Psychedelic Inspired Medicines

September 2020

NEO	OTCQB	DE
MMED	MMEDF	MMQ

Disclaimer

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Broadest & Most Diversified Pipeline of Psychedelic Drugs in Clinical Development and R&D

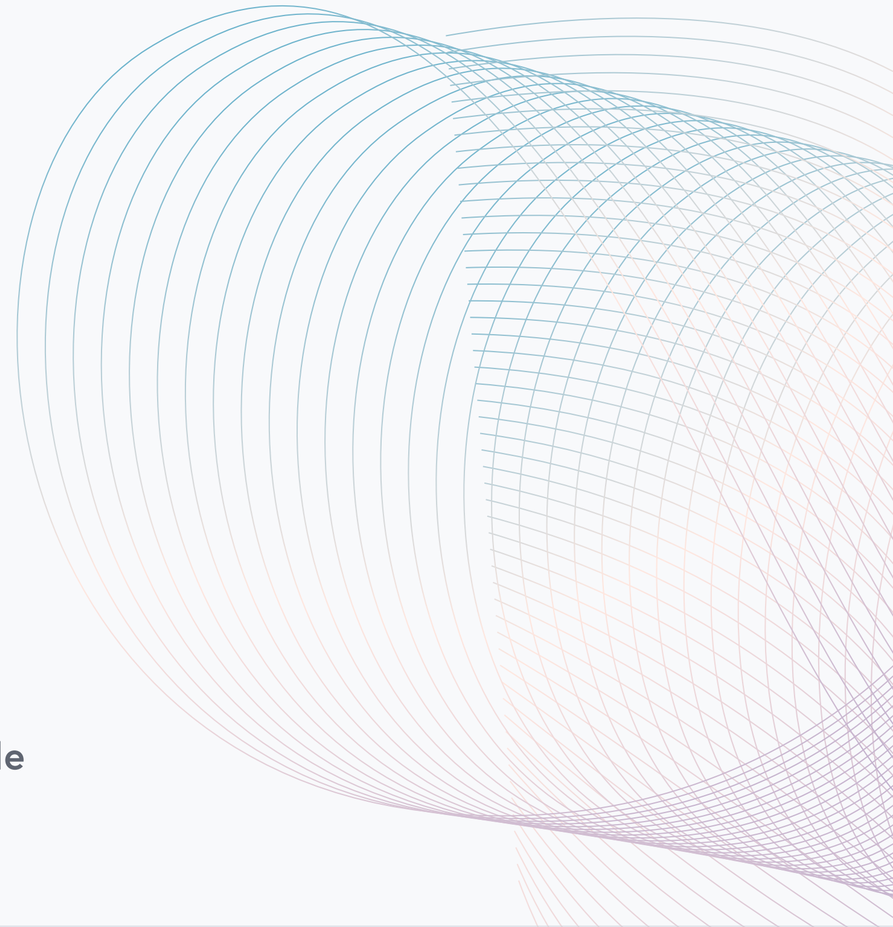
Pipeline Diversification Offer Access To Full Spectrum Of Psychedelic Inspired Medicines

Establishing A New Class Of Medicine For Mental Health

Psychedelic Inspired Medicines

Development Principles:

1. **Patient First:** Focus on multiple signficant unmet patient needs in mental health and addiction
2. **Industry Expertise**: Paramount Pharmaceutical Industry Experience
3. **Data Moats** : Regulated Clinical Trials
4. **Diversify Pipeline** : Pipeline of compounds increases our total addressable market and likelihood of commercialization
5. **Collaborate**: Evaluate partnerships with biopharma companies to accelerate product development with non-dilutive capital
6. **Invest Early**: We agressively explore accretive M&A opportunities while investing in pertinent mental health technologies



FDA Is The Only Way

FDA Has Clear Regulatory Framework & Commercialization Pathway

FDA U.S. FOOD & DRUG ADMINISTRATION

FDA View and Process:

1. File IND - Investigational New Drug
2. Approval by the Institutional Review Board
3. Conduct research under Schedule 1 License from the DEA
4. Complete usual clinical trial process for approval

Breakthrough Therapy Designation (BTD):

- Three designations to others in psychedelics already

Additional incentives for Opioids:

- Accelerated Approval/Breakthrough Designation for development of treatments for opioid use disorders.
- Lowered threshold for approval (August 2018)

Patients Already Being Dosed in Regulated Environments:

- Multiple ongoing clinical trials in the U.S. already at Johns Hopkins & NYU

Big Pharma: Search and Acquire

Psychedelic Inspired Medicines have already been approved

Major corporations are coming on board:

Johnson and Johnson SPRAVATO (Esketamine)
Multiple indications approved by the FDA
=$1.5 Billion USD[5] in annual sales

APPROVED

Spravato™ (esketamine) CII nasal spray

Janssen Pharmaceutical Companies of Johnson & Johnson

NYU Langone Health | DARPA | Johns Hopkins University | UCSF

Institutional Interest & Investment in Psychedelics:

- Government: DARPA ($27 million USD)[29]
- Big Pharma: Johnson & Johnson Phase 1 to Approval (Spravato)
- Universities: Johns Hopkins University ($17 million USD),[30] UCSF School of Nursing, NYU Langone School of Medicine

Bottom line: Nearly $250 million USD[30] invested in first half of 2020, Projected to grow at 16.3%[31] CAGR

Markets Are Massively Underserved

Estimated $100+ billion[19] global total addressable market for psychedelics

ANXIETY

$4.5B

Global annual anxiety drug sales[6]

ADHD

$9.1B

Global annual ADHD drug sales[6]

ADDICTION

$42B

Substance abuse treatment market[7]

DEPRESSION

$4B

Global annual depression drug sales[6]

According to national drug abuse data, overdoses have increased 42% since Covid-19[39]

Mental health experts find a strong link between loneliness/depression and drug overdoses[40]

MindMed Is Collaborating With Leading Psychedelic Researchers

Clinical Researchers With Psychedelic Research Experience Are Rate Limiting Factors

University Hospital Basel's Liechti Lab

- Acquired 10+ years of valuable research & data
- Most valuable LSD data for drug development
- 18 completed or ongoing clinical trials of psychedelics

Maastricht University

- Leading research experts for microdosing of psychedelics
- Phase 2a Clinical Trial - Adult ADHD

Professor Dr. Matthias Liechti, PhD & M.D.

Leader of Liechti Lab at University Hospital Basel

Dr. Kim Kuypers PhD

Phase 2a a trial for LSD in adult patients with ADHD

Dr. Peter Gasser M.D.

