

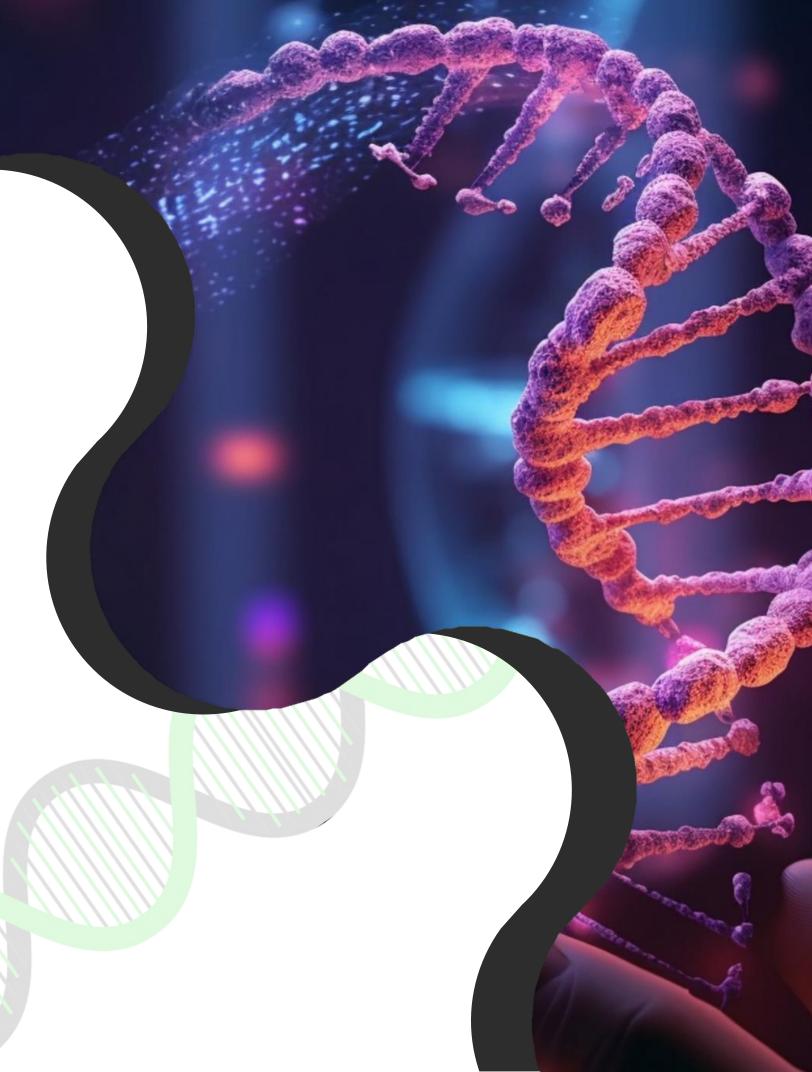


Q3 - 2025

Investor Presentation









Our Vision

Our vision is to deliver safe, effective, patient-friendly <u>curative</u> therapies for metabolic disorders that restore normal metabolic function involved in glucose regulation and fat metabolism.



Board of Directors



Stephen Van Deventer Stephen is the Chairman, CEO and President of BioGene Therapeutics and PreveCeutical Medical, with extensive experience in capital markets with a focus on life sciences. Stephen has started and raised millions in the capital markets space.



Deepak Sampath, PhD

an Independent
Director for BioGene.
He is the Senior VP,
Head of Research at
Ultragenyx, with
previous experience at
Pfizer and Genetech,
along with over 100
publications, 20 issued
patents and numerous
IND, NDA, BLA filings
and drug approvals for
the treatment of
cancer.



Steve Glover

Steve joins BioGene as

a Board Member,
bringing multifaceted
experience in Fortune
100 and start-up
environments. He sits
as Chairman and CEO
of Nasdaq-listed

ZyVersa Therapeutics
and was former
Chairman of Ambrx,
which was acquired
for \$2B.



Dr. Linnéa Olofsson, PhD

Linnéa has been as a
Board Member at
BioGene Therapeutics
and sits on the board
at PreveCeutical
Medical. Linnéa is an
accomplished
biophysicist with years
of experience with
expertise in
pharmacology,
oncology, cell biology
and gene editing.



Patroski J. Lawson, MSP

Patroski is the founder and CEO of KPM

Group DC, a strategic public affairs firm.

With over 20 years of experience in government affairs, he has worked across local, state, federal, and global levels, including roles at Solvay

Pharmaceuticals

Solvay
Pharmaceuticals,
Abbott, and
Lundbeck.



Senior Management



Stephen Van Deventer Stephen is the Chairman, CEO and President of BioGene Therapeutics and PreveCeutical Medical, with extensive experience in capital markets with a focus on life sciences. Stephen has started and raised millions in the capital

markets space.



Alex McAuly, CPA
Alex serves as the
Chief Financial
Officer for BioGene.
He is a Chartered
Professional
Accountant of Canada
with vast experience
in running publically
traded companies
through his astute
knowledge of
accounting principles
in North America and
Europe



Harry Parekh, PhD Harry is welcomed to the BioGene team as **Chief Science Officer** & Scientific Founder of BioGene. Harry is currently a Director of Research and Research Group Leader at the **University of** Queensland, Australia. He also serves as CRO & **Scientific Founder** for PreveCeutical Medical.



Dr. Linnéa Olofsson, PhD

Linnéa has been
appointed **Director of Science** at BioGene
Therapeutics and sits
on the board at **PreveCeutical Medical**. Linnéa is an
accomplished
biophysicist with years
of experience with
expertise in
pharmacology,
oncology, cell biology
and gene editing.



Scientific and Corporate Advisory Board



Prof. Mirela Delibegović

As a member of BioGene's Scientific **Advisory Board**, Mirela brings a wealth of knowledge in metabolic physiology with a focus on diabetes, obesity and CVD. Prof Mirela holds the prestigious Regius **Chair of Physiology** at The University of Aberdeen, UK.



Barry Ticho, MD, PhD

Barry will serve on BioGene's **Scientific** Advisory Board. Barry holds several prestigious roles as Founder and Board Member at **Verve** Therapeutics, Cardior Pharmaceuticals, **Sania Therapeutics** and Stoke Therapeutics.



Mariya Georgieva, PhD

Mariya will serve on BioGene's Scientific Advisory Board. Over the past 5 years, Mariya has worked with AstraZeneca, as a Director of Alliances in the Diagnostic Precision Medicine division. She is adept in molecular biology, super-resolution microscopy and relationship development.



Brian Gallagher, Jr.

Brian will sit on the **Corporate Advisory Board** bringing critical investment experience within the life sciences sector raising capital through various channels including the **Venture Fund, Slate**

Michigan Biomedical **Bio and Trek** Ventures.



Kathy Rokita

Kathy is joining the **Corporate Advisory Board** and currently is a Managing Director at CBIZ and has provided consulting services for physician groups and healthcare organizations for over 30 years. She has had successful exits, most notably as a Principal at Somerset CPAs.



BIOGENE AUSTRALIA

BioGene has established a wholly-owned subsidiary in Brisbane, Queensland, Australia.

Bolster R&D activities and provide significant cash-back on R&D from the Australian government.

BioGene is eligible to receive 43.5% cash back from Australian Federal Government on all R&D, clinical trial and operational costs.

Brisbane hosts a series of globally-renowned research, manufacturing and clinical trial facilities.









R&D Formulation & Preclinical Facility



GMP Manufacturing Facility











Metro South Health

Problem



OBESITY

Cases have tripled in the past decade leading to elevated risk of mortality: heart disease, stroke and dementia.

DIABETES

1 in 10 adults are diagnosed with diabetes. Childhood rates of diabetes & obesity are on a steep upward trajectory.

DRUG SIDE EFFECTS

Debilitating and even life-threatening side affects have emerged with current marketed weight-loss treatments.



Obesity Rates

Obesity Cases Triple in a Decade

- The World Obesity Federation (WOF) predicts the economic impact of obesity will reach
 >US\$4 trillion annually by 2035.
- WOF report predicts that by 2035, HALF of the world's population (>>4 billion people!), will be classified as "obese".
- Childhood obesity cases are anticipated to impact >200 million boys and >170 million girls by 2035.

www.mordorintelligence.com/industry-reports/weight-loss-diabetes-drug-market

Diabetes rates

1-in-10 Adults are Diabetic with Child Cases Rapidly Rising

- Leads to >4 million adult deaths a year.
- Over 570 million adults aged between 20 and 79 years are <u>currently</u> living with diabetes.
- Projections indicate >640 million cases by 2030, increasing by over 20% to >780 million by 2045.
- Childhood rates of continue to rise at alarming rates!

