ORAMED PHARMACEUTICALS INC.

Form FWP June 17, 2013

Breakthrough
Technology
for a
Brighter Future
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Issuer Free Writing Prospectus
Filed Pursuant to Rule 433
Registration No. 333-187343
June 17, 2013

### 2 Safe Harbor

Certain statements contained in this material are forward-looking statements. These forward-looking statements are based on the current expectations of the management of Oramed only, and are subject to a number of factors and uncertainties that could cause actual results to differ materially from those described in the forward-looking statements, including the risks and uncertainties related to the progress, timing, cost, and results of clinical trials and product development programs; difficulties or delays in obtaining regulatory approval or patent protection for our product candidates; competition from other pharmaceutical or biotechnology companies; and our ability to obtain additional funding required to conduct our research, development and commercialization activities, and others, all of which could cause the actual results or performance of Oramed to differ materially from those contemplated in such forward-looking statements. Except as otherwise required by law, Oramed undertakes no obligation to publicly release any revisions to these forward-looking statements to reflect events or circumstances after the date hereof or to reflect the occurrence of unanticipated events. For a more detailed description of the risks and uncertainties affecting Oramed, reference is made to Oramed's reports filed from time to time with the Securities and Exchange Commission, which involve known and unknown risks, uncertainties and other factors which may cause the actual results, performance or achievements of the company, or industry results, to be materially different from any future results, performance or achievements expressed or implied by such forward-looking statements. Please refer to the company's filings with the Securities and Exchange Commission for a comprehensive list of risk factors that could cause actual results, performance or achievements of the company to differ materially from those expressed or implied in such forward-looking statements. Oramed undertakes no obligation to update or revise any forward-looking statements.

### Free Writing Prospectus Statement

This presentation highlights basic information about us and the offering. Because it is a summary, it does not contain all of the information that you should consider before investing.

We have filed a registration statement (including a prospectus dated March 22, 2013 and a preliminary prospectus supplement dated June 17, 2013) with the SEC for the offering to which this communication relates. Before you invest, you should read the prospectus in that registration statement, the related preliminary prospectus supplement and other documents we have filed with the SEC for more complete information about us and this offering. You may get these documents for free by visiting EDGAR on the SEC Web site at www.sec.gov. Alternatively, we, any underwriter or any dealer participating in the offering will arrange to send you the prospectus and preliminary prospectus supplement if you request it by calling Aegis Capital Corp., Prospectus Department, 810 Seventh Avenue, 18th Floor, New York, NY 10019, telephone: 212-813-1010, e-mail: prospectus@aegiscap.com or Maxim Group LLC, 405 Lexington Avenue, 2nd Floor, New York, NY 10174, toll-free telephone: 1-800-724-0761

Offering Summary

Issuer Oramed Pharmaceuticals Inc.

Exchange / Ticker NASDAQ Capital Market / ORMP

Offering Size Approximately \$13 million (100% Primary)

Over-allotment 15% (100% Primary)

Clinical development of ORMD-0801 and

Use of Proceeds ORMD-0901, working capital & general

corporate purposes

Book-Runners Aegis Capital Corp and Maxim Group LLC

Oramed
An oral solution....
5

6 Oramed Overview

Protein breakdown, low bioavailability

Harsh pH

Protease

threat

Mechanical

challenges

Absorption

barrier

Fate of proteins/peptides in GIT

## Oramed Technology:

Oramed's delivery platform protects proteins and enhances their absorption, allowing them to reach the bloodstream via the portal vein, thereby establishing a more physiologic protein gradient when compared to other delivery systems.

Versatile
Simple
Competent
Versatile
Supports a
wide range
of protein
sizes and
doses
Simple
Simple
blend of
ingredients
ORAMED DRUG DELIVERY

Regulatory competence No NCEs; widely applied pharmacopoeia 9 Oramed Technology

10 Diabetes: A Global Epidemic

```
Type 2 Diabetes: A Global Epidemic
• $471 billion: Estimated total annual
economic cost of diabetes worldwide
            (IDF, 2012)
• $14.5 billion: Estimated total global
insulin market (ReportLinker, 2010)
                11
               350
                0
                50
                100
                150
               200
               250
               300
               1985
               2000
               2012
               Year
     http://www.idf.org/home/
            171 Million
            30 Million
            371 Million
    (IDF Diabetes Atlas, 2012)
               400
    Type 2 diabetes accounts for
     85-95% of diabetes cases
```

Pipeline Overview				
Therapy	Indication Preclinical P	Phase I	Phase II (FDA)	Timeline
ORMD - 0801	T2DM			Q3, '13: Phase IIa "sub-study" projected initiation Q2, '14: Phase IIb multi-center study projected initiation
	T1DM			Q2, '14: Phase II (ex-US) multi-center trial projected initiation
ORMD-0901	T2DM			Q1 '13: Phase I/II (ex-US) study initiated
	T2DM			Q1, '13: First-in-human PoC trial initiated
Combination				
Therapy				
			12	

13 ORMD-0801 Oral Insulin

Total number of study subjects:
131
Total number of administrations in humans:
1444
38
27
66

