

850M People live with Chronic Kidney Disease



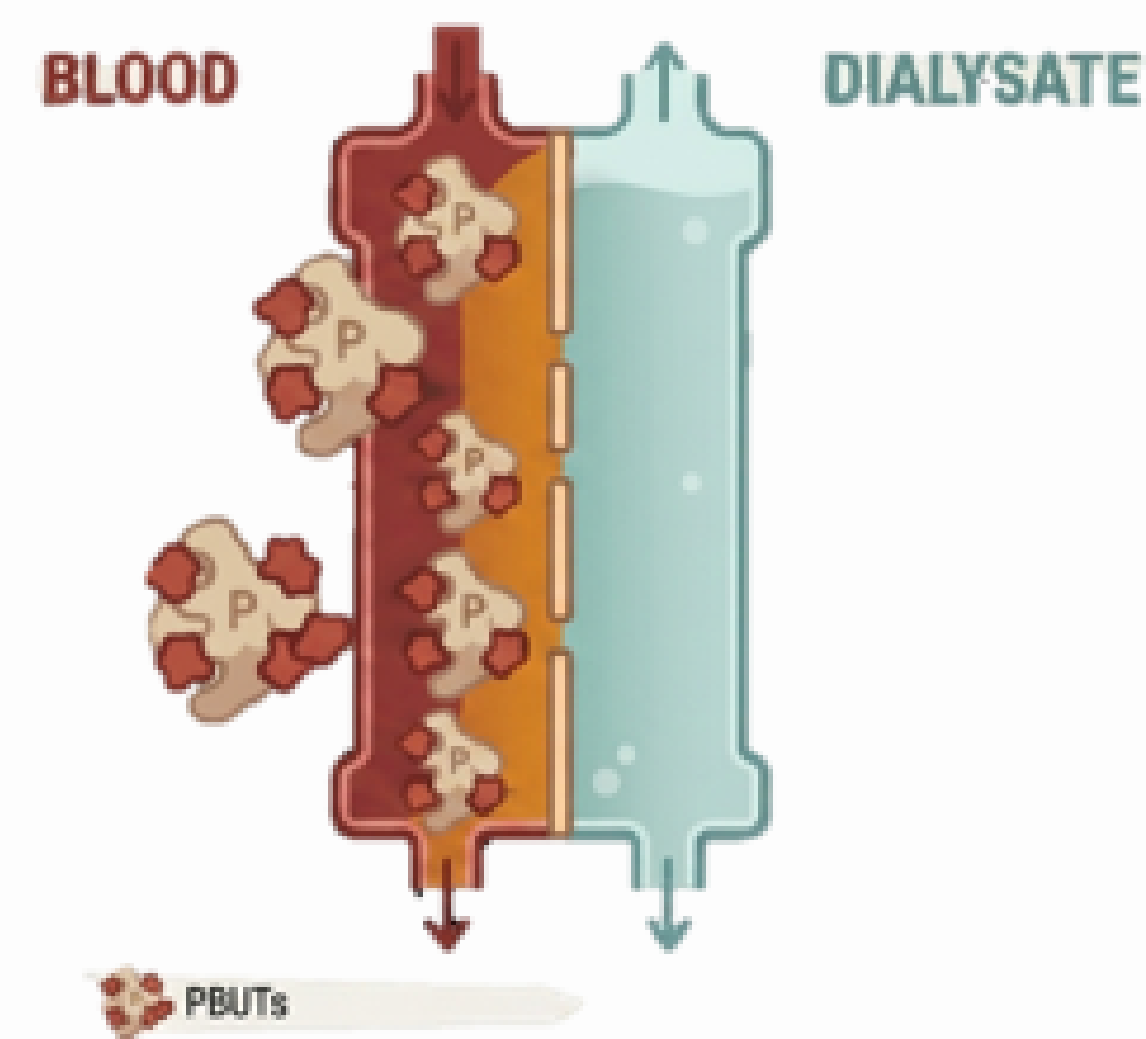
The **8th leading cause of death** in the US

There is no patient-friendly treatment in the market for CKD.



For patients with advanced kidney failure, dialysis is the standard treatment, but **it is costly, resource intensive, time consuming, and significantly reduces quality of life.**

Dialysis Limitations



Hemodialysis is ineffective in removing **Protein-bound uremic toxins (PBTUs)**.

Hemodialysis shows removal in **phosphate** in the early-dialysis, however, phosphate level in the blood rebound back in the post-dialysis.

