



September 2020

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**CORPORATE REVIEW**

# Systems-Based Approaches to Regulate Immune Response



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This presentation and various remarks which may be made during this presentation contain forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995 and Section 21E of the Securities Exchange Act of 1934, as amended, including statements regarding Aldeyra's possible or assumed future results of operations, expenses and financing needs, business strategies and plans, research and development plans or expectations, political, economic, legal, social and health risks, including the recent COVID-19 outbreak and subsequent public health measures and other responses to it, that may affect Aldeyra's business or the global economy, the structure, timing and success of Aldeyra's planned or pending clinical trials, expected milestones, market sizing, pricing and reimbursement, competitive position, regulatory matters, industry environment and potential growth opportunities, among other things. The results of earlier preclinical or clinical trials may not be predictive of future results. As a result of the COVID-19 pandemic, clinical site availability, staffing, and patient recruitment have been negatively affected and the timelines to complete Aldeyra's clinical trials may be delayed. Forward-looking statements include all statements that are not historical facts and, in some cases, can be identified by terms such as "may," "might," "will," "objective," "intend," "should," "could," "can," "would," "expect," "believe," "anticipate," "project," "target," "design," "estimate," "predict," "potential," "plan" or similar expressions and the negatives of those terms.

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# Immunology is a Key Component of Many Diseases

~7%  
Of Western Society

Suffer from some form of **immune-mediated disease**, and **incidence is increasing**

- Dry Eye Disease
- Psoriasis
- Asthma
- Lupus
- Allergy
- Respiratory Distress
- Inflammatory Bowel Disease
- Alzheimer's
- ... Etc. ...

Unmet Needs

Disease control elusive despite existing therapies, and thus **novel approaches are needed**

*Inflammation:  
A Unifying Theory of Disease?*  
Harvard Health Letter  
April, 2006

# Aldeyra is Developing Technology Designed to Modulate Biological *Systems* ... Not Single Targets

Traditional



Most immunological drugs shut down **specific molecules**, obstructing the immune system, and leading to toxicity.

*The traditional approach is limited to two outcomes.*

In contrast, **modulation** of the immune **system** maintains immune function, but allows for lower levels of inflammation.

*A systems-based approach allows for infinite control.*

Systems-Based



# Aldeyra is Developing Novel Approaches for Immune System Regulation

RASP



Reproxalap  
ADX-629

Immune Cell Migration  
Cytokine Production  
Fibroblast Activation

Dihydrofolate  
Reductase



ADX-2191

Immune Cell Proliferation  
Fibroblast Activation  
Macrophage Activation

Protein  
Chaperome

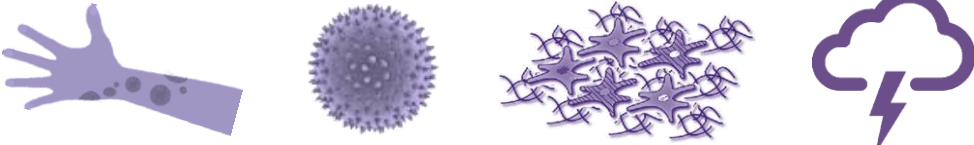


ADX-1612

Immune Cell Proliferation  
Antibody Formation  
Viral Replication

## Immune Mediated Diseases:

Autoimmune Disease, Allergy, Fibrosis, Cytokine Release Syndrome



# Innovative Pipeline Addressing Immunological Disease

Disease Area	Compound	Mechanism	Indication	Preclinical	Phase 1	Phase 2	Phase 3
Ocular Diseases	Reproxalap	RASP	Dry Eye Disease	[Progress bar]			
			Allergic Conjunctivitis	[Progress bar]			
	ADX-2191	DHFR	Proliferative Vitreoretinopathy	[Progress bar]			
			Primary Vitreoretinal Lymphoma	[Progress bar]			
	ADX-103/10X	RASP	Retinal Disease	[Progress bar]			
Systemic Diseases	ADX-1612	CHP	Ovarian Cancer	[Progress bar] <i>Investigator-Sponsored Trial</i>			
			SARS-CoV2 Antiviral (COVID-19)	[Progress bar]			
	ADX-629	RASP	Cytokine Release Syndrome (COVID-19)	[Progress bar]			
			Autoimmune Disease (Psoriasis)	[Progress bar]			
			Allergy (Atopic Asthma)	[Progress bar]			



RASP Mechanism = Reactive Aldehyde Species Inhibitor  
 DHFR Mechanism = Dihydrofolate Reductase Inhibitor  
 CHP Mechanism = Chaperome Inhibitor



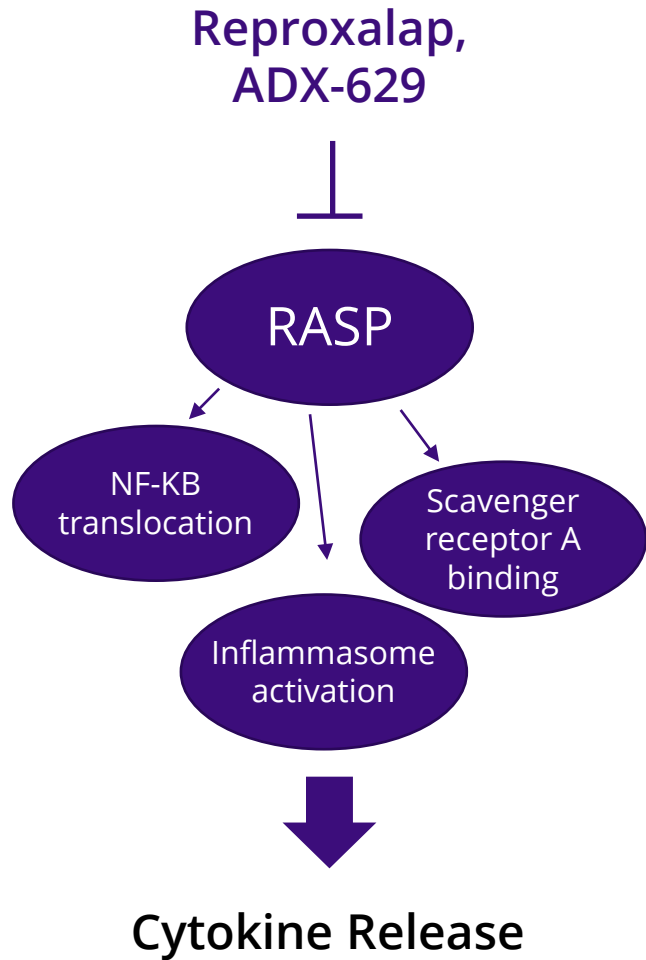
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# Reactive Aldehyde Species (RASP) Inhibition

