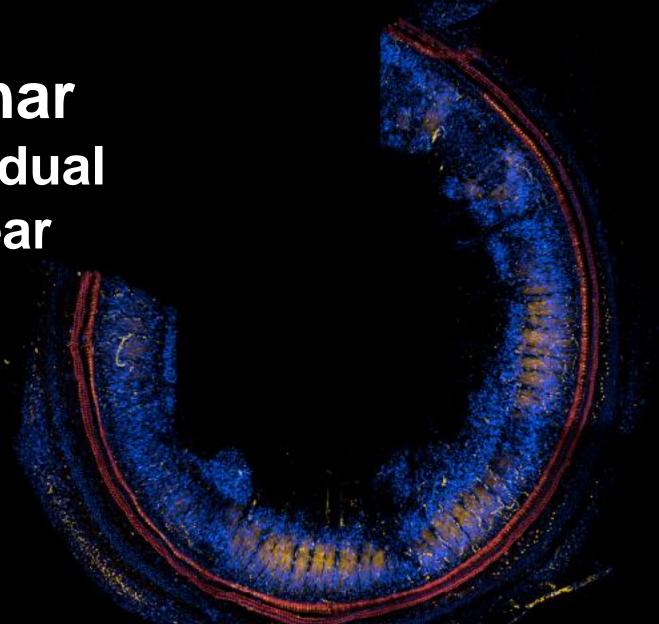


Sensorion KOL Webinar SENS-401 to Prevent Residual Hearing Loss after Cochlear Implantation

July 5, 2023



DISCLAIMER

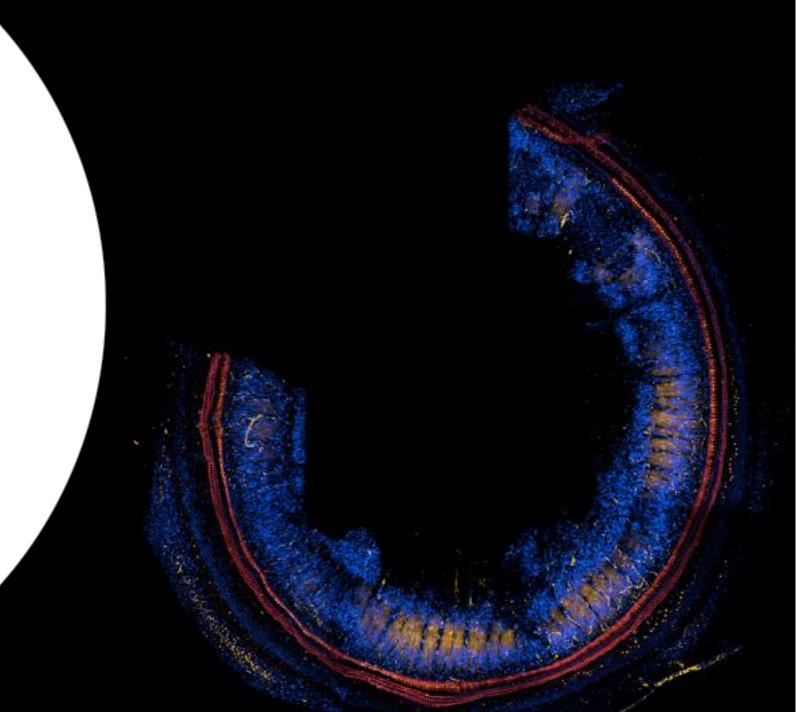
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WELCOME AND INTRODUCTION

Nawal Ouzren
CEO, Sensorion

July 5, 2023



Agenda

Nawal Ouzren – Sensorion

Welcome and Introduction

Yann Nguyen – Pitié Salpêtrière Hospital

Why Hearing Preservation is Important for Cochlear Implantation

Géraldine Honnet – Sensorion

Sensorion's Phase 2a Study Preliminary Results Overview

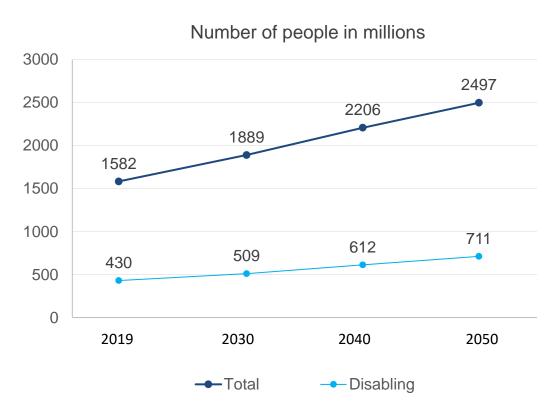
A Franchise to Transform Lives & Connect People

Our vision is to help people with inner ear hearing disorders to live life with unlimited connections

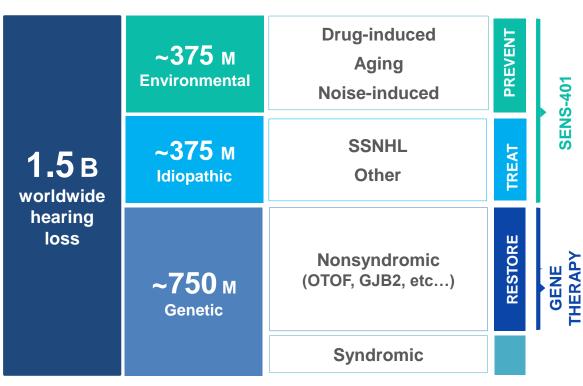


Hearing Loss is a Massive Global Health Issue

Hearing loss is the most frequently occurring congenital sensory deficit, the largest modifiable risk factor for dementia and has a significant impact as people live longer.¹⁻⁴



^{*}Chart adapted from World Report on Hearing. Geneva: World Health Organization; 2021.



Sources: Petit C et al., 2001, Snoeckx RL et al., 2005, lizuka 2015 Human Molecular Genetics, World report on hearing. Geneva: World Health Organization; 2021

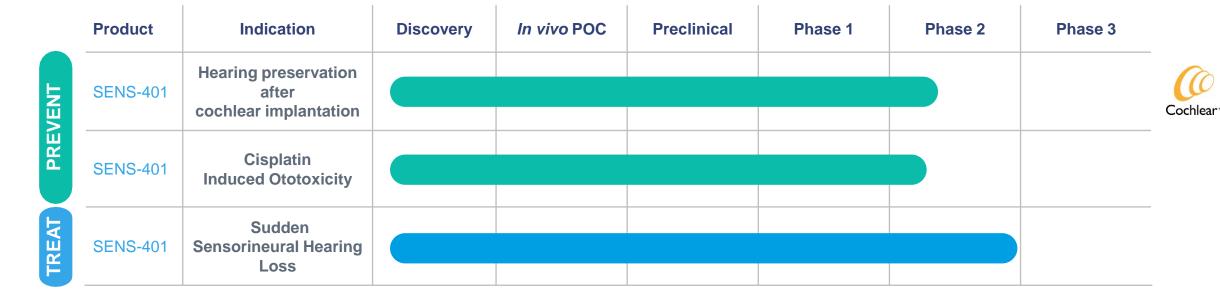
SENS-401, Three Key Indications for Treatment and Prevention

