Background

▶ **Target Expression**

a number of reactions involving one-carbon transfer exhibits an increased expression on cell surfaces in multiple solid tumors, including ovarian,

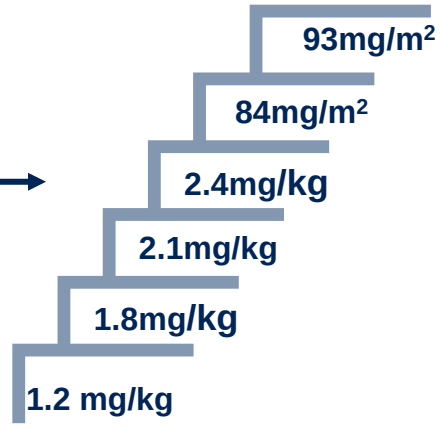
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Study design

Part 1 Dose escalation study in subject with advanced solid tumors

KEY ELIGIBILITY CRITERIA:

Advanced solid tumors refractory to standard therapy (mainly ovarian, endometrial, lung and breast cancer patients)



Study endpoints:

Primary: DLT, AEs, AEs leading to discontinuation or death

Secondary: PK, PD immunogenecity

Part 2 Dose optimal/expansion study in subject with Platinum-resistance Ovarian Cancer ovarian cancer (PROC) cohort

KEY ELIGIBILITY CRITERIA:

Platinum - resistant epithelial ovarian cancer, primary peritoneal cancer, and fallopian tube cancer with

With at least one measurable target lesion (according to RECIST v1.1).

ECOG 0 to 1.



Study endpoints:

Primary: ORR (according to RECIST v1.1)

Secondary: PFS, OS, safety profile and PK, PD

Based on E-R analysis, doses calculated using body surface area (BSA) exhibit a linear PK profile in terms of both efficacy response and safety profile. Two BSA-calculated doses were selected for the optimization study.

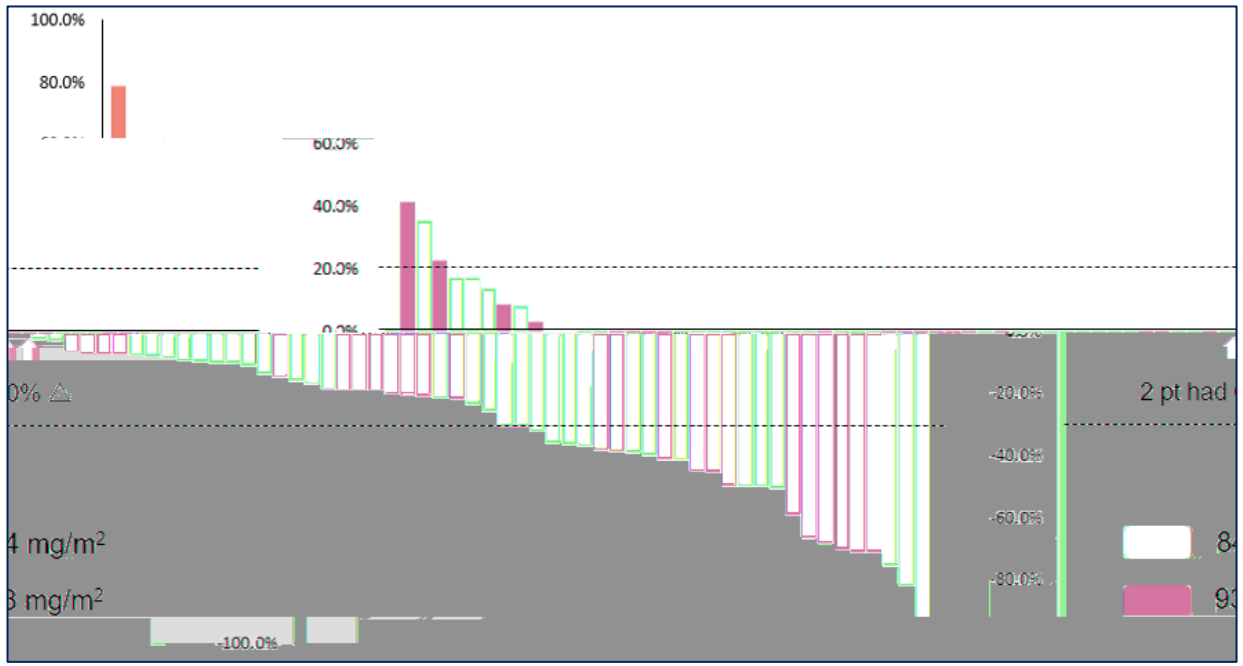
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Efficacy in PROC Cohort

