



## UNMASKING SLEEP APNOEA

July 2019



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# What is Obstructive Sleep Apnoea?

- Obstructive sleep apnoea (OSA) is the most common type of 'sleep apnoea'
- OSA is the absence of breathing that occurs during sleep that results in disruptive sleep
- Compromises daytime functions leading to excessive sleepiness, memory impairment, depression and a host of co-morbidities, eg. hypertension, heart disease, stroke and diabetes etc.
- **Occurs when there is obstruction or collapse of the nose, soft palate and lateral walls of the airway**



**Key indicator:  
snoring**



**Risk factor for  
chronic disease**



**Cost burden \$149.6B,  
\$6,033 per person per  
year undiagnosed**

# How has OSA historically been treated?

Efficacy	Treatment type	How it works	Comment
100% <sup>1</sup>	<b>Standard of care</b> is Continuous Positive Airway Pressure (CPAP)	Patient wears mask and is hooked up to machine. Blows air into throat, forcing airways to open	Works well sometimes, but poorly tolerated by majority of patients
56% <sup>1</sup>	Mandibular Advancement Devices	Like a mouthguard. Brings the mandible forward, altering jaw and tongue position	Works for some patients, but ~50% require more treatment
Mixed results	Surgery	Intended to remove obstruction in patients' upper respiratory tracts	Complex and prone to failure. Failure leads to worse problems
Mixed results	Weight loss	Losing weight can help with reducing apneas in some cases	Requires patient compliance
Mixed results	Other	Reduced BMI linked to reduced severity of OSA	Not always readily achievable



# O<sub>2</sub>Vent Airway Technology

...near CPAP efficacy without the need for a mask

Standard MAD devices

56%<sup>1</sup>



- Oral appliance - brings lower jaw forward
- Efficacy significantly lower than CPAP
- Much higher compliance rates than CPAP

Oventus Airway Technology

80%<sup>1</sup>



O<sub>2</sub>Vent™  
Optima

ExVent™  
valve



- Oral appliance with Oventus Airway Technology and brings jaw forward similarly to MAD\* devices
- Near CPAP efficacy
- Regulates breathing pressure between nose and mouth
- Acts like a second nose
- Much higher compliance rates than CPAP

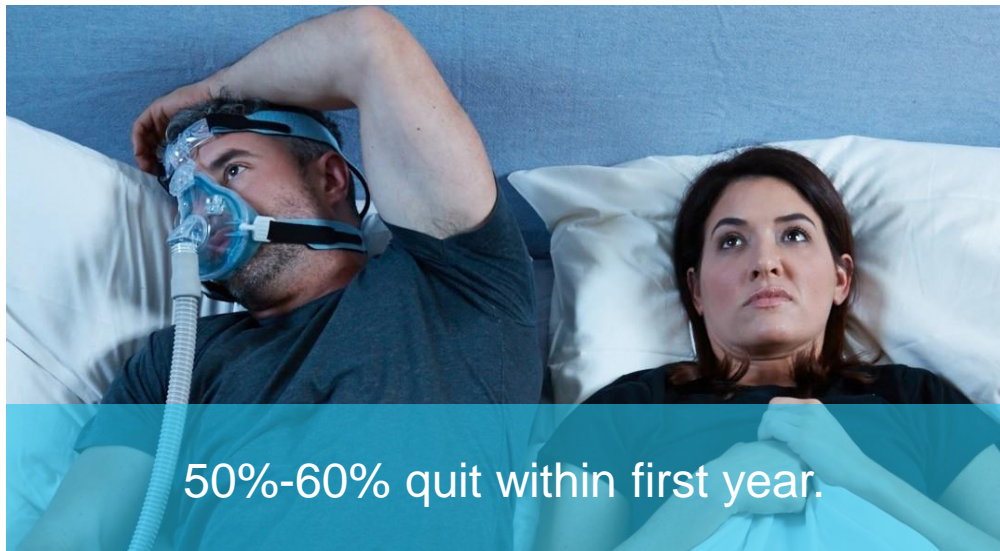
CPAP - standard of care

100%<sup>1</sup>



- Pressurising breathing airway with mask
- Highly efficacious
- Not well tolerated - poor patient compliance and comfort
- Discomfort of high pressure and mask
- Lack of portability, air leakages and noise

## Limitations of CPAP – standard of care



Discomfort due to mask and straps: facial abrasion, strap marks, claustrophobia and general discomfort



Pressure intolerance and device noise



Limits freedom of movement with the power cords and mask hose



Cleaning, maintenance and resupply.



