Innovations powered by XBIO[®] technology

Investor Presentation Judith Mitchell Managing Director



NXS at a glance

- Currently the only company in the world with approved products that resolve biofilm based infections in humans
- 3 products in the US human healthcare market
- Additional regulatory approvals of CE Mark and TGA to ٠ support revenue growth through market access to Australia, UK, Germany, Netherlands, Nordic countries and France
- True Blue Ocean opportunity for first in market leave behind • infection prevention surgical wash currently in review with the FDA

Key Statistics



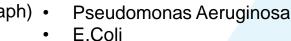
Treated over 130,000 patients



All Products are effective in removing key community acquired pathogens:

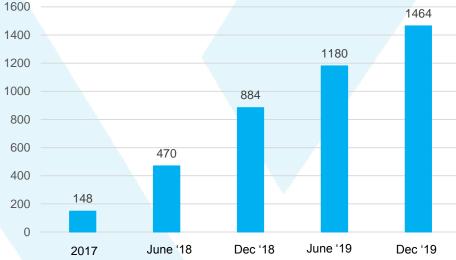
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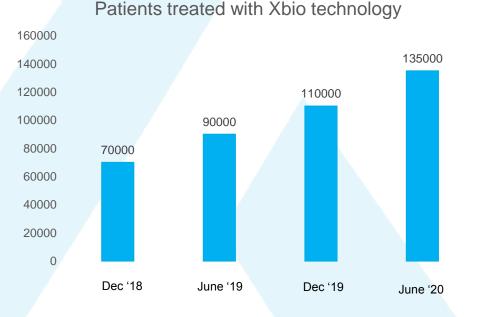
- MRSA (golden staph) •



Candida

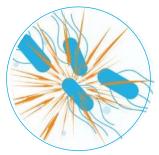






The Science – disrupting the biofilm and eradicating the pathogens "80% of infections in Humans are in a biofilm" (CDC 2011)

The Solution – Xbio[™] Technology



Deconstruct the bacterial biofilm barrier

Next Science's Xbio technology breaks the ionic bonds that hold the biofilm together. The polymers are then pulled into solution, effectively dissolving the biofilm barrier.

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Destroy the bacteria within, through cell lysis¹

With the barrier dissolved, bacteria are exposed and more vulnerable to attack. Bacteria enveloped by Xbio technology experience cell lysis and are destroyed. Cell lysis is non-discriminatory destroying gram-positive and gramnegative bacteria, persister cells, and spores. There is no known resistance mechanism to cell lysis. Unique non toxic compounds, with no mechanism to create antimicrobial resistance



Defend from recolonization

The periodic release of bacteria from biofilms has been linked to chronic relapsing infections.² Disrupting and destroying the biofilm barrier can reduce the rate of biofilm recurrence by up to 1,000 times, effectively defending against recolonization.³ Unlike other agents that claim to destroy biofilms, there is no known evidence of bacterial resistance to the Xbio technology.

 Lysis: disintegration by rupturing the cell membrane.
 Costerton JW et al.
 Potera C:antibiotic resistance: biofilm dispersing agent rejuvenates older antibiotics" Environmental Health Perspectives 118 (7) 228.

The opportunities – prevention and treatment

Expanding into infection prevention significantly enhances addressable market opportunities

Prevention products in market

- 1) SURGICAL SITE INFECTION
- 2) Prosthetic Joint Infection

3) Acne

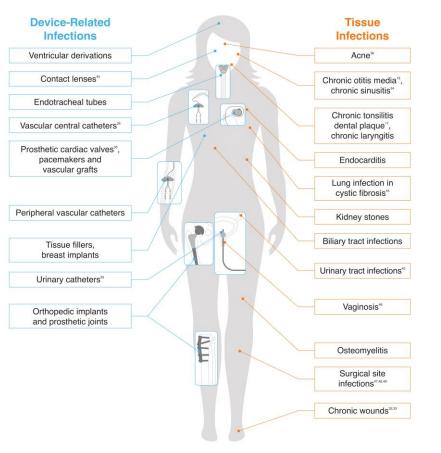
Treatment products in market

- 1) SURGICAL SITE INFECTION
- 2) Prosthetic Joint Infection
- 3) Acne and skin health
- 4) Chronic Wounds

