For Immediate Release

DIMERIX PRESENTS AT E&P HEALTHCARE CONFERENCE 2026

MELBOURNE, Australia, 16 September 2026: Dimerix Limited (ASX: DXB), a clinical-stage biopharmaceutical company developing kidney disease treatments, is pleased to advise that CEO and Managing Director, Dr Nina Webster, will be presenting at the E&P Healthcare Conference in Sydney on 16 September 2026.

Dr Webster will provide updates on:

- DMX-200 Phase 3 global trial for FSGS kidney disease
- DMX-652 Phase 2 programme for acute kidney injury
- Commercial partnerships
- Company growth strategy

A copy of the presentation is attached.

Authorised for lodgement with ASX by the Board of Dimerix.

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About Dimerix

Dimerix Limited (ASX: DXB) is a clinical-stage biopharmaceutical company focused on developing new therapies for kidney diseases with significant unmet medical need. The Company's lead program, DMX-200, is currently in Phase 3 clinical development for focal segmental glomerulosclerosis (FSGS), a serious and life-threatening rare kidney disease with limited treatment options. In addition, Dimerix is advancing a Phase 2 program in acute kidney injury (AKI), further strengthening its pipeline in high-need renal indications. With a growing network of five commercial partners supporting global development and future market access, Dimerix is committed to expanding its reach and delivering innovative treatments to as many patients as possible worldwide while creating long-term value for shareholders.

About DMX-200 in FSGS

FSGS is a rare, serious kidney disorder characterised by progressive scarring (sclerosis) in parts of the glomeruli—the kidney's filtering units. This scarring leads to proteinuria, progressive loss of kidney function, and often end-stage renal disease. FSGS is increasingly understood to have an inflammatory component, with monocyte and macrophage activation contributing to glomerular injury. In the United States, more than 40,000 people are estimated to be living with FSGS, including both adults and children.[1] There are no therapies specifically approved for FSGS in the U.S., and disease management relies on non-specific immunosuppressive and supportive therapies. In patients with progressive or treatment-resistant FSGS, the average time from diagnosis to end-stage kidney disease can be as short as five years. Even among those who undergo kidney transplantation, disease recurrence occurs in up to 60% of cases,[2] underscoring the urgent need for new, disease-modifying treatments.

DMX-200 is a chemokine receptor (CCR2) antagonist administered to patients already receiving an angiotensin II type I receptor (AT1R) blocker, the standard of care treatment for hypertension and kidney disease. DMX-200 is protected by granted patents in various territories until 2032, with patent applications submitted globally that may extend patent protection to 2042, in addition to Orphan Drug Designation granted in the United States, Europe, UK and Japan[3].

About DMX-652 in Acute Kidney Injury

Acute kidney injury (AKI) is a prevalent and severe clinical syndrome of substantial unmet need. It can arise from several high-risk clinical settings including, most notably, cardiac surgery and sepsis and is characterised by a rapid decline in kidney function (within hours), often resulting in high morbidity and mortality. The current addressable patient population is estimated to be approximately 260,000 across the major markets of United States, Germany, France, Italy, Spain and United Kingdom per annum,[4,5] making this indication a potential orphan designation. AKI represents a significant clinical burden. There are no approved therapies for AKI, which is associated with rapid kidney function decline within hours, increased risk of chronic kidney disease and long-term kidney complications.

DMX-652 is a selective inhibitor of USP30 - a mitochondrial enzyme that slows the removal of damaged mitochondria. DMX-652, which is a small molecule delivered as an oral once daily capsule, is designed to support mitochondrial quality control in injured kidney cells, a mechanism indicated in the progression of AKI caused by ischaemia (lack of blood flow resulting in oxygen starvation), toxins or sepsis related causes, as well as in other renal and non-renal indications. The DMX-652 acquisition[Error! Bookmark not defined.] includes the composition of matter patent, an open IND in the US with a Phase 2 clinical trial protocol which has received approval to proceed by the US Food and Drug Administration (FDA), as well as sufficient pharmaceutical grade (GMP) drug product for the Phase 2 trial and all manufacturing methodology. The planned Phase 2 trial is designed to investigate DMX-652's potential to prevent kidney injury and preserve renal function.

Dimerix Forward Looking Statement

This release includes forward-looking statements that are subject to risks and uncertainties. Although management believes that the expectations reflected in the forward-looking statements are reasonable at this time, Dimerix can give no assurance that these expectations will prove to be correct. Readers are cautioned not to place undue reliance on forward-looking statements. Actual results could differ materially from those anticipated. Reasons may include risks associated with drug development and manufacture, risks inherent in the regulatory processes, delays in clinical trials, results of clinical trials, contractual risks, risks associated with patent protection, future capital needs or other general risks or factors, including but not limited to those factors outlined in the most recent Dimerix Limited Annual Report.

