Bionomics Limited

Creating and developing innovative therapies

Deborah Rathjen
CEO & Managing Director

August 2012

Safe Harbor Statement

Factors Affecting Future Performance

This presentation contains "forward-looking" statements within the meaning of the United States' Private Securities Litigation Reform Act of 1995. Any statements contained in this presentation that relate to prospective events or developments, including, without limitation, statements made regarding Bionomics' development candidates BNC105, BNC210, its licensing agreement with Ironwood Pharmaceuticals, drug discovery programs and pending patent applications are deemed to be forward-looking statements. Words such as "believes," "anticipates," "plans," "expects," "projects," "forecasts," "will" and similar expressions are intended to identify forward-looking statements.

There are a number of important factors that could cause actual results or events to differ materially from those indicated by these forward-looking statements, including risks related to our available funds or existing funding arrangements, a downturn in our customers' markets, our failure to introduce new products or technologies in a timely manner, regulatory changes, risks related to our international operations, our inability to integrate acquired businesses and technologies into our existing business and to our competitive advantages, as well as other factors. Results of studies performed on competitors products may vary from those reported when tested in different settings.

Subject to the requirements of any applicable legislation or the listing rules of any stock exchange on which our securities are quoted, we disclaim any intention or obligation to update any forward-looking statements as a result of developments occurring after the date of this presentation.

Bionomics: Key Facts

KEY STATISTICS (1.8.12)	
ASX Code	BNO
Current Share Price	A$0.29
52 Week High	A$0.655
52 Week Low	A$0.24
Shares on Issue	345.3m
Market Capitalisation	A$100m
Net Cash (30.6.12)	A$17.34m

2 YEAR SHARE PRICE PERFORMANCE

MAJOR SHAREHOLDERS	
Link Traders	11%
Ausbil Dexia	7%
Australian National University	7%
TOP 20 HOLDERS	~59%

BOARD AND MANAGEMENT	
Chris Fullerton	Chairman
Deborah Rathjen	CEO & MD
Errol De Souza	Non-Exec Director
Trevor Tappenden	Non-Exec Director
Emile Andriambeloson	Head of Research Neurofit
Andrew Harvey	VP Drug Discovery
Gabriel Kremmidiotis	VP R&D
Melanie Young	CFO

FY12 Results

- $17.34m cash at 30 June, with net cash inflow $1.29m
- Revenue $6.83m, an increase of 67.9% compared to prior year ($4.07m FY11)
- Loss $3.14m after tax (loss $9.36m after tax in FY11)

Business Model: Targeting Significant Markets

- Developer of innovative small molecule pharmaceuticals with "blockbuster" potential
- Target large markets:
  - ***Cancer (solid tumours)*** >US$10 billion p.a.
  - ***Central Nervous System (CNS)*** ≈US$75 billion p.a.
  - ***Immune Diseases*** >US$46 billion p.a.
- The leading drug candidates within a deep portfolio are:
  - ***BNC105:***
    - All solid cancer tumours
    - Phase II trials targeting renal & ovarian cancers
  - ***BNC210:***
    - Anxiety and depression
    - Recently licenced to Ironwood Pharmaceuticals (IRWD:US)
    - US$345 million in pre-commercial payments
    - Including anticipated US$13 million to January 2014
    - Plus royalty on product sales

Bionomics: Broad Product Pipeline

	DRUG CANDIDATE/PROGRAM	DISCOVERY	PRE-CLINICAL	PHASE I	PHASE II	LICENSEE/PARTNER
CENTRAL NERVOUS SYSTEM	**BNC210** – Anxiety/Depression					Ironwood
	Alpha 7– Alzheimer's Disease, ADHD, schizophrenia					
	GABA-A – Epilepsy					
CANCER	**BNC105** – Renal cancer					
	BNC105 - Mesothelioma					
	BNC105 – Ovarian					
	Undisclosed Kinase					Cancer Therapeutics CRC
	BNO69					
IMMUNE DISEASE	**Kv1.3** – Multiple Sclerosis, Rheumatoid Arthritis, Psoriasis					

Key Compound Early Stage Compound

BNC210: Partnered with Ironwood Pharmaceuticals

The Ironwood BNC210 Partnership:

- Up to US$345 million in upfront, development (clinical trials) and regulatory milestone payments (i.e. all milestone payments are pre-sales).
- Royalty on net sales of products incorporating BNC210.
- US$13 million anticipated to January 2014.
- Ironwood will fund all clinical trials and other development activities.

About Ironwood:

- Specialty pharmaceutical company based in Cambridge, Massachusetts with market capitalisation of US$1.54 Billion. (NASDAQ:IRWD)
- Extensive clinical trial expertise with IBS drug linaclotide, currently under review by both the FDA (September 2012 PDUFA) and the EMA.
- Linaclotide met all 66 US and EU primary & secondary endpoints in four Phase 3 trials.

BNC210: Fewer side-effects expected to be a key product differentiator

COMPETITIVE ADVANTAGES OF BNC210*						
DRUG	NO SEDATION	NO WITHDRAWAL SYNDROME	NO MEMORY IMPAIRMENT	FAST ACTING	NO DRUG/DRUG INTERACTIONS	ONCE-A-DAY DOSING
BNC210	✓	✓	✓	✓	✓	✓
VALIUM	✗	✗	✗	✓	✓	✓
PROZAC	✓	✗	✓	✗	✗	✓
BUSPAR	✗	✓	✓	✗	✓	✗

* Based on preclinical data and results of Phase I trial comparing BNC210 with Lorazepam

BNC210 (IW-2143): Progressing rapidly within Ironwood

Current activities directed towards:

- Increasing understanding of biology
- Undertaking formulation development
- Additional manufacture
- Advancing IND
- Initiating Phase Ib and planning for Phase IIa
- Expanding the preclinical safety program to enable later stage trials
- Initial focus: driving to human proof of concept in anxiety

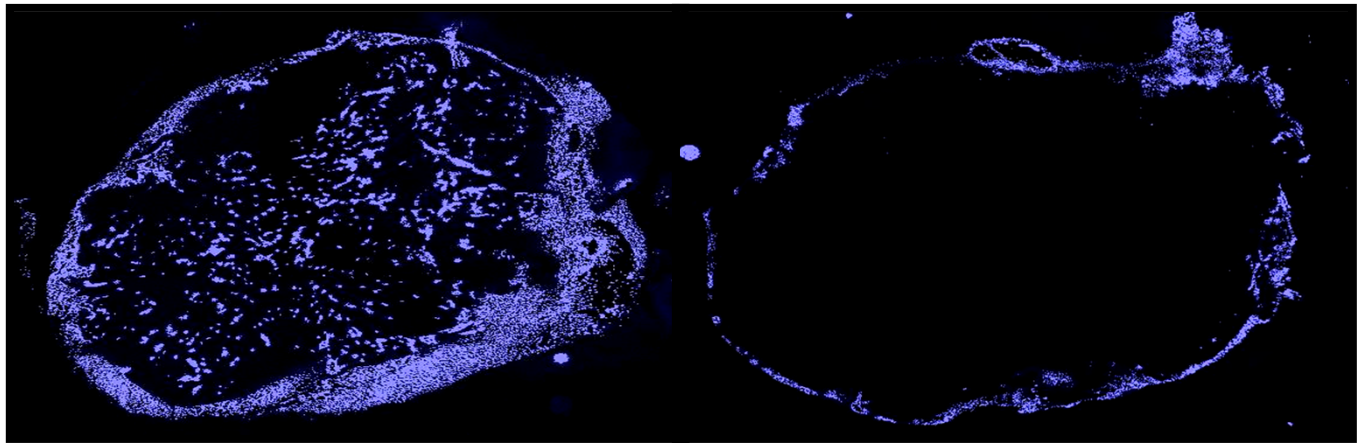
BNC105: "Best in Class" Vascular Disrupting Agent

