

Financial Disclosures

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- This study was funded by Neurotech Pharmaceuticals
- This study includes research conducted on human subjects; institutional review board approval was obtained prior to study initiation

Pooled Functionality Data of Revakinagene Taroretcel-Iwey in Patients With Macular Telangiectasia Type 2

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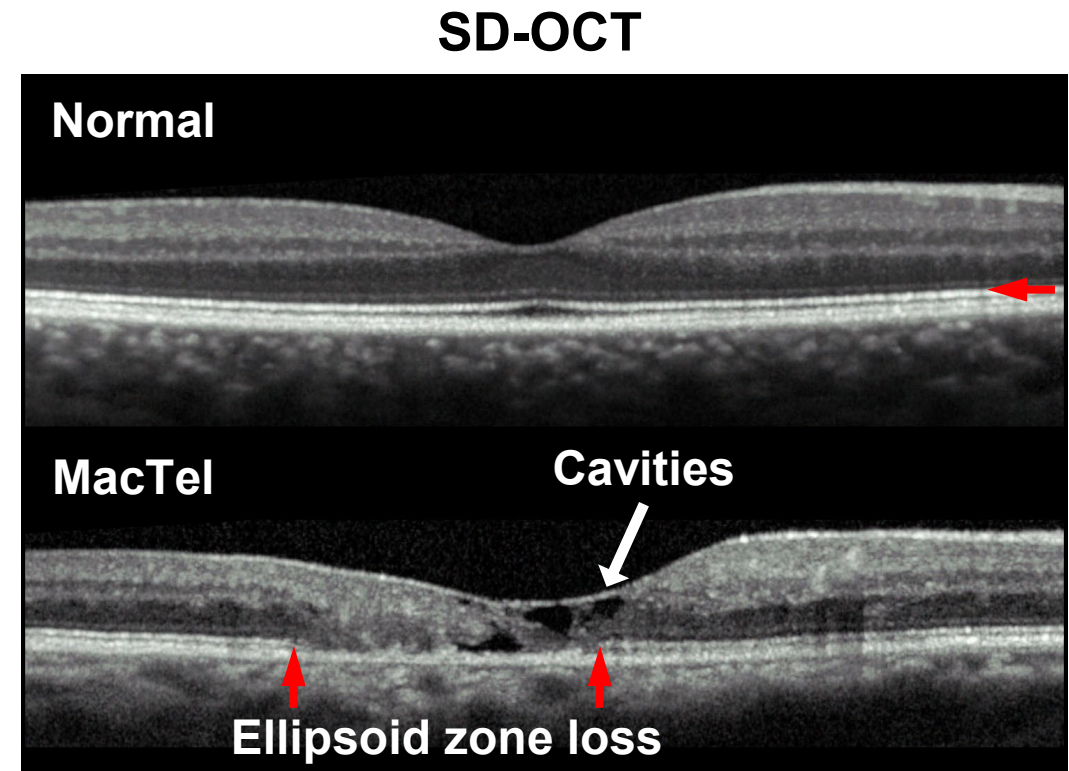
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*At the time of study analysis.

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MacTel Is a Neurodegenerative Disease That Leads to Vision Loss^{1,2}

- MacTel is a bilateral, progressive retinal neurodegenerative disease^{1,2}
 - Leads to vision loss and functional impairment^{1,2}
 - Associated with abnormalities in Müller glia, retinal pigment epithelium, and photoreceptors in the central retina^{3,4}
 - Characterized by progressive loss of the ellipsoid zone on SD-OCT³

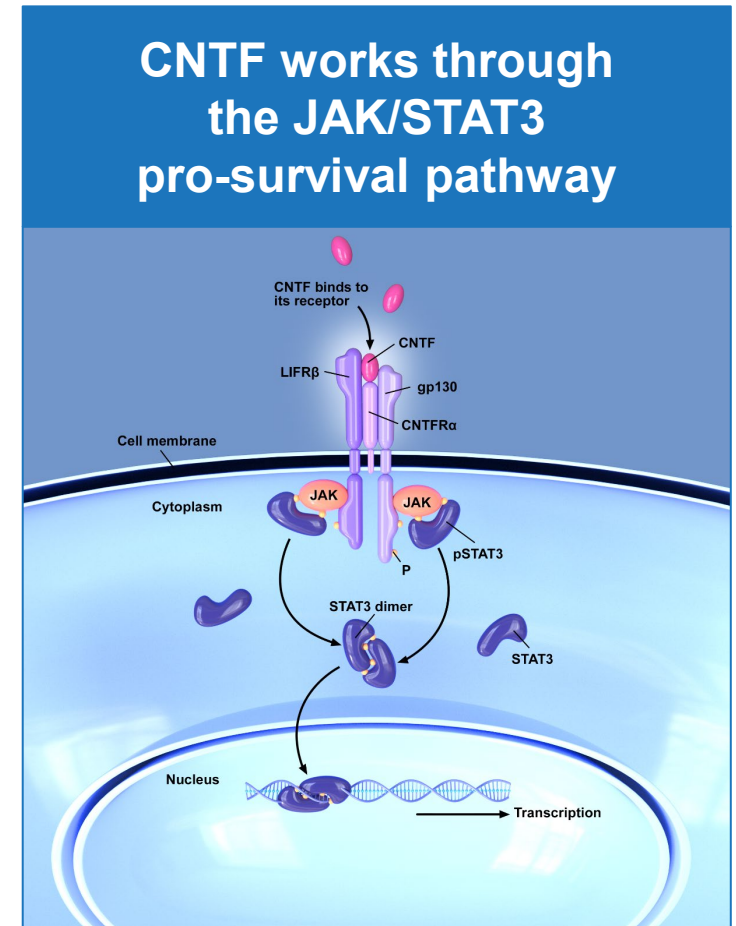


MacTel, macular telangiectasia type 2; SD-OCT, spectral-domain optical coherence tomography.

