



Wave Life Sciences  
Jefferies Virtual  
Healthcare Conference  
June 2, 2021

# Forward-looking statements

This document contains forward-looking statements. All statements other than statements of historical facts contained in this document, including statements regarding possible or assumed future results of operations, preclinical and clinical studies, business strategies, research and development plans, collaborations and partnerships, regulatory activities and timing thereof, competitive position, potential growth opportunities, use of proceeds and the effects of competition are forward-looking statements. These statements involve known and unknown risks, uncertainties and other important factors that may cause the actual results, performance or achievements of Wave Life Sciences Ltd. (the "Company") to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements. In some cases, you can identify forward-looking statements by terms such as "may," "will," "should," "expect," "plan," "aim," "anticipate," "could," "intend," "target," "project," "contemplate," "believe," "estimate," "predict," "potential" or "continue" or the negative of these terms or other similar expressions. The forward-looking statements in this presentation are only predictions. The Company has based these forward-looking statements largely on its current expectations and projections about future events and financial trends that it believes may affect the Company's business, financial condition and results of operations. These forward-looking statements speak only as of the date of this presentation and are subject to a number of risks, uncertainties and assumptions, including those listed under Risk Factors in the Company's Form 10-K and other filings with the SEC, some of which cannot be predicted or quantified and some of which are beyond the Company's control. The events and circumstances reflected in the Company's forward-looking statements may not be achieved or occur, and actual results could differ materially from those projected in the forward-looking statements. Moreover, the Company operates in a dynamic industry and economy. New risk factors and uncertainties may emerge from time to time, and it is not possible for management to predict all risk factors and uncertainties that the Company may face. Except as required by applicable law, the Company does not plan to publicly update or revise any forward-looking statements contained herein, whether as a result of any new information, future events, changed circumstances or otherwise.

# Building a leading genetic medicines company



## INNOVATIVE PLATFORM

- Stereopure oligonucleotides
- Novel backbone modifications (PN chemistry)
- Allele-selectivity
- Multiple modalities (silencing, splicing, ADAR editing)
- Strong IP position<sup>1</sup>



## FOUNDATION OF NEUROLOGY PROGRAMS

- ALS / FTD
- Huntington's disease
- Neuromuscular diseases
- Ataxias
- Parkinson's disease
- Alzheimer's disease



## CLINICAL DEVELOPMENT EXPERTISE

- Multiple global clinical trials
- Innovative trial designs



## MANUFACTURING

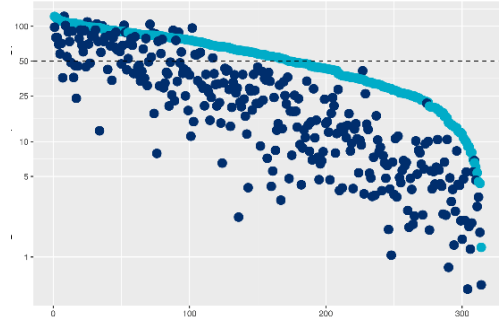
- Established internal manufacturing capabilities to produce oligonucleotides at scale

# PN chemistry increases potency in silencing, splicing and editing preclinical studies



## Silencing

Target knockdown (% remaining)

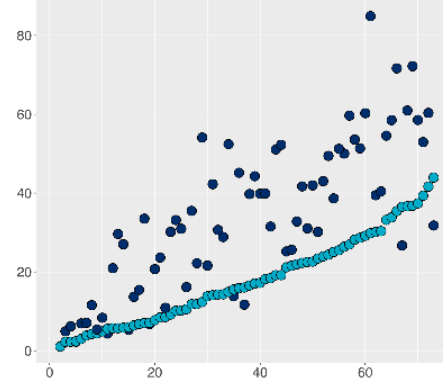


Ranked by potency of reference PS/PO compound

● PS/PO reference compound

## Splicing

% Skipping

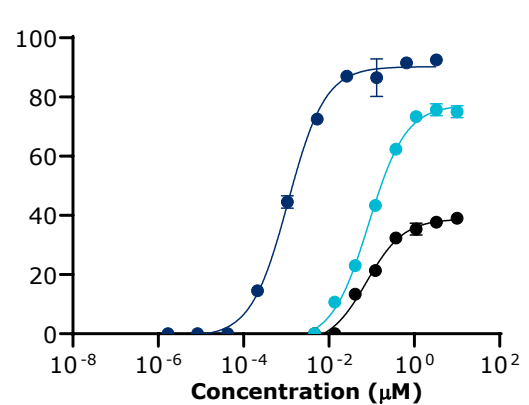


Ranked by potency of reference PS/PO compound

● PS/PN modified compound

## Editing

% Editing































● PS/PO/PN

● PS/PO (Stereopure)

