

RESTORE-ALS Phase 3 Trial Design



RestoreALS

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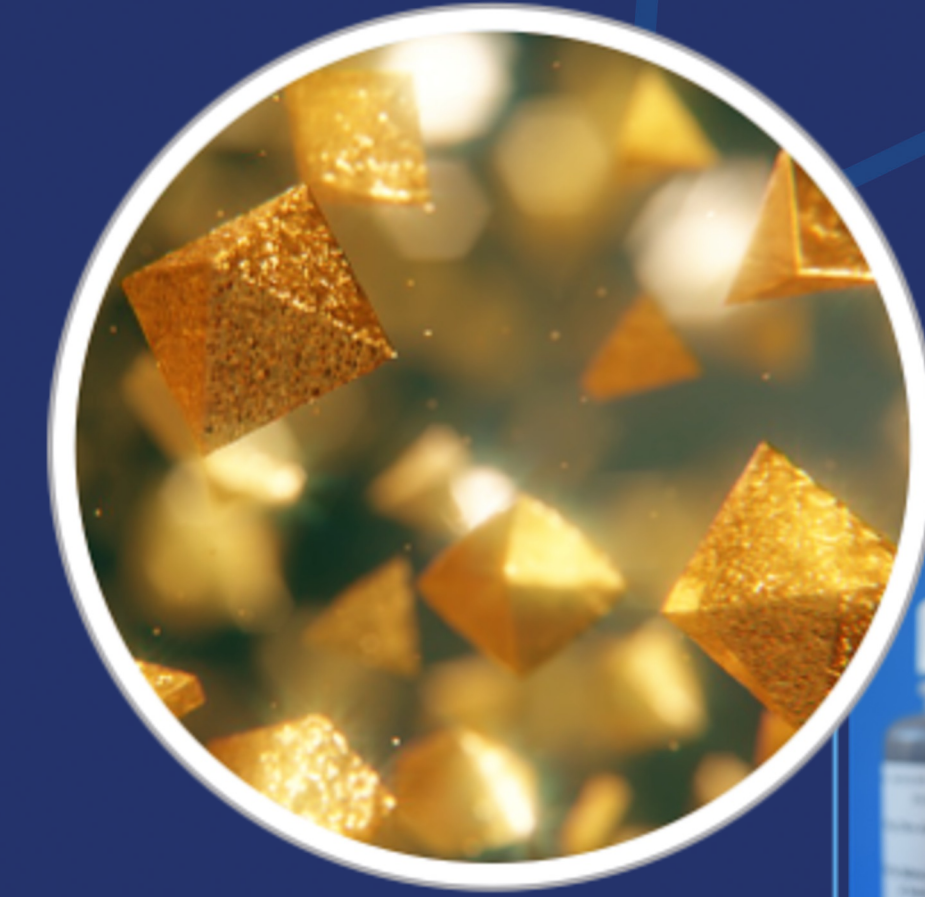
Objective: to investigate the effects of CNM-Au8 on survival and delayed clinical worsening events in ALS

Participant criteria: ALS diagnosis per Gold Coast criteria; symptom onset within 36 months of the Screening visit; $\geq 60\%$ predicted vital capacity; TRICALS Risk Score: -2.5 to -6.5

Investigational Product **CNM-Au8 30 mg** randomized 2:1 (or matched placebo)

