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CanSino Biologics Inc.
康希諾生物股份公司

(A joint stock company incorporated in the People's Republic of China with limited liability)
(Stock code: 6185)

VOLUNTARY ANNOUNCEMENT
CLINICAL RESEARCH RESULTS OF
A CLINICAL TRIAL OF BIVALENT RECOMBINANT COVID-19 VACCINE
(ADENOVIRUS TYPE 5 VECTOR) FOR INHALATION IN
ADULTS AGED 18 YEARS AND ABOVE

This announcement is made by CanSino Biologics Inc. (the “**Company**”) on a voluntary basis.

The Company is pleased to announce that, the Company has initiated a clinical trial of bivalent Recombinant COVID-19 Vaccine (Adenovirus Type 5 Vector) for inhalation (the “**Bivalent COVID-19 Vaccine for Inhalation**”) in adults aged 18 years and above, and has received preliminary data. The Bivalent COVID-19 Vaccine for Inhalation is developed for Omicron variant and is still in clinical trial stage.

Clinical Studies and Principal Results

The clinical study was initiated in September 2022 in Chongqing, with a total of 450 participants enrolled, and long-term follow-up is ongoing. The study was a randomized, blind, parallel-controlled trial in people aged 18 years and above who have completed three doses of COVID-19 inactivated vaccines ≥ 3 months prior to receive the inhaled vaccines. All participants were randomized to receive one dose of Omicron strain/original strain COVID-19 vaccine for inhalation (the “**Bivalent vaccine group**”), Omicron strain COVID-19 vaccine for inhalation (the “**Omicron strain vaccine group**”) or original strain COVID-19 vaccine for inhalation (the “**Original strain vaccine group**”) in a ratio of 1:1:1. Each group was planned to enroll about 150 participants with a total of 450 participants enrolled. Of them, approximately 30% were ≥ 60 years of age. Systematic safety observation was conducted for 28 days post vaccination and biosamples were collected on Day 0, 14, 28, Month 2, 3, 4 and 6 post vaccination for humoral immunity, cellular immunity and mucosal immunity assessments.

1. Safety

The overall incidence of adverse reactions within 28 days post vaccination in the Bivalent vaccine group, Original strain vaccine group and Omicron strain vaccine group were 15.89%, 14.67% and 22.00%, respectively, and there was no statistical differences among three groups. The adverse events were mainly Grade 1 (incidence 10.00% ~ 15.33%) and Grade 2 was 3.31% ~ 6.67%. Only one case (0.66%) had a fever of Grade 3. Results showed that the inhaled COVID-19 vaccine was safe in the people who had received three doses of inactivated COVID-19 vaccines, and there was no significant differences among these inhaled COVID-19 vaccine treatment groups.

2. Immunogenicity

Humoral immunity: The live virus antibody levels before the booster dose were nearly negative, while on Day 28 post vaccination, the GMT of original virus neutralizing antibodies for the Bivalent vaccine group, the Original strain vaccine group and the Omicron strain vaccine group were 245, 288 and 104, respectively. The GMT of neutralizing antibodies against BA.1 variant were 44, 30 and 33, respectively, and the GMT against BA.5 variant were 30, 22 and 19, respectively. Overall, the antibody levels of bivalent COVID-19 vaccine has an advantage as compared to others.

Cellular immunity: Peripheral blood mononuclear cell (PBMC) cytokine levels (stimulated by Omicron strain peptide library) were measured by ELISPOT. On the Day 28 post booster vaccination, the IFN- γ levels in the Bivalent vaccine group, the Original strain vaccine group and the Omicron strain vaccine group were 75, 60 and 82 spots/ 10^5 PBMC, respectively. The positive rates were 100%, 82% and 90%, respectively. Cell immunity of bivalent COVID-19 vaccine has an advantage.

Mucosal immunity: MSD method was applied for the assessment of nasal secretory IgA (sIgA) antibodies against a variety of variants. Results showed that a broad-spectrum sIgA response was elicited by the inhaled COVID-19 vaccines, and the antibody level increased 6-9 times in comparison to that before the immunization. There were no significant differences among different vaccine groups.

Considering several unpredictable factors in the process of clinical trials of drugs and the results and timing of clinical trials, evaluations and approvals are subject to uncertainty. Shareholders and potential investors of the Company are advised to exercise caution when dealing in the shares of the Company.

By order of the Board
CanSino Biologics Inc.
Xuefeng YU
Chairman

Hong Kong, December 28, 2022

As of the date of this announcement, the board of directors of the Company comprises Dr. Xuefeng YU, Dr. Shou Bai CHAO, Dr. Tao ZHU, Dr. Dongxu QIU and Ms. Jing WANG as executive directors, Mr. Liang LIN, Ms. Nisa Bernice Wing-Yu LEUNG and Mr. Zhi XIAO as non-executive directors, and Mr. Shiu Kwan Danny WAI, Ms. Zhu XIN, Mr. Shuifa GUI and Mr. Jianzhong LIU as independent non-executive directors.