



SAVE AND IMPROVE PATIENTS' LIVES
WITH DISRUPTIVE PROSTHESES

INITIAL PUBLIC OFFERING PROJECT
ON EURONEXT PARIS REGULATED MARKET

Disclaimer

IMPORTANT NOTICE - YOU MUST READ THE FOLLOWING BEFORE CONTINUING

The following applies to this document, the oral presentation of the information in this document by Affluent Medical (the "Company") or any person on behalf of the Company and any question-and-answer session that follows the oral presentation (collectively, the "Information"). This document has been prepared by the Company and certain affiliated companies (together, the "Group").

By attending the meeting where this presentation is made, or by reading this document, you further agree to be bound by the following limitations and qualifications. Failure to comply with these may constitute a violation of applicable securities laws.

The Information is delivered to you on the basis of your compliance with the legal and regulatory obligations to which you are subject.

The Information is made available regarding a potential initial public offering of the Company (the "Proposed Transaction"). The Information, including this presentation and its contents, has not been verified by Swisslife Banque Privée and Invest Securities (the "Banks"), or any of their affiliates, shareholders, directors, officers, advisers, employees and representatives or otherwise independently verified.

This presentation is a promotional communication and does not constitute an offer or a solicitation of an offer to sell or subscribe for securities requiring a prospectus within the meaning of the Prospectus Regulation No. 2017/1129 of the European Parliament and of the Board Council of 14 June 2017, as amended (the "Prospectus Regulation"), also forming part of the domestic law in the United Kingdom by virtue of the European Union (Withdrawal) Act 2018 (the "EUWA").

Participants should read the prospectus prepared by the Company and approved by the Autorité des Marchés Financiers ("AMF") under number 21-177 on 26 May 2021, which includes the document d'enregistrement of the Company filed with the Autorité des Marchés Financiers ("AMF") under n°1.21-007 on 12 April 2021 (the "Document d'enregistrement"), the supplement to the Document d'enregistrement filed with the AMF under n°1.21-025 on 26 May 2021 and a securities note, which is available on the AMF's website at www.amf-france.org and on the Company's website at www.affluentmedical.com. The Document d'enregistrement presents a detailed description of the Company, its business, strategy, financial condition, results of operation and risk factors. Subscription of any shares of the Company in the context of the Proposed Transaction may only be made on the basis of a prospectus approved by the AMF.

All material contained in the Information presented is for information purposes only and must not be relied upon for any purpose, and does not purport to be a full or complete description of the Group. This document does not, and is not intended to, constitute or form part of, and should not be construed as, an offer to sell, or a solicitation of an offer to purchase, subscribe for or otherwise acquire, any securities of the Group, nor shall it or any part of it form the basis of or be relied upon in connection with or act as any inducement or recommendation to enter into any contract or commitment or investment decision or other transaction whatsoever.

No representation, warranty or undertaking, express or implied, is made by any Company, the Banks, their affiliates or any of their officers, directors, employees, agents or advisers as to, and no reliance should be placed on, the fairness, accuracy, completeness or correctness of the Information contained herein, for any purpose whatsoever. No responsibility, obligation or liability is or will be accepted by the Company, the Banks, their affiliates or any of their officers, directors, employees, agents or advisers, in relation to any Information provided in this document or in connection with the document. All Information is subject to verification, correction, completion, updating and change without notice. None of the Company, the Banks, their affiliates or any of their officers, directors, employees, agents or advisers undertake any obligation to update the Information or to correct any inaccuracies in any such Information.

Information contained in this document may be based on estimates or expectations of the Group, and there can be no assurance that these estimates or expectations are or will prove to be accurate. Where any information and statistics are quoted from any external source,

such information or statistics should not be interpreted as having been adopted or endorsed by any of the Company, the Banks, their affiliates or any of their officers, directors, employees, agents or advisers as being accurate. All statements in this report attributable to third party industry experts represent the Group's interpretation of data, research opinion or viewpoints published by such industry experts, and have not been reviewed by them. Each publication of such industry experts speaks as of its original publication date and not as of the date of this document and is included herein for information purposes only.

Financial information included in this document may be financial information that is not calculated in accordance with IFRS, any other internationally accepted accounting principles, or French generally accepted accounting principles ("Alternative Performance Measures"). Such Alternative Performance Measures should not be considered as alternatives or substitutes for data from the Group's consolidated statement of total comprehensive income, consolidated cash flow statement or consolidated balance sheet prepared in accordance with IFRS, any other internationally accepted accounting principles, or French generally accepted accounting principles, or as measures of profitability or liquidity. The Alternative Performance Measures do not necessarily indicate whether cash flows will be sufficient for the Group's cash requirements and may not be indicative of its future results. Furthermore, the Alternative Performance Measures are not recognized under IFRS, any other internationally accepted accounting principles, or French generally accepted accounting principles, should not be considered as substitutes for an analysis of the Group's operating results prepared in accordance with IFRS, any other internationally accepted accounting principles, or French generally accepted accounting principles, and may not be comparable to similarly titled information published by other companies. Alternative Performance Measures have not been independently reviewed or verified by the Company's auditors or by the Banks.

This document contains forward-looking statements relating to the business, financial performance and results of the Group or the industry in which the Group operates. These statements may be identified by words such as "expectation", "belief", "estimate", "plan", "target" or "forecast" and similar expressions, or by their context. Forward-looking statements include statements regarding: strategies, outlook and growth prospects; future plans and potential for future growth; growth for products and services in new markets; industry trends; and the impact of legislative and/or regulatory initiatives. These statements are made on the basis of current knowledge and assumptions and involve risks and uncertainties. Various factors could cause actual future results, performance or events to differ materially from those described in these statements, and none of the Company, the Banks, their affiliates nor any of their officers, directors, employees, agents or advisers accepts any responsibility for the accuracy of the opinions expressed in this document or the underlying assumptions. No obligation is assumed to update any forward-looking statements that may be presented in this document to reflect new information, future events or for any other reason and any opinion expressed in this presentation is subject to change without notice.

The Information does not constitute a recommendation regarding the Proposed Transaction and does not purport to contain all information that may be required to evaluate the Proposed Transaction. The merit and suitability of an investment in the Company should be independently evaluated and any person considering such an investment in the Company is advised to obtain independent advice as to the legal, tax, accounting, financial, credit and other related advice prior to making an investment. Investors should not subscribe for or purchase any securities of the Company except on the basis of information in the final form prospectus published by the Company and approved by the AMF. In accepting the Information the recipient acknowledges that it makes all trading and investment decisions in reliance on its own judgment and not in reliance on any of the Company, the Banks, their affiliates, shareholders, directors, officers, advisers, employees or representatives.

The Banks are acting solely for the Company in connection with the Proposed Transaction and no one else. It will not regard any other person (whether or not a recipient of the Information) as a client in relation to the Proposed Transaction and, accordingly, will not be responsible to any other person for providing the protections afforded to their respective

clients, or for advising any such person in relation to the contents of the Information or in connection with the Proposed Transaction.

The Information does not constitute or form part of a prospectus or any offer or invitation for the sale or issue of, or any offer or inducement to purchase or subscribe for, or any solicitation of any offer to purchase or subscribe for any shares or other securities in the Company in France, the United Kingdom, the United States or any other jurisdiction. It does not constitute any form of commitment on the part of the Company or any other person. Neither the Information nor any other written or oral information made available to any recipient or its advisers will form the basis of any contract or commitment whatsoever. In particular, in furnishing the Information, the Company, the Banks, their affiliates, shareholders, directors, officers, advisers employees or representatives undertake no obligation to provide the recipient with access to any additional information.

This document is not directed at, or intended for distribution to or use by, any person or entity that is a citizen or resident or located in any locality, state, country or other jurisdiction where such distribution, publication, availability or use would be contrary to law or regulation or which would require any registration or licensing within such jurisdiction. Persons into whose possession this document comes should inform themselves about, and observe, any such restrictions.

In the European Economic Area ("EEA") the Information is only addressed to and directed at persons in member states who are "qualified investors" within the meaning of Article 2(e) of the Prospectus Regulation (Regulation (EU) 2017/1129) ("Qualified Investors").

Within the United Kingdom, the Information is intended for distribution only to persons who are Qualified Investors who (i) have professional experience in matters relating to investments falling within Article 19(5) of the Financial Services and Markets Act 2000 (Financial Promotion) Order 2005, as amended (the "Order") or (ii) are persons falling within Article 49(2)(a) to (d) ("high net worth companies, unincorporated associations, etc.") of the Order or (iii) are persons to whom it may otherwise lawfully be communicated (all such persons together being referred to as "relevant persons") and in such a case the Information must not be viewed, accessed, acted on or relied on in the United Kingdom, by persons who are not relevant persons and any investment or investment activity to which the Information relates is available only to relevant persons and will be engaged in only with relevant persons. The Information is an advertisement and is not a prospectus for the purposes of the Prospectus Rules of the Financial Conduct Authority (the "FCA") and the Information has not been approved by the FCA.

Securities may not be offered, subscribed or sold in the United States absent registration under the U.S. Securities Act of 1933, as amended (the "U.S. Securities Act"), except pursuant to an exemption from, or in a transaction not subject to, the registration requirements thereof and in compliance with the relevant state securities law. The securities of the Company have not been and will not be registered under the U.S. Securities Act and the Company does not intend to make a public offer of its securities in the United States. Neither this document nor any copy of it may be taken or transmitted into, directly or indirectly, into the United States as that term is defined in the U.S. Securities Act.

Neither this document nor any copy of it may be taken or transmitted into Australia, Canada or Japan or to any person in any of those jurisdictions.



Michel Finance

CEO

Selected previous experience



Jérôme Geoffroy

CFO

Selected previous experience





Affluent Medical at glance

2011

Founded

~50

Employees



Kardiozis



Technology

€10bn

Addressable markets by 2027⁽¹⁾

31

Patent families



IMPLANTS FOR LIFE

ARTUS

First moderate to severe incontinence device with remote control

Urology

CE

Q4 2023

EPYGN

Next generation mitral valve replicating the human physiology

CE

H2 2025

KALIOS

Only mitral ring that can be adjusted multiple times

CE

Q4 2022

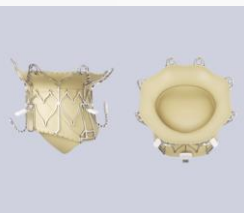
Structural heart

€65m

Invested to date

2023

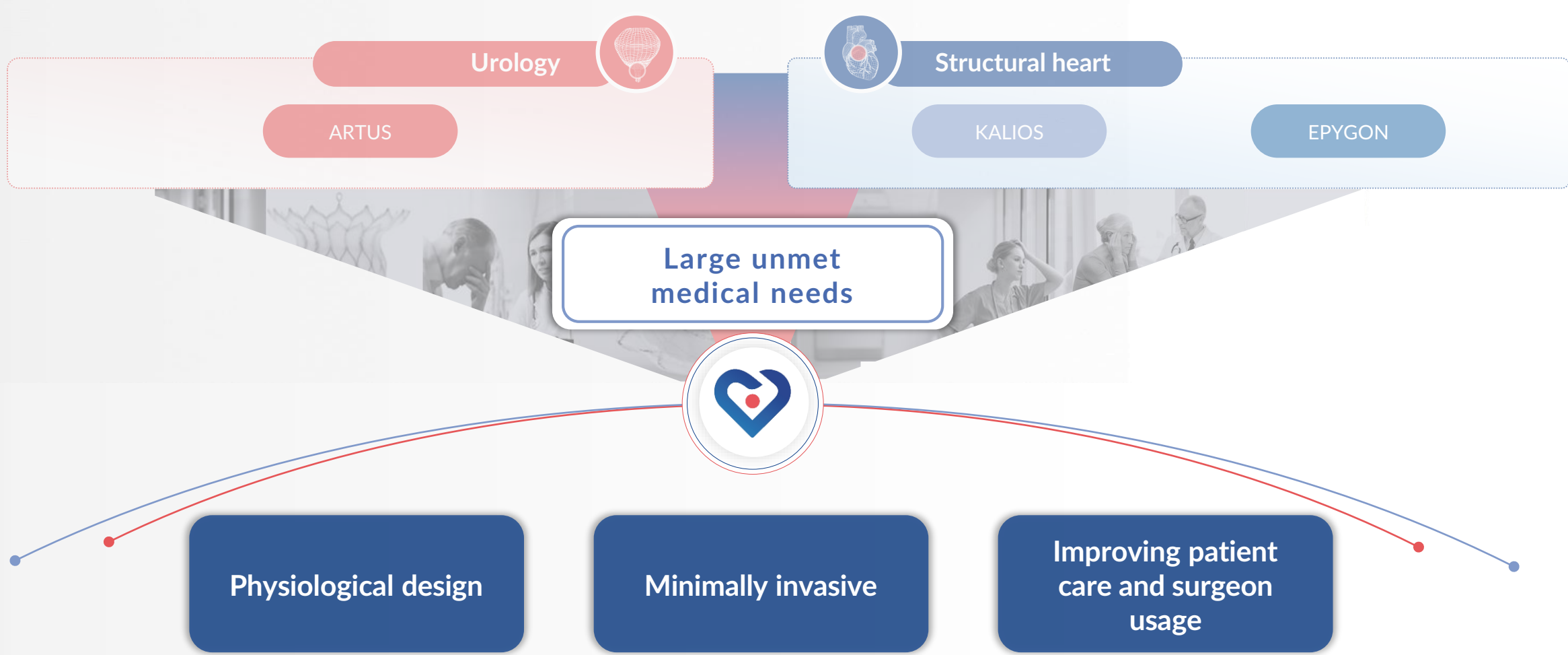
First revenue⁽²⁾



Notes: (1) Addressable markets calculated as the sum of the markets addressed by ARTUS (in 2027), EPYGN and KALIOS (in 2027) and KARDIOZIS (in 2023)
(2) Subject to the impact of COVID pandemic and regulatory developments and obtaining financing (IPO and additional financing if necessary)



