Nutraponia Therapeutics

Care for the patient with cancer cachexia

March 2026

NT1000: A differentiated approach that addresses a major unmet need in cancer cachexia

Significant unmet need: The American Cancer Society recognizes cancer cachexia as a high-burden condition; however, no effective treatments currently exist, despite broad regulatory and payer acknowledgement of the unmet need

Attractive and growing market opportunity: ~$950M market exists today and is expected to grow to $1.2B+ in the coming years, creating a significant opportunity in an underpenetrated market

Differentiated science: NT1000 is the only therapy for cancer cachexia that relieves patient pain while improving quality of life (QoL)

Focused commercial strategy: Initial launch targets key cities with a phased and scalable global expansion

Meet Our Highly Experienced Team

Founder	Eric Rugart
Chief Executive Officer	Gerri Henwood
Finance	Mike Choi
Chief Medical Officer	Stewart McCallum, MD

Large unmet need persists in cancer cachexia

~600,000 U.S. patients "diagnosed" with cancer cachexia at initial presentation in 2024

Estimated ~6% of cancer patients are diagnosed with cachexia, **despite >60% being *observed*** (per BMI criteria)

Patients are reluctant to take supplements but **strongly desire effective pain relief**

Cancer cachexia negatively affects quality of life (QoL) and increases symptom burden

Strong regulatory and payer interest, combined with a lack of effective treatments, underscores the need for a new cancer cachexia therapy

Strong Regulatory & Payer Interest

Interest in supporting care solutions that reduce cancer pain and improve QoL

Lack of Effective Treatments

Currently no effective treatments for cancer cachexia

Substantial market growth in the next 3 to 5 years supports an attractive opportunity for an effective treatment

$943M

Current Estimated Market Size

The US market alone for cachexia treatments is approximately $943M

$1.25B

Projected Market Size in the Next 3-5 years

Globally, the market is conservatively expected to grow with a CAGR of 5%-7%

Our vision is for NT1000 to address the core unmet needs of patients with cancer cachexia

Pain Relief

NT1000 relieves patient pain by delivering oxycodone

Improve QoL

High-quality, easily digestible components deliver supplemental calories

Mechanism of action relieves patient pain and improves QoL

Mechanism of Action

Oxycodone Pain:

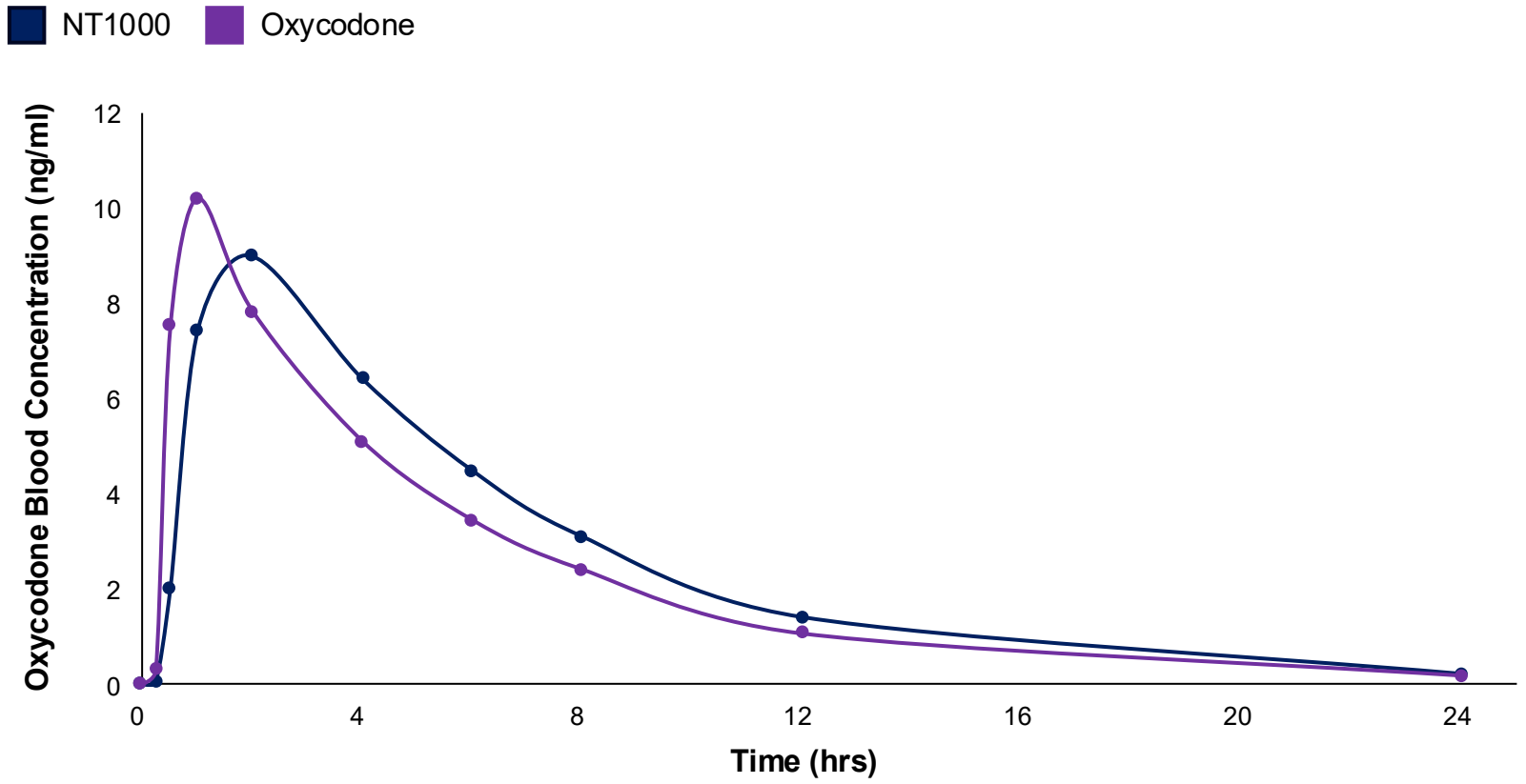
Acts as an agonist at opioid receptors (primarily mu, kappa and delta) located throughout the central nervous system (brain and spinal cord) and the periphery

