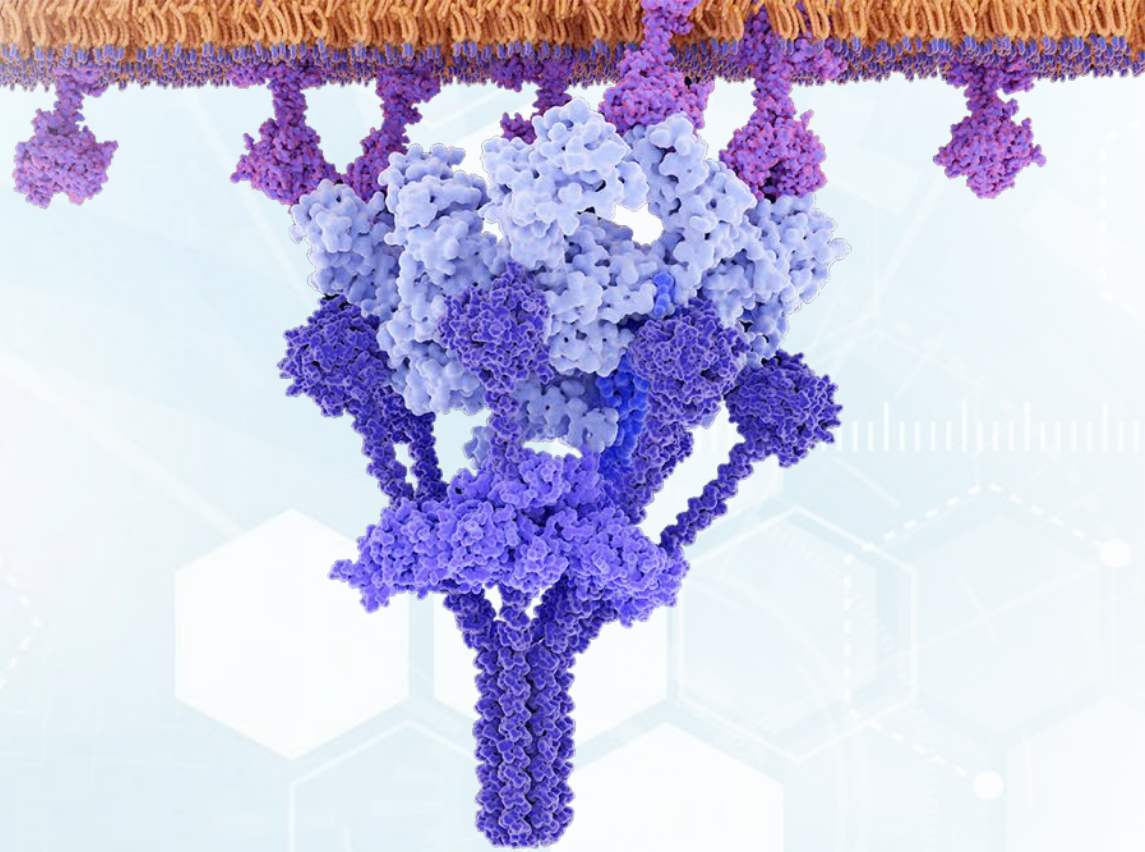

DNTH103, a Potentially Safer and More Convenient Novel Therapy for Generalised Myasthenia Gravis

