AGM 2018 – CEO MAGNUS NILSSON

"NO ONE SHOULD HAVETO DIE WAITING FOR A NEW ORGAN"

April 27, 2018





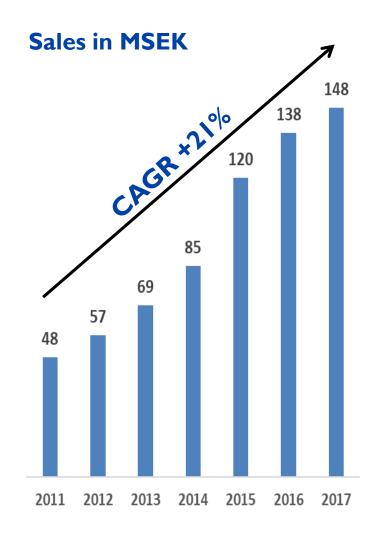
SUMMARY OF XVIVO PERFUSION

High market demand – Currently only 10% of need met*

XVIVO has an Unique <u>Patented</u>, <u>Approved</u> and <u>Documented</u> technology for making more organs available

XVIVO market leader in Lung Tx & the only supplier with FDA approval for warm perfusion of marginal Lungs ex-vivo

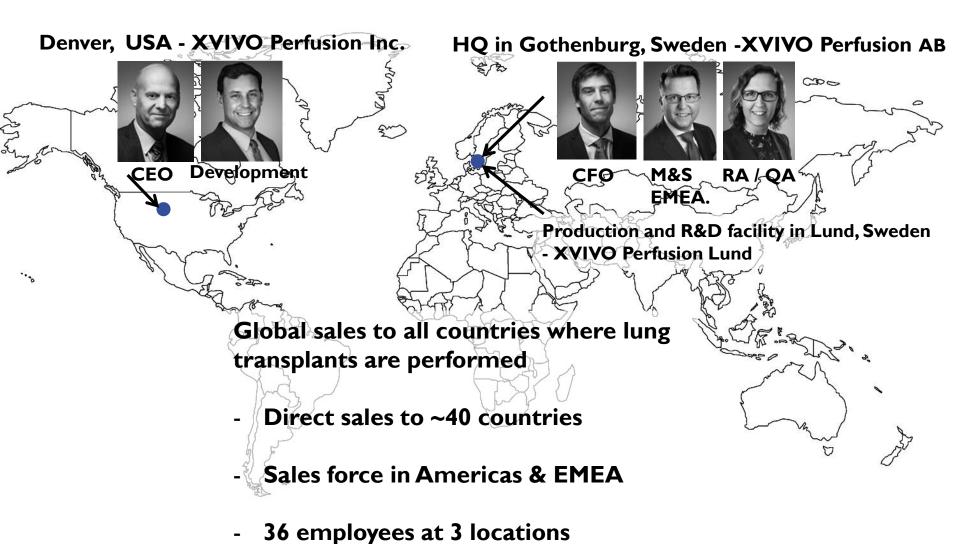
Strong R&D pipeline for future growth Several product dev. project in late phase





^{*} Data from GODT

A GLOBAL FOOTPRINT & MANAGEMENT TEAM



XVIVO PERFORMANCE:

MILE STONES SINCE LISTING (Oct 2012)

2012	Sales 54 MSEK; 5 XPS in clinical trial
2013	Built capacity & organization (M&S, R&D,etc.) in Gothenburg and Denver
2014- 2015	Reg. Approval of XPS-STEEN Solution: EU, Aus. & USA → FDA expert panel voted 10-0
2015	Sales >100 MSEK; 22 clinics w/ XPS
2015- 2016	Investment in future growth Acquired Heart Tx product dev project; Lund research & prod. facility; Prof Steen collab.
2016	Lung Transplant business cash-flow positive
2017	Sales 148 MSEK - 46 clinics w/ XPS/LS

