Corporate Fact Sheet

Overview	Alucent Biomedical is a privately held biomedical company dedicated to developing and commercializing its breakthrough Natural Vascular Scaffolding (NVS) technology for the treatment of vascular disease. NVS creates photoactivated protein linking of the vessel's native structural proteins. The system is designed to open vessels and keep them open without the use of permanent implants. Alucent Biomedical was founded by the Avera Research Institute, part of the multistate Avera Health System, in 2017. The company is headquartered in Salt Lake City.
Market Focus	Peripheral artery disease (PAD) is a debilitating, painful and highly prevalent condition that impacts eight to 10 million people in the U.S. more than 200 million people worldwide[i] in which arteries outside of the heart become narrowed due to a build-up of plaque. The global market for related peripheral vascular devices, including stents and balloons, is $3.2 billion, of which $2.5 billion is the U.S. market.[ii] The most commonly used treatments for PAD include angioplasty, stenting, and paclitaxel-coated devices. However, a significant unmet need still exists for the treatment of PAD, as a number of studies have shown that balloon angioplasty has a failure rate greater than 60 percent at twelve months in patients with PAD.[i] This is especially true in the case of calcified or long lesions as well as those treatments complicated by arterial dissection. Many patients end up with limb amputations due to failures of current therapies.
Products	Alucent is devoted to developing and commercializing the Alucent NVS Vessel Restoration System with Photoactivated Linking, a therapy for PAD that has the potential to significantly improve patients' lives. The system creates a Natural Vascular Scaffold (NVS) through photoactivated linking of native structural proteins in the vessel wall. It is designed to open vessels and keep them open without the use of permanent implants in the treatment of PAD of the lower extremities. The Alucent NVS Vessel Restoration System combines standard angioplasty with linking of the structural proteins in the wall of a blood vessel. The intervention is designed to deliver immediate restoration of the vessel's lumen and sustained improvement of blood flow, without the introduction of a foreign implant, such as a metallic stent, into the patient's body. Because there is no rigid foreign material, the arterial wall has the potential to retain its natural functionality and flexibility and avoid the complications of permanent stents. Alucent NVS photoactivated linking is also designed to mitigate the well-known adverse effects of angioplasty, such as vessel recoil. Sustained, improved blood flow may result in pain relief, limb preservation, a reduction in reinterventions and an improved quality of life for patients.

Intellectual Property	Alucent has exclusively licensed nine issued U.S. and international patents from Alumend LLC. The patents cover all vascular uses. Alucent filed six additional new patent applications in 2018 and 2019 covering specific product embodiments.
Clinical Studies	As of Q1 2020, a multicenter Phase 1 clinical trial called ACTIVATE I is underway to evaluate the safety and efficacy of the Alucent NVS Vessel Restoration System with Photoactivated Linking in U.S. patients. Following ACTIVATE I completion, NVS will be studied in a larger study planned for 2021. Prior to the U.S. Food and Drug Administration's approval to proceed with the ACTIVATE I study, pre-clinical testing in animal studies demonstrated acute and long-term safety and patency without the pro-inflammatory and mechanical risks of placing a rigid foreign implant into the blood vessel.
Financing	Alucent has been supported with more than $20 million of capital from Avera Health since 2017. Avera will continue to participate in current and future financings. In 2020, Alucent plans to begin Series B funding to raise $30 million to finance the company's activities through the end of 2022, with a primary goal of achieving robust proof of safety and efficacy of a fully integrated, commercially ready product.
Management Team	• Myles Greenberg, MD, President, Chief Executive Officer • Hank Hauser, Vice President, Clinical Affairs • Katalin Kauser, MD, PhD, DSc, Vice President, Biology • Bruce Krattenmaker, Vice President, Regulatory Affairs • Scott Mayfield, Vice President, Finance & Administration • Krishna Rocha-Singh, MD, FACC, Chief Medical Advisor • Steve Tyler, Vice President, R&D/Engineering • Kevin Warner, PhD, Vice President, Pharmaceutical Development
Scientific and Clinical Advisory Board	• Gary Ansel, MD, FACC, OhioHealth • Elazer R. Edelman, MD, PhD, FACC, Massachusetts Institute of Technology • William Gray, MD, FACC, Main Line Health • Larry W. Kraiss, MD, FACS, University of Utah • William C. Sessa, PhD, Yale University School of Medicine • Ron Utecht, Ph.D. Founder • Craig Walker, MD, FACC, Cardiovascular Institute of the South

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[i] Caradu, Caroline et al. Systematic review and updated meta-analysis of the use of drug-coated balloon angioplasty versus plain old balloon angioplasty for femoropopliteal arterial disease. Journal of Vascular Surgery. Volume 70, Issue 3, 981-995.e10.

[ii] Decision Research Group Market Research Reports. Peripheral Vascular Devices (US, EU). 2019. Numbers shown for 2020