# Corporate Presentation

NEO: AWKN

OTCQB: AWKNF FWB: 954

February 2022



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#### CAUTIONARY NOTE REGARDING FORWARD-LOOKING INFORMATION

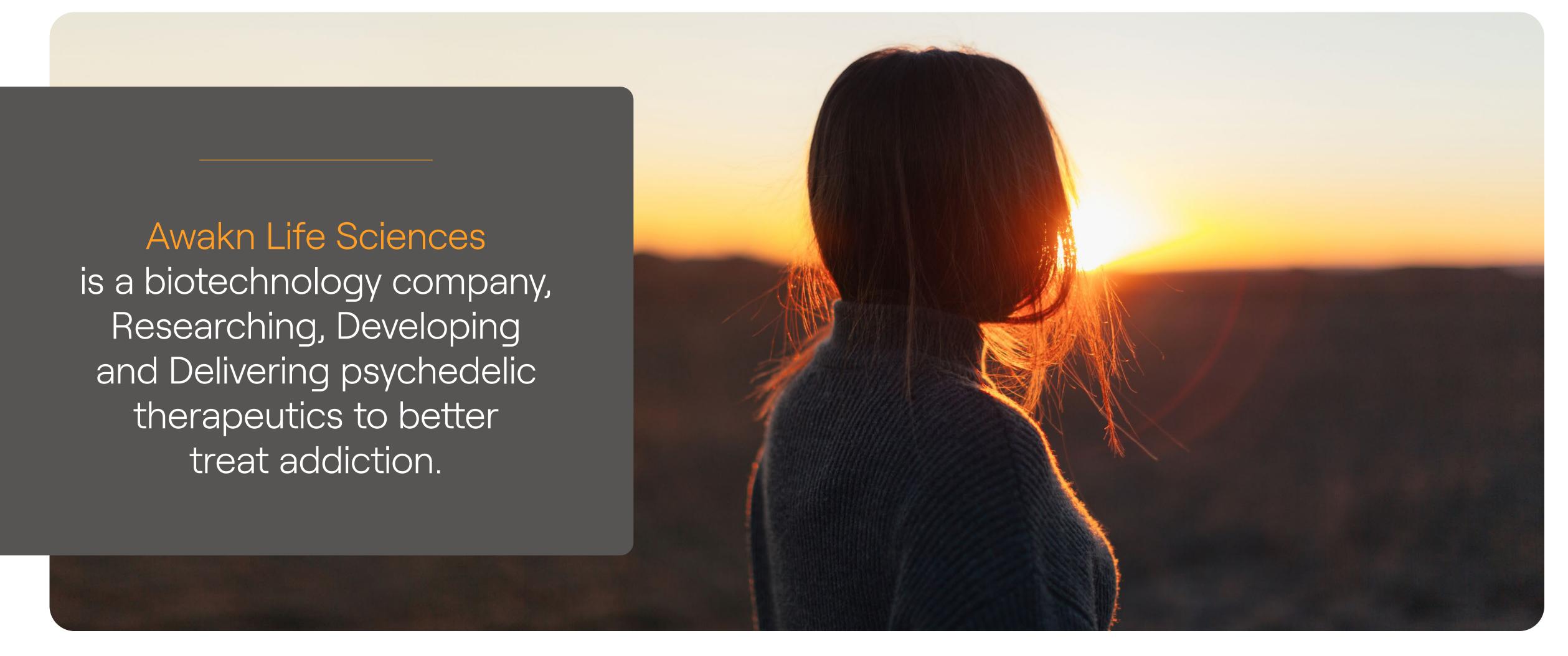
This presentation of the Company contains "forward-looking information", which may include, but is not limited to, statements with respect to anticipated business plans or strategies of the Company, the listing of Company's common shares on the NEO Exchange, the anticipated completion of clinical studies, the timing of any drug trials, the success of its pre-clinical and clinical trials, the ability to enter into acquisitions or collaborations to enhance its drug development platform, the success of any such acquisitions or collaborations and the ability to use the through such acquisitions or collaborations, the success or stage of development of discoveries or medicines, the progression of COVID-19 and its impacts on the Company's ability to operate its assets, including the possible shutdown of facilities due to COVID-19 outbreaks, the Company's ability to execute on the expansion of its digital platforms, risks associated with reliance on key personnel and risks associated with obtaining appropriate licensing. Often, but not always, forward-looking statements can be identified by the use of words such as "plans", "expects", "is expected", "budget", "scheduled", "estimates", "forecasts", "in ends", "intends", "anticipates", or "believes" or variations (including negative variations) of such words and phrases, or state that certain actions, events or results "may", "could", "would", "might" or "will" be taken, occur or be achieved. or achievements of the Company to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements. Such risks and uncertainties include, among others, dependence on obtaining and maintaining regulatory approvals, including acquiring and renewing federal, provincial, municipal, local or other licenses and any inability to obtain all necessary governmental approvals licenses and permits to operate and expand the Company's facilities; engaging in activities which currently are illegal under Canadian or UK laws and the uncertainty of existing protection from UK, Canadian federal or other prosecution; regulatory or political change such as changes in applicable laws and regulations, including federal and provincial legalization, due to inconsistent public opinion, perception of the use of psychedelic therapies, bureaucratic delays or inefficiencies or any other reasons; any other factors or developments which may hinder market growth; the Company's limited operating history and lack of historical profits; reliance on management; the Company's requirements for additional financing, and the effect of capital market conditions and other factors on capital availability; competition, including from more established or better financed competitors; and the need to secure and maintain corporate alliances and partnerships, including with customers and suppliers. The foregoing factors are not intended to be exhaustive. Although the Company has attempted to identify important factors that could cause actual actions, events or results to differ materially from those described in forward-looking statements, there may be other factors that cause actions, events or results to differ from those anticipated, estimate or intended.

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### Introduction





### Addiction - What and Why?



#### What is Addiction

Addiction is currently a poorly treated, chronic disease involving complex interactions among brain circuits, genetics, the environment, and an individual's life experiences.

People with addiction, use substances or engage in behaviors that become compulsive and often continue despite harmful consequences.



### Why Focus on Addiction

Addiction is one of the biggest unmet medical needs globally with substance and behavioral addictions affecting a significant proportion of the global adult population.



### Market Opportunity

The global substance addiction treatment industry was valued at **US\$16bn** in 2021 and is forecast to increase to **US\$25bn** by 2027.

While we estimate the global addiction rehabilitation & recovery industry to be valued at **US\$140bn** per annum in 2021.



### **Business Model**

### Research & Development

The purpose of our R&D program is to develop world leading therapeutics to treat addiction.

- In the near term developing proprietary Ketamine-Assisted Therapies.
- In the medium term developing proprietary MDMA-Assisted Therapies.
- And longer term developing New Chemical Entities (NCE) to work in combination with our proprietary therapies.

### Delivery

#### Clinics

Revenue generating: Q4 2021

- Treating addiction and other mental health conditions with our proprietary Psychedelic-Assisted Therapies.
- Generate real world data and evidence that supports our R&D activities.
- Generate free cash flow for the business.

#### Therapeutics Commercialization

Revenue generating: 2022

- Ketamine-Assisted Therapy for AUD Commercialized through our licensing partnerships – 2022.
- Commercialize other Psychedelic -Assisted Therapies for addiction once developed through our R&D business.



### Management



**Anthony Tennyson** CO-FOUNDER & CHIEF EXECUTIVE OFFICER

Anthony is an experienced financial services industry executive with 10 years in international strategy, commercial leadership roles with Aon plc, and 5 years with Merrill Lynch and Bank of Ireland.

Anthony holds an MBA in Strategy and Finance and an MSc in Technology both from UCD, Ireland's top ranked business school.



Kate Butler CHIEF FINNACIAL OFFICER

Kate is a Chartered Accountant with significant experience of both UK and US public companies. Kate has worked across a number of sectors including pharmaceuticals and natural resources. Most recently Kate has held senior positions at Vectura Group plc, a FTSE 250 specialist inhalation contract development and manufacturing organisation, and Gilead Sciences Inc, a research-based biopharmaceutical company focused on the discovery, development, and commercialization of innovative medicines. Kate has extensive experience of building strong finance teams and processes, and growing companies in new markets.



**James Collins** CHIEF OPERATING OFFICER

James is a senior business leader and mental health champion with 17 years of experience with Accenture Strategy, 7 years as MD, designing and delivering corporate, digital and operating model strategies.

James holds a BSc and MPhil in Psychology from University College London (UCL).



**Doriann Bailey QUALITY, SAFETY & RISK LEAD** 

Doriann is passionate about the provision of high quality, safe, effective, caring, responsive and well led healthcare services. She is a seasoned and highly effective strategic and operational senior professional. Doriann has over 30 years of clinical and managerial experience in various NHS and Independent organisations.

As well as being a Specialist Advisor (Governance) for The Care Quality Commission (CQC), Doriann is a qualified nurse and midwife.