Products in development

- 5) Chronic Middle Ear Infection
- 6) Chronic Sinusitis

CHRONIC BACTERIAL INFECTIONS: MEDICAL BIOFILMS



Research underway

7) Skin health

8) Lung infections including pneumonia and cystic fibrosis

- 9) Dental implants, peridontitis
- **10) Catheter infections**
- **11) Implant infections**

Potential for future research

- **12) Endocarditis**
- 13) Kidney stones
- 14) Biliary tract infection
- **15) Urinary tract infection**
- 16) Vaginosis
- 17) Osteomyelitis

2020 Key Priorities

Non Salicylic Acid Acne products launched through tbh

Bactisure CE Mark

Bactisure TGA Clearance

Bactisure Australia Launch

Bactisure European Launch

BlastX CE Mark

XPerience FDA Clearance



Products contributing to H1 2020 revenues

Product	Commercial Pathway	Application	Total addressable market
Bactisure Surgical Lavage	Global Distribution through Zimmer Biomet	Treatment of infected surgical cavities & implants	500,000 – 1 Million patients globally annually
BlastX Antimicrobial Wound Gel	Global Distribution 3M KCI Advanced Wound Care	Treatment of chronic wounds: Foot & Leg Ulcers, Bedsores and Pressure Ulcers	10 Million patients globally 6 million patients (US only) annually
SurgX Sterile Antimicrobial Wound Gel	NXS distribution network in the US	Prevention of infection in surgical incisions. Used in the Operating room	48 Million surgeries in the US annually
Acne Gel and Cream	AST & tbh Skincare	Topical treatment of acne	Online & Clinic market

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H2 2020 Pipeline of new product launches

Product	Target Launch	Commercial Pathway	Application	Total addressable market
Biofilm effective Disinfectant for Hard Surfaces	H2 2020	Commercial pathway under discussion	Walls, floors, hospital furniture and fittings	Global surface disinfectant market \$800 Million annually
TorrentX Wound Wash	Q4 2020	Partnered with Triad Life Sciences with the launch of their new tissue substitute product subject once FDA cleared	Topical wash for treatment of chronic wounds: foot & leg ulcers in preparation for a tissue substitute	US Skin substitute market was \$800M in 2019. This market is reimbursed by CMS
XPerience Surgical Rinse	H2 2020/ H1 2021	NXS distribution network in the US (inventory in hand)	No rinse surgical irrigant	Global 110 Million surgeries US 48 million surgeries Australia 2.2 Million surgeries

Why Surgical Site Infections?

The estimated annual cost of Surgical Site Infection ranges from **\$USD 3.5B to \$USD 10B**₃

> Average increased length of stay due to surgical site infection is **9.7 days**₂

Hospitals are **not** reimbursed for readmissions within **90 days of release**₅

Surgical Site infections **increases** colectomy **costs** by a mean of **\$17,324**4

> Surgical Site infections are the leading cause of readmissions

3% of people suffering from Surgical Site Infections **will die**7

Risk of post operative infection in Hips and Knees expected to rise to **6.5% and 6.8%**6 Surgical Site Infections continue to be a major burden in health care

References listed in Appendix

XPerience Surgical Wash– Superior Performance

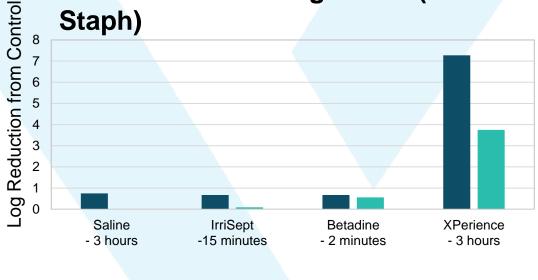
XPerience Surgical Wash is packaged as a sterile solution in a 500mL Polypropylene bag. The solution is used to irrigate the surgical site as a last wash replacing some of the saline rinses.

