

# RECURRENT RESPIRATORY PAPILOMATOSIS (RRP)



## A CHRONIC HPV-RELATED RARE DISEASE

- RRP affects ~14,000 people in U.S., 1.8 per 100,000 new adult cases annually
  - Characterized by small, wart-like growths (papillomas) in the respiratory tract
  - Repeated surgery is standard of care
  - Severe RRP may require hundreds of surgeries over a lifetime
- Every surgery entails:
  - **Risk:** potential of irreversible damage to vocal cords
  - **Cost:** impact to quality of life, financial
- Patients and their physicians want a therapeutic alternative that addresses underlying cause of RRP/eliminates need for surgery

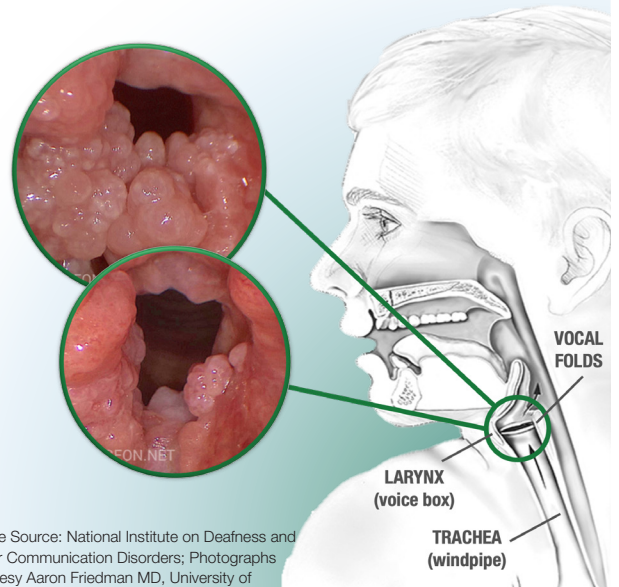


Image Source: National Institute on Deafness and Other Communication Disorders; Photographs courtesy Aaron Friedman MD, University of Cincinnati College of Medicine

“RRP patients will tell you that even one reduction in the number of disruptive, invasive surgeries they face would be life-changing.”

– Kim McClellan, President, RRP Foundation

## INO-3107: Potential Treatment for RRP in Adults

RRP occurs when patients mount an ineffective immune response to HPV-6 and HPV-11 – the strains of HPV that cause RRP. INOVIO’s DNA immunotherapy candidate INO-3107 is designed to enable the immune system to generate new T-cells that can seek out and kill HPV-6 and HPV-11 infected cells, resulting in less papilloma growth and fewer surgeries. In a Phase 1/2 trial of 32 participants (RRP-001), 72% of patients saw a 50 to 100% reduction in the number of surgeries in the first year after starting treatment with INO-3107. A retrospective study involving 28 of the original trial participants (RRP-002) showed this number increasing to 86% in the second year with no additional dosing; half of those patients required no surgeries at all.

In December 2025, the FDA accepted INOVIO’s BLA for INO-3107 for review under the accelerated approval program as a potential treatment for adults with RRP. As part of the submission, INOVIO requested a priority review, which is typically 6 months. The FDA granted a standard 10-month review with a Prescription Drug User Fee Act (PDUFA) target date set for October 30, 2026. In the file acceptance letter the FDA noted as a potential review issue its preliminary conclusion that the company had not provided adequate information to justify eligibility for the accelerated approval pathway. INOVIO continues to strongly believe that INO-3107 fulfills the criteria for accelerated approval, meeting a significant unmet need and providing a meaningful therapeutic benefit over existing treatments. The FDA has agreed to a yet-to-be-scheduled meeting to discuss eligibility for review under the accelerated approval program.

With Breakthrough Therapy and Orphan Drug designations from the FDA, as well as Orphan Drug designation in Europe and the Innovation Passport in the UK, we plan to advance INO-3107 for patients around the world.

