

ONDINE BIOMEDICAL INC.

FY 2025 Results *& Corporate Update*

ondine

Disclaimer & forward-looking statements

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U.S. Regulatory Status Disclaimer: Steriwave® is CE-marked in Europe and is approved for nasal decolonisation in Canada, the United Kingdom, Australia, and Mexico. In the United States, the technology has been granted Qualified Infectious Disease Product (QIDP) designation and Fast Track status by the U.S. Food and Drug Administration (FDA). It is currently undergoing clinical trials in the United States to support regulatory approval and is limited by United States law to investigational use only. It is not commercially available for sale or clinical use in the United States.

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OUR VISION

A world free from untreatable infections

Why we exist

To provide
simple solutions
to complex infections

Where we focus

Hospital-acquired
and drug-resistant
infections

Market Opportunity

\$ Billions



Photodisinfection leader

Approaching a major value inflection point in a multi-billion-dollar market

- **Transforming infection control**
Photodisinfection platform targeting HAIs & AMR
- **Pivotal study at completion**
Phase 3 readout Spring 2026
- **Proven + scaling commercial base**
Active commercialization in Canada, UK & Europe
- **Compelling health economics**
Strong hospital ROI





67% of HAIs
caused by pathogens
known to hide in the nose¹⁻³

¹CDC. HAI Pathogens and Antimicrob Resist Report, 2018-2021. ²Nature. 2012;486:207-214. ³Biomedicines. 2022 Dec 26;11(1):54.



Nasal photodisinfection *changes what is possible*



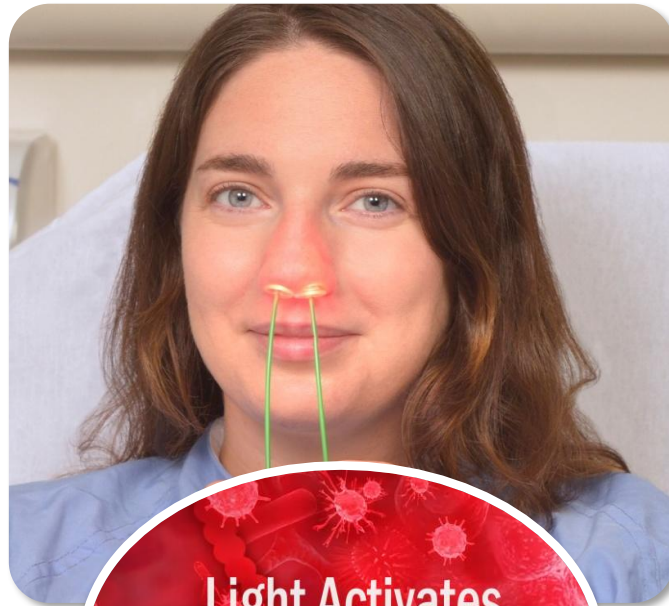
Ideal Characteristics	Mupirocin	Povidone iodine	Octenidine	Photodisinfection
Effective against bacteria, viruses & fungi	✗	✓	✓	✓
Immediate, single-dose microbicidal	✗	✗	✗	✓
No known resistance mechanism	✗	✗	✗	✓
High compliance rates	✗	✗	✗	✓
Easy workflow	✗	✗	✗	✓

Claims are based on internal data, published literature, and product-specific evidence on file; intended to describe the technology platform and not to imply superiority in all settings.