Our mission: save and improve patients' lives with a range of disruptive prostheses



Source(s): (1) Irwin DE, Milsom I, Hunskaar S, et al. Population-based survey of urinary incontinence, overactive bladder, and other lower urinary tract symptoms in five countries: results of the EPIC study; (2) World Health Organization



Key strengths



- 1 Addressing **large and fast growing markets** with critical unmet needs
- 2 **Unique disruptive prostheses** to improve patients' lives and surgeon care
- 3 **Solid IP portfolio** endorsed by respected leaders in the medical community
- 4 Fully engaged in clinical studies and **clear market access strategy to drive growth**
- 5 **Well-respected** management team, **world-class** board of Directors and Scientific board and a **historical cornerstone** shareholder



DISRUPTIVE PROSTHESES **ADDRESSING UNMET NEEDS**

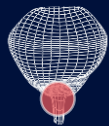


UROLOGY

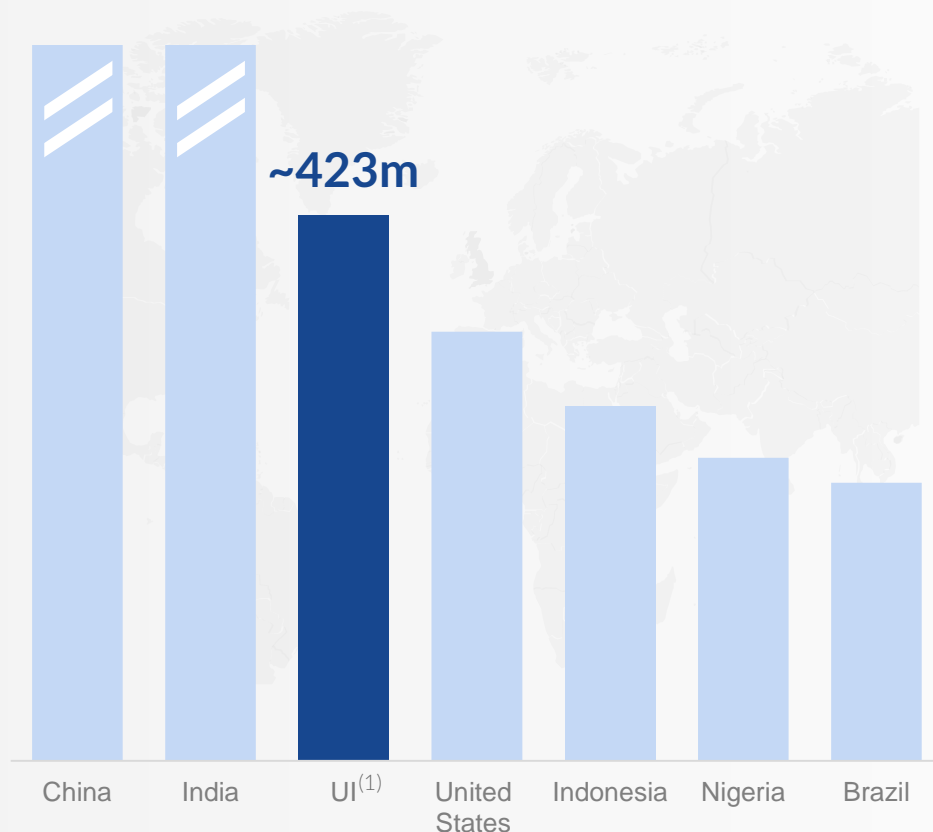
ARTUS

First moderate to severe incontinence device with remote control

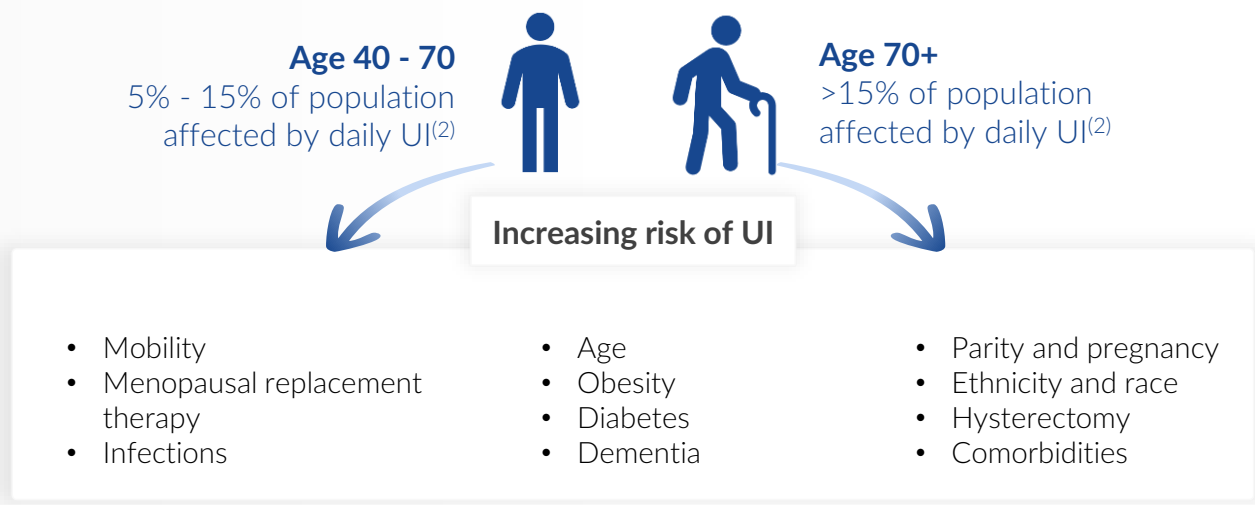




If urinary incontinence was a country, it would be the 3rd largest in the world



Prevalence of urinary incontinence

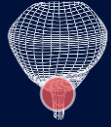


Not correctly treated because of...

 Misinterpretation of symptoms	 Misbelieves	 Unawareness	 Shame
-----------------------------------	-----------------	-----------------	-----------



Source(s): (1) Irwin et al. Worldwide prevalence estimates of lower urinary tract symptoms, overactive bladder, urinary incontinence and bladder outlet obstruction; (2) Milsom I. « How big is the problem? Incontinence in numbers », Gothenburg Continence Research Center



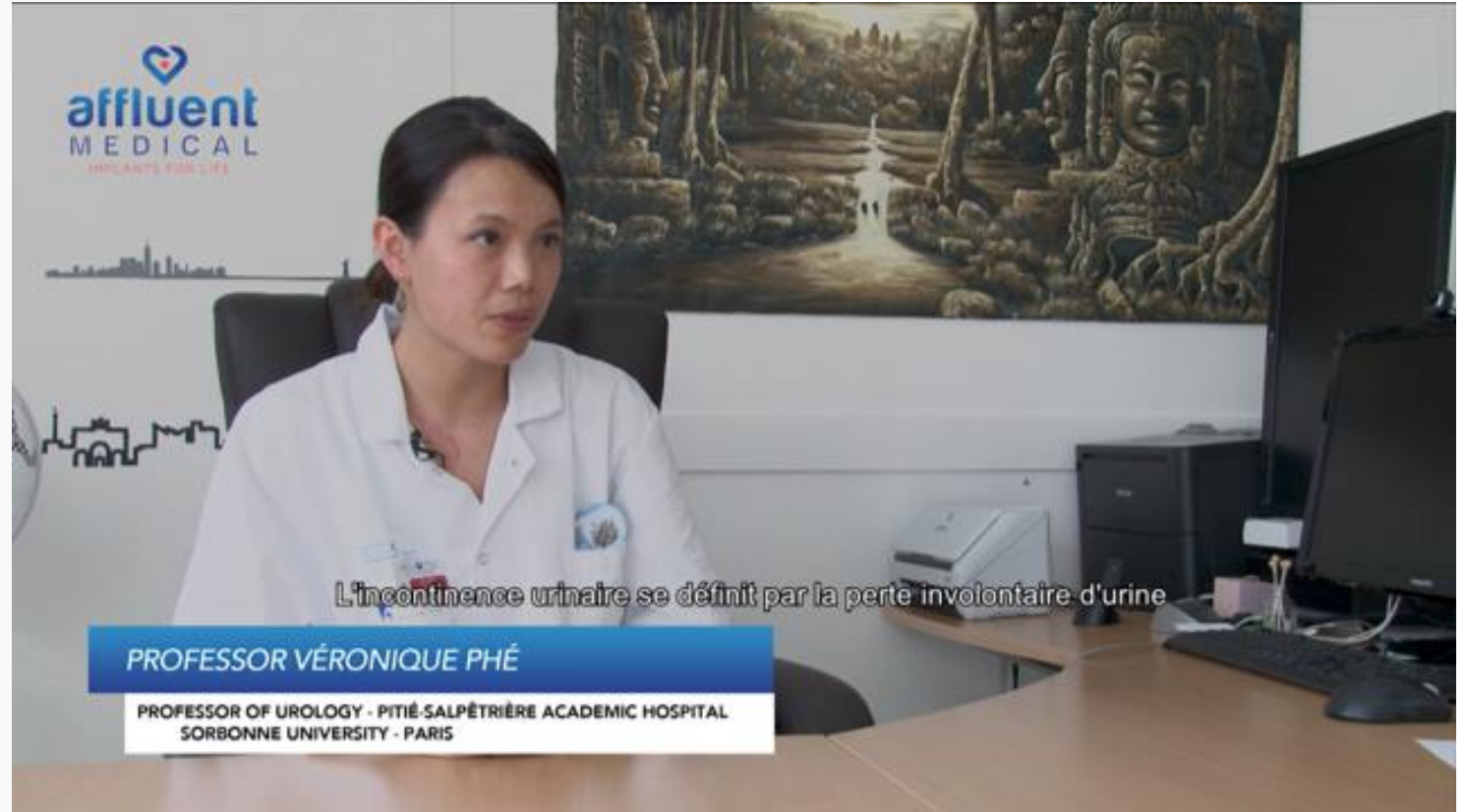
UROLOGY

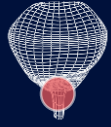
Endorsement from Professor Véronique Phé, Urologist



PROFESSOR VÉRONIQUE PHÉ

**PROFESSOR OF UROLOGY,
PITIÉ-SALPÊTRIÈRE, PARIS**





Over 423m people⁽¹⁾ suffers from urinary incontinence⁽²⁾



We focus on **moderate to severe urinary incontinence**, which affects **107m people⁽³⁾** / 25% of the population suffering from UI

