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## **CStone Pharmaceuticals**

**基石藥業**

*(Incorporated in the Cayman Islands with limited liability)*

**(Stock Code: 2616)**

### **VOLUNTARY ANNOUNCEMENT**

## **CSTONE ANNOUNCES DATA FROM TRIALS OF CS1001, CS1002 AND CS1003 TO BE RELEASED FOR THE FIRST TIME AT 2019 CSCO ANNUAL MEETING**

CStone Pharmaceuticals (the “**Company**” or “**CStone**”) announces that the 2019 Annual Meeting of the Chinese Society of Clinical Oncology (“**2019 CSCO Annual Meeting**”) has accepted three abstracts on the clinical trials of CS1001 (Anti-PD-L1 antibody), CS1002 (Anti-CTLA-4 antibody), and CS1003 (Anti-PD-1 antibody), the Company’s three backbone drug candidates of immuno-oncology therapies. Meanwhile, three late-breaking abstracts on the CS1001-101 Phase Ib clinical trial have also been submitted for presentation.

### **CS1001-101 Clinical Trial**

The CS1001-101 trial is a Phase Ia/Ib open-label, multiple-dose, dose-escalation, and dose-expansion study assessing the safety, tolerability, pharmacokinetics and anti-tumor efficacy of CS1001 in patients in China with advanced solid tumors or lymphomas. Currently, CS1001 is being investigated during multiple clinical trials in China and the United States, and over 650 patients have been enrolled in these studies.

The results that will be released in poster presentation at the 2019 CSCO Annual Meeting include the safety data from the CS1001-101 Phase Ia/Ib clinical trial, and the efficacy data from the Phase Ib trial in cholangiocarcinoma (abstract number: 4763).

Three late-breaking abstracts have also been submitted for oral presentation at the 2019 CSCO Annual Meeting, which include:

- the efficacy and safety data from the CS1001-101 Phase Ib trial in patients with esophageal carcinoma;

- the efficacy and safety data from the CS1001-101 Phase Ib trial in patients with gastric cancer; and
- the efficacy and safety data from the CS1001-101 Phase Ib trial in patients with MSI-H cancers.

### **CS1002-101 Trial**

The CS1002-101 trial is an open-label, multiple-dose, dose-escalation, and dose-expansion study conducted in Australia assessing the safety, tolerability, pharmacokinetics, pharmacodynamics and preliminary anti-tumor efficacy of CS1002 in patients with advanced solid tumors. Currently, the study has completed the dose-escalation stage of CS1002 monotherapy. The dose-escalation of combination with CS1003 in solid tumors and the dose-expansion of the combination in selected tumor types have been planned.

The data that will be released in oral presentation at the 2019 CSCO Annual Meeting includes preliminary safety, pharmacokinetics and pharmacodynamics results from a Phase Ia study of CS1002 in patients with advanced solid tumors (abstract number: 4756).

### **CS1003-102 Trial**

The CS1003-102 trial is a multi-center Phase I clinical study evaluating the safety, tolerability and preliminary anti-tumor activity of CS1003 in Chinese patients with advanced solid tumors and lymphomas. CS1003 is currently undergoing Phase I clinical studies in China and Australia, and received an Investigational New Drug (IND) approval from the United States Food and Drug Administration (FDA) in October 2018.

The results that will be released in oral presentation at the 2019 CSCO Annual Meeting include preliminary safety, pharmacokinetics and efficacy results from a phase I study of CS1003 in Chinese patients with advanced solid tumors or lymphoma (abstract number: 4847).

### **About CS1001**

CS1001 is an investigational anti-PD-L1 monoclonal antibody being developed by CStone. Authorized by a company based in the United States, Ligand Pharmaceuticals Inc. (NASDAQ: LGND), CS1001 was generated by the OMT transgenic animal platform, which can produce fully human antibodies in one step. As a fully human, full-length anti-PD-L1 monoclonal antibody, CS1001 mirrors natural G-type immune globulin 4 (“**IgG4**”) human antibody, which can reduce the risk of immunogenicity and potential toxicities in patients, potentially representing a unique advantage over similar drugs.

