

DURECT CORPORATION

Corporate Factsheet, May 2023

DURECT is committed to transforming the treatment of acute organ injury and chronic liver diseases by advancing novel and potentially lifesaving epigenetic therapies.

PIPELINE OVERVIEW

Indication	Ph 1	Ph 2	Ph 3	Approved	Status
Alcohol-Associated Hepatitis (AH) Larsucosterol					Ongoing Phase 2b AHFIRM trial
Non-Alcoholic Steatohepatitis (NASH)					Positive Phase 1b topline results
POSIMIR® (bupivacaine solution)					Licensed to Innocoll; Commercially available in the U.S.

FAST FACTS

NASDAQ: DRRX (Common Stock)

Cash & investments¹: \$44.4 M

Debt¹: \$21.3 M

Market Cap²: \$116 M

Shares outstanding³: 24.5 M

¹ as of 3 / 31 / 2023

² as of 5 / 9 / 2023

³ as of 5 / 3 / 2023

LARSUCOSTEROL

Larsucosterol is an endogenous sulfated oxysterol and an epigenetic modulator. It binds to and inhibits the activity of DNA methyltransferases (DNMTs), epigenetic enzymes associated with hypermethylation, found to be elevated in severe alcohol-associated hepatitis (AH) patients. By decreasing DNA hypermethylation, larsucosterol modulates expression of genes important in maintaining cellular functions, thereby reducing cell death, lipotoxicity and inflammation in AH.

Larsucosterol is investigational and has not been approved by the FDA for marketing in the U.S. for any indication.

PROGRAM HIGHLIGHTS

LARSUCOSTEROL FOR AH: Compelling Opportunity in Underserved Market



AH: life-threatening acute liver disease caused by chronic misuse of alcohol, frequently after increased consumption, with no approved drugs and a 90-day overall mortality rate of 29% following hospital admission; ~158K U.S. hospitalizations/y



Positive Phase 2a data: 100% survival rate at 28 days



FDA fast track designation; **Catalysts**: Phase 2b AHFIRM topline data expected in 2023; successful trial may support NDA filing

LARSUCOSTEROL FOR NASH: Novel Approach via Epigenetic Modulation



Non-alcoholic steatohepatitis (NASH): advanced form of non-alcoholic fatty liver disease; no approved drugs



Positive topline Phase 1b data: improvements in liver enzymes, liver stiffness, biomarkers and serum lipids

POSIMIR® (bupivacaine solution)



U.S. rights exclusively licensed to Innocoll Pharmaceuticals. DURECT is eligible to receive up to \$122 million in future milestone payments as well as low double-digit to mid-teens royalties on net product sales



Commercially available in the U.S.



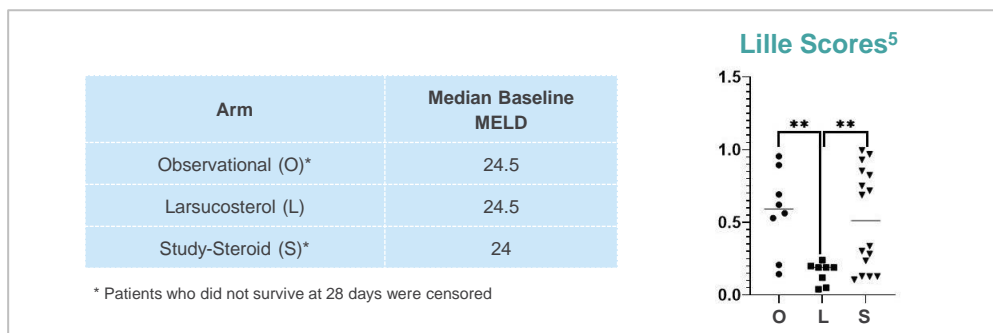
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LARSUCOSTEROL FOR AH – COMPELLING PHASE 2a RESULTS¹

Survival	100% of patients treated with larsucosterol (n=19) survived the 28-day follow-up period in contrast to 26% historical 28-day mortality rate
Time to Discharge	74% of patients treated with larsucosterol discharged within 4 days of treatment after 1 dose
Bilirubin	Significant reduction compared to baseline at days 7 and 28
Prognostic Indicators of Mortality for AH	MELD (Model for End-Stage Liver Disease): significant reduction at day 28 compared to baseline
	LILLE SCORE: AH patients with Lille score <0.45 have an 85% 6-month survival rate vs. 25% survival rate when Lille score >0.45 ²
	Lille score in severe AH patients: All 8 severe AH patients in the 30 or 90 mg dose cohorts were treatment responders ³ (Lille score <0.45) and their Lille scores were statistically lower than those of well-matched patients from an Observational Arm and Study-Steroid Arm of the DASH Consortium trial in a cross-study comparison ⁴ (shown below) ⁵

¹Hassanein, T et al. 2023. Am J Gastroenterol, DOI: 10.14309/ajg.0000000000002275; ²Louvet A et al. 2007, Hepatology, 45: 1348-54; ³Lille score <0.45 is considered a "responder." ⁴Patients from both comparative arms were diagnosed with AH, screened for inclusion and exclusion criteria similar to the larsucosterol trial, and treated with standard-of-care, including corticosteroids. In addition, they were matched by MELD score to the 8 severe AH patients who received 30 or 90 mg of larsucosterol.



LARSUCOSTEROL FOR NASH: POSITIVE PHASE 1B TOPLINE DATA

(N=65) * Indicates p-value <0.05; ** indicates p < 0.01; *** indicates p < 0.001; Data at 28-days

Liver Enzymes	Significant median reduction from baseline of serum ALT (-17%***), AST (-18%**), and GGT (-8%*) in the high dose group
Liver Imaging	At day 28, 43% of patients showed ≥10% liver fat reduction from baseline. Significant reduction in liver stiffness as measured by FibroScan (-10%**), in the low dose group
Serum Lipids & Biomarkers	Median reduction in triglycerides (-24%**) in patients with elevated baseline (≥200 mg/dL; n=16) across all dose groups; Reduction in LDL-C (-11%*) in the mid dose group and CK-18s in those with reduced liver fat

DURECT Forward-Looking Statements. The statements in this factsheet regarding the potential uses and benefits of POSIMIR, prospects for success of the U.S. commercial launch for POSIMIR, as well as the potential for larsucosterol to treat patients with AH, NASH, or other acute organ injury and chronic liver diseases, and plans for clinical development of larsucosterol are forward-looking statements involving risks and uncertainties that can cause actual results to differ materially from those in such forward-looking statements. Potential risks and uncertainties include, but are not limited to, the risks that POSIMIR will not achieve a successful commercial launch, that the AHFIRM trial of larsucosterol is delayed due to COVID-19 or other factors, the risk that clinical trials of larsucosterol take longer to conduct than anticipated, do not confirm the results from earlier clinical or pre-clinical trials, do not support NDA filing, or do not demonstrate the safety or efficacy or the life saving potential of larsucosterol in a statistically significant manner, and risks related to our ability to obtain capital to fund operations and expenses. Further information regarding these and other risks is included in DURECT's Form 10-K filed on March 8, 2023 and other SEC filings, under the heading "Risk Factors."

MANAGEMENT TEAM

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Chief Executive Officer

Tim Papp
Chief Financial Officer

Norman Sussman, M.D.
Chief Medical Officer

WeiQi Lin, M.D., Ph.D.
Executive VP, R&D
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