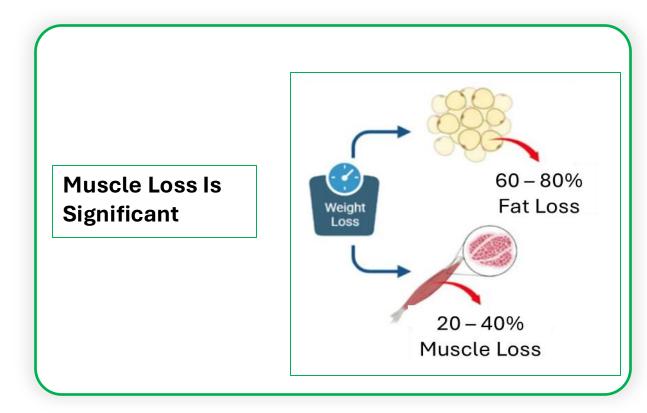
https://www.mordorintelligence.com/industry-reports/weight-loss-diabetes-drug-market https://www.cnbc.com/2023/04/28/obesity-drugs-to-be-worth-200-billion-in-next-10-years-barclays-says.html



GLP1 agonist have changed the obesity treatment paradigm but significant unmet medical needs remain

Present with an array of issues:

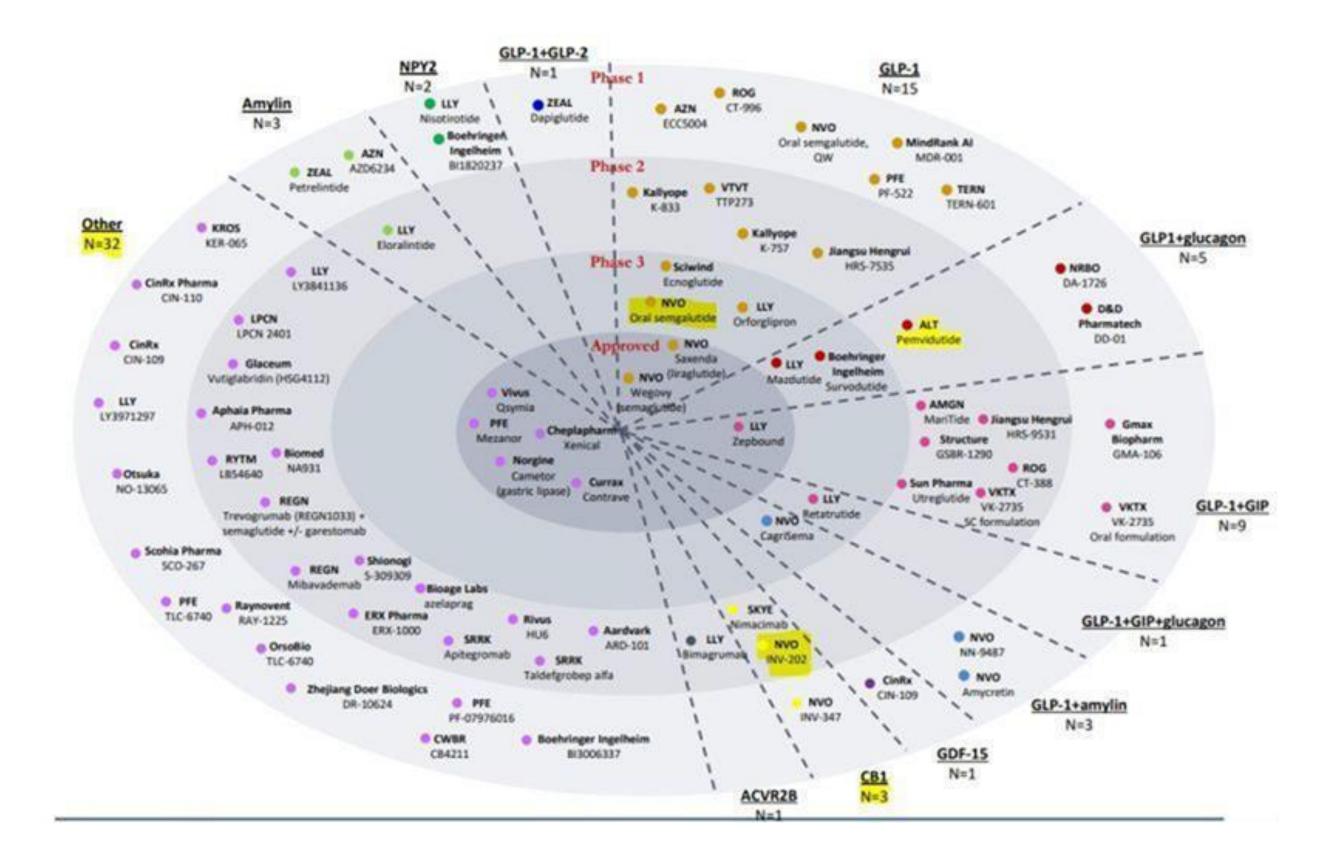
- Severe sometimes life-threatening side effects
 - 40% of patients stop treatment by one year
- 20-40% muscle loss
- Patients build tolerance over time
- Don't restore metabolic functions
 - Rapid rebound in weight gain after discontinuation due to side effects
 - Injections are painful, inconvenient
- Oral route real world challenges w.r.t dosing and bioavailability due to poor diet of target population





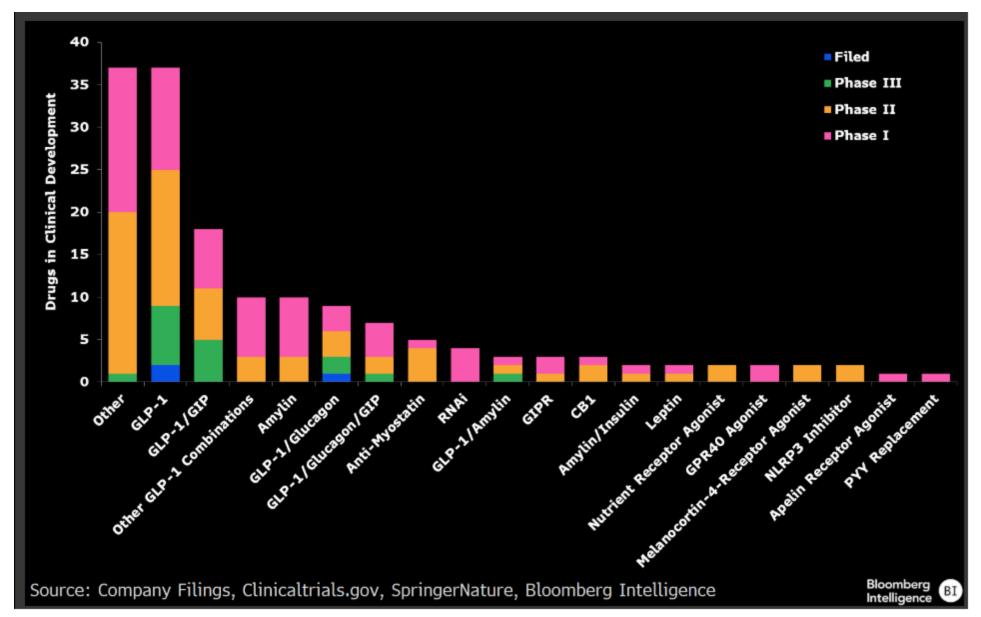


The Obesity Landscape is Rapidly Evolving into Next Generation Therapies





Landscape of Nucleic Acid Therapeutics for Obesity Treatment



siRNA Companies

Alnylam Pharmaceuticals (NASDAQ: ALNY)

- •Program: ALN-APP (targeting amyloid precursor protein in the CNS) and other metabolic disease candidates
- •Technology: Proprietary siRNA platform, with success in multiple therapeutic areas
- •Status: Early-stage development for obesity and metabolic disorders

Novo Nordisk (NYSE: NVO)

- •Program: Acquired Dicerna Pharmaceuticals (siRNA platform) in 2021 for \$3.3B
- •Technology: Developing RNAi-based therapies for metabolic diseases, including obesity
- •Status: Early R&D, potential combination with GLP-1 therapies (e.g., Wegovy)

Arrowhead Pharmaceuticals (NASDAQ: ARWR)

- •Program: Investigating siRNA for metabolic and cardiometabolic diseases
- •Technology: TRiM™ (Targeted RNAi Molecule) platform
- •Status: Focused on liver-centric pathways; potential obesity applications

Silence Therapeutics (NASDAQ: SLN)

- •Program: Developing siRNA therapies for metabolic and cardiovascular diseases
- •Technology: Proprietary mRNA-targeting siRNA platform
- •Status: Partnered with AstraZeneca for metabolic disease research

Eli Lilly (NYSE: LLY)

- •Program: Has siRNA obesity programs in preclinical development
- •Technology: Acquired RNAi assets to expand beyond incretinbased obesity treatments
- •Status: Exploring siRNA approaches alongside its established GLP-1 portfolio



BioGene's A-to-Z solution

Dual gene therapy siRNAs targeting obesity and diabetes -> <u>restore</u> metabolic function with reduced side effects, increased compliance and cost-effectiveness

SOL-GEL PLATFORM

A versatile platform revolutionizing Nose-to-Brain delivery of therapeutics with global patents pending



BIORESPONSIVE LNP PLATFORM

Bioresponsive selfassembling lipid nanoparticle (bLNP) platform technology effectively delivering and releasing genetic cargo

US Patent GRANTED

Smart-siRNA's

Metabolicallystabilised and multiple exon targeting siRNA's specifically against PTP1B, validated



DUAL GENE THERAPY

Smart-siRNAs targeting
PTP1B delivered using our
bLNP platform directly
N2B with Sol-Gel, in an
easy-to-use nasal spray
format



SOL-GEL Nose-To-Brain Platform Delivery



Direct Nose-to-Brain Delivery

Desired patient outcomes are achieved by <u>consistent and</u> <u>sustained delivery to whole</u> <u>brain, dose after dose</u>.