# RASP Inhibition is a Pre-Cytokine, Systems-Based Approach that Has Been Clinically Validated in Late-Stage Trials

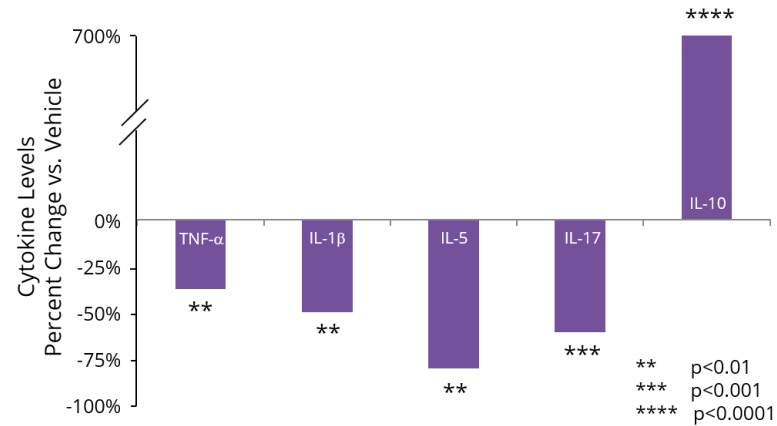


## Preclinical broad-based cytokine reduction



## Broad-based symptom reduction

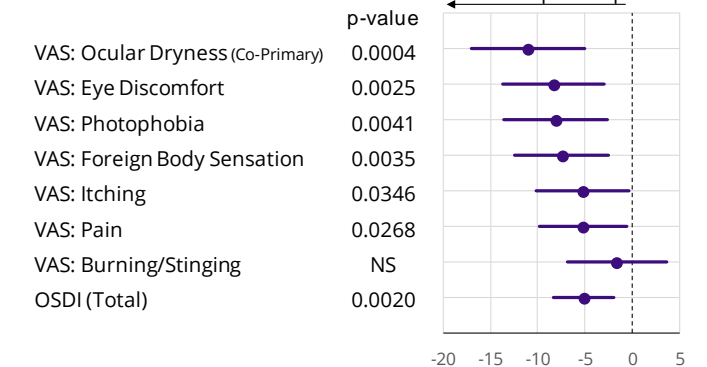
LPS Animal Model of Cytokine Storm



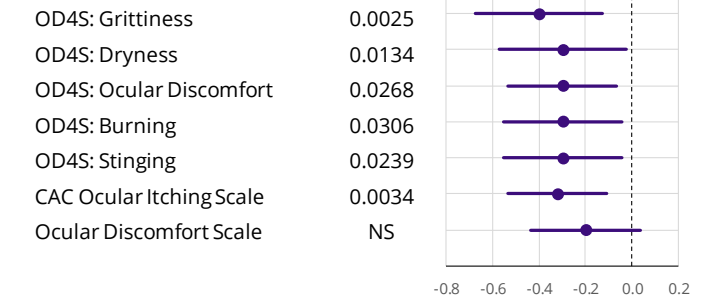
## RENEW-Part 1 Phase 3 Dry Eye Disease Trial

Symptom Treatment Difference\* (Reproxalap-Vehicle) Over Weeks 2 to 12

0-100 Ocular Symptom Scales



0-4 & 0-5 Ocular Symptom Scales



\*Treatment Difference of induction-maintenance dosing, defined as the difference between the changes from baseline for the evaluated drug vs. vehicle (LS Mean Difference ± 95% CI). Ocular Dryness Score co-primary endpoint assessed in pre-specified patient population having an OD4S dryness baseline score of ≥ 3 (N=170).  
 Source: Cullen et. al., J. of Allergy and Clinical Immunology, Volume 135, Issue 2, AB384, Feb 2015; Reproxalap RENEW-Part 1 clinical trial results.

RASP = Reactive Aldehyde Species  
 VAS = Visual Analog Scale  
 OSDI = Ocular Surface Disease Index

NS = Not Significant  
 OD4S = Ocular Discomfort & 4-Symptom  
 CAC = Conjunctival Allergen Challenge



# Lead RASP Inhibitor Reproxalap, a Novel Topical Ocular Drug, Now in Two Phase 3 Programs for Ocular Inflammation

## Dry Eye Disease



Often months to demonstrate even modest efficacy with current Rx

34 million or more adults in the U.S.

## Allergic Conjunctivitis



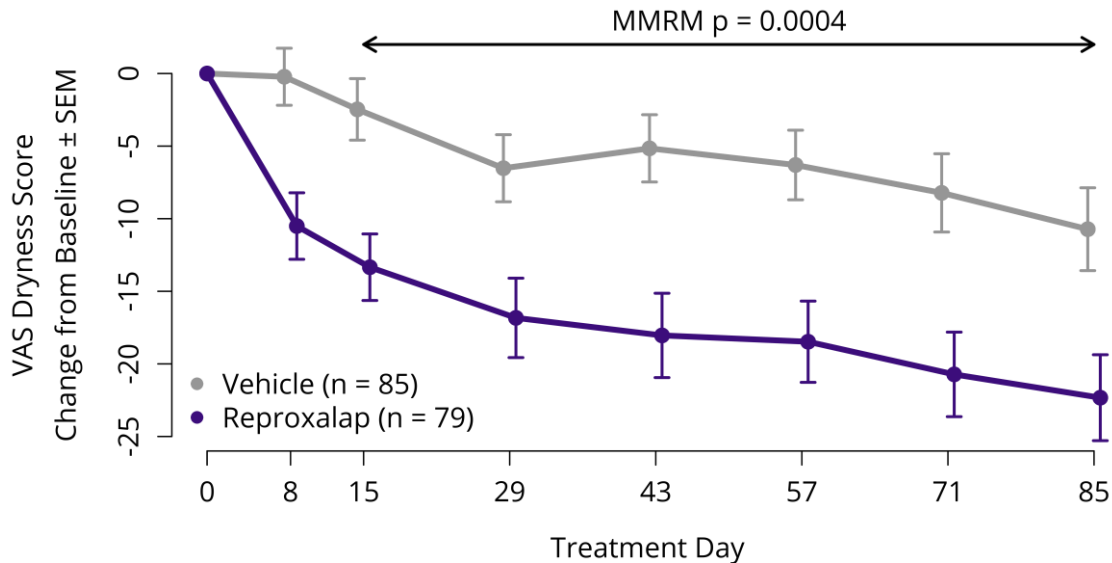
Unchecked growing disease burden and limited options beyond OTC/Rx antihistamines

66 million or more adults in the U.S.

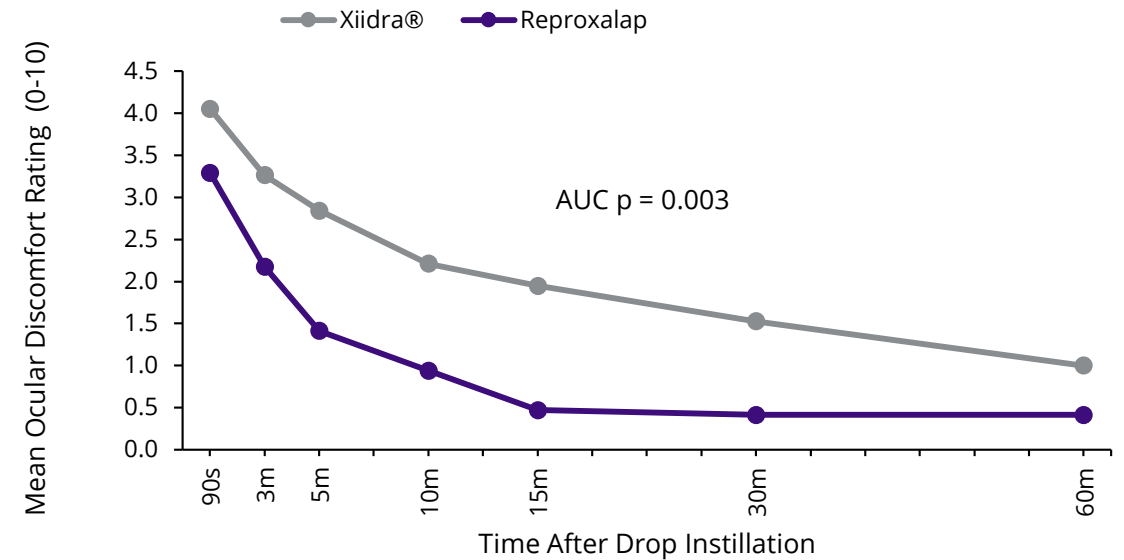
Reproxalap poised to potentially be the next novel entrant in the dry eye disease and allergic conjunctivitis markets.

