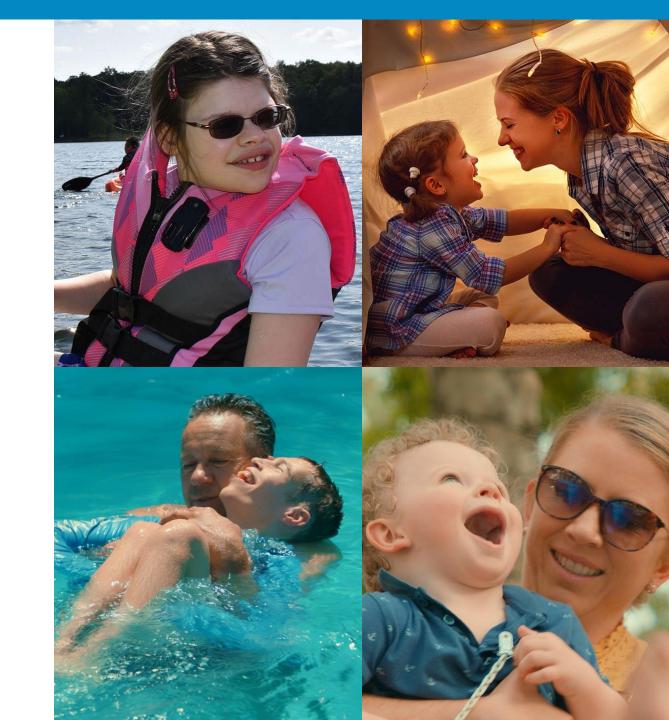


Investor presentation

10 November 2025

IMPROVING THE LIVES OF PEOPLE WITH NEURODEVELOPMENTAL DISABILITIES



Forward looking statements

This presentation contains forward looking statements that involve risks and uncertainties. Although we believe that the expectations reflected in the forward looking statements are reasonable at this time, Neuren can give no assurance that these expectations will prove to be correct. Actual results could differ materially from those anticipated. Reasons may include risks associated with drug development and manufacture, risks inherent in the regulatory processes, delays in clinical trials, risks associated with patent protection, future capital needs or other general risks or factors.





Ground-breaking impact on pediatric neurological Orphan indications

Neurodevelopmental disorders

Brain injury

Rett (MECP2)

Phelan-McDermid (SHANK3)

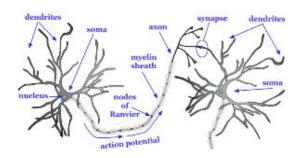
Pitt Hopkins (TCF4)

Hypoxic-Ischemic Encephalopathy

(lack of oxygen or blood flow to the brain before, during or shortly after birth)

Fragile X (FMR1)

Angelman (UBE3A) | Prader-Willi (15q11-q13) | SYNGAP1-related disorder (SYNGAP1)



Impaired communication between neurons, abnormal formation/pruning of dendrites
& chronic inflammation

Neuren's drugs target the critical role of IGF-1 in this upstream process, using analogs of naturally occurring peptides that can be taken orally as liquids

Excitotoxicity,
mitochondrial
dysfunction, and acute
& chronic inflammatory
processes