Challenges with Oral Delivery Route

Rapid breakdown by enzymes in the gut. Increasing incidence of GI distress from oral dosing of medication complicated by poor diet.



The Blood-Brain-Barrier

BBB remains a universal hurdle for drugs intended for the brain when administered via conventional routes (oral, injection), which we altogether circumvent.



Olfactory Pathway Targeting with Sol-Gel

An ideal and proven pathway for rapid, direct and sustained brain delivery of therapeutic cargo, via our patient-friendly nasal spray Sol-Gel platform.

Sol-Gel delivery altogether circumvents the BBB – <u>not</u> a hurdle for BioGene!



What is the Sol-Gel Platform?

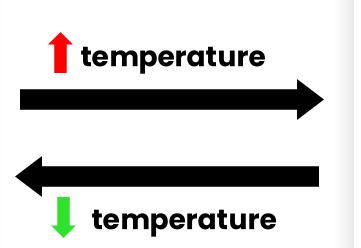
A *solution* that is engineered to rapidly *gel* upon contact with mucosa...

- Targeted spray delivery and retention on mucosa
- Controlled and sustained release (nanomicellar-formulation) to and through mucosa

Room temperature



Solution state permits spraying via devices and extensive/uniform tissue coverage



Body Temperature



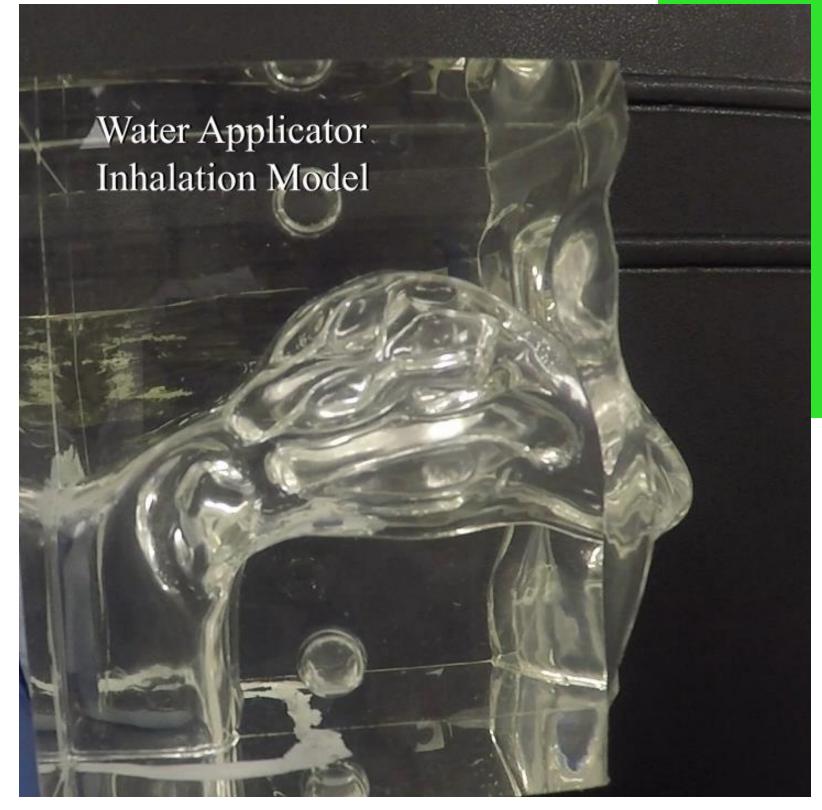
Mucoadhesive <u>functional</u> gel promotes sustained & controlled delivery



Conventional nasal spray delivery intranasally

Nasal sprays deliver formulation throughout the nasal cavity, and are rapidly cleared...

- Anterior & posterior leakage
- Rapid ciliary clearance
- Poor retention
- Unpredictable transmucosal delivery to trigeminal nerves





Sol-Gel Platform Technology & Device

Olfactory mucosa targeting, rapid sol-to-gel transition, muco-retention and sustained delivery

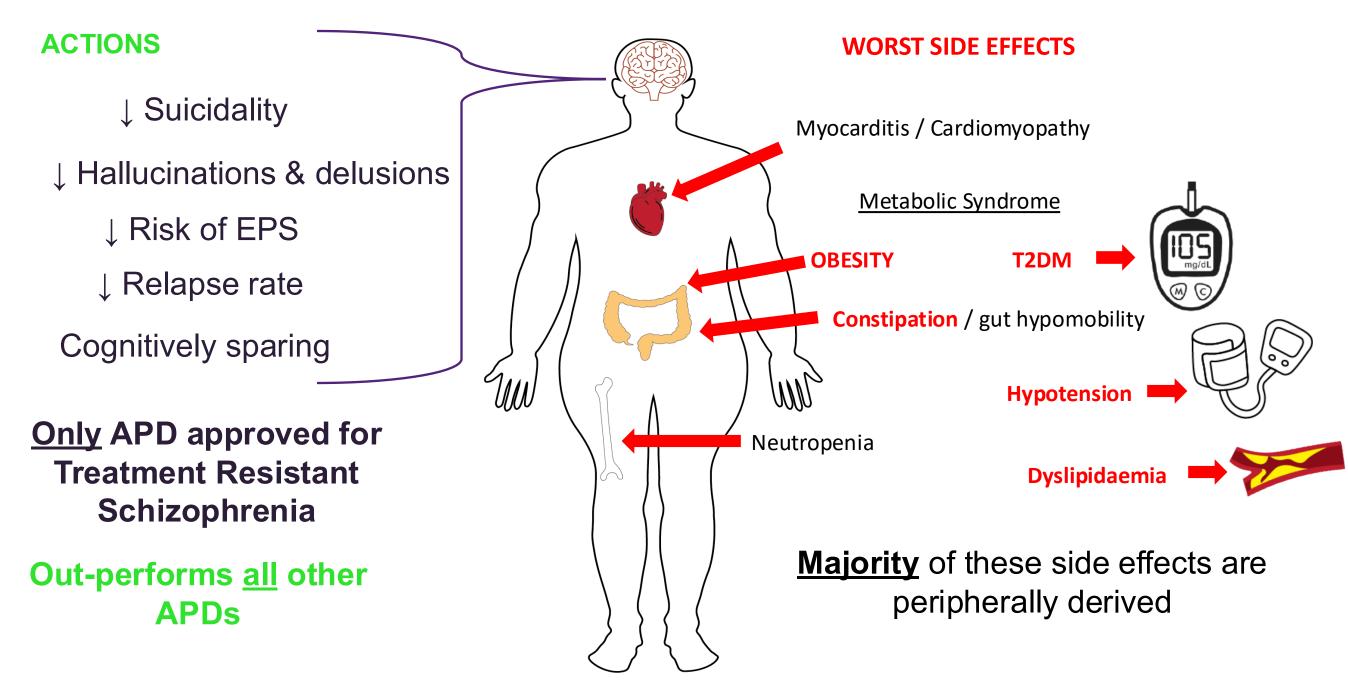
- <u>Exclusive</u> olfactory targeting
- Direct, rapid nose-to-brain delivery
- Mucoadhesive sol-gel provides for sustained & controlled delivery
- Patient-friendly water or buffer vehicle - <u>no</u> alcohols or oils





PoC study using N2B sol-gel for treatment refractive psychosis...

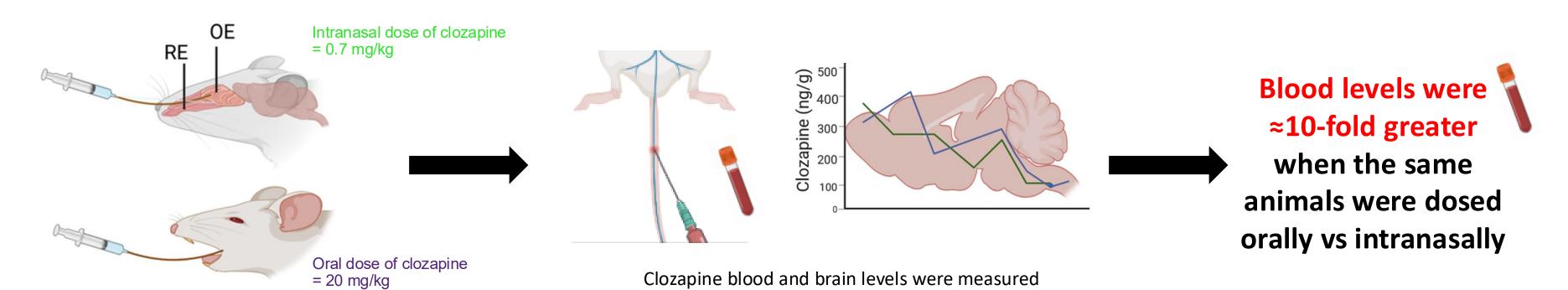
Clozapine: Peripheral Side Effects





PoC study confirms N2B sol-gel brain-biased delivery for treatment refractive psychosis...

