Brii Biosciences Limited
腾盛博药生物科技有限公司
(Incorporated in the Cayman Islands with limited liability)
(Stock Code: 2137)

VOLUNTARY ANNOUNCEMENT
Presents Cross-Study Analysis of Post-Treatment HBsAg Rebound at APASL 2026

This announcement is made by the board of directors (the "**Board**") of Brii Biosciences Limited (the "**Company**") on a voluntary basis.

The Board is pleased to announce that the Company presented a cross-study analysis of post-treatment hepatitis B surface antigen ("**HBsAg**") rebound profiles at the 35th Annual Meeting of Asian Pacific Association for the Study of the Liver ("**APASL 2026**"), taking place from April 22-25, 2026 in Istanbul, Turkey.

This analysis evaluated post-end-of-treatment ("**EOT**") HBsAg rebound in nucleotide reverse transcriptase inhibitor ("**NRTI**")-experienced participants with chronic hepatitis B virus ("**HBV**") infection who achieved HBsAg loss in the Phase 2 ENSURE study or the Phase 2 BRII-179-002 study. The Phase 2 ENSURE study is designed to assess the safety and efficacy of combination approaches aimed at improving functional cure outcomes. Cohorts 1-3 evaluate elebsiran in combination with pegylated interferon alfa ("**PEG-IFNα**") compared to PEG-IFNα monotherapy, while Cohort 4 evaluates the potential role of BRII-179 in identifying immunologically responsive patients and improving HBsAg loss rate. BRII-179-002 is a multicenter, randomized, double-blind, proof-of-concept Phase 2 study that evaluates BRII-179 as an add-on therapy to PEG-IFNα.

Data from the two studies were pooled to assess the incidence, magnitude and clinical relevance of HBsAg rebound following EOT in participants treated with PEG-IFNα alone or in combination with elebsiran or BRII-179. Across studies, participants demonstrated favorable off-treatment clinical outcomes. All HBsAg rebounds remained below 100 IU/mL with most rebounds remaining below 10 IU/mL. HBV DNA rebound was infrequent and not associated with clinically meaningful alanine aminotransferase ("**ALT**") elevations following NRTI discontinuation. Together, these results suggest durable post-treatment immunological control and further support the potential for safe discontinuation of NRTIs in PEG-IFNα-based combination with novel therapeutic modalities. Notably, shorter NRTI consolidation periods (12 to 20 weeks versus 24 weeks) were not associated with higher HBsAg rebound rates, suggesting that shortening – and potentially eliminating – the NRTI consolidation period may be feasible in future treatment strategies.

"We are encouraged by the growing evidence showing that our novel therapeutic combinations can achieve not only rapid HBsAg loss, but also durable immunological control after treatment withdrawal," said David Margolis, M.D., Chief Medical Officer of the Company. "These findings strengthen our confidence in the potential of BRII-179 and elebsiran as components of next-generation HBV cure strategies, and we look forward to additional readouts from our ongoing studies throughout 2026."

Additional details of the oral presentation are as follows:

Title: Cross-study Analysis of HBsAg Rebound Following Treatments of Elebsiran/BRII-179 in Combination with Peginterferon Alfa

Session/Presentation Type: Oral Presentation Session 58

Date and time: 13:40 – 15:10 on April 25 (UTC+3)

Presenter: Jidong Jia, M.D., Ph.D., Professor of Medicine at the Liver Research Centre, Beijing Friendship Hospital, Capital Medical University in Beijing, China

- Post-EOT HBsAg rebound was observed in 24 of 55 participants (43.6%) with similar rates during NRTI consolidation (13/55, 23.6%) and after NRTI discontinuation (11/41, 26.8%).

- Shorter NRTI consolidation was not associated with higher HBsAg rebound rates after NRTI withdrawal, with 15.0% (3/20) of participants receiving 12-20 weeks of NRTI consolidation and 23.8% (5/21) of those receiving 24 weeks experiencing HBsAg rebound by 24 weeks after NRTI discontinuation.

- The magnitude of HBsAg rebound was limited, with all rebounds <100 IU/mL and 75.0% (18/24) remaining <10 IU/mL. HBV DNA rebound after NRTI discontinuation was infrequent, with >90% (38/41) of participants maintaining HBV DNA < lower limit of quantification (LLOQ) at the last available visit. No ALT flares were observed; one participant exceeded the normal range and received NRTI retreatment at investigator discretion.

Cautionary Statement: There is no assurance that BRII-179 and elebsiran will ultimately be successfully developed or marketed by the Company. Shareholders of the Company and potential investors are advised to exercise caution when dealing in the shares of the Company. When in doubt, shareholders of the Company and potential investors are advised to seek advice from professional or financial advisers.

By order of the Board
Brii Biosciences Limited
Dr. Zhi Hong
Chairman

Hong Kong, April 26, 2026

As at the date of this announcement, the Board comprises Dr. Zhi Hong and Dr. Ankang Li as executive directors; and Dr. Martin J Murphy Jr, Ms. Grace Hui Tang, Mr. Yiu Wa Alec Tsui, Mr. Gregg Huber Alton and Dr. Taiyin Yang as independent non-executive directors.