Severe impact on nearly every aspect of life

Long-term impact on survivors

Walking and balance issues

Impaired communication

Impaired hand use

Anxiety and hyperactivity
Intellectual disability

Sleep disturbance

Seizures

Impaired social interaction

Gastrointestinal problems

Developmental delays Se

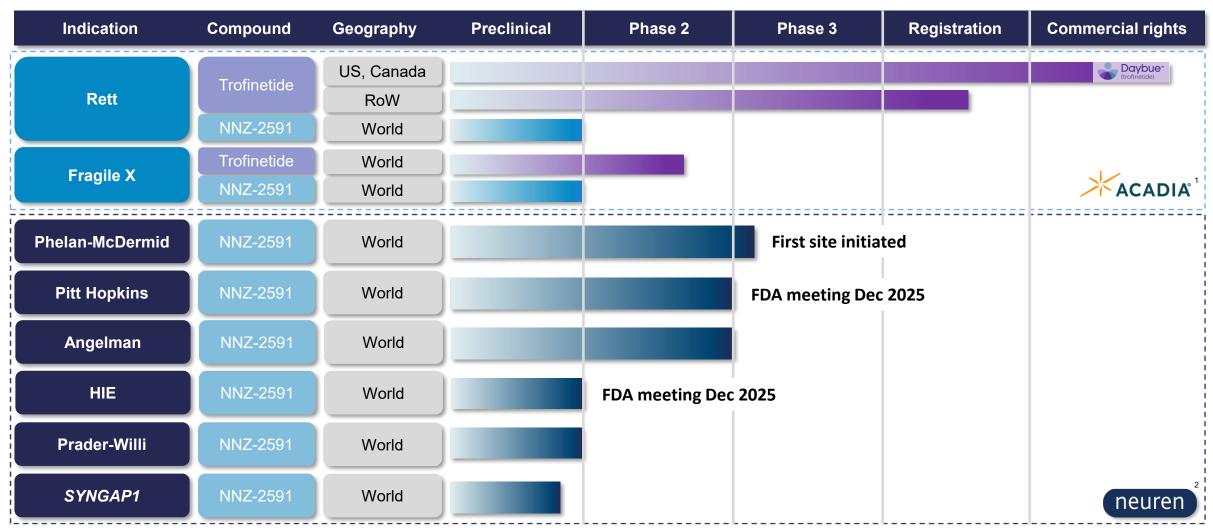
Cognitive impairment

Seizures

Cerebral palsy



Multiple late-stage opportunities supported by commercial product



¹ Exclusive license for Trofinetide and NNZ-2591 (Rett and Fragile X only) globally ² Wholly owned by Neuren



Large potential upside for shareholders is enabled by financial strength

Maximise value of NNZ-2591 as a multiple indication platform

- ✓ Phelan-McDermid syndrome in Phase 3 study
- ✓ Advancing development in Pitt Hopkins syndrome and HIE
- ✓ Multiple other indications in the pipeline: Angelman syndrome, Prader-Willi syndrome and SYNGAP1-related disorder

Long-term income growth from Acadia's successful global commercialization of



A\$490m income from Daybue® 2023 to date

A\$310 million cash at 30 Sep 2025 (incl Q3 royalty)



Value

DAYBUE® (trofinetide)





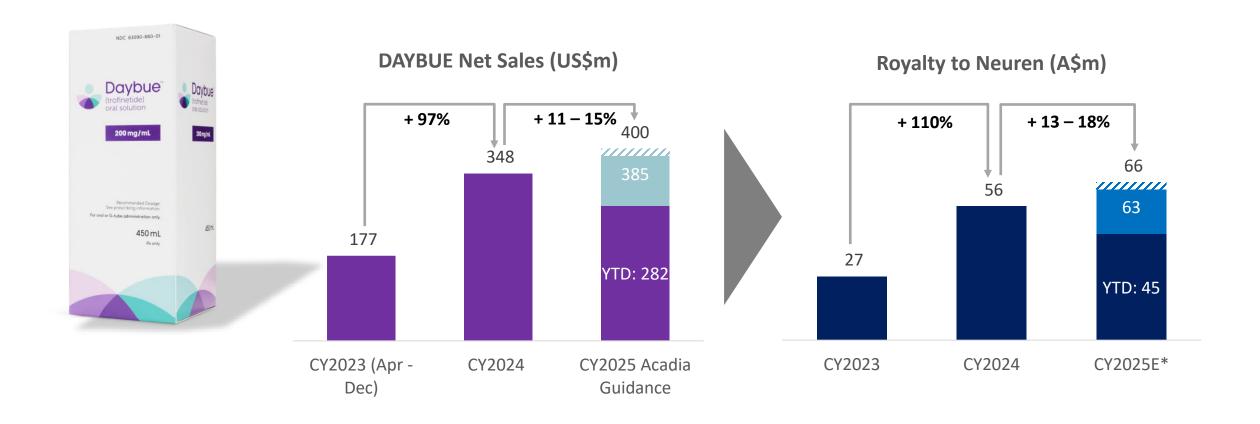
Economics to Neuren from Acadia partnership