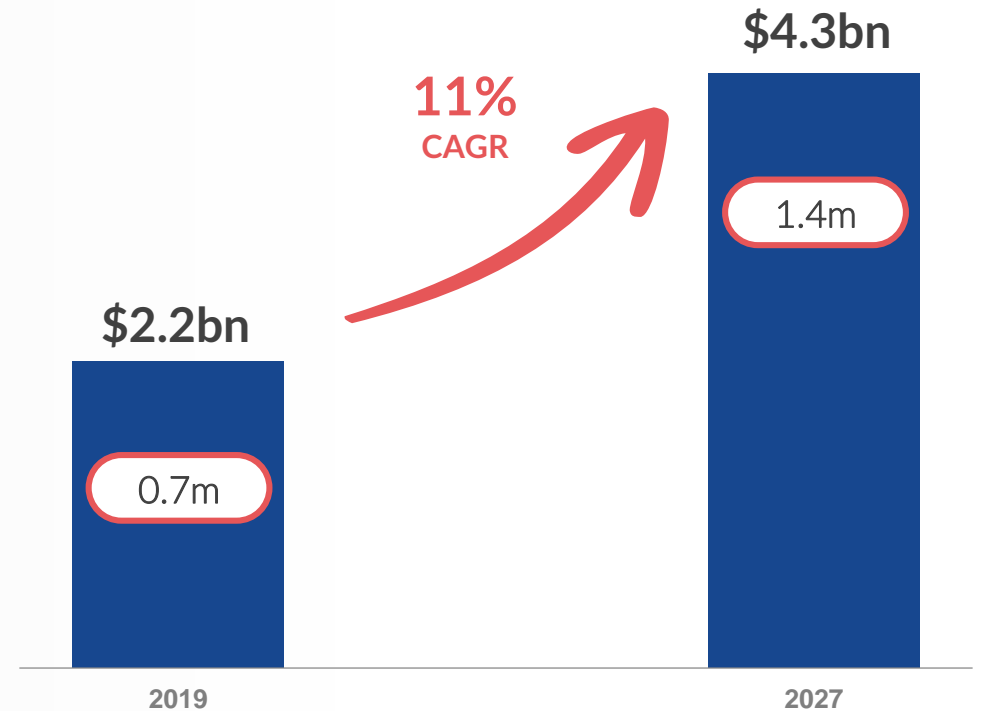


Only one main artificial sphincter device available (launched in 1987) provides opportunity for **unique competitive positioning**



Strong M&A activity since 2015⁽⁴⁾

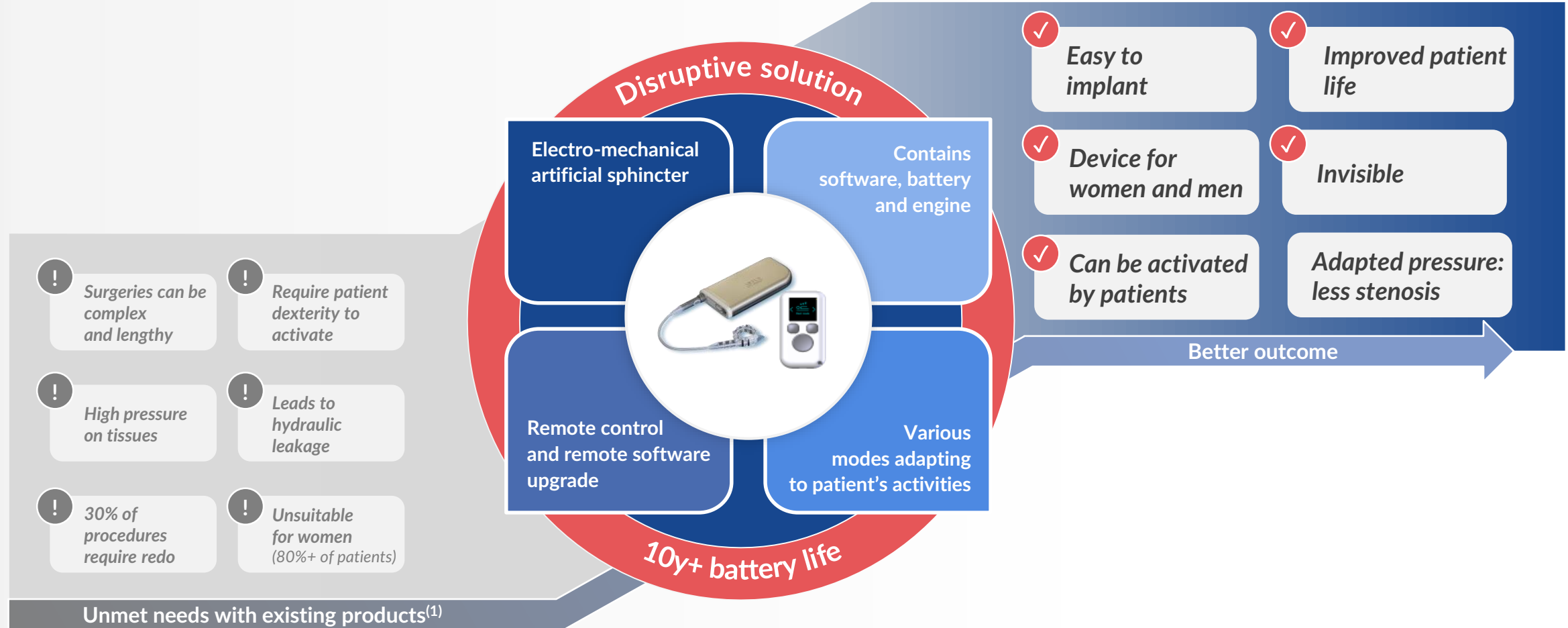
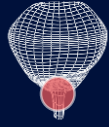
Global urinary incontinence device market⁽⁵⁾



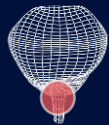
Number of urinary incontinence procedures⁽⁶⁾



Sources: (1) Irwin et al. Worldwide prevalence estimates of lower urinary tract symptoms, overactive bladder, urinary incontinence and bladder outlet obstruction (2) Milsom I. « How big is the problem? Incontinence in numbers », Gothenburg Continence Research Center; (3) Company estimates based on New Artificial Urinary Sphincter Devices in the Treatment of Male Iatrogenic Incontinence, and Severity of Urinary Incontinence and Effect on Quality of Life in Women, by Incontinence Type in the world; (4) Urinary incontinence related deals based on publicly available information on MergerMarket; (5) Urinary Incontinence(UI) Devices (Optima Insights, September 2020); (6) ISS AG, 2020; Allied Market Research. Global Urinary Incontinence Devices Market, Opportunity Analysis and Industry Forecast, 2017-2023, 201



Source(s): (1) Based on X. Biardeau, S. Aharony, The AUS Consensus Group, L. Campeau and J. Corcos (Department of Urology, Jewish General Hospital, McGill University, Montreal, Québec, Canada) - Artificial Urinary Sphincter : Report of the 2015 Consensus Conference - Neurourology and Urodynamics 35:S8-S24 (2016)



ARTUS Procedure overview

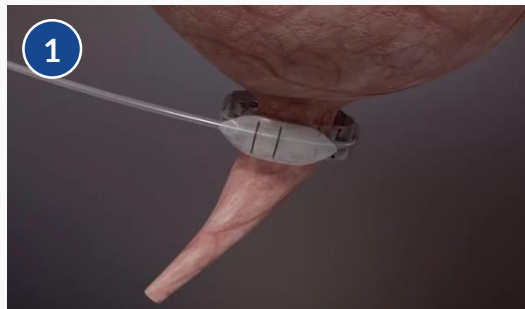
Minimally invasive prosthesis and procedure known by surgeons

Reduction of hospitalisation time

Easy to implant by surgeons



30 min. procedure



The adjustable cuff is positioned around the bladder neck and locked



The cuff is connected to the remotely-controlled actuator which drives opening and closing of the cuff



The cuff is customized for each patient
Voiding is achieved by pressing a button on the remote control

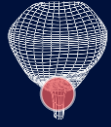
Customised

3 modes

Emergency

Link to video : <https://www.youtube.com/watch?v=2A9uvvuxJFE>





UROLOGY

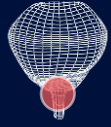
Endorsement from Professor Nicolas Barry Delongchamps, Urologist



**PROFESSOR NICOLAS BARRY
DELONGCHAMPS**

**PROFESSOR OF UROLOGY,
COCHIN HOSPITAL, PARIS**





Q4 2023⁽¹⁾

Q4 2024⁽¹⁾

2024⁽¹⁾

✓✓✓

✓✓✓

✓

✓✓

✓

Price: €8,000 - €10,000⁽²⁾

Product offering	Electronic artificial urinary sphincter	ZSI 375	AMS 800™
CE Approval	✗	✓	✓
FDA Approval	✗	✗	✓
Launch date	-	-	1987
User friendly	✓	✗	✗
Efficiency	-	-	✓
Targets men and women	✓	✗	✗
Surgery type	-	✓	✓
Remote control	-	✗	✗



Notes: Based on management assessment and on publicly available information; Excludes Implantica (Urocontrol) due to a lack of publicly available information on clinical progress or technical characteristics

(1) Expected date - subject to the impact of COVID pandemic and regulatory developments and obtaining financing (IPO and additional financing if necessary)

(2) Average sale price

DISRUPTIVE PROSTHESES **ADDRESSING UNMET NEEDS**



STRUCTURAL HEART

KALIOS

Mitral valve repair

EPYGON

Mitral valve replacement



affluent
MEDICAL
IMPLANTS FOR LIFE



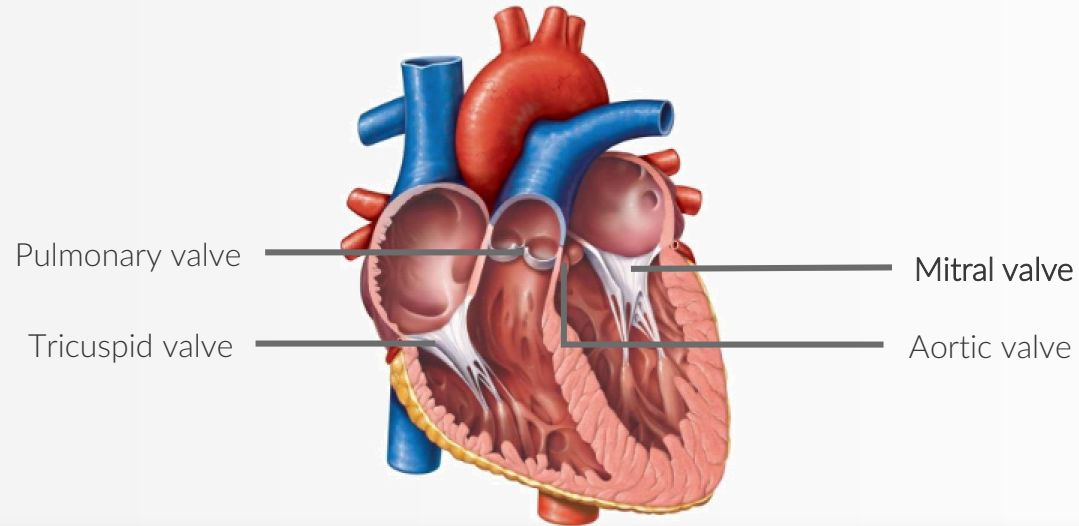
STRUCTURAL
HEART

KALIOS

EPYGN

Two ways of treating mitral insufficiency

Anatomy of the heart and heart valves



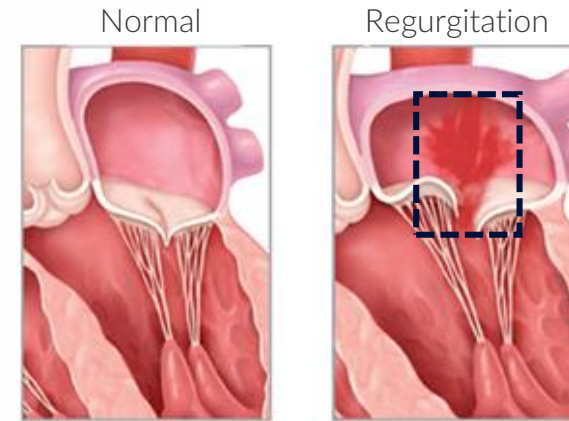
These valves can be damaged in several ways:

- do not open sufficiently and prevent blood flow (stenosis): **46%** of cases⁽¹⁾
- do not close properly (regurgitation): **>12%** of cases
- both types of dysfunction: **42%** of cases⁽²⁾



Insufficiency of the left ventricle leads to **heart failure**

Mitral regurgitation occurs when the mitral valve no longer closes properly



~2% of whole population affected by mitral regurgitation⁽³⁾



Age 75+

>12% of population affected by mitral regurgitation⁽⁴⁾

2 OPTIONS TO TREAT MITRAL REGURGITATION (MR)

1

Repair

2

Replacement



Sources: (1) Institut Mutualiste Montsouris – Pr François Laborde; (2) World Health Organization – Health topics – Cardiovascular diseases – Overview; (3) S. Douedi – H. Douedi – Août 2020 « Mitral Regurgitation » (Global data); (4) Vuyisile T Nkomo, Julius M Gardin, Thomas N Skelton, John S Gottdiener, Christopher G Scott, Maurice Enriquez-Sarano : Burden of valvular heart diseases: a population-based study (Global data)