"Meet the Only Doctor in the World Legally Allowed to Use LSD to Treat Patients" - VICE

Matthew W. Johnson, PhD

Leading expert at Johns Hopkins University Center for Psychedelic Research

Defining A New Asset Class

Product Delivery Categories

Non-Hallucinogenic

- LSD Microdosing for ADHD
- 18-MC for Addiction

HOW IT'S DONE

Derived from psychedelics, negligible hallucination effect

HOW IT'S DELIVERED

Doctor Prescription

Pharmacy pickup and take-home

Hallucinogenic

- LSD Experiential Therapy for Anxiety
- LSD Experiential for Cluster Headaches

HOW IT'S DONE

A high dose or "experiential" dose of psychedelics

HOW IT'S DELIVERED

Overseen by therapist & doctor

In-clinic treatment only

Our Development Process

MindMed's Capital Efficient Corporate Strategy

Discover	Develop	Deploy
Acquire new chemical entities and other psychedelics through strategic partnerships and collaborations	Take compounds through FDA regulated clinical trials while partnering with pharmaceutical companies	Build strategic alliances with hospitals, research centers, and ultimately insurers that will license our protocols and drugs

The Time Is Now

MindMed Is In A Unique Position At A Catalytic Time In Drug Development History

Our Thesis:

Patients deserve more effective medicine and therapies for mental health and addiction

Untapped Value : Psychedelics have not become medicines due to stigma, not the safety/efficacy profile

Compounding All Of This : Covid-19, Joblessness and the Autonomization Of America

Addressing The Opioid Crisis

18-MC

Time Is Now: Addiction Patients Need New Options

Existing Addiction Treatments Have Led to a $2.5 Trillion Problem[27]

$500+ Billion

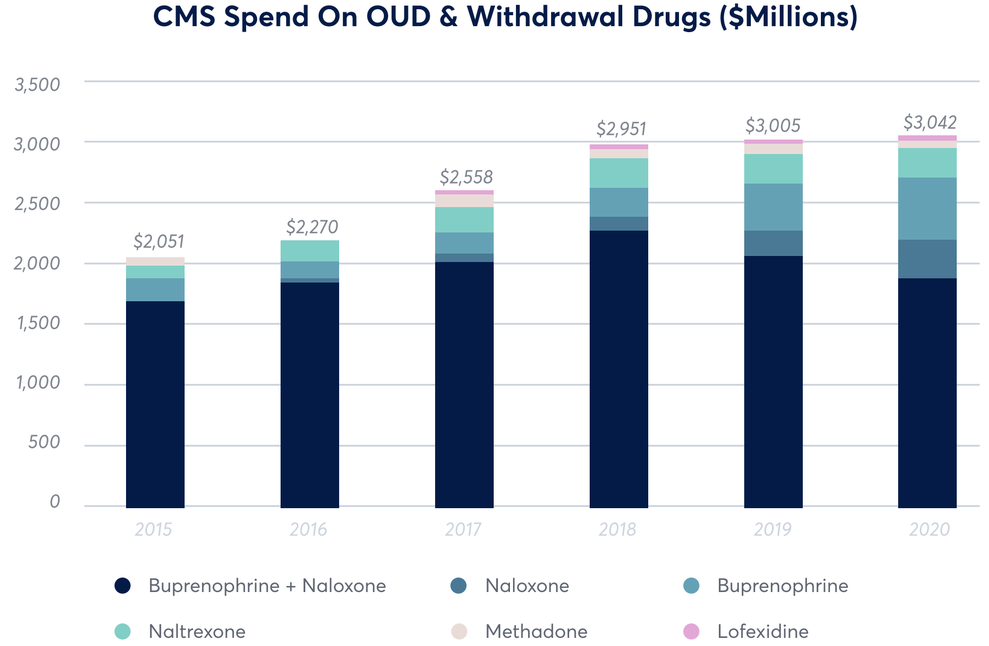
Annual Cost of Opioid Use Disorder (OUD) to the United States[6]

92 M

Amount of People Globally Using Opioids[7]

+395%

Increase in Overdose Deaths Involving Prescription Opioids 1999-2018[3]



Source: US Centers for Medicare & Medicaid Services

The Problem Is Clear

Working Alongside The FDA for Potential Approvals

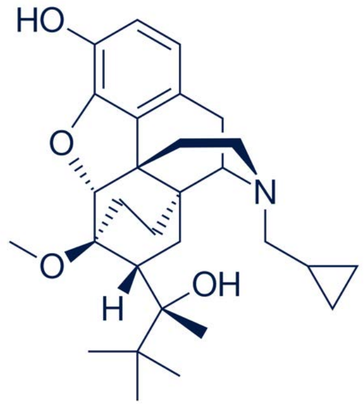
New FDA Incentives for Opioid Treatments

- Accelerated Approval/Breakthrough Designation for development of treatments for opioid use disorders

- **New threshold for approval:**
  Patients can show signs of "fewer occasions per day" rather than total abstinence

91%

Even after 12 weeks of treatment with buprenorphine/naloxone, over 91% of patients relapse when drug therapy is tapered[38]



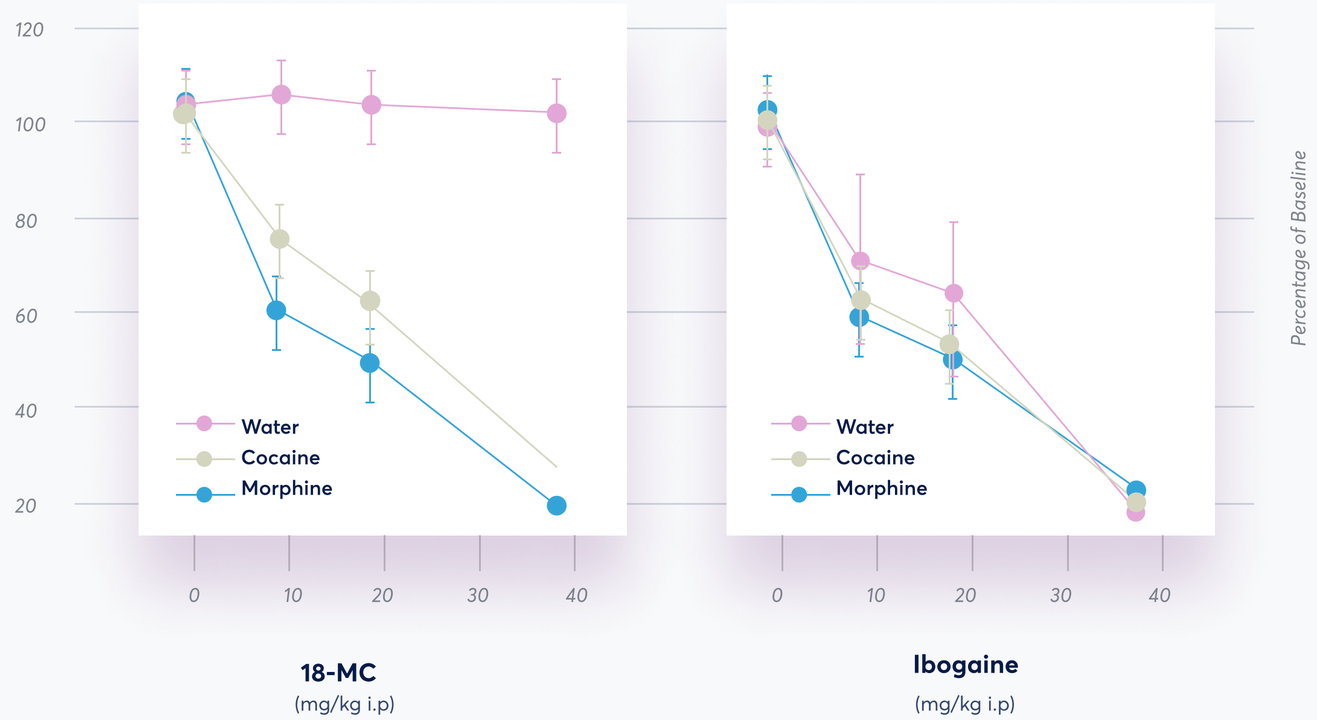
Introducing 18-MC, Next Gen Addiction Therapeutic

