



COMBATTING URGENT VIRAL DISEASE THREATS

Dual Approach to Advance Galidesivir as a Pan-Filovirus Medical Countermeasure

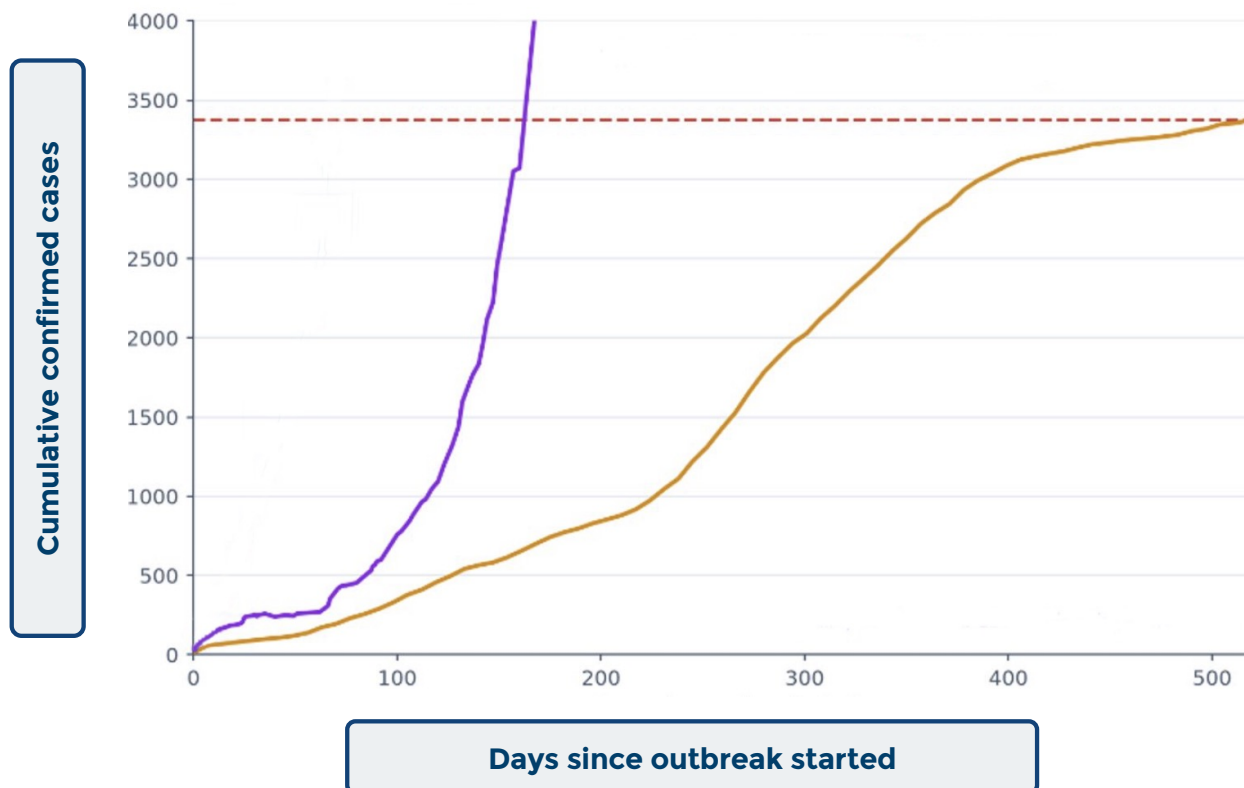
BioShares 2026

Dr David Foster, CEO & Managing Director

August 7, 2026

ASX: ILA

Cumulative Ebola cases in past outbreaks

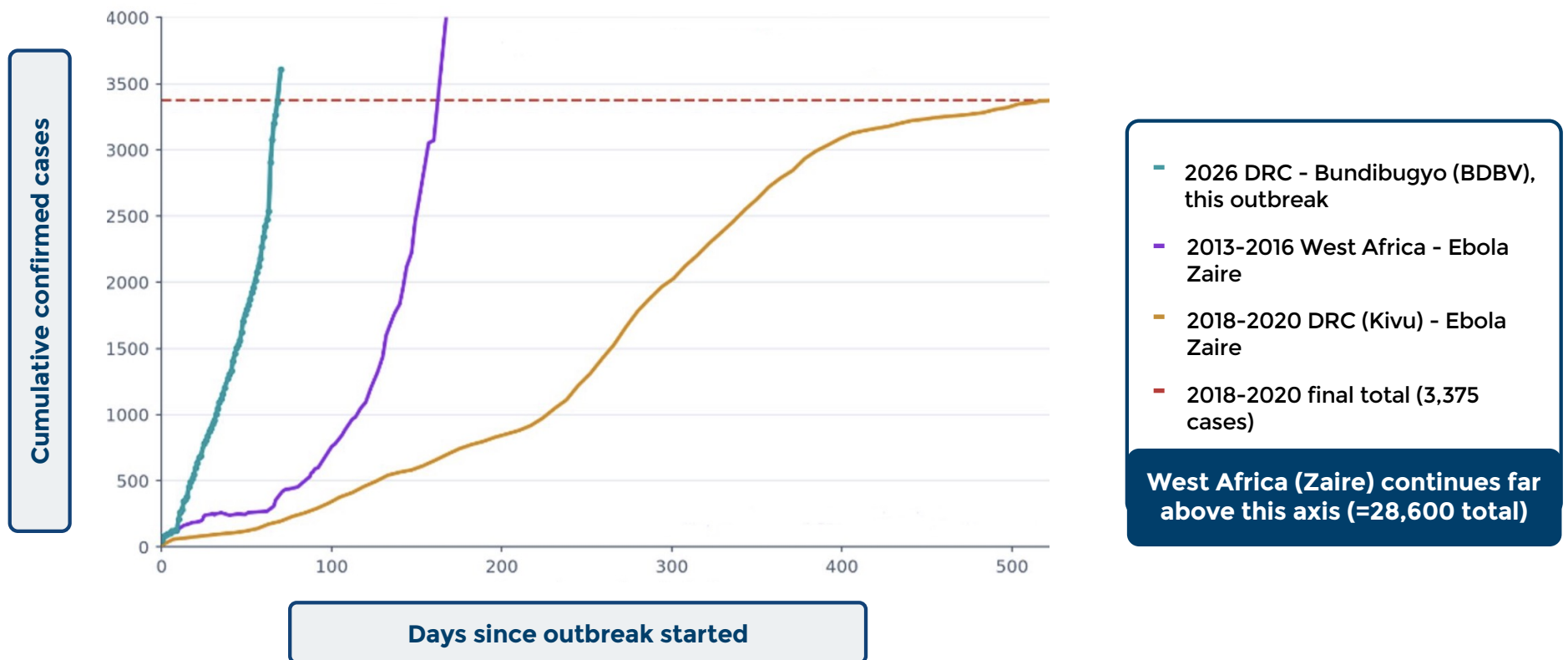


- 2013-2016 West Africa - Ebola Zaire
- 2018-2020 DRC (Kivu) - Ebola Zaire
- 2018-2020 final total (3,375 cases)

West Africa (Zaire) continues far above this axis (=28,600 total)

Cumulative Ebola cases in current vs past outbreaks

2026 BDBV outbreak has surpassed the 2018-2020 Ebola Zaire total in ~ 70 days





ISLAND PHARMACEUTICALS (ASX: ILA)

TWO PROGRAMS TARGETING INFECTIOUS DISEASES



Two, well advanced clinical stage programs with broad acting antivirals



Phase 2a/b PROTECT clinical trial in dengue complete for ISLA-101



Major market potential via both programs, including global outbreaks



Positive FDA feedback on Animal Rule regulatory path and acceptance into MEURI protocol in Uganda for galidesivir



