PARTICIPANT INFORMATION AND INFORMED CONSENT FORM

PROTOCOL TITLE:	**A Phase 2 Randomized, Double-Blind, Placebo-Controlled Study of the Safety and Efficacy of MTX-463 in Participants with Idiopathic Pulmonary Fibrosis (IPF)**
SHORT TITLE:	Evaluation of MTX-463 in Participants with Idiopathic Pulmonary Fibrosis (IPF)
PROTOCOL CODE:	MTX-463-I201
STUDY DRUG:	MTX-463
EU TRIAL NUMBER:	2025-521278-32
SPONSOR:	Mediar Therapeutics 20 Overland Street, Suite 520, Boston MA 02215, USA
SPONSOR'S LEGAL REPRESENTATIVE IN EU:	ProPharma Group The Netherlands B.V.
INVESTIGATOR:	< Site to add Name of Investigator>
SITE:	<Clinic address>
PHONE NUMBER(S):	
DAYTIME:	<Site phone number>
AFTER HOURS:	<After hours phone number>

INTRODUCTION

We would like to invite you to take part in a clinical study.

In this participant information and informed consent form, "you" and "your" always refer to the study participant.

This participant information may contain words that you do not understand. Please ask the Study Doctor or study staff to explain any words that you do not clearly understand.

Before deciding whether to take part in this study, you will be given time to carefully read this participant information.

Why is this study being done and why am I being invited to be in this study?

Idiopathic pulmonary fibrosis (IPF) is a lung disease that causes scarring in the lungs that leads to shortness of breath and a cough that doesn't go away; the reason people get IPF is not known. There are currently two treatments for IPF that slow worsening of the disease. However, they both cause side effects, such as vomiting and diarrhoea, and have a limited effect. New treatments that can cure IPF are desperately needed. The medicine in our study, MTX-463, binds to a particular protein in the body. This protein is called WISP1 and plays an important role in the formation of scarring in the lungs in IPF. By targeting WISP1, MTX-463 could potentially cure IPF.

This study is being done to see whether MTX-463 can slow or stop IPF from worsening, in people 40 years of age or older who have IPF.

The main goal of this study is to see how effective MTX-463 is as a treatment for IPF. The effectiveness of MTX-463 will be assessed by measuring how well it prevents the participants' forced vital capacity (FVC) from declining over a 24-week period. As the lungs scar in IPF, their ability to inhale air goes down. The FVC provides an estimate of how much air the lungs can take in, so that will be used as the main outcome measure in this study.

Other goals of the study include:

- To assess how safe MTX-463 is by looking at the side effects seen with its use and by looking at blood tests.
- To assess how much of the dose of MTX-463 given stays in the blood until the next dose. This is assessed by measuring drug levels in the blood at various timepoints.
- To assess how well MTX-463 relieves some of the symptoms of IPF. This is measured using a questionnaire.

MTX-463 is [redacted]

MTX-463 is an experimental drug meaning that it is not approved for the treatment of IPF or any other illness by the health authorities.

You have been invited to join this study as you have been diagnosed with IPF and are aged 40 years or older.

About 164 participants will be enrolled in this study globally.

Please read this participant information and ask the Study Doctor if you have any questions.

If you decide to take part in this study, you will be asked to sign and date the Informed Consent Form. A copy of the signed consent form will be provided to you, and the original will remain with the Study Doctor.

Who is sponsoring this study?

This research study is being sponsored by Mediar Therapeutics. The Study Doctor and/or study clinic is being paid by the Sponsor for their time and services to conduct this research study.

What will I have to do if I decide to take part in the study?

You will have to inform the Study Doctor (or another member of the study team) of any medications you are taking or have taken in the past 28 days, including over-the-counter medications (for example, vitamins, nutritional supplements, and herbal supplements), to ensure that it is safe for you to participate in the study.

Some people with IPF take medications called **nintedanib, pirfenidone or nerandomilast**

- If you are taking one of these medications and wish to participate in the study, you would be able to if you have been on a stable dose of the medication for at least 90 days prior to the Screening visit, and you plan to remain on these IPF medications throughout the study.

- If you recently stopped one of these medications, you would need to have stopped it more than 30 days ago to be able to participate.

- If you were not on any of these medications prior to the Screening visit, you will not be permitted to start taking them while in this study.

- If you need these treatments and would like to start taking them, you will not be allowed to join the study until you reach a stable dose. If you are newly diagnosed with IPF and your doctor thinks you need these medications, you should not delay starting to take them.

The study is designed to have about half of the participants taking IPF medications and half not taking IPF medications throughout the study. As the study continues to enrol, if the Sponsor notices that there are too many of one group participating in the study, they may decide to enrol only one of these groups, which may impact your ability to participate. The Study Doctor will inform you if this happens.

If you are taking a corticosteroid, it must be a low dose (less than 10 mg).

Many other medications are permitted (such as medications to treat other conditions like diabetes or high blood pressure), but some are not. Your Study Doctor will go over all of your medications with you to check if you are on any of the medications not allowed in this study.

If you are a person of childbearing potential, you must also use birth control as required by the study. Permitted contraception is outlined in the section Pregnancy/Reproductive Risks later in this document.

The Study Doctor and/or study staff will review any other restrictions for this study with you to determine if you are eligible to participate.

If you think you can't attend a study visit, let the study staff know so it can be rescheduled.

As a participant, there are some other restrictions to keep in mind while on study:

- You cannot take part in any other studies while you are in this study.
- Some medications should not be taken during the study. The Study Doctor will explain which ones are safe to take.
- You may not smoke or vape during the study.

What will happen to me during the study?

Before you take part in the study

Before any study-related tests and procedures are done, you will be asked to read this participant information and sign the Informed Consent Form if you want to take part in the study.

