



MEDIVIR

Improving life for cancer patients
through transformative drugs

April 2017

Important notice

You must read the following before continuing. The following applies to this document and the information provided in this presentation by Medivir AB (publ) (the “Company”) or any person on behalf of the Company and any other material distributed or statements made in connection with such presentation (the “Information”), and you are therefore advised to carefully read the statements below before reading, accessing or making any other use of the Information. In accessing the Information, you agree to be bound by the following terms and conditions.

The Information does not constitute or form part of, and should not be construed as, an offer of invitation to subscribe for, underwrite or otherwise acquire, any securities of the Company or a successor entity or any existing or future subsidiary or affiliate of the Company, nor should it or any part of it form the basis of, or be relied on in connection with, any contract to purchase or subscribe for any securities of the Company or any of such subsidiaries or affiliates nor shall it or any part of it form the basis of or be relied on in connection with any contract or commitment whatsoever. Specifically, this presentation does not constitute a “prospectus” within the meaning of the U.S. Securities Act of 1933, as amended.

The Information may not be reproduced, redistributed, published or passed on to any other person, directly or in indirectly, in whole or in part, for any purpose. The Information is not directed to, or intended for distribution to or use by, any person or entity that is a citizen or resident of, or located in, any locality, state, country or other jurisdiction where such distribution or use would be contrary to law or regulation or which would require any registration or licensing within such jurisdiction. The Information is not for publication, release or distribution in the United States, Australia, Canada or Japan, or any other jurisdiction in which the distribution or release would be unlawful.

All of the Information herein has been prepared by the Company solely for use in this presentation. The Information contained in this presentation has not been independently verified. No representation, warranty or undertaking, express or implied, is made as to, and no reliance should be placed on, the fairness, accuracy, completeness or correctness of the Information or the opinions contained herein. The Information contained in this presentation should be considered in the context of the circumstances prevailing at that time and will not be updated to reflect material developments which may occur after the date of the presentation. The Company may alter, modify or otherwise change in any manner the content of this presentation, without obligation to notify any person of such revision or changes.

This presentation may contain certain forward-looking statements and forecasts which relate to events and depend on circumstances that will occur in the future and which, by their nature, will have an impact on the Company’s operations, financial position and earnings. The terms “anticipates”, “assumes”, “believes”, “can”, “could”, “estimates”, “expects”, “forecasts”, “intends”, “may”, “might”, “plans”, “should”, “projects”, “will”, “would” or, in each case, their negative, or other variations or comparable terminology are used to identify forward-looking statements. There are a number of factors that could cause actual results and developments to differ materially from those expressed or implied in a forward-looking statement or affect the extent to which a particular projection is realized. Factors that could cause these differences include, but are not limited to, implementation of the Company’s strategy and its ability to further grow, risks associated with the development and/or approval of the Company’s products candidates, ongoing clinical trials and expected trial results, the ability to commercialize existing and any future products, technology changes and new products in the Company’s potential market and industry, the ability to develop new products, the impact of competition, changes in general economy and industry conditions and legislative, regulatory and political factors. While the Company always intends to express its best judgment when making statements about what it believes will occur in the future, and although the Company bases these statements on assumptions that it believe to be reasonable when made, these forward-looking statements are not a guarantee of its performance, and you should not place undue reliance on such statements. Forward-looking statements are subject to many risks, uncertainties and other variable circumstances. Many of these risks are outside of the Company’s control and could cause its actual results to differ materially from those it thought would occur. The forward-looking statements included in this presentation are made only as of the date hereof. The Company does not undertake, and specifically decline, any obligation to update any such statements or to publicly announce the results of any revisions to any of such statements to reflect future events or developments.

