

ORAMED PHARMACEUTICALS INC.

Form FWP

June 17, 2013

Breakthrough
Technology
for a
Brighter Future

1

Issuer Free Writing Prospectus

Filed Pursuant to Rule 433

Registration No. 333-187343

June 17, 2013

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)
Use of Proceeds	Clinical development of ORMD-0801 and 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

7

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

Therapy	Indication	Preclinical	Pipeline Overview		Timeline
			Phase I	Phase II (ex-US) / Phase II (FDA)	
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					

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

1 First-pass hepatic metabolism extracts 80% of
secreted insulin

1 Systemic exposure is minimized

Portal insulin delivery is physiologic.

Systemic insulin delivery is not.

pancreas

portal vein

liver

17

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:

A1C 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 ± 9.7
 mg/dL·hr-1 (Clement et al, 2002, Diabetes
 Technol Ther 4(4):459)

Subject #	Rate of glucose change (mg/dL*hr-1)
2	43.7
3	-0.7
4	-15.5
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
 ± 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

0
20
40
60
80
100
120
S.C.
AG
4
AG
3
-
+
+
+
+
Exenatide
*
*
*

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.
Gerald Ostrov
CEO, Bausch&Lomb
(former); Senior level
Executive J&J (former)
Leonard Sank
Entrepreneur and
businessman
31
Management
34
-

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 ubiquitin-mediated 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.

37

33

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 Outstanding	9,589,991	100%

38

- 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

Contact :

Nadav Kidron

CEO

nadav@oramed.com

42