TREATMENT	Solid Cancers
MODE OF ACTION	▪ Proprietary, novel vascular disruption agent (VDA) ▪ Rapidly shuts down existing & new tumour blood vessels ▪ No impact on normal blood vessels
BENEFITS	▪ ***Dual Action*** – selectively targets both tumour blood vessels and cancer cells, potent action as a single agent ▪ ***Highly Effective*** – works rapidly to shut down tumour blood vessels, tumour less likely to escape treatment ▪ ***Enhances Effectiveness of Other Cancer Treatments*** – delivers synergistic anti-cancer effects in numerous combinations
MARKETS	▪ The current market size in treatment of all solid tumours is >US$10b (Avastin, Genentech/Roche sales >US$5b in 2011)

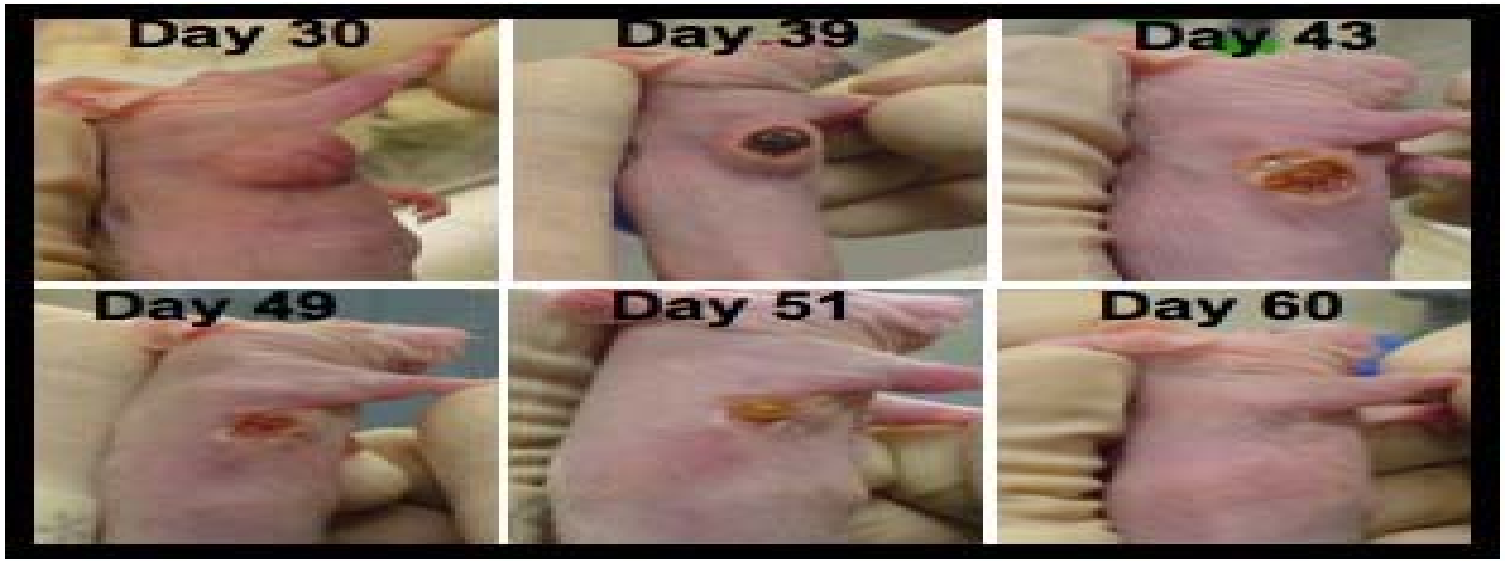
BNC105: Targeting Solid Tumours

By selectively shutting down tumour blood vessels, BNC105 rapidly inhibits tumour growth

untreated



BNC105 treated



BNC105: Multiple Cancer Targets

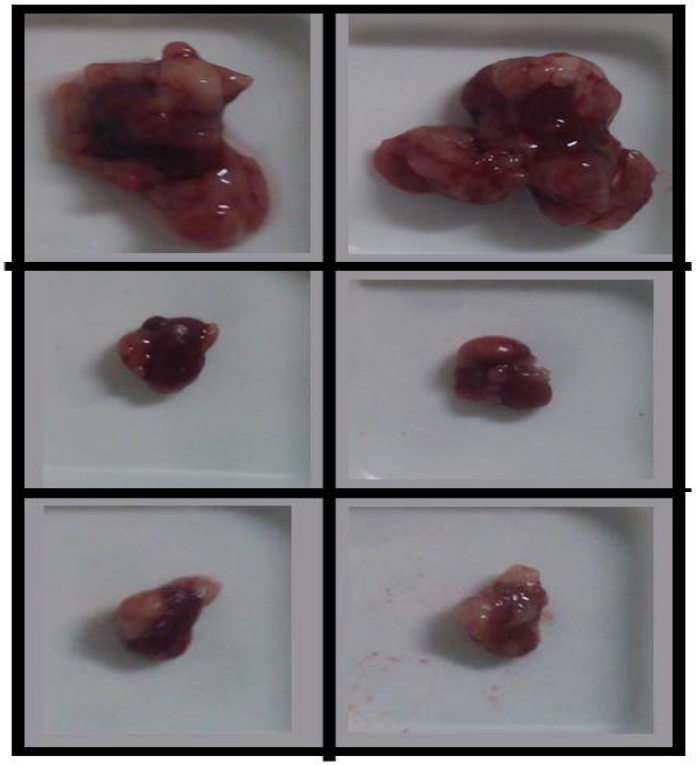
Phase II Trial Program

- **Renal cancer (US)**
  - Market size >US$2.5bn
  - Sutent, *Pfizer*; Nexavar, *Bayer/Onyx;* Afinitor, *Novartis*
  - Afinitor combination has potential to extend to breast cancer and pancreatic tumours, for example
  - Completion of enrolment (134 patients) anticipated end-2012
- **Ovarian cancer (Australia, New Zealand, US)**
  - Trial initiated, completion of enrolment in first stage anticipated mid-2013
  - Market size ≈US$2.2bn in 2011
  - In combination with Carboplatin, *BMS*; Gemcitabine, *Eli Lilly*
  - Drug combination has potential to extend to lung, prostate and breast cancer, for example
- **Mesothelioma (Australia)**
  - Currently investigating a trial involving combination with Alimta (*Eli Lilly)* and cisplatin (*Pfizer, Teva, Hospira & others)*

BNC105: Renal Cancer

- Potential to be a new treatment paradigm for patients with renal cancer
- Encouraging initial results from US renal cancer trial
  - Combination of Afinitor & BNC105 safe & well tolerated
- As effective as Sutent in reducing tumour size in animal model
  - Sutent (*Pfizer*) is the current market leader with 2010 global sales US$1b

