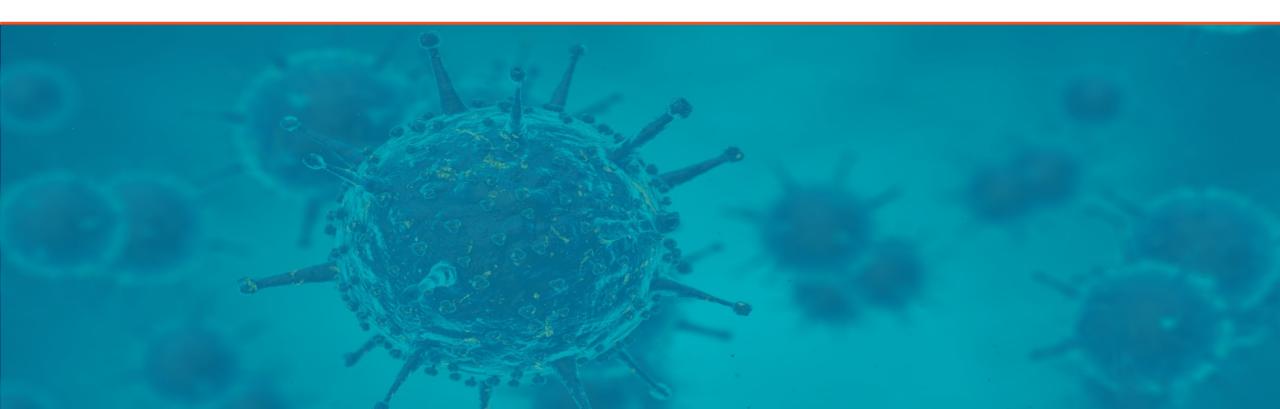


# An Innovator and Developer of OPMD & Early Cancer Diagnostics





#### **Our Mission**

To **save lives** by providing world-class **early detection** solutions for cancer and OPMD

Our First Early Cancer Detection Product

The **BeVigilant™ OraFusion™ System** aids clinicians with identifying patients at risk for **oral cancer**.

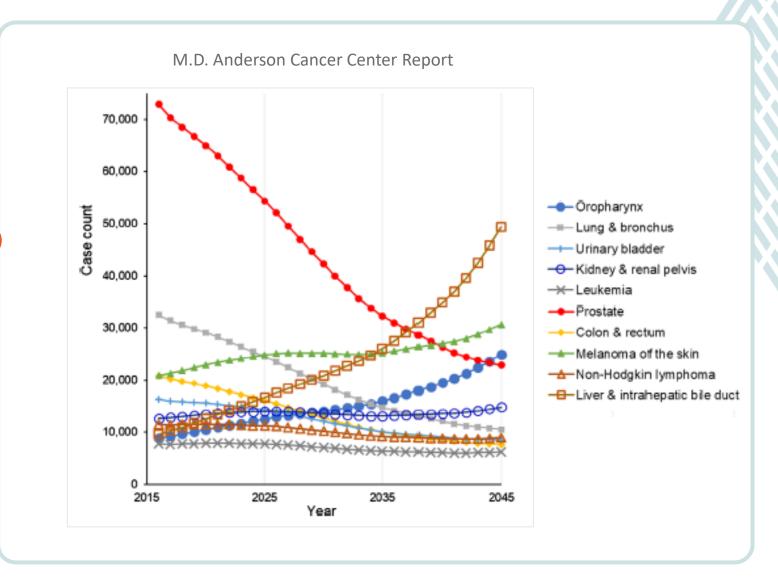


#### Current State of Oral Cancer – The Problem

- 700,000+ new cases globally per year
- Projected to be 3<sup>rd</sup> most prevalent cancer among men in US in 20 years
- >73% of cases diagnosed late-stage
  - 5-year survival rate: <50%</p>
  - Survival rate early-stage >80%
  - Mis-diagnosis #2 reason Dentist get sued (avg settlement >\$2.5M)

#### **Key Point:**

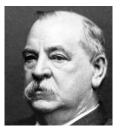
The current standard needs to be improved. The dental industry needs a tool to help!