STRUCTURAL
HEART

KALIOS

EPYGON

Addressing the mitral valve market with complementary solutions



Cardiovascular diseases are the **number one cause of death globally**, taking an estimated **17.9 million lives each year**⁽¹⁾



Mitral regurgitation affects **over 2% of the total population** and has a prevalence that increases with age⁽²⁾



Unmet needs as only **4% of the 4 million patients** who suffer from **severe mitral regurgitation** undergo surgery⁽³⁾



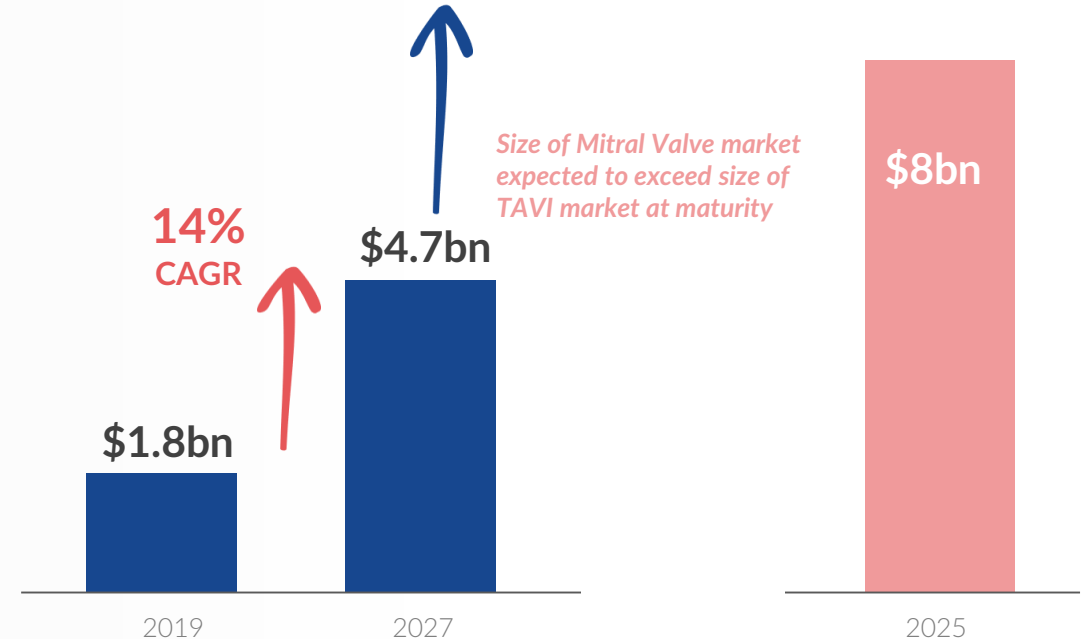
Strong M&A activity with more than **€2bn** invested since 2015⁽⁴⁾

Global Transcatheter Mitral Valve Repair and Implantation⁽⁵⁾ market

Global TAVI⁽⁶⁾ market

■ Transcatheter Mitral Valve implantation market

■ Transcatheter Aortic Valve implantation market



Sources: (1) World Health Organization; (2) Steven Douedi, Hani Douedi (August 2020); (3) Company estimates; (4) Mitral valve related deals based on publicly available information on MergerMarket (10 transactions in US, Canada, Israel and Europe); (5) Transcatheter Mitral Valve Implantation Market Size (Emergen Research, September 2020) (Global data); (6) Global Transcatheter Aortic Valve Implantation (TAVI) Market (Allied Market Research, June 2018) (Global data)



Mitral valve repair



Rarely adjustable during surgery



Non-adjustable post surgery



Result in invasive redo surgery



Lengthy surgical procedure



Residual and recurrent regurgitation in 40% of repairs

Unmet needs with existing products⁽¹⁾

Disruptive solution

Adjustable shape through 3-ballon catheter

Minimally invasive



Widely performed surgical procedure

Post-operative transcatheter adjustment



Better immediate surgical results



Transcatheter adjustment on beating heart



Adjustable multiple times after surgery

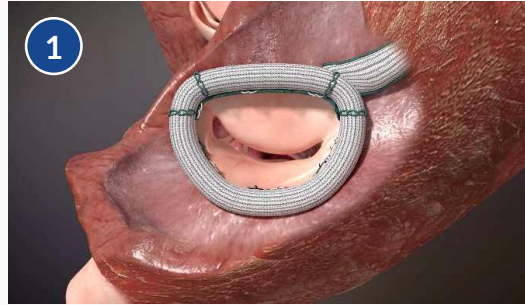
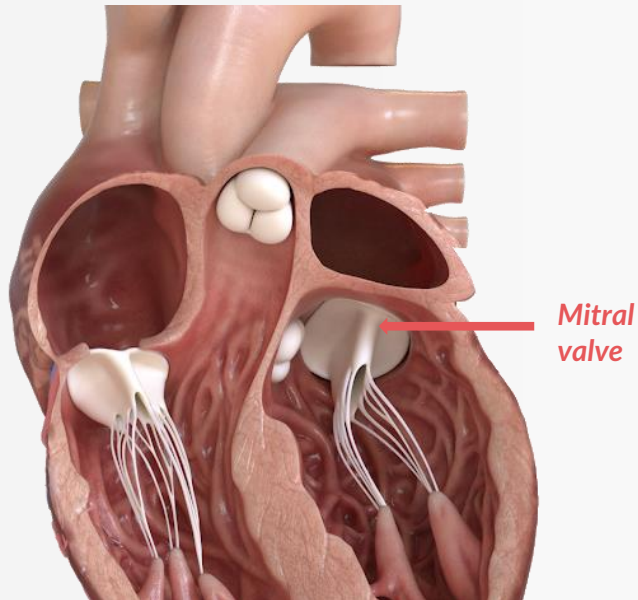


Adaptable to the evolution of patient's regurgitation



Improved long term patient's life

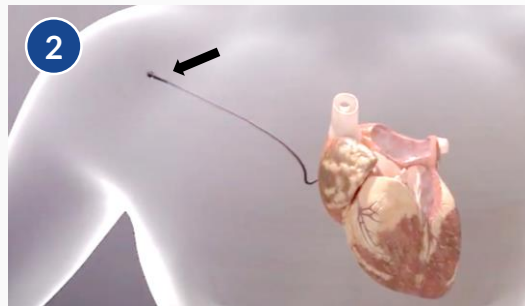
Better outcome



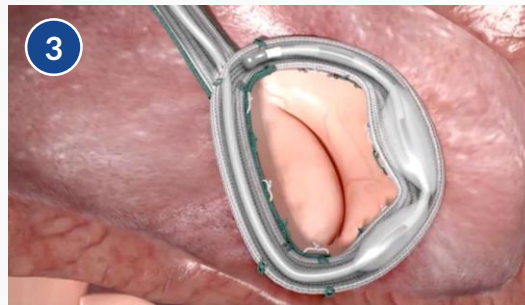
Implanted as a conventional 'Carpentier' ring to perform a normal annuloplasty procedure

Minimally invasive procedure

Easy to implant for surgeons



During implantation, the end of the connection line is routed to a subclavian position to facilitate post implantation adjustments



The device can be **selectively adjusted multiple times post surgery**

Adjustment is performed by inserting a three-balloon catheter which can be inflated in up to three predefined zones

