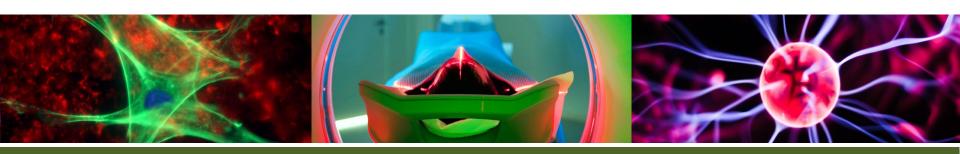




A new company with:

- a new technology platform for cancer drug development
- a new management team
- a new Board



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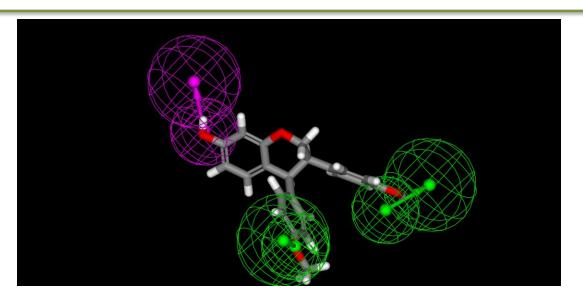
Company history/Triaxial merger



	1994	Novogen Ltd ASX Consumer health products
÷	1998	NASDAQ
÷	1998	Broad drug technologies (oncology, cardiovascular, inflammatory)
٠	2001	Oncology — Marshall Edwards Inc (MEI) NASDAQ
٠	2007	(GK leaves Company)
٠	2009	Decision taken to focus all resources into MEI. Progressive sell-down of other assets.
÷	2011	MEI MEI Pharma Novogen owns 60%
٠	2012 (Nov)	Novogen divests itself of MEIP (in specie distribution)
	2012 (Dec)	Novogen acquires Triaxial Pharmaceuticals.

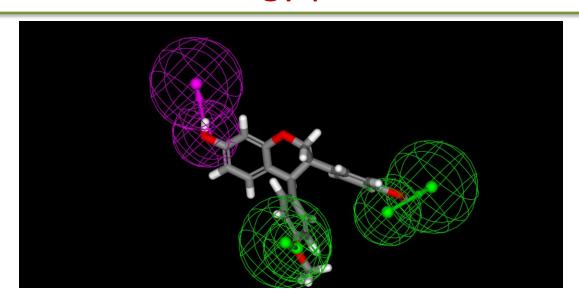
Gen 1 technology platform





- Simple benzopyran molecules
- Unique anti-cancer action
 - pan cancer effect
 - tumour-specific
 - unaffected by multi-drug resistance mechanisms
 - restore chemo-sensitivity
 - modest anti-cancer stem cell activity
- 4 lead drug candidates
- Tested in > 800 patients
- Evidence of efficacy in late-stage chemo-refractory prostate and ovarian cancers

Gen 2 technology platform





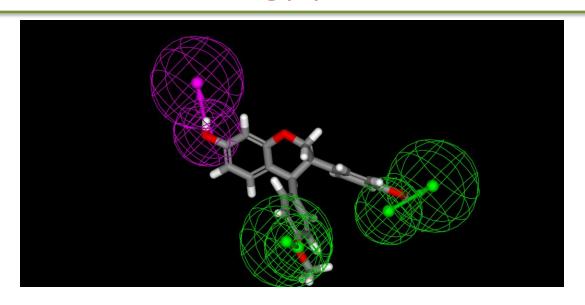
Need to:

- increase bio-availability
- increase potency against both cancer cells and cancer stem cells
- improve manufacturing efficiencies.

Challenge:

- new technology required to create a new family of more complex benzopyrans
- need to overcome design and manufacturing limitations.

Gen 2 technology platform



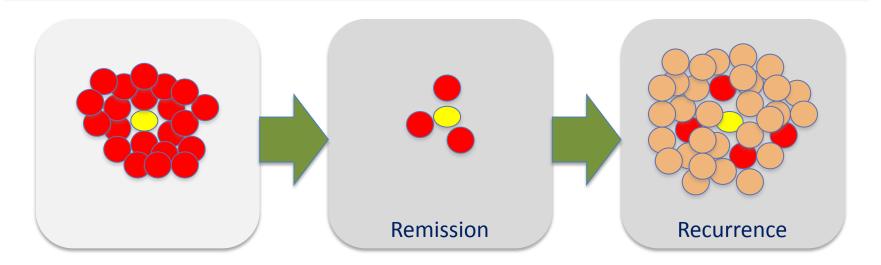


- Manufacturing and design breakthrough larger, more complex molecules
 SUPER-BENZOPYRANS
- Change in electrical field charges increased bio-availability
- Substantial increase in potency
 both cancer stem cells and daughter cancer cells