Improving life for cancer patients through transformative drugs

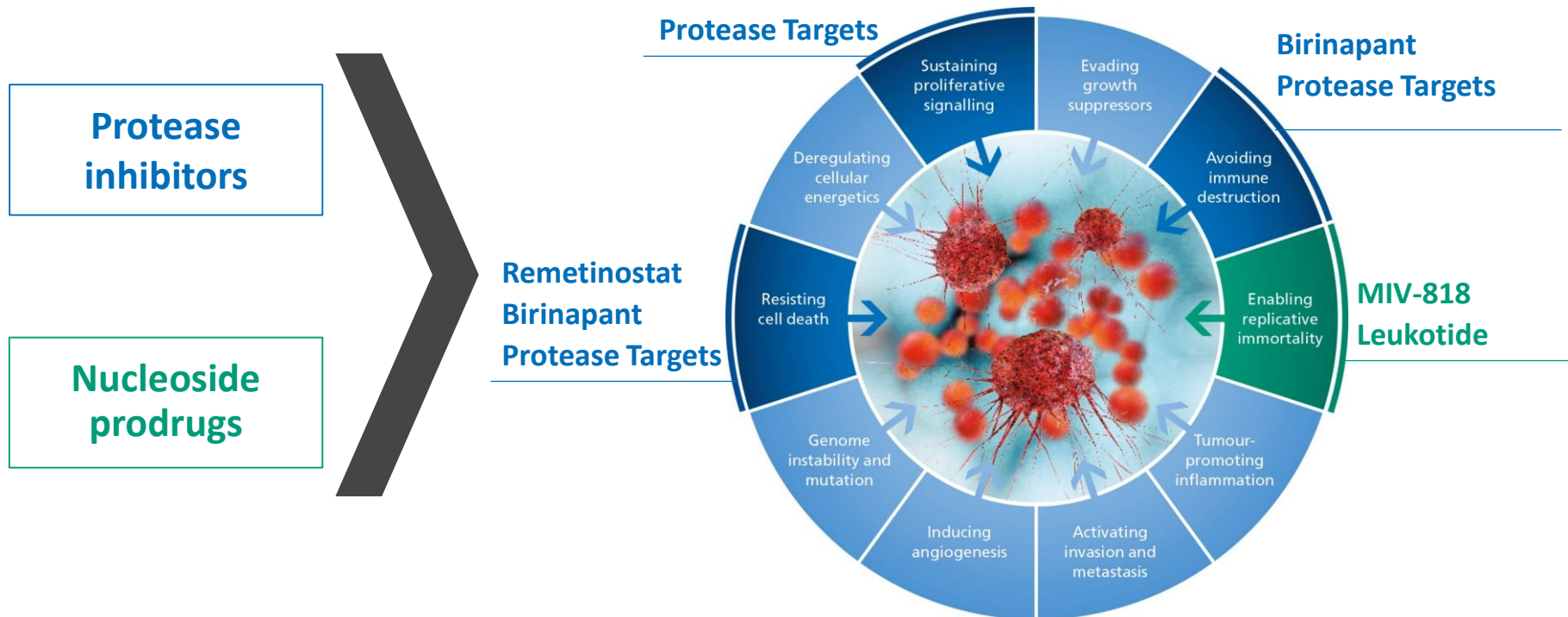
- Using **world-class scientific expertise** to bring new therapies to cancer patients
- **Clinical pipeline** composed of projects with **multi-billion dollar sales** potential as well as **orphan cancer drug candidates**
- Strong commercial focus – delivered more than **20 global partnerships** and **2 products from idea to market**

Basic facts

- Headquarters in Huddinge, Sweden
- 77 employees, 43 with PhDs
- Listed on the Nasdaq Stockholm, ticker: MVIR
- Current market capitalization: SEK 967m (~USD 125m)¹
- Website: www.medivir.com



Leveraging scientific expertise to build pipeline in oncology



Adapted from: The Hallmarks of Cancer: The Next Generation.
Hanahan and Weinberg, Cell (2011), 144, 646-674

Oncology drug development in areas of high unmet need

Strong and balanced development pipeline based around areas of scientific expertise and focused on cancer

	Project, Mechanism	Disease area	Clinical phase				Market	Next step
			Preclinical	Phase I	Phase II	Phase III		
Cancer	Remetinostat Topical HDAC inhibitor	Early-stage cutaneous T-cell lymphoma	[Blue bar spanning Preclinical, Phase I, and Phase II]				~\$1b US only	P3 start 2018
	Birinapant SMAC mimetic	Solid tumors (combo with Keytruda®)	[Blue bar spanning Preclinical and Phase I]				Blockbuster	P2 start 2H2018
	MIV-818 , Nucleotide DNA polymerase inhibitor	Hepatocellular carcinoma	[Green bar in Preclinical]				Orphan US/EU Significant Asia	P1 start 2H2018
	MIV-711 Cathepsin K inhibitor	Osteoarthritis	[Blue bar spanning Preclinical, Phase I, and Phase II]				Blockbuster	Partner