Both assets have Priority Review Voucher potential



Multiple near term clinical trial, operational and regulatory catalysts

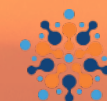
Company Overview

Shares on issue ¹ :	295,916,682
Price per share ¹ :	\$0.445
Market capitalisation ¹ :	\$131.68m
Cash at bank (30 June 2026) ² :	\$12.87m
Potential additional capital from vested options where current share price exceeds exercise price:	~\$3.2m
Debt:	Nil

Price & volume (12 months)



Island Pharmaceuticals Limited



Substantial shareholders

Dr William James Garner ³	15.50%
Jason Alan Carroll ³	11.92%
MWP Partners Limited ⁴	8.25%
Dr Daniel Tillett ³	7.80%

Board of Directors

Jason Carroll, Non-Executive Chairman

Dr David Foster, CEO & Managing Director

Chris Ntoumenopoulos, Non-Executive Director

1. As at 6 August 2026

2. Does not take into consideration cash movement since reporting date

3. Per holding per Substantial interest notice lodged with ASX on 9 December 2025

4. Per holding per Substantial interest notice lodged with ASX on 3 June 2025

The Filovirus Threat Landscape



AN URGENT AND GROWING GLOBAL SECURITY CHALLENGE

Extremely high fatality rates: Marburg up to 88%, Ebola up to 90%, Sudan up to 47%, Bundibugyo 30–50%

Limited countermeasures:
No approved therapeutics or vaccines for Marburg or Bundibugyo

BSL-4 pathogens:
Require maximum containment; limited global capacity

Bioterror relevance:
Historical weaponization research; persistent intelligence concern

Current situation:
Ongoing Bundibugyo outbreak with no available medical countermeasures

The US lacks a broad-acting antiviral capable of addressing multiple filovirus threats

The Preparedness Gap



THERE ARE NO FILOVIRUS THERAPEUTICS CAPABLE OF CROSS-STRAIN PROTECTION



Existing Ebola countermeasures
are strain-specific (Zaire only)



No approved therapeutics for
Marburg, Bundibugyo or Sudan
virus



Outbreaks increasingly involve
rare or divergent strains



Stockpile lacks a broad-acting
antiviral with Animal Rule feasibility

GALIDESIVIR DIRECTLY ADDRESSES THIS GAP

Why Galidesivir?



A BROAD-ACTING ANTIVIRAL WITH STRONG FILOVIRUS EFFICACY AND FDA-ALIGNED PATHWAY

-  Demonstrated multi-filovirus activity (Marburg, Ebola, Sudan)
-  Strong in vivo efficacy with delayed dosing
-  FDA confirmed Animal Rule pathway is appropriate

-  IV and IM formulations with favorable safety profile
-  Manufacturing route improved with 2-3X yield increase
-  Developed with NIAID and BARDA support (>US\$70M historically)