● PS/PO (Stereorandom)

# Innovative pipeline led by neurology programs

<b>THERAPEUTIC AREA / TARGET</b> 	DISCOVERY	PRECLINICAL	CLINICAL	PARTNER
<b>NEUROLOGY</b>				
<b>ALS and FTD</b> C9orf72  	 <b>WVE-004 (FOCUS-C9)</b>			Takeda 50:50 option
<b>Huntington's disease</b> mHTT SNP3  	 <b>WVE-003 (SELECT-HD)</b>			
<b>SCA3</b> ATXN3  				
<b>CNS diseases</b> Multiple†  				Takeda milestones & royalties
<b>DMD</b> Exon 53  	 <b>WVE-N531</b>			100% global
<b>ADAR editing</b> Multiple  				
<b>HEPATIC</b>				
<b>AATD (ADAR editing)</b> SERPINA1  				100% global
<b>OPHTHALMOLOGY</b>				
<b>Retinal diseases</b> USH2A and RhoP23H  				100% global


 Stereopure
  PN chemistry

# C9orf72 repeat expansions: One of the most common genetic causes of ALS and FTD

Hexanucleotide (G<sub>4</sub>C<sub>2</sub>)- repeat expansions in C9orf72 gene are common autosomal dominant cause for ALS and FTD



*Different manifestations across a clinical spectrum*

## Amyotrophic Lateral Sclerosis (ALS)

- Fatal neurodegenerative disease
- Progressive degeneration of motor neurons in brain and spinal cord
- C9-specific ALS: ~2,000 patients in US

## Frontotemporal Dementia (FTD)

- Progressive neuronal degeneration in frontal/temporal cortices
- Personality and behavioral changes, gradual impairment of language skills
- C9-specific FTD: ~10,000 patients in US

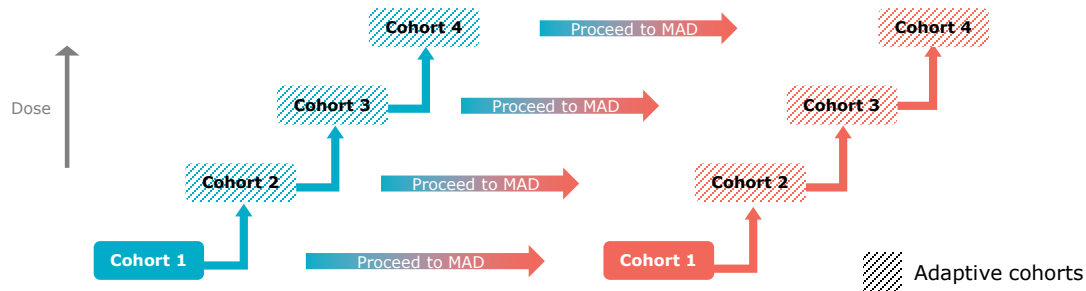
**WVE-004 is the first therapy in clinical development for both C9-ALS and C9-FTD**

# FOCUS-C9: Adaptive trial designed to enable rapid assessment of target engagement

Phase 1b/2a global, multicenter, randomized, double-blind, placebo-controlled trial

## FOCUS<sub>C9</sub>

~50 patients with C9-ALS, C9-FTD or mixed phenotype



### Single-ascending dose (SAD)

Day	1-3	15	29	57	85
Dose	▼				
Biomarker Samples	●	●	●	●	●
Clinical Evaluations	●		●	●	●

### Multi-ascending dose (MAD)

Week	1	4	8	12	16	20	24
Dose	▼	▼	▼	▼			
Biomarker Samples	●	●	●	●	●	●	●
Clinical Evaluations	●	●	●	●	●	●	●

