

Delivering Innovative Ophthalmic Products to Patients with Serious Eye Disorders

New Treatments For Non-Infectious Uveitis

December 11, 2018

NASDAQ: EYPT

Forward Looking

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EyePoint Management in Attendance



David Price

Chief Financial Officer

- Former CFO of Concordia, BioVentus, Cornerstone Therapeutics & Edgar Online
- Investment banking at Jefferies & Bear Stearns
- Began career in public accounting at Arthur Anderson



Dr. Dario Paggiarino

Vice President & Chief Medical Officer

- Former SVP & CDO of Lpath
- VP & Head of Retina Unit at Alcon
- Senior-level roles at Pfizer, Pharmacia and Angelini

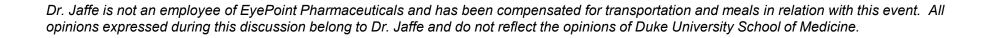


Highly-regard Uveitis Specialist



Dr. Glenn Jay Jaffe

- Robert Machemer, M.D., Professor of Ophthalmology, Duke University School of Medicine.
- Chief, Division of Retinal Ophthalmology, Duke Eye Center
- Primary clinical investigator of the YUTIQ Phase 3 program
- Published extensively on a variety of ophthalmic clinical research topics
- M.D., University of California, San Francisco, School of Medicine
- American Board of Ophthalmology Certified



EyePoint Highlights A Transformational Opportunity in Ophthalmology



Postoperative inflammation following cataract surgery



Posterior segment uveitis

Acquired Icon Bioscience to transform business and accelerate growth

Obtained \$80M+ in capital from new institutional investors

Two ophthalmology launches in 1H 2019

Executing on strategy to expand ophthalmology portfolio and utilize existing platform

Strong leadership team with seasoned executives at the helm



EyePoint Pharmaceuticals is becoming a leading Ophthalmology Specialty Pharmaceuticals Company by....

- Optimizing revenue from our two existing products
- Continuing to develop new products using our two platform technologies
 - Durasert
 - Verisome
- Adding ophthalmology products via
 - Acquisition
 - In licensing
- Out-licensing non US rights to credible partners
- Selectively adding to our existing collaboration portfolio
- Strong financial backing from our partners



Financing Options

- At September 30 2018 cash on hand of \$58m and debt of \$20m
- Operating business will be cash flow negative through the end of 2019
 - Utilize existing cash to fund operating cash deficit
 - Potential to increase debt/raise equity capital to fund the balance of the cash need
- Despite recent reductions, EYPT share price has appreciated over 100% in 2018; before we have launched either of our products...





EyePoint Pharmaceuticals' Product Pipeline

Product / Program	Preclin.	Phase 1	Phase 2	Phase 3	Approval	Market	Rights
DEXYCU™ post-operative inflammation				J-C	ode Received	1H 2019 Launch	ww
YUTIQ™ three-year treatment for posterior segment uveitis				J-C	Code Available	1Q 2019 Launch	U.S. ⁽¹⁾
YUTIQ™ shorter duration treatment for posterior segment uveitis					Reg filing in 2019		ww
Durasert™ TKI wet AMD							WW
Verisome [®] technology – PGE glaucoma							WW
Verisome [®] technology – NSAID cataract surgery inflammation							ww
ILUVIEN [®] , RETISERT [®] Royalties							Partners ⁽¹⁾⁽²⁾
Collaborations		>					Partners ⁽³⁾

EYEP

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(1) Alimera Sciences, Inc. owns worldwide rights to ILUVIEN[®] for DME and rights for YUTIQ[™] for non-infectious posterior uveitis in the EMEA (not approved for uveitis in EMEA).

(2) RETISERT[®] (fluocinolone acetonide intravitreal implant), for posterior uveitis, is licensed to and sold by Bausch & Lomb, Inc.

(3) EyePoint is currently engaged in a collaboration relating to a back of the eye disease. EyePoint will continue to evaluate other potential technology platform agreements.

