CyPass® Micro-Stent
Unlocking the Potential of the Suprachoroidal Space

Caution: Investigational Device. Limited by Federal (USA) law to investigational use.
Glaucoma: Major Unmet Clinical Need

Glaucoma is one of the top 3 ophthalmic diseases

Affects 65 million people worldwide (the leading cause of blindness in the developed world\(^1\))

1 in 5 visits to the eye doctor\(^2,3\)

High eye pressure leads to nerve damage and blindness

Mature therapeutics space: $6 billion spent on glaucoma treatment each year\(^4\)

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What Could Bridge the Gap?

CyPass® Micro-Stent*

Eye drops
Compliance issues, chronic use damaging to eye surface

Surgery
Effective, but high risk of complications

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CyPass System overview

CyPass Applier
- Guidewire-driven
- Radius tip allows easy insertion

CyPass Micro-Stent
- Polyimide tube
- Retention features
CyPass Micro-Stent delivery

- Micro-invasive, ab interno approach
- 1.5 mm clear corneal incision or phaco incision
- Conjunctiva- and sclera-sparing
- Preserves trabecular meshwork
Diagram of the CyPass Micro-Stent in situ
## CyPass Micro-Stent Research Program

>1000 cases to date across all studies

<table>
<thead>
<tr>
<th>Pilot studies</th>
<th>Combination-Cataract and POAG</th>
<th>N=100</th>
<th>BJO¹</th>
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</thead>
<tbody>
<tr>
<td>CyCLE</td>
<td>EU Post-Market Combination-Cataract and POAG</td>
<td>n=565</td>
<td>JCRS², J Glaucoma³, Ophthalmologe⁴, Klin Monbl Augenheilkd⁵</td>
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<tr>
<td>DUEETTE</td>
<td>EU Post-Market POAG in Pre-Trab Patients</td>
<td>n=65</td>
<td>AJO (in press)⁶</td>
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<tr>
<td>COMPASS</td>
<td>US-IDE Randomized Controlled Trial Combination-Cataract vs Cataract Alone</td>
<td>n=505</td>
<td>sub-analyses in JAMA Ophthalmol⁷,⁸</td>
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<td>VISCOPASS</td>
<td>Randomized Controlled Trial CyPass + Viscoelastic</td>
<td>Phase I n= 63 Phase II n=90</td>
<td>Next-generation technology</td>
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8 peer-reviewed manuscripts published or in press

US-IDE study: COMPASS trial

1. Randomized, Controlled Study for FDA approved indication in POAG

2. Largest micro-invasive glaucoma surgery (MIGS) trial to complete by 2015 (505 subjects)

3. Key Trial Differentiators/Strengths:
   - Terminal wash out at 12 and 24 months to control medication bias
   - Strict criteria for re-introduction of medications
   - Strong primary endpoint outcome: 2-year diurnal unmedicated IOP change from baseline
Stent Technology in Ophthalmology
The Next Frontier

Neurovascular

Cardiovascular
Pulmonary
Gastrointestinal
Urological/Gynecological
Peripheral

Ophthalmology
MIGS