

**ASX Release****Investor presentation update**

6 March 2020: Oventus Medical Ltd (ASX: OVN) (**Oventus**) releases an update to the investor presentation lodged with ASX this morning. The update includes a clarification on slide 20 to the total number of Lab in Lab sites contracted (which total 43), launched (which total 14) and in implementation phase (which total 10) as at today's date. The breakdown of contracted sites is 36 in the U.S. and 7 in Canada.

A copy of the updated presentation is attached.

—ENDS—

For further information, please visit our website at [www.o2vent.com](http://www.o2vent.com) or contact the individuals outlined below.

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**About Oventus – see more at [www.o2vent.com](http://www.o2vent.com)**

Oventus is a Brisbane-based medical device company that is commercialising a unique treatment platform for sleep apnoea and snoring. The Company has a collaborative Sleep Physician/ Dental strategy that streamlines patients' access to treatment. The Oventus lab model incorporates digital technology via intra oral scanning to achieve operational efficiencies, accuracy and ultimately patient outcomes.

Unlike other oral appliances, Oventus O<sub>2</sub>Vent devices manage the entire upper airway via a unique and patented built-in airway. O<sub>2</sub>Vent devices allow for airflow to the back of the mouth while maintaining an oral seal and stable jaw position, bypassing multiple obstructions from the nose, soft palate and tongue. The devices reduce airway collapsibility and manage mouth breathing while keeping the airway stable.

O2Vent devices are designed for any patient that is deemed appropriate for oral appliance therapy, but especially beneficial for the many people that suffer with nasal congestion, obstruction and mouth breathing. The O2Vent allows nasal breathing when the nose is unobstructed, but when obstruction is present, breathing is supplemented via the airway integrated in the appliance.

The ExVent™ is a valve accessory that fits into the open airway of the O<sub>2</sub>Vent Optima device, to augment traditional oral appliance therapy by stabilizing the airway. The ExVent valve contains air vents that open fully on inhalation for unobstructed airflow. The valve closes on exhalation, directing the air through the vents,

creating the mild resistance or airway support required to keep the airway stable (known as PEEP, positive end expiratory pressure)

According to a report published by the Sleep Health Foundation Australia, an estimated 1.5 million Australians suffer with sleep disorders and more than half of these suffer with obstructive sleep apnoea<sup>1</sup>.

Continuous positive airway pressure (CPAP) is the most definitive medical therapy for obstructive sleep apnea, however many patients have difficulty tolerating CPAP<sup>2</sup>. Oral appliances have emerged as an alternative to CPAP for obstructive sleep apnea treatment<sup>3</sup>. The O2Vent Optima and ExVent provide a discreet and comfortable alternative to CPAP for the treatment of OSA.

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<sup>1</sup> Deloitte Access Economics. Reawakening Australia: the economic cost of sleep disorders in Australia, 2010. Canberra, Australia.

<sup>2</sup> Beecroft, et al. Oral continuous positive airway pressure for sleep apnea; effectiveness, patient preference, and adherence. Chest 124:2200–2208, 2003

<sup>3</sup> Sutherland et al. Oral appliance treatment for obstructive sleep apnea: An updated Journal of Clinical Sleep Medicine. February 2014.



## INVESTOR UPDATE



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Any opinions expressed reflect the Company's position at the date of this presentation and are subject to change.

# A COMPELLING, SIGNIFICANTLY DE-RISKED INVESTMENT

## Unique and disruptive

Disrupting the obstructive sleep apnoea (OSA) treatment landscape  
O<sub>2</sub>Vent<sup>®</sup> is the only FDA-cleared oral appliance for OSA

## Commercially attractive

Ramping-up US commercial operations post Sept 2019 FDA approval of O<sub>2</sub>Vent<sup>®</sup> Optima  
'Lab in lab' business model resonating with clinicians and patients  
US Medicare reimbursement framework in place

## Scaling up

43 sites contracted; 14 sites launched; 10 sites in implementation phase  
Launched sites capable of generating over \$3m annualized revenue at minimum quotas  
Annualized revenue doubled since launch of Optima and Lab in Lab program (90 days of sales)

## SUMMARY OF RECENT ANNOUNCEMENTS

### 16 December 2019

US Medtech expert, Paul Molloy appointed Non-Executive Director.  
Co-founder/CTO, Neil Anderson steps off Board.