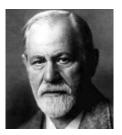
#### Oral Cancer is an Indiscriminate Disease



Ulysses S. Grant, 1884



**Grover Cleveland,** 1893



Sigmund Freud, 1923



Jim Thorpe 1950



Humphrey Bogart, 1956



Ed Sullivan, 1974



Sammy Davis, Jr., 1989



Lana Turner



Bill Tuttle
1993



Diane von Furstenburg, 1994



Brett Butler 1996



George Harrison, 1998



Rene Angelil



Rod Stewart 2000



Eddie Van Halen, 2000



Aaron Spelling, 2001



Roger Ebert 2002



**Hubert Green** 2003



Susan Buffett 2003



Hank Ballard



Colleen Zenk
2007



Michael Douglas, 2010



Larry Hagman,



Jim Kelly 2013



Michael Cooper, 2014



Jamie Dimon



Val Kilmer 2015



Erin Moran
2016



Stanley Tucci 2017

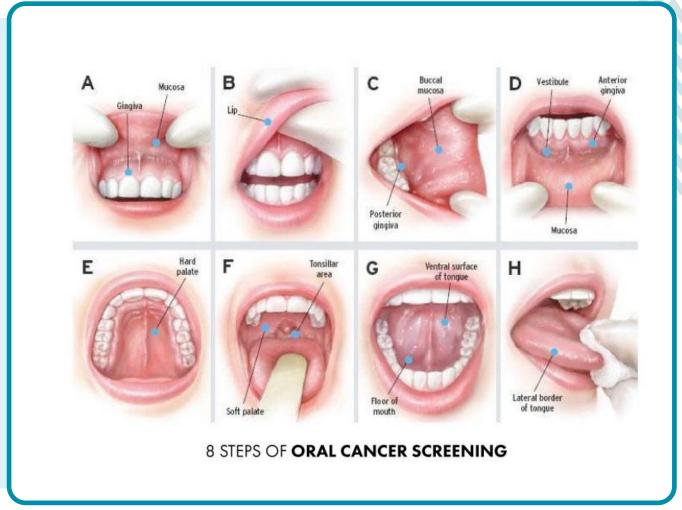


Dick Vitale, 2022

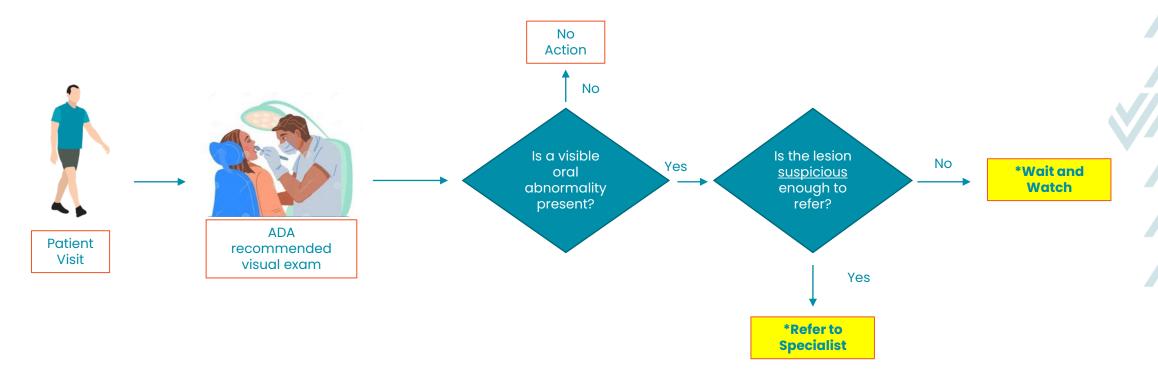
#### Current Standard of Care – Oral Visual Exam

- Oral cancer screening
  - Performed by Dentist / Hygienist
  - Looking for signs of cancer or precancer
  - ~29% patients have an oral abnormality
- ADA recommends every visit on every patient
- Dentist's is responsible and liable to detect oral abnormalities, diagnosing and referring patients
- Accuracy: ~50/50

# **Key Point:** Visual Exam is not enough to accurately detect early-stage cancer



#### **Current Standard Clinical Workflow**



The current process only works when the lesion is obviously suspicious ... <u>late-stage cancers!</u>

Results:

>73% diagnosed late-stage< 50% survival Rate</li>





# Visual Exam - Examples



Diagnosis:TRAUMATIC ULCER



Diagnosis:EARLY SQUAMOUS CELL CARCINOMA

# Visual Exam - Examples



Diagnosis:EARLY SQUAMOUS CELL CARCINOMA



Diagnosis:

EARLY SQUAMOUS CELL CARCINOMA



# The BeVigilant™ OraFusion™ Platform

First-of-its-kind risk assessment / diagnostic device provides exceptional accuracy



