July 2025 I Euronext: ALBPS – OTC: BPTSY

Biophytis®

LIVE HEALTHIER LONGER

Forward Looking Statements

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biophytis
LIVE HEALTHIER LONGER

A clinical-stage biotechnology company specialized in the development of therapeutics for muscular and metabolic diseases

LIVE HEALTHIER LONGER

Aging, when combined with obesity, are main factors of age-related diseases, disabilities and finally reduced longevity. Biophytis has been leveraging a biology of aging platform with Sorbonne University to develop drug candidates for age-related diseases. It's most advanced drug candidate BIO101 is a potential first-in-class small molecule that stimulates muscle anabolism and is in clinical development for sarcopenia and obesity.

HQ location: Paris, France
Other locations in Sao Paulo, BR and Cambridge, MA US

Founded:
2006

Euronext growth Paris (ALBPS)
OTC market (BPTSY)

Drug discovery: biology of aging for developing drugs for age-related diseases

Multiple partnerships

Academical partnerships

SCIENCES SORBONNE UNIVERSITÉ
MÉDECINE SORBONNE UNIVERSITÉ

Pharmaceutical partnership

BLANVER

A clinical-stage biotechnology company specialized in the development of therapeutics for muscular and metabolic diseases

KEY UPCOMING MILESTONES

Biophytis is entering a decisive phase in the clinical development of its lead drug candidate, BIO101, with **major upcoming milestones in both obesity (OBA program) and sarcopenia (SARA program)**. Over the next 18 months, the company is preparing to **initiate new Phase 2 and Phase 3 studies**, while continuing to strengthen its international partnerships and regulatory positioning.

OBESITY MILESTONES

Q2 25: BIO101 + GLP-1 animal studies results

Q3 25:
- Readiness to start phase 2 clinical study in obesity OBA in the US
- First patient-in in the US

Q4 25:
- Readiness to start phase 2 OBA clinical study in Brazil & EU
- First patient in In EU & Brazil

H1 26: Last patient in and out

H2 26: Reporting of the results

SARCOPENIA MILESTONES

Q2 25: Exclusive discussion for licensing-out BIO101 with a large Chinese pharma

Q3 25: Preparation to start Phase 3 SARA study with partner in China and Europe

Q4 25:
- Production of clinical batches
- Regulatory approval in China

H1 26:
- Readiness to start phase 3 SARA clinical study
- First patient-in in EU

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BIOPHYTIS' People: Expertise & Passion

Stanislas VEILLET
CEO, cofounder

Jean MARIANI
Chief Medical Officer

Waly DIOH
Chief Operations Officer

Pierre DILDA
Chief Scientific Officer

Chiara BACCELLI
Chief Pharmaceutical Operation, Officer & Quality Assurance Director

Edouard BIETH
Chief Strategy Officer

Christophe COURTILLAT
Chief Financial Officer

BIO101 (20-hydroxyecdysone): Potential first-in-class drug candidate

New molecular target

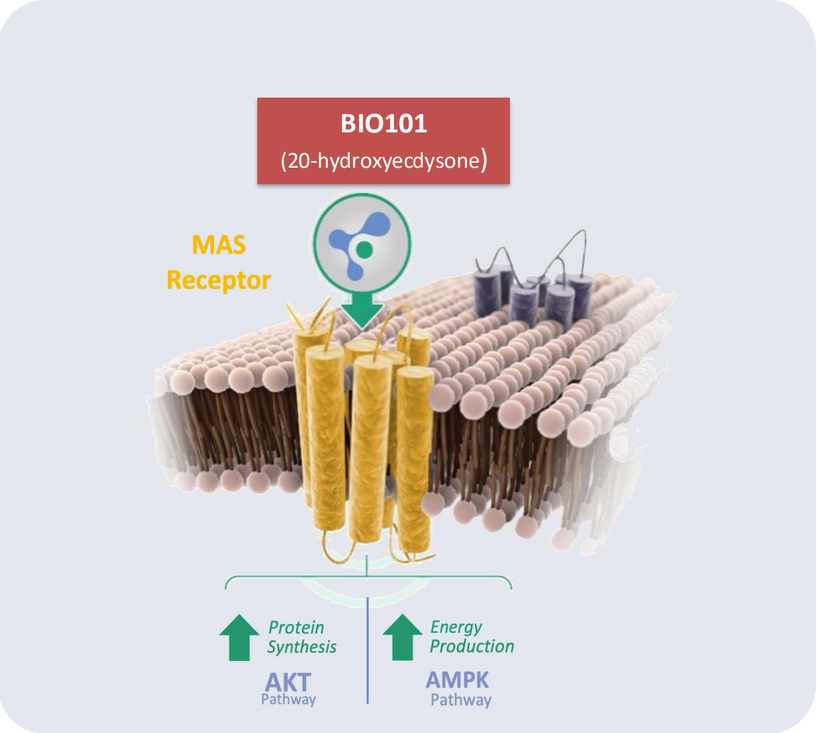
- Activation of MAS receptor[1] (renin-angiotensin system)
- Regulation of smooth, cardiac and skeletal muscle metabolism
- Stimulation of muscular and respiratory functions