Adjustment under echography on beating heart

Link to video : <https://www.youtube.com/watch?v=ddRY6ai53uo>



Mitral valve replacement



Based on aortic design



Force human heart to adjust to valve



Unable to restore natural blood flow

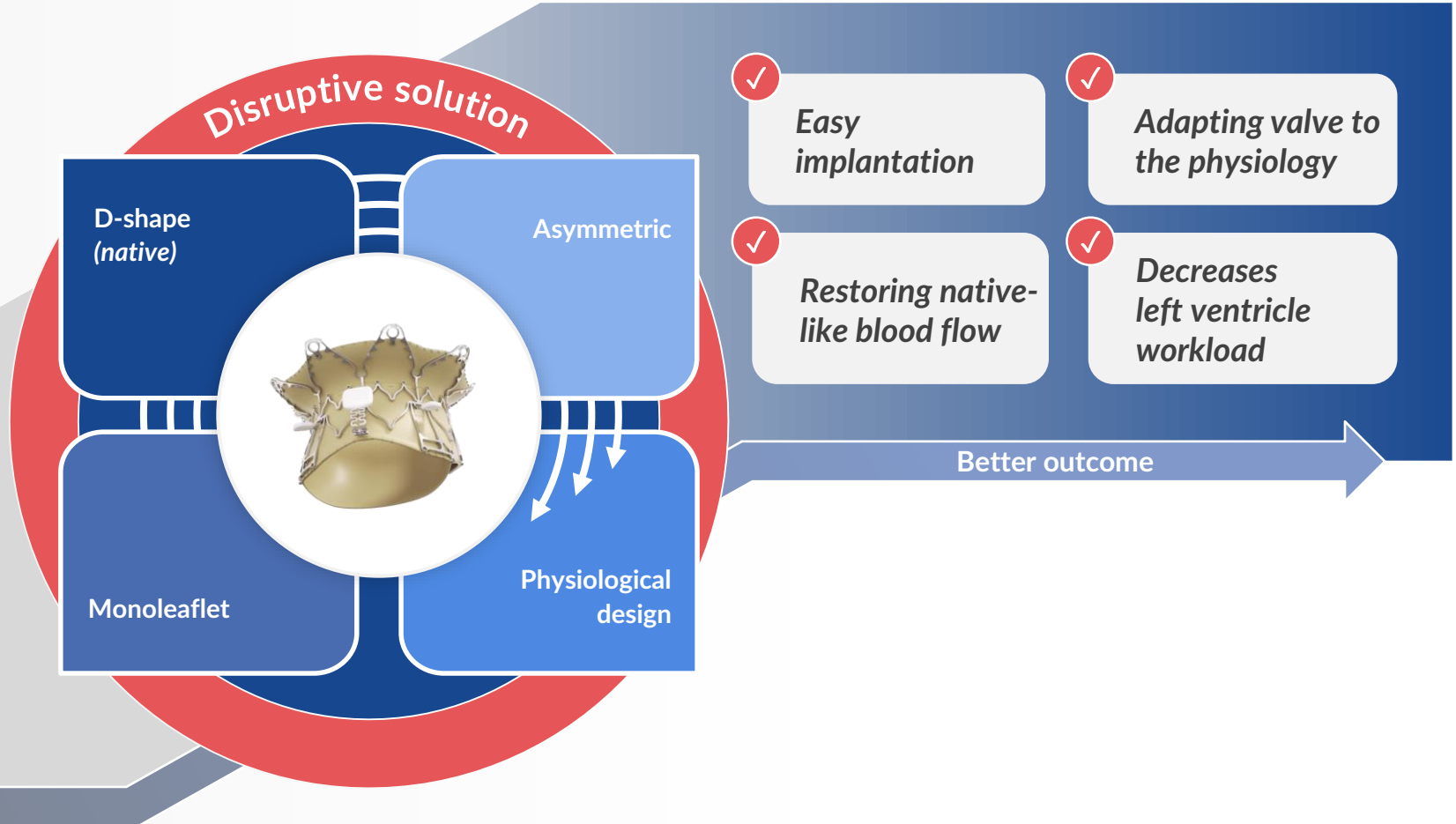


Leads to left ventricle overload



Often leads to complex implantation

Unmet needs with existing products⁽¹⁾



Note(s): (1) Based on management assessment and publicly available information



STRUCTURAL
HEART

Endorsement from Professor Christian Latremouille, Cardiac Surgeon



PROFESSOR CHRISTIAN LATREMOUILLE

CHIEF SURGICAL OFFICER, CARMAT
FORMER PROF. OF CARDIAC SURGERY,
EUROPEAN HOSPITAL GEORGES POMPIDOU,
PARIS



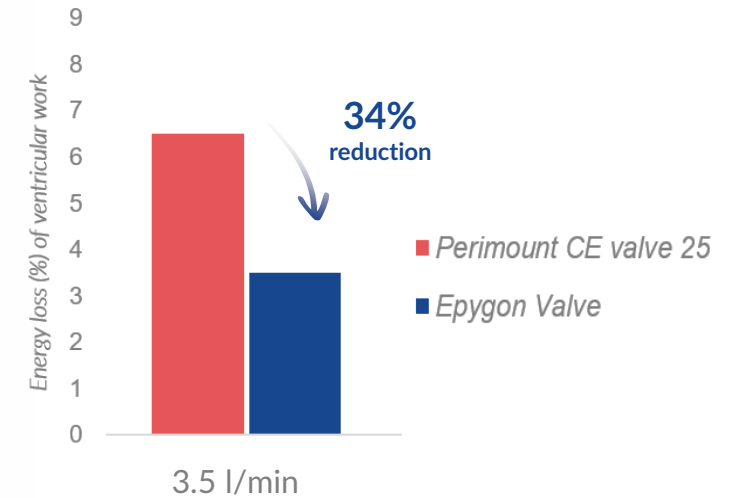
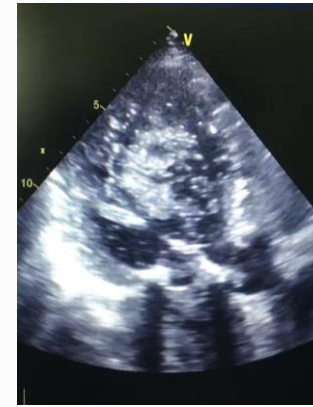
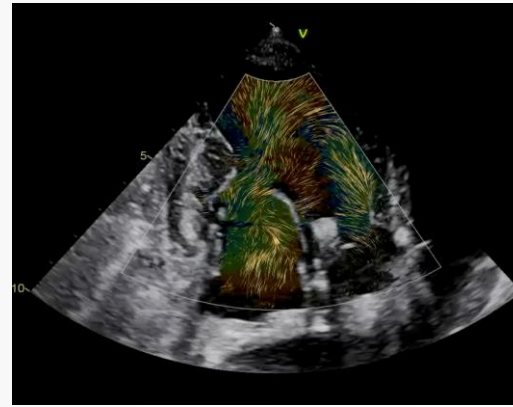
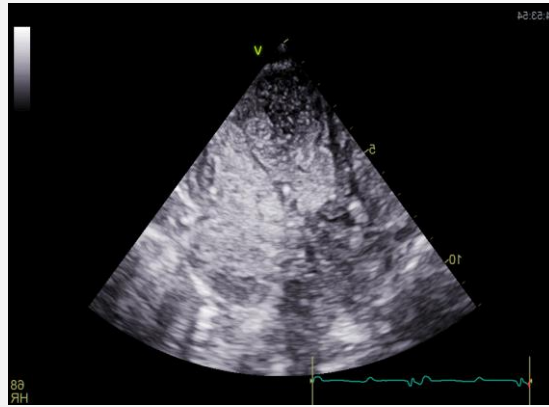


Normal

EPYGON

Others

EPYGON vs. tri-leaflet mitral valve - Total energy loss (% ventricular work) in pre-clinical test
At 3.5 l/min and 100 mmHg mean aortic pressure



1

Physiological valve restores natural blood flow vortex

2

EPYGON reduces left ventricle efforts by up to 34% vs. tri-leaflet valves

3

EPYGON enables the recovery of ventricular function to avoid further cardiac insufficiency

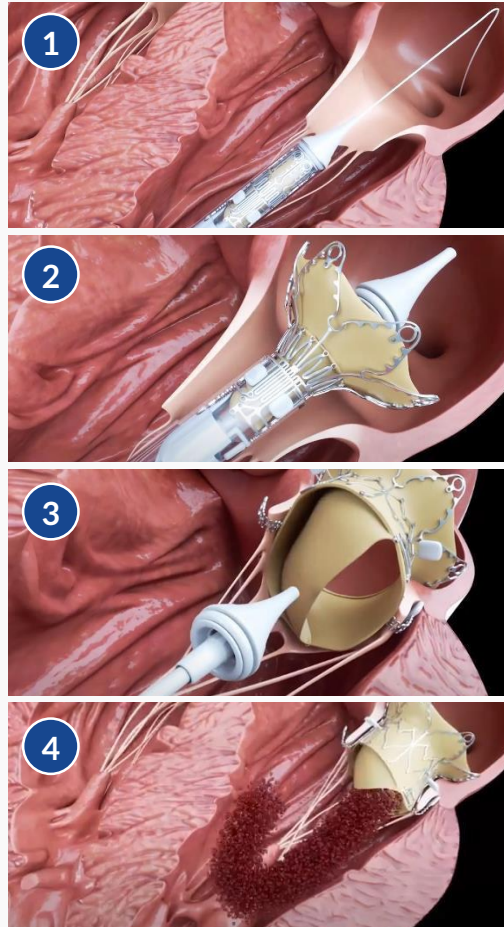
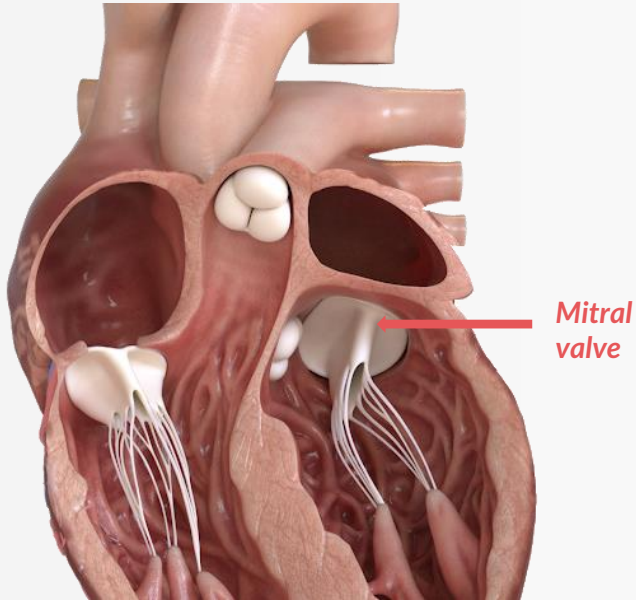


Potential for **best-in-class mitral valve performance**





Transapical & transeptal⁽¹⁾ access



The delivery system is advanced to ensure optimal central placing inside the native mitral valve

The atrial portion of the device is gradually released; petals are deployed to obtain the desired D-shaped position

The valve is gently pulled toward the mitral annulus while two engagement arms capture the posterior and anterior leaflets

Able to **restore the physiological blood flow in the ventricle** and keep the native leaflets under traction



<10 min.
deployment









Notes(s): (1) R&D and preclinical stage

Link to video : <https://www.youtube.com/watch?v=Xft0LVNR-Wg>



EPYGON Competition landscape



Product offering	 Highlife	 Saturn	 INTREPID	 CARDIAQ	 TIARA	 TENDYNE™
CE Approval	✗	✗	✗	✗	✗	✓
FDA Approval	✗	✗	✗	✗	Early feasibility	Clinical study
Status	Few patients implanted no result published yet	-	Finished 50 patient pilot, starting pivot trial	Ongoing pilot trial	-	CE-marked since 2020
Design	Symmetrical	Symmetrical	Symmetrical	Symmetrical	D-shape	Symmetrical
Transapical / Transseptal access	Transapical & Transseptal	Transapical & Transseptal	Transapical	Transapical or Transseptal	Transapical	Transapical
Monoleaflet pericardium valve	✗	✗	✗	✗	✗	✗
Positive remodeling of left ventricle	✓	✓	✓	✓	✓	✓
Part numbers	2	2	Mono	Mono	Mono	Mono



H2 2025⁽¹⁾

Q4 2025⁽¹⁾

Initiating First-in-Human trial

D-shape

Transapical & Transseptal⁽²⁾

✓

✓✓✓

Mono

Price: ~€35,000 - €50,000⁽³⁾



Notes: Based on management assessment and on publicly available information;

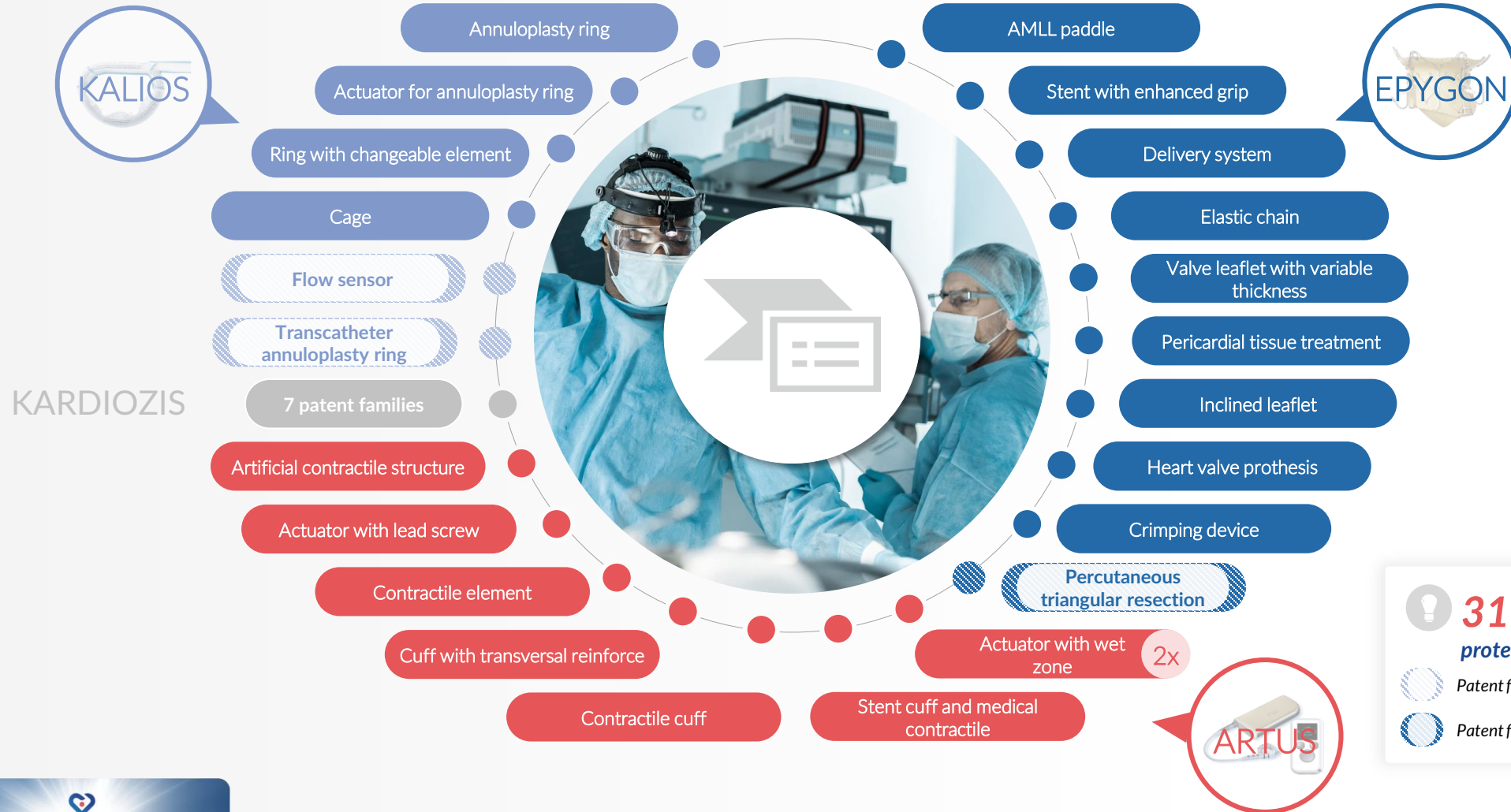
(1) Expected date subject to the impact of COVID pandemic and regulatory developments and obtaining financing (IPO and additional financing if necessary)

(2) Preclinical stage (3) Average sale price - Source(s): Circulation Research

PATENTED TECHNOLOGIES
BACKED BY KEY OPINION LEADERS



Secured IP protection to create value



Note(s): (1) Includes patent families for Kardiozis



Disruptive technology to treat abdominal aortic aneurysm with licensing opportunity

Current issues with aortic aneurysm

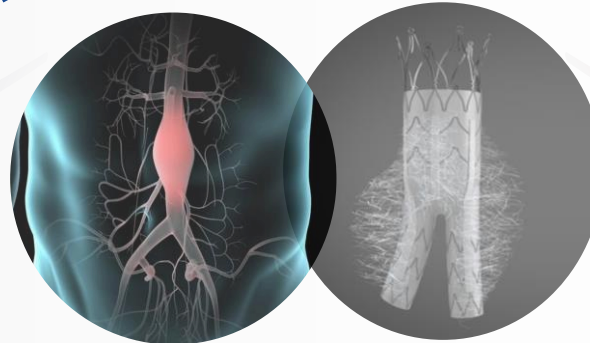
2 million people suffer from AAA with high mortality risk, but only 20% are diagnosed

