## **PRESS RELEASE**

Stockholm, Sweden 28 May 2025



# Sobi to share new clinical data and research at EULAR 2025

Sobi® (STO: SOBI) will present new clinical data and research outcomes at the annual European Congress of Rheumatology (EULAR 2025) in Barcelona from the 11-14 June 2025. Research will include clinical trial outcomes on the efficacy and safety of Gamifant in the treatment of macrophage activating syndrome, updates on trial details of Vonjo investigating the potential treatment of VEXAS, and an analysis on the management of uncontrolled gout.

Sobi will host a symposium on the dermatologic, rheumatologic, and hematologic features of VEXAS syndrome during the congress. The symposium will be chaired by Dr Sophie Georgin-Lavialle MD, PhD from the French National Reference Centre for auto-inflammatory diseases and inflammatory amyloidosis. The symposium will be followed by a panel discussion and Q&A.

"We are delighted that our continued advancements in treating rare disease, including those suffering with the most debilitating rheumatology conditions will be presented at this year's EULAR conference. Sobi's presentations will provide insights and treatment options for those working with patients with rheumatological conditions, providing them with the most up-to-date clinical data and approaches," said **Lydia Abad-Franch**, MD, MBA, Head of Research, Development, and Medical Affairs (RDMA), and Chief Medical Officer at Sobi.

"With several poster and oral presentations and a longer form symposium, we are proud to be able to show how research and collaboration can advance clinical practice – and we look forward to meeting and connecting with colleagues in Barcelona," **Lydia Abad-Franch** concluded.

### Key data to be presented at EULAR 2025

| Gamifant (emapalumab)                                |  |
|--|--|
| Efficacy and Safety of emapalumab in Patients with   | Oral presentation  |
| Macrophage Activation Syndrome in Still's disease:   | Session title: Clinical Abstract Session: Proceedings in |
| Results from a Pooled Analysis of Two Prospective    | Juvenile Idiopathic Arthritis                            |
| Trials   | Session date: Thursday 12 June                           |
| Speaker: Professor Fabrizio De Benedetti (principal  | Session time: 10:30 - 12:00 CEST                         |
| investigator of the study)                           | Presentation time: 10:48 - 10:57 CEST                    |
|  | Location: Room 6.1                                       |
| Exposure-safety analysis from two clinical trials of | Poster presentation                                      |
| emapalumab in patients with macrophage               | Session title: Poster View VI                            |
| activation syndrome in Still's disease               | Session date: Friday 13 June                             |
| Speaker: Professor Fabrizio De Benedetti (principal  | Session time: 12:00 – 13:30 CEST                         |
| investigator of the study)                           | Location: Poster Hall                                    |
|  |  |
| NASP (formerly SEL-212)                              |  |
| Variations in uncontrolled gout between              | Poster presentation                                      |
| Rheumatologists and Nephrologists                    | Session title: Poster View VIII                          |
|  | Session date: Friday 13 June                             |