18-MC focuses on fixing the problem, rather than covering it up

18-MC works as well as Ibogaine without the harmful side effects: non-hallucinogenic and non-cardiac toxic

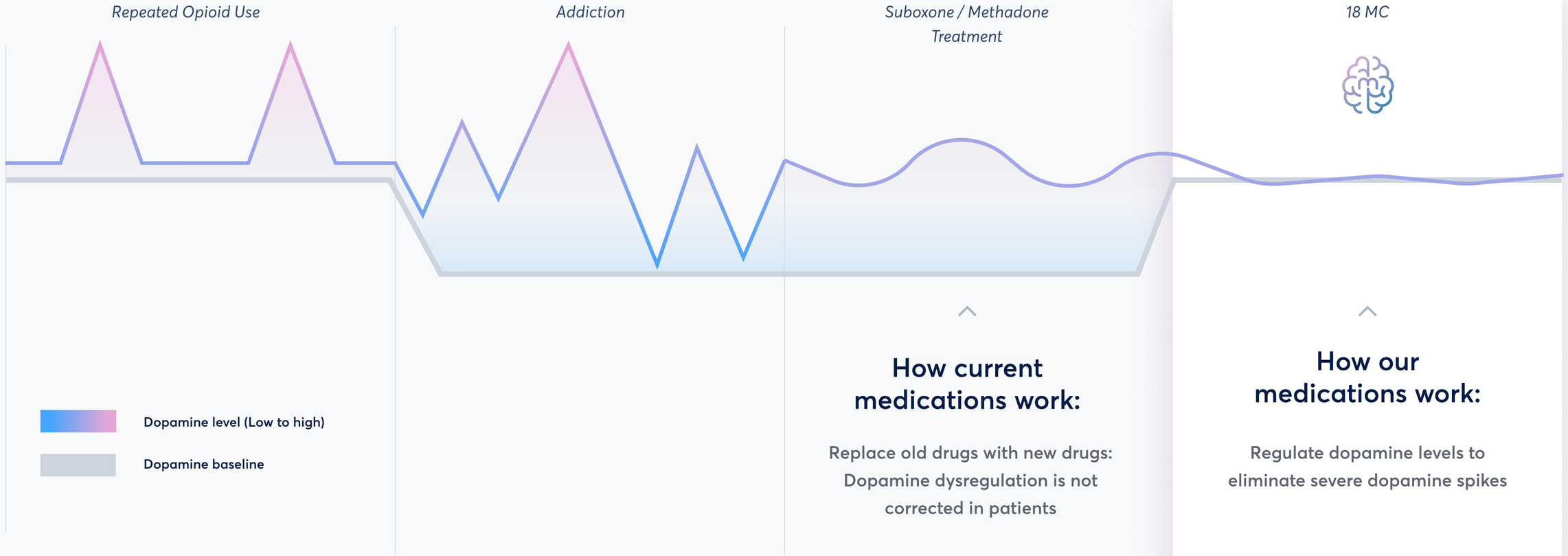
- MindMed intends to apply for BTD for 18-MC, which shortens the timeline for drug development and review by an average of 30%[41]

18-MC has been shown to be safer than Ibogaine



18-MC Approaches Addiction Differently

Addressing Addiction as a Brain Disease



How current medications work:

Replace old drugs with new drugs: Dopamine dysregulation is not corrected in patients

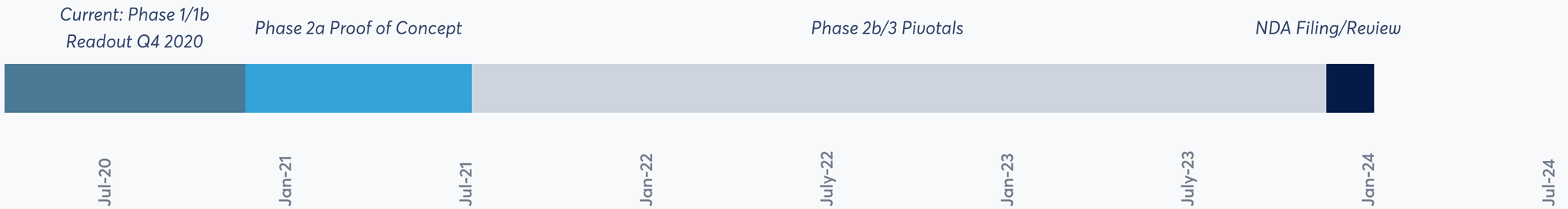
How our medications work:

Regulate dopamine levels to eliminate severe dopamine spikes

18-MC Development Plan

Timeline Overview

18-MC Development Timeline



Phase 2a Trial Design:

Single Ascending Dose: Complete Multiple Ascending Dose: On-going	Phase 2a design is done for withdrawal	Three cohorts: High Dose Low Dose Placebo	Patients will detox for a total of 8-days	32 patients per cohort	**Primary endpoint:** reduction of withdrawal symptoms	**Secondary endpoint:** Successful vivitrol induction prior to discharge

Project Lucy

LSD Assisted Therapy

Next Up: The Xanax Crisis

Serving Those in Need While Breaking Obsolete Stigma

284M

Globally suffer from anxiety[23]

36%

of patients actually seek treatment[15]

MindMed is developing a new approach to treat anxiety that is not a 'pill a day'

Covid-19 Adding Fuel to the Fire

ANTI-ANXIETY PRESCRIPTIONS

+34.1%

Month-over-month increase[20]

XANAX

+14.5%

Year-over-year increase[21]

From Problem Child To Wonder Child

LSD Is Relatively Non-Toxic, Stigma Is More Dangerous

LSD May Be A Safer Alternative:

Safety profiles show LSD to be among the least harmful drugs in the world (Alcohol is most harmful)[42]

Current medications have asymetric Risk:Reward profiles

Benzodiazpines are 2x more dangerous than LSD[42], yet 30 million people are prescribed them[43] every year

LSD is not what you think:
Emergency Department visits involving illicit drugs, 2011[37]

Substance	ED Visits
Cocaine	505,224
Heroin	258,482
Cannabinoids	479,560
Amphetamines	159,840
LSD	**4,819**
% of Total ED Visits	**.34 of ED visits**

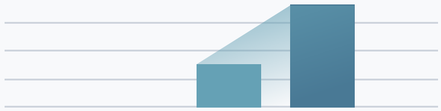
MindMed Acquired Phase 2 Trial

Using Phase 2 Trial To Jumpstart a Potential Phase 2b LSD Trial For Anxiety Disorder