XVIVO technology featured in media

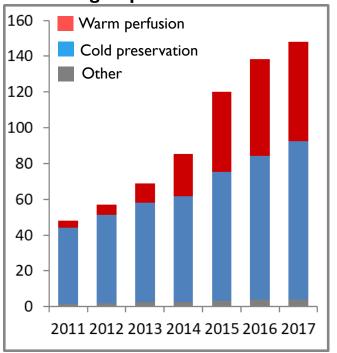




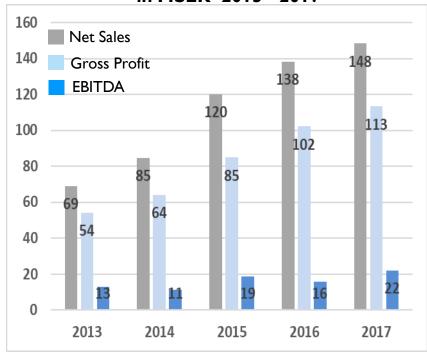
XVIVO PERFORMANCE:

- Sales growth from warm perfusion products, 2011 2017 CAGR of +55%
- EBITDA grew during high investments in development and M&S
- Profitable growth every quarter since 2003

Net Sales in MSEK by product group 2011 - 2017



Net Sales, Gross Profit & EBITDA in MSEK 2013 - 2017











Company founded by Dr. Magnus Nilsson. Research collaboration with Prof. Stig Steen and University Hospital in Lund.

1999

Research collaboration with Prof. Shaf Keshavjee and University Hospital Toronto.

2000

First clinical EVLP lung transplant with STEEN Solution™ performed in Lund by Prof. Stig Steen. Published in Lancet (2001).







PERFADEX® FDA clearance.



2006



STEEN SolutionTM CE marked.

2008

First STEEN SolutionTM clinical study (HELP) initiated in Toronto with Prof. Shaf Keshavjee . Positive results published in New England Journal of Medicine (2011).





Clinical NOVEL study initiated in several leading transplantation clinics in US.

2014



The first warm perfusion device, XPS^{TM} and STEEN Solution TM , approved by the FDA under HDE.

XPSTM CE marked.

2016

Acquisition of Vivoline. With LS, enabling Scandinavian EVLP protocol.

PrimECC® CE marked.







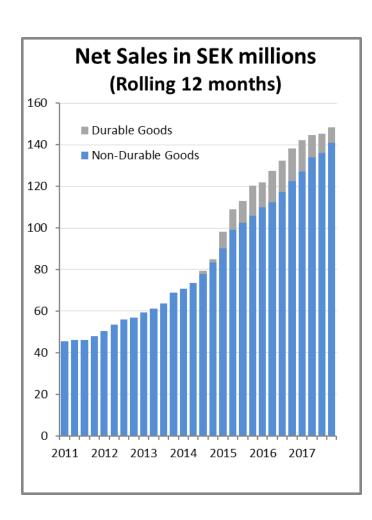
First clinical heart transplant using heart preservation technique developed by XVIVO's partner Prof. Stig Steen was performed at University Hospital in Lund by Prof. Johan Nilsson.

Clinical trial on PrimECC® at Sahlgrenska University Hospital completed.



HIGHLIGHTS 2017

- The first clinical heart transplant using the heart preservation technology developed by XVIVO's partner Professor Stig Steen was performed.
- All 220 patients included in the NOVEL study in the US which will form the basis of the company's PMA application.
- PrimECC study on 80 patients at Sahlgrenska
 University Hospital completed.
- A private placement of SEK 181 million was carried out to accelerate XVIVO's heart transplant project to the market.



SALES HIGHLIGHTS 2017 DOUBLE DIGIT GROWTH FOR NON-DURABLE SALES

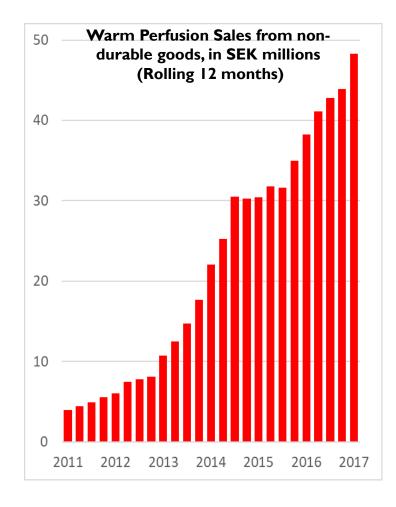
Sales:

- Non-durable goods increased by 15%* to 141
 MSEK.
- Net sales increased by 7% to 148 MSEK.