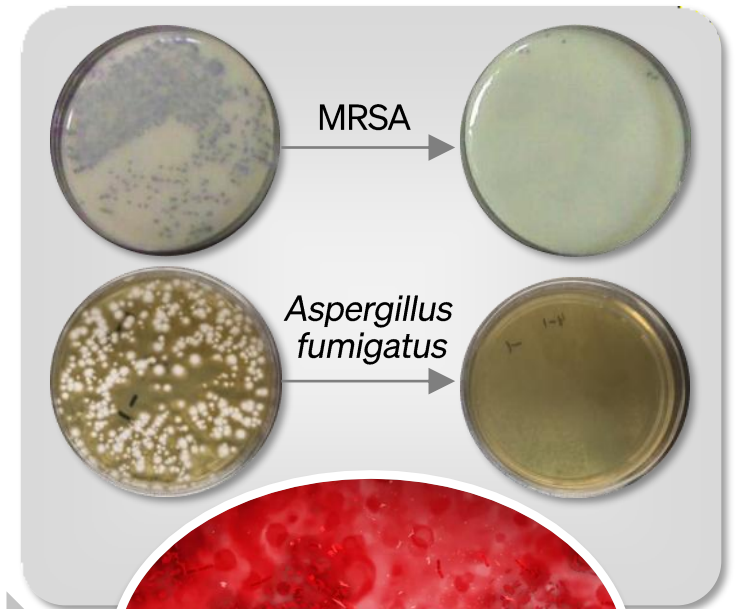
Takes only minutes at point of care



Photosensitizer
Attaches to Microbes



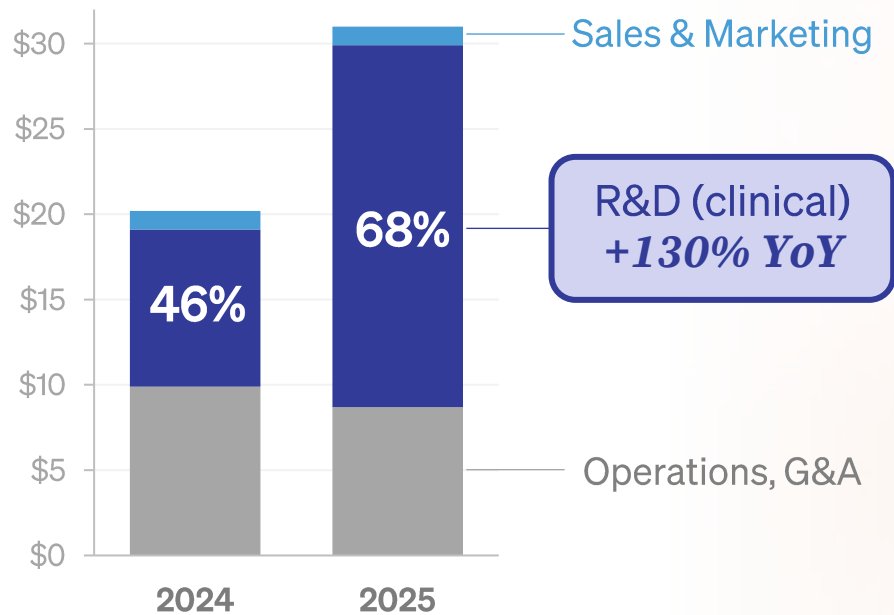
Light Activates
Photosensitizer



Rapid Microbial Death

Prioritized 2025 investment in clinical evidence *to support future commercial growth*

OpEx (\$CAD millions)



- 1 Phase 3 clinical trial
- 2 ICU feasibility pilot study
- 3 International pilot launches

Key progress & updates

Clinical progress

- US Phase 3 clinical study
- US regulatory pathway
- ICU pilot study

Real-world evidence & commercial progress

- Expanding footprint
- Findings presented at conferences

Operational progress

- Preparing for scale-up



KEY GROWTH METRICS

+29%

REVENUE

+22%

GROSS PROFIT

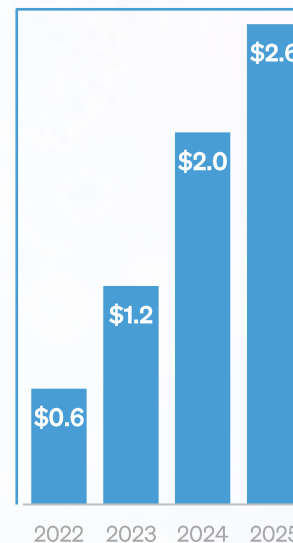
+28%

HOSPITALS

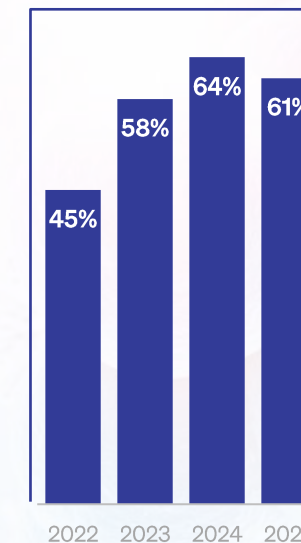
2025 Financial results (\$ CAD)