- Clozapine is exemplary in alleviating positive & negative ve symptoms of psychosis, but is plagued with serious, debilitating peripheral side effects, limiting it's use to treatment refractive schizophrenia
- A preclinical study was conducted comparing oral vs intranasal sol-gel delivery of clozapine in rodents trained in conditioned avoidance response – an industry standard 'read out' of anti-psychotic effect



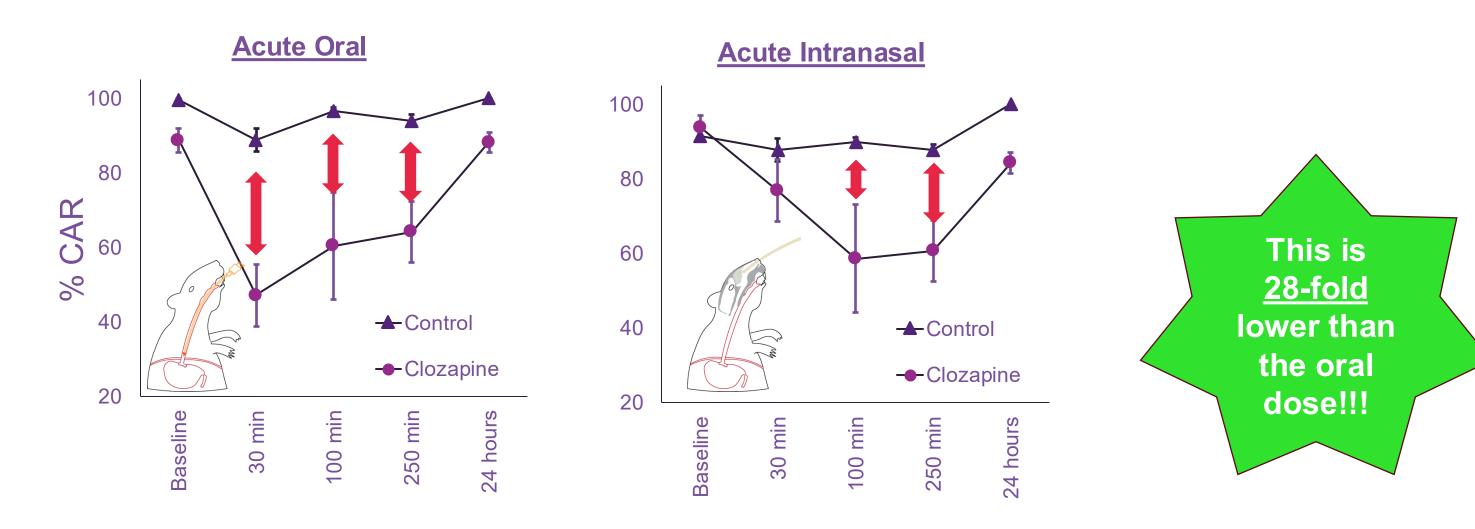
A clozapine sol-gel formulation delivered intranasally to the olfactory epithelium (top) was compared with oral delivery (bottom)

But what about efficacy...?



PoC study confirms N2B sol-gel is <u>efficacious</u> for treatment refractive psychosis...

Clozapine anti-psychotic drug action - daily dosing for 7 days (acute study)



Oral = 20 mg/kg

IN = 0.7 mg/kg

Confirmed sustained efficacy after **CHRONIC** dosing to TWO months - Human trials planned...



BioGene's Solution for Next Generation Diabetes and Obesity Therapeutics

Dual gene therapy siRNAs targeting obesity and diabetes -> restore metabolic function with reduced side effects, increased compliance and cost-effectiveness

SOL-GEL PLATFORM

A versatile platform revolutionizing Nose-to-Brain delivery of therapeutics with global patents pending



BIORESPONSIVE LNP PLATFORM

Bioresponsive selfassembling lipid nanoparticle (bLNP) platform technology effectively delivering and releasing genetic cargo



Smart-siRNA's

Metabolicallystabilised and multiple exon targeting siRNA's specifically against PTP1B, validated



DUAL GENE THERAPY

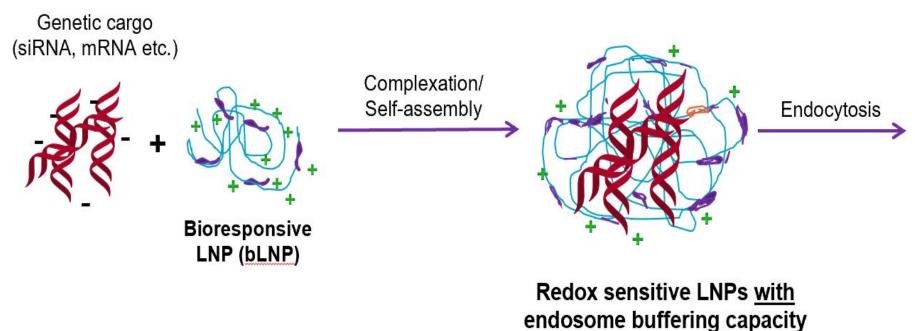
Smart-siRNAs targeting
PTP1B delivered using our
bLNP platform directly
N2B with Sol-Gel, in an
easy-to-use nasal spray
format

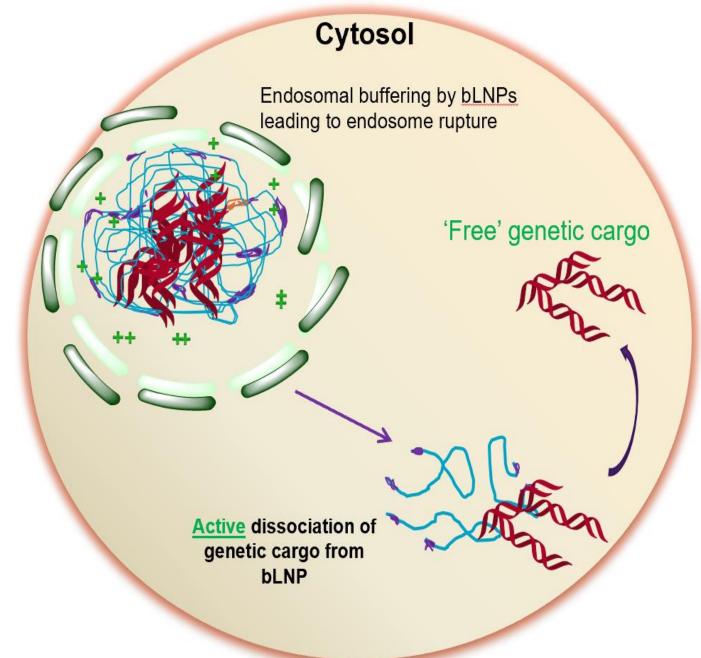
This Photo by Unknown Author is licensed under CC BY-NC



Non-Viral Vector Platform - BioGene's Bioresponsive LNPs (bLNP)

- Next generation non-viral bioresponsive vector
- US Patent # 11,566,044 granted, 31st March 2023





Comprehensive release of all genetic cargo from their carrier...

Significant implications for precision medicine in **mainstream** disease re: dosing, pricing and patient accessibility...

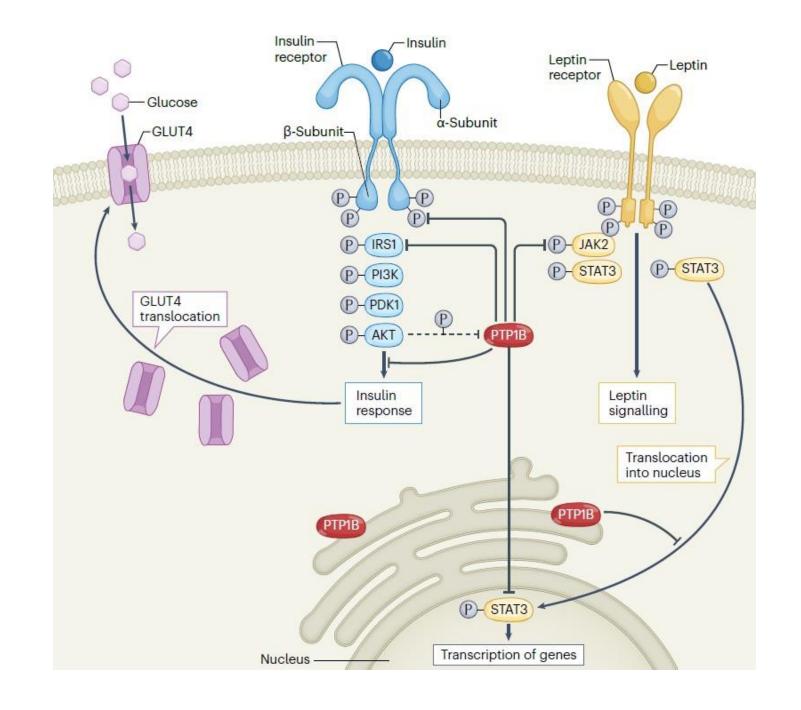


PTP 1B Validation in Diabetes (insulin resistance) & Obesity (leptin signaling)

PTP1B directly dephopshorylates the Insulin Receptor while indirectly acting on the leptin receptor to regulate satiety through Jak2/Stat3.

