

BRINGING ADVANCED ENERGY TO ENDOSCOPY

Growth and Innovation Forum 11 February 2020



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Focused on the Emerging Field of Surgical Endoscopy to perform clinical procedures minimally and non-invasively

**Creo Medical** utilises **patented technology** combining microwave and bi-polar radio frequency energy via its CROMA Advanced Energy platform

**Enabling** a range of **miniature endoscopic devices** with precise cut, coagulation and ablation capability to treat as many conditions as possible

Aiming to exploit a **Paradigm Shift** in endoscopic surgery

**Saves time and cost** as both procedure time and hospital stay are reduced vs alternatives

# **Potential to Change the Treatment Pathway** due to less risk of infection, ability to treat conditions what are currently untreatable

and moves operating room treatment to outpatient treatment

# The overall aim:

Significantly Improved Patient Outcomes!



UNIQUE POSITION THAT HAS BEEN DEVELOPED

Creo delivers **advanced Bi-polar RF and Microwave energy** into tiny devices that enable minimally invasive endoscopic and laparoscopic procedures

Combined **Bi-polar RF** and **Microwave advanced energy generator** – delivered through a **single port** into a suite of **multi and single modality**, matched devices:

- the smallest flexible microwave ablation needle in the world\*
- the only Bi-polar flexible RF vessel sealer in the world\*
- the only Bi-polar RF blade in existence in the world\*
- the only non-stick, microwave haemostasis device in the world\*

Utilising **higher frequency microwave energy** that provides **the most accurate** haemostasis and ablation\*

All based on Heavily Patented developed Platform Technology

\*These statements are made based on "expert market knowledge".

### CROMA ADVANCED ENERGY PLATFORM

### **Platform Technology**

**176** Worldwide patents granted, **88** patent families and **567** patents pending<sup>1</sup>



Matched energy and device performance, ultimately providing a toolbox of energy-optimised devices



\* -Internal nomenclature

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**RESECTION AND HAEMOSTASIS DEVICES** 

".... your device is like a harmonic scalpel at the end of a scope, this is the holy grail of therapeutic endoscopy!."

#### Dr Rob Hawes MD

Florida Hospital, Orlando Center for Interventional Endoscopy

"Speedboat RS2 would transform my repertoire" Mr Mike Williamson

Endoscopist, Royal United Hospital Bath

## "....a great start point for the new user and a fundamental tool for the experienced operators"

**Dr. Zacharias P. Tsiamoulos MBBS, PHD** Endoscopy Clinical Lead, GI Endoscopy East Kent University Hospitals Trust, Honorary Consultant in Endoscopy St Mark's Hospital/Academic Institute

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Endoscopy Clinical Lead, GI Endoscopy East Kent University Hospitals Trust, Honorary Consultant in Endoscopy St Mark's Hospital/Academic Institute

Dr. Zacharias Tsiamoulos is a pre-eminent consultant within his field. He has a vast knowledge and passion for his work and is held in very high regard by his peers. He is currently the endoscopy clinical lead at East Kent Hospitals University NHS Foundation Trust.

### **Bi-Polar RF and Microwave** resection and haemostasis devices:

Resector (Bi-polar RF and MW)



### **SPEEDBOAT**

"You don't have to be an expert to use Speedboat" Dr Francisco Jose García Fernández. Spain

> COLORECTAL CANCER WORLDWIDE:

16m screening colonoscopies are performed per annum in the US<sup>1</sup>

**1.1m** will find a lesion which should be treated<sup>2</sup>

Approximately 50% of those lesions are surgically removed<sup>1</sup>

But traditional colorectal surgery is associated with a 6% mortality rate at 30 days<sup>3</sup>

INTEGRATED INJECTION NEEDLE no instrument exchange required ROTATION orientation in any plane CRED **PROTECTIVE HULL** 4 reduces risk of muscle damage **MICROWAVE COAGULATION BIPOLAR ELECTRODES** precise lateral and forward dissection

1. US surgical procedure volumes 2010, Millennium Research, RPUS43SV10, February 2010 2. Gastrointest Endosc 2014;80-133-43 3. Ann R Coll Surg Engl 2011; 93: 445-450