Right Kidney Tumour Burden



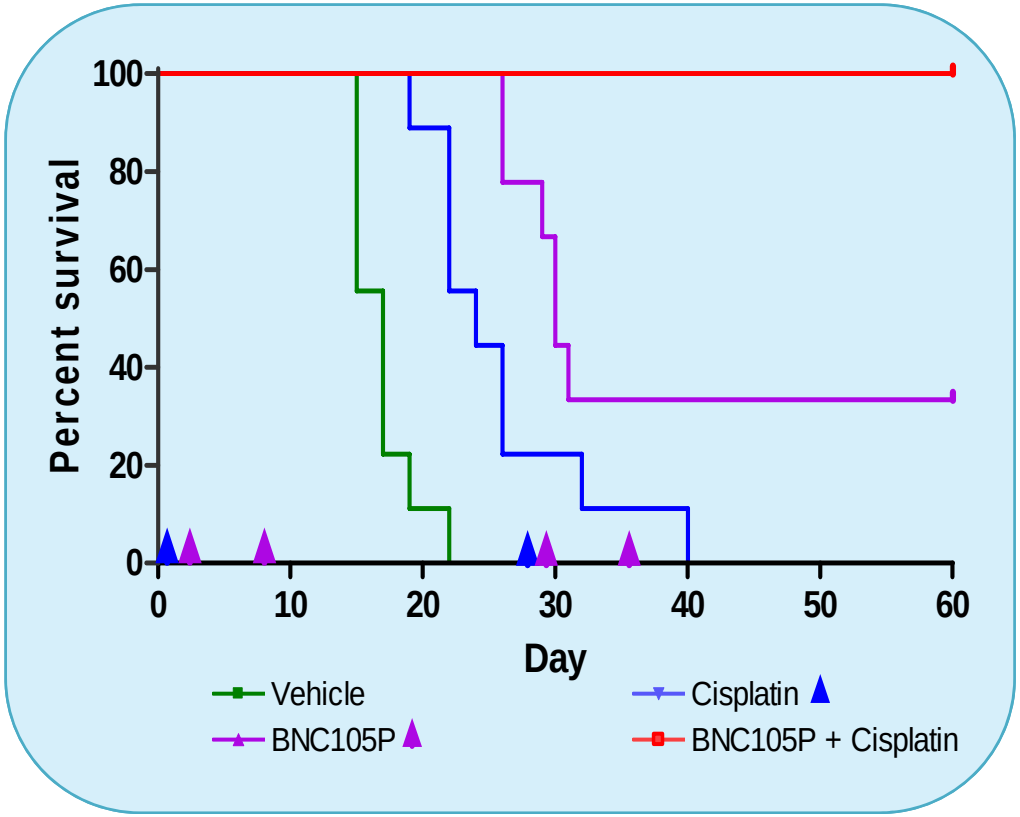
Globally, Renal Cancer is 7th most common form of cancer resulting in over 100,000 deaths p.a.

BNC105: Ovarian cancer

Ovarian cancer is 5th leading cause of cancer-related death among women. In the US Ovarian Cancer is responsible for:

- **21,880 new cases & 13,850 deaths (2010)**
- **~$2.2b pa spent in treatment.**

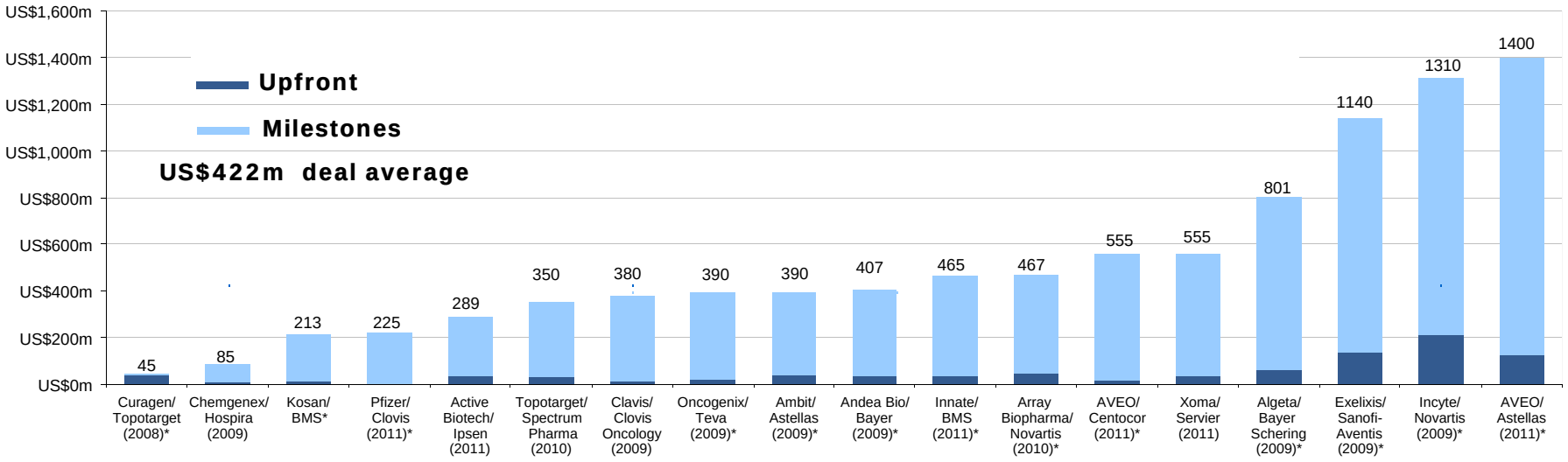
- BNC105 preclinical data supports ovarian cancer trial:
  - Potent cytotoxic for platin sensitive and resistant ovarian cancer cells
  - Inhibits tumour growth and improves survival in cisplatin-resistant ovarian cancer model
  - **Treatment of lung cancer-bearing animals with BNC105 + cisplatin results in 100% survival**



BNC105: Partnership Potential

- ✓ Clinical data from renal and mesothelioma trials reported at ASCO June 2012
- ✓ Commenced Phase II ovarian cancer trial in Q2 2012
- Complete enrolment Phase II renal cancer trials Q4 2012
- International patent approvals in key markets 2012
- BNC105 Phase II results will drive licensing outcome

Precedent Oncology Licensing Transactions



Source: Edison Research reports, Linwar Research reports, Bionomics management sources, Greenhill Caliburn analysis
* Indicates worldwide deal
Average excludes significant outliers Curagen/Topotarget, Chemgenex/Hospira, Exelixis/Sanofi-Aventis, Incyte/Novartis and AVEO/Astellas

Solid pipeline backing BNC105 and BNC210

CANCER	**UNDISCLOSED KINASE**	▪ Novel kinase inhibitory activity for the treatment of malignancies currently in preclinical phase. ▪ Partnered with CRC-CTx.
	BNO69	▪ Potential angiogenesis inhibitor for the treatment of solid tumours. ▪ Utilises Angene platform.
CNS	**Alpha 7 nicotinic acetylcholine receptor modulator**	▪ Targets improvement of memory in Alzheimer's disease, Schizophrenia and other conditions. ▪ Significant end markets with Bionomics estimate for Alzheimer's market at US$5bn in 2012 and Schizophrenia market US$4.2bn in 2011.
	GABA-A modulator	▪ Potential treatment for Epilepsy. ▪ Utilises ionX platform.
IMMUNE DISEASES	**Kv1.3 inhibitor**	▪ Targeting Kv1.3, a potassium ion channel in T cells which is the target for a Bionomics drug for the treatment of multiple sclerosis, rheumatoid arthritis, psoriasis and other autoimmune diseases. ▪ The global immunomodulators market size was estimated at US$46.8 billion in 2010. ▪ Annual revenue of MS drugs worldwide >US$12 billion in 2010. ▪ The global RA market was estimated at US$9 billion in 2009 and is forecast to grow by 6% annually to reach US$14.3 billion by 201.7 ▪ The psoriasis market was estimated at US$3.4 billion in 2009 and is estimated to grow to US$6.8 billion in 2019.