Value through clinical trial acquisitions:

Acquired ongoing Phase 2 Anxiety clinical trial from UHB led by Dr. Peter Gasser & Dr. Matthias Liechti

PRE-DISCOVERY → DISCOVERY → PRE-CLINICAL → PHASE 1 → PHASE 2A → PHASE 2B → PHASE 3



Based on industry averages, this saves roughly $7 to $19.6 million in non-dilutive financing costs and 4+ years of time[28]

LSD Development Plan:

Readout expected Q1 2021

Currently preparing pre-IND meeting and briefing package

Plan to file IND Q2 2021

LSD Microdosing
Testing a Silicon Valley Trend

Backed By Decades of Anecdotal Evidence

Using Sub-perceptual Amounts of LSD (Microdose)

Extensive anecdotal evidence suggests microdosing Psilocybin & LSD may:

- Increase focus
- Decrease anxiety
- Increase creativity
- Improve mood

Sub-perceptual/Non-Hallucinogenic:

- Microdose (Sub-perceptual): 10-25 ug LSD
- Limited rigorous science and clinical trials

Generation Adderall Seeking New Options

Adults raised on stimulants need new options

Math Doesn't Lie: The Problem is Getting Worse

- 10 Million ADHD adult sufferers[24]
- 123% increase in prevalence[25]

And Patients Need an Alternative

- 89.1% not receiving treatment[11]

> "It's 'quite possible' that low doses of LSD could have a stimulant effect by activating dopamine pathways in the brain. Like Adderall and Ritalin, it may excite the cerebral cortex, which controls high-order cognitive functions such as perception and sensation."[44]

DAVID NICHOLS

Professor of Pharmacology at Purdue University, Indiana

LSD Microdosing Phase 2a Clinical Trial

Proof of Concept

Clinical Trial Progress and Details:

- Phase 2a intended to begin late Q4 in Europe
- Low dose LSD (20 mcg) compared with a placebo administered for 6-weeks

Locations

- Maastricht (Netherlands)
- University Hospital Basel (Switzerland)

Entered into a clinical trial agreement with Maastricht University led by Dr. Kim Kuypers

Dr. Matthias Liechti will also serve as an additional Principal Investigator

PHASE 1A | PHASE 1B | PHASE 2A | PHASE 2B | PHASE 3 | APPROVAL

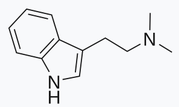
MindMed Discover

MindMed IP & Pipeline Generator In Switzerland

Creating Next-Gen Medicines & Delivery Methods

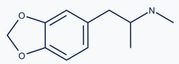
MindMed is working with the Liechti Lab to research and develop next-gen therapies, compounds, and dosing technologies