1. Charbel Issa P, et al. *Prog Retin Eye Res*. 2013;34:49-77. 2. Heeren TFC, et al. *Ophthalmology*. 2020;127:1539-1548. 3. Heeren TFC, et al. *Retina*. 2018;38(suppl 1):S20-S26. 4. Kedarisetti KC, et al. *Clin Ophthalmol*. 2022;16:3297-3309.

Ciliary Neurotrophic Factor Is a Potent Neuroprotectant¹⁻³

- In response to injury, Müller glial cells release the neuroprotective factor CNTF¹
- **CNTF protects and preserves photoreceptors²⁻⁴**
- In preclinical models of retinal degeneration, photoreceptors can be rescued with intravitreal injection of CNTF^{2,4}

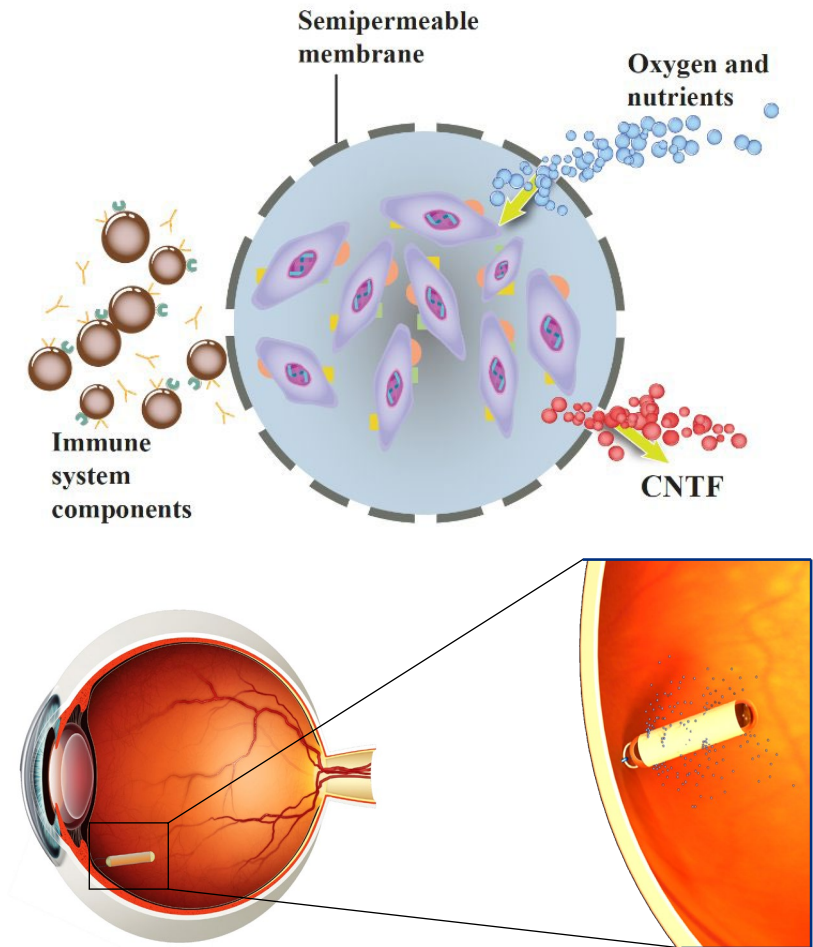


CNTF, ciliary neurotrophic factor; CNTFRα, ciliary neurotrophic factor receptor α; gp130, glycoprotein 130; JAK/STAT, Janus kinase/signal transducer and activator of transcription; LIFRβ, leukemia inhibitory factor β; P, phosphorous; pSTAT3, phosphorylated signal transducer and activator of transcription 3; STAT3, signal transducer and activator of transcription 3.

1. Bringmann A, et al. *Prog Retin Eye Res.* 2009;28:423-445. 2. Shen W, et al. *J Neurosci.* 2012;32(45):15715-15727. 3. Sleeman MW, et al. *Pharm Acta Helv.* 2000;74:265-272. 4. Tao W, et al. *Invest Ophthalmol Vis Sci.* 2002;43:3292-3298.