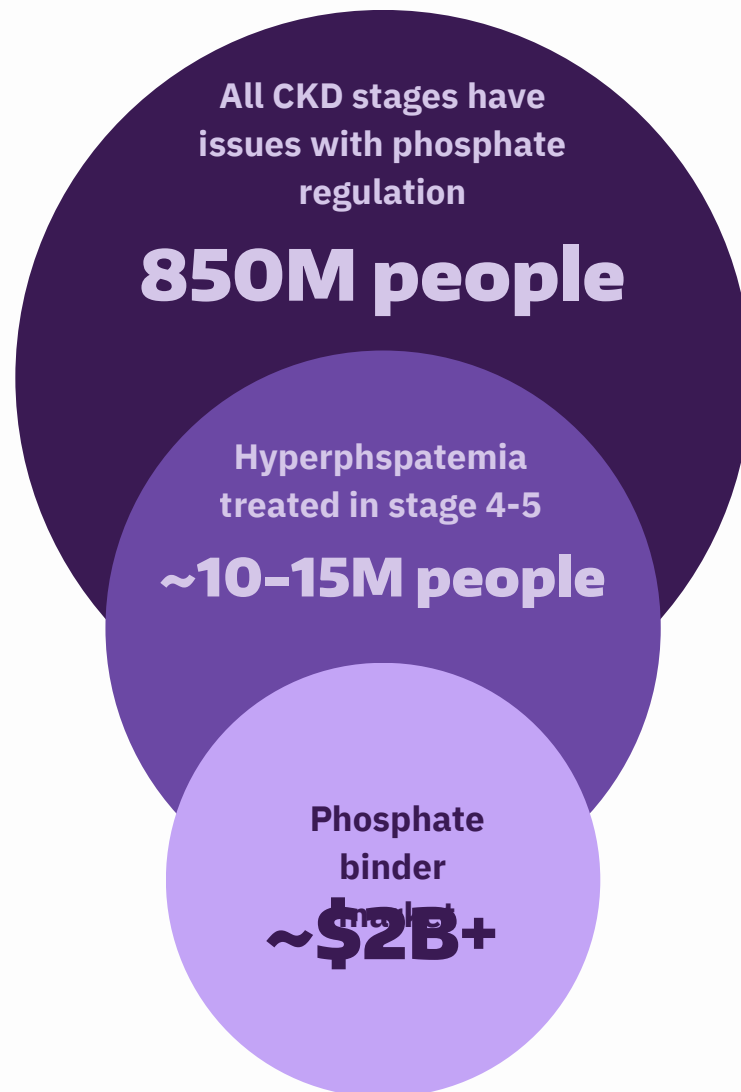
CKD Complications

Hyperphosphatemia: abnormally **high levels of phosphate** in the blood, which disrupt bone metabolism and promote vascular calcification.