You will be given enough time to review this information and will be given opportunities to ask any questions that you may have before signing the consent form. Joining the study is voluntary, and you can choose not to participate for any reason. If you choose not to participate, there will be no impact on the standard medical management for your condition.

The study consists of a screening period, treatment period and safety follow-up period.

Screening (up to 28 days):

During the Screening period, the study staff will take a blood sample from you to check your overall health and check for pregnancy in individuals of childbearing potential. Study staff will also perform a series of tests and assessments to confirm that you can take part in the study, including:

- A breathing test called **spirometry**. This test will require that you breathe in deeply and exhale forcefully into a device that will measure how much air you can inhale and exhale and how quickly you can exhale from your lungs. You likely have done this before as it is commonly performed in people with IPF.

- An imaging study called a -**high-resolution computed tomography (CT) scan (HRCT)**, during which pictures of your lungs will be taken. If required, you may have to travel to a medical centre at another location for your CT scan, which is still part of the study site. Please discuss with your study doctor if you have any questions. If you have had one of these scans performed within 90 days of Screening or have had a prior lung biopsy performed to diagnose IPF, you may not be required to have this scan performed.

When the Screening period has finished, the Study Doctor and Sponsor's Medical Monitor will review the results of your tests and assessments and confirm whether you have met all the study

requirements. If any findings prevent you from proceeding onto the treatment period of the study, the Study Doctor will inform you of this.

It is possible that one or more of these tests may reveal a pre-existing medical condition (that was present before the study) that may prevent you from taking part in the study. If this happens, a member of the clinic's medical staff will talk to you in private and with your consent. You will be referred to your primary care physician to talk about any treatment that may be needed.

The specific tests and procedures you will have done during the Screening period are detailed in **Table 1** at the end of this document and will be described to you by the Study Doctor.

If the results of the tests show that you have met all the study requirements, you will proceed to the treatment period.

Treatment Period (24 weeks):

You will be enrolled into 1 of 2 groups in this study. You will be assigned to receive either MTX-463 (the drug being studied) or placebo ("dummy" drug) every 4 weeks for 24 weeks administered intravenously (through a vein). A placebo is a dummy drug that looks like MTX-463 but contains no active ingredient. Approximately half of the participants in this study will be in each group. For the remainder of this participant information, MTX-463 and placebo will both be referred to as "study drug." Assignment into a treatment group is done randomly, and your chance of getting the study drug is therefore 1 out of 2, like the toss of a coin.

The process of assigning who gets MTX-463 and who gets placebo is called randomization (purely by chance) and is performed by a computer system. Neither you, the Study Doctor, nor the clinical staff will know what treatment you are getting. However, the Study Doctor will be able to find out this information, if needed for safety reasons. Your treatment assignment will be provided to your Study Doctor at the end of the study.

During the 24-week treatment period, there will be 6 visits where you will receive study drug (either MTX-463 or placebo). This will occur at the Week 0, Week 4, Week 8, Week 12, Week 16, and Week 20 visits. For participants assigned to receive MTX-463, they will receive a dose of [redacted] mg/kg at the Week 0 visit that will be administered intravenously (through a vein) over the course of about 75 minutes. At the next 5 visits, they will receive a dose of MTX-463 at [redacted] mg/kg over about 60 minutes. For participants assigned to receive placebo, they will receive a matching placebo administered intravenously (through a vein) over the course of about 75 minutes at the Week 0 visit and about 60 minutes at the next 5 visits.

In addition to receiving study drug at these visits, blood samples will be taken, and other assessments will be performed. Spirometry will be performed at each of these visits. For individuals capable of becoming pregnant, a urine pregnancy test will be done at these visits.

The study procedures that are required at each visit during the treatment period are detailed in Table 1 at the end of this document and will be described to you by the Study Doctor.

Study drug will not be administered at the Week 24 visit of the treatment period. However, blood samples will be taken, and spirometry and additional tests will be performed. For individuals of childbearing potential, a urine pregnancy test will be done at this visit.

Please report any changes to your health to the Study Doctor or study staff throughout the study. The Study Doctor will follow up on any health issues that occur during the study until they are resolved.

Safety Follow-up Period (4 weeks)

There will be a Safety Follow-up visit 4 weeks after the Week 24 visit. The purpose of the Safety Follow-up Period is to check your health 8 weeks after receiving the last dose of study drug. For individuals of childbearing potential, a urine pregnancy test will be done at this visit. Blood samples will also be collected during this visit, and the study team will check if you have had any changes in your health and what medications you have been taking since stopping the study drug.

It is important for you to attend this Safety Follow-up visit, even if you choose to leave the study early.

What tests/procedures will be done?

Details of the study assessments are described below and summarised in Table 1 at the end of this participant information.

Physical Examination:

At Screening you will undergo a physical examination that will include your:

- height and weight
- vital signs (body temperature, breath per minute, pulse, and blood pressure),
- oxygen saturation (the amount of oxygen in your blood measured with a small clip-like device on your finger), and
- a review of your medical and surgical history.

Your Study Doctor may choose to perform additional physical examinations throughout the study, based on how you are feeling. Vital signs (including body temperature, breaths per minute, pulse rate, oxygen saturation, and blood pressure) will be taken at every visit during the study, and at some visits multiple times.

Concomitant Medications/Adverse Event Assessments:

At Screening, you will be asked about any medications you have taken in the 28 days prior to the first Screening visit. At every visit, you will be asked about your current medications.

You will also be asked about changes to your overall health at every visit after Screening. If you are hospitalised because of your IPF at any point during the study, you should inform the Study Doctor or study staff immediately. The Study Doctor's name and phone number are listed on the front page of this participant information. The Study Doctor or study staff will ask you questions about your hospital stay, including the length of time you were hospitalised, and will request to have medical records related to your stay sent to them. This may require you to fill out an authorisation form, which will be provided to you by the study staff.