Study Center(s): Expert ALS centers

- North America
- Europe
- Australia
- Asia/Pacific

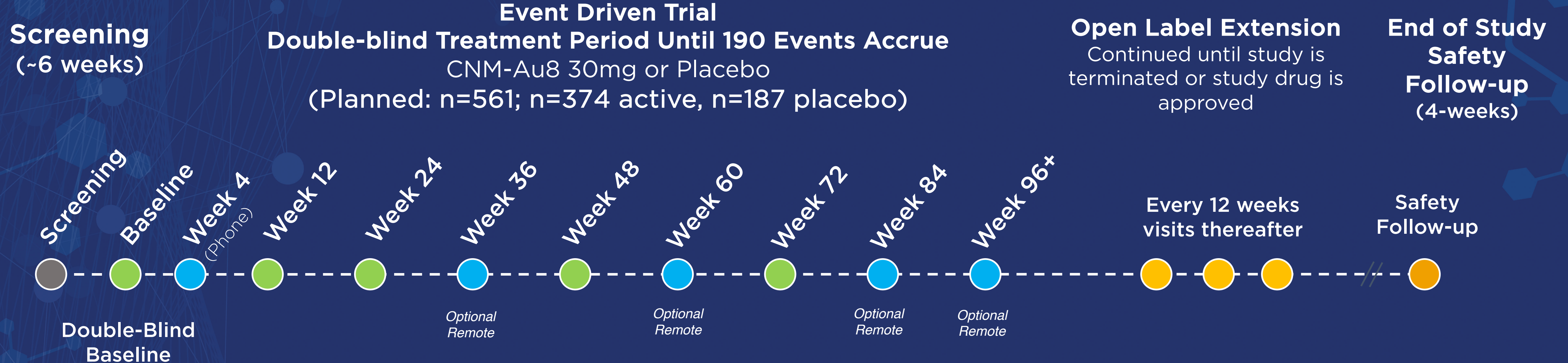


CNM-Au8



Design Scheme

- Interim Futility analysis at 50% and 75% of events
- Interim efficacy at 75% of events



Enrollment Criteria

Key Inclusion Criteria:

1. Aged ≥ 18 years at the Screening
2. Confirmed diagnosis of ALS per Gold Coast criteria
3. Time since onset of ALS symptoms ≤ 36 months
4. Upright forced vital capacity (FVC) $\geq 60\%$ of predicted
5. TRICALS risk score (6-factor model) range: -2.5 to -6.5
6. Screening biofluid (plasma) NfL ≥ 45 pg/mL
7. Stable background treatment (e.g., riluzole, edaravone, both)

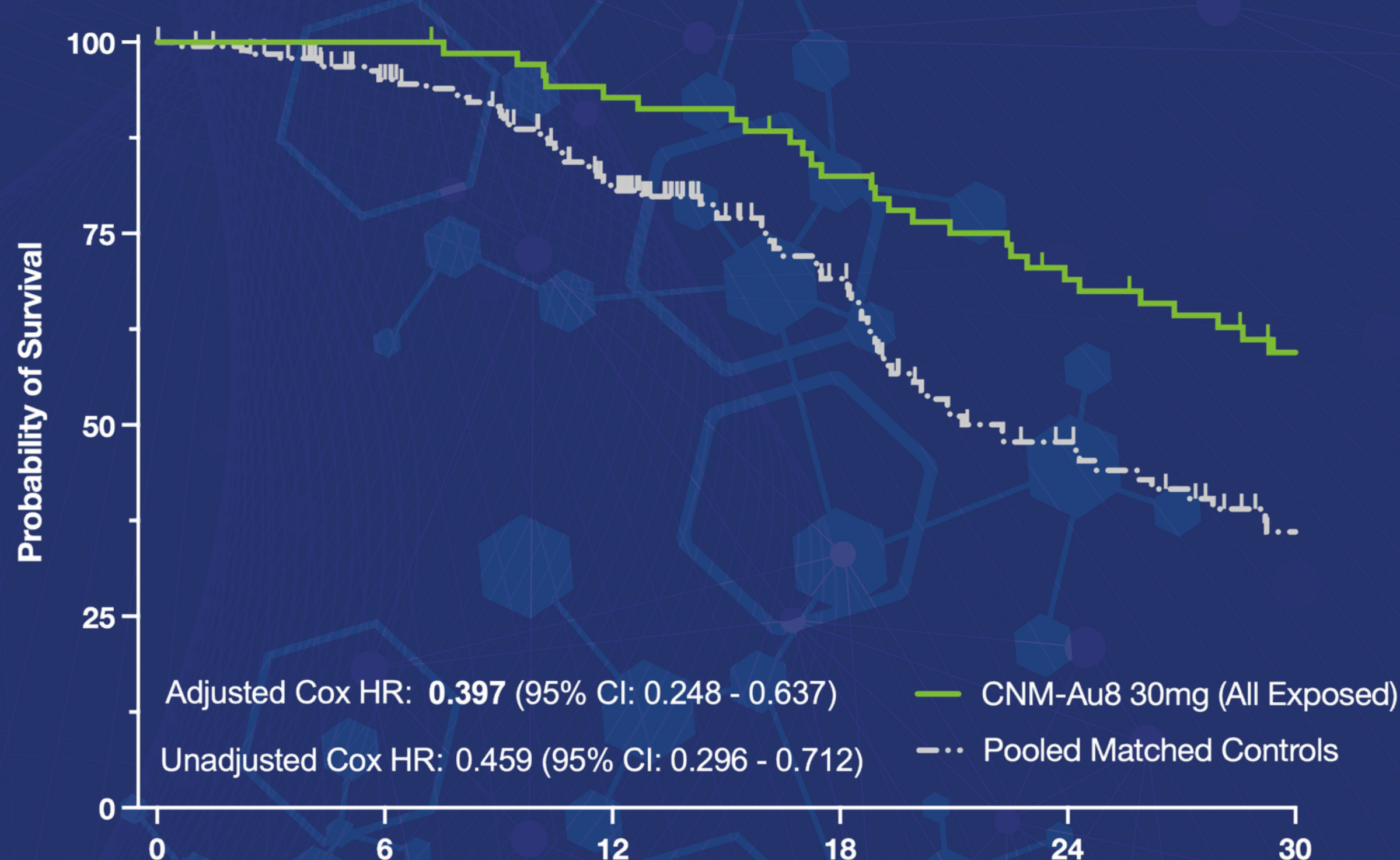
Key Exclusion Criteria:

1. Presently use or at risk of needing: (i) Feeding tube, (ii) NIV, or (iii) Tracheostomy
2. Clinically significant findings on standard renal, hepatic, hematologic panels
3. Nonstable background treatment; treatment with antisense oligonucleotides
4. Allergy to gold

Survival Effect Planning Considerations

RESTORE-ALS Treatment Effect Scenario (Clinical)

Pooled CNM-Au8 30 mg (RESCUE-ALS & HEALEY ALS Platform Trial)
All CNM-Au8 30 mg Exposed and Meeting Key* RESTORE Inclusion Criteria vs.
Propensity Matched Controls (Pooled PRO-ACT, ALS NHC, ANSWER-ALS)



At Risk	0	6	12	18	24	30
CNM-Au8:	70	70	64	56	45	34
Matched Controls:	194	166	128	68	40	24

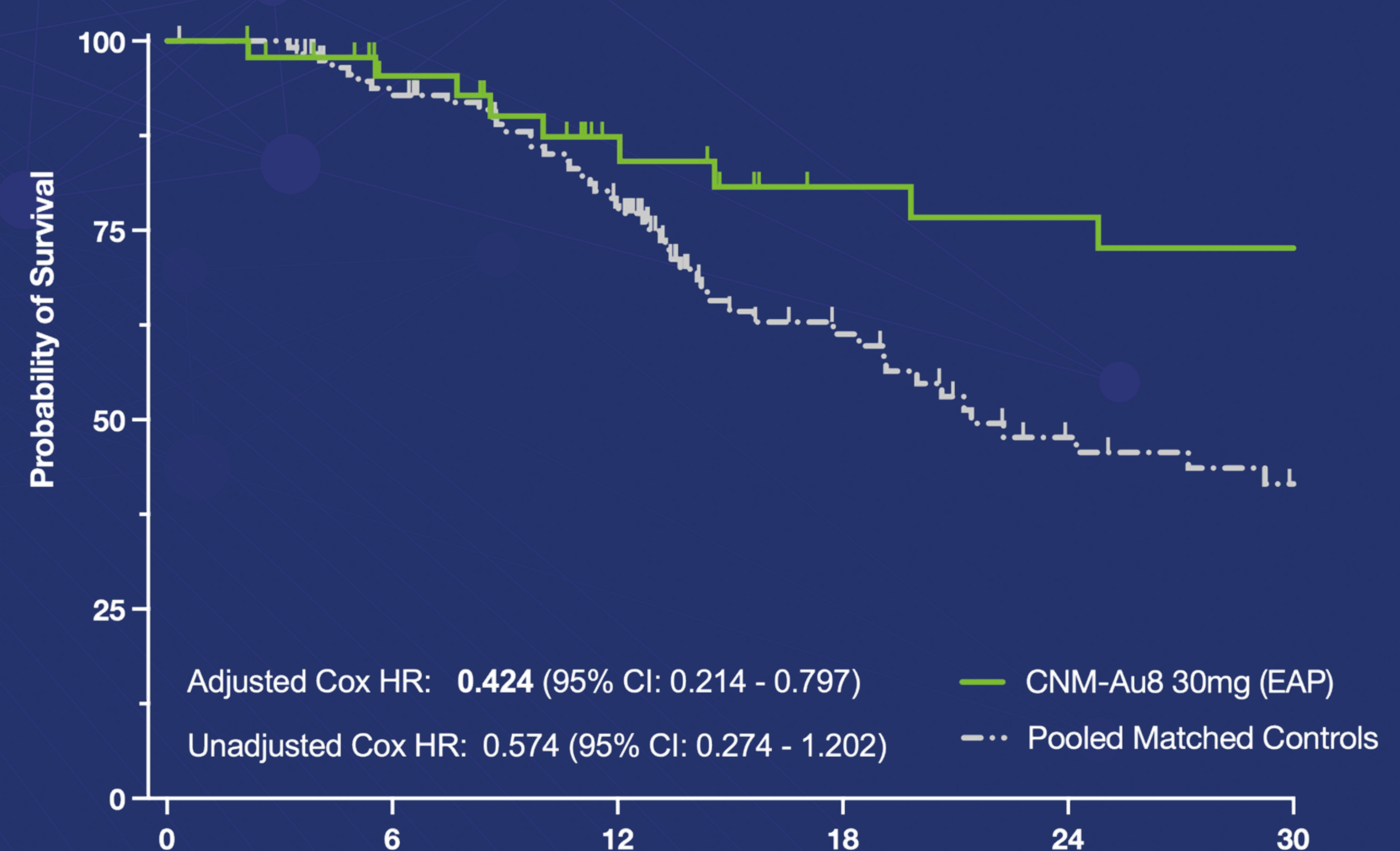
*Key Inclusion Criteria: VC% predicted > 60%, TRICALS: -2.5 to -6.5, Onset ≤ 36 months; 1:3 Match

Methods, Statistics, and Powering

- Enrollment plan: approximately 561 randomized participants
 - 2:1 treatment allocation (CNM-Au8 30 mg: Placebo)
- Primary endpoint: delayed time to death (all-cause mortality)
 - Assumed hazard ratio (HR) of 0.625
 - One-sided alpha < 0.025; Power = 87% with 190 events