POC & safety in clinical studies

- Completed clinical studies in healthy elderlies and obese adults (Phase 1)
- Completed clinical study in sarcopenic & obese sarcopenic elderlies (Phase 2)

Convenience, affordable manufacturing cost and a robust IP

- 14 patent families, 44 patents granted in key western (US, EU, Japan) and BRICS (China, BR) countries
- 5 patent families covering specifically sarcopenia & obesity indications
- API manufactured at industrial scale for an oral intake

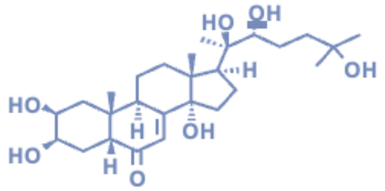


BIO101 (20-hydroxyecdysone) activates MAS receptor and triggers downstream two signaling-pathways in myocytes: AKT & AMP (based on molecular and cellular models)

Source : [1] Lafont et al. 2022, doi: 10.1530/JME-21-0033

Our Clinical Pipeline

A unique development program for improving mobility

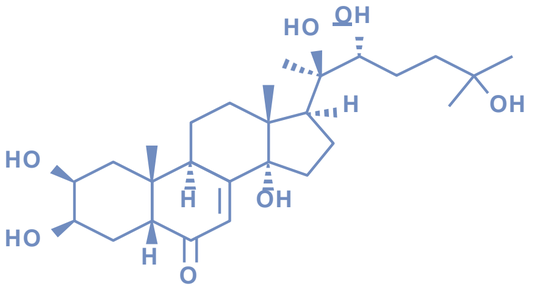


Biophytis is preparing to initiate the **Phase 2 OBA study in obesity in 2025** and the **Phase 3 SARA study in sarcopenia by 2026**.

Candidate	Indication	Program	Preclinical	Phase 1	Phase 2	Phase 3	Regulatory	Market
BIO 101 20-hydroxyecdysone	Sarcopenia	SARA						
	Obesity	OBA						

BIO101 is designed to address major public health challenges, notably Obesity and Sarcopenia, and unlock huge market opportunities

BIO101 represents a potential breakthrough in the treatment of muscle-related diseases. Its unique mechanism of action targets muscle function and muscle structure, to address two critical public health challenges :



BIO101 (20-hydroxyecdysone)

OBA

Obesity significantly impairs mobility, while current obesity treatments (GLP1) can potentially cause further muscle wasting.