## 15 ORMD-0801 Type 2 Diabetes

16

1 Blood glucose - insulin secretion system forms a 'closed-loop' 1 Peripheral insulin promotes glucose uptake in fat and muscle

l First-pass hepatic metabolism extracts 80% of secreted insulin
l Systemic exposure is minimized
Portal insulin delivery is physiologic.
Systemic insulin delivery is not.
pancreas
portal vein
liver

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**Initial Treatment:** 

- Lifestyle Modification
  - Diet & Exercise

Single & Combination Oral

Therapies:

- ORMD-0801
- Reduce insulin resistance
- Stimulate insulin secretion

Final Treatment:

• Insulin Replacement

ORMD-0801 is not a substitute for insulin injections, but rather a new earlier treatment

option

Stages of Type 2 Diabetes Criteria for advancing to next stage:

AIC not at target < 7.0%

Type 2 Diabetes:

Stages & Treatment Options

# ORMD-0801 Pre-clinical 19

Healthy, non-diabetic, cannulated beagle dogs 60-75% drop in blood glucose levels within 30-100 minutes of treatment No hypoglycemia or adverse events were observed over the three years of testing 0 20 40 60 80 0 60 120 180 Time (min) n=4 8 mg insulin 8 mg insulin, no additives 1.5 U NovoRapid ORMD-0801 (A) ORMD-0801 (C) 20

> ORMD-0801 Preclinical - Dogs

```
20
                40
                60
                80
                0
                30
                60
                90
               120
               NC
                0
               100
                -
                10
               150
            Time (min)
  NC; 4 independent test sessions
             Fasting
               n=2
               Pre-
             prandial
                0
                20
                40
                60
                80
               100
               120
               140
                0
                50
               100
               150
           Time (min)
               -20
               n=3
  NC; 6 independent test sessions
ORMD-0801; 5 independent sessions
              8 mg
              insulin
                21
           ORMD-0801
         Preclinical - Pigs
```

Phase II Study (ex-US):

Design: Multi-centered, placebo-controlled, randomized, double-blinded, 29 T2DM patient study to evaluate safety and tolerability of one bedtime orally administered ORMD-0801 formulation (2 capsules containing 8 mg insulin each) as well as its effectiveness in providing glycemic control.

21 T2DM 8 T2DM

Monitor safety parameters

Compare plasma markers at start of study to those at end of study

ORMD-0801

once daily

placebo

once daily

22

# T2DM Clinical Results 23

Results:

Safety:

- First extended exposure to ORMD-0801 proved safe and tolerable.
  - No serious adverse events reported.
  - No cumulative effects were observed.
  - Only two hypoglycemic events were recorded both were mild.

Efficacy:

- Reduced glycemia & inflammatory markers
- Percentage of patients demonstrating clinically relevant reductions in insulin, c-peptide, fasting blood glucose (FBG), and Hb1Ac levels was higher in the ORMD-0801 cohort, compared to the placebo.

0 5

10

15

20

25

30

35

40

45

50

FBG

Fructose-

amine

HbA1c

Insulin

c-peptide

**CRP** 

ORMD-0801

Placebo

Phase II Study (ex-US): FBG, HbA1c, Cardiovascular Disease Risk, Hypoglycemia

Upcoming Trial (under FDA IND) 25

26 ORMD-0801 Type 1 Diabetes

```
ID:
                   8
                   80
                  100
                  120
                  140
                  160
                  -10
                   -5
                   0
                   5
                   10
                   15
                  200
                  240
                  300
                  360
                  180
              Time (min)
                  ID:
                   9
                   70
                  120
                  170
                  220
                  270
                  -14
                  -10
                   -6
                   -2
                   0
                  200
                  240
                  300
                  360
                  180
              Time (min)
   Expected rate of increase in fasting
   blood glucose concentrations among
T1DM upon insulin withdrawal: 45.1 \pm 9.7
mg/dL·hr-1 (Clement et al, 2002, Diabetes
        Technol Ther 4(4):459)
                 Rate of
        Subject # glucose
                 change
                 (mg/dL*hr-1)
                 43.7
                 -0.7
                 -15.5
```

2 3

4

5

10.9

```
6
        -6.1
7
        -28.7
8
        -18.4
9
        5.5
     ORMD-0801
      effectively
      prevented
     the expected
        rise in
    blood glucose
    concentrations
    among fasting
    T1DM subjects
          27
     ORMD-0801
        T1DM
```

```
DAY
          NIGHT
            180
            200
            220
            240
            260
            280
            300
        pretreatment
         treatment
          ê 11.5%
           50.75
            58.3
            38
           49.7
           DAY
          NIGHT
        pretreatment
         treatment
Frequency glucose >200mg/dL
           06:00
           08:59
           09:00
             -
           11:59
           12:00
           13:59
           14:00
           18:59
           19:00
           20:59
           21:00
           23:59
           00:00
           05:59
           Time
```

Design: 7 T1DM, monitor glycemic stability of one orally administered ORMD-0801 formulation (1 capsule (8 mg insulin) before meals, three time daily). Glucose monitored with continuous, blinded glucose monitor Results: Safe, well tolerated, reduced glycemia.