Prof. David Nutt CHIEF RESEARCH OFFICER

David is a psychiatrist and the Edmund J. Safra Professor of Neuropsychopharmacology in the Division of Brain Science, Dept of Medicine, Imperial College London. Here he uses a range of brain imaging techniques to explore the causes of addiction and other psychiatric disorders and to search for new treatments. He has published over 400 original research papers, a similar number of reviews and books chapters, eight government reports on drugs and 28 books, including one for the general public, Drugs: Without The Hot Air, that won the Transmission Prize in 2014.



Prof. Celia Morgan HEAD OF KETAMINE ASSISTED

**PSYCHOTHERAPY FOR ADDICTION** 

Celia is a Professor of Psychopharmacology at the University of Exeter in the United Kingdom. Prof. Morgan completed her undergraduate degree and Ph.D at University College London (UCL) and completed a scholarship programme at Yale University. After competing her Ph.D Prof. Morgan worked at University of Melbourne as a visiting research fellow, returning to UCL for a fellowship and then Lectureship. She joined University of Exeter as a Senior Lecturer in 2013 and was given a Chair in Psychopharmacology in 2015.



Dr. Ben Sessa CO-FOUNDER & CHIEF MEDICAL OFFICER

Ben has specialist training as a child and adolescent psychiatrist and is interested in the developmental trajectory from child maltreatment to adult mental health disorders, including adult addictions. Dr Sessa's joint interests in psychotherapy, pharmacology and trauma have led him towards researching the subject of Drug-Assisted Therapy using psychedelic adjuncts. In the last 15 years he has been part of scientific and MDMA and DMT to patients and volunteers.



Dr. Laurie Higbed LEAD PSYCHOLOGIST

Laurie is an experienced clinical psychologist. Laurie has worked as a lead therapist on clinical trials using MDMA and Psilocybin-Assisted Therapy and has a special interest in working with complex trauma, addictions and the use of psychedelic therapy to treat a range of mental health difficulties.

Laurie is registered with the Health and Care Profesclinical studies administering LSD, psilocybin, ketamine, sions Council (HCPC) and is a member of the Association of Clinical Psychologists (ACPUK).



Gordo Whittaker CHIEF MARKETING OFFICER

Gordo is a senior marketing and communications industry leader with over 10 years' experience, building, protecting and growing some of the world's most famous brands, including Volkswagen and Land Rover, where he led their global advertising function.



Jonathan Held CO-FOUNDER & CHIEF BUSINESS OFFICER

Jonathan is a chartered professional accountant, with CFO level experience for private / public companies.

Jonathan has worked in a number of sectors including technology, biotech and natural resources, both domestic and international, and has been involved in numerous successful public market transactions including Initial Public Offerings, Reverse Takeovers and



Dr. Shaun McNulty CHIEF SCIENTIFIC OFFICER

Shaun is an experienced CNS drug discovery expert and biotechnology executive. He has over 25 years of industry experience in the neuroscience drug discovery units of major pharmaceutical company, including Parke-Davis, Pfizer and GSK, in contract research for Charles River, and as CSO for several biotechnology companies. Shaun has worked to develop a range of CNS targeted drugs including Neurontin and Lyrica, specialising now in coaching, mentoring and HR consultancy. drug development strategy and the successful transfer of drug candidates into clinical trials.



Martyna Kabia HR LEAD

Martyna is a highly motivated and career driven HR Professional with over 20 years' proved ability gained in the NHS, higher education, Faith based, private and public sector. She is experienced in key areas of strategic HR management including recruitment and selection, employee relations, employment law, analysis and reporting, remuneration, job evaluation, project work, training,

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### Corporate Board



George Scorsis CO-FOUNDER & CHAIRMAN **CORPORATE BOARD** 

George has 15 years experience leading companies in highly regulated industries to rapid growth, including alcohol, energy drinks and, most recently, medical cannabis. Formerly President of Red Bull Canada, he was instrumental in restructuring the organisation and growing the business to \$150 MM in revenue.



**Anthony Tennyson** CO-FOUNDER & CHIEF EXECUTIVE OFFICER

Anthony is an experienced financial services industry executive with 10 years in international strategy, commercial leadership roles with Aon plc, and 5 years with Merrill Lynch and Bank of Ireland.

Anthony holds an MBA in Strategy and Finance and an MSc in Technology both from UCD, Ireland's top ranked business school.



**Paul Carter** INDEPENDENT NON-EXECUTIVE DIRECTOR CORPORATE BOARD

Paul Carter is a seasoned international BioPharma leader with an outstanding and proven track record. He has over 25 years of senior executive experience, having served as Executive Vice-President and Chief commercial Officer of Gilead Sciences Inc. He also was the head of GSK China amongst many others executive positions. He currently sits on the board of several publicly listed and private bioscience companies.



Stephen Page INDEPENDENT NON-EXECUTIVE DIRECTOR **CORPORATE BOARD** 

Stephen Page has worked at Chief Executive and Board level in UK healthcare for over 30 year, most noticeably leading Priory Healthcare, the largest network of mental healthcare hospitals and clinics in the UK, through a period of rapid expansion and market dominance. He has led and successfully grown organisations in both public and private sectors including Oxleas NHS Trust in London, Nestor plc and Acorn Care and Education.



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Prof. John Papastergiou INDEPENDENT NON-EXECUTIVE DIRECTOR

Professor John Papastergiou is a highly regarded pharmacist and clinical research scientist who has served as an advisor to several leading pharmaceutical organisations including Bayer, Pfizer, GSK, and Astra Zeneca. He holds faculty appointments at the schools of Pharmacy at both the University of Toronto and the University of Waterloo. In 2019, he was named by the

International Forum on Advancement of Healthcare as

one of the top 100 healthcare leaders globally.

# Key Scientific Advisors



Prof. Barbara J. Mason **ADVISOR** CLINICAL ADVISORY BOARD

Barbara J. Mason, Ph.D. is Director of the Pearson Center for Alcoholism and Addiction Research, Director of the Laboratory of Clinical Psychopharmacology, and Pearson Family Professor in the Department of Molecular Medicine at The Scripps Research Institute, La recognized globally. Prof. Mason conducted the seminal studies identifying nalmefene as having therapeutic potential for alcohol dependence.



Prof. Harriet de Wit **ADVISOR** PRE-CLINICAL ADVISORY BOARD

Prof. de Wit is the Professor and Director of the Human Behavioral Pharmacology Laboratory in the Department of Psychiatry and Behavioral Neuroscience at the University of Chicago. In addition to her role as Principal Investigator for several NIH-funded research projects, Jolla, CA. Dr. Mason's work in medication development Dr. de Wit serves as Field Editor for the journal Psychofor the treatment of substance use disorder has been pharmacology. She is also a consultant to the Food and Drug Administration (FDA).



Prof. Matt Johnson **ADVISOR** 

CLINICAL ADVISORY BOARD

Prof. Matthew W. Johnson, Ph.D., is Professor of Psychiatry and Behavioral Sciences at Johns Hopkins. He is one of the world's most published scientists on the human effects of psychedelics and has conducted seminal research in the behavioural economics of drug use, addiction, and risk behavior.



Ann Mithoefer, BSN

**ADVISOR** CLINICAL ADVISORY BOARD

Ann Mithoefer, B.S.N., is a Registered Nurse focused primarily on training and supervising therapists conducting MAPS-sponsored clinical trials, as well as continuing to conduct some MAPS research sessions. Between 2004 and 2018, she and her husband, Michael Mithoefer, M.D., completed two of the six MAPS-sponsored phase-II clinical trials testing MDMA-Assisted Therapy for PTSD, as well a study providing MDMA-Assisted sessions for therapists who have completed the MAPS Therapist Training, and a pilot study treating couples with MDMA-Assisted Therapy combined with Cognitive-Behavioural Conjoint Therapy.



Dr. Michael Mithoefer

**ADVISOR** CLINICAL ADVISORY BOARD

Michael Mithoefer, M.D., began collaborating with MAPS in 2000 on the first U.S. phase-II clinical trial of MDMA-Assisted Therapy. He has since conducted two of the six MAPS sponsored phase-II clinical trials testing MDMA-Assisted Therapy for PTSD, as well a study providing MDMAassisted sessions for therapists who have completed the MAPS-sponsored MDMA Therapy Training Program, and a pilot study treating couples with MDMA-Assisted Therapy combined with Cognitive-Behavioural Conjoint Therapy.



