

## Peer-Reviewed Real-World Evidence Supports iTrack™ Canaloplasty

### Highlights

- **First peer-reviewed manuscript from iTrack™ Registry published in the *American Journal of Ophthalmology***
- **Two hundred and fifty-four patients (344 eyes) who received canaloplasty surgery with iTrack™ and iTrack™ Advance with or without concurrent cataract surgery, followed for between 13 and 28 months in this prospective study**
- **Authors concluded that iTrack™ canaloplasty significantly reduced intraocular pressure (IOP) and medication burden with a favourable safety profile**

**Nova Eye Medical Limited (ASX: EYE)** (Nova Eye Medical or the Company) is pleased to announce the acceptance for publication of the first peer-reviewed article using data collected in the iTrack™ Registry.

Published in the [American Journal of Ophthalmology](#), the manuscript describes a prospective, multicentre, real-world study (**the Study**) investigating the role of canaloplasty in glaucoma treatment. Thirteen surgeons across fourteen clinical sites in the USA, Australia, Canada and Germany contributed to the Study.

The authors concluded that, in real-world clinical practice, iTrack canaloplasty significantly reduced IOP and medication burden, with a favourable safety profile, when performed alone or in combination with cataract surgery, across diverse glaucoma populations.

This is an important publication that will assist Nova Eye to:

- Drive broader surgical adoption of iTrack™ because it enables the identification of meaningful clinical trends and supports the development of evidence-based treatment protocols.
- Validate clinical outcomes and provide strong support for market access, payor engagement, surgeon education and training.

The study results are summarised below, and the full text is available at

[https://www.ajo.com/article/S0002-9394\(26\)00017-6/fulltext](https://www.ajo.com/article/S0002-9394(26)00017-6/fulltext)

Authorised for lodgement by the Board of Directors of Nova Eye Medical Limited.

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**ABOUT THE iTRACK™ REGISTRY**

Established in 2022, the iTrack™ Registry is an independently managed database into which surgeons contribute clinical data from their iTrack™ or iTrack™ Advance surgeries. It forms part of the International Glaucoma Surgery Registry (IGSR), the official registry partner of the European Glaucoma Society (EGS).

Currently, 20 surgeons from 20 sites around the world are contributing surgical cases to the iTrack™ Registry, and this number is growing. According to the latest statistical report for the iTrack™ Registry, released in January 2026, data on more than 600 eyes have been captured, 409 of which have reached 12-month follow-up or longer.

The data in the iTrack™ Registry is prospective.

**STUDY RESULTS**

Two hundred and fifty-four patients (344 eyes) were followed over a mean of  $20.5 \pm 7.9$  months at last follow-up (LFU). Following combined canaloplasty and phacoemulsification ( $n=313$  eyes), mean IOP and medication usage reduced from  $17.2 \pm 5.3$  mmHg and  $2.1 \pm 1.1$  preoperatively to  $14.1 \pm 3.9$  mmHg and  $1.3 \pm 1.4$  at LFU ( $p < 0.001$ ); 61.9% of all combined eyes achieved success per the American Academy of Ophthalmology's (AAO) Minimally Invasive Glaucoma Surgery (MIGS) Guidelines (increasing to 83% in eyes with baseline IOP  $> 18$  mmHg), while 43% of eyes became medication-free (versus 7% preoperatively). Standalone canaloplasty ( $n=24$  eyes) reduced IOP and medication usage from  $20.2 \pm 7.1$  mmHg and  $2.3 \pm 0.9$  to  $15.3 \pm 6.3$  mmHg and  $1.5 \pm 1.6$  ( $p < 0.01$ ); 35% of eyes achieved success, and 46% of eyes became medication-free (versus none preoperatively). IOP and medication reductions were significant across glaucoma subtypes (primary and secondary open-angle glaucoma, ocular hypertension) and severities ( $p < 0.01$  for all). The rate of additional glaucoma procedures was 4.9%, including laser procedures; no canaloplasty-related sight-threatening complications were reported. A loss of  $\geq 2$  lines of corrected distance visual acuity occurred in 7.3% of eyes, most commonly in association with pre-existing advanced disease or unrelated ocular comorbidities.

## 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 globally, these technologies include iTrack<sup>™</sup> Advance, a minimally invasive consumable glaucoma surgical device that restores the eye's natural outflow pathway to lower pressure inside the eye and to eliminate patient reliance on anti-glaucoma medications for mild-moderate glaucoma. The Molteno3<sup>®</sup> glaucoma drainage device platform is designed to enhance surgical utility and optimize clinical outcomes for long-term IOP control in cases of severe glaucoma. It also offers the benefit of a simplified and faster surgical procedure. With its sales headquarters based in Fremont, California, Nova Eye Medical is supported by a global network of distribution partners. Manufacturing facilities are located in Fremont, California and Dunedin, New Zealand.

For additional information about Nova Eye Medical and its technologies, please visit: [www.nova-eye.com](http://www.nova-eye.com)