References

1 *Nephcure FSGS Facts (https://nephcure.org/)*

2 *Front. Immunol., (July 2019) | https://doi.org/10.3389/fimmu.2019.01669*

3 *ASX releases: 14 December 2015, 21 November 2018, 07 June 2021, 30 September 2025*

4 *Demirjian S, Bashour CA, Shaw A, et al. Predictive Accuracy of a Perioperative Laboratory Test–Based Prediction Model for Moderate to Severe Acute Kidney Injury After Cardiac Surgery. JAMA 2022;327:956–64. https://doi.org/10.1001/jama.2022.1751.*

5 *Hobson C, Ruchi R, Bihorac A. Perioperative Acute Kidney Injury. Crit Care Clin 2017;33:379–96. https://doi.org/10.1016/j.ccc.2016.12.008*

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E&P Healthcare Conference

16 September 2026

Developing new therapies to treat kidney diseases with unmet clinical needs

Authorised for lodgement by the Board of the Company

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DMX-200 in:

Focal Segmental Glomerulosclerosis (FSGS)

DMX-200: Phase 3 Global Opportunity

5 commercial partners
DMX-200 licensed USA, EU, Canada, Australia, NZ, Japan, China, S.Korea, SEA and GCC[1]

up to $1.9 billion in total development and sales milestone payments **plus** royalties on net sales[1]

Phase 3 trial **recruitment complete** in trial of DMX-200 in focal segmental glomerulosclerosis (FSGS)[2]

FSGS indication is a **rare disease** that causes scarring of the kidney, leading to irreversible damage[3]

Reduced risk
- Proteinuria endpoint **passed blinded interim** (futility) assessment[1]
- Blinded review confirmed ACTION3 **statistically powered (>90%)** to demonstrate statistical significance of predicted proteinuria treatment effect of DMX-200[4]

Orphan drug designations regulatory, marketing exclusivity and pricing **benefits** in key territories[5]

~$1.9 billion*

5 commercial licensing partners

*total upfront and potential milestone payments + royalties on net sales

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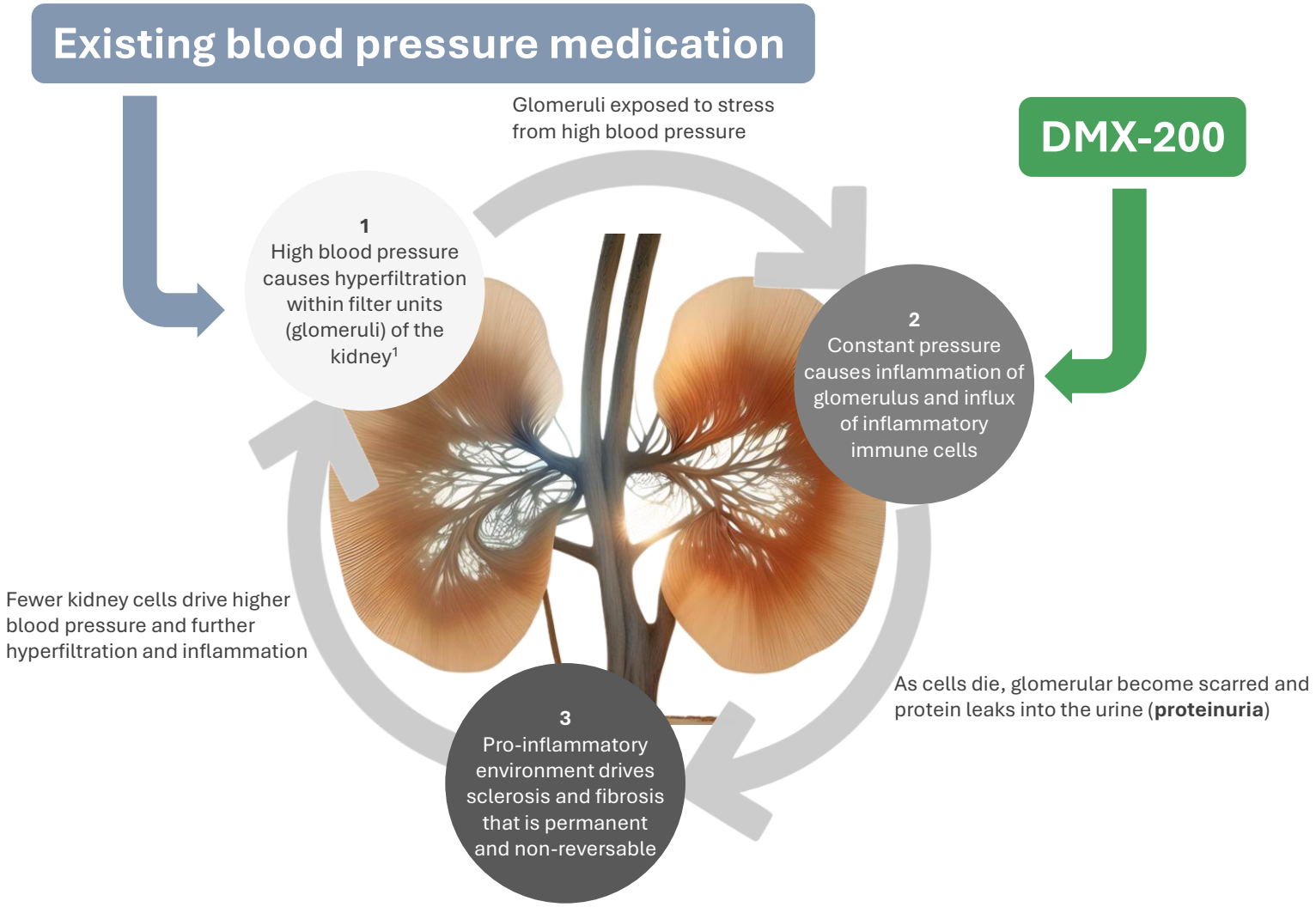
1. Based on ASX releases 05 October 2023, 27 May 2024, 07 January 2025, 01 May 2025 and 16 June 2026; SEA = Southeast Asia, GCC = Gulf Cooperation Council; 2. AS release 10 March 2026; 3. ASX release 28 April 2026; 3. Guruswamy Sangameswaran KD, Baradhi KM. Focal Segmental Glomerulosclerosis (July 2021), online: https://www.ncbi.nlm.nih.gov/books/NBK532272/; 4. ASX release 11 March 2024 and 28 April 2026; 5. ASX releases: 14 December 2015, 21 November 2018, 07 June 2021 and 30 September 2025