### 14 January 2020

Three further site agreements announced, taking total sites to 36.  
4C confirms first lab in lab revenues had been booked in Q2 FY20.

### 13 February 2020

Three further sites launched, taking total launched sites to 14. Cash burn forecast reduced for Q3 FY20.

### 14 February 2020

U.S. Medicare reimbursement approval granted for O<sub>2</sub>Vent Optima. 64 million beneficiaries currently enrolled in US Medicare program

### 24 January 2020

Contracted with U.S. DME provider, Aeroflow, adding 7 new sites (43 total), plus e-commerce sales and sub-contracts with regional sleep groups across U.S.

### 25 February 2020

Former partner of New Enterprise Associates / U.S. specialist healthcare investor, Jake Nunn joins Oventus Board.

# OBSTRUCTIVE SLEEP APNOEA OVERVIEW



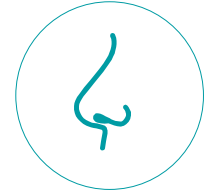
Obstructive sleep apnoea (OSA) is the most common type of 'sleep apnoea'



Compromises daytime functions leading to excessive sleepiness, memory impairment and depression



Co-morbidities include hypertension, heart disease, stroke and diabetes



Occurs when there is obstruction or collapse of the nose, soft palate and lateral walls of the airway

**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>	Standard of care 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 apnoea in some cases	Not always readily achievable
Mixed results	Other/Behavioural modification	Sleep position, reduced alcohol consumption, medication	Requires patient motivation and compliance





## THE TROUBLE WITH CPAP

**CPAP, the 'standard of care' works, but for many:**

Masks and straps are uncomfortable, leading to facial abrasion, strap marks and claustrophobia

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Air pressures are hard to tolerate and CPAP can be noisy

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Limited ability to move in bed

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Technology has an image problem

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Cleaning and maintenance required, masks and hoses must be regularly resupplied

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**50%-60% of patients quit CPAP within first year.**

# 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® Optima**

Oventus O<sub>2</sub>Vent technology helps customers sleep at night.

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It is comfortable and efficacious.

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It's the biggest innovation in sleep apnoea treatment for decades.

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O<sub>2</sub>Vent is life changing.



## O<sub>2</sub>VENT OPTIMA: HOW IT WORKS

Air travels through the channel and is delivered to the back of the throat.

Air goes in through the duckbill on inhalation and out on exhalation.

The device is adjustable, bringing the lower jaw forward and stabilizing the airway.

The duckbill acts as a “second nose”. An open mouth is undesirable when sleeping, as an open jaw can cause breathing obstruction in the throat.



# OUTSTANDING CLINICAL SUCCESS REPORTED ACROSS RANGE

Traditional lower jaw  
advancement

**41%**<sup>1</sup> of patients  
treated  
successfully



Mandibular Advancement Devices

O2Vent /  
O2Vent Optima

**54%**<sup>1</sup> of patients  
treated  
successfully<sup>1</sup>



Previous Generation O2Vent®

O2Vent + ExVent PEEP valve  
technology

**78%**<sup>2</sup> of patients  
treated  
successfully



CUMULATIVE SUCCESS RATES WITH OVENTUS AIRWAY TECHNOLOGY\*

\*AHI Reduction to less than 10 events per hour

## OVENTUS O<sub>2</sub>VENT ADDRESSES >80% OF ALL OSA PATIENTS

**\$2B**

Market Opportunity in the US

**OSA Patients in Need of Alternative**

6m US adult patients prescribed CPAP  
50% - 60% of CPAP patients quit within one year