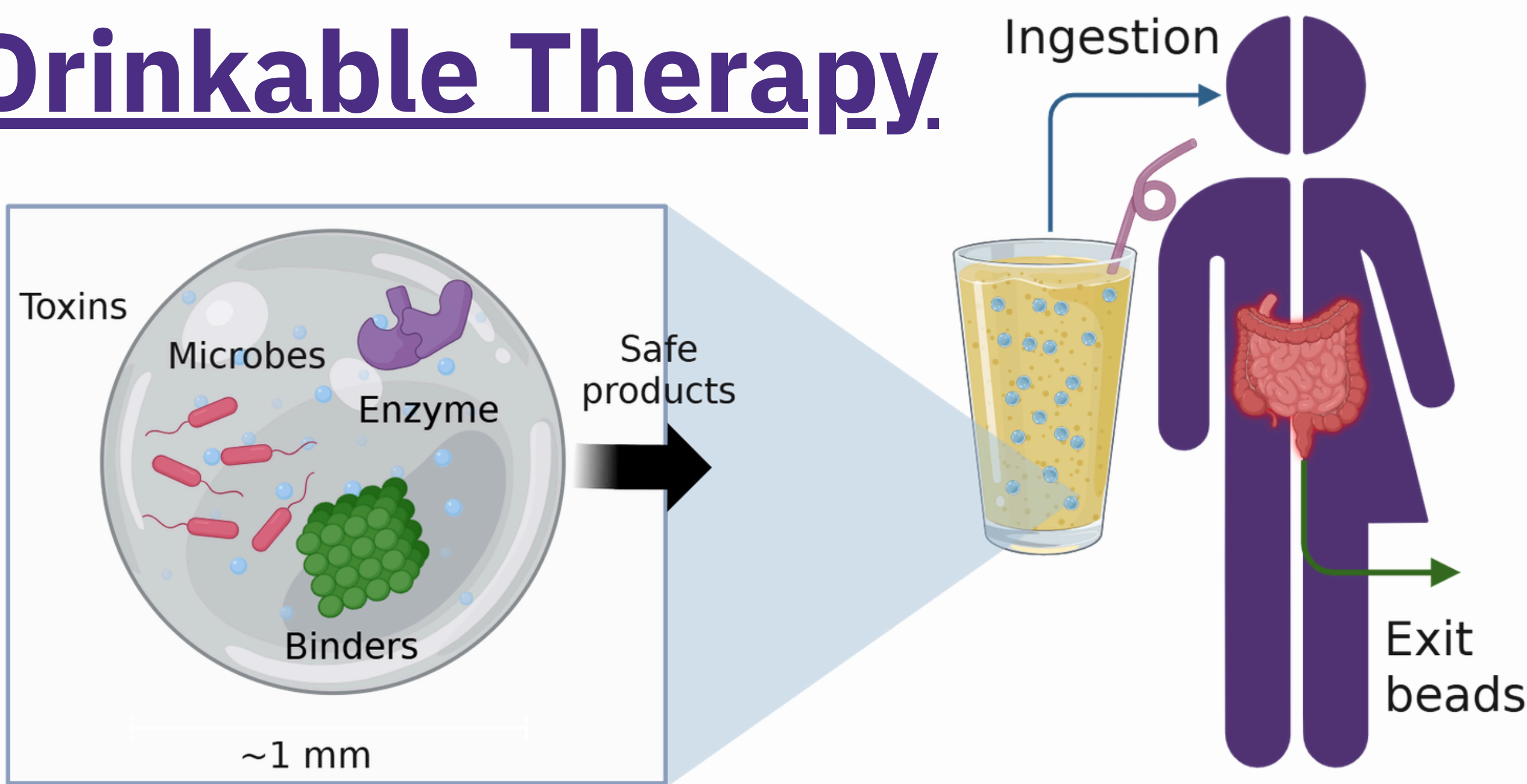
Hypertension and Systemic inflammation: buildup of **protein-bound uremic toxins (like p-cresol)** in the blood, triggering severe oxidative stress in body.

Market Potential

TheraT will initially enter the market as phosphate binder, and then expand further into therapeutic kidney care by targeting the removal of urea and PBTU to disrupt the dialysis market, representing an opportunity over **\$100B** globally.