■ Protease related
■ Nucleot(s)ide related

Collaborations enhance the value of programs

Academic



Industrial

Product/Project

Platform Link

Partners

Status

Medivir Interests

Zoviduo®/Xerclear
(labial herpes)
acyclovir + hydrocortisone

Nucleoside
analogue



Marketed

- Royalties from sales
- Approval milestones for additional OTC switches

MIV-802 (HCV)
*Nucleotide NS5B
polymerase inhibitor*

Nucleotide



Phase I ready

- Development milestones
- Royalties from sales

Competences from discovery through regulatory approvals

Management team with extensive experience and proven track record of successful development



RICHARD BETHELL, Chief Scientific Officer

- 28 years drug discovery and development in oncology and infectious disease
- VP, Biology/DMPK (Boehringer Ingelheim (Canada))
- VP, Therapeutic Research (Shire)
- Pfizer and GlaxoSmithKline R&D
- Doctor of Philosophy (D. Phil.) in chemistry from Oxford University



JOHN ÖHD, Chief Medical Officer

- Senior director of Experimental Medicine, Shire
- Early development group director, cognitive and neurodegenerative disorders at AstraZeneca
- Cancer research at Lund University and at Karolinska Institute
- Clinical training at Karolinska University Hospital
- MD, Linköping University, PhD in Experimental Pathology, Lund University



ÅSA HOLMGREN, EVP Strategic Regulatory Affairs

- Head of Regulatory Affairs at Orexo AB
- Various large pharmaceutical companies, including 12 years as Senior Global Regulatory Affairs Director at AstraZeneca, and at AstraZeneca in Canada and Japan
- M. Sc. in Pharmacy, trained Uppsala University



CHRISTINE LIND, President and CEO

- EVP, Business Development at Medivir
- VP, Business Development, LifeCell Corporation
- Biotech and pharma strategic advisory and capital raising at Merrill Lynch & Co. and GKM & Co.
- B. Sc. Finance and Info Systems, NYU and MBA, Columbia Business School



ERIK BJÖRK, Chief Financial Officer

- CFO for AstraZeneca Sweden Operations
- 11 years with Procter & Gamble, in global finance leadership positions in Switzerland, UK and Sweden
- MSc in Finance and LLM from Lund University



CHRISTINA HERDER, EVP Strategic Business Development

- CEO of Modus Therapeutics
- Director, Corporate Development at Sobi
- Project & Portfolio Management at Biovitrum
- Current member of the boards of PCI Biotech and Idogen
- Ph. D. in physical chemistry from Royal Institute of Technology and MBA from Stockholm University



DANIEL ERIKSSON, Chief Information Officer

- Various IT roles relating to security, decision support, innovation, and digitalization
- Most recently, Technical Director for G4S Risk Management
- PhD Coventry University and BSc in Systems Science, Linköping University

Cancer biology, chemistry, intellectual property, DMPK, CMC, toxicology, clinical development, regulatory strategy, business development

77 employees, 43 with PhDs,
18 nationalities, balanced gender split

MIV-711: ORAL ONCE DAILY CATHEPSIN K INHIBITOR WITH FDA FAST TRACK STATUS FOR OA DISEASE MODIFICATION

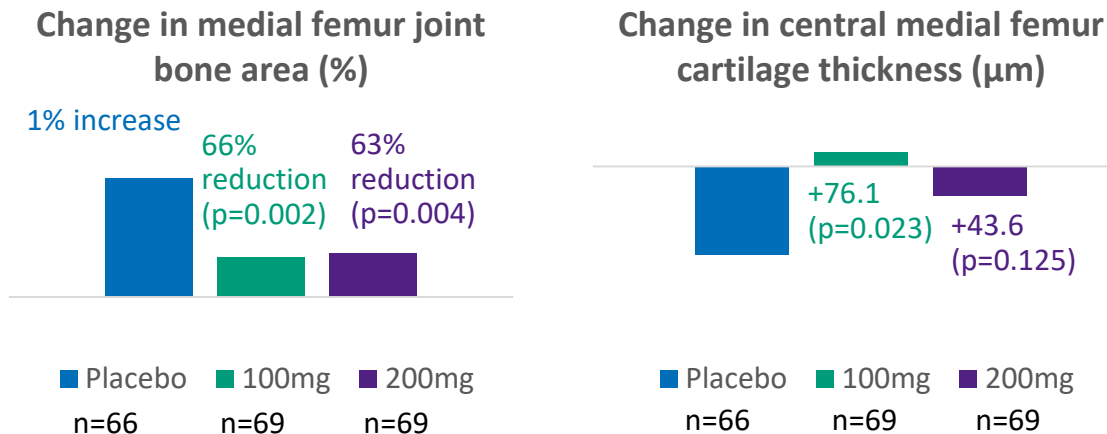
Phase IIa data show unprecedented OA disease modification after 6 months