Conventional cancer therapy

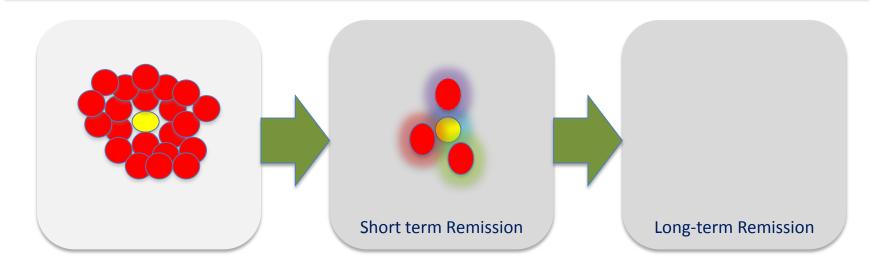




- Almost all forms of human cancer are thought to comprise a majority of standard cancer cells (*red*) and a small (<0.01%) minority of cancer progenitor cells known as cancer stem cells (*yellow*).
- With some notable exceptions (e.g. melanoma, mesothelioma, glioblastoma), the bulk of standard cancer cells in a tumour have a reasonably high degree of sensitivity to radiation or chemotoxic drugs, typically leading to shrinkage of the tumour ('REMISSION').
- Cancer stem cells (yellow), however, are almost completely insensitive to radiotherapy and chemotherapy and remain unaffected by anti-cancer therapy.
- In time, the cancer stem cells reproduce to create a new tumour, this time populated by cancer cells (*brown*) inheriting the radio-resistance and chemo-resistance of the cancer stem cells ('RECURRENCE').
- The RECURRENT cancer typically is more aggressive and now resistant to all standard anti-cancer drugs.

Comprehensive anti-cancer therapy



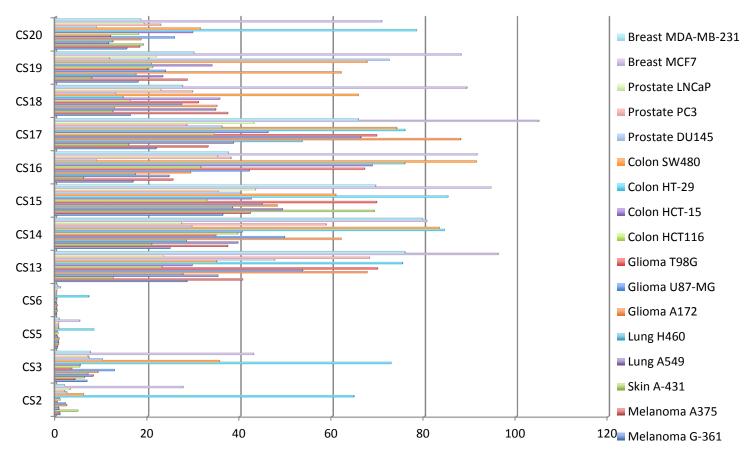


- Comprehensive anti-cancer therapy refers to the ability to kill both standard cancer cells and cancer stem cells with first-line therapy, in this way avoiding the regeneration of cancer cell populations with high-level multi-drug resistance mechanisms.
- It is 'comprehensive' as it aims to provide long-term remission of cancer through effective removal of the source of the cancer, not just dealing with the cells that come from that source.

Standard cancer cell killing



 Ability of first library of super-benzopyran drugs to kill standard cancer cells of different cancer types. CS-5 and -6 highly active; CS-2 and -3 less active and typical of earlier Novogen benozopyran drugs; CS-13-20 unacceptably low activity.

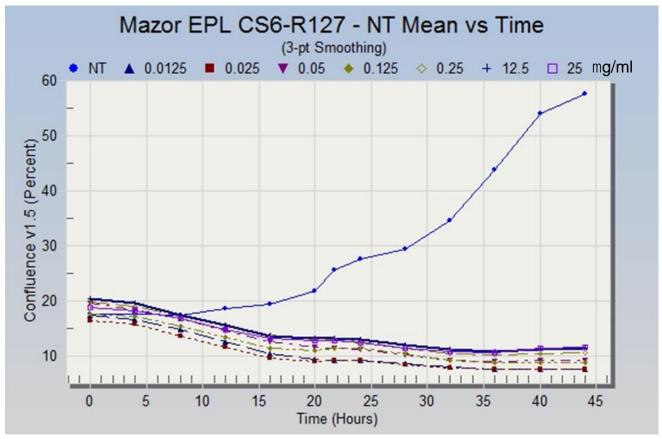


In vitro cytotoxicity of super-benzopyran analogs against cancer cell lines

Active against cancer stem cells



 CS-6 is highly active against ovarian cancer stem cell line. Note that the anti-cancer effect starts at 4 hours and occurs at very low dose rates (2 nanomolar), indicating a highly efficient anti-cancer effect.