Dual therapy approach: our bLNPs specifically targeting PTP1B has been uniquely designed with lipids with both anti-inflammatory and direct PTP1B inhibition properties.

50% reduction in PTP1B deemed adequate to restore metabolic homeostasis.





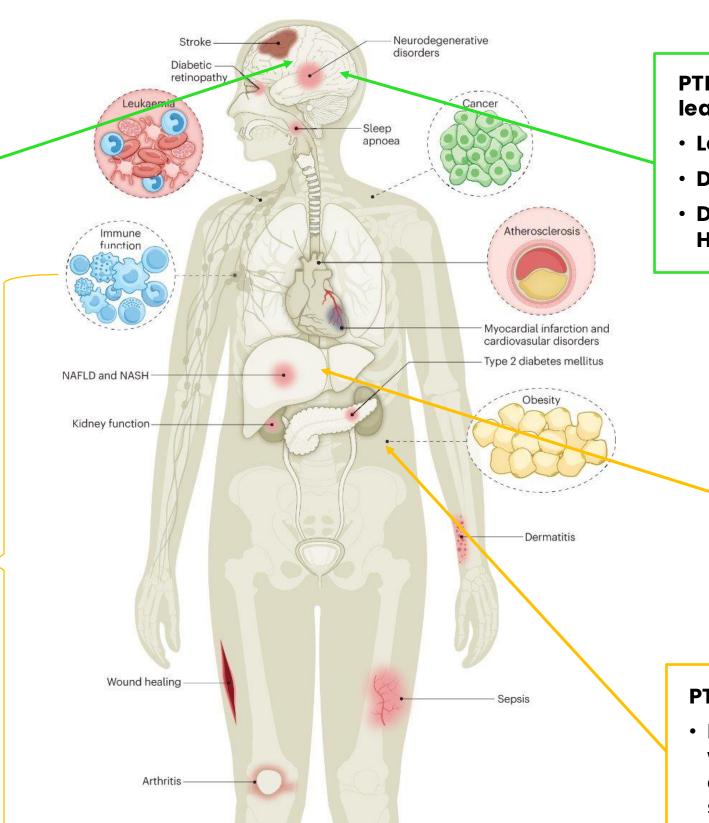
PTP1B In the CNS only, restores both insulin & leptin sensitivity*

Neuron-specific PTP1B -/- leads to

- Decrease in body weight & fat mass
- Increased activity and energy expenditure
- Increased leptin secretion
- Improved glucose homeostasis.

PTP1B -/- in skeletal muscle leads to

- Body weight effect similar to WT
- Improved glucose insulin sensitivity



PTP1B -/- in leptin-receptor expressing neurons leads to

- Leptin hypersensitivity
- Decrease in body weight & fat mass
- Decreased body weight & fat mass gain upon HFD-feeding

PTP1B -/- in liver leads to

- No effect on body weight.
- Decreased gluconeogenesis and plasma lipid levels
- Protective against HFD-induced inflammation and ER-stress.

PTP1B -/- in adipose leads to

 Potential to inc. body weight, enlarge adipocytes and impair insulin sensitivity.



biogenetherapeutics.com

Central (brain) PTP1B targeting exhibits the most profound global effects on both energy balance & glucose homeostasis*

- Global neuronal deletion of PTP1B dramatically reduces obesity and enhances leptin + insulin sensitivity %
- Various areas of the brain involved in energy balance (hypothalamus, hindbrain, and limbic (reward) centres) control key metabolic processes including:
 - feeding (satiety);
 - body weight gain/loss;
 - energy expenditure;
 - core temperature regulation;
 - peripheral insulin sensitivity;
 - liver metabolism

What about PTP1B effects on muscle?

PTP1B inhibition elicits non-cachectic (non-muscle) fat-specific weight loss, a common side effect of marketed
 GLP1RAs^

[^]https://onlinelibrary.wiley.com/doi/pdf/10.1038/oby.2009.444;



^{*}Data derived from phenotypes in genetic constitutive knockdowns in mice - lab of Prof Mirela Delibegović FRSE, The University of Aberdeen, UK (see slide 27)

[%]https://link.springer.com/chapter/10.1007/978-1-4614-7855-3_4;

Targeting PTP1B In peripheral tissue vs CNS – key differences

Studies correlating lowered PTP1B levels to metabolic impact in liver, muscle and adipose tissue highlight:

For the Periphery

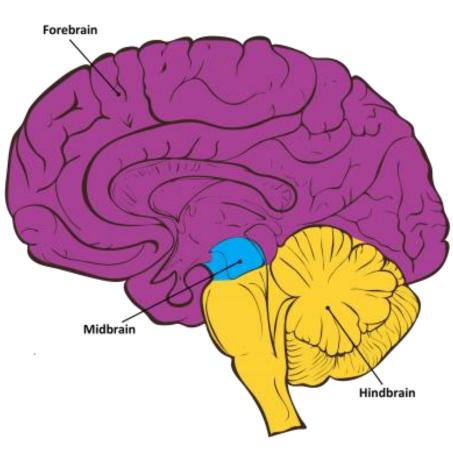
- In liver this improves insulin signalling & responsiveness, reduces gluconeogenesis & lipogenesis, alleviates ER stressors
 without impacting weight loss
- In muscle boosts insulin-stimulated glucose uptake and elevates whole-body glucose tolerance
- In adipose tissue increased adipocyte expansion and lipogenesis, without improving systemic glucose control

For the CNS – global neuronal KO of PTP1B in all brain regions (forebrain, mid-brain & hindbrain) leads to:

- Marked protection from high fat diet-induced obesity*
- Leanness due to ↓ food intake and ↑ energy expenditure
- Improved leptin sensitivity^{*}
- Enhanced peripheral insulin sensitivity[^]
- Reduced insulin resistance, ER stress and neuroinflammation[#]

[#]https://doi.org/10.1016/j.biopha.2022.113709

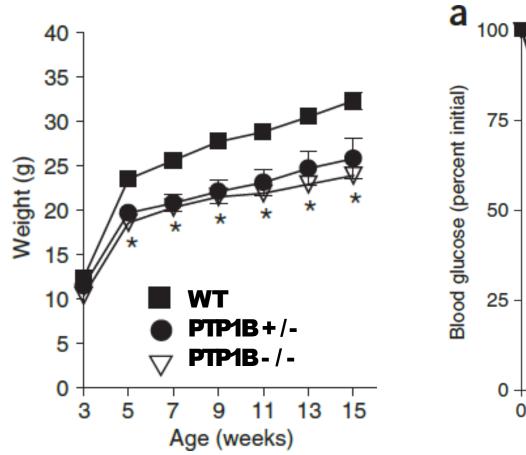


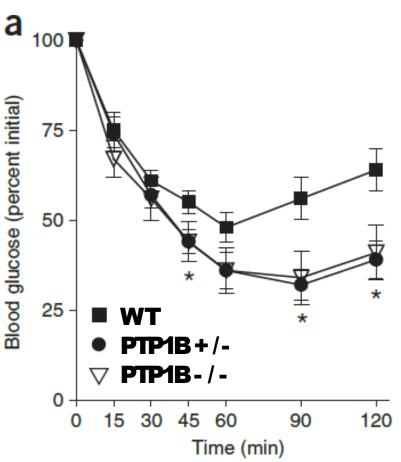


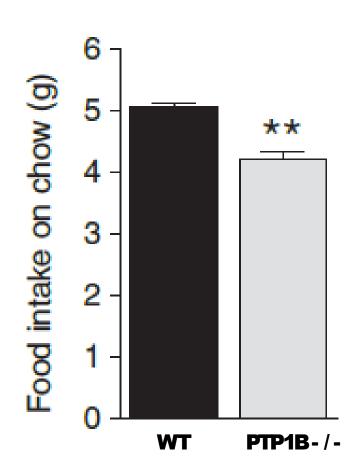
^{*}https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0032700;

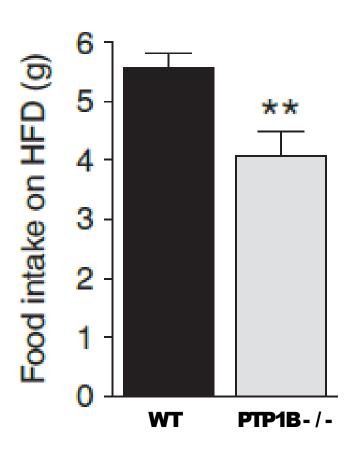
[^]https://doi.org/10.1016/j.metabol.2017.01.029;

Mice lacking <u>neuronal</u> PTP 1 B are resistant to diet-induced obesity and are protected from developing leptin resistance