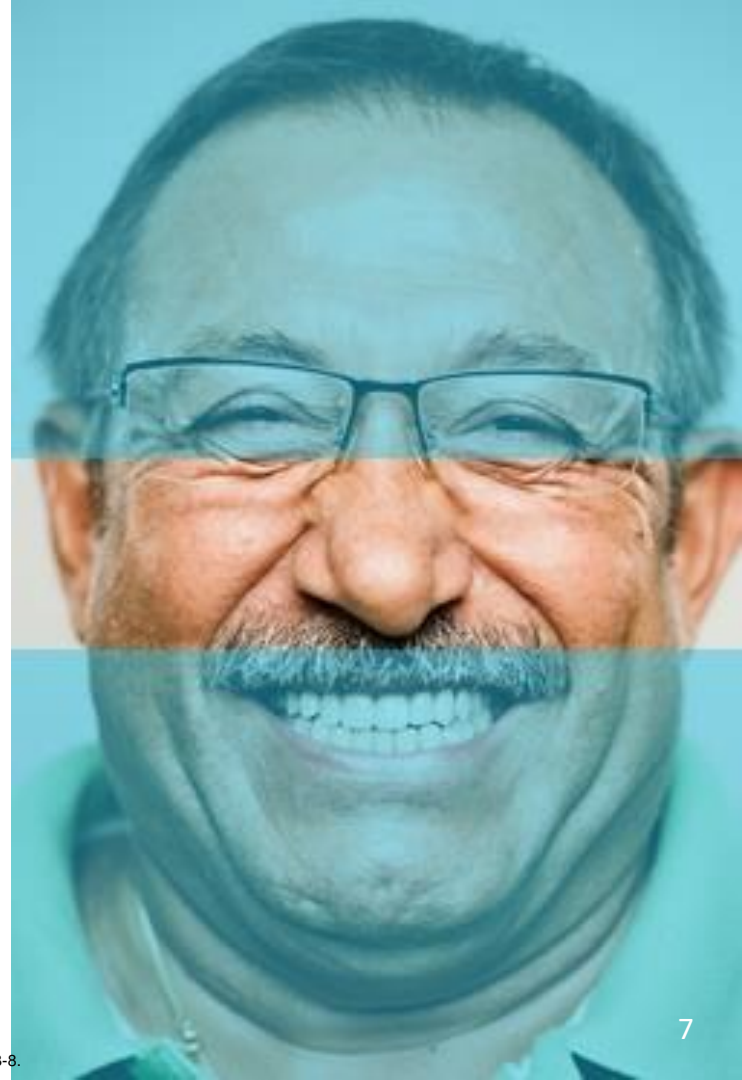


# The **critical role** of the nose in CPAP intolerance

- The increase in nasal airway resistance can lead to mouth breathing.<sup>1</sup> Mouth breathing leads to CPAP intolerance.
- What drives nasal congestion?
  - Allergies
  - Congestion
  - Deviated septum
  - Anatomical features
  - Other issues

“The importance of the nose to successful use of CPAP cannot be overstated.”

– Dr. Jerrold A. Kram, MD, FCCP, FAASM





## The **alternative to CPAP...**

... if you can't use your nose, get yourself a second one and breathe again using the O<sub>2</sub>Vent™

O<sub>2</sub>Vent® is an oral appliance for patients diagnosed with Obstructive Sleep Apnea and who are seeking alternatives to CPAP therapy.





# O<sub>2</sub>Vent<sup>®</sup> is the only oral device treating the entire upper airway!

Here's how it works:

1. Air goes in through the airway on inhalation and out through the airway on exhalation.  
**Acts like a "second nose"**



2. Air in on inhalation delivered to throat, air out on exhalation

3. The device brings the lower jaw forward, making more room for air to go into the patient's lungs

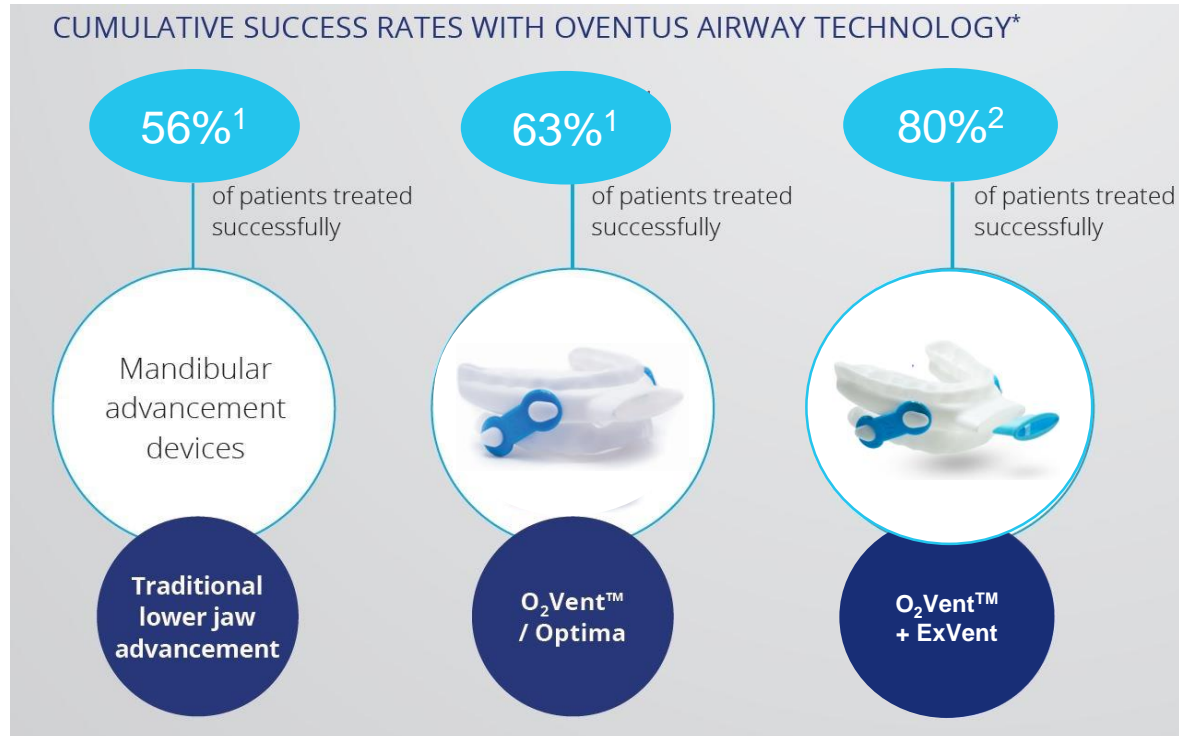


# O<sub>2</sub>Vent™ efficacy: 170+ patients studied across 4 clinical studies

## Clinical data presented so far shows:

- Patients with nasal obstruction who would normally struggle with treatment displayed a clinically and statistically significant benefit owing to Oventus' O<sub>2</sub>Vent airway technology ( $p < 0.05$ )
- Patients that had failed prior lines of therapy were shown to have benefit from Oventus airway technology
  - 20% decrease in residual events ( $p < 0.05$ )
  - 20% increase in success rate
  - 40% increase in response rate
- Addition of the Oventus ExVent valve to the O<sub>2</sub>Vent airway delivered a:
  - 30% ( $p < 0.01$ ) increase in efficacy for ExVent™ and
  - 50% ( $P < 0.01$ ) increase in efficacy for ONEPAP™
- Oventus airway technology improved treatment outcomes for CPAP users by reducing pressure requirements by 40-50% ( $p < 0.001$ ) and eliminating the need for full face masks

