

Investor Presentation

March 2019 (NZX:TRU)



INVESTMENT SUMMARY

TRUSCREEN®

At TruScreen we are building our device, experiencing sales momentum in key markets through a global distribution model and growing year on year.

Significant opportunity in developing nations: NZD 166M addressable market p.a.

Commercial stage cervical cancer screening technology

Only device of its type – CE Mark approved for primary screening

Clinically-validated & well-positioned for developing nations



TRUSCREEN'S MISSION

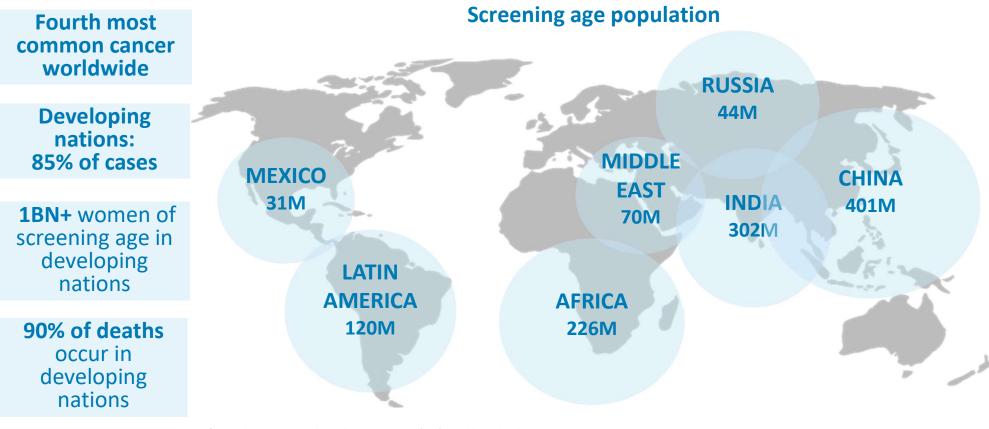
C TRUSCREEN®

To provide primary screening for cervical cancer in developing nations via the TruScreen device – the latest single-visit, real time screening technology solution.



CERVICAL CANCER AROUND THE WORLD





Ref: Based on U.S Central Intelligence Agency (CIA) World Factbook

CERVICAL CANCER IS A MAJOR PUBLIC HEALTH ISSUE

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DEVELOPING NATIONS

- 85% of cervical cancer cases
- Do not have HPV vaccination programs
- No or minimal screening programs
- Limited lab infrastructure
- Limited diagnostic technicians

DEVELOPED NATIONS

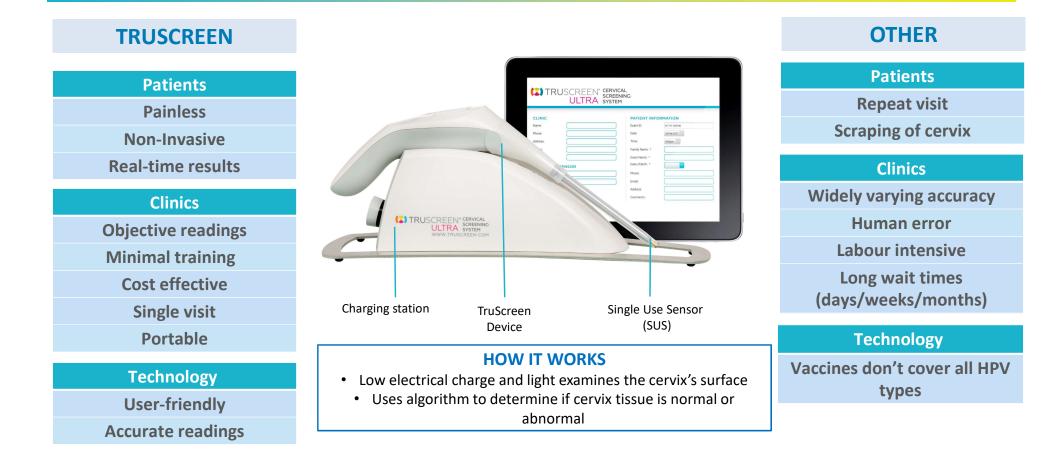
- Current vaccine programs only cover HPV types that cause 70% of cervical cancer
- Some countries scaling back HPV vaccines (e.g. Japan)
- At least 80 years away from cervical cancer elimination
- Screening guidelines: every 2-5 years

Better screening solutions for cervical cancer are needed in developing nations.

