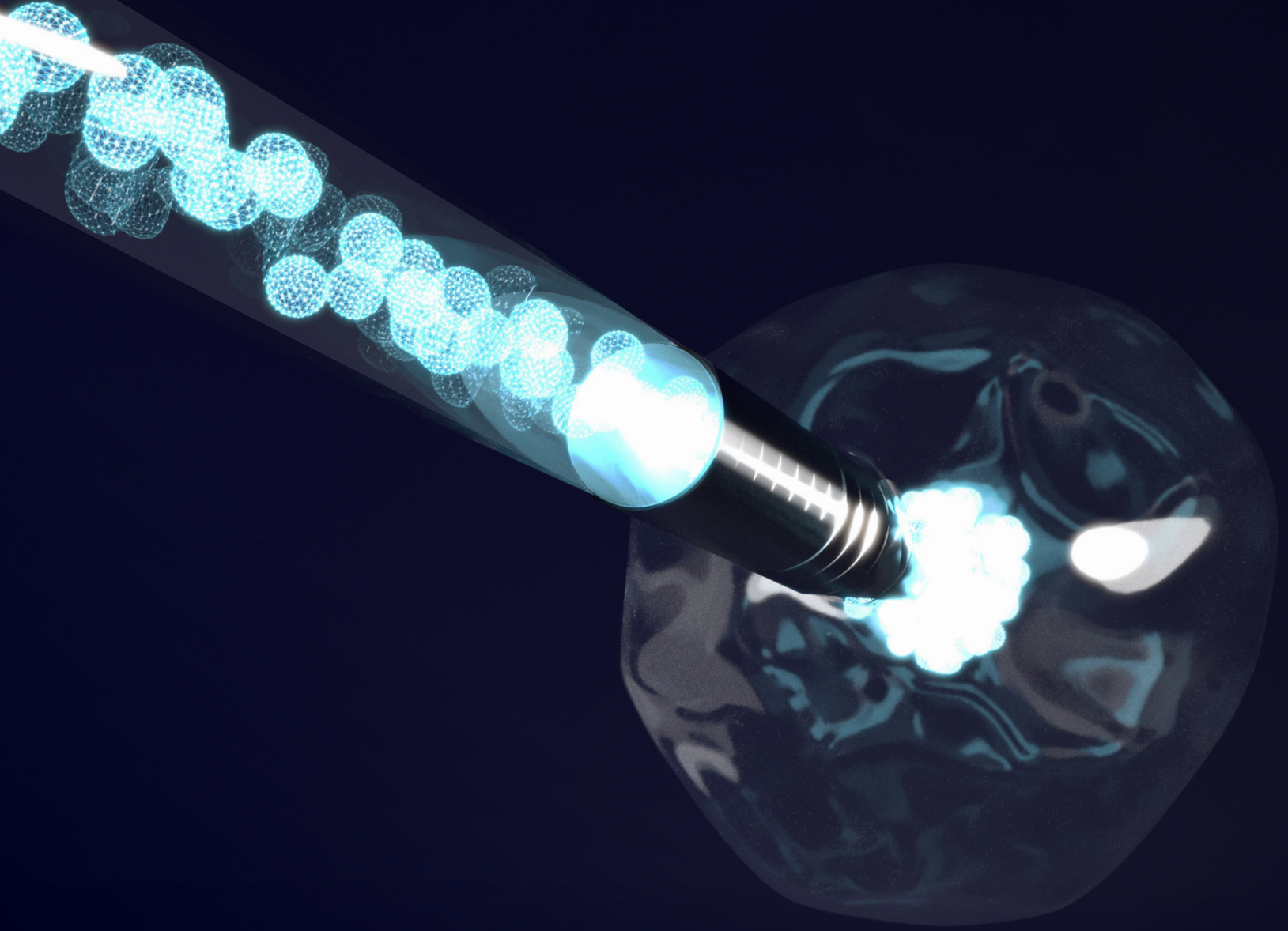


OncoSil MEDICAL

Targeted Approach • Positive Impact

Intratumoural placement of ^{32}P for locally advanced pancreatic cancer

We believe our technology will have a truly positive impact in oncology.

OncoSil Medical is a global medical device company focused on Interventional Oncology.