GALIDESIVIR IS ONE OF THE FEW ANTIVIRAL CANDIDATES WITH CREDIBLE CROSS-FILOVIRUS POTENTIAL

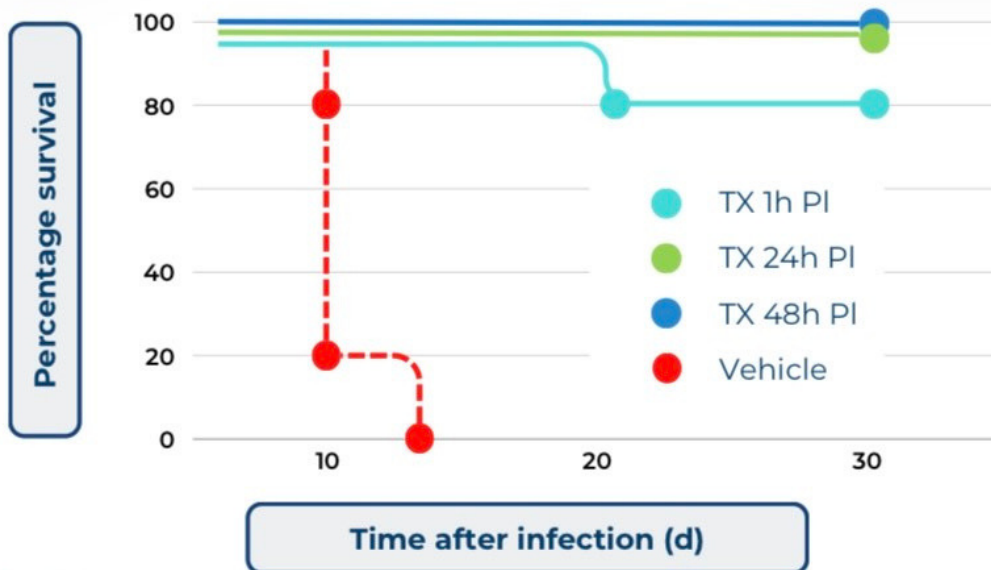
Broad-spectrum Antiviral Effects Including Filovirus



Virus Family	Virus	Strain/Variant	Assay Cell	Cell Type	EC50 (μM)	CLE	Adjusted EC50 (μM)
Filoviridae	Marburg	Musoke	HCI	HeLa	4.4	35%	1.5
	Marburg	Ci67	HCI	HeLa	6.7	35%	2.3
	Marburg	Angola	HCI	HeLa	5	35%	1.8
	Ebola	Zaire (Kikwit)	HCI	HeLa	11.8	35%	4.1
	Ebola	Sudan (Boniface)	HCI	HeLa	4	35%	1.4
	Ebola	Bundibugyo	TBD	TBD	TBD	TBD	TBD
Togaviridae	VEE	SH3	HCI	HeLa	>100	35%	Not Calc.
	EEE	FL93-939	NRU	Vero76	43.2	8%	3.5
	WEE	California	NRU	Vero	21.3	10%	2.1
	Chikungunya	AF 15561	HCI	HeLa	>100	35%	Not Calc.
Paramyxo	Nipah virus	Malayasia	HCI	HeLa	41.9	35%	14.7
	HRS	A2	NRU	MA104	11	ND	Not Calc.
	Measles	Chicago	NRU	Vero76	6.19	8%	0.5
Arenaviridae	Lassa	Josiah	HCI	HeLa	43	35%	15.1
	Junin	Romero	HCI	HeLa	42.2	35%	14.8

Marburg NHP Survival

94% survival in Marburg (Musoke) NHP Model with treatment initiated up to 48 hours post-infection



- 6/6 animals survived when dosed 48 hours post infection
- 6/6 animals survived when dosed 24 hours post infection
- 5/6 animals survived when dosed 1 hour post infection

0/6 untreated animals survived as part of the control group

nature

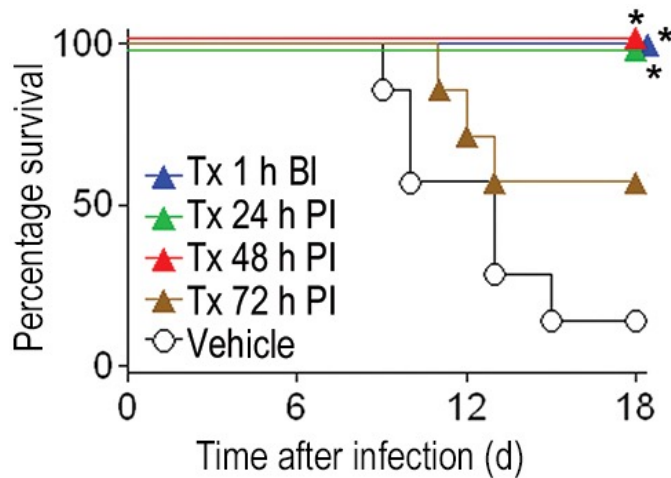
This level of efficacy, with a clinically meaningful therapeutic window, is rare in filovirus models and directly supports Animal Rule advancement