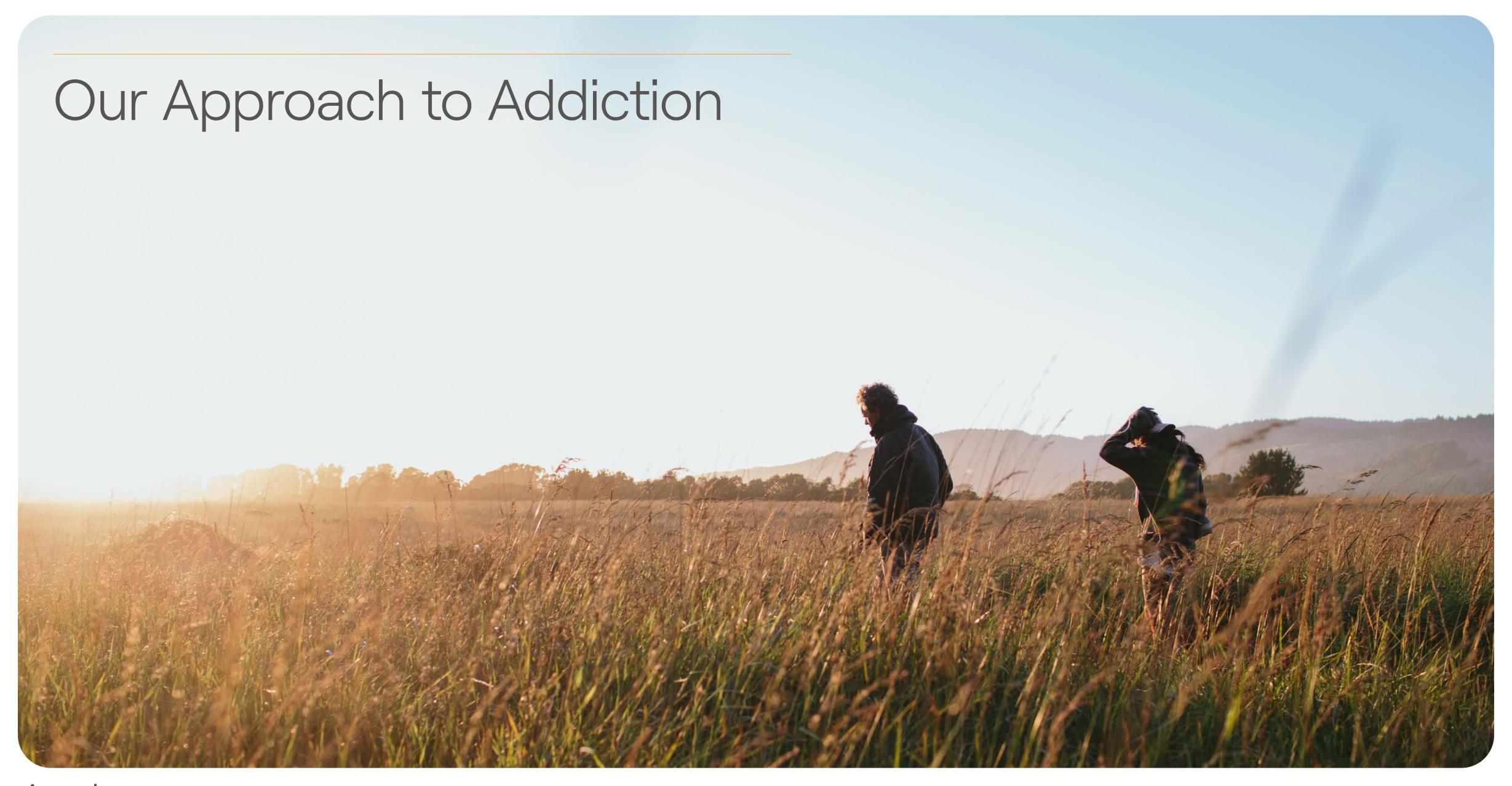
Prof. Stephen Husbands

PRE-CLINICAL ADVISORY BOARD

Professor Husbands is professor of medicinal chemistry in Department of Pharmacy and Pharmacology at the University of Bath. His research has focused on the development and therapeutic potential of central nervous system targeted ligands, particularly those interacting with multiple receptors.

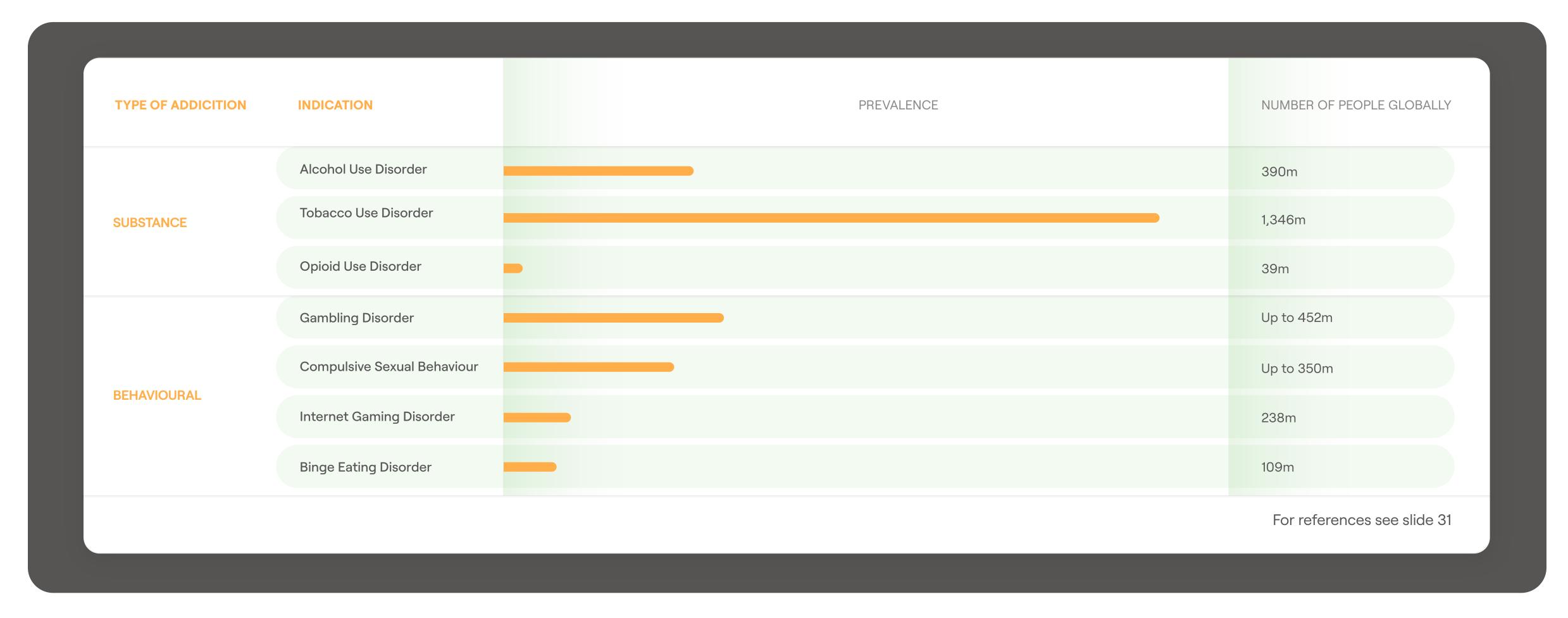
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### Prevalence of Addiction





## Our Approach – The Solution

Awakn is addressing addiction with new proprietary combined therapeutics (drugs and therapies) that approach the treatment of addiction in a radically different way than before.

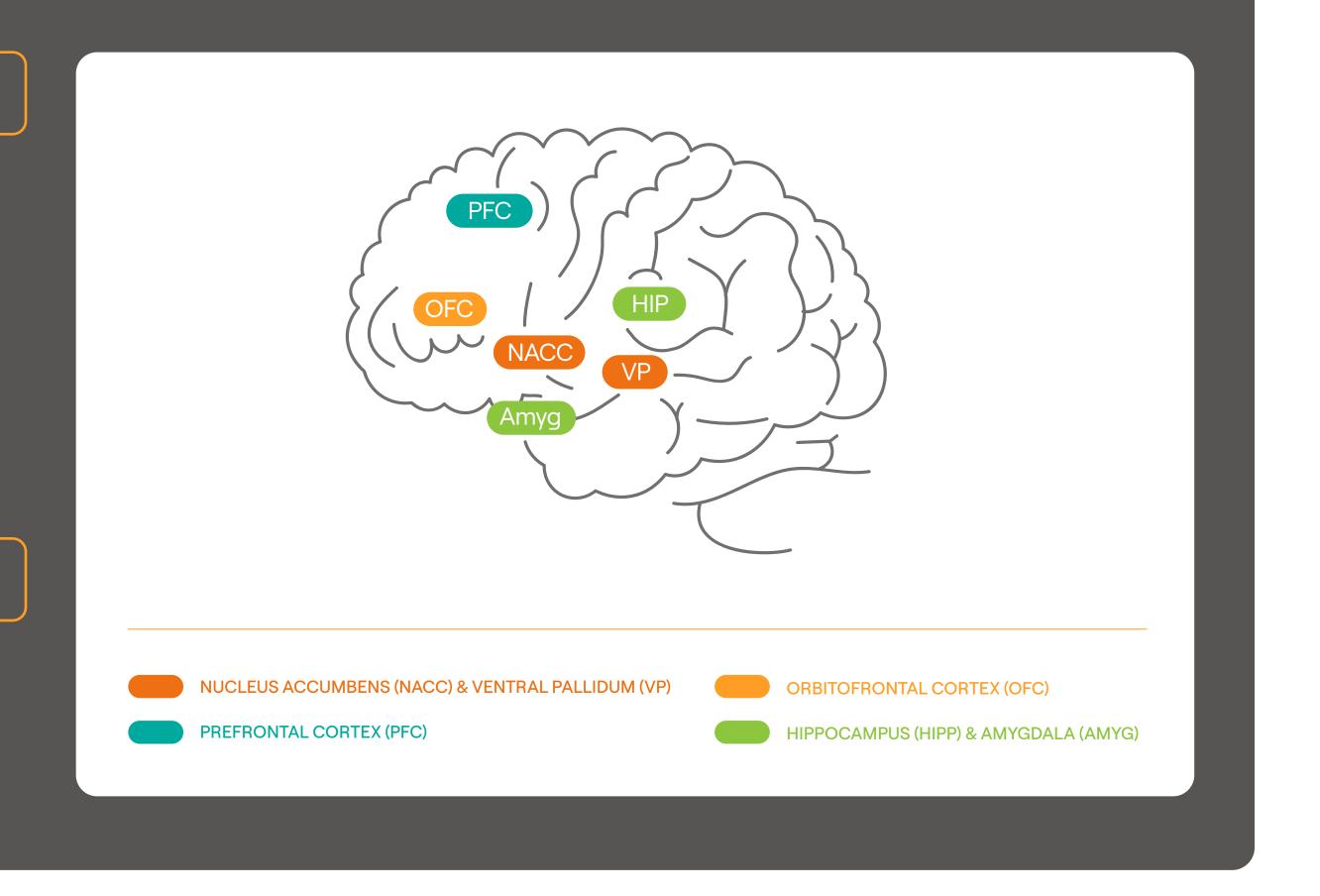
#### What are we doing differently?

