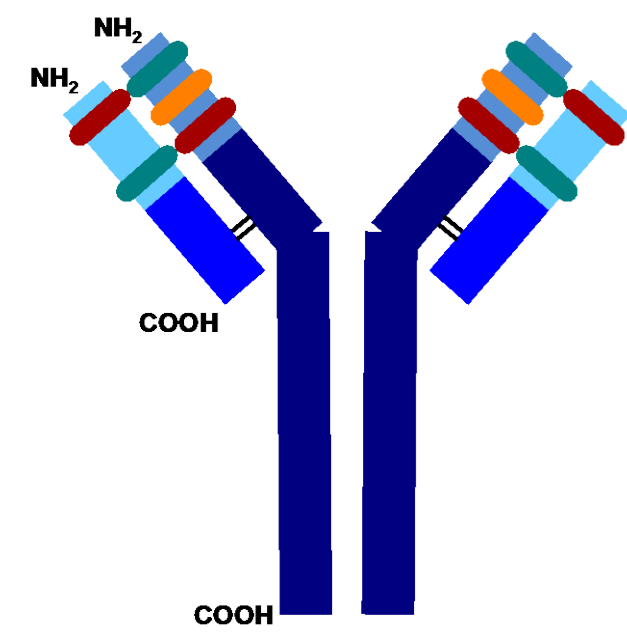


INTRODUCTION

SCIB1 is a DNA **ImmunoBody**[®] immunotherapy encoding a human IgG1 antibody, with three epitopes from gp100 and one from TRP-2 engineered into its CDR regions. This immuno-stimulatory antibody targets dendritic cells *in vivo* via the high affinity Fc receptor, CD64, and stimulates high avidity T cells.



Structure of SCIB1

KEY:

- gp100 DR4 epitope (L1 & H3)
- gp100 DR7-DR53-DQ6 and nested A2 epitope (L3 & H1)
- TRP-2 epitope (H2)

METHODS

16 patients with fully resected Stage III (n=9) or Stage IV (n=7) melanoma were immunised with 4 mg of SCIB1 by intramuscular electroporation at 3-weekly intervals, then subsequently at 3 and 6 months. Patients tolerating treatment were allowed to continue treatment for up to 5 years. Immune responses were assayed by proliferation and Elispot assays

SCIB1 SAFETY PROFILE

- SCIB1 was safe and well-tolerated
- More than 190 doses administered
- No CTC grade 4/5 toxicities except disease-related and one case of pneumonia (g4)
- Most common adverse events were injection site reactions (pain, tenderness, bruising, erythema and swelling)