Neuronal PTP1B regulates body weight, adiposity and leptin action

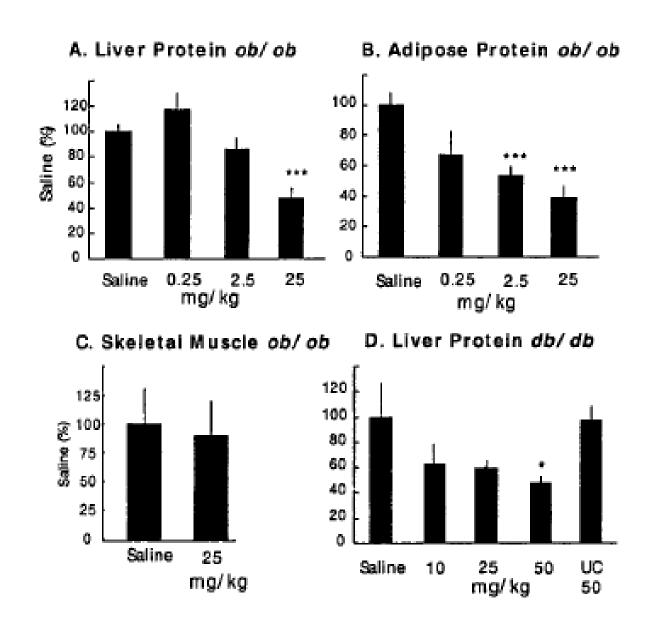
Kendra K Bence^{1,4}, Mirela Delibegovic¹, Bingzhong Xue², Cem Z Gorgun³, Gokhan S Hotamisligil³, Benjamin G Neel¹ & Barbara B Kahn²

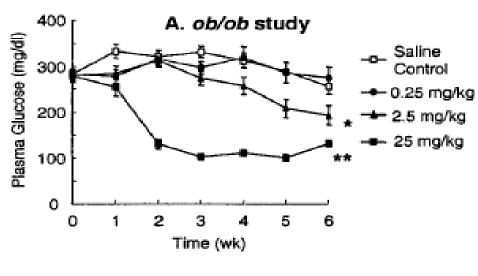
NATURE MEDICINE VOLUME 12 | NUMBER 8 | AUGUST 2006

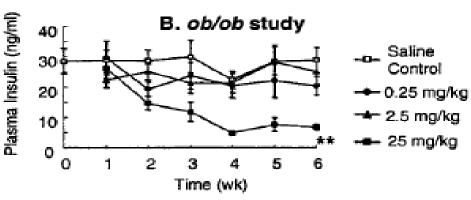
Conclusion of the study: "for effective obesity treatment and optimal therapy for type 2 diabetes, PTP1B inhibitors must be directed to the brain"

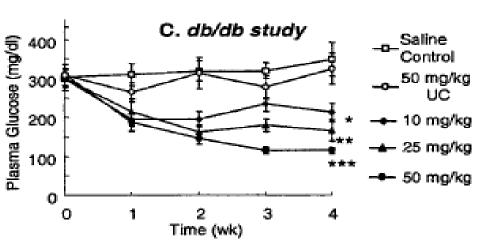


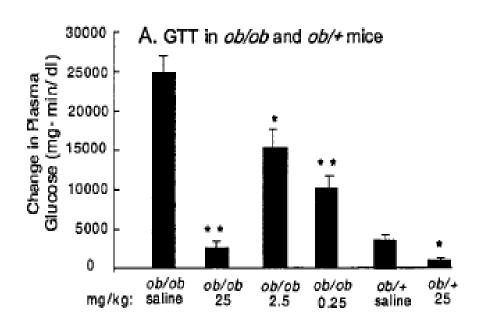
<u>PoC for PTP1B Targeting In Vivo:</u> PTP1B antisense oligonucleotide lowers PTP1B protein, normalizes blood glucose, and improves insulin sensitivity in diabetic mice

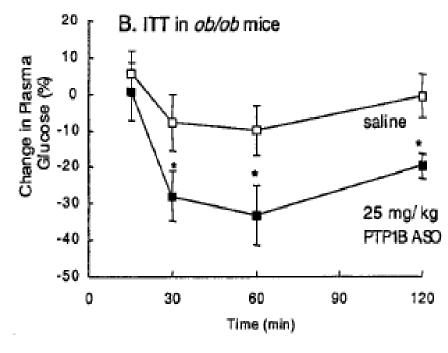










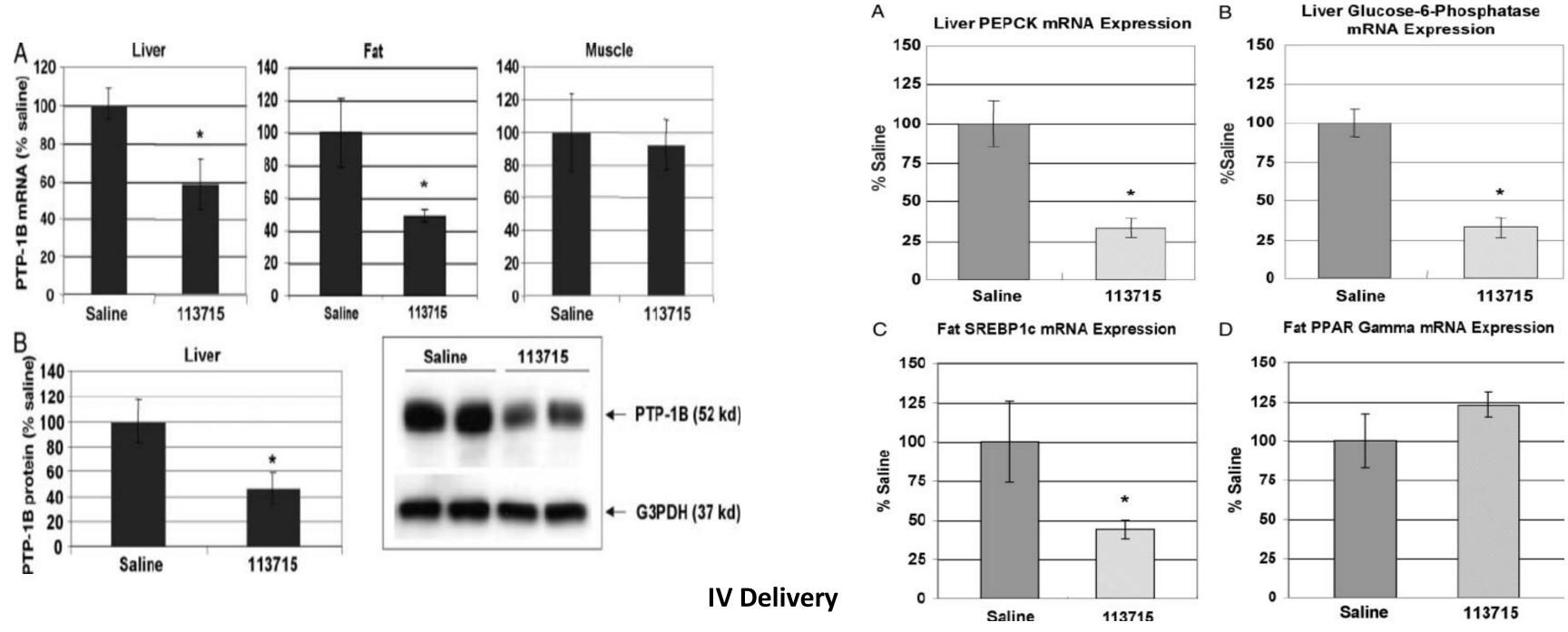


Zinker B, Rondinone CM et al. PNAS, August 2002, 99(17): 11357-11362



IV Delivery

<u>PoC for PTP1B Targeting In Vivo:</u> Antisense oligonucleotides suppresses Protein Tyrosine Phosphatase-1B and modulates key regulators of glucose and fat metabolism in non-obese monkeys

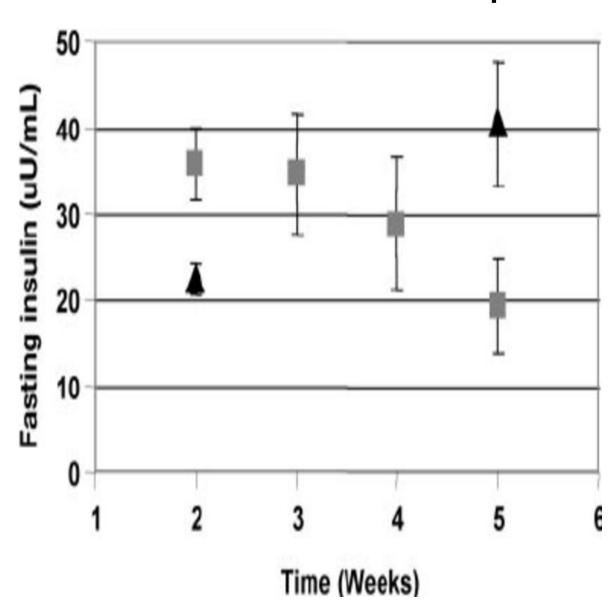


Swarwick M et al. Endocrinology, April 2009, 150(4):1670–1679



<u>PoC for PTP1B Targeting In Vivo:</u> Inhibition of Protein Tyrosine Phosphatase-1B with antisense oligonucleotides improves insulin sensitivity in monkeys in a dose-dependent manner