		N	lorth Am	erica		
/	US\$10m	upfront in 20	18			
/	US\$10m	in 2022 following acceptance of NDA for review				
/	US\$40m	om in 2023 following 1st commercial sale in the US				
/	US\$50m In 2024 one third share of Priority Review Vouc					
	US\$55m	ated to Fragile X				
	Tiered Royalty Rates (% of net sales)		of net	Sales Milestones		
	,	Annual Net Sales		Net Sales in one calendar year	US\$m	
-	≤US\$250m >US\$250m, ≤US\$500m >US\$500m, ≤US\$750m		10%	≥US\$250m	√ 50	
			12%	≥US\$500m	50	
			14%	≥US\$750m	100	
	>US\$750m	1	15%	≥US\$1bn	150	

Outside North America				
US\$100m	upfront in 2023			
US\$35m	following 1st commercial sale in Europe			
US\$15m	following 1st commercial sale in Japan			
US\$10m	following 1st commercial sale of a 2 nd indication Europe			
US\$4m	following 1st commercial sale of a 2 nd indication Japan			
Sales milest	cones On achievement of escalating annual net sales thresholds: Europe: up to US\$170m Japan: up to US\$110m RoW: up to US\$83m			
Tiered royal	ties Mid-teens to low-20s % of net sales			



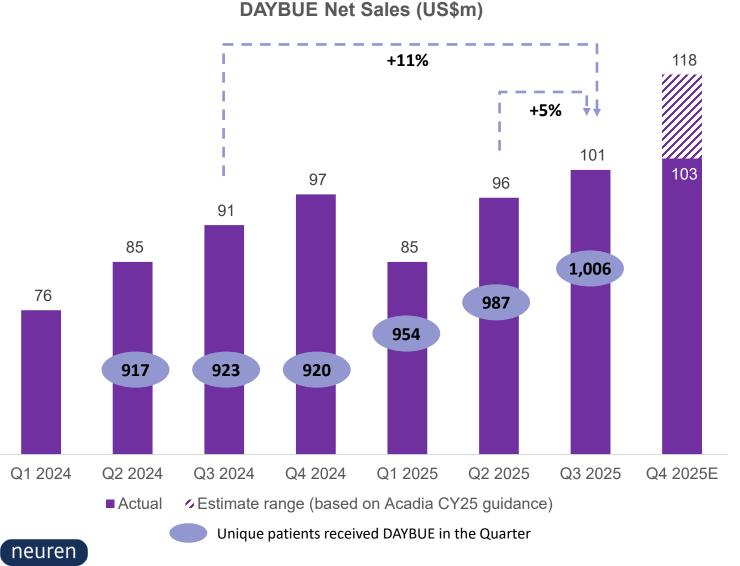
Growing sustainable income from DAYBUE® (trofinetide)



^{*} Based on CY25 Acadia DAYBUE US Net Sales Guidance of US\$385-400m, 10% of DAYBUE net sales up to US\$250m and 12% of DAYBUE net sales between US\$250m and US\$500m, and AUDUSD of 0.65



A new phase of expansion and acceleration



Growing body of real-world experience

30% expansion in Acadia field force, completed mid-2025

Positive lead indicators in Q3 2025

Call volumes and educational programs **1** ~20%

Highest q-o-q 1 in referrals since launch

74% of new patient Rx from outside CoEs (1 from 64% in Q2)

Sales impact anticipated through Q4 2025 and into 2026

Key growth drivers in the US

1

Expand number of diagnosed patients

- Currently 5,500 5,800 up from 4,500 in 2023
- Theoretical prevalence 6,000 9,000

2

Expand % of patients starting therapy

- Currently ~40% overall
- ~27% in community (outside CoEs)