AIM:OBI (millions)	Year-end:	2025	2024
Revenue		\$2.6	\$2.0
Cost of goods sold		1.0	0.7
Gross profit		\$1.6	\$1.3
<i>Gross margin %</i>		61%	64%
Operations, general and admin*		\$8.7	\$9.9
Research & development		21.2	9.2
Sales & marketing		1.1	1.1
Depreciation		0.5	0.5
Total operating expenses		\$31.6	\$20.8
Loss before other items		(\$30.0)	(\$19.4)
Other		0.5	0.3
Net loss		(\$29.5)	(\$19.1)
Loss per share (\$ CAD)		(\$0.06)	(\$0.07)

Revenue (millions)



Gross margin



c. \$24 million
FUNDS RAISED

CLINICAL PROGRESS

LANTERN Phase 3 study

at a glance ● ● ●

1st

Nasal photodisinfection
RCT study

2

Countries

2

CROs

18

Hospitals

5,188

Patients enrolled

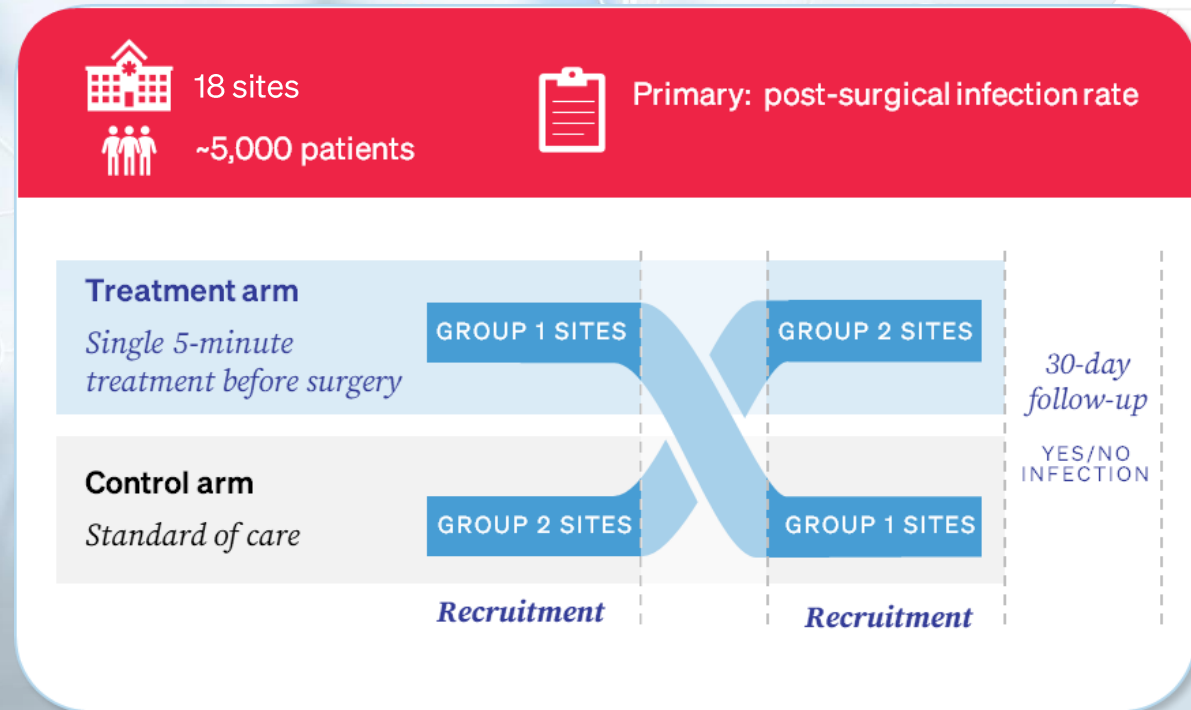
350,000+

Pieces of data

CLINICAL PROGRESS

LANTERN Phase 3

clinical study design

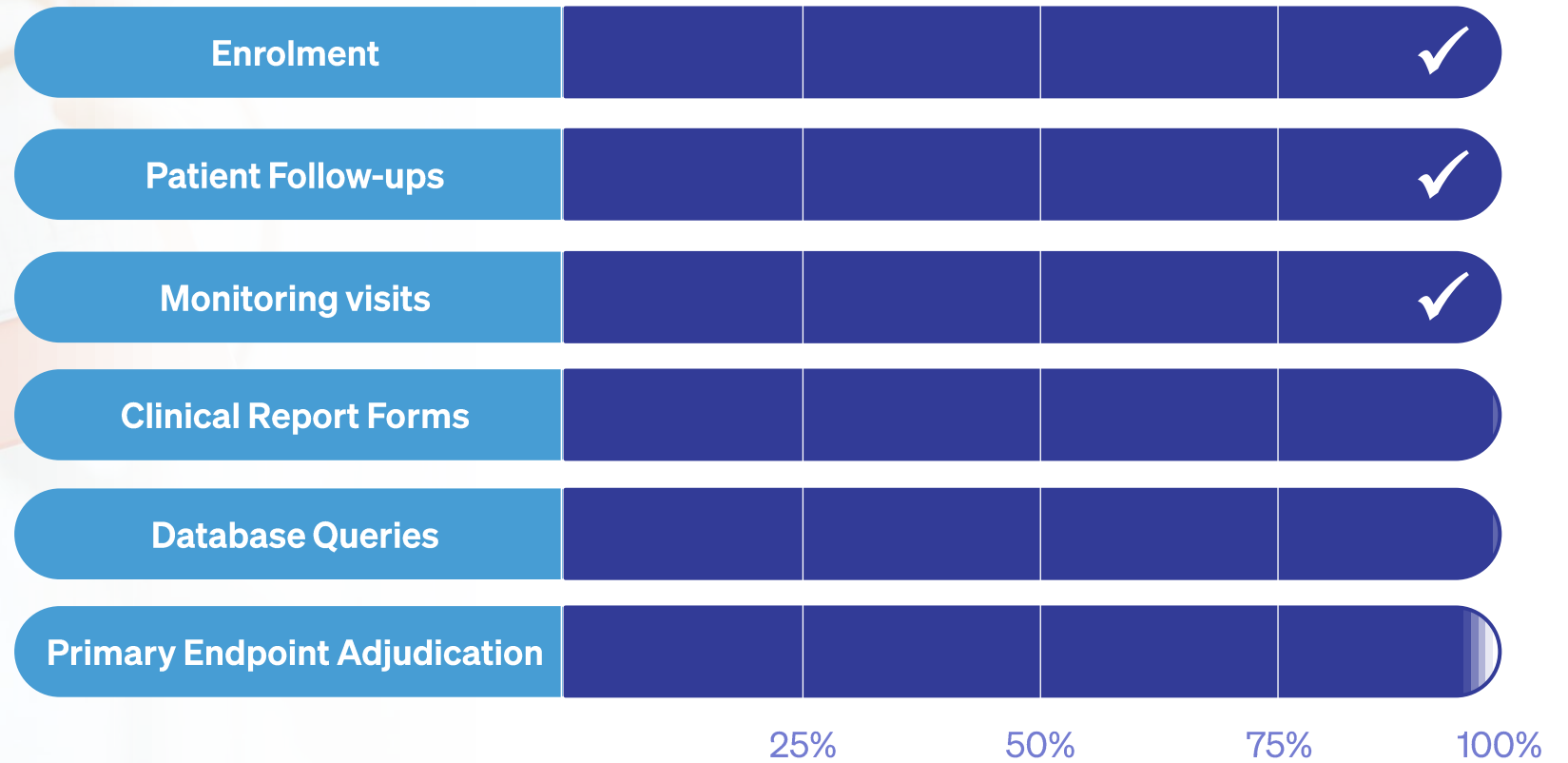


Analysis Population

