Damora Therapeutics to Present New Preclinical Data Highlighting Potentially Best-in-Class Pan-Mutant Activity of DMR-001 in Mutant Calreticulin (mutCALR)-driven Myeloproliferative Neoplasms (MPN) at the American Society of Hematology (ASH) 2026 Annual Meeting

November 4, 2026

-- Building on previously presented DMR-001 preclinical data in Type 1 and Type 2 CALR mutations, new data to highlight strong activity against additional non-Type 1 mutations --

-- Trial-in-progress presentation to highlight the ongoing CLARITY-101 Phase 1/1b trial of DMR-001 in mutCALR-driven essential thrombocythemia (ET) and myelofibrosis (MF) --

WALTHAM, Mass., Nov. 04, 2026 (GLOBE NEWSWIRE) -- Damora Therapeutics, Inc. (NASDAQ: DMRA), a biotechnology company working to fundamentally redefine care for patients with blood disorders, today announced the acceptance of preclinical data highlighting the best-in-class potential of DMR-001 for poster presentation at the 2026 ASH Annual Meeting and Exposition. DMR-001 is an investigational pan-mutant, long-acting, Fc-null mutCALR therapy currently being evaluated as a potential treatment for patients with mutCALR-driven ET and MF in the CLARITY-101 Phase 1/1b clinical trial.

“Previously presented preclinical data combined with new results expected at the ASH Annual Meeting support DMR-001’s potential to set a new bar for pan-mutant activity in mutCALR-driven myeloproliferative neoplasms,” said Becker Hewes, M.D., Chief Medical Officer of Damora Therapeutics. “At ASH, we will provide insight for the first time on DMR-001’s activity across the breadth of non-Type 1 mutations, including Type 2 and other noncanonical mutations, which together represent nearly half of the overall population with mutCALR-driven disease. These data further strengthen our conviction in DMR-001’s best-in-class potential and reinforce our commitment to rapidly advance ongoing DMR-001 clinical development.”

Previously presented DMR-001 preclinical data highlighted its potentially best-in-class binding affinity and anti-proliferative potency against Type 1 and Type 2 CALR mutations. Building on this dataset, new preclinical data accepted for poster presentation at ASH further demonstrate DMR-001’s pan-mutant activity, with robust inhibition of additional noncanonical, non-Type 1 mutations.

Specifically, in head-to-head preclinical studies versus a reference anti-mutCALR antibody, DMR-001 showed an average 95-fold improvement in anti-proliferative potency against a panel of 10 non-Type 1 CALR mutations, including the Type 2 mutation. Additional preclinical data will be presented at the meeting.

In addition, a trial-in-progress abstract highlighting the ongoing CLARITY-101 Phase 1/1b trial, including the adaptive Bayesian design of the Phase 1 dose escalation portion, was accepted for poster presentation at the ASH meeting. Features including a starting DMR-001 dose of 100 mg once-monthly by subcutaneous injection, a plan for rapid escalation to higher doses, and enrichment enabling cohort backfilling are expected to enable expedited identification of a recommended dose for planned Phase 1b expansion cohorts in multiple ET and MF populations.

DMR-001 ASH Presentations

Presentation title: DMR-001, a clinical-stage mutant calreticulin (mutCALR) targeted therapy for mutCALR-driven myeloproliferative neoplasms, shows potent preclinical activity against type 1 and non-type 1 calreticulin mutations
Session title: Myeloproliferative Syndromes and Chronic Myeloid Leukemia: Basic and Translational: Poster I
Abstract number: 13746
Session date & time: Saturday, December 12, 2026, 5:30 pm – 7:30 pm CT
Location: Hall F

Presentation title: A Phase 1/1b study of DMR-001, a mutant calreticulin (CALR)-targeted antibody in myeloproliferative neoplasms (MPNs) (CLARITY-101): A trial in progress
Session title: Myeloproliferative Syndromes: Clinical and Epidemiological: Poster II
Abstract number: 13906
Session date & time: Sunday, December 13, 2026, 6:00 pm – 8:00 pm CT
Location: Hall F

About DMR-001

DMR-001 is a highly potent, pan-mutant, long-acting monoclonal antibody therapy designed to selectively target mutCALR, a known disease driver in ET and MF. In these diseases, CALR mutations create an abnormal protein that binds to and continuously activates the thrombopoietin receptor (TpoR), driving the uncontrolled blood cell production, clotting and bleeding risk, and bone marrow scarring that characterize these diseases. DMR-001 is designed to block this interaction while leaving normal, wild-type calreticulin untouched, an important distinction intended to minimize off-target effects.

