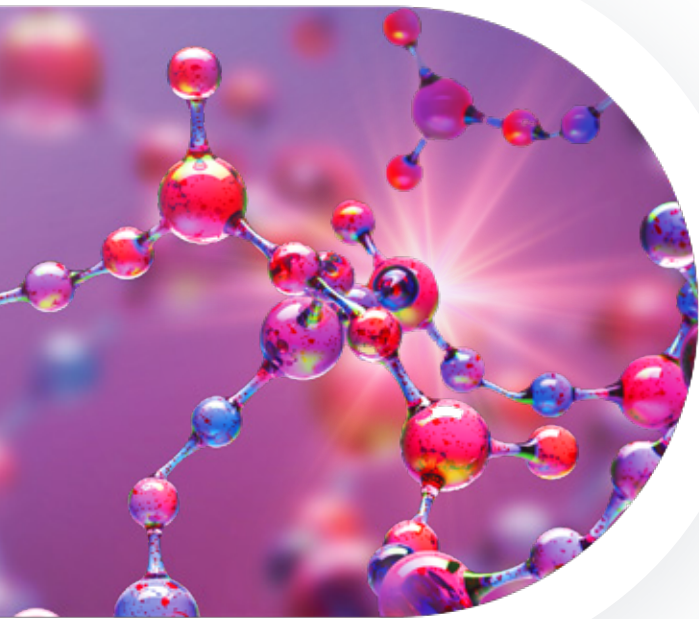
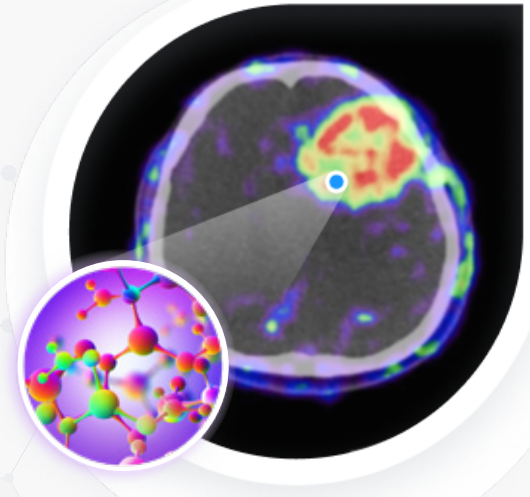


EvaThera™ Theranostics




Radiopharmaceuticals,
Reengineered.



EvaThera Theranostic Platform

As cancer rates rise globally, highly effective, patient-centric treatment options are more critical than ever before. Personalized treatment, targeting tumors based on their unique chemistry, cuts side effects and improves outcomes. Today, therapeutics targeting SST receptor subtype 2 (SSTR-2) expressing tumors, like Neuroendocrine, Nasopharyngeal, Thyroid, Hürthle Cell Thyroid cancer, Glioblastoma Multiforme, and Small Cell Lung Cancers, show comparatively low response rates, due in part to rapid blood clearance and cautious dosing to avoid potential renal toxicity.

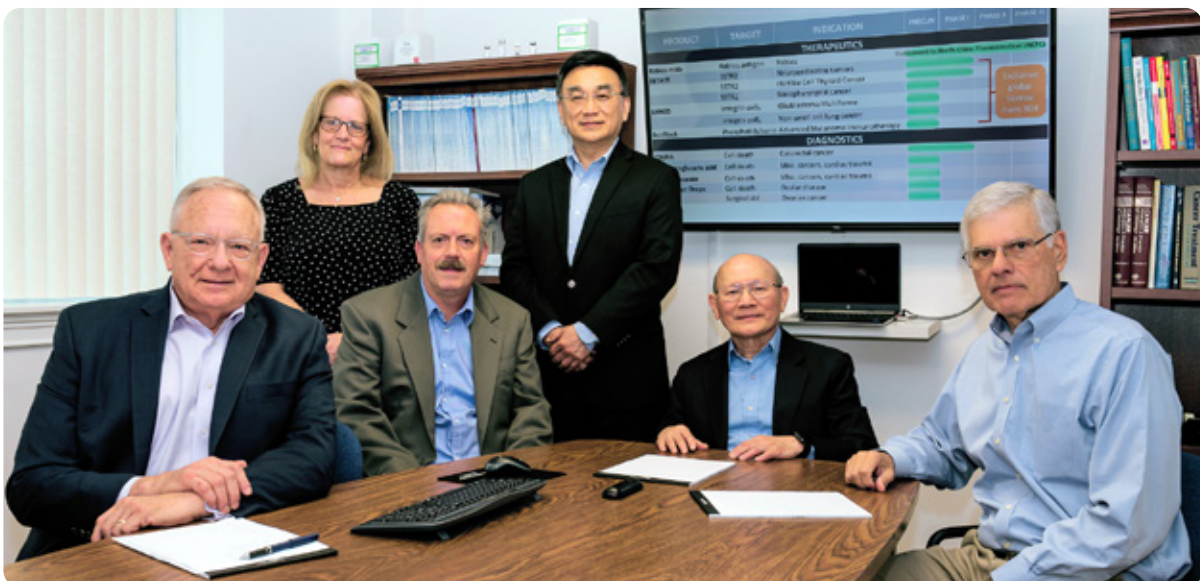
EvaThera Theranostics are a new generation of Evans Blue-based molecules with strong affinity for albumin which:

-  Extend the blood half-life of targeting radiopharmaceuticals.
-  Decrease their blood clearance and improve uptake with less toxicity.
-  Promise improved therapeutic and diagnostic outcomes in SSTR2 and integrin expressing cancer patients.

Our Vision for EvaThera Theranostics & Beyond

Molecular Targeting Technologies, Inc. is a privately-held, clinical stage biotech company developing targeted radiotherapeutics and diagnostics for rare cancers. MTTI has received an exclusive worldwide license from the National Institutes of Health to commercialize targeted theranostics based on EvaThera, an Evans blue (EB)-based technology platform.

The company is committed to building value by acquiring and translating innovative radiopharmaceutical therapy and imaging assets to improve human health, reduce healthcare costs, and reward stakeholders. MTTI is orchestrating multiple clinical trials in 2023. For more information: www.evathera.com.



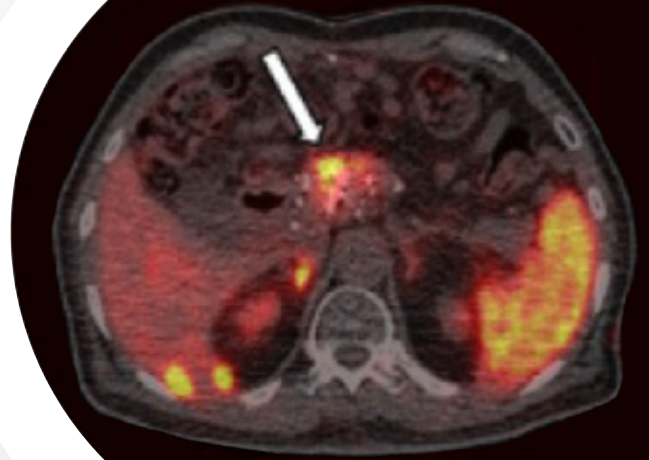
EBTATE™

(¹⁷⁷Lu-DOTA-EB-TATE and ²²⁵Ac-DOTA-EB-TATE)

For late-stage neuroendocrine tumors

EBTATE is a long-acting somatostatin analogue, a novel “three-in-one” therapeutic, composed of a targeting octreotate peptide, Evans blue dye to improve biodistribution, and chelator carrying a tumor killing radionuclide (¹⁷⁷Lu and ²²⁵Ac). Trial results indicate improved safety and efficacy with fewer, lower doses than competing treatments for Hürthle Cell Thyroid cancer, Small Cell Lung cancer and Nasopharyngeal Cancer.