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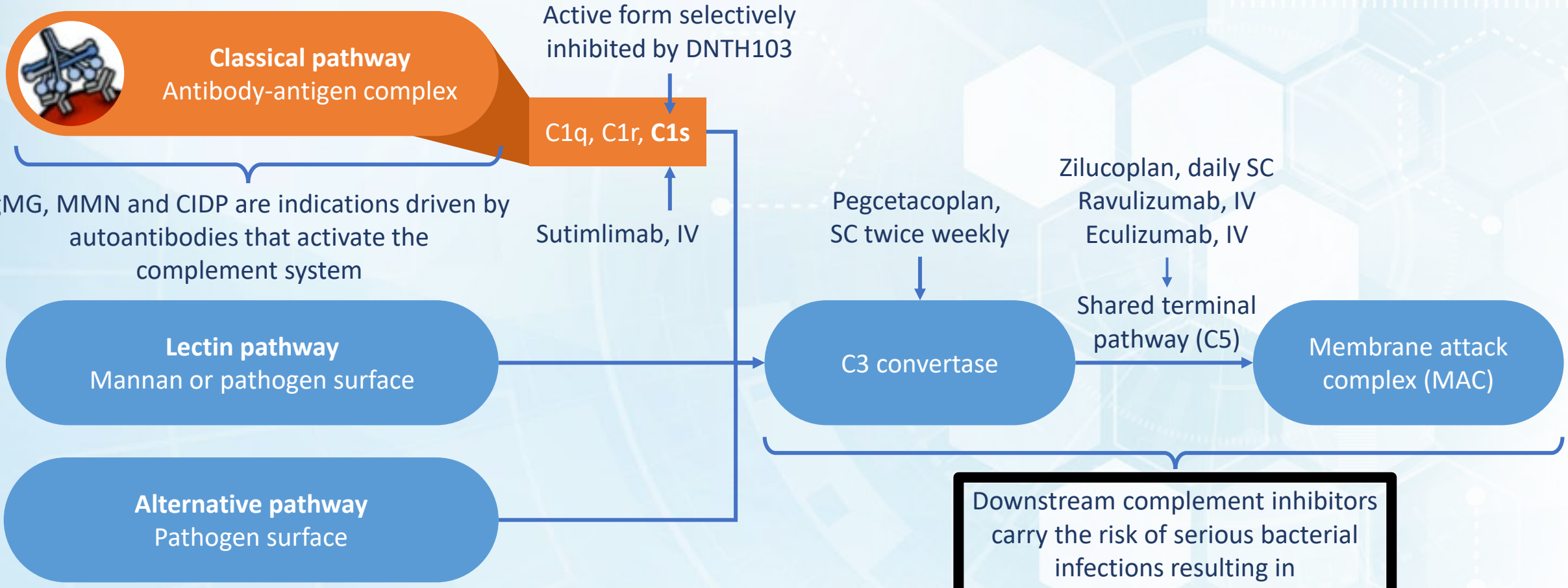
Disclaimer and disclosure

- This presentation is intended for non-promotional scientific purposes only and contains information on products or indications currently under investigation and/or that have not been approved by regulatory authorities
- DNTH103 is an investigational agent that has not been approved for use as a therapy in any jurisdiction worldwide
- Presentations are accurate at the time of presentation
- Unless otherwise specified, any data describing non-Dianthus products are based on publicly available information at the time of presentation
- John Vissing is a consultant on advisory boards/speaker honoraria and receives research support related to MG from Roche, Regeneron, Argenx BVBA, UCB Biopharma SPRL, Horizon Therapeutics, Dianthus Therapeutics, NMD Pharma, Alexion Pharmaceuticals, Janssen Pharmaceuticals, Toleranzia. He is a Principal Investigator in MG clinical trials for Roche, Horizon Therapeutics, Argenx BVBA, Novartis Pharma AG, Alexion Pharmaceuticals, UCB Biopharma SPRL, Regeneron, and Janssen Pharmaceuticals, Dianthus Therapeutics
- Jeffrey Stavenhagen and Sankalp Gokhale are employees of Dianthus Therapeutics, Inc.