Spirometry (lung function tests):

During the study, you will also undergo breathing tests called spirometry. This procedure will require that you wear a mouthpiece, as well as a nose clip to prevent you from breathing in and out of your nose. These tests will require that you breathe in deeply and exhale forcefully into a device that will measure how much air you can inhale and exhale and how quickly you can exhale from your lungs. The study staff will inform you how many times you will need to breathe in deeply and exhale forcefully into the device during each visit.

Diffusing Capacity of Lungs for Carbon Monoxide (DLCO):

At some visits, you will also undergo a DLCO test that measure how well oxygen can move out of your lung air sacs into your bloodstream. This procedure will require that you wear a mouthpiece, as well as a nose clip, to prevent you from breathing in and out of your nose. A small amount of gas called carbon monoxide will be released into the mouthpiece during the assessment. The small amount of carbon monoxide used in this test is safe. This test will involve moments where you are required to breathe in deeply and quickly and hold your breath. The study staff will provide you with instructions during each step of this procedure.

Quality of Life Assessments:

At some study visits, you will be asked to answer questions on paper questionnaires regarding the quality of your life during the past 24 hours, as well as the past 7 days. Questions will cover various topics, such as how active you are, how you feel emotionally, and anything in your surroundings that trigger changes in how you feel during the study.

Study Samples:

As part of this study, the Study Doctor or study staff will obtain blood samples from you. Your samples will be sent to a qualified laboratory LabConnect GmbH, Horbeller StraBe 18-20 gate 1, Koln, 50858 Germany, the KCAS, United States, Nordic Bioscience A/S, Denmark, Mayo Clinic Laboratories, United States, and Rules Based Medicine (RBM), United States for storage and analysis after collection.

Your study samples will only be used for the tests listed in this participant information. You will not receive any compensation for these samples.

Blood will be stored and analysed in secure facilities at designated locations during the study. Your name will not appear on your samples or on the data obtained from the analysis of your samples. Rather, your samples and data will be identified by your study participant number, which is a unique code number that is assigned to you.

Some health authorities require us to store your samples in case retesting is needed as they evaluate the drug. We plan to store your samples just long enough to fulfil this requirement (estimated a maximum of 3 years after the end of the study) and no longer. At the end of this time, the samples will be destroyed. Samples will only be used for re-analysis of a test listed in the protocol. No new testing will be conducted on your stored samples without your consent.

The samples are currently planned to be stored during the study in the hospital/clinic you go to for study visits until they are analysed. The samples will be destroyed immediately after use.

If you withdraw your consent from participating further in the study and samples have already been taken from you, you may request that your samples be destroyed, and no new data be generated from your samples. However, data already collected will not be removed.

Blood samples:

Blood samples will be taken during the study. Approximately 320 mL of blood will be collected from you throughout the study (about 65 teaspoons). However, no greater than 60 ml (12 teaspoons; approximately 8 x 5 mL tubes and 10 x 2 mL tubes) will be taken at any one visit. These samples will be used for the following purposes:

- To assess how the drug is attaching to its intended target in your blood and tissues.
- To check the different types of cells in your blood.
- To check levels that indicate how well different body systems are working.
- To check for the presence of possible viruses in your blood (called 'serology').
- To see how much of the study drug is in your blood, how it is processed, and what your body does with it (called 'pharmacokinetics' or "PK").
- To see if the body is creating antibodies (proteins that the body makes in response to infections) that may interfere with how study drug works (called 'Antidrug Antibodies').
- To check to see if there are changes in substances in the blood that might be caused by fibrosis (scarring) (called 'fibrosis biomarkers').
- To check to see if there are changes in substances in the blood that might be caused by bone remodeling (called 'bone biomarkers').

Pregnancy test:

This is only if you are of childbearing potential. You will have a blood pregnancy test at the Screening Visit and if the result is positive, you will not be able to participate in the study.

You will also have a urine pregnancy test at every visit throughout the study after Screening. At visits where study drug is administered, you will be asked to provide a urine sample so that a pregnancy test can be done to confirm that you are not pregnant before being given the study drug.

WHAT ARE THE POSSIBLE DISADVANTAGES OR RISKS OF TAKING PART IN THIS STUDY?

It is possible that your IPF will not improve during the study or may even worsen. Treatment with this study drug may also involve risks to your future health that are not currently known. If you have any questions or feel anything unusual during the study, let the study team know straight away. The Study Doctor's name and phone number are listed on the front page of this participant information.

What are the risks of any treatment received when taking part in this study?

Taking part in this study may involve some risks. The study drug appeared to be safe in animal studies and healthy volunteers but has never been studied in people with IPF before. There is the risk of a reaction to the study drug or of a side effect emerging that has previously not been seen.

As with taking any drug, there is a risk of allergic reaction. If you have a very serious allergic reaction, you may be at risk of death. Some symptoms of allergic reactions are:

- Rash
- Wheezing and difficulty breathing
- Dizziness and fainting
- Swelling around the mouth, throat or eyes
- A fast pulse
- Sweating

Please seek treatment immediately and tell the study doctor and study staff if you have any of these symptoms.

When the study drug was given to 56 healthy volunteers, the following side effects (which may or may not have been due to the study drug) were reported. All side effects were reported as mild or moderate:

- [redacted]

When MTX-463 was given in animal studies, there were no adverse effects due to the study drug.

There may be unknown risks of MTX-463 in patients with IPF as it has not yet been studied.

If you are assigned to receive placebo and you are not taking any standard-of-care medications for IPF prior to the Screening visit, you will not receive any active treatment at all during your participation in the study. There is a possibility that your IPF could get worse more quickly because of not receiving any treatment.

