



Corporate Presentation

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- Our limited operating history make it difficult to evaluate our future prospects and the risks and challenges we may encounter. We have incurred significant losses since inception, we have not generated any revenue from product sales to date and may never do so.
- We depend heavily on the commercial success of ZELSUVMI, which was approved for marketing by the FDA but has not commercially launched yet. There is no assurance that our commercialization efforts will be successful or that we will be able to generate profit at the levels or within the timing we expect.
- Our discussions to acquire the complimentary FDA-approved product may not be consummated or we may not realize the expected benefits of such transaction.
- Even if the Proposed Transaction and the proposed private placement transaction are successful, we will require substantial additional capital to finance our operations in the future. If we are unable to raise such capital when needed, or on acceptable terms, we may be forced to delay, reduce or eliminate our development and pre-clinical programs, current or future clinical trials or future commercialization efforts.
- Our expectations regarding our cash runway and ability to reach data inflection points are based on numerous assumptions that may prove to be untrue; we may be required to raise capital sooner than anticipated and our exposure to certain contingent liabilities and contractual obligations may be greater than anticipated.
- We operate in an intensely competitive market that includes companies with greater financial, technical and marketing resources than us.
- Failure to manage our growth effectively could cause our business to suffer and have a material adverse effect on our operating results and financial condition as well as our ability to execute our business strategy. as.
- As our costs increase, we may experience fluctuations in our operating results, which could make our future operating results difficult to predict or cause operating results to fall below analysts’ and investors’ expectations.
- Our clinical trials of our other product candidates may not be successful. We may be unable to advance such product candidates through clinical development for safety or efficacy or other reasons, or commercialize our product candidates, if approved, and we may experience significant delays in doing so.
- Our current or future product candidates may cause adverse or other undesirable side effects that could delay or prevent their regulatory approval, limit the commercial profile of an approved label or result in significant negative consequences following marketing approval, if any.
- If we are unable to obtain and maintain patent and other intellectual property protection for our technology and product candidates or if the scope of the intellectual property protection obtained is not sufficiently broad, or we are delayed in bringing product candidates to market such that those products have a shorter period of patent exclusivity than we expect, our competitors could develop and commercialize technology and product candidates similar or identical to ours, and our ability to successfully commercialize our technology and/or product candidates may be impaired.
- We may be subject to intellectual property rights claims by third parties, which are costly to defend, could require us to pay significant damages and may disrupt our business and operations.
- We are party to license agreements with third parties pursuant to which we obtained licenses for certain intellectual property rights utilized in the development of our product candidates; termination of these rights or the failure to comply with obligations under these agreements could materially harm our business and prevent us from developing or commercializing our product candidates.
- The conditions to complete the Proposed Transaction may not be satisfied, we may not realize the expected benefits of the Proposed Transaction, or we may uncover liabilities following the consummation of the Proposed Transaction that we had not anticipated.
- The shares acquired in the proposed private placement transaction will be subject to registration with the SEC, and upon registration, the share price may be volatile due to a variety of factors, such as changes in the competitive environment in which we operate, the regulatory framework of the industry in which we will operate, developments in our business and operations and changes in our capital structure.

Merger of Pelthos Therapeutics and Channel Therapeutics (1/2)

Creates commercial stage therapeutics company focused on infectious skin diseases

Overview

- Pelthos Therapeutics Inc./LNHC (“Pelthos”), wholly owned subsidiaries of Ligand Pharmaceuticals, intend to merge with Channel Therapeutics, Inc. (NYSE American: CHRO), (“Channel”)
- The combined company will focus on commercializing Pelthos’ FDA approved product, Zelsuvmi™ (berdazimer) topical gel, 10.3%, a nitric oxide (NO) releasing agent for the topical treatment of *Molluscum contagiosum* in adults and pediatric patients 1 year of age or older
- The combined company will retain and evaluate Channel’s non-opioid pain therapeutic programs for the treatment of eye pain and surgical pain
- Transactions contemplated by merger agreement are subject to approval by the boards of directors of both companies
- Concurrent \$50M private placement to be consummated immediately prior to close via shares issued by CHRO
- Upon close, Channel is expected to be renamed “Pelthos Therapeutics, Inc.”

Management and Board

- Pelthos management team to lead company, with former Channel CEO Frank Knuettel assuming the role of Pelthos CFO
- Combined company’s board of directors will include Pelthos CEO Scott Plesha, two of Pelthos’ current directors, Matt Pauls and Peter Greenleaf, two directors selected by Ligand, and two directors from Channel’s current board of directors

Merger of Pelthos Therapeutics and Channel Therapeutics (2/2)

Creates commercial stage therapeutics company focused on infectious skin diseases

Transaction Summary

- To fund the pre-launch and commercialization activities for Zelsuvmi™, expected to launch in mid-2025, the lead PIPE investors provided \$12.1 million in bridge loans and anticipate lending up to an additional \$24 million in bridge loans prior to closing
 - Bridge loans will be repaid at closing and offset against the lead investors' \$50M investment commitments in the PIPE
- Pelthos intends to execute on a \$25M venture debt term loan and \$7M receivables line prior to closing, which would increase cash at closing to \$37M
- Assuming entry into the term loan and receivables line, the combined company's existing capital resources are expected to fund the launch of Zelsuvmi™ in the US and achieve cash-flow breakeven from operations in 2027
- Pelthos is in advanced discussions on the acquisition of a second FDA-approved, highly complementary pediatric infectious disease product that can be acquired for an estimated \$4.4M up front with \$7.2M of contingent milestones and royalties¹
 - The combined company's board of directors will evaluate this acquisition opportunity
 - If completed, additional capital will be required to support the commercialization of the acquired product
- The combined company's estimated cash runway assumes no investment in product acquisitions or any other acquisition opportunities, or pre-clinical or clinical development activities, and no other financings
- Pre-merger Channel stockholders are expected to own approximately 8% of the combined Company, pre-merger Pelthos stockholders are expected to own approximately 34% of the combined Company, and pre-merger private placement investors are expected to own approximately 58% of the combined Company

¹) The parties have not entered into any definitive agreement for this potential acquisition and there can be no assurance that it will be consummated.

