



**Aspa's BBP-812 Gene Therapy
Program for Canavan Disease:
2026 Updates**

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Special Thanks to our Patient Advocacy Organization Partners

For their guidance, collaboration, and unwavering support



Special Thanks to our **Clinical Sites**



Massachusetts General Hospital
Founding Member, Mass General Brigham



Universitätsklinikum
Hamburg-Eppendorf



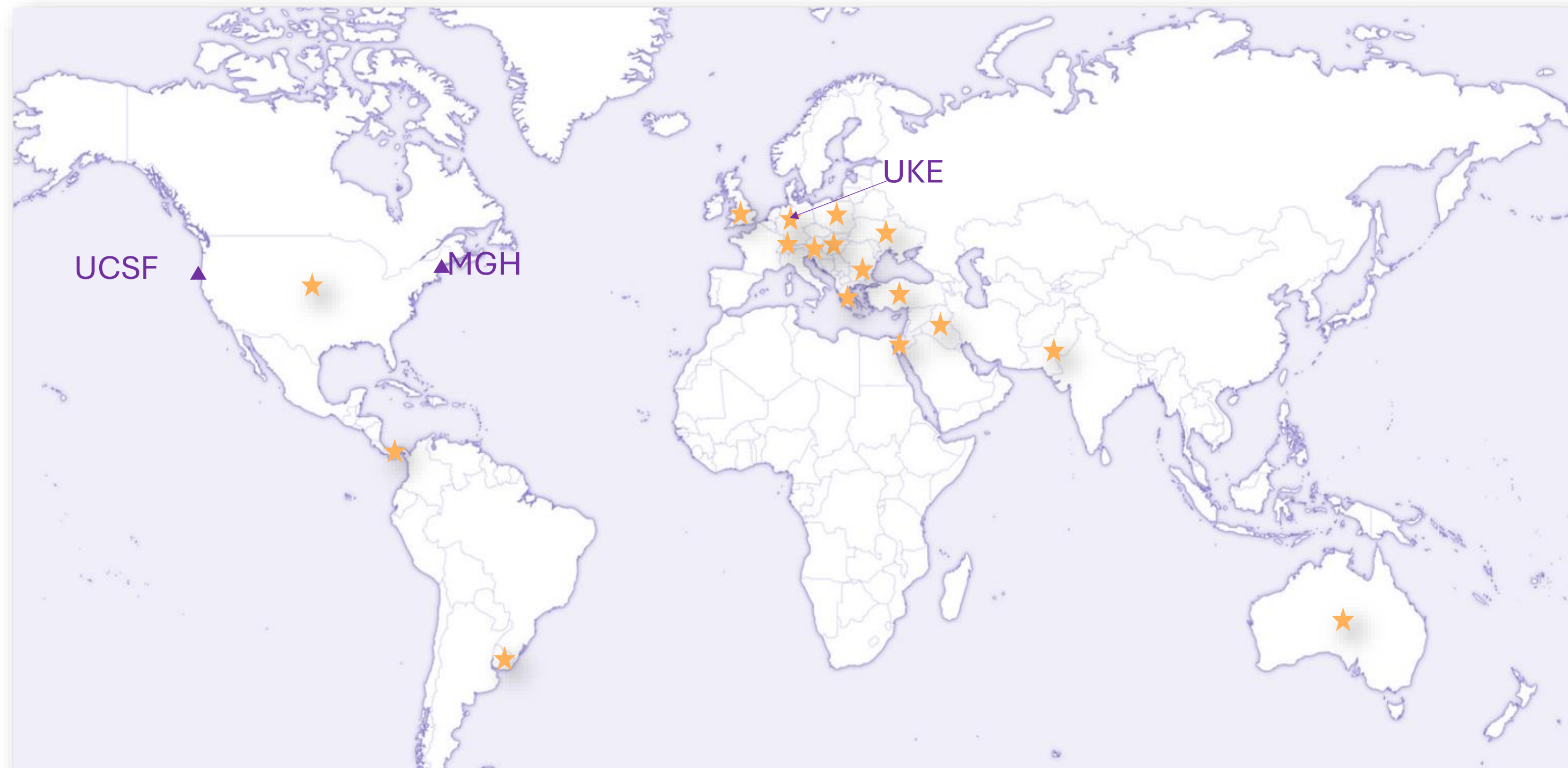
CANinform

Natural History Study

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- Enrollment completed
 - Original enrollment goal: **30** participants
 - Final enrollment: **67** participants representing **17** countries