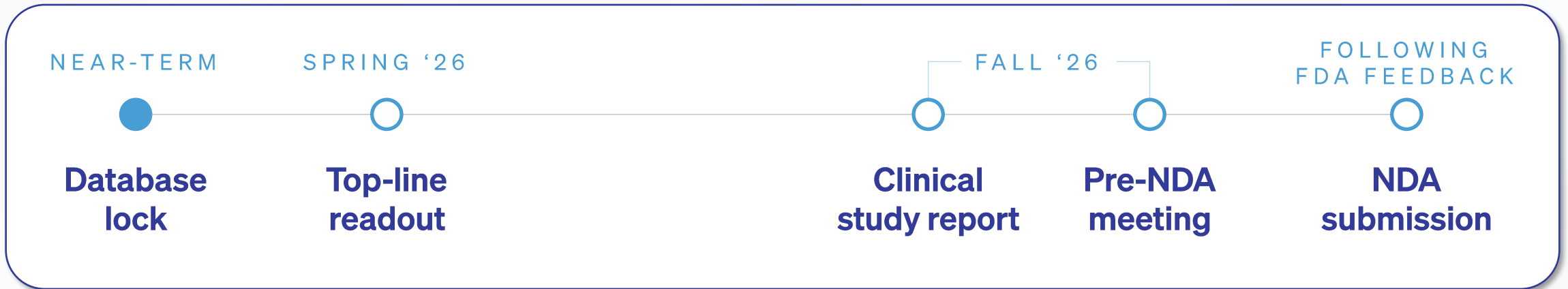
- ✓ Adults ≥ 18 years undergoing elective or emergency surgeries involving a significant skin incision, including:
 - Cardiac
 - Vascular
 - Breast
 - Neurosurgery
 - Orthopedic (incl. spine and 'clean' trauma)
 - ✓ Able to follow instructions, comply with protocol requirements, and participate in all required study visits
-
- ✗ Currently pregnant or lactating
 - ✗ Surgical indication of infection
 - ✗ Surgery within 90 days prior to enrollment
 - ✗ Any other anticipated surgery prior to patients' completion of the study
 - ✗ Use of any (non-Steriwave) pre-op nasal decolonization on day of surgery prior to surgery
 - ✗ Enrollment in concomitant investigational research study in the past 30 days
 - ✗ Inability to tolerate insertion of the nasal light illuminator due to nasal anatomy
 - ✗ Known allergic reactions to methylene blue or chlorhexidine gluconate
 - ✗ Any condition(s) that may impair subject's ability to provide informed consent or comply with study requirements

CLINICAL PROGRESS

Phase 3 nearing database lock



Advancing toward U.S. NDA submission



SMURF ICU study design

**Prospective, single-centre,
standard-of-care controlled pilot study**



4 months:
2 control then
2 intervention



Tertiary academic
hospital mixed medical-
surgical ICU



19+ years old
with expected ICU
stay 48+ hours

Control phase

*Standard ICU care
without nasal decolonization*

Intervention phase

*Steriwave treatment every
48 hours until discharge*

Nasal swabs obtained at ICU admission + every 4 days

Evaluation Criteria

Main feasibility outcomes:

- Recruitment rate
- Protocol adherence
- Safety
- Data completeness
- CDC/NHSN-aligned pneumonia adjudication