Cycle of damage in glomerular diseases

What is FSGS?	
Focal	**= some**
Segmental	**= sections**
Glomerulo	**= of the kidney filtering units**
Sclerosis	**= are scarred**



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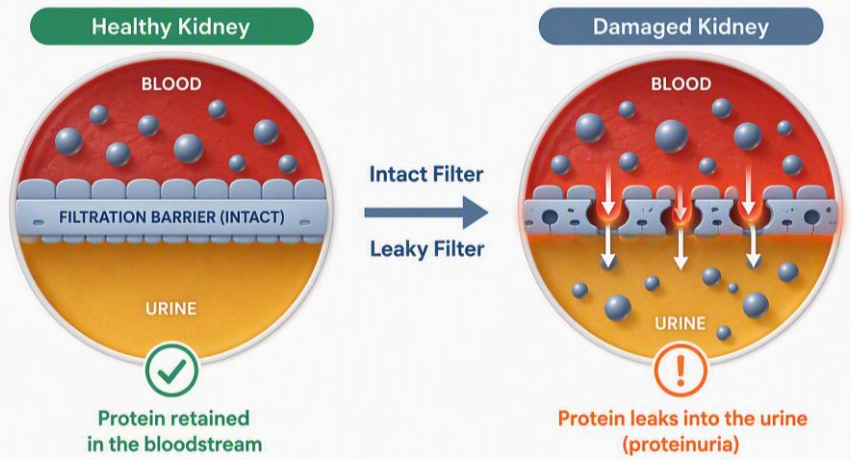
1. Lewis, E. J. et al. (2001), New Engl J Medicine 345, 851–860

Measuring kidney damage – surrogate endpoints

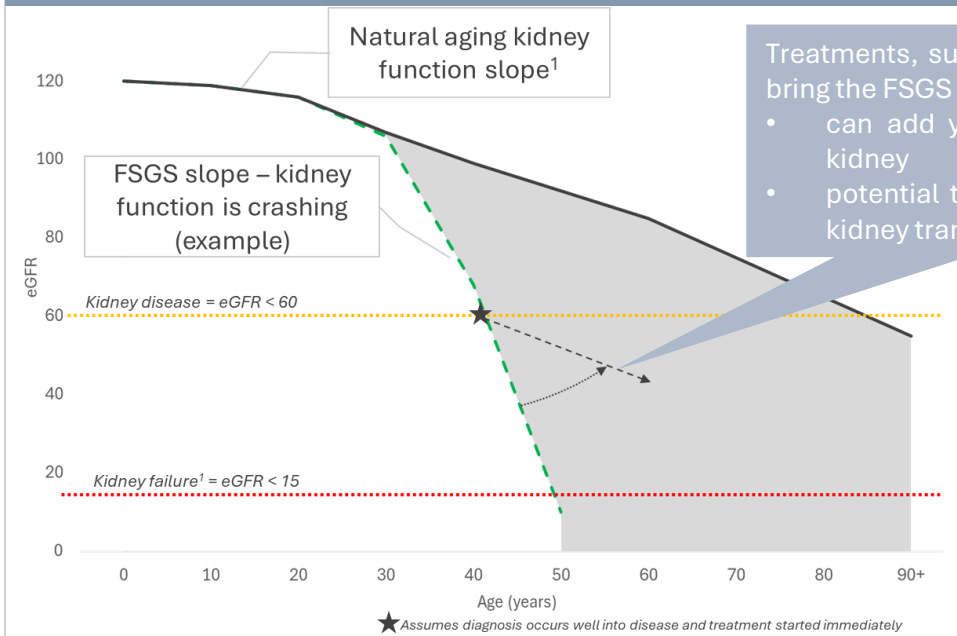
1. Proteinuria is the quantity of protein in the urine

A healthy kidney is a good filter and allows little to no protein into the urine[1]



- Proteinuria occurs when damage to the kidney's filtration units allow protein to leak from the bloodstream into the urine
- Proteinuria represents an important early marker of kidney function[2]