DMR-001 was specifically engineered for highly potent inhibition of both Type 1 and non-Type 1 CALR mutations, including Type 2 CALR mutations. It also incorporates a YTE modification that extends half-life to support optimized target coverage and convenient, infrequent subcutaneous dosing. In addition, DMR-001 features an Fc-null design that eliminates Fc-mediated immune effector function, an approach intended to support a favorable safety profile.

DMR-001 is an investigational therapy and has not been approved by any regulatory authority for any indication.

About mutCALR-driven Myeloproliferative Neoplasms

CALR mutations are the primary disease driver in 25 percent of ET cases and 35 percent of MF cases, representing approximately 42,000 patients in the U.S. alone. These mutations — most commonly a Type 1 deletion or Type 2 insertion in the CALR gene — produce an abnormal protein that continuously switches on blood cell growth signals, driving complications such as blood clots, bleeding, and life-threatening bone marrow fibrosis, as well as debilitating symptoms including fatigue, headaches, problems concentrating, and extremity pain. There are no approved mutCALR-targeted therapies, and the current standard of care in ET and MF primarily relies on symptom-directed treatments that do not address the underlying cause of disease.

About Damora Therapeutics

Damora Therapeutics is an innovative biotechnology company that aims to fundamentally redefine care for patients with blood disorders. We are advancing a new generation of biologics to treat mutant calreticulin-driven myeloproliferative neoplasms, including essential thrombocythemia and myelofibrosis, where there is significant medical need for disease-modifying treatments. With multiple programs with best-in-class potential, our goal is to rapidly bring forward optimized therapies with broad mutation coverage and exceptional convenience to dramatically improve patient outcomes. For more information, visit www.damoratx.com or follow us on LinkedIn.

Forward-Looking Statements

Certain statements in this press release, other than purely historical information, may constitute “forward-looking statements” within the meaning of the federal securities laws, including for purposes of the safe harbor provisions under the United States Private Securities Litigation Reform Act of 1995. Words such as “anticipate,” “believe,” “could,” “expect,” “intend,” “may,” “on track,” “plan,” “potential,” “will,” and similar expressions are intended to identify forward-looking statements. These forward-looking statements include, but are not limited to, express or implied statements relating to the Company’s expectations, hopes, beliefs, intentions or strategies regarding the future of its assets, pipeline and business, including, without limitation, statements regarding the Company’s planned presentations at the 2026 ASH Annual Meeting; the potential of DMR-001, including its best-in-class and pan-mutant potential; the design, conduct, and timing of the CLARITY-101 Phase 1/1b trial, including identification of a recommended dose and planned Phase 1b expansion cohorts; and the Company’s clinical development plans. In addition, any statements that refer to projections, forecasts or other characterizations of future events or circumstances, including any underlying assumptions, are forward-looking statements. These statements are based on management’s current expectations and are subject to risks and uncertainties that could cause actual results to differ materially, including: the risk that preclinical results may not be predictive of clinical results; the Company’s ability to enroll patients and complete clinical trials on expected timelines; the risk that regulatory authorities may delay, condition or not clear the Company’s submissions or trials; the Company’s reliance on third parties, including contract research organizations and manufacturers; the Company’s ability to obtain, maintain and enforce intellectual property rights; competition; the Company’s need for additional capital and the risk that it uses its capital resources sooner than expected; general economic, market and geopolitical conditions; and the other risks described under “Risk Factors” in the Company’s Annual Report on Form 10-K for the year ended December 31, 2025, its Quarterly Report on Form 10-Q for the quarter ended June 30, 2026, and its other SEC filings. Should one or more of these risks or uncertainties materialize, or should any of the Company’s assumptions prove incorrect, actual results may vary in material respects from those projected in these forward-looking statements. Nothing in this press release should be regarded as a representation by any person that the forward-looking statements set forth therein will be achieved or that any of the contemplated results of such forward-looking statements will be achieved. You should not place undue reliance on forward-looking statements in this press release, which speak only as of the date they are made and are qualified in their entirety by reference to the cautionary statements herein. Forward-looking statements speak only as of the date of this press release, and the Company undertakes no obligation to update them except as required by law.

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