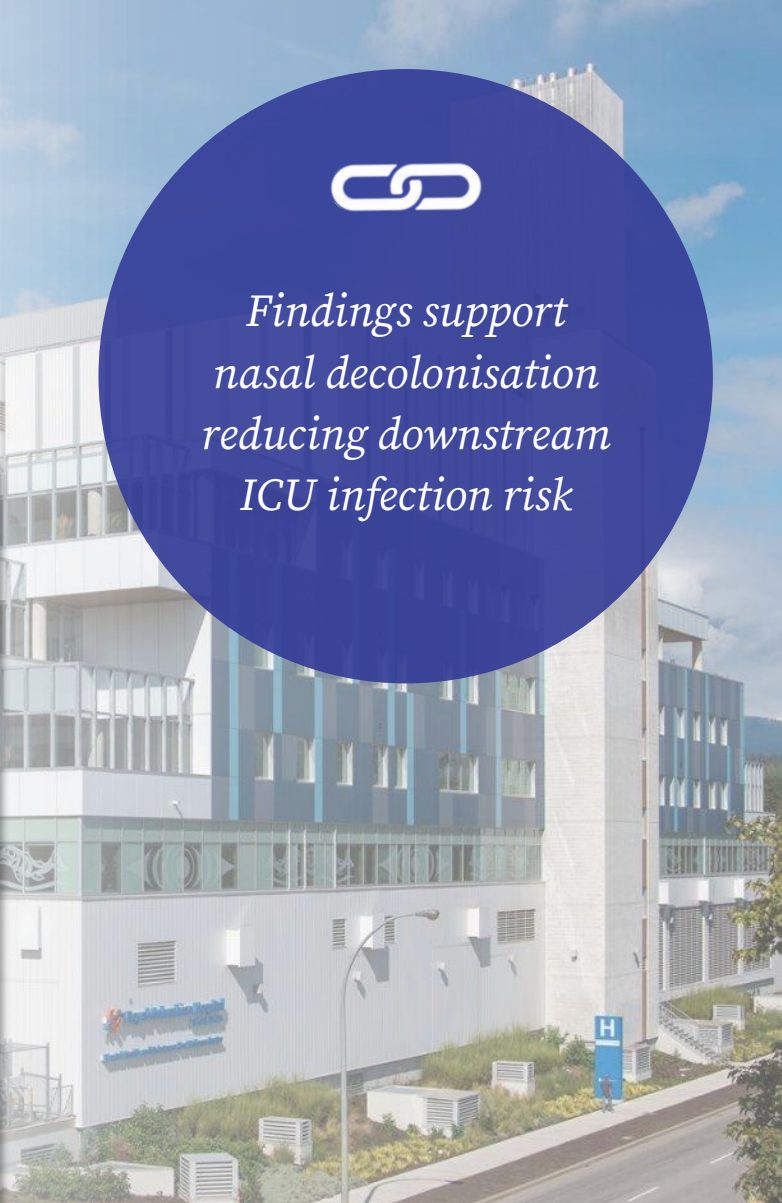
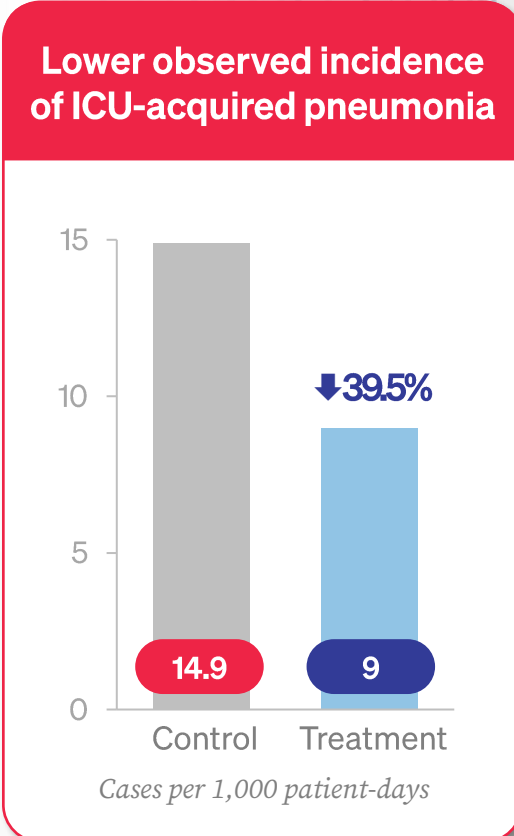
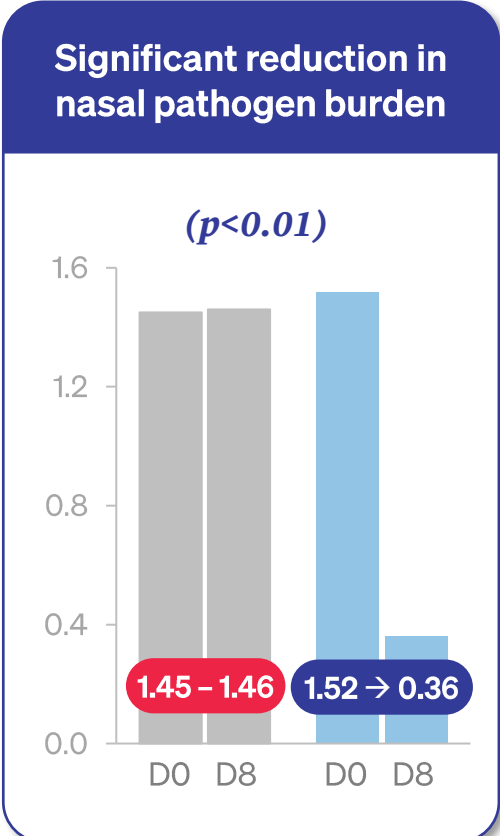
Exploratory outcomes:

- Nasal pathogen burden between control & intervention groups
- Incidence of adjudicated hospital- or ventilator-acquired pneumonia

ICU study findings

published in Critical Care


Findings support nasal decolonisation reducing downstream ICU infection risk



Royal Columbian Hospital
British Columbia, Canada

Land-and-expand strategy



+28%
Facilities YoY



37
Facilities

Pilots in **6** countries



Real-world impact *presented at key conferences*

↓78%

Spine

Université de Sherbrooke
(CHUS)