2. Estimated glomerular filtration rate (eGFR)



- Kidney function can be measured using eGFR:
  - how many millilitres of blood is filtered by the kidney per minute
- eGFR slope naturally declines as we age[3]
- In FSGS patients, it is crashing

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1.Guruswamy Sangameswaran KD, Baradhi KM. Focal Segmental Glomerulosclerosis (July 2021), online: https://www.ncbi.nlm.nih.gov/books/NBK532272/; 2. Nephcure FSGS living with the disease (2024) at https://nephcure.org/livingwithkidneydisease/ns-and-other-glomerular-diseases/understanding-fsgs/; 3. National Kidney Foundation: Estimated Glomerular Filtration Rate (eGFR): https://www.kidney.org/atoz/content/gfr;

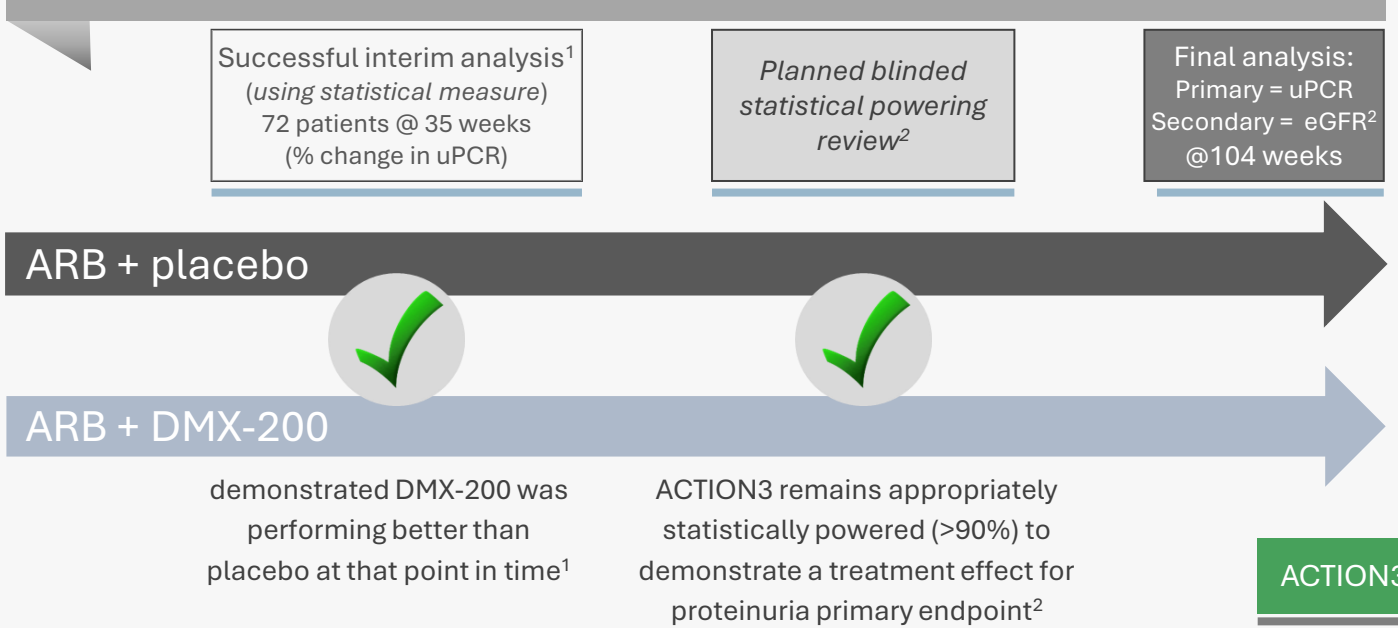
ACTION3 FSGS CLINICAL STUDY phase 3 clinical trial

A randomised, double-blind, multi-centre, placebo-controlled study of renal outcomes of DMX-200 in patients with FSGS receiving an ARB (n=≥286)

Background

- Patients recruited, then screened and stabilised on background medications
- Patients randomised to receive drug or placebo
- DXB remains blinded at all times during study

