A preliminary short form prospectus containing important information relating to the securities described in this document has been filed with the securities regulatory authorities in the provinces of British Columbia, Alberta, Saskatchewan and Ontario. A copy of the preliminary short form prospectus, and any amendment, is required to be delivered to any investor that received this document and expressed an interest in acquiring the securities. The preliminary short form prospectus is still subject to completion. There will not be any sale or any acceptance of an offer to buy the securities until a receipt for the final short form prospectus has been issued. This document does not provide full disclosure of all material facts relating to the securities offered. Investors should read the preliminary short form prospectus, the final short form prospectus and any amendment for disclosure of those facts, especially risk factors relating to the securities offered, before making an investment decision.

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This Presentation contains “forward-looking information” within the meaning of applicable Canadian securities laws. This information and these statements, referred to herein as “forward looking statements”, are made as of the date of this Presentation or as of the date of the effective date of information described in this presentation, as applicable. Forward-looking statements relate to future events or future performance and reflect current estimates, predictions, expectations or beliefs regarding future events and include, without limitation, statements with respect to Algernon’s: (i) the Company obtaining the necessary regulatory approvals; (ii) that regulatory requirements will be maintained; (iii) general business and economic conditions; (iv) the Company’s ability to successfully execute its plans and intentions; (v) the availability of financing on reasonable terms; (vi) the Company’s ability to attract and retain skilled staff; (vii) market competition; (viii) the products and technology offered by the Company’s competitors; (ix) the maintenance of the Company’s current good relationships with its suppliers, service providers and other third parties; (x) financial results, future financial position and expected growth of cash flows; (xi) business strategy, including budgets, projected costs, projected capital expenditures, taxes, plans, objectives, potential synergies and industry trends; (xii) research and development; (xiii) expectations concerning the size and growth of the global medical technology market; and (xiv) the effectiveness of the Company’s products compared to its competitors’ products.
Generally, forward-looking information can be identified by the use of forward-looking terminology such as "plans", "expects", or "does not expect", "is expected", "budget", "scheduled", "estimates", "projects", "targets", "forecasts", "intends", "anticipates", or "does not anticipate", or "believes" or variations (including negative and grammatical variations) of such words and phrases or state that certain actions, events or results “likely”, "may", "could", "would", "might", or "will be taken", "occur", or "be achieved". Forward-looking information is based on the opinions and estimates of management at the date the information is made, and is based on a number of assumptions and is subject to known and unknown risks, uncertainties and other factors that may cause the actual results, level of activity, performance or achievements of the Company to be materially different from those expressed or implied by such forward looking information, including without limitation: (i) the availability and continuation of financing; (ii) the effectiveness of the Company’s technology and the Company’s ability to bring its technology to commercial production; (iii) continued growth of the global medical technology market; (iv) the company’s limited operating history, difficulty in forecasting sales and limited market for the securities; and (v) a continued minimal regulatory/legal burden concerning the development, production, sale and use of the Company’s technology.

Although the Company has attempted to identify important factors that could cause actual results to differ materially from those contained in forward-looking information, there may be other factors that cause results not to be as anticipated, estimated or intended. There can be no assurance that such information will prove to be accurate, as actual results and future events could differ materially from those anticipated in such information. Accordingly, readers should not place undue reliance on forward-looking information. Algernon and its directors, officers and employees disclaim any obligation to update any forward-looking statements, whether as a result of new information, future events or results or otherwise, except as required by applicable law. Accordingly, current and potential investors should not place undue reliance on forward-looking statements due to the inherent uncertainty therein. All forward-looking information is expressly qualified in its entirety by this cautionary statement.

This Presentation does not constitute an offer to sell or the solicitation of an offer to buy securities in any jurisdiction in which such offer, solicitation or sale would be unlawful.
>90% OF DRUGS FAIL BEFORE PHASE II

Drug development costs have ballooned to nearly $2.5B, with an average timeline of 15 years.

And most drugs fail to reach market.
NEW CHEMICAL ENTITY (NCE) DEVELOPMENT PATHWAY AND FAILURE RATES

Many Phase II & III trial failures due to non-efficacy issues.