3

Maintain or improve persistency

 Currently >50% remain on therapy after 12 months and >45% after 18 months

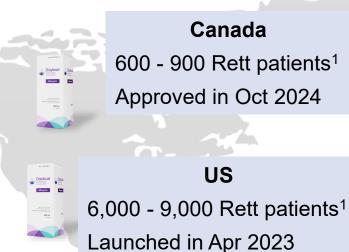
Illustrative potential active patient numbers assuming 50% long-term persistency

% starting	Number of diagnosed patients				
therapy	5,800	7,000	8,000	9,000	
40	1,160	1,400	1,600	1,800	
50	1,450	1,750	2,000	2,250	
60	1,740	2,100	2,400	2,700	
70	2,030	2,450	2,800	3,150	



Illustrative potential active patient numbers table comprises Neuren calculations.

Long term growth opportunity for trofinetide through global expansion



Europe

9,000 - 12,000 Rett patients1

MAA filed with CHMP opinion in Q1 2026

Active named patient supply programs **CLINIGEN**

Acadia building commercialisation team

Japan

1,000 - 2,000 Rett patients¹

Orphan Drug Designation status granted

Small clinical study commenced to support marketing application

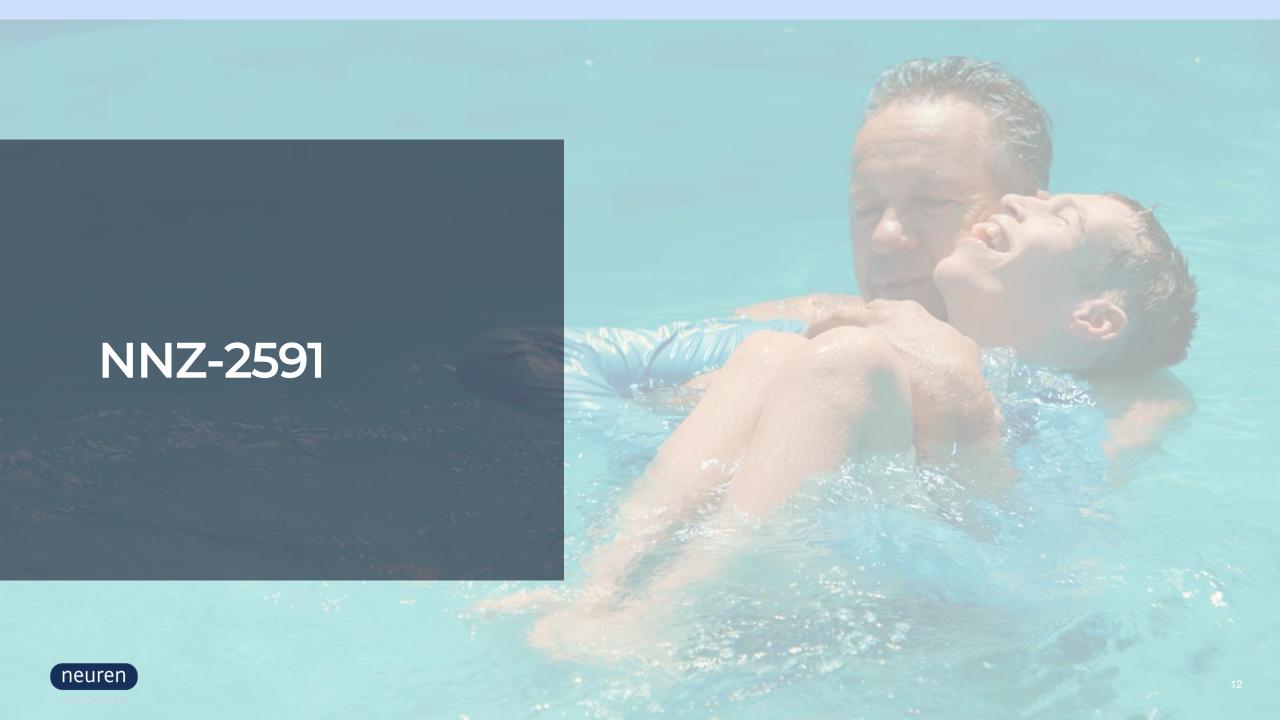
RoW

Active named patient supply programs in Israel and select rest of the world countries