Encapsulated Cell Therapy Is Designed to Deliver Sustained Levels of CNTF

- Revakinagene taroretcel-lwey (formerly known as NT-501) is a first-in-class encapsulated cell therapy¹⁻³
 - Contains NTC-201-6A cells³
 - Allogeneic retinal pigment epithelial cells expressing recombinant human CNTF¹
 - Surgically inserted into the vitreous cavity and stably anchored to the sclera^{1,3}
 - Developed to release consistent levels of CNTF for long-term durations³
- **Revakinagene taroretcel-lwey was approved by the FDA for the treatment of adults with MacTel on March 5, 2025**



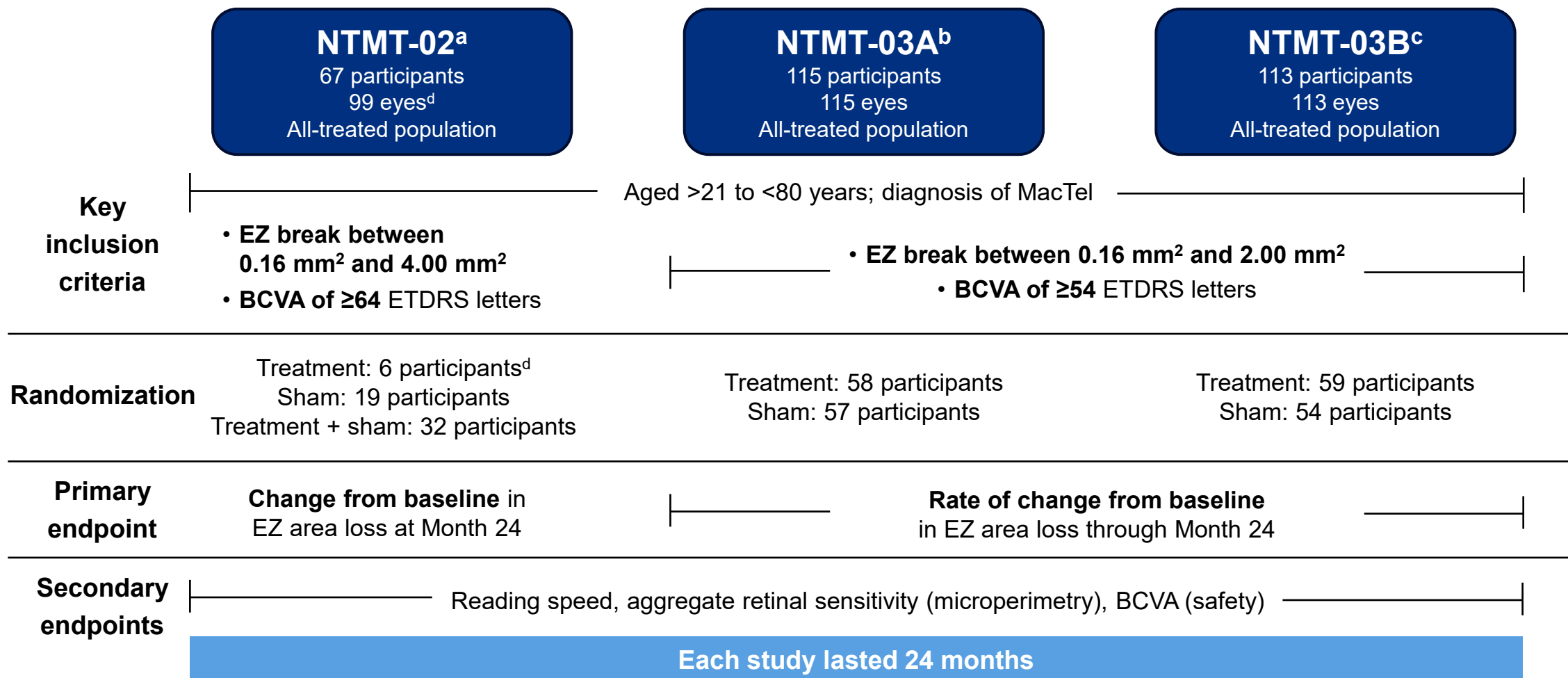
CNTF, ciliary neurotrophic factor; FDA, Food and Drug Administration; MacTel, macular telangiectasia type 2.

1. ENCELTO [package insert]. Cumberland, RI: Neurotech Pharmaceuticals, Inc; March 2025. 2. Chew EY, et al. *NEJM Evid.* 2025;4:EVIDoa2400481. 3. Kauper K, et al. *Invest Ophthalmol Vis Sci.* 2025;66:3.

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Revakinagene Taroretcel-lwey Has Been Studied Across 3 Randomized, Sham-Controlled Clinical Trials



BCVA, best corrected visual acuity; ETDRS, Early Treatment Diabetic Retinopathy Study; EZ, ellipsoid zone; MacTel, macular telangiectasia type 2.

^aNCT01949324. ^bNCT03316300. ^cNCT03319849. ^dParticipants with one eligible eye (35 participants) received revakinagene taroretcel-lwey (16 eyes) or sham (19 eyes). In participants with two eligible eyes (32 participants), one eye received revakinagene taroretcel-lwey (32 eyes) and one eye received sham procedure (32 eyes). If both eyes were eligible, the right eye was randomized 1:1 to sham or revakinagene taroretcel-lwey and the left eye received other surgery.

