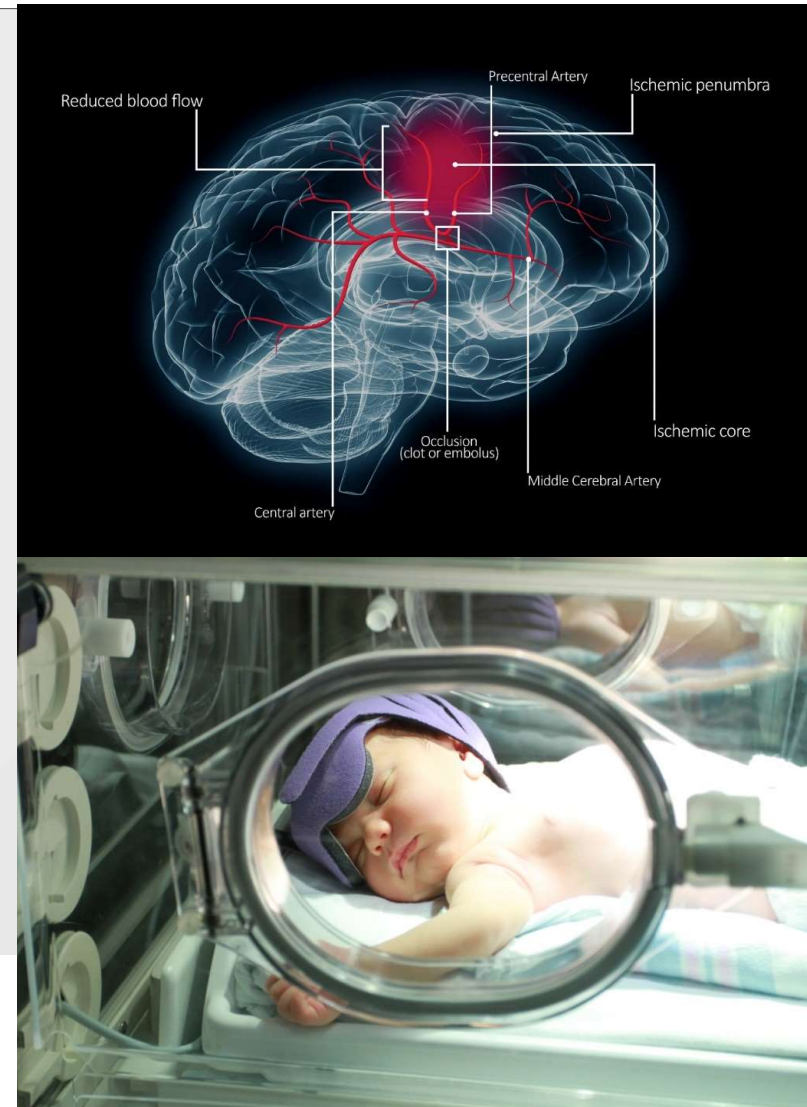
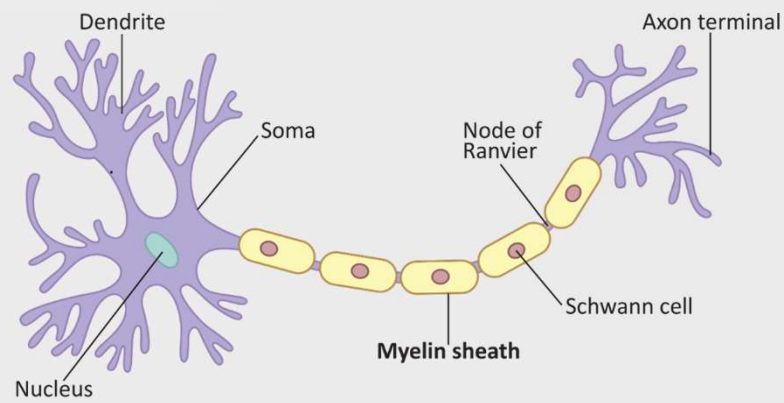
Burn
Ulceration