# O<sub>2</sub>Vent™: Outstanding clinical success reported across device range



\*AHI Reduction to less than 10 events per hour

<sup>1</sup> McCloy K, Lavery D, Moldavtsev J, Airway open-airway closed: The effect of mandibular advancement therapy for obstructive sleep apnoea with and without a novel in-built airway. Abstract Submitted ASA Brisbane 2018. <sup>2</sup> Lai V, Tong B, Tran C, Ricciardiello A, Donegan M, Murray N, Carberry J and Eckert D, Combination therapy with mandibular advancement and expiratory positive airway pressure valves reduces OSA severity. Abstract Submitted ASA Brisbane 2018. <sup>3</sup> Tong B, Tran C, Ricciardiello A, Donegan M, Murray N, Chiang A, Szollosi I, Amatory A and Eckert D. Combination therapy with CPAP plus MAS reduces CPAP therapeutic requirements in incomplete MAS responders. Abstract submitted ASA Brisbane 2018.

# Oventus offers the only highly effective, non-invasive OSA treatment

Based on the numbers below, Oventus could have a \$2b market in the US alone

12%<sup>1</sup> of US adults (\$29.4m) suffer from OSA (US 55% of global market)

- ~6M adult patients prescribed CPAP in the US alone. 50-60% of those patients quit CPAP
  - ~3M existing patients in need of an effective alternative treatment
  - Oventus devices sold wholesale for ~\$600/unit to sleep centres
  - Valves/other accessories drive recurring revenues

Oral appliances currently have 10% share  
This number predicted to grow a further 16% by 2025



# Oventus Airway Technology: development pipeline

ExVent™ in market in AU and Canada, awaiting US reg' approval. Other devices in development.

O<sub>2</sub>Vent™  
+ ExVent™  
Oral EPAP



## The ExVent™ valve

Inserting this valve into the 'duck bill' of Oventus' O<sub>2</sub>Vent™ device **improves efficacy** for those patients who need more intervention

O<sub>2</sub>Vent™  
+ ONEPAP™  
Oral/nasal  
EPAP



## The ONEPAP™ valve

Clips into the 'duck bill' of Oventus' O<sub>2</sub>Vent™ device and acts as a **mini CPAP valve without the need for cords or power**

O<sub>2</sub>Vent  
Connect™  
CPAP  
connection



## O2Vent Connect™ CPAP connection

Connects the Oventus O<sub>2</sub>Vent™ device to CPAP, enabling CPAP to be delivered at lower pressures, **without the need for a full face mask**

These unexpected product discoveries, Oventus' ExVent™ valve, OnePAP™ and O<sub>2</sub>Vent Connect, represent the most significant improvements in sleep medicine **in over several decades.**

# Cumulative Success\* Rates of Oventus Airway Technology

- MAD = 56% Treatment success\*\*1
- Oventus O<sub>2</sub>Vent<sup>®</sup> = 63% Treatment success<sup>1</sup>
- Oventus O<sub>2</sub>Vent<sup>®</sup> + ExVent<sup>™</sup> = 80% Treatment Success<sup>2</sup>
- Oventus O<sub>2</sub>Vent<sup>®</sup> + ONEPAP<sup>™</sup> = 85% Treatment Success<sup>2</sup>
- Oventus O<sub>2</sub>Vent<sup>®</sup> + Connect<sup>™</sup> = 100% Treatment Success<sup>3</sup>

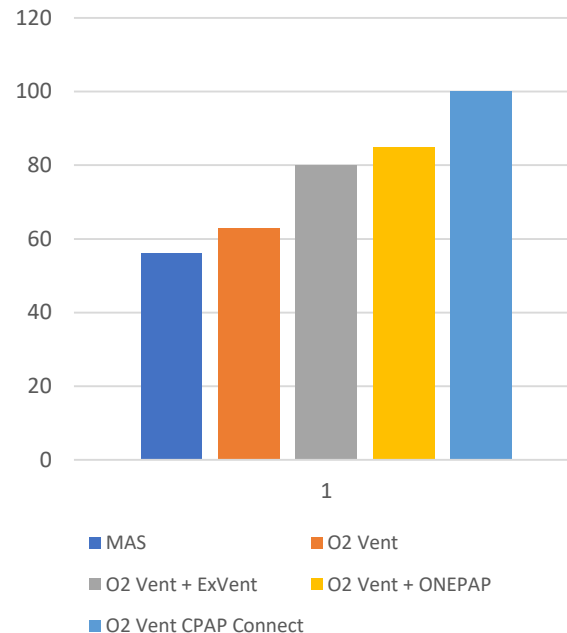
1. Karen McCloy, Damian Lavery, Julia Moldavtsev, Airway open-airway closed: The effect of mandibular advancement therapy for obstructive sleep apnoea with and without a novel in-built airway. Abstract Submitted ASA Brisbane 2018

2. Victor Lai, Benjamin Tong, Carolin Tran, Andrea Ricciardiello, Michelle Donegan, Nicholas Murray, Jayne Carberry and Danny Eckert Combination therapy with mandibular advancement and expiratory positive airway pressure valves reduces OSA severity. Abstract Submitted ASA Brisbane 2018

3. Amatory J, Tong B, Nguyen C, Szollosi I, Eckert DJ THE ROLE OF A NOVEL ORAL APPLIANCE THERAPY DEVICE ON PHARYNGEAL PRESSURE SWINGS AND CPAP REQUIREMENTS DURING SLEEP IN OBSTRUCTIVE SLEEP APNEA: A PILOT STUDY. Abstract Supplement ADSM Boston 2017

\*\* Where treatment success is defined as % of users in whom the AHI was reduced to ≤ 10

Cumulative Treatment Success Using Oventus Treatment Platform (AHI≤10)





# Oventus is set to disrupt the sleep industry

Why do oral appliances only represent 10% of the therapeutic market?