Based on new research, Awakn's drugs will target the brain circuits that drive addiction through multiple receptors rather than single drug receptors. These circuits control the behavioral drivers of addiction. By focusing on circuit mechanisms rather than isolated receptors Awakn's approach has the potential to be effective in the treatment of both substance and behavioral addictions.

This disruption allows the individual to escape from the repetitive addictive behaviors and thoughts, and in doing so engage with a psychotherapeutic process to enable lasting positive change.

#### Medicine and therapy (therapeutics)

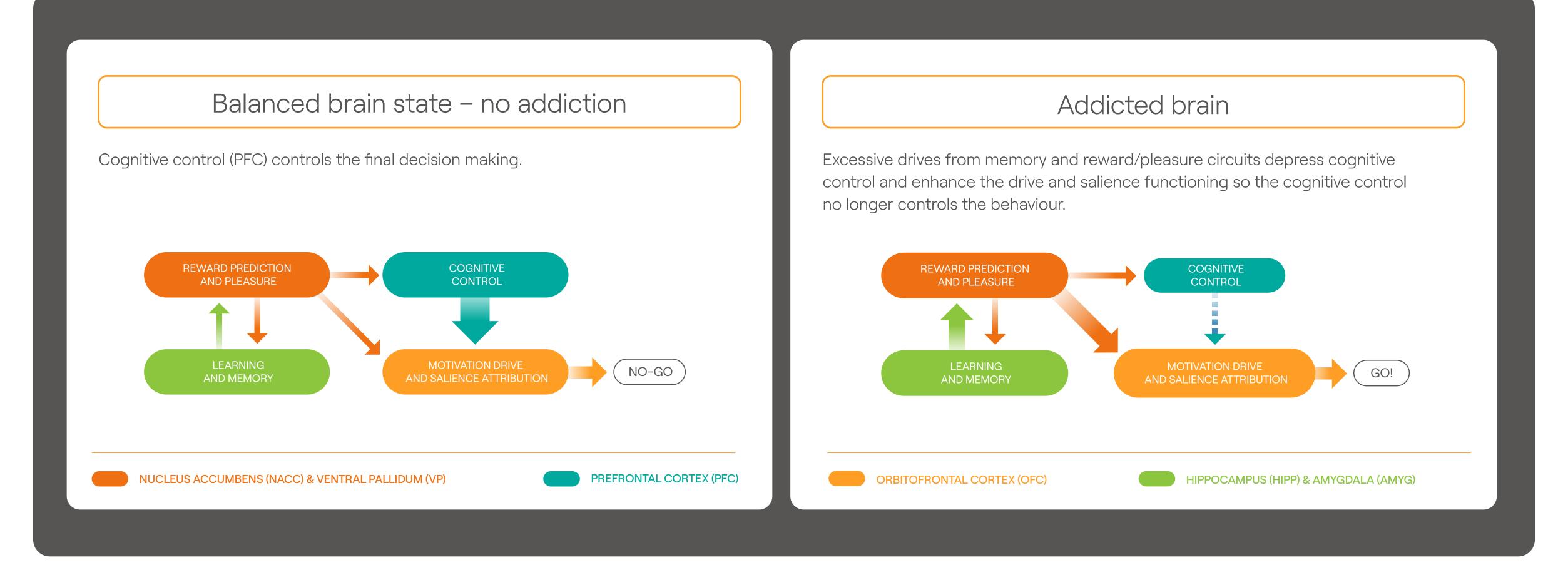
This is where Awakn's proprietary therapy comes in. Our therapies work in conjunction with our medicines, enabling the patients to regain control over their lives and helping them to learn new more adaptive ways to respond to addictive urges, cravings and the underlying processes that drive them.





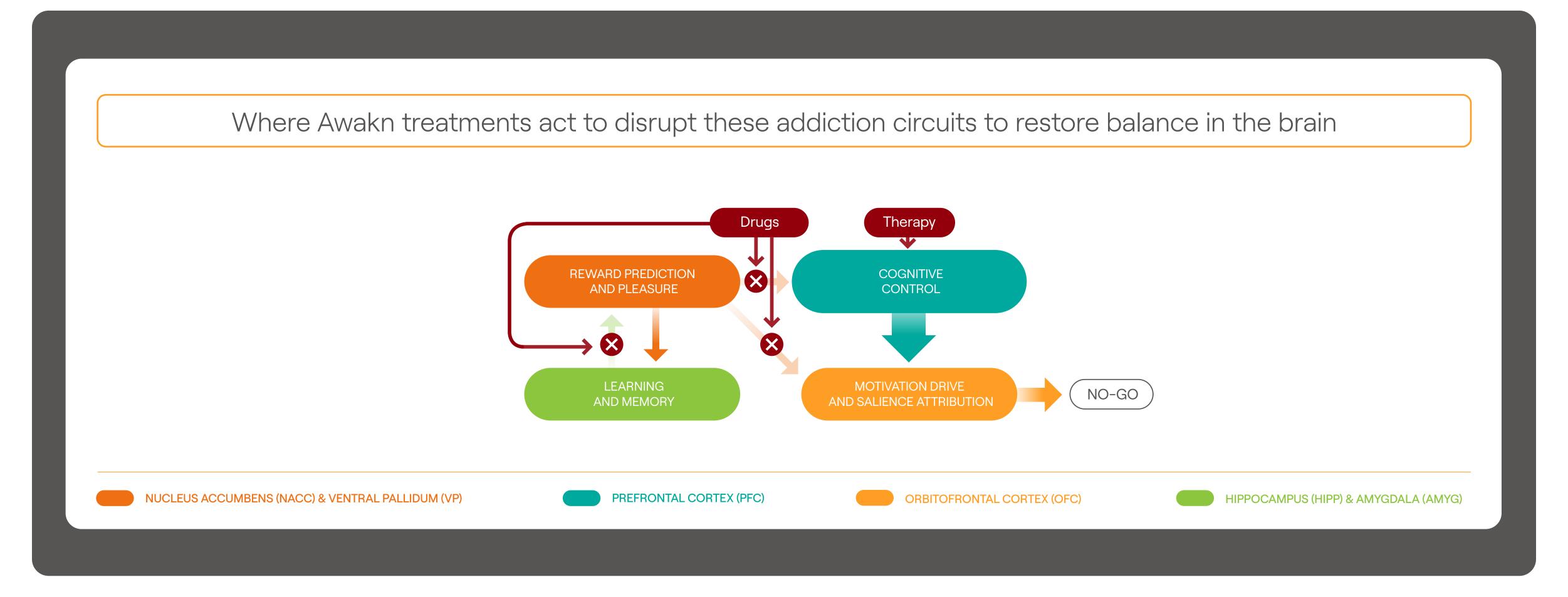
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# Our Approach – The Solution





# Our Approach – The Solution









## Therapeutics Development Strategy

Our research team consists of world leading experts in the fields of drug development, clinical research, psychiatry, psychotherapy and neurochemistry.

Our team, is building a pipeline of new therapeutics (drugs and therapies to be used in combination).