CONCLUSIONS

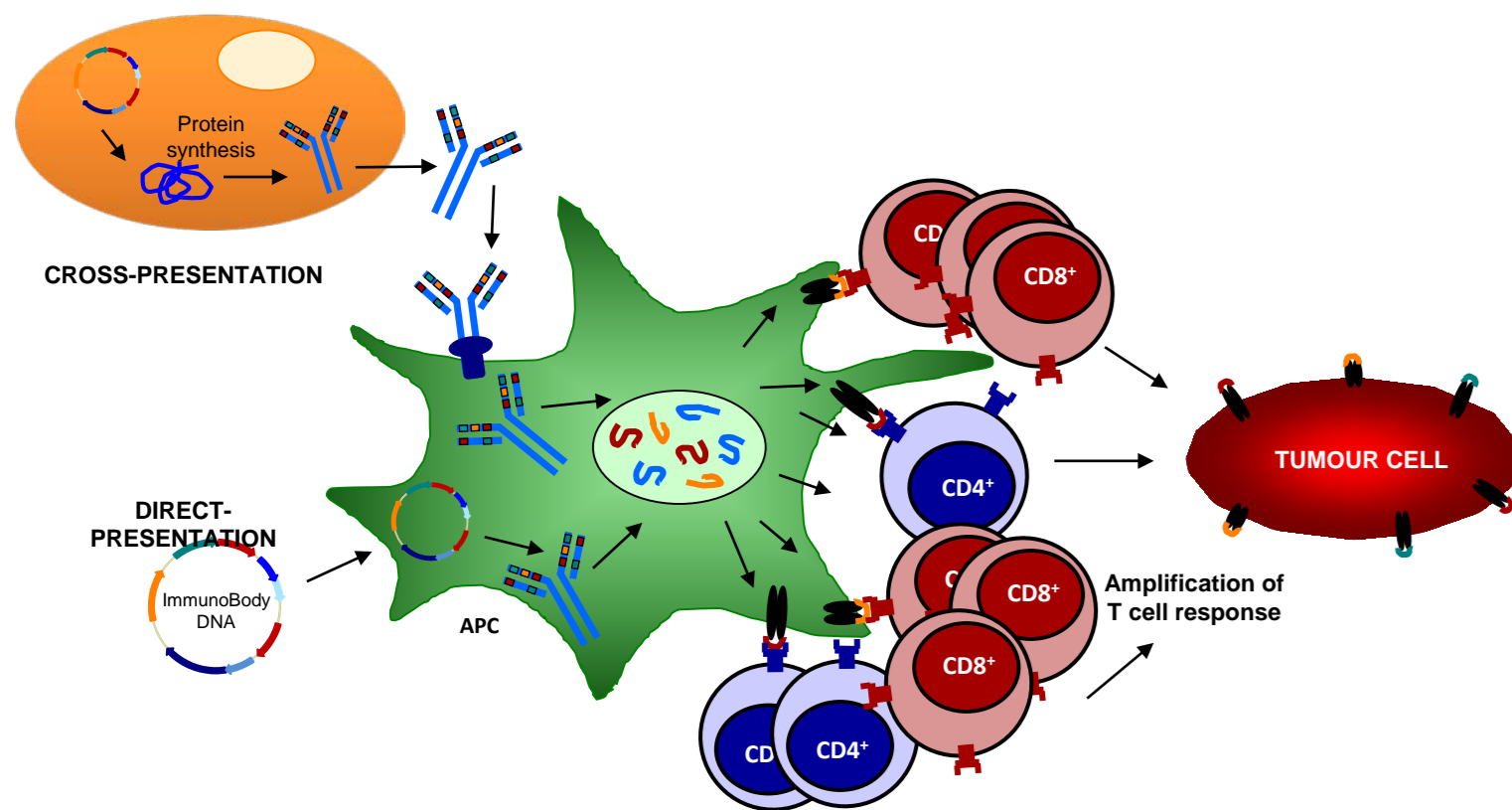
These results suggest that SCIB1 may confer protection from recurrence of melanoma with little associated toxicity

IMMUNE RESPONSES

- All 16 patients showed a vaccine-epitope specific proliferation response *ex vivo* and γ IFN Elispot responses *in-vitro* after T cell expansion
- 12 patients responded to all 4 epitopes, two patients to 3 epitopes, one patient to 2 epitopes and one patient to 1 epitope
- All patients who continued treatment showed strong T cell memory responses following 3 monthly boosts with SCIB1

DUAL MECHANISM OF ACTION FOR SCIB1 IMMUNOBODY[®]

- Combination of **CROSS-PRESENTATION** with **DIRECT-PRESENTATION**
- Results in amplification of immune response to induce **HIGH FREQUENCY, HIGH AVIDITY** T cells
- Potent **ANTI-TUMOUR** response