- Statistical model: Covariate adjusted cox proportional hazard
- Randomization Stratification factors:
 - Screening biofluid (plasma) NfL level: < 110 pg/mL versus ≥ 110 pg/mL
 - Symptom onset age: < 50 years versus ≥ 50 years
 - BMI < 25 kg/m² versus ≥ 25 kg/m²
- Secondary endpoints:
 - (i) Time to death or death equivalent (PAV), (ii) Composite ALS clinical worsening hierarchy, (iii) joint-rank of time to death or PAV and ALSSQOL-SF change to Week 72, (iv) joint-rank of time to death or PAV and ALSFRS-R change to Week 72, (v) joint-rank of time to death or PAV and ROADS change to Week 72, (vi) joint-rank of time to death or PAV and SVC% change to Week 72

RESTORE-ALS Treatment Effect Scenario (Expanded Access Programs)

Pooled EAP01 and EAP02 That Met Key* RESTORE Inclusion Criteria vs.
Propensity Matched Controls (Pooled PRO-ACT, ALS NHC, ANSWER-ALS)



At Risk	0	6	12	18	24	30
CNM-Au8:	47	37	27	20	19	18
Matched Controls:	117	102	79	39	24	19

*Key Inclusion Criteria: VC% predicted > 60%, TRICALS: -2.5 to -6.5, Onset ≤ 36 months; 1:3 Match