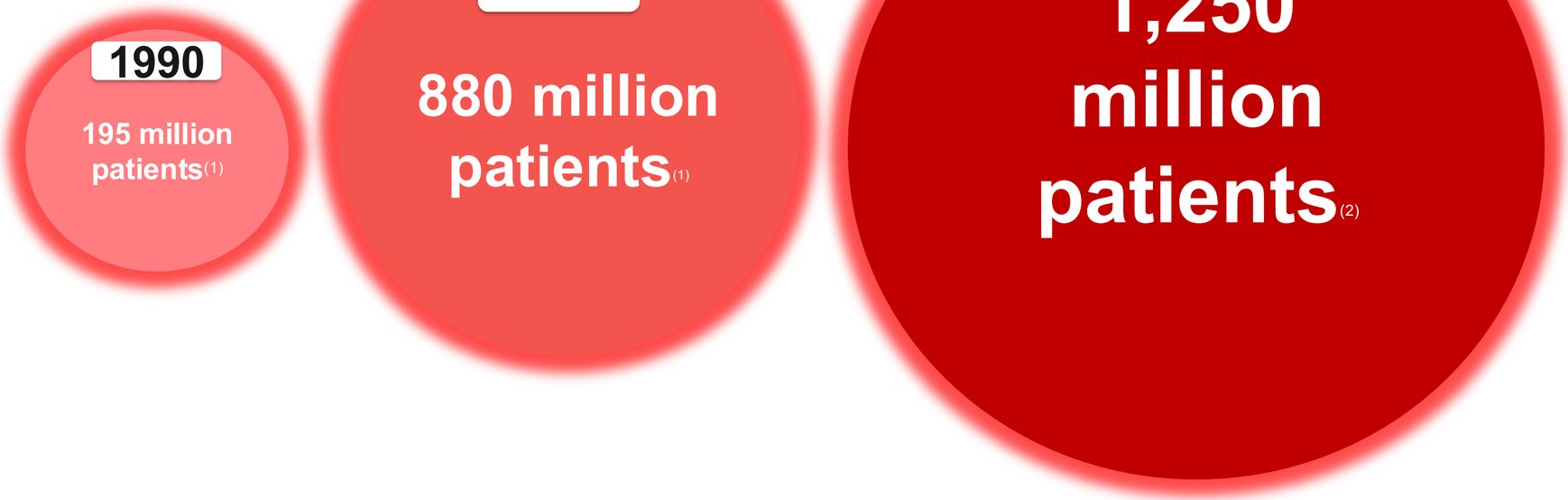
SARA

Sarcopenia is characterized by the degenerative loss of muscle mass, quality, and strength – no therapeutic solution exists today for treating sarcopenia

BIO101 (20-hydroxyecdysone)

in Obesity

Obesity : an uncontrolled global epidemic and a huge market opportunity



$4tn

The global cost of treating obesity-related complications by 2035.

3x

The global prevalence of obesity has more than tripled since 1975.

$100bn

MARKET SIZE BY 2030

Global number of obese patients among the adult population

Source : (1) WHO 2022, (2) https://www.statista.com/statistics/1386134/number-of-overweight-or-obese-people-worldwide-forecasts/,
(3) https://www.goldmansachs.com/intelligence/pages/anti-obesity-drug-market.html

Obese patients have poor muscle quality and suffer from reduced mobility

96%

of obese patients have **impaired specific muscle strength** (1)

84%

of obese patients are deemed to have **poor muscle quality** (1)

> In clinical practice, **caregivers should consider strategies to**
>
> **maintain muscle**
>
> **status when applying** surgical or **pharmacological obesity management therapies** (2)

nature International Journal of Obesity

Source: Valenzuela et al. BMC Musculoskeletal Disorders (2020) 21:200, (2) Obesity management strategies should cut fat, not muscle | International Journal of Obesity

Muscle wasting: an unmet medical need

wegovy®

Semaglutide *at its weight loss dose of 2.4 might have a potentially worse lean mass loss ratio. In the Ph3 trial STEP-1, semaglutide showed less optimal 1.98-to-1 ratio of fat-to-lean mass loss on a percentage basis (1.50-to-1 on an absolute basis, at week 68 Wilding et. al JES 2021 and Wilding et. al. NEJM 2021).*

zepbound™

Tirzepatide *in obese patients was said to be "similar to that reported with lifestyle-based and surgical treatments for obesity," (Jasteboff et. al. NEJM 2022). In the Ph3 SURMOUNT-1 trial, tirzepatide showed a 3.11-to-1 ratio of fat-to-lean mass loss on a percentage basis (week 72, absolute basis not reported Jasteboff et. al. NEJM 2022).*

Up to 40% of muscle loss

Proportion of lean body mass loss vs total weight loss in obese patients treated with GLP-1RA.

And no drug registered for preserving muscle mass and/or function in case of obesity management with GLP1-RAs

High medical need to be converted into a **huge market opportunity**

Sources:
World Obesity Federation report: https://www.worldobesity.org/news/economic-impact-of-overweight-and-obesity-to-surpass-4-trillion-by-2035
World Health Organization report: https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight
McCarthy et al. Weight Loss Strategies and the Risk of Skeletal Muscle Mass Loss. Nutrients 2021, 13, 2473: https://doi.org/10.3390/nu13072473

BIO101 is the only muscle agent in clinical development focusing on muscle strength