**12%**

**3M**

**US Adults Suffer from OSA**

US represents 55% of the total global market

# OVENTUS DRIVES DISRUPTION IN 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

## Oventus is addressing these issues with new technology and a novel approach to care

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

## 'LAB IN LAB' MODEL (SLEEP CHANNEL)

**By enabling dentists to take oral scans of patients mouths within the sleep facility (under a low capex model), 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



## WHAT IS DRIVING ADOPTION OF 'LAB IN LAB' MODEL?

The 'lab-in-lab' model increases revenue and profit for both the dentist and sleep groups while improving clinical outcomes for patients

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Model adoption driven by acceptance of O<sub>2</sub>Vent Optima as a true CPAP alternative by sleep community and simple delivery approach

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It is a collaborative framework in which all stakeholders benefit

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# OVENTUS AIRWAY TECHNOLOGY

*“What’s exciting about the O2Vent Optima is that, for the first time, we can offer patients with OSA an alternative to CPAP that treats symptoms just as well but is far more comfortable to use and is precisely fitted from the start,” says Dr. Sat Sharma, Medical Director, Centres of Sleep in Ontario.*

*“Long-term compliance wearing CPAP machines is a major challenge in OSA treatment, and many patients discontinue treatment because of mask discomfort, claustrophobia and intolerance. O2Vent Optima is a game-changer for millions of Canadians who live with OSA, even those who struggle with nasal obstruction and mouth breathing.”*



# OVENTUS AGREEMENT WITH FAST GROWING SLEEP GROUP, AEROFLOW



Aeroflow has identified seven of its own sites, after which they intend to launch across the US nationally, as it execute upon an aggressive growth plan



In addition, Aeroflow has signed a master agreement with Oventus which will see it offer Oventus technology under subcontracts with regional sleep groups nationwide



Aeroflow has a large existing patient population across the US with sophisticated marketing systems for promotion of Oventus' technology



In line with other agreements there are minimum quotas of 20 patients to be treated with Oventus' O2Vent Optima per site, per month once fully operational.

## CURRENT LAB IN LAB “DEAL FUNNEL” WORTH >\$40M ANNUALIZED\* AND GROWING RAPIDLY

**July 2019**

19 groups in discussions

5 Groups Under NDA

3 groups contracts issued

2 groups contracts signed

Deal flow  
accelerating  
since July

**February 2020**

59 groups in discussions

12 groups under NDA

8 groups contracts issued

11 groups contracts  
signed

## ANNUALIZED REVENUE HAS DOUBLED SINCE LAUNCH OF OPTIMA AND LAB IN LAB PROGRAM

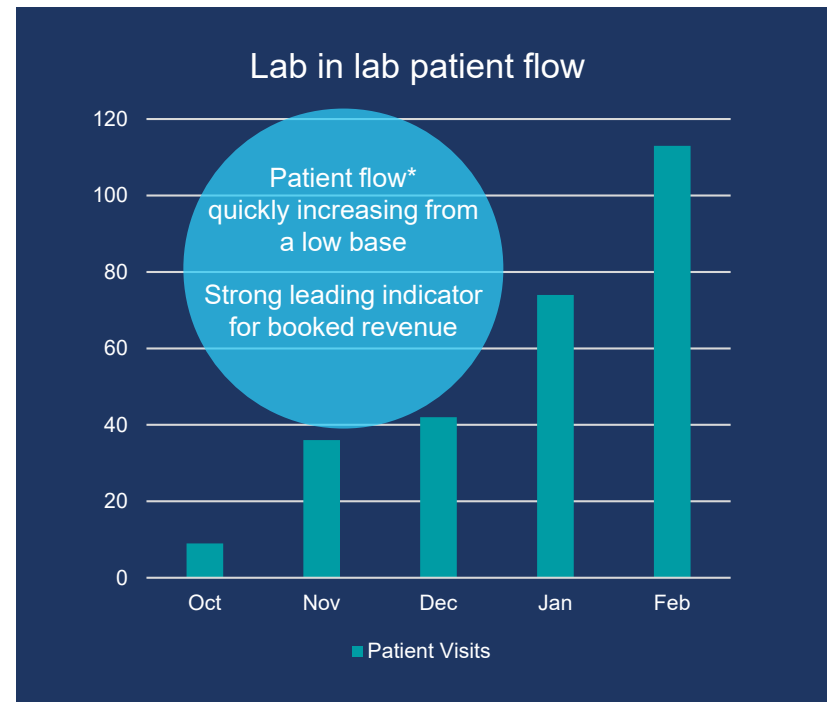
Patient flow and revenue building across these sites with more recent sites generating revenue with reduced lead times