Complement inhibitors are well established in gMG and other severe autoimmune disorders

Targeting C1s preserves immune activity of the lectin and alternative pathways, with the aim to provide a safe therapeutic option



gMG, generalized Myasthenia Gravis; MMN, Multifocal Motor Neuropathy; CIDP, Chronic Inflammatory Demyelinating Polyneuropathy; IV, intravenous; SC, subcutaneous; FDA, Food and Drug Administration

DNTH103 – a picomolar-potent monoclonal antibody selectively targeting active C1s

- DNTH103 is a fully human IgG4 monoclonal antibody binding to active C1s, allowing low-volume SC self-administration
- Alternative and lectin pathways are left intact
- In a Phase 1 clinical trial in healthy volunteers, DNTH103 demonstrated an extended half-life of 60 days and potent complement inhibition, supporting potential for infrequent, low volume SC dosing

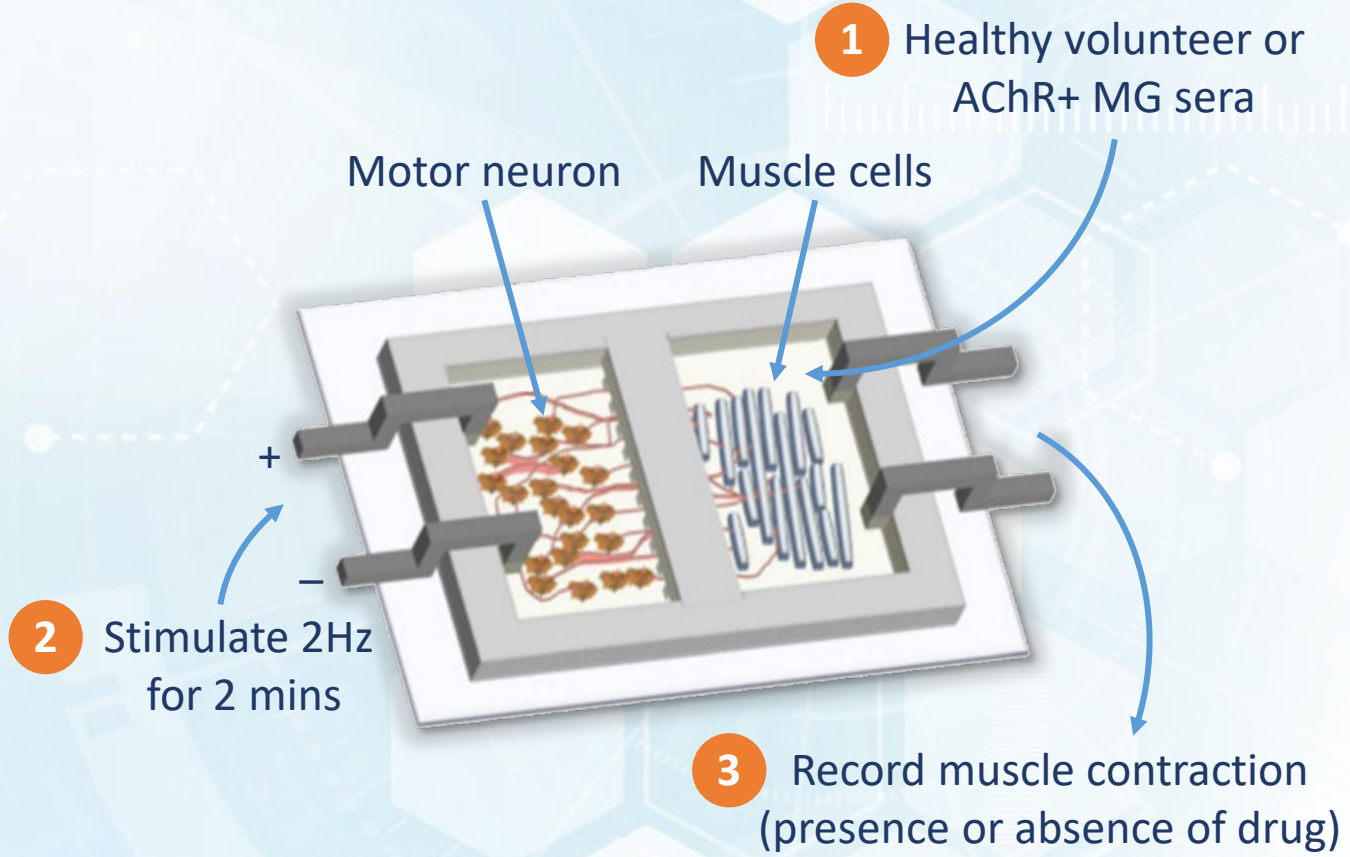
A global Phase 2 study in gMG is ongoing and global trials in CIDP and MMN are planned to start in 2024