SENS-401 is a first-in-class drug aiming at treating or protecting against inner ear lesions that lead to sensory hair cell loss and nerve degeneration

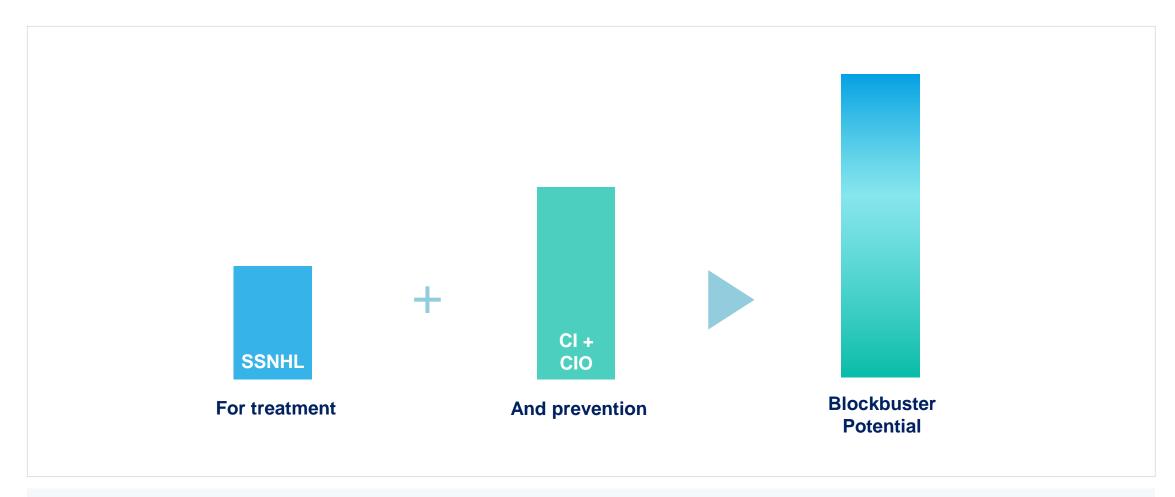
7

SENS-401 demonstrated hearing loss and hair cell protection in different preclinical models

Protected by a solid intellectual property with two patent families.
Orphan Drug Designation from EMA & FDA
Pediatric Investigation Plan approved by EMA



SENS-401 Has Enormous Potential and Enables our Franchise Vision





SENS-401 SSNHL clinical data and insight <u>derisked</u> further development of SENS-401 in other indications

SENS-401 Cl preliminary data supports findings in SSNHL

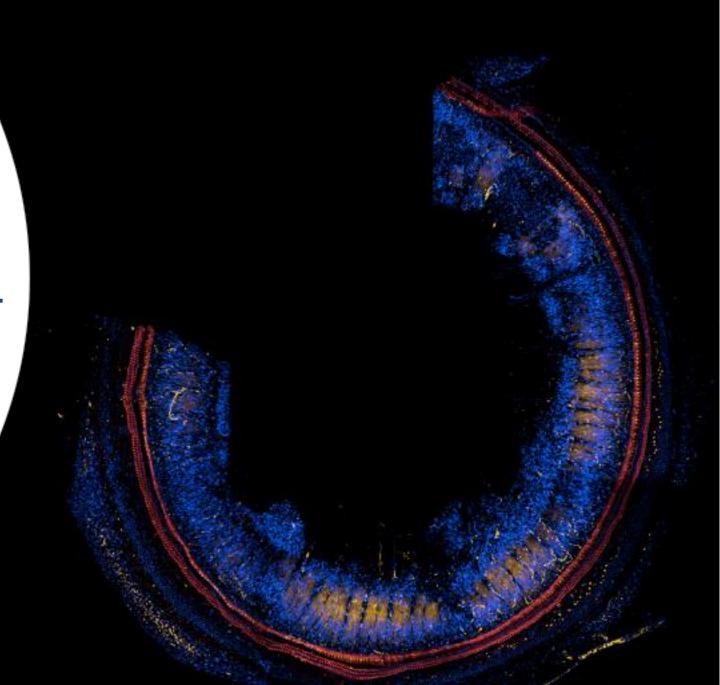




THE IMPORTANCE OF RESIDUAL HEARING PRESERVATION

Professor Yann Nguyen ENT Surgeon Pitié Salpêtrière Hospital, Paris, France

July 5, 2023



Conflict of Interest

Laboratory and Medical department Research agreements:

Oticon Medical, Cochlear, MEDEL

Consultant:

Collin Médical

Sensorion

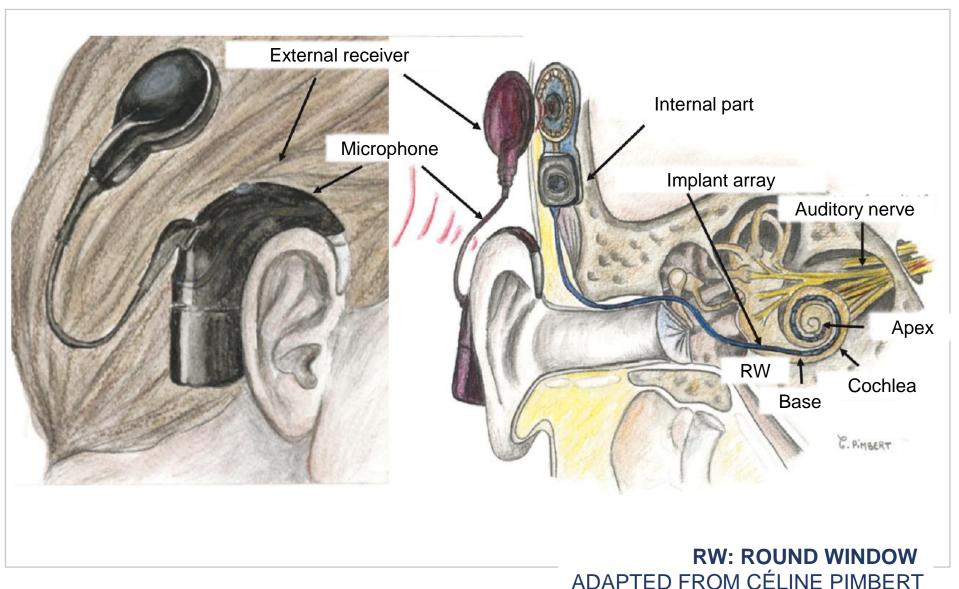
Cilcare

10

Principal investigator:

Sensorion's study of SENS-401 with cochlear implantation

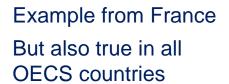
Cochlear Implantation (CI): a Remarkable Technology to Rehabilitate Severe to Profound Hearing Loss