No existing disease modifying drug for Osteoarthritis

- Affects >30m adults in the US, and ~240m worldwide
- Disease involves both bone and cartilage



Benefit on both bone and cartilage in Phase IIa study



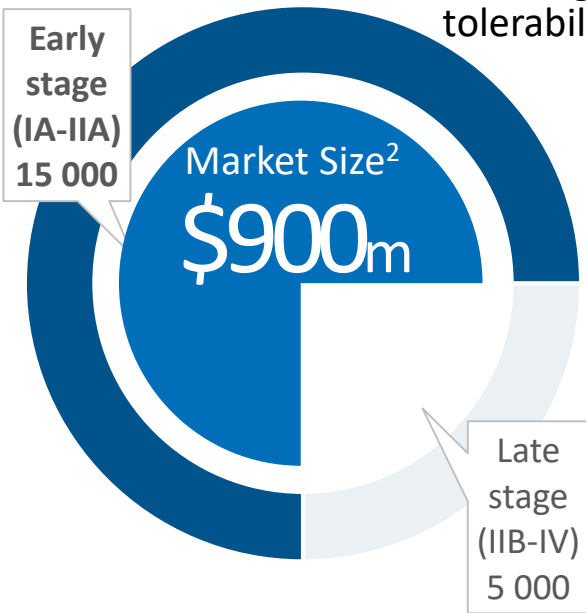
Acceptable safety and tolerability profile

- Both doses showed acceptable safety and tolerability for this patient population

Addresses key unmet need with positive Phase II data

**US CTCL patients¹:
orphan disease**

Key unmet need:
balance of efficacy
and long-term
tolerability



Effect on lesions & reduction of pruritus (itch)

Dose	1% 1x/day n=20	0.5% 2x/day n=20	1% 2x/day n=20
Lesion responses ³	20%	25%	40%
Patients with clinically significant pruritus ⁴	8/20 (40%)	6/20 (30%)	10/20 (50%)
Pruritus responses	37.5%	50%	80%

M Duvic *et al.*, EORTC Cutaneous Lymphoma Task Force Meeting (2017), Abstract O55

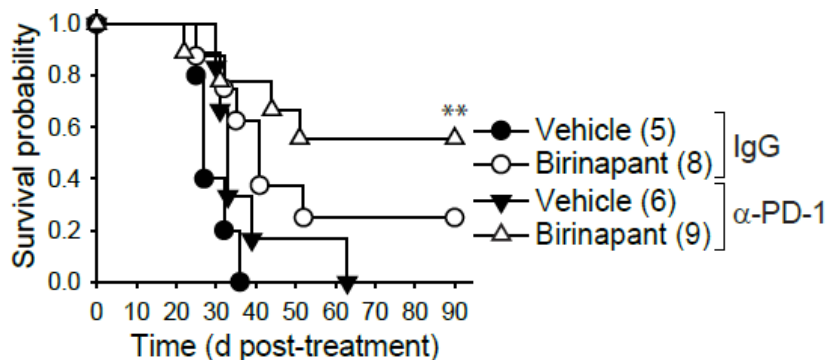
Highly tolerable with no systemic side effects

- Even dose distribution of AEs, mostly grade 1 or 2
- No HDAC inhibitor-associated systemic adverse events
- Median time on treatment: 332 days (1% 2x/day dose)

Potential to enhance patient response with immune-oncology therapies

Strong rationale for combination with Keytruda®

- Birinapant/anti-PD1 mAb combo showed enhanced activity in preclinical models¹ compared to either agent alone



