Annexon to Host Virtual R&D Day on Guillain-Barré Syndrome, Focusing on its Serious Unmet Need and Annexon's Novel Therapeutic Approach

February 21, 2024

Virtual event on Friday, March 1, 2024 at 10:00 AM ET

Event will feature GBS experts Lisa Butler of the GBS|CIDP Foundation International, Hugh Willison, MBBS, PhD, Professor Emeritus of Neurology of University of Glasgow, and David Cornblath, MD, Professor Emeritus of Johns Hopkins University School of Medicine

BRISBANE, Calif., Feb. 21, 2024 (GLOBE NEWSWIRE) -- Annexon, Inc. (Nasdaq: ANNX), a clinical-stage biopharmaceutical company developing a new class of complement-based medicines for people living with devastating inflammatory-related diseases, today announced it will host a virtual R&D Day on Friday, March 1, 2024 at 10:00 AM ET. To register, click here.

The event will feature GBS experts who will provide an overview of Guillain-Barré syndrome (GBS), the most common cause of acute neuromuscular paralysis:

- **Lisa Butler**, Executive Director, GBS|CIDP Foundation International
- **Hugh Willison, MBBS, PhD**, Professor Emeritus of Neurology, University of Glasgow
- **David Cornblath, MD**, Professor Emeritus of Neurology, Johns Hopkins University School of Medicine

Presentations from GBS experts and Annexon management will highlight:

- Current treatment landscape and opportunities for new therapies from the patient and clinician perspective
- Targeting C1q in GBS with ANX005, Annexon's investigational monoclonal antibody designed to inhibit C1q and stop classical complement pathway activation before it starts
- Annexon's pivotal Phase 3 trial expected to read out in the second quarter of this year
- The GBS market opportunity and Annexon's commercial approach

A live question and answer will follow formal presentations.

About Lisa Butler
Lisa Butler first joined the GBS|CIDP Foundation community as the Parent Liaison for parents with children diagnosed with GBS, following her son Stuart's diagnosis of GBS in 2002. In 2013 Lisa was appointed Executive Director of the Foundation and has since led their mission to ensure that no one faces these rare conditions alone. Lisa brings a wide breadth of experience in managing the Foundation's strategic relationships, volunteers, patient advocacy programs, and legislative efforts affecting the lives of GBS|CIDP patients. She was recognized by Patient Services, Inc. (PSI) with the 2016 Extraordinary Support Award. Lisa was elected to the board of directors for the National Health Council in 2023 and sits on the finance and membership committees. She is also a member of the board for the Late-Onset Neuromuscular Consortium.

About Hugh Willison, MBBS, PhD
Hugh Willison, MBBS, PhD, Professor Emeritus of Neurology, University of Glasgow in Scotland, has led the Neuroimmunology Research Group within the Glasgow Biomedical Research Centre since its inception over 10 years ago. He conducts experimental research of clinical relevance to autoimmune neuropathy, notably Guillain-Barré syndrome including assessment of novel biologicals and identification of disease biomarkers. He has received long-term funding from the Wellcome Trust. He advises widely to the pharmaceutical industry on the development of strategic areas, notably immunity and vaccination. He is networked globally in the biomedical field pertaining to nervous system disorders. He co-directs an international school fostering upcoming talent in Neuroimmunology.

About David Cornblath, MD
David Cornblath, MD is Professor Emeritus of Neurology at the Johns Hopkins University School of Medicine where he was on the Faculty for 40 years. His main focus is on inflammatory neuropathies: GBS, CIDP, and MMN. He has participated in clinical trials in all of those areas including 3 trials in GBS and has over 350 publications.

About Guillain-Barré Syndrome
Guillain-Barre syndrome (GBS) is a severe disease resulting from an autoantibody attack on the peripheral nerves, activating C1q and the classical complement cascade to cause acute peripheral nerve damage. GBS generally occurs post-infection in otherwise healthy persons. The peripheral nerve damage progresses rapidly, causing acute neuromuscular paralysis, and may lead to significant morbidity, disability and mortality. Annexon's clinical-stage investigational monoclonal antibody, ANX005, is intended to treat patients with GBS. This novel therapy is formulated for intravenous (IV) administration and is designed to inhibit C1q and the entire classical complement pathway. ANX005 has received both Fast Track and Orphan Drug designations from the U.S. Food and Drug Administration, and Orphan Drug Designation from the European Medicines Agency, for the treatment of GBS.

About Annexon
Annexon Biosciences (Nasdaq: ANNX) is a clinical-stage biopharmaceutical company utilizing a distinct scientific approach to stop C1q and all inflammatory aspects of classical complement pathway activation before it starts. As the only company solely focused on targeting C1q, Annexon is developing a fit-for-purpose pipeline of therapeutics designed to provide meaningful benefits across multiple diseases of the body, brain and eye. With proof-of concept data in Guillain-Barré syndrome, geographic atrophy, and Huntington's disease, Annexon is rigorously advancing its mid-to late-stage clinical trials to bring their potential treatments to patients as quickly as possible. To learn more visit annexonbio.com.

Forward Looking Statements

This press release contains forward-looking statements within the meaning of Section 27A of the Securities Act of 1933, as amended, and Section 21E of the Securities Exchange Act of 1934, as amended. In some cases, you can identify forward-looking statements by terminology such as “aim,” “anticipate,” “assume,” “believe,” “contemplate,” “continue,” “could,” “design,” “due,” “estimate,” “expect,” “goal,” “intend,” “may,” “objective,” “plan,” “positioned,” “potential,” “predict,” “seek,” “should,” “suggest,” “target,” “on track,” “will,” “would” and other similar expressions that are predictions of or indicate future events and future trends, or the negative of these terms or other comparable terminology. All statements other than statements of historical facts contained in this press release are forward-looking statements. These forward-looking statements include, but are not limited to, statements about: the anticipated timing of completion and readout of the Phase 3 trial of ANX005 in patients with GBS; and the potential therapeutic benefit of ANX005; and market size for ANX005. Forward-looking statements are not guarantees of future performance and are subject to risks and uncertainties that could cause actual results and events to differ materially from those anticipated, including, but not limited to, risks and uncertainties related to: the company’s history of net operating losses; the company’s ability to obtain necessary capital to fund its clinical programs; the early stages of clinical development of the company’s product candidates; the effects of public health crises and geopolitical conflicts on the company’s clinical programs and business operations; the company’s ability to obtain regulatory approval of and successfully commercialize its product candidates; any undesirable side effects or other properties of the company’s product candidates; the company’s reliance on third-party suppliers and manufacturers; the outcomes of any future collaboration agreements; and the company’s ability to adequately maintain intellectual property rights for its product candidates. These and other risks are described in greater detail under the section titled “Risk Factors” contained in the company’s Annual Report on Form 10-K and Quarterly Reports on Form 10-Q and the company’s other filings with the SEC. Any forward-looking statements that the company makes in this press release are made pursuant to the Private Securities Litigation Reform Act of 1995, as amended, and speak only as of the date of this press release. Except as required by law, the company undertakes no obligation to publicly update any forward-looking statements, whether as a result of new information, future events or otherwise.

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