Intelligent software for clinical risk factor assessment



Ora-3D™ lateral flow immunoassay with multiple proprietary biomarkers

Whole saliva disposable collection device

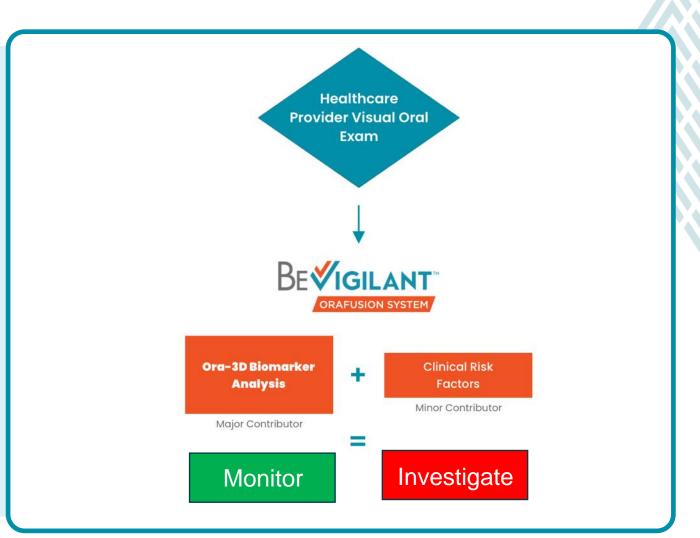
The OraFusion™ System is designed for use with small amounts (<1 ml) of whole fresh saliva.



#### How it Works – Fusion of Information

- Biomarkers in Saliva (major contributor)
  - **Exact concentrations**
  - Relationship to each other
  - How they are affected by other factors (such as age)
- Clinical Risk Factors (minor contributor)
  - Age, Gender, Tobacco and Alcohol
- Al / ML Algorithm driven
- Simple, actionable results
- Extremely accurate
  - Se, Sp, NPV ~93%

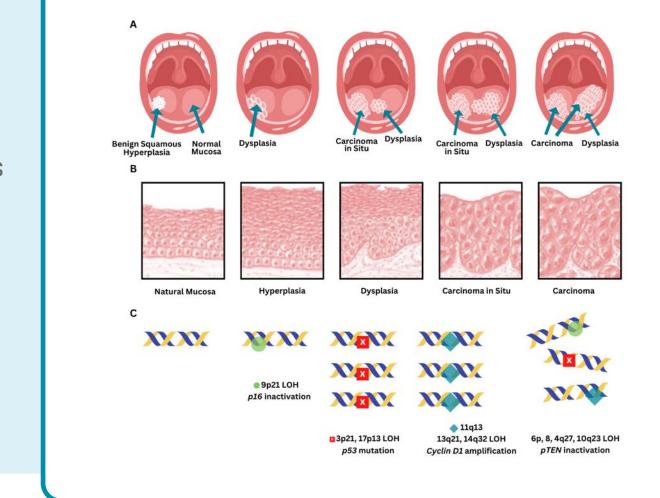
## **Key Point:** Accuracy improves with the fusion of results ... 1 + 1 = 3





# Progression of an Oral Abnormality to Oral Cancer

- Over 3000 proteomic & peptide biomarkers naturally exist in saliva
- As a lesion starts to exhibit cancerous behavior - biomarkers become overexpressed
- Identifying the concentrations of these biomarkers assist in the early detection
- Vigilant identified two proteomic biomarkers present in early stages





#### **Key Point:**

Precise biomarker concentration detection is essential to early diagnosis

# The Future of Early Cancer Detection

Multifactorial Oral Cancer Risk Stratification

Intervention & Assessment

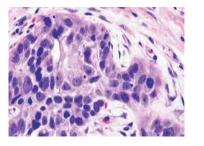
Health Economics



- Population studies
- Identify risk factors
- Algorithm development



- Advanced Data Analysis
- Early-Stage Detection
- <u>Likelihood of Cancer</u>
- Simple Personalized Output
  - Low/Mod/Elevated
- Software Implemented Algorithm
- Improved Screening





- Improved High Risk Surveillance
- Specialized Treatment Plans
- Better Outcomes
  - Uptake of Risk Assessments
  - Uptake of Screening
  - Acceptance with Knowledge

Pre-Diagnostic (Risk Assessment)

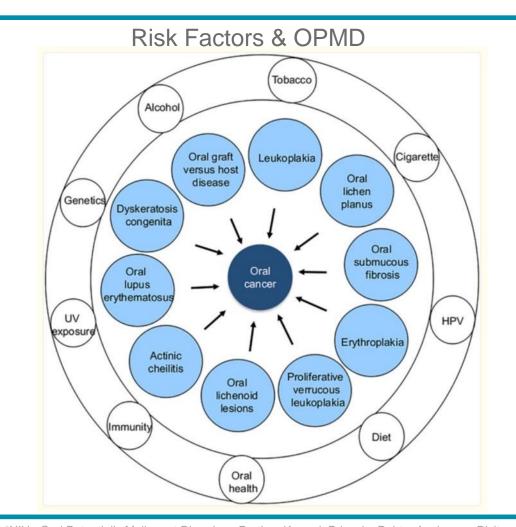
Diagnostics

#### When to Use the OraFusion Test

- Oral Potentially Malignant
   Disorders (OPMD) could lead to
   oral cancer and should all be
   tested
- Dentist face the decision on how to treat these disorders on a regular basis
- Liability for diagnosis occurs from the moment the patient enters the practice

