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The 3 Companies founded by Dr. Werner Tschollar all address major unmet medical needs in the fields of novel treatment principles in immune-oncology, inflammatory gastrointestinal disorders, protein utilization with applications in longevity, and tailored drug-device technology for topical treatments.

- **AMYRA Biotech (www.amyra.com)**
- **CanVirex (www.canvirex.com,**
- **EsoCap (www.esocapbiotech.com)**

AMYRA is Pioneering a New Category in Digestive Health with Vast Commercial Potential

A short narrative on AMYRA

AMYRA is a Swiss biotechnology company pioneering Brush Border Enzyme Supplementation Technology (**BBEST**), a first-in-class platform based on recombinantly produced enzymes that support the final—and essential—stage of food digestion.

BBEST has potential applications across several large and growing markets:

- Gut health and food sensitivities, including non-coeliac gluten sensitivity and irritable bowel syndrome (IBS)
- Healthy ageing and sports nutrition, where improved protein utilisation and amino-acid absorption may deliver meaningful benefits
- Inflammatory and malabsorptive gastrointestinal conditions, including coeliac disease, Crohn's disease and common variable immunodeficiency (CVID)

The brush border of the small intestine is fundamental to digestive health. It contains enzymes required to complete the digestion of nutrients and is the body's principal site of nutrient absorption. Yet, while pancreatic enzymes have been widely studied and

commercialised, the brush border has remained largely overlooked as a therapeutic and nutritional target.

AMYRA is positioned to address this significant scientific and commercial opportunity. The therapeutic potential of brush border enzyme supplementation is explored in our latest publication in *Alimentary Pharmacology & Therapeutics*. Further information is available at amyra.com/publications.

The Problem: A Critical Step in Protein Digestion Remains Unsupported

Protein digestion is not completed in the stomach or by pancreatic enzymes. Its final and decisive stage takes place at the brush border of the small intestine, where peptides are cleaved into absorbable amino acids.

When brush border enzyme activity is impaired, protein digestion may remain incomplete. This reduces amino-acid availability and increase exposure to potentially inflammatory food-derived peptides.

The unmet need spans three sizeable and expanding populations:

- Older adults experiencing an age-related decline in digestive capacity
- Athletes and other, mainly older, individuals with elevated protein requirements for regeneration and muscle growth (longevity aspect)
- Patients with intestinal inflammation, impaired digestion or malabsorption

Despite the importance of this final digestive step, no established product category specifically addresses brush border enzyme insufficiency.

The Solution: Completing Digestion Where Nutrient Absorption Occurs

AMYRA's BBEST platform is designed to deliver essential digestive enzymes to the brush border—the precise site at which protein digestion is completed and nutrients are absorbed.

By supplementing this missing enzymatic activity, BBEST has the potential to:

- Enable more complete protein digestion and utilization
- Increase amino-acid absorption and systemic availability
- Improve nutrient supply to muscles, bones, the brain and the immune system
- Reduce exposure to incompletely digested, potentially immunogenic food peptides

In a human proof-of-concept study, AMYRA demonstrated an increase in amino-acid absorption of up to threefold—providing early clinical validation of both the technology and its underlying biological principle.

The Competitive Advantage: A New and Defensible Product Category

AMYRA is creating a new category within digestive health. To our knowledge, no marketed or clinical-stage product directly supplements the essential enzymes of the intestinal brush border.

Conventional digestive-enzyme preparations rely predominantly on endopeptidases, which cleave peptide chains internally but cannot complete protein digestion on their own. Full digestion—including the breakdown of difficult-to-digest, potentially immunogenic proline-rich peptides—also requires exopeptidases such as aminopeptidases and dipeptidyl peptidase-4 (DPP-4).

AMYRA's proprietary platform addresses this precisely defined biological gap. Its differentiated mechanism creates opportunities for product development across consumer health, medical nutrition and prescription therapeutics, with the potential for indication-specific formulations and strategic partnerships.

Scientific Validation and Collaboration

AMYRA's technology is supported by human proof-of-concept data, peer-reviewed research and collaborations with internationally recognised academic institutions, including the University of Oxford, Tampere University and the University of Applied Sciences and Arts Northwestern Switzerland (FHNW). The platform has also been advanced through an Innosuisse-supported project.

By targeting an essential but historically neglected stage of digestion, AMYRA has the potential to establish a differentiated platform in consumer health, and a new market category, at the intersection of digestive health, nutrition, longevity and gastrointestinal therapeutics.

AMYRA is currently pursuing partnering opportunities and actively negotiating with major ingredient companies, e.g., Kerry, IFF Health Sciences and DSM-Firmenich.

CanVirex has the realistic perspective of developing a first safe and effective immuno-therapeutic platform technology of so far treatment resistant solid tumors

A short narrative on CanVirex

CanVirex is a Basel-based clinical-stage biotechnology company developing a proprietary platform of genetically engineered measles vaccine viruses for the treatment of solid tumors. The company exploits the unique biological properties of measles vaccine strains — a vector with over 50 years of demonstrated human safety, natural tumor tropism, and potent immunogenicity — to create a new class of genetically modified oncolytic immunotherapies that combine direct tumor destruction with systemic anti-cancer immune activation.

CanVirex's lead programme, Mevacil (MeV-IL-12), has achieved complete, durable remissions in preclinical models and generated promising clinical signals in compassionate-use patients with terminal-stage cancers. The company is now positioned at a decisive value inflection point: GMP manufacturing is underway and a Phase I/IIa clinical trial application is being prepared for 2026–2027.