If you are newly diagnosed with IPF and your doctor thinks you need to take the standard-of-care medications, you should not delay starting to take them.

What are the risks of the study procedures?

- **Blood Samples:** When your blood is drawn, you may feel faint, have pain, bruising, or swelling at the site, or experience bleeding. There is also a small chance of infection.
- **Injection Site Reaction:** Redness, itching, infection, or a warm feeling at the injection site can happen, but it's rare. Bruising may occur once the intravenous cannula (the small tube that goes into your vein) is removed.

- **High-resolution computed tomography (HRCT) Scan (a type of medical x-ray imaging that uses ionizing radiation):** This scan uses a small amount of radiation to see the tissues within your chest and assess the progression of your disease. Since the HRCT scans will be performed at multiple study sites globally using site-specific equipment and protocols, the actual radiation dose may vary; however, the approximate radiation exposure level will be 4 mSv for this study. There is a very low risk of harm from the small amount of radiation exposure received during an HRCT scan.
- **Spirometry:** Due to the deep breaths and forceful exhalations required for these assessments, there is a risk of experiencing light-headedness and/or fainting. The study staff will coach you through these assessments and provide breaks where appropriate to reduce this risk.

Pregnancy/Reproductive Risks:

Participants of Childbearing Potential:

Female participants:

A woman is considered able to have children from the time she starts her period (menarche) until she goes through menopause - unless she has had a permanent procedure that makes her infertile. These procedures include having her uterus removed (hysterectomy), both fallopian tubes removed (bilateral salpingectomy), or both ovaries removed (bilateral oophorectomy). Menopause is defined as not having a period for 12 months in a row, as long as there's no other medical reason for it. A blood test showing high levels of a hormone called FSH (follicle stimulating hormone) can help confirm menopause, especially in women who aren't using birth control or hormone therapy.

[redacted]MTX-463 has not been studied in patients with IPF or in pregnant or breastfeeding individuals. Since we don't know how the study drug affects unborn babies or nursing infants, you cannot take part if you are pregnant, breastfeeding, or planning to become pregnant during the study.

You should talk to the Study Doctor about birth control options that are highly effective. You must use one of the following methods of birth control throughout the study and continue using it until 18 weeks after your last dose of study drug:

Highly Effective Birth Control Methods

- Combined (oestrogen and progestogen containing) hormonal contraception associated with inhibition of ovulation:
  - Oral
  - Intravaginal
  - Transdermal
- Progestogen-only hormonal contraception associated with inhibition of ovulation:
  - Oral

  - Injectable
  - Implantable
- Intrauterine device (IUD)
- Intrauterine hormone-releasing system (IUS)
- Bilateral tubal occlusion (having your "tubes tied")
- Vasectomised partner (provided your partner is your only sexual partner and the surgery was medically assessed as successful)
- Sexual abstinence (provided you refrain from heterosexual intercourse the entire period of risk associated with the study drug.)

If you are of childbearing potential, you will be required to have a blood pregnancy test at Screening, and you may be required to continue having urine pregnancy testing during and for 3 months after completing the study. If you discontinue the study early, you will be instructed to perform monthly pregnancy tests for 5 months after the last dose of study drug.

If you become pregnant during the study or up to 18 weeks after the last dose of study drug, call the Study Doctor straight away. The Study Doctor's name and phone number are listed on the front page of this participant information. The site staff will ask for your consent to collect information about both you and your baby up until 8 weeks past the estimated delivery date. If you agree to provide this information, you will be asked to sign a separate consent form.

Male participants:

For men, fertility begins after puberty and continues unless they've had a permanent procedure to remove both testicles (bilateral orchidectomy).

Male participants with female partners of childbearing potential must use condoms during the trial and until 18 weeks after the last dose of the study drug.

For participants with partners who become pregnant during the study or up to 18 weeks after the last dose of study drug, the Study Doctor should be called straight away. The Study Doctor's name and phone number are listed on the front page of this participant information. The site staff will ask for the pregnant partner's consent to collect information about both them and their baby up until 8 weeks past the estimated delivery date. If they agree to provide this information, they will be asked to sign a separate consent form.

WHAT ARE THE POTENTIAL BENEFITS OF TAKING PART IN THE STUDY?

There is no guarantee that participating in this research study will help you directly. The study drug has never been studied in people with IPF before, and the risks and benefits of treatment are not known. Your disease may improve, stay the same, or get worse. However, your participation will provide information about the study drug that may help others in the future.

If you are not taking any standard-of-care medications for IPF prior to the Screening visit, you will not be permitted to start taking them while in this study. There is a possibility that your IPF could get worse more quickly because of not receiving standard-of-care medications. If you are newly diagnosed with IPF and your doctor thinks you need these medications, you should not delay starting to take them.

WHAT IF NEW INFORMATION BECOMES AVAILABLE?

You will be told in a timely manner of any significant new findings about the study drug that become available during the course of this research study. You will also be informed of any potential new treatments available to you during the course of the study. You may use this information to decide whether or not to remain in the study.

WHAT HAPPENS WHEN THE RESEARCH STUDY STOPS?

During the study, you will receive the study drug free of charge. The study drug will not be available to you after you have finished the study. The care you receive after you have finished the study may involve a different drug or treatment, such as one that your usual treating doctor considers to be the best alternative.

The Study Doctor or the Sponsor could remove you from the study at any time for any reason. For example:

- If the trial poses unexpected risks to participants, or if new safety concerns arise that could not have been foreseen at the outset.
- If the trial's objectives cannot be met, or if the treatment being studied is found to be ineffective.
- In response to regulatory actions or changes in laws or regulations that affect the study's conduct.
- If new information emerges that makes it scientifically or ethically inappropriate to continue the trial.
- If an inadequate number of participants can be enrolled in the trial to make the results meaningful.