Drug	Company	Mode of action	Main Effect	Safety & Side effects	Administration route	Status
BIO101	Biophytis	MAS Receptor activator	Muscle strength (*knee extension determined by dynamometry)*	BIO101 has been well tolerated in 277 individuals across multiple clinical studies	Oral	Phase 2
Azelaprag	BIOAGE	APJ agonist	% change in overall weight loss	Hepatotoxicity (Liver transaminitis) (5)	Oral	Phase 2 halted
Bimagrumab	Lilly Versanis	Activin type II receptor blocker	Changes in body weight, waist circumference, and body composition	Muscle spasms and diarrhea (2)	Intravenous	Phase 2
Enobosarm	veru	Selective Androgen Receptor modulator	Total lean body mass	Increased hepatic transaminases, fatigue, hypercalcemia (1)	Oral	Phase 2 completed

There is no drug registered for muscle preservation in obesity

Source: (1) Lancet Oncol 2024; 25: 317–25 (2) JAMA Network Open. 2020;3(10):e2020836. doi:10.1001/jamanetworkopen.2020.20836 (4) DrugBank entry on Trevogrumab (5) https://bioagelabs.com/azelaprag

Potential attributes of BIO101 (20-hydroxyecdysone) in obese patients treated with GLP-1RA

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Effects on muscle wasting:

- Preservation of muscle strength
- Reduction of muscle mass loss
- Improvement of mobility

Effects on fat tissues:

- Increase of fat mass loss

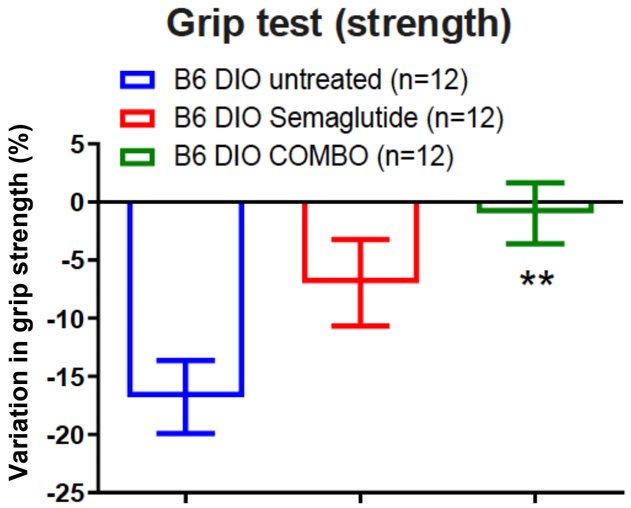
Convenient and safe administration :

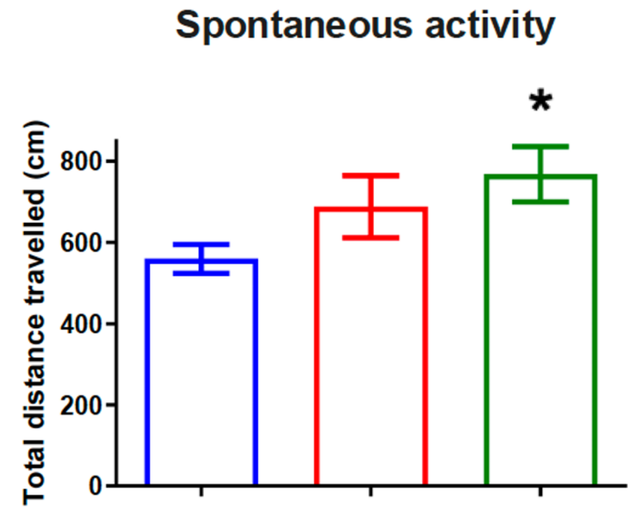
- Oral route
- Adequate safety observed to date in adults from trials in healthy volunteers (phase 1), in sarcopenia (phase 2) and Covid-19 (phase 2-3)

BA

Source: Foucault 2012. AgroParisTech, 2012. NNT : 2012AGPT0041. pastel-00998299

Revolutionary preclinical data in obesity





Metabolic effects in obese mice :

- Protective effect of BIO101 (20-hydroxyecdysone) in mice fed an obesity-inducing high-fat diet, preventing adipose tissue development
- Anti-obesity effect by increase in energy expenditure

Muscle function in mice fed high fat :

- Improved physical performances in adult and old animals orally treated with BIO101 (20-hydroxyecdysone)