Launched sites capable of generating over \$3m annualized revenue at minimum quotas

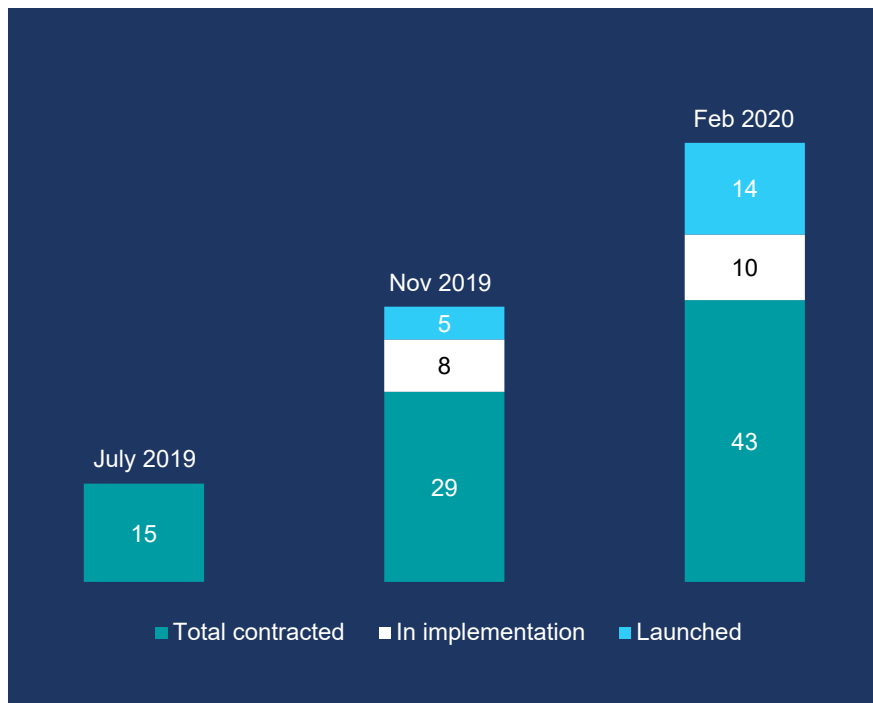
Contracted sites capable of generating over \$10m annualized revenue at minimum quotas

Annualized revenue has doubled since launch of Optima and Lab in Lab program (90 days of sales)

Roughly 50% of new patient visits convert into O<sub>2</sub>Vent Optima sales within 90 days



## RAPID BUILD ON SITES CONTRACTED, LAUNCHED AND IN IMPLEMENTATION PHASE



36 contracted sites in the US with mandated minimum orders of 20 devices per month per site

Significant “funnel” of sleep facilities in negotiation across North America for lab in lab with 14 sites launched, a further 10 sites in the implementation phase and a robust pipeline of launches scheduled for calendar 2020 month

7 contracted sites in Canada with mandated minimum orders of 20 devices per month per site

## U.S. MEDICARE REIMBURSEMENT | APPROVAL GRANTED: O<sub>2</sub>VENT OPTIMA



Notification was received on February 14 that O<sub>2</sub>Vent Optima is reimbursable for those patients covered by United States Centres for Medicare & Medicaid (CMS, funded by the US federal government)