War Wound



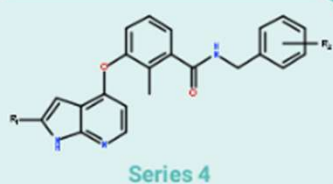
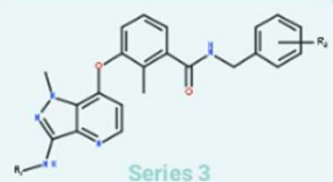
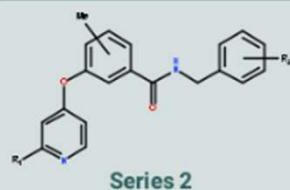
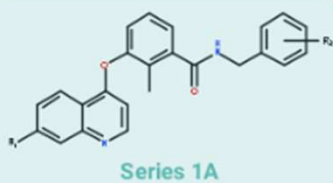
Neuroprotection



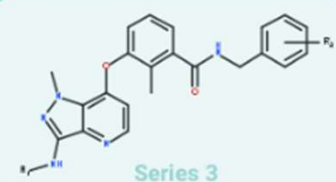
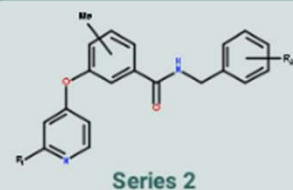
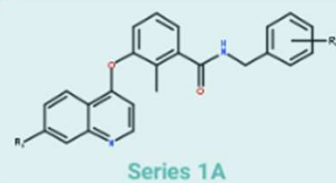




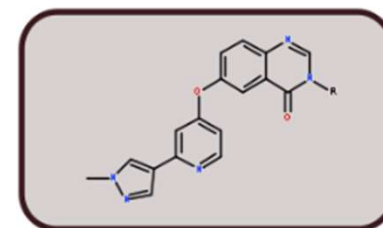
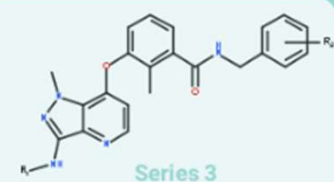
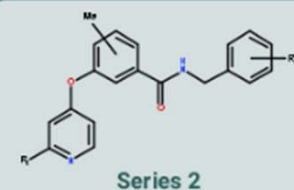
CSF1R
inhibitors