Summary

- Bionomics has successfully discovered and developed drug candidates with blockbuster potential
- The licensing of anxiety drug BNC210 to Ironwood has the potential to deliver very significant shareholder returns via milestone payments and royalties
- Phase II trial success of BNC105 in renal cancer and ovarian cancer should lead to a lucrative licensing transaction
- Advanced drug candidates from Kv1.3 program undergoing expanded evaluation to address >$46 billion immunomodulators market, licensing activities in progress
- A range of additional pipeline drug candidates are advancing including Alpha 7 Alzheimer's candidate, Q3 2012
- Bionomics is well positioned with $17.29m in cash and a well advanced program to build sustainable revenue streams from multiple small molecule drug candidates
- Potential for outstanding shareholder returns from current market capitalisation of $100m

ASX:BNO - Appendix

www.bionomics.com.au

Large end markets with unmet needs

Three core proprietary technology platforms lie at the heart of Bionomics, delivering multiple product opportunities.

Bionomics has three key compounds in development (BNC105, BNC210, Kv1.3) which are focussed on treatments for solid cancers, CNS conditions and immune diseases respectively.

Bionomics also has a number of other promising early stage compounds.

PROPRIETARY TECHNOLOGY PLATFORMS		KEY DRUG CANDIDATES			CURRENT PHASE	END MARKET & POTENTIAL SIZE
MULTICORE	▪ Proprietary, diversity oriented chemistry platform for the discovery of small molecule drugs	CANCER	BNC105	▪ Potential solid tumour cancer treatment which works by shutting down blood vessels in tumours	PHASE II	▪ Renal – Sutent (Pfizer) ; Nexavar (Bayer/Onyx) ; Afintor (Novartis) global sales of >US$2.5bn in 2011 ▪ Ovarian – US$3.6bn in 2010 ▪ All solid tumour types – Avastin (Genentech/Roche) global sales of >US$7bn in 2010
ANGENE	▪ An angiogenesis target and drug discovery platform	CNS	BNC210	▪ "First in class", novel mechanism to treat anxiety and depression -in partnership with Ironwood	PHASE Ib	▪ Anxiety – global sales of US$5-7bn annually ▪ Depression – global sales US$11bn in 2008
IONX	▪ A set of novel technologies for the identification of drugs targeting ion channels for CNS indications	IMMUNE DISEASE	KV1.3	▪ Potential treatment for Multiple Sclerosis and other autoimmune diseases	PRE-CLINICAL	▪ The global immunomodulators market size was estimated at US$46.8 billion in 2010. ▪ Annual revenue of MS drugs worldwide >US$12 billion in 2010.

BNC210: A next generation compound with potential in the treatment of anxiety and depression

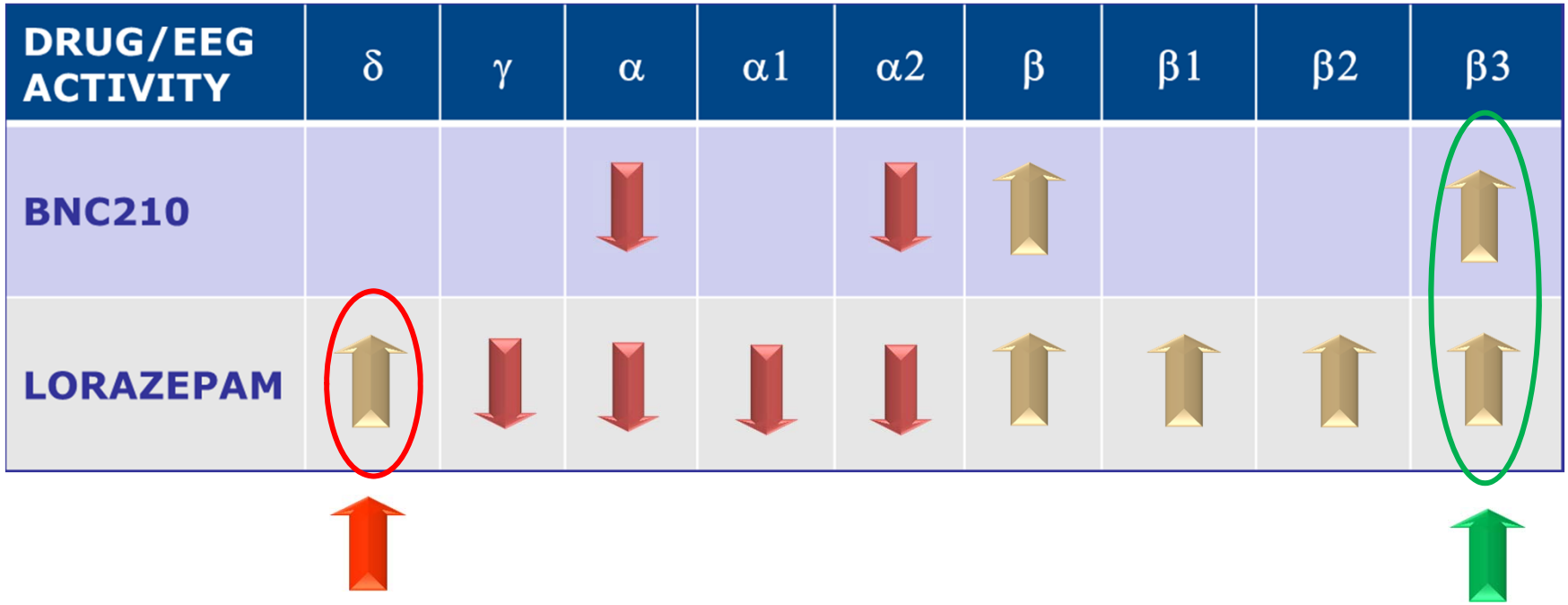
TREATMENT	Anxiety and Depression
MODE OF ACTION	▪ Modulates novel pathway, to promote anti-anxiety activity and neurite outgrowth *in vitro.*

CLINICAL/ REGULATORY	▪ Four Phase I trials completed, including a trial assessing panic attack symptoms:
	▪ 59 subjects enrolled in double-blinded placebo controlled trial;15 subjects classified as having a panic attack upon CCK-4 administration
	  ▪ Statistically significant decrease in both number & intensity of symptoms ($p<0.05$)
	  ▪ BNC210 treated subjects returned to normal emotional status within 10 minutes, compared to 60 minutes on placebo
	  ▪ This trend correlated with the statistically significant reduction in panic symptoms by BNC210
	▪ BNC210 has been administered to 108 healthy subjects to date with excellent safety profile

BENEFITS	▪ BNC210-related changes in human brain activity indicative of efficacy ▪ Reduced panic symptoms ▪ No evidence of sedation or addiction to date