15% of the US population, or 64 million<sup>1</sup> beneficiaries are currently enrolled in the US Medicare program



Dentists can now bill and be reimbursed not only by Medicare, but other commercial payers that follow CMS policy

**THIS SIGNIFICANT MILESTONE OPENS UP A WHOLE MARKET THAT MAY NOT HAVE PREVIOUSLY BEEN ABLE TO AFFORD OVENTUS TREATMENT**

# O<sub>2</sub>VENT'S PRODUCT EVOLUTION PLAN:

Eliminates the need of a full-face mask for CPAP

Mild OSA

Severe OSA

O<sub>2</sub>Vent<sup>®</sup>

O<sub>2</sub>Vent<sup>®</sup>  
Optima

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

O<sub>2</sub>Vent<sup>®</sup> + ONEPAP<sup>™</sup>  
oral/nasal EPAP

O<sub>2</sub>Vent<sup>®</sup> + Connect<sup>™</sup>  
CPAP connection



**Previous  
Generation**  
O<sub>2</sub>Vent<sup>®</sup>



O<sub>2</sub>Vent<sup>®</sup> Optima  
US launch  
Started Sept 2019



ExVent<sup>™</sup> valve  
FDA clearance expected 2020



O<sub>2</sub>Vent<sup>®</sup> ONEPAP  
In development



O<sub>2</sub>Vent<sup>®</sup> Connect  
In development

Potential Licensing Opportunity



# 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). Subsequent agreements signed, now 29 sites contracted in US/Canada. ☒

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

### CY2020

New agreements signed ☒

Regional agreement signed with Aeroflow (24 February 2020) ☒

Revenue to build, qoq

National 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 in September 2019, post receipt of FDA clearance ☒

### Australia

ExVent™ valve launched June 2019  
(TGA registered) ☒

### Canada

ExVent™ valve launched July 2019\* ☒

### US

ExVent™ valve  
Launch expected in CY2020

# OVENTUS MEDICAL BOARD OF DIRECTORS

Experience in the health & medical industries and early stage companies



**DR MEL BRIDGES**  
Chairman and  
Non-Executive Director

Over 35 years' experience founding and building international life science, diagnostic and medical device companies and commercialising a wide range of Australian technology.



**SUE MACLEMAN**  
Non-Executive Director

Sue has more than 30 years' experience as a pharmaceutical, biotechnology and medical technology executive having held senior roles in corporate, medical, commercial and business development.



**PAUL MOLLOY**  
Non-Executive Director

Based in Southern California, Paul has considerable global and US medical device industry expertise, with twenty-five years' experience leading a range of public, private and venture capital funded healthcare companies. He is currently President and CEO of ClearFlow Inc., a US-based medical device company.



**DR CHRIS HART**  
Founder and CEO

As the inventor of the O2Vent technology, Chris is overseeing the launch of the O2Vent to patients and through clinicians via dentists and the 'lab in lab' model. Chris has relocated to the US to assist with roll-out of the Oventus Sleep Treatment Platform.



**SHARAD JOSHI**  
Non-Executive Director

Based in Boston, Sharad has worked in the medical technology industry for over 30 years. He has held senior positions including as a global entrepreneurial medical devices CEO, with experience in launching medical devices and a strong track record of driving rapid global growth.



**JAKE NUNN**  
Non-Executive Director

California based, Jake has more than 25 years' experience in the life science industry as an investor, independent director, research analyst and investment banker. Jake is currently a venture advisor at New Enterprise Associates (NEA).

# US OVENTUS TEAM



## **ROBIN RANDOLPH**

**Sr VP Sales, Marketing & 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.



## **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



## **PEGGY POWERS**

**Sr. 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



## **DAVID BONENKO**

**VP Sales**

Several decades of sales leadership and 10+ years' experience in the sleep medicine industry. Previously was VP Sales for SleepMed.