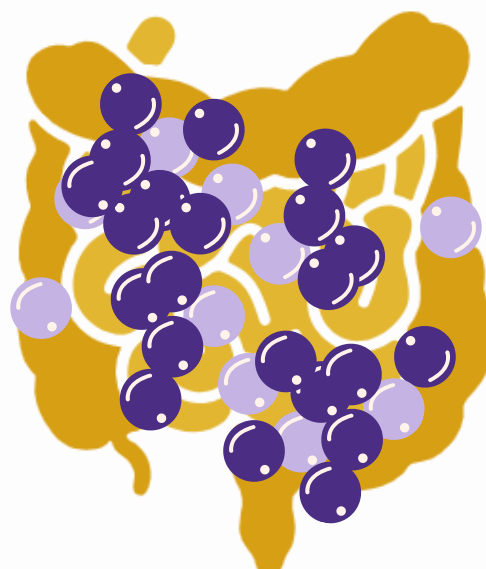


Drinkable Therapy



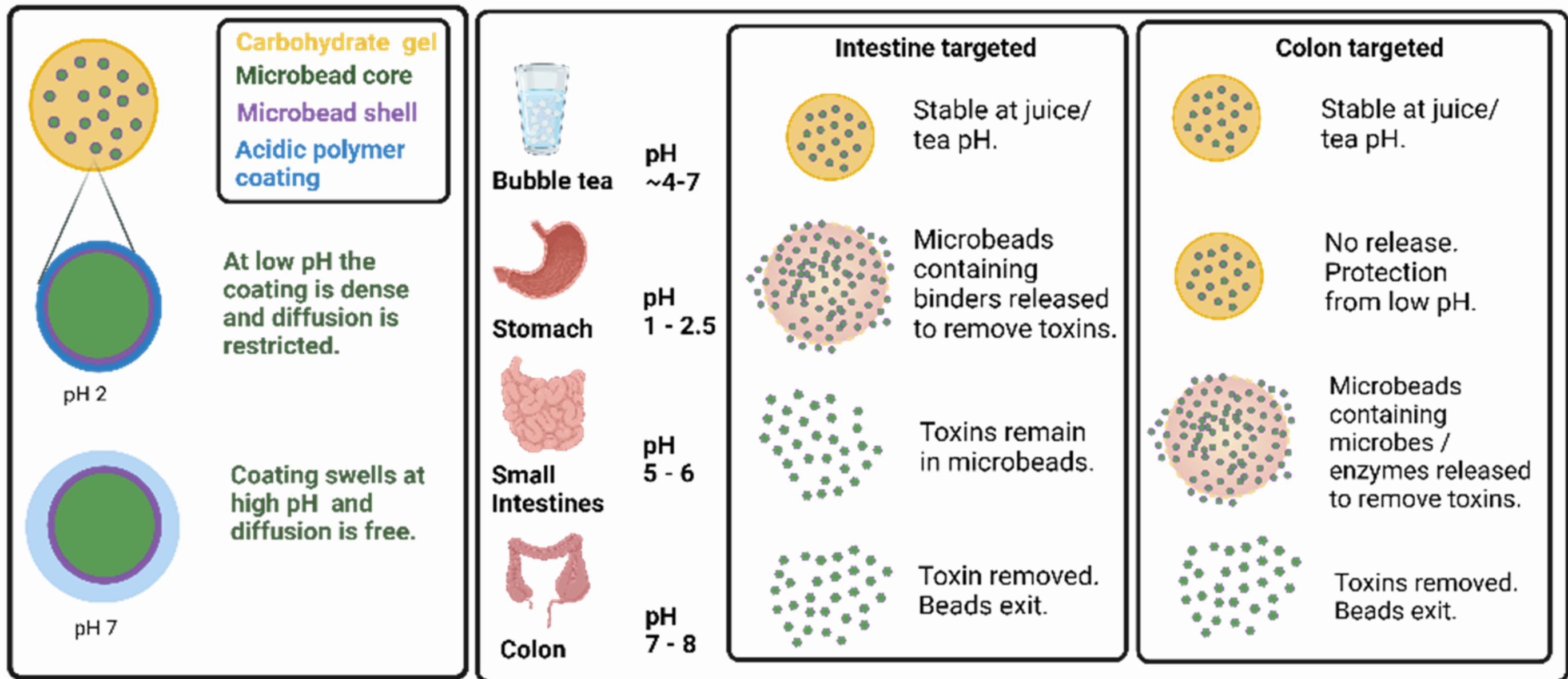
Hydrogel Beads capture uremic toxins and phosphate in the gut, preventing them from entering the bloodstream

- Administrable anywhere via an oral therapeutic
- Does not require blood access
- Non-invasive treatment
- No constipation (common symptom in currently available phosphate binders)



Scalable Delivery Technology

- pH-responsive hydrogel beads enable targeted activity in the gut
- Microbes and binders capture multiple toxins
- Beads exit body intact, supporting safety and repeat dosing



