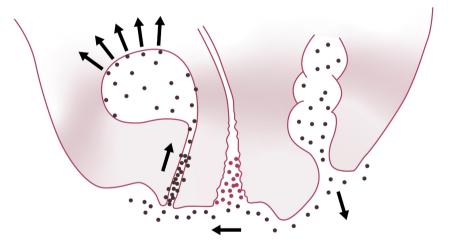
1. The Issue

Urinary Tract Infections (UTI)

- 2nd most common bacterial infection world-wide¹.
- Almost only women due to anatomy (8:1)¹.
- Leads to **significant complications** or even death if untreated.
- > 14 Mio. women in EU&USA are estimated to have recurrent UTI (meaning 3 or more episodes per year).
- In the USA also, 7 mio office visits, 100'000 hospitalizations and USD 1.6 billion costs p.a.¹



1 Foxman, B. et al., Ann Epidemiol. 2000;10:509-15.

2 Lautenbach, E., Clin Infect Dis. 2013 Nov. 57(9):1266-9.

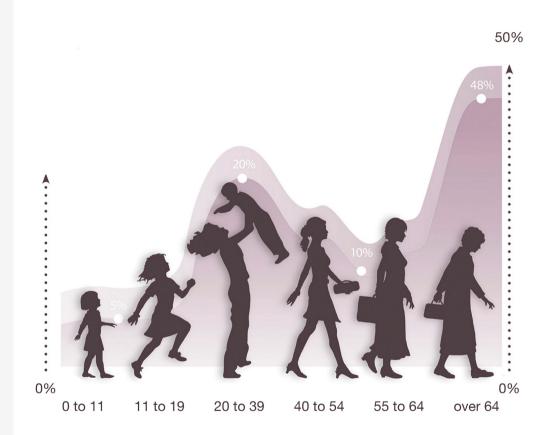
*B*acteria are moving from anus to urethra. The vagina is protected by lactic acid bacteria. *E.coli* bacteria are responsible for at least 80% of all infections².

1. The Issue

UTI in Women

10% yearly UTI incidence rate in women¹:

- Peak age 17-40: Sexually active women.
- **Peak age 60+:** Hormone change, increasing incontinency, staying in elderly home, less hygiene.



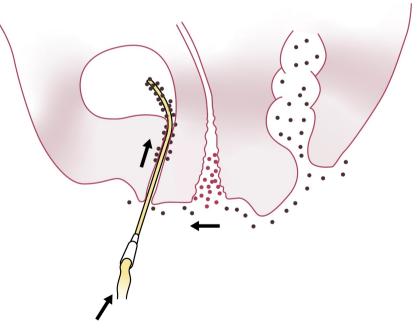
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1. The Issue

Catheter Associated UTI (CAUTI)

- Insertion of a catheter pushes bacteria from urethra into bladder.
- Affects men and women equally.
- Catheter associated UTI is the source for about 20% of episodes of health-care acquired bacteremia in acute care facilities and 50% in long term care facilities¹.
- Associated costs are **3 bn USD** p.a. in the USA alone.

1 Scott, R.D., The direct medical costs of healthcare-associated infections in U.S. hospitals and the benefits of prevention, 2009

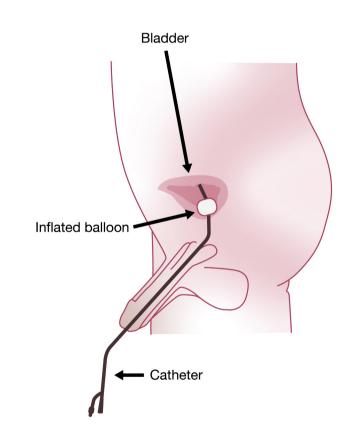


Insertion of a catheter pushes bacteria into bladder.

