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ASX Release

Oventus signs two further 'Lab in Lab' agreements across 9 additional sites

Key highlights:

- New contracts for provision of the Oventus Sleep Treatment Platform executed with:
 - Tri Hospital Sleep in Ontario, which will offer treatment at 1 site with minimum quantities of 20 devices per month, once fully operational
 - Ontario Sleep Care, which will offer treatment at 8 sites with minimum quantities of 10 devices per month once fully operational.
- Each site will offer O2Vent Optima and ExVent™ Obstructive Sleep Apnea treatment an alternative for CPAP-intolerant individuals

Brisbane, Australia 27 July 2020: Obstructive Sleep Apnea (**OSA**) treatment innovator, Oventus Medical Ltd (ASX: OVN) is pleased to announce that it has signed 'Lab in Lab' ('LIL') agreements across 9 sites with two new sleep groups, Tri Hospital Sleep and Ontario Sleep Care, both located in Canada.

Under these agreements, Oventus technology will be offered to patients of the 9 sites.

Dr Chris Hart, founder and CEO of Oventus commented, "These businesses have been delivering high quality respiratory care for many years, even decades. Oventus is proud that such well-respected sleep groups in North America have chosen to strengthen their existing sleep offering by adopting our treatment platform.

As COVID-19 restrictions start to lift, we expect to see patient flow slowly increasing across our existing sites and the new sites we have been working hard through the recent shutdowns to bring online."

Tri Hospital Sleep agreement

Tri Hospital Sleep in Ontario is one of Mississauga's largest privately-owned providers of diagnostics and treatment for OSA. Under the agreement, 'LIL' facilities will be implemented in its largest location with 14 beds of sleep diagnostics.

Tri Hospital Medical Director Dr. Mohamad Hussain commented, "We are excited to bring a dental-sleep collaborative care model into our Sleep Center. This is something we have been thinking about for quite some time. We realize CPAP isn't for everyone and now we can provide our patients with the option to use an Oral Appliance."

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The agreement has a term of three years, with an automatic three-year renewal, unless a party elects not to renew no later than 180 days prior to the end of the third year. Oventus expects to see the 'LIL' program deployed in August with minimum monthly quotas, in line with other agreements, at 20 devices per month once fully operational.

Ontario Sleep Care agreement

Ontario Sleep Care is a large, privately-owned provider of treatment for OSA with 8 locations across the province of Ontario, Canada. The agreement provides Oventus' O2Vent Optima and ExVent therapy across the network of sites as an alternative for CPAP-intolerant individuals. Patients will also be referred to the 8 sites from satellite locations.

Scott Reynolds, Director of Operations for Ontario Sleep Care, commented, "The Oventus offering will enable us to provide a valued option for patients to treat their apnea and will allow us to overcome treatment objections due to CPAP masks."

Once fully deployed, each Ontario Sleep Care location expects to order 10 O2Vent Optima devices per month. The agreement has a term of three years, with an automatic three-year renewal, unless a party elects not to renew no later than 180 days prior to the end of the third year.

-ENDS-

For further information, please visit our website at www.o2vent.com or contact the individuals outlined below.

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About Oventus – see more at <u>www.o2vent.com</u>

Oventus is a Brisbane-based medical device company that is commercialising a unique treatment platform for sleep apnea and snoring. The Company has a collaborative Sleep Physician/ Dental strategy that streamlines patients' access to treatment. The Oventus lab model incorporates digital technology via intra oral scanning to achieve operational efficiencies, accuracy and ultimately patient outcomes.

Unlike other oral appliances, Oventus O2Vent devices manage the entire upper airway via a unique and patented built-in airway. O2Vent devices allow for airflow to the back of the mouth while maintaining an oral seal and stable jaw position, bypassing multiple obstructions from the nose, soft palate and tongue. The devices reduce airway collapsibility and manage mouth breathing while keeping the airway stable.

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O2Vent devices are designed for any patient that is deemed appropriate for oral appliance therapy, but especially beneficial for the many people that suffer with nasal congestion, obstruction and mouth breathing. The O2Vent allows nasal breathing when the nose is unobstructed, but when obstruction is present, breathing is supplemented via the airway integrated in the appliance.

The ExVent™ is a valve accessory that fits into the open airway of the O2Vent Optima device, to augment traditional oral appliance therapy by stabilizing the airway. The ExVent valve contains air vents that open fully on inhalation for unobstructed airflow. The valve closes on exhalation, directing the air through the vents, creating the mild resistance or airway support required to keep the airway stable (known as PEEP, positive end expiratory pressure).

According to a report published by the Sleep Health Foundation Australia, an estimated 1.5 million Australians suffer with sleep disorders and more than half of these suffer with obstructive sleep apnea¹.

Continuous positive airway pressure (CPAP) is the most definitive medical therapy for obstructive sleep apnea, however many patients have difficulty tolerating CPAP². Oral appliances have emerged as an alternative to CPAP for obstructive sleep apnea treatment³. The O2Vent Optima and ExVent provide a discreet and comfortable alternative to CPAP for the treatment of OSA.

¹ Deloitte Access Economics. Reawakening Australia: the economic cost of sleep disorders in Australia, 2010. Canberra, Australia.

² Beecroft, et al. Oral continuous positive airway pressure for sleep apnea; effectiveness, patient preference, and adherence. Chest 124:2200–2208, 2003

³ Sutherland et al. Oral appliance treatment for obstructive sleep apnea: An updated Journal of Clinical Sleep Medicine. February 2014.