- Variable efficacy of oral appliances
- Complex patient journey
- Competing economic imperatives between the sleep and dental channels



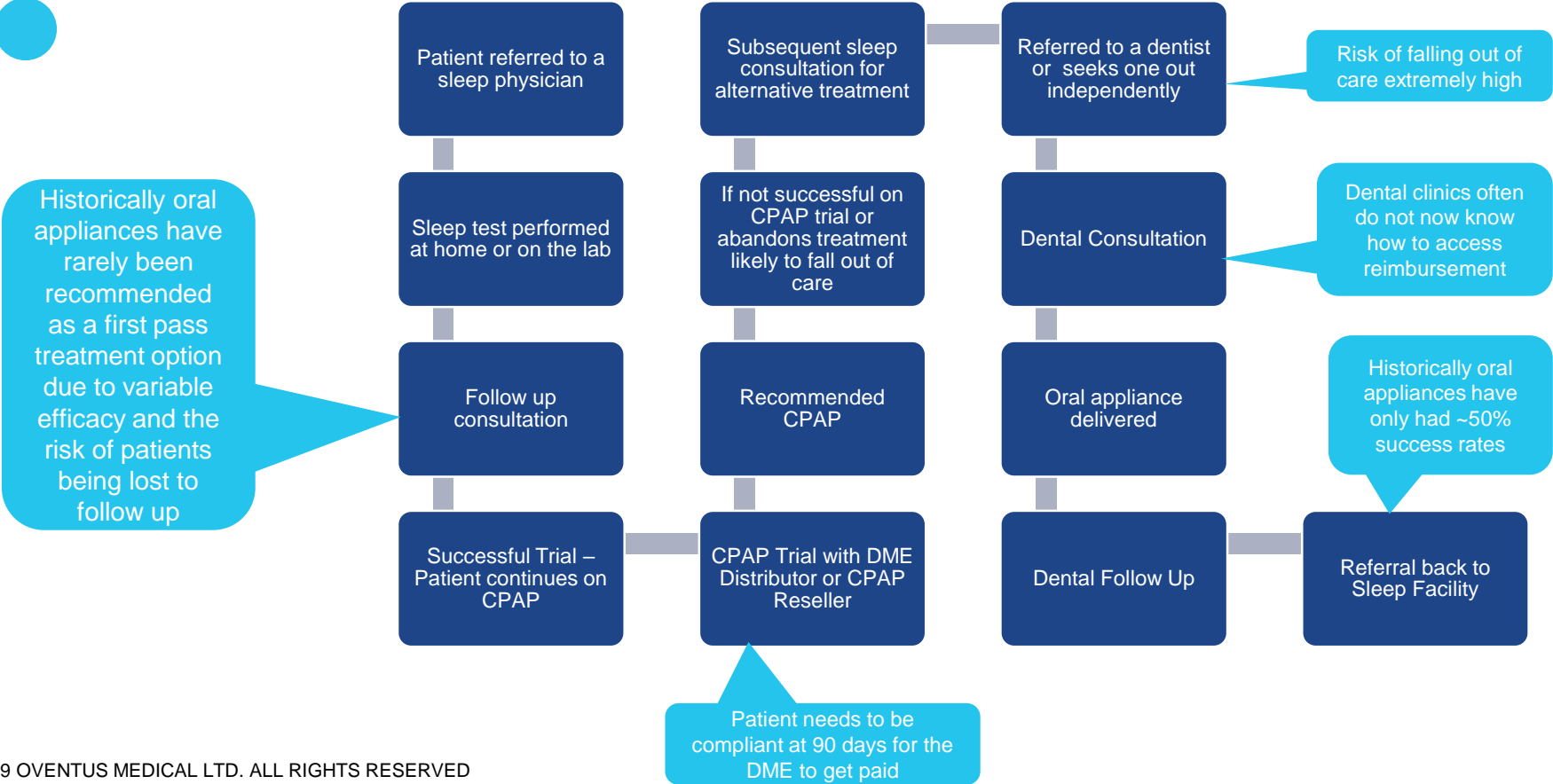
How will Oventus increase the market share of oral appliances?

- Oventus has been clinically validated to be the most effective oral appliance available with success rates comparable to CPAP
- Oventus' digital workflow and virtual patient journey mean that Oventus' unique treatment modality can be delivered in both the sleep and dental Channel
- Oventus' lab in lab program increases revenue and profit for both the sleep and dental channel



