Aprea Therapeutics Announces Presentation at the 36th Annual J.P. Morgan Healthcare Conference in San Francisco

January 4, 2018

January 4, 2018 —BOSTON, MA., and STOCKHOLM, SWEDEN, January 4, 2018 – Aprea Therapeutics, a privately held, clinical stage biopharmaceutical company developing novel anticancer therapies targeting the tumor suppressor protein p53, today announced that Christian S. Schade, President & Chief Executive Officer, is scheduled to present a company update and overview at the 36th Annual J.P. Morgan Healthcare Conference at 7:30a.m. PT on Wednesday, January 10, 2018 at the Westin St. Francis Hotel in San Francisco, CA.

About Aprea Therapeutics

Aprea Therapeutics is a Boston, Massachusetts- and Stockholm, Sweden-based biopharmaceutical company focused on the discovery and development of novel anticancer compounds that reactivate the tumor suppressor protein, p53. The Company's lead drug candidate is APR-246, a first-in-class small molecule in Phase II clinical development for platinum-sensitive high-grade serious ovarian cancer. Four additional Phase Ib/II clinical studies with APR-246 are underway in: platinum-resistant high-grade serious ovarian cancer; myelodysplastic syndrome (MDS); esophageal cancer; and melanoma. Aprea is also developing second generation p53 reactivators that have best-in-class potential. In March 2016, Aprea completed a EUR 46 million Series B financing with an international syndicate co-led by Versant Ventures and 5AM Ventures, with additional participation by Sectoral Asset Management, HealthCap, acting as local lead investor, and existing investor, Karolinska Development. For more information, please visit www.apreatherapeutics.com.

About p53 and APR-246

The p53 tumor suppressor gene is the most frequently mutated gene in human cancer, occurring in approximately 50% of all human tumors. These mutations are often associated with resistance to anti-cancer drugs and poor overall survival, representing a major unmet medical need in the treatment of cancer. Some cancers, including melanoma, express wild-type p53 that is nonetheless inactivated and non-functional.

APR-246 has been shown to reactivate mutant and inactivated p53 protein – by restoring wild-type p53 conformation and function – and thereby induce programmed cell death in human cancer cells. APR-246 has demonstrated pre-clinical anti-tumor activity in a wide variety of solid and hematological (blood) tumors, including ovarian cancer, small cell lung cancer, esophageal cancer and acute myeloid leukemia (AML), among others. Additionally, strong synergy has been seen with both traditional anti-cancer agents, such as chemotherapy, as well as newer mechanism-based anti-cancer drugs and immuno-oncology checkpoint inhibitors. In addition to pre-clinical testing, a Phase I/Ib clinical program with APR-246 has been completed, demonstrating a favorable safety profile and both biological and confirmed clinical responses in hematological malignancies and solid tumors with mutations in the p53 gene. APR-246 is currently being tested in a randomized Phase II study in platinum-sensitive ovarian cancer as well as multiple Phase Ib/II studies in other indications.

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