### Primary objectives

- Safety and tolerability

### Secondary objectives

- Plasma and CSF PK profile
- PolyGP in CSF

### Exploratory objectives

Biomarkers:

- p75NTR<sup>ECD</sup> in urine
- NFL in CSF

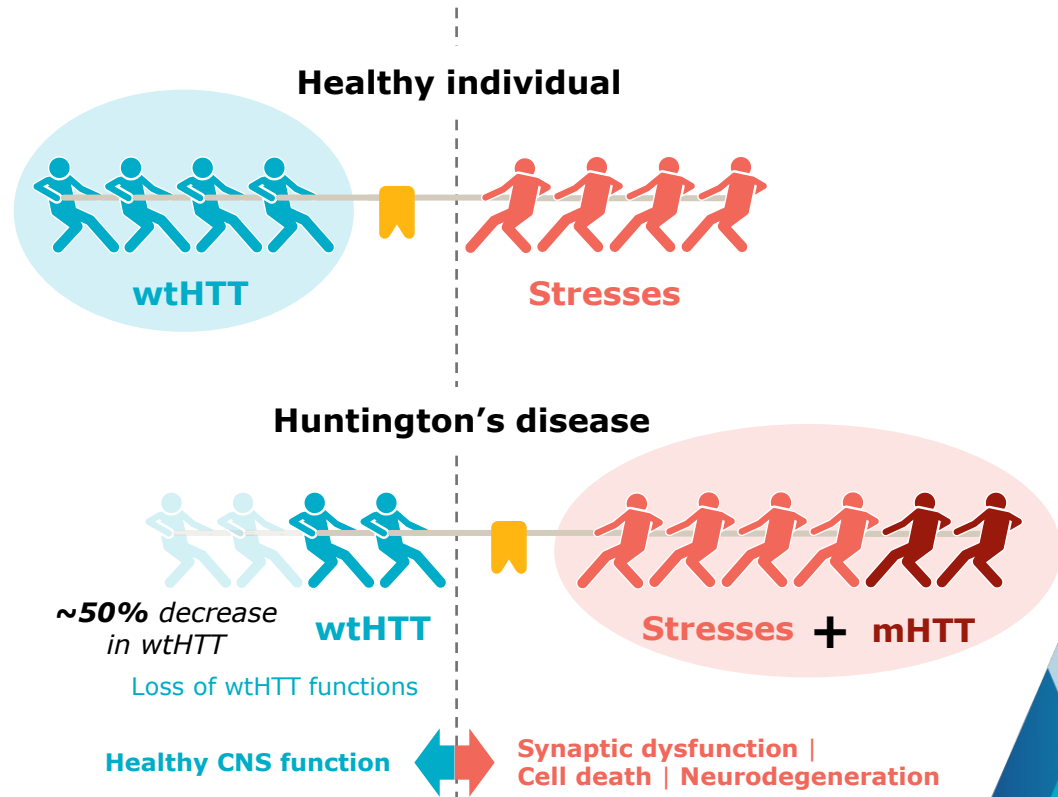
Clinical endpoints:

- ALSFRS-R
- FVC
- CDR-FTDLD
- HHD

Dose escalation and MAD dosing frequency guided by independent committee

# mHTT toxic effects lead to neurodegeneration, loss of wtHTT functions may also contribute to HD

- Monogenic autosomal dominant genetic disease; fully penetrant
- Wild-type HTT is critical for normal neuronal function
- Expanded CAG triplet repeat in HTT gene results in production of mutant huntingtin protein
- Huntington's disease affects entire brain