Introduction to Pelthos Therapeutics

Scalable biopharmaceutical company with an FDA approved product with launch targeted in mid-2025

Company Overview

- Pelthos is a biopharmaceutical company with a validated, novel, nitric oxide technology platform, primarily focused on commercializing innovative therapeutic products for skin diseases
- Pelthos' lead product, Zelsuvmi™, is an FDA-approved, designated Novel Product for *Molluscum contagiosum* ("MC"), a highly-infectious dermatological infection, indicated for patients >1 year
 - *Molluscum contagiosum* has an estimated prevalence of up to 5% of the US population, approximately 17 million people^{1,2}, with an annual incidence estimated to be 3-6 million people, predominantly children, people with compromised immune systems, and people sexually active with a partner infected with molluscum^{3,4}
 - First and only at-home treatment for molluscum that can be administered by patients, parents or other caregivers rather than by medical professionals over multiple visits to an office or other medical setting⁵
 - Unique mechanism of action with robust patent protection of 10+ years from approval⁶
 - Zelsuvmi™ demonstrated statistically significant, consistent, and clinically meaningful efficacy at every point measured over the entire 12-week length of the largest Phase 3 clinical study ever done for molluscum contagiosum⁷
- Ligand Pharmaceuticals acquired the rights to Zelsuvmi™ and associated assets in September 2023
- Utilizes a proprietary nitric oxide technology platform to manufacture the Active Pharmaceutical Ingredient ("API") at commercial scale in a sole source, ~15,000 sq ft purpose-built facility at the company's headquarters in Research Triangle Park, NC

Product Market Overview

3-6M

Child
Prevalence^{3,4}

~17M

U.S.
Patient
Population

Key Product Benefits



Novel Method
of Action



Broad Utility



Compelling
Safety Profile



Convenience &
Flexibility

Phase 3 Clinical Highlights



In clinical trials Zelsuvmi™ patients achieved a **mean and median reduction in lesion count of 58% and 82%**, respectively, after 12 weeks

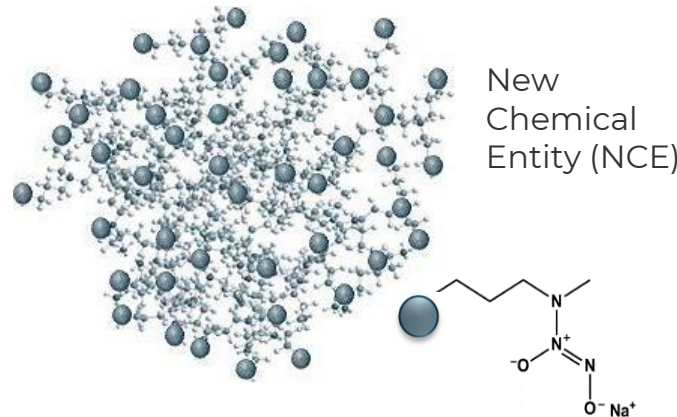
1) US Census Bureau. QuickFacts: United States. 2022. 2) Hebert AA, Bhatia N, Del Rosso JQ. Molluscum contagiosum: epidemiology, considerations, treatment options, and therapeutic gaps. J Clin Aesthet Dermatol. 2023 Aug;16(8 Suppl 1):S4-S11. 3) Olsen JR, Gallacher J, Piquet V, Francis NA. Epidemiology of molluscum contagiosum in children: a systematic review. Fam Pract. 2014 Apr;31(2):130-6. 4) US Census Bureau. United States population by age and sex. 2022. 5) Eichenfield LF, McFalda W, Brabec B, Siegfried E, Kwong P, McBride M, et al. Safety and efficacy of VP-102, a proprietary, drug-device combination product containing cantharidin, 0.7% (w/v), in children and adults with molluscum contagiosum: two phase 3 randomized clinical trials. JAMA Dermatol. 2020;156(12):1315-23. 6) Zelsuvmi FDA Orange Book Filings 7) Browning JC et al. Efficacy and Safety of Topical Nitric Oxide-Releasing Berdazimer Gel in Patients With Molluscum Contagiosum: A Phase 3 Randomized Clinical Trial. JAMA Dermatol. 2022 Aug 1;158(8):871-878.

Nitricil™ is Pelthos' Clinically Proven Proprietary Nitric Oxide-Based Technology Platform

Nitricil™

- ✓ **Stable storage¹**
 - Druggable form of nitric oxide with shelf-life stability
- ✓ **Therapeutic quantities¹**
 - High loading capacity
- ✓ **Tunability¹**
 - pH-controlled hydrolysis that releases nitric oxide
- ✓ **Engineered macromolecule¹**
 - Targets nitric oxide delivery to the skin
 - Minimizes systemic exposure

Berdazimer Sodium



Nitric Oxide Overview

- **Science – Molecule of the Year (1992)**
- **Nobel Prize in medicine (1998) awarded for nitric oxide as a signaling molecule in the cardiovascular system**
- **>200,000 peer reviewed manuscripts**
- **Broad spectrum antimicrobial, anti-bacterial, and anti-viral**
- **Immunomodulatory agent²**
 - Decreases key biomarkers for inflammation
 - Inhibits T cell proliferation
 - Results in NO-derived regulatory T-cells

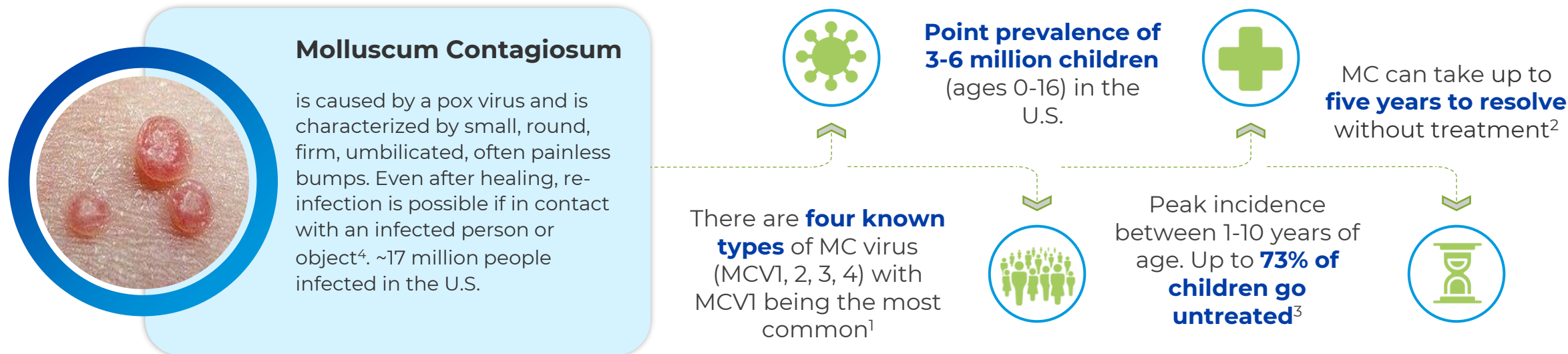
Pelthos' patent-protected Nitricil™ technology overcomes the challenges associated with nitric oxide delivery to create macromolecular new chemical entities¹