|   | Session time: 10:15 - 11:45 CEST                         |  |
|---|--|--|
|   | Location: Poster Hall                                    |  |
| Vonjo (pacritinib)                              |  |  |
| Development of a Consensus Definition of VEXAS  | Poster presentation                                      |  |
| Flare for Use in Clinical Research              | Session title: Poster View VII                           |  |
|   | Session date: Friday 13 June                             |  |
|   | Session time: 14:45 - 15:45 CEST                         |  |
|   | Location: Poster Hall                                    |  |
| PAXIS: A Randomized, Double-Blind, Placebo-     | Poster tour  |  |
| Controlled, Dose Finding Phase 2 Study (Part 1) | Session Title: Poster Tour II/ Clinical and Basic Poster |  |
| Followed by an Open-Label Period (Part 2) to    | Tours: Autoinflammatory Diseases including VEXAS         |  |
| Assess the Efficacy and Safety of Pacritinib in | Session date: Saturday 14 June                           |  |
| Patients with VEXAS Syndrome                    | Session time: 10:15 -11:45 CEST                          |  |
|   | Presentation time: 10:29 - 10:36 CEST (4 mins + 2        |  |
|   | mins Q&A)  |  |
|   | Location: Poster Tour II                                 |  |
| Development of a Disease Activity Index for the | Poster tour  |  |
| Assessment of VEXAS Syndrome (VEXAS-DAI)        | Session title: Poster Tour II/ Clinical and Basic Poster |  |
|   | Tours: Autoinflammatory Diseases including VEXAS         |  |
|   | Session date: Saturday 14 June                           |  |
|   | Session time: 10:15 - 11:45 CEST                         |  |
|   | Presentation time: 10:43 - 10:50 CEST (4 mins + 2        |  |
|   | mins Q&A)  |  |
|   | Location: Poster Tour II                                 |  |
| Medical Symposium                               | <b>Symposium title:</b> Putting on your VEXAS goggles:   |  |
| An in-depth presentation on VEXAS syndrome: the | Seeing what's in plain sight                             |  |
| dermatologic, rheumatologic, and hematologic    | Session date: Friday 13 June                             |  |
| features of the condition. Followed by a panel  | Session time: 17:30 - 18:30 CEST                         |  |
| discussion and Q&A                              | Location: Fira de Barcelona, Room B4                     |  |

### **About Gamifant® (emapalumab)**

Gamifant® (emapalumab) is indicated for the treatment of adult and paediatric (newborn and older) patients with primary <a href="hemophagocytic lymphohistiocytosis">hemophagocytic lymphohistiocytosis</a> (HLH) with refractory, recurrent or progressive disease or intolerance with conventional HLH therapy.

# **About Macrophage activation syndrome (MAS)**

Macrophage activation syndrome (MAS) is a potentially life-threatening complication of Still's disease characterised by interferon-gamma (IFN $\gamma$ )—driven systemic hyperinflammation. More than one-third of patients inadequately respond to high-dose glucocorticoids. Emapalumab, an anti-IFN $\gamma$  antibody, demonstrated efficacy and safety in a phase 2 pilot study in patients with MAS in Still's disease and an inadequate response to high-dose glucocorticoids.

## **About NASP, formerly SEL-212**

NASP is a novel investigational medicine designed to reduce serum urate (SU) levels in people with uncontrolled gout, potentially reducing harmful tissue urate deposits which when left untreated can



lead to debilitating gout flares and joint deformity. NASP is administered every 4-weeks as a sequential, two-component, infusion therapy consisting of tolerogenic nanoencapsulated sirolimus (NAS) which mitigates the formation of anti-drug antibodies (ADAs) and a uricase, pegadricase (P), which reduces serum uric acid. ADAs develop due to unwanted immune responses to biologic medicines, reducing their efficacy and tolerability, which remains an issue across multiple therapeutic modalities and disease states including uncontrolled gout.

# About VONJO® (pacritinib)

VONJO is a kinase inhibitor that is indicated in the US for the treatment of adults with intermediate or high-risk primary or secondary (post-polycythemia vera or post-essential thrombocythemia) myelofibrosis with a platelet count below  $50 \times 10^9$ /L. This indication is approved under accelerated approval based on spleen volume reduction. Continued approval for this indication may be contingent upon verification and description of clinical benefit in a confirmatory trial(s).

#### **About VEXAS**

VEXAS syndrome is a disease that causes inflammatory and hematologic (blood) manifestations. The syndrome is caused by mutations in the *UBA1* gene of blood cells and acquired later in life. The condition is not genetically inherited.

#### **About Sobi**

Sobi is a global biopharma company unlocking the potential of breakthrough innovations, transforming everyday life for people living with rare diseases. Sobi has approximately 1,900 employees across Europe, North America, the Middle East, Asia and Australia. In 2024, revenue amounted to SEK 26 billion. Sobi's share (STO:SOBI) is listed on Nasdaq Stockholm. More about Sobi at sobi.com and LinkedIn.

### **Contacts**

For details on how to contact the Sobi Investor Relations Team, please click <u>here</u>. For Sobi Media contacts, click <u>here</u>.