## **MASOUD VAHIDI**

**VP Operations, North America**

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



## **ROBYN WOIDTKE, MSN-ED, RN, BSHS, RPSGT**

**VP Regulatory, Clinical & Quality**

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



## **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 Manager – 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,  
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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 Center 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

# FINANCES: CORPORATE OVERVIEW, ASX: OVN

## Overview

Cash on hand 31 Dec 2019	\$6,173,000
Revenue H1FY2020 (ending 31 Dec 2019)	\$188,000
Receipts from customers (Qtr end 31 Dec 2019)	\$112,000

## Capital structure

Shares on issue	130.53m
Options	6.00m
Share price (3 March 2020)	\$0.54
Market Cap (3 March 2020)	\$70.49

## Shareholders

Dr Chris Hart	20%
Other founders	7.4%
Other top 20 shareholders	30.8%
Remaining shareholders	41.8%

## ASX: OVN | share price history



## WHY INVEST IN OVENTUS NOW?



Technology is clinically validated as the most effective oral appliance for sleep apnoea with treatment outcomes comparable to CPAP



Huge unmet medical need with sleep apnoea treatment market worth >\$US3 billion<sup>1</sup> and forecast to grow substantially



Annualized revenue has doubled since launch of Optima and Lab in Lab program (90 days of sales) and continuous growth expected



Commercial stage company, with limited clinical and regulatory risk. Company is at a key critical commercialisation point in core markets of the US, Canada and Australia



Demonstrating interest: lab in lab contracts with minimum quotas signed / announced from June 2019 onward, now 43 sites engaged with 14 deployed and 10 in implementation phase

Positioned for step-change revenue growth in CY2020 with robust pipeline of additional agreements

## OVENTUS AIRWAY TECHNOLOGY



*"I wanted a treatment approach conducive to my lifestyle, as I travel frequently. CPAP and other oral appliances seemed too cumbersome to me.*

*The O<sub>2</sub>Vent Optima is comfortable and easy to use, which makes it easy to stick with it as a treatment. After only a few weeks of use, I've noticed my daytime alertness and energy have increased and my snoring, much to the relief of my wife, has decreased."*

***Ervin Magic***





OVENTUS™

**Dr Chris Hart**

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

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# Addendum

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## Trademarks advancing according to Madrid protocol

# APPLIANCE VALIDATION - O<sub>2</sub>VENT®

## (OVENTUS AIRWAY TECHNOLOGY)

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>  <b>CRC-P funded (\$2.95m)</b>  <b>3 stages over 3 years</b>  <b>180 Patients in Total</b>	Pilot study	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
	Nasal Resistance Study	7  39	34.4 reduced to 7.0 = 80% reduction  29 reduced down to 14.5 = 50% reduction	Increased nasal resistance did not impact treatment outcomes	Interim results presented at Prague, World Sleep Congress (abstract) 9-12 October 2017. Expanded results presented at European Respiratory Society in Paris September 2018
	PEEP Valve Study	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
	MAS Combo Study	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

# APPLIANCE VALIDATION

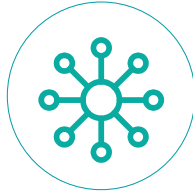
## O<sub>2</sub>Vent® (Oventus Airway Technology)

Name	Study/ Investigation	Patients completed (per Nov 2018)	Results - reduction in AHI (sleep events per hour)*	Commentary	Peer Review
<b>Perth study OVEN-004</b>	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
<b>Effect of Oventus Airway on Upper airway Physiology</b>	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
<b>Brisbane study OVEN-003</b>	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 obstrucers and previous treatment failures	Final results presented at the ASA Sleep DownUnder Oct 2018
<b>Brisbane study OVEN-001</b>	Efficacy of Oventus O2Vent®	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

## ABOUT OVENTUS



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



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)

**OSA IS A MASSIVE, MULTIBILLION DOLLAR AND FAST-GROWING MARKET**