IgG, immunoglobulin G; SC, subcutaneous
gMG, generalized Myasthenia Gravis; CIDP, Chronic Demyelinating Polyneuropathy; MMN, Multifocal Motor Neuropathy

Dianthus Therapeutics data on file

Preclinical evaluation of DNTH103 in an established *in vitro* model of MG

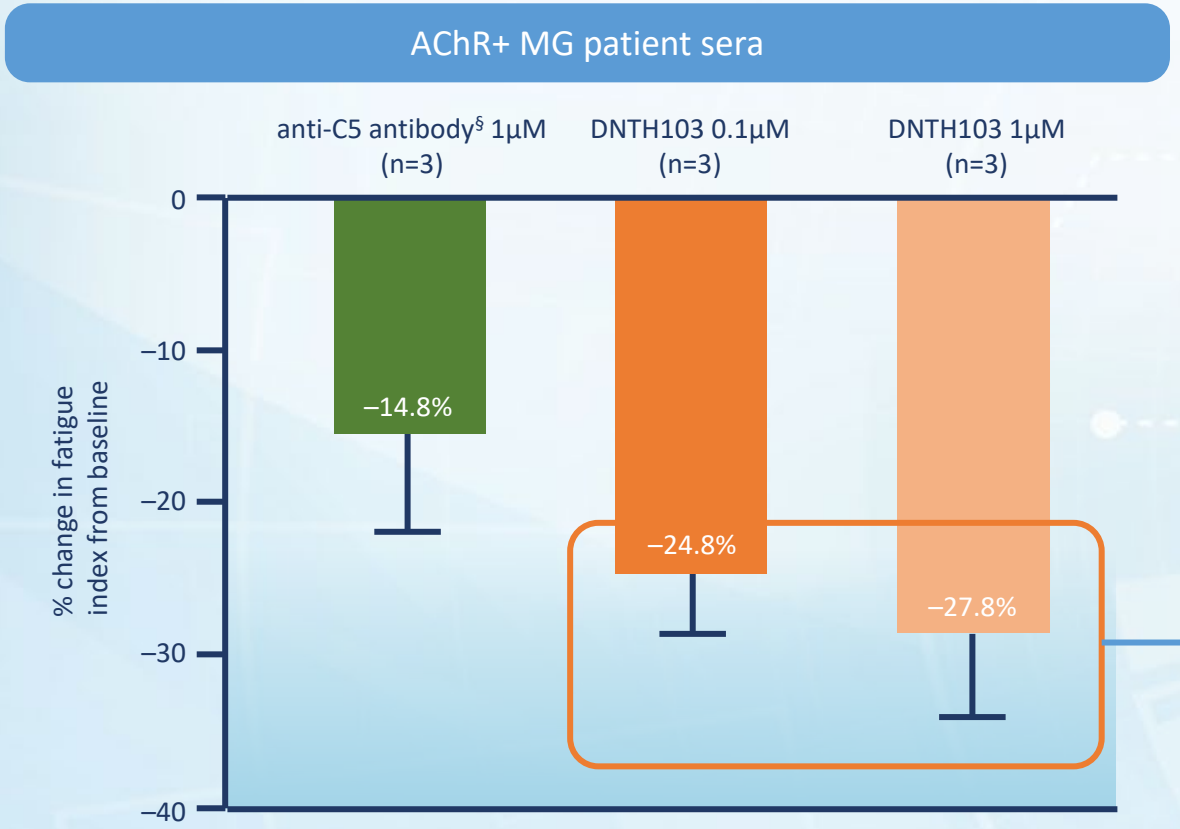
- Serum from 3 AChR+ MG patients used in a validated commercially available humanized *in vitro* MG model[1,2,3]
- Endpoint: Fatigue index in response to anti-C5 antibody[§] or DNTH103
  - A reduction in fatigue index indicates improvement in neurotransmission and muscle contraction