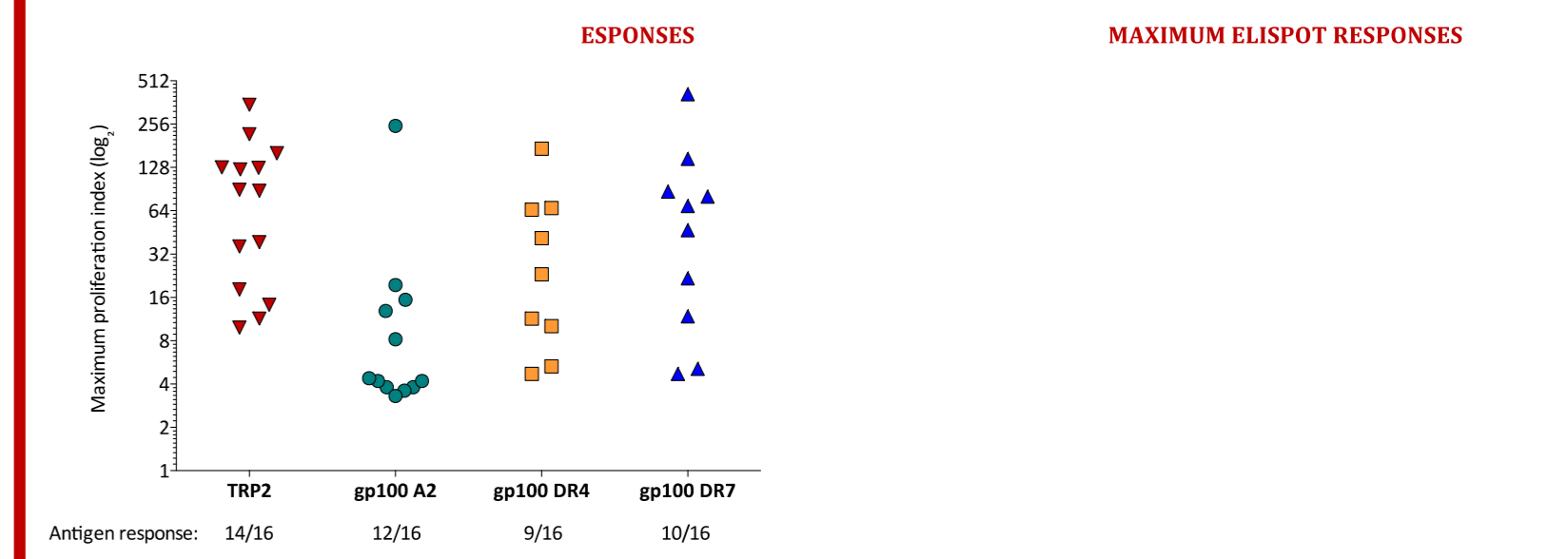
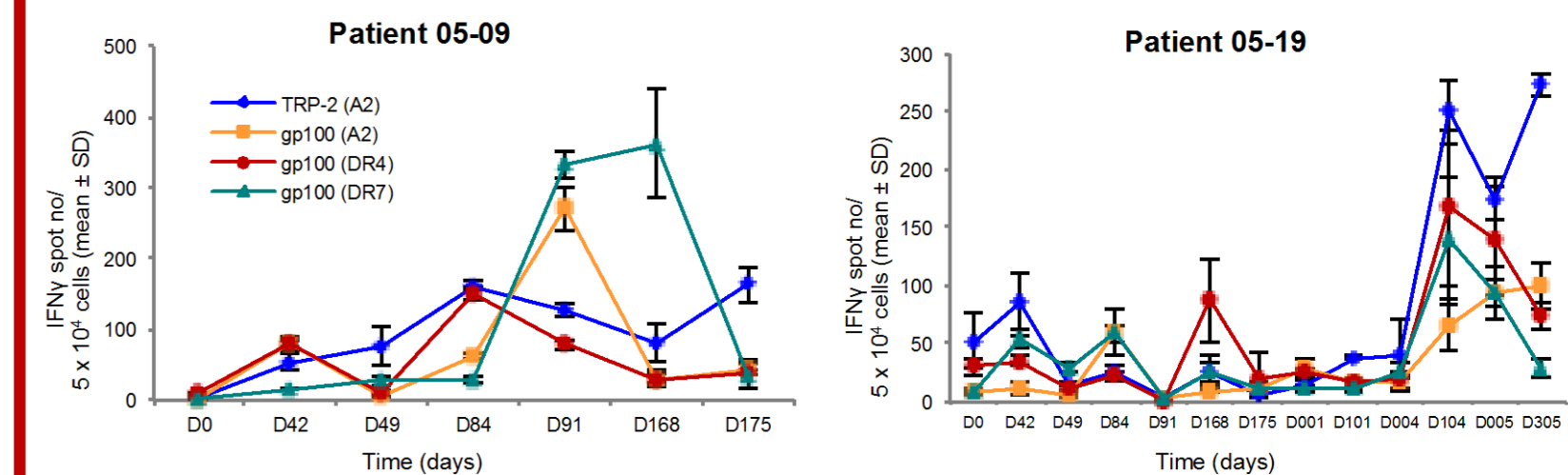
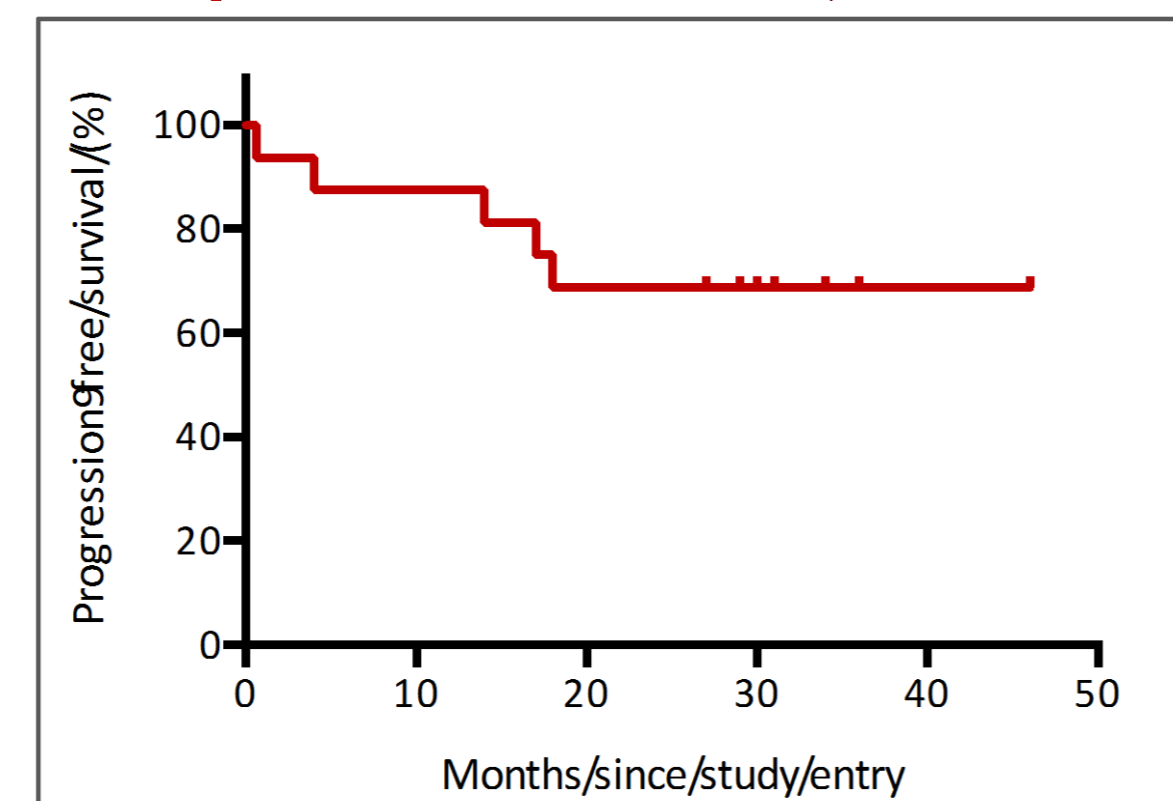
CLINICAL RESPONSES