If the clinical trial is terminated, it may have different consequences for participants, depending on the specific circumstances of the termination. Your safety and well-being will remain the top priority. In the event of a trial termination:

- You will be informed of the termination as soon as possible, and the reasons for the termination will be explained.
- If you are currently receiving a study treatment, it will be discontinued, and you will be provided with appropriate medical care, at the discretion of your doctor.
- The study team will outline any necessary follow-up procedures, including medical assessments, monitoring, and data collection.
- Data collected up to the point of termination may still be analysed.

WHAT IF I NO LONGER WANT TO PARTICIPATE?

As a study participant, you have the right to withdraw from the trial at any time, without penalty or loss of benefits to which you are otherwise entitled. Your decision to participate or withdraw is entirely voluntary and should be made based on your own preferences and best interests.

Please discuss any questions or concerns you have about trial termination with the Study Doctor.

WHAT ARE THE ALTERNATIVE OPTIONS?

There may be alternative treatments and management strategies for IPF that can be considered outside of a clinical trial. Current guidelines for the treatment of IPF recommend the use of nintedanib, pirfenidone or nerandomilast to slow the progression of IPF.

It's important to note that the effectiveness of these options may vary from person to person. Please discuss with your doctor to determine the best option for you.

ARE THERE ANY COSTS?

There is no cost to you for participation in this study. Study drug will be provided by the Sponsor free of charge. Any visits, procedures, or tests that are required only for the study protocol and would not be performed if you did not participate in the study will be paid for by the Sponsor. Some of the tests, medication and/or treatments used in this study may be part of standard care used to maintain your health even if you did not take part in the study. You should ask the study staff to explain any costs for which you may be responsible.

WILL I BE REIMBURSED FOR STUDY EXPENSES AND PARTICIPATION?

The Sponsor may reimburse you or pay for study-related travel expenses.

As a participant in the study, you (and your caregiver if applicable) will be provided with reimbursements for study visit related expenses or have travel arrangements provided for you by Scout Clinical, an organization engaged by the Sponsor.

You may request the following services to be booked and paid for on your behalf by Scout Clinical:

- train travel, ground transportation, hotel accommodation.

You will be reimbursed by Scout Clinical for study visit related expenses (such as mileage, parking, meals, travel) you may have while taking part in this study. You will be paid by Scout Clinical debit card, PayPal or bank transfer.

In addition to expense reimbursements, you will receive an inconvenience payment of up to 68 EUR after each study visit.

In order to process reimbursements and prepare travel arrangements for the study, Scout Clinical will collect information about you (and your caregiver, if necessary). Please refer to the information leaflet from Scout Clinical for more information.

Tax Reporting

Stipends, per diem (an amount you are paid for each day of your visit), and reimbursements without receipts (except mileage) may be considered taxable income. If you do not want to receive these types of payments, let the site Study Coordinator or Study Doctor know.

Use of Scout Clinical services for visit related reimbursement and travel arrangement is not required for participation in the clinical research study. Please speak to the site staff to discuss reimbursement of visit related expenses with receipts if you choose not to use Scout Clinical services. Please ask the study staff any questions you have.

The Sponsor and companies in the Sponsor's group have a financial interest in developing new drugs and medical tests. The results and data collected from this study, including your personal data and results from the analysis of your biological samples, may lead to the development of commercial products for the diagnosis, cure, mitigation, treatment, or prevention of disease. Research resulting from the use of your samples, or your personal data collected in this study may result in discoveries and inventions, some of which may be patentable, and the sale of products and services. However, you will have no legal or financial interest in any commercial development, and you will not receive any compensation in the event that a commercial product, service, invention, or discovery results from this research.

WILL I RECEIVE COMPENSATION/TREATMENT FOR RESEARCH INJURY?

If you think you have been injured or have experienced a medical problem as a result of participating in this study, tell your Study Doctor as soon as possible. The Study Doctor's name and phone number are listed on the front page of this participant information.

Medical treatment will be available to you for any injury that directly results from your participation in this research study.

Any reimbursement you receive for any injury caused by taking part in this study will be in line with local guidelines. The Sponsor will pay the cost of medical treatment for an injury that is directly due to treatment with the study drug or a study procedure (that has been used as described in the study).

Any payment made by a third party, including the Sponsor, for any medical treatment provided to you is not an admission of fault or liability by the payer or anyone else.

If you have private medical insurance, please check with your insurance company to ensure that taking part in this study will not affect your policy.

If you are injured, you will not be offered payment for any losses or damages, including lost wages, emotional distress, or pain and suffering. However, you have the right to seek compensation for injuries which result from negligence, to which you may be entitled under the law. This is true regardless of whether the negligent party is the Sponsor, the Study Doctor, or someone else, or whether the injury occurs at the study site, or somewhere else.

HOW WILL MY DATA BE PROTECTED?

For the purposes of the study, Mediar Therapeutics, 20 Overland Street, Suite 520, Boston MA 02215, USA is the data controller in relation to your personal data processed for the study and is responsible for deciding what personal data needs to be collected from you during the study and how these data will be used and processed.

As the sponsor is not established in the European Union (EU), it has appointed MyData-Trust France, with a registered office at Rue de Rennes, 140b, 75006 Paris, France, as its Data Protection Representative.

The processing of your personal data requires your explicit consent. You will find, at the end of this document, a designated place where you can record your consent, if you decide to do so. You can revoke this consent at any time you want. The processing is also necessary to ensure the safety and reliability of the results, in compliance with legal obligations to which the Sponsor is subject to. Such processing is necessary in the public interest in the field of public health.

The processing of your personal data for the study will comply with the EU privacy law known as the General Data Protection Regulation (GDPR), in addition to the Irish Data Protection Act 2018 and the provisions under the Health Research Regulation.