# Reproxalap Exhibited First-Line Symptom Control and Tolerability in Dry Eye Disease Clinical Trials

## RENEW-Part 1 Phase 3 Trial (Induction-Maintenance Dosing)



## Head-to-Head Tolerability Trial vs. Xiidra®



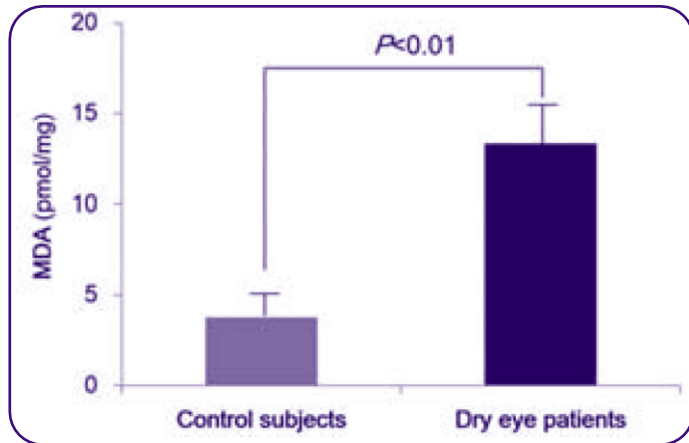
Topical ocular reproxalap has been studied in over 1,100 patients with no observed safety concerns; mild instillation site irritation is the most commonly reported adverse event in clinical trials.  
Source: Reproxalap RENEW-Part 1 and Drop Experience clinical trial results.

VAS = Visual Analog Scale  
MMRM = Mixed Effect Model Repeated Measures  
AUC = Area Under The Curve

# Reproxalap's Mechanism of Action Reduces RASP, a Novel Dry Eye Disease Sign

## RASP in Dry Eye Disease

- RASP markers are upregulated in dry eye disease.
- RASP levels have been shown to correlate with worsening symptoms and signs.

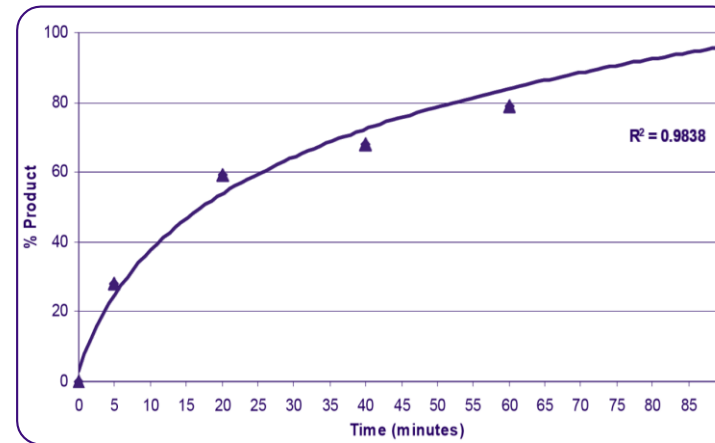


Source: Curr Eye Res. 2016, 41(9):1143-9

## Reproxalap

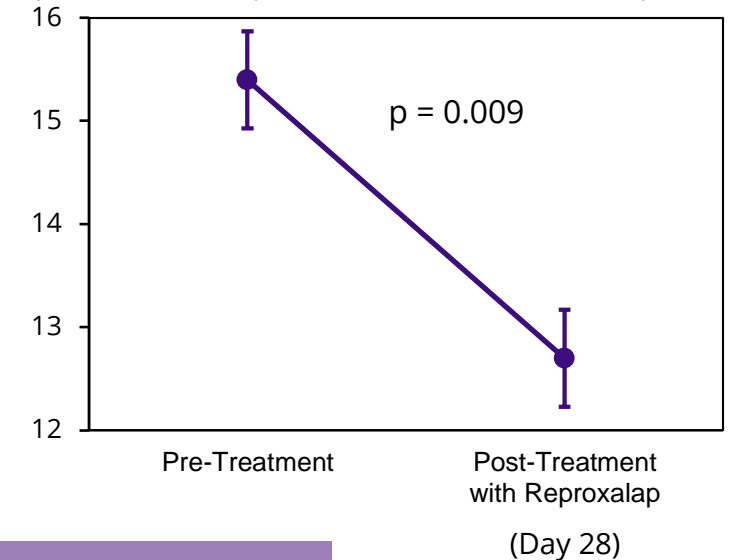
Preclinical rapid and complete RASP binding

In vitro Reproxalap-Malondialdehyde (MDA) adduct formation over time  
(% of MDA bound by reproxalap)



Clinical reduction in RASP adducts

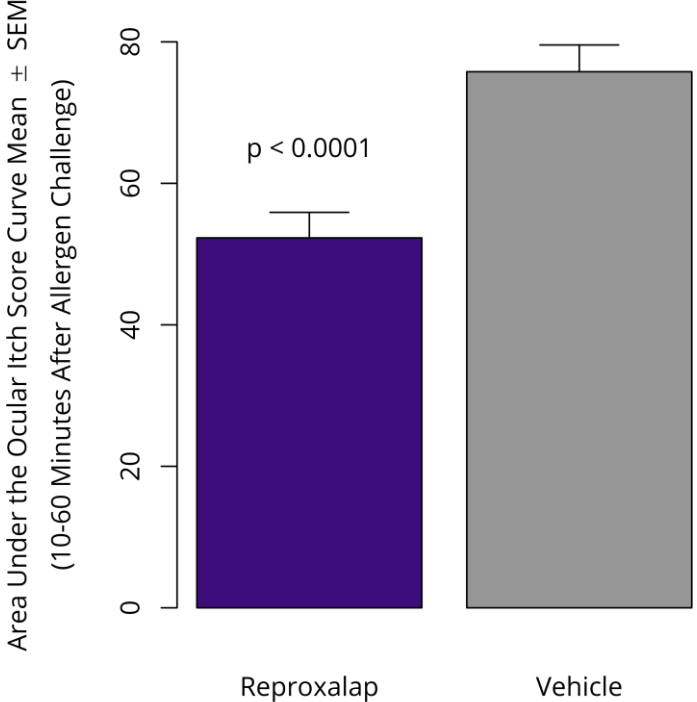
Phase 2a Tear RASP Levels in Dry Eye Disease Patients  
( $\mu$ M Malondialdehyde Adduct; Mean  $\pm$  Within-Subject SEM)



