Recent Hantavirus On A Cruise Ship Highlights the Need for Broad-Spectrum Antiviral Drugs Such as NV-387, Says NanoViricides

Shelton, Connecticut - May 11, 2026.

NanoViricides, Inc. (NYSE American: NNVC) (the "Company"), a clinical stage leader developing antiviral drugs that viruses cannot escape, emphasizes the critical need for a revolutionary, broad-spectrum, antiviral drug like NV-387 in light of the recent Andes hantavirus incident on a cruise ship that has led to a flurry of worldwide activity to effectively quarantine the ship MV Hondius and trace passengers' contacts in an effort to prevent a potential global epidemic.

"NV-387 could have possibly saved lives of the infected patients, given the preponderance of evidence on effectiveness of NV-387 in lethal lung infections in animal models," said Anil R. Diwan, PhD, President and Executive Chairman of the Company, adding, "Physicians in charge could have sought it under emergency or expanded use procedures, given that there is no drug for the treatment of hantavirus infections. NV-387 has successfully completed Phase I clinical trial of safety and tolerability in healthy human volunteers."

The Andes hantavirus infects directly into the lungs via fomites (droplets of cough or spit) from infected persons.

NanoViricides, Inc. has used exactly this route of infection in our lethal animal models of many distinctly different viruses for testing NV-387. We have found NV-387 to be highly effective in treating every one of the viruses that we have tried so far, including: Coronaviruses, RSV, Influenza, Monkeypox, and even Measles virus.

The ship has docked on May 10th for orderly release of persons on board in Tenerife, Canary Islands, Spain[1]. Disembakation and transfer of travelers on board under strict procedures designed to minimize spread are almost completed and the ship with minimal staff will proceed to the Netherlands. The travelers are being returned with special flights to their countries of residence. All of those on board will be isolated for observation once they reach their countries. Persons testing positive will be put in special hospital bio-containment units for care. Of the 18 persons returning to the USA, one has tested positive, and another one is showing symptoms. The US passengers will be brought to an isolation facility in Nebraska for observation [2].

The extreme care in handling this incidence is designed to eliminate the risk of any spread.

Persons that had left the ship before the deadly infection was confirmed on May 2nd are being traced and their contacts are also being traced. Constant observation can minimize the risk of spread by isolating anyone testing positive for the hantavirus. Seven Americans that returned from the ship to four states are being observed; none of them is positive for the hantavirus, suggesting minimum risk.

The economic cost of the global effort for this single incidence is tremendous, not to mention the inconveniences to all involved, including the passengers, their contacts, health care workers, and all persons who were brought in to control this situation so that it does not explode into a global outbreak.

Imagine if we had a broad-spectrum antiviral on hand, ready for use. The first infected cases could have been saved. Further, all suspected infections could be successfully treated with minimal potential for spread, and contacts could be prophylactically treated to block any possibility of spread. The result would be a highly effective, rapid and low cost response.

This is exactly what NanoViricides is aiming for, and NV-387 will likely address 90% of pathogenic viral infections, known and unknown, because of its unique design.

The Andes hantavirus that infected patients aboard the cruise-ship is capable of sustained person-

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[1] https://www.foxnews.com/video/6395149720112?msockid=265ec6d7e0276c1833cbd183e1a46d5e .

[2] https://www.cbsnews.com/news/cruise-ship-stricken-by-hantavirus-reaches-canary-islands/ and other news sources.

to-person transmission, and has a very high case fatality rate (~35%, i.e. one in three infected people could die of the severe hantavirus pulmonary syndrome, called HPS). The "patient zero" and his wife, both of whom were infected before boarding, died, and so did another person on board. Several other suspected infected persons are under observation and some have recovered.

While Andes hantavirus is generally limited to South America, the potential for global spread is vividly brought out by the recent incidence.

Another lethal hantavirus, called "Sin Nombre" (SNV) is endemic in the western deer mouse population in North America west of the Mississippi, but the number of cases remains low. Since 1993 (the virus' discovery) to 2023 it had caused 890 confirmed cases with 35% resulting in deaths in the USA, according to the CDC[3]; and over 100 cases have occurred in Canada[4]. In February, 2025, actor Gene Hackman's wife Betsy Arakawa was found dead from hantavirus infection from suspected aerosolized rodent material contamination.

With ever-increasing global travel, local zoonotic infections such as hantavirus can quickly travel far and wide if not caught in time, potentially causing global pandemics, as was the case with COVID-19. It is not feasible to produce a new vaccine and a new set of antibody drugs to combat every possible virus; Even if vaccines and antibodies are produced, the virus would escape by generating variants, as the world has witnessed during the COVID-19 pandemic.

"Only safe and effective broad-spectrum antiviral drugs that can effectively combat most viral infections will enable the world to defend the global population in the war against known and unknown nanoscopic enemies that are viruses," commented Dr. Diwan, adding, "NV-387 is the only drug with this potential that is in clinical development today, to the best of our knowledge."

