iTrack™ Canaloplasty to be Featured at the 2025 American Society of Cataract and Refractive Surgery (ASCRS) Annual Meeting

California, USA, April 9, 2025 – 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 numerous presentations and posters during the official scientific program of the 2025 American Society of Cataract and Refractive Surgery (ASCRS) Annual Meeting, taking place in Los Angeles, CA, April 25 – 28, 2025.

This year's ASCRS meeting will spotlight the innovative *iTrack*™ and *iTrack*™ *Advance* canaloplasty technology through a comprehensive line-up: 9 podium presentations, 8 e-Posters and 2 films, totalling an impressive twenty-one contributions from distinguished professionals in the field. These presentations will offer in-depth insights into clinical outcomes and the broad spectrum of clinical applications for *iTrack*™ canaloplasty.

A summary of the ASCRS 2025 presentations and posters featuring the iTrack™ and the iTrack™ Advance is included below:

Podium Presentations:

Saturday, April 26, 2025

David M. Lubeck, MD, ABO
24-Month Results of Itrack Global Data Registry to Support the Role of Canaloplasty for Treatment of Glaucoma
1:35 PM - 1:40 PM
LACC - Meeting Room Level, 512

Ahmad A. Aref, MD, MBA, ABO
Factors to Prediction of Success of 20% Intraocular Pressure Reduction in Glaucoma Eyes Undergoing Ab-Interno Canaloplasty
1:40 PM - 1:45 PM
LACC - Meeting Room Level, 512

Justin M Spaulding, DO
Medication Burden in 3+ Meds Glaucoma Eyes Following Canaloplasty via an Ab-Interno Technique Combined with Phacoemulsification
1:50 PM - 1:55 PM
LACC - Meeting Room Level, 512

Mary Qiu, MD, ABO
Clinical Outcomes and Safety Profile of Standalone Canaloplasty versus Canaloplasty Combined with Cataract Surgery Using Itrack Microcatheter
2:05 PM - 2:10 PM
LACC - Meeting Room Level, 512

Mahmoud A. Khaimi, MD
Ab-Interno Canaloplasty Standalone Versus Combined with Cataract Surgery – 36-Month Outcomes in +1000 Eyes
2:15 PM - 2:20 PM
LACC - Meeting Room Level, 512

Shivani S. Kamat, MD, ABO
Canaloplasty Performed with the iTrack Microcatheter to Reduce IOP in Uncontrolled Glaucoma Eyes
2:50 PM - 2:55 PM
LACC - Meeting Room Level, 512

Matthew S Porter, MD, ABO
Efficacy and Safety of Cataract Surgery Combined with Canaloplasty and Micro-Trabecular Bypass Stent Surgery in Open Angle Glaucoma
3:45 PM - 3:50 PM
LACC - Meeting Room Level, 504

Sunday, April 27, 2025

Dr. Nir Shoham-Hazon, MD
Safety and Efficacy of Ab-Interno Canaloplasty (ABiC) Using the iTrack in Angle Closure Glaucoma: 12-Month Results
3:50 PM - 3:55 PM
LACC - Meeting Room Level, 513

Shamil Patel, MD
Canaloplasty Effectiveness Correlated with Viscoelastic Volume Delivered in Schlemm's Canal
4:05 PM - 4:10 PM
LACC - Meeting Room Level, 513

Posters:

Mark J. Gallardo, MD; Mahmoud A. Khaimi, MD
Standalone Ab-Interno Canaloplasty in Severe Uncontrolled Glaucoma Eyes: A Case Series: 36 Month Results

Mark J. Gallardo, MD
60-Month Efficacy of Ab-Interno Canaloplasty for the Treatment of Open-Angle Glaucoma

Liam Redden, BSc, MD, COT; Kamran M. Riaz, MD, ABO; Mahmoud A. Khaimi, MD
Efficacy and Safety of Ab-Interno Canaloplasty in Post-Keratoplasty Patients: 3-Year Results

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

Mark J. Gallardo, MD
Long-Term Outcomes: Gonioscopy-Assisted Transluminal Trabeculotomy for Secondary Open-Angle Glaucoma Associated with Intravitreal Injections

James T Murphy III, MD, ABO
Efficacy and Safety of Ab-Interno Canaloplasty with and without GATT in Glaucoma: 5-Year Outcomes

Mahmoud A. Khaimi, MD
Ab-Interno Canaloplasty in Primary Angle-Closure Spectrum

Mahmoud A. Khaimi, MD
Investigating the Consistency in Outcomes of Ab-Interno Canaloplasty as a Standalone Procedure

Films:

Inder P. Singh, MD
Pressurized Viscodilation in Action: 360-Degree Fluid Wave and Blanching of the Episcleral Venous System and Following Canaloplasty
11:00 PM - 11:20 PM
LACC

Mary Qiu, MD, ABO
Ab-Interno Canaloplasty Combined with Phacoemulsification: Minimally Invasive Surgical Management of Concomitant Glaucoma and Cataract
Time: 11:20 PM - 11:40 PM
LACC

Full session details can be accessed via the ASCRS program.

All educational content of the ASCRS Annual Meeting is planned by its Program Committee. The ASCRS do not endorse, promote, approve, or recommend the use of any products, devices, or services.

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.

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

Indications for Use, US: The Nova Eye iTrack™ Advance is indicated for fluid infusion or aspiration during surgery. The Nova Eye iTrack™ Advance is indicated for the cutting or disruption of the trabecular meshwork during goniotomy procedures. The Nova Eye iTrack™ Advance is indicated for catheterization and viscodilation of Schlemm's canal to reduce intraocular pressure in adult patients with open-angle glaucoma.*

** The iTrack™ Advance cutting function (goniotomy) is a Class 1 510(k) exempt device function that is not specifically indicated for the reduction of intraocular pressure (IOP) or the treatment of open-angle glaucoma.*

Indications for Use, International: The Nova Eye iTrack™ Advance is indicated for fluid infusion or aspiration during surgery. The Nova Eye iTrack™ Advance is indicated for catheterization and viscodilation of Schlemm's canal to reduce intraocular pressure in adult patients with open-angle glaucoma.

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

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