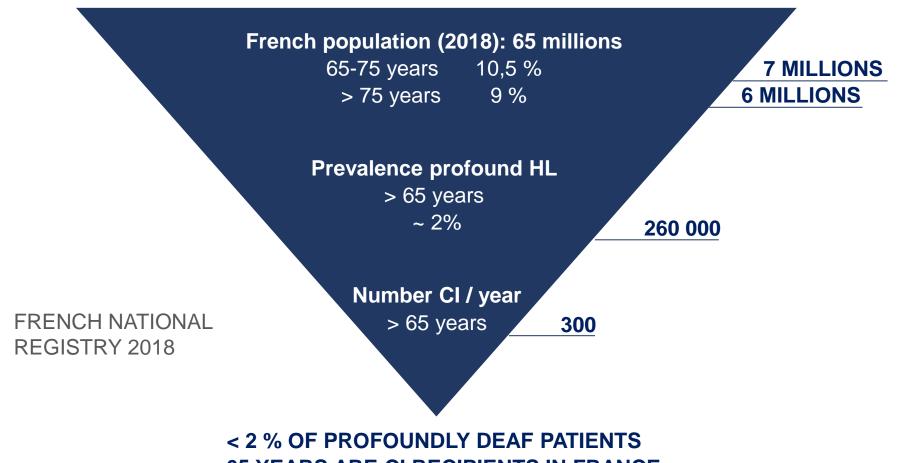




Cochlear Implantation (CI): a Remarkable Technology to Rehabilitate **Severe to Profound Hearing Loss**

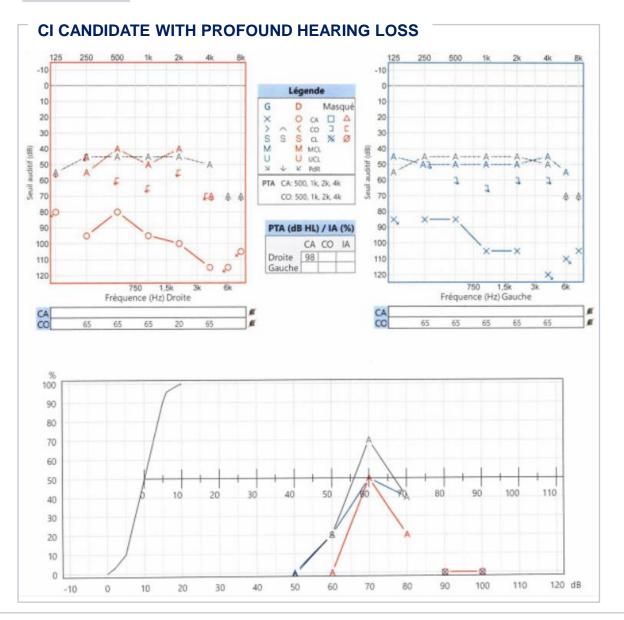
There are already one million patients in the world using cochlear implants but it would require many more to address the unmet medical need

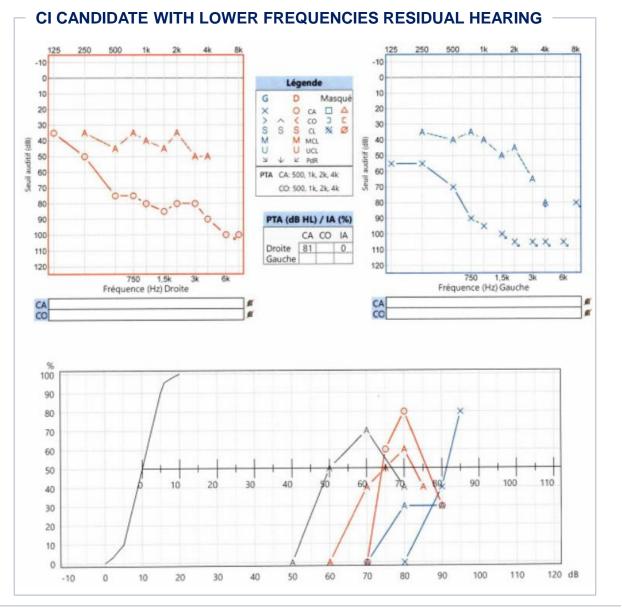




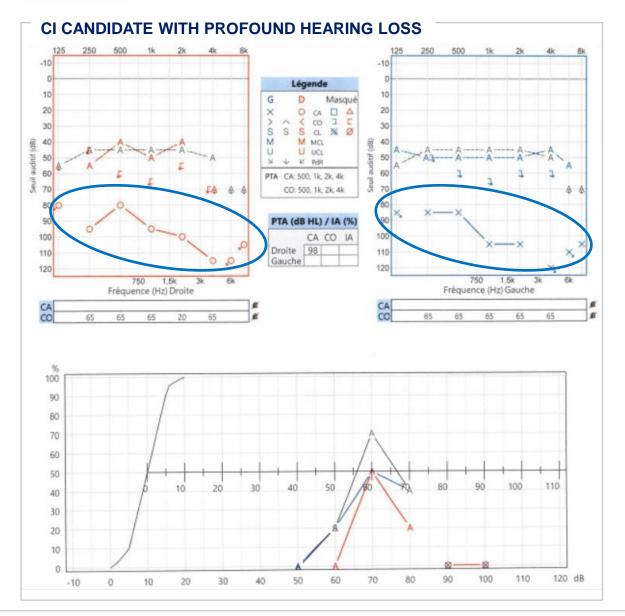
> 65 YEARS ARE CI RECIPIENTS IN FRANCE

Residual Preoperative Hearing Varies among CI Candidates

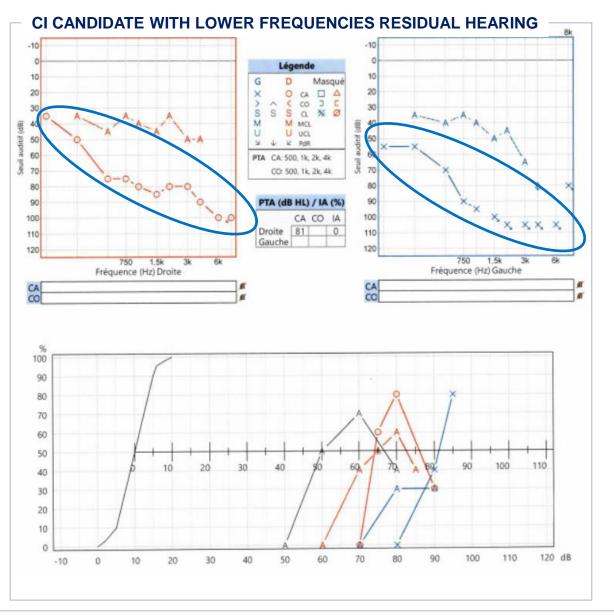




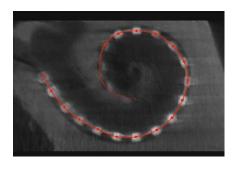
Residual Preoperative Hearing Varies among CI Candidates



14



Preserving Residual Hearing is Extremely Important





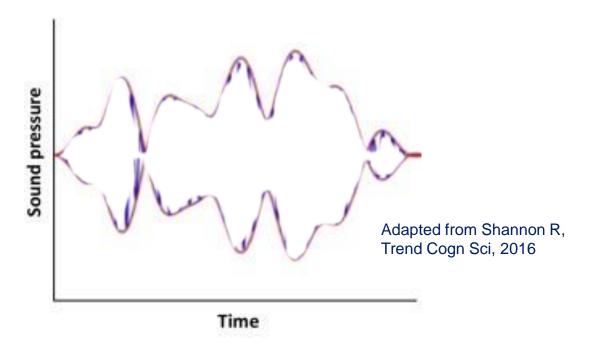
Conventionnal external processor (Cochlear®)