CSF1R/PDGFR
inhibitors

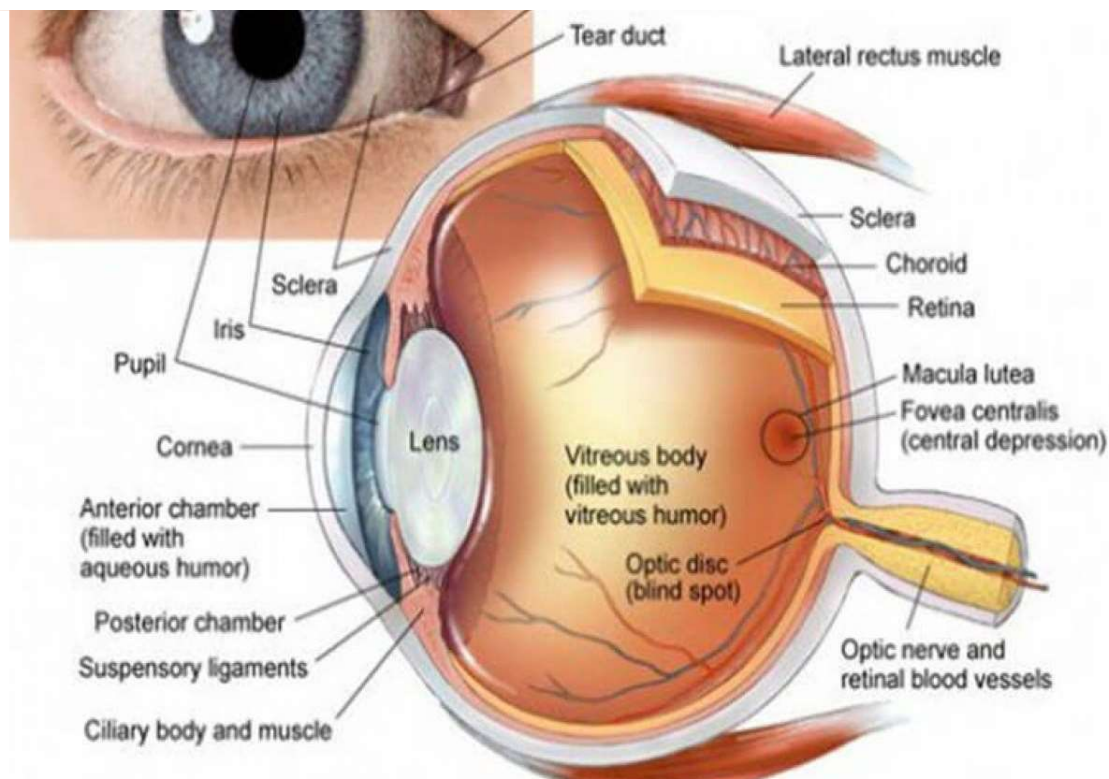


PDGFR
inhibitors



E4, major breakthrough in science, at the heart of multiple academic collaborations