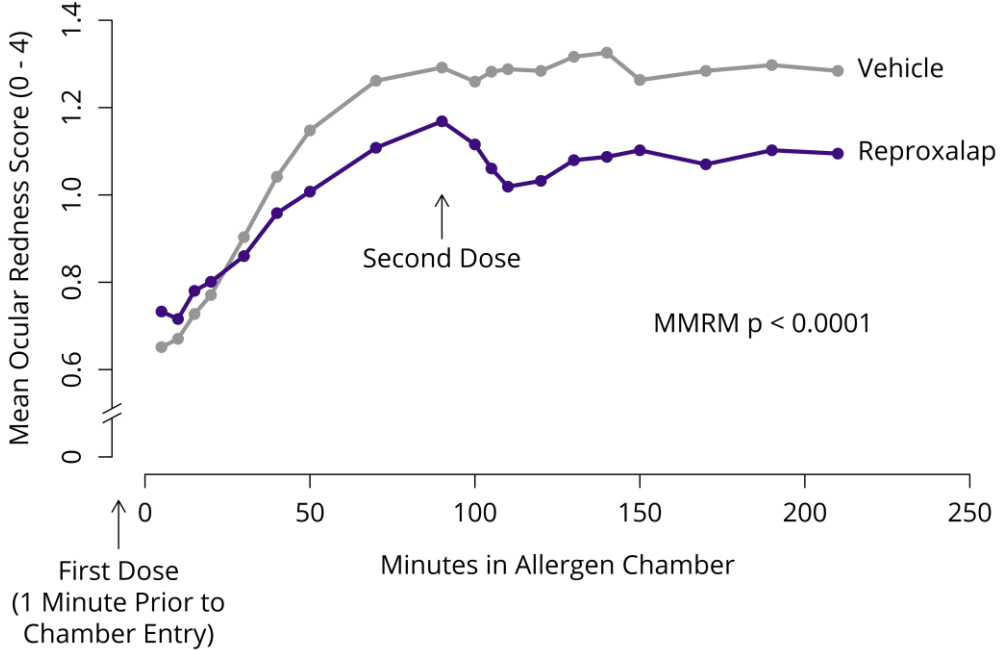
RASP is a novel and FDA-approvable dry eye disease sign.

# Reproxalap Reduced Itching and Redness in Late-Stage Clinical Trials for Allergic Conjunctivitis

## ALLEVIATE Phase 3 Trial



## Phase 2 Allergen Chamber Trial



Topical ocular reproxalap has been studied in over 1,100 patients with no observed safety concerns reported; mild instillation site irritation is the most commonly reported adverse event in clinical trials.

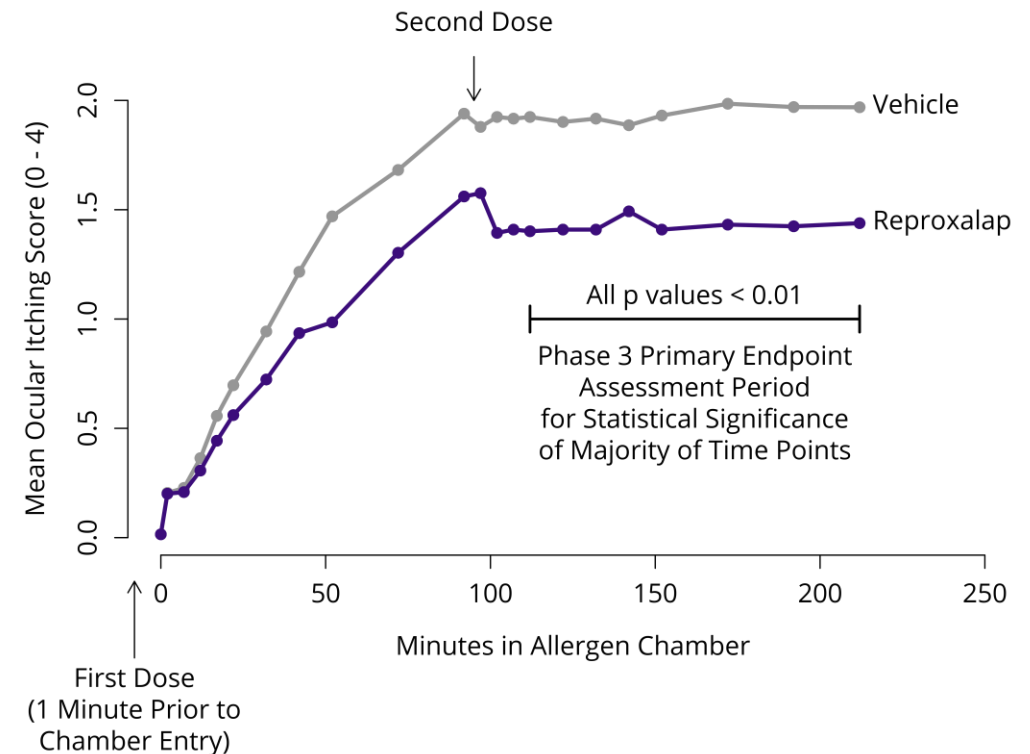
Source: Reproxalap ALLEVIATE Phase 3 and allergen chamber Phase 2 clinical trial results; Ocular itch scale (0-4); Ocular redness scale (0-4). MMRM = Mixed Effect Model Repeated Measures

# Results from the INVIGORATE Phase 3 Trial in Allergic Conjunctivitis Expected in H1 2021

- **Design:**
  - Two-way randomized crossover, ~100 patients total
- **Primary endpoint:**
  - Statistical significance in ocular itch (0-4 scale) at a majority of eleven time points between 110 and 210 minutes
- **Secondary endpoints:**
  - Investigator-assessed ocular redness score
  - Patient-reported ocular tearing score
  - Total ocular symptom score
- **Inclusion/exclusion criteria:**
  - History of moderate to severe allergic conjunctivitis to ragweed pollen
  - Itching score of  $\geq 2.5$  or redness score  $\geq 2$  in baseline chamber test
- **Chamber exposure and dosing schedule:**
  - 3.5 hours continuous allergen exposure
  - First dose 5 minutes before chamber entry
  - Second dose 90 minutes after entry (when non-treated patients reach peak allergy symptoms)



**Phase 2 Results Were Statistically Significant During Phase 3 Primary Endpoint Time Points\***

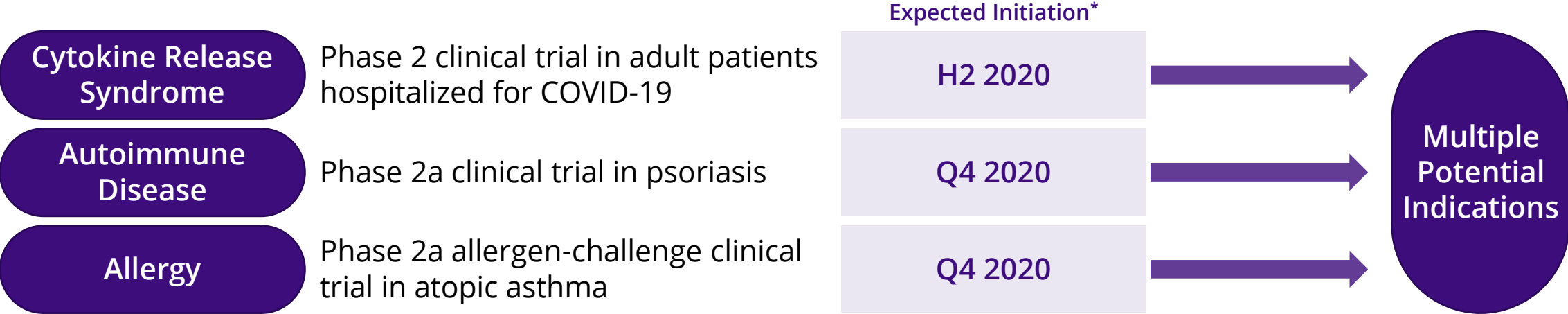


# ADX-629 Clinical Initiative in Systemic Inflammatory Disease Compliments Late-Stage Programs

- ADX-629 is a first-in-class orally available and irreversible covalent inhibitor of pro-inflammatory RASP, and potentially represents a new paradigm in the understanding and treatment of immune-mediated disease.
- Comprehensive systemic disease initiative designed to assess the activity of ADX-629 in three types of severe inflammation: cytokine release syndrome, autoimmune disease, and allergy.