We will focus our research activities on treating addictions where the consequences for the patient, their family and society are at present most severe, with Near, Medium, and Long-Term programs.

#### NEAR TERM

### Ketamine-Assisted Therapy

Alcohol Use Disorder (AUD) - phase-Ila/b complete

Behavioral Addictions – Clinical Development (Including Gambling Disorder, Binge Eating Disorder, Internet Gaming Disorder and Compulsive Sexual Behavior).

#### MEDIUM TERM

### MDMA-Assisted Therapy

Alcohol Use Disorder - phase-lla complete

#### LONG TERM

#### New Chemical Entities

Develop Proprietary NCE's and Therapies to treat addiction more effectively and efficiently than currently available treatments.



# Progress: Our Pipeline





### Ketamine Research Program

#### Alcohol Use Disorder:

- Awakn acquired the exclusive rights to the worlds only phase-Ila/b clinical trial for Ketamine-Assisted Therapy to treat AUD, led by world renowned ketamine expert, Prof. Celia Morgan who is also Awakn's Head of Ketamine-Assisted Therapy for addiction.
- Results from the successful phase-IIb trial were published in January 2022 in the American Journal of Psychiatry.
- Awakn has signed a MOU with the NHS in the UK to bring forward research in to phase-III and assess the organizational readieness of the NHS to adopt the treatment.
- Awakn is now assessing how to progress the phase-IIb into a pivotal phase-III trial.

#### Behavioral Addictions:

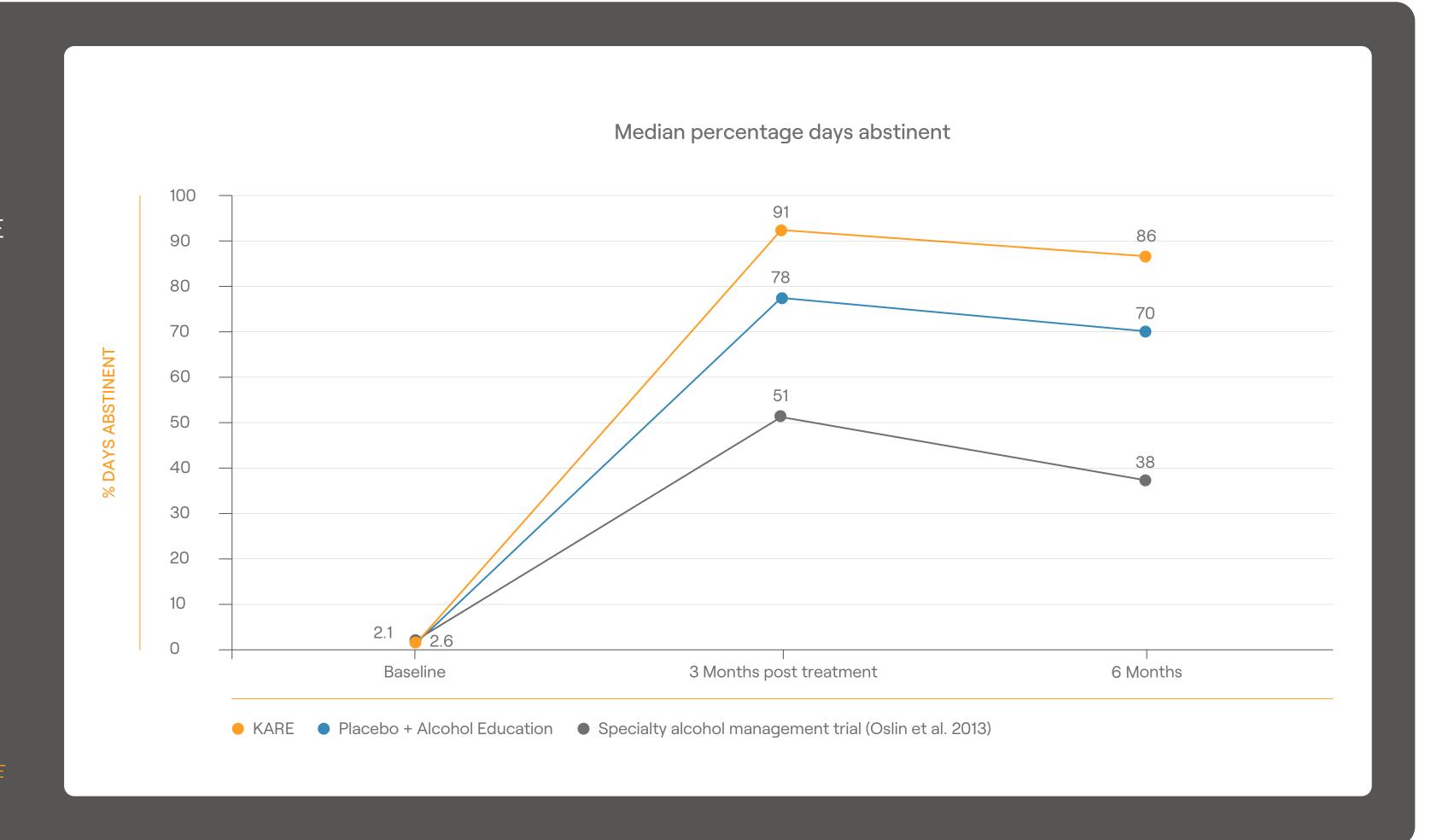
- Awakn Initiated the first-ever ketamine treatment study for Gambling Disorder led by Professor Celia Morgan in August 2021.
- In January 2022 the study was broadened to include:
  - Binge Eating Disorder.
  - Compulsive Sexual Behavior (including pornography addiction).
  - Internet Gaming Disorder.



### Phase-Ila/b - Ketamine-Assisted Therapy for AUD

#### Primary Outcome: Days Abstinent

The KARE therapy produced a statistically significant increase in percentage days abstinent in comparison to the placebo and education group. With 86% abstinence observed in the KARE therapy arm, this is more than double the 38% abstinence observed in a similar group of patients receiving industry standard treatment as usual in the US.

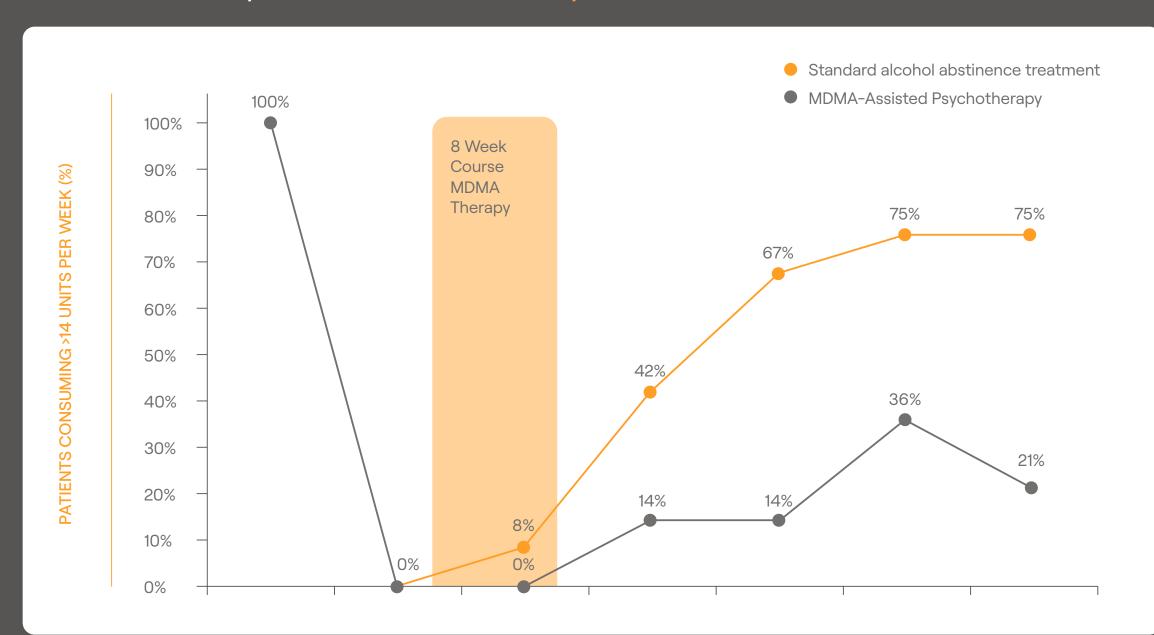


<sup>\*</sup> Treatment as usual specialist outpatient alcohol care in US taken from a trial (Oslin et al. 2013) was chosen as a descriptive comparator as KARE will likely be delivered in outpatient settings.