What kind of personal data are collected?

The personal data about you that may be collected as part of this study includes the following:

- Your name, address, contact details (including email and phone numbers), date of birth, gender, ethnicity, and racial origin (ethnicity and racial origin are collected because they may influence how safe and effective a drug is).
- Information obtained from procedures to determine whether you can take part in the study, including a routine medical history, physical examination, blood tests, and blood and urine pregnancy test.
- Information that is created or collected from you during the study, including electronic images, the results of all tests and procedures performed as part of the study, the results of analysis of your biological specimens collected during the study, and answers to questionnaires.
- Information contained in your medical records related to your medical history and treatment.

Your personal data will be recorded and electronically stored in your personal medical records, and the study files kept at the study clinic or at any other location where study activities are conducted. Your personal data will be kept confidential to the extent possible, although absolute confidentiality cannot be guaranteed.

For what purposes will your personal data be processed?

The purposes for which your personal data may be processed are the following:

- To conduct the study
- To ensure that the study is being carried out correctly and that the data is accurate
- To facilitate research-related treatment and payment for treatment
- To review the results of the study
- For regulatory purposes (such as to report safety information about the study drug or the study to regulatory authorities or in connection with applications to regulatory authorities for approval to conduct further trials of the study drug or to market the study drug, whether alone or in combination with other drugs)
- For research, development, and commercialisation of the study drug, whether alone or in combination with other drugs
- To comply with legal obligations

Who will have access to your personal data?

The personal data collected about you in this study, including personal data contained in your medical files, may be disclosed to the following individuals and entities:

- The Study Doctor, study staff and the study clinic.
- Independent ethics committees, institutional review boards, and other health or supervisory boards or committees overseeing studies of the study drug.
- The Sponsor, companies within the Sponsor's group, successors, collaboration partners, representatives, including those involved in a potential business transaction, such as a merger, sale or liquidation
- Companies working with or on behalf of the Sponsor or companies within the Sponsor's group or collaboration partners, including vendors, suppliers, and contractors that have contracted to provide services to any of them, such as clinical research organization, laboratory analysis, biological sample storage
- Other study clinics and investigators involved in this study or other studies of the study drug.
- Your primary care physician.
- Health care providers that provide health services to you in connection with the study.
- Government or regulatory health authorities in the EU and other countries, such as the European Medicines Agency (EMA) and the United States Food and Drug Administration (FDA).
- Other individuals and entities as required by law, regulation or ethics, such as to other health care professionals if you talk about harming yourself or the Study Doctor believes there may be a risk that you may harm yourself.

All of your personal data that is shared from the study clinic to the Sponsor or any other individual or entity listed in this participant information sheet will be identified by the study

participant number assigned to you. Your full name or any other directly identifiable information about you will not be included in these records. Only the Study Doctor and the study clinic will have access to information that can link you to your study participant number; this information will not be shared outside of the study clinic unless necessary for safety purposes.

The following people will be able to view your medical records kept at the study clinic and this consent form signed by you, including your name and information that directly identifies you:

- The Study Doctor and study staff
- Regulatory authorities where studies of the study drug are conducted or where approval to market the study drug is sought (including the FDA and the EMA)
- Individuals in charge of monitoring the quality of the study who are duly authorised by the Sponsor
- The Sponsor, companies within the Sponsor's group, and the Sponsor's collaboration partners, when they require it to fulfil their legal obligations, such as ensuring that the study is being carried out correctly, and that the data is accurate.

These persons will have to comply with the duty of maintaining confidentiality that is required of their profession. If your medical files are reviewed remotely, the records will include your study participant number but will not include your name or other directly identifiable information unless these records will be reviewed directly through the study clinic's secure electronic medical records portal.

Also, the following travel service vendor contracted for the study may receive information that can directly identify you (e.g., name, contact details and bank details):

- Scout Clinical, an organization engaged by the Sponsor to handle travel arrangements.

Transfer of your personal data

Some of the entities listed above that will receive your personal data are not located in the EU and may not ensure an adequate level of data protection as do the laws of your country, such as the United States. However, the study Sponsor will ensure that the recipient country is either recognized by the EU as having an equivalent level of data protection, or they will apply the appropriate data transfer mechanism, such as through the use of model contractual clauses.

This study cannot be performed without organizations outside Ireland accessing your information. You have the right to ask for more information about the safeguards in place (including copies of relevant documents, such as contractual clauses that have been put in place), by contacting your study doctor or the Data Protection Officer of the site or of the Sponsor."

The transfer of **safety information** is based on limited exceptions ("derogations") provided by the EU GDPR because the transfer is necessary for important reasons of public interest. Other derogations may also exceptionally apply.

Although precautions will be taken to protect your privacy, it cannot be guaranteed that your identity will never become known. While steps will be taken to limit access to your personal data, including the use of a code as described above, people may develop ways in the future that allows someone to link your health information in databases back to you..

How long will your personal data be stored?

Your personal data collected in the study will be kept for at least 25 years after the end or discontinuation of the clinical trial.

Your rights

You have the following rights in relation to your personal data:

- The right to receive adequate information regarding the processing of your personal data. This includes asking for more information about data transfer safeguards in place.
- The right to request to see your personal data held by the Study Doctor and the Sponsor and to request that any inaccuracies in your personal data be corrected. However, because this is a double-blind, placebo-controlled study, for scientific reasons, you and your Study Doctor will not know which treatment you have received and may not be able to access your personal data until after the study has been completed to help preserve the integrity of the research.