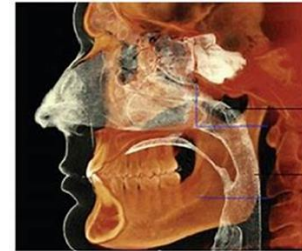


# Traditional patient journey

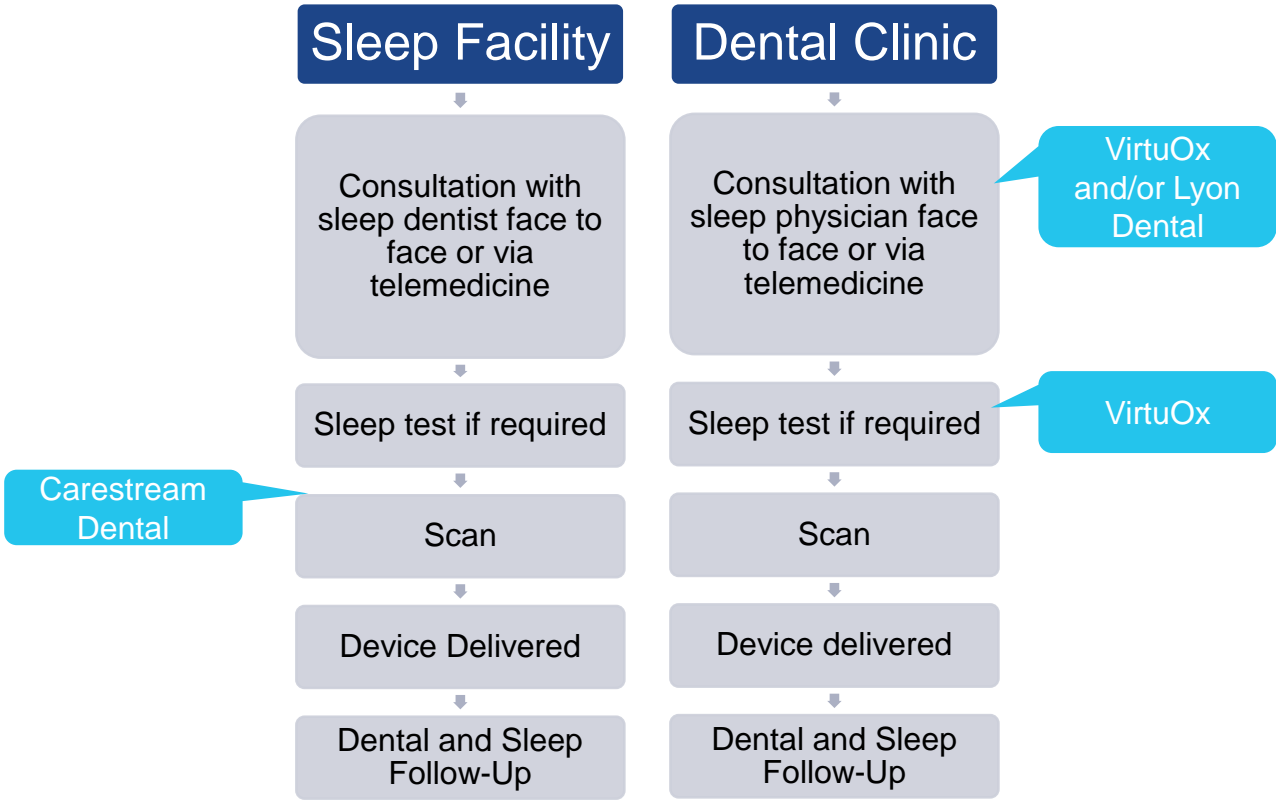


# Oventus 'lab in lab' model is designed to simplify the patient experience and build value for all stakeholders

- Model provides support, training and resources required to run a professional Dental Sleep Medicine clinic in both the dental and sleep setting
- Utilises Oventus' O<sub>2</sub>Vent sleep treatment platform and digital workflow
- Minimal CAPEX required. Can get lab up and running with desktop scanner
- Creates a new sub-specialty of sleep-dentists working out of sleep facilities or in their own clinics with turn key support



# Oventus patient journey with strategic partners and 'lab in lab' model



## 'Lab in lab' model (sleep channel)

By enabling dentists to take oral scans of patients mouths within the sleep facility (under a low capex mode), the patient is able to complete their whole care cycle at the one location.

Sleep doc  
consults/diagnoses/prescribes



Dentist within sleep centre\* scans  
patient for O<sub>2</sub>Vent, delivers device,  
handles reimbursement



Patient returns to sleep doc for  
follow up consultations



This significantly improves what until now has been a highly fragmented clinical experience for patients

\* Traditional model sees patient visit dentist multiple times.

## 'Lab in lab' model (dental channel)

By enabling sleep physicians to diagnose and manage patients' OSA within the dental channel (via telemedicine and home sleep testing), the patient is able to complete their whole care cycle at the one location.

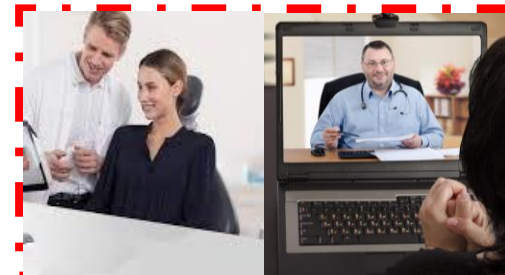
Sleep physician consults/diagnoses/prescribes via telemedicine



Dentist within dental clinic scans patient for O<sub>2</sub>Vent, delivers device, handles reimbursement



Patient care is followed up by dentist at dental clinic and sleep physician via telemedicine



This significantly improves what until now has been a highly fragmented clinical experience for patients

# What is driving adoption of 'lab in lab' model?

- This 'lab-in-lab' model can increase revenue and profit for both the dentist and sleep groups and improve clinical outcomes for patients
- Sleep networks will prefer prescribing an Oventus device over CPAP because their profit margin on Oventus devices is 2-3x that of CPAP
- Contracted dentists will generate 2-3x the net revenue, per session using the 'lab in lab' model in the sleep channel
- Supports the patient's treatment journey from end to end to ensure they patient receive the benefit of Oventus Airway Technology when indicated