We have an exclusive license for DMT, MDMA, LSD and Psilocybin

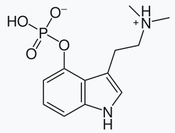


DMT

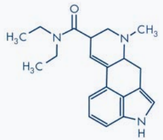
Active ingredient in Ayahuasca



MDMA



PSILOCYBIN



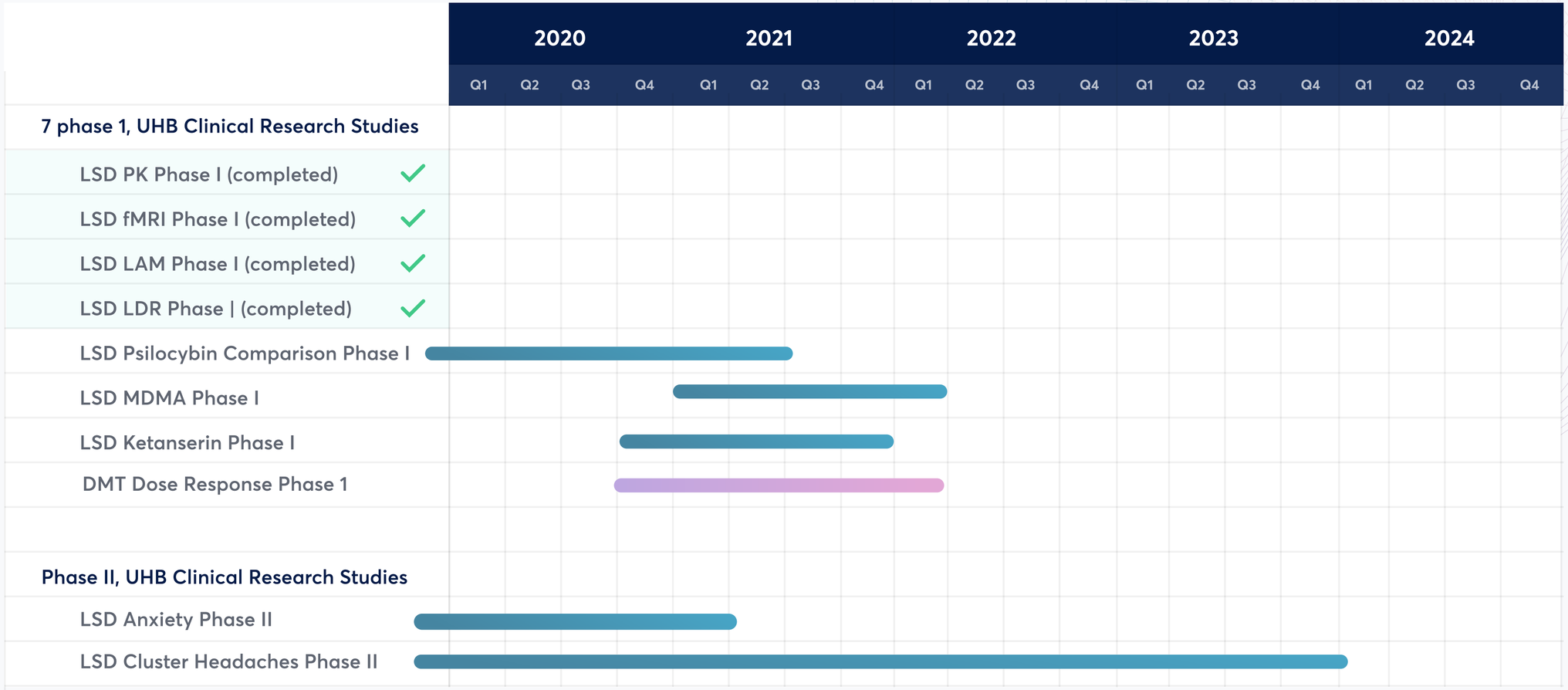
LSD

Universitätsspital Basel

Department of Biomedicine

University Hospital Basel

Exclusive License To Multiple Ongoing Phase 1 Trials



First Ever Clinical Trial Combining LSD & MDMA

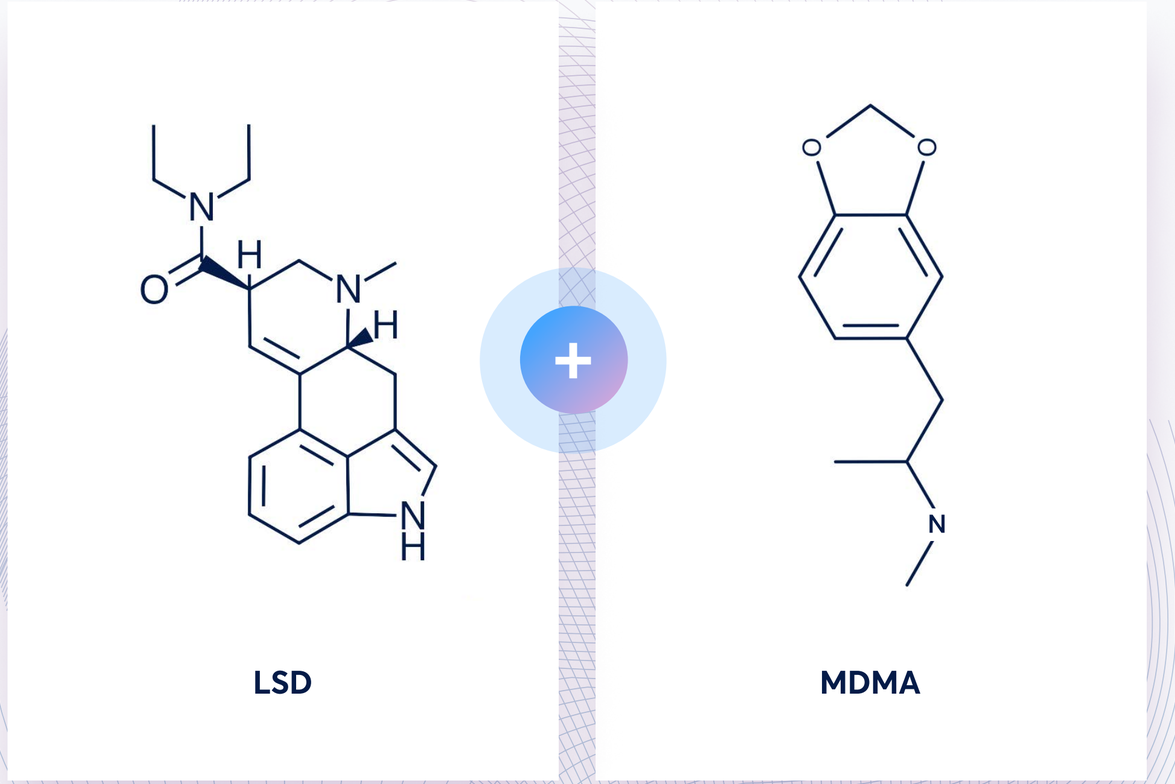
Phase 1 Clinical Trial Evaluating LSD-MDMA Combination

Clinical Trial Progress and Details:

Phase 1 MDMA-LSD trial is scheduled to start in Q4 of 2020 in Basel, Switzerland

Purpose:

Evaluating if LSD & MDMA within the same session produces greater overall positive acute effects when compared to LSD or MDMA on their own



Small Population - Horrific Problem

Phase 2a LSD Trial for "Suicide Headaches"

Clinical Trial Progress and Details:

- Phase 2a began treating patients in Q2 2020
- LSD pulse regimen (3 x 100 µg LSD in three weeks) in 30 patients
- May evaluate a sub-population for orphan drug designation

Potential for Near-term Value:

Orphan drug designation gives companies exclusive marketing and development rights to recoup R&D costs in rare disease treatment

Invaluable & Protectable IP

LSD Neutralizer:

- Shorten and stop LSD trips while giving the patient and therapist control
- MMED and UHB have filed a patent application in the US, which preserves worldwide rights

Personalized dosing:

- Two patent applications covering MDMA dose optimization and LSD dose response - MMED has the exclusive global commercial rights
- Identifying best technologies to implement personlization techniques for patients

Team

JR Rahn

Co-Founder, Director & Co-CEO

JR is a former Silicon Valley tech executive. JR worked in market expansion and operations at Uber. After leaving Uber, he was backed by the Silicon Valley tech accelerator Y Combinator for his company Upgraded.

Stephen L. Hurst, JD

Co-Founder, Executive Chair & Co-CEO

Steve has more than thirty-five years' experience in the biopharmaceutical industry including work for The Immune Tolerance Institute, The Regents of the University of California, The World Bank and BIO Ventures for Global Health.

Dr. Miri Halperin Wernli, PhD

President

Dr. Halperin Wernli previously worked in clinical psychiatry in Swiss academic hospital settings and then held various global senior leadership positions in the pharma and biotech industries in Switzerland and in the US (Merck, Sharp and Dohme, Roche and Actelion pharmaceuticals) covering Product Development, R&D, and Strategic Marketing.

Carol Nast

Chief Operating Officer

Carol has spent her career in executive level positions with large multinational companies and early stage companies in the medical industry. She is a recognized expert in product development and commercialization and has extensive experience in the management of complex, multinational partner programs and has lead successfully the development and commercialization of over 100 products.

Jeanne Bonelle

EVP, Technical Operations

Jeanne has established quality systems within the developmental phase for a wide range of products, including Senior Director of Quality Assurance at Inhale Therapeutic Systems, Inc., (now Nektar Therapeutics, Inc.); Director of Quality Assurance at Cholestech Inc. (now Alere Inc.); Manager of Quality Assurance at BioTrack, (now a subsidiary of Roche Diagnostics GmbH); Manager of Quality Assurance at BioResponse Inc. (now Baxter Health Care).

Dave Guebert

Chief Financial Officer

Dave Guebert is a CPA, qualified in both Alberta and Pennsylvania, and a Member of the Institute of Corporate Directors. He started his career in 1979 at Deloitte where he qualified for his CPA designations. He went on to serve as the Controller for the XV Olympic Winter Games from 1986 to 1988. Since then has taken on increasing senior roles, acting as Chief Financial Officer for a number of public and private companies, primarily in the technology industry.

Donald Gehlert, PhD

Cheif Scientific Officer

Don has extensive experience in drug discovery and expertise in key functional areas of exploratory development and disease biology. During his career at Lilly, Don led or participated in teams that introduced 19 molecules into the Lilly pipeline including both small and large molecule therapies.

Nico Forte

Senior Director, Business Operations and Development

Nico has more than twenty-five years of marketing and business development experience primarily in the biopharma and medical device industries. His background includes B2B agency marketing and communication work for Bristol-Myers and Mead Johnson Oncology divisions as well as business development roles for Inhale Therapeutic Systems, Inc., (now Nektar Therapeutics, Inc.).

Madeline Feldman

Director of Operations & Administration

Madeline has a background supporting startups through corporate innovation and investor relations, fundraising for venture capital funds and non-profit organizations, and building out operational departments in various industries. She has a love for performing arts and works with artists in creating and producing stage shows for major venues and resorts.

Collin Gage

Head of Corporate Development

Collin began his career at Point72 Asset Management. From there, he worked at the Genjiko Family Office. While at Genjiko he was responsible for selecting and researching alternative investments, expansionary efforts, and capital management. Genjiko is the family office of a former Fortune 50 C-Level executive. During this period, Collin also helped co-found a venture capital fund called Presight Capital.

