On the Road to Commercialization

OncoSil MEDICAL Ltd

OncoSil: Advancing Pancreatic & Liver Cancer Treatment

Daniel Kenny CEO
AGM Presentation
26 November 2015

Important Notice

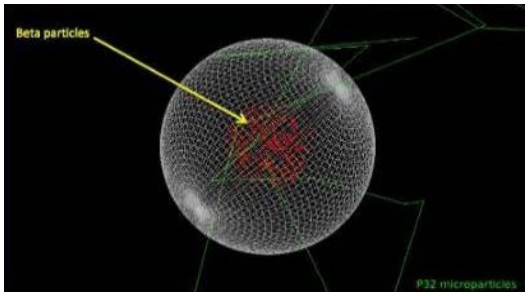
The purpose of the presentation is to provide an update of the business of OncoSil Medical Ltd (ASX:OSL). These slides have been prepared as a presentation aid only and the information they contain may require further explanation and/or clarification. Accordingly, these slides and the information they contain should be read in conjunction with past and future announcements made by OncoSil Medical Ltd and should not be relied upon as an independent source of information. Please contact OncoSil Medical Ltd and/or refer to the Company's website for further information.

The views expressed in this presentation contain information derived from publicly available sources that have not been independently verified. None of OncoSil Medical Ltd, or any of its affiliates or associated companies(or any of their officers, employees, contractors or agents (the Relevant Persons)) makes any representation or warranty as to the accuracy, completeness or reliability of the information, or the likelihood of fulfilment of any forward looking statement or any outcomes expressed or implied in any forward looking statements. Any forward looking statements in this presentation have been prepared on the basis of a number of assumptions which may prove incorrect and the current intentions, plans, expectations and beliefs about future events are subject to risks, uncertainties and other factors, many of which are outside OncoSil Medical Ltd's control. Important factors that could cause actual results to differ materially from assumptions or expectations expressed or implied in this presentation include known and unknown risks. Because actual results could differ materially to assumptions made and OncoSil Medical Ltd's current intentions, plans, expectations and beliefs about the future, you are urged to view all forward looking statements contained in this presentation with caution. Except as required by applicable law or the ASX listing rules, the Relevant Persons disclaim any obligation or undertaking to publicly update any statements in this presentation, whether as a result of new information or future events. This presentation should not be relied on as a recommendation or forecast by OncoSil Medical Ltd. Nothing in this presentation constitutes investment advice or should be construed as either an offer to sell or a solicitation of an offer to buy or sell shares in any jurisdiction.

OncoSil Medical - Overview

Developing implantable radiotherapy medical device

- 30 micron silicon particles contain beta emitting phosphorus (P32)[1]
- Safer & stronger medical radiation treatment than external beam radiation



Successfully developed – preparing for EU commercialisation

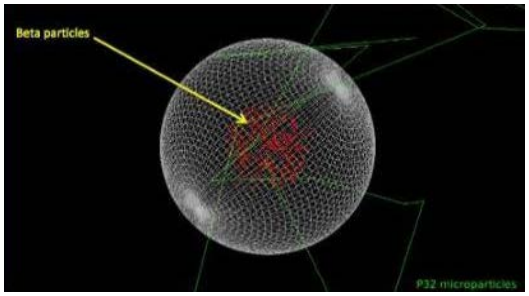
- Four pilot clinical studies completed[2];
  - 2 in primary liver/ hepatocellular carcinoma (HCC)
  - 2 in pancreatic cancer
- Excellent results to support Conformité Européene (CE) Marking filings for both primary liver and pancreatic cancer & US FDA IDE submission
- Safety evaluations suggest that OncoSil™ is well tolerated in patients with unresectable primary liver and pancreatic cancer[2]
- Efficacy data showed that OncoSil™ induces significant reduction in tumour volume in both liver and pancreas cancer and significantly reduces pain[2]

1. Instructions for Use, OncoSil™ ONCSP-32, Document No: RA-IFU01, Sep 2015 Version B. **2.** Clinical Evaluation Report, OncoSil™ ONCSP-32, Document No: RA-CER01, 20 Aug 2015 Version B

OncoSil Medical - Overview

EU Commercialisation of OncoSil™ remains on schedule for approval in Q4, 2015

- Following the recent granted ISO certification for OncoSil™, filing remains on schedule for Conformité Européene (CE) Marking approval in Q4, 2015
- Commercialisation in the EU would also facilitate sales in other major markets ex-US



Significant billion dollar market and growing unmet medical need

- The World Cancer Research Fund estimated that in 2012, 338,000 people globally were diagnosed with pancreatic cancer[1]
- Estimated total market opportunity for OncoSil™ in pancreatic cancer exceeds US$1bn
- Primary liver cancer is the 6th most common cancer in the world, with 782,000 new cases diagnosed in 2012[2,3]
- Value of the primary liver cancer market is expected to exceed US$1.4bn