¹ Acadia estimates

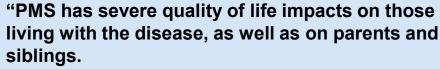


Leading the development of a first treatment for Phelan-McDermid syndrome (PMS)

The Voice of the Patient.....¹

"PMS has an overwhelming unmet medical need.

There are no FDA approved treatments for PMS despite its severely debilitating manifestations. Parents and caregivers are open to trying almost anything to try to relieve their child's suffering; most have tried an incredibly high number of treatments and approaches for symptom management, with very little success."



Most activities of daily life, including communicating needs or wants, self-care (bathing, dressing, toileting) and socializing with peers/siblings are affected. Most individuals living with PMS rely on their parents and caregivers for all their daily needs, and many require 24-hour care."

Developmental delay/intellectual impairment (lack of safety awareness) and communication issues are the most troublesome concerns.

Improved cognitive functioning and improved

Improved cognitive functioning and improved communication are the most desired outcomes.



NNZ-2591 development program

- ✓ Orphan Drug designation (US and EU)
- ✓ Rare Pediatric Disease designation (US)
- ✓ Meaningful improvements rated by clinicians and caregivers in open-label Phase 2 trial
- ✓ Alignment with FDA on single Phase 3 trial design and endpoints to support a New Drug Application
- ✓ Fast Track designation (US)
- ✓ Koala Phase 3 trial initiated



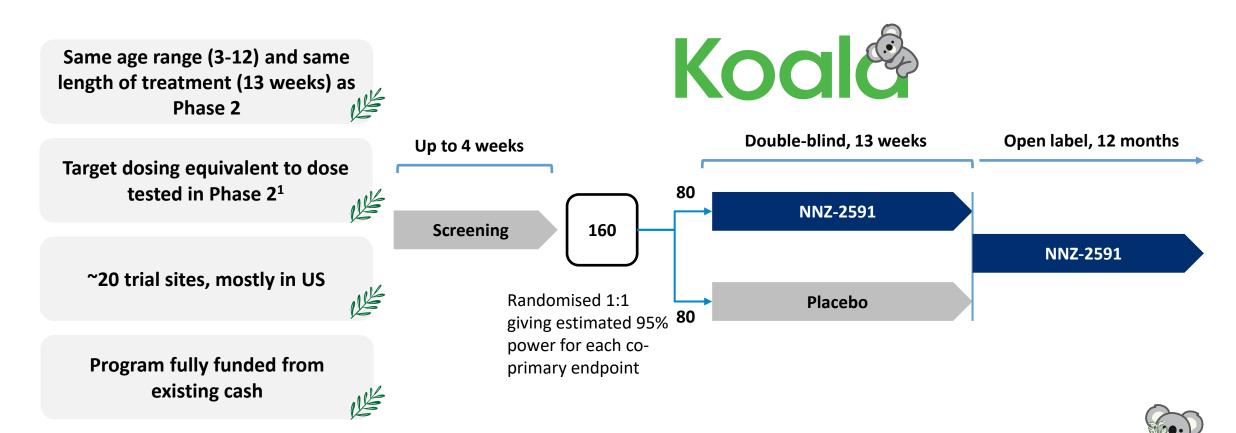






PMS Phase 3 approach consistent with positive Phase 2 trial and successful Rett program