**Model adoption being driven by acceptance of Optima by sleep community and simple delivery approach**



# Oventus technology adoption and 'lab in lab' roll out

- Seven contracted sites in Canada with mandated minimum orders of 20 devices per month per site
- Eight contracted sites in the US with mandated minimum orders of 20 devices per site
- Significant “funnel” of sleep facilities in negotiation across North America for lab in lab with a target of 20 sites operational by the end of CY2019
- Minimum orders conservative due to large patient numbers in these facilities
- Marketing/Distribution agreement with Carestream across an installed base of over 15,000 scanners in North America
- Licensure agreement with VirtuOx performing 40,000+diagnostic studies per month in the US with access to sleep physicians in 50 states and telemedicine capability
- Direct to consumer platform for virtual patient management [awakexpress.com](http://awakexpress.com) completed pilot launch ready for national scale up



# Timeline of significant events

## Major contracts

### 1H CY2019

4 sleep/dental sites in **North Carolina** sign on to sell O<sub>2</sub>Vent™ W/T models (22 May)

First sleep groups signed in **Canada** across 7 sites (20 June) for O<sub>2</sub>Vent™ Optima & ExVent™

### 2H CY2019

Strong pipeline of negotiations with **Canadian, US and Australian groups**

First sleep group signed in **US** (15 July) for O<sub>2</sub>Vent™ Optima & ExVent™

Material contracts signed (16 July) to enable 'lab in lab' across both sleep and dental in **US**

### CY2020

Agreements signed

Agreements signed

Agreements signed

## Product launches

**Australia**  
O<sub>2</sub>Vent™ Optima (nylon)  
Launched Jan 2019  
(TGA registered)

**Canada**  
O<sub>2</sub>Vent™ Optima (nylon)  
Launched Feb 2019\*

**US**  
O<sub>2</sub>Vent™ Optima (nylon),  
launch expected in 2H CY2019  
(awaiting FDA approval)

**Australia**  
ExVent™ valve  
Launched June 2019  
(TGA registered)

**Canada**  
ExVent™ valve  
Launched July 2019\*

**US**  
ExVent™ valve  
Launch expected in CY2020

\*Canada recognises Australia's TGA regulatory registration.

# Rolling out in key geographies - wins and pipeline

## Australia



O<sub>2</sub>Vent™ (titanium T/W)  
In market  
(TGA registered)



O<sub>2</sub>Vent™ Optima  
(nylon)  
Launched Jan 2019  
(TGA registered)



ExVent™ valve  
Launched June 2019  
(TGA registered)

- Controlled market release of Optima in January
- Revenues increased QoQ between March 2019 and December 2018 quarters

## Canada



O<sub>2</sub>Vent™ (titanium T/W)  
In market  
(TGA registered)



O<sub>2</sub>Vent™ Optima  
(nylon)  
Launched Feb 2019\*



ExVent™ valve  
Launched July 2019\*

- First agreements signed with sleep groups announced in 24 June 2019 (7 sites, 20 devices per site/mth min).
- Ongoing negotiations with multiple sleep groups across Canada.

## USA



O<sub>2</sub>Vent™ (titanium T/W)  
In market  
(FDA approved)



O<sub>2</sub>Vent™ Optima  
(nylon), launch  
expected in 2H CY2019  
(awaiting FDA approval)



ExVent™ valve  
Launch expected in  
CY2020

- Collaborative model implemented with dental group in North Carolina (Lane Dental), announced 22 May 2019.
- Key agreements signed to enable 'lab in lab' in US sleep / dental channels US (16 July)
- Ongoing sales / FDA negotiations

# Board of Directors and Management



**Dr Mel Bridges**  
**Non-executive Chairman**

Extensive experience as an Executive and Company Director in healthcare, agricultural technology, drug development, pathology, diagnostics and medical devices.

Has successfully raised in excess of \$300M investment capital in the healthcare/biotech sector and been directly involved in over \$1B in merger and acquisition and related transactions.



**Ms Sue MacLeman**  
**Non-executive Director**

Very broad commercial experience in multiple companies – currently Chair of the Medical Technology and Pharmaceutical Industry Innovation Growth Centre.

Underpinned by graduate qualifications in pharmacy and post graduate qualifications in corporate governance, commercial law, business administration and marketing.



**Sharad Joshi**  
**Non-Executive Director**

Boston based. Active in the medical technology industry for over 30 years, held senior positions for the past 10 years including global entrepreneurial medical devices CEO with experience in launching medical devices.

Holds qualifications in mechanical engineering in the biomedical space and also holds an MBA



**Dr Chris Hart**  
**Managing Director &  
Chief Executive Officer**

Experienced dentist with extensive business experience.

Heads up clinician engagement for the delivery of the Oventus appliances. Inventor of the core design.



**Mr Neil Anderson**  
**Chief Technology Officer**

Experienced CEO, project manager, materials scientist and entrepreneur. In-depth skills and knowledge of medical device commercialisation – in the field for over 30 years.

Has managed the R&D, manufacturing process and regulatory.



**Mr Steve Denaro**  
**Company Secretary**

Experienced Company Secretary and Chief Financial Officer of various public companies and with major chartered accountancy firms in Australia and the UK.

Bachelor of Business in Accountancy, Graduate Diploma in Applied Corporate Governance and is a member of the Institute of Chartered Accountants Australia & New Zealand.