## RASP-Inhibition in Systemic Diseases

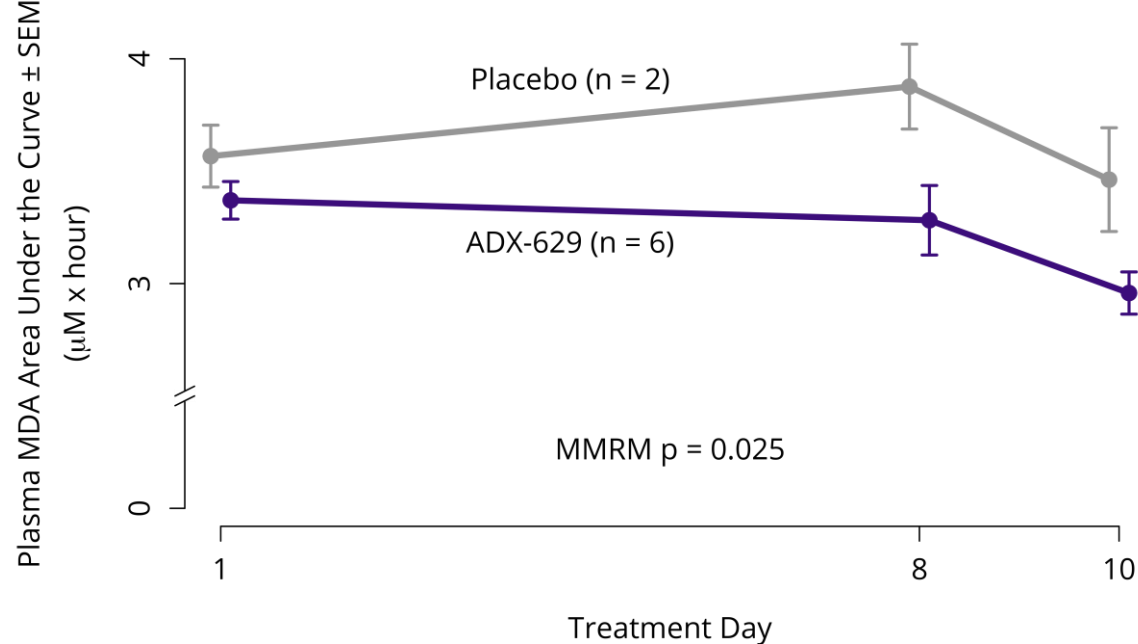
### ADX-629 Proof of Concept in Three Types of Severe Inflammation



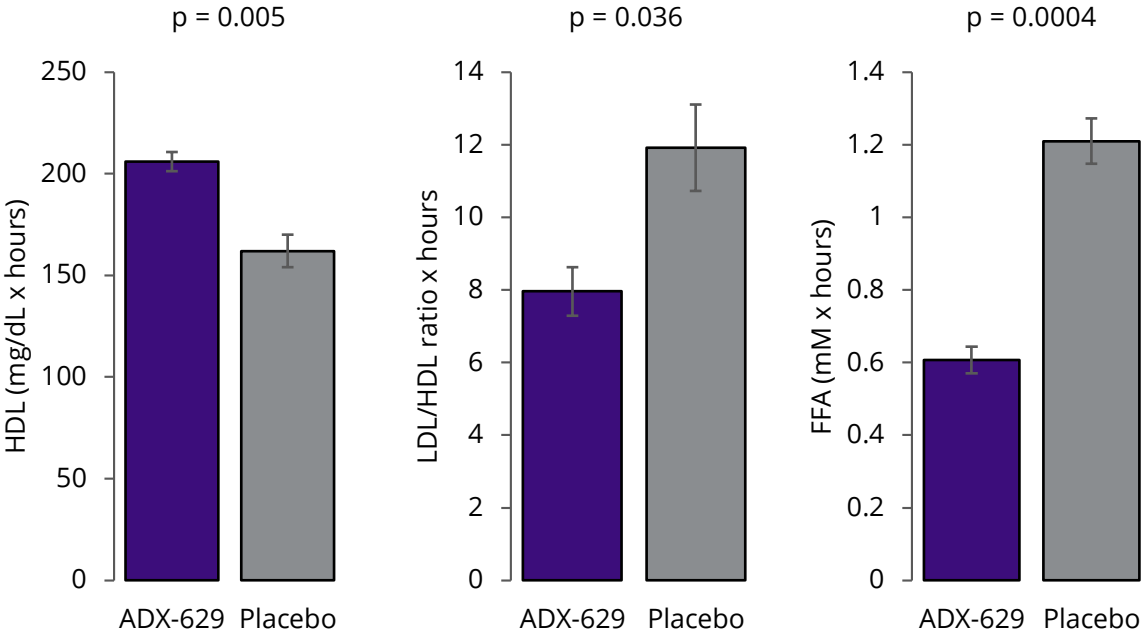
\*The timing of clinical trial initiation depends, in part, on restrictions related to COVID-19, the availability of clinical research facilities and staffing, and the ability to recruit patients.

# ADX-629 Reduced RASP vs. Placebo in Phase 1 Clinical Trial, Demonstrating Target Engagement, and Also Improved Lipid Profiles

MDA Levels Over Ten Days of Dosing









Plasma Lipid Profile After Fatty Meal



Area under the curve is over four hours post-dose; p-values subject to quality control analysis. Source: ADX-629 Phase 1 clinical trial results.

MDA = Malondialdehyde  
 MMRM = Mixed Model Repeated Measures  
 Day 10 = Food effect assessment  
 HDL = High-density lipoprotein  
 LDL = Low-density lipoprotein  
 FFA = Free fatty acids

# Upcoming Expected RASP Inhibition Development Milestones

-  Reproxalap dry eye disease **subsequent development plans update following June Type C FDA meeting final minutes July 2020**
-  Reproxalap dry eye disease **tear level RASP reduction clinical trial initiation H2 2020**
-  Reproxalap allergic conjunctivitis **INVIGORATE Phase 3 study results H1 2021**
-  ADX-629 **cytokine release syndrome Phase 2 clinical trial initiation** in COVID-19 associated respiratory compromise H2 2020\*
-  ADX-629 **autoimmune disease Phase 2a clinical trial initiation** in psoriasis Q4 2020\*
-  ADX-629 **allergy Phase 2a allergen-challenge clinical trial initiation** in atopic asthma Q4 2020\*