Managing Recurrent Non-Infectious Posterior Uveitis With An Injectable Sustained Delivery Intravitreal Fluocinolone Insert

One-year Interim Results of Two Randomized, Double-Masked Sham-Controlled, Multi-Center Clinical Trials

> Glenn J. Jaffe, MD Duke University

Important Take-Home Messages

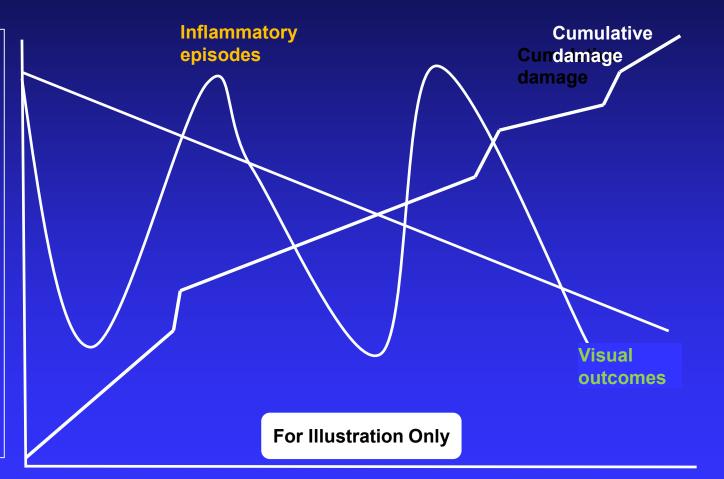
FAi significantly reduces recurrences
Safety profile acceptable
Long-term office-based delivery feasible

Rationale

- NIPU chronic disease
- Long term Rx needed for inflammation control
- Sustained drug release rational Rx approach
- Office based delivery ideal

Cumulative Inflammation and Loss of Visual Acuity

- Recurrent episodes of inflammation cause cumulative damage¹
- Visual outcomes: the most important factor is the number of inflammatory episodes²



1. Durrani OM, et al. BJO. 2004. 2. Nguyen Q, et al. Retina. 2006.

Methods

Methods: Study Design

- Masked, randomized, prospective, sham-controlled
- 001: 33 sites / N=129
- 005: 15 sites / N=153
- 2:1 0.18mg FAi or Sham

Methods: FAi Insert

- Polyimide tube
- Fluocinolone acetonide core 0.18 mg
- 3.5 mm in length
- Modified 25 g injector
- Release up to 3 years



Methods: Study Comparisons

PSV-FAI-001

- Multinational US, UK, Germany, Hungary, Israel, India
- MK I Inserter

PSV-FAI-005

- Multicenter
 15 sites in India
- MK II Inserter





Methods:Patients

- \geq 1Y history of recurrent NIPU requiring:
 - $\ge 3M$ systemic therapy; or
 - ≥ 2 steroid injections
- 6 mmHg < IOP < 21 mmHg without meds
- No Retisert (36M), Ozurdex (6M), steroid injections (3M)

Methods: Efficacy

Uveitis Recurrence:

- $\geq +2$ 1 in vitreous haze; or
- ≥ 15 letter loss of VA
- Imputed for missing data & rescue Tx for inflammation

• VA

ME resolution

Methods: Safety

IOPCataract extraction

Technique



Results

Results: 001

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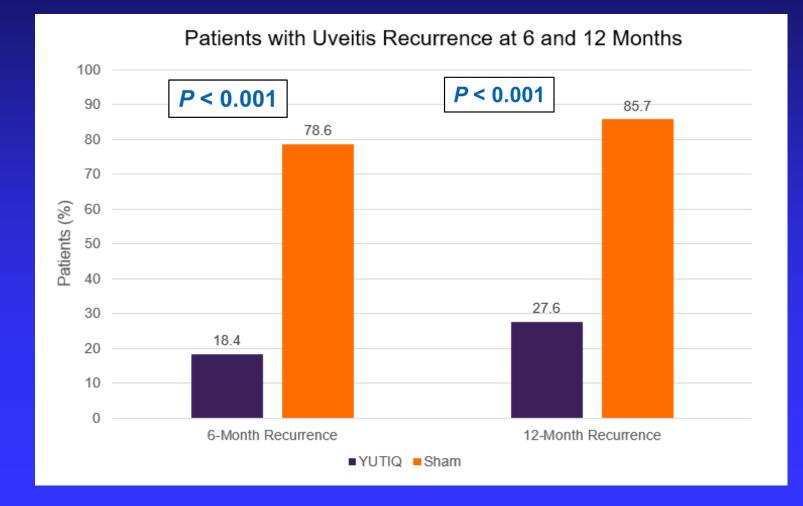
ubject Characteristics	FAi	Sham
	(N=87)	(N=42)
Age	48.