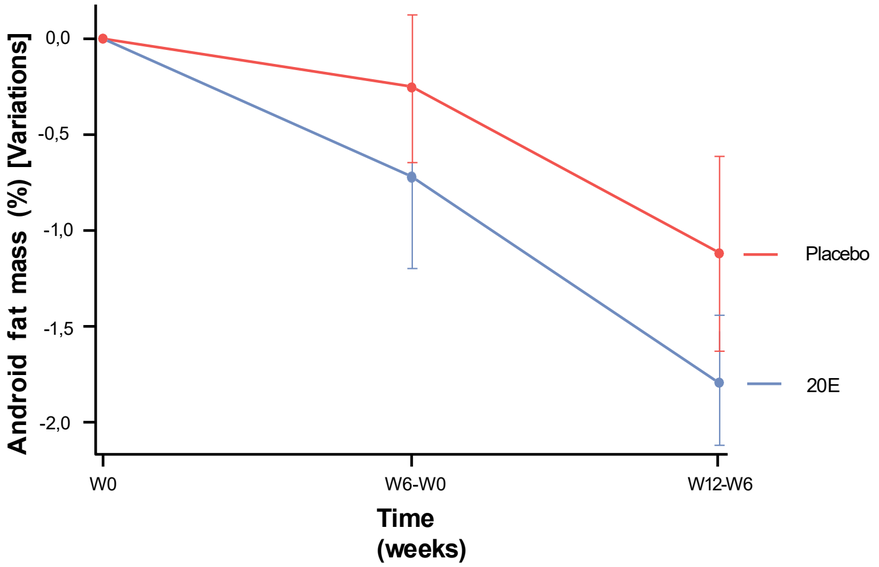
Muscle function and mobility in obese mice treated with a GLP-1 receptor agonist:

- Protection of muscle strength and improvement of mobility in animals receiving a GLP-1 receptor agonist and orally treated with BIO101 (20-hydroxyecdysone).

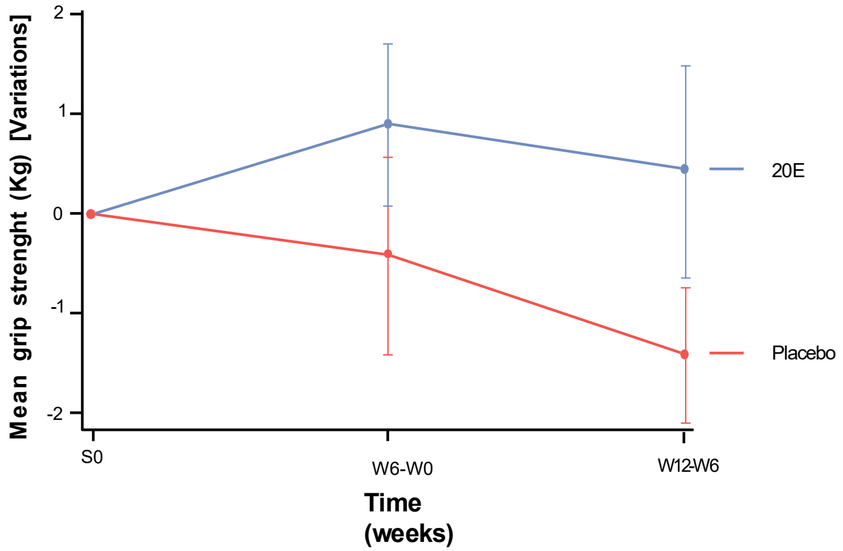
Source: Foucault et al., 2012, Obesity, 20, 270–277; Foucault et al., 2014, Physiology & Behavior, 128, 226–231; Serova et al., 2023, Journal of Cachexia, Sarcopenia and Muscle, 15(1):55–66; Van Maanen et al., 2025, ICFSR, March 12–14, Toulouse, France. The Journal of Frailty & Aging, Volume 14, Supplement 1, S42.

Promising clinical data in obese patients on hypocaloric diets for weight-loss

Android fat mass
(p=0.0386)



Handgrip strength
patients with weight loss >5%
(p=0.0974)



20-hydroxyecdysone (20E) daily dose of 37.5 mg (given orally) compared to placebo (n=58)

12 weeks study, with weight loss on hypocaloric diet for six weeks (S0-S6) followed by a normocaloric diet for six weeks (S6-S12)

Source: Foucault 2012. AgroParisTech, 2012. NNT : 2012AGPT0041. pastel-00998299

OBA – Phase 2 development plan

Studies to be conducted in the US, Brazil and Europe (Belgium). Biophytis has obtained IND approval in the U.S., filed with the EMA in Europe, and are preparing to launch the process in Brazil.