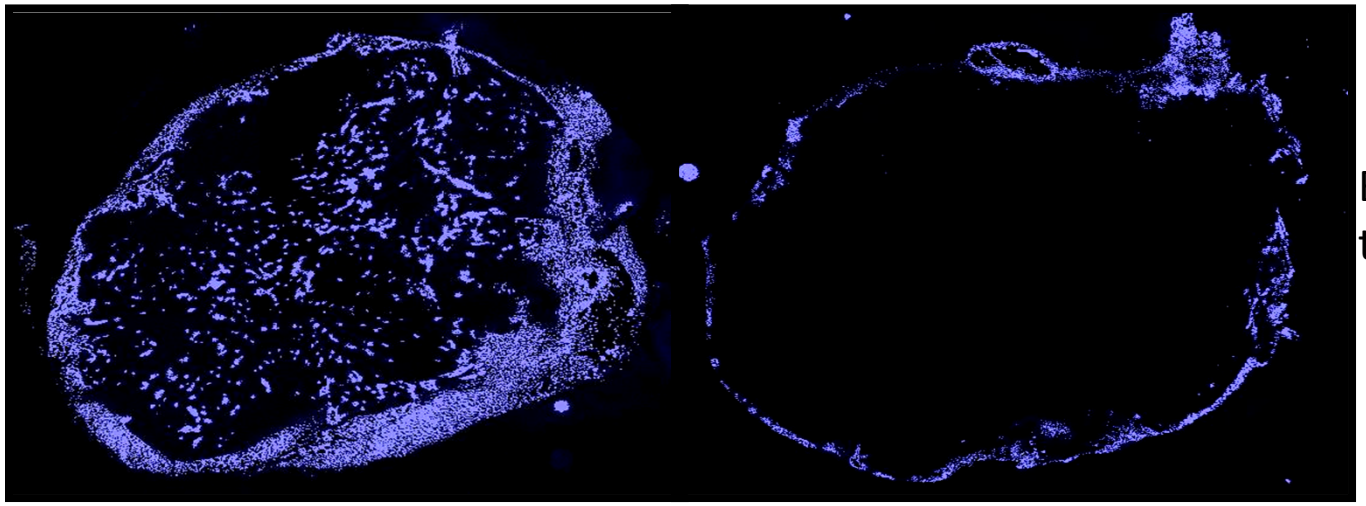
BNC210 Phase I trial: BNC210 vs Lorazepam

- BNC210 was compared with Valium-like anti-anxiety drug Lorazepam in a double-blinded, placebo controlled trial involving 21 subjects.
- BNC210 clearly outperformed Lorazepam in tests measuring attention, memory, co-ordination, sedation & addiction.
- EEG data showed BNC210-related changes in human brain activity indicative of efficacy.



BNC105 Rapidly and Selectively Shuts Down Tumour Blood Vessels

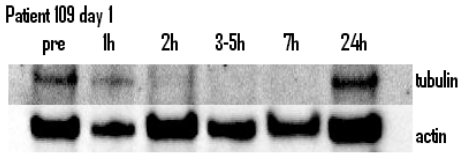
untreated

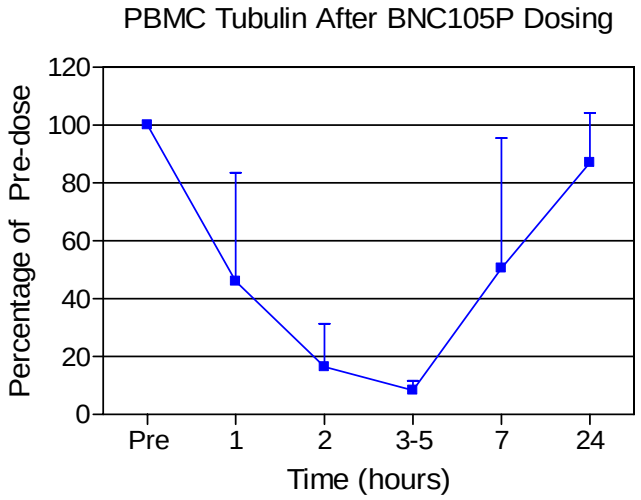


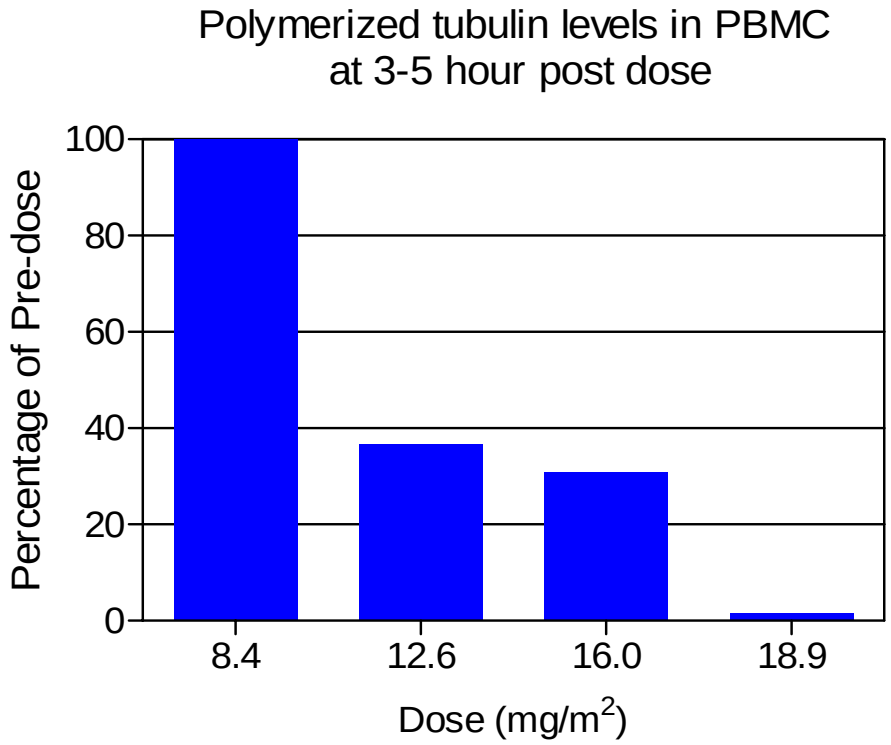
BNC105 treated

Agent	Company	Activity on Activated HUVEC (EC50, nM)	Activity on Quiescent HUVEC (EC50, nM)	Selectivity Index
BNC105	Bionomics	0.31	25	80.64
Zybrestat	Oxigene	3.6	3.9	1.08
MPC6827	Myrexis	4.79	3.24	0.67
AVE8062	Sanofi aventis	3.95	3.08	0.77

