
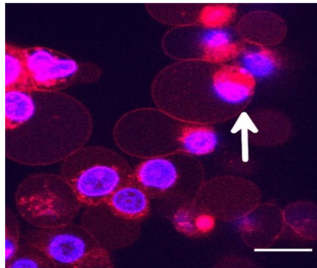




## Commercializing the next standard of care for bladder cancer

	<p><b>Study Drug</b> (Ruvidar<sup>™</sup>) instilled in bladder intravesically</p>
	<p><b>Ruvidar<sup>™</sup></b> preferentially absorbed by bladder cancer cells</p>
	<p><b>Study Device</b> (green laser light) activates Ruvidar<sup>™</sup> producing singlet oxygen which destroys the cancer cells</p>
	<p>Bladder cancer cells destroyed, leaving healthy cells intact</p>

**US Market Opportunity**  
**US \$1.1 Billion Annually**

## Theralase<sup>®</sup> is safer and more effective than all currently FDA approved drugs

Company/ FDA Approved Drug	Number of Patients	Initial Complete Response ("CR")	Durable CR (15 months)	Pros	Cons
Anthra Pharma (Valrubicin)	90	21%	7.7%	First intravesical drug approved by the FDA for NMIBC.	Not recommended by US uro-oncologists
Merck Pembrolizumab (Keytruda)	96	40%	18.9%	First immunotherapy drug approved for BCG-Unresponsive NMIBC CIS.	Only applicable to 20 to 40% of patient population. Associated with serious adverse events.
Ferring (Adstiladrin)	98	51%	23.5%	First intravesical oncologic virus approved for BCG-Unresponsive NMIBC CIS.	Response of 3.9% CR at 24 months.
<b>Theralase<sup>®</sup> (Ruvidar<sup>™</sup>)</b>	63/100	64% (75% optimized)	36% (40% optimized) (43% optimized TR)	High initial efficacy and high duration of efficacy	Currently not FDA approved. Accrual expected by end of 2024