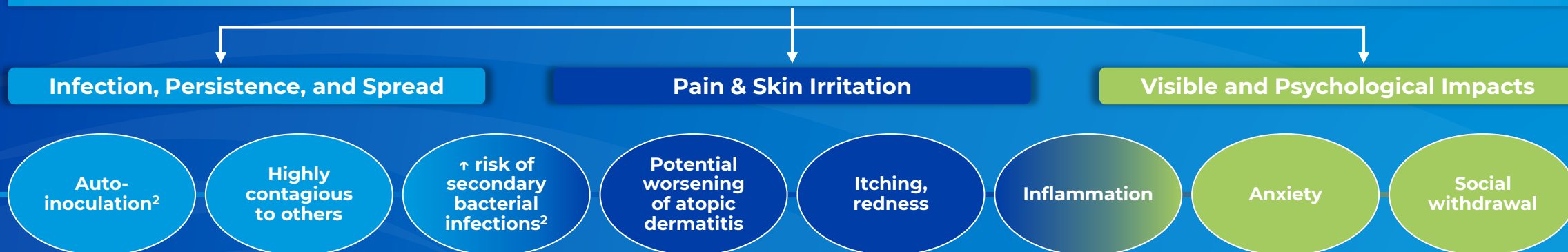
Zelsuvmi™

Molluscum Contagiosum

A highly infectious viral condition primarily affecting children 1 year of age or older



Untreated Molluscum Contagiosum Has Severe Effects



1) Hebert AA, Bhatia N, Del Rosso JQ. Molluscum Contagiosum: Epidemiology, Considerations, Treatment Options, and Therapeutic Gaps. J Clin Aesthet Dermatol. 2023 Aug;16(8 Suppl 2):S4-S11. PMID: 37636018; PMCID: PMC10453394. 2) Ludmann P. American Academy of Dermatology. Molluscum contagiosum. 4 October 2023. 3) Basdag H, Rainer BM, Cohen BA. Molluscum contagiosum: to treat or not to treat? Experience with 170 children in an outpatient clinic setting in the northeastern United States. Pediatr Dermatol. 2015;32(3):353-357. doi:10.1111/pde.12504. 4) Schaffer JV, Berger EM. Molluscum Contagiosum. JAMA Dermatol. 2016;152(9):1072. doi:10.1001/jamadermatol.2016.2367. 5) CDC. Clinical Overview of Molluscum Contagiosum. Jan 2025

Zelsuvmi™ Is the First and Only At-Home Treatment for MC That Offers a First-Line Efficacious and Safe Treatment Option

Zelsuvmi™ Vision

Zelsuvmi™ is the **first and only at-home treatment** that could **revolutionize how MC is treated** today for patients greater than 1 year old



FDA-approved treatment for MC

Approved by the FDA in January 2024 with anticipated launch in mid-2025



Safely reduces lesion count, minimizing pain or scarring

Reduces lesion counts from an average of 20 to ≤ 1 in 43.5% of patients within 12 weeks, with no keloid or hypertrophic scarring¹



First product to be administered from the convenience of home

The **first and only at-home, practical treatment option** that can be applied by patients or caregivers, reducing the need for in-office visits

1) Browning JC et al. Efficacy and Safety of Topical Nitric Oxide-Releasing Berdazimer Gel in Patients With Molluscum Contagiosum: A Phase 3 Randomized Clinical Trial. JAMA Dermatol. 2022 Aug 1;158(8):871-878.

Zelsuvmi™ Has the Potential to Shift MC Treatment Paradigm

Current Options



- Other available topical treatment **requires in-office visits every 3 weeks²**



- **Painful, destructive** treatments³



- Necessitates travel to HCP offices, adding to the **time burden for MC patients and caregivers²**



- Remaining treatment options such as off-label drugs / natural remedies have **unproven efficacy⁴**



**Breakthrough Product,
Breakthrough Results**

58.1%

**Mean MC Lesion
reduction count⁽¹⁾**

Zelsuvmi™

- **Daily** application that can be **started Immediately**
- **Attractive safety profile** demonstrated in clinical trials with no / minimal scarring^{5,6}
- **First FDA approved medication** for molluscum that can be applied at home by patients or caregivers⁵
- **Demonstrated, proven efficacy** across key primary and secondary endpoints in clinical trials⁶

1.) Least-squares mean count reduction. See Figure 9: Browning JC, Hebert A, Enloe C, Cartwright M, Maeda-Chubachi T. Berdazimer Gel 10.3% is a Clinically Meaningful Therapeutic Intervention for Molluscum Contagiosum. Abstract and poster presented at Fall Clinical 2024. Las Vegas, NV. October 24-27, 2024. 2.) Eichenfield LF, Kwong P, Gonzalez ME, et al. Safety and Efficacy of VP-102 (Cantharidin, 0.7% w/v) in Molluscum Contagiosum by Body Region: Post hoc Pooled Analyses from Two Phase III Randomized Trials. J Clin Aesthet Dermatol. 2021;14(10):42-47. 3.) Hebert AA, Bhatia N, Del Rosso JQ. Molluscum Contagiosum: Epidemiology, Considerations, Treatment Options, and Therapeutic Gaps. J Clin Aesthet Dermatol. 2023;16(8 Suppl 1):S4-S11. 4.) Ong SK, Hoft I, Siegfried E. Analysis of over-the-counter products marketed to treat molluscum contagiosum. Pediatr Dermatol. 2021;38(5):1400-1403. doi:10.1111/pde.14776. 5.) Zelsuvmi Package Insert. 6.) Sugarman JL, Hebert A, Browning JC, et al. Berdazimer gel for molluscum contagiosum: An integrated analysis of 3 randomized controlled trials. J Am Acad Dermatol. 2024;90(2):299-308. doi:10.1016/j.jaad.2023.09.066