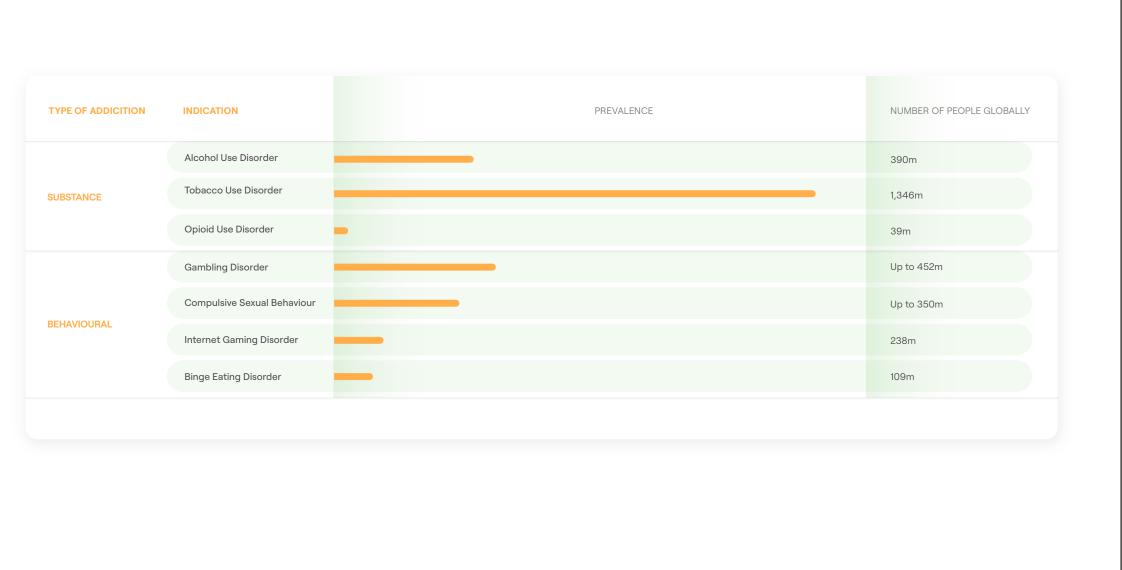


### Phase-Ila/b - Ketamine-Assisted Therapy for AUD

#### Co-Primary Outcome: Relapse



Exploratory Analysis: Number of Days Heavy Drinking



On average the KARE group were 2.7 times more likely than the placebo education group and 2.5 times more likely than the industry standard treatment as usual study group to relapse. Heavy Drinking Days, defined as 65g of alcohol for men, 52g for women in a single day, is an FDA and EMA regulatory endpoint guideline.

While not one of the trials primary endpoints, we saw a statistically significant reduction in 'Heavy Drinking Days' when comparing KARE to placebo and education group. When comparing KARE to the industry standard treatment as usual in the US, we can see 77% reduction in Heavy Drinking Days. Heavy Drinking Days is a primary endpoint used by EMA and FDA when assessing marketing authorization/ regulatory approval.

\* Treatment as usual specialist outpatient alcohol care in US taken from a trial (Oslin et al. 2013) as KARE will likely be delivered in outpatient settings.



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## MDMA Research Program

#### Assets acquired:

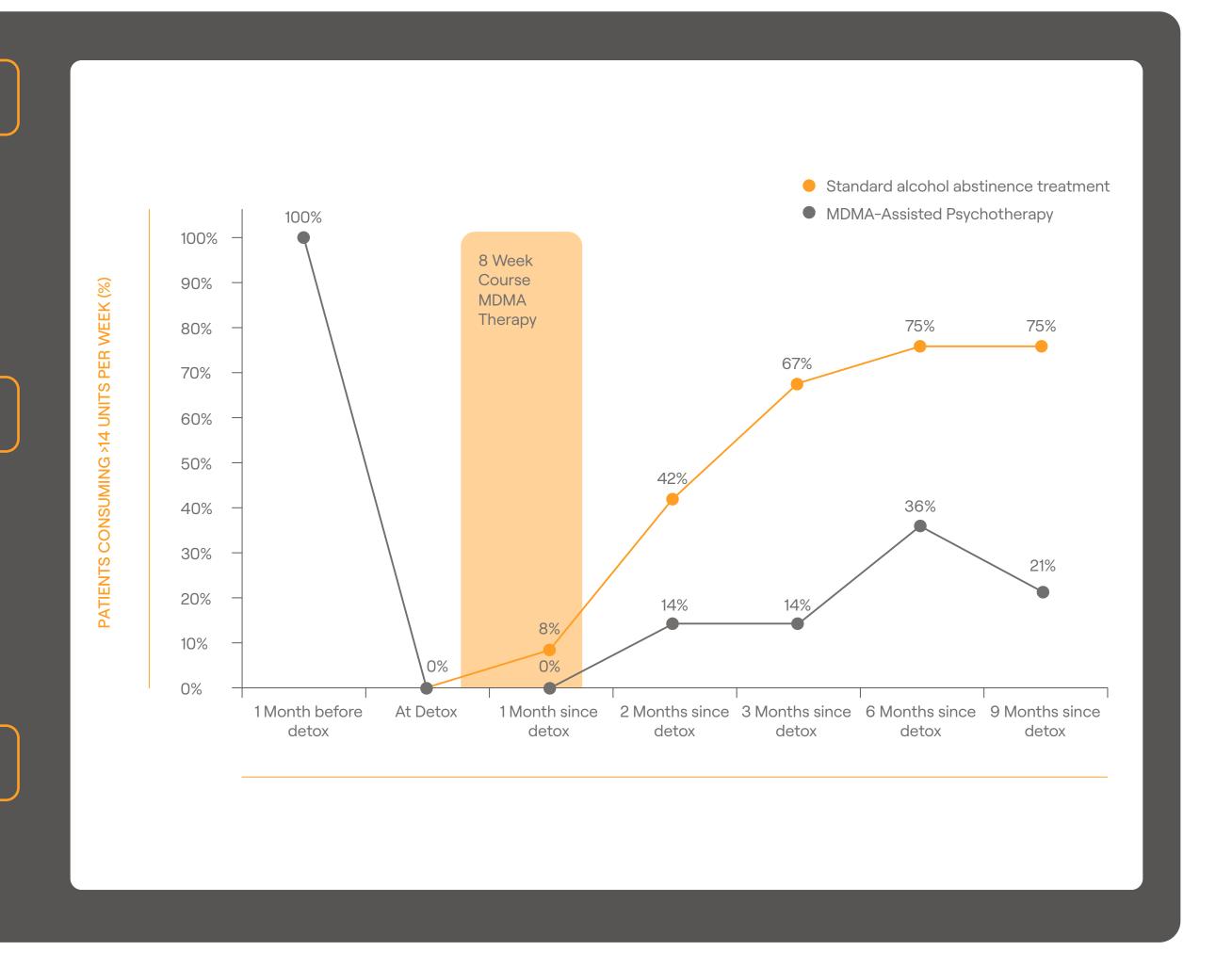
- Awakn has acquired the exclusive rights to the worlds only phase-IIa clinical trial for MDMA-Assisted Therapy to treat Alcohol Use Disorder led by world renowned addiction experts, Prof. David Nutt, Dr. Ben Sessa, Dr. Laurie Higbed.
- The team who led this trial Prof. David Nutt, Dr. Ben Sessa and Dr. Laurie Higbed all now work for Awakn.

#### Current activity:

- Progressing the BIMA trial into phase-IIb clinical trial for MDMA-Assisted Therapy in treating patients with Alcohol Use Disorder. This will be a two armed Randomized Trial.
   N= 120.
- Awakn has signed a MOU with MAPS to explore a data licensing agreement and
  a partnership to secure marketing authorisation/regulatory approval for the
  commercialization of MDMA-assisted therapy for the treatment of AUD in Europe.

#### Planned future activity:

 Seek to secure marketing autoriazation/regulatory approval for MDMA to treat AUD in the UK and EU.