1. The Issue

In-dwelling / balloon catheters

- Used during hospital stays or for incontinent patients.
- Due to costs, catheters are not being replaced often enough leading to bacteria growth on catheter.
- One of the most common infections acquired by patients in health care facilities.



1. The Issue

Intermittent catheters

- Intermittent catheters (4x per day) often needed by paraplegic patients.
- 244 mio catheters are used per year world-wide.
- Infection rate is 20%¹, resulting in several UTI per patient and year.
- CAUTI is the second most common cause of death among paraplegic patients.

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1 Thietje, R. et al., J Spinal Cord Med. 2011 Sep; 34(5): 482-487.

Brochures at entrance of paraplegic university hospital station: focus catheterization

1. The Issue

Today's preventative methods are not satisfactory

- Teaching of good daily hygiene practices
- Changing the hormone regiment
- Use of cranberry or D-Mannose
- Vaccination against E.coli



As consequence, in over 90% of all cases **antibiotics** are being prescribed.

1. The Issue

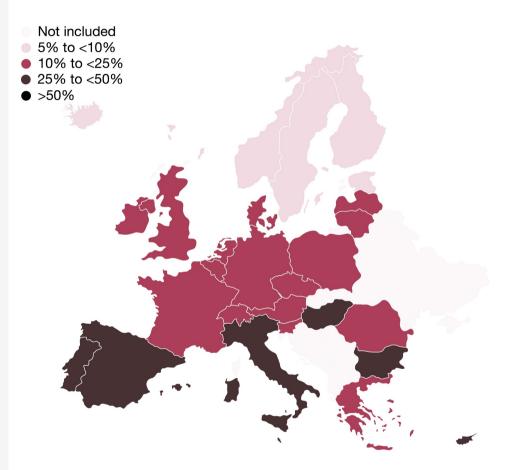
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Increasing Antimicrobial Resistance

UTI + antibiotics = resistance

- In Germany, multi-resistant *E.coli* increased from 0% to 46% in humans from 2009 to 2016!¹
- 15% of all community prescribed antibiotics are use against UTI.

1 ECDC. Antimicrobial resistance surveillance in Europe 2009. Annual Report of the European Antimicrobial Resistance Surveillance Network (EARS-Net). Stockholm; 2010. ISBN 978-92-9193-227-6



Proportion of invasive isolates with resistance to fluoro-quinolones in 2009.

2. Our Solution

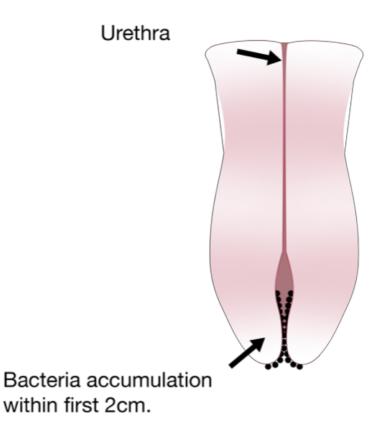
Our New Approach: Disinfection of the Urethra

 Bacteria colonize the urethra, mainly the first 2 cm. These bacteria are moving into the bladder or are being pushed into the bladder when a catheter is being applied. By killing these bacteria, UTI should be massively reduced.

Prof. Dr. J. Pannek, head urologist at Swiss Paraplegic Center, Nottwil:

- The presented concept of decontaminating the distal part of the urethra is very promising and based on findings in scientific literature.
- The method to use an antibacterial stick for decontamination is independent of any catheter type.

