



Biotech Daily

Thursday December 10, 2020

Daily news on ASX-listed biotechnology companies

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MARKET REPORT

The Australian stock market fell 0.67 percent on Thursday December 10, 2020, with the ASX200 down 45.4 points to 6,683.1 points. Seven of the Biotech Daily Top 40 stocks were up, 23 fell, seven traded unchanged and three were untraded. All three Big Caps fell.

Immutep was the best, up 17 cents or 60.7 percent to 45 cents, with 84.9 million shares traded. Starpharma climbed 11.1 percent; Amplia improved 4.4 percent; LBT and Oncosil were up more than three percent; Nanosonics rose 2.7 percent; with Antisense up by one percent.

Yesterday's 81 percent best, Resonance, led the falls, easing five cents or 17.9 percent to 23 cents, with 20.2 million shares traded. Impedimed lost 7.4 percent; Telix was down 6.8 percent; Actinogen, Avita, Mesoblast and Proteomics fell more than four percent; Kazia and Polynovo were down more than three percent; Alterity, Dimerix, Orthocell, Paradigm and Universal Biosensors shed two percent or more; Clinuvel, Cochlear, Compumedics, Neuren, Opthea, Prescient, Pro Medicus, Resmed and Volpara were down one percent or more; with CSL, Genetic Signatures and Next Science down by less than one percent.

[A YEAR IN THE GRASS – MEDICAL MARIJUANA REVIEW](#)

By **PETER OLSZEWSKI**

(AKA Jay Jerilderie McRoach, former Nation Review Marijuana Columnist)

Perhaps the October issue of Elle magazine best summed-up the state of play of the 2020 Australia medical marijuana market by assessing the efficacy of CBD-infused skincare products.

The article asked if cannabidiol (CBD) oil skincare really works, and the answer suggested not really.

Pointing out that “CBD oil is one of beauty's biggest buzzwords,” Elle figured out that “its much-hyped reputation” wasn’t quite up to scratch, in an article laced with modifiers, such “it is thought”, “alleged benefits”, “may work” and “may potentially help”.

The magazine quoted Sydney’s forensic nutritional medicine practitioner, skin therapist and former director of Skinstitut, Fiona Tuck, who said: “There is limited evidence to support claims to treat skin conditions such as acne, psoriasis and eczema, although research looks promising”.

And that’s the state of play of the medical marijuana industry: promising but right now limited by numerous factors.

Most products are not proven to actually work, and are mostly avoided by skeptical physicians, or not prescribed by physicians who don’t understand the cannabis lore, although doctors cognizant of the alleged benefits of marijuana are now increasing in number with the advent of medical marijuana clinics.

Melbourne’s first stand-alone medical cannabis clinic and dispensary, The Releaf Clinic, opened in St Kilda early in February and there are now more than a dozen clinics in Australia.

The industry is also dogged by reams of confusing, time-consuming and expensive regulations emanating from numerous bodies such as the Therapeutic Goods Administration (TGA) and the under-resourced Office of Drug Control (ODC).

Partly as a result of the bureaucratic costs, the industry is also impeded by overpricing. It’s estimated that the average medical marijuana patient pays about \$400 a month for the medication, and the new clinics also add fees. Plus, there’s further confusion around the pricing - there are more than 150 medications available for prescription, and expensive drugs can cost more than double the cheaper versions of a medication with the same ingredients.

In July, Biotech Daily - having earlier advised the industry of the benefits of undercutting the black market in pricing - published the results of the first survey of Australian marijuana products and pricing, to date delivered by 21 ASX-listed marijuana for human health companies.

Price-wise, most of the companies said their medications would be available for less than \$200 for a one-month supply.

The survey noted: “By undercutting the black market, the legitimate companies can make regulated medical-grade tetrahydrocannabinol (THC) and cannabidiol (CBD) products available, making the illegal industry less attractive to participants.”

A great leap forward in the pricing department occurred in November when Australian private health insurer Health Insurance Fund became the first Aussie insurer to back medical marijuana as a treatment for a range of debilitating illnesses. The insurer partnered with Western Australia’s Little Green Pharma and under the deal, the health fund will pay rebates for medicinal cannabis for all but one of its Extras policies with eligible members receiving up to \$105 back per script, a first for the health fund sector.

Industry insiders also believe pricing is driving consumers into the black market.

And that black market is thriving, while the medical marijuana industry suffers paucity of supply of raw product, i.e. marijuana, and relies too heavily on imported products. Only two companies supply medications that are wholly Australian grown and produced.