■ 4 new countries with XPS™ or LS™

- Australia
- o China
- Portugal
- the Netherlands

EVLP reimbursement codes (CPT) obtained in the US.





^{*} Local currency growth +15% for non-durable goods.

PROFIT & LOSS

Sales non-durable +15%

Customer support build up

Running business profitable despite high investments in Marketing and R&D

(SEK Millions)	2017	2016
Net sales	148.3	138.2
Net sales non-Durable goods	141.0	122.5
Gross profit	113.4	102.2
Gross Margin %	76%	74%
Gross Margin non-Durable goods %	78%	80%
Selling expenses excl. items eff. comp%	-29%	-24%
Admin. expenses excl. items eff. comp%*	-13%	-12%
R&D exp. excl. Amort. & items eff. comp%*	-18%	-19%
Items effecting comparability*	-2%	-8%
R&D Amortization %*	-7%	-7%
Other income/expenses %	-2%	-2%
Operating Result %	5%	2%
EBITDA excl. items eff. comp.*	24.8	26.4
EBITDA excl. items eff. comp%	17%	19%
EBITDA	22.0	16.0
EBITDA %	15%	12%

^{*} Items effecting comparability: 2017 2.8 (10.4) MSEK. R&D Amortization: 2017 10.6 (10.3) MSEK.

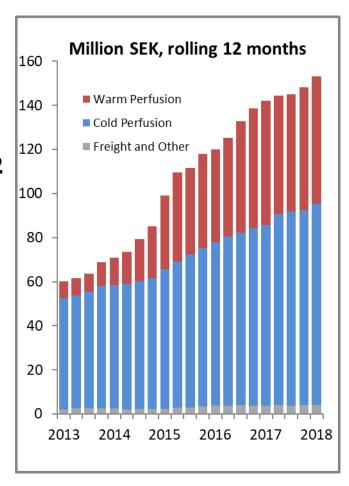


2018 - Q1



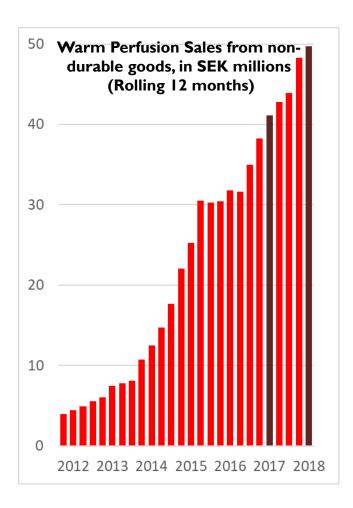
HIGHLIGHTS 2018 – QI

- Net sales exceeded SEK 150 million per rolling
 12 months for the first time.
- Cash flow from operating activities was SEK 9.2 (-2.0) million. Intangible investments SEK 8.7 (6.0) million.
- 2 XPS™ were delivered during the quarter.
- XVIVO's prototype of a heart transplantation machine has been completed for technical testing.



SALES HIGHLIGHTS 2018 – QI

- Net Sales grew +18% in local currencies to 42.5 MSEK.
- Net Sales non-durable goods increased by +17% in local currencies to 37.9 MSEK.
- Second strongest quarter in Warm perfusion, after a strong Q4 2017.
- Rolling 12 months Warm perfusion growth of +21% (YoY).





PROFIT & LOSS

Sales non-durable +17% local currencies

Customer support build up, cost lower due to vacancies filled in end of QI

Lung Tx business profitable despite high investments in Marketing and R&D

(SEK Millions)	2018 Jan- Mar	
Net sales	42.5	37.5
Net sales non-Durable goods	37.9	33.6
Gross profit	30.1	27.1
Gross Margin %	71%	72%
Gross Margin non-Durable goods %	77%	80%
Selling expenses excl. items eff. comp%	-24%	-30%
Admin. expenses excl. items eff. comp%*	-11%	-13%
R&D exp. excl. Amort. & items eff. comp%*	-21%	-19%
Items effecting comparability*	0%	-4%
R&D Amortization %*	-6%	-7%
Other income/expenses %	-1%	-2%
Operating Result %	7%	0%
EBITDA excl. items eff. comp.*	7.2	5,0
EBITDA excl. items eff. comp%	17%	13%
EBITDA	7.2	3.7
EBITDA %	17%	10%

20	017	
Whole		
ye	ear	
	148.3	
	141.0	
	113.4	
	76%	
	78%	
	-29%	
	-13%	
	-18%	
	-2%	
	-7%	
	-2%	
	5%	
	24.8	
	17%	
	22.0	
	15%	

Items effecting comparability: 2018 0 (1.4) MSEK. R&D Amortization: 2018 2.7 (2.6) MSEK.