TruScreen fulfils this market need.

TRUSCREEN VS OTHER SCREENING METHODS

TRUSCREEN®



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COMMERCIAL STRATEGY

TARGETING DEVELOPING NATIONS

• Lack lab infrastructure

- High prevalence of HPV & cervical cancer
- Governments investing in women's health
- Market need for portable, accurate screening technology

¹ Based on SUS sales x screening age population

MARKET ENTRY & DEVELOPMENT

Build awareness

- Key Opinion Leaders engagement
- Medical conferences
- Clinical trials/studies

Expand footprint

- Local distributor strategy
- Public health initiatives
- Partnerships with Non-Government Organisations and Government agencies

Technology transfer to key markets

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SUCCESS SO FAR

Strong sales momentum

- Sales H1 FY 19 > Total Sales FY18
- Annuity revenue with SUS reorders

Global distribution

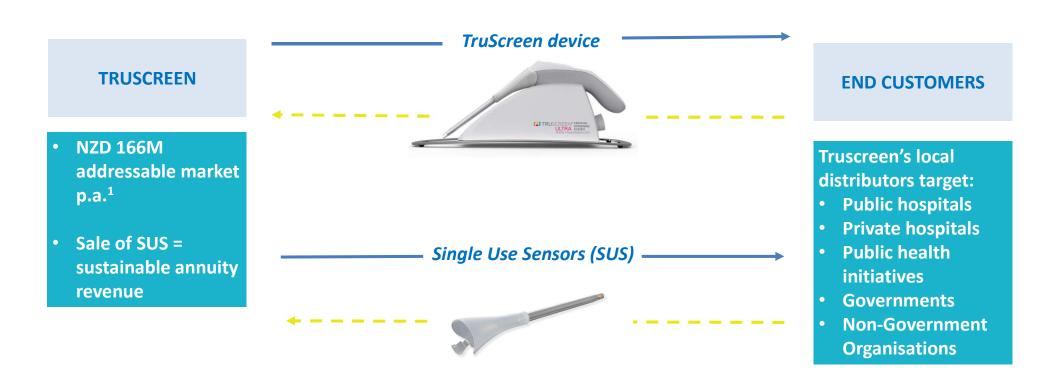
- 31 countries
- Pilot public health initiatives in key markets

Research and Development

 Second generation device in market

BUSINESS MODEL

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¹ Based on TruScreen achieving 5 per cent market share of developing markets' cervical cancer screening age population screened once every three years

COMMERCIALISATION JOURNEY AND MILESTONES

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2014 - Listing	Nov on NZAX	2016 - Apr CE Mark fo generatior	or second	2017 - Dec CFDA approv second gener device		2018 - Jul Commence large scale p with China (and COGA	oilot	2018 - Oct 523% sales growth in H	1	2019 – Feb New distribu agreement i Russia	
	2015 - Sep Approval for Mexico mar		2017 - Ma Gained In market		2018 - Jul New Australia production fa fully operatio	cility	2018 - 4 HIV Afri Initiativ	ican	2018 Migra	- Dec ation to NZX	

KEY MARKET: CHINA

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FACTS



Screening programs

• Various programs run by Central, State and Municipal governments, plus charities and major state owned enterprises (e.g. Sinopec)

Market presence

- CDC (Centre for Disease Control) 20,000 women in pilot program report due 2019
- COGA (Chinese Obstetricians & Gynaecologists Association) screen 20,000 women in public hospitals. Commenced Nov 2018, completion in 2020
- Xinjiang province Western China (190 hospitals)
- Hospital usage of SUS: 150/m, with some using 1,000/m