28 ORMD-0801 T1DM

29 ORMD-0901 Oral Exenatide T2DM

Oral Exenatide (GLP-1 Analog) 30

#### Glucose

Results: Subcutaneous exenatide delivery amounted to a 51% reduction in mean glucose AUC0-150, while formulations AG4 and AG3 prompted 43% and 29% reductions, respectively (\* p = 0.068, demonstrating a treatment-related trend for the sample size). ORMD-0901 formulations preserved the biological activity of orally delivered exenatide. ORMD-0901 successfully curbed blood sugar excursions following glucose

challenge.

Methods:

Ø Healthy, fasting, cannulated dogs

Ø Single dose ORMD-0901

formulations

Ø Administered 30 minutes

before a glucose challenge.

Ø Blood samples collected

every 15 minutes.

```
preprandial
   Phase 1
  4 Healthy
Placebo-control
   150 µg
  exenatide
      0
     40
     60
     80
     100
     120
     140
 Time (min)
     -50
     0
     100
     150
    n=4
 ORMD-0901
   placebo
  FIRST IN
  HUMAN
     NO
  NAUSEA
     32
 ORMD-0901
   T2DM
```

Oramed Corporate Overview 33

Nadav Kidron, Esq., MBA - Chief Executive Officer & Director

- Experience in various industries, Including corporate law and technology
  - Advisory Board member EnteraBio, Trendlines Group Miriam Kidron, PhD - CSO & Director
- Senior Researcher at the Diabetes Unit of Hadassah Medical Center for more than 25 years
  - Leading researcher in oral insulin development Yifat Zommer, MBA - CFO
  - Extensive Experience in corporate financial management
  - Bachelor of Accounting and Economics from Hebrew University
    - MBA from Tel Aviv University, CPA Israel

Josh Hexter - COO, Vice President Business Development

- More than 15 years of prominent leadership and managerial roles in biotech and pharma most recently with BioLineRX
  - Master's degree in management from Boston University Ehud Arbit, MD - Director of R&D
  - Former VP of Medical Research at Emisphere Technologies
- Former Division Head at Memorial Sloan Kettering Cancer Center

**Board of Directors** 

Michael Berelowitz,

PhD

Chairman of SAB

**SVP Clinical** 

Development &

Medical Affairs, Pfizer

(former)

Harold Jacob, MD

Former Chief Medical

Officer, Given Imaging.

Geral Ostrov

CEO, Bausch&Lomb

(former); Senior level

Executive J&J (former)

Leonard Sank

Entrepreneur and

businessman

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Management

Scientific Advisory Board Chairman of SAB: Michael Berelowitz, MD Prof. Derek LeRoith, MD, PhD

• Professor of Medicine and Chief of Endocrinology, Diabetes and Bone Disease Unit, Mount Sinai School of Medicine, NY.

Prof. John Amatruda, MD

• The Former Senior Vice President and Franchise Head of the Diabetes and Obesity Unit at Merck & Co.

Prof. Avram Herskho, MD, PhD

- Distinguished Professor in the Biochemistry Unit in the
- B. Rappaport Facility of Medicine in the Technion in Haifa.
- Nobel Laureate in Chemistry (2004) for the discovery of ubiquitinmediated protein degradation.

Prof. Nir Barzilai, MD

 Director for the Institute of Aging Research. Member of Diabetes Research Center, Albert Einstein University College of Medicine.
 Prof. Ele Ferrannini, MD, PhD

• Prof. of Internal Medicine, University of Pisa School of Medicine. Professor of Medicine, Diabetes Unit Texas Health Science Center. Past President of the EASD.

### Intellectual Property:

Five primary worldwide patents

- Methods and Compositions for Oral Administration of Proteins (2 unique types)
  - Expire 2026 & 2028
  - Approval granted in Israel, Japan, Australia and New Zealand
    - Pending in multiple jurisdictions, including the US
  - Methods and Compositions for Oral Administration of Exenatide
    - Expires 2028
    - Approval granted in New Zealand
    - Pending in multiple jurisdictions, including the US
    - Methods and Compositions for Treating Diabetes
    - Expires in 2032, Pending status, including the US
- Protease inhibitor-containing compositions and compositions comprising same

Financial Overview 2013\*

\* As of June 1, 2013

Ticker: NASDAQ: ORMP

• \$20.7M raised to date

• No Debt

• Cash and investments: \$4.2M

• Shares Issued: 7.2M

• Fully diluted: 9.5M\*\*

\*\* Including outstanding 0.9M options and 1.5M warrants.

\*\*\* Including the shares of D.N.A Biomedical Solutions

Ltd.

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## Capitalization Structure

Capitalization Outstanding % Outstanding Common Stock 7,226,423 75.35% Stock Options 857,158 8.94% Warrants 1,506,410 15.71%

Fully-diluted Shares 9,589,991 100%

Outstanding

- Anticipated 2013 expenditures (Q3-Q4): \$2.5M
- Anticipated 2014 expenditures (Q1-Q4): \$8M Anticipated Use of Proceeds 2013-2015

Anticipated Milestones 41

Breakthrough Technology for a
Brighter Future
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nadav@oramed.com
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