



DIMERIX CLOSES SPP OVERSUBSCRIBED

MELBOURNE, Australia, 1 October 2021: Dimerix Limited (ASX: DXB) (**Dimerix** or the **Company**), a clinical-stage biopharmaceutical company, is pleased to announce the successful completion of its Share Purchase Plan ('**SPP**'), details of which were announced to the ASX on 16 August 2021 and which closed at 5.00pm (AEST) on Tuesday, 28 September 2021.

Applications received by eligible shareholders under the SPP were multiple times over the targeted amount of \$2m. As a result of the oversubscriptions, the Dimerix Board has resolved to accept \$4 million in the SPP and the Company will conduct a scale-back of applications in accordance with the terms of the SPP.

Under the SPP, approximately 20 million ordinary shares (**Shares**) will be issued at \$0.20 each, together with 10 million attaching unlisted options (**New Options**). Full details of the SPP and New Options are set out in a Prospectus which was lodged with ASIC and released to the ASX on 24 August 2021.

The Shares are expected to be issued Tuesday, 5 October 2021, and to commence trading on the ASX on Wednesday, 6 October 2021. Holding statements are expected to be dispatched to successful applicants on Thursday, 7 October 2021. Shares issued under the SPP will rank equally with all existing shares previously issued by the Company.

The Company thanks shareholders who participated in the SPP for their strong support. The SPP, together with the two Tranche Placement to institutional and sophisticated investors, raised in aggregate \$24.0 million and puts the Company in an excellent position to progress its three phase 3 trials which all have the ability to materially increase the value of the Company.

Refunds

Refunds for application monies as a result of the scale back will be processed by the Company's share registry, Automic Registry on Monday, 4 October 2021 and refund cheques will be dispatched once the NSW Government COVID-19 restrictions are lifted. To enable shareholders to receive their refund by Electronic Funds Transfer (EFT), shareholders are strongly encouraged to update their bank details on the Automic Investor Portal at https://investor.automic.com.au/#/home as soon as practicable.

Once the NSW Government COVID-19 restrictions are lifted, for the remaining refunds that have not been processed by EFT, cheques will be mailed in the post to the relevant shareholders.

Refunds to New Zealand Shareholders

Any New Zealand shareholders with New Zealand bank account details will need to contact Automic directly (either by email at hello@automic.com.au or by phone on 1300 288 664 (within Australia) or +61 2 9698 5414 (outside Australia) to provide their account details including the account name and number, name and address of the banking institution and SWIFT code, to expediate the refund process.

How to create an account with Automic

To create an account with Automic, please go to the Automic Investor Portal at (https://investor.automic.com.au/#/home) click on 'register' and follow the steps. Shareholders will require their holder number (Securityholder Reference Number (SRN) or Holder Identification Number (HIN)) to create an account with Automic, and bank details to complete their Portfolio profile for EFT refunds.

Existing Automic account holders

For shareholders who have an existing account with Automic (Note: with a username and password) are advised to take the following steps to update their bank details:

Log in to the Automic Investor Portal https://investor.automic.com.au/#/home using your username and password.

Select "Settings", followed by "Portfolio profile" and follow the prompts to update details.

For any queries regarding the Share Purchase Plan, refunds or Options, shareholders should contact Automic directly at hello@automic.com.au or on 1300 288 664 (within Australia) or +61 2 9698 5414 (outside Australia).

For further information, please visit our website at www.dimerix.com or contact:

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Authorised for lodgement by the Board of the Company

About Dimerix

Dimerix (ASX: DXB) is a clinical-stage biopharmaceutical company developing innovative new therapies in areas with unmet medical needs for global markets. Dimerix is currently developing its proprietary product DMX-200, for Focal Segmental Glomerulosclerosis (FSGS), respiratory complications associated with COVID-19 and Diabetic Kidney Disease, and is developing DMX-700 for Chronic Obstructive Pulmonary Disease (COPD). DMX-200 and DMX-700 were both identified using Dimerix' proprietary assay, Receptor Heteromer Investigation Technology (Receptor-HIT), which is a scalable and globally applicable technology platform enabling the understanding of receptor interactions to rapidly screen and identify new drug opportunities. Receptor-HIT is licensed non-exclusively to Excellerate Bioscience, a UK-based pharmacological assay service provider with a worldwide reputation for excellence in the field of molecular and cellular pharmacology.