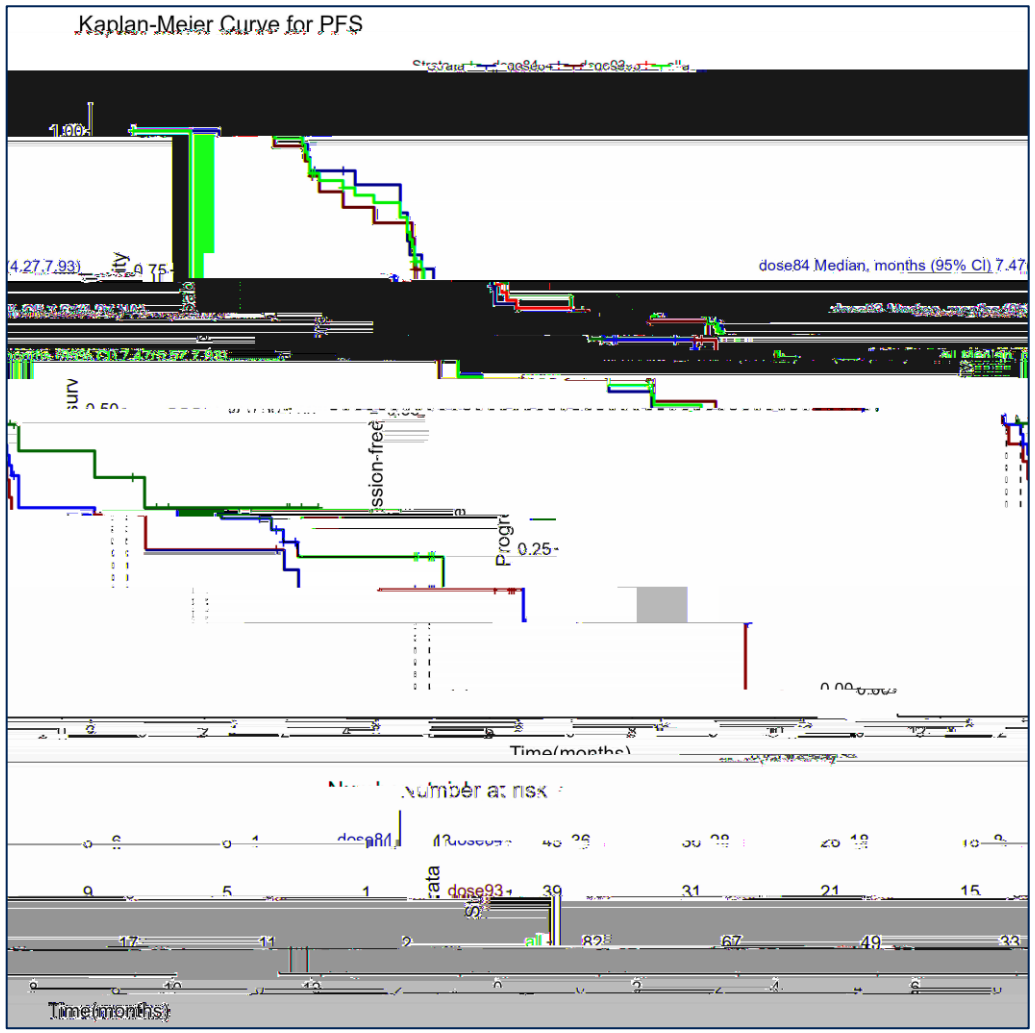
With a median follow-up of 9.5 months, the mPFS in 84 mg/m² group was **7.47 months** (4.27 to 7.93), while the mPFS in 93 mg/m² group was **7.67 months** (4.07 to NA).

The median OS have not been reached, with 6-month OS rates exceeding 75% for both groups.

Maximum Reduction of Target Lesions in PROC Cohort



K-M Curves of PFS in PROC Cohort



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Efficacy in PRROC Subjects Across All Dose Cohorts

113 subjects with platinum-resistant/platinum-refractory ovarian cancer (PRROC) had undergone at least one tumor assessment after BAT8006 treatment, and were efficacy-evaluable according to RECIST V1.1 (including subjects from all dose cohorts, regardless of expression levels).