Unique Lipid Matrix:

A structured lipid formulation designed for efficient gut absorption supports caloric intake and has the potential to improve quality of life in patients with cancer cachexia

Phase 1 study shows NT1000 reduces the peak and is well absorbed

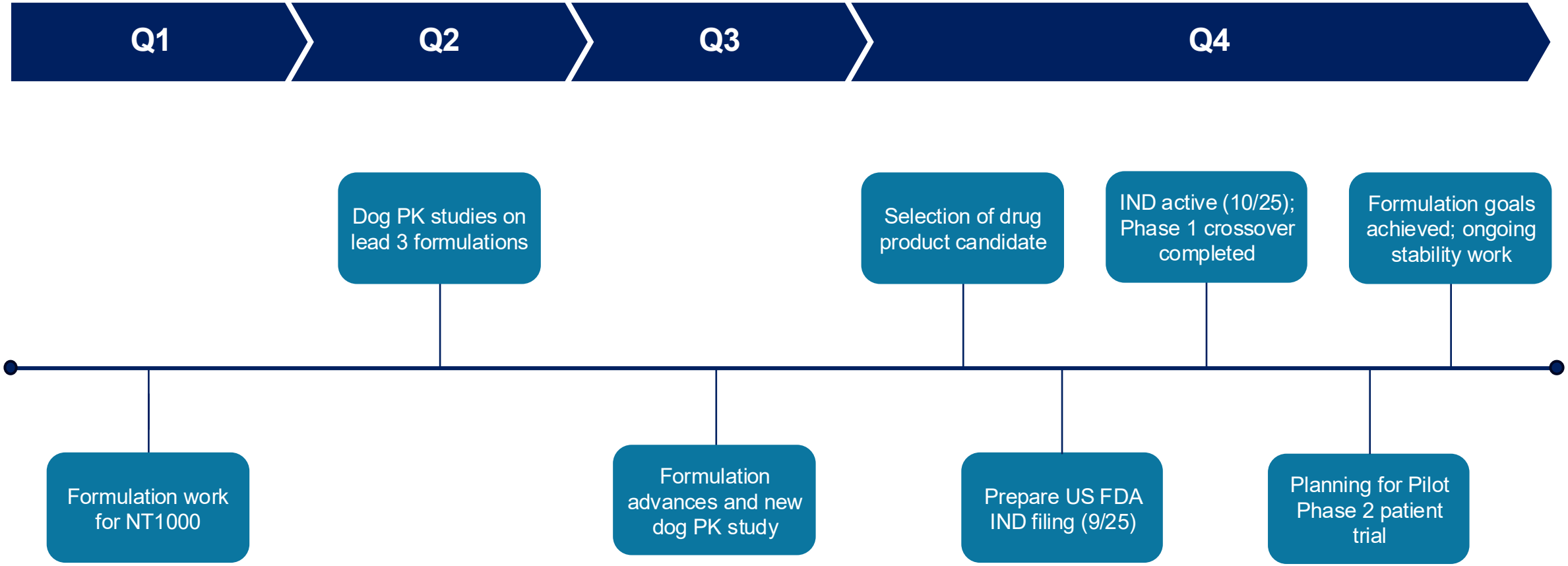
Mean Oxycodone blood concentration



Insights

- Two-way crossover, single dose PK study of reference
- Oxycodone 5 mg vs NT 1000 formulation plus oxycodone 5 mg in 12 healthy volunteers

There has been significant activity for NT 1000 in 2025



Projected time to NDA 505(b)2 filing is 2028

2026		2027		2028	
Q1	Phase 2a: KOL discussions & FDA submission of draft pilot study	Q1	Phase 2a pilot study completion	Q3	Phase 3 trial completion
Q1 – Q2	Manufacturing scale up for clinical study supplies	Q1 – Q2	Definitive analgesia efficacy trial using traditional design	Q4	505(b)(2) NDA submission
Q1 – Q2	Phase 2a pilot study site selection	Q3	Phase 3 efficacy trial initiation in cachexic patients (powered for secondary endpoints)		
Q3	Phase 2a study initiation				

Commercial strategy will initially focus on key markets, followed by phased expansion

Target Patient Population

- GI
- Lung
- Prostate
- Pancreatic

Target Customers

- Medical Oncology subspecialists
- Palliative Care specialists

Go-to-Market Model

- Targeted specialty oncology sales team
- Specialty distribution channel
- Initial launch in select medical centers in key cities
- Expansion over time

An investment of $6.5M supports funding of the company through Phase 2a study and manufacturing scale up for clinical work, etc…

Estimated Funding

~$2M

Total funding to date

$25-30M

Development to NDA submission (‘28)

Near Term Funding Needs

~$6.5M

For Pilot 2a study in patients with cachexia and additional scale up CMC required pre-definitive studies

~16 months

Projected runway

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