ISHLT CONGRESS

International Society of Heart and Lung Transplantation

- The upgraded XPS™ drew much attention and appreciation.
- Results were presented from the first transplantation using the new heart preservation technology developed by Professor Steen.
- Clinics from all over the world showed great interest.









XPS UPGRADE PROGRAM

- Improved usability e.g.
 Barcode scanner
 - Functions added to simplify the EVLP process and improve ease of use for the surgical team.
- Improved output e.g. Online scale for continuous measuring of the weight of the lung
 - More parameters to ensure that the surgical team can take more informed decisions.





PRODUCTS & MARKETS FOR FUTURE GROWTH



TRANSPLANT MARKET - OVERVIEW

	Lung Trans- plantation	Heart Trans- plantation	Liver Trans- plantation
Yearly deaths in organ related diseases	~3 millions	>7 millions	>1 million
No. of transplants / year	~5 000	~6 500	~26 000
Annual growth (no. of Tx)	+7%	+4%	+4%
No. of clinics (EU + USA)	~130	~230	~240
Organ use rate from dead donors	~20%	~25%	~80%
Wait list removal/mortality (USA)	~25%	~25%	~25%
Max accepted ischemic time	8 - 12 h	4 - 6 h	8 - 12 h
5 year survival post Tx	~50%	~70%	~70%
DCD share of total Tx (USA)	~2%	-	~6%
Possibility of ex vivo evaluation	Yes	-	-
Possibility to step change	DCD & marginal	1 Ischemic time	DCD livers

Customer overlap high - 62 / 67 Lung Tx clinics in the US performed all three.

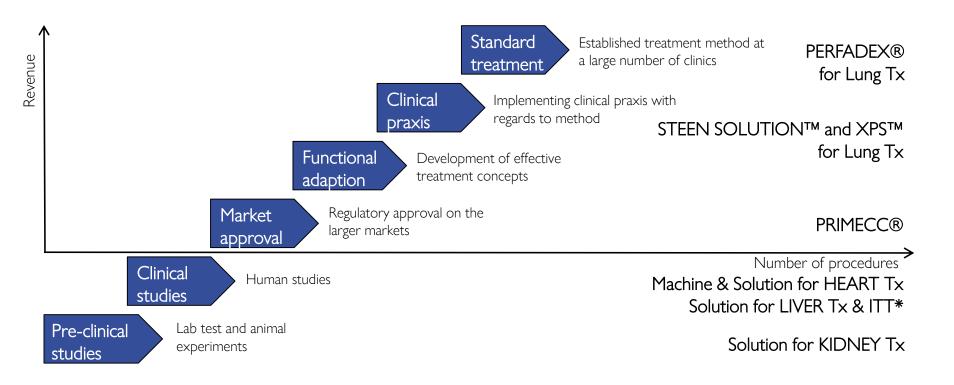


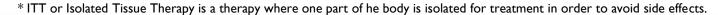
MARKET POTENTIAL PER INDICATION

	Potential Lung Transplantation	Potential Heart Transplantation	Potential Liver Transplantation
Product	Perfadex®, STEEN Solution™ and XPS™	Heart Solution and Heart XPS™	STEEN Solution™ and Liver XPS™
Possible usage of organ	40% of DBD* → 20% of DCD*	50% of DBD* → 5% of DCD*	80% of DBD* → 10% of DCD*
Market in no. of organ transplants/ evaluations	~10,000 → ~50,000	~13,000 → ~20,000	~26,000 → ~50,000
Sales per organ transplant	~130,000 SEK	~130,000 SEK	~130,000 SEK
Market potential	~1,000 → ~5,000 MSEK	~2,000 → ~3,000 MSEK	~2,500 → ~5,000 MSEK
Source: Management accounts	* DBD = Donation after Brain Death * DCD = Donation after Circulatory (or Cardiac) Death. Maastricht criteria II-IV considered suitable for donation		



DEVELOPMENT STEPS







XVIVO - FUTURE GROWTH OPPORTUNITIES



Expansion of Lung transplantation indication, EVLP improvement projects, increase of DCD



Heart Transplant project, early clinical phase



STEEN Solution™ for Liver Transplant, early clinical phase



ITT* - Drug administration to isolated organs (e.g. Cancer) with STEEN Solution™, early clinical phase



PrimECC improve clinical proof, late clinical phase



^{*} ITT or Isolated Tissue Therapy is a therapy where one part of he body is isolated for treatment in order to avoid side effects.