Zelsuvmi™ Is Easy to Apply and Can be Administered at Home

Application Overview



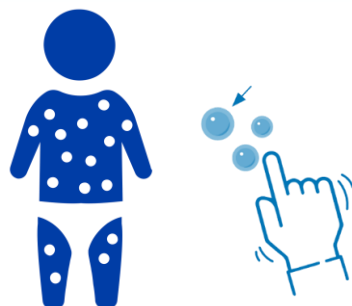
Gel containing
berdazimer
sodium



Hydrogel that
promotes nitric
oxide release



Zelsuvmi™
(berdazimer) topical gel, 10.3%



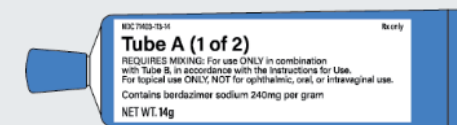
*An even, thin layer of
mixed gel is then applied to each bump
right away*

Zelsuvmi™'s simple, safe, and effective at-home administration is a novel therapeutic for the treatment of this infectious condition

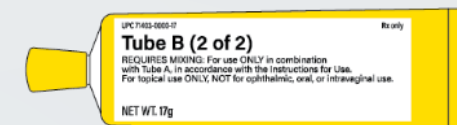
Packaging Overview



Zelsuvmi™ (berdazimer) topical gel, 10.3% is supplied in a carton containing two tubes (NDC 83787-103-31)



Tube A (14 g) with blue label containing berdazimer sodium in an opaque white to off-white gel (NDC 83787-113-14)



Tube B (17 g) with yellow label containing translucent to opaque white to off-white gel (NDC 83787-0000-17)

Zelsuvmi™ Efficacy Shown in Phase 3 Clinical Trials

Population

808 Males, 790 Females



Immunocompetent children and adults aged ≥6 months with 3-70 raised MC lesions

Mean age: 6.7 years
(Range: 0.9 – 76.6 years)

Intervention



1,598 participants randomized



917 - Zelsuvmi™

Topical, once-daily application of Zelsuvmi™ (berdazimer gel, 10.3%) to all active MC lesions for up to 12 weeks



681 - Vehicle

Topical, once-daily application of vehicle control gel to all active MC lesions for up to 12 weeks

Key Study Highlights

Patients who applied Zelsuvmi™ for 12 weeks achieved a **mean and median reduction in lesion count of 58% and 82%**, respectively, compared to 36% and 43% for patients who applied a vehicle control gel

Mean Lesion Count Reduction⁽¹⁾

58.1%

Zelsuvmi

35.7%

Control

Median Lesion Count Reduction⁽¹⁾

82.4%

Zelsuvmi

42.6%

Control

B-SIMPLE4 Study Locations



55 Clinics
across the US

Safety

- Application site reactions were the most common adverse reaction associated with Zelsuvmi™
- Common application site reactions included mild pain and mild erythema (caused by increased blood flow)
- Minimal scarring incidences witnessed

B-SIMPLE4 Primary Outcome

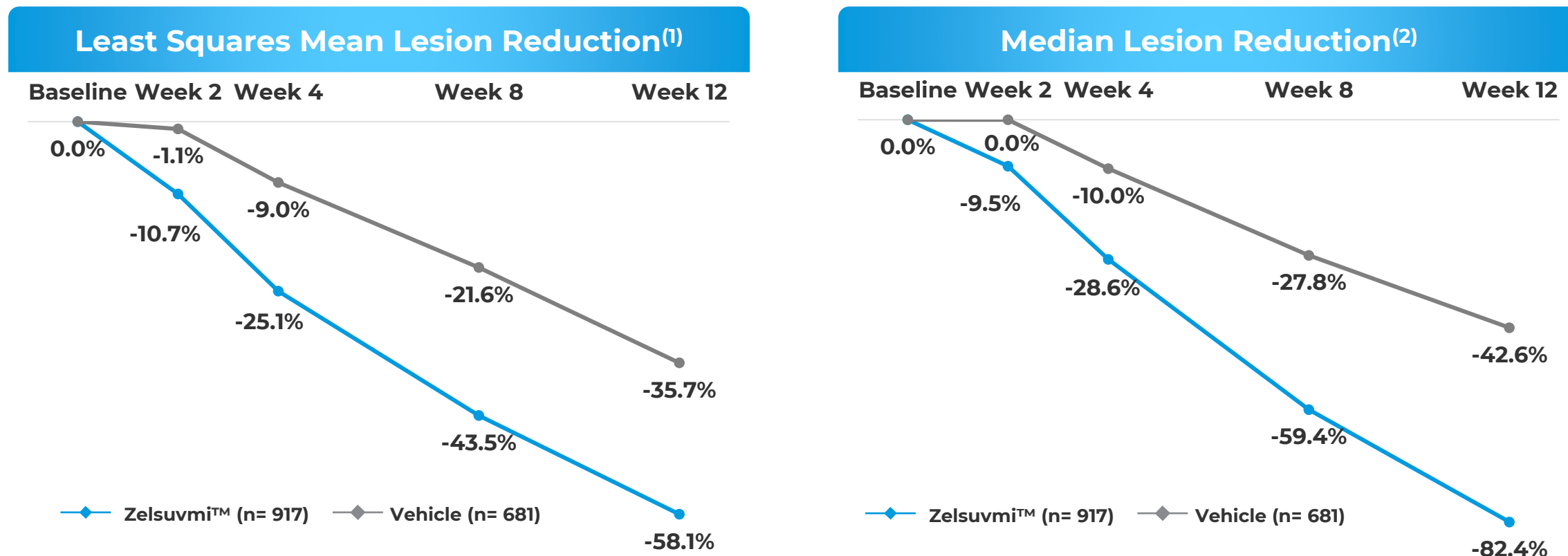
32.4% of patients treated with Zelsuvmi™ achieved complete clearance of MC lesions at week 12, compared to 19.7% of patients treated with vehicle control gel in the BSIMPLE-4 pivotal Phase 3 trial

¹⁾ p-value <0.0001, favoring Zelsuvmi™.

Source: Sugarman JL, Hebert A, Browning JC, Paller AS, Stripling S, Green LJ, Cartwright M, Enloe C, Wells N, Maeda-Chubachi T. Berdazimer gel for molluscum contagiosum: An integrated analysis of 3 randomized controlled trials. J Am Acad Dermatol. 2023 Oct 5;S0190-9622(23)02890-6. doi: 10.1016/j.jaad.2023.09.066.Epub ahead of print. PMID: 37804936.