You may also exercise your rights to:

- Restrict the processing of personal data;
- Request erasure of personal data;
- Require the data controller to communicate any rectification which has been requested to each recipient to whom they have disclosed the personal data;
- Receive personal data relating to, and provided by the data participant to the data controller, in a structured, commonly used and machine-readable format, and to transmit those data to another controller without hindrance where personal data is processed by automated means;
- Revoke your consent to the processing of your personal data at any time, without providing a reason.

If you withdraw your consent to participate in the study or your consent to the processing of your personal data, which you can do at any time by notifying the Study Doctor, no new personal data will be collected from you. However, any personal data collected up to the point of your withdrawal from the study will be retained in the study database so that the study is still scientifically valid. If information is omitted, the scientific, and therefore the ethical integrity of the research will be compromised. Moreover, your personal data must be stored for safety reasons and archiving obligations.

Some or all of the above rights may be restricted because of certain other legal requirements, including the requirement to submit complete information about the study drug to regulatory authorities.

Because your personal data will be transferred to the Sponsor in pseudonymised form (i.e., with a unique code number assigned to you rather than your name), please direct questions regarding your personal data collected in the study to the Study Doctor (contact details are on the first page of the participant information), who will help facilitate your requests and getting responses to any questions that you may have regarding your personal data from the Sponsor.

If you have concerns about the processing of your personal data, you have the right to lodge a complaint with your data protection supervisory authority:

Data Protection Commission
6 Pembroke Row
Dublin 2
D02 X963
Tel. +3531 7650100 or +353 1800437 737
Website: http://www.dataprotection.ie/

If you have additional questions about the collection, use of or rights related to your personal data, please contact:

- The site's Data Protection Officer: <name, title, and contact information of trial sites Data Protection Officer>
- The Sponsor's Data Protection Officer: MyData-TRUST SA, mediar.dpo@mydata-trust.info.

STUDY RESULTS

The results of this study may be used to learn more about IPF, or to develop or improve treatments for this condition in the future. The results of this study may also be published in scientific journals. However, you will not be identified in any of these publications.

The results of this study will be used to make informed clinical decisions for developing this potential new medication. If you want the results to be made available to you, please talk to your Study Doctor. You can obtain your individual results by contacting the Study Doctor, although you will not be able to access this information until after the completion of the study to preserve the integrity of the research.

Will Study Results Be Published?

If the research study results are presented at meetings, published for scientific purposes, or posted electronically (for example, in a clinical trials registry database), you will not be

personally identified (for example, mentioned by name), but data from your participation in the research study may be included in the presentation or publication.

A description of this clinical study will be available on http://www.ClinicalTrials.gov, as required by United States law. This website will not include information that can identify you. At most, the website will include a summary of the results. You can search this website at any time.

In addition, information about this study is made available on other public websites, such as European Clinical Trial Register, https://euclinicaltrials.eu/search-forclinical-trials/?lang= in agreement with the Declaration of Helsinki that recommends the public registry of clinical trials. These websites will not include information that can identify you. These websites will include a summary of the results when available, and you can search these websites at any time.

We will not disclose your information without your permission, except in compliance with the law. Information about you may be obtained from your health records held at this institution and may be obtained from other health services for the purposes of research. Should you wish to cease treatment, we would like the option to maintain follow-up. If you sign the consent form, you agree to the study team accessing health records if they are relevant to your participation in this study.

WHO CAN I ASK IF I HAVE ANY QUESTIONS?

- If you have any questions about the study, or if you experience any adverse events related to the study, please contact the following individuals:

[**Site to add** Principal Investigator Name, Phone Number, Email]

If you are unable to reach anyone at the number(s) listed above and you require immediate (life threatening) medical attention, dial < Site to add country-specific number for emergency services> immediately.

If you have concerns or issues that have not been resolved satisfactorily, and wish to complain formally, you can do this by contacting:

Site to add details

A Research Ethics Committee has approved the information in this participant information and consent form and has given approval for the Study Doctor to perform the study. This does not mean the ethics committee has approved your participation in the study. You must consider the information in this participant information and Informed Consent Form for yourself and decide if you want to be in this study.

INFORMED CONSENT

PROTOCOL TITLE:	**A Phase 2 Randomized, Double-Blind, Placebo-Controlled Study of the Safety and Efficacy of MTX-463 in Participants with Idiopathic Pulmonary Fibrosis (IPF)**
EU TRIAL NUMBER:	2025-521278-32
SPONSOR:	Mediar Therapeutics

Please tick the box if you agree with the statement. Please feel free to ask questions if there is something you do not understand.

	Tick box
I confirm I have read and understood the Information Leaflet for the above study. The information has been fully explained to me and I have been able to ask questions, all of which have been answered to my satisfaction.	
I understand that this study is entirely voluntary, and if I decide that I do not want to take part, I can stop taking part in this study at any time without giving a reason. I understand that deciding not to take part will not affect my current or future medical care.	
I agree that my medical records at the study clinic may be viewed by the following: • Study Doctor and study staff • regulatory authorities where studies of the study drug are conducted or where approval to market the study drug is sought (including the FDA and the EMA) • individuals in charge of monitoring the quality of the study who are duly authorised by the Sponsor • the Sponsor, companies within the Sponsor's group, and the Sponsor's collaboration partners when they require it to fulfil their legal obligations, such as ensuring that the study is being carried out correctly, and that the data is accurate.	

I agree to take part in this research study having been fully informed of the risks, benefits and alternatives which are set out in full in the information leaflet which I have been provided with.	
I understand that I have data privacy rights and that personal information about me, including the transfer of this personal information about me outside of the EU, will be protected in accordance with the General Data Protection Regulation (GDPR).	
I explicitly consent to the collection, use, sharing and the overall processing of my personal data, including sensitive data, for study purposes as described in the information leaflet.	
I understand that my biological samples collected for study purposes may be kept in storage and may be used as described in the information leaflet.	
I understand that I will be contacted by study staff as part of this research study. In the event I withdraw from the study or withdraw my consent from the processing of personal data, or if I do not consent to this processing, I understand that study staff are required to conduct follow-up to fulfil legal obligations in safety reporting.	
I will receive a copy of the Participant Information, and this completed consent form for my records.	

