Investor Relations

Armata Pharmaceuticals Announces Key Opinion Leader Webinar on S. aureus Bacteremia and AP-SA02 Hosted by Jones Research on November 25th at 10:00am EST

LOS ANGELES, Nov. 18, 2025 /PRNewswire/ -- Armata Pharmaceuticals, Inc. (NYSE American: ARMP) ("Armata" or the "Company"), a clinical-stage biotechnology company focused on the development of high-purity, pathogen-specific bacteriophage therapeutics for the treatment of antibiotic-resistant and difficult-to-treat bacterial infections, today announced that the Company will be featured in a key opinion leader (KOL) webinar, "*Redefining SoC in Complicated Staph. aureus Bacteremia to Unlock a Real Opportunity*" on November 25th, 2025 at 10:00am EST. Interested parties may register for the event here.

The webinar, which is hosted by Jones Research and Senior Research Analyst, Debanjana Chatterjee, PhD, will feature prominent infectious disease specialist Dr. Vance G. Fowler, Jr., MD, from Duke University School of Medicine. Dr. Fowler will discuss the complicated *Staphylococcus aureus* ("*S. aureus*") bacteremia ("SAB") landscape and the potential of Armata's phage therapy, AP-SA02.

Armata highlighted positive results from its diSArm study of AP-SA02 as a potential treatment for SAB in a late-breaking oral presentation at IDWeek 2025™ in October:

- The diSArm study was a Phase 1b/2a, multicenter, randomized, double-blind, placebo-controlled, multiple ascending dose escalation study of the safety, tolerability, and efficacy of intravenous AP-SA02 in addition to best available antibiotic therapy ("BAT") compared to BAT alone (placebo) for the treatment of adults with complicated SAB.

- The primary clinical efficacy endpoint for the Phase 2a portion of the diSArm study was clinical outcome (responder rate) in subjects with complicated bacteremia, measured at (i) Test of Cure ("TOC") for AP-SA02, defined as one week following the end of IV treatment with AP-SA02 (day 12), (ii) TOC for BAT, defined as one week following the end of IV BAT, and (iii) end of study ("EOS"), defined as four weeks following the end of IV BAT.

- AP-SA02 combined with BAT had a higher and earlier cure rate compared to placebo (BAT alone) in patients with complicated SAB at TOC as assessed by both blinded site investigators and independent adjudicators. Additionally, patients who received AP-SA02 demonstrated a 100% response rate without relapse at TOC for BAT and 28 days later at EOS when compared to the placebo (BAT alone) group which showed an approximate 25% lack of response or relapse rate at both timepoints.

- AP-SA02 was well-tolerated with clinical efficacy against both methicillin-resistant *S. aureus* ("MRSA") and methicillin-sensitive *S. aureus* ("MSSA"), and patients treated with AP-SA02 showed trends toward rapid normalization of key predictors of mortality and complications in SAB including C-reactive protein and interleukin-10, shorter time to negative blood culture, quicker time to resolution of signs and symptoms at the infection site, and shorter intensive care unit and hospital utilization.

Dr. Vance G. Fowler, Jr., MD
Dr. Fowler is the Florence McAlister Distinguished Prof. of Medicine and Prof. of Molecular Genetics and Microbiology at Duke University. He is the Contact PI of the Antibacterial Resistance Leadership Group (ARLG). He created the *S. aureus* Bacteremia (SAB) Group, one of the world's largest prospective biorepositories of SAB. He is co-founder of the International Collaboration on Endocarditis (ICE), and published the critical observation that *S. aureus* is now the leading cause of endocarditis in the industrialized world. He was lead author on the Phase 3 trial that led to the FDA indication of daptomycin for SAB (Fowler, NEJM 2006), on the multinational trial of Merck V710 vaccine for *S. aureus* (Fowler, JAMA 2013), and on the Phase 2 trial (Fowler, J Clin Invest 2020) and Phase 3 trial (DISRUPT; Fowler, CID 2024) of bacteriophage-derived lysin (Exebacase) for *S. aureus* bacteremia. He was senior author on the recently completed Phase 3 of ceftobiprole for SAB (Holland, NEJM 2023). He has over 350 peer reviewed publications, over 33,000 citations, and a Web of Science h-index of 89.

About Armata Pharmaceuticals, Inc.
Armata is a clinical-stage biotechnology company focused on the development of high-purity pathogen-specific bacteriophage therapeutics for the treatment of antibiotic-resistant and difficult-to-treat bacterial infections using its proprietary bacteriophage-based technology. Armata is developing and advancing a broad pipeline of natural and synthetic phage candidates, including clinical candidates for *Pseudomonas aeruginosa, Staphylococcus aureus*, and other important pathogens. Armata is committed to advancing phage therapy with drug development expertise that spans bench to clinic including in-house phage-specific current Good Manufacturing Practices ("cGMP") manufacturing to support full commercialization.

Forward Looking Statements

This communication contains "forward-looking" statements as defined by the Private Securities Litigation Reform Act of 1995. These statements relate to future events, results or to Armata's future financial performance and involve known and unknown risks, uncertainties and other factors which may cause Armata's actual results, performance or events to be materially different from any future results, performance or events expressed or implied by the forward-looking statements. In some cases, you can identify these statements by terms such as "anticipate," "believe," "could," "estimate," "expect," "intend," "may," "plan," "potential," "predict," "project," "should," "will," "would" or the negative of those terms, and similar expressions. These forward-looking statements reflect management's beliefs and views with respect to future events and are based on estimates and assumptions as of the date of this communication and are subject to risks and uncertainties including risks related to Armata's development of bacteriophage-based therapies; ability to staff and maintain its production facilities under fully compliant cGMP; ability to meet anticipated milestones in the development and testing of the relevant product; ability to be a leader in the development of phage-based therapeutics; ability to achieve its vision, including improvements through engineering and success of clinical trials; ability to successfully complete preclinical and clinical development of, and obtain regulatory approval of its product candidates and commercialize any approved products on its expected timeframes or at all; and Armata's estimates regarding anticipated operating losses, capital requirements and needs for additional funds. Additional risks and uncertainties relating to Armata and its business can be found under the caption "Risk Factors" and elsewhere in Armata's filings and reports with the U.S. Securities and Exchange Commission (the "SEC"), including in Armata's Annual Report on Form 10-K, filed with the SEC on March 21, 2025, and in its subsequent filings with the SEC.

Armata expressly disclaims any obligation or undertaking to release publicly any updates or revisions to any forward-looking statements contained herein to reflect any change in Armata's expectations with regard thereto or any change in events, conditions or circumstances on which any such statements are based.

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