

PRESS RELEASE

Memo Therapeutics AG Presents Further Analyses of the Phase II Trial Results of Potravitug for the Treatment of BKPyV Infection in Kidney Transplant Recipients in an Oral Presentation at the 63rd European Renal Association Congress

- *First in class therapeutic antibody, potravitug, for BK polyomavirus infection showed consistent reduction in viral load and biopsy-proven BKPyVAN in a Phase II study in kidney transplant recipients*
- *Propensity Score Matching against large real-world cohort shows statistically significant viral clearance*

Schlieren / Zurich, Switzerland, 5 June, 2026 – [Memo Therapeutics AG](#), ("MTx"), a late-stage biotech company translating unique immune responses into superior medicines to treat viral infections and cancer, today shared additional data analysis from its Phase II study of potravitug at the European Renal Association (ERA) Congress.

The oral presentation detailed findings on the highly potent human BK polyomavirus ("BKPyV")-neutralizing monoclonal antibody being investigated as a treatment for BKPyV infection in patients who have received kidney transplants. Presented by Dr. Abdolreza Haririan, Professor of Medicine, University of Maryland and trial investigator, the session included data from the SAFE KIDNEY II randomised, double-blind, placebo-controlled Phase II trial. It also included analyses from a propensity-score-matched external control arm constructed from a multicenter cohort of kidney transplant recipients for comparative analyses to contextualize the observed baseline BKPyV infection severity imbalance between groups.

All potravitug treated patients were successfully matched to controls, with absolute standard mean differences (SMDs) <0.10, indicating high-quality matching across all variables and demonstrating substantial improvement in covariate balance between the potravitug and control cohorts. Post-matching baseline characteristics were highly comparable between groups.

Potravitug-treated patients showed significantly better antiviral responses, both on kinetic of viral reduction and clearance. At week 20, the cumulative probability of achieving $\geq 1\text{-log}_{10}$ reduction was 64.1% for potravitug recipients vs 44.8% for controls (HR1.60 (1.00-2.58); $p=0.05$). On viral clearance, separation of the Kaplan–Meier curves was observed early, maintained, and with 44.9% of cumulative probability to clear the virus in the potravitug group by week 20 vs 27.3% in the controls (HR1.89 (1.07-3.33); $p=0.028$).

Abdolreza Haririan, MD, Professor of Medicine, University of Maryland, commented, "BKPyV infection remains one of the most significant infectious complications following kidney transplantation, yet there are currently no approved treatments available to these patients. These additional analyses strengthen the conclusions from the SAFE KIDNEY II trial, demonstrating a consistently favorable antiviral effect of

potravitug versus matched controls, with statistically significant improvement observed for cumulative probability of viral clearance.”

Erik van den Berg, CEO of MTx, commented, “These results further strengthen the clinical profile of potravitug and reinforce its potential to become the first targeted therapy for kidney transplant recipients with BK polyomavirus infection, an area with significant unmet medical need. We look forward to initiating our SAFE KIDNEY 3 program later this year and advancing potravitug toward patients who urgently need new treatment options.”

MTx received fast-track designation for potravitug from the FDA in May 2023 and was granted orphan drug designation in the European Union in December 2025. The Company plans to initiate a pivotal Phase III trial of potravitug in 2026.

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