Rationale for a Pooled Functionality Analysis

- Rare disease
- Inherent variability of outcome measures¹⁻³
- Similar populations and study designs
- Increase the sample size



1. Alibhai AY, et al. *Int J Retina Vitreous*. 2020;6:16. 2. Patel PJ, et al. *Invest Ophthalmol Vis Sci*. 2011;52:3854-3859. 3. Zhao Y, et al. Poster presented at: Association for Research in Vision and Ophthalmology; May 5-9, 2024. Seattle, WA.

PROVIDED IN RESPONSE TO AN UNSOLICITED REQUEST

Changes From Baseline in EZ Area Loss, Reading Speed, Retinal Sensitivity, and BCVA Were Assessed

Assessments

- Change from baseline assessments in the all-treated population in the Phase 2 and Phase 3 studies:
 - Anatomical:
 - Area of photoreceptor (ie, EZ area) loss (primary endpoint)
 - Functional:
 - Monocular reading speed
 - Aggregate retinal sensitivity (microperimetry)
 - Safety:
 - BCVA

Baseline Demographics Were Well Balanced Across Studies and Treatment Arms

By Participant ^a	Phase 2			Phase 3 (Study A)		Phase 3 (Study B)	
	Revakinagene Taroretcel-lwey (n=16)	Sham (n=19)	Revakinagene Taroretcel-lwey + Sham (n=32)	Revakinagene Taroretcel-lwey (n=58)	Sham (n=57)	Revakinagene Taroretcel-lwey (n=59)	Sham (n=54)
Female , n (%)	9 (56)	11 (58)	21 (66)	39 (67)	40 (70)	46 (78)	36 (67)
Mean age , years (SD)	60.1 (10.7)	59.4 (7.6)	63.4 (8.4)	61.1 (8.0)	60.2 (8.4)	58.5 (7.6)	58.7 (8.9)
Race , n (%)							
White	12 (75)	16 (84)	30 (94)	50 (86)	48 (84)	55 (93)	47 (87)
Asian	0	1 (5)	0	2 (3)	3 (5)	3 (5)	1 (2)
Black or African American	0	0	1 (3)	1 (2)	2 (4)	0	0
American Indian or Alaska Native	0	0	0	0	1 (2)	0	0
Other	4 (25)	2 (11)	1 (3)	5 (9)	3 (5)	1 (2)	6 (11)
Ethnicity , n (%)							
Hispanic or Latino	1 (6)	0	1 (3)	1 (2)	5 (9)	4 (7)	4 (7)

SD, standard deviation.

^aResults reported for the all-treated population.

Participants in the Phase 2 Trial had Greater Baseline EZ Area Loss Compared With the Phase 3 Studies

By Eye ^a	Phase 2		Phase 3 (Study A)		Phase 3 (Study B)	
	Revakinagene Tarorelcel-lwey (n=48)	Sham (n=51)	Revakinagene Tarorelcel-lwey (n=58)	Sham (n=57)	Revakinagene Tarorelcel-lwey (n=59)	Sham (n=54)
EZ area loss (mm ²), mean (SD)	0.70 (0.42)	0.77 (0.55)	0.51 (0.48)	0.49 (0.36)	0.52 (0.31)	0.48 (0.29)
EZ area category , n (%)						
<0.5 mm ²	18 (37.5)	20 (39.2)	41 (70.7)	40 (70.2)	31 (52.5)	33 (61.1)
≥0.5 mm ²	30 (62.5)	31 (60.8)	17 (29.3)	17 (29.8)	28 (47.5)	21 (38.9)
Mean BCVA , ETDRS letter (SD)	77.0 (5.6)	76.2 (6.9)	70.8 (9.11)	73.3 (8.64)	74.4 (7.76)	73.6 (9.23)
Snellen equivalent	20/32	20/32	20/40	20/40	20/32	20/32
Reading speed (wpm), n	47	49	57	56	59	53
Mean (SD)	94.29 (46.13)	107.26 (43.17)	92.09 (43.72)	96.01 (54.01)	96.49 (47.31)	94.09 (42.81)
Retinal sensitivity^b , n	40	45	53	54	52	49
Mean (SD)	89.15 (76.15)	107.96 (106.77)	62.14 (77.58)	59.02 (62.63)	57.92 (56.94)	50.48 (58.36)

Patients with MacTel already experience substantial impairment in reading speed

BCVA, best corrected visual acuity; ETDRS, Early Treatment Diabetic Retinopathy Study; EZ, ellipsoid zone; SD, standard deviation; wpm, words per minute.

^aResults reported for the all-treated population, unless otherwise noted. Not available in full pool. ^bResults reported for the per-protocol population.