Retired hippy growers and Calabrian cultivators from the 1970s must be rolling their eyes in amazement that the industry cannot grow enough marijuana to meet local supply, let alone import the product, while illicit cultivation is booming.

In 2018, police reported that there was so much small-scale illicit marijuana-growing that it added up to large scale production, and the Australian Broadcasting Corporation reported: “Hiding in plain sight in homes all across Australia, international crime syndicates are growing millions of dollars’ worth of cannabis.”

In November 2019, cops made one of the biggest busts since the 1970s, nabbing more than \$40 million worth of weed, noting: “The biggest difference is in 1975 outdoor crops were seasonal, so criminal groups were restricted to one crop a year, whereas these grow houses are weather-controlled enabling the harvest of new plants every 12 weeks or so.”

The Daily Telegraph, in its report of the story, said: “As Australia’s medicinal cannabis prescription numbers continue to rise, so too do arrests of those found cultivating the plant illegally.”

Typical of the growing pains among legitimate operators is the unlisted company MPX Australia, which last year made news when former New South Wales premier Morris Iemma departed shortly after being appointed chair, because the company said it couldn’t afford him.

In November this year, MPX ditched the \$8 million grow-house it had started to build in Launceston, and said it would import products from Malta, Canada and South Africa.

The company’s executive director Tibor Vertes said: “We can bring it in a lot cheaper from overseas than you can grow it here.” He curiously added that the Tasmanian operation was never intended to be more than a “showcase”.

The cumulative result of all such problems besetting the relatively new industry, including trying to market to a slightly bewildered and underwhelmed general public, is that the mostly speculative Aussie marijuana stocks – stubbornly static in the long-term with short-term bouts of volatility - are, with a couple of exceptions - poorly performing penny dreadfuls, yet the sector is hyped as bound-to-boom.

Take the case of the high-profile Western Australian MGC Pharmaceuticals, a serial issuer of press releases which bills itself as “a biopharma company with a ‘Nature to Medicine’ strategy at the forefront of the emerging phyto-cannabinoid and plant derived medicine markets.”

On November 23, MGC announced it had completed a \$1.4 million acquisition of Cannvalate Pty Ltd’s Medicinal Cannabis Clinics, with the result that its share price shot up 4.8 percent - translate that to a very humble 0.1 cents increase - to a share price of 2.2 cents. According to Biotech Daily, no matter what the company did last year, it only went up to 3.4 cents before returning to 3.3 cents.

This year it closed as high as 3.8 cents in January and as low as 1.6 cents in March, spending most of the year around 2.4 cents, despite announcing a series of deals including a seven-year supply and distribution agreement with Brazil’s Onix Empreendimentos e Participações, an agreement with Polish NGO Cannabis House Association to provide from 15 pharmacies to potentially 250 pharmacies, and an 18-month minimum white label supply agreement with THC Global for Australian and New Zealand.

And yet despite such figures, hype and more hype surrounds and largely drives the industry.

In April, the London-based Prohibition Partners predicted a mammoth jump for Australia’s cannabis market, jumping from a current value estimation of “just US\$40 million” to an “expected” value of more than \$US1.5 billion by 2025 “making it the largest legal cannabis market in the Oceania region”.

In mid-November Sydney-based The Green Fund - which says it is “Asia Pacific’s preeminent media house ... “Committed to driving the industry forward” - enthusiastically reported that “the Australian cannabis market has continued to expand at a rapid pace in 2020”.

The Green Fund seemingly relies on figures from its Australian Cannabis Index, which comprises a basket of 16 ASX-listed companies, only one of which is not a medical marijuana company.

Biotech Daily’s Cannabis Corner analyzes data from 22 medical marijuana companies – up from 18 companies in January – and its figures show that the combined market cap fell by more than 50 percent in the second half of 2019 and has barely recovered.

The year kicked-off on a high for the medical marijuana industry with media reports in Australia and the US in January suggesting that a March review by the regulator, TGA, could result in some CBD medications soon being available over-the-counter rather than by prescription only.

Perhaps fuelled by this optimism Cannabis Corner was up 21.2 percent in January from the historic low of \$869 million to \$1,052 million. But this was still 45 percent down from the July 2019 high of \$1,913 million.

Initial Covid-19 bleakness then set-in universally, and the Corner went into decline with all companies but one falling further – in March the companies were collectively down 23.1 percent to \$816 million, and this was down 46.8 percent year-on-year.