1. World Cancer Research Fund International (2012). Accessed 9 Sep 2015, from http://www.wcrf.org/int/cancer-facts-figures/worldwide-data **2.** Adult Primary Liver Cancer Treatment National Cancer Institute. NIH 31 Jul 2015. Accessed 10 Sep 2015. http://www.cancer.gov/types/liver/patient/adult-liver-treatment-pdq. **3.** World Cancer Report 2014. World Health Organization. Chapter 1.1 ISBN 9283204298

Board & Management

Dr. Roger Aston
Chairman

Seasoned biotechnology entrepreneur. Inventor on patent for OncoSil™

Mr. Daniel Kenny
CEO & MD

Former senior Roche & Baxter executive. Accomplished and proven business leader with over 30 years experience. leading multiple $1bio+ franchises since 2000

Mr. Martin Rogers
Director

A well-recognised Australian biotechnology entrepreneur and executive

Tom Milicevic
Chief Financial Officer/Company Secretary

Seasoned CFO with over 20 years experience in the Medical Device sector, with investor relations and also Company Secretary duties.

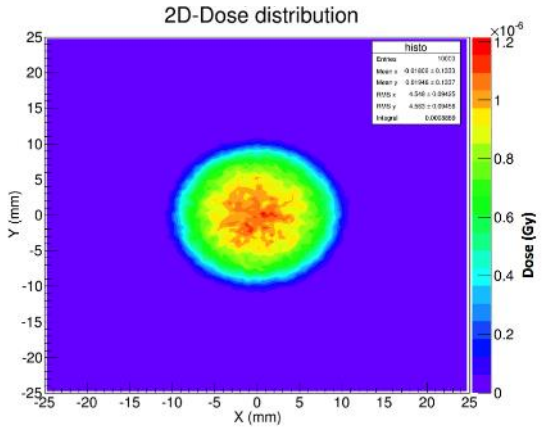
Dr. Ashish Soman
Chief Medical Officer

Former country medical director, AstraZeneca Australia.
Over 2O years' experience in clinical practice and the biopharmaceutical industry

David James
Manufacturing & Operations Manager

Ex Sirtex Medical global operations manager for 6 years. 25 years experience in pharmaceutical manufacturing and operations

OncoSil™ - Device Overview



Radiation therapy delivered to the cancer site

- **Pure "soft beta" radiation source (P32)** to avoid systemic side effects
- **Localised radiation therapy** using "sticky" microparticles
- **Carrier particles are inert silicon**
- **Particles are suspended in fluid** to allow direct injection into the tumour
- **Single Injection** under anesthesia takes 30 minutes
- **Local radiation in the tumour lasts around 3 months**

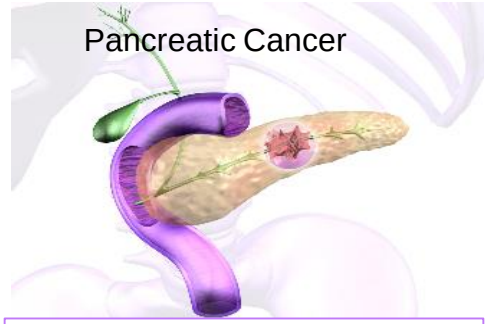
Currently no other intra-tumoral device approved for pancreatic cancer

Device technology platform capable of use in two solid tumour types

1. Clinical Evaluation Report, OncoSil™ ONCSP-32, Document No: RA-CER01, 20 August 2015 Version B **2.** Instructions for Use, OncoSil™ ONCSP-32, Document No: RA-IFU01, September 2015 Version B **3.** Investor Update.OncoSil™ Medical Ltd. Edition #5: July 2015,

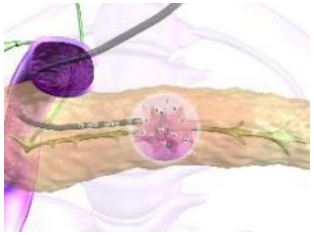
How OncoSil™ Works

OncoSil™ is suspended in a shielded syringe in the operating theatre where a physician will make the injection of the device into the pancreatic or liver tumour.



The physician guides an endoscope down the oesophagus, through the stomach and into the first part of the small intestine. Ultrasound is used to image the tumour in the pancreas, then a needle is extended from the end of the scope into the pancreas and into the middle of the tumour.

Using CT or real-time imaging, the physician guides a 20 gauge introducer needle into the target lesion. The stylet of the introducer needle is removed and a 22 gauge needle with the drug is injected into the tumour.



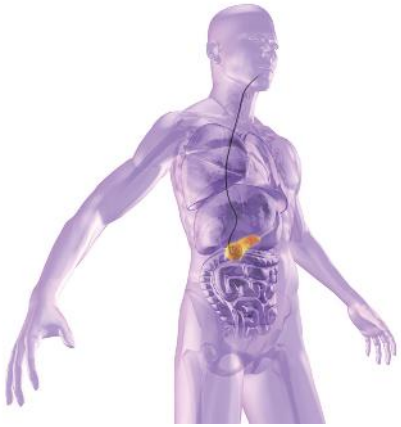
The physician then injects the OncoSil™ suspended in fluid directly into the tumour.