★ Represents unique countries, not individual participants

- We are deeply **grateful** for the years of support and participation from the community and participant families
- We have gathered **robust and valuable** information about the natural history of Canavan disease which has allowed for **productive regulatory interactions** to take place for our *CANaspire* gene therapy clinical trial



Gene Therapy Clinical Trial

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The following slides discuss Aspa's investigational gene therapy BBP-812 which has not been approved by the FDA or other regulatory authorities.

Individual Experience

Study investigators review potential participants for screening on an ongoing basis



Study Overview



Dosed Participants		
<u>8</u> Participants at Low Dose	<u>10</u> Participants at High Dose	<u>18</u> Total Participants Dosed
<u>13</u> International Participants representing 8 countries.		<u>5</u> Participants from the United States



- Study participation can be burdensome, and Aspa acknowledges and appreciates the continued commitment shown by study participants and their families
- International participants do not pay for travel or accommodations while participating in the CANaspire trial and are supported by a dedicated social worker



 Represents unique countries, not individual participants

Safety (as of December 2025)

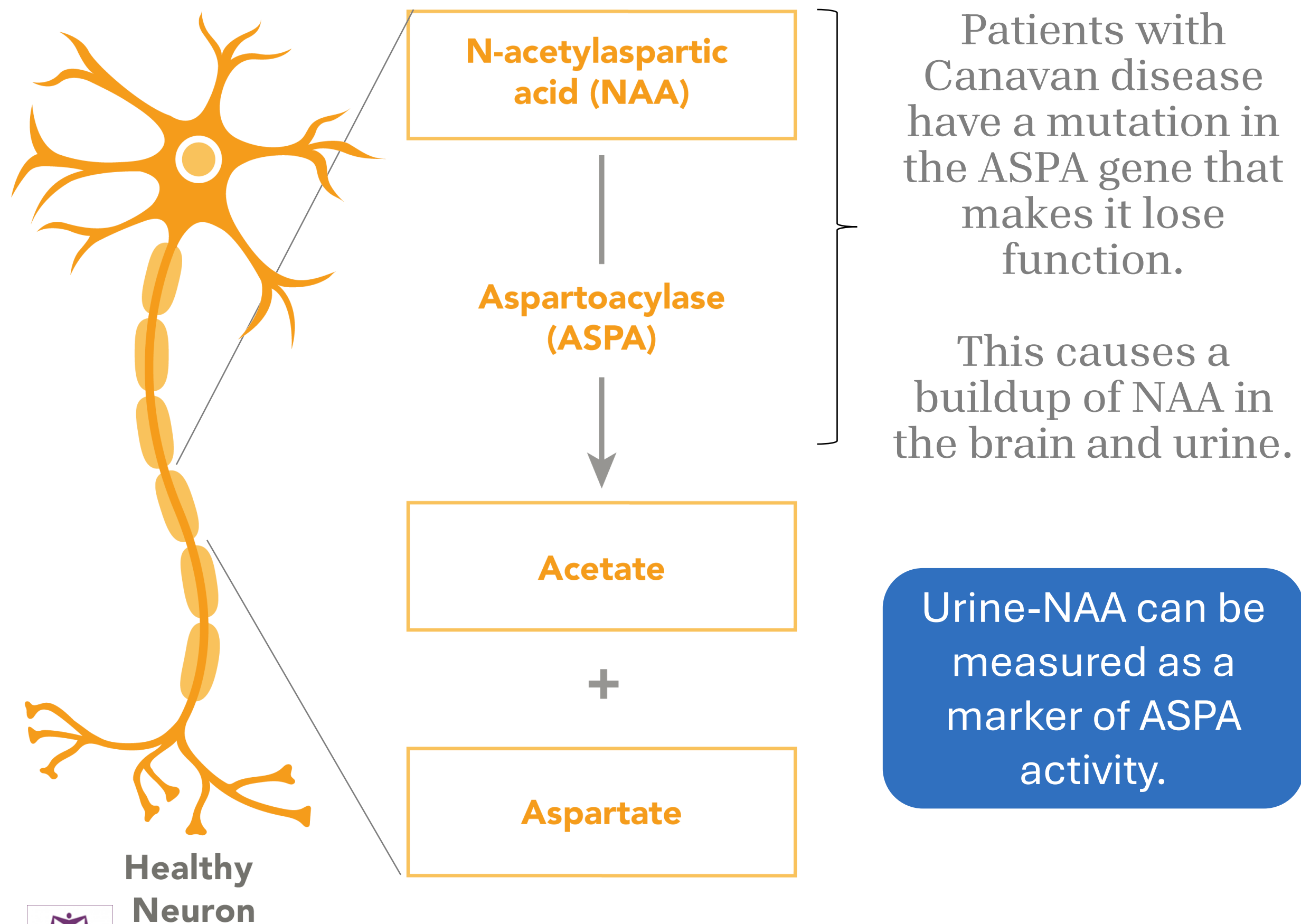
Intravenous (IV) infusions were well-tolerated, with no infusion reactions.