controlled haemostasis

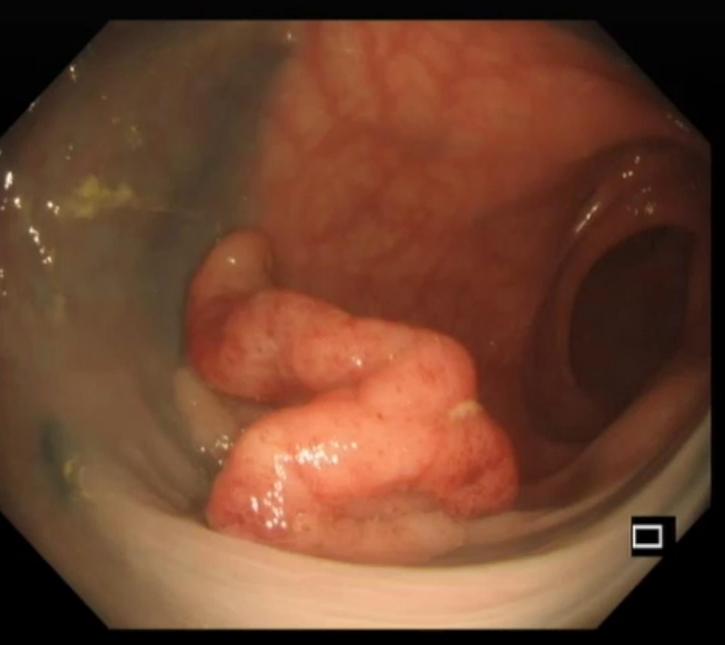


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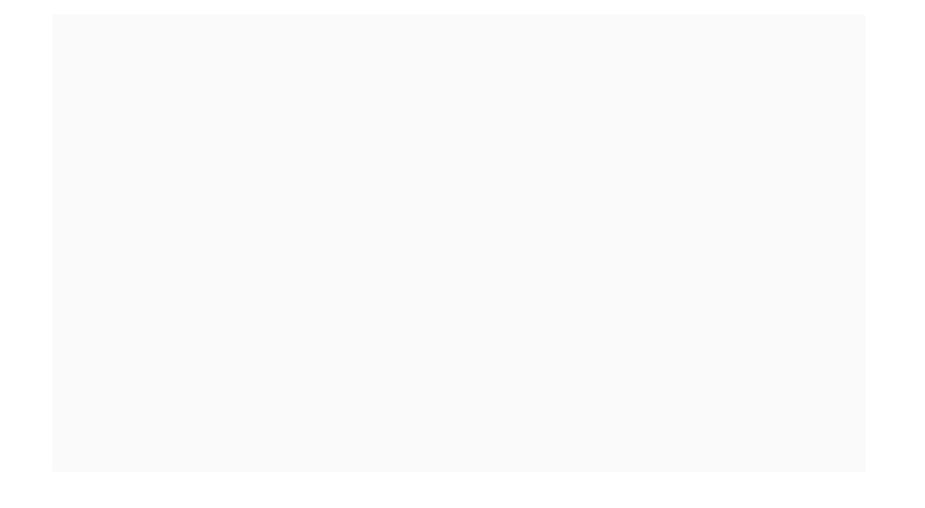
### THE ALTERNATIVE

• Up to 30cm of bowel removed and the two sections re-joined

- Change to the anatomy of the patient never the same again in terms of function
- Potential stoma bag for up to 6 months or even life
- Other associated effects such as depression
- Some patients may not tolerate surgery
- Typically between 3-4 hours of treatment under general anesthetic with associated risks
- Potentially up to 5 days hospital stay
- In one day, 3 patients treated under sedation with Speedboat<sup>®</sup> saved ~12 hours of operating theatre time and up to 15 inpatient days



Resector





Haemostasis probe

### MICROWAVE ABLATION DEVICES

# ".... anyone with Endoscopic Ultrasound training will be able to use this device."

#### Dr Shyam Varadarajulu MD

Medical Director of AdventHealth Orlando Center for Interventional Endoscopy

".... Can you imagine the utility of this? If we can navigate to lesions, sample them, but also ablate them all in one go? I think that will be completely revolutionary for lung cancer management"

#### **Dr Pallav Shah**

Consultant Pulmonologist Royal Brompton Hospital, UK /Academic Institute

**Liver Cancer -** is the **4th** biggest cause of cancer related deaths worldwide with ~780,000 deaths annually.

**Pancreatic Cancer** - during 2019 an estimated **56,000** Americans will be diagnosed with pancreatic cancer in the U.S., and some **45,750** are expected die.

**Highest mortality rate** of all major cancers. **91%** of pancreatic cancer patients will die within five years of diagnosis – only **9%** will survive more than five years. **74%** of patients die within the first year of diagnosis.

**Kidney Cancer** is increasing at one of the highest rates globally (est. 22% growth 2014-2020) with over 400,000 instances per year.

- 1. WHO, IARC Cancer Today Online Analysis 2018.
- 2. https://www.cancer.org/cancer/pancreatic-cancer/about/keystatistics.html.
- 3. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3546485/
- 4. European Association of Urology, Scientific & Policy Briefing on Kidney Cancer.

### Narrow Soft Tissue Ablation Device:



### **Flexible Ablation Device:**



#### Shyam Varadarajulu

*Medical Director, Center for Interventional Endoscopy Florida Hospital, Orlando, Florida* 

Dr. Varadarajulu performs approximately 2,500 EUS procedures per year. He specializes in the treatment of complex pancreatic and biliary disorders with particular expertise in Endoscopic Ultrasound and Therapeutic ERCP. Dr. Varadarajulu currently serves as Medical Director of CIE and Professor of Medicine at the University of Central Florida. He has authored more than 165 professional articles, 20 textbook chapters, and is the editor of the textbook, Endosonography.

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Narrow Soft Tissue Ablation Device

Flexible Ablation Device



### CONCLUSION

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- Creo's CROMA Advanced Energy platform and product development enables a Razorblade model - with multiple devices over multiple markets and multiple indications
- Continue to drive Creo's Clinical Education Programme and establish Training Centre's of Excellence in core markets
- Focus on advancing the numbers of Power Users in key countries, initially focusing on US
- Manufacturing capability established and positioned to scale
- On track to accelerate roll out of products, increased training and market seeding via multiple distribution partners, and further regulatory clearances
- Recent fundraise of ~£52m enables Creo to accelerate commercialisation in US and Europe
- Innovation remains at the heart of Creo



# ANYTHING IS POSSIBLE WITH THE RIGHT APPROACH