7

US$1bn Pancreatic Cancer

Unmet medical need

- 338,000 pancreatic cancer incidence yearly world wide[1]
- Approximately 45,000 new patients diagnosed with pancreatic cancer in the US each year[1]
- Poor prognosis - median survival ~8 months and 5 year survival less than 5%[2]



Target market

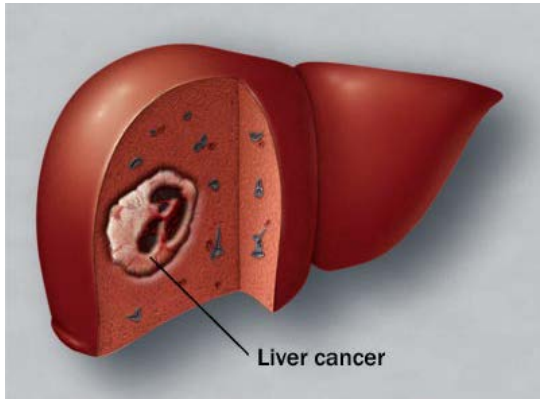
- Estimated Global market opportunity for OncoSil exceeds US$1b[3]
- Current Chemo regime in excess of US$60,000+ per annum[3]
- Cost of external beam radiation in EU is €9,000[3]

1. World Cancer Research Fund International (2012). Accessed 9 Sep 2015, from http://www.wcrf.org/int/cancer-facts-figures/worldwide-data **2.** American Cancer Society. 2010. Accessed on 9 September 2015. **3.** Datamonitor Healthcare 2013

US$1.4bn Primary Liver Cancer

Unmet medical need

- 6th most common cancer in the world[1]
- 782,000 new cases diagnosed in 2012[2]
- Due to poor prognosis, 3rd leading cause of cancer mortality, 600,000 deaths annually



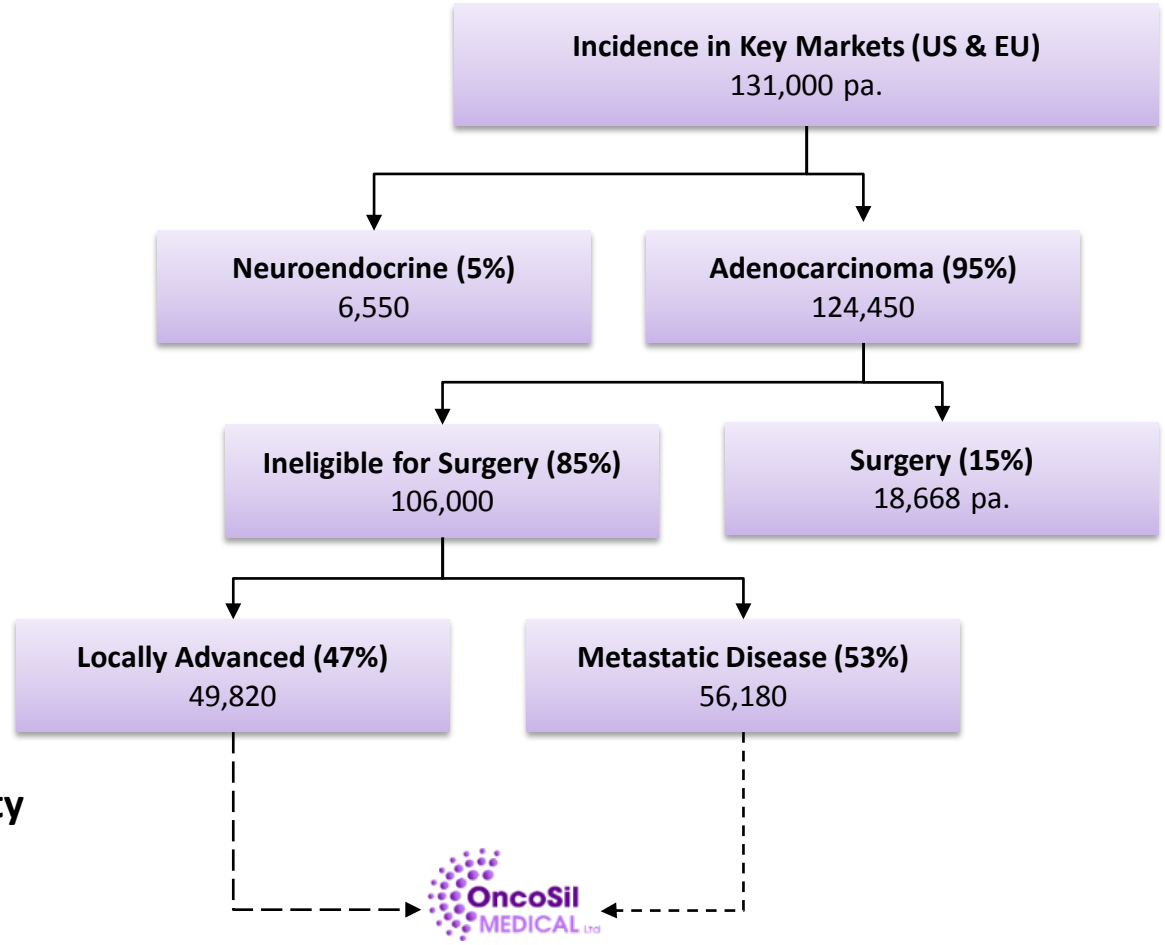
Target market

- Entering the primary liver cancer market represents a major new market opportunity and dovetails with pancreatic cancer
- Value of primary liver cancer market expected to exceed US$1.4b[3]