Among them, 31.9% (36/113) had previously received 3 lines of systemic anti-tumor

ORR in PRROC Subjects Across All Dose Cohorts

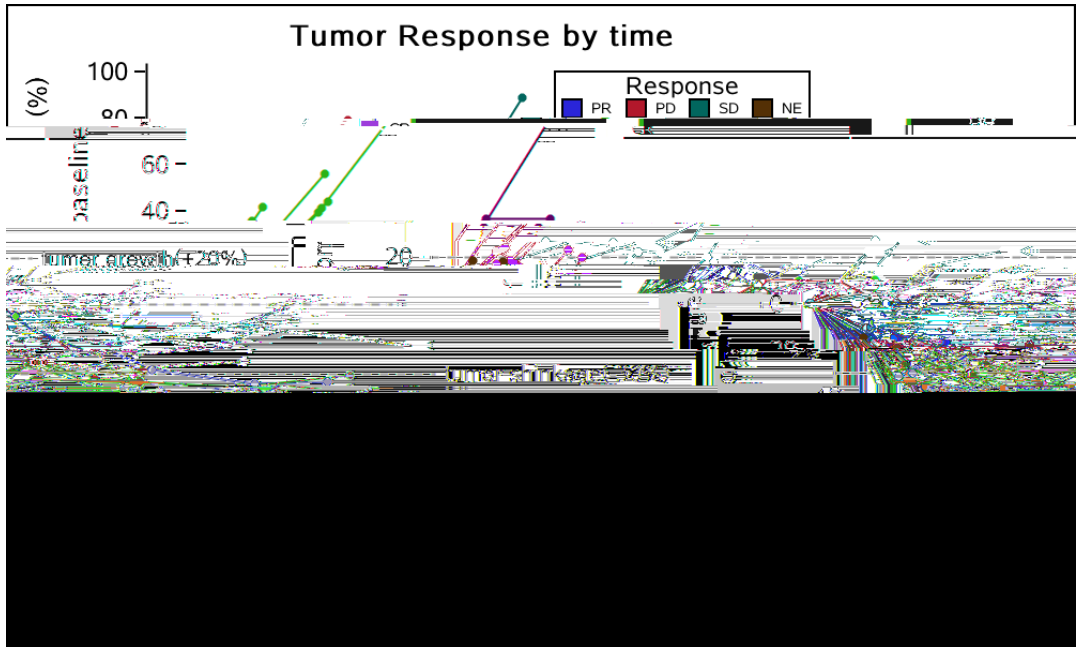
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Efficacy in PRROC Subjects Across All Dose Cohorts