In April, reflecting a global up-tick in CBD product sales during Covid-19 lockdown boredom, Cannabis Corner shot up 36.9 percent to \$1,117 million, and the rise continued into May, with the sector up 8.3 percent, but down 31.4 percent year-on-year.

Rises continued through June to August, and in September, the Therapeutic Goods Administration confirmed that low-dose CBD medications were all but cleared for over-the-counter sale in pharmacies.

This good news as such was tempered by research from the University of Sydney's Lambert Initiative for Cannabinoid Therapeutics, showing that regulators were emphasizing the 'low' in low-dose, and pointing out that the 60 milligrams per day limit is well below that of global standards, where typical doses are from 300mg to 1,500mg.

Nevertheless, shares in several medicinal cannabis companies briefly rose in the week after the news broke – Bod Australia was up 22.5 percent, Elixinol Global up 9.7 percent, Althea up nine percent, THC Global up 8.5 percent, Cann Group up seven percent and Medlab Clinical up seven percent.

In November, Cannabis Corner recovered 25.6 percent to a collective \$1,450 million, down 8.3 percent for the year to November 30.

While 2020's figures are a good springboard into 2021, the results for most medical marijuana companies are a bit - as experts are wont to say - Mickey Mouse.

Some companies in the sector perform so poorly that they are relegated by industry observers into the sham company category, often pretending to be medical marijuana, but really aiming at the recreational - as some indeed admit.

"My guess is that they want to be on the ground floor of a big company when it goes recreational, but they don't really have a clue on how to do it," a savvy industry insider says.

"When recreational is allowed and with people growing dope at home, I think the 20-odd companies will amalgamate or die off to three or four."

The writer was the co-founder of the Australian Marijuana Party and stood as Senate candidate JJ McRoach in the 1977 Australian Federal Election. Biotech Daily editor David Langsam was his campaign director.

IMMUTEP

Immutep says at the September 24 data cut-off breast cancer patients receiving IMP321 with paclitaxel had a non-significant survival benefit trend and better quality of life. Last year, Immutep said it had enrolled all 226 patients with human epidermal receptor 2 (HER2) negative and hormone receptor (HR) positive breast cancer for its phase IIb active immunotherapy paclitaxel with IMP321 (Aipac) trial for metastatic breast cancer. combining IMP321, or eftilagimod alpha, with paclitaxel (BD: May 3, 2018; Jun 25, 2019). The company said the primary endpoint was progression-free survival, with secondary endpoints including progression-free survival, overall response rate and overall survival. Today, Immutep did not provide the number of patients in any of the results, but said that in the total patient population, the first overall survival data, based on about 60 percent of "events", showed that patients in the IMP321 group had an improving overall survival trend with a median overall survival of 20.2 months compared to 17.5 months for the comparator group, a survival benefit of 2.7 months ($p = 0.14$).

The company said that a significant deterioration in quality of life was observed for patients in the comparator group at week 25, not observed in the IMP321 group. "This is an encouraging observation as these types of benefits are supportive of Efti being eligible for reimbursement upon marketing approval," Immutep said.

Aipac principal investigator and University Hospital Leuven, Belgium oncologist, Prof Hans Wildiers, said that "although the progression free survival data in the Efti group did not show a significant improvement versus the comparator arm in Aipac earlier this year, the [overall survival] data in general looks already very interesting and will mature further". "The [overall survival] data in subgroups such as those below age 65 years are highly encouraging and may lead to more effective treatment options," Prof Wildiers said.

The company said that patients under the age of 65 years old, which represented 66.7 percent of the group receiving IMP321, had a median overall survival rate of 21.9 months compared to the median overall survival rate of 14.8 months in the group of under 65-year-old patients receiving the placebo alongside paclitaxel, an increased survival benefit of 7.1 months ($p = 0.12$).

The company said that "for patients younger than 65 years old, the probability of being alive at three years with [IMP321] plus chemotherapy [compared to] chemotherapy alone is increased by 100 percent".

Immutep said that the patient group with a low monocyte count at baseline, which represented 21.9 percent of patients in the IMP321 group reported a median overall survival rate of 22.4 months, compared to 12.9 months in the comparative group, indicating an increase survival benefit with IMP321 of 9.4 months ($p = 0.02$).

The company said that the median overall survival rate in the total study population was 20.2 months in the IMP321 group and 17.5 months in the placebo plus paclitaxel group, a 2.7 months median survival rate benefit for the IMP321 group ($p = 0.14$).