Our mission is to improve the outcomes for people living with cancer by utilising the selected and targeted intratumoural placement of Phosphorous-32 (^{32}P) Microparticles in combination with chemotherapy.[1]

OncoSil™ is our brachytherapy device. Its targeted approach enables healthcare professionals to deliver a greater radiation dose directly into the tumour compared to external beam radiotherapy, while sparing surrounding critical organs.[2]

Targeted approach. Positive impact.

OncoSil™ enables the TaRgeted Intratumoural Placement of Phosporous-32 (^{32}P) or TRIPP, a single, minimally invasive procedure used in combination with chemotherapy[1] for the treatment of locally advanced pancreatic cancer (LAPC).

OncoSil™ device treatment pathway*

*The above diagram is a treatment pathway recommendation only and is intended to provide guidance on the normal course of patient management when considering the use of OncoSil™ for the treatment of unresectable locally advanced pancreatic cancer in combination with chemotherapy.† Chemotherapy should not be administered within 48 hours either side of the OncoSil™ implantation.

OncoSil™: The journey so far

2004 — OncoSil™ technology is developed as BrachySil™ by pSivida Corp

2004-2009: Early clinical development phases for OncoSil™ technology

2009

2013 — OncoSil™ technology acquired by Neurodiscovery Ltd, who change their name to OncoSil Medical

2016 — OncoSil Medical receives investigational device exemption (IDE) from FDA to conduct a clinical study

2017 — First study participant is implanted with OncoSil™ device as part of the global PanCO Study[3]

2018 — First US study participant implanted with OncoSil™ device as part of the OncoPaC-1 Study[4]

PanCO Study recruitment completed[3]

2020 — FDA grants breakthrough device designation for OncoSil™ for treatment of LAPC in combination with chemotherapy[5]

BSI grants CE Marking for OncoSil™ with a designation of breakthrough device for the treatment of LAPC in combination with gemcitabine based chemotherapy[6]

2021 — The PanCO Study is published in ESMO Open[3]

2022 — First commercial pancreatic cancer treatment with the OncoSil™ in Europe

2023 — First patient enrolled in the TRIPP-FFX Clinical Study

First patient treated in the PANCOSIL Investigator-Initiated Trial

Targeted approach

During the TRIPP procedure, OncoSil™ is administered directly into the pancreatic tumour via endoscopic ultrasound (EUS) guidance – an approach which offers:

Maximised dose to tumour – 98% of radiation from one fraction delivered over 81 days

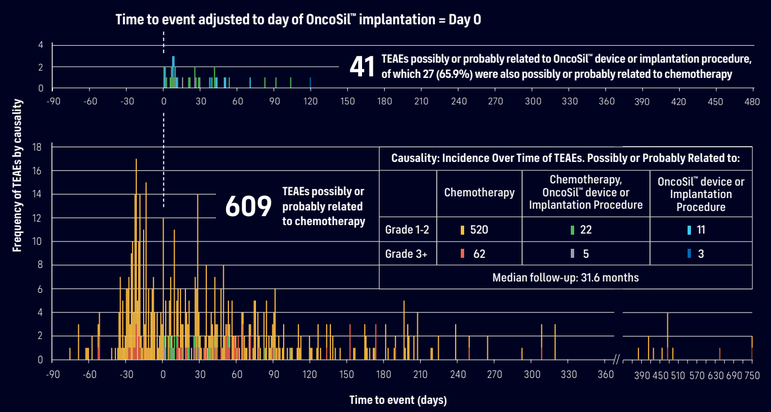
Targeted radiation delivery to tumour **protects surrounding organs**[2]

Acceptable side-effect profile
- well tolerated by patients
- no evidence of additional risk from combining OncoSil™ with contemporary systemic chemotherapy regimens[3]

Negligible radiation risk to nuclear medicine staff and endoscopists

Incidence of Treatment-Emergent Adverse Events (TEAEs) over Time by Causality

(Per Protocol [PP] Cohort)[3]

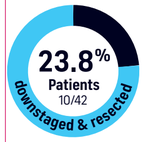


Positive impact

The results from the PanCO clinical study demonstrate the benefits of incorporating OncoSil™ into the treatment strategy for patients with unresectable LAPC.[3]

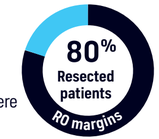
High rates of resection

Downstaging to eligibility for **resection with curative intent** was reached in **33% of patients**. Resection was achieved in almost **1 in 4** patients.