ALGERNON DRUG REPURPOSING BUSINESS MODEL

1. Screen/Identify ‘Safe’ Generic Drugs Never Approved in US or Europe for New Uses
2. Confirm Efficacy in Well Designed Animal Studies
3. Conduct Off-Label Phase Clinical Trial in Drug’s Country of Origin or Australia
4. Move Drug Into USFDA Trials

No Competitors
## Repurposing: Case Studies

<table>
<thead>
<tr>
<th>Company</th>
<th>Drug</th>
<th>Old Indication</th>
<th>New Indication</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biogen</td>
<td>Tecfidera</td>
<td>Psoriasis</td>
<td>Multiple sclerosis</td>
<td>Drug only approved in Germany (50 yrs)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Blockbuster (&gt;US$1B in Sales)</td>
</tr>
<tr>
<td>Aspreva</td>
<td>Cell Cept</td>
<td>Organ transplant</td>
<td>Lupus</td>
<td>Orphan strategy – sold $1B</td>
</tr>
<tr>
<td>Medivation</td>
<td>Dimebon</td>
<td>Allergies</td>
<td>Alzheimer's Disease</td>
<td>Drug only approved in Russia</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$400M deal with Pfizer post Phase II</td>
</tr>
<tr>
<td>Celgene</td>
<td>Thalidomide</td>
<td>Morning sickness</td>
<td>Cancer</td>
<td>Drug was withdrawn from the market</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Blockbuster (&gt;US$1B in Sales)</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Purchased EntreMed's Thalidomide analogues</td>
</tr>
</tbody>
</table>
1. Inflammatory Bowel Disease (IBD)
   Ulcerative Colitis & Crohn’s Disease

2. Non-Alcoholic Steatohepatitis (NASH)

3. Chronic Kidney Disease (CKD)

4. Idiopathic Pulmonary Fibrosis (IPF)

5. Chronic Cough
LEAD PROGRAM

IDIOPATHIC PULMONARY FIBROSIS (IPF) & CHRONIC COUGH

NP-120 (IFENPRODIL)
IDIOPATHIC PULMONARY FIBROSIS MARKET

**Clinical Programs - Overview**

**COMPETITIVE ADVANTAGE**

- **Clinical**: First-in-class oral small molecule therapies
- **Market**: Orphan with two approved therapies: Ofev (Nintedanib) and Esbriet (Pirfenidone)

**US$3.2B GLOBAL MARKET**

- **By 2025**

**STATUS**

- Lead Candidate in animal testing NP-120
- **Safety**: No serious adverse events
- **Efficacy**: Research suggest activity greater than Pirfenidone and Nintedanib and Gefapixant
NP-120 (IFENPRODIL) – NMDA RECEPTOR ANTAGONIST
IPF – BLEOMYCIN MODEL STUDY 2

- 21 Day Bleomycin Induced Mouse Model
- (n=10/arm)
- Treatment Initiated Day 7
- Clinically Relevant Dosing Regimens of NP-120 (Ifenprodil), Nintedanib and Pirfenidone
Acute Guinea Pig Citric Acid Model

(n=6/arm) Using Clinically Relevant Doses of NP-120 (Ifenprodil) and Gefapixant/MK-7264 in Phase 3.

Data

- **NP-120 (Ifenprodil) = 42%**
- **Gefapixant = 20%**
- **No Effect on Taste**
ACUTE COUGH – CITRIC ACID MODEL STUDY

Mean Time to Cough Onset

- Untreated
- Vehicle
- Gefapixant (3.5 mg/kg)
- Ifenprodil (1.5 mg/kg)

* Indicates statistical significance
PLANNED IPF & CHRONIC COUGH PHASE 2 TRIAL

- 20 Patient Open-Label IPF Patients With Cough
- 12 Weeks of Treatment, 20 mg NP-120 (Ifenprodil) TID
- Endpoints:
  - Coughing
  - Lung function
  - Biomarkers of Fibrosis (ProC3)
- Expected Start Q2 2020 (Calendar)
- Enrollment Expected to Take 3 Months
CLINICAL PROGRAMS – OVERVIEW