Phase 3 Trial Timeline



Open Label Extension

DMX-200
87/95 (92%)[3] patients enrolled in open label extension study to date

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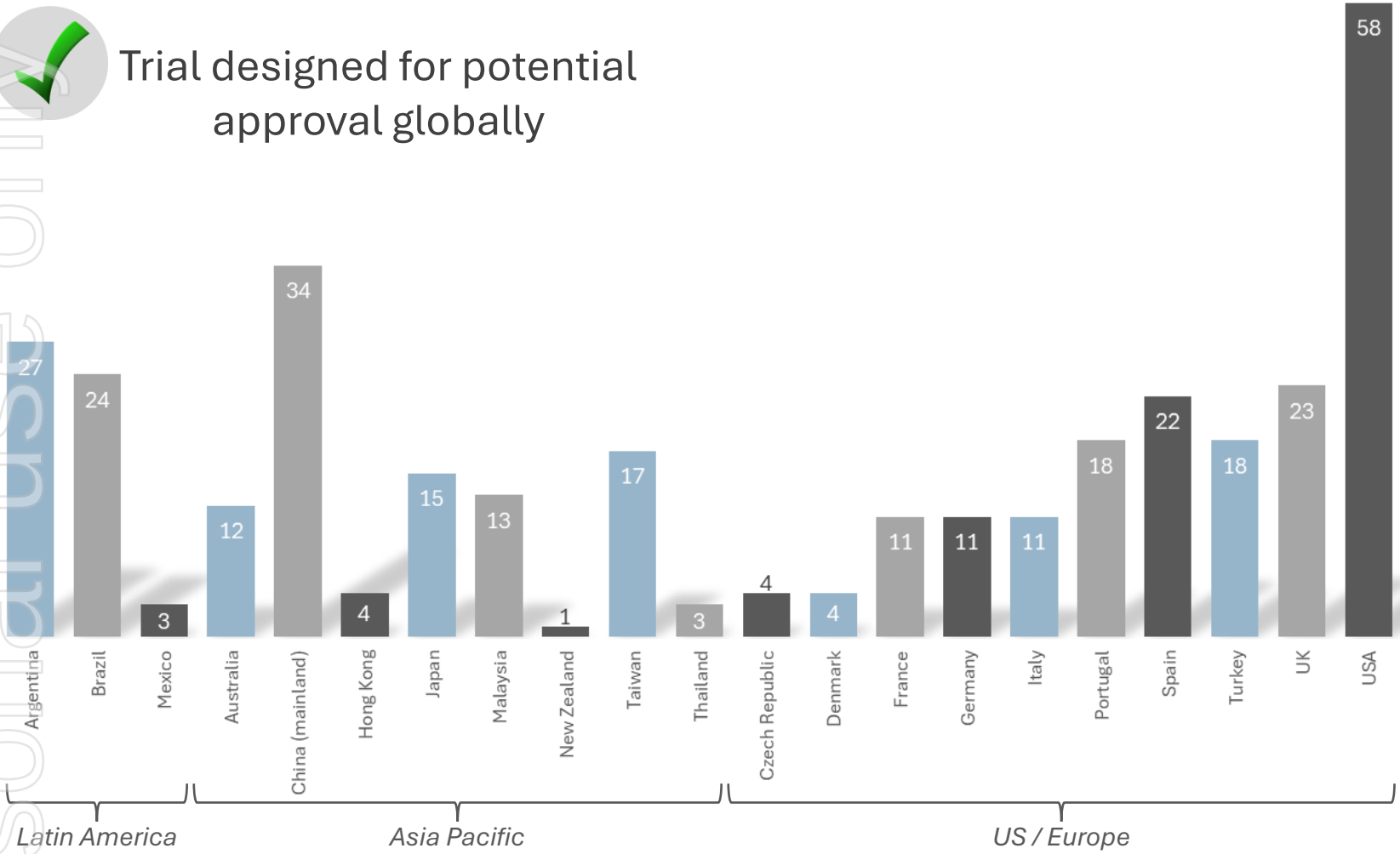
1. ASX release 11 March 2024, Predictive Power statistical model using industry standard as set by the independent renal biostatistician consultant for Dimerix, blinded interim Phase 3 analysis data does not guarantee a statistically significant outcome at the end of the trial; 2. ASX release 28 April 2026; 3. number and % of eligible patients who have completed 2 years treatment and elected to enter the OLE as at 15 September 2026; ARB = angiotensin receptor blocker; uPCR = urinary proteinuria; eGFR = estimated glomerular filtration rate (kidney function);

ACTION3 adult patient recruitment by territory

FSGS CLINICAL STUDY

Trial designed for potential approval globally



Recruitment completed

(adult population)[1]

333

Adult patients recruited, randomised and dosed (target ≥286)[2]

1. ASX release 15 December 2025; 2. Final numbers of adult patients, ASX release 10 March 2026; paediatric patients will continue to recruit, and will not impact final analysis timelines

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Summary of licensing deals for DMX-200 to date

Dimerix has successfully partnered DMX-200 across multiple key markets

Licensing deals collectively valued up to

~AU$1.9 billion

in total upfront and potential milestone fees plus royalties[1-5]

>AU$80 million

in total upfront payments[1-5]

1 BIOMARIN	2 EVEREST MEDICINES	3 ADVANZ PHARMA	4 FUSO	5 taiba
United States	China,S.Korea.SEA	EU, CA, AU, NZ	Japan	GCC, Iraq
AU$48 million[1]	AU$14.1 million[2]	AU$10.8 milllion[3]	AU$7.2 million[4]	AU$0.5 million[5]
Upfront	Upfront	Upfront	Upfront + 1st milestone	Upfront
Up to AU$892 million[1]	Up to AU$467 million[2]	Up to AU$219 million[3]	Up to AU$100 million[4]	Up to AU$120 million[5]
Milestones	Milestones	Milestones	Milestones	Milestones
Escalating low-teen-low twenties%	Between 10-15%	Escalating mid-teen-20%	Between 15-20%	Starting at 30%
Royalties	Royalties	Royalties	Royalties	Royalties

