ALK presents new data at FAAM-EUROBAT-ISMA 2026: Data from a comparative study using adrenaline trainer devices suggests EURneffy® nasal adrenaline spray is more suitable for public places than an adrenaline auto-injector

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At the 2026 European Academy of Allergy and Clinical Immunology (EAACI) Food Allergy and Anaphylaxis Meeting (FAAM-EUROBAT-ISMA) in Utrecht, the Netherlands, 19–21 November 2026, ALK is presenting the findings from two analyses of a Canadian comparative study conducted by the company. The data suggest that hesitation and device complexity may get in the way of bystanders giving adrenaline when anaphylaxis happens in public and community settings, and that a needle-free option could help.[1,2]

Key findings being presented include:

- In a Canadian comparative study using trainer devices, adult bystanders with no prior device experience or training rated EUR*neffy*® (nasal adrenaline spray) significantly easier to use than an adrenaline auto-injector (AAI) and said they would be less hesitant and more willing to help someone in an anaphylaxis emergency[1]
- Bystanders rated the nasal spray significantly more favourably across all four categories assessed (ease of use, hesitation, willingness to help and suitability for public places)[1]
- After simulated use of both devices, 88% of participants said they would prefer EUR*neffy*® to be the adrenaline device available in public places, rating it more suitable for broad public access and for use by people with no medical training[2]

The data are being presented within the following abstracts:

Presenting author	Abstract title	Abstract number	Date and time (CET)
Dr Shelley Dua	Untrained bystanders rated nasal adrenaline as easier to use and more suitable for public access than an adrenaline autoinjector	OA-48	Saturday, 21 November 2026, 09:18
Dr Shelley Dua	Use of adrenaline in public places: preference for nasal adrenaline after simulated use	OA-49	Saturday, 21 November 2026, 09:30
Dr Shelley Dua	Shared decision-making changes adrenaline device preference: the impact of information and daily life fit	P159	Saturday, 21 November 2026, 10:00 – 10:45

In the first abstract from the Canadian comparative study of EUR*neffy*® and AAI trainer devices involving 30 untrained adults with no injection or single-use nasal spray experience, participants rated EUR*neffy*® as significantly easier to use, less likely to cause hesitation, more comfortable to step in and use on another person and better suited for broad public access.[1] After using both trainer devices on a mannequin in a simulated emergency without prior training or familiarisation, participants rated they were expected to feel more confident using EUR*neffy*® in crowded and noisy environments, and more comfortable helping someone with other people watching.[1]

"Public access to adrenaline is starting to move beyond auto-injectors, and these findings help explain why device and delivery method matters for the people most likely to be first on the scene. At ALK, we are committed to making adrenaline available for more patients, allowing anyone to step in quickly to help someone experiencing anaphylaxis when every second counts." said Dr. Judit Nyirady, Senior Vice President, Global Chief Medical Office, ALK.

A second analysis of the same Canadian study examined views on public access and emergency use after simulated administration with both devices.[2] The analysis included 90 participants: 30 adults, 30 children and 30 caregivers. Among the adults and children, half were patients with severe allergies already carrying an AAI and half were individuals without severe allergy, representing potential new patients.[2] Following simulated use, participants consistently favoured EUR*neffy*® over the AAI when considering adrenaline use in public and community settings, with 79 of 90 participants (88%) indicating they would prefer to have EUR*neffy*® available in public places.[2] They rated EUR*neffy*® as more suitable for broad public access and said they would be more willing to use it on someone they did not know.[2] They also reported they would be less hesitant to help someone use it, reported higher agreement that someone with no medical training could use it in an emergency and would be more comfortable leaving it with a school or club, compared with the AAI.[2]

These findings come as several countries look to broaden public access to adrenaline beyond auto-injectors. Over half of US states have updated school stock adrenaline (epinephrine) laws to cover devices beyond auto-injectors, and the UK's Medicines and Healthcare products Regulatory Agency (MHRA) is consulting on proposals to allow schools to keep spare nasal adrenaline sprays on site[3,4]. In Ontario, Canada, the Medical Drone

Program run with Peel Regional Paramedic Services, has also included nasal adrenaline in its kits, alongside a defibrillator and other life-saving medication.[5] In the Republic of Ireland, one organisation is now incorporating nasal adrenaline into its allergy emergency kits.[6]

"*When someone has an anaphylactic reaction in a café or on a sports field, the person who steps in may be a stranger and may never have held an adrenaline device before,"* said Dr Shelley Dua, Consultant Allergist, Cambridge University Hospitals NHS Trust, UK, and an author of the study. *"In this study, we see the importance of emergency adrenaline devices being easy to use, to allow bystanders to step in and administer adrenaline promptly in the event of anaphylaxis*."