BNC105 Exhibits "On Target" Activity in Patient Samples



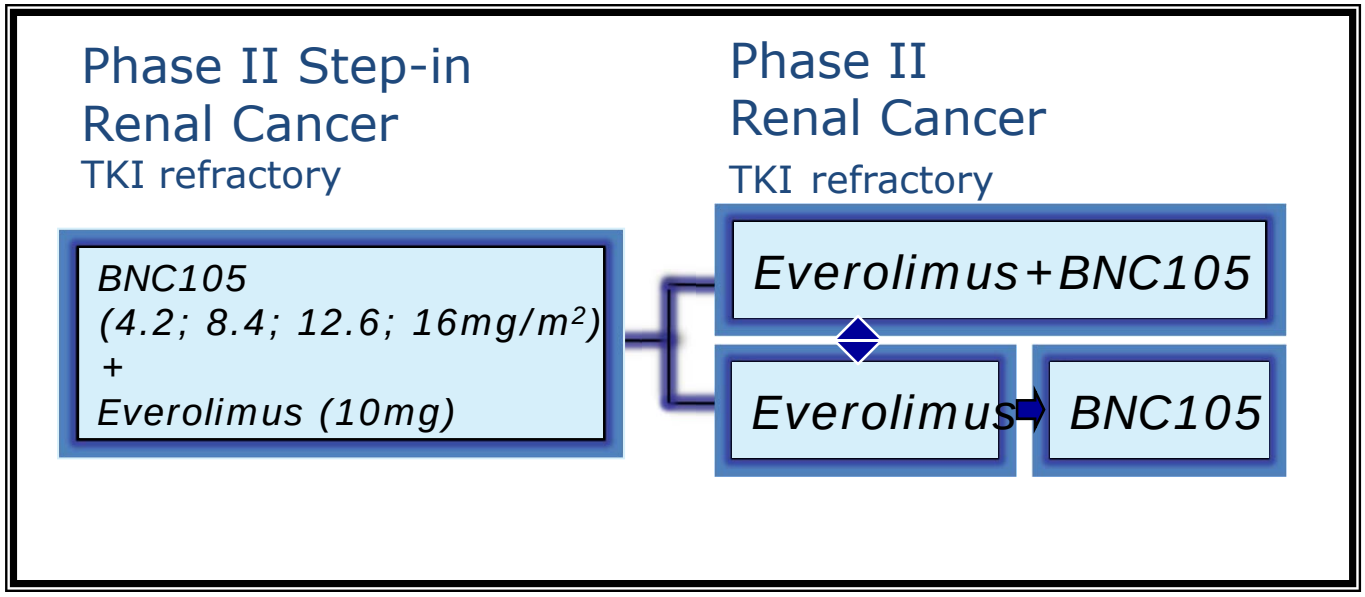




No other VDAs have demonstrated "on target" activity in clinical samples

Phase II Clinical Trial in Renal Cancer

Phase I/II study of BNC105 in combination with Everolimus (Afinitor) or following Everolimus for progressive metastatic clear cell renal cell carcinoma following prior tyrosine kinase inhibitors



The Hoosier Oncology Group (HOG)
PI: Dr Tom Hutson, Baylor Medical Center, Sammons Cancer Center, Dallas

Solid pipeline backing BNC105 and BNC210

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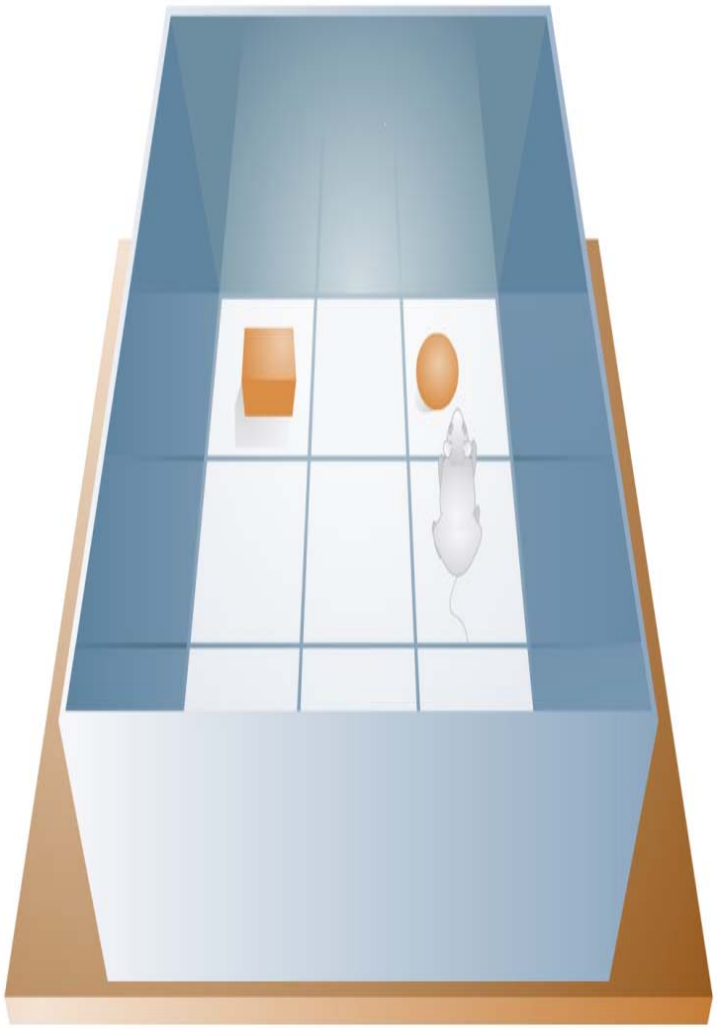
α 7 Nicotinic Acetyl Choline Receptor Positive Allosteric Modulators (PAM)

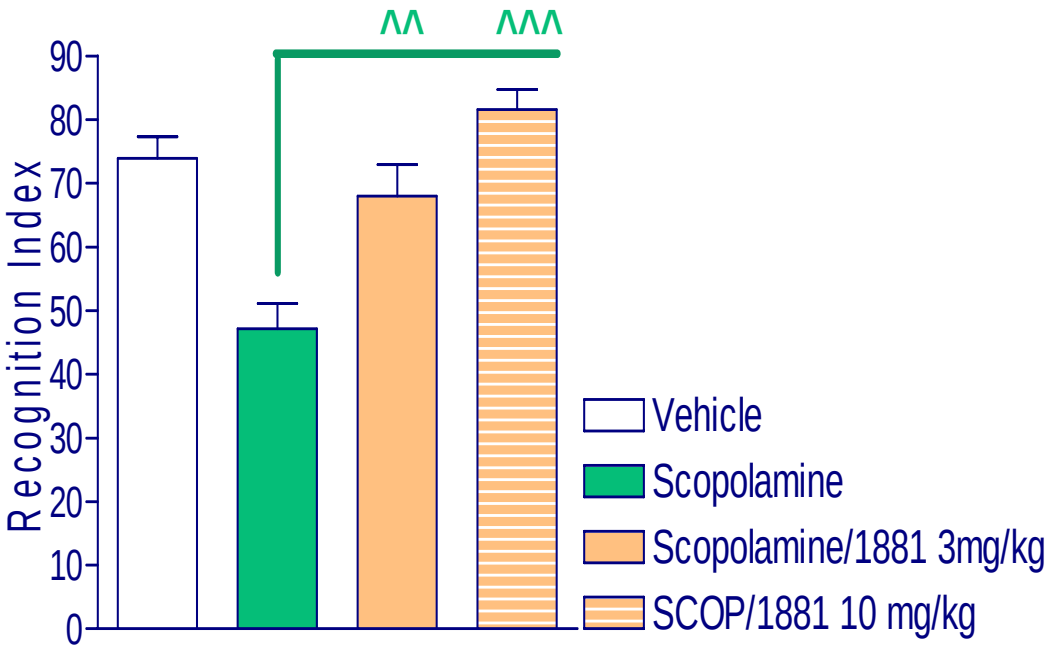
- Market opportunity includes many neurodegenerative and psychiatric disorders:
  - Alzheimer's Disease, Parkinson's Disease, Multiple Sclerosis, Schizophrenia, ADHD and mood and anxiety disorders

	Prevalence	Global sales
Alzheimer's Disease	9.7 Million	$5.6 Billion
Cognitive Dysfunction in Schizophrenia	3.4 Million	No approved products
ADHD	44.9 Million	$4.2 Billion

- α7 NAChR receptor agonists improve attention, working memory and recognition memory
  - Normalizing the physiological response
  - Preserving the integrity of neurotransmission
  - Allows more effective tonic cholinergic input and show less receptor desensitization
  - Avoid toxicity associated with cholinergic excess and high influx of Ca^{++}
- Advantages of PAM: allows "fine-tuning" of receptor activity with a broader margin of safety
- ***New drug candidate for IND enabling studies and clinical development Q3, 2012***

BNC1881 reduces scopolamine-induced deficit in the rat Novel Object Recognition test





n=12-22 rats.