Baseline Characteristics in the Pooled Population Were Balanced Between Treatment Arms

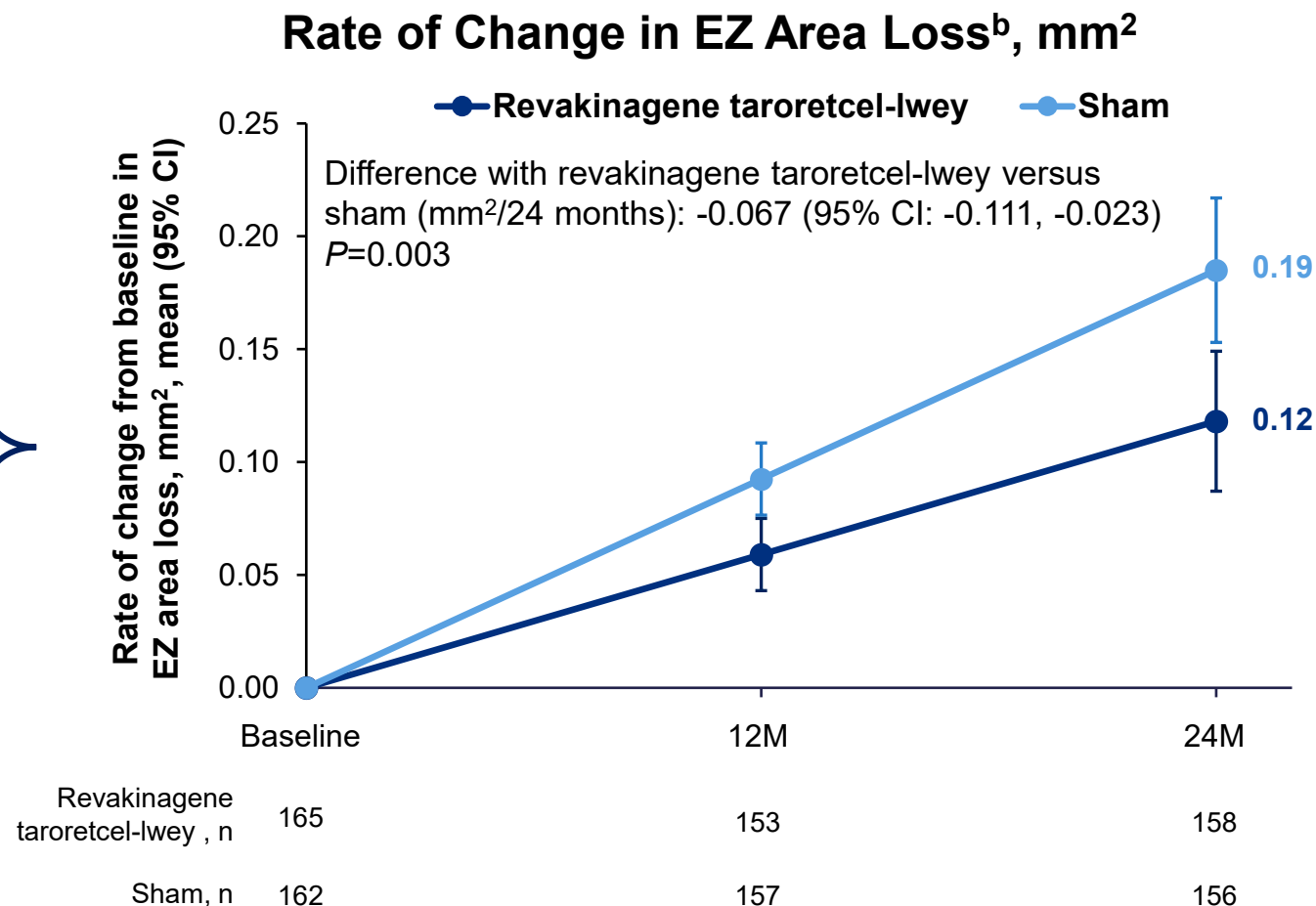
	Phase 2 and Phase 3 Pool ^b	
	Revakinagene Taroretcel-lwey (n=165)	Sham (n=162)
Demographics, by participant^a		
Female , n (%)	115 (69.7)	108 (66.7)
Mean age , years (SD)	60.5 (8.4)	60.3 (8.6)
Race , n (%)		
White	147 (89)	141 (87)
Asian	5 (3)	5 (3)
Black or African American	2 (1)	3 (2)
American Indian or Alaska Native	0	1 (1)
Other	11 (7)	12 (7)
Ethnicity , n (%)		
Hispanic or Latino	7 (4)	10 (6)
Ocular characteristics, by eye^a		
EZ area loss (mm ²), n	165	162
Mean (SD)	0.57 (0.41)	0.57 (0.43)
EZ area category , n (%)		
<0.5 mm ²	90 (54.5)	93 (57.4)
≥0.5 mm ²	75 (45.5)	69 (42.6)
Mean BCVA , ETDRS letter (SD)	73.8 (8.2)	74.2 (8.5)
Snellen equivalent	20/40	20/32
Reading speed (wpm), n	163	158
Mean (SD)	94.32 (45.50)	98.86 (47.24)
Retinal sensitivity^c , n		
Mean (SD)	-	-

BCVA, best corrected visual acuity; ETDRS, Early Treatment Diabetic Retinopathy Study; EZ, ellipsoid zone; SD, standard deviation; wpm, words per minute.

^aResults reported for the all-treated population, unless otherwise noted. Not available in full pool. ^bPer the NTMT-02 study design, participants with two eligible study eyes received revakinagene taroretcel-lwey in one eye and sham in the other eye. These 32 participants are included in both columns for the pooled summary. ^cResults reported for the per-protocol population.