Shahera St. John

Vice President Program Management

Shahera is a senior-level Project Management Professional providing support and leadership to cross-functional teams within biotechnology, pharmaceutical and medical device companies. Versatile experience ranging from design control to pharmaceutical drug development; from formulation screening to product launch and commercialization.

Carol Abel

Program Leader LSD & R&D Programs

Carol is senior director clinical operations: Manage the global Clinical Operations and will support the processes required to ensure proper vendor/alliance management, and operational logistics. This role will interface directly with clinical science, program management supply chain, regulatory affairs, finance, and quality functions to ensure global framework enables flawless regional execution.

Board of Directors

JR Rahn

Co-Founder, Director & Co-CEO

JR is a former Silicon Valley tech executive. JR worked in market expansion and operations at Uber. After leaving Uber, he was backed by the Silicon Valley tech accelerator Y Combinator for his company Upgraded.

Bruce Linton

Director

An Activist Investor with SLANG Worldwide Inc. (CSE:SLNG). Activist Investor with OG DNA Genetics Inc Founder and Former Chairman and CEO of Canopy Growth Corporation (CGC/WEED). Bruce chairs the board's Compensation, Governance and Nomination Committee.

Stephen L. Hurst, JD

Chairman and Co-CEO

Steve has more than thirty-five years' experience in the biopharmaceutical industry including work for The Immune Tolerance Institute, The Regents of the University of California, The World Bank and BIO Ventures for Global Health.

Brigid Makes

Director, Chair of Audit Committee

Served as Senior Vice President and Chief Financial Officer of Miramar Labs. Former CFO for Nektar Therapeutics (formerly Inhale Therapeutics) B.A. in Finance and International Business from McGill University and an M.B.A. from Bentley University. Brigid chairs the board's Audit Committee.

Stanley D. Glick, PhD

Inventor 18-MC, Chair of Scientific Advisory Board

Former Professor of Pharmacology at Mount Sinai School of Medicine. Chaired the pharmacology and neuroscience program at Albany Medical College. Co-inventor of a novel group of agents (iboga alkaloid congeners) for treating drug addiction, including 18-methoxycoronaridine (18-MC).

Dr. Miri Halperin, PhD

President

Dr. Halperin Wernli previously worked in clinical psychiatry in Swiss academic hospital settings and then held various global senior leadership positions in the pharma and biotech industries in Switzerland and in the US (Merck, Sharp and Dohme, Roche and Actelion pharmaceuticals) covering Product Development, R&D, and Strategic Marketing.

Perry Dellelce

Director

Managing partner of Wildeboer Dellelce LLP. Chair of the NEO Exchange, Canada's newest stock exchange. Board Member of Mount Logan Capital Inc. and Lendified Inc.

Scientific Advisory Board

Stanley D. Glick, PhD

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Professor of Psychiatry NYU Langone

Kenneth Alper, MD

Clinical Associate Professor of Psychiatry and Neurology

Sarah McCallum, PhD

Associate Professor of Neuroscience and Experimental Therapeutics

Matthew W. Johnson, Ph.D

Professor at Johns Hopkins

Jed Rose, PhD

Professor in Psychiatry and Behavioral Sciences at Duke University

John Blacker, PhD

Professor of Process Chemistry, University of Leeds

Natalie Wheeler, PhD

Medical Science Liaison with Dova Pharmaceuticals

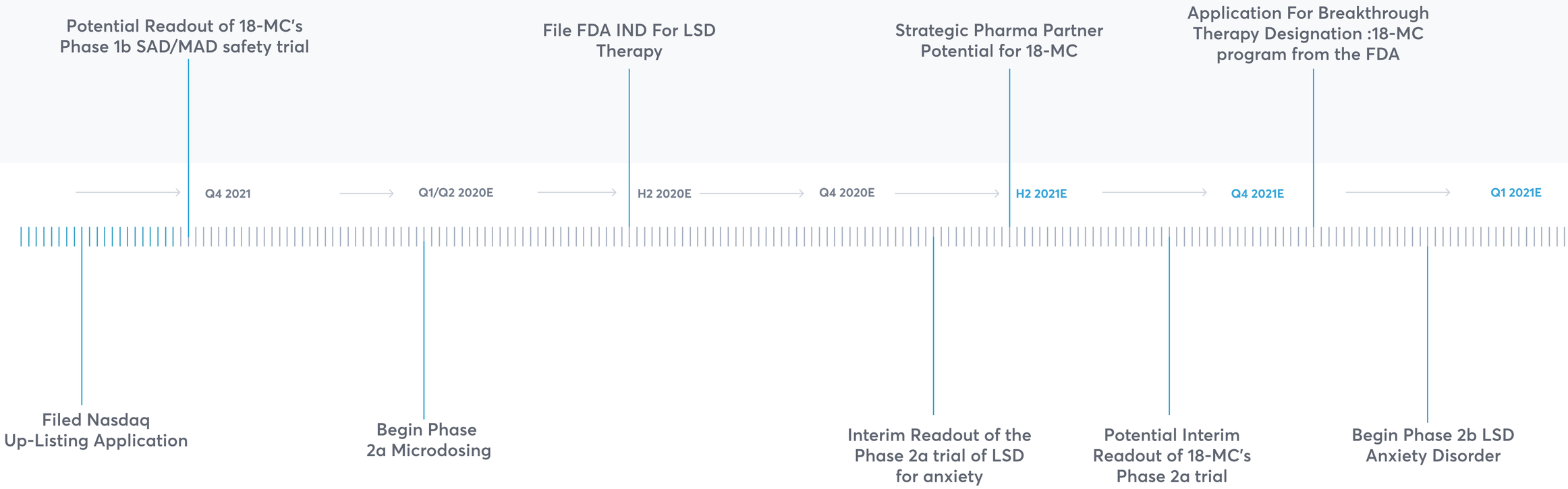
Eric Edwards, MD, PhD

Co-founder and Member, Board of Directors at Kaleo, Inc.