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1. Based on US conversions & further terms outlined in ASX Announcement on 01 May 2025; 2. Based on US conversions & further terms outlined in ASX Announcement on 16 June 2026; ; 3. Based on Euro conversions & further terms outlined in ASX Announcement on 5 October 2023; 4. Based on Japanese ¥ Yen conversions & further terms outlined in ASX Announcement on 7 January 2025 ; 5. Based on US dollar conversions & further terms outlined in ASX Announcement on 27 May 2024

DMX-200 - geographic diversification of fee revenue

Collectively, five commercial agreements valued up to **A$1.9 billion** across upfront + milestone fees:[1]

On signing		Short Term Potential		Longer Term Potential			Diversified revenue & risk sharing with licensing partners
Upfront fees		Milestone Payments		Milestone Payments	Royalties		
A$81 million	+	**A$237 million**	+	**A$1.56 billion**	**10 – 30 %**	=	
In licensing fees		Between now and commercial launch		Post commercial launch	Post commercial launch		

*Upfront and development milestones collectively **A$318 million***

Based on ASX releases 05 October 2023, 27 May 2024, 07 January 2025, 01 May 2025 and 16 June 2026

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DMX-652 in:

Acute Kidney Injury (AKI)

DMX-652: Phase 2 in acute kidney injury

A complementary, clinical-stage pipeline addition

Large value potential

- Secured a Phase 2 ready asset, which is already FDA cleared & manufactured
- Substantial work to date undertaken by originator means significant early risk already removed[1]

First and best in class

- First-in-class USP30 target that promotes renewal of mitochondria
- DMX-652 targets one of the emerging key drivers of kidney injury and reduces both cellular energy failure and inflammation

Leverages existing expertise

- Dimerix team are experts in kidney disease; capable of identifying high value assets
- Experienced in-house team with proven track record of advancing high value assets through clinical development and into commercialisation

Large and growing market

- No approved therapy for high-risk acute kidney injury patients and growing demand for new therapies[2]
- US$3.5 Billion in 2026
- est. US$7.5 Billion by 2036

Strategic value

- Dimerix has significant optionality over the development and commercialisation direction of DMX-652, as the outright asset owner
- DMX-652 has the potential to be used for a variety of other indications, many of which may also have large markets and unmet medical needs

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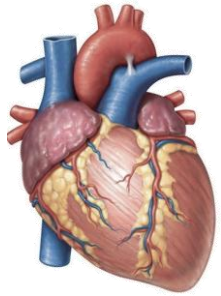
1. Dimerix internal analysis; Mission Therapeutics MTX-652 development file; 2. Zarbock et al, Intensive Care Med 2023; Vervoort et al, Ann Thorac Surg 2023; 3. Dimerix internal market analysis consensus figure based on meta-analysis of 21 market reports (2026) ; Includes China and Japan markets, label expansion into sepsis-associated AKI (SA-AKI) and contrast-associated AKI

What is AKI associated with cardiac surgery

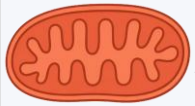
Currently no approved disease-modifying therapies

1 Cardiac Surgery



Cardiopulmonary bypass starves the kidney of oxygen (ischaemia) and causes oxidative stress in kidney cells

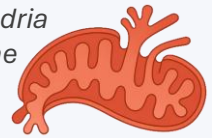
2 Ischaemia



Healthy mitochondria

Kidney starved of oxygen

Damaged mitochondria causes rupture of the mitochondrial membrane



~26%

of patients undergoing cardiac surgery suffer kidney injury

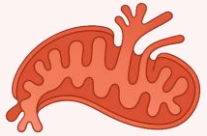
increases to

30-50%

in high-risk patients

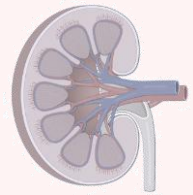
3 Reperfusion: restores blood flow to kidney

Mitochondria rupture



kidney damage caused by a massive influx of reactive oxygen species (ROS) that leads to cell death

AKI



Sudden decline in kidney function (hours)

Drives ICU stays, dialysis, mortality and/or progression to Chronic Kidney Disease

Mitochondria = "batteries" for the kidney cell
The kidney has the second-highest mitochondrial content and oxygen consumption in the body to fuel intense energy demands

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Source: Scurt FG et al, Kidney360 2024; Zarbock A et al, Intensive Care Med 2023; KDIGO clinical practice guidelines for AKI

DMX-652 – a unique, novel mechanism

DMX-652 aims to reactivate the body's natural quality-control system to remove damaged mitochondria (a process called mitophagy) before they trigger kidney cell death