Electric stimulation only

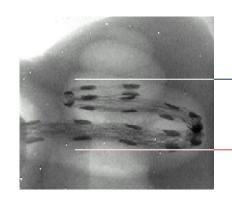
Loss of fine structrure preservation

15

Electric for full tonotopy



Preserving Residual Hearing is Extremely Important



Acoustic stimulation

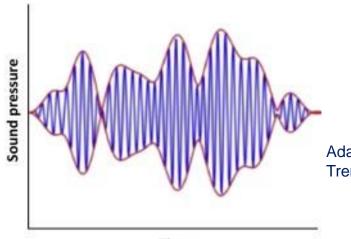
Electric stimulation



Hydrid Eleactro-acoustic stimulation

Lower frequencies fine structure preservation

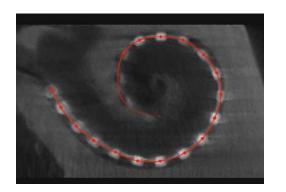
- Acoustic for lower frequencies
- Electric for higher frequencies

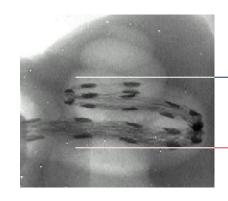


Adapted from Shannon R, Trend Cogn Sci, 2016

Time

Preserving Residual Hearing is Extremely Important





Acoustic stimulation

Electric stimulation

Hydrid Eleactro-acoustic stimulation

Lower frequencies fine structure preservation

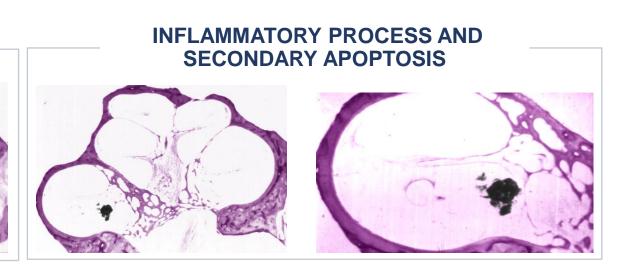
- Acoustic for lower frequencies
- Electric for higher frequencies
- Better speech in noise
- Better music perception
 (Based on 21 studies, Schaeffer et al, Int J Audiol 2021

"EVEN THOUGH MY HEARING IS NOT USEFUL TO COMMUNICATE ANYMORE, I AM AFRAID TO LOSE IT"

Various Mechanisms Result in Residual Hearing Loss

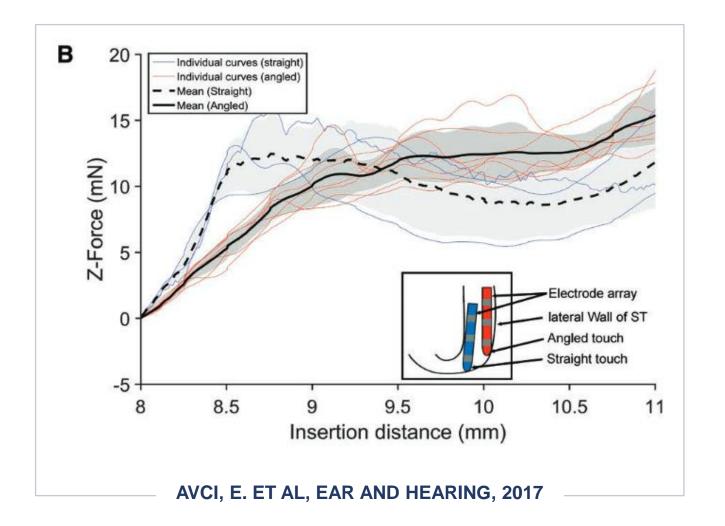
- Mechanical disrupture of intracochlear structures (basilar membrane, spiral ligament, modiolar wall, spiral osseous lamina)
- Inflammatory process (fibrosis in perilymphatic space) and secondary apoptosis
- Disturbance of fluid balance (endolymphatic or perilymphatic)
- Acute or chronic bacterial infection
- Cochlear mechanism dysfunction

MECHANICAL DISRUPTURE OF INTRACOCHLEAR STRUCTURES



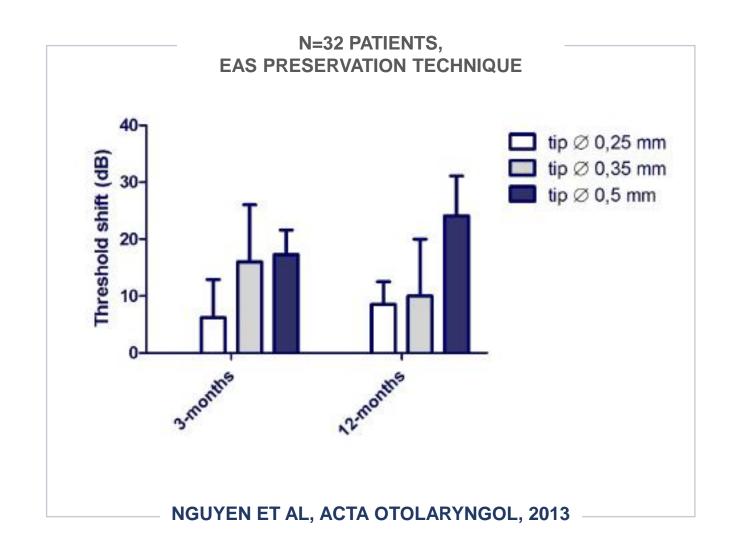
Several Factors Influence Array Insertion Trauma Cochlear Anatomy

- Cochlear anatomy
- Array diameter
- Array stiffness
- Manual vs robot-based insertion
- Drug administration



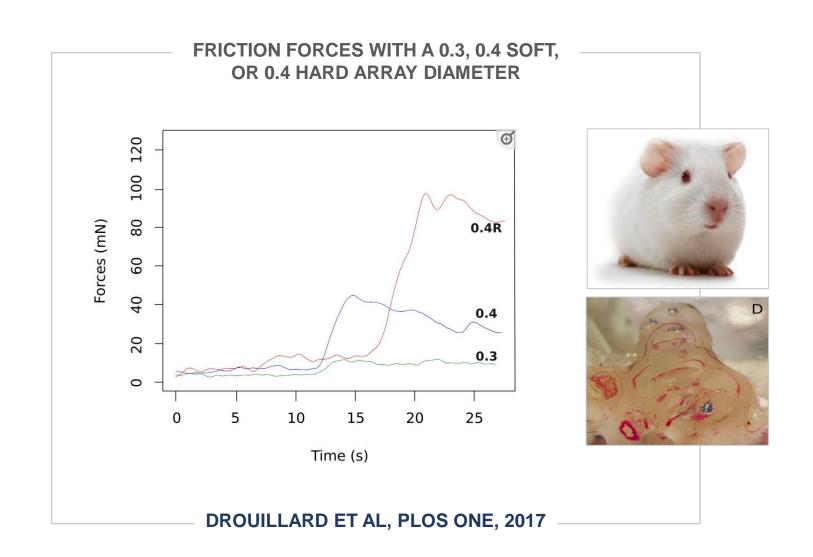
Several Factors Influence Array Insertion Trauma Array Diameter