Design

- Randomized, double-blind, placebo-controlled phase 2 trial
- Assess efficacy and safety of BIO101 (20-hydroxyecdysone) 350 mg BID administered orally over 21 weeks

Endpoints

- Primary
  - Muscle strength (knee extension)
- Secondary
  - Walking speed (6-minute walking test)
  - Muscle strength normalized in relation to muscle mass
  - Weight, muscle mass and fat mass
  - Symptoms reported by patients (PROs)

Patient Population

- 164 adult obese patients treated with GLP-1 RAs, together with hypocaloric dieting
- Obese patients (BMI ≥30) or overweight (BMI ≥27 with one or more sequalae e.g. hypertension and sleep apnoea)

Product

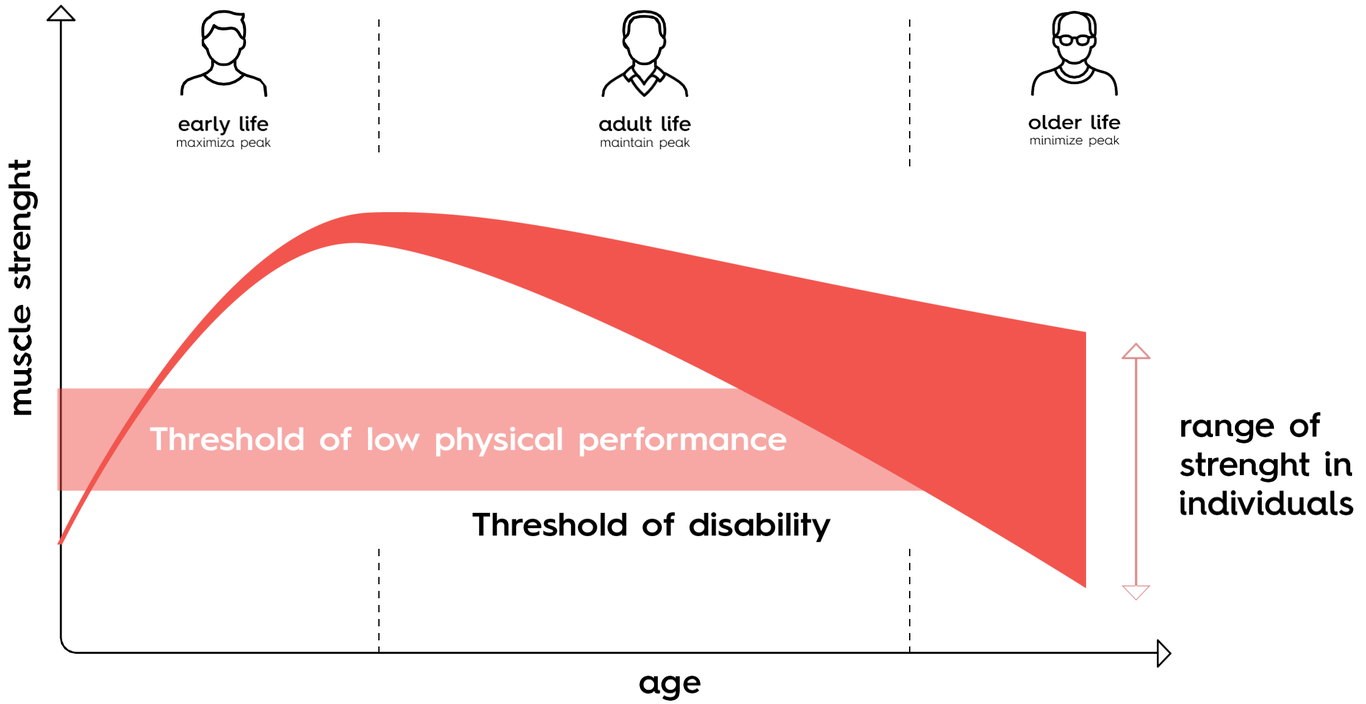
BIO101 (20-hydroxyecdysone)

in SARCOPENIA

SARA

Sarcopenia is an aged related disease, with no approved drug treatments

Sarcopenia is a syndrome defined by many consortia including the EWGSOP (The European Working Group on Sarcopenia in Older People), characterized by **progressive and generalized loss of skeletal muscle mass, strength and function** associated with an increased risk of adverse events such as disability, poor quality of life and death.



Source : 1. Munro HN. Adaptation of body protein metabolism in adult and aging man. Clin.Nutr. 1982;1:95-108.; Yuan 2023, Epidemiology of Sarcopenia, Metabolism

Biophytis is leading the way in a huge and growing market

Up to 194 million

Patients affected by sarcopenia worldwide, **a trend that will further accelerate** in the coming years and decades with the aging of the population

265 million

Individuals aged 80 and older by the mid-2030s

No therapeutic solution exists today for treating sarcopenia

Biophytis is the most advanced company in this indication with BIO101 and **the only player to have received EU and US regulatory approvals** to start Phase 3 clinical study.