Phase 3 Trials

Zelsuvmi™ showed statistically significant benefit vs. vehicle after 2 weeks of therapy and throughout the entire 12-week length of the Phase 3 studies



P<0.0001 at all time points, favoring Zelsuvmi™

1) Figure 9: Browning JC, Hebert A, Enloe C, Cartwright M, Maeda-Chubachi T. Berdazimer Gel 10.3% is a Clinically Meaningful Therapeutic Intervention for Molluscum Contagiosum. Abstract and poster presented at Fall Clinical 2024. Las Vegas, NV. October 24-27, 2024. 2) Figure 10: Browning JC, Hebert A, Enloe C, Cartwright M, Maeda-Chubachi T. Berdazimer Gel 10.3% is a Clinically Meaningful Therapeutic Intervention for Molluscum Contagiosum. Abstract and poster presented at Fall Clinical 2024. Las Vegas, NV. October 24-27, 2024.

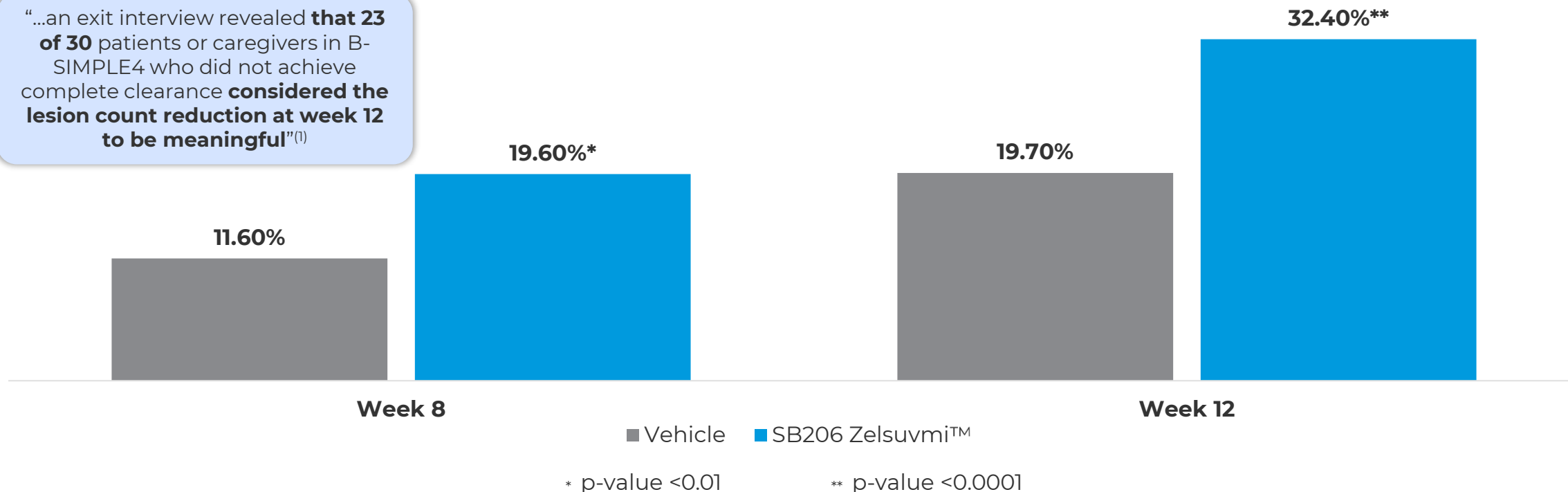
B-SIMPLE4 Phase 3 Trial

Complete clearance is hard to achieve due to the nature of molluscum and similar dermatological conditions

Percentage of Subjects With Complete Clearance of Treatable Lesions

Primary Efficacy Endpoint at Week 12 N= 891 Subjects

“...an exit interview revealed **that 23 of 30** patients or caregivers in B-SIMPLE4 who did not achieve complete clearance **considered the lesion count reduction at week 12 to be meaningful**”⁽¹⁾



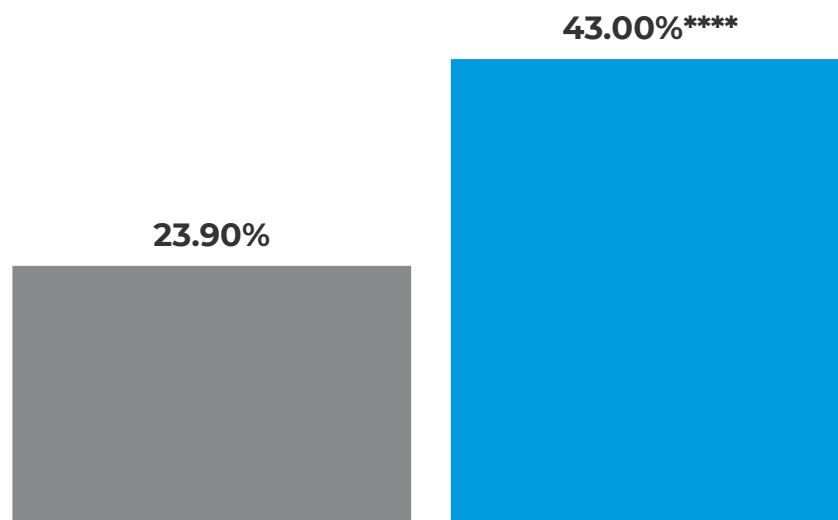
(1) Browning JC, Cartwright M, Thorla I Jr, Martin SA, Olayinka-Amao O, Maeda-Chubachi T. A Patient-Centered Perspective of Molluscum Contagiosum as Reported by B-SIMPLE4 Clinical Trial Patients and Caregivers: Global Impression of Change and Exit Interview Substudy Results. Am J Clin Dermatol. 2023 Jan;24(1):119-133. doi: 10.1007/s40257-022-00733-9. Epub 2022 Oct 26. PMID: 36287306; PMCID: PMC9870829.
Source: Total enrollment of 891 (1:1 randomization). Two previously completed Phase 3 studies reported directionally similar results and both are included in the NDA submission as confirmatory studies. Data on File. Pelthos. 2025.

B-SIMPLE4 Phase 3 Trial (cont.)

