Aravax is a clinical stage biotechnology company focused on revolutionising the treatment of food allergies with next-generation, disease-modifying immunotherapies which aim to be safe, convenient and offer hope for a better future.



PVX108

PVX108, our lead investigational immunotherapy for peanut allergy, is the first therapy designed to precisely target the root cause of this disease. Administered intradermally once a month, it uses specific peptides designed to retrain the immune system to tolerate peanuts while minimising the risk of treatment-induced acute reactions.

International phase 2 trial for the treatment of peanut allergy

PVX108 has completed a 12-month double-blind, placebo-controlled safety and efficacy trial in adolescents and children with peanut allergy. Topline results in children demonstrated clinically meaningful efficacy, a well-tolerated safety profile, and showed evidence of disease-modifying potential. An open-label extension study in children is ongoing.

PVX108 was awarded US FDA Fast Track designation, a process designed to accelerate the development and review of drugs that treat serious conditions with high unmet medical need. Preparations for late-stage development are underway.

PVX108 is designed to:

- Be safer and more convenient than other forms of immunotherapy
- Offer potential for disease-modification.

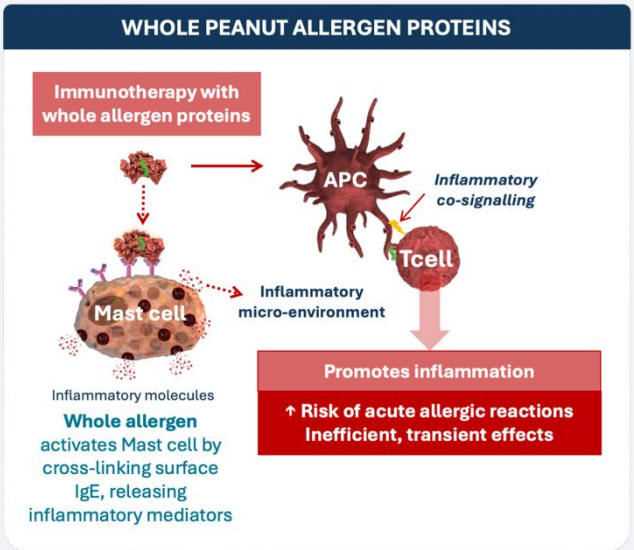
Significant unmet medical need and market potential

Peanut allergy is a growing, serious problem affecting 1-2 % of children in western countries and is the food allergy most likely to cause anaphylaxis and death[1]. In the US more than 5 million adults, and 1.2 million children have peanut allergies [2,3,4].

PVX108 is addressing the critical need for new approaches for the treatment of peanut allergy, especially in children.

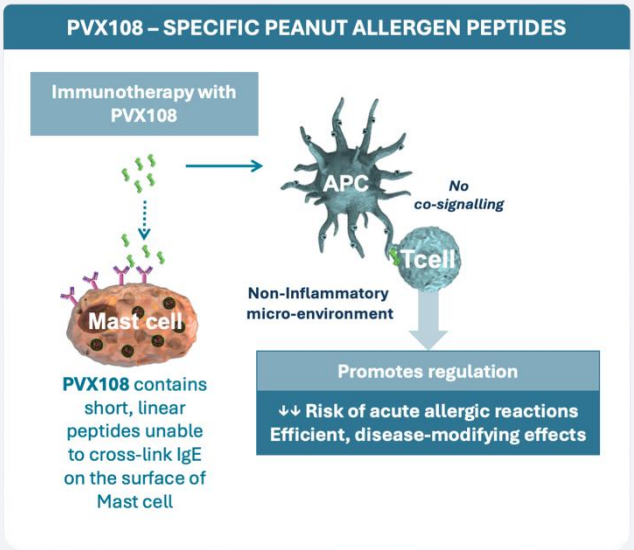
Conventional immunotherapy approach

Uses daily doses of natural peanut extracts containing whole allergenic proteins. Although this can desensitize patients, treatment frequently causes allergic reactions, including anaphylaxis. Significant clinical precautions and complex dose titration are therefore required, which is burdensome for treating physicians and their patients.



Aravax's approach

PVX108 peptides mimic the small but critical parts of peanut proteins recognized by immune cells that control allergy. They do not contain the larger parts that trigger reactions, including anaphylaxis. By reducing treatment-induced allergic inflammation, PVX108 is designed to promote tolerance efficiently, safely and conveniently with a simple fixed-dose monthly treatment regimen.



Email: info@aravax.bio

Summary of PVX108's features and advantages

PVX108 patent-protected composition

- Contains critical key amino acid sequences identified from peanut allergens which are recognized by T cells
- Proprietary platform technology to design precision peptides and commercial formulations with greatly reduced capacity to trigger acute allergic reactions

Mode of action

- Peptides are used to retrain the immune system to see foods as safe, by "showing" the immune system relevant parts of the food in the absence of danger signals
- The natural process for restoration of immune tolerance is reproduced

Safer

- The peptides are designed to minimize the potential for treatment-induced acute allergic reactions, including anaphylaxis
- Precisely designed peptides to eliminate off-target effects have replaced whole proteins extracted from the peanut

More convenient

- Patient-friendly, monthly intradermal administration
- No dose escalation required
- No requirement for burdensome safety precautions to manage risks of adverse reactions to therapy

Disease-modifying

- Presentation of peptides to T cells in the absence of inflammatory co-signaling promotes and maintains tolerance more efficiently than whole allergens
- Completed Phase 1 and 2 studies provide promising evidence of the potential for durable peanut-specific T cell modulation and subsequent, clinically meaningful changes in peanut-specific immune response[5,6]

Combined benefits of PVX108

Potential to reduce the clinical and psychological burden experienced by peanut allergy patients - giving hope for a brighter future.



References

1. Allergy. 2021 Jan 16;76(5):1367–1384. doi: 10.1111/all.14666
https://pmc.ncbi.nlm.nih.gov/articles/PMC8247890/
2. Gupta RS, Warren CM, Smith BM, et al. The public health impact of parent-reported childhood food allergies in the United States. Pediatrics. 2018;142(6): e20181235
https://pmc.ncbi.nlm.nih.gov/articles/PMC6317772/
3. Gupta RS, Warren CM, Smith BM, et al. Prevalence and severity of food allergies among US adults. JAMA Netw Open. 2019; 2(1): e185630.
https://pubmed.ncbi.nlm.nih.gov/30646188/
4. FARE – Food Allery Facts and STATs for the U.S. (updated April18, 2024
https://www.foodallergy.org/sites/default/files/2024-0/FARE%20Food%20Allergy%20Facts%20and%20Statistics_April2024.pdf
5. Voskamp AL, Khosa S, Phan T, et al. Phase 1 trial supports safety and mechanism of action of peptide immunotherapy for peanut allergy. Allergy. 2024; 79: 485-498. doi:10.1111/all.1596
https://onlinelibrary.wiley.com/doi/10.1111/all.159666.
6. Vickery BP, et al, Precision Immunotherapy to Treat Peanut Allergy: Topline Phase 2 Results of PVX108 in Children, oral presentation (ID LBA005) at the Annual Scientific Meeting of the American College of Allergy, Asthma and Immunology (ACAAI), 2026; Abstract ID 7001.