Nasdaq: INO

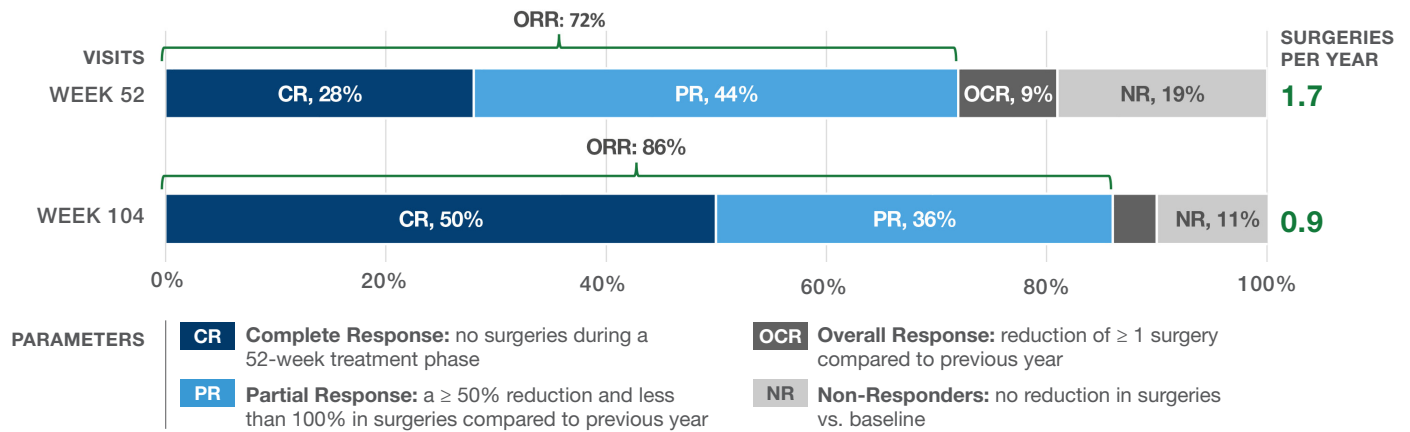


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# Promising Clinical Benefit Observed in RRP Patients

## INO-3107 CLINICAL EFFECTS OVER TIME



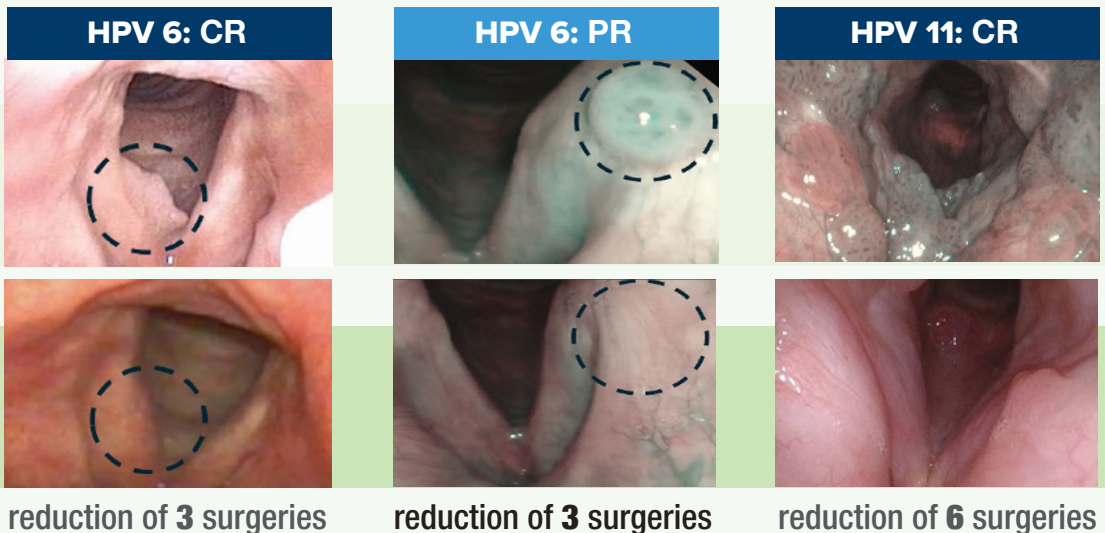
- Efficacy:** 72% of patients achieved a 50% to 100% reduction in surgeries (ORR) at week 52; 86% by week 104. Complete responses achieved by 28% of patients at week 52; 50% in second 12 month period at week 104
- Tolerability:** most frequently reported treatment-related adverse events (AEs) were transient, related to administration and low grade
- Patient-centric treatment:** Office-based administration that leaves doctor in control; CELLECTRA device easy to use by HCPs; no requirement to maintain minimal residual disease with surgery during dosing window

**DNA Medicines offer the ability to re-dose to further enhance the immune response and potentially extend clinical improvement**

### SNAPSHOT: PHASE 1/2 TRIAL

#### REDUCED NUMBER OF SURGERIES FOR PATIENTS WITH VARYING DISEASE BURDEN

Vocal cord images. RRP is a highly individualized disease and results of treatment with INO-3107 may vary.



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