iTrack™ Canaloplasty to be Featured in 31 Presentations in the Official 2024 ASCRS Annual Meeting

California, USA, March 21, 2024 – Nova Eye Medical Limited, a medical technology company committed to advanced ophthalmic treatment technologies and devices, is pleased to announce that the Company's proprietary **iTrack™ canaloplasty technology** will be featured in the official scientific program of the 2024 American Society of Cataract and Refractive Surgery (ASCRS) in Boston, MA, April 5 – 8, 2024.

This year's ASCRS meeting will spotlight the innovative iTrack™ canaloplasty technology through a comprehensive line-up: **20 podium presentations, 1 presented poster, 8 e-Poster and 2 instructional courses, totalling an impressive thirty-one contributions** from distinguished professionals in the field. These presentations will offer in-depth insights into clinical outcomes and the broad spectrum of applications for iTrack™ canaloplasty in the treatment of glaucoma.

A summary of the iTrack™ official ASCRS scientific programming is outlined below:

Podium Presentation:

Saturday, April 6, 2024 **BCEC - Meeting Level 2, Room 259A**

Ahmad A. Aref, MD, MBA, ABO
Factors to Prediction of Success of 20% Intraocular Pressure Reduction in Glaucoma Eyes Undergoing Ab-Interno Canaloplasty
Time: 10:05 AM

Jessica Hsueh, MD
Ab-Interno Canaloplasty in Primary Angle-Closure Spectrum+
Time: 10:10 AM

Raman A. Michael, MD
Investigating the Consistency in Outcomes of Ab-Interno Canaloplasty as a Standalone Procedure
Time: 10:15 AM

Podium Presentation (cont):

Saturday, April 6, 2024 **BCEC - Meeting Level 2, Room 259A**

Neal Rangu, BA; Mohsain S. Gill, MD; Kamran M. Riaz, MD; Mahmoud A. Khaimi, MD
Performing Ab-Interno Canaloplasty Post Keratoplasty in Steroid-Induced Glaucoma Eyes – 3 Years Outcomes
Time: 10:20 AM

Norbert Koerber, FEBO
6-Year Clinical Effectiveness of Ab-Interno Canaloplasty in Reducing the Medication Burden in Glaucoma Patients
Time: 10:48 AM

Norbert Koerber, FEBO
Efficacy, Safety of New Ab-Interno Canaloplasty as Standalone Procedure and Combined with Cataract Surgery in Primary Open-Angle Glaucoma
Time: 10:53 AM

Dr. Nir Shoham-Hazon, MD
Medication Burden in 3+Meds Glaucoma Eyes Following Canaloplasty via an Ab-Interno Technique Combined with Phacoemulsification
Time: 11:01 AM

Matthew S Porter, MD, ABO
36-Month Efficacy of Ab-Interno Canaloplasty for the Treatment of Open-Angle Glaucoma
Time: 11:11 AM

Mark J. Gallardo, MD
3-Year Efficacy Outcomes of Canaloplasty Performed in Patients with Mild to Moderate and Severe Primary Open-Angle Glaucoma
Time: 11:16 AM

Mark J. Gallardo, MD
Standalone Ab-Interno Canaloplasty in Severe Uncontrolled Glaucoma Eyes: A Case Series: 36 Months Results
Time: 11:21 AM

Podium Presentation (cont):

Sunday, April 7, 2024 **BCEC - Meeting Level 2, Room 259A**

Ahmad A. Aref, MD, MBA, ABO
Efficacy and Safety Profile of Canaloplasty via an Ab-Interno Approach Performed with and without GATT in Glaucoma Patients*
Time: 8:00 AM

Ahmad A. Aref, MD, MBA, ABO
Efficacy of Canaloplasty Via an Ab-Interno Approach Combined with GATT in Patients with Severe Open Angle Glaucoma*
Time: 08:05 AM

Umar D. Sandhu, BA; Kamran M. Riaz, MD; Mahmoud A. Khaimi, MD
Performing Ab-Interno Canaloplasty Post Keratoplasty – 2 Year Outcomes
Time: 08:40 AM

Matthew S Porter, MD, ABO
A Study of Cataract Surgery Combined with Canaloplasty and Microtrabecular Bypass Stent Surgery in Open Angle Glaucoma**
Time: 4:12 PM

David M. Lubeck, MD, ABO
24-Month Results of iTrack Global Data Registry to Support the Role of Canaloplasty for Treatment of Glaucoma
Time: 4:17 PM

David M. Lubeck, MD, ABO
Multicenter Canaloplasty Data Registry – Outcomes of Ab-Interno Canaloplasty across Different Glaucoma Types and Severity
Time: 4:27 PM

David M. Lubeck, MD, ABO
Endothelial Cell Density and Loss Following Ab-Interno Canaloplasty in Patients with Mild-Moderate Glaucoma as Compared to Severe Glaucoma
Time: 4:34 PM

Podium Presentation (cont):

Sunday, April 7, 2024 **BCEC - Meeting Level 2, Room 259A**

Mahmoud A. Khaimi, MD
Ab-Interno Canaloplasty Standalone Versus Combined with Cataract Surgery – 36-Month Outcomes in +1000 Eyes
Time: 4:39 PM

Dr. Nir Shoham-Hazon, MD
Safety and Efficacy of Ab-Interno Canaloplasty (ABiC) Using the iTrack in Angle Closure Glaucoma: 12-Month Results
Time: 4:44 PM