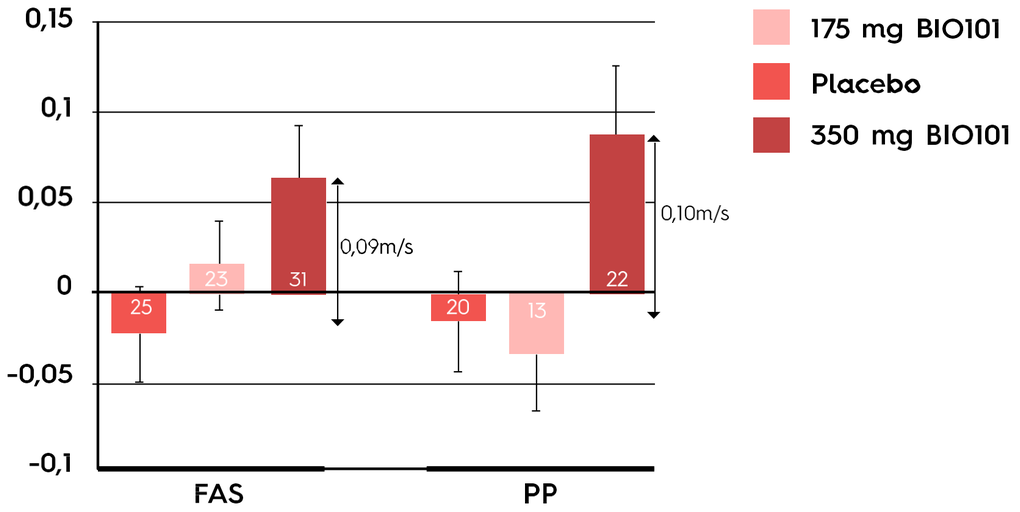
Sources:
World Obesity Federation report: https://www.worldobesity.org/news/economic-impact-of-overweight-and-obesity-to-surpass-4-trillion-by-2035
World Health Organization report: https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight
McCarthy et al. Weight Loss Strategies and the Risk of Skeletal Muscle Mass Loss. Nutrients 2021, 13, 2473: https://doi.org/10.3390/nu13072473

Strong results obtained in SARA-INT phase 2 trial

BIO101 (20-hydroxyecdysone) significantly improved the 400 MWT gait speed, the primary endpoint, in the PP population after 6 months of treatment

- Global, double-blind, randomized, placebo-controlled trial in patients with aged-related sarcopenia at risk of mobility disability to evaluate safety and efficacy of BIO101 (20-hydroxyecdysone)
- At the highest dose of 350 mg bid: clinically meaningful improvement of 0.10 m/s in the PP population (significant, p=0.008) compared to placebo for the 400MWT gait speed after 6 months of treatment
- This gait speed level of 0.10 m/s is known to be associated with a reduction in mobility disability and mortality in the elderly
- BIO101 (20-hydroxyecdysone) demonstrated the same effects on mobility in the **sarcopenic obese subpopulation**.

Change from baseline at M6 Gait speed



Treatment effect is nominally significant in PP population at M6 (p = 0.008)

Source: Tourette et al. 2022. The Journal of Frailty & Aging, vol. 11: S1,22 doi: 10.14283/jfa.2022.22.

SARA Phase 3 development plan

Biophytis to launch THE FIRST EVER Phase 3 drug clinical study in Sarcopenia

Design

- Global, double-blind, randomized, phase 3 placebo-controlled trial
- Assess safety and efficacy of BIO101 (20-hydroxyecdysone) 350 mg BID administered orally over at least 52 weeks, as compared to placebo
- Treatment effect based on estimation of the risk of mobility disability

Endpoints

- Primary
  - Major Mobility Disability (MMD) assessed by the inability to complete the 400-meter walk test (400MWT) within 15 min
- Secondary
  - Gait speed 4-meter from Short Physical Performance Battery (SPPB)
  - Handgrip Strength (HGS)
  - Patient Reported Outcomes (PRO)