Immutep chief scientific officer Dr Frederic Triebel said the company was excited to see that IMP321 was "boosting the immune system by providing a statistically significant increase in CD8 T cell numbers, which is correlated with prolonged survival for patients". "Through this mechanism, Efti is helping a large proportion of patients in the Aipac study with HER2 negative HR positive metastatic breast cancer which is typically a non-immunogenic cancer and is therefore significantly less responsive to modern immune checkpoint inhibitor therapies," Dr Triebel said

Immutep chief executive officer Marc Voigt said that the Aipac trial marked "an important milestone for Immutep and builds our confidence that Efti is beneficial for many cancer patients, including those with metastatic breast cancer".

Immutep climbed 17 cents or 60.7 percent to 45 cents with 84.9 million shares traded.

[ELLUME HEALTH](#)

Ellume says that testing of its rapid, at-home severe acute respiratory syndrome coronavirus-2 (Sars-Cov-2) antigen test shows 96 percent accuracy.

Ellume chief executive officer Dr Sean Parsons told Biotech Daily that the comparator was an 'emergency use authorization' molecular test currently in commercial emergency use and the trial was run by a contract research organization at five trial sites in five US states. The company said that home test was shown to be "safe and simple-to-use test for the detection of Sars-Cov-2 nucleocapsid antigen in users aged two years and above".

Ellume said that the rapid self-test enabled individuals to test for an active infection in 15 minutes or less and an emergency use authorization application had been filed to the US Food and Drug Administration.

The company said the data submitted to the FDA from the study of 198 subjects ranging in age from two years to 82 years, showed an overall sensitivity of 95 percent and specificity of 97 percent when compared to the laboratory test.

Ellume said that in individuals presenting with Covid-19 symptoms, the home test showed a sensitivity of 96 percent and specificity of 100 percent and in asymptomatic individuals, the test showed sensitivity of 91 percent and specificity of 96 percent.

"Ellume set out in 2010 to create simple, rapid, accurate diagnostic tests for common infectious diseases," Dr Parsons said.

"Today's announcement is the culmination of a decade of work developing our core technology," Dr Parsons said.

"The Ellume Covid-19 home test has demonstrated performance equivalent to or better than, the rapid immunoassay tests used by doctors at the point-of-care," Dr Parsons said.

The company said the test worked in conjunction with a free software application, which provided step-by-step instructions and displayed the result when the test was complete connecting the test analyzer to a user mobile phone via Bluetooth.

Ellume said that pending FDA authorization, the single-use test would be available over-the-counter for \$US30 for symptomatic and asymptomatic detection of Sars-Cov-2 antigen.

Ellume is a public unlisted company.

[STARPHARMA](#)

Starpharm says its Viraleze anti-viral nasal spray is on-track for European commercialization by April 2021 and it will start a human trial in January 2021.

Starpharma said in-vitro studies had been shown Viraleze inactivated "more than 99.99 percent" of severe acute respiratory syndrome-coronavirus 2, the virus that caused Covid-19, and could be used to prevent other respiratory viruses including influenza.

The company said it had completed more than 90 percent of the European Union regulatory dossier and planned Viraleze to form part of a range of Covid-19 personal protective equipment (PPE) preventative measures.

Starpharma said the study of healthy volunteers was "not a requirement for registration".

The company did not provide the proposed number of volunteers in the study.

Starpharma chief executive officer Jackie Fairley said that "even after a vaccine becomes widely available, social distancing, PPE and other measures will continue to be important and Viraleze complements other prevention strategies, including vaccines".

Starpharma said Viraleze contained its antimicrobial SPL7013, the active ingredient in its condom coatings and Vivagel for bacterial vaginosis, approved in more than 40 countries and available in the UK, Europe, Asia, Australia and New Zealand.

Starpharma was up 14.5 cents or 11.1 percent to \$1.45 with 3.7 million shares traded.

IMMUTEP

Immutep says it will begin an up-to 152 patient phase II trial of IMP321, or eftilagimod alpha, in combination with paclitaxel for metastatic breast cancer in China.

Immutep said the trial would be conducted by its Shanghai-based partner, EOC Pharma, which had the exclusive rights to IMP321 in China.

The company said the trial would be a randomized, double-blind, placebo-controlled phase II clinical study “with the study endpoints including progression free survival, overall survival and overall response rate” in metastatic breast cancer patients who have progression after endocrine therapy.

Immutep said the study would take place at 20 trial sites in China over 24 months and it planned to enrol and dose the first patient by April 2021.