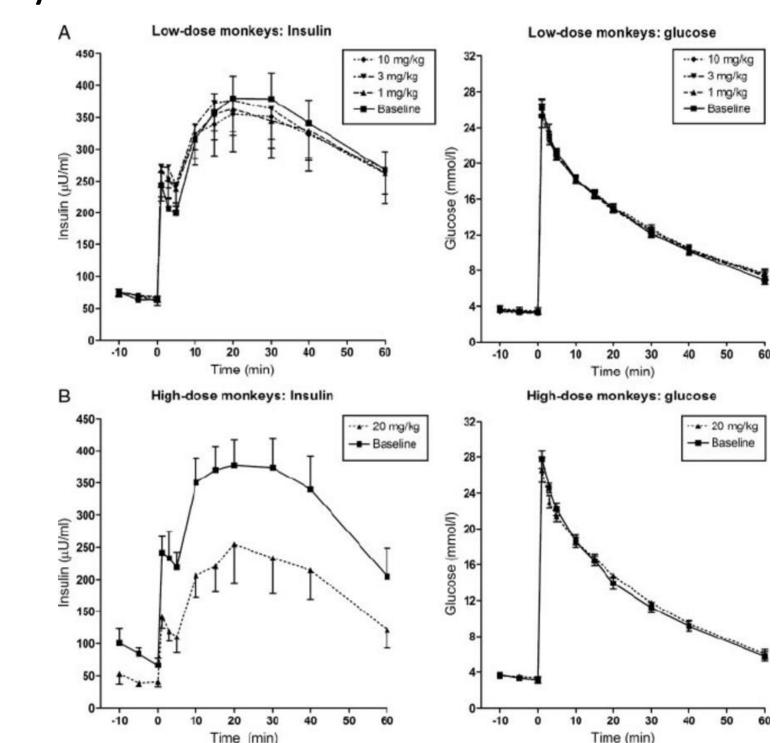
Normal Non-Obese Rhesus Macaques



Swarwick M et al. Endocrinology, April 2009, 150(4):1670–1679

SIOGENE

IV Delivery Insulin Resistant Rhesus Macaques



Comparison of targets - GLP1RAs & PTP1B

Mechanism of action:

GLP1RAs - increase insulin secretion (pancreas), delay gastric emptying (direct GI effects) and reduce appetite (CNS)

PTP1B inhibition - enhances insulin and leptin receptor signalling in brain, liver, muscle & adipose tissue, targeting the root cause improving body weight, energy homeostasis, and glucose metabolism

Key CNS-specific outcomes of PTP1B inhibition that are not evident with GLP1RAs:

- ↑ Thermogenesis via central leptin sensitivity <u>PLUS</u> browning adipose tissue (BAT) activation
 - GLP1RAs suppress only appetite with no effect on thermogenesis
- Reduced ER stress in the liver, along with lowered neuroinflammation and insulin resistance
 - GLP1RAs 'possibly' suppress systemic inflammation (only) as a consequence of weight loss, while placing further stress on the pancreas

Side effect profiles

GLP1RAs - Nausea, vomiting, diarrhoea, constipation affect 50–75% of users, often requiring dose titration; incidence of gall bladder-related issues*; muscle loss reported

PTP1B – Preclinical studies in PTP1B knockout mouse models show potent and broad pro-metabolic effects with minimal side effects and no evidence of muscle loss*, both of which can be comprehensively circumvented by direct, nose-to-brain (N2B) sol-gel administration

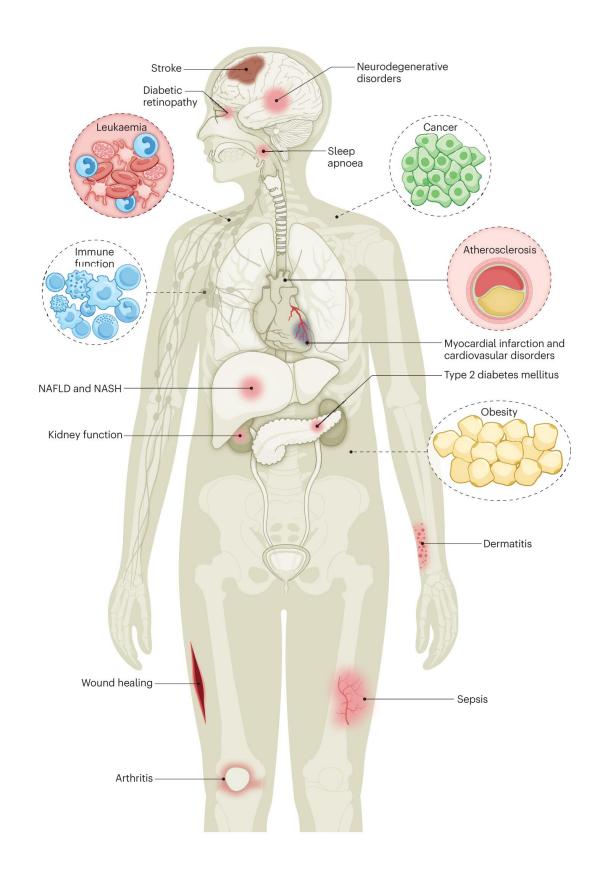
https://federalhealthgroup.com/posts/glp-1-receptor-agonist-side-effects-and-clinical-management/;

*Data derived from phenotypes in genetic constitutive knockdowns in mice - lab of Prof Mirela Delibegović FRSE, The University of Aberdeen, UK:

Delibegovic M, Dall'Angelo S and Dekeryte R. Protein tyrosine phosphatase 1B in metabolic diseases and drug development. Nature Reviews Endocrinology 20, 366-378 (2024)



PTP1B 1: Obesity, T2D AND BEYOND!



PTP1B inhibition reduces neuroinflammation and fronto-temporal dementia in animal models displaying potential for the treatment of **Alzheimer's Disease**

Source: Pharmacological PTP1B inhibition rescues motor learning, neuroinflammation, and hyperglycaemia in a mouse model of Alzheimer's disease, Franklin et al, Exp Neurology, **2024**

PTP1B inhibition has been demonstrated to enhance anti-tumor immunity and combat solid state cancers

Source: A small molecule inhibitor of PTP1B and PTPN2 enhances T cell anti-tumor immunity, Liang et al, Nat Comm, **2023**

Ongoing clinical trials:

- PTP1B Implication in the Vascular Dysfunction Associated With
 Obstructive Sleep Apnea, Angers, France (NCT04235023)
- Correlation Between PTP1B Expression and Organ Failure
 During Sepsis, Univ Hospital Rouen, France (NCT03189355)
- MSI1436 PTP1B inhibitor for metastatic breast cancer



Gene Targeting Strategy with BioGene's 'Smart-siRNAs' against the *PTPN1* gene

The PTPNI gene comprises 10 exons, each potential targets for siRNA:

1 63bp 2 91bp 3 101bp **4** 99bp

5 138bp **6** 210bp

7 162bp 8 224bp 9 196bp

10 24bp

01

Successfully engineered selective, potent siRNA's independently targeting multiple exons of *PTPN1*

02

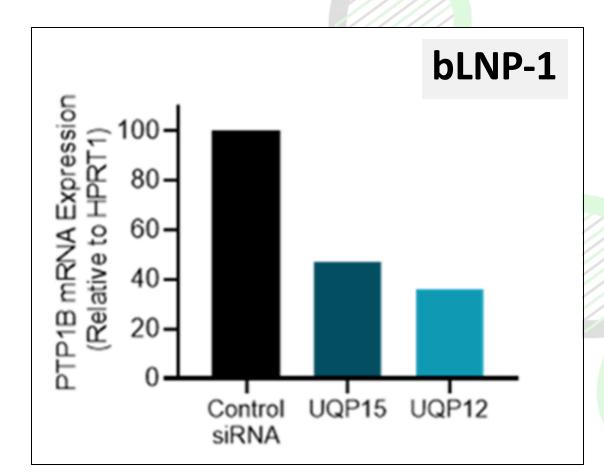
siRNA's against both mouse and human variants of distinct exons were engineered in parallel, paving the way for PoC preclinical and clinical studies 03

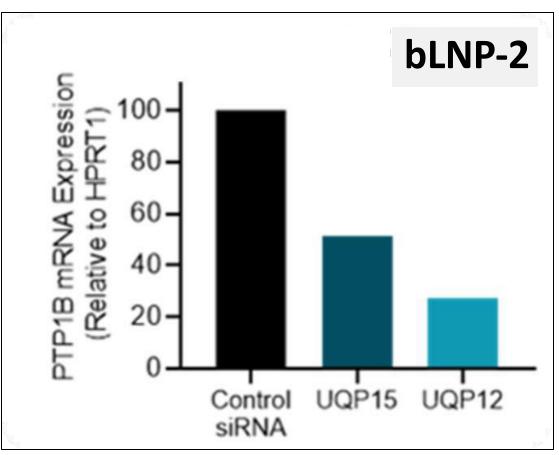
siRNA sequences were engineered to be metabolically & thermostable ('Smart-siRNAs'), and novel w.r.t the prior art/published sequences



Potent Gene Silencing Confirmed with BioGene's Bioresponsive LNPs (bLNPs)

- bLNPs possess the unique bioresponsive 'genereleasing' linker (US Patent #11,566,044 – granted 31/Mar/23).
- UQP12 & UQP15 (top and bottom graphs) represent select Smart-siRNAs showing potent gene silencing when formulated with two distinct bLNPs in liver tissue (ex vivo).
- UQP12 & UQP15 represent only two uniquely designed metabolically-stabilized siRNAs from our library that display potent gene & protein silencing.







