

## ARSTAT Inc. - Combination Pill (**Enhanta™**) **A First-in-Class Therapy for Painful, Heavy Menstrual Periods**

**Oral Combination of  
NSAID and Low Dose  
Tranexamic Acid**

- ← Unlike NSAID alone (current first-line), the candidate will effectively treat excessive menstrual bleeding in a majority of women.
- ← Two valuable options - Rx and OTC formulations
- ← ≈4 years and ≈\$17M to the US market (≈\$20M for both US and EU)

### **Introduction:**

- Painful and heavy menstrual periods are a highly prevalent condition which currently lacks a single, specific non-hormonal therapy. Our candidate addresses this large unmet medical need
- We have developed and patented a pill combining an NSAID (first-line for menstrual pain) and a small fraction of an approved dose of tranexamic acid (first-line for excessive bleeding)

### **Our Innovation and Proprietary Position:**

- Novel, proprietary oral drug formulations with no similar predecessors
- Novel: a tranexamic acid dose is dictated by the NSAID's ability to reduce menstrual bleeding
- Novel: the tranexamic acid doses are much lower than those currently marketed or ever tested
- A PCT patent application (developed with a top IP firm) is currently pursued in the US
- A 10-year protection of compositions is already secured in Germany

### **Business Model:**

- Our business plan is to advance Enhanta™ up to completion of the first efficacy study (Phase IIb or Phase III) and to commercialize it in 2.5 years or less. Enhanta™ could be developed by either ARSTAT or a dedicated start-up. We may also pursue early out-licensing opportunities.
- ARSTAT seeks funding from angel investor(s) to be poised to start the first efficacy study
- In 12 months, we will secure a licensing agreement or a Series B round of financing which would support completion of the efficacy study and a profitable early exit.
- The R&D costs and milestones, funding, business plan and exit details are disclosed below.

### **Clinical Rationale:**

- In a majority of women, NSAIDs (first-line therapy for painful and heavy menstrual periods) cannot adequately control menstrual bleeding. Maximal NSAID doses must often be given.
- A first-line medication for heavy bleeding (tranexamic acid, Lysteda®) at the approved, fairly high doses is not recommended for a co-administration with NSAIDs for safety reasons
- **Solution:** a combination pill with an NSAID and a low complementary dose of tranexamic acid
- At a small fraction of the Lysteda dose, the pill is predictably safe. Enhanta™ will effectively treat heavy menstrual bleeding while keeping NSAID at a minimal dose for pain.
- Clinical data also strongly supports superiority of the combination pill vs. NSAID alone in the reduction of menstrual bleeding (a primary efficacy endpoint in a future Phase III study)
- The doses of NSAID and tranexamic acid may be adjusted for various levels of menstrual pain and menstrual bleeding. Two Enhanta™ formulations (Rx and OTC) will be developed.
- Rx will be intended for women clinically diagnosed with dysmenorrhea and/or menorrhagia; OTC – for women who perceive their periods as heavy and painful (no clinical diagnosis)

**Contact:** Arkady Rubin, PhD. E-mail: [arubin@arstatinc.com](mailto:arubin@arstatinc.com) Tel: 347-385-0878

## Development and Commercial Details:

- Preferred formulations (specific NSAID and recommended doses) will be disclosed later.
- Clinical testing begins with Phase IIb which could be positioned as the 1<sup>st</sup> Phase III study
- Known regulatory precedents and approvability criteria; a rapid 505(b)(2) NDA pathway
- ≈4 years and ≈\$17M to the US Market (≈\$20M to both US and EU Markets)
- A substantially improved first-line therapy in a large, underdiagnosed, undertreated market
- In addition to superior efficacy vs. NSAIDs, Enhanta™ is a safer alternative to hormonal medications (e.g., combined and progestin-only contraceptives) and surgical procedures
- Could capture significant annual sales for Rx (≈\$350M) and OTC (≈\$170M) – US projections
- Great exit opportunities for VC; earliest exit in 2-2.5 years, after completion of the first study.

## Business Plan Details:

- Over the next 12 months, the following milestones will be achieved:
  - ◆ A meeting with the FDA will confirm the clinical program and a 505(b)(2) NDA path (based on US precedents, we expect to run 2-3 relatively small efficacy studies and one PK trial).
  - ◆ Following the meeting, an Investigational New Drug application (IND) will be filed.
  - ◆ Meetings with Health Authorities to confirm the filing requirements for major EU markets (based on initial input from European regulatory experts, we do not plan ex-US studies).
  - ◆ Ready to start the first clinical study (Phase IIb or Phase III) in the US
  - ◆ Continued prosecution of the patent application; the US patent could be issued.
- Accomplishment of these tasks is expected to secure a licensing agreement or a Series B round of financing which would be applied toward the completion of the 1<sup>st</sup> clinical efficacy study.

## Value Proposition:

- To support Enhanta's R&D, the company seeks to raise \$400-500K from angel investor(s).
- The investor's expertise in women's health or connections to VC entities would be an asset.
- A year from now, Enhanta's valuation will increase at least 5-6-fold, bringing it to \$10-12M.
- In 2.5 years, we will offer the investors an opportunity for exit or to continue with their support. The anticipated return could be 10-12x.
- We also seek an executive partner, potentially an industry veteran in search of a new venture

## R&D Costs, Major Milestones, Projected Sales and VC Exits: Overview



**Costs** = Cumulative R&D costs (i.e., \$17M at Year 4 are the total R&D costs);

**Exit** = Upfront payments to all shareholders (royalties are also expected).

**The Company's Background:** The ARSTAT's principal - Arkady Rubin, PhD. - is a researcher with 20+ years of pharma industry experience. In the area of dysfunctional uterine bleeding, Dr. Rubin has analyzed extensive clinical databases and co-authored related publications. He was also a co-inventor of Ortho Tri-Cyclen Lo®, the best-selling oral contraceptive in the US (>\$450M, 2013) 2