Patient Population

- 932 adult patients
- Age: 65 years old or over
- Low mobility measured by Short Performance Physical Battery: $3 \leq SPPB \leq 7$
- Low Handgrip Strength (HGS < 20 and <35 kg in female and male)
- Slow walkers (gait speed < 0.8 m/s)
- Reporting a loss of motor function over the last year

Product	2023	2024	2025	2026
350 mg b.i.d of BIO101 (20-hydroxyecdysone)	CTA in Europe/US		SARA-31 Phase 3 (depending on partnership)	

Scientific Advisory Board

Pr. Jean Mariani, President

- Professor of neuroscience and biology of aging and Director of Charles Foix Institute of Longevity at Sorbonne University
- Emeritus Professor (PU-PH) at the Sorbonne University's School of Medicine

René Lafont

- Co-Founder & Professor emeritus and former Dean of the life sciences department at Sorbonne University
- 185 scientific articles + 59 reviews and book chapters

Dr. Roger Fielding

- Professor of Medicine, Tufts University School of Medicine
- Director and Sr. Scientist Jean Mayer USDA Human Nutrition Research Center on Aging

Pr. Bernard Levy

- Professor Emeritus of Physiology and a senior member of PARCC
- Headed the physiology department and the Inserm cardiovascular research center at Lariboisière

Pr. Jose-Alain Sahel

- Chair of the department of ophthalmology at University of Pittsburgh School of Medicine and director of the UPMC eye center
- Founder and director of the Vision Institute in Paris and professor at the Sorbonne's medical

Dr. Thomas Voit

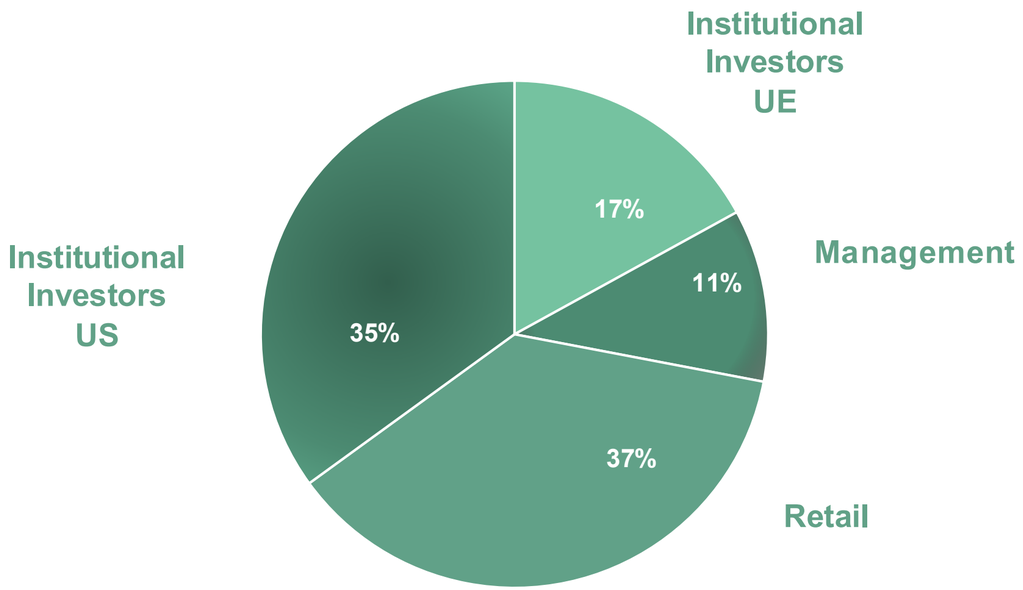
- Professor, University College London
- Director of the Research Center of the Great Ormond Street Hospital for Children

Dr. Yann Meunier

- Professor, Director of the International Institute of Medicine and Science
- Has led clinical trials for new treatments for HIV/AIDS

Financial data

Shareholding structure



Noteworthy Institutional Investors : *Atlas, BlackRock, Armistice*

Number of shares: **27,634,388** (July 31, 2025)

Key financial figures

Listing Euronext (ALBPS) and US market (OTC)

- Cash position: €78K (December 31st, 2024)
- Additional cash: €2.5m in January 2025 and €2.6m in March 2025 through cash contribution and private placement
- Commitment to convert €4m of financial debt (BlackRock and Atlas) at €0.30 per share, corresponding to 13.4 million shares.

Analyst Coverage

- H.C. Wainwright – Joe Pantginis, Ph.D.
- Kepler Cheuvreux – Nicolas Pauillac
- Invest Securities – Jamila El Bougrini, Ph.D.

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THANK YOU

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