

Date: Thursday, February 20th 2025

Dear Esteemed Strategic Advisors, Colleagues and Friends,

On behalf of Ophthalmic Therapeutic Innovation (OTI), I am delighted to welcome Dr. James C. Tsai (MD) and Dr. Iqbal Ike K. Ahmed joining our Scientific Advisory Board. Dr. Ahmed is an ophthalmic surgeon innovator and pioneer in MIGS surgical innovation. He has received many awards from AAO, ASCRS in the USA and UK Cataract & Refectory Surgery. He is Professor and the Director of the Alan S. Crandall Center for Glaucoma and Innovation at the John A. Moran Eye Center, University of Utah and Director of the Glaucoma and Advanced Anterior Segment Surgery (GAASS) fellowship at Prism Eye Institute/University of Toronto.

Dr Tsai is a distinguished glaucoma clinician scientist and key opinion leader in the field of Glaucoma. He is President of the New York Eye and Ear Infirmary of Mount Sinai (NYEE) and System Chair and the inaugural Delafield-Rodgers Professor of Ophthalmology at the Icahn School of Medicine at Mount Sinai. Dr. Tsai is the Founding Director of the Barry Family Center for Ophthalmic Artificial Intelligence and Human Health at Icahn Mount Sinai. Prior to joining Mount Sinai, Dr. Tsai was the inaugural Robert R. Young Professor and Chair of the Department of Ophthalmology and Visual Science at Yale University School of Medicine and Chief of Ophthalmology at Yale-New Haven Hospital. You can learn more about Drs. Tsai and Ahmed at the links below.

• Dr. James C. Tsai's Bio:

https://www.mountsinai.org/about/hospital-presidents/james-c-tsai

• Dr. Iqbal Ike K. Ahmed's Bio:

https://medicine.utah.edu/ophthalmology/research/centers/glaucoma-innovation/vision/ahmed

Since Dr Louis Cantor and Prof. Clive Wilson joined our SAB last November, OTI Core Team has completed thorough risk/benefit analysis on different formulation candidates for our lead glaucoma program (eye drops); we have reached to the decision to forego nanoparticle

eyedrops, enabling us to pivot OTI-2024 reformulation as a standard glaucoma eyedrop that may allow us to quickly get back to a planned Phase 3 pivotal trial under the *New* IND submitted to FDA (pending for CMC and 6-month Ocular Tox study).

Inotek Pharma developed Trabodenoson as an IOP lowering drug with the wrong dose (failed at 3-month endpoint). We have rediscovered OTI-2024 (the same compound with Dual MOAs) as the best in class and first in class adenosine derived MMP agent for treating glaucoma neural degeneration which has a potential to Stop the vision loss. We will continue the clinical development with the optimal dose of 1.5%, and redefine glaucoma neural protection clinical trial endpoint with the Humphrey Visual Field (hVF) readout at 12-16 months (not 5 years). With **Drs Cantor, Ahmed and Tsai** joining our clinical SAB, we are in a position to establish *IOP normalization* as a new clinical endpoint at 6 months, which is more sensitive than hVF readout.

Whereas IOP reduction by current medications can delay hVF loss, IOP normalization (remove random spike) has the potential to Stop the hVF loss in glaucoma. The holy grail for glaucoma is MMP maintenance therapy to keep the trabecular meshwork clean with elastic youth. OTI-2024 is a tissue rejuvenation product.

On the IP side, our first PCT has entered the national phase ex-US filings to broaden the market exclusivity of OTI-2024 covering three major markets. Our second PCT is due to be published in April 2025. Both PCTs protect 20-year market exclusivity for OTI-2024 MMP therapy (eye drops and sustained release products).

We are actively seeking for partnership & investment to bring this **derisked** Phase 3 glaucoma drug to market in 5 years with **high success**. Thank you everyone for your continued support and being a part of this amazing journey!

IOP normalization =RGC Protection.

With Deep Gratitude,

Tina

Dr. Tina Guanting Qiu, MD PhD (She/her)

President/CEO

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