Most adverse events (AEs) were mild or moderate in severity and were considered unlikely or not related to BBP-812.

30 serious adverse events (SAEs) were reported in 16 participants.

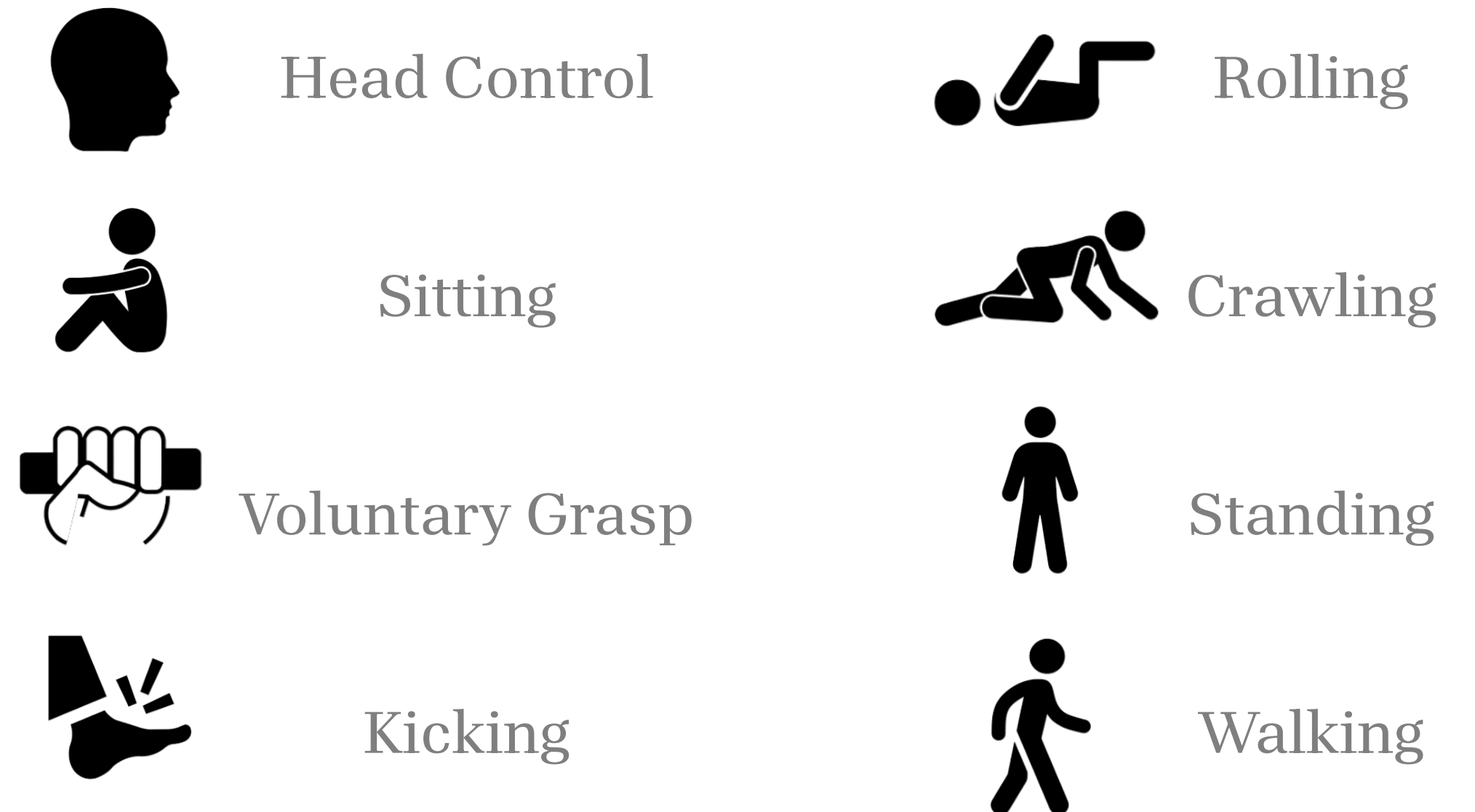
- 1 participant passed away; this was deemed unrelated to BBP-812 by investigator and sponsor.
- 1 SAE was considered possibly related to BBP-812.
- 9 SAEs were considered likely related to BBP-812, including:
 - Elevated liver function tests (LFTs)
 - Low platelets (thrombocytopenia) and thrombotic microangiopathy (TMA), involving damage to small blood vessels
 - All serious adverse events thought to be related to BBP-812 have resolved