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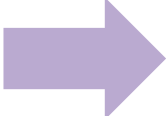
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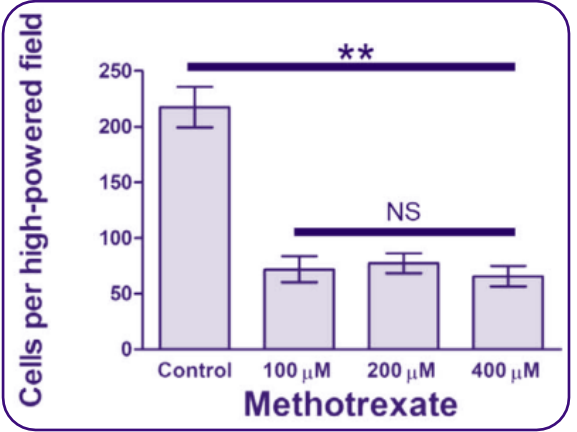
# Dihydrofolate Reductase Inhibition

# ADX-2191, a Novel Intravitreal Formulation of Methotrexate, Represents a Clinically Proven Systems Modulating Approach

Preclinical reduction in cellular proliferation

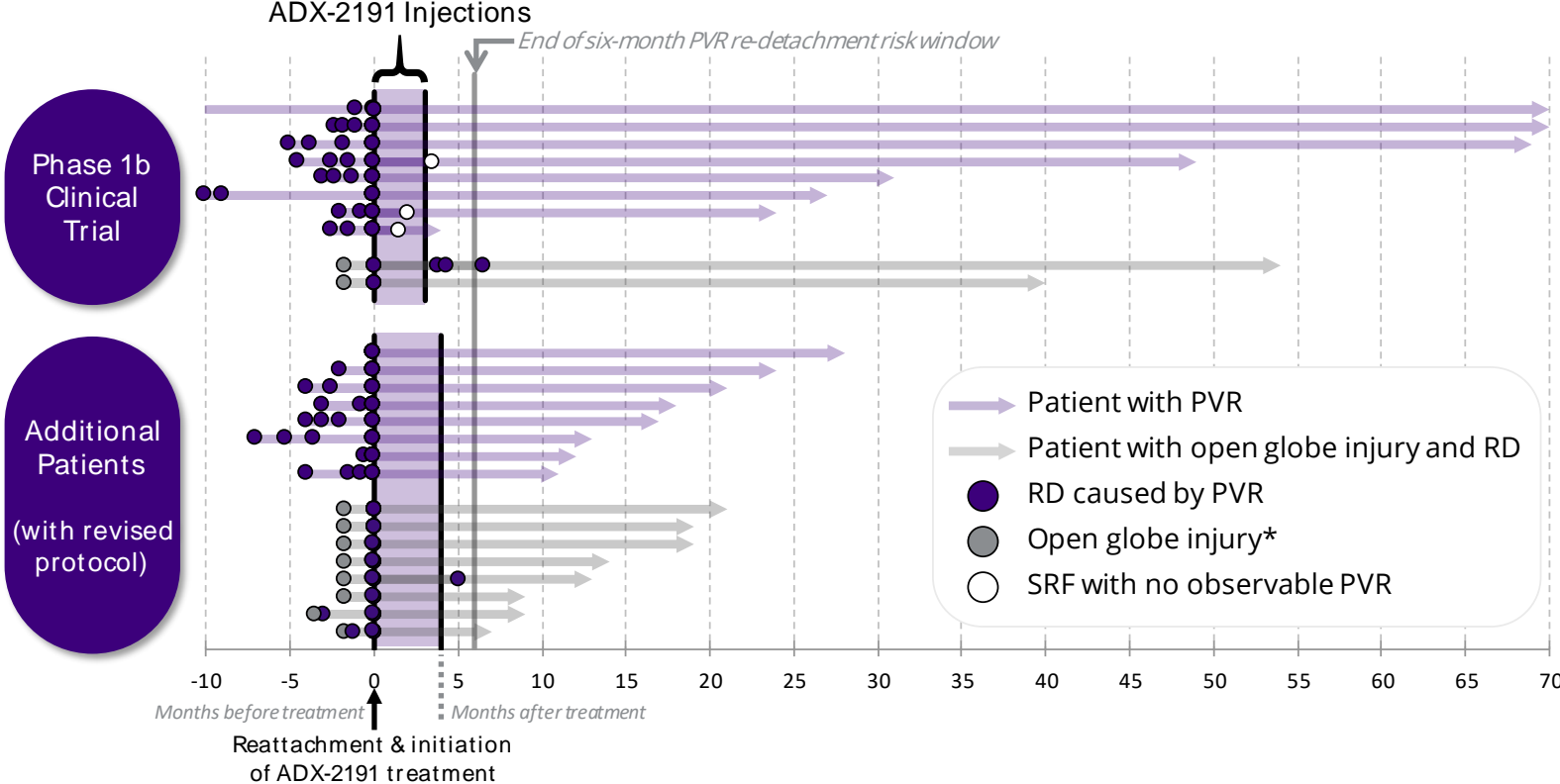


Clinical reduction in retinal detachment



Source: Invest Ophthalmol Vis. Sci. 2017; 58:3940-3949

Retinal Detachments Over Time by Patient



Phase 1b Clinical Trial

Additional Patients (with revised protocol)

- Patient with PVR
- Patient with open globe injury and RD
- RD caused by PVR
- Open globe injury\*
- SRF with no observable PVR



\*Timing of open globe injury as shown is estimated. Typically 6-8 weeks prior to reattachment & initiation of ADX-2191. There is no assurance that prior results, such as signals of safety, activity or durability of effect, observed from this open label investigator sponsored trial will be replicated in more rigorous clinical trials involving ADX-2191. Source: ADX-2191 PVR Phase 1b investigator sponsored clinical trial (n=10) results and additional in-practice use (n=16)

RD = Retinal detachment  
PVR = Proliferative vitreoretinopathy  
SRF = Subretinal fluid

# ADX-2191 Represents a Novel Approach and Potential Therapeutic Breakthrough in Proliferative Vitreoretinopathy Treatment

## Proliferative vitreoretinopathy

## ADX-2191

4,000  
U.S.

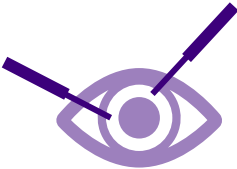
PVR is a rare disease, with ~4,000 patients per year in the U.S. and nearly twice as many in Europe and Japan combined.



Left untreated, retinal detachment due to PVR can progress to permanent blindness.



There is currently No FDA- or EMA-approved therapy.



Repeat surgery, which can lead to vision loss, is currently the only possible course of action.