Alignment with FDA on single Phase 3 trial design and endpoints to support a NDA





Key Phase 3 endpoints robustly positive in Phase 2 trial

Co-primary Endpoints in Koalô	Phase 2 Results ¹
Phelan-McDermid Syndrome Assessment of Change (PMSA-C), previously referred to as CGI-I in Phase 2	16/18 subjects showed improvement Mean score: 2.4 (P < 0.0001 ²)
Receptive Communication sub-domain of the Vineland Adaptive Behavior Scales, 3 rd Edition (VABS-3 Receptive-Raw Score)	16/18 subjects showed improvement Mean improvement: 7.5 (from baseline of 29.0) 3 (P = 0.0001^2) 3

Key Secondary Endpoint in Koale	Phase 2 Results ¹		
Caregiver Impression of Change (CIC) score	15/18 subjects showed improvement Mean score: 2.7 (P = 0.0003 ²)		

Consistency seen in Phase 2 across both clinician and caregiver reported measures and impactful symptoms, including communication

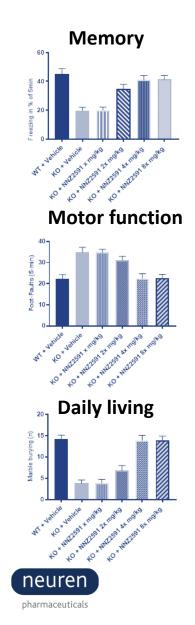
³ Based on post hoc analysis of overall VABS-3 secondary endpoint

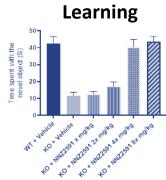


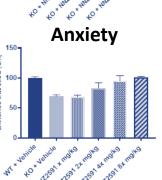
¹ NEU-2591-PMS-001: An Open-Label Study of the Safety, Tolerability, and Pharmacokinetics of Oral NNZ-2591 in Phelan-McDermid Syndrome - 13 weeks treatment of patients age 3-12 years at 4 US sites

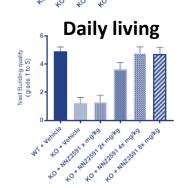
² Wilcoxon signed rank test - p-values are nominal without type 1 error control

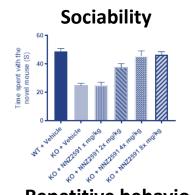
Supported by clear efficacy and dose response in shank3 model of PMS

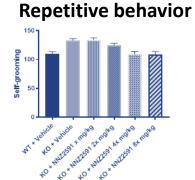


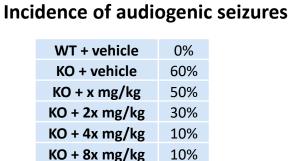




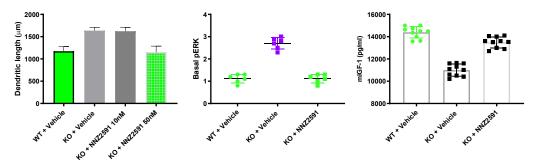


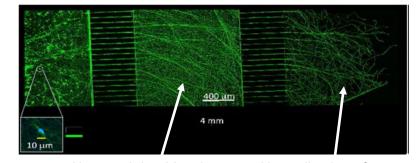






In biochemical testing, NNZ-2591 was shown to normalize the abnormal length of dendritic spines that form the synapse, the excess activated ERK protein (pERK) and the depressed level of IGF-1 in *shank3* knockout mice





Abnormal dendrites in shank3 knockout mice cells in culture

Normalization after treatment with NNZ-2591

Leading the development of a first treatment for Pitt Hopkins syndrome (PTHS)

Patients stories¹

"She was tested earlier for Angelman and Rett Syndrome, but they were of course negative. I had a strange feeling that something was wrong with her already when she was a newborn...I started to see different doctors with her, but they just told me nothing was wrong, until we met a Neurologist who told us that she had Cerebral Palsy and that she would not able to walk, ever...She doesn't talk but when she was about one year old she was saying a few words that never ever came back..."

"Caleb is currently 10 months old and he does not sit or roll yet and is not really interested in toys. He is currently in an early intervention program and is going through physical therapy, and sees a vision teacher and special education teacher...It has not been an easy journey thus far. I still do not how and where I get all my strength from. I know things will only get harder as he gets older but I am ready to accept the challenge and take each day as it comes."