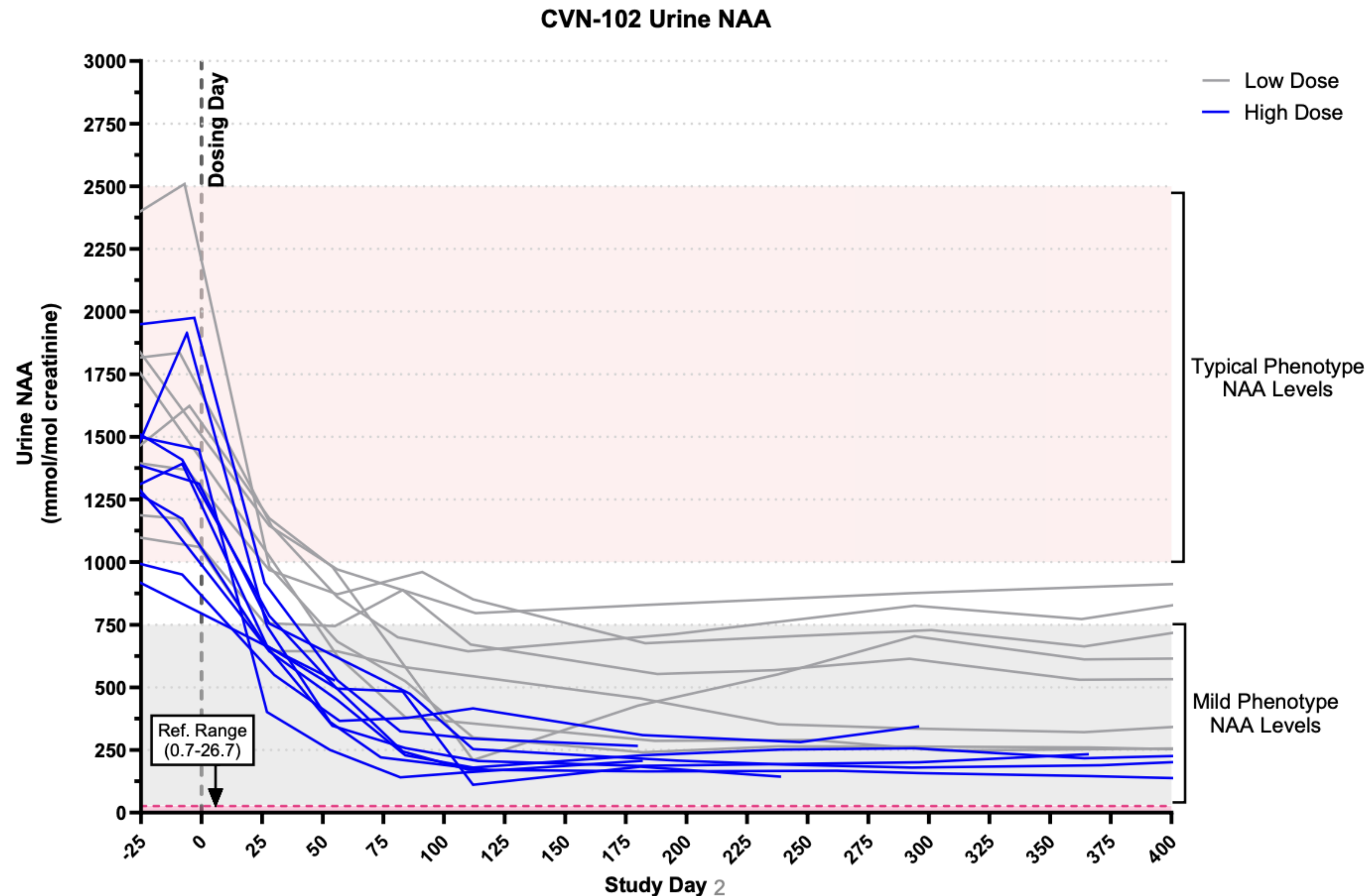
Urine-NAA



HINE-2

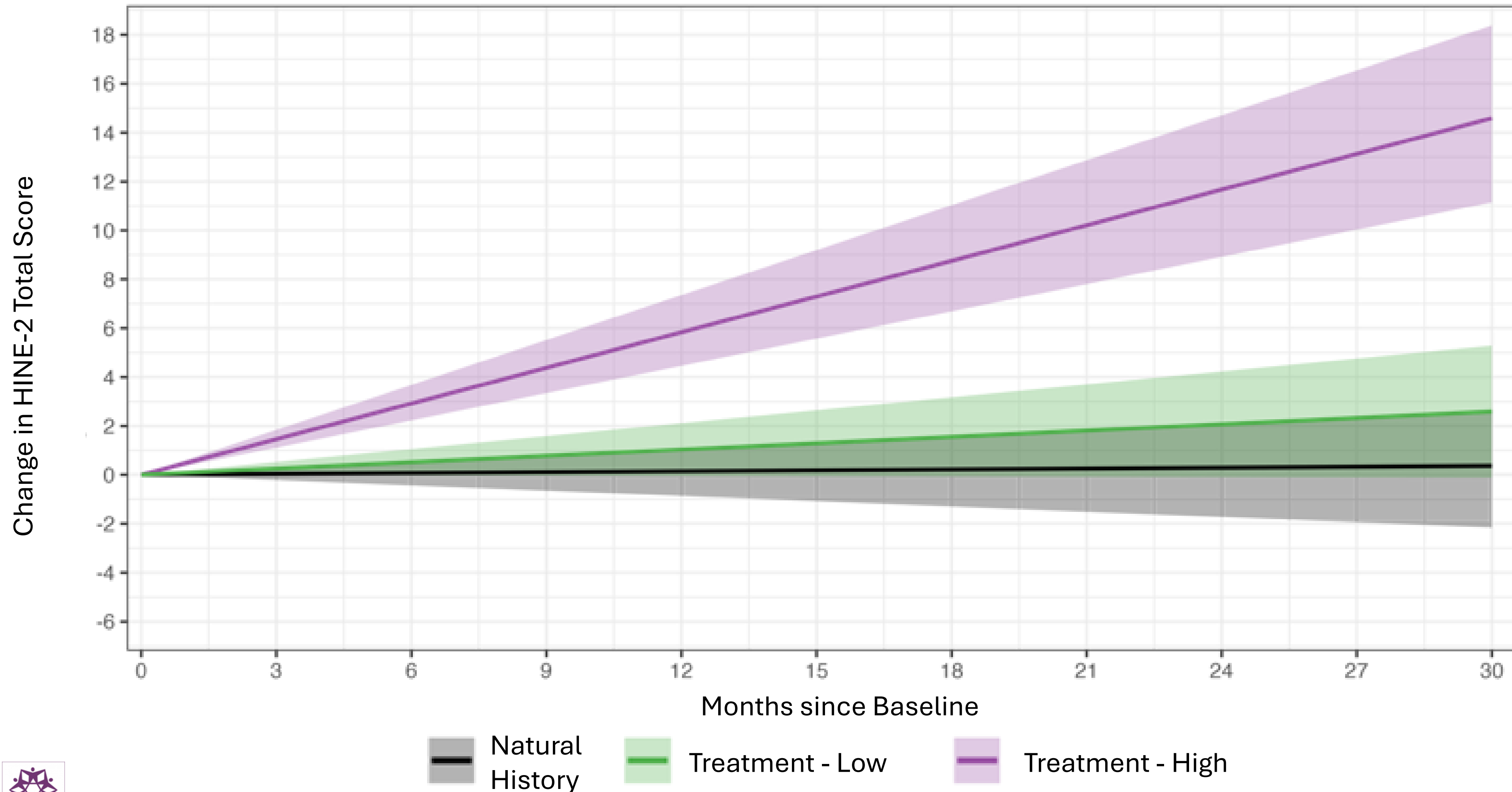
There are a variety of different methods of measuring “functional” improvements – what patients, families, and physicians can see. One common one is the Hammersmith Infant Neurological Examination part 2 (HINE-2). It’s an 8 item scale with the following components:





- After dosing, urine NAA levels decrease into the range seen in milder Canavan presentation (phenotypes)
- High-dose urine NAA levels are lower than low-dose urine NAA levels.
- Brain (MRS) NAA has been shown to have a correlation with urine NAA both pre and post- treatment

Preliminary Data Show That Children Dosed with BBP-812 Have Improved Motor Function Over Time Compared to Natural History (HINE-2)



- The HINE-2 is a motor function assessment tool used to evaluate motor skills in infants by assessing key developmental milestones
- The test evaluates eight different motor skills: voluntary grasp, head control, kicking, rolling, sitting, crawling, standing, and walking.

Baseline



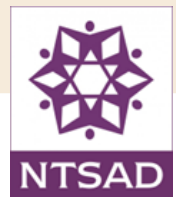
Unable to lift head in upright position



Unable to lift head or move in prone



Progress demonstrated on gross motor (head control, sitting) and fine motor (pointing) skills as well as comprehension and understanding



Video used with consent from participant family

Baseline



No head or trunk control in supported sitting

Age at dosing:
10 months

15 months after dosing



Able to sit with UE support with head and trunk control



Stands using furniture for support

18 months after dosing



More Understanding to Come

- Results from the ongoing *CANaspire* clinical study are encouraging, though they may not be typical for every participant.
- We have had positive engagement with the FDA regarding reduction in urine NAA levels as a potential signal of benefit (surrogate endpoint), use of our Natural History Study data as a comparator, and the maturing clinical data.
- Next Steps: We are continuing to regularly engage with the FDA regarding a potential path to approval for our gene therapy for Canavan.



• More information is needed to fully understand safety and efficacy.



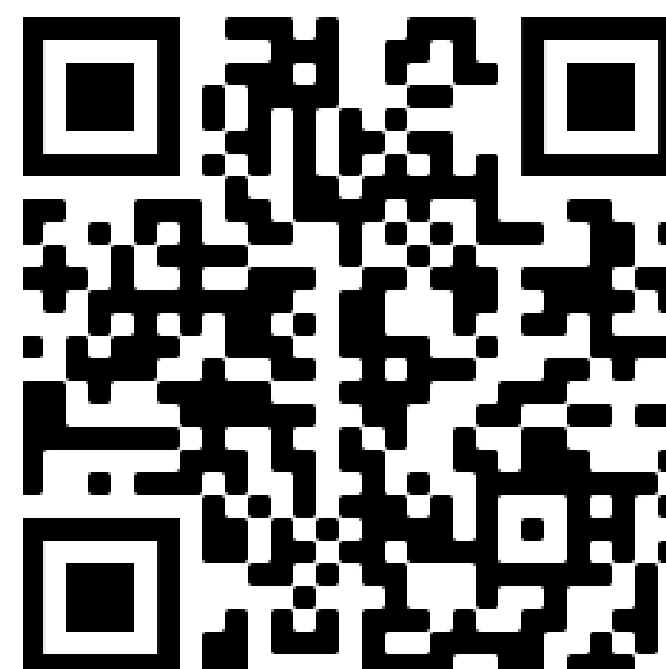
Thank you!

