Addressing Unmet Needs in Corneal and Anterior Segment Diseases

A differentiated therapeutic approach targeting high-value, underserved rare ocular diseases

Corporate Highlights | ESCRS Submission 2026

OKYO PHARMA

Nasdaq: OKYO

Pioneering a New Ocular Therapeutic Market with No Approved Options

Urcosimod (0.05%) (formally OK-101)	• Novel, non-opioid, preservative-free eye-drop therapy with dual pain-relieving and anti-inflammatory activity for neuropathic corneal pain (NCP) • A potentially promising candidate for the treatment of both pain and inflammation on the ocular surface
Neuropathic Corneal Pain	• Severe, debilitating condition, significantly under-researched disease with **NO FDA-approved drug** • Patients commonly experience pain, photophobia, burning and foreign body sensation
Novel MOA	• Urcosimod targets the ChemR23 receptor, a differentiated dual mechanism that modulates both neuropathic pain signaling and immune-mediated inflammation
Clinical Proof of Concept (POC)	Urcosimod (0.05%) demonstrated **clinically meaningful** pain reduction • 5.5-point improvement on a 10-point VAS (vs. ~2.75 for placebo) • 75% of patients achieved >80% pain improvement • Signaled corneal nerve restoration
Safety	• Favorable safety and tolerability profile, including no serious adverse events
Development Plan	• **Phase 2b/3** NCP trial in ~150 subjects designed to meet pivotal requirements • Topline data expected 1H2027
FDA Alignment	• Urcosimod is the **first IND granted and awarded fast track designation by FDA** to treat patients with NCP • FDA confirmed Phase 2b/3 clinical design, including primary endpoint, sample size and development approach • Authorized Compassionate Use of Urcosimod for Treatment of Neuropathic Corneal Pain • Pursuing orphan drug designation strategy
Intellectual Property	• Strong IP protection until 2039

Urcosimod: A Lipid-Conjugated Chemerin Peptide

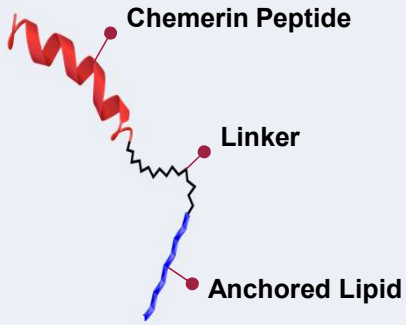
- → **First-in-Class chemerin receptor agonist** that modulates neuro-immune cross-talk
- → **Dual mechanism of action**: targets both immune cell-mediated inflammation and neuronal/glial cell populations in the dorsal root ganglion
- → **Topically active peptide** designed for enhanced potency and corneal retention
- → **Preservative-free, EDTA-free, and isotonic formulation**, optimized for sensitive eyes and chronic use

Targeting ChemR23

(CMKLR1 GPCR Receptor)

Modulates

Inflammation pain



Urcosimod

Receptor localization

Expressed on immune and neuronal cells, linking inflammation and pain signaling

Endogenous ligand

Chemerin: 136 aa peptide

Urcosimod Phase 2 DED Trial

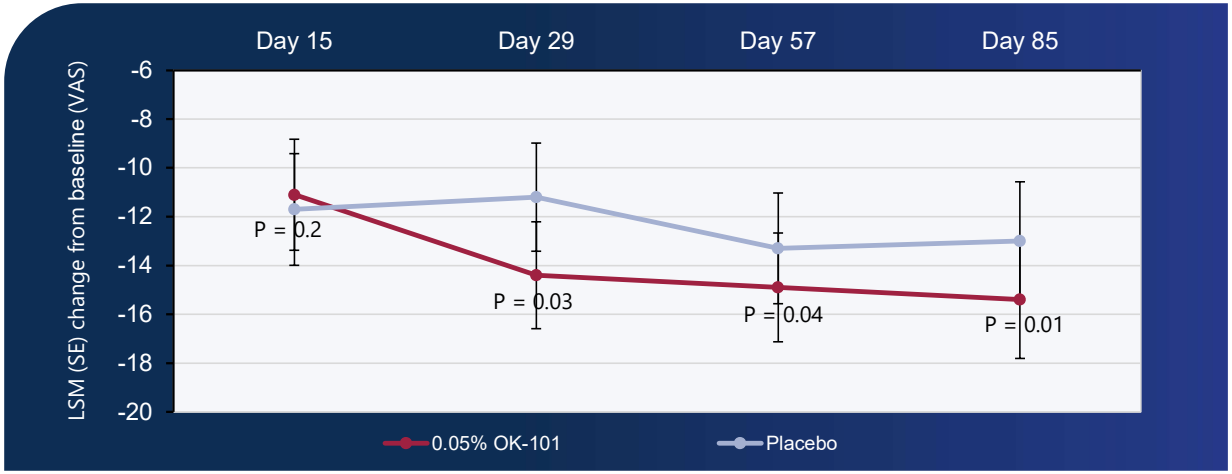
Phase 2 Randomized, Placebo-Controlled DED Trial