Team



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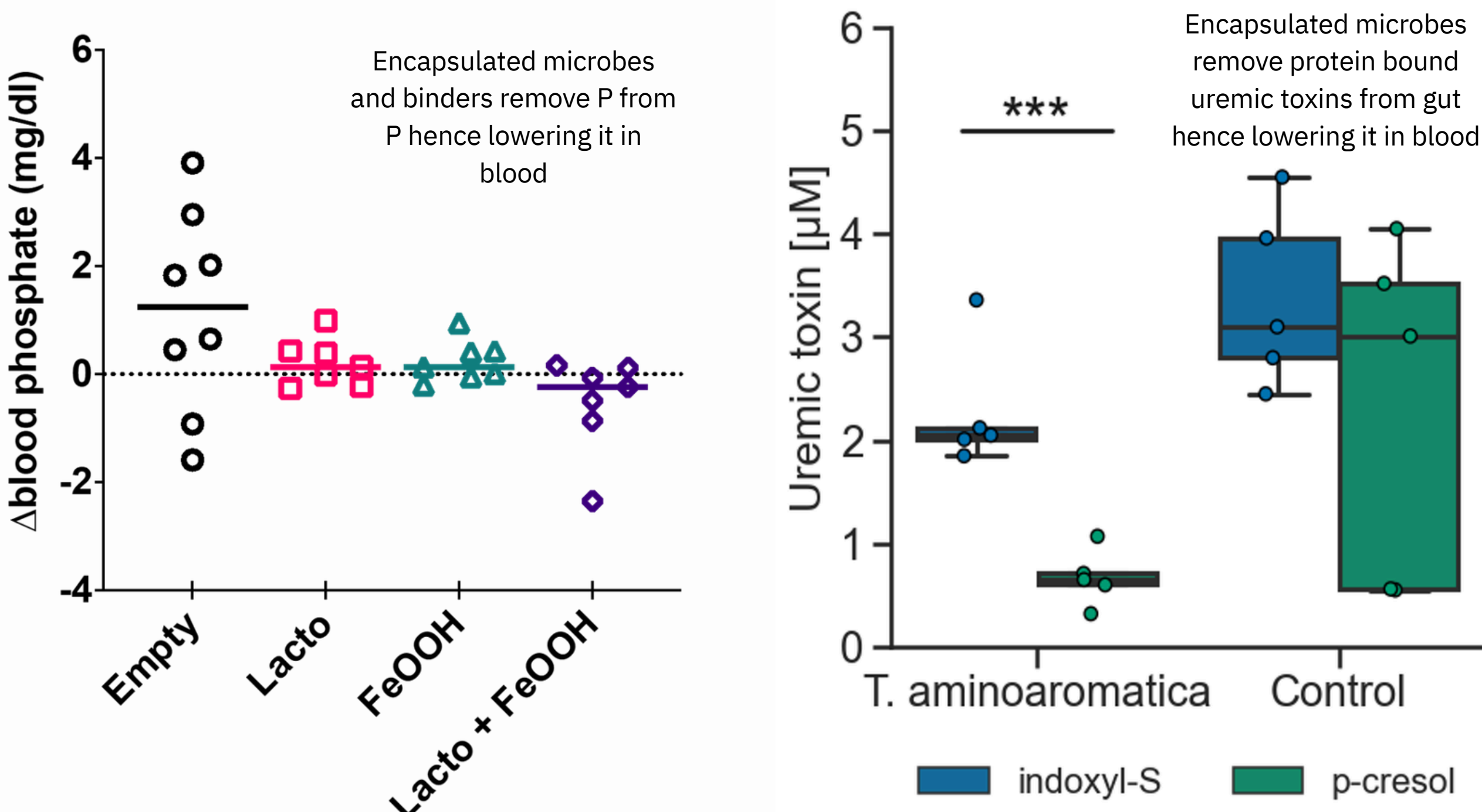
Ivan Liachko
Phase Genomics
Experienced Startup Entrepreneur



Glenda V. Roberts
Patient Advocate

Preclinical Proof of Efficacy

In validated mouse models of kidney disease, TheraT demonstrated significant reductions in serum phosphate and multiple uremic toxins, supporting its therapeutic potential.



Go To Market

- Phase 1** - Build relationships with top nephrologists, generate health-economic data, publish preclinical results in nephrology journals, engage strategic partners, and start clinical trials.
- Phase 2 (FDA Approval)** -Get payer-reimbursement and distribute through our establish relationships with strategic partners.
- Phase 3** - Pursue the other toxins reduction as a secondary label claim or new indication.

Competitive Landscape

	Accessibility	Cost	Quality of Life	Side Effects	Phosphate Removal	Urea Removal	PBTU Removal	Resource Intensive
THERA T	Effective	Effective	Effective	Effective	Effective	Effective	Effective	Effective
Dialysis	Partially Effective	Non-Effective	Non-Effective	Effective	Non-Effective	Effective	Non-Effective	Non-Effective
Transplant	Non-Effective	Non-Effective	Effective	Partially Effective	Effective	Effective	Effective	Partially Effective
AST-120	Effective	Effective	Effective	Partially Effective	Non-Effective	Partially Effective	Non-Effective	Effective
Renadyl	Effective	Effective	Effective	Effective	Non-Effective	Non-Effective	Partially Effective	Effective
Phosphate Binders	Effective	Effective	Effective	Partially Effective	Effective	Non-Effective	Non-Effective	Effective

Effective Partially Effective Non-Effective

Intellectual Property

Patents: PCT/US2024/034373, 63/572619