Near Term Inflection Points For MMED

MindMed Is Capitalizing On Opportunity

Inflection Points:



NEO: MMED // OTCQB: MMEDF // DE: MMQ

First Publicly Listed Psychedelic Pharma company

Fully Diluted Cap Table		
Executive Team/ Directors/ Insiders	76,716,041	23.7%
Non-insider shares	207,011,335	64.1%
Equity Incentive Plan (Issued)	22,172,500	5%
Equity Incentive Plan (Non-Issued)	6,172,738	1.9%
Number of Shareholders	22,500	
Outstanding Warrants (12m, excercisable at .79 (CAD), 4m comp warrants at .53 (CAD)	17,201,038	5.3%
Total	323,100,913	100%

Market Cap CAD: $223 million September 22nd (.69 price per share)
Market Cap USD: $165 million September 22nd (.51 price per share)

$40M

USD Raised to date

Strong investor backing

- Seed Round Aug '19: $6.2m USD
- Pre-Public Feb '20: $24m USD
- Bought Deal Financing
  May '20: $10m USD

Appendix

Treasure Trove of Data

Broadest Clinical Development Program Making an Attractive Multinational Pharma Partner

Study	18-MC for Addiction	LSD for Anxiety	LSD for Cluster Headaches	LSD for Adult ADHD	MDMA + LSD	DMT
Stage	Phase 1/ 1b	Phase 2a	Phase 2a	Phase 2a	Phase 1	Phase 1
Objective	Safety	Efficacy	Efficacy	Efficacy	Safety & Dosing	safety and dosing
Start Date	Q2/2020	Q2/17	Q1/19	Q4/20	Q1/21	Q4/20
Complete Date (est)	Q4/2020	Q2/21	Q4/23	Q4/22	Q1/22	Q4/21
Trial Site(s)	Australia	P. Gasser private practice (Switzerland), UHB	UHB	Maastricht University (Netherlands), UHB	UHB	UHB
Investigator(s)	Dr. Sam Salman	Dr. Peter Gasser	Dr. Matthias Liechti	Dr. Kim Kuypers and Dr. Matthias Liechti	Dr. Matthias Liechti	Dr. Matthias Liechti
Number of Participants	56	40	30	~75	23	30
Enrollment Criteria	Aged between 18 to 55 years	Suffering from anxiety (over 25 years old)	Chromic or episodic cluster headaches (age 25-75)	Suffering from Adult ADHD	Healthy volunteers (age 25-65)	Healthy volunteers (age 25-65)
Study Design	Double-Blind, Randomized, Placebo-Controlled	Randomized, double-blind, placebo-controlled, 2-period crossover	Randomized, double-blind, placebo-controlled, 2-period crossover	Randomized, double-blind, placebo-controlled	Randomized, double-blind, placebo-controlled, 4-period crossover	Randomized, double-blind, placebo-controlled, 5-period crossover
Arms	SAD & MAD	Single oral dose of 200ug vs placebo (twice each separated by 6 weeks)	Oral LSD pulse regimen (3 x 100ug LSD in three weeks) vs placebo	LSD oral dose of 12.5ug vs 25.0ug vs placebo (dosed every 4 days)	99ug LSD + MDMA placebo LSD placebo +100mg MDMA 100ug LSD +100mg MDMA LSD placebo +MDMA placebo	54, 69, 90 or 115 mg DMT via IV bolus +- maintenance perfusion over 90min vs placebo
Time Frame	6 months duration	Follow-up at 16 weeks	Follow-up at 8 weeks	3 months duration	Four doses over 12-months	Assess at 150min
Primary Endpoint	Safety and tolerability of a single day dosing and a separate multiple day dosing of 18-MC HCl administered orally	Reduction in anxiety assessed by questionairres	Change in frequency and intensity of attacks assessed with a standardized headache diary	Increased focus and psychiatric evolutions	Subjective effects: VAS1, AMRS2, 5D-ASC3 Autonomic effects: blood pressure, heart rate, body tempurature	Subjective effects: 5D-ASC, SES4

Mindmed in the News

THE WALL STREET JOURNAL.

Psychedelics-Drug Startup Raises $24 Million Ahead of IPO . February 27, 2020

Bloomberg

Move Over, Pot: Psychedelic Companies Are About to Go Public. Mind Medicine plans to list on Toronto's NEO Exchange in March

BUSINESS INSIDER

"A startup that wants to use psychedelics to treat addiction just raised $6.2 million from the host of. Shark Tank and the architect behind the world's. biggest cannabis grower"

FAST COMPANY

"This could save lives, cure depression, help alcoholism, get people off opioids—why wouldn't I want to be invested?" -Kevin O' Leary

Investing.com

"Next big space in the pharmaceutical sector – next-generation psychedelic-inspired medicines."

FORTUNE

Psychedelic drugs may transform mental health care. And big business is ready to profit from the revolution. February 17, 2020

Forbes

"…But perhaps the most compelling case for the company is the real and pressing need for aneffective anti-addiction solution in a country ravaged by the opioid crisis."

TOWN&COUNTRY

"The evidence for psychedelics as medicine is far greater than that for CBD, which companies are selling to relieve ills from Parkinson's to Crohn's."