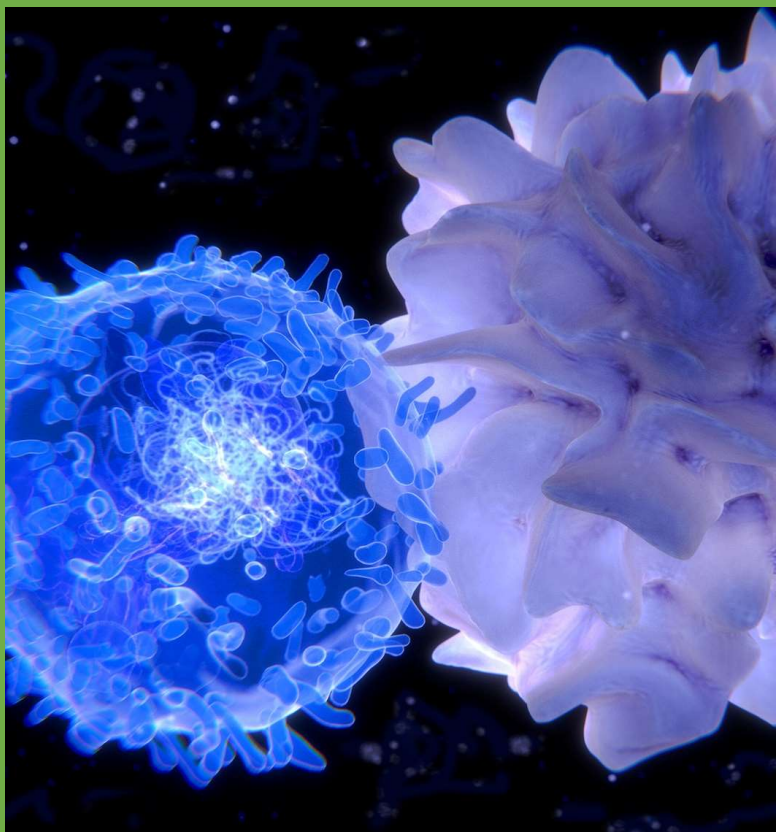
Implant intra-oculaire EYED- PHARMA



Eyed Pharma

Imcyse 2014-2023





Imotopes™



to prevent, stop and
potentially cure
autoimmune diseases



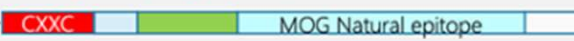
Epitopes modifiés

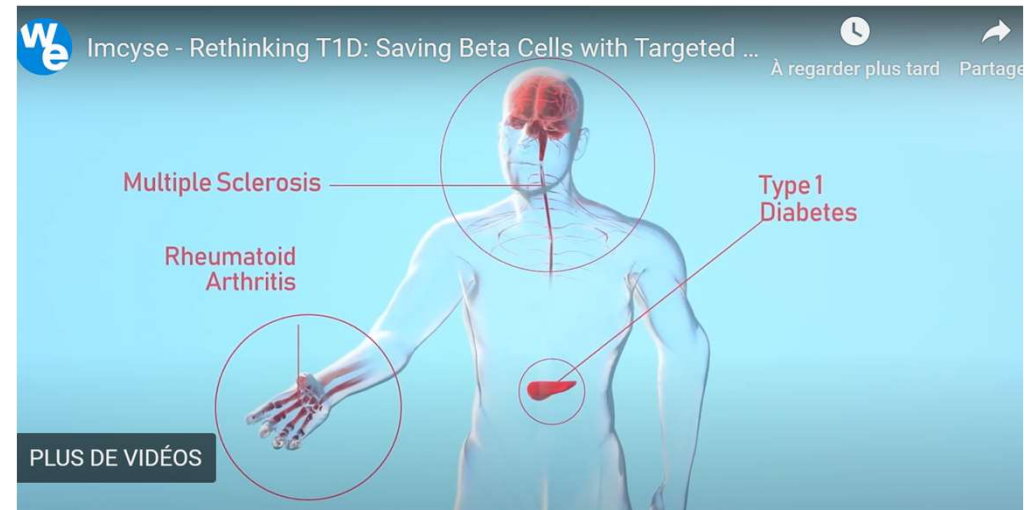
- Thioredox motif
- Activity-stabilizing aa residues
- N-term flanking region
- C-term flanking region

Natural peptide (HLA Class II epitope) (= WT peptide)

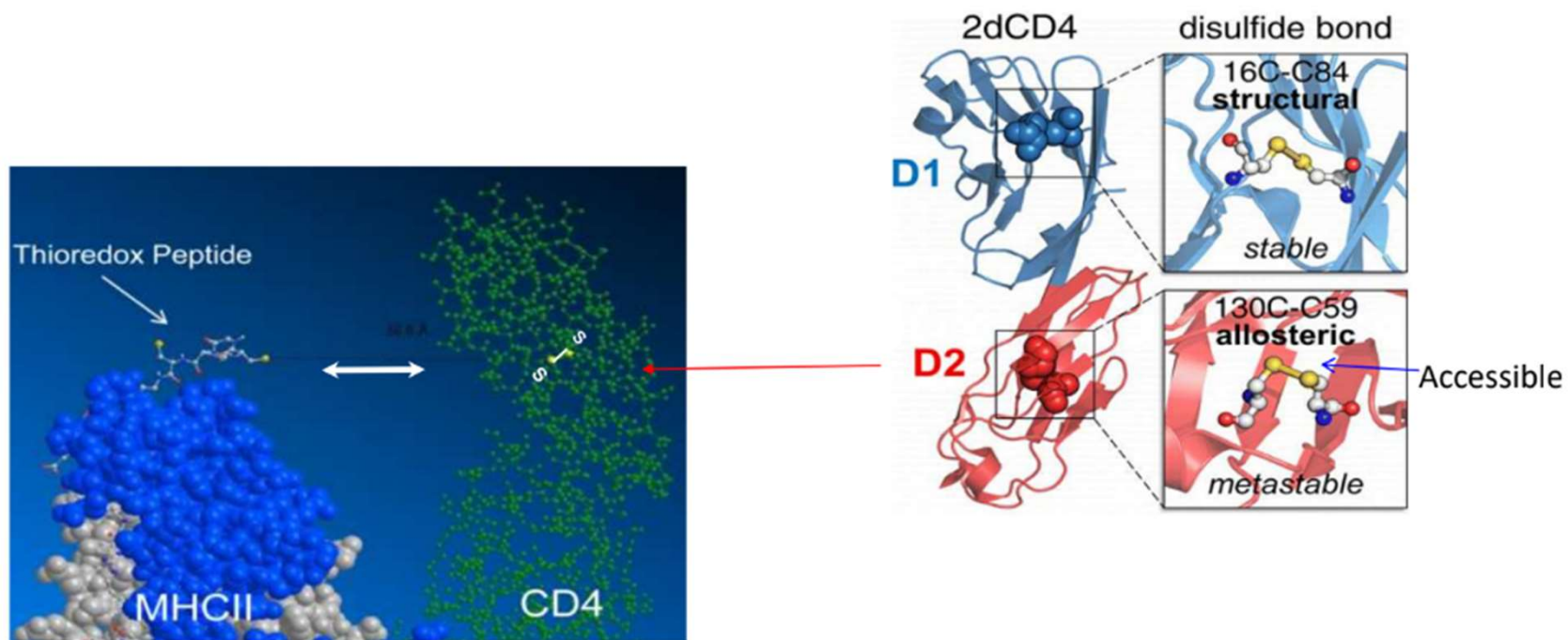
N--C

Imotope™ (CC peptide)

N--C
20-25 amino acids



Impact of an Imotope on CD4 molecule ?