1. Adult Primary Liver Cancer Treatment National Cancer Institute. National Institutes of Health. 31 Jul 2015. Accessed 10 Sep 2015 from http://www.cancer.gov/types/liver/patient/adult-liver-treatment-pdq **2.** World Cancer Report 2014. World Health Organization.Chapter 1.1 ISBN 9283204298 3. Datamonitor Healthcare 2013

Pancreatic Cancer:
Patient Pool Assumptions – US & EU

US new cases pa: 46,000
EU new cases pa: 85,000



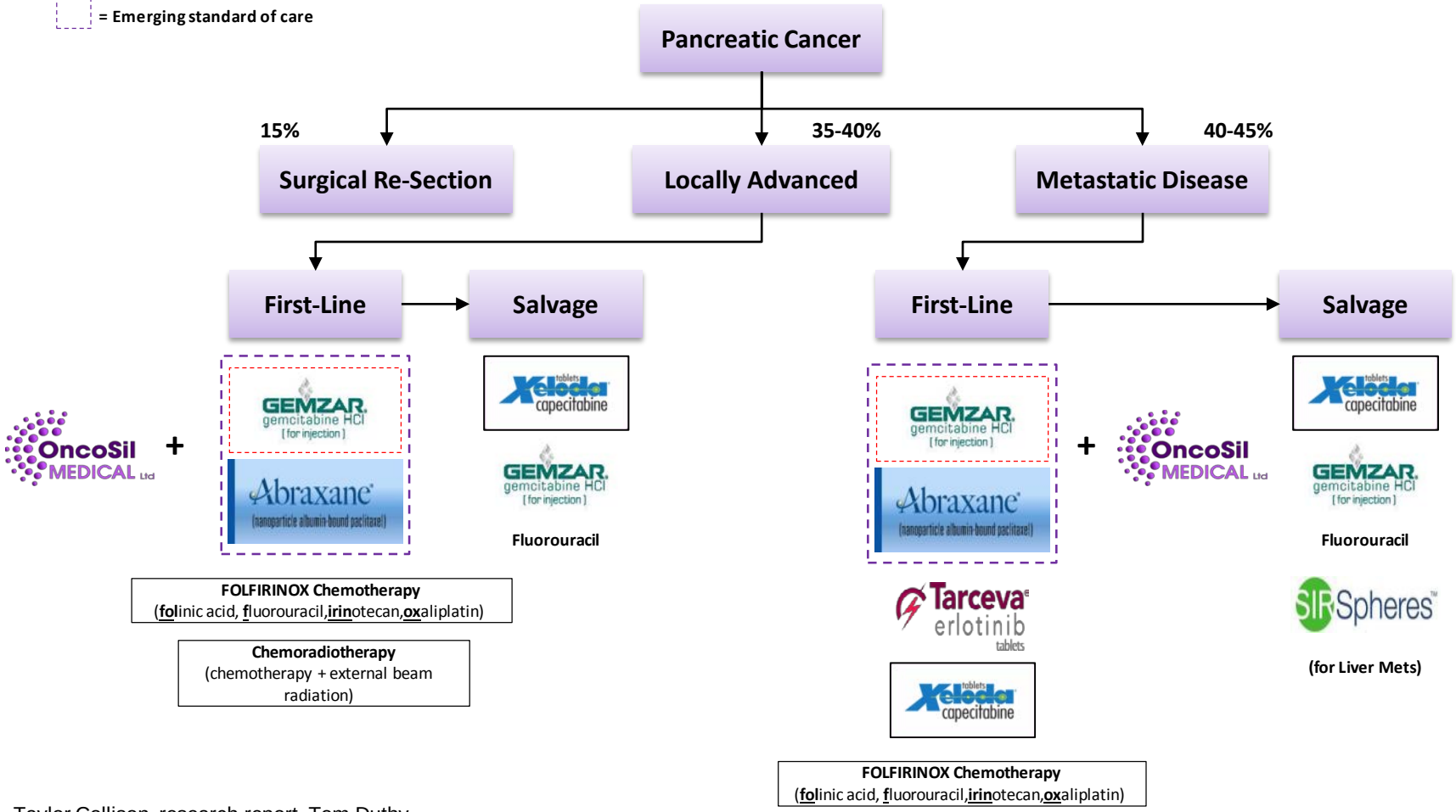
Potential Market Size (>105,000 pts p.a)

Total Market Opportunity (>$1 Billion)

Pancreatic Cancer Treatment Paradigm

= Current standard of care

= Emerging standard of care



1. Taylor Collison, research report, Tom Duthy

Clinical Success In Pancreatic Cancer

Clinical Trial Results (Study DB2- 201)