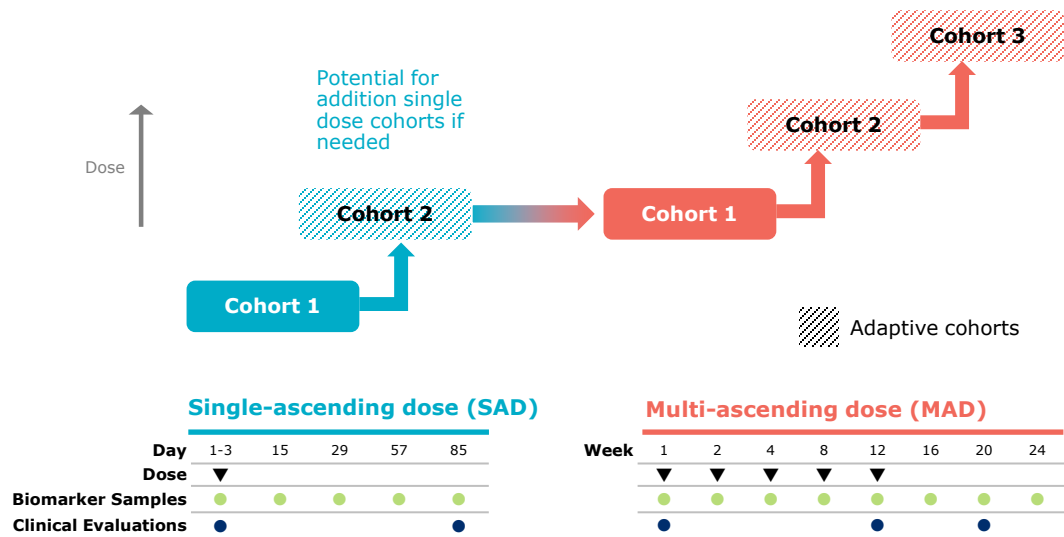




# SELECT-HD: Adaptive trial designed to enable faster optimization of dose and frequency

Phase 1b/2a global, multicenter, randomized, double-blind, placebo-controlled trial

~36 patients with early manifest HD diagnosis with SNP3 variant



## Primary objectives

- Safety and tolerability

## Secondary objectives

- Plasma PK profile
- CSF exposure

## Exploratory objectives

Biomarkers:

- mHTT
- wtHTT
- NfL

Clinical endpoints:

- UHDRS

Dose escalation and MAD dosing frequency guided by independent committee

# Clinical trial of WVE-N531 for DMD (Exon 53)

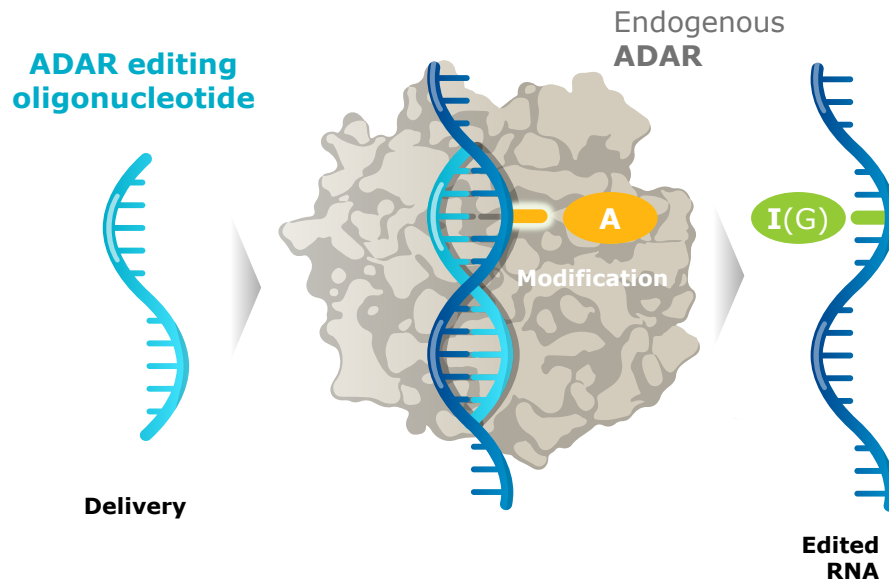
- Unmet need in DMD remains high
- CTA submitted in March 2021 to initiate clinical development
- Clinical trial powered to evaluate change in dystrophin production, and will assess drug concentration in muscle, and initial safety
  - Open-label study; targeting every-other-week administration in up to 15 boys with DMD
- Potential to apply PN chemistry to other exons if successful

