Manglovo Health New York, NY 10033

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Industry: Biotechnology, Women's Health

Management:

Mehek Bapna, Founder/CEO, BS NYU, Neuroscience, women's health advocacy & clinical research

Robert Hilgraf, CSO/Head of Medicinal Chemistry, PhD, University of Basel, Chemistry, prev. Director of MedChem at Broad Institute (MIT/Harvard)

Emi Gacaj, Co-Founder/COO, BS Columbia, Evolutionary Biology, founder of national reproductive health organization, The Body Org

Advisory Board:

Reginal Swift, PhD, Founder/CEO Rubix LS

Scientific Advisory Board:

Pernille Ravn, PhD
OB/GYN clinical research at
Odense University Hospital

Number of Employees: 3

Finance:

Accounting/Tax: KPMG

Funding to Date: \$200,000 Non-Equity Crowdfunding: \$30k

SAFEs: \$170,000

Funding Sought: \$1.9M

Use of Funds:

Lead Optimization (0.7M)
IND-Enabling Studies (1.2M)

IP:

Planned: Composition of Matter 2025, Formulation 2026 to be owned by Manglovo, Inc. Represented by Merri Mocken, Brown Rudnick.



Company Description / Background:

Manglovo Health is a biotech startup developing MH-01, a hormone-free, weekly contraceptive pill, improving on a clinically validated compound to reduce side effects & improve convenience for the 151M users of daily hormonal contraceptive pills.

Problem:

Current hormonal contraceptives, used by 21M U.S. women cause undesired mental health effects in 43% of users (Martell et al, 2023), and increased blood clot and breast cancer risks (Lavasseur et al, 2022) (Morch et al, 2017). Daily pills, used by 11M U.S. women have poor adherence, with 31% of users missing doses each month (CDC, 2017).

Solution:

A once-weekly contraceptive pill without hormones. Our parent drug, ormeloxifene, demonstrates an 82% reduction in discontinuation due to side effects compared to hormonal contraceptive pills, and weekly dosing is associated with 90% better adherence. Manglovo is making proprietary, clinically relevant improvements to build on this foundation, enabling on-patent international market entry.

Market:

US serviceable available market of 21M users (CDC, 2017) across three critical segments:

- 13M contraceptive users experiencing undesired side effects or missing pills
- 4.4M adolescents/first-time users particularly vulnerable to mental health side effects & adherence struggles
- 3.6M post-partum women in the US per year, who need breastfeeding-safe options; MH-01 also has potential to reduce postpartum bleeding

South Asia has >30M dissatisfied and postpartum potential users of MH-01 (and a potential expedited regulatory path).

Competition / Competitive Advantage:

Limited hormone-free options exist (IUDs, fertility tracking, barrier methods), each with significant drawbacks. MH-01 is expected to offer a painless, convenient, and highly effective option and has unique potential to ameliorate endometriosis, heavy periods, and post-partum bleeding.

Traction and Progress:

Established C-corporation with experienced management team and clear product development pathway based on existing clinical data for parent drug ormeloxifene, enabling expedited market entry in South Asia followed by the US.

Future Plans and Milestones:

2025: lead optimization (identifying, validating, and patenting IND-candidate), 2026: IND-enabling studies, 2027: South Asia Phase 2/3 Trial, 2028: South Asia Go-To-Market, US Bridge Studies, 2029: US Phase 3 Trial, 2030: US Go-To-Market.

Financial Forecast:

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	2025	2026	2027	2028	2029	2030
Net Revenue	-	-	-	\$45M	\$130M	\$270M
Operating Expenses*	\$800k	\$1.2M	\$5M	\$25M	\$100M	\$100M
Net Income	(\$800k)	(\$1.2M)	(\$5M)	\$20M	\$30M	\$170M

^{*}Includes R&D, G&A, and Capital costs