1. Inhibit USP30

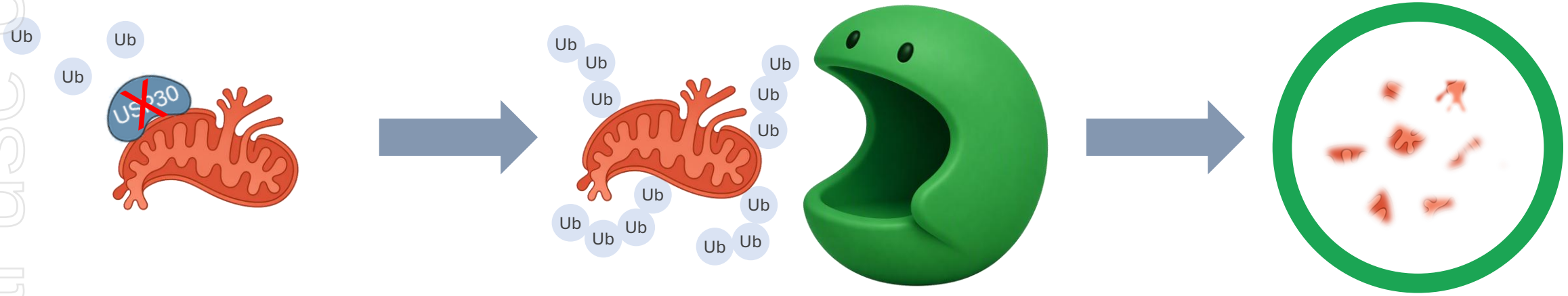
DMX-652 inhibits USP30, preventing ubiquitin "eat-me" tags

2. Promote mitophagy

Damaged mitochondria with ubiquitin-"eat-me"-tags are recognised and engulfed

3. Remove damaged mitochondria

Damaged mitochondria are degraded, leaving only healthy mitochondria



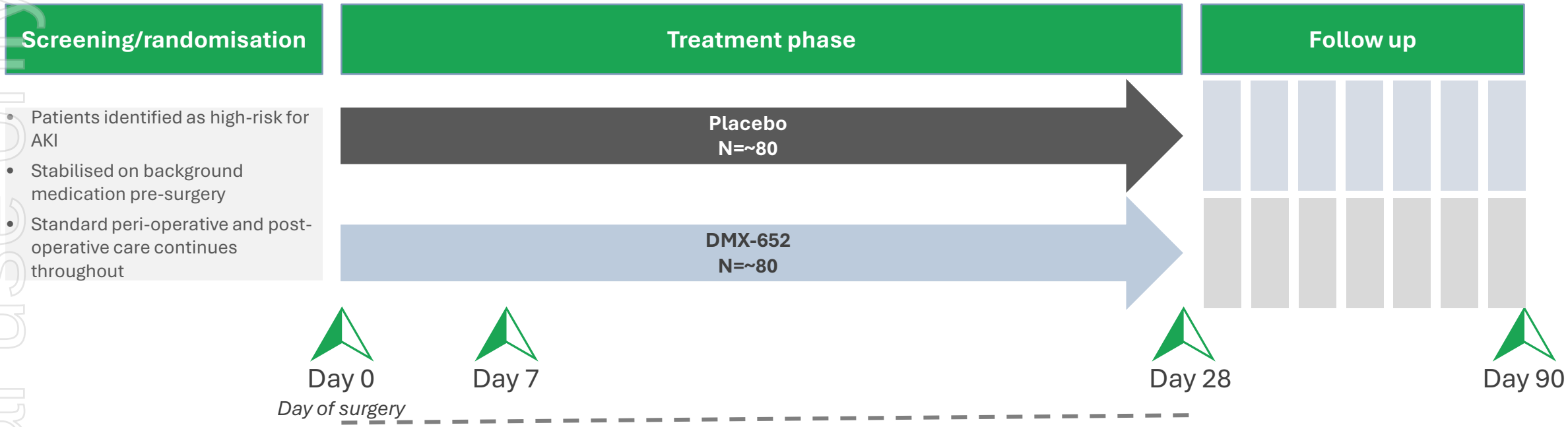
POTENTIAL BENEFITS

- Preserve kidney function
- Reduced AKI severity and incidence
- Prevent dialysis
- Shorter ICU and hospital stays
- Reduced risk of progression to CKD

Source: Tang C et al, Nat Rev Nephrol 2021; Bhatia D, Choi ME, J Life Sci 2019; Mission Therapeutics MTX-652 preclinical package (2024);
Ub = ubiquitin; CKD = chronic kidney disease

Proposed phase 2 clinical trial design

A multicentre, double-blind, randomised, placebo-controlled study evaluating the safety and efficacy of DMX-652 in patients at high risk of AKI following cardiac surgery (n=160)



Primary endpoint

AKI incidence by 7 days post-surgery

Secondary endpoints

Safety and tolerability | PK | MAKE30 | MAKE90

Source: Mission Therapeutics MTX-652 Phase 2 protocol (FDA Study-May-Proceed, 2023); Dimerix MTX-652 development plan (2026); MAKE 30 & MAKE 90 = Major Adverse Kidney Events occurring at 30 or 90 days

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DMX-200 and DMX-652: complementary growth pillars

Strategic fit: shared renal capabilities, shared regulatory/clinical infrastructure, shared small-molecule know-how