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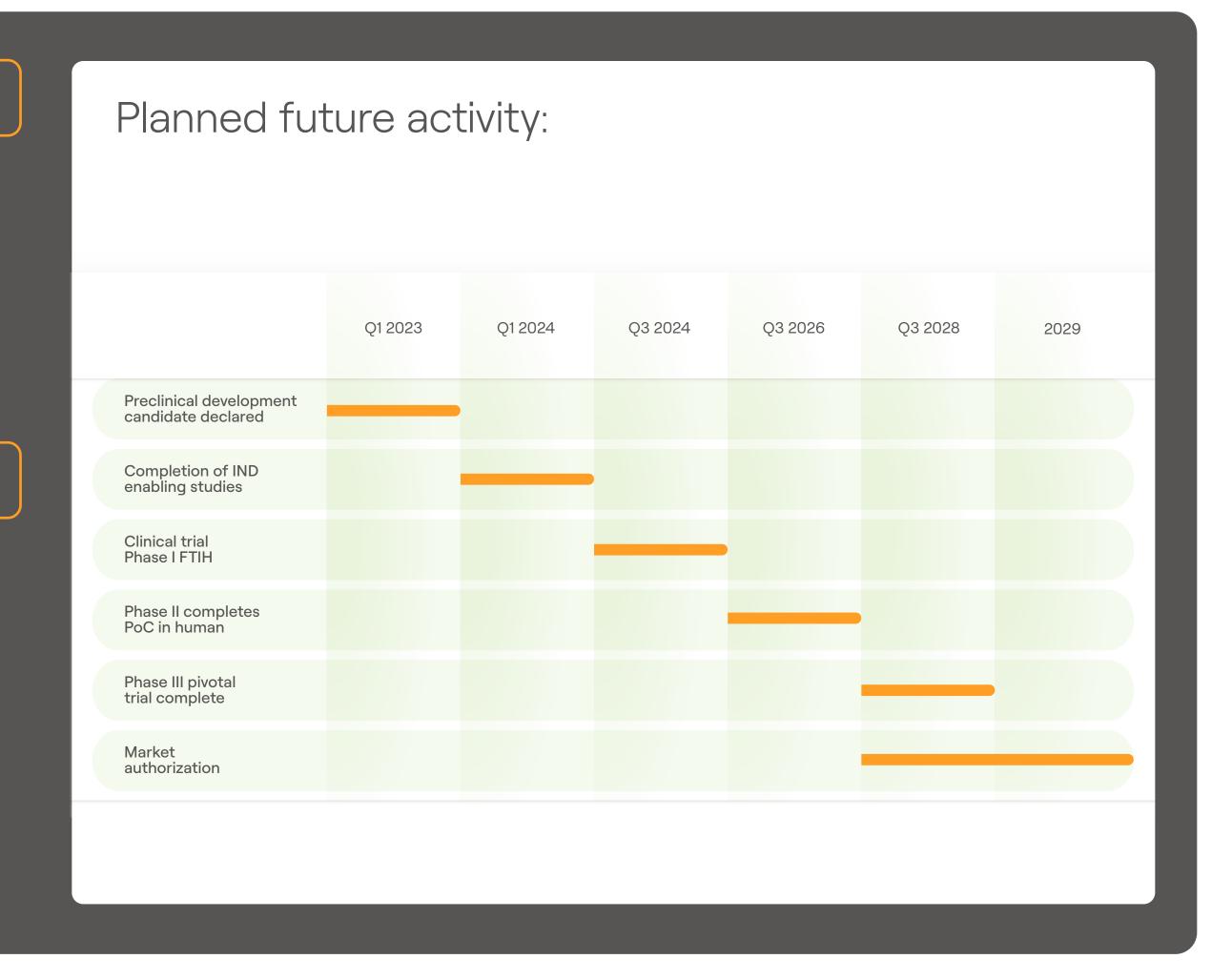
## NCE Research Program

#### Assets acquired:

- Awakn has acquired six years of proprietary research data from Prof. David Nutt, who is now Awakn's Chief Research Officer.
- This data describes newly discovered modes of action for MDMA and potentially faster acting entactogenic compounds, facilitating our NCE programme.

#### Current status:

- Hit to Lead program completed with our research partner Evotec.
- In vitro and in vivo data shows efficacy for drug-like hits, defining chemical series for lead optimization.
- Patents filed.
- Lead Optimisation initiating Q1 2022.





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## Delivery: Clinics

awaknclinics.com

Providing hope for those for whom the status quo is not working by combining the proven therapeutic potential of psychedelics with therapy to treat addiction and other mental health conditions.

Each Awakn Clinic will be owned and operated by Awakn, will be led by a consultant psychiatrist, will deliver Ketamine-Assisted Therapy in the near term, and will utilize MDMA when Awakn secures marketing authorization.

2021 2022 2023+ Europe & Europe & Europe United Kingdom United Kingdom · Nordic's x 3 • DACH (Germany, Austria, Switzerland) · Oslo - Open · London #1 Benelux (Belgium, Netherland, Luxembourg) · Bristol - Open Manchester France ·London #2 Birmingham · Dublin, Ireland • UK clinic x 1 Nordics x 1



# Delivery: Clinics

awaknclinics.com

Our target is 20 clinics by the end of 2024, with an average of 6 treatment rooms per clinic.

Treatment programs will cost between £6,000 - £7,500. Each treatment program will consist of 3-4 ketamine sessions and 8 therapy and integration sessions.

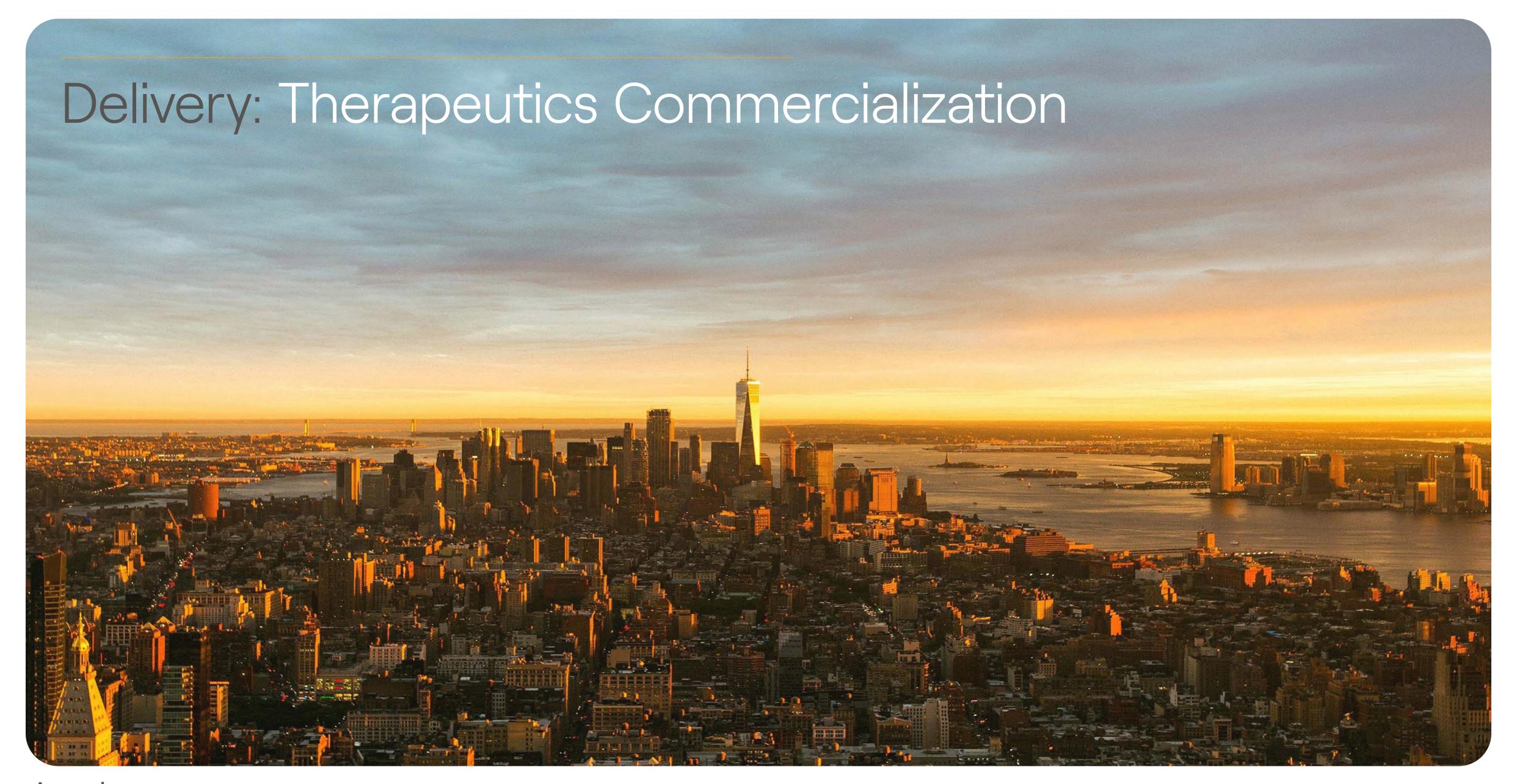
We will deliver approximately 6 patient treatment programs, per treatment room, per month.

> Each clinic will generate on average £3m revenue per annum.











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# Licensing Partnerships: Starting 2022

# Purpose:

• To commercialize Ketamine-Assisted Therapy for Alcohol Use Disorder.

# Target Audience:

• Addiction treatment clinic's in the US and Canada.

Licensing partnerships outside UK and Europe for the Awakn KARE methodology.