- **Enrollment**: 240 randomized subjects / ~80 per study arm
- **Treatment arms**: 3 (Placebo, OK-101 0.05%, OK-101 0.1%)
- **Study duration**: 85 days (~12 weeks) with 6 scheduled patient visits
- **Clinical sites**: Multicenter (U.S.)

Endpoints

- **Primary (through Day 85)**: Inferior Corneal Staining (sign); Ocular Discomfort Score (symptom)
- **Secondary**: Total Conjunctival Staining (sign), Tear Film Break-up Time (TFBUT) (sign), Blurred Vision, Pain, Burning/Stinging, Daily Symptom Diary

Urcosimod Demonstrated Significant Pain Relief in Phase 2 DED Trial



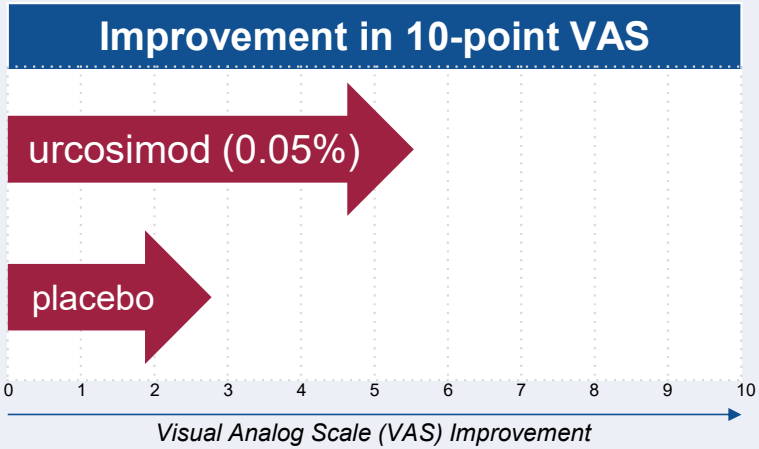
Data shown is change from baseline in Intent-To-Treat Population
P values are vs placebo based on Wilcoxon rank sum test

Phase 2a NCP Clinical Trial Demonstrated Promising Drug Effect

Phase 2a, Randomized, Double Masked, Placebo-Controlled Study Assessing Safety and Efficacy for Urcosimod in Subjects with NCP

STUDY RESULTS

- After 12 weeks of treatment, 75% of per-protocol patients receiving urcosimod (0.05%) showed greater than 80% reduction in neuropathic corneal pain, as measured by VAS, demonstrating highly effective treatment
- Urcosimod (0.05%) demonstrated a mean change from baseline in pain scores as early as Week 4, with sustained efficacy maintained throughout the trial
- Notably, all these responders entered the study with moderate to severe NCP pain scores despite prior use of maximum medical therapy



Urcosimod (0.05%) group showed a mean pain score improvement of **5.5 points** on a 10-point VAS, compared with a mean improvement of 2.75 points for placebo

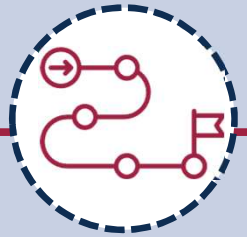
Fast-Tracking a Potential Therapy for NCP Patients with High Unmet Needs

CLINICAL EVIDENCE

- Phase 2a Proof of Concept trial to treat NCP clearly demonstrated a promising drug effect
- 5.5-point improvement on a 10-point VAS
- 75% of treated patients achieved >80% pain improvement

UNMET NEED

- No FDA-approved treatment available for neuropathic corneal pain (NCP)
- Opportunity for first in class first line therapy with positive reimbursement



NEAR TERM MILESTONES

- FDA confirmed alignment on development strategy
- Initiate Phase 2b/3 trial (2Q26)
- Phase 2b/3 trial fully enrolled (4Q26)
- Topline data (1H27)