DMX-200		DMX-652
Focal Segmental Glomerulosclerosis (FSGS) rare **kidney** disease	1 **Shared kidney disease focus**	1 Acute **kidney** injury associated with cardiac surgery
CCR2 inhibitor that modulates inflammatory pathways involved in kidney damage	2 **Different Mechanisms of Action**	2 **USP30 inhibitor** designed to enhance mitophagy and mitochondrial quality control in damaged cells
existing in-house infrastructure and global network	3 **Shared Development Infrastructure**	3 Can **leverage existing** expertise in clinical, regulatory, manufacturing, nephrology networks, know-how, and commercial relationships
more advanced, **near-commercialisation** asset with Phase 3 fully recruited and commercial partnering activity	4 **Balanced Risk and Timing**	4 provides a **new growth engine**, with an open IND, FDA clearance to proceed to Phase 2, and completed Phase 1 safety studies

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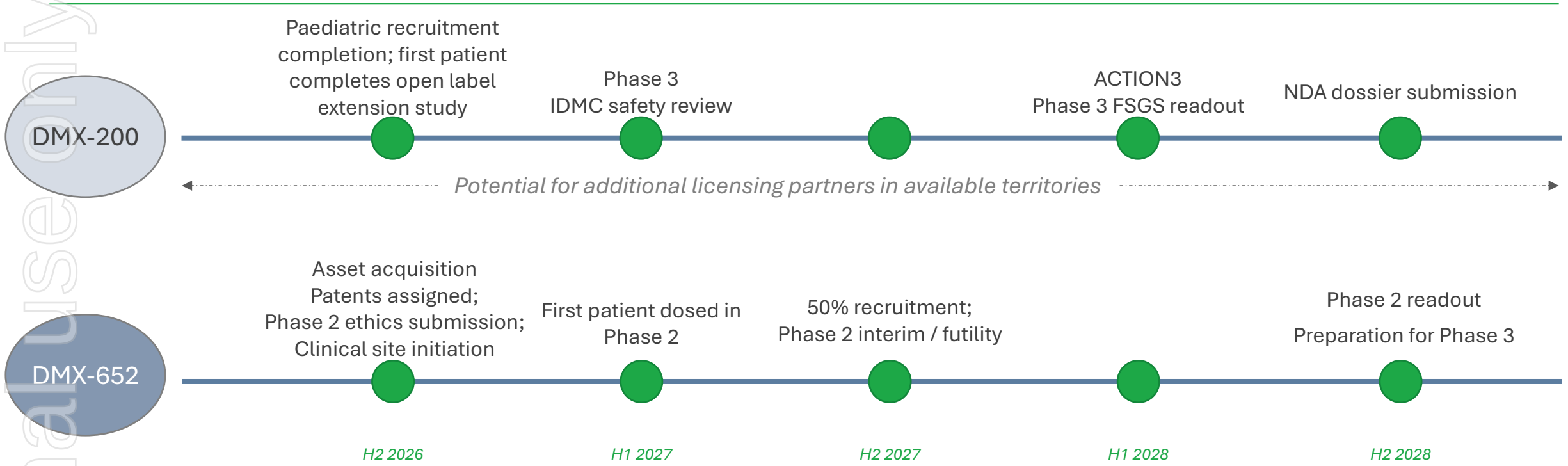
1. ASX release 10 March 2026; 2. ASX releases March 2024 and April 2026; 3. ASX releases 05 October 2023, 27 May 2024, 07 January 2025; 01 May 2025 and 16 June 2026; 4. ASX release 17 July 2026

Key potential value inflection points

Disciplined, stage-gated capital deployment focused on the clinical value inflection[1]



Two clinically differentiated assets in renal disease, addressing two separate high unmet need indications with independent timelines; building a steady cadence of value-creating milestones

1. Based on current anticipated activities timeline

Corporate overview

Ticker Symbol	ASX: DXB
Cash Balance (Jun26)*	$16.2 million
Market Capitalisation[1]	$150 million
Share price[1]	$0.25
Total ordinary shares on issue[1]	600,396,776
Average Daily Liquidity by value for past 90 trading days[2]	$0.55 million

SHARE PRICE

SUBSTANTIAL SHAREHOLDERS[3]

Position	Holder Name	Holding	% IC
1	Mr P Meurs	92,040,374	15.3%
TOTAL (TOP 5) Shareholders		**153,680,631**	**25.6%**

**excluding ~$48.1million:*

- *AU$14.1 million Everest upfront payment received; [3] and*
- *$34 million available facility [4]*

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1. As at 15 September 2026; 2. Past 90 trading days liquidity as at 15 September 2026; 3. Shareholder register as at 15 September 2026; 3. ASX release 28 August 2026; 4. ASX release 3 September 2026

Dimerix

(ASX:DXB)

A biopharmaceutical company developing innovative new therapies in areas with unmet medical needs, with a core focus on kidney diseases.

SCAN ME

WELL POSITIONED **TO DELIVER** AGAINST STRATEGIC PLAN

ESG Statement

Dimerix is committed to integrating Environmental, Social and Governance (ESG) considerations across the development cycle of its programs, processes and decision making. The Dimerix commitment to improve its ESG performance demonstrate a strong, well-informed management attitude and a values led culture that is both alert and responsive to the challenges and opportunities of doing business responsibly and sustainably.

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