



An early stage pharmaceutical company with fast development timelines focused on kidney ischemia-reperfusion injury (IRI), including acute kidney injury (AKI) and kidney transplantation (KTx)

We combine mature drugs to yield synergistic and innovative effects targeting the protective and reparative system of the organ for therapeutic benefit. Our pharmacological treatments address unmet needs in large clinical settings and orphan indications.

Kidney IR injuries put a strain on the quality and cost of healthcare

- Kidney IRI follows a stopped blood flow and ensuing oxygen and nutrients deprivation triggering cell death and tissue damage
- 1 in 5 hospitalized patients are subject to AKI. Cardiac surgery-associated AKI strikes 30% of cardiac surgery patients, with a mortality rate of 8% (60% in CSA-AKI patients requiring dialysis) with increased hospitalization costs up to \$50,000 per patient
- In kidney transplantation IRI induces post-op complications ultimately leading to graft failure and expensive retransplantation or dialysis, adding up to the unsustainable and rising \$60 billion cost of care for US and European dialysis patients

Balmes Transplantation slashes the burden of acute kidney conditions on patients and payers

- Our products combine mature drugs to bring synergistic effects protecting kidneys from IRI and several cell death pathways
- Our combinations may prevent AKI in cardiac surgery patients with a higher risk of kidney injury and save thousands of lives
- We improve kidney transplant outcomes and graft survival rates, while drastically cutting costs of renal replacement therapy

A strong pipeline in kidney ischemia-reperfusion injury

Balmes Transplantation’s technology is protected by a patent covering drugs used alone and in combination for their specific applications in the development of cytoprotective treatments. We achieved in vivo proof of concept in kidney IRI with both standalone and combination drug candidates.

Funding goals

We are seeking **3 m€ in equity** to cover R&D, CMC, Regulatory, and Medical activities and hires in the 24 months following the Seed round.

R&D shall generate clinical-ready drug candidates for clinical trials and out-licensing opportunities.

Cardiac surgery-associated acute kidney injury (CSA-AKI)

Market size (US + EU) 500,000 patients/year \$ 1 billion
 Direct competition No drug marketed 8 in development



Cardiac Surgery-Associated AKI

Preclinical		Clinical	
In vitro	In vivo	Phase I/II	Phase III

IR injuries in kidney transplantation – Delayed Graft Function (DGF)

Market size (US + EU) 45,000 patients/year \$ 100 million
 Direct competition No drug marketed 4 in development

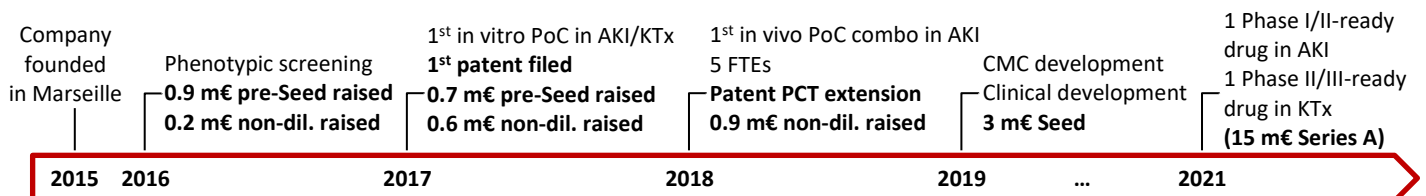
24 months after the round our pipeline will include:

- 1 Phase I/II-ready combination drug in CSA-AKI
- 1 Phase II/III-ready combination drug in KTx

DGF in Kidney Transplantation

Preclinical		Clinical	
In vitro	In vivo	Transplant	Phase II/III

We believe repurposing existing drugs may grant us waivers for part of the preclinical development and Phase I clinical trials.



Patrick Berna, PhD
 Chief Executive Officer, Founder
 20 years in R&D, preclinical, clinical and regulatory development at Jouveinal, Parke-Davis, Pfizer, Boehringer Ingelheim & Trophos.
 5 years of Board experience



Guillaume Demarne, PharmD
 Chief Business Development Officer
 10 years in international BD and consulting at Pfizer, Institut Pasteur of Shanghai, Universal Medica China, Eurobiomed, and freelance