Denis Bedoret former CEO of MasterCells





EXO Biologics

Discovering the power of exosomes

Company Presentation – Dec 2022

Exosomes or “extracellular vesicles” are inter-cells messengers produced by all cells

Our Mission

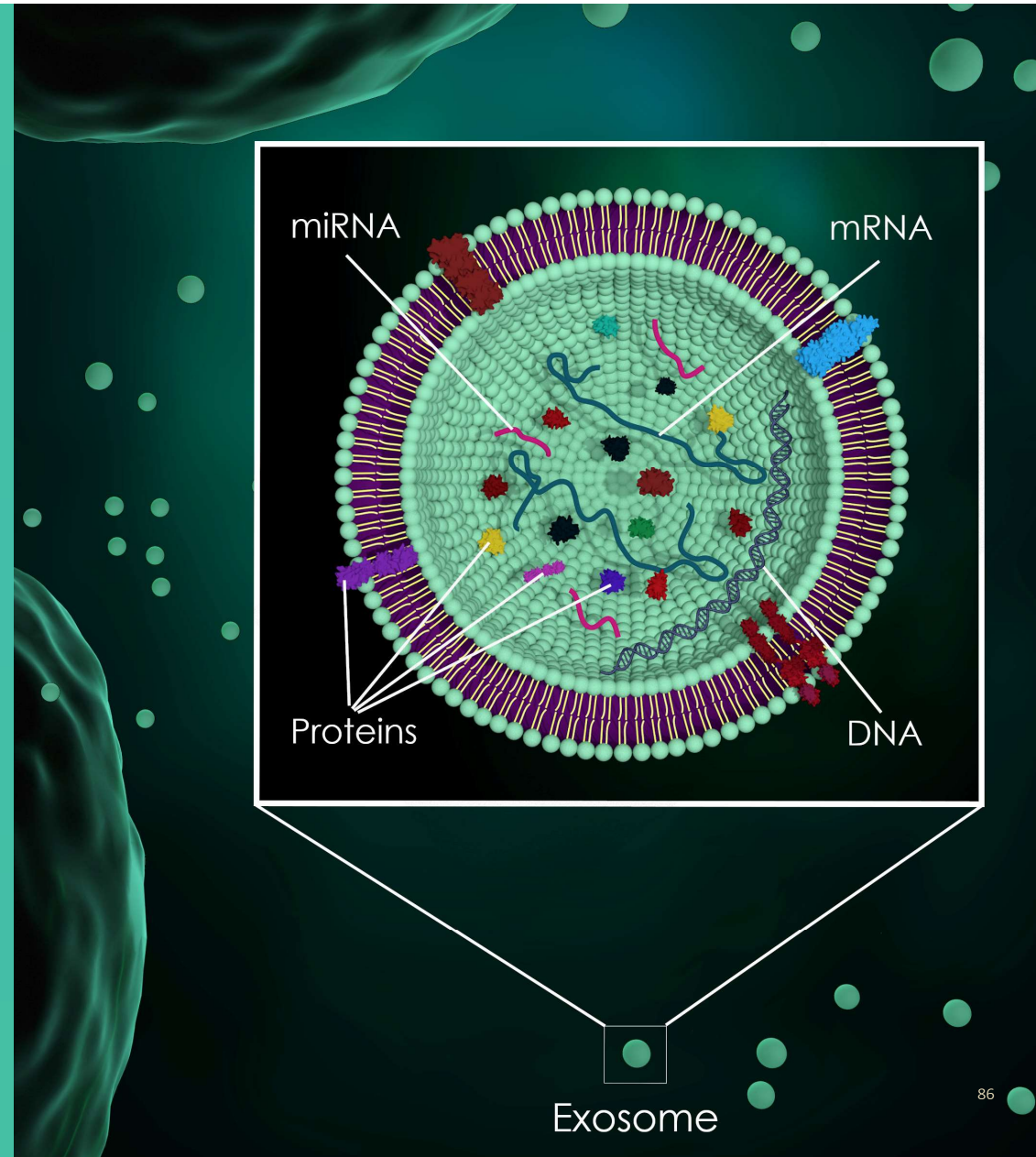
Provide innovative exosomes
therapies for unmet medical needs