# US Oventus Team



**Robin Randolph**

**Sr VP Sales, Marketing and Operations**

Marketing & Sales executive 30+ years Sleep Industry. In-depth North America medical device commercialization experience. Former Dir. Sleep Initiatives and National Accounts- ResMed, Manager- Fisher & Paykel Healthcare NA Marketing



**Masoud Vahidi**

**VP Operations, North America**

15+ years leadership experience in upstream and downstream marketing of medical devices in sleep apnea, COPD, and dental Restoratives products. Former Sr. Marketing Manager – KaVo Kerr



**Phillip Miller**

**Leader Information Technology**

Proven leadership 20+ years information technology systems and services across a range of industries and markets. Former VP Data & Communications - ResMed



**Robyn Woidtke, MSN-Ed, RN, BSHS, R.PSGT**

**Director of Regulatory and Clinical Affairs** With a sleep medicine career spanning 30 years and extensive experience in the medical device industry. Former Director of Clinical Affairs - ResMed



**Peggy Powers**

**Manager Clinical Education**

20+ years clinical educator and authority in the sleep & respiratory industry. Registered Respiratory Therapist. Former Manager Clinical Education – ResMed, former Clinical Educator – Fisher & Paykel Healthcare



**Brian Ueda**

**Marketing Operations Manager**

10+ years marketing career with extensive marketing operations and digital marketing experience in the medical device industry. Former Digital Marketing Manger – Fisher & Paykel Healthcare

# US Medical Technology Advisory Board

Key opinion leaders, clinicians and corporate experts in sleep medicine



**Dr. Lee A. Surkin, MD, FAASM**  
Chief Medical Officer of N3Sleep



**Dr. Mark A. Rasmus, MD, FAASM**  
Medical Director, Idaho Sleep Health



**Daniel B. Brown, Esq.**  
Partner, Healthcare and Corporate Practice Groups, Taylor English Duma LLP  
Atlanta, Georgia



**Dr. Richard K. Bogan, MD, FCCP, FAASM**  
Associate Clinical Professor at the University of South Carolina School of Medicine in Columbia, SC and Medical University of SC in Charleston, SC



**Jerrold A. Kram, MD, FCCP, FAASM**  
Medical Director of the California Centre for Sleep Disorders



**Myra G. Brown**  
President, MbrownGroup LLC



**Pedro J. Cuartas, DDS**  
Clinical Director of South LA Dental Sleep Medicine  
Owner-- Dental Sleep Services, LLC



**Dr. Mark Hickey, MD, FAASM**  
Founder, Colorado Sleep Institute

# Corporate overview

## Finances

Cash on hand 31 March 2019	\$5,100,000
Revenue FYTD2019 (up to 31 March 2019)	\$241,000

## Capital structure

Shares on issue	105.9m
Options	4.48m
Share price (15 July 2019)	\$0.31
Market Cap (15 July 2019)	\$32.89m

## Shareholders

Dr Chris Hart	25%
Other founders	11%
Other top 20 shareholders	30%
Remaining shareholders	34%





## Why now for OVN? Investment highlights

- Technology is clinically validated as **the most effective oral appliance for sleep apnea** with treatment outcomes comparable to CPAP
- **Huge unmet medical need** with sleep apnea treatment market worth >\$US3 billion and forecast to grow substantially
- Company is at the **key critical commercialisation point** in key markets of the US, Canada and Australia
- Demonstrating interest - ‘Lab in lab’ **contracts with minimum quotas signed** / announced in June and July
- ‘Lab in lab’ business model set to **accelerate sales revenue in the second half** of calendar 2019 due to greater adoption of Oventus’ Sleep Treatment Platform
- Positioned for **significant revenue growth through to the end of CY2019** and well in to CY2020 due to a robust pipeline of additional agreements

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Sleep Apnea Diagnostic & Therapeutic Devices Market, Markets and Markets, Table 98. China data – Anti-snoring Devices and Snoring Surgery Market: 2016-2024  
<https://www.marketsandmarkets.com/Market-Reports/sleep-apnea-devices-market-719.html>





# Oventus Airway Technology

This is what our patients say about comfort when compared to a traditional oral device

*“Due to my new Oventus device I have found that I am sleeping far better. Previously I had a sleep apnea machine with a long hose and a nose piece. I was constantly battling with the hose because I felt like it was always pulling on my head. I was waking most mornings with a dry mouth and bloated stomach from the machine forcing air. I travel often and found it challenging to bring my machine with me. These things are no longer an issue thanks to my new Oventus device.”*

Blake Schampers

*“The Oventus device allowed me to sleep in a normal manner without my sleep being interrupted by leaking and ill-fitting masks. The Oventus device is also so much more easily mobile than machines and masks especially when travelling.”*

David Nicoll



# Unmasking sleep apnoea



Dr Chris Hart

**Founder & CEO**

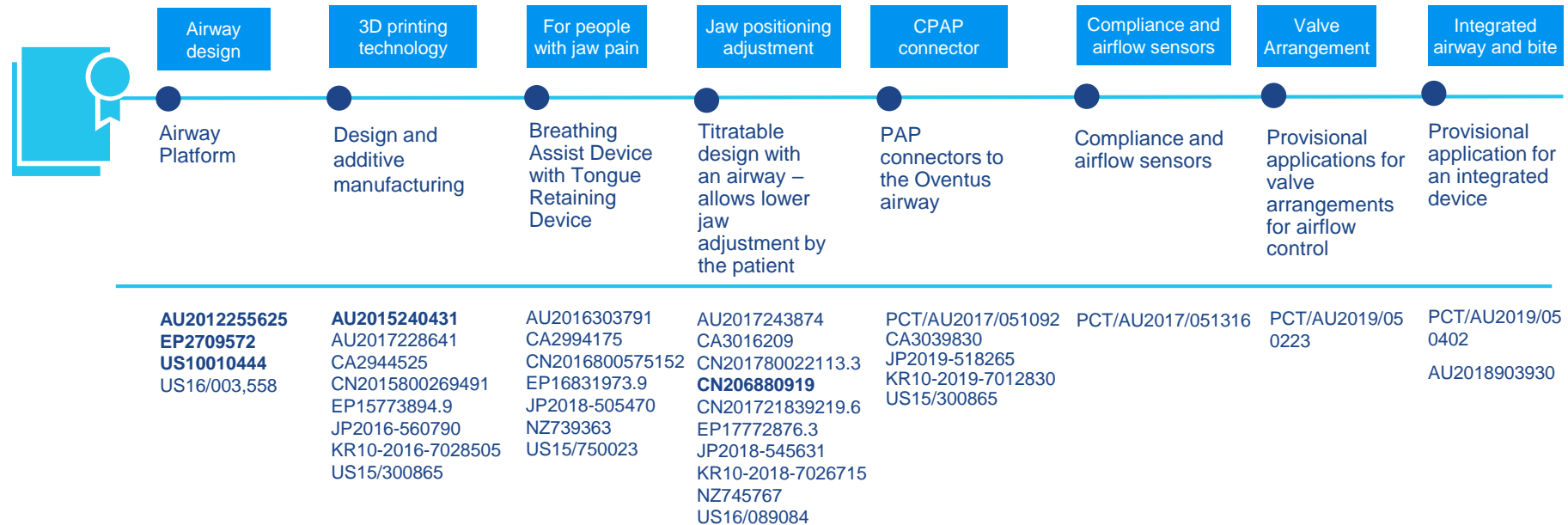
[chris@oventus.com.au](mailto:chris@oventus.com.au)