**Dosing in clinical trial expected to initiate in 2021**

# Potential best-in-class ADAR RNA editing platform

## Wave advantage

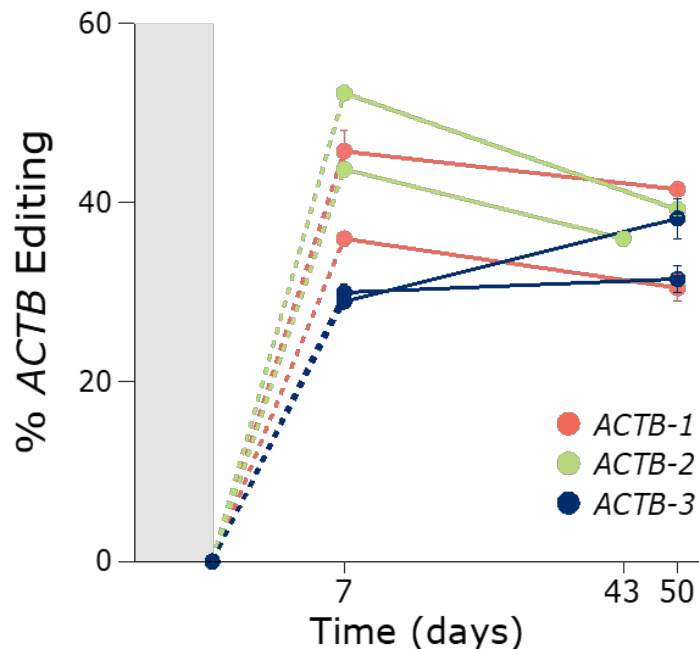
- **Oligonucleotide chemistry experience**
  - Fully chemically modified to enhance stability
  - Stereopure PN chemistry modifications
- **Simplified approach**
  - Reversible / titratable
  - No requirement for AAV / nanoparticles or exogenous ADAR delivery
- **Breadth of *in vivo* proof-of-concept data**
  - Achieved successful and durable editing of up to 50% in NHPs with GalNAC-conjugated oligonucleotides
  - Proprietary transgenic model for PK/PD assessments



# Potent and durable RNA editing *in vivo* in NHP

Substantial and durable editing out to 45 days post last dose

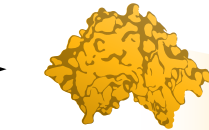
## ***In vivo* editing in NHP liver following SC administration with GalNAc conjugate**



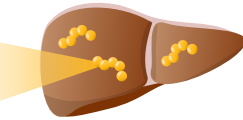
# An ADAR editing approach to correct alpha-1 antitrypsin deficiency

## Alpha-1 antitrypsin deficiency (AATD)

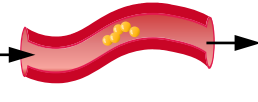
Most common cause is mutation in *SERPINA1* Z allele (PI\*ZZ)



**Z-AAT**  
misfolded protein  
prone to aggregation

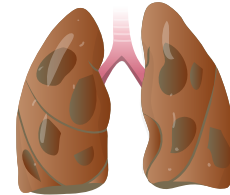


Inability to secrete  
polymerized Z-AAT  
**liver damage/cirrhosis**



Open to unchecked proteases  
**inflammation / lung damage**

⊠ No M-AAT

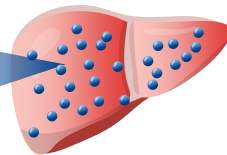


## Wave's ADAR editing approach

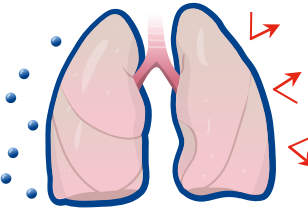
Correct Z allele  
mRNA to healthy  
M allele



**M-AAT**  
Wild-type AAT  
protein



Secretion into bloodstream



Lungs protected from  
proteases

- ✓ Restores M-AAT physiological regulation in liver
- ✓ Reducing Z-AAT protein aggregation