Jessica Hsueh, MD
Performing Ab-Interno Canaloplasty in PACG Eyes Across Different Stages of Glaucoma Severity
Time: 4:54 PM

Presented poster:

Saturday, April 6, 2024 **Poster Presentation Area**

Jessica Hsueh, MD
Canaloplasty MIGS Characteristics: Correlation between Pressurized OVD Volume and Effectiveness on IOP and Medications in PACG Eyes
Time: 2:15 PM

e-Posters:

Paul J. Harasymowycz, MD, FRCSC, MSc
Canaloplasty Effectiveness Correlated with Viscoelastic Volume Delivered in Schlemm's Canal

e-Posters (cont):

Richard D. Ten Hulzen, MD
36-Month Outcomes of Phacoemulsification with Ab-Interno Canaloplasty in Mild Primary Open Angle Glaucoma

Raman A. Michael, MD
Canaloplasty Performed with an Ab-Interno Technique for Pseudoexfoliative or Pigmentary Glaucoma Eyes – 12 Months Results

Raman A. Michael, MD
Effectiveness and Safety Profile of Standalone Ab-Interno Canaloplasty Using the iTrack in Uncontrolled (>18mmHg) Glaucoma Eyes

James Murphy, MD
Efficacy and Safety Profile of Ab-Interno Canaloplasty Performed with and without GATT in Uncontrolled Glaucoma Eyes – 24 Month Outcomes*

James Murphy, MD
Efficacy of Ab-Interno Canaloplasty Performed with or without GATT in Cases of Moderate Versus Severe Glaucoma*

Matthew S Porter, MD, ABO
Cataract Surgery Combined with Canaloplasty and Microtrabecular Bypass Stent Surgery in Severe, on 3+ Medications Open Angle Glaucoma Eyes**

Matthew S Porter, MD, ABO
Canaloplasty Combined with Microtrabecular Bypass Stent Performed on Controlled and Uncontrolled Glaucoma Patients: 12 Months Results**

Instructional Course:

Saturday, April 6, 2024
3:30 PM – 5:00 PM

BCEC - Meeting Level 2, Room 258B

Norbert Koerber, FEBO; David M. Lubeck, MD, ABO; Analisa Arosemena, MD
IC-127 Canaloplasty technique combined with channelography

Skills Transfer Lab:

Sunday, April 7, 2024
8:00 AM – 10:00 AM

BCEC - Meeting Level 1,
Room 160ABC

Nir Shoham-Hazon, MD; Rahul Pandit, MD, ABO
Robert J. Noecker, MD, MBA, ABO; David M. Lubeck, MD, ABO (Co-instructors)
STL-11 MIGS Part A
Planned techniques include: GATT, iTrack, KDB Glide and Micropulse

Full session details can be accessed via the ESCRS program:
https://ascrs.confex.com/ascrs/24am/meetingapp.cgi/Home/0

Nova Eye will provide additional peer-to-peer educational opportunities during the ASCRS 2024 Meeting at the Nova Eye Medical Exhibit #2109 (Hall A-C).

ABOUT NOVA EYE MEDICAL

Nova Eye Medical Limited is a medical technology company that develops, manufactures and sells a portfolio of proprietary ophthalmic treatment technologies and devices. Used by eye surgeons in more than 100 countries globally, these technologies include the iTrack™ portfolio of canaloplasty devices for the treatment of glaucoma. The Company also manufactures and sells the proprietary Molteno3® glaucoma drainage device for the treatment of severe or complex glaucoma. With its sales headquarters based in Fremont, California, Nova Eye Medical is supported by sales offices in Adelaide, Australia and Berlin, Germany, and a global network of more than 50 distribution partners. Manufacturing facilities are located in Fremont, California and Dunedin, New Zealand.

ABOUT CANALOPLASTY

First introduced in 2008, canaloplasty is a surgical treatment for glaucoma that targets the main sites of outflow resistance in the conventional outflow pathway: the trabecular

meshwork, Schlemm's canal, and the distal collector channels. Based on the same principles as angioplasty, a flexible microcatheter is cannulated 360 degrees around Schlemm's canal during the procedure to manually break and remove blockages. Next, viscoelastic fluid is injected into Schlemm's canal as the microcatheter is withdrawn to dilate the distal outflow system and to improve the function of the trabecular meshwork.

For additional information about canaloplasty and the new *iTrack™ Advance*, including safety information, please visit: https://itrack-advance.com

The iTrack™ Advance has a US Food and Drug Administration (FDA) 510(k) and CE Mark (Conformité Européenne) for the treatment of open angle glaucoma.

The iTrack™ Advance has been cleared for the indication of fluid infusion and aspiration during surgery. The iTrack™ Advance canaloplasty device has been cleated for the indication of catheterization and viscodilation of Schlemm's canal to reduce intraocular pressure in adult patients with open-angle glaucoma.

** Note: The iTrack™ and iTrack™ Advance are currently not indicated to perform canaloplasty in combination with GATT (Gonioscopy-Assisted Transluminal Trabeculotomy).*

*** Note: The iTrack™ and iTrack™ Advance are not currently indicated to perform canaloplasty in combination with other MIGS procedures, such as micro-trabecular bypass stent surgery.*

+ Note: The iTrack™ and iTrack™ Advance are not currently indicated for the reduction of IOP in cases of primary angle closure glaucoma.

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