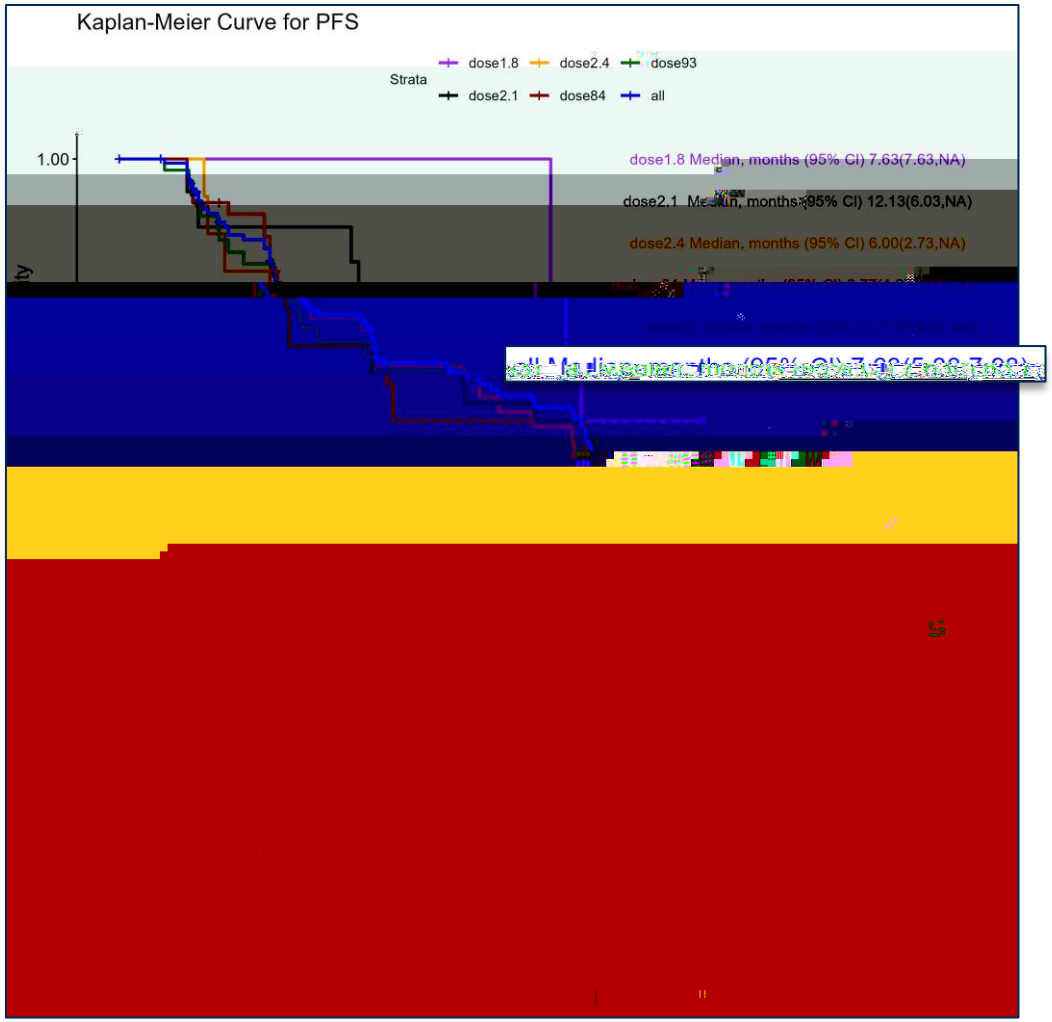
With a median follow-up of 9.5 months, regardless of prior lines of the mPFS in 84 mg/m² dose level is **6.77 months** (4.27 to 7.93), in 93 mg/m² dose level is **7.67 months** (4.07 to NA),.

The mPFS among all PRROC patients is **7.63 months** (5.83 to 7.93), regardless the dose level.

Spider Plot of Percentage Change from Baseline in Target Lesion



K-M Curves of PFS in PRROC Subjects Across All Dose Cohorts



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As of April 30, 2025, in the dose optimal/expansion study, 167 subjects with advanced solid tumors have been enrolled in 84 or 93 mg/m² cohort (80 subjects in each cohort were randomly assigned, additional 7 subjects in 84mg/m² were expanded). The median treatment cycles for these two cohorts were 6 (1~21) and 5 (1~22), respectively.

Safety Summary in Advanced Solid Tumor

	84mg/m² (n=87)	93mg/m² (n=80)
Any TE		

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Ongoing Study of BAT8006

Study No.	Study Name
BAT-8006-003-CR (Phase 3)	A Randomized, Multicenter, Open-label Phase III Clinical Study Evaluating BAT8006 in Patients with Platinum-resistant Ovarian Cancer.
BAT8006+BAT1706-001-CR (Phase 2/3)	A Phase 2/3, Randomized, Open-label, Multicenter Study to Evaluate the Efficacy and Safety of BAT8006 as Maintenance Treatment in Patients with Platinum-sensitive Recurrent Ovarian Cancer
BAT8006+BAT1308-001-CR (Phase 1b/2)	A Multicenter, Open-label Phase 1b/2 Clinical Study Evaluating the Safety, Tolerability, Pharmacokinetic Characteristics, and Preliminary Efficacy of BAT8006 in Combination with BAT1308 in Patients with Advanced Solid Tumors.

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BAT8006 + BAT1308 Ph1b/2 Study

BAT-8006+1308-001-CR is a Phase 1b/2 trial to evaluate the safety, tolerability, PK	1	8 K

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D0650.1 tolerability.

Acknowledgements

We extend our deepest gratitude to all the patients who participated in this study and their families for their invaluable contribution and unwavering support.

Our sincere thanks also go to the investigators and staff at the participating study sites for their dedication and hard-work in the successful execution of this trial.

This study was made possible by the support of Bio - thera Solution Co., Ltd.

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