Type II endoleaks occur in 10-47% of cases after standard EVAR⁽¹⁾

Patients exposed to further surgery

Kardiozis

Better outcomes



Clear opportunity

Thrombogenic fibers reducing the whole aneurysm sac

Prevents endoleaks of the aneurysm sac (already tested)

Known technology - manufacturability and scalability ensured

\$1.7bn market⁽²⁾ offering licensing opportunity

Offering better technology to major players off the shelf

Proven concept in in-vitro testing

Endovascular prosthesis to treat and better reduce abdominal aortic aneurysm



Source(s): (1) Powell JT, Et al (Br. J. Surg. 2017 Feb); (2) Global Aortic Aneurysm Market - Drivers, Opportunities, Trends and Forecasts 2017-2023 (Infoholic Research 2017)

PATENTED
TECHNOLOGIES
BACKED BY KEY
OPINION LEADERS

A top tier scientific board



Prof. Alain Berrebi
MD

Interventional
Echocardiographer

Head of Echo-Lab of
Department of Cardio
Vascular Surgery at the
Georges Pompidou
European Hospital, Paris



Prof. Alain Carpentier
MD, PhD

Prof. of Cardiac Surgery

Co-founder of




Prof. Theodor Fischlein
MD

Prof. of Cardiac Surgery, Nuremberg



**Prof. Christian
Latremouille**
MD, PhD

Chief Surgical Officer, Carmat
Former Prof. of Cardiac Surgery,
European Hospital Georges Pompidou, Paris



Prof. Günther Laufer
MD

Prof. of Cardiac Surgery
Head of the Department of Cardiac Surgery,
Vienna Medical University, Vienna



Prof. Martin Misfeld
MD, PhD

Prof. and Senior Consultant for Cardiac Surgery,
Heart Center Leipzig



Prof. Piergiorgio Tozzi
MD

Prof. of Cardiology and Cardiothoracic Surgery,
Lausanne



Prof. Daniel Hayoz
MD

Prof. of Internal Medicine and Angiology,
HFR Fribourg - Cantonal Hospital, Fribourg



**Prof. Nicolas Barry
Delongchamps**
MD

Prof. of Urology, Cochin Hospital, Paris



Prof. Roger Dmochowski
MD, MMHC

Prof. of Urologic Surgery
Associate Surgeon-in-
Chief Vanderbilt
University Medical
Center



Prof. Dominique Fabre
MD

Prof. of Thoracic and Vascular Surgery
and Cardiopulmonary Transplantation
at Marie Lannelongue Hospital



Prof. Stephan Haulon
MD

Prof. of Vascular Surgery,
University of Paris Sud, Paris
President of the
European Society
of Vascular Surgery

