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Duality Biotherapeutics, Inc.

映恩生物

(Incorporated in the Cayman Islands with limited liability)

(Stock Code: 9606)

INSIDE INFORMATION

STUDY RESULTS FROM CORE PRODUCT DB-1311/BNT324 AT ASCO GENITOURINARY CANCERS SYMPOSIUM 2026

The board (the “**Board**”) of directors (the “**Directors**”) of Duality Biotherapeutics, Inc. (the “**Company**”) is pleased to announce that at the American Society of Clinical Oncology (ASCO) Genitourinary (GU) Cancers Symposium 2026 to be held in San Francisco, USA from February 26 to February 28, 2026, the Company will present updated efficacy and safety results from the Phase 1/2 DB-1311-O-1001 study (NCT05914116) of DB-1311/BNT324, an investigational B7H3 antibody drug conjugate (ADC), in patients with heavily pretreated metastatic castration-resistant prostate cancer (mCRPC), including analyses according to prior treatment with lutetium 177 (177Lu)-PSMA-617 (Lu 177). The abstract for the above study was also published on the official website of the ASCO GU Cancers Symposium 2026 on February 23, 2026, local time.

In the dose optimization cohort of this phase 1/2 study, patients with previously treated mCRPC received DB-1311/BNT324 6 mg/kg or 9 mg/kg Q3W, while in the dose expansion cohorts (post Lu 177 mCRPC and taxane-naïve mCRPC), patients received 6 mg/kg Q3W until progression or unacceptable toxicity.

As of September 5, 2025, being the data cut-off, 104 mCRPC patients had received DB-1311/BNT324 (including 6 mg/kg, n=68; 9 mg/kg, n=34). After a median follow-up of 9.2 months (range 0.1-19.4), 52 patients (50%) remained on treatment. The median patient age was 70 (45-90). Most patients were White (53%), followed by Asian (31%) and Black (13%). Patients had previously received a median of 4 treatments (1-14). In the 58 patients who could be assessed for tumor response (measurable disease at baseline by RECIST 1.1), unconfirmed ORR was 41.4% (95% CI 28.6-55.1) and confirmed ORR (cORR) was 34.5%. The DCR was 87.9% (95% CI 76.7-95.0). Median DOR was 10.2 months (95% CI 7.2, NE). In 82 patients evaluable for rPFS, median rPFS was 11.3 months (95% CI 7.2, ne), with 6-month rPFS rate of 72.0% and 9-month rPFS rate of 63.0%. OS data were not mature at the data cut-off; the 6-month and 9-month OS rates were 91.7% and 88.2%. PSA50 response rate was 35.4%. Median PSA DOR was 8.4 months (95% CI 4.4, NE). Safety data were in line with the Company’s previous report at ASCO 2025. The most common adverse events were nausea and hematological events, which were primarily Grade 1-2. 34 of the 104 (33%) patients had received prior Lu 177. In this subgroup, the median age was 69 (55-84); 65%/15%/15% were White/Asian/Black; the median number of prior treatments was 5 (2-14); and 24 patients (71%) remained on treatment. Outcomes were similar between patients with and without prior Lu 177, albeit a shorter PSA DOR with prior Lu 177.

Key efficacy data of response-evaluable patients are set out below:

Post Lu 177 No prior Lu 177

Response evaluable, n	10	48
cORR, %	30.0	35.4
DCR, %	100	85.4
Efficacy evaluable, n	23	59
Median rPFS, months	11.3	NE
9-month rPFS rate, %	61.1	63.7
9-month OS rate, %	86.2	88.5
PSA50 response rate, %	30.4	37.3

ABOUT DB-1311/BNT324

DB-1311/BNT324 is a clinically advanced B7-H3 ADC candidate under global development. B7-H3 is a member of the B7 family that plays a critical role in promoting tumor progression and metastasis. DB-1311/BNT324 is designed to harness B7-H3 as a therapeutic target, leveraging its widespread overexpression across multiple tumor types, including small-cell lung cancer (SCLC), non-small cell lung cancer (NSCLC), breast cancer (BC), castration-resistant prostate cancer (CRPC), esophageal squamous cell carcinoma (ESCC) and head and neck squamous cell carcinoma. DB-1311/BNT324 demonstrates strong selectivity by targeting a specific isoform predominantly found on B7-H3-overexpressing tumor cells, and incorporates a potent payload, stable linker-payload and fragment crystallizable region silenced (Fc-Silenced) monoclonal antibody, which may potentially translate into a favorable safety profile and a wide therapeutic window.

DB1311/BNT324 is being investigated in the on-going Phase 3 trial (NCT07365995) in the patients with taxane-naïve metastatic castration-resistant prostate cancer (mCRPC), with combination potential to expand into earlier treatment lines. In 2024, the FDA granted DB-1311 Fast Track Designation for the treatment of patients with advanced/unresectable, or metastatic CRPC and Orphan Drug Designations for the treatment of ESCC and SCLC.

RISK WARNING

Cautionary Statement as required by Rule 18A.08(3) of the Listing Rules: There is no assurance that the Company will ultimately develop, market and/or commercialize DB-1311/BNT324 successfully. 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
Duality Biotherapeutics, Inc.
Dr. ZHU Zhongyuan
*Chairman of the Board, Executive
Director and Chief Executive Officer*

Hong Kong, February 24, 2026

As at the date of this announcement, the Board comprises (i) Dr. ZHU Zhongyuan, Mr. ZHANG Shaoren and Ms. SI Wen as executive directors; (ii) Mr. CAI Zhiyang and Dr. YU Tao as non-executive directors; and (iii) Mr. XIE Dong, Mr. GAO Fengyong and Ms. CHUAI Shuyin as independent non-executive directors.