Favourable surgical margins

8 out of 10 of those patients who were resected had **R0 surgical margins.** Patients for whom R0 margins are achieved have been shown to have improved survival outcomes vs. those with R1 margins.[7,8]



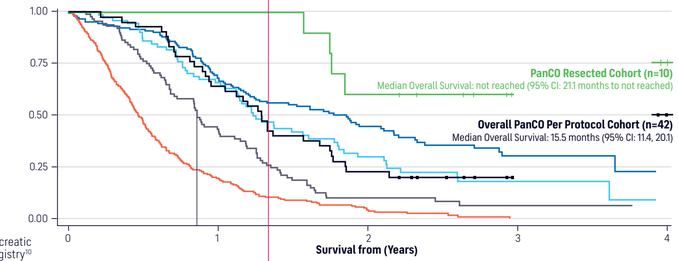
Prolonged median overall survival

Patients treated with OncoSil™ in combination with chemotherapy[1] experienced a 20% reduction in risk of death* and **median overall survival of 15.5 months.**

* When compared to CT-only and ICT/CCRT studies[9]

Survival of PanCO Study vs. Victoria & NSW (Australia) Pancreatic Cancer Registry[3,10]

Survival Estimates by Resectability in Treated Group (from Diagnosis, 2016-2019)
Comparison vs. PanCO Cohorts (from Study Enrolment, 2017-2018)

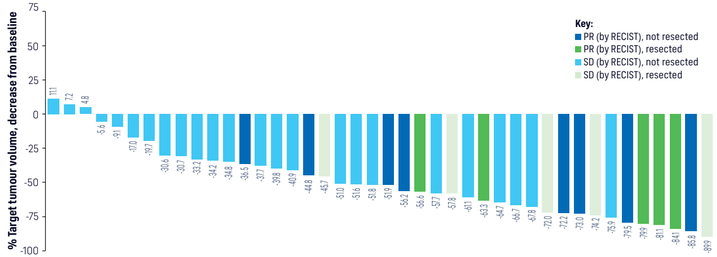


Number at Risk				
Victoria & NSW Pancreatic Cancer Registry[10]				
Resectable	139	91	45	14
Borderline Resectable	71	45	17	5
Locally Advanced	88	37	7	2
Metastatic	228	43	8	0
PanCO Study[3]				
Overall PP population	42	27	8	0
Resected Cohort	10	10	6	

Maximum Change in Tumour Volume from Baseline by Outcome[3]

PP Cohort Prior to Surgical Resection

Tumour Volume, Evaluable Patients	ITT Population, n (%) (N=47/50)	PP Population, n (%) (N=42/42)
Median (range) maximal decrease, %	-51.6% (+72.2% to -89.9%)	-51.9% (+11.1% to -89.9%)
Mean (std dev) maximal decrease, %	-44.0% (34.8)	-49.1% (26.4)
p-value	p<0.0001	p<0.0001



Technical overview

OncoSil™ is a single-patient, single-use brachytherapy device, comprising Phosphorous-32 (^{32}P) Microparticles suspended in a specially formulated Diluent. The Microparticles are a permanent implant which contain Phosphorous-32 (^{32}P), a pure beta-emitter radioisotope.

Technical specifications

- **Physical half-life: 14.27 days**
- **Absorbed dose:** In therapeutic use, **98%** of the radiation is delivered within **81 days**, giving an absorbed dose equivalent to **100 Gy**[10]
- **Final radioactive concentration: 6.6 Mbq/mL** (following predefined suspension preparation protocol)
- **Storage:** Room temperature. Do not freeze the Diluent
- **Shelf life:** 24 hours from the time of dose preparation
- **Endoscope flush:** Simple saline flush minimises the risk of endoscope contamination

Simple and flexible preparation and dosing

OncoSil™ has been specifically developed to offer:

24-hour shelf life to enable pre-planning and aid workplace efficiency

Flexibility in treatment planning due to a wide 10-day treatment window

Confidence in achieving a total dose to tumour of 100 Gy, delivered over the 81-day time period of sustained OncoSil™ activity

Day of Implantation Relative to Reference Date	Vial Total Radioactivity MBq
-2	276
-1	262
0	250
+1	238
+2	227
+3	216
+4	206
+5	196
+6	187
+7	178

Day of implantation with associated total vial radioactivity in MBq

Treatment

Generally, an OncoSil™ implantation is an outpatient procedure. However, the treating clinicians responsible for the patient's care should determine if admission is required.