EXTENSIVE EXOSOMES EXPERIENCE (12 YEARS)

EARLY MOVER, CLINICAL STAGE

PLATFORM TECHNOLOGY

DEDICATED MANUFACTURING SITE

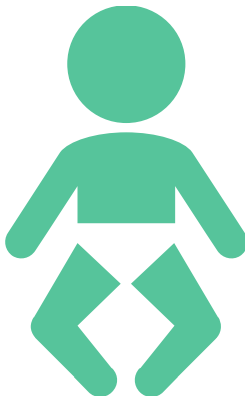


1- Multifactorial disease - Bronchopulmonary dysplasia

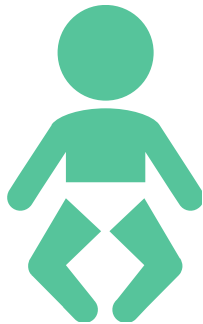
High medical need

A chronic lung disease caused by **damage to the delicate tissue of the lung**

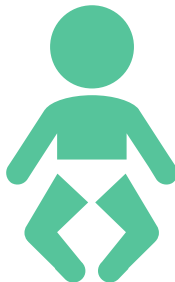
8 million
US & EU newborns



800K
Born premature



80K
Extremely preterm



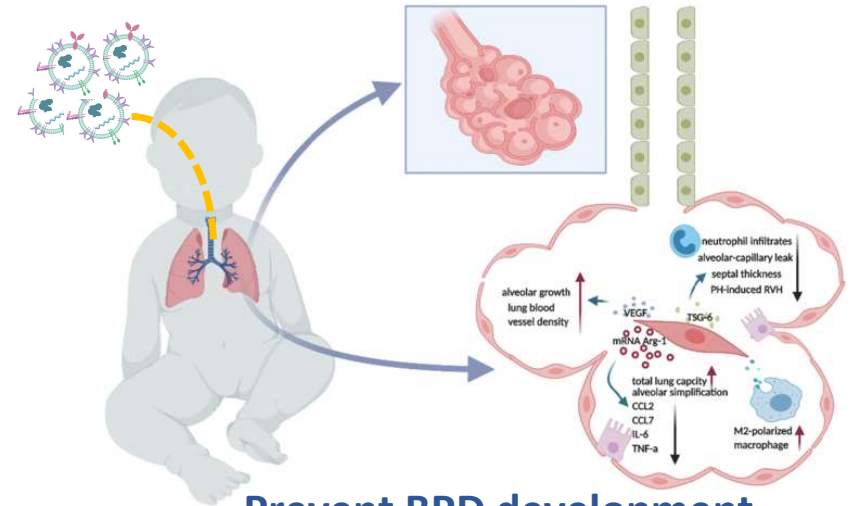
**40% of newborns
develop BPD**

**Yearly Cost due to BPD
in US & EU- 12 billion \$**



1. Airway Therapeutics; 2. World Health Organization; 3. Health Care and Societal Costs of Bronchopulmonary Dysplasia; 4. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5819643/>; 5. https://adc.bmj.com/content/93/Suppl_2/pw100