Rodent Filovirus Models

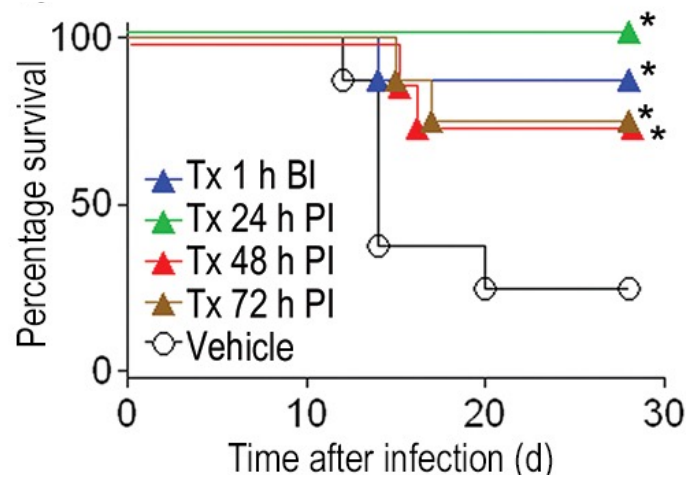
Supporting evidence across multiple filovirus models



MARV – Musoke



Aerosolized MARV-Angola



Guinea pigs infected with MARV-Musoke or aerosolized MARV-Angola showed strong survival with early and delayed dosing.

◦ IM, 50mg/kg BID treatment before (BI) or post-infection (PI)

THIS DATA REINFORCE GALIDESIVIR'S BROAD ANTIVIRAL ACTIVITY ACROSS FILOVIRUS SPECIES

Warren, T. K., J. Wells, R. G. Panchal, K. S. Stuthman, N. L. Garza, S. A. Van Tongeren, L. Dong, C. J. Retterer, B. T. Eaton, G. Pegoraro, S. Honnold, S. Bantia, P. Kotian, B. R. Taubenheim, L. S. Welch, D. M. Minning, Y. S. Babu, W. P. Sheridan and S. Bavari (2014). "Protection against filovirus diseases by a novel broad-spectrum nucleoside analogue BCX4430." *Nature: Advance Online Publication (AOP)* March 2, 2014, <http://dx.doi.org/10.1038/nature13027>

FDA Response Significantly De-risks Regulatory Pathway



FDA confirmed the Animal Rule pathway is appropriate for developing countermeasures against Marburg virus



Clear guidance provided on clinical program design - enables Island to continue to engage with the FDA and finalise plans ahead of trial commencement



FDA advised that Galidesivir would qualify for a Tropical Disease Priority Review Voucher (PRV) on approval - Most recent PRV sold for US\$200m



Island intends to commence the next Galidesivir animal study in Marburg to advance approval imminently based on FDA feedback

Animal Rule Is A Proven Path For Bioterror Threat Countermeasures



Company	Product	Year Approved	Disease Treated	SNS Sales (AUD)	Under SNS Contract
Emergent BioSolutions	raxibacumab	2012	Inhalational Anthrax	~\$450M	Yes
Kaléo	AUVI-Q	2012	Anaphylaxis (emergency countermeasure)	~\$100M+	No (contract expired)
Emergent BioSolutions	BioThrax	2015	Anthrax (prophylactic vaccine)	~\$1.2B+ (multi-year)	Yes
Elusys Therapeutics	Anthim	2016	Inhalational Anthrax	~\$320M	Yes
SIGA Technologies	TPOXX	2018	Smallpox	~\$850M+ (ongoing)	Yes
Paratek Pharmaceuticals	Nuzyra	2018	Anthrax (post-exposure prophylaxis)	~\$120M (partial uptake)	Yes (limited scope)
Bavarian Nordic	Jynneos	2019	Smallpox / Monkeypox	~\$300M+	Yes
Chimerix	Tembexa	2021	Smallpox	~\$400M	Yes