+61 409 647 496



# Addendum

# Intellectual Property: priority dates between 2032-2038



Multiple domain names registered



Trademarks advancing according to Madrid protocol

# Appliance validation - O<sub>2</sub>Vent (Oventus Airway Technology)

Clinical trials to validate Oventus 'airway technology' and assist marketing

Name	Study/ Investigation	Patients completed (per Nov 2018)	Results - reduction in AHI (sleep events per hour)*	Commentary	Events
<b>Sydney study (NeuRa) OVEN-005</b>  CRC-P funded (\$2.95m) 3 stages over 3 years 180 Patients in Total	<b>Pilot study</b>	4	37 reduced to 8 = 78% reduction  Airway Technology increased efficacy by 50% cf Traditional oral appliance	In addition to AHI reduction, 66% reduction in CPAP pressure required when using Oventus CPAP connector	Presented at AADSM/AASM Sleep 2017 in Boston
	<b>Nasal Resistance Study</b>	7	34.4 reduced to 7.0 = 80% reduction	Increased nasal resistance did not impact treatment outcomes	Interim results presented at Prague, World Sleep Congress (abstract) 9-12 October 2017
		39	29 reduced down to 14.5 = 50% reduction		Expanded results presented at European Respiratory Society in Paris September 2018
	<b>PEEP Valve Study</b>	22	21.6 reduced to 7.2 67% reduction In previous treatment failures	Success rates increased by 59% enabling over 75% of patients to be treated successfully without CPAP	Final results being presented at the ASA Sleep DownUnder Oct 2018  Published in <i>SLEEP</i> June 2019
	<b>MAS Combo Study</b>	16	CPAP Pressure requirements reduced by 35-40%	Patients able to breathe through the device while using nCPAP eliminating the need for full face masks	Interim results presented at European Respiratory Society in Paris September 2018 Expanded results presented at ASA Sleep DownUnder Oct 2018

\* Apnoea-Hypopnoea Index (AHI), known as 'sleep events' per hour occurring when the breathing airway collapses temporarily, leading to disruptions in breathing and sleep, in patients with Obstructive Sleep Apnoea (OSA)

# Appliance validation - O<sub>2</sub>Vent (Oventus Airway Technology)

Clinical trials to validate Oventus 'airway technology' and assist marketing

Name	Study/ Investigation	Patients completed (per Nov 2018)	Results - reduction in AHI (sleep events per hour)*	Commentary	Peer Review
Perth study OVEN-004	Airway Open/Airway Closed	10	69.6 reduced to 19.4 = 72% reduction	Airway Technology increased Efficacy by 30 %	Interim results: Auckland Sleep DownUnder, ASA Conference (abstract) 25 October 2017
Effect of Oventus Airway on Upper airway Physiology	Predictors of response to Oventus Airway	22**	53.6 reduced to 29.4 = 45% reduction	Physiologic Study showing females exhibited greater response to Oventus Airway Technology	Final results presented at the ASA Sleep DownUnder Oct 2018
Brisbane study OVEN-003	Effect of Oventus Airway on Efficacy & Compliance	32	24 reduced to 10 = 58% reduction	Airway Technology increased response rate by 40% and success rate by 20% Increased efficacy in nasal obstructers and previous treatment failures	Final results presented at the ASA Sleep DownUnder Oct 2018
Brisbane study OVEN-001	Efficacy of Oventus O <sub>2</sub> Vent	29	42 reduced to 16 = 62.5% reduction	Same response rate and efficacy with and without self reported nasal congestion	Journal of Dental Sleep Medicine, Vol 4, No. 3
<b>Total patients</b>		<b>171</b>			

\* Apnoea-Hypopnoea Index (AHI), known as 'sleep events' per hour occurring when the breathing airway collapses temporarily, leading to disruptions in breathing and sleep, in patients with Obstructive Sleep Apnoea (OSA)

\*\* 10 patients data on this study were presented previously in Auckland Sleep DownUnder ASA Conference



## About Oventus

Oventus is an Australian medical device company with a proprietary technology for the treatment of *obstructive sleep apnea (OSA)*. Our focus is on treating those patients that are not being, or cannot be treated effectively with existing treatment modalities.

OSA is a massive, multibillion dollar and fast growing market

There is a huge unmet need many times the size of the existing market due to the abandonment of existing treatments by the majority of patients

Oventus has a clinically proven ability to deliver superior outcomes for more than 80% of these patients with the first products in its treatment platform currently launching in the US with FDA clearance and existing reimbursement codes

Platform technology developed and company founded in 2013 by CEO, Dr Chris Hart B.Sc. B.D.Sc (Hons) M.Phil (Cantab), Oventus is listed on the Australian Securities Exchange (ASX:OVN)



# OVENTUS: UNMASKING SLEEP APNOEA

July 2019