Revakinagene Taroretcel-lwey Demonstrated Greater Preservation of EZ Area Over 2 Years Compared With Sham in All-Treated Participants^a

- A **7.7%** reduction in photoreceptor loss with revakinagene taroretcel-lwey compared with sham in **Phase 2**
- A **54.6%** reduction in photoreceptor loss with revakinagene taroretcel-lwey compared with sham in **Phase 3, Study A**
- A **30.4%** reduction in photoreceptor loss with revakinagene taroretcel-lwey compared with sham in **Phase 3, Study B**



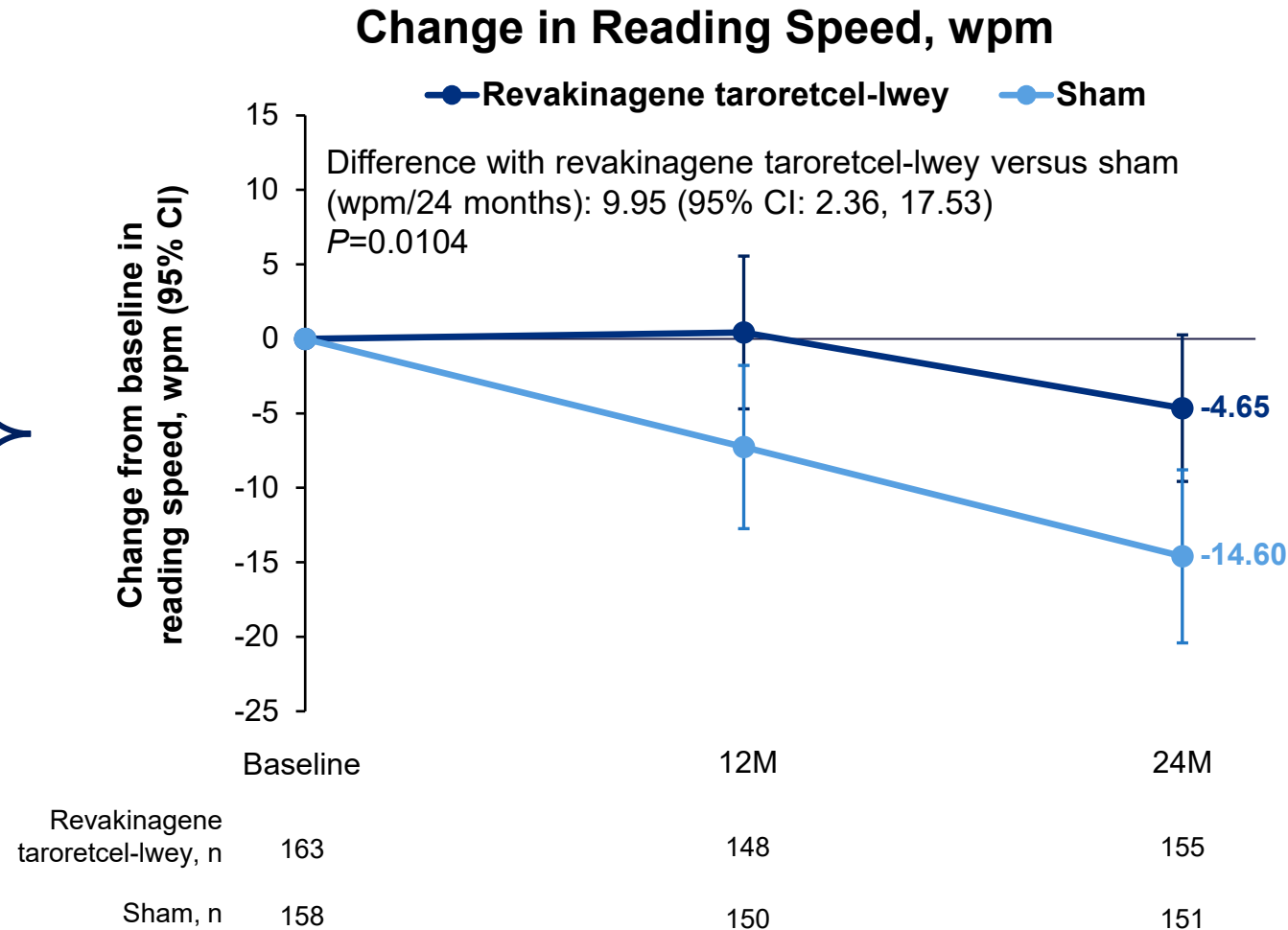
36.2%
reduction in
photoreceptor
loss

CI, confidence interval; EZ, ellipsoid zone; M, month.

^aPer the NTMT-02 study design, participants with two eligible study eyes received revakinagene taroretcel-lwey in one eye and sham in the other eye. These 32 participants are included in both groups for the pooled analysis, by study eye. ^bRate of EZ change, difference, and CIs from a repeated measures model. The outcome variable is EZ area assessed longitudinally at baseline, Months 12, 16 (Phase 3 only), 18 (Phase 2 only), 20 (Phase 3 only), and 24. At baseline, EZ area is calculated as the mean area across two independent readers. The model includes treatment group, time (continuous), treatment × time interaction, and participant-specific random intercepts. The difference between treatment groups in rate of EZ change is estimated at Month 12 and Month 24 based on the treatment × time interaction term.