Pipeline

- KOL support from COGA
- CDC program: Adoption in 3,000 women and children's hospitals
- COGA program: Open up 200 public hospitals in 2019
- Xinjiang: 100 devices in 2019 and 190 in 2020 for government screening program up to 2M women every two years
- Installation in 50 'Breast and Cervical Cancer Centres' in rural areas in 2019
- 'Medical Checkup' centres target at least 50 in 2019, and then expand

World's biggest cervical cancer market (Screening age population: 400M)

71% of TruScreen sales

Initial distribution agreement signed 2014

KEY MARKET: MEXICO

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FACTS



Screening programs

- Split between Central Govt and State Health Secretariats, public Insurance agencies (ISSTE and IMES), armed forces and state owned monopolies – e.g. Pemex
- New central government is conducting an overhaul of the National Health administration and TruScreen will adjust its plans to suit

Market presence

- Installed in National Cancer Institute
- Installed in 'Health Train', ISSTE, Pemex and state-owned hospitals

Pipeline

- Central and State Government Health Secretariats
- National health insurer, ISSSTE 500,000 pap tests p.a. (installed in 4 ISSTE hospitals)
- National oil monopoly, PEMEX 60,000 pap tests p.a. (installed in 2 Pemex hospitals)
- Private lab and clinic chains

31M women of screening age

12% of TruScreen sales

Initial distribution agreement signed 2015

KEY MARKET: AFRICA

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FACTS



Screening programs

- Step 1: National Aids Council of Zimbabwe
- Step 2: Use this for both government and NGO support for other projects in East Africa Malawi and Mozambique submission being prepared
- Collaborating with DYSIS Medical and WISAP Medical Technology GmbH

Market presence

- TruScreen selected Zimbabwe NAC program for AIDS affected women
- Ministry of Health supported aid application to use TruScreen for a national screening program

Pipeline

- Evaluated by National Aids Council of Zimbabwe
- Target East and Southern African countries with high HIV prevalence

227M women of screening age

13.1M women suffer from HIV

HIV+ women up to **X5** increased risk of developing cervical cancer

KEY MARKET: RUSSIA

FACTS

Screening programs

- No central government screening programs
- State and municipal governments conduct ad hoc programs

Market presence

- Distribution agreement with IMSystems with initial orders in Feb 2019
- Advanced payment of USD \$250k

Pipeline

- Evaluated by ROSZDRAVNADZOR (Russia FDA)
- Major target is State Government Health Systems, starting with St Petersburg
- Private clinics and hospitals

44M women of screening age

Initial agreement in 2015

New agreement distribution agreement signed in Feb 2019





KEY MARKET: INDIA

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FACTS

Screening

- Split between Central Govt and State Health agencies and govt institutions Armed Forces, State Rail et al.
- Central government has mandated that all women over 25 be screened for breast and cervical cancer

Market presence

- Engaged major distributor (KLAB) 700 employees
- Commenced marketing in four states Delhi NCR, Madhya Pradesh, Haryana and Maharashtra



Initial distribution agreement signed 2017

Sales commenced in FY18

Pipeline

- All India Institute of Medical Science (AIIMS)
- Central and state governments (aim for inclusion in the 2019 National Ministry of Health Budget)
- Armed Forces Hospitals and Armed Forces Medical Research Centre
- Major Private Hospital Groups (e.g Fortis, Apollo)

MANUFACTURING

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Current Capacity

- Established EOA (Electrical Optical Assembly) manufacturing facility at CSIRO
- Current capacity: 100 units/month
- Can be doubled in short time
- R&D tax offset

Future capacity

- Up to 200 units/month
- ~50% improvement in gross profit per device
- Cost reduction initiatives:
 - Bring high tech processes in-house
 - Technology transfer to key markets 'local device' for domestic registration



CORPORATE AND FINANCIAL OVERVIEW

TRUSCREEN®

Snapsh		TRUSCREEN OVERVIEW (NZD)			
(YOY growth - against M Sales growth	SUS sold	Market cap	\$34.M		
175%	150,000	Share price	\$0.16 (28 February 2019)		
		Cash position	\$1.3M (as at 28 February 2019)		
TruScreen devices sold	TruScreen distributor network	Significant	Directors and management hold Consolidated Nominees	28.9% 13.62%	
268	31 countries	shareholders	Browns Island Holdings Ltd Waitara Trustees Limited	9.22% 7.67%	