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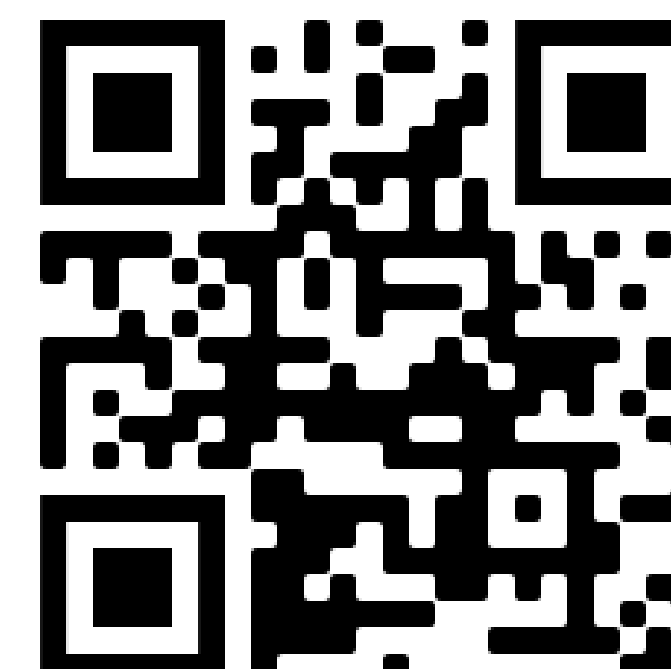




clinicaltrials.gov/study/NCT04126005



clinicaltrials.gov/study/NCT04998396



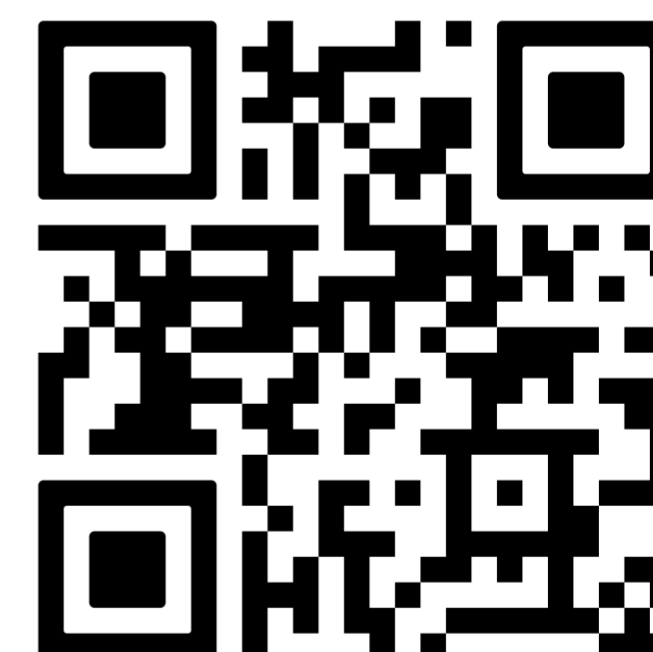
treatcanavan.com

Urine NAA Publication *Human Gene Therapy*



MAT-US--397

2025 Presentation *NTSAD Family Conference*



MAT-US--BBP812-0008 20250418



Hammersmith Infant Neurological Examination — Part 2 (HINE-2)

- The HINE-2 is a motor function assessment tool used to evaluate motor skills in infants by assessing key developmental milestones like head control, sitting, and walking.
- The test evaluates eight different motor skills: voluntary grasp, head control, kicking, rolling, sitting, crawling, standing, and walking.
- The HINE-2 is widely used in clinical trials and research studies to track changes in motor function over time.

MOTOR FUNCTION	MILESTONE PROGRESSION SCORE					
	0	1	2	3	4	Score
Sitting	Cannot sit	With support at hips  <i>normal at 4m</i>	Props  <i>normal at 6m</i>	Stable sit  <i>normal at 7-8m</i>	Pivots (rotates)  <i>normal at 9m</i>	