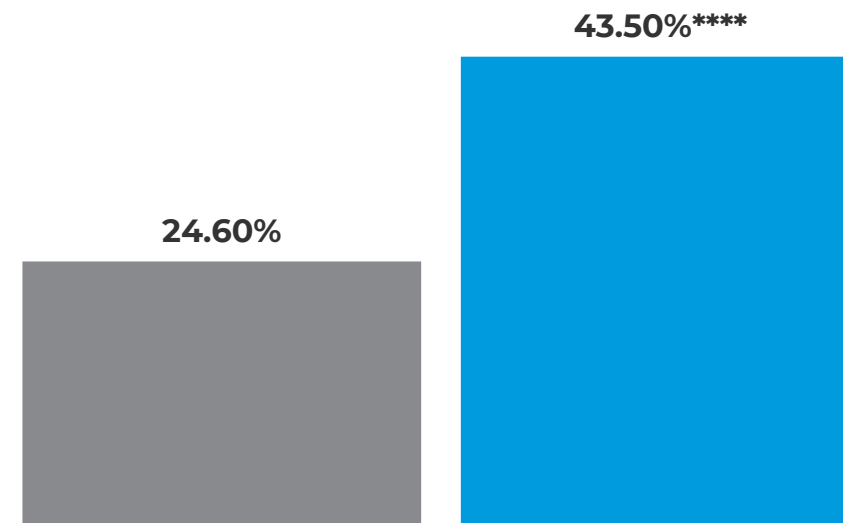
Zelsuvmi™ showed significant benefit over vehicle, including 43.5% of patients administered Zelsuvmi™ having zero or one remaining lesions after 12 weeks

Secondary Endpoints

90% Clearance at Week 12



0 or 1 Remaining Lesions at Week 12



■ Vehicle ■ SB206 Zelsuvmi™

* p-value <0.05

** p-value <0.01

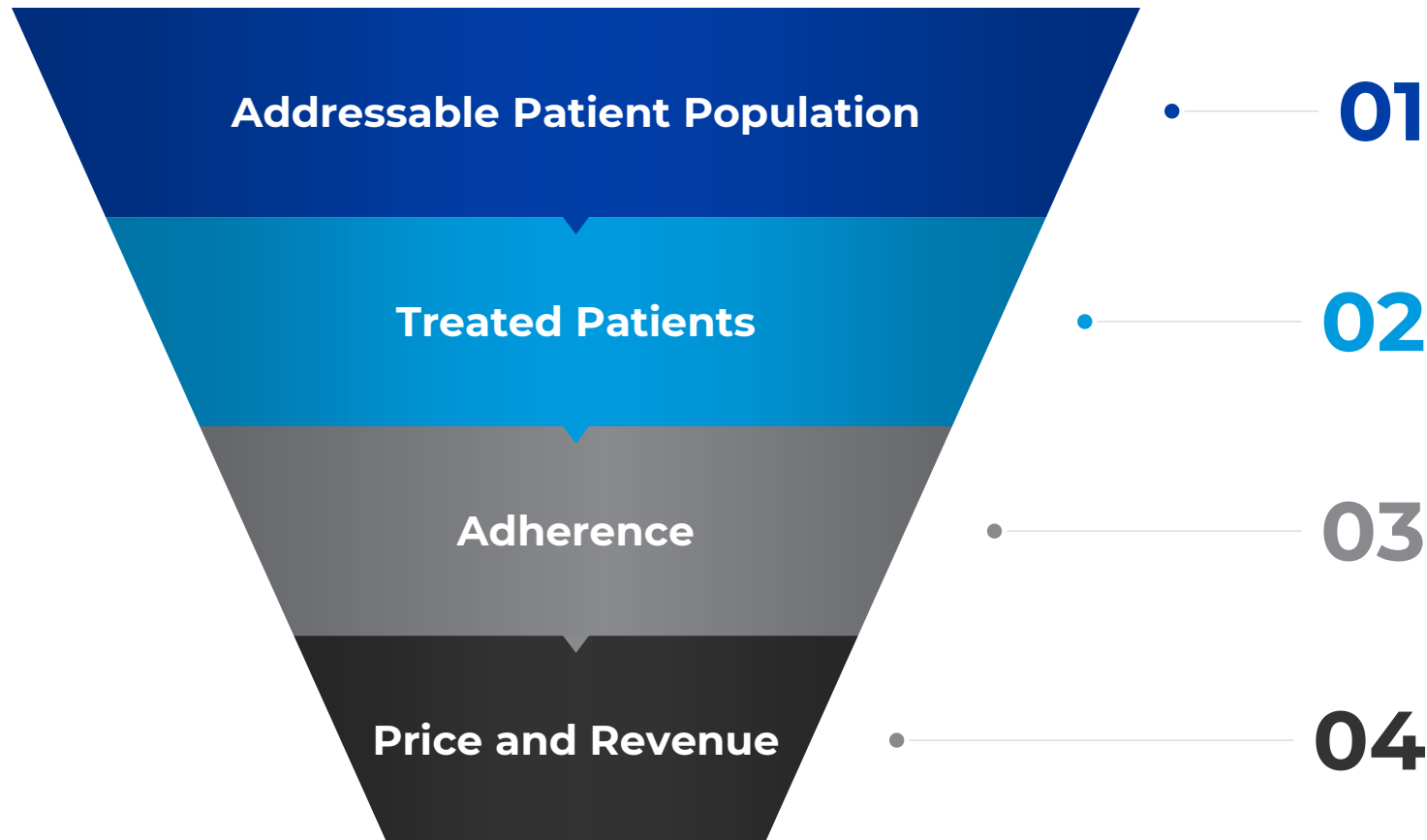
*** p-value <0.001

**** p-value <0.0001

(1) Browning JC et al. Efficacy and Safety of Topical Nitric Oxide-Releasing Berdazimer Gel in Patients With Molluscum Contagiosum: A Phase 3 Randomized Clinical Trial. JAMA Dermatol. 2022 Aug 1;158(8):871-878.

Source: Total enrollment of 891 (1:1 randomization). Two previously completed Phase 3 studies reported directionally similar results and both are included in the NDA submission as confirmatory studies

Activating Key Leverage Points Is Essential to Maximize the Commercial Potential of Zelsuvmi™



Key Leverage Points

Driving efficient disease awareness and patient presentation to physicians will be critical to drive diagnosis and build the market, given the large population of undiagnosed MC patients

Educating HCPs on the significant Zelsuvmi™ lesion reduction data will be critical to drive **urgency to treat**, converting untreated and complementing procedure-treated patients with Zelsuvmi™

Investing in strategies to **educate on therapy administration and the importance of persistence** will be necessary to maximize adherence

Developing best-in-class patient access to reduce Zelsuvmi™ adoption barriers and accelerate uptake

Zelsuvmi™ is a Breakthrough Product

“When this becomes available, it will be a gamechanger in treating molluscum.”

-Dermatologist

“There is nothing else like it for molluscum. It works differently than destruction.”

