Q&A with Nermeen Varawalla, Chief Medical Officer
June 2025

- **Could you tell us a bit about your background and what attracted you to Scancell?**

  Given my educational background, which includes an MD in clinical medicine, DPhil (Oxon) in molecular medicine and INSEAD MBA, along with extensive leadership and clinical development experience within the contract research organisation (CRO), biopharmaceutical and biotech settings, I seek to deliver impact by enabling the timely development and commercialisation of innovative medicines able to address unmet patient needs. Scancell, with its innovative vaccine portfolio, is an ideal setting for me to do so, and I was thrilled to join at such a pivotal phase in the Company's development.

- **As Chief Medical Officer, what initiatives have you put in place to help drive clinical development?**

  Since joining Scancell, I have successfully focused on strengthening Scancell's clinical operations team, processes and systems and building strong relationships with our key opinion leaders (KOLs), investigators, clinical trial sites and the NHS England's Cancer Vaccine Launch Pad (CVLP). These will be key going forward, as we seek to efficiently complete our ongoing Phase 2 vaccine clinical trials for the ImmunoBody and ModiTope platforms, with a view to determine the most appropriate design for the follow-on comparator registration Phase 3 studies, which will commence in the latter half of 2026.

- **You and your team recently gave an oral presentation at the AACR Annual Meeting 2025. Tell us about why this meeting is important and why you went?**

  AACR is the premier meeting in cancer research, bringing together leading scientists, clinicians and industry experts. For us, it was crucial to be there, as we had very compelling data to share from the ongoing SCOPE study. Additionally, our results demonstrate the value of translational medicine, as we combine immunology, efficacy and safety read-outs to further advance the development of the ImmunoBody vaccine platform. These meetings also provide the opportunity to build key relationships with investigators, key opinion leaders and potential partners, helping to shape our strategy going forward.

- **Could you provide an overview of the insights that you shared and what it means for the broader immunotherapy field?**

  What's really exciting about our data is that we're seeing compelling responses in patients with advanced melanoma, both in terms of efficacy and durability. Our dual-action approach, which activates high-avidity T-cells, is differentiated and demonstrates that the immune system can be harnessed to fight cancer more effectively and with long-term control. Cancer vaccines have long been seen as a nice-to-have, but our data suggests they could become a cornerstone of cancer treatment.

- **You recently announced a fourth cohort of the Phase 2 SCOPE study, could you tell us what the focus of this cohort is and how it differs from the other cohorts?**

  For this fourth cohort, we've partnered with the NHS CVLP, which is designed to fast-track promising treatments like our second-generation DNA cancer vaccine, iSCIB1+. Data from the first three cohorts has shown compelling efficacy in combination with checkpoint inhibitors. With the introduction of intra-dermal administration with Pharmajet's Tropis needle-free injection device and adoption of an accelerated immunisation schedule, we seek to build on our earlier successes ahead of the Phase 3 registration study, as well as expand the eligible patient population with advanced melanoma who would benefit from these therapies.

- **What are you most excited about that's upcoming for the Company?**

  I'm most excited about the potential of our "off the shelf" DNA cancer vaccine to genuinely change outcomes for cancer patients. With the SCOPE study having already shown such promising results, we're approaching some critical inflection points that will provide a solid foundation for potential licensing partnerships and regulatory submissions. Beyond all the business aspects, I'm most excited about the potential of our approach to become a first-line treatment for advanced melanoma patients and to investigate the future possibility that it could be used in earlier treatment lines for a more durable response.