FINANCIAL DATA

TRUSCREEN®

KEY FINANCIALS NZD (millions)	FY19 Forecast	FY18 Actual	FY17 Actual	FY16 Actual	% Change FY19/FY18
Revenue	3.0	2.2	1.4	1.8	+36%
Sales	2.2	0.8	0.6	0.5	+175%
EBITDA	(3.1)	(3.6)	(3.0)	(1.3)	+14%
Net Assets	11.0	11.6	14.3	14.1	-
Cash and Cash Equivalents	1.2	1.2	3.7	2.3	-

EXPERIENCED EXECUTIVE TEAM

MARTIN DILLON CEO







- Chartered accountant with 30 years financial management and leadership
- Company Secretary for TruScreen

Board of Directors with extensive commercial experience

Medical Advisory Board Experts in gynaecology and vulvovaginal disease

Executive team supported by a

team of 7 key personnel with

significant scientific and engineering experience.

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• Founding CEO of TruScreen since initial commercialisation

• 12 years in sales and marketing of women's health products

DR JERRY TAN GM INTERNATIONAL BUSINESS DEVELOPMENT



Qualified gynaecologist

experience

- Extensive experience in China, and East Asia
- Oversees distributors, market evaluation and clinical trials

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UPCOMING MILESTONES

Market development

- Deepen market penetration via:
 - Endorsement from Key Opinion Leaders
 - Government adoption
 - Major screening programmes
- Build funding organisation support for TruScreen programmes
- Enhance distribution networks

Manufacturing

- Expand capability
- SUS manufacturing technology transfer

Build annuity revenues

Transition early adopters to commercial users

Further regulatory approvals and clinical trials



TRUSCREEN®

CONTACT

www.TruScreen.com

Tony Ho Chairman Martin Dillon Chief Executive Officer Guy Robertson Chief Financial Officer

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APPENDIX

BOARD OF DIRECTORS WITH EXTENSIVE EXPERIENCE

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Tony Ho – Chairman

- Non-executive chairman of Greenland Minerals (ASX: GGG) and Bioxyne (ASX:BXN)
- NED and Chairman of the audit committee of Credit Intelligence (ASX:CI1)
- Past NED of Hastings Technology Metals (ASX:HAS) and Brazin (ASX:BRZ)



Christopher Horn – NED

- Chair of Audit. Finance and Risk Committee
- 20 years as a partner of KPMG and its predecessor firms.



Con Hickey – NED

- Member of Audit, Finance and Risk Committee
- Senior healthcare executive with 30+ years experience in international and medical device businesses







- Member of Medical Advisory Board
- Experienced obstetrician and gynaecologist •
- International authority of lower genital tract pre-cancer and cancer



Robert Hunter – NED

- 35 years commercial experience
- Past Director and/or Chairman of public and private companies, including in biotechnology and funds management sector



Chris Lawrence – NED

- Experienced life science and biotech investor
- Strong experience in high growth companies, . particularly in biotech sector

EXPERIENCED MEDICAL ADVISORY BOARD

TRUSCREEN®

Professor Neville Hacker AM – Chairman *Clinical Advisory - Professor of Gynaecology*

Professor Hacker is the director of the Gynaecological Cancer Centre, Royal Hospital for Women in Sydney and Professor of Gynaecological Oncology at the University of New South Wales.

He is a past President of the Society of Pelvic Surgeons. He is a past President of the International Gynaecological Cancer Society, former Chairman of the Oncology Committee of the RANZCOG, and a former Chairman of Examiners for Gynaecologic Oncology, RANZCOG. **Professor Ronald William Jones CNZM** *MB ChB, MD (Otago), FRCS(Ed), FRCOG, FRANZCOG, FAOFOG(Hon)*

Professor Ron Jones is a New Zealand medical graduate. Following 6 years postgraduate training in England he returned to the National Women's Hospital in Auckland, New Zealand where he was a Visiting Consultant Obstetrician & Gynaecologist for 38 years and latterly a Clinical Professor at the University of Auckland.