*Presented at 25th Annual Scientific
Conference of the Canadian Spine Society*

↓71%

Hip & knee

Mid Yorkshire Teaching
NHS Trust

*Presented at International Conference on Prevention & Infection Control
(ICPIC2025)*

£1.49 - £2.38

net savings per £1 spent

Major surgeries

York Health Economic
Consortium (YHEC)

Preparing for in-house fill & finish



Manufacturing readiness in progress



Volume readiness

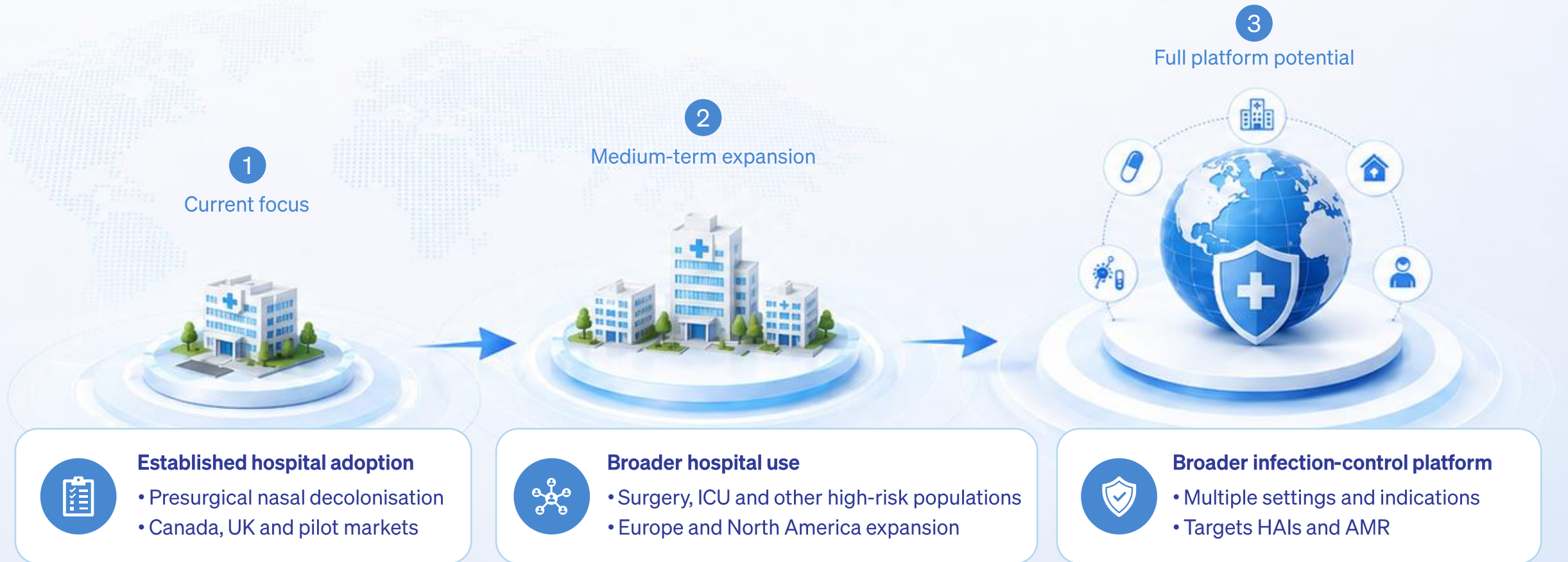


Process control



Supply resilience

From targeted hospital use to broad platform adoption



U P C O M I N G

Milestones supporting the next phase of growth



CLINICAL & REGULATORY

Advancing toward U.S. NDA submission

*Database lock, readout, study report,
FDA engagement*



EVIDENCE GENERATION

Expanding real-world & peer-reviewed data

*Hospital-use data, publications,
conference abstracts*



COMMERCIAL GROWTH

Building adoption across priority markets

*New customers, pilot launches,
expansion in existing systems*



OPERATIONAL READINESS

Preparing for future demand & scale

*Manufacturing suite upgrade, CMC,
supply-chain readiness*

Foundations for a pivotal year



**U.S. Phase 3 study
readout**

**U.S. regulatory
pathway**



**Expanding evidence
& customer base**

**Commercial readiness
in priority markets**



**Manufacturing
& scale-up readiness**

**ICU success
& expansion**

Thank you
for joining us