Planned Diabetes and Obesity Preclinical Study

The study will evaluate BioGene's SmartsiRNAs using bioresponsive LNP formulations versus conventional standard of care drugs (i.e. semaglutide) in rodent models of diabetes and obesity.

The study design includes mice cohorts for robust statistical analysis, appropriate control groups, and comparison of administration routes.

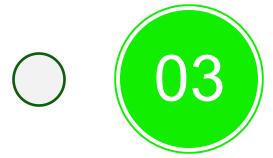


Location: The University of Queensland, Brisbane

• Extensive expertise with Sol-Gel engineering, bLNP formulation & preclinical models of obesity and diabetes



Research Team Led by BioGene's Chief Scientific Officer & Co-Founder, Dr. Harry Parekh.



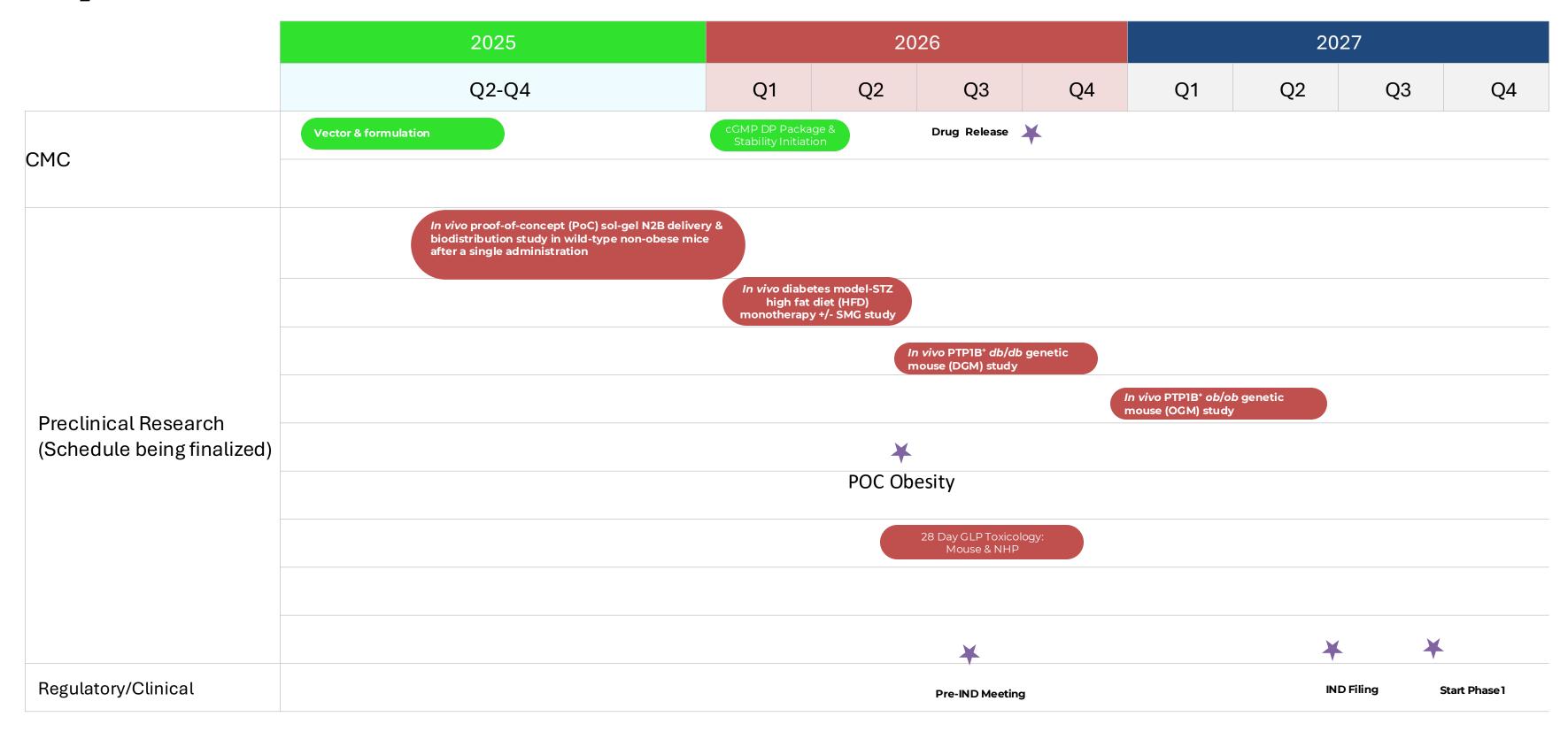
Objectives: Assess weight changes, PTP-1B levels in major tissues, tissue histology, and classical blood and urine biomarkers (e.g. glucose, triglycerides) throughout the extended treatment period.



Success Criteria: Weight reduction; Restoration of glucose levels/insulin sensitivity, increased activity, and improved behavioral patterns in diabetic and obese mice.



Key Milestones: Path to IND and Phase 1





Key Activities, Inflection Points and Regulatory Milestones

Next 18 months

- Initiate and complete obesity/diabetes animal model studies
- Initiate GLP toxicology studies
- Manufacture clinical supplies
- File IND and begin phase I trials

Program	Development Stage	Key Activities	IND Status and Target Date	Key Milestones
Lead Candidate	Preclinical	GMP manufacturing GLP toxicology Obesity/T2D mouse study	IND filing (q2-2027)	Phase I (q3-2027)



Revenue and Corporate Strategy





Global Collaborators











Thank you



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Type 2 Diabetes Mellitus: Limitations of Conventional Therapies and ntervention with Nucleic Acid-Based Therapeutics

Ganesh R. Kokil, Rakesh N. Veedu, ** S. Grant A. Ramm, J. Johannes B. Prins, V nd Harendra S. Parekh*,

Peptide Science Research Article (wileyonlinelibrary.com) DOI 10.1002/psc.1347

Low-generation asymmetric dendrimers exhibit minimal toxicity and effectively complex DNA

Neha Shah, a,b Raymond J. Steptoeb* and Harendra S. Parekha*

J. Phys. Chem. B 2010, 114, 9231-9237

Structure and Dynamics of Multiple Cationic Vectors—siRNA Complexation by All-Ato **Molecular Dynamics Simulations**

Defang Ouyang, † Hong Zhang, † Harendra S. Parekh, * † and Sean C. Smith * , †

School of Pharmacy and Centre for Computational Molecular Science, Australian Institute of Bioenginee and Nanotechnology, The University of Queensland, Brisbane, QLD 4072, Australia

Received: December 17, 2009; Revised Manuscript Received: June 1, 2010







Research Article 🙃 Full Access

Low-generation asymmetric dendrimers exhibit minimal toxicit and effectively complex DNA

Neha Shah, Raymond J. Steptoe K. Harendra S. Parekh K.

First published: 24 February 2011 | https://doi.org/10.1002/psc.1347 | Citations: 46

Pharm Res (2014) 31:3150-3160 DOI 10.1007/s11095-014-1408-1

RESEARCH ARTICLE

Asymmetric Peptide Dendrimers are Effective for Antibody-Mediated Delivery of Diverse Payloads to in Vitro and in Vivo

SCIENTIFIC REPORTS

OPEN Self-assembling asymmetric peptide-dendrimer micelles – a platform for effective and versatile in vitro nucleic acid delivery

Ganesh R. Kokil¹. Rakesh N. Veedu^{2,3,4}. Bao Tri Le^{2,3}. Grant A. Ramm^{6,5,6} & Harendra S. Parekh^{6,1}

ADVANCED THEORY AND SIMULATIONS

Full Paper @ Full Access

Cell Membrane Penetration without Pore Formation: Chameleonic Properties of Dendrimers in Response to Hydrophobic and Hydrophilic Environments

Sergio de Luca, Prasenjit Seal 🔀 Harendra S. Parekh, Karnaker R. Tupally, Sean C. Smith 🔀

First published: 03 June 2020 | https://doi.org/10.1002/adts.201900152

Express in Vitro Plasmid Transfection Achieved with 16⁺ Asymmetric Peptide Dendrimers Prarthana V. Rewatkar, David P. Sester, Harendra S. Parekh, and Marie-Odile Parat School of Pharmacy, The University of Queensland, 20 Cornwall Street, Woolloongabba, Queensland 4102, Australia

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Supporting Information





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