Since 2012, the FDA's Animal Rule approval has led to 8 bioterror countermeasures joining the US Strategic National Stockpile (SNS)

In 7 out of 8 cases, these medical countermeasures continue to remain under SNS contract and have generated 'lifetime sales' of between US\$100m - US\$1.2Bn at an average of US\$467m

~US\$600m has been provided through grants to develop a Marburg countermeasure with no tangible results

Marburg is the only Category A biothreat that has no treatment presently available in the Strategic National Stockpile

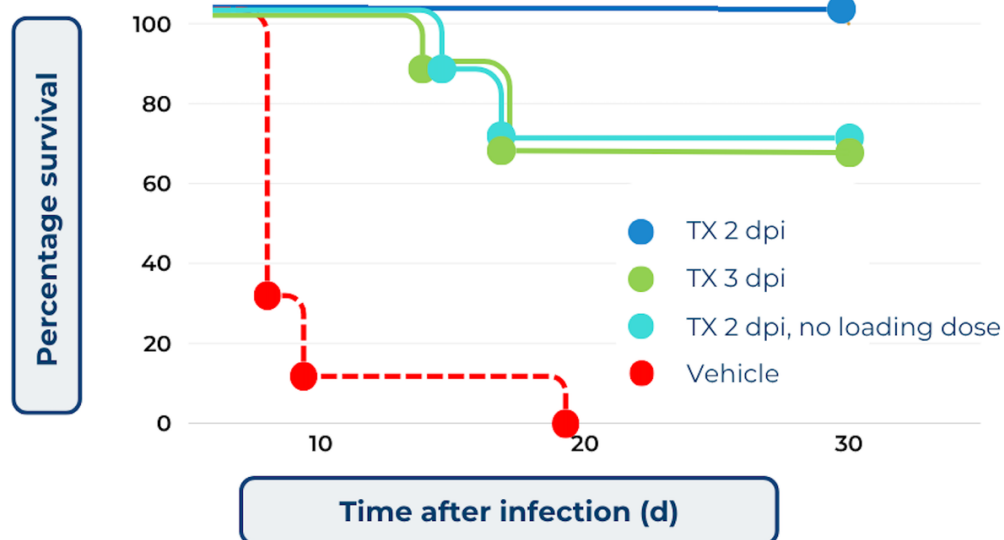
FDA approval of Galidesivir in Marburg provides a significant opportunity for a Priority Review Voucher as well as a multi-year SNS contract

Ebola NHP Survival

Robust efficacy in Zaire Kikwit NHP model with delayed dosing



Survival of rhesus non-human primates (6 per arm) challenged with Ebola virus (10^3) followed 2 or 3 days later by intramuscular administration of 100 mg/kg BID loading dose + 25 mg/kg BID for 10 days.



- 100% survival when treatment commenced 2 days post infection
- 67% survival when treatment commenced 3 days post infection
- 67% survival when treatment commenced 2 days post Infection with no loading dose

Warren, T. K. et al. Efficacy of Galidesivir Against Ebola Virus Disease in Rhesus Monkeys. Poster Presentation ID Week 2017

Government-Approved Africa Protocol

Monitored Emergency Use of Unregistered and Investigational Interventions (MEURI) framework



Government approvals have been secured to evaluate Galidesivir during the active Bundibugyo Ebola outbreak in Uganda under the WHO MEURI framework, creating a unique opportunity to generate prospective human clinical data.

Overview

- Government and regulatory approvals secured for compassionate use of Galidesivir.
- Patient treatment expected to commence in CY26.
- Clinical, safety and virological data will be prospectively collected throughout treatment.

WHO MEURI Framework

- A World Health Organization emergency framework for evaluating investigational medicines during disease outbreaks where no approved treatment exists.
- Enables patients to access promising therapies while generating valuable clinical evidence.