CS1001 has completed a Phase I dose-escalation clinical study in China, in which CS1001 showed good tolerability and produced sustained clinical benefits during the Phase Ia stage of the study.

CS1001 is being investigated in a number of ongoing clinical trials, including one Phase I bridging study in the United States. In China, its clinical program includes one multi-arm Phase Ib study, two pivotal Phase II studies and three Phase III studies for several tumor types.

### **About CS1002 and the CTLA-4 pathway**

CS1002 is an investigational anti-cytotoxic T lymphocyte associated antigen 4 (“**CTLA-4**”) monoclonal antibody being developed by CStone.

CTLA-4, also known as CD152, is a transmembrane protein encoded by the CTLA-4 gene that can down-regulate the activity of T cells when binding with its ligand, B7.1/B7.2, a pathway also used by tumor cells to avoid T lymphocyte attack. Consequently, blockade of the CTLA-4 pathway can stimulate T cell activation and proliferation to induce or enhance anti-tumor immune responses. CTLA-4 provides a new immunotherapeutic approach to a number of diseases, including tumors.

Presently, Yervoy (ipilimumab) of Bristol-Myers Squibb Company's (NYSE: BMY) is the only CTLA-4 inhibitor to gain a market approval worldwide, although Yervoy has not yet been approved in China. Pre-clinical tests have shown that CS1002 has a relatively strong affinity to CTLA-4 and is expected to match Yervoy in terms of efficacy.

### **About CS1003 and the PD-1/PD-L1 pathway**

CS1003 is a humanized anti-PD-1 IgG4 monoclonal antibody developed by CStone using an internationally leading hybridoma platform. CS1003 has shown good tolerability and efficacy profile in preclinical in vivo studies. Unlike other anti-PD-1 antibodies, CS1003 recognizes both human and murine PD-1, providing a unique competitive advantage during efficacy testing in syngeneic mouse tumor models particularly for development of effective combination therapies.

PD-1, or programmed death-1, is an inhibitory checkpoint receptor expressed mainly on T cells. Under normal circumstances, it binds with its ligands, programmed death ligand-1 or ligand 2 (PD-L1/PD-L2), inhibiting T cell and cytokine activation, serving to dampen the immune response in order to prevent damage to healthy tissues. However, studies have shown that PD-L1 can be abundantly expressed on the surface of many solid tumors as well as hematological malignancies. Cancer cells can therefore make use of the PD-1/PD-L1 pathway to successfully avoid immune system recognition. Targeting of the PD-1/PD-L1 checkpoint by anti-tumor drugs can block the "tumor immune evasion mechanism" and restore anti-cancer immune ability in patients.

### **About CStone**

CStone is a biopharmaceutical company focused on developing and commercializing innovative immunoncology and molecularly-targeted drugs to address unmet medical needs for cancer patients in China and worldwide. Since the Company's establishment in 2015, CStone has assembled a world-class management team that has a full spectrum of complementary skillsets from preclinical research to clinical development and commercialization. With combination therapies as a core strategy, the Company has built a rich oncology pipeline of 15 oncology drug candidates. Currently, five late-stage drug candidates are at or near pivotal trials. With an experienced team, a rich pipeline, a robust clinical development-driven business model, and substantial funding, CStone's vision is to become globally recognized as a leading Chinese biopharmaceutical company by bringing innovative and differentiated oncology therapies to cancer patients worldwide.

For more information about CStone, please visit: [www.cstonepharma.com](http://www.cstonepharma.com).

By order of the Board  
**CStone Pharmaceuticals**  
**Dr. Frank Ningjun Jiang**  
*Chairman*

Suzhou, People's Republic of China, August 22, 2019

*As at the date of this announcement, the Board of Directors of the Company comprises Dr. Frank Ningjun Jiang as Chairman and Executive Director, Dr. Wei Li, Mr. Qun Zhao, Mr. Yanling Cao, Mr. Guobin Zhang and Dr. Lian Yong Chen as non-executive Directors, and Dr. Paul Herbert Chew, Mr. Ting Yuk Anthony Wu and Mr. Hongbin Sun as independent non-executive Directors.*