NNZ-2591 development program

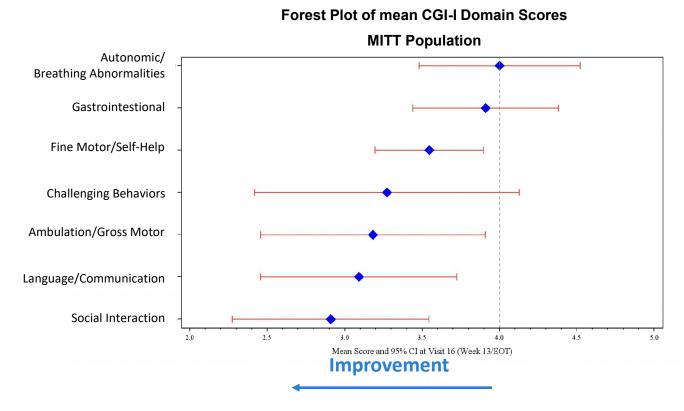
- ✓ Orphan Drug designation (US and EU)
- ✓ Fast Track designation (US)
- ✓ Rare Pediatric Disease designation (US)
- ✓ Consistent efficacy observed in *tcf4* model of PTHS
- ✓ Meaningful improvements rated by clinicians and caregivers in open-label Phase 2 trial
- ✓ FDA meeting in Dec 2025 to discuss next steps

Meaningful improvements observed in Phase 2 clinical trial

- 13 weeks treatment of patients age 3-12 years in open label trial at 5 US sites
- Mean **CGI-I** of **2.6** with 9 out of 11 children showing improvement (p = 0.0039¹)
- NNZ-2591 was safe and well tolerated, with no clinically meaningful changes in safety parameters during treatment

Improvements were seen in clinically important aspects of Pitt Hopkins syndrome, including:

- communication
- social interaction
- cognition; and
- motor abilities



¹ Wilcoxon signed rank test - p-values are nominal without type 1 error control

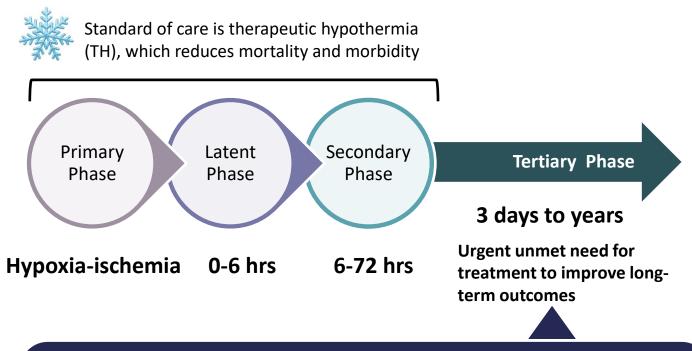


Hypoxic-Ischemic Encephalopathy (HIE)

Causes of HIE

Situations where the global oxygenation of the blood flow to the brain is impacted in utero, during birth, or shortly after, that can cause fetal distress, e.g.:

- Placental issues
- Uterine rupture
- Fetal maternal hemorrhage
- Maternal infection
- Shoulder dystocia
- Cord compression and cord issues
- Sudden unexpected postnatal collapse



40-45% of children who survive HIE have significant neurodevelopmental impairment at 2 yrs of age

Even among children not diagnosed with neurodevelopmental impairment at 2, many manifest cognitive, behavioural and other functional difficulties as they reach school age and beyond

NNZ-2591

- **IGF-1** promotes cell survival, modulates inflammation, and regulates synaptic transmission
- **IGF-1** levels are reduced in infants with HIE, correlating with HIE severity and outcome
- Supporting data from a range of in-vitro and in-vivo models



NNZ-2591 in HIE – targeting a new paradigm of treatment

HIE program retains all the advantages of the other NNZ-2591 programs:

- Orphan Drug
- Pediatric
- Urgent unmet need
- Limited competition
- Leverages the non-clinical and manufacturing platform that has been built