About DMX-200

DMX-200 is the adjunct therapy of a chemokine receptor (CCR2) antagonist administered to patients already receiving an angiotensin II type I receptor (AT1R) blocker - the standard of care treatment for hypertension and kidney disease. DMX-200 is protected by granted patents in various territories until 2032.

In 2020, Dimerix completed two Phase 2 studies: one in FSGS and one in diabetic kidney disease, following a successful Phase 2a study in patients with a range of chronic kidney diseases in 2017. No significant adverse safety events were reported in any study, and all studies resulted in encouraging data that could provide meaningful clinical outcomes for patients with kidney disease. DMX-200 is also under investigation as a potential treatment for acute respiratory distress syndrome (ARDS) in patients with COVID-19.

Respiratory Complications associated with COVID-19

Patients hospitalised with COVID-19 typically have acute lung dysfunction due to the immune response to the virus. However, while the long-term effects on the lung from COVID-19 remain largely unknown, it is widely accepted that COVID-19 will result in acute injury in the same way as previous coronavirus infections such as SARS and MERS. As such, it is likely to result in chronic lung fibrosis in many patients, leading to poor quality of life, high ongoing hospitalisation requirements and ultimately a poor prognosis.

Globally, and prior to COVID-19, respiratory distress affected more than 3 million people a year in 2019 accounting for 10-15% of intensive care unit admissions, and approximately 200,000 patients each year in the United States. The market size of Acute Respiratory Distress Syndrome (ARDS) in the seven major markets was expected to grow to US\$934.81 million in 2026. However, it is also likely to grow further as a result of the 2020 pandemic. The death rate associated with ARDS is high, with overall mortality between 30 and 40%. The estimated average costs of treatment in an ICU unit with artificial ventilation total approximately US\$100,000 per patient, with the average length of stay in ICU as a result of ARDS being 25 days, and the average length of hospitalisation being approximately 47 days. However, there are also significant costs associated with additional post-discharge treatment. There is no known prevention of ARDS currently available, nor is there any known cure.

FSGS

FSGS is a rare disease that attacks the kidney's filtering units, where blood is cleaned (called the 'glomeruli'), causing irreversible scarring. This leads to permanent kidney damage and eventual end-stage failure of the organ, requiring dialysis or transplantation. For those diagnosed with FSGS the prognosis is not good. The average time from a diagnosis of FSGS to the onset of complete kidney failure is only five years and it affects both adults and children as young as two years old.⁴ For those who are fortunate enough to receive a kidney transplant, approximately 40% will get re-occurring FSGS in the transplanted kidney.⁵ At this time, there are no drugs specifically approved for FSGS anywhere in the world, so the treatment options and prognosis are poor.

FSGS is a billion-dollar plus market: the number of people with FSGS in the US alone is just over 80,000,⁶ and worldwide about 210,000. The illness has a global compound annual growth rate of 8%, with over 5,400 new cases diagnosed in the US alone each year⁶. Because there is no effective treatment, Dimerix has received Orphan Drug Designation for DMX-200 in both the US and Europe for FSGS. This is a special status granted to a drug to treat a rare disease or condition; the designation means that DMX-200 can potentially be fast-tracked, and receive tax and other concessions to help it get to market.

DMX-200 for FSGS has been granted Orphan Drug Designation by the FDA and EMA. Orphan Drug Designation is granted to support the development of products for rare diseases and qualifies Dimerix for various development incentives including: seven years (FDA) and ten years (EMA) of market exclusivity if regulatory approval is received, exemption from certain application fees, and an abbreviated regulatory pathway to approval.

Dimerix reported positive Phase 2a data in FSGS patients in July 2020.

References

¹ REMAP-CAP background: https://www.remapcap.org/background

² https://www.prnewswire.com/news-releases/acute-respiratory-distress-syndrome-ards-market-to-reach-usd-934-8-million-by-2026--reports-and-data-300940537.html

³ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4261619/

⁴ Guruswamy Sangameswaran KD, Baradhi KM. Focal Segmental Glomerulosclerosis (July 2021), online: https://www.ncbi.nlm.nih.gov/books/NBK532272/

⁵ DelveInsight Market Research Report (2020); Focal Segmental Glomerulosclerosis (FSGS)- Market Insight, Epidemiology and Market Forecast -2030

⁶ Nephcure Kidney International (2020); Focal Segmental Glomerulosclerosis, online https://nephcure.org/livingwithkidneydisease/understanding-glomerular-disease/understanding-fsgs/