^^ p≤0.01; ^^^ p≤0.001; Significantly different to Scopolamine treated rats

Recognition Index: RI = tB/(tA + tB) x 100

CVs of Executive Team

DR DEBORAH RATHJEN **CEO & MANAGING DIRECTOR**	A seasoned biotech executive of almost 20 years, Dr Deborah Rathjen joined Bionomics in June 2000 from Peptech Limited, where she was Manager of Business Development and Licensing. Dr Rathjen was a co-inventor of Peptech's TNF technology and leader of the company's successful defence of its key TNF patents against a legal challenge by BASF, providing Peptech with a strong commercial basis for licensing negotiations with BASF, Centocor and other companies with anti-TNF products. This success saw the company grow from a A$17m market capitalisation to a A$500m market capitalisation. Dr Rathjen has significant technology and product licensing experience. Dr Rathjen is Chairperson of the AusBiotech Board, and is a former member of the Prime Minister's Science Engineering and Innovation Council. In 2004 Dr Rathjen was awarded the AusBiotech President's Medal for her significant contribution to the Australian biotechnology industry, in 2006 she received a Distinguished Alumni Award from Flinders University, in 2009 the BioSingapore Asia Pacific Woman Entrepreneur of the Year, and in 2010 Bio Innovation SA Industry Leader Award.
DR EMILE ANDRIAMBELOSON **HEAD OF RESEARCH AT NEUROFIT**	Dr Emile Andriambeloson joined Neurofit in 2002 from Novartis Pharma and has played an important role in the development of Neurofit's business. In 2005 Dr Andriambeloson became the Head of Research at Neurofit and is the key interface with Neurofit's international customer base as well as Bionomics' CNS programs. Dr Andriambeloson has a PhD from the University of Strasbourg in France and is recognised for his expertise in pharmacology. He is the author of 18 articles published in highly regarded peer reviewed scientific journals. Dr Andriambeloson's previous positions include Novartis Pharma (Basel, Switzerland), Heart Research Institute (Sydney, Australia) and University of New South Wales (Sydney, Australia).
DR ANDREW HARVEY **VICE PRESIDENT DRUG DISCOVERY**	Dr Andrew Harvey joined the chemistry group at Bionomics in 2007 and has led the group in the Multiple Sclerosis collaboration with European pharmaceutical company, Merck Serono, since the collaboration began in June 2008. He played a leading scientific role in the partnering discussions with Merck Serono and has inventorship on each of Bionomics' Multiple Sclerosis patents. In 2007, Dr Harvey was instrumental in the establishment of the new chemistry facilities at the Bionomics headquarters in Adelaide. During his prior employment at The Walter and Eliza Hall Institute for Medical Research, Dr Harvey was awarded a National Health and Medical Research Council Industry Fellowship for his research in identifying new treatments for Multiple Sclerosis. He holds a PhD and a BSc (Honours) from Canterbury University in New Zealand.
DR GABRIEL KREMMIDIOTIS **VICE PRESIDENT RESEARCH AND DEVELOPMENT**	Molecular geneticist and immunologist Dr Gabriel Kremmidiotis joined Bionomics as Head of Bioinformatics in January 2002 and his role has since expanded to Vice President Research & Development. Formerly Senior Medical Scientist at the Department of Cytogenetics & Molecular Genetics at the Women's & Children's Hospital in Adelaide, Dr Kremmidiotis has several patent inventions on breast cancer tumour suppressor genes, including Bionomics' BNO64 and BNO1 genes as well as other tumour suppressor genes. Dr Kremmidiotis has a PhD and a Bachelor of Science (Honours) from Flinders University and a Bachelor of Science from The University of Melbourne. He has published research findings in 23 internationally-recognised scientific publications including Cell, Human Molecular Genetics and American Journal of Human Genetics, and is a member of the Human Genetics Society of Australasia.

CVs of Scientific Advisory Board

DR ERROL DE SOUZA	Dr Errol De Souza is an internationally recognised leader in CNS research and development. He is the former President and CEO of leading US biotech companies Synaptic Pharmaceutical Corporation and Archemix Corporation and is currently President and CEO of the US company Biodel. Prior to these roles, Dr De Souza held senior management positions within Aventis (NYSE:AVE) and its predecessor Hoechst Marion Roussel Pharmaceuticals, Inc. Most recently, Dr De Souza was Senior Vice President and Site Head, US Drug Innovation and Approval (R&D), at Aventis where he was responsible for the discovery and development of drug candidates through Phase IIa clinical trials for CNS and inflammatory disorders and was a co-founder and former Chief Scientific Officer of Neurocrine Biosciences. Dr De Souza is also currently an Adjunct Professor at the Centre for Molecular and Behavioural Neuroscience at Rutgers University in New Jersey and has served on multiple Editorial Boards, NIH Committees as well as on the Board of Directors of several companies.
DR CARROLEE BARLOW	Dr Carrolee Barlow is the Chief Scientific Officer and Chief Medical Officer of BrainCells Inc. in San Diego. Prior to joining BrainCells in 2004, Dr Barlow was the Director of Molecular Neuroscience and the Therapeutic Area Head for Stroke and Neurodegeneration at Merck Research Laboratories. At Merck, Dr Barlow directed the neuroscience biology and screening efforts at the San Diego site and served as the therapeutic area head for the global exploratory, licensing and full-phase efforts in the area of stroke and neurodegeneration. Dr Barlow joined Merck in 2002. Prior to joining Merck, she held a faculty position in the Laboratory of Genetics at the Salk Institute for Biological Studies in La Jolla, California, where she maintained an adjunct appointment. At the Salk Institute, her research laboratory focused on developing and studying animal models of human neurological disease. Dr Barlow completed her MD training at the University of Utah followed by a residency at The New York Hospital, Cornell Medical Center in Internal Medicine. After completing her residency training, she obtained a PhD in molecular and developmental biology at the Karolinska Medical Nobel Institute in Stockholm, Sweden. After completion of her PhD research, she returned to the United States and joined the National Institutes of Health where she completed medical subspecialty training in the field of endocrinology and a post-doctoral fellowship in neurogenetics at the National Human Genome Research Institute.
DR SIMON CAMPBELL	Dr Simon Campbell received his PhD from the University of Birmingham in 1965 followed by postdoctoral appointments in Chile and Stanford. From 1969 to 1972, he was Visiting Professor at the Universidade do Sao Paulo in Brasil, then he joined Pfizer Central Research, Sandwich UK in 1972. Dr Campbell retired from Pfizer in 1998 as Senior Vice President for Worldwide Discovery and Medicinals R&D Europe. He has co-authored over 120 publications and patents, and was a key member of the research teams that discovered Cardura™, Norvasc™, and Viagra™. Dr Campbell's scientific contributions have been recognised by the RSC Award for Medicinal Chemistry (1989), the Herschberg Award from the American Chemical Society (1997), the Industrial Research Institute (US) Achievement Award (1997), the CIA Individual Achievement Award (2006) and the Galen Medal (2007). He was elected FRS (1999), FMedSci (2002) and was appointed CBE in 2006. Currently, Dr Campbell is a member of the SABs of Astex (Cambridge), Bionomics (Adelaide) CTx (Melbourne) Avila, Ensemble, and Hydra (Boston), ETC and S*Bio (Singapore) and Intellikine (San Diego). He acts as consultant to Abingworth Management, Apposite Capital, CRUK and the Wellcome Trust. He is a past President of the RSC, and serves on the Advisory Council for CaSe and the Expert Scientific Advisory Committee for the Medicines for Malaria Venture (Geneva).