protecturo



2. Our Solution

protecturo

Our Solution UTINO™

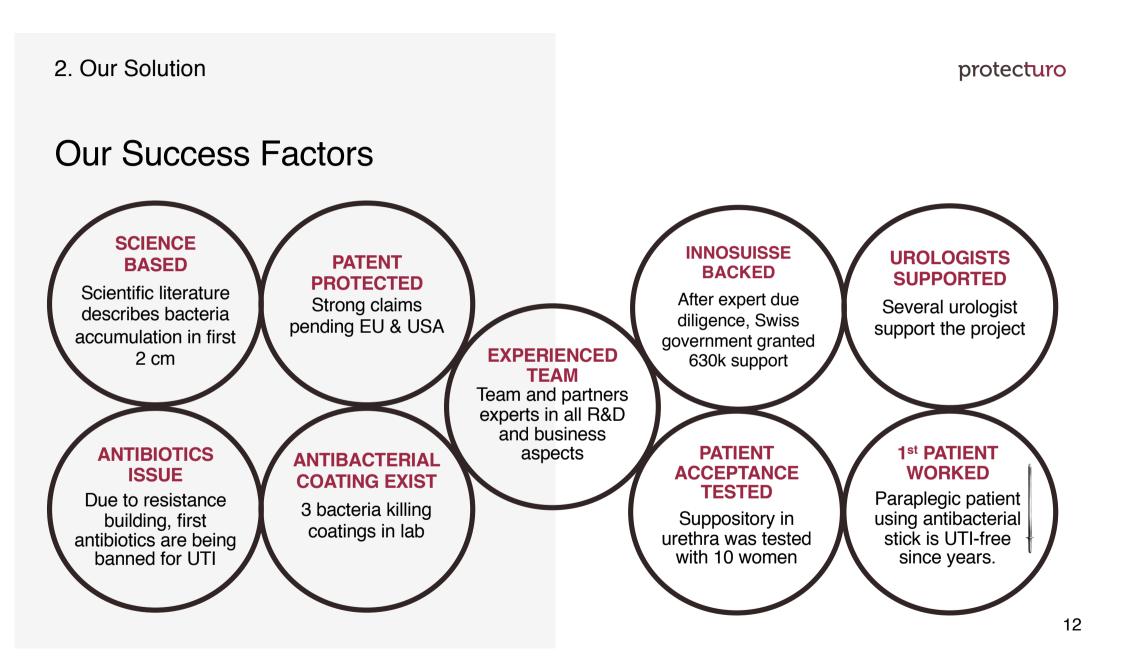
- UTINO[™] is inserted for 1min. prior to catheterization or risk behavior.
- Bacteria killing coating reduces bacteria load in the urethra.
- Less living bacteria will reach bladder. -> significant less Urinary Tract Infections.

Patient acceptance of a urethral suppository was successfully tested in the US in 2015. 10 healthy women were asked to wear the product for 30min (10min side-lying, 10min. sitting, 10min walking).

8 out of 10 patients would be willing to insert such a device to treat a disease.

Urethra

Urethral stick + antibacterial coating



3. The Team

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Management & Board



Jean-Jacques Becciolini

Founder & President Dipl. Ing. ETH

Succesful Entrepreneur in Urology (Swiss Medical Solution AG, Tecuro AG, Inura AG).



Dr. Kurt Ruffieux

CEO, Board Member Dipl. Ing. ETH

Founder & CEO of Degradable Solutions AG, CTO Sunstar. Has developed and registered 11 medical devices.



Dr. Gerd Ries

Regulatory & Medical Officer, Board Member Biochemist

Various management positions at J&J: European and Global level in R&D, QA, Regulatory Affairs.



Dr. Wolf-Friedrich Bähre

Board Member Dipl. Ing. ETH

Serial Entrepreneur and Board Member, Former owner and CEO of Urokink Industries, Germany.



Stephan Stirnimann

CFO, Board Member Lic. Oec. HSG

Certified public accountant, specialized in controlling and supporting start-up companies. 4. The Project

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Competent Partners



Plasma & Coating Group

Lab of Bio-mimetic Membranes & Textiles

5. The Summary

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Summary

- Unique product idea addressing a major health issue with millions of patients.
- Providing urologists with an additional therapy to fight against UTI.
- Reducing the use of antibiotics
- Development and testing of product is running with expected registration in 2023.



Thank you very much for your attention!