[§]Engineered using the ravulizumab patent sequence
MG, Myasthenia Gravis; AChR+, acetylcholine receptor-positive

1. Smith VM, et al. Frontiers in Cell and Developmental Biology 2021;9
2. Vila OF, et al. Expert Opinion on Drug Discovery 2019;15:307–17
3. Vila OF, et al. Theranostics 2019;9:1232–46

DNTH103 improves neurotransmission and muscle contraction in an AChR+ MG model† (change from baseline)



Results provide further scientific rationale for DNTH103 in gMG

†Validated in healthy volunteer sera; §engineered using the ravulizumab patent sequence
AChR+ MG, acetylcholine receptor-positive Myasthenia Gravis; MG, Myasthenia Gravis; gMG, generalized Myasthenia Gravis

Dianthus Therapeutics data on file

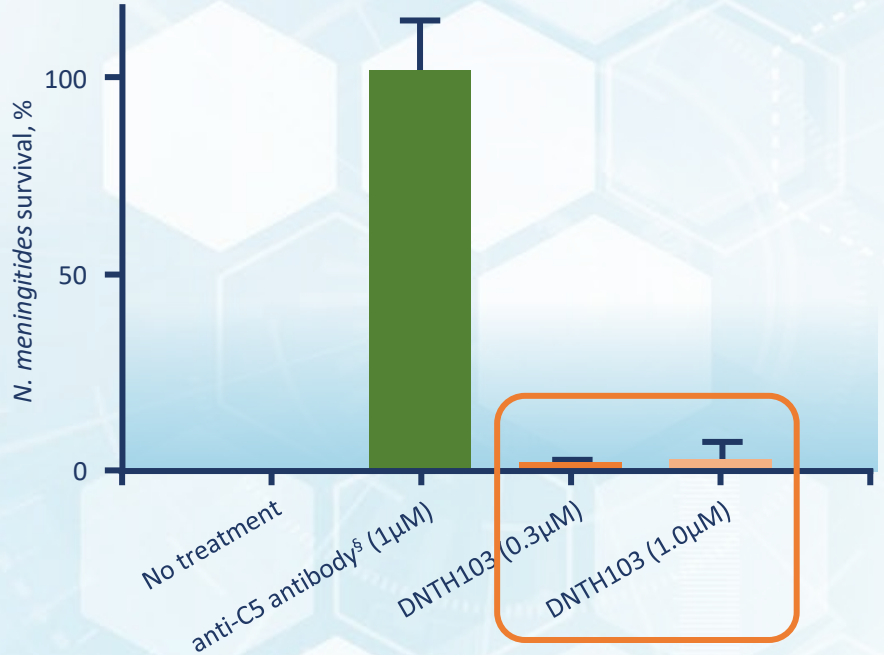
DNTH103 *in vitro* study demonstrates lower risk of *Neisseria meningitidis* infections

Summary

N. meningitides Sera* + DNTH103 No bacterial survival (complement-mediated killing)

N. meningitides Sera* + anti-C5 antibody§ Bacterial survival (no complement-mediated killing)

N. meningitidis bacterial killing is **unaffected** despite inhibition of the **classical pathway**



In this assay, DNTH103 maintained bacterial killing, potentially leading to a decreased risk of infection vs. anti C5 antibody§

*Normal human sera; §engineered using the ravulizumab patent sequence

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Conclusions

- DNTH103 is a highly potent picomolar inhibitor of active C1s that is as effective in neurotransmission and muscle contraction as an anti-C5 antibody in a preclinical model of Myasthenia Gravis
- DNTH103 selectively inhibits the classical pathway with the potential to be safer than complement therapies that also block the lectin and/or alternative pathways

Dianthus Therapeutics data on file