Learn more about EBTATE at
www.evathera.com/ebtate



EBTATE™ Clinical Evidence

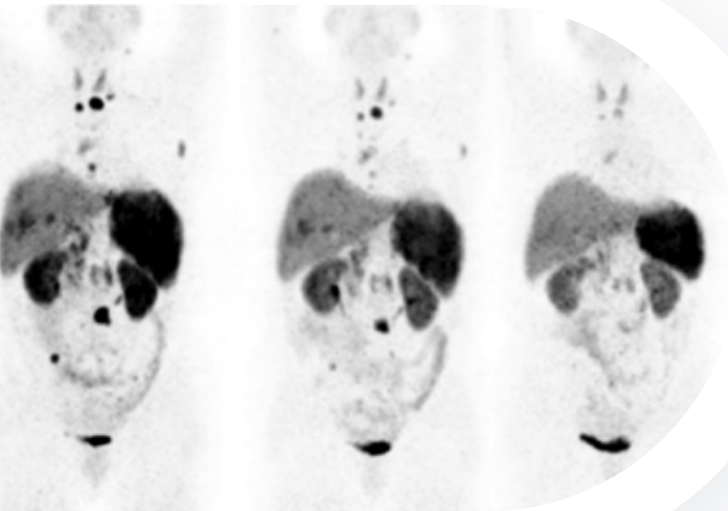
In a 3-year follow-up to MITI's ¹⁷⁷Lu-EBTATE research against gastroenteropathic-neuroendocrine tumors, EvaThera has found a favorable survival outcome disease control rate of 86% and encouraging median 36-month Progression Free survival.¹ Learn more about the increased efficacy of treatment in SSTR2-expressing cancers using EBTATE by visiting www.evathera.com.

References:

1 Jiang Y, Liu Q, Wang G, et al. Safety and efficacy of peptide receptor radionuclide therapy with (¹⁷⁷Lu)-DOTA-EB-TATE in patients with metastatic neuroendocrine tumors. *Theranostics*.2022;12(15):6437-6445



To learn more about EvaThera Theranostics and our clinical work, please [visit our resource section](#) of our website



EBRGD™

(¹⁷⁷Lu-DOTA-EB-TATE and ²²⁵Ac-DOTA-EB-TATE)

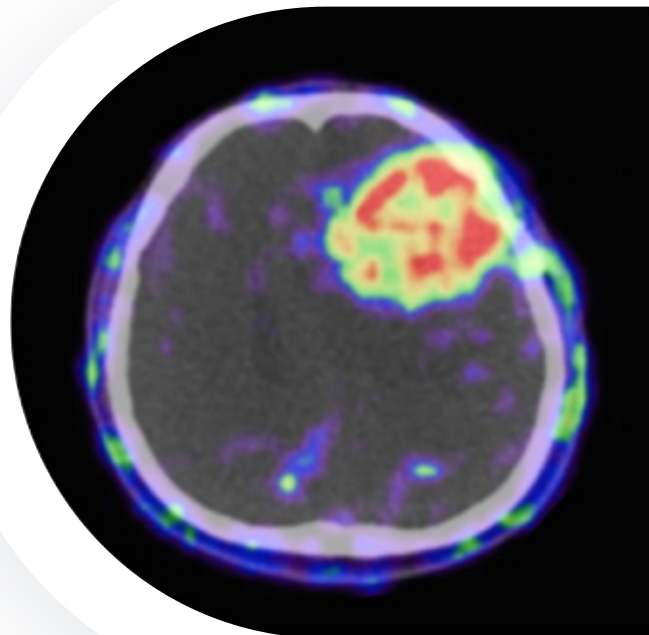
For integrin expressing cancers

EBRGD is an RGD peptide targeting integrin $\alpha_v\beta_3$, bound to a truncated Evans blue molecule and tumor killing ¹⁷⁷Lu. It was developed to treat integrin expressing cancers, including Glioblastoma Multiforme (GBM) and Non-Small Cell Lung Cancer (NSCLC).

There are 17,000 new GBM diagnoses in the US annually, with median survival of only 15-16 months post-surgery, despite 40 years of multidisciplinary global research. Long circulation half-life delivered good uptake of a highly targeted diagnostic ⁶⁴Cu-EBRGD in a GBM human trial, suggesting a positive therapeutic outcome with ¹⁷⁷Lu and ²⁵⁵Ac.

Preclinical studies with ¹⁷⁷Lu-EBRGD in tandem with a PD-L1 checkpoint inhibitor immunotherapy show significant synergy in decreased colorectal tumor volume and extended survival.

Learn more about EBRGD at
www.evathera.com/ebrgd



EvaThera™

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ADDRESS
833 LINCOLN AVE, UNIT 9
WEST CHESTER, PA 19380
(610) 738-7938

TOLL FREE +1 (888) 506-4125
INFO@EVATHERA.COM