- ✓ Restores circulating, lung-bound M-AAT

## Risk of disease

**Null**  
(no AAT)

**Highest risk**  
(lung)

**PI\*ZZ**

**High**  
(lung + liver)

**PI\*SZ**

**PI\*MZ**

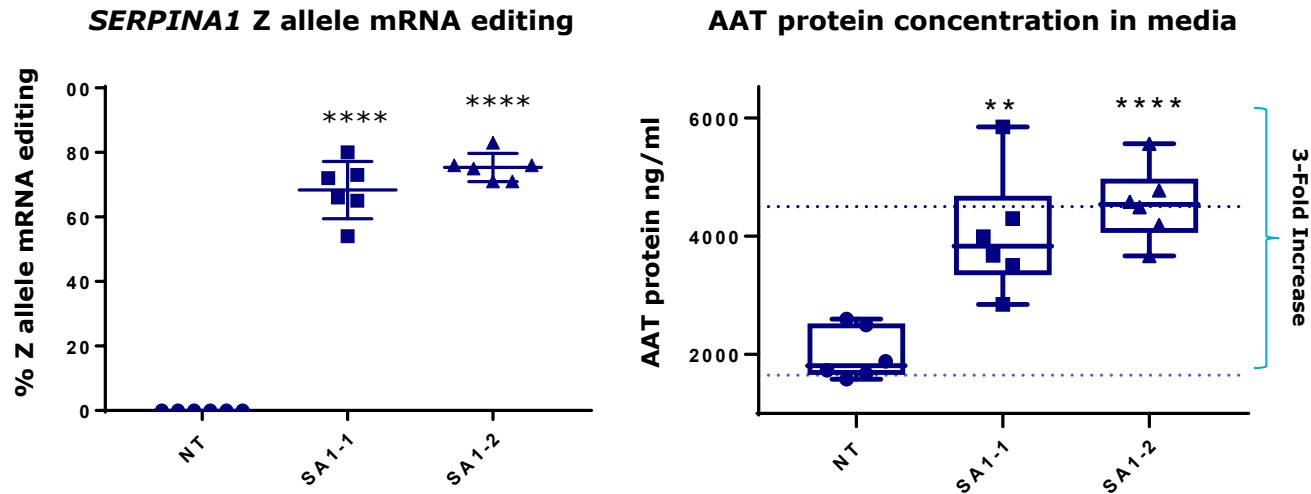
**Low**

**PI\*MM**

**Normal**

# SERPINA1 Z allele mRNA editing restores wild-type M-AAT protein concentration *in vitro*

Editing Z allele mRNA back to wild-type prevents protein misfolding and restores secretion of wild-type M-AAT protein from hepatocytes

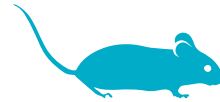


## Wild-type M-AAT protein analysis

- ✓ M-AAT protein confirmed by mass spectrometry
- ✓ Function of secreted, wild-type M-AAT protein confirmed by neutrophil elastase inhibition assay

# First proof-of-concept study to restore M-AAT protein with ADAR editing *in vivo*

- Goals of first *in vivo* proof-of-concept study:
  - Editing of SERPINA1 Z allele mRNA in liver to approach heterozygous (MZ) phenotype
  - Restore wild-type human M-AAT protein in serum
  - Demonstrate functionality of wild-type human M-AAT protein



## SERPINA1 mouse

### Genotype

✓ huSERPINA1-Pi\*Z

Human Z-AAT protein expressed in liver



## huADAR mouse

### Genotype

✓ huADAR

Human ADAR expressed in all tissues



## SERPINA1-Pi\*Z/huADAR

### Genotype

✓ huADAR

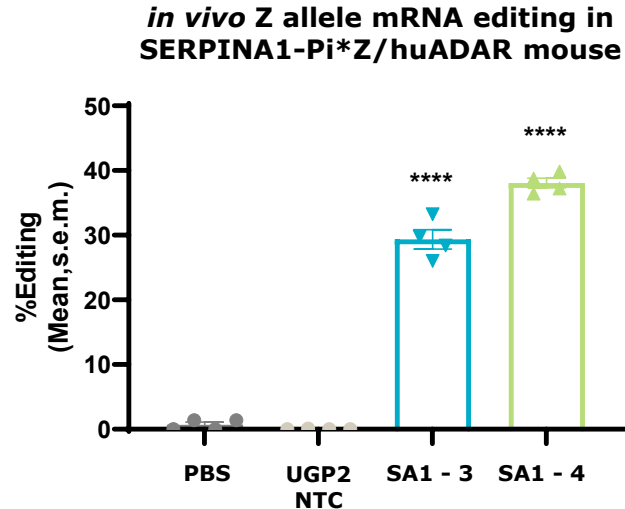
✓ huSERPINA1-Pi\*Z

### Pathology

Liver pathology, Z-AAT protein in serum and liver

# Achieving 40% editing of Z allele mRNA at single timepoint

*SERPINA1* Z allele mRNA editing levels nearing correction to heterozygote (MZ)