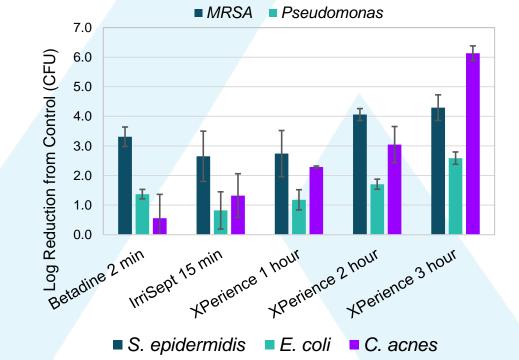
- Exceptionally effective against all known pathogens
 - MRSA
 - Pseudomonas
 - Candida fungi
 - C.acne
 - E.coli
 - S. epidermis
- Active for > 5 hours

XPerience is addressing an unmet need



XPerience is 10,000,000 time more effective at removing MRSA (Golden Staph)





XPerience – Easy to use and adopt

- No rinse out required \checkmark
- Non toxic \checkmark
- ✓ Broad spectrum efficacy against bacteria, viruses and fungi



- No known bacterial resistance
- Multiple hours of protection \checkmark against infection after use

- ✓ No change to current surgical protocols
- Easy to use and adopt

Compatible with pulsed lavage systems

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Current and Ongoing Clinical Trials

ouble-blinded, parallel, randomized, clinical study to asse flects of XPERIENCE in decreasing post-operative in

ates in adult subjects scheduled to undergo primary kn ment sumery analist standard of care alon

ouble-blinded, randomized clinical study to assess the el XPERIENCE in decreasing post-operative superficial surgi ingle and multiple stage open and minimally in eries against standard of care alone

is is a 50-subject, prospective, controlled, double-blin

mized clinical study to assess the effects of XPEF duit subjects with type II or IIIA or IIIB tibial fra

Compatible with most commonly used implants and closure methods



1H 2020 Profit and loss

Half Year ended 30 June USD\$('000)	2019	2020	Variance
Revenue	2,345	1,054	-55%
Cost of Sales	(379)	(132)	
Gross Profit	1,966	921	-53%
Other Income	35	42	
Research & Development ²	(1,036)	(1,049)	1%
Employee Expenses	(3,940)	(4,012)	2%
Sales & Marketing	(313)	(516)	65%
Consultancy & Regulatory	(766)	(820)	7%
General and Administration	(1,363)	(1,095)	-20%
Operating Expenses	(7,383)	(7,450)	1%
EBITDA (Underlying) ¹	(5,417)	(6,529)	-20%
Gross Margin	84%	87%	

 2019 EBITDA have been adjusted to exclude IPO and other one-off costs. Refer to Appendix 1 for reconciliation. HY2019 and HY 2020 includes IFRS 16 accounting for leases.

2. R & D expenses are external costs for testing and validation and do not include any internal Employee costs.

- Revenue declined by 55% vs prior comparative period (pcp).
- Revenue was constrained by Covid 19 shut down of elective surgeries and closure of wound care clinics. R&D, Product development and regulatory approvals schedule remained on track though Covid 19 impacted H1 FY20.
- Revenues expected to recover as surgeries recommence and when wound care clinics reopen.
- Current cost base circa \$3.7M per quarter.
- Sales & Marketing costs up 65% \$59k of the increase relates to donations of NXS products to home help centres for patients who were unable to get to wound care clinics during the Covid 19 shut down and \$120k of partner promotions with the balance of expenditure on pre-launch marketing materials for XPerience Surgical Rinse (launch in Q3 2020) in addition to further XbioTM animations.
- Employee expenses remained steady (Full Time Employees: 44)
- General & administration expenses declined by 20% with the majority of the decline attributed to reduced travel expenditure due to Covid 19 travel restrictions.

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Balance sheet

Half Year ended 30 June USD\$('000)	Dec 2019	June 2020
Cash and cash equivalents	16,910	11,907
Property, plant and equipment	813	843
Intangible assets	2,164	2,326
Other assets	2,812	1,242
Total assets	22,699	16,318
Total liabilities	(3,336)	(3,583)
Net assets	19,363	12,735
Share Capital	88,733	90,774
Reserves	(42,147)	(42,161)
Accumulated losses	(27,223)	(35,878)
Total Equity	19,363	12,735