Beyond Mevacil, the measles vaccine platform's high engineering versatility supports a diversified pipeline of five drug candidates, each armed with distinct immunomodulatory payloads — from tumor vaccination and direct T-cell engagement to immune checkpoint blockade and combination with adoptive cell transfer.

Most importantly, CanVirex is becoming a key enabling technology for next-generation T-cell therapies.

CanViewy has an ongoing research collaboration with **Immatics AG**, an established, publicly listed biotech company, which is the global leader in the precision targeting of PRAME, a tumor antigen target expressed in about 90% of all tumors

While T-cell therapies have revolutionized treatment of blood cancers, they have largely failed to achieve similar success in solid tumors. The missing piece is modifying the tumor microenvironment. We uniquely use CanVirex's PRAME-modified oncolytic measles virus (a virus engineered to selectively infect and kill cancer cells) to induce tumor-specific expression of PRAME in solid tumors, a protein normally restricted to the testis but otherwise absent from healthy tissue. By converting immune-resistant tumors into highly inflamed and T-cell-accessible targets, CanVirex has the potential to, for the first time, unlock the full promise of cellular therapies in solid cancers. This approach could enable

the first broadly effective T-cell therapies for solid tumors, one of the largest commercial opportunities in modern medicine.

The underlying platform is modular: the same measles viral delivery system could in principle be adapted to express other tumor antigens or paired with other engineered T-cell products, rather than being locked to one single target. That flexibility — combined with the fact that the approach is already in development with a recognized partner in the field — makes it a distinctive opportunity for potential strategic partners looking for oncolytic virus assets that are both scientifically differentiated and expandable across multiple future applications.

Beyond cancer, we see a much larger long-term vision. The same measles-vector technology can serve as a delivery platform for transient gene therapies, vaccines, immune modulation, age-related diseases, and future longevity applications. As healthcare increasingly moves toward biological medicines and precision gene delivery, CanVirex is uniquely positioned to expand into multiple high-value markets from a single technological foundation.

CanVirex is therefore more than a drug developer. It is a platform company with the potential to create multiple products, partnerships, and indications from one scalable technology. With world-class scientific leadership, capital-efficient execution, and a first-mover position in an emerging field, we believe CanVirex has the opportunity to become a category-defining company at the intersection of virotherapy, cell therapy, and next-generation genetic medicine.

Immatics and CanVirex are currently evaluating in a joint project (conducted at the NCT in Heidelberg) the combination of PRAME-expressing oncolytic measles virus (MeV-PRAME construct) with PRAME-targeted adoptive cell therapy (PRAME-specific TCR T) for a combination treatment of solid tumors

The collaboration with Immatics is strategically important because it tests CanVirex not only as a standalone therapeutic modality, but as an enabling platform for precision cell therapies in solid tumors. The scientific premise is that an engineered oncolytic virus can remodel an immune-cold tumor into an immune-hot environment, recruit and support the persistence of therapeutic T cells, and increase the visibility of otherwise poorly immunogenic or heterogeneous tumors. In combination with Immatics' targeted T-cell receptor technologies, this could create a complementary therapeutic system in which viral remodeling of the tumor microenvironment enhances the activity, breadth, and durability of antigen-directed cellular therapies.

EsoCap AG developed the First Drug/Device Platform for Topical Treatment of Esophageal Diseases with highly significant clinical Phase II results in EoE

A short narrative on EsoCap

The Problem: Esophageal Diseases Are Hard to Treat Locally

Eosinophilic esophagitis (EoE), reflux disease (GERD), Barrett's esophagus and esophageal cancer are chronic or life-threatening conditions of the esophagus. EoE

alone affects some 660,000 eligible adult and adolescent patients worldwide, requires lifelong therapy, and severely disrupts daily life through painful swallowing,

food impaction and social isolation — yet roughly 50% of patients receive no treatment at all.

The root cause of this treatment gap is anatomical: anything swallowed passes through the esophagus in under 45 seconds. Conventional tablets, capsules and

suspensions are washed into the stomach almost instantly, so a drug never stays where the disease actually is. Effective local therapy of the esophagus has therefore

been considered nearly impossible — until now.

The Solution: The EsoCap Platform

EsoCap has developed the first drug/device platform technology for site-directed, local treatment of esophageal diseases. A simple capsule, taken with the proprietary

drinking device, unrolls a drug-loaded mucoadhesive thin film that adheres to the esophageal lining and delivers drug for more than 15 minutes, a significant longer

contact time than any existing oral formulation, verified by MRI in humans, which translates to high topical treatment effects and very favorable safety profiles.

The lead product ESO-101 (mometasone furoate) delivered compelling results in the placebo-controlled ACESO Phase 2 study: the primary endpoint of histological

remission was met (p=0.0318) together with all secondary endpoints, including a highly significant improvement of endoscopic inflammation and fibrosis (EREFS,

p=0.0001). Safety was excellent — not a single case of candidiasis — with once-daily bedtime dosing and 100% patient compliance. The results were published in

Alimentary Pharmacology & Therapeutics, triggering strong enthusiasm among global key opinion leaders.

Crucially, EsoCap is a platform, not a single product: the film can carry small molecules, peptides, antibodies or RNA-based therapeutics. The positive EoE Phase 2

data validate the delivery principle itself and are a strong indicator of clinical and regulatory success in further indications — GERD, Barrett's esophagus, esophageal

cancer and esophageal fungal infections.