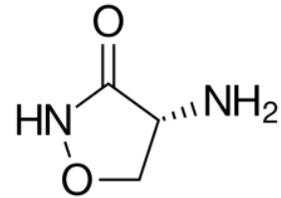




Junaxo ≡ JNX4022 AS A TREATMENT FOR L-DOPA-INDUCED DYSKINESIA ≡

JNX4022 is an FDA-approved, amino acid derivative, also known as D-cycloserine. Junaxo is developing JNX4022 as a treatment for Parkinson's disease (PD), specifically to combat L-DOPA-induced dyskinesia (LID) a side effect of current treatments for PD. JNX4022 has demonstrated efficacy in several preclinical models of PD, including a highly-predictive, and well-validated, non-human primate (NHP) model. We recently demonstrated a similar effect in two people with PD. JNX4022 is IND-ready and could immediately enter clinical trial for an indication of LID in PD, peak global sales are estimated at >US\$500M p.a.



THE OPPORTUNITY

LID – The problem

PD is a neurodegenerative disorder affecting as many as a million people in the US, approximately 60,000 new cases are diagnosed each year. The most widely used treatments of PD are dopamine-replacement therapies, such as L-DOPA. However, the effectiveness of such treatments diminishes with time with the development of long-term, treatment-related complications, the most disabling of which is LID.

LID develops in about 50% of patients receiving L-DOPA therapy for 5 years, by 10 years, >95% of PD patients suffer from LID. Amantadine, while not approved for the treatment of LID, is commonly employed and can be effective, though only in a subset of PD patients, moreover adverse effects limit its tolerability in many patients with LID. Thus, there is an urgent need to develop drugs that decrease the severity or delay the onset of dyskinesia.

JNX4022 – The solution

JNX4022 is a brain-penetrant, small molecule approved by the FDA for the treatment of tuberculosis. Recently, Dr Jay Schneider, a researcher at Thomas Jefferson University (TJU) in Philadelphia, found that JNX4022 dramatically reduced LID in NHPs, the 'gold-standard' preclinical model of LID. Moreover, at a dose that is approved by the FDA, JNX4022 reduced LID in a pilot clinical study in two people. Furthermore, JNX4022 increased the length of time that L-DOPA provided beneficial effects ('on-time') and enhanced cognition in NHPs, benefits not produced by amantadine.

Junaxo's co-Founder and President, Dr Jonathan Brotchie, an expert in PD, and a word-leader in translating findings in NHP models of PD to clinical Proof-of-Concept, identified JNX4022 as one of the most promising anti-LID therapies in development. Junaxo has thus licenced JNX4022 from TJU. As JNX4022 is an approved drug it could quickly be progressed into Phase II clinical studies. Repositioning of an already approved drug ensures a minimal risk of failure for non-efficacy reasons and offers a faster and cheaper route to market.

THE INVESTMENT

Junaxo Inc. is a drug development company located in Toronto, Canada. Junaxo is currently seeking an investment of US\$3M that will allow Junaxo to evaluate the efficacy of JNX4022 in people with LID in a Phase IIa clinical study.