© 2022 Exo Biologics



Prevent BPD development
Via multiple anti-inflammatory pathways



EXO yearly net sales revenue
800M \$

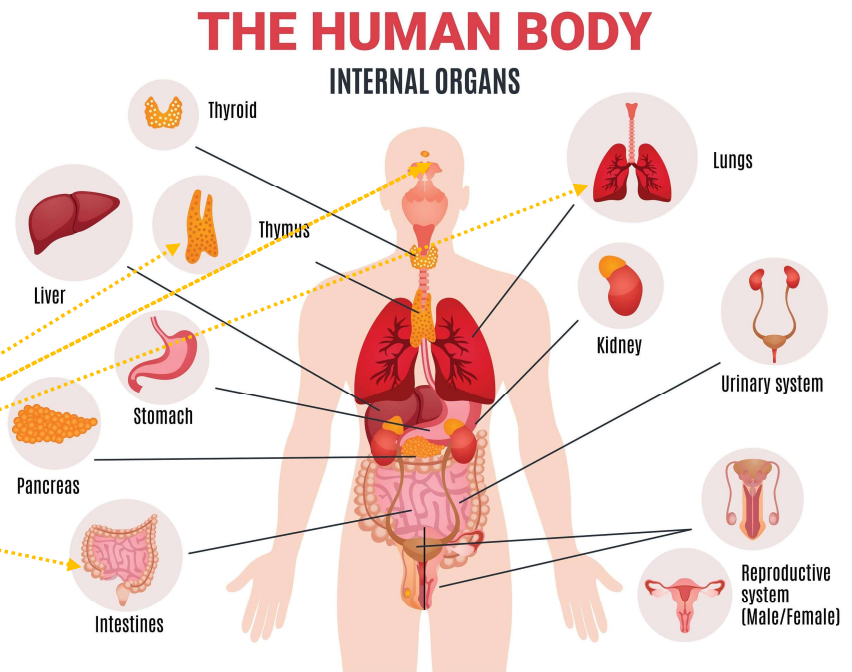
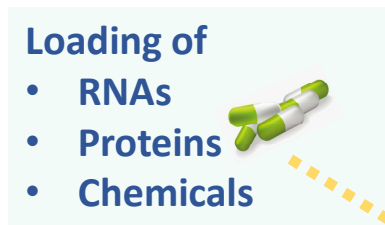
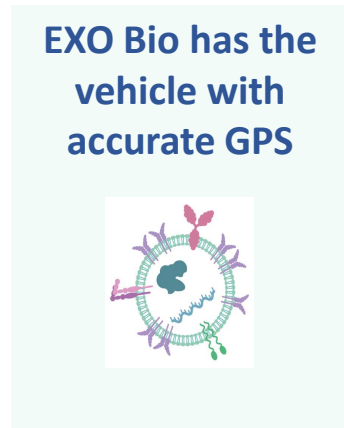
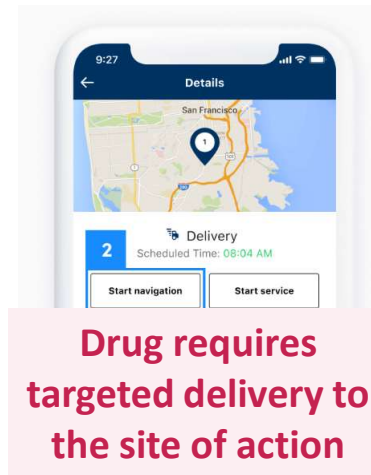
3- Contract Dev & Manufacturing

GMP “State of the art” Exosomes Manufacturing Facilities



- Based in LegiaPark (Liège, Belgium)
- Surface - 1500 m²
- GMP qualification expected by Q4 2023
- Go-to site for Exosomes manufacturing
- Fully dedicated exosomes environment

2- Drug Loading and Targeted Delivery



EXOSOMES as targeted drug delivery carriers



Major recent deals with large pharma up to 1B\$ milestones payment in this TOP field

Conclusions

La recherche fondamentale est nécessaire et essentielle aux progrès des connaissances. Il faut l'encourager



La recherche appliquée doit s'appuyer sur les connaissances nouvelles et valoriser les acquis des nouvelles technologies en partenariat avec les universités.



Le développement est affaire de science mais aussi de business et l'universitaire doit rester un scientifique et pas un businessman. Le chercheur ne doit pas être entrepreneur et vice-versa.



Les partenariats universités-industrie doivent être professionnalisés et la Wallonie doit créer son WIB à l'image du VIB



Verviétôis agissez !!!