Immutep chief executive officer Marc Voigt said the company’s “ongoing Aipac study evaluating the same combination is already reporting very encouraging data, including a statistically significant survival benefit of 7.1 months in patients under 65 years of age and 9.4 months for patients with a low starting monocyte count” (see above).

“EOC Pharma’s new trial in China brings this innovative new treatment much closer to market for metastatic breast cancer patients”, Mr Voigt said.

HYDRIX

Hydrix says it plans to begin a 50-patient trial of the Phyzhon Phyrari Fractional Flow Reserve-wire cardiovascular sensor in Australia.

In October, Hydrix said it an agreement with the Rancho Cordova, California-based Phyzhon to distribute the Phyrari fractional flow reserve (FFR)-wire in Australia and New Zealand, and would apply for Australian Therapeutic Goods Administration approval of the Phyrari system (BD: Oct 30, 2020).

The company said that fractional flow reserve (FFR) was used to measure pressure differences across a coronary artery stenosis or narrowing, usually due to atherosclerosis, to determine oxygen deprivation to the heart muscle.

Hydrix said that about 125,000 coronary angiograms were performed each year in Australia leading to 60,000 procedures, during which 12,000 FFR measurements were taken to determine whether to stent the artery or not.

The company said that the Phyrari FFR-wire was simple and easy-to-use, which the trial hoped to demonstrate.

Hydrix said the trial, at an unspecified Melbourne teaching hospital, would evaluate the efficacy and safety of the Phyrari system, and was expected to begin by April, 2021.

Hydrix general-manager Paul Kelly said that the trial would show “the value and ease-of-use of this technology and could hasten market adoption of the product once it launches in Australia”.

“The proportion of coronary angiogram procedures which use the FFR technique could significantly increase, with a potential addressable market of \$80 million [a year] if little more than half of all Australian coronary angiogram procedures employ FFR,” Mr Kelly said.

The company said it expected the commercial distribution of the Phyrari cardiovascular sensor to begin in “mid-to-late” 2021.

Hydrix was up one cent or 3.7 percent to 28 cents.

CORRECTION: CYNATA THERAPEUTICS

Last night's Cynata headline said the trading halt was for a \$25.5 million capital raising, whereas the company hopes to raise \$15 million in a placement and \$5.5 million in rights offer, which is \$20.5 million.

The Wednesday headlines sub-editor has joined the Tuesday headlines sub-editor and been seconded to the Federal Treasurer's office to help calculate Jobseeker payments. Cynata was in a trading halt and last traded at 78.5 cents.

KAZIA THERAPEUTICS

Kazia says the Pacific Paediatric Neuro-Oncology Consortium (PNOC) will include its GDC-0084, or paxalisib, in a trial of multiple therapies for brain tumors.

Kazia said the trial planned to test several therapies in different combinations and in different subsets of patients with diffuse midline gliomas, including diffuse intrinsic pontine glioma (DIPG).

Kazia chief executive officer Dr James Garner told Biotech Daily that the trial was exploratory and that "the protocol is yet to be finalized".

"We will potentially recruit up to 100 patients to receive paxalisib but the trial is an adaptive design and the details are yet to be confirmed", Dr Garner said.

The company said the lead investigator of the trial would be Prof Sabine Mueller, a paediatric neuro-oncologist and co-founder of the Consortium.

Kazia said PNOC was an international consortium, with study sites in the US, Canada, Switzerland, Europe, India, Israel and Australia, which was dedicated to bringing new therapies to children and young adults with brain tumors.

The company said the PNOC022 trial would enrol children and young adults with diffuse midline glioma which had either been newly diagnosed disease, completed initial radiotherapy, or experienced disease progression after treatment.

Kazia said the primary endpoint would be the proportion of patients progression-free at six months for newly diagnosed patients, and overall survival for recurrent patients.

Prof Mueller said that diffuse intrinsic pontine glioma was "one of the most challenging of childhood cancers [and] no drug treatment has ever demonstrated meaningful efficacy".

"We look forward to commencing enrolment to the study shortly, and very much hope that we are able to generate new hope for patients and their families," Prof Mueller said.

Kazia said the trial was expected to begin in the US by July 2021, with expansion to other countries throughout 2021.

Kazia fell 4.5 cents or 3.2 percent to \$1.375.

IMUGENE

Imugene says it has received \$4,823,466 from the Australian Tax Office under the Federal Government Research and Development Tax Incentive program.

Imugene said the rebate related to expenditure for the year to June 30, 2020.