MindMed named one of 36 startups that could change the world

Sources

1. Anxiety and Depression Association of America, Facts & Statistics,
2. Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD),
3. Overdose Death Rates. (2020, August 25). National Institute on Drug Abuse. https://www.drugabuse.gov/drug-topics/trends-statistics/overdose-death-rates#:%7E:text=Drug%20overdose%20deaths%20involving%20prescription,(Source%3A%20CDC%20WONDER).
4. The National Institute of Mental Health, Prevalence of Major Depressive Episode Among Adults
5. Goldman Sachs. (2019, May). Americas Healthcare: Pharmaceuticals.
6. IQVIA. (2020, June). IQVIA Global Annual Sales Report.
7. Azadfard M, Huecker MR, Leaming JM. Opioid Addiction. [Updated 2020 Aug 14]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2020 Jan-. Available from: https://www.ncbi.nlm.nih.gov/books/NBK448203/
8. The Council of Economic Advisers (CEA), The Underestimated Cost of the Opioid Crisis, November 2017
9. SAMSA, Results from the 2018 National Survey on Drug Use and Health
10. Doshi, J. A., Hodgkins, P., Kahle, J., Sikirica, V., Cangelosi, M. J., Setyawan, J., Erder, M. H., & Neumann, P. J. (2012). Economic Impact of Childhood and Adult Attention-Deficit/Hyperactivity Disorder in the United States. Journal of the American Academy of Child & Adolescent Psychiatry, 51(10), 990-1002.e2. https://doi.org/10.1016/j.jaac.2012.07.008
11. Kessler, R. C., Adler, L., Barkley, R., Biederman, J., Conners, C. K., Demler, O., Zaslavsky, A. M. (2006). The Prevalence and Correlates of Adult ADHD in the United States: Results from the National Comorbidity Survey Replication. American Journal of Psychiatry. 163, 716-723. doi:10.1176/appi.ajp.163.4.716. Retrieved from: https://ajp.psychiatryonline.org/doi/full/10.1176/ajp.2006.163.4.716?url_ver=Z39.88-2003&rfr_id=ori:rid:crossref.org&rfr_dat=cr_pub%3dpubmed
12. Chung W, Jiang S, Paksarian D, et al. Trends in the Prevalence and Incidence of Attention-Deficit/Hyperactivity Disorder Among Adults and Children of Different Racial and Ethnic Groups. JAMA Netw Open. 2019;2(11):e1914344. doi:https://doi.org/10.1001/jamanetworkopen.2019.14344
13. Konnopka, A., & König, H. (2020). Economic Burden of Anxiety Disorders: A Systematic Review and Meta-Analysis. PharmacoEconomics, 38(1), 25–37. https://doi.org/10.1007/s40273-019-00849-7
14. Bandelow, Borwin, and Michawlis, Sophie. "Epidemiology of anxiety disorders in the 21st century." Dialogues in Clinical Neuroscience, Sep 2015, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4610617/
15. ADAA. (n.d.). Facts & Statistics. Https://Adaa.Org/. Retrieved June 25, 2020, from https://adaa.org/about-adaa/press-room/facts-statistics#:~:text=Anxiety%20disorders%20are%20the%20most,of%20those%20suffering%20receive%20treatment.
16. Hirschler, B. (2013, January 3). Analysis: Entering the age of the $1 million medicine. U.S. https://www.reuters.com/article/us-rarediseases/analysis-entering-the-age-of-the-1-million-medicine-idUSBRE9020C120130103
17. Wei, D. Y., Yuan Ong, J. J., & Goadsby, P. J. (2018). Cluster Headache: Epidemiology, Pathophysiology, Clinical Features, and Diagnosis. Annals of Indian Academy of Neurology, 21(Suppl 1), S3–S8. https://doi.org/10.4103/aian.AIAN_349_17
18. Elli Lilly. (2018, January). Migraine Impact Report. https://www.multivu.com/players/English/8259051-lilly-migraine-impact-report/docs/ExecutiveSummary_1516320372594-121193785.pdf
19. Eight Capital. (2020, April). Taking a trip into commercializing psychedelic medicine.
20. Petersen, A. (2020, May 25). More People Are Taking Drugs for Anxiety and Insomnia, and Doctors Are Worried. WSJ. https://www.wsj.com/articles/more-people-are-taking-drugs-for-anxiety-and-insomnia-and-doctors-are-worried-11590411600
21. IQVIA. (2020a, April). IQVIA 2020 Drug Sales Report. https://analyticslink.customerportal.iqvia.com/app/#/
22. Delveinsight. (2020, January). Market Insights, Epidemiology, and Market Forecast—2030.
23. Ritchie, H. (2018, January 20). Mental Health. Our World in Data. https://ourworldindata.org/mental-health#:%7E:text=Globally%20an%20estimated%20284%20million,experience%20anxiety%20disorders%20than%20men.
24. The National Institute of Mental Health Information Resource Center, Prevalence and correlates of prescription stimulant use, misuse, use disorders, and motivations for misuse among adults in the U.S.
25. Chung W, Jiang S, Paksarian D, et al. Trends in the Prevalence and Incidence of Attention-Deficit/Hyperactivity Disorder Among Adults and Children of Different Racial and Ethnic Groups. JAMA Netw Open. 2019;2(11):e1914344. doi:10.1001/jamanetworkopen.2019.14344
26. Faraone SV., Spencer TJ., Montano CB., Biederman J. (2004). Attention-Deficit/Hyperactivity Disorder in Adults: A Survey of Current Practice in Psychiatry and Primary Care. Arch Intern
27. Med.164(11):1221–1226. doi:10.1001/archinte.164.11.1221. Retrieved from: https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/217065,
28. Schuman, M. C. H. A. M. (2020, August 18). Multiple states say the opioid crisis cost American economy over $2 trillion. CNN. https://edition.cnn.com/2020/08/18/us/opioid-crisis-cost-united-state-2-trillion-dollars/index.html
29. Sertkaya, A., Wong, H. H., Jessup, A., & Beleche, T. (2016). Key cost drivers of pharmaceutical clinical trials in the United States. Clinical trials (London, England), 13(2), 117–126. https://doi.org/10.1177/1740774515625964
30. Roth Leads $26.9 Million Project to Create Better Psychiatric Medications — News Room - UNC Health and UNC School of Medicine. (2020, June). Http://News.Unchealthcare.Org/. http://news.unchealthcare.org/news/2020/june/roth-leads-26-9-million-project-to-create-better-psychiatric-medications
31. Johns Hopkins Launches Center For Psychedelic Research. (2019, September 4). Johns Hopkins Medicine Newsroom. https://www.hopkinsmedicine.org/news/newsroom/news-releases/johns-hopkins-launches-center-for-psychedelic-research
32. Databridge Market Research. (2020, January). U.S. Psychedelic Drugs Market is Expected to Grow at 16.3% in the Forecast Period of 2020 to 2027.
33. NEO Stock Exchange. (2020, May). The Report on Psychedelics Volume 1. https://reportonpsychedelics.com/report2020/
34. Gasser, P., Holstein, D., Michel, Y., Doblin, R., Yazar-Klosinski, B., Passie, T., & Brenneisen, R. (2014). Safety and efficacy of lysergic acid diethylamide-assisted psychotherapy for anxiety associated with life-threatening diseases. The Journal of nervous and mental disease, 202(7), 513–520. https://doi.org/10.1097/NMD.0000000000000113
35. Henning, E. H. (2020, August). Magic Mushroom Drug-Backer Compass Pathways Files for U.S. IPO. Bloomerg.Com. https://www.bloomberg.com/tosv2.html?vid=&uuid=29ea47e0-f442-11ea-9abd-73452a178f4f&url=L25ld3MvYXJ0aWNsZXMvMjAyMC0wOC0yOC9tYWdpYy1tdXNocm9vbS1kcnVnLWJhY2tlci1jb21wYXNzLXBhdGh3YXlzLWZpbGVzLWZvci11LXMtaXBv
36. Stockhouse. (2019, August). Why Psychedelics Look like the Next Billion-Dollar Business. Stockhouse.Com. https://stockhouse.com/news/newswire/2019/08/23/why-psychedelics-look-like-next-billion-dollar-business
    Sidney Cohen, S. C. (1960). Lysergic acid diethylamide - Side effects and Complications. The Journal of Nervous and Mental Disease
37. U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES. (2013, May). Drug Abuse Warning Network, 2011: National Estimates of Drug-Related Emergency Department Visits. https://www.samhsa.gov/data/sites/default/files/DAWN2k11ED/DAWN2k11ED/DAWN2k11ED.pdf
38. (Weiss et al. (2011). Archives of general psychiatry, 68(12), 1238–1246).
39. DMAP. (2020). THE CONSEQUENCES OF COVID-19 ON THE OVERDOSE EPIDEMIC: OVERDOSES ARE INCREASING. HIDTA. http://www.odmap.org/Content/docs/news/2020/ODMAP-Report-May-2020.pdf
40. Hosseinbor, M., Yassini Ardekani, S. M., Bakhshani, S., & Bakhshani, S. (2014). Emotional and social loneliness in individuals with and without substance dependence disorder. International journal of high risk behaviors & addiction, 3(3), e22688. https://doi.org/10.5812/ijhrba.22688
41. Canaccord Genuity. (2020, September). Open your mind to a new kind of medicine. Canaccord Genuity Capital Markets.
42. Nutt, David & King, Leslie & Phillips, Lawrence. (2010). Drug harms in the UK: A multi-criterion decision analysis. Lancet. 376.
43. Research suggests benzodiazepine use is high while use disorder rates are low. (2020, May 5). National Institute on Drug Abuse. https://www.drugabuse.gov/news-events/science-highlight/research-suggests-benzodiazepine-use-high-while-use-disorder-rates-are-low
44. Solon, O. (2019, May 21). Under pressure, Silicon Valley workers turn to LSD microdosing. WIRED UK. https://www.wired.co.uk/article/lsd-microdosing-drugs-silicon-valley

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