Inhibitory effect of CS-6 on the growth of the R127 ovarian cancer stem cell line.

Cancer therapy snapshots



Drug		Area	Benefit	Market Size
Hercepting trastuzumab	Herceptin	 HER2+ breast cancer 20-25% all cases; Phase 4 only) (\$50,000 p.a. treatment cost) 	Increase from 20.3 vs 25.1 months survival	\$6.4b pa
gleevec* (imatinib mesylate) tablets 100mg, 400mg	Gleevac	Chronic myeloid leukaemia (\$\$50,000 p.a. treatment cost) 4500 cases USA	Extended survival	\$4.7b pa
AXOTERE® (docetaxel) Injection Concentrate	Taxotere	Late-stage prostate cancer	increase from 12.7 vs 15.3 months survival	\$3.1b pa
NOVOGEN	CS-6	Comprehensive cancer therapy	Long-term remission	????

Strategy



Company Strategy: To develop the first **comprehensive** cancer therapy capable of killing both standard tumour cells and cancer stem cells

- CS-6 is Novogen's first super-benzopyran drug candidate. CS-6 is:
 - highly active in the laboratory against all forms of human cancer so far tested;
 - most active against glioblastoma multiforme cells (main form of brain cancer); and
 - highly active against (ovarian) cancer stem cells (nanomolar levels).
- Novogen aims to bring CS-6 to market as a treatment for late-stage brain cancer and late-stage ovarian cancer.
- Ability to destroy both cancer stem cells and their chemo-resistant daughter cells is a game changer as
 no other drug (currently approved or in development) knocks out both the highly resistant cancer stem
 cells and their daughter cancer cells in a selective manner with acceptable side-effects.

Company structure



Market Metrics		
Securities code	NRT (ASX) and NVGN (NASDAQ)	
Securities on issue	117,405,676	
Unlisted options	2,007,216	
Share price ¹	\$0.165	
6 months high	\$0.475	
Market cap	~\$21 million	
Cash	~\$1 million	
Number of Security holders	ASX: 3,400 NASDAQ: 5,500 (est.)	
Major Security holders	 Mr Josiah Austin (Director) – 19% Oppenheimer Funds (Global Funds) – 11% 	

¹ As at 20 March 2013

Board of Directors		
Chairman and CEO	Graham Kelly	
Executive Director and Chief Scientific Officer	Andrew Heaton	
Non-Executive Director	Stephen Coffey	
Non-Executive Director	Robert Birch	
Non-Executive Director	John O'Connor	
Non-Executive Director	Josiah Austin	



² Price of ASX listed securities

Development milestones



Fundamentals

- Design and make super-benzopyran molecules
- Achieve manufacturing process producing clean product
- Design analogs with potent anti-cancer activity
- ✓ Design analogs with enhanced bio-availability
- ✓ Design analogs with potent anti-cancer stem cell activity

e-Clinica

- Confirm acceptable half-life of drug
- Confirm ability to inhibit tumour xeograft growth
- Determine chemo-sensitising ability
- Define toxicology
- Manufacture batch for clinical use

Slinical

- Phase 1a Study
- Phase 1b Study

Funding



- Novogen is currently seeking to raise up to \$10 million to fund a 3 year development plan.
- The purpose of the capital raising is to enable Novogen to:
 - Take CS-6 through its pre-clinical program and into Phase 1a and Phase 1b clinical studies in patients with glioblastoma multiforme;
 - Generate the data to enable the Novogen to apply to the FDA for IND status and Breakthrough Therapy Designation;
 - Investigate the potential clinical application of CS-6 in early- and latestage ovarian cancer;
 - Continue with an analog program with the objective of identifying an additional 2 lead drug candidate to be taken through a pre-clinical drug program; and
 - Working capital.

Use of funds (3 year program)	
Corporate costs	\$3.0 million (approx.)
Pre-clinical drug program – 3 drugs	\$4.0 million
CS-6 – Phase 1 (glioma)	\$1.5 million
CS-6 – Phase 1 (ovarian)	\$1.5 million
Total	\$10.0 million

Contact details



Company	Novogen Limited ABN: 37 063 259 754
Stock code	NRT (ASX), NVGN (NASDAQ)
Contact	For investment information: Professor Graham Kelly CEO and Chairman Graham.Kelly@novogen.com
Address	Level 1, 1-7 Waterloo Road North Ryde, NSW 2113, Australia
Website	http://www.novogen.com/