Certification: Treatment facilities and personnel

The OncoSil™ System is to be used in a licensed treatment facility. These facilities must hold an appropriate license for the isotope Phosphorous-32 (^{32}P), which mandates that these institutions will have an appointed Radiation Safety Officer (RSO)/Radiation Protection Officer (RPO) who will be the primary contact for all matters related to radiation safety.

The OncoSil™ suspension should be prepared within the Nuclear Medicine Department or within a licensed Radiopharmacy. Only appropriately licensed personnel, who have been trained in the preparation of the OncoSil™ suspension may prepare the product for implantation.

Intended use/Indications for use:

The OncoSil™ System is intended to induce prolonged local tumour control and tumour size reduction in patients with locally advanced unresectable pancreatic cancer, in addition to gemcitabine-based chemotherapy, by implantation of radioactive Phosphorous-32 Microparticles into pancreatic tumours under endoscopic ultrasound guidance. OncoSil™ is indicated for the treatment of patients with locally advanced unresectable pancreatic cancer, in addition to gemcitabine-based chemotherapy.

Abbreviations:

BSI: British Standards Institution
CR: Complete Response
EUS: Endoscopic Ultrasound
FDA: Food and Drug Administration
ITT: Intention to Treat
LAPC: Locally Advanced Pancreatic Cancer
NC: Not Calculable
NSW: New South Wales
PP: Per Protocol
PR: Partial Response
SAE: Serious Adverse Event
SD: Stable Disease
TEAE: Treatment-Emergent Adverse Event
TRIPP: TaRgeted Intratumoural Placement of Phosporous-32 (^{32}P)

OncoSil MEDICAL

Targeted Approach • Positive Impact

References:

1. OncoSil™ System Instructions for Use.
2. Skowronek J. J Current Status of Brachytherapy in Cancer Treatment - Short Overview, 2017; 9: 581-589.
3. Ross PJ, Wasan HS, Croagh D et al. Results of a Single-Arm Pilot Study of ^{32}P Microparticles in Unresectable Locally Advanced Pancreatic Adenocarcinoma with Gemcitabine/Nab-Paclitaxel or FOLFIRINOX Chemotherapy. ESMO Open February 2022; 7 (1): 100356.
4. OncoPaC-1. ClinicalTrials.gov Identifier: NCT03076216.
5. US Food and Drug Administration (FDA) breakthrough device designation for use in combination with systemic chemotherapy.
6. The British Standards Institute (BSI) designated the device as a breakthrough product under MEDDEV, April 2020, for use in combination with gemcitabine-based chemotherapy.
7. Balaban EP, Mangu PB and Yee NS. Locally Advanced Unresectable Pancreatic Cancer: American Society of Clinical Oncology Clinical Practice Guideline Summary. J Oncol Pract 13, 265-269, doi:10.1200/jop.2016.017376 (2017).
8. Ducreux M, Sa Cuhna A, Caramella C et al. Cancer of the Pancreas: ESMO Clinical Practice Guidelines for Diagnosis, Treatment and Follow-Up. Ann Oncol 26 Suppl 5, v56-68, doi:10.1093/annonc/mdv295 (2015).
9. Allerdice, N Wilson, D Turner et al. Indirect Treatment Comparison of PanCO, a Pilot Study of OncoSil P-32. Microparticles Combined with Gemcitabine + Nab-Paclitaxel or FOLFIRINOX Chemotherapy, Versus Standard-of-Care Treatment in Unresectable Locally Advanced Pancreatic Cancer. Presented at ESMO World Congress on Gastrointestinal Cancer, 1-4 July 2020 (Abs. P-260).
10. Croagh D. Presented at the E-AHPBA Congress, Sept 2021. Symposium 'Downstaging Unresectable LAPC. Discussion on the Resection Data from the PanCO Study'.

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