Revakinagene Taroretcel-lwey Preserved Reading Speed Over 2 Years Compared With Sham in All-Treated Participants^a

- An **86.1%** reduction in reading speed loss with revakinagene taroretcel-lwey compared with sham in **Phase 2**
- A **49.3%** reduction in reading speed loss with revakinagene taroretcel-lwey compared with sham in **Phase 3, Study A**
- A **71.0%** reduction in reading speed loss with revakinagene taroretcel-lwey compared with sham in **Phase 3, Study B**

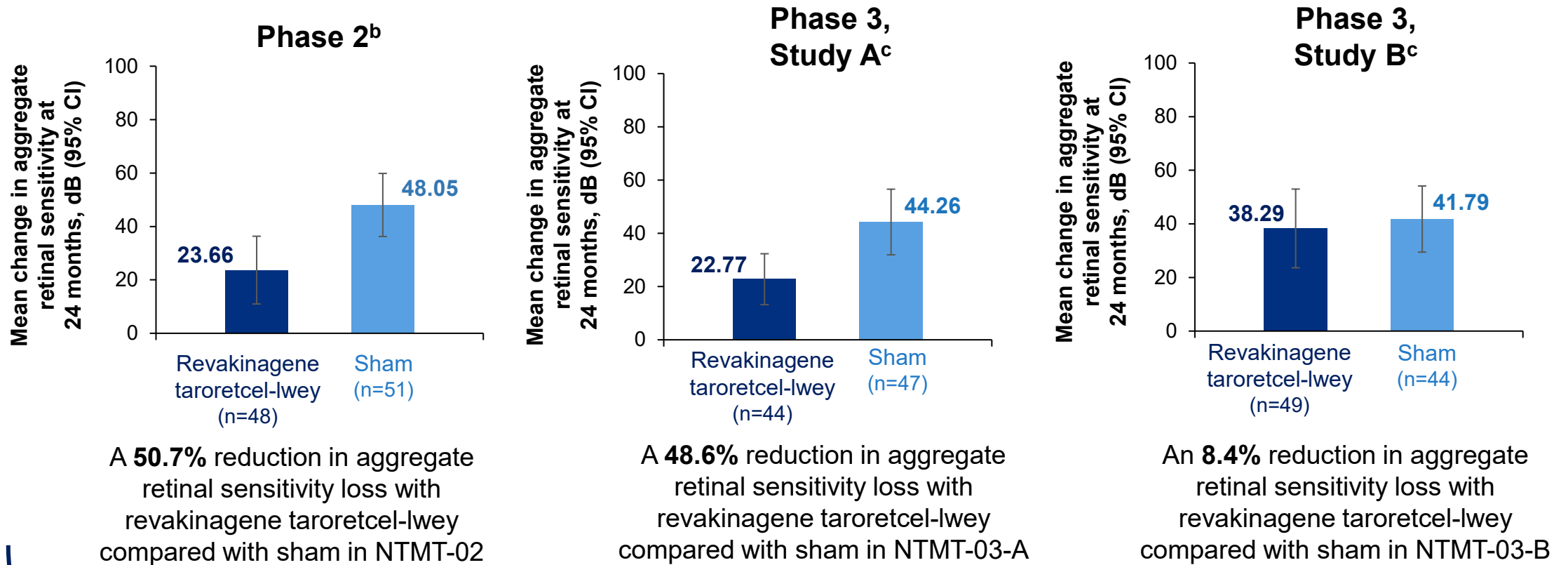


68.2%
reduction in
reading
speed loss

CI, confidence interval; M, month; wpm, words per minute.

^aPer the NTMT-02 study design, participants with two eligible study eyes received revakinagene taroretcel-lwey in one eye and sham in the other eye. These 32 participants are included in both groups for the pooled analysis, by study eye.

Revakinagene Taroretcel-lwey Preserved Aggregate Retinal Sensitivity (Microperimetry) Over 2 Years Compared With Sham^a



