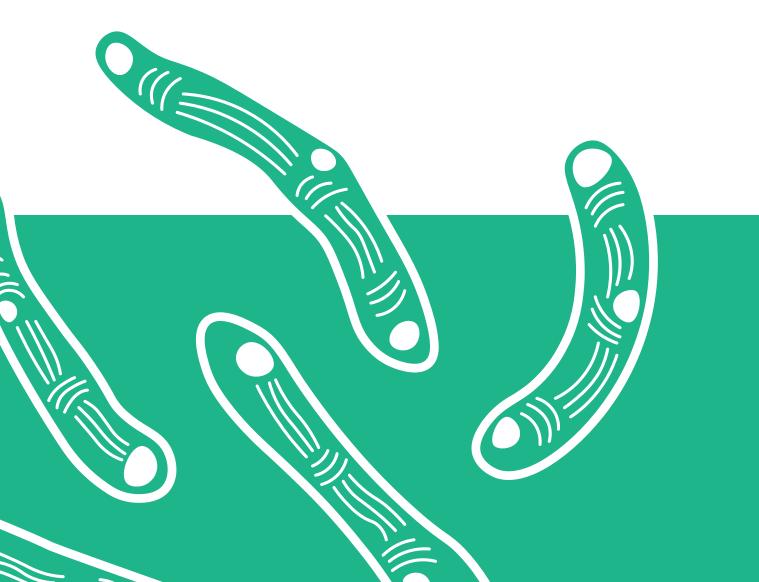




Developing a new Treatment for Leprosy Type 2 Reaction

A new treatment with the potential to alleviate suffering, improve outcomes and ensure patients have access to this much needed medicine.





200 +

THOUSAND

new cases of leprosy are reported each year ¹



50

THOUSAND

people are estimated to be at risk of leprosy type 2 reaction each year ⁴



45%

OF LEPROSY PATIENTS are women and children ¹



5+

THOUSAND

new cases of leprosy type 2 reaction reported in 64 countries each year ¹

The Burden of Leprosy Type 2 Reaction

Leprosy type 2 reaction can occur as a complication of leprosy, most commonly in patients who are receiving multi drug therapy but can occur before treatment or long after treatment is completed.

Patients typically suffer greatly, often experiencing fatigue, fevers and painful skin lesions, which can appear on the face and limbs. Consequences can be, acute, recurrent or chronic, in the worst cases leading to permanent nerve damage, deformities and limb amputation, even death.

The disease causes stigma and can impact on a sufferer's ability to attend school or work, and provide and care for their family, only compounding the challenges already faced by the disadvantaged people that leprosy commonly affects.





In a small clinical trial in Nepal, dovramilast was also well tolerated with no serious adverse event reported. All ten leprosy type 2 reaction patients who received 28 days of treatment with dovramilast saw improvement in their symptoms within 7 to 14 days of treatment initiation.²

Alleviate suffering, improve patient outcomes & address unmet needs

MDGH is developing dovramilast, an anti-inflammatory medicine with the potential to treat a range of immune-mediated conditions, including leprosy type 2 reactions.

Current therapies for leprosy type 2 reaction while effective, often cause significant side effects and may not be suitable for everyone.³ Prednisolone requires prolonged use and is linked to serious side effects, with many patients relapsing as it's tapered. Thalidomide is not suitable for children and pregnant women.

Given the unmet treatment needs, MDGH is aiming to provide a more effective, better-tolerated, and easier-to-administer alternative treatment for people affected by leprosy type 2 reaction.



CLINICAL DEVELOPMENT PROGRESS

The development progress continues following the promising results of the study in Nepal. The US Food and Drug Administration granted dovramilast an Orphan Drug Designation for leprosy.

MDGH sponsored Phase 2 clinical trial in participants affected by leprosy type 2 reaction is commencing in 2025 across USA, Benin, Cote d'Ivoire, Madagascar, Philippines & Indonesia.

Target regulatory approval by 2030.





Dovramilist Aims To:



MINIMISE SIDE EFFECTS



IMPROVE PATIENT OUTCOMES



PROVIDE AN ALTERNATIVE
TREATMENT OPTION FOR
CHILDREN AND
PREGNANT WOMEN

Disclaimer: Dovramilast is in development and not approved for any indication in any country or region Medicines Development for Global Health (MDGH) is a not-for-profit pharmaceutical company, developing medicines to ease the burden of neglected diseases on many of the world's most disadvantaged people and communities.

Together, we can improve lives, transform communities, and build a fairer, healthier, and more prosperous world.

Join us in making innovative medicines accessible to all!

Speak with our team about partnership opportunities today.

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- ¹ World Health Organization, Weekly Epidemiological Record, 13 September 2024, vol. 99.
- ² Dr M Shah presented data at International Leprosy Congress, India, 2022. https://cdn.prod.website-files.com/65a4e2fbc54c0b5f-91c35b37/65b0faa3699fd26fc80092b4_ILC_2022_Abstracts.pdf
- ³ Leprosy/Hansen Disease: Management of reactions and prevention of disabilities, technical guidance, WHO 2020. https://iris.who.int/bitstream/handle/10665/332022/9789290227595-eng.pdf?sequence=1
- ⁴ Walker SL, Lebas E, Doni SN, et al. The mortality associated with erythema nodosum leprosum in Ethiopia: a retrospective hospital-based study. PLoSNegl Trop Dis 2014;8:e2690. doi:10.1371/journal.pntd.0002690 pmid:http://www.ncbi.nlm.nih.gov/pubmed/24625394

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