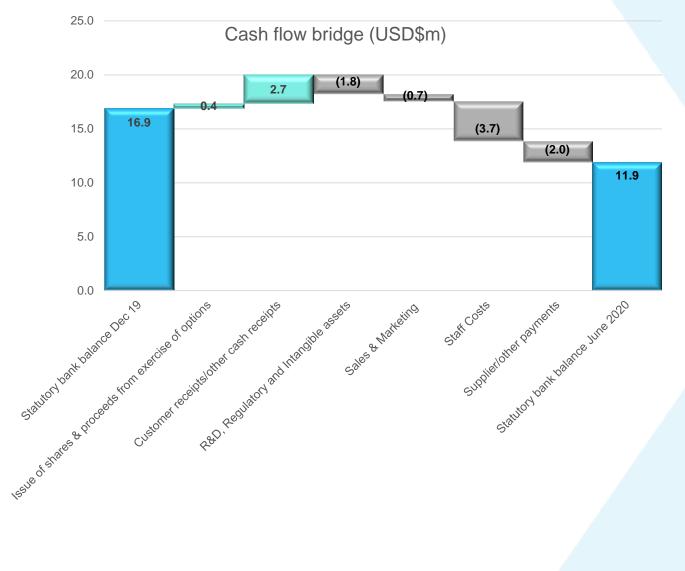
- \$11.9m in cash at 30 June 2020.
- Debt Free.
- Intangible assets include \$0.3m of R&D costs capitalised during
 2020 bringing total R&D spend in 2020 to \$1.4m (HY2019: \$1.6m).
 Although there was a decrease in R&D spend of 16% in 2020,
 R&D spend as a % of revenue increased to 129%.

	Statutory FY 19	Statutory HY 20
R&D spend as a % of revenue ¹	66%	129%

1. R&D spend includes the income statement expense and capitalised costs in the reference period. R&D costs are only capitalised once FDA approval of a product has been received, if further costs relate to additional jurisdictional approvals in a similar market or where further development work adds new functionality. R&D capitalised costs are amortised, once regulatory approval has been received, over the remaining life of the patent.

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Cash flow waterfall



FY2021 Cash Flow Drivers

- Cash Receipts driven by sales of key products; XPerience, BlastX & Bactisure
- SG&A to increase with commission paid to Agents for XPerience
- Gross Margins expected to be maintained
- Working Capital Accounts Receivable, Product Inventory will increase

2nd Half Priorities and Outlook

Maximise current product portfolio:

- Build out Kaiser Permanente footprint post BlastX approval for all Xbio products
- Assist 3M+KCI as wound care clinics return to business as usual
- Support Zimmer Biomet Bactisure launches in Australia and Europe
- CE Mark Clearance for BlastX

Build up the commercial expertise for NXS

- New Chief Commercial Officer in place since June 10, 2020 to drive direct commercial activities
- Pre launch activities to create market readiness and KOL support for XPerience
- Post FDA Clearance XPerience will be launched into the US market through NXS

Maintain momentum of R & D Pipeline

- Regulatory submissions for XPerience (Europe, TGA)
- Regulatory submission for SurgX (Europe, TGA)
- Continued new product developments

Build the customer base, expand clinical evidence and grow revenues

Appendices

Appendix 1 Reconciliation: HY2019 Statutory to Underlying EBITDA

In USD \$'(000)	Statutory results per HY19 financial statements	IPO costs	Converting note broker fees	Underlying results
Year ended 31 December 2019				
Revenue	2,345	-	-	2,345
Cost of sales	(379)	-	-	(379)
Gross profit	1,966	-	-	1,966
Other income	35	-	-	35
Research and development	(1,036)	-	-	(1,036)
Employee expenses	(3,940)	-	-	(3,940)
Sales and marketing	(361)	48	-	(313)
Consultancy and regulatory	(1,218)	178	274	(766)
General and administration	(1,675)	312	-	(1,363)
EBITDA	(6,230)	538	274	(5,417)

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Appendix 2 Corporate Overview

Stock Overview	
ASX code	NXS
Share Price (Aug 21, 2020)	\$1.48
Market capitalisation @ \$1.48	\$268.6m
Total Shares on Issue	181.5m
Listed Shares (tradable)	108.0m
Escrowed Shares	72.8m
Options	8.2m
Shareholders (1,555 at listing)	5,280
Average daily volume (since listing)	458k shares