_____

Printed Name of Study Participant

_____ _____

Signature of Study Participant Date

To be completed by the Principal Investigator or nominee.

I, the undersigned, have fully informed the participant of all aspects of this research study, provided enough time for the participant to discuss the study with others, provided a signed copy of this Informed Consent Form to the participant, and answered all the participant's questions.

_____

Printed Name of Person Explaining Consent

or Conducting the Consent Process

_____ _____

Signature of Person Explaining Consent
or Conducting the Consent Process

Date of Signature

Table 1 Schedule of Procedures During Study

Day	Screening	On Treatment							Follow-up
	Day -28 to -1	0 (Week 0) (Baseline)	28 (Week 4)	56 (Week 8)	84 (Week 12)	112 (Week 16)	140 (Week 20)	168 (Week 24) (EOT/ET)	196 (Week 28) (EOS)
Visit window			(±3 days)						(±3 days)
Informed consent	X								
Inclusion/exclusion review	X	X							
Collection of information about you	X								
Medical medications history	X	X							
Randomization to receive either MTX-463 or placebo	X								
Physical examination	X	A full physical examination will be completed at Screening and Day 0 and will be based on any symptoms you have at each of the visits after the Screening visit							
Vital signs (body temperature, breath per minute, pulse, and blood pressure) (taken several times on visits specified)	X	X	X	X	X	X	X	X	X
Height, weight, and BMI calculation (Height will only be measured at the Screening visit; weight will be measured at Screening, Day 0, and Week 28)	X	X							X
Clinical laboratory tests (Blood samples will be taken for testing)	X	X	X	X	X	X	X	X	X
Serology (Blood samples will be taken to look for certain infectious diseases. The results of these tests will need to be negative for you to participate.)	X								
Pregnancy test	For all participants of childbearing potential, a pregnancy test will be collected through a blood sample at Screening. A urine pregnancy test will be collected at all other timepoints.								
Study drug administration (Study drug will be administered by the Study Doctor or staff)		X	X	X	X	X	X		
Spirometry	X	X	X	X	X	X	X	X	
DLCO	X							X	
HRCT	X								

Day	Screening	On Treatment							Follow-up
	Day -28 to -1	0 (Week 0) (Baseline)	28 (Week 4)	56 (Week 8)	84 (Week 12)	112 (Week 16)	140 (Week 20)	168 (Week 24) (EOT/ET)	196 (Week 28) (EOS)
Visit window			(±3 days)						(±3 days)
L-PF assessment (Participants will complete 2 forms at the specified timepoints. One will ask questions to assess how the disease has impacted you over the past 24 hours, and the other will assess how the disease has impacted you over the past week)		X						X	
PK sampling (Blood samples will be taken to see how much of the study drug is in your blood, how it is processed, and what your body does with it)		X	X				X	X	
ADA (Blood samples will be taken to assess the presence of antidrug antibodies in your blood)		X	X		X		X	X	X
TIMP-1 levels		X	X	X	X			X	
CCL2 levels		X	X	X	X			X	
WISP1 levels (Blood samples will be taken to assess for the presence of a protein in your blood called WISP1, which MTX-463 binds to)		X	X	X	X	X	X	X	X
Pro-C3 Levels (Blood samples will be taken to assess for signs of fibrosis)		X	X	X	X			X	
Pro-C6 levels		X	X	X	X			X	
C7M levels		X	X	X	X			X	
IL-6 Levels (Blood samples will be taken to assess for signs of inflammation)		X	X	X	X			X	
PROLIFIC biomarker levels		X	X	X	X			X	

Day	Screening	On Treatment							Follow-up
	Day -28 to -1	0 (Week 0) (Baseline)	28 (Week 4)	56 (Week 8)	84 (Week 12)	112 (Week 16)	140 (Week 20)	168 (Week 24) (EOT/ET)	196 (Week 28) (EOS)
Visit window			(±3 days)						(±3 days)
P1NP levels		X	X	X	X			X	
CTX levels		X	X	X	X			X	
Current medications	X	X	X	X	X	X	X	X	X
Assessment of Adverse Events	X	X	X	X	X	X	X	X	X

Abbreviations: ADA = anti-drug antibodies; BMI = body mass index; CA-125 = cancer antigen 125; CA-19-9 = cancer antigen 19-9; CCL2 = chemokine ligand 2; CCL18 = chemokine ligand 18; CTCAE = Common Terminology Criteria for Adverse Events; CTX = C-terminal cross-linked telopeptide of type I collagen; CXCL13 = chemokine ligand 13; CYFRA 21-1 = cytokeratin 19 fragment; DLCO = diffusing capacity of the lungs for carbon monoxide; EOS = End of Study; EOT = End of Treatment; ET = early termination; HRCT = high-resolution computed tomography; IL-6 = interkeukin-6; KL-6 = Krebs von den Lungen-6; L-PF = living with pulmonary fibrosis; MMP-7 = matrix metalloproteinase-7; NCI = National Cancer Institute; P1NP = procollagen type 1 N-terminal propeptide; PAI-1 = plasminogen activator inhibitor 1; PK = pharmacokinetics; POSTN = periostin; Pro-C3 = blood test to measure for a biomarker of fibrogenesis; Pro-C6 = propeptide of type 6 collagen; sICAM1 = soluble intercellular adhesion molecule 1; SP-D = surfactant protein D; TIMP-1 = tissue inhibitor of metalloproteinases 1; TNC = tenascin C; WISP1 = WNT-inducible signaling pathway protein 1.