- 17 locally advanced pancreatic cancer patients in single arm study[1]
- Significant anti-cancer activity – **disease control rate of 82%** : 2 Partial Responses, 12 Stable Disease and 2 Progressive Disease[1]
- Average reduction in pain of 35% - with a maximum reduction of 69% between weeks 8 and 11 following implant
- Median progression free survival was 121 days[1]
- Median overall survival was 309 days or 10+ months[1] (compared with a typical 5.7 months with gemcitabine alone)

1. Ross PJ et al, 2008,"Novel delivery via endoscopic ultrasound of a ^{32}P brachytherapy device in addition to gemcitabine (G) in advanced pancreatic cancer", ASCO, Chicago,Illinois.

Target Tumour Response Rate: Pancreas

Study DB2- 201

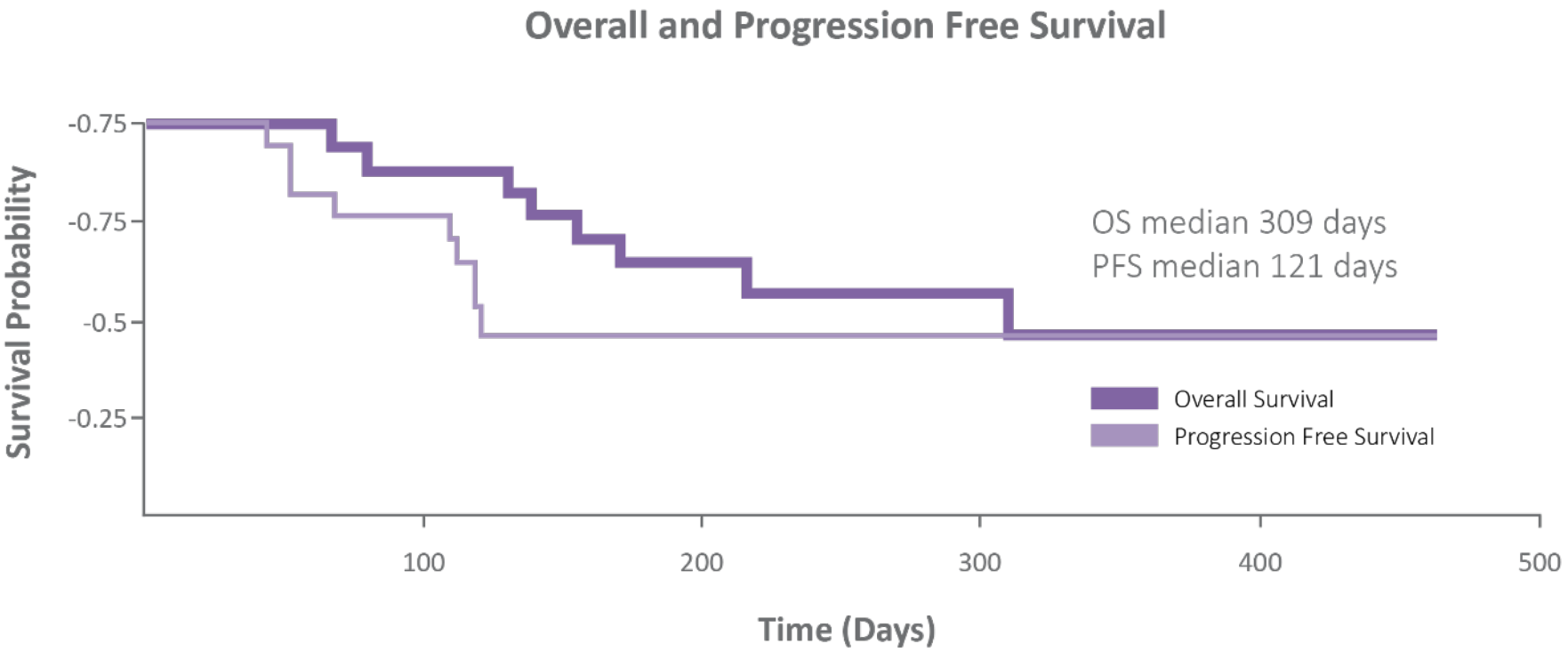
Target tumour response rate: 81.25%

- 13/16 treated patients experienced a reduction in target tumour volume
- Of the 13 patients with a reduction in target tumour volume only 2 had less than a 15% reduction
- 50% of responders achieved target tumour volume reduction of >30%

Target Tumour Reduction	5%	10%	15%	20%	25%	30%
Response Rate	68.75%	68.75%	68.75%	62.50%	56.25%	50.00%