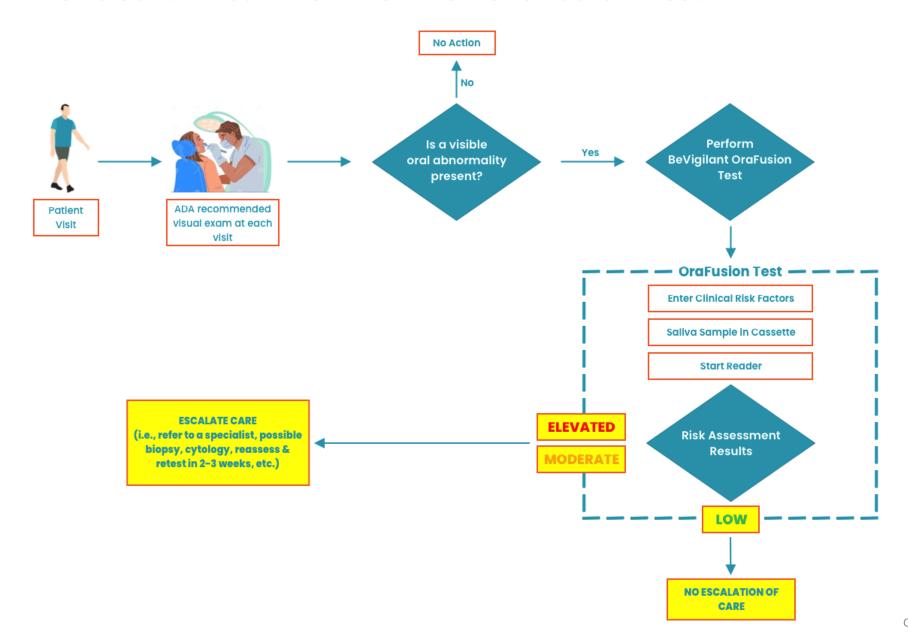
### Key Point:

All OPMDs should be tested to prevent late-stage diagnosis



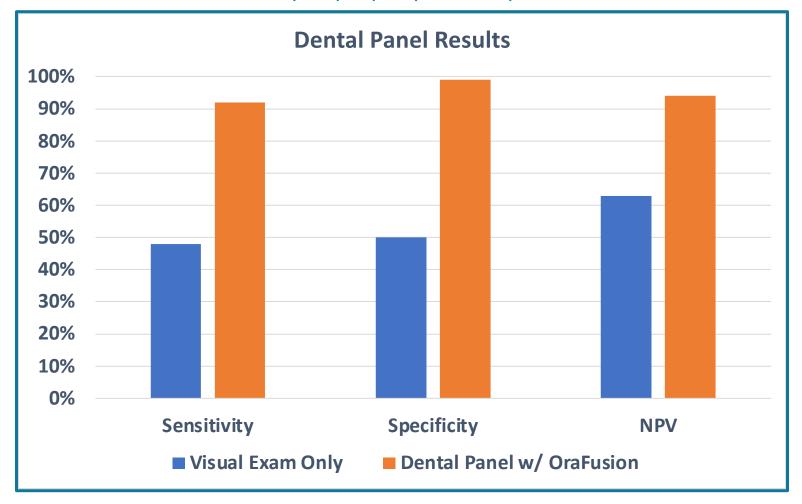


#### Recommended Clinical Workflow for OraFusion Test



# Clinical Study Results – FDA Pending

A dramatic improvement in clinician's ability to properly assess patients for risk of oral cancer



"Essentially doubling my accuracy in properly assessing patients for oral cancer is amazing!"

CONFIDENTIAL & PROPRIETARY

#### Benefits to Dentists – Make them the Hero ... Save a life

- Accurately assess patients
  - <u>Unlikely</u> cancerous behavior *Peace of Mind*
  - <u>Likely</u> cancer or precancer **Sense of Urgency**
- Objective evidence that clinician should take action – Escalate Care
- Increase Patient follow through
  - Follow up with Specialist Get a biopsy
- Decrease Liability
  - Reduce malpractice risk of misdiagnosis

#### Keys to Patient Communication:

- Elevate the status of the practice
  - Health care provided
  - Concern for patient's well being
- Clinician does not have to tell the patient they have cancer (that comes from biopsy)
  - Objective measure of "suspicious" abnormality
  - Need to escalate care
  - A specialist can rule out biggest concern
  - Odds have it, it's nothing, but what if it's something!
- Catch the problem Early, before it's too late