- Cochlear anatomy
- Array diameter
- Array stiffness
- Manual vs robot-based insertion
- Drug administration



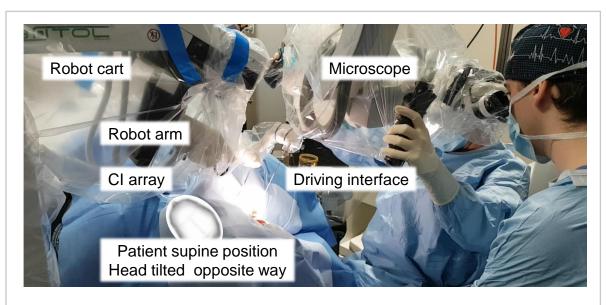
Several Factors Influence Array Insertion Trauma Array Stiffness

- Cochlear anatomy
- Array diameter
- Array stiffness
- Manual vs robot-based insertion
- Drug administration



Insertion Mechanism Influences Insertion Trauma

- Cochlear anatomy
- Array diameter
- Array stiffness
- Manual vs robot-based insertion
- Drug administration







Several Factors Influence Array Insertion Trauma Corticosteroids Have a Limited Effect

- Cochlear anatomy
- Array diameter
- Array stiffness
- Manual vs robot-based insertion
- Drug administration



Implantation

Alex D Sweeney ¹, Matthew L Carlson, M Geraldine Zuniga, Marc L Bennett, George B Wanna, David S Haynes, Alejandro Rivas

frequency Hearing Preservation After Cochlear

Affiliations + expand
PMID: 26375969 DOI: 10.1097/MAO.000000000000847

Randomized Controlled Trial > Audiol Neurootol. 2017;22(4-5):292-302. doi: 10.1159/000485310. Epub 2018 Jan 13.

The Role of Preoperative Steroids for Hearing Preservation Cochlear Implantation: Results of a Randomized Controlled Trial

Jafri Kuthubutheen ¹, Samidha Joglekar, Leah Smith, Lendra Friesen, Kari Smilsky, Tara Millman, Amy Ng, David Shipp, Harvey Coates, Christoph Arnoldner, Julian Nedzelski, Joseph Chen, Vincent Lin

Affiliations + expand
PMID: 29332068 DOI: 10.1159/000485310

Randomized Controlled Trial > Hear Res. 2021 May;404:108224. doi: 10.1016/j.heares.2021.108224. Epub 2021 Feb 28.