Imugene was unchanged at 11.5 cents with 25.7 million shares traded.

MEDICAL DEVELOPMENTS INTERNATIONAL

Medical Developments has requested a trading halt "pending an announcement in relation to a proposed capital raising".

Trading will resume on December 14, 2020 or on an earlier announcement.

Medical Developments last traded at \$7.10.

BOD AUSTRALIA

Bod has requested a trading halt “pending an announcement in relation to a proposed capital raising”.

Trading will resume on December 14, 2020 or on an earlier announcement.

Bod last traded at 61.5 cents.

STEMCELL UNITED

Stemcell has requested a trading halt pending “an announcement in relation to a placement”.

Trading will resume on December 14, 2020.

Stemcell last traded at 3.1 cents.

NOXOPHARM

Noxopharm chief executive officer Dr Graham Kelly says his 37,002,294 shares in the company have been diluted from 17.36 percent to 14.43 percent.

The Wildes Meadow, New South Wales-based Dr Kelly said he held the shares with Phytose Corp for Boundary One Super Fund, Milligene Pty Ltd for the GE and PR Kelly Family Trust, Bende Holdings and Prue Kelly.

Dr Kelly said the reduction was due to the company’s \$23 million placement at 54 cents a share (BD: Dec 3, 2020).

Noxopharm fell four cents or 7.3 percent to 51 cents with 5.8 million shares traded.

TELIX PHARMACEUTICALS

Telix says it will release 2,834,051 shares from voluntary escrow on December 24, 2020.

Telix said the shares were voluntarily escrowed in relation the company’s acquisition of Advanced Nuclear Medicine Ingredients SA (ANMI) for its 68 gallium-labelled prostate-specific membrane antigen 11 (68Ga-PSMA) cold kit for detecting prostate cancer (BD: Oct 15, Nov 26, 2018).

According to Telix’s most recent Appendix 2A new shares issue, the company had 275,842,022 shares on issue, including the voluntary escrow shares.

Telix fell 24 cents or 6.8 percent to \$3.31 with two million shares traded.

4D MEDICAL

4D says it will release 70,489 shares from ASX escrow on December 17 and 10,825,710 shares on December 21, 2020.

4DX said that following the ASX escrow release, 5,173,685 shares would enter voluntary escrow until August 7, 2021.

According to 4D’s most recent Appendix 2A, the company had 166,515,487 shares quoted on the ASX, meaning that it would have 172,238,001 shares available for trading until August 7, 2021, when it would have 177,411,686 shares available for trading.

The company has a further 85,614,464 in ASX escrow.

4D fell nine cents or 3.95 percent to \$2.19 with 546,593 shares traded.

[PYC THERAPEUTICS \(FORMERLY PHYLOGICA\)](#)

PYC says it has appointed Sahm Nasserri as chief executive officer of US operations and a director, starting on \$US495,000 (\$A662,657) a year.

In 2017, the then Phylogica said it had appointed Mr Nasserri as a non-executive director and in 2019 Mr Nasserri resigned (BD: Oct 24, 2017; Feb 11, 2019).

Last month, in an Appendix 3Z final director's interest announcement, PYC said that former chief executive officer, Douglas Huey, had retired as head of US operations, having taken on the role in August when Dr Rohan Hocking replaced him as chief executive officer (BD: Feb 12, Aug 19, Nov 10, 2020).

The company said that Mr Huey was paid starting on \$US600,000 (\$A803,216) a year as chief executive officer.

Today, PYC said Mr Nasserri had seven years' experience of US commercial drug development with the New York-based Merck & Co and previousl was a management consultant at Sydney's McKinsey & Company.

The company said Mr Nasserri held a Bachelor of Chemical Engineering from the University of New South Wales and a Master of Business Administration from New York's Columbia University.

PYC said Mr Nasserri would receive 32,000,000 options exercisable at the market share price on the issue date, by November 30,2023, vesting between November 1, 2021 and May 1, 2023 subject to key performance indicators.

PYC was unchanged at 15 cents.

[RACE ONCOLOGY](#)

Race says Prof Borje Andersson has resigned as an executive director to focus on his role as chief medical officer and chair of the clinical advisory board.

Race said Prof Andersson was appointed as a non-executive director in January, prior to his appointment as an executive in October (BD: Jan 28, Oct 2, 2020).

The company said that the 2,400,000 options issued to Prof Andersson as his director's remuneration would continue to vest in accordance with their terms.

Race fell four cents or 1.9 percent to \$2.10.