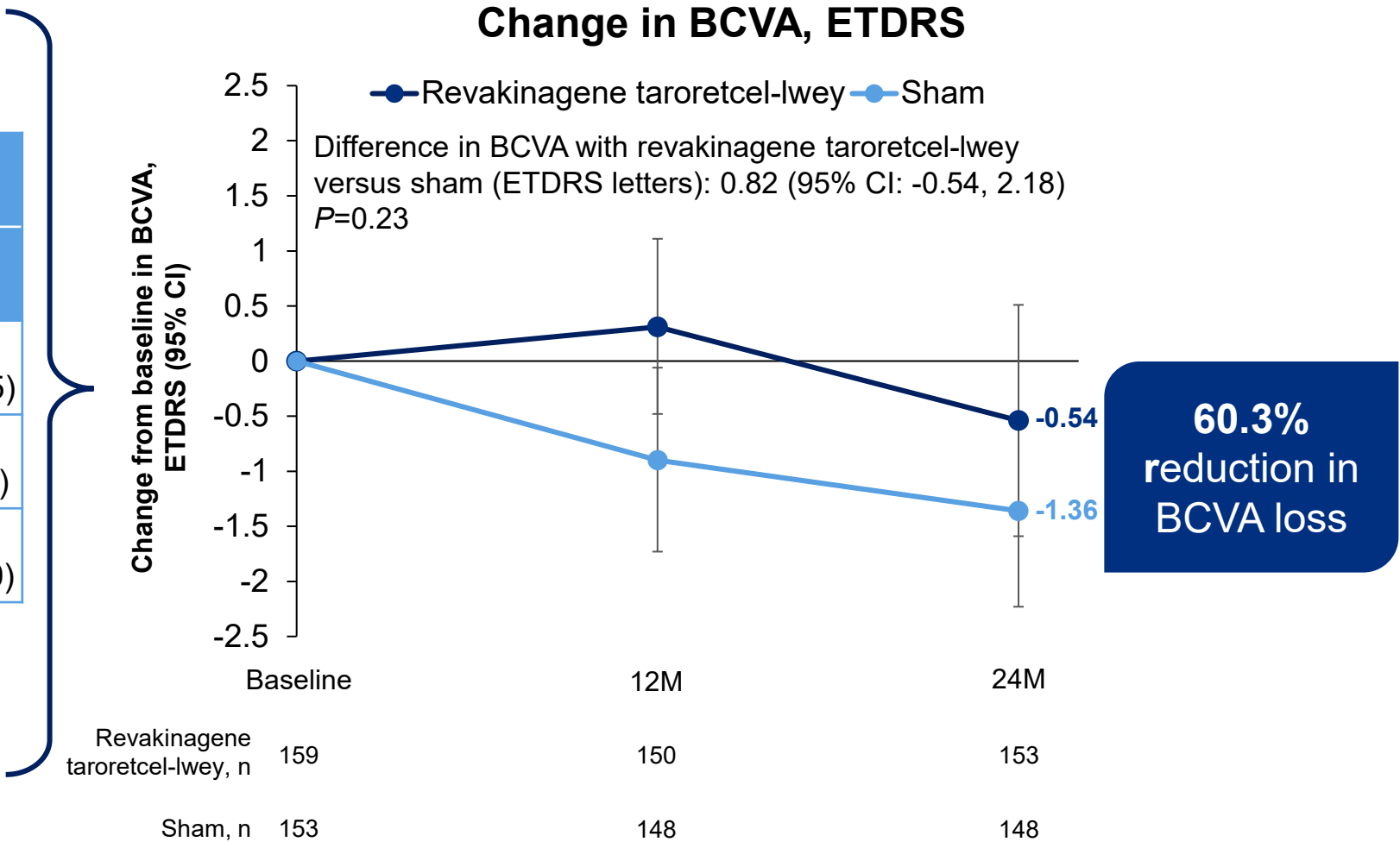
36.6% reduction in aggregate retinal sensitivity loss across the three studies^d

CI, confidence interval; dB, decibel; MAIA, Macular Integrity Assessment.

^aRetinal sensitivity was measured via MAIA microperimetry. ^bIn the Phase 2 study, retinal sensitivity is reported for the per-protocol population, which included all treated participants who had no major protocol infractions (defined prior to unmasking of the study). Per the NTMT-02 study design, participants with two eligible study eyes received revakinagene taroretcel-lwey in one eye and sham in the other eye. These 32 participants are included in both groups for the pooled analysis by study eye. ^cIn the Phase 3 studies, the retinal sensitivity per-protocol population is reported, including all treated participants who had a baseline and Month 24 microperimetry collected according to study protocol. ^dResults per study in the respective per-protocol populations were weighted by the proportion of treated eyes with non-missing data in each study and combined descriptively.

BCVA Remained Stable for Both Treatment Arms Over 2 Years^a

Mean change in BCVA from baseline to Month 24 (95% CI), ETDRS		
Study	Revakinagene Taroretcel-lwey	Sham
Phase 2	-1.93 (-3.80, -0.05)	-2.00 (-3.35, -0.65)
Phase 3, Study A	0.19 (-1.81, 2.20)	-0.57 (-2.26, 1.11)
Phase 3, Study B	-0.29 (-1.87, 1.30)	-1.71 (-3.11, -0.30)



BCVA, best corrected visual acuity; CI, confidence interval; ETDRS, Early Treatment Diabetic Retinopathy Study; M, month.

^aPer the NTMT-02 study design, participants with two eligible study eyes received revakinagene taroretcel-lwey in one eye and sham in the other eye. These 32 participants are included in both groups by study eye.

Conclusions

- Revakinagene taroretcel-lwey conferred both **anatomic and visual function benefits** across three randomized, sham-controlled studies
- Relative to sham, revakinagene taroretcel-lwey demonstrated a:
 - Preservation of anatomy
 - 36.2% reduction in photoreceptor loss
 - Preservation of function
 - 68.2% reduction in reading speed loss
 - 36.6% reduction in retinal sensitivity loss^a

^aResults per study in the respective per-protocol populations were weighted by the proportion of treated eyes with non-missing data in each study and combined descriptively.

Acknowledgments

- Lowy Medical Research Institute
- MacTel Project investigators and their research teams (in the Natural History Registry Study and the Phase 1, 2, and 3 clinical trials)
- Study participants with MacTel
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