-Dermatologist

“Finally, I will be able to send the mom home with something instead of insisting they bring their child back for multiple procedures.”

-Dermatologist / Pediatric Dermatologist

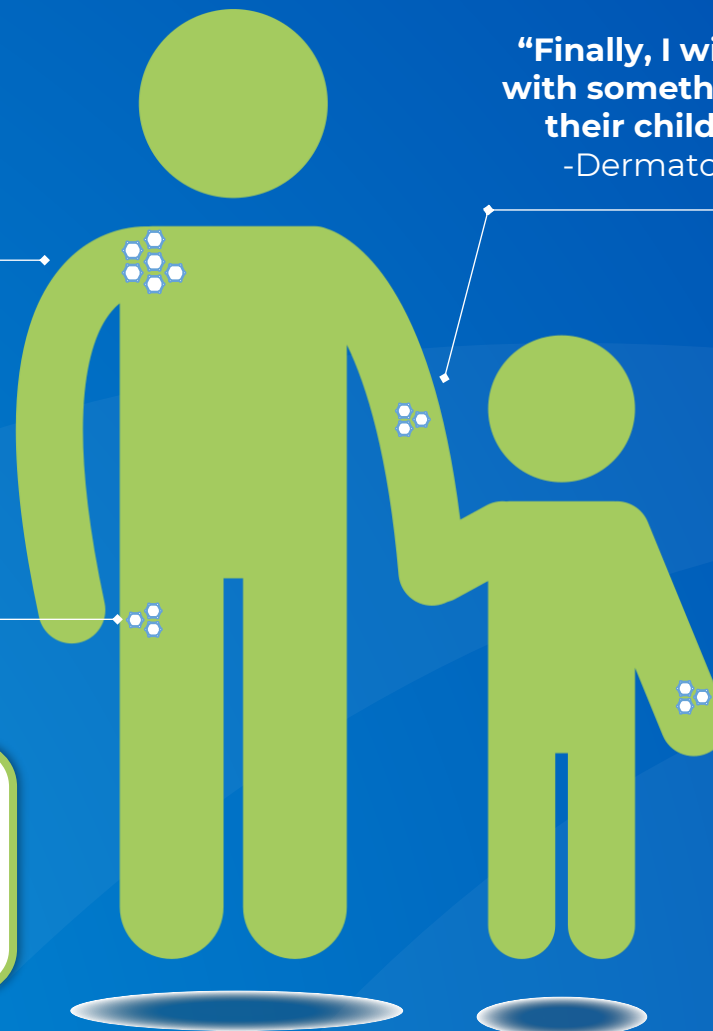
“To me, 40-45% experiencing 90% clearance after 12 weeks... I’m talking about [dealing with molluscum for] 3 years, but 3 months? I would be highly impressed... 90% is really good enough for me. She’s got 12-ish spots now, and if that were 1-2, she would have more functionality and be able to use her whole hand... 90% would make it so much more manageable.”

-Patient / Caregiver Feedback



“Zelsuvmi is a breakthrough.”

-Mark D. Kaufmann, MD, FAAD⁽¹⁾



***Molluscum contagiosum clinical experts, including KOLs and study investigators, are available for questions upon request**

Source: Pelthos discussions with key opinion leaders (KOLs) in the pediatric, dermatology, and infectious disease community*