PMID: 33774594 DOI: 10.1016/j.heares.2021.108224

Systemic methylprednisolone for hearing preservation during cochlear implant surgery: A double blinded placebo-controlled trial

```
Stephen J O'Leary <sup>1</sup>, June Choi <sup>2</sup>, Karina Brady <sup>3</sup>, Sheila Matthews <sup>3</sup>, Katie Boncza Ozdowska <sup>3</sup>, Matthew Payne <sup>3</sup>, Tim McLean <sup>3</sup>, Alex Rousset <sup>3</sup>, Jonathon Lo <sup>3</sup>, Nathan Creber <sup>3</sup>, Sylvia Tari <sup>3</sup>, Richard Dowell <sup>4</sup>, Robert Briggs <sup>5</sup>

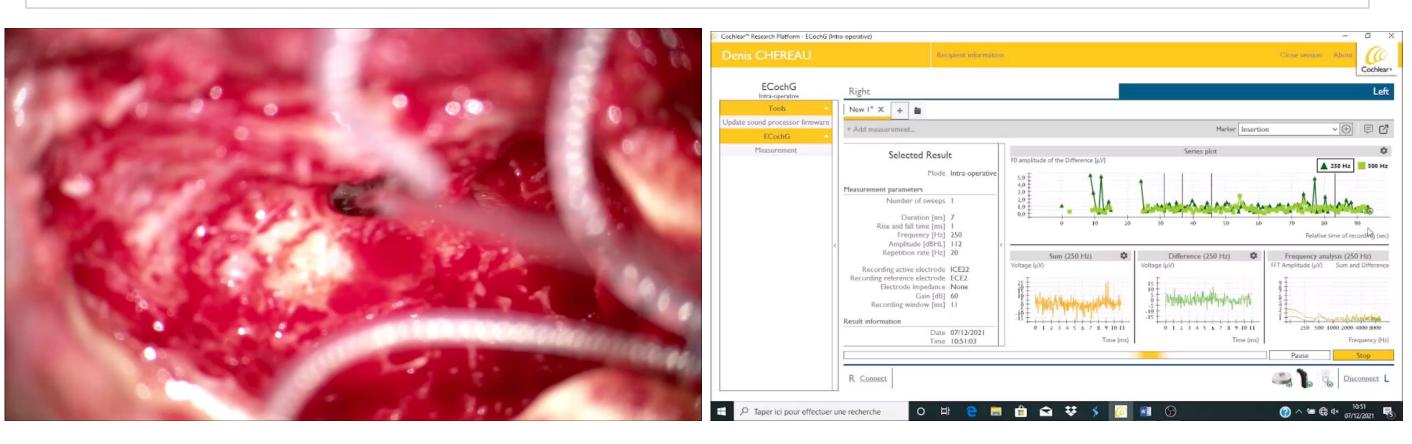
Affiliations + expand
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"OVERALL, EVIDENCE OF ANTI-INFLAMMATORY EFFECTS IN HUMANS IS STILL SCARCE"

Parys QA, et al. Inner Ear Pharmacotherapy for Residual Hearing Preservation in Cochlear Implant Surgery: A Systematic Review. Biomolecules. 2022

Cochlear Implant Surgical Standard Technique

- ECochG monitoring provides information on the chances of preserving residual hearing during the surgical procedure
- The signal can be obtained if the hearing threshold < 80 dB at 500 Hz
- It can guide the robot-based implant insertion to preserve residual hearing

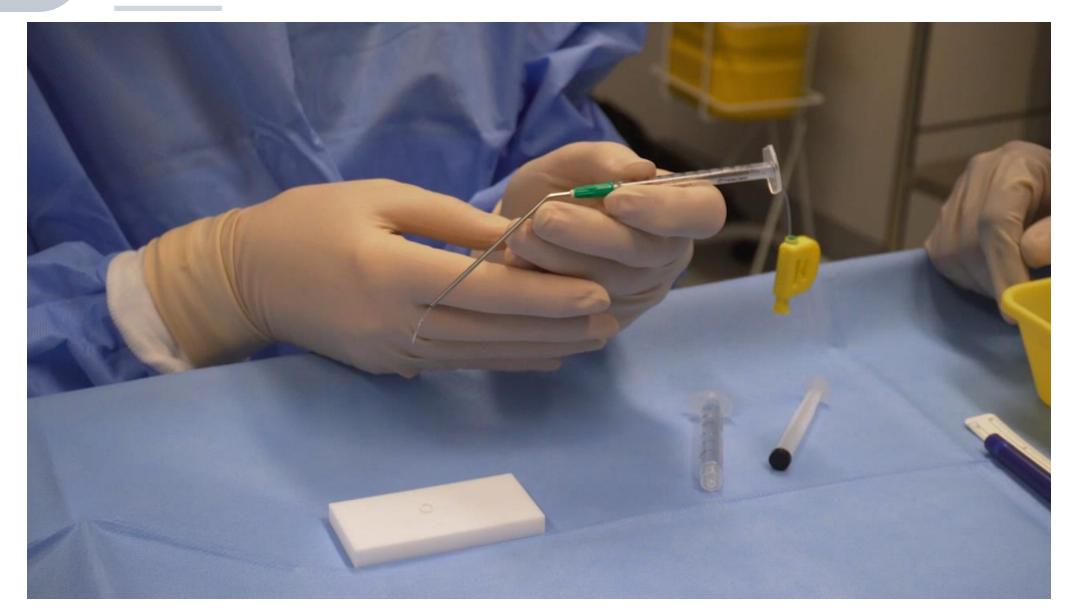


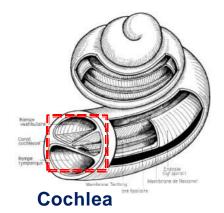
(Dr Isabelle Mosnier, AP-HP; Mathilde Cosnard, Cochlear France)

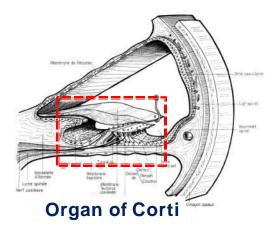
Cochlear Implant Surgical Standard Technique

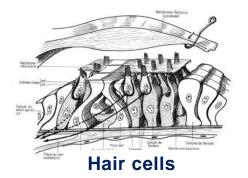


Perilymph Sampling Protocol









With the courtesy of Prof Steven O'Leary

Perilymph Sampling Protocol



A New Drug for Hearing Preservation during Cochlear Implantation Could Be Extremely Valuable

- Residual hearing preservation in implanted patients improves hearing performance and quality of life
- 2. Cochlear implantation criteria could be further expanded if residual hearing preservation rate are higher
- **3. Array design improvement, atraumatic insertion and drug otoprotection** are key to improving hearing preservation
- 4. Although **corticosteroids are widely used** in current practice, there are **no guidelines** for doses and delivery route



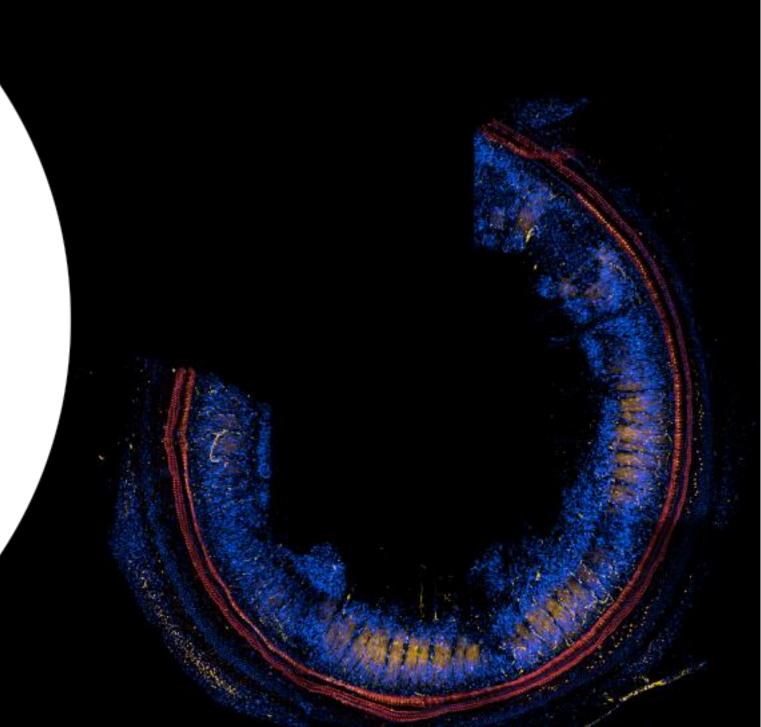
A more efficient and reliable drug is needed by the medical community



PHASE 2A STUDY KEY PRELIMINARY RESULTS

Dr. Géraldine Honnet Chief Medical Officer Sensorion

July 5, 2023

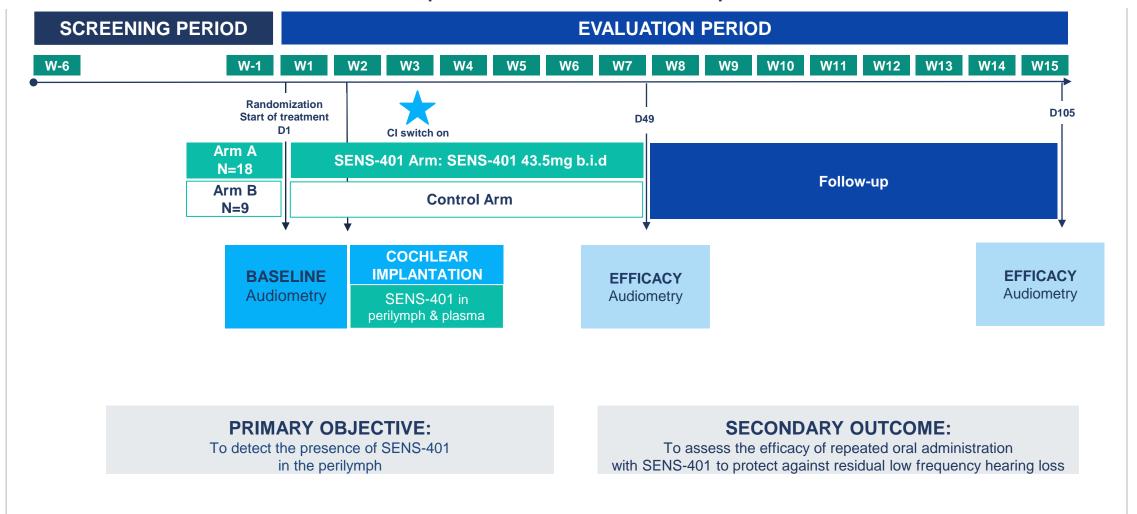


Study Design



A Phase 2a, Multicenter, Randomized, Controlled, Open-label Study to Evaluate the Presence of SENS-401 in the Perilymph after 7 days of Repeated Oral Administration in Adult Participants Scheduled for Cochlear Implantation









Patient Baseline Characteristics are Comparable between the Two Groups

Number of patients		Control arm (N=4)	SENS-401 arm (N=5)	Total (N=9)
Age (years)		72	66	69
Gender	Female	2	4	6
	Male	2	1	3
PTA (dB HL)	Mean of 250, 500 and 750 Hz	70	66	68
	500 Hz	66	69	68
Cause of hearing loss	Congenital non-inherited		1	1
	Disease-related hearing loss	1		1
	Infection		1	1