Results: Pancreatic Cancer

Study DB2- 201

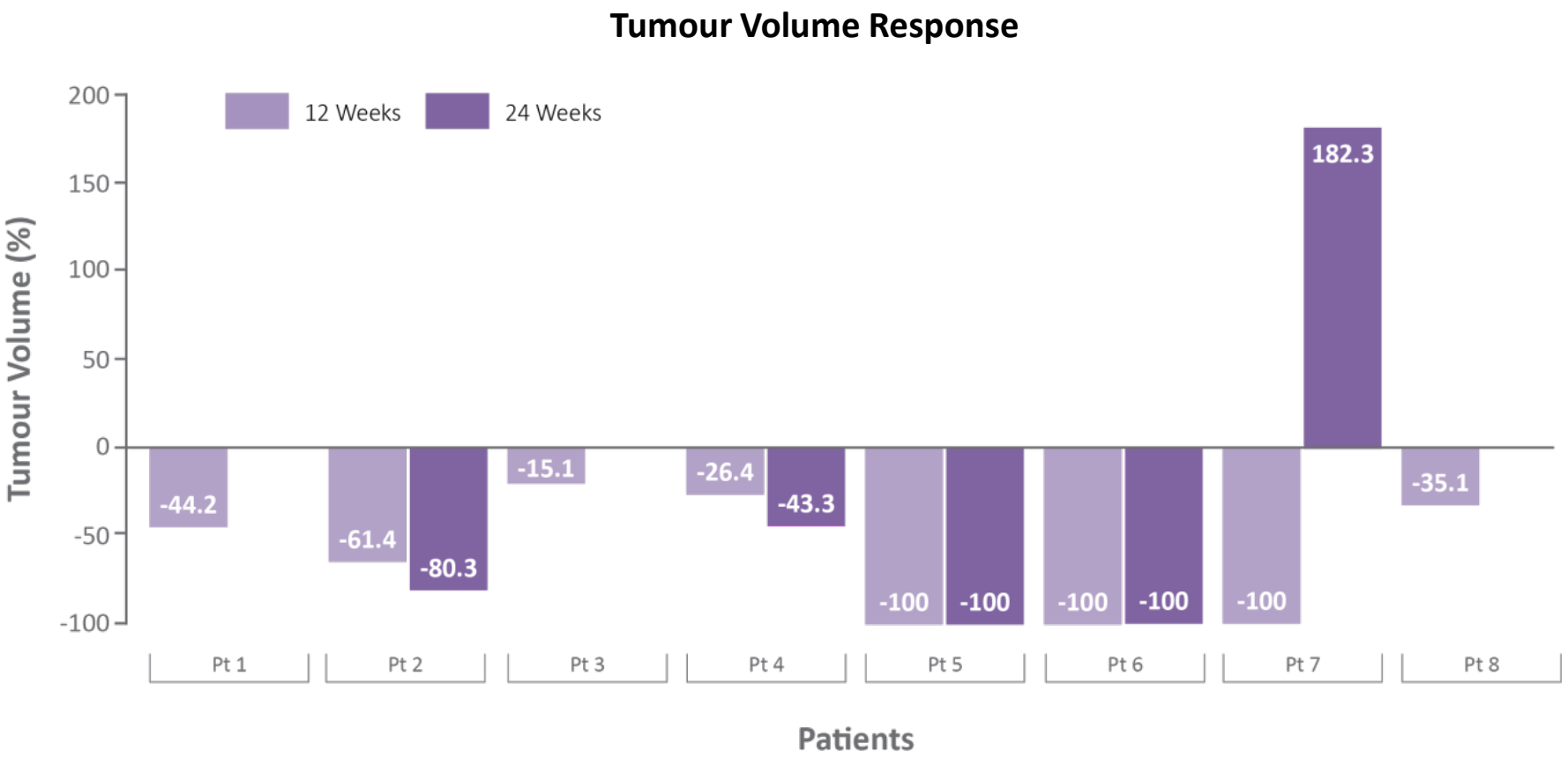


Adapted from Ross PJ et al. 2008

1. Ross PJ et al, 2008,"Novel delivery via endoscopic ultrasound of a ^{32}P brachytherapy device in addition to gemcitabine (G) in advanced pancreatic cancer", ASCO, Chicago,Illinois.

Results: Liver Cancer

Study BIOSP-201



Adapted from Goh MD 2007. Results from tumour volume regression at week 12 and week 24 by CT scan post implantation. Patient 1,3 and 8 withdrew before the scan at week 24 not due to an adverse events

1. Goh AS, 2007, Int J Radiat Oncol Biol Phys; 67(3):786-92. Epub 2006 Dec 4

Results: Liver Cancer

Study BIOSP-201:

Best Response of HCC Target Tumour after Single Fixed Dose of OncoSil™

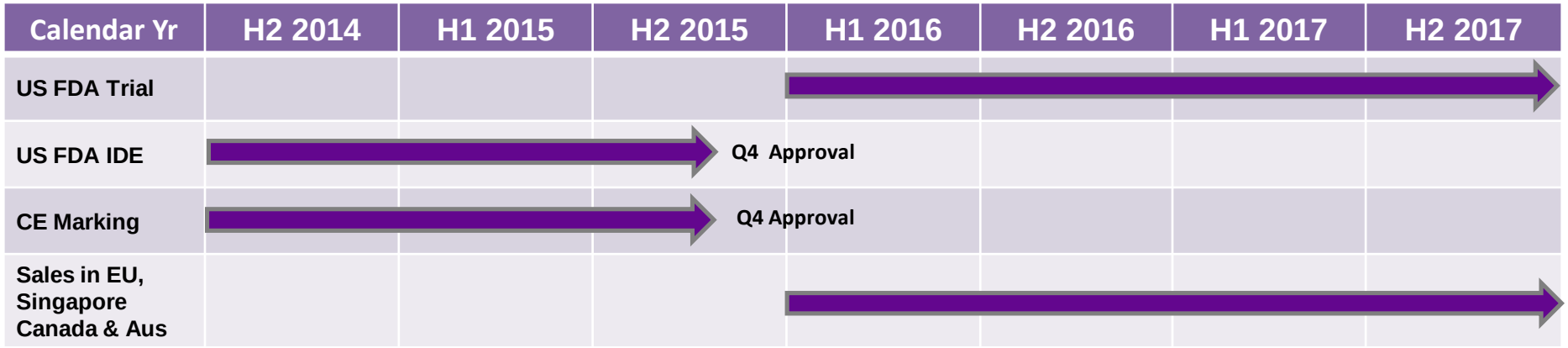
Patient Number	% Change in target Tumour Volume	Response+
001	-44%	Stable Disease
002	-80%	Partial Response
003	-16%	Stable Disease
004	-43%	Partial Response
005	-100%	Complete Response
006	-100%	Complete Response
007	-100%	Complete Response
008	-35%	Stable Disease

+WHO definitions of tumour response * Denotes investigator's classification A change of -100% indicated total disappearance of target lesions

1. Clinical Evaluation Report, OncoSil™ ONCSP-32, Document No: RA-CER01, 20 August 2015 Version B

Global Regulatory Strategy

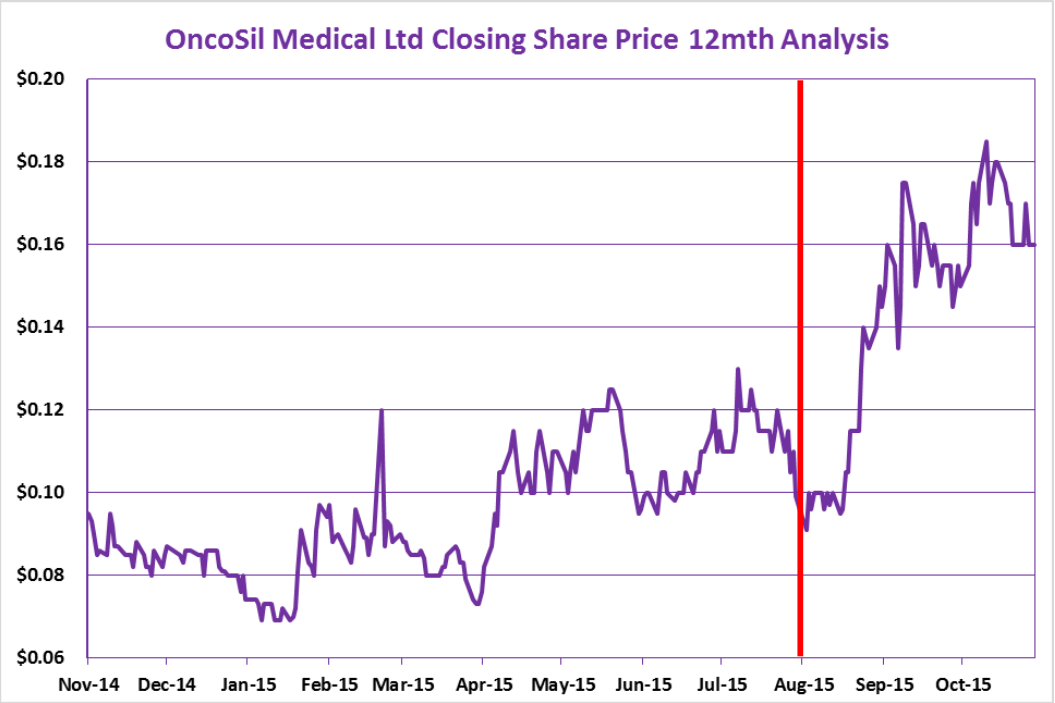
Device Registration Plan for Key Pharmaceutical Markets



OncoSil's global registration strategy is with CE (Conformité Européenne) mark, and with the United States FDA (Food and Drug Administration. IDE: Investigational Device Exemption.