(1) Zelsuvmi™ FDA approval press release



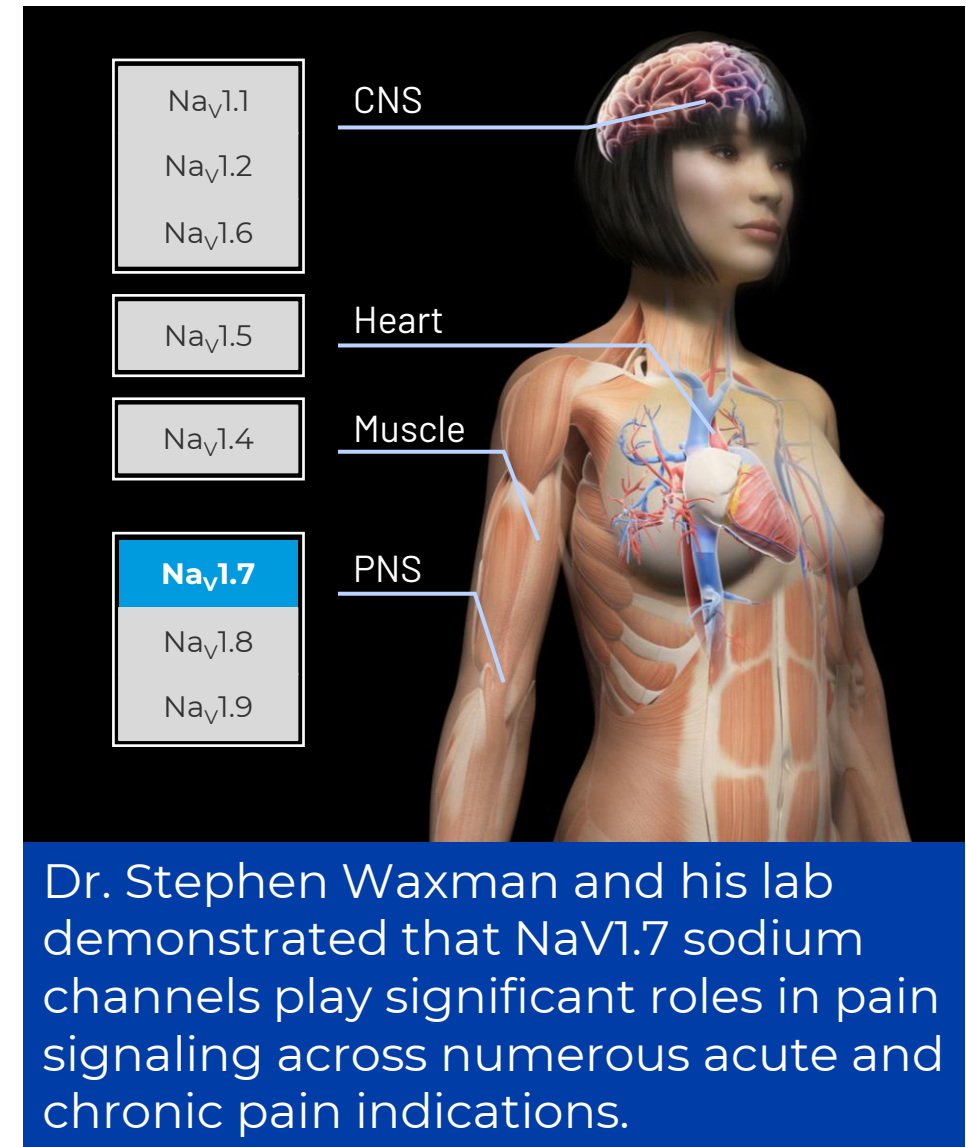
Channel Therapeutics' Pipeline Programs

Sodium Channels (NaVs) and Pain

Pain Perception

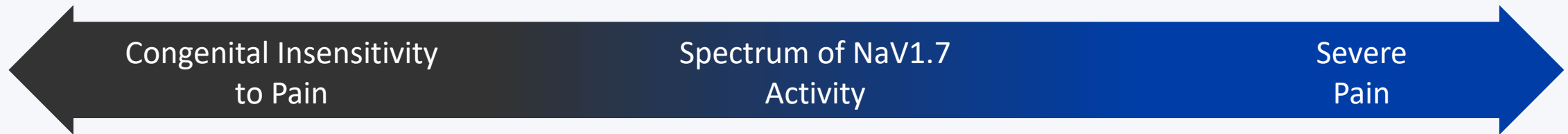
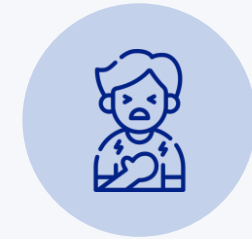
Sodium channels play a crucial role in pain transmission.

- Action potentials are the electrical waves that the body uses to send information through nerves.
 - These action potentials are created through fluxes of various ions, including sodium ions, across the nerve fiber wall.
 - NaV1.7 is thought to be responsible for a slow initial upward start of the action potential that leads to a rapid upward component that is thought to be mediated by NaV1.8.
 - In this respect, NaV1.7 and NaV1.8 may work together to allow a signal to progress through a nerve fiber.



Why NaV1.7 is a Good Target for Pain Treatment

Genetic validation suggests NaV1.7 suppression is an attractive pharmacological target for pain management



Congenital Insensitivity to Pain

Lack of NaV1.7 (Rare condition initially described in a family from Pakistan)

Severe Pain

Excessive NaV1.7 activity (e.g. Erythromelalgia)

CC8464 (Neuropathic Pain) – Development Status

▶ Preclinical

- Potent inhibitor of human NaV1.7; Subtype selective
- Demonstrated *in vivo* efficacy in several rodent models of pain: Acute, chronic neuropathic, inflammatory, visceral and post-surgical
- No CNS and muscle/motor dysfunction effects

▶ Chemistry, Manufacturing, and Controls (CMC)

- Drug Substance: scaled up, cGMP API available
- Drug Product: tablet (active, 3 strengths and placebo) available for Phase 2.

▶ Toxicology

- Did not exhibit genotoxicity
- Toxicology data supports up to 3-month dosing in human clinical trials

▶ Clinical

- Four Phase 1 trials completed
- Occurrence of rashes may be addressed with gradual dose-escalation protocols
- Clinical data supports a Proof of Concept (“POC”) study

Depot Treatment Program Plan

► Strategy

- Four novel depot and one novel injectable formulations of CC8464 have been created. The intent is to use these to allow for nerve blocks for post-operative pain for several days after surgery (e.g. shoulder surgery, knee surgery).
- Animal efficacy and PK studies are ongoing.

► Potential model for POC Study

- Demonstrate pain reduction in an experimental pain model utilizing interscalene nerve blocks combined with a painful stimuli to the arm
- Alternative human pain models are still being considered

Eye Pain

Eye pain is common with both acute and chronic etiologies that include:

Corneal Induced Chronic Pain from Dry Eye/LASIK, Post Photorefractive keratectomy (PRK) surgery, second eye cataract surgery, acute corneal abrasion, Ectropion/ Entropion, Acute closed angle glaucoma, Uveitis, Iritis/Scleritis

Existing therapies include topical NSAIDS (e.g. Bromfenac) and topical steroids coupled with systemic analgesics/opiates. Chronic use of local anesthetic drops is contraindicated and dangerous.



► **Prevalence – Corneal Abrasion Example**

- Common
- There are approximately 3.75 million cases of corneal abrasion or foreign bodies in the United States every year

► **Incidence - Dry Eye Disease Example**

- Common
- There are approximately 16 million cases of dry eye disease in the United States every year

Eye Pain Treatment Program Plan – CT2000

► Strategy

- Conduct ocular safety test in rabbits – completed. Showed that up to 20mg/mL eye drops were safe (GLP chronic tox and ocular irritation studies all clean)
 - Conduct ocular efficacy in acute and chronic animal models – completed. Showing fast onset and durable effect at single and multiple doses in a dry eye model (mouse)
-

► Potential model for POC Study

- Demonstrate pain reduction with first study expected to target moderate to severe dry eye pain
- Protocol and investigator brochure are prepared for the IRB review in Australia

Key Highlights



FDA Approved Product

In January 2024, the FDA approved Zelsuvmi™ as the first and only at-home treatment aimed to revolutionize how MC is treated today for patients ≥ 1 year old



Significant Unmet Need and Sizeable Market Opportunity

Molluscum contagiosum is a highly contagious skin infection that currently affects 3-6M children in the US and up to 5% of the general population



Zelsuvmi™ Differentiated Characteristics

Zelsuvmi™ is a topical gel that uses proprietary nitric oxide release technology and is applied once daily at-home with minimal use restrictions; opportunity to replace and complement current approved treatment options that are painful and require in-person visits



Strong, Impactful Clinical Results

In the combined results from the three Phase 3 clinical trials, patients who applied Zelsuvmi™ for 12 weeks achieved a mean and median reduction in lesion count of 58% and 82%, respectively, compared to 36% and 43% for patients who applied a vehicle control gel



Barriers to Entry

Pelthos' bespoke manufacturing processes require a dedicated line and manufacturing of API under extremely high pressures with stringent safety protocols and procedures; robust set of FDA Orange Book listed patents



Biopharmaceutical Platform Poised for Growth

Pelthos is strategically positioned to execute and integrate complex, synergistic acquisitions, serving as a platform for investors seeking a strong foothold in the specialty biopharmaceutical market



Financial Opportunity

Zelsuvmi™ has a planned US commercial launch in mid-2025; Channel Therapeutics' pipeline also has several sodium channel targeting programs