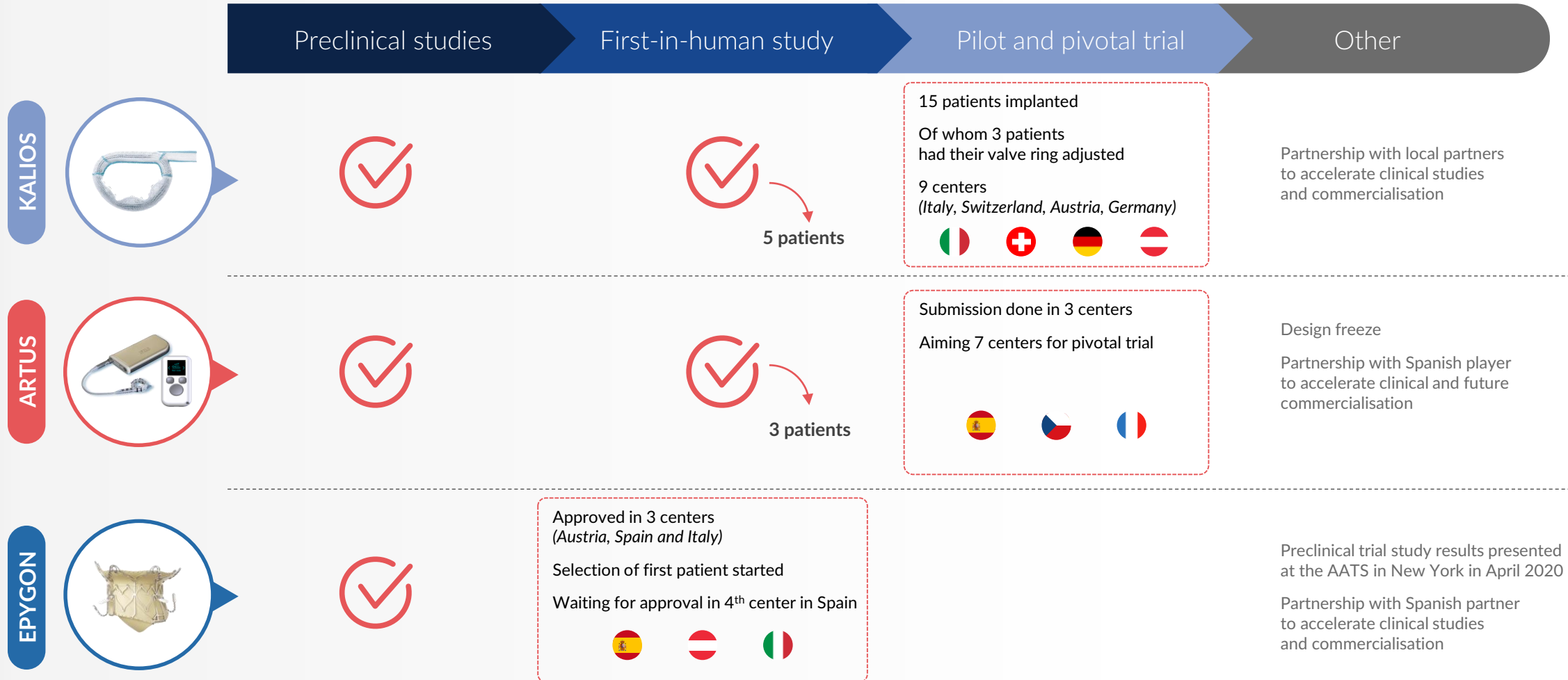


Note(s): Scientific board to be completed

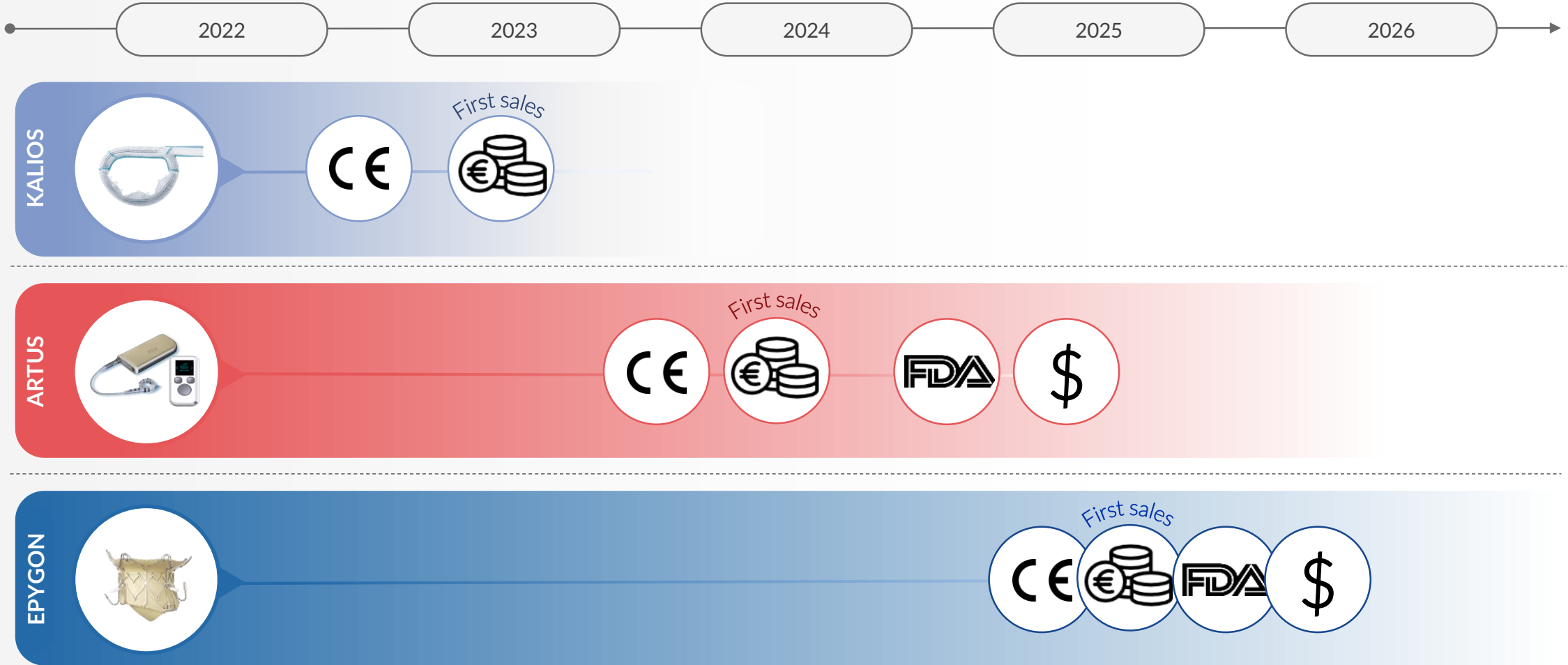
KEY MILESTONES AND STRATEGY



Important milestones have been achieved so far

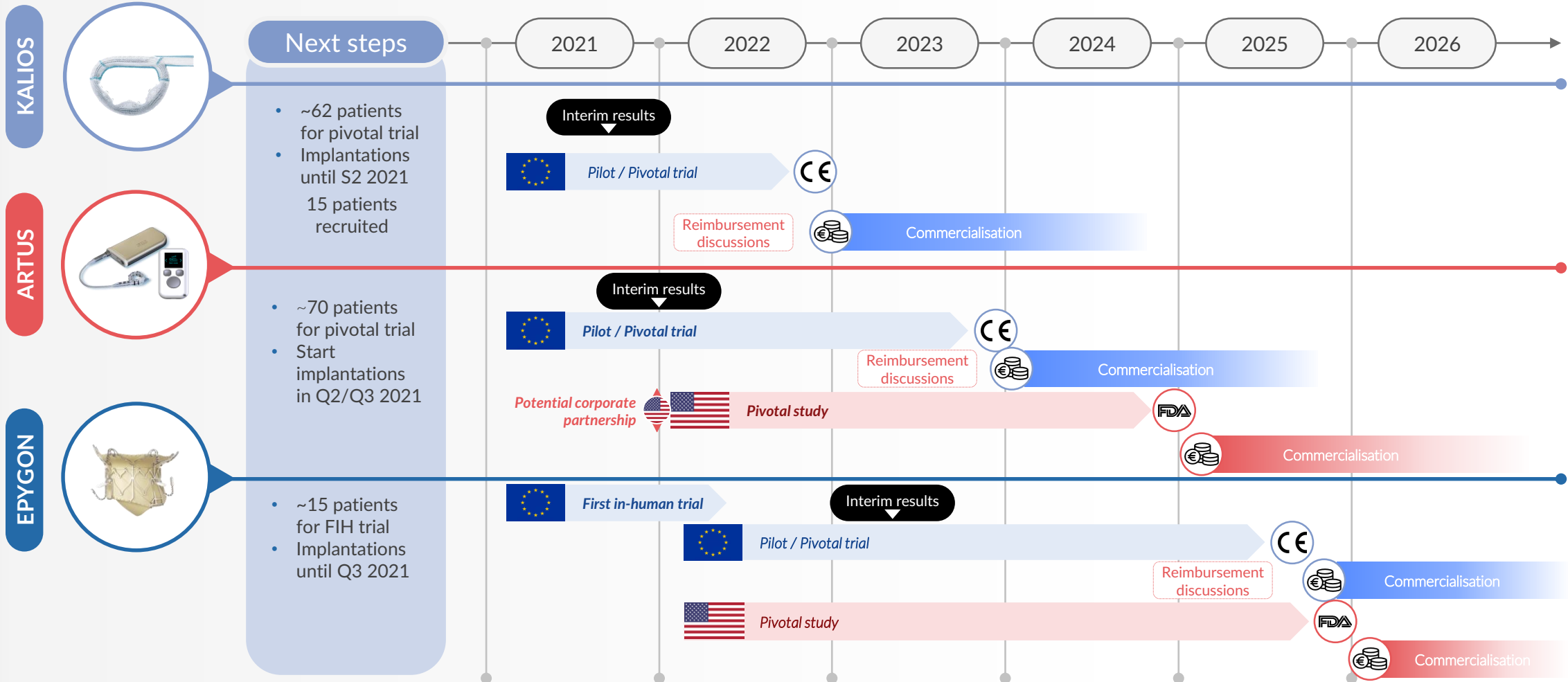


Roadmap ensures products coming to market every 12 months



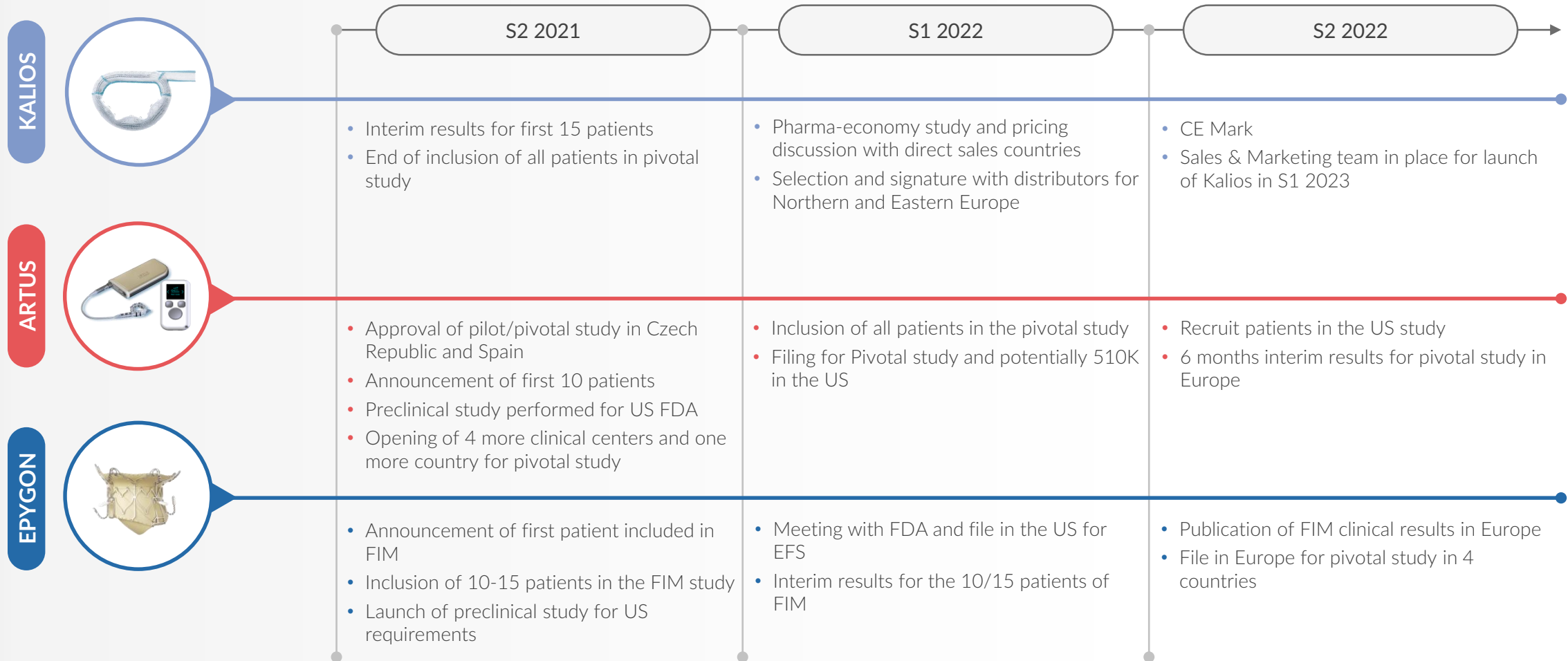
Note(s): Timeline subject to evolution of the COVID pandemic and obtaining financing (IPO and additional financing if necessary)

Next steps and roadmap for future growth



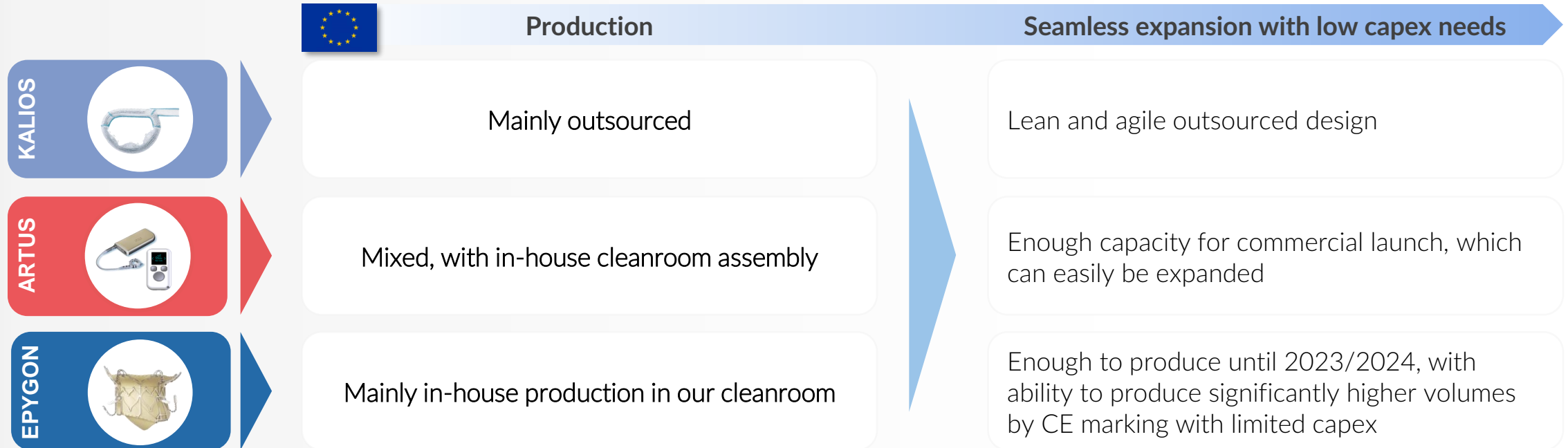
Note(s): Timeline subject to evolution of the COVID pandemic and obtaining financing (IPO and additional financing if necessary)

Detailed newsflow expected over the next 18 months



Note(s): Timeline subject to evolution of the COVID pandemic and obtaining financing (IPO and additional financing if necessary)

Highly specialised production capabilities with clear path to expansion



Kalios, Epygon and Artus all hold ISO 13485 certification





Partnerships

- A Potential partnerships with key US players
- B Fully funded joint venture in China with Gaoze
- C Partnerships for Kardiozis in phase of negotiation



Direct and indirect sales

- A Launch in Europe via direct¹ and indirect sales
- B Established best-in-class sales force and therapy specialists
- C Indirect sales strategy in selected countries



Pricing / reimbursement

- A Premium pricing offering vs. competing products
- B Health-economics studies proving cost-effective treatments
- C Relationships with managed care in the US with partners



(1) Targeted countries: Germany, France, Italy, United-Kingdom

TEAM OF EXPERIENCED
LEADERSHIP EXPERTS IN MEDTECH



Experienced MedTech leadership team



Michel Finance
Chairman & Chief Executive Officer



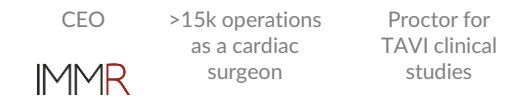
Olivier Pierron
Chief Operating Officer



Jérôme Geoffroy
Chief Financial Officer



Prof. François Laborde, MD
Chief Medical Officer



Wenzel Hurtak
VP Operations Epygon



Pascale Lagrange
Quality Director



Eric Jague
Regulatory Affairs Director

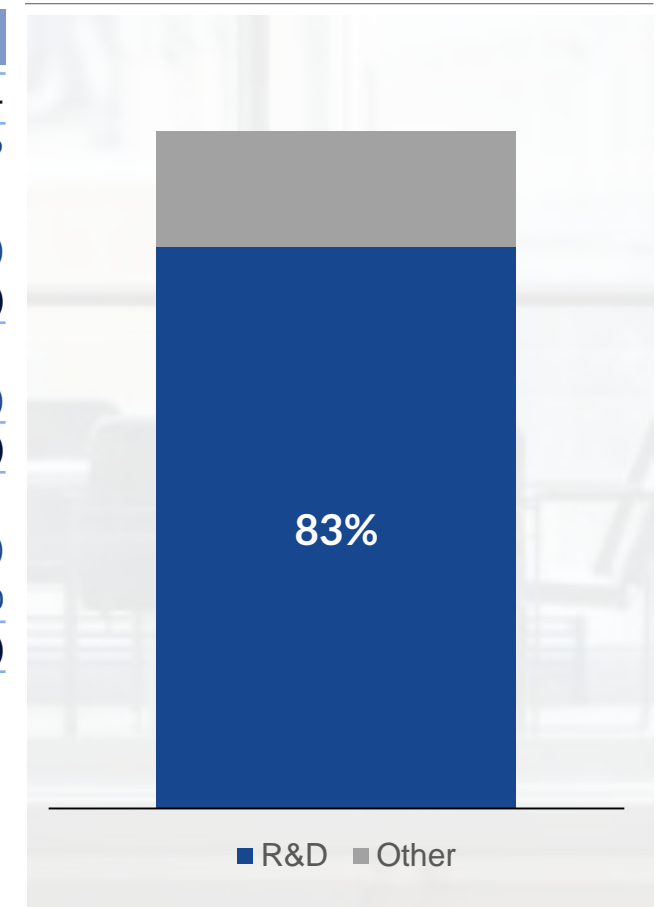


OVERVIEW OF FINANCIALS

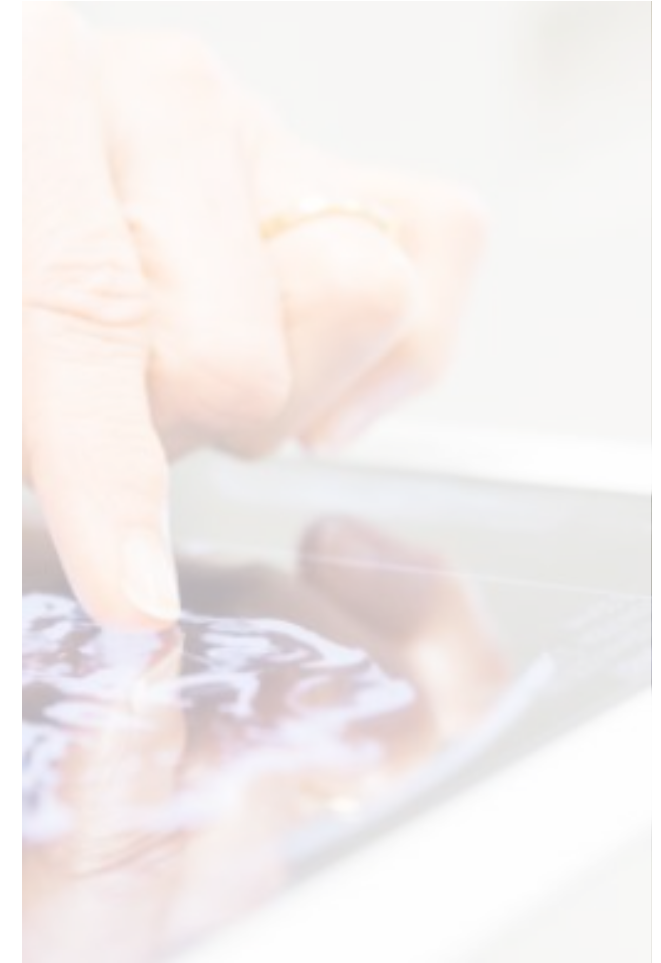


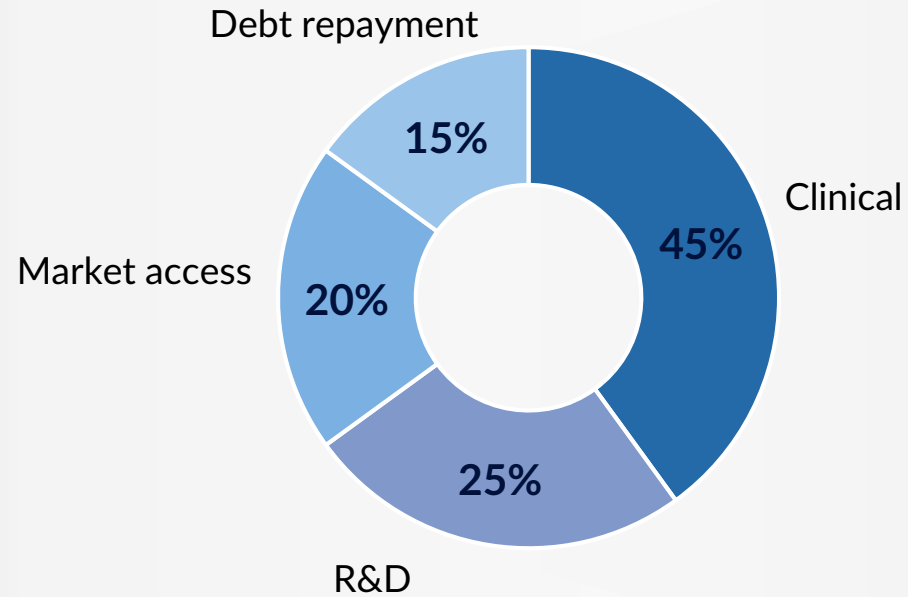
Profit & Loss snapshot (in €k)	31 Dec 2020	31 Dec 2019
Sales	-	-
Other operating income	824	1,429
Operating expenses	(13,418)	(15,269)
Operating Income	(12,594)	(13,841)
Share of income from equity affiliates	(398)	(1,190)
Operating income after equity affiliates	(12,992)	(15,031)
Financial result	(1,536)	(1,769)
Income tax expense	209	210
Net income	(14,319)	(16,589)