Anaphylaxis is a severe allergic reaction that requires immediate treatment with adrenaline.[7-10] Evidence suggests that around half of people living with severe allergy have not used their AAI when needed in an emergency, and close to half of those at risk of anaphylaxis do not carry one regularly.[11,12] When an emergency happens in a community setting, treatment may depend on a bystander with no allergy history and no experience of using an emergency device.

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About anaphylaxis
Anaphylaxis is a severe allergic reaction, characterised by the acute onset of symptoms involving different organ systems, which can occur within minutes of exposure to an allergen, such as insect stings or bites, foods or medicinal products.[9] It is a serious and potentially life-threatening event requiring immediate medical treatment that can occur across all ages, including babies, children, adults and the elderly.[8,10] Globally, the incidence of anaphylaxis is estimated to range from 50 to 112 cases per 100,000 per year, with rates varying more widely in children, from 1 to 761 cases per 100,000 per year.[10,13] It is reported that children and adolescents face the highest incidence of anaphylaxis.[14]

Adrenaline is universally recognised as the first-line, life-saving treatment for anaphylaxis, with endorsement across major international guidelines.[7-10] Prompt administration is critical to patient outcomes, as delays in treatment may be associated with increased morbidity and mortality.[15,16] Despite adrenaline's well-established role in anaphylaxis management, AAI use in practice frequently falls short of guideline recommendations.[12,17]

***About* EUR*neffy*®**
EUR*neffy*® *is the first needle-free adrenaline-based product approved for the emergency treatment of anaphylaxis in adults and children.[18]* EUR*neffy*® *is well-absorbed through the nose, offering a portable alternative to injectable forms of adrenaline for treating severe allergic reactions.[18,19]* EUR*neffy*® *has a total shelf life of 30 months (2 mg) and 24 months (1 mg), no special storage requirements and freezing does not affect its shelf life.[18,20] Upon activation,* EUR*neffy*® *nasal spray delivers a full, single dose of adrenaline, without the need for priming.[18] It is recommended that two* EUR*neffy*® *devices are carried to treat allergic reactions (anaphylaxis) in case a second dose is required.[18]*

In the European Union, EUR*neffy*® *2 mg is approved for the emergency treatment of anaphylaxis in adults and children who weigh ≥30 kg, and* EUR*neffy*® *1 mg is approved for the emergency treatment of anaphylaxis in children aged 4 and older who weigh 15 kg to less than 30 kg.[18,21]* EUR*neffy*® *1 mg and 2 mg have also been approved in the UK.[22-24] In the US, Japan, China, Australia and Canada* EUR*neffy*® *2 mg is approved under the brand name neffy® 2 mg.[25-29] In the US and Australia, neffy® 1 mg has also been approved for children who weigh 15–30 kg (with an age restriction of 4 years and older in Australia) and in Japan, neffy® 1 mg and 2 mg are approved for the emergency treatment of severe allergic reactions (anaphylaxis) in adults and children who weigh ≥15 kg.[20,25,30]*

About the Canadian comparative study[1,2]
An analysis of 30 Canadian adults with no injection or single-use nasal spray experience compared EUR*neffy*® *and AAI trainer devices. Participants used both devices on a mannequin in a simulated emergency, without training or familiarisation, and immediately afterwards rated ease of use, hesitation to use, willingness to use and suitability for placement of adrenaline in public settings.[1] A second public access analysis compared* EUR*neffy*® *and AAI trainer devices in 90 participants: 30 adults and 30 children (in each group, 15 with severe allergy carrying an AAI and 15 without severe allergy as potential new patients), plus the children's 30 caregivers. Adults and children performed two simulated self-administrations and one mannequin administration with each device while caregivers observed, then completed five survey items on public access and emergency use and one question on which device they would prefer in public places.[2]*

About ALK
ALK is a global specialty pharmaceutical company focused on allergy. ALK's activities cover the entire value chain of developing, sourcing, producing, and marketing a diversified portfolio of products for diagnosing and treating respiratory allergies and severe allergic reactions (anaphylaxis) in both children and adults. Headquartered in Denmark, ALK employs around 2,800 people worldwide and is listed on Nasdaq Copenhagen (Nasdaq: ALK B). Visit us at www.alk.net.

Forward-looking statements
This announcement contains forward-looking statements, including forecasts of future revenue and operating profit as well as expected business-related events. Such statements are naturally subject to risks and uncertainties as various factors, some of which are beyond the control of ALK, may cause actual results and performance to differ materially from the forecasts made in this announcement. Such factors include, but are not limited to, general economic and business-related conditions, including legal issues, uncertainty relating to demand, pricing, reimbursement rules, regulatory approvals, partners' plans and forecasts, fluctuations in exchange rates, competitive factors, and reliance on suppliers. Additional factors include the risks associated with the sourcing and manufacturing of ALK's products. ALK undertakes no obligation to publicly update or revise forward-looking statements to reflect subsequent events or circumstances after the date made, except as required by law.

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Attachment

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