CVs of Scientific Advisory Board

MR RICHARD MORGAN	Mr Richard Morgan has over 25 years experience in pharmaceutical research and development, many as an R&D executive at GlaxoWellcome where he was International Head of Toxicology and Preclinical Outsourcing. Over his career he has been responsible for the preclinical safety evaluation of over 100 new chemical entities (NCE's), covering all major therapeutic areas. Products he has contributed to include Lamictal (Epilepsy), Zomig (Migraine), Malarone (PCP/Malaria), Atracurium (NMB), Wellbutrin (Anti-depressant), Zovirax, Zidovudine, Lamivudine (Anti-Virals) and Exosurf (Infant RDS). Richard operates his own consultancy company (R&B HealthCare Ltd), providing advice on drug development and toxicology. He is a member of the Board of Cogstate Ltd and Advisory Boards of a number of Australian biotech companies.
PROFESSOR PAUL FITZGERALD	Professor Paul Fitzgerald is Professor of Psychiatry, Deputy Director and Consultant Psychiatrist at Alfred Psychiatry Research Centre, a joint research centre of Monash University and the Alfred Hospital in Melbourne. He is a qualified psychiatrist, has a Masters of Psychological Medicine and research PhD. He runs a substantive research program utilising brain stimulation and neuroimaging techniques including transcranial magnetic stimulation, functional and structural MRI, EEG and new infrared spectroscopy. The program has focussed on the conduct of investigative studies of brain function / dysfunction as well as the conduct of a variety of novel clinical trials in Mood, Anxiety, Psychotic and Developmental Disorders. He has published over 90 papers and received grant funding from the NHMRC and a number of US based organisations including a NHMRC Practitioner Fellowship. He is on a variety of local and international committees including the scientific and review committees of Neuroscience Victoria.
DR JAYESH DESAI	Dr Jayesh Desai practices as a Medical Oncologist at the Royal Melbourne Hospital and Peter MacCallum Cancer Centre in Melbourne, and Senior Clinic Research Fellow within the Ludwig Colon Cancer Initiative program at the Ludwig Institute for Cancer Research in Parkville. He also serves as an Associate Director for Cancer Trials Australia (CTA) and Chairs the CTA Phase I Drug Development Group, and is Chair of the Australasian Sarcoma Study Group. Dr Desai completed his Medical Oncology training in Melbourne in 2002, before spending 3 years as a Translational Research Fellow at the Dana-Farber Cancer Institute/Harvard Medical School in Boston, USA. His clinical and research interests focus on rationally developing new anticancer therapeutics, and in exploring predictive markers of response to these agents. He has been Principal Investigator for more than a dozen first-in-human Phase 1 oncology trials, from small academically-focused groups and biotechs to large pharmaceutical company-sponsored trials. He has been closely involved in the development of Bionomic's Vascular Disrupting Agent, BNC105, as a Principal Investigator for that compound's first-in-human trial.
DR ANN HAYES	Dr Ann Hayes worked for 22 years for GlaxoWellcome, initially in research, with particular expertise in the areas of CNS and pain. Before the GSK merger, she was a Director in Drug Discovery, and was involved in determining long-term Discovery strategy, in portfolio management and in discovery project management. Ann left GSK in 2001 and set up a business as an independent pharmaceutical consultant. In this capacity she has co-founded three companies, Ionix Pharmaceuticals which has been bought by Vernalis, Therasci which has been bought by CeNeS, and Theradeas. Ann is a non-executive director for Curidium plc and Plethora Solutions plc, and a member of the advisory boards for CeNeS and Lectus. She has also held non-executive director positions at Therasci, Ionix and Sirus (which was sold to Arakis). She currently consults regularly for CeNes and Shire, as well as doing ad hoc consulting for a number of small companies and VCs.

CVs of Scientific Advisory Board

DR FIONA MCLAUGHLIN	Dr Fiona McLaughlin is the Head of Research and Development for the Heidelberg based oncology biotechnology company Elara Pharmaceuticals GmbH, responsible for progression of the drug development pipeline and licensing/collaboration activities. Prior to joining Elara, Dr McLaughlin was Director of Research and a member of the Senior Management Team at the UK based Antisoma Research Ltd from 2007-2010. Following Antisoma's acquisition of Boston based Xanthus Pharmaceuticals Inc, she became VP Translational Research for the expanded company and built up an innovative portfolio of in-licensed early stage oncology assets. Prior to joining Antisoma, she has held the posts of Oncology Development Specialist and Head of Pre-Clinical development for the specialty pharmaceuticals company BTG in London, combining virtual drug development and in-licensing to expand and progress the drug development portfolio. From 2001-2004 Fiona was Head of Biology for the Oxford based oncology company Prolifix Ltd which was later acquired by Topotarget A/S. Throughout this time she was primarily responsible for the research and non-clinical development activities which led to the clinical development of the HDAC inhibitor Belinostat. Dr McLaughlin gained her PhD from the Haematology Department at Cambridge University and carried out post-doctoral research at GlaxoSmithKline in the UK, where she subsequently held several research posts in vascular diseases, inflammation and steroid induced osteoporosis. In addition to her current post at Elara Pharmaceuticals, Dr McLaughlin is also an independent consultant to the pharmaceutical industry and is a fully elected Fellow of the Society of Biology
DR CHRISTOPHER J SWEENEY	Dr Christopher J Sweeney received his medical degree from the University of Adelaide, South Australia in 1992, and completed an internship at the Royal Adelaide Hospital. From 1994 to 1997, Dr Sweeney was an Internal Medicine resident at Gundersen Lutheran Medical Center, La Crosse, Wisconsin, and from 1997 to 2000 he was a Fellow in Hematology / Oncology at Indiana University Medical Center. Dr Sweeney is certified by the American Board of Internal Medicine in Internal Medicine and Medical Oncology. He is a member of several professional societies, including the American Society of Clinical Oncology, Eastern Cooperative Oncology Group and American Association for Cancer Research. He has authored and co-authored more than 60 peer reviewed articles, as well as several monographs and book chapters. He has focused his academic career on cancer drug development by performing (1) phase I dose escalation trials with pharmacokinetic and pharmacodynamic endpoints including multiple anti-angiogenic drugs (2) phase I trials of new chemotherapeutics in patients with renal or liver dysfunction (3) pharmacogenetic and biomarker discovery studies (4) trials of targeted therapies with a focus on bladder and prostate cancer and (5) drug discovery in the laboratory. Dr Sweeney has served as the Associate Director for Clinical Research for the NCI-designated, Indiana University Cancer Center and the Co-Leader of the Experimental Developmental Therapeutics Program of the NCI designated Indiana University Cancer Center. In 2005 Dr Sweeney was elected Chairman of the Hoosier Oncology Group. Dr Sweeney has served on the Program Committee and the Cancer Education Committee of the American Society of Clinical Oncology and is on the Editorial Board for ASCOs "Journal of Clinical Oncology". He has peer reviewed funding from the PhRMA Foundation (Faculty Development Award), the National Institutes of Health and the Department of Defense. He joined the RAHCC and Director of Clinical Trials in January 2008.

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