LUNG TRANSPLANTATION

XPS & STEEN Solution the only FDA (HDE) approved device for warm perfusion of marginal lungs

NOVEL study & Post Approval Study (PAS):

- ☐ IIO + IIO patients included
- ☐ Follow-up I year May 2018
- Study analysis ongoing
- ☐ PMA application submission May 2018
- ☐ PA\$ (Post Approval Study)
 - 126 + 126 inclusion completed
 - ☐ Follow-up 3 years





LUNG TRANSPLANTATION

Next steps for lung warm perfusion (EVLP)

XVIVO will continue to clinically develop EVLP:

- Use of DCD* donors for transplantation
 controlled / uncontrolled
- Ex Vivo Infection therapy through EVLP e.g.
 Pneumonia therapy and virus reduction
 I7 Hep C infected lungs transplanted
- Investigate immunological response with EVLP targeting long term survival
- New markers and online parameters for better decision making



^{*}Donation after Circulatory Death

XVIVO - HEART TRANSPLANTATION

Heart perfusion and preservation solution and device developed by Prof. Steen

First clinical HTx with new technology:

- First patient transplanted with the new technology (new solution and new machine)
- Proof of concept study with 6 patients.
- Now approved for air transportation

Safe orthotopic transplantation of hearts harvested 24 hours after brain death and preserved for 24 hours

Stig Steen, Audrius Paskevicius, Qiuming Liao & Trygve Sjöberg

Pre-clinical proof of concept studies indicate:

- No non-oxygenated time -> Better organ quality
- Longer preservation time possible (24h in pigs)
- Myocardium tests on hearts preserved and not preserved showed similar results.

Main focus of next phase in heart transplant area:

- Prototype for international study ready for technical testing.
- Production development of heart perfusion solution.





PRIMECC – STUDY INCLUSION FINALIZED

PRIMECC® developed to avoid side-effects when priming heart-lung machines:

- Patent granted in EU, USA, China & Japan.
- CE marked Class III Medical Device.
- Inclusion of 40+40 patients completed 2018.
- Analysis of key parameters completed

Next steps:

- Expert review of study results ongoing.
- Follow up studies for key findings planning ongoing.



SUMMARY OTHER NEW INDICATIONS

Liver transplantation:

- Results from first clinical study on 20 patients with STEEN Solution shows good clinical results.
- Marginal (DCD) Liver study planned to start in Canada in 2 centers - Preparations ongoing.



Isolated Tissue Therapy – Cancer

- Proof of concept study perfusing lungs in vivo for treatment of cancer is ongoing.
- Second patient successfully treated and followed up.



OUTLOOK 2018 - FOCUS AREAS

Thoracic Surgery

- Lungs Continue to increase footprint and use of EVLP technology
- Lungs PMA application and submission in May
- Lungs Reinforced clinical development of EVLP
- Lungs Hepatis C infected donors study
- Heart Accelerating Heart transplant project with aim of international clinical study
- PrimECC Expert review of PrimECC clinical data and start of clinical documentation program (US application + Marketing)

R&D - New indications

- Liver STEEN Solution[™] clinical development for Liver Tx
- Kidney continued pre-clinical studies with STEEN Solution
- ITT Isolated tissue therapy (Cancer / STEEN Solution™ IVLP)
- → Long-term goal is to solidify position in Thoracic surgery and build a new business in new indications using the STEEN Solution technology.



XVIVO PERFUSION

Patients die waiting for an organ transplant

XVIVO has a <u>Patented</u>, <u>Approved</u> and <u>Documented</u> technology to make more organs available for the benefit of patients

XVIVO has the experience, capability, competence and technology to expand into more indications/markets