R&D spend as % of 2020 op. expenses



Cash flow snapshot (in €k)	31 Dec 2020	31 Dec 2019
Net income/loss	(14,319)	(16,589)
P&L non cash items	5,383	5,177
Cash flow from operating activities	(8,936)	(11,412)
Cash flow from investing activities	(304)	(185)
Cash flow from financing activities	12,762	10,386
Free cash flow	3,522	(1,211)





Clinical - Clinical development plan in the EU for the completion of Kalios / Artus pivotal studies and initiation of large pivotal studies for Epygon

R&D - Continuous improvement of Affluent Medical product portfolio: new version, optimisation, simplification to better fit patient and surgeon needs

Market access - Set up medical salesforce and therapy specialist. Implementation of lean manufacturing

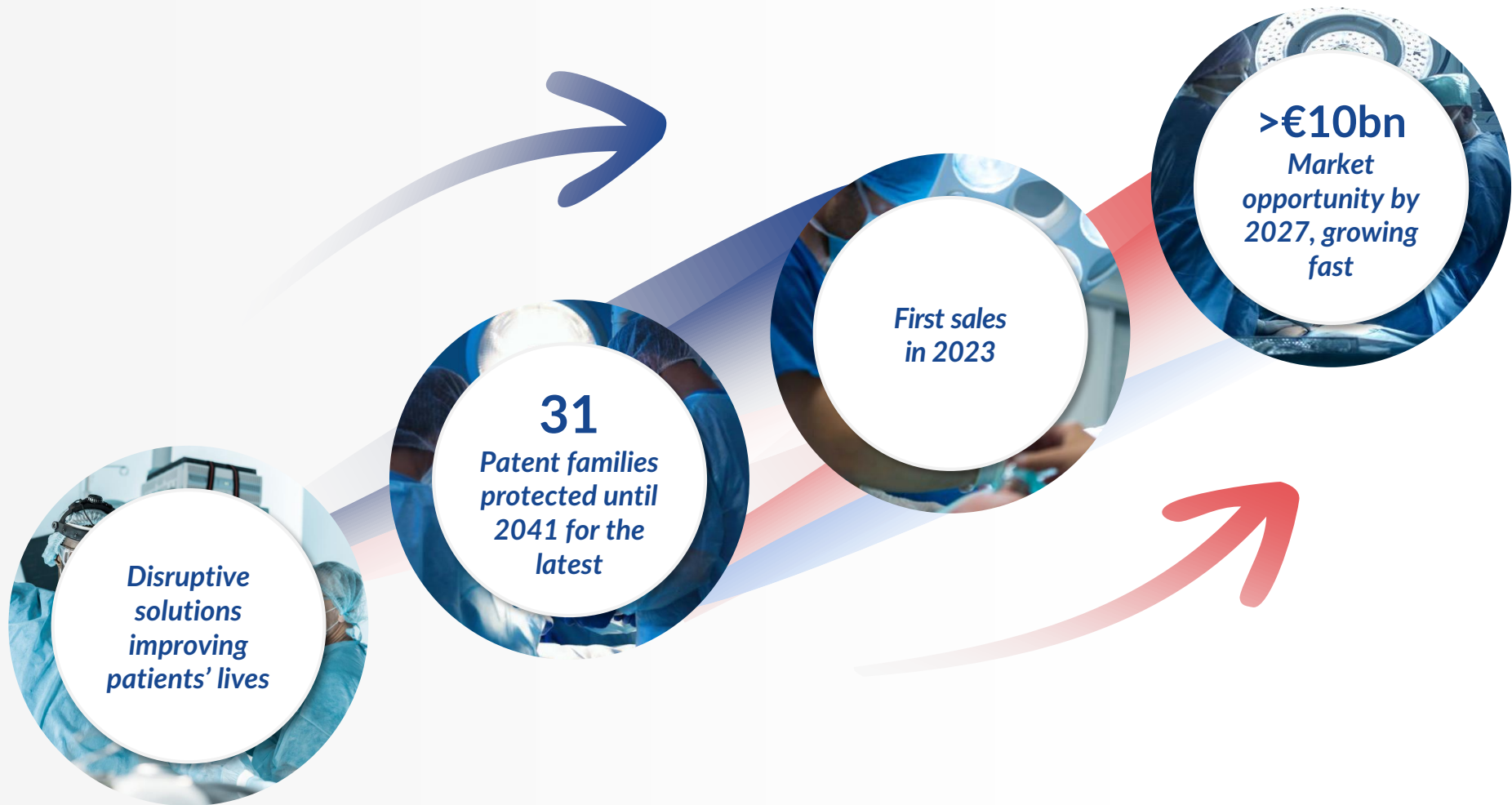
Debt repayment - Reimbursable of loans, convertible bonds and non-dilutive funding from BPI



WHY INVEST IN AFFLUENT MEDICAL?



Why invest in Affluent Medical?



TRANSACTION TERMS





Issuer	<ul style="list-style-type: none"> ■ Affluent Medical SA – ISIN code: FR0013333077 - Ticker : AFME
Listing	<ul style="list-style-type: none"> ■ Euronext Paris Regulated Market
Offering structure	<ul style="list-style-type: none"> ■ A public offering in France in the form of an Open Price Offering intended mainly for retail investors (“OPO”) ■ A global placement in France and certain countries, with the notable exception of the United States of America, intended primarily for institutional investors (“Global Placement”)
Price range	<ul style="list-style-type: none"> ■ €7.40 - €9.80 per share (mid-price: €8.60)
Offering amount	<ul style="list-style-type: none"> ■ Initial size of the offering: a capital increase of approximately €33.0 million⁽¹⁾ (3,837,210 new shares) ■ After extension clause: approximately €38.0 million⁽¹⁾ (4,412,791 new shares) ■ After over-allotment option: approximately €43.6 million⁽¹⁾ (5,074,709 new shares)
Post-IPO capitalisation	<ul style="list-style-type: none"> ■ €164.2 million⁽¹⁾, up to maximum of €174.9 million⁽¹⁾ in the event of the exercise of the extension clause and over allotment option
Subscription undertaking	<ul style="list-style-type: none"> ■ Up to €20.0 million from Truffle Capital, Ginko Invest, Kreos Capital, Friedland Gestion, Aurore Invest, Marsac Advisors and 7 individual investors
Lock-up	<ul style="list-style-type: none"> ■ Company: 180 days hard lock up ■ Current Shareholders: 180 days hard lock up ■ Management and employees: 180 days hard lock up followed by 180 days soft lock up
Syndicate	<ul style="list-style-type: none"> ■ Global Coordinators, Lead Managers and Bookrunners: Swiss Life Banque Privée, Invest Securities



⁽¹⁾Based on the mid-price

26 May 2021

- AMF approval on the Prospectus

27 May 2021

- Opening of the French Public Offer and the Global Placement

8 June 2021

- Closing of the French Public Offering at 5:00 p.m. (Paris time) for subscriptions over the counter and at 8:00 p.m. (Paris time) for internet subscriptions

9 June 2021

- Closing of the Global Placement
- Issuance of the press release announcing the result of the offering

11 June 2021

- Settlement-Delivery

14 June 2021

- Start of trading on the regulated Euronext Paris market
- Start of any stabilisation period

8 July 2021

- Deadline for exercise of the over allotment option
- End of the stabilization period

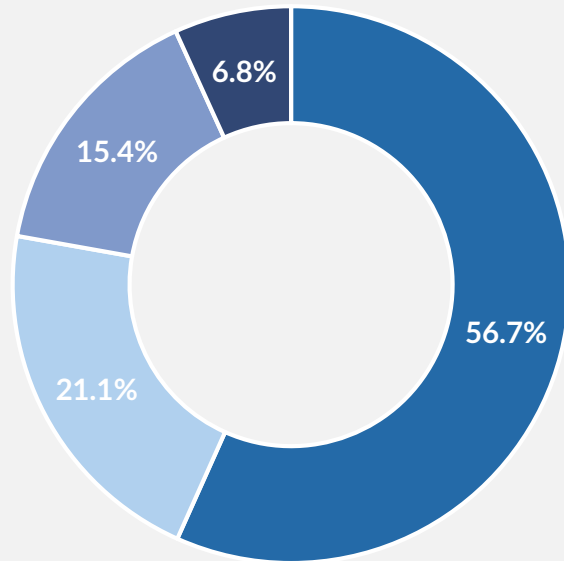


Shareholder structure

Pre-IPO¹

Fully diluted basis

Based on a capital composed of 18,865,087 shares

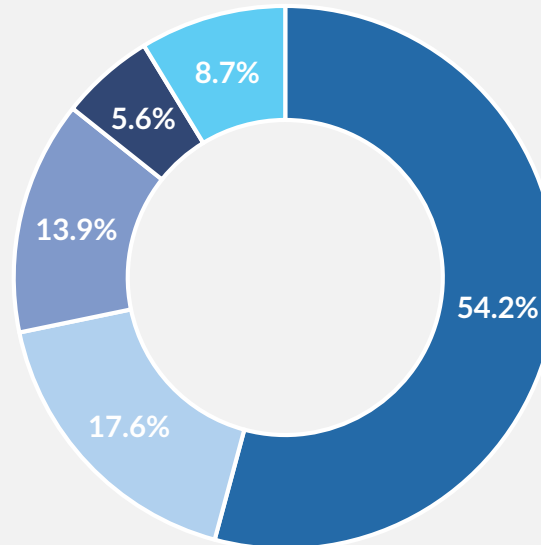


Post-IPO¹

Fully diluted basis

Based on a capital composed of 22,702,297 shares

Before the exercise of extension clause and over-allotment option

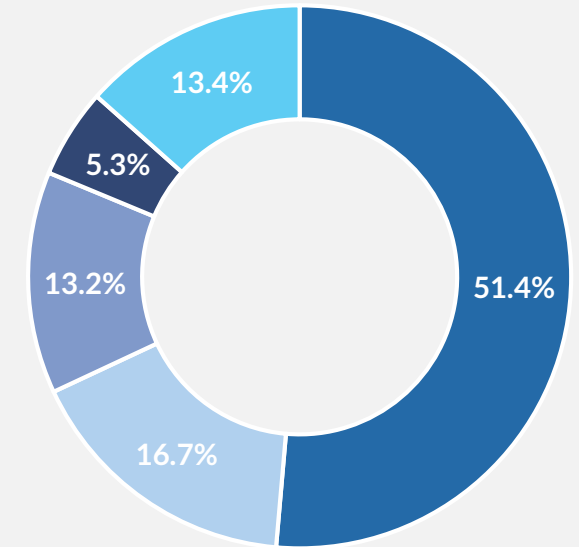


Post-IPO¹

Fully diluted basis

Based on a capital composed of 23,939,796 shares

After the exercise of extension clause and over-allotment option



Funds and companies managed by Truffle Capital

Other financial investors

Founders, Officers, Board and Committee members

Employees

Public



(1) at the mid point of the range

Partners of the operation



Global Coordinators, Lead Managers and Bookrunners