Capital Structure

ASX Code	**OSL**
Market Cap	**$57m**
Shares on Issue	**359m**
Cash as at Sep 15	**A$5.0m**
R & D Credits & Pre-payments	**A$2.6m**
Total Cash & Credits	**A$7.6**
Avg Burn Rate/month	**A$440k**
Cash reserves to the end of	**Apr 17**



OncoSil™ Corporate Goals: 2015

- ISO 13485 Certification – granted April 2015
- CE Mark approval by Q4 2015 (original target Q3)
- Commercial Manufacturing readiness by Q4 2015
- Business plan & commercialisation strategy defined by Q4 2015
- First commercial sales in 2015 (dependent on CE Mark granting)
- US FDA IDE approval by Q4 2015

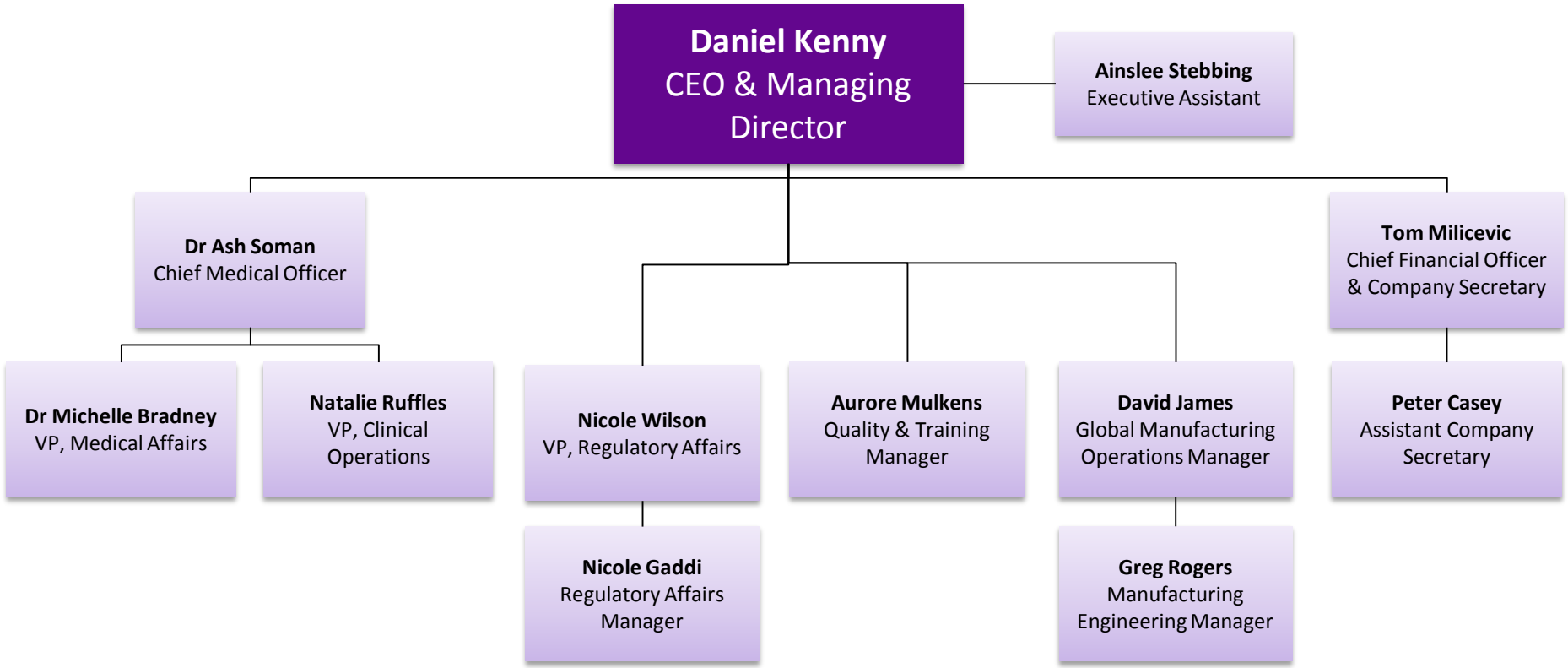
Image 1 (Top left):Microparticle atomiser

Image 2 (to the Right): Microparticle classifier

OncoSil Medical Achievements: 2015

- ISO 13485 Certification – granted April 2015
- Filed for CE Mark on July 17, 2015
- Successfully completed US FDA Pre-IDE submission process
- Built a strong “world-class” Executive Management Team
- Achieved a “positive Brand” awareness for OncoSil Medical with the Investment community

Organisational Chart



Investment Thesis

1. OncoSil Medical has strong leadership
    - New management, energised and focused.
2. High unmet medical need.
    - Pancreatic cancer has one year survival of 25% and five year survival of 5%[1]
    - Primary liver cancer is the 6th most common cancer in the world[2]
3. Current pancreatic treatments are lacking.
    - Gemcitabine chemotherapy was approved 18 years ago.
    - Abraxane chemotherapy (approved 2013)
    - Median overall survival has increased by 2 months to 8.5 months over the past 20 years
4. Sufficient Clinical Data to secure CE mark in Q4 2015.
5. EU Commercialisation in 2016 possible following CE Mark authorisation.
6. Upcoming US FDA IDE

1. World Cancer Report 2014. World Health Organization. 2014. Chapter 5.7 ISBN 9283204298 **2.** World Cancer Report 2014. World Health Organization. Chapter 1.1 ISBN 9283204298

Thank you !!

Daniel Kenny
CEO & Managing Director
OncoSil Medical Ltd
www.oncosil.com.au