Strategic Importance

- First opportunity to evaluate Galidesivir during an active Ebola outbreak.
- Generates prospective human data in the intended disease setting.
- Complements the FDA Animal Rule program, strengthening Galidesivir's overall development strategy.

PARTNERS

Uganda Ministry of
Health
ACCEPT-Africa
Infectious Diseases
Institute
World Health
Organization

Completed Clinical Trial Results

A growing body of clinical evidence supports the continued development of Galidesivir.



Study	Type	Subjects	Delivery Mode	Design (Status)	Highest Dose	Key Findings
101	Phase 1 (Healthy Volunteers)	50 (SAD) 23 (MAD)	IM	SAD & MAD (Completed)	10 mg/kg x 7 days	• No SAEs • No dose-limiting toxicities • No lab abnormalities • Main AE injection site pain
106	Phase 1 (Healthy Volunteers)	24	IV	SAD (Completed)	20 mg/kg	• 3 AEs (headache) possibly related to drug on day 1 • No SAEs • No lab abnormalities • No dose-related toxicities
108	Phase 1b (Yellow Fever and COVID)	25 (COVID)	IV	Part 1- Dosing ranging (Completed)	20 mg/kg loading 5 mg/kg BID x 7 days	• No safety signals identified for galidesivir • No discernable difference in safety or tolerability between doses • No conclusions on effectiveness, efficacy or PK

Dual Development Strategy

Two complementary pathways advancing Galidesivir towards regulatory approval



Pathway 1	Pathway 2
Human Ebola Study	FDA Animal Rule Program
WHO MEURI Framework	USAMRIID Marburg challenge study
Real-world clinical data	Controlled non-human primate efficacy data
Bundibugyo Ebola patients	Marburg virus model
Human efficacy, safety and virological data	Controlled efficacy supporting FDA Animal Rule

Together, these complementary pathways combine prospective human clinical data with controlled non-human primate efficacy studies, strengthening Galidesivir's regulatory package and development pathway.

Multiple commercialisation opportunities



Galidesivir has the potential to fill multiple gaps in the US government's biodefence stockpile

Virus	Cell culture data	Animal data	Non-human primate efficacy	PRV Eligible for first indication	Animal Rule Potential	Strategic National Stockpile Potential
Marburg	✓	✓	✓	✓	✓	✓
Ebola	✓	✓	✓	✓	✓	✓
Sudan	✓			✓	✓	✓
Zika	✓	✓	✓	✓		
Chikungunya	✓			✓		

Pipeline

Advancing innovative therapies for serious global health threats.



Program		IND Enabling	Animal Pilot Studies	Animal Pivotal Study	Phase 1	Phase 2	Phase 3	NDA Submission	Compassionate Use
Galidesivir	Marburg								
	Ebola								
	Sudan								
	Yellow Fever								
	Zika								
ISLA-101	Dengue Treatment								
	Dengue Prevention								
ISLA-6181	Antiviral								

Near-Term Catalysts

A number of value catalysts pending in the coming months



Milestone	Timeframe
Establish Fellows Program to provide expert access to strategic subject matter KOLs	Complete
FDA feedback on Galidesivir protocol clarifying questions	Received
Government-approved deployment of Galidesivir under the WHO MEURI framework in Uganda	Received
Prospective human clinical, safety and virological data generation from MEURI framework	Q4 CY26 - Q2 CY27
Commencement of Galidesivir's development plan in non-human primates (NHP)	Initiated
Galidesivir NHP minimum effective dose study and PK study (20 NHPs)	Q4 CY26
Galidesivir NHP Time of dose post-infection study program (12 NHPs)	Q1 CY27
Galidesivir NHP pivotal Marburg study (~24 NHPs)	Q2 CY27
NDA preparation (Marburg / Ebola)	Q3 CY27
Explore partnership and international government engagement opportunities	Ongoing

Dates are indicative only, based on current estimates and subject to change



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THANK YOU



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