He has published extensively in the field of lower genital tract pre-malignancy and has lectured in over 30 countries. Professor Jones is a past President of the International Society for the Study of Vulvovaginal Disease and a past Chairman of the Scientific Committee of the International Federation of Cervical Pathology and Colposcopy.

Colonel (Dr.) Michael J. Campion RAAMC, CStJ, KM, KCHS, KLJ

Colonel (Dr.) Michael J. Campion is a Senior Staff Specialist and Head of the Pre Invasive Clinic at the Gynaecological Cancer Centre of the Royal Hospital for Women in Sydney and is a Conjoint Associate Professor, School of Women's and Children's Health, at the University of New South Wales. He has over 30 years' experience as a qualified medical practitioner and over 20 years of experience as an expert colposcopist.

In addition, Dr. Campion is the Director, Health Services Army Reserve – Eastern Region for the Royal Australian Army Medical Corps and is both a Board member and National Hospitaller, St John Ambulance, Australia. Dr. Campion has written numerous peer reviewed papers and chapters on cervical cancer, including papers on TruScreen.

CLINIC DATA

TRUSCREEN®

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IRUS	UKEEN	PERFU	RMANCE

Interim results RHW (2017): Excellent. 93% Negative Predictive Value Interim results 6 teaching hospitals in China (2018): T1 Sensitivity: 90.4%; Specificity: 75.3%

TruScreen1 at Guadalajara (2016)	Sensitivity to CIN2+ 78%	Specificity 64%
TruScreen1 at Singer et al (2003)	Sensitivity to CIN2+ 70%	Specificity 80%
TruScreen1 at Li Xia et al in China (2011)	Sensitivity to CIN2+ 81.7%	Specificity 79.6%
TruScreen1 at Guangdong China (2010)	Sensitivity to CIN2+ 78.8%	Specificity 74.4%
TruScreen1 in Shandong China (2010)	Sensitivity to CIN2+ 75%	Specificity 85%

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PAP and HPV in T	TruScreen's markets – Sensiti	vity to CIN2+

Guadalajara (2016)	HPV DNA 56%	PAP 36%
TruScreen1 in Hainan China (2011)		PAP 71.3%
TruScreen1 at Guangdong China (2010)		PAP 42.2%
TruScreen1 in Shandong China (2010)		PAP 43%

INTELLECTUAL PROPERTY

- TruScreen uses trade secrets to ensure protection against IP infringement
- Enumerated in the appendices to the Marrakesh Agreement which established the World Trade Organisation

IP coverage:

- Electro Optical Assembly
- Firmware
- Circuit Design and Printed Wire Assemblies (electronics)
- Single Use Sensor
- Algorithm
- Trademarks
- All testing protocol and manufacturing specifications
- China:
 - Patent Apparatus for Tissue Recognition Using Multiple Measurement (ZL201210439914.9)
 - Trademarks for "TruScreen" and "SUS" (English and Chinese equivalent)



Disclaimers

This presentation should be viewed in conjunction with TruScreen's Financial Statements for the 12 months to 31 March 2018 and the accompanying NZX release. The information presented is a snapshot and does not contain supporting information necessary to make an investment decision. It is not intended to act as a recommendation to acquire TruScreen shares. There can be no assurance that actual outcomes will not materially differ from the forward looking statements presented. A number of important factors could cause actual results or performance to differ materially from the forward-looking statements. The forward-looking statements are based on information available to TruScreen as at the date of this presentation. Except as required by law (including the NZAX Listing Rules), TruScreen undertakes no obligation to provide any additional or updated information whether as a result of new information, future events or results or otherwise. TruScreen, its advisers, affiliates, related bodies corporate, directors, officers, partners, employees and agents make no representation or warranty, express or implied, as to the currency, accuracy, reliability or completeness of information in this presentation.