ABOUT NANOVIRICIDES

NanoViricides, Inc. (the "Company") (www.nanoviricides.com) is a clinical stage company that is creating special purpose nanomaterials for antiviral therapy. The Company's novel nanoviricide™ class of drug candidates and the nanoviricide™ technology are based on intellectual property, technology and proprietary know-how of TheraCour Pharma, Inc. The Company has a Memorandum of Understanding with TheraCour for the development of drugs based on these technologies for all antiviral infections. The MoU does not include cancer and similar diseases that may have viral origin but require different kinds of treatments.

The Company has obtained broad, exclusive, sub-licensable, field licenses to drugs developed in several licensed fields from TheraCour Pharma, Inc. The Company's business model is based on licensing technology from TheraCour Pharma Inc. for specific application verticals of specific viruses, as established at its foundation in 2005.

Our lead drug candidate is NV-387, a broad-spectrum antiviral drug that we plan to develop as a treatment of RSV, COVID, Long COVID, Influenza, and other respiratory viral infections, as well as MPOX/Smallpox infections. Our other advanced drug candidate is NV-HHV-1 for the treatment of Shingles. The Company cannot project an exact date for filing an IND for any of its drugs because of dependence on a number of external collaborators and consultants. The Company is currently focused on advancing NV-387 into Phase II human clinical trials.

NV-CoV-2 (API NV-387) is our nanoviricide drug candidate for COVID-19 that does not encapsulate remdesivir. NV-CoV-2-R is our other drug candidate for COVID-19 that is made up of NV-387 with remdesivir encapsulated within its polymeric micelles. The Company believes that since remdesivir is already US FDA approved, our drug candidate encapsulating remdesivir is likely to be an approvable drug, if safety is comparable. Remdesivir is developed by Gilead. The Company has developed both of its own drug candidates NV-CoV-2 and NV-CoV-2-R independently.

The Company is also developing drugs against a number of viral diseases including oral and genital Herpes, viral diseases of the eye including EKC and herpes keratitis, H1N1 swine flu, H5N1 bird flu, seasonal Influenza, HIV, Hepatitis C, Rabies, Dengue fever, and Ebola virus, among others. NanoViricides' platform

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[3] https://www.cdc.gov/hantavirus/data-research/cases/index.html

[4] https://en.wikipedia.org/wiki/Sin_Nombre_virus cites original reference.

technology and programs are based on the TheraCour® nanomedicine technology of TheraCour, which TheraCour licenses from AllExcel. NanoViricides holds a worldwide exclusive perpetual license to this technology for several drugs with specific targeting mechanisms in perpetuity for the treatment of the following human viral diseases: Human Immunodeficiency Virus (HIV/AIDS), Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), Rabies, Herpes Simplex Virus (HSV-1 and HSV-2), Varicella-Zoster Virus (VZV), Influenza and Asian Bird Flu Virus, Dengue viruses, Japanese Encephalitis virus, West Nile Virus, Ebola/Marburg viruses, and certain Coronaviruses. The Company intends to obtain a license for RSV, Poxviruses, and/or Enteroviruses if the initial research is successful. As is customary, the Company must state the risk factor that the path to typical drug development of any pharmaceutical product is extremely lengthy and requires substantial capital. As with any drug development efforts by any company, there can be no assurance at this time that any of the Company's pharmaceutical candidates would show sufficient effectiveness and safety for human clinical development. Further, there can be no assurance at this time that successful results against coronavirus in our lab will lead to successful clinical trials or a successful pharmaceutical product.

This press release contains forward-looking statements that reflect the Company's current expectation regarding future events. Actual events could differ materially and substantially from those projected herein and depend on a number of factors. Certain statements in this release, and other written or oral statements made by NanoViricides, Inc. are "forward-looking statements" within the meaning of Section 27A of the Securities Act of 1933 and Section 21E of the Securities Exchange Act of 1934. You should not place undue reliance on forward-looking statements since they involve known and unknown risks, uncertainties and other factors which are, in some cases, beyond the Company's control and which could, and likely will, materially affect actual results, levels of activity, performance or achievements. The Company assumes no obligation to publicly update or revise these forward-looking statements for any reason, or to update the reasons actual results could differ materially from those anticipated in these forward-looking statements, even if new information becomes available in the future. Important factors that could cause actual results to differ materially from the company's expectations include, but are not limited to, those factors that are disclosed under the heading "Risk Factors" and elsewhere in documents filed by the company from time to time with the United States Securities and Exchange Commission and other regulatory authorities. Although it is not possible to predict or identify all such factors, they may include the following: demonstration and proof of principle in preclinical trials that a nanoviricide is safe and effective; successful development of our product candidates; our ability to seek and obtain regulatory approvals, including with respect to the indications we are seeking; the successful commercialization of our product candidates; and market acceptance of our products.

The phrases "safety", "effectiveness" and equivalent phrases as used in this press release refer to research findings including clinical trials as the customary research usage and do not indicate evaluation of safety or effectiveness by the US FDA.

FDA refers to US Food and Drug Administration. IND application refers to "Investigational New Drug" application. cGMP refers to current Good Manufacturing Practices. CMC refers to "Chemistry, Manufacture, and Controls". CHMP refers to the Committee for Medicinal Products for Human Use, which is the European Medicines Agency's (EMA) committee responsible for human medicines. API stands for "Active Pharmaceutical Ingredient". WHO is the World Health Organization. R&D refers to Research and Development.

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