### ADX-2191

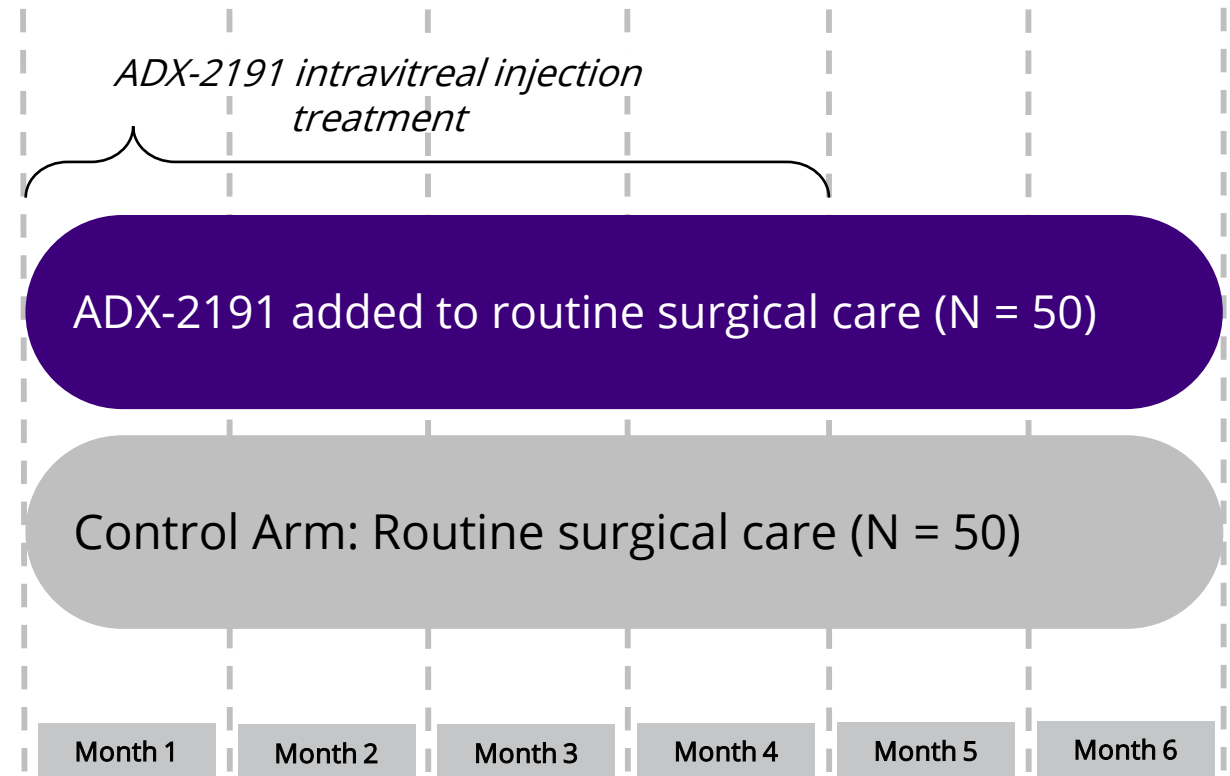
- A potential therapeutic breakthrough in PVR treatment
- Granted U.S. orphan designation and FDA fast track designation for the prevention of PVR
- Tolerability and reattachment success during study period demonstrated in Phase 1b open-label investigator sponsored clinical trial
- GUARD adaptive Phase 3 clinical trial for the prevention of recurrent retinal detachment due to PVR ongoing
- Exploring additional indications, including primary intraocular lymphoma

# ADX-2191: GUARD Trial Design in Proliferative Vitreoretinopathy

## Adaptive Phase 3 (Part 1) Clinical Trial Design

- **Primary objective:**
  - Evaluate efficacy of intravitreal ADX-2191 injections for prevention of recurrent retinal detachment due to proliferative vitreoretinopathy (PVR)
- **Design:**
  - Multi-center, randomized, controlled, two-part, adaptive Phase 3 clinical trial
- **Inclusion highlights:**
  - Recurrent retinal detachment due to PVR, or
  - Retinal detachment associated with open-globe injury
- **Dosing regimen:**
  - At surgery, weekly (x8), and then every other week (x4) intravitreal ADX-2191 injections
- **Endpoint:**
  - Retinal re-detachments due to PVR requiring re-operation within 6 months:
    1. OCT demonstrating fovea-off retinal detachment
    2. Photographic documentation retinal detachment

### Adaptive Phase 3 PVR Clinical Trial Design: Part 1



Progress Update Expected H2 2020\*

# ADX-2191 Has the Potential to be the Only Approved Drug for Primary Vitreoretinal Lymphoma, a Rare but Serious Retinal Cancer





Small (top) and large (bottom) subretinal infiltrates in patients with primary vitreoretinal lymphoma

- Primary vitreoretinal lymphoma (PVRL) is a rare, aggressive, high-grade cancer that arises in the vitreous and retina.
- Approximately 2,900 people in the United States suffer from PVRL.
- Approximately 600 new cases of PVRL are diagnosed in the United States per year.
- The median survival for newly diagnosed patients is 4.83 years.
- The most common ocular complaints reported by patients include blurred vision, painless loss of vision, floaters, red eye, and photophobia.
- No approved treatments are currently available.

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# Upcoming Expected ADX-2191 Development Milestones

-  Intraocular lymphoma **orphan designation H2 2020**
-  GUARD Phase 3 Trial enrollment **update H2 2020\***



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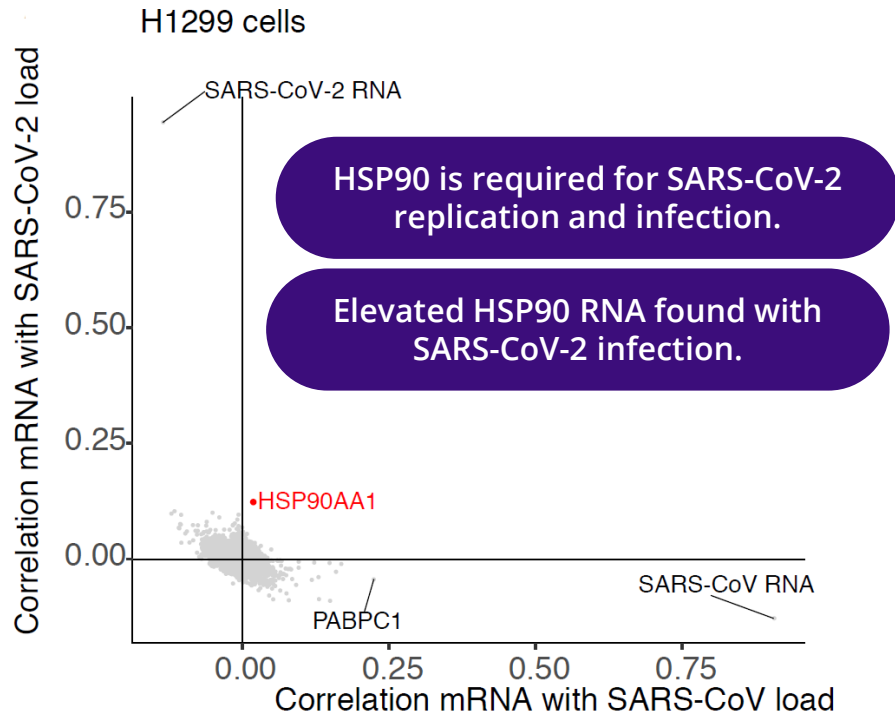
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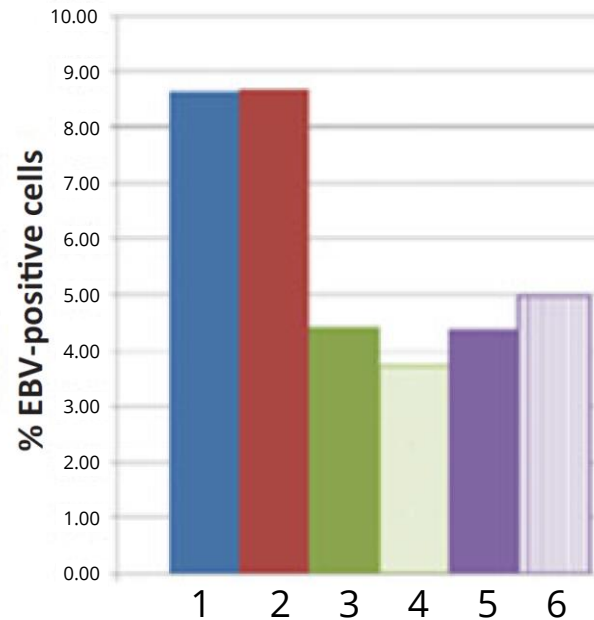
# Protein Chaperome Inhibition

# HSP90 Recently Identified as a Potential Therapeutic Target of SARS-CoV-2 and Demonstrated Clinical Activity Against EBV

HSP90 is a chaperone protein that controls the function of hundreds of client proteins, a system known collectively as the protein chaperome.