Substantial Shareholders	
Auckland Trust Company Ltd*	25.62%
Walker Group Holdings Pty Ltd*	16.28%
Matthew Myntti (Founder & CTO)	11.38%
Judith Mitchell (Managing Director)	2.61%
Total Board & Management Shareholdings	14.45%

* Entities related to Lang Walker including disclosed purchases

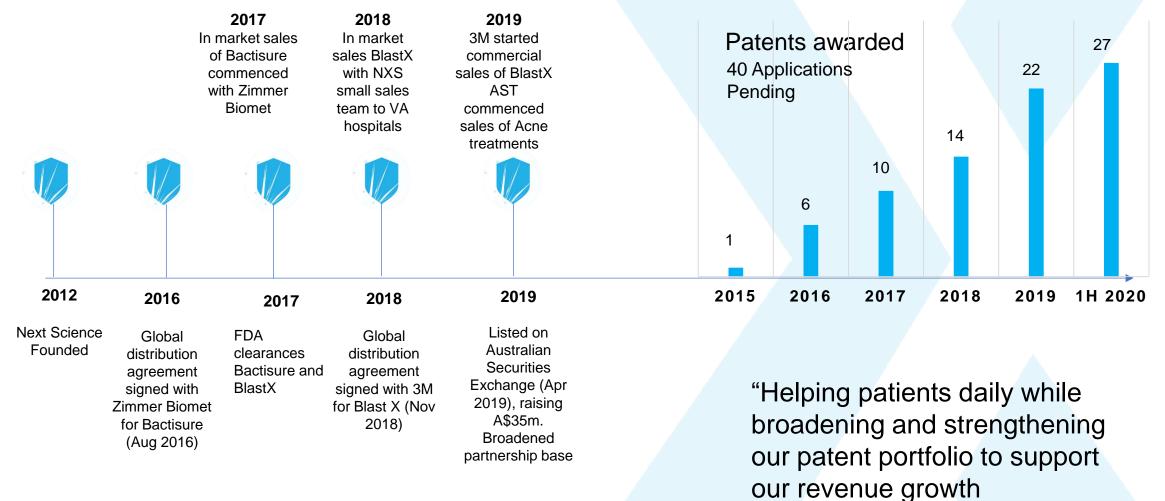


Number of Escr	owed Securities		
Shares escrowed	d until 18 April 2021		72.85m
Options escrowe	d until 18 April 2021		5.85m
	Price and vo	lume	
1.4 1.2 1 1 1 1 1 1 1 1 0.8 0.6 0.4 0.2	\mathcal{M}		
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03-Apr-20 10-Apr-20 17-Apr-20	24-Apr-20 01-May-20 08-May-20 15-May-20	22-May-20 29-May-20 05-Jun-20	12-Jun-20 19-Jun-20 26-Jun-20 03-Jul-20
	Volume —— Period avera	ige volume Shar	e Price

Clinical trials

Indication	Product	Size	Status	Comment
Surgical Site Infection in Colorectal surgery	MIS/Xperience	370	Awaiting XPerience product clearance	Randomised Control study 3 sites
Surgical site infection in Total Knee Arthroplasty	Xperience	7000	Awaiting XPerience product clearance	Randomised Control study 9 sites
ER Compound Tibial Fracture Infection	Xperience	50	Awaiting XPerience product clearance	Pilot study 1 site
Facial surgery Surgical Site infection	SurgX	250	Awaiting XPerience product clearance	Randomised control study
Chronic wound under VAC	BlastX	20	50% completed 50% in progress	Interrupted by COVID 19
DFU	BlastX + Collagen	20	100% recruited in process	Interrupted by COVID 19
Acne Vulgaris	Acne Cream	60	Completed	Drafting for publication
Gingivitis and Plaque	Oral Rinse	80	Completed	Drafting for publication

Our journey so far: a disruptive technology building market acceptance and growing revenues while creating new standards of care



ambitions" J Mitchell Managing Director

Over 130,000 patients treated with Xbio technology

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- Adherence to Surgical Care Improvement Project Measures and Post-Operative Surgical Site Infections: S Awad, Surgical Infections Vol 13 No 4, Surgical Infection Society Symposium Articles Published 7 September 2012, <u>https://doi.org/10.1089/sur</u>.2012.131

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