Clinical & Regulatory

- Preparing for **pre-IND** meeting with FDA in Dec 2025
- Concentration of clinical sites at large hospitals available
- Formal partnership with patient advocacy group



Commercial

- No approved drug therapy; TH and all drugs in development are for acute treatment (<7 days)
- Critical unmet need to improve long-term outcomes
- Planned use of NNZ-2591 acutely then for at least 1 year to leverage both **neuroprotective and neuroplasticity** effects
- Repeating pool of patients ~6,000 p.a. in the US¹
- Addressable in ICUs a **new in-hospital channel** for Neuren
- Eligible for Orphan and Rare Pediatric Disease designations

1 Neuren estimates based on various published literature



Substantial market opportunities in PMS, PTHS and HIE

Published prevalence estimates	US	_	
		Europe	Japan
000 to 1/15,000 males and females ¹	19,000 - 36,000 ⁴	21,000 - 41,000 ⁴	5,000 - 9,0004
of autism patients have SHANK3 mutations	,	,	
1,000 to 1/41,000 males and females ²	7,000 - 8,0004	8,000 - 9,0004	1,000 - 2,0004
2-3 / 1,000 births in high income countries; 10-30 / 1,000 births in low and mid income countries ³	Addressable patients ⁵		
	~6,000 p.a.	~7,400 p.a	~1,140 p.a.
ļ	,000 to 1/41,000 males and females ² 1,000 births in high income countries; 10-30 /	of autism patients have SHANK3 mutations ,000 to 1/41,000 males and females ² 7,000 - 8,000 ⁴ 1,000 births in high income countries; 10-30 / O births in low and mid income countries ³	of autism patients have SHANK3 mutations ,000 to 1/41,000 males and females ² 7,000 - 8,000 ⁴ 8,000 - 9,000 ⁴ 1,000 births in high income countries; 10-30 / O births in low and mid income countries ³

⁵ Neuren estimates based on various published literature and company publications



¹ Phelan McDermid Syndrome Foundation (PMSF) (<u>www.pmsf.org</u>)

² Pitt Hopkins Research Foundation (PHRF) (pitthopkins.org)

³ Hope for HIE (<u>Hope for HIE - Hypoxic Ischemic Encephalopathy</u>)

⁴ Estimates based on United Nations population data 2024, derived by applying the estimated prevalence range to the populations under 60 years

Key milestones and catalysts

Milestones achieved 2025 to date

- ✓ Record number of active patients on DAYBUE in Q3 2025
- Submission by Acadia of EU marketing application for trofinetide
- Acadia initiated Managed Access Program in Europe, Israel and RoW regions
- Acadia commenced a clinical trial in Japan to support registration of trofinetide
- Confirmed alignment with FDA on primary efficacy assessment for PMS Phase 3 trial at Type C meeting
- ✓ First site initiated for PMS Phase 3 trial
- ✓ FDA Fast Track Designations for PMS, PTHS and AS
- ✓ Announced HIE and SYNGAP1 as new indications for NNZ-2591
- ✓ Completed A\$50m on-market share buyback

Anticipated near-term catalysts

- CY2025 DAYBUE net sales guidance US\$385 – 400m, implying A\$63 – 66m US royalties to Neuren¹
 - Acadia Q4 update
- Potential EU approval of trofinetide in 1H 2026
- US\$35m milestone payment upon 1st commercial sale in Europe
- PMS Phase 3 trial progress updates
- Meetings with FDA to advance development for PTHS and HIE

¹ Based on CY25 Acadia DAYBUE Net Sales Guidance of US\$385-400m, 10% of DAYBUE net sales up to US\$250m and 12% of DAYBUE net sales between US\$250m and US\$500m, and AUDUSD of 0.65



CONTACT investorrelations@neurenpharma.com Authorised by the CEO & Managing Director of Neuren Pharmaceuticals Limited, Suite 201, 697 Burke Road, Camberwell, VIC 3124 neuren