Wyer et al. *Bulk and single-cell gene expression profiling of SARS-CoV-2 infected human cell lines identifies molecular targets for therapeutic intervention*, bioRxiv preprint, May 5, 2020.  
DOI:10.1101/2020.05.05.079194. Not certified by peer review.



In an EBV-infected patient, ADX-1612 reduced the percentage of circulating EBV-positive cells.

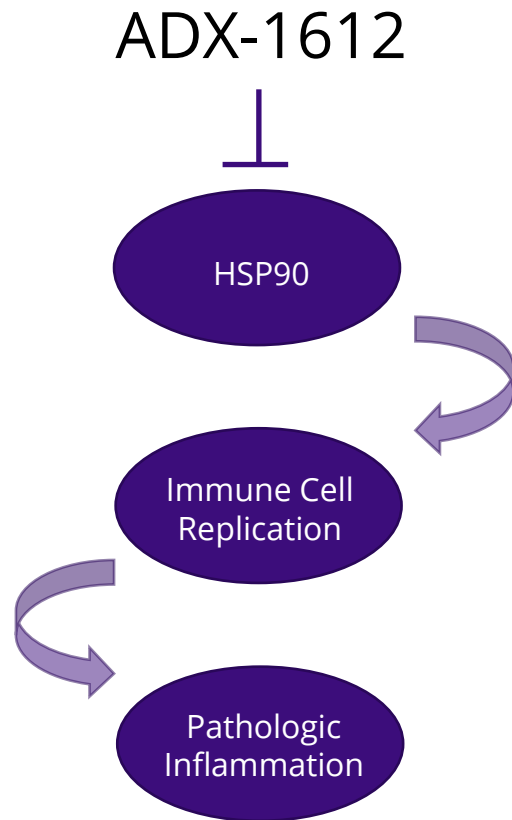
- 1 = Pre-treatment
- 2 = Pre-treatment
- 3 = 1 week post dose 1 (120 mg/m<sup>2</sup>)
- 4 = 1 day post dose 2 (120 mg/m<sup>2</sup>)
- 5 = 2 weeks post dose 2 (120 mg/m<sup>2</sup>)
- 6 = 2 days post dose 1 (150 mg/m<sup>2</sup>)

Shatzer et al. *Ganetespib, an HSP90 inhibitor, kills Epstein-Barr virus (EBV)-infected B and T cells and reduces the percentage of EBV-infected cells in the blood*, Leukemia & Lymphoma, 2016, DOI: 10.1080/10428194.2016.1213823

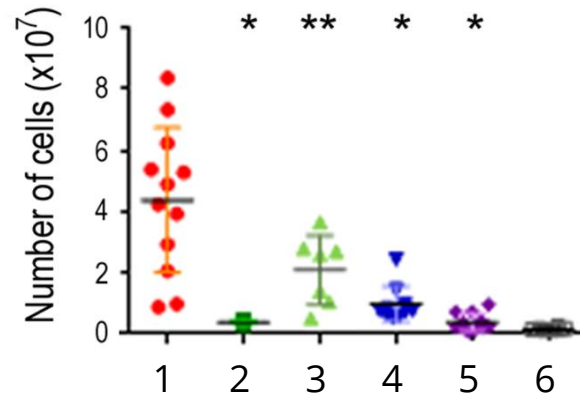
EBV = Epstein Barr Virus



# In Addition to Antiviral Activity, ADX-1612 Has Demonstrated Potential Suppression of Pathologic Inflammation



Immune cell count reduction in animal model of lupus<sup>1</sup>



- 1 = Vehicle
- 2 = Cyclophosphamide
- 3 = Cyclophosphamide/2
- 4 = ADX-1612
- 5 = ADX-1612 + cyclophosphamide
- 6 = Normal animal





Clinical response in patient with chronic vasculitis after a single dose



<sup>1</sup>Liu et al. *The HSP90 Inhibitor Ganetespib Alleviates Disease Progression and Augments Intermittent Cyclophosphamide Therapy in the MRL/lpr Mouse Model of Systemic Lupus Erythematosus*, PLoS One, May 14, 2015.

DOI:10.1371/journal.pone.0127361

# Expected ADX-1612 Development Milestones and Clinical Plans\*

-  Coronavirus Treatment Acceleration Program (CTAP) **application June 2020**
-  BARDA CoronaWatch **application June 2020**
-  Phase 2 EUDARIO Ovarian Cancer clinical trial **enrollment completion July 2020**
-  COVID-19 clinical development **update H2 2020**



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# The Aldeyra Value Proposition

# The Aldeyra Value Proposition



## NOVEL SYSTEMS-BASED APPROACHES FOR IMMUNOLOGY

- RASP-inhibition represents a first-in-class therapeutic approach.
- Three unique immune-modulating mechanisms of action in development.



## NEAR-TERM DEVELOPMENT CATALYSTS

- ADX-629 proof of concept Phase 2 clinical trials planned by year end.\*
- INVIGORATE and GUARD Phase 3 clinical trials are ongoing.



## SIGNIFICANT MARKET OPPORTUNITY

- Reproxalap targets a U.S. addressable market of >\$20B.
- ADX-2191 represents a potential therapeutic breakthrough.



## SOLID CASH POSITION

- Cash, cash equivalents and marketable securities were \$66.2 million as of June 30, 2020 (not including \$25.2 million in cash received subsequent to June 30, 2020 through the ATM program).
- Based on current operating plans and expectations, cash runway through the end of 2022.

# Experienced Management Team and Board of Directors

## Management Team

**Todd Brady, M.D., Ph.D.**  
President, CEO, & Director



**Joshua Reed, M.B.A.**  
Chief Financial Officer



**David McMullin, M.B.A.**  
Chief Commercial Officer



**James Gow, M.D.**  
SVP Clinical Development



**Stephen Machatha, Ph.D.**  
SVP Technical Operations



## Board of Directors

**Richard Douglas, Ph.D.**  
CHAIRMAN

Former SVP Corporate Development at Genzyme

**Ben Bronstein, M.D.**

Former CEO Peptimmune<sup>7</sup>

**Marty Joyce, M.B.A.**

Former CFO of Serono USA

**Nancy Miller-Rich**

Former SVP BD&L and Commercial Strategy at Merck

**Gary Phillips, M.D.**

CEO OrphoMed

**Jesse Treu, Ph.D.**

Domain Associates

**Neal Walker, D.O.**

CEO Aclaris Therapeutics

**Todd Brady, M.D., Ph.D.**

CEO Aldeyra Therapeutics

1. Acquired by Xanthus/Antisoma  
2. Acquired by Schwarz/UCB  
3. Acquired by Takeda  
4. Acquired by Ligand

5. Acquired by Merck  
6. Acquired by Alexion  
7. Acquired by Genzyme



# Systems-Based Approaches to Regulate Immune Response