- GalNAc-conjugated compounds
- Up to 40% editing of Z allele mRNA in liver of transgenic human ADAR mice at day 7
- Highly specific editing (no bystander edits)



Z allele mRNA editing *in vivo*

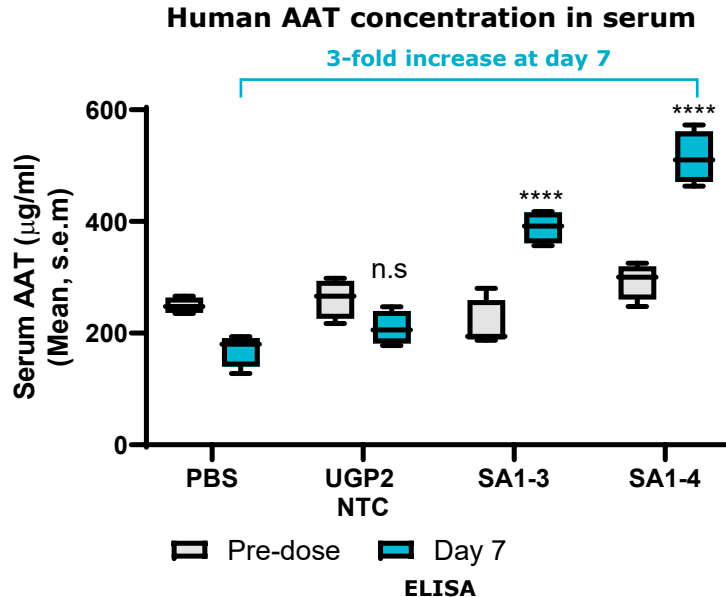
AAT protein increase

Wild-type M-AAT functional



# Achieving therapeutically meaningful increases in circulating human AAT protein

3-fold increase in circulating human AAT as compared to PBS at single timepoint



## AAT serum levels by genotype

PI\*MZ  $\sim$ 3 to 5-fold increase

PI\*SZ  $\sim$ 2-fold increase

PI\*ZZ  $\sim$ 3 – 7  $\mu\text{M}$



Z allele mRNA editing *in vivo*



AAT protein increase

Wild-type M-AAT functional

# Restoring circulating wild-type M-AAT

ADAR editing restores wild-type M-AAT, suggesting reduction of Z-AAT in liver and serum



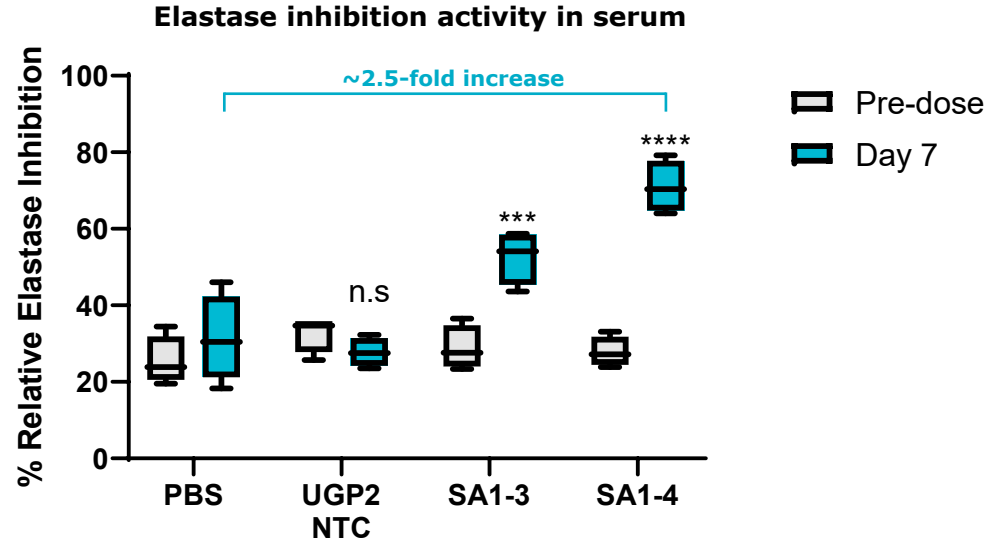
✓ Z allele mRNA editing *in vivo*

✓ AAT protein increase

✓ Wild-type M-AAT

# Secreted wild-type M-AAT protein is functional

Significant increase in neutrophil elastase inhibition with wild-type M-AAT protein