¹) Solid tumor model: Beug et al., Nature Communications (2017) 8:14278
Multiple myeloma model: Chesi et al., Nature Med. (2016) 22, 1411–1420
Cooperation of IAPs and PD-L1 to protect tumor cells: Kearney et al., Cell Death and Diff. (2017), 24, 1705–1716

Phase I/II study underway in collaboration with



- Development collaboration for the Phase I/II study in solid tumors
- Keytruda® provided at no cost
- Joint Development Committee to oversee the study, bringing Merck's immuno-oncology expertise
- Medivir retains full global rights to birinapant and data

Potential to improve efficacy and safety for patients with liver cancers

Liver cancer¹

- Orphan disease in Western markets, but much more common in Asia
- One of fastest growing and most deadly cancers in US
- Genetically heterogeneous leading to limited effect of molecularly targeted therapies

Improve a nucleoside with Medivir prodrug technology

Troxacitabine
(nucleoside)



MIV-818

(liver-targeted nucleotide prodrug)

- **Active** in preclinical cancer models and in clinic
- Failed in clinic due to systemic dose-limiting **toxicities**
- **Enhanced activity** 10x more potent against HCC cell lines than parent troxacitabine
- **Selectivity for cancer** for HCC cells relative to non-cancerous human hepatocytes
- **Delivery to the liver improved** by greater than 100-fold relative to systemic exposure of troxacitabine itself

Cash position and shareholder base

CASH POSITION

Cash and ST investments
SEK468m (USD 60m)



Directed offering: SEK155m
(USD 20m) gross proceeds

Successful out-licensing:
additional cash mid-term

Investments in R&D
Estimated 18+ months
cash runway

End 2017

THE SHARE

Market Cap¹⁾
~967m SEK
(~USD 125m)

International
Ownership
~31%

Top 20
shareholders
~51%

Why Medivir?

For more information:

- Nasdaq Stockholm, ticker: MVIR
- www.medivir.com

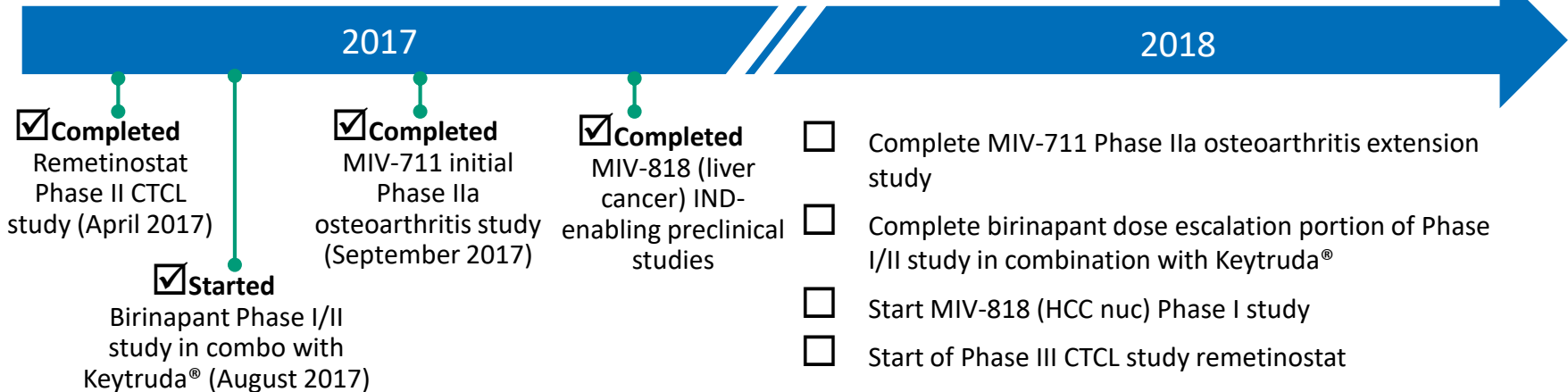
- Track record of delivery

3 new drugs into development in 2 years

2 products from idea to market

>20 global partnerships, multiple repeat partners

- Strong pipeline from discovery through clinical stages with upcoming catalysts



- Near-term opportunity for partnerships