	Inherited	1	2	3
	Trauma	1		1
	Unknown cause	1	1	2

Sensorion KOL Webinar - July 5, 2023

32

SENS-401 Confirms a Good Safety Profile

SEVERITY	STUDY DRUG CAUSALIT

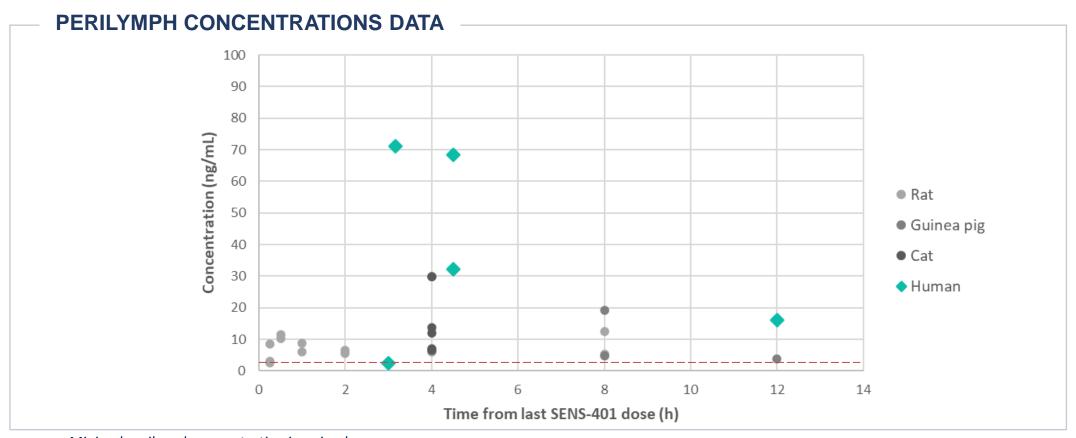
	Related		Not related		TOTAL
Mild	Constipation	3	Vomiting	1	
	Myalgia	1	Laryngitis	1	
	Dysgeusia	1	Hypokalemia	1	
	Nausea	1	Dizziness	1	
Total		6		4	10
Moderate			Left ear pain	1	
			Headache	1	
			Constipation	1	
Total		0		3	3
Severe			Acute Vertigo	1	
Total		0		1	1
TOTAL		6		8	14

- Despite being administered for an unprecedented duration of 7 weeks, SENS-401 maintained a good safety profile at an oral dose level of 43.5 mg, administered twice daily (b.i.d.)
- This aligns with previous findings at the same daily dosage level, confirming good safety profile for the study drug





SENS-401 is Detected in the Perilymph of the First 5 Treated Patients at Levels Consistent with Those Observed in Animals



- – Minimal perilymph concentration in animals
- Plasma concentrations of SENS-401 in humans at steady state: dosing of 43.5 mg b.i.d range from 20-90 ng/mL
- Perilymph concentrations in animal models at equivalent plasma levels range from 2 to 30 ng/mL
- The observed values in the first 5 patients are in line with the predicted values, ranging from 2 to 70 ng/mL





Residual Low Frequency Hearing Benefits for Cochlear Implant Users

- 80% of cochlear implant candidates now have bilateral low-frequency residual hearing before surgery.¹
- Many cochlear implant candidates fear losing their residual hearing, as this may occur in as many as 50
 70% of CI surgeries.²



Improved speech perception in quiet and in noise ^{3,4}



Improved music perception 5-7



More natural sound quality ⁵



Improved localization 8

- 1. Sheffield SW, et al. J Am Acad Audiol. 2015 Feb;26(2):145-54.
- 2. Wijewickrema S, et al. PLoS One. 2022 Jul 14;17(7):e0269187.
- 3. Adunka OF, et al. Laryngoscope. 2013 Oct;123(10):2509-15.
- 4. Park LR, et al. Ear Hear. 2019 Jul/Aug;40(4):849-857.
- 5. Kelsall DC, et al. Otol Neurotol. 2017 Oct;38(9):1251-1261.
- Parkinson AJ. et al. Otol Neurotol. 2019 Mar:40(3):e283-e289.
- 7. Gfeller KE, et al. Audiol Neurootol. 2006;11 Suppl 1:12-5.
- 8. Härkönen K, et al. Eur Arch Otorhinolaryngol. 2017 Oct;274(10):3599-3604.

Residual Low Frequency Hearing Benefits for Cochlear Implant Users

Initial shift*

(2-4 weeks postoperative) between surgery and initial activation of the device

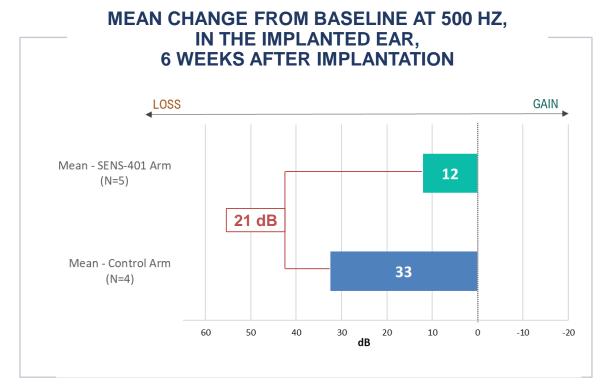
Attributed to perioperative factors

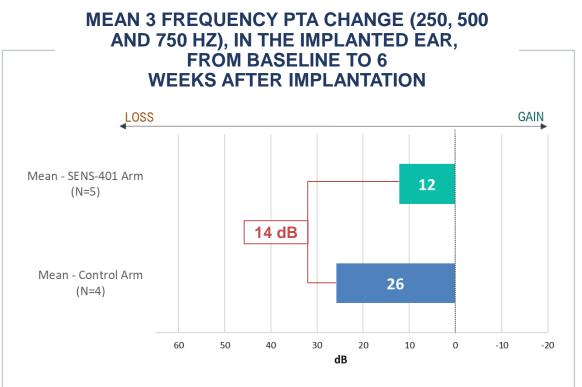
Second shift* (3-6 months postoperative)

 Attributed to intracochlear fibrosis, excitotoxic changes from electrical and acoustic stimulation

Postoperative hearing preservation defined as: unaided air-conduction thresholds < 85 dB at 125, 250, and 500 Hz

SENS-401 Preserves Early Loss of Residual Hearing - As Shown in all Five Patients Treated so far

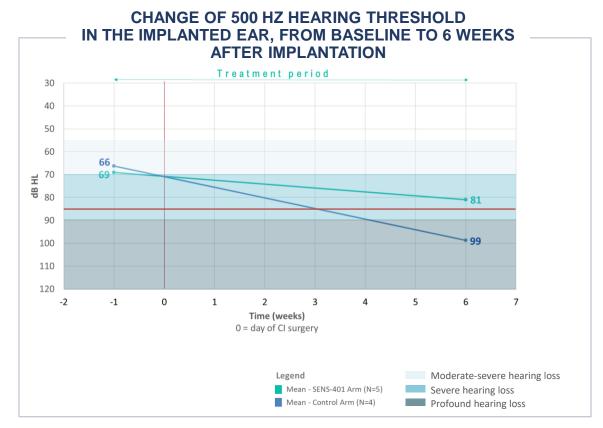


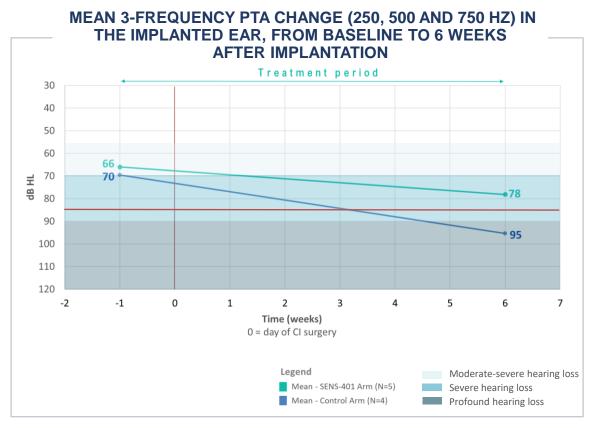


PTA = Pure Tone Average