✓ Z-allele mRNA editing *in vivo*

✓ AAT protein increase

✓ Wild-type M-AAT functional

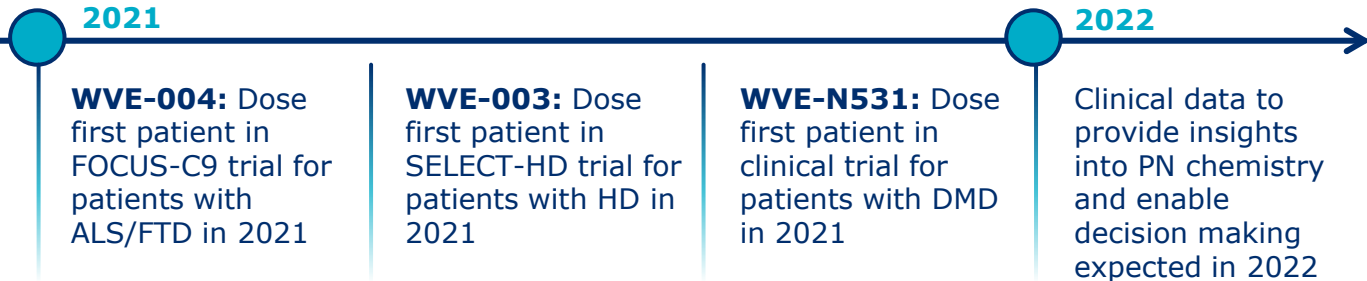
# ADAR editing successfully corrects Z allele mRNA *in vivo* to restore functional M-AAT protein

- Results support use of human transgenic mouse model to evaluate ADAR editing compounds for additional targets
- Up to 40% editing of *SERPINA1* Z allele mRNA in liver at single timepoint, nearing correction to heterozygotes (MZ)
- Initial Z allele mRNA editing resulted in therapeutically meaningful increase in circulating functional wild-type M-AAT protein *in vivo*
- Restoration of wild-type M-AAT suggests reduction of mutant Z-AAT protein in liver and serum
- Ongoing studies to assess duration of activity, dose response, PK/PD, reduction in Z-AAT protein aggregates to provide insight into wild-type M-AAT secretion levels over time and changes in liver pathology

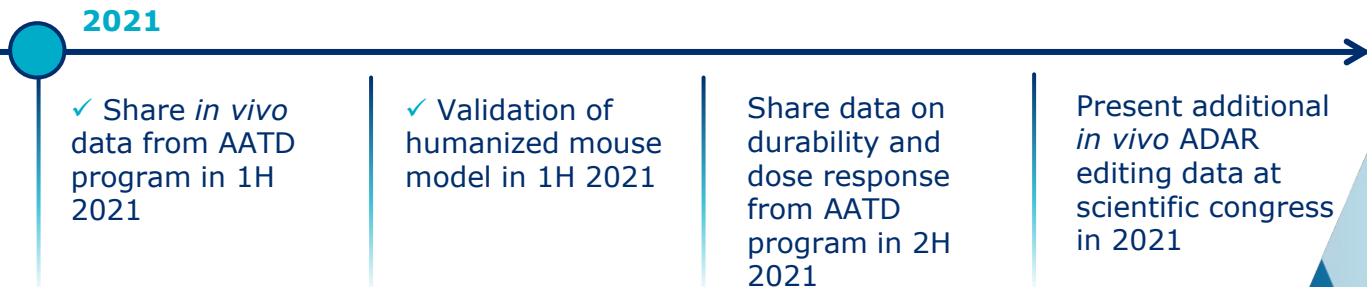
**Additional data on durability and dose response expected in 2H 2021**

# Continuous flow of data to enable program decisions through 2022

## Rapid path to clinical proof of concept



## Novel ADAR editing capability advancing





# Realizing a brighter future for people affected by genetic diseases

For more information:

Kate Rausch, Investor Relations  
krausch@wavelifesci.com  
617.949.4827