#### Proposition:



Access to KARE proprietary IP



Systems



Training



Clinic design



### Awakn in the Media











The Telegraph













The Daily Telegraph











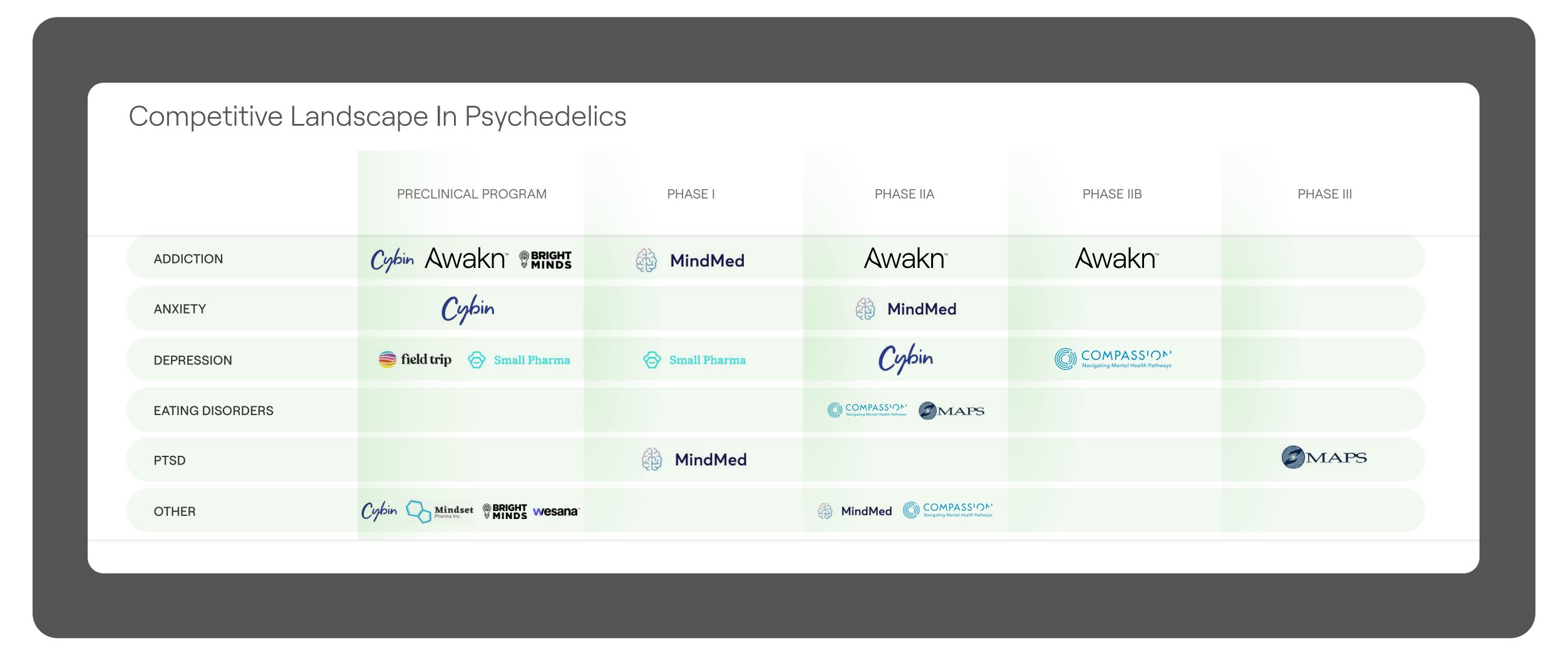


# Cap Table

Capital Structure		
	Common Shares	24,887,307
	Warrants	1,822,785
	Stock Options	2,009,828
	DSU's	35,172
	Full Diluted	28,755,092
	No Debt	
	Management / Insider Ownership	23.64%
	Escrowed Shares	65.12%

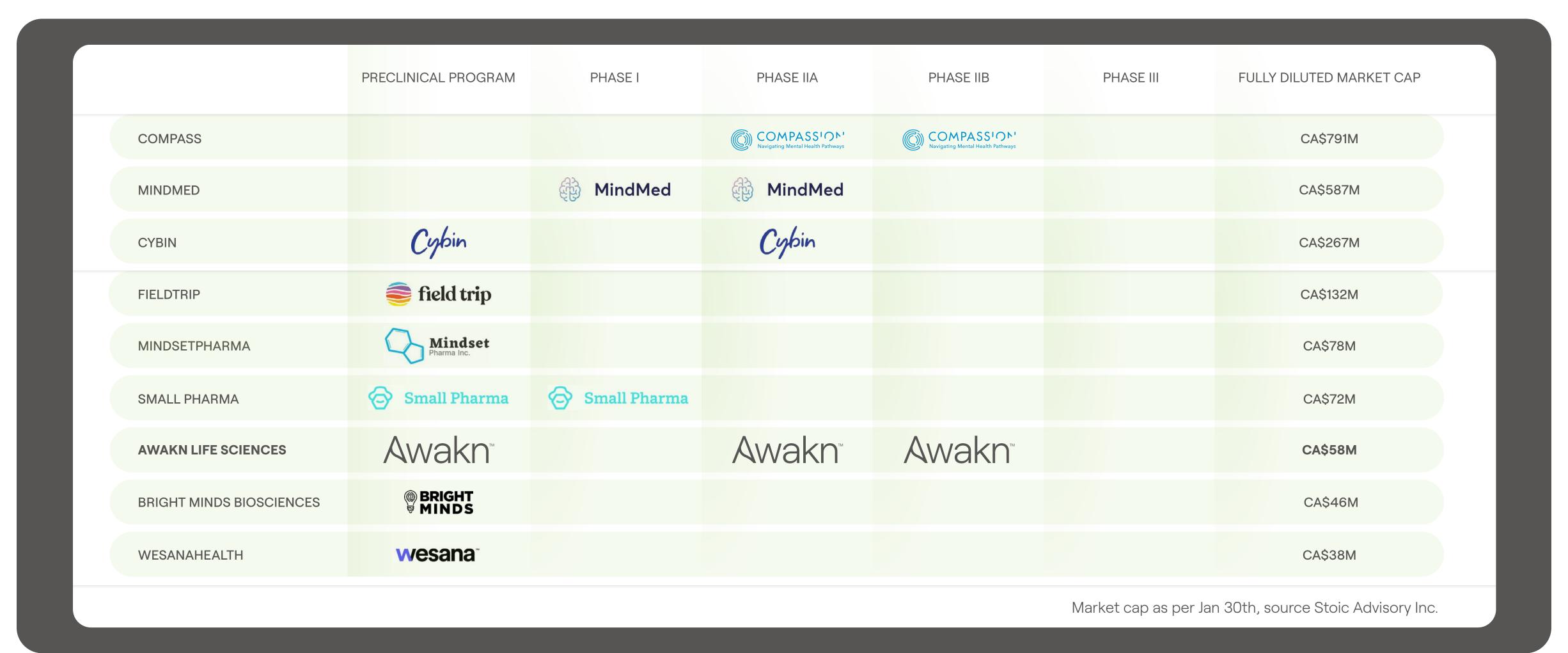


# Progress vs Competitor Landscape





# Comparables





## Why Invest in Awakn?

#### Multiple Scalable Revenue Streams:

- Clinics from 2021.
- Therapeutics Commercialization from 2022.



#### Our Focus – Addiction (Substance and Behavior)



- One of the biggest unmet medical needs of our times.
- Current treatment options have limited efficacy.
- Significant current and future market opportunity.
- De-risking our future activity: Human Proof of Concept shown for entactogens in our clinical trials (KARE, BIMA)

#### A Revolutionary Approach



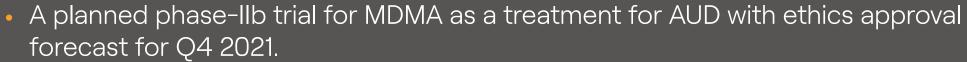
- Targeting brain circuits rather than individual receptor sites.
- Combined novel therapeutics drugs and therapies used in combination.
- Potential to treat both substance and behavioral addictions.

#### IP Portfolio











#### Team





# Global Research Leaders in the Field of Psychedelic Treatments for Addiction:



- Prof. Celia Morgan led the world's only Ketamine-Assisted Therapy for AUD study (KARE).
- Prof. David Nutt and Dr. Ben Sessa led the world's only MDMA-Assisted Therapy for AUD study (BIMA)



# References

In relation to references on slide 9

INDICATIONS	SCOPE	SOURCE
ALCOHOL USE DISORDER	GLOBAL	Global Burden of Alcohol Use Disorders and Alcohol Liver Disease https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6966598/
TABACCO USE DISORDER	GLOBAL	Tobacco Use Worldwide: Legislative Efforts to Curb Consumption https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6748295/
OPIOID USE DISORDER	GLOBAL	The Lancet - The Global Burden of Diseases, Injuries, and Risk Factors Study https://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736(19)32229-9.pdf
GAMBLING DISORDER	GLOBAL	Problem gambling worldwide: An update and systematic review of empirical research (2000–2015) https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5370365/
COMPULSIVE SEXUAL BEHAVIOUR	GLOBAL	Epidemiology, Prevalence, and Natural History of Compulsive Sexual Behaviour https://www.sciencedirect.com/science/article/abs/pii/S0193953X08000725
BINGE EATING DISORDER	GLOBAL	The prevalence and correlates of binge eating disorder in the World Health Organization World Mental Health Surveys https://pubmed.ncbi.nlm.nih.gov/23290497/
INTERNET GAMING DISORDER	GLOBAL	Global prevalence of gaming disorder: A systematic review and meta-analysis https://pubmed.ncbi.nlm.nih.gov/33028074/



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