A clinically significant difference of 21 dB and 14 dB in the early loss of residual hearing between SENS-401 and control groups is observed at 500 Hz and in the average of 3 frequencies respectively, 6 weeks after cochlear implantation

SENS-401 Also Preserves Post-Operative Hearing - As Measured at the End of the Treatment Period





Postoperative hearing preservation defined as unaided air-conduction thresholds <85 dB HL (adaptation of Jensen et al., 2021)

- The SENS- 401 treated group remains above the defined threshold of postoperative hearing preservation
- Shift in hearing loss degree: patients not treated with SENS-401 are progressing from moderate-severe hearing loss to profound hearing loss

Hearing Preservation Classification System

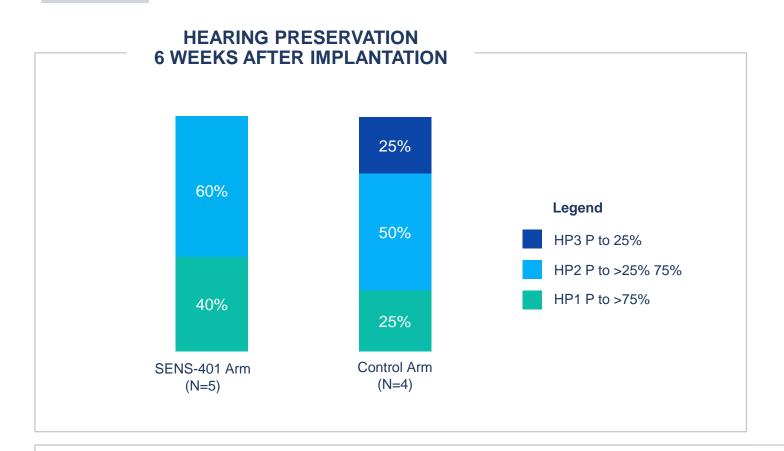
SKARZYNSKI ET AL. TOWARDS A CONSENSUS ON A HEARING PRESERVATION CLASSIFICATION SYSTEM. ACTA OTOLARYNGOL SUPPL 2013

Criteria

- Classification independent from users' initial hearing ▶ considers pre- and post PTA (Pure Tone Average) thresholds
- Appropriate for all cochlear implant users with measurable pre-operative residual hearing
- Covers the whole range of pure tone average from 0 to 120 dB HL
- · Easy to use and easy to understand

Category	Preservation	HP
HP1	Complete or near-complete preservation	> 75%
HP2	Partial preservation	> 25 to 75%
HP3	Minimal HP	0 to 25%
HP4	Loss of hearing/No hearing	No measurable hearing

SENS-401 Completely Preserves Hearing in 40% of Patients Treated at the End of the Treatment Period



• Six weeks after surgery, partial (HP2) to complete hearing preservation (HP1) was observed in 100% of patients in the SENS-401 treatment group compared to 75% in the control group, **and no minimal hearing preservation (HP3) in the treated group**

Conclusion



Preliminary key results are promising and suggest that SENS-401 can cross the labyrinthine barrier to target cochlear hair cells.



Six weeks post-cochlear implantation, the **residual hearing loss** whether assessed at 500 Hz or across an average of 3 consecutive frequencies **exhibited a clinically significant**, **favorable trend for the treated group**, **in comparison to the untreated group**.



This supports the assumption that SENS-401, present in the perilymph fluid, reaches concentrations that are pharmacologically active.



SENS-401 taken 7 weeks confirms it has a good safety profile.



These encouraging trends necessitate further validation across the full study participant group.



SENS- 401 has the potential to modify the outcome of CI while preserving residual hearing by improving speech perception in quiet and noise, music perception, spatial localization and maintaining more natural sound quality.



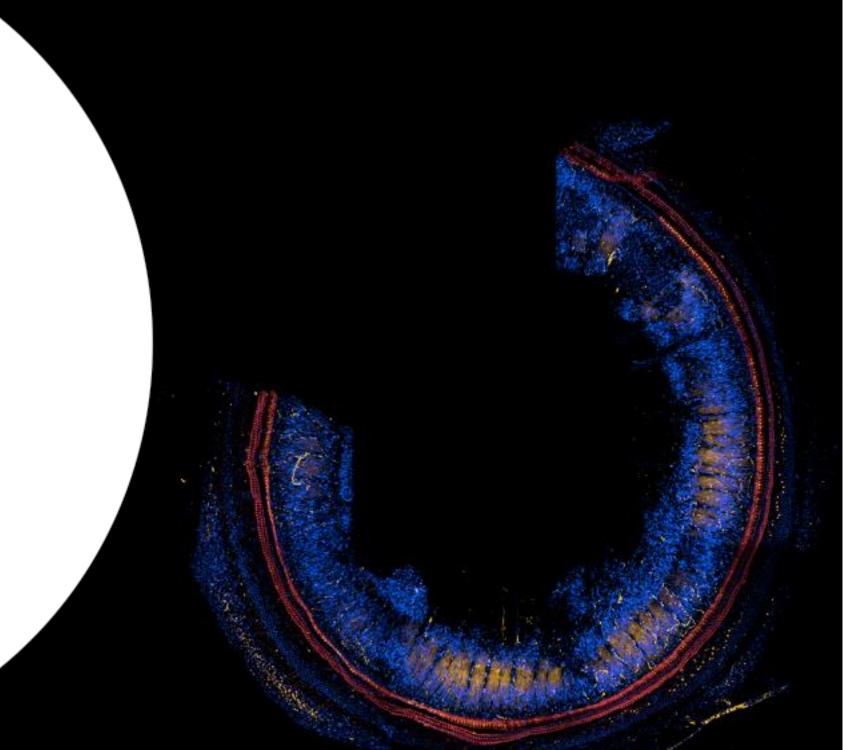
These results support the SSNHL phase 2 data and further development of SENS-401.



Q&A SESSION CLOSURE

Nawal Ouzren
CEO, Sensorion

July 5, 2023





Sensorion KOL Webinar SENS-401 to Prevent Residual Hearing Loss after Cochlear Implantation

July 5, 2023