- Only 5/16 patients have had a recurrence of disease at 1, 4, 14, 17 and 18 months and **NONE HAVE DIED**
- All other patients have been disease-free for between 27 and 46 months since study entry
- Median survival time for Stage III patients (n=9) and Stage IV patients (n=7) is 34 and 31 months, respectively

FULLY RESECTED MELANOMA PATIENTS	NO PATIENTS	DISEASE-FREE SURVIVAL (%)	DIED (%)
Stage III/IV	16	69	0
Stage III	9	67	0
Stage IV	7	71	0

PATIENT	NO DOSES (+CONT ^N)	STAGE AT STUDY ENTRY	MONTHS SINCE FIRST DIAGNOSIS OF METS	MONTHS SINCE STUDY ENTRY	TREATMENT POST-SCIB1	DISEASE STATUS	STATUS
01-24	5	IV	71	46	-	Disease-free	Alive
01-32	5 + 5	IIIC	37	34	-	Recurrence	Alive
01-34	5	IIIC	40	36	-	Disease-free	Alive
01-37	5	IV	153	35	Ipilimumab, Nivo	Recurrence	Alive
02-21	5	IIIB	38	34	-	Disease-free	Alive
02-33	5	IIIB	37	29	-	Disease-free	Alive
04-03	5	IV	49	44	Ipilimumab	Recurrence	Alive
04-22	3 (2mg)	IV	38	31	-	Disease-free	Alive
05-08	5 + 3	IIIC	40	36	Ipi, radiotherapy	Recurrence	Alive
05-09	5 (4/2mg)	IIIA	38	35	Surgery	Recurrence	Alive
05-11	5 + 8	IV	39	30	-	Disease-free	Alive
05-13	5	IIIC	40	34	-	Disease-free	Alive
05-18	5 + 7	IV	36	27	-	Disease-free	Alive
05-19	5 + 7	IIIA	36	30	-	Disease-free	Alive
05-21	5 + 9	IV	54	31	-	Disease-free	Alive
05-24	5 + 8	IIIA	31	30	-	Disease-free	Alive

Resected patients (n=16)
Progression-free survival (May 2015)



Survival (median, months) 39 34 Analysis date 11May15