INFLAMMATORY BOWEL DISEASE (IBD) MARKET

- Ulcerative Colitis
- Crohn’s Disease

US$14.8B GLOBAL MARKET
By 2025

Inflammatory Bowel Disease Linked to Higher Risk of IPF, Population Study Shows

AUGUST 23, 2019 BY STEVE BRYSON PHD IN NEWS.
NP-120 (IFENPRODIL) – EFFECT ON IBD DISEASE ACTIVITY INDEX

**Ulcerative Colitis Model**

- **Vehicle**
- **5-ASA (100 mg/kg)**
- **Ifenprodil (20 mg/kg)**

**Crohn’s Disease Model**

- Disease Activity Index
- Days
NP-120 (IFENPRODIL) – EFFECT ON IBD HISTOPATHOLOGY INDEX
NON-ALCOHOLIC STEATOHEPATITIS (NASH) & CHRONIC KIDNEY DISEASE (CKD) MARKET

**NASH**

**US$21.4B**
GLOBAL MARKET
By 2025

**CKD**

**US$17.4B**
GLOBAL MARKET
By 2025
CKD & NASH FIBROSIS

UUO Model of CKD

% Reduction in Fibrosis

- Teimisartan (3 mg/kg)
- Cenicriviroc (40 mg/kg)
- Bromantane (40 mg/kg)
- Bemethyl (200 mg/kg)

STAM NASH Model

% Reduction in Fibrosis

- Cenicriviroc (40 mg/kg)
- Bromantane (40 mg/kg)
- Bemethyl (200 mg/kg)
MILESTONES & TIMELINES

2020

Q1

• Select CRO & PI For IPF/Cough Study
• Submit for Ethics in Australia for Phase 2 IPF/Cough Study
• Publish Research Papers IBD & IPF/Cough

Q2

• Ethics Approval for Phase 2 IPF/Cough Study
• First Patient Enrolled in Phase 2 IPF/Cough Study

Q4

• Possible Early Data From Cough Endpoint

2021

Q1

• Final Data From IPF/Cough Study
COMPARABLES

- BLU-5937
- Phase 2
- Market Cap >USD $450M

- Gefapixant
- Acquired Post Phase 2 USD $1.2B by Merck
**CORPORATE OVERVIEW**

**FINANCIALS**

**Trading Symbols:** (CSE:AGN) (CNSX: BTH)(FRANKFURT:AGW) (OTCQB:AGNPF)

**Shares O/S:** 71.7M  
**Warrants & Options:** 33.5M  
- 26.0M @ $.12 Expiry May 2022  
- 4.0M @ $.25 Expiry July 2020  
**Fully Diluted:** 105.2M  

**Recent Share Price:** $0.06  
**90 Day High:** $0.13  
**Market Cap:** $4.3M CDN  
**Cash:** $2.2M Nov 1, 2019  
**Ownership:** Management – 8%
EXPERIENCED MANAGEMENT TEAM

Christopher J. Moreau
CHIEF EXECUTIVE OFFICER

- President, CEO & director of a TSX:V listed company in the life sciences sector for over nine years
- Experienced with startups, licensing, acquisitions, and integration
- Over 25 years of SNR Management experience in private/publicly traded company environments

Mark Williams PhD MBA
CHIEF SCIENCE OFFICER

- Repositioned 3 drugs from preclinical studies directly to positive Phase II data
- Invented DM199 (recombinant protein) in Phase II trials for Stroke & Kidney Disease
- Secured analyst coverage and KOLS for Diamedica (DMA.V)
- Assisted in raising valuation of DMA.V > $125M on 5 FTE

MEDICAL & SCIENTIFIC ADVISORY

Dr. Arun Sanyal
Dr. Arun Sanyal, MD, is a leading global expert and clinician in the area of NASH.

Dr. Walter Reinisch
Dr. Walter Reinisch, MD, is a leading global scientific expert and clinician in the area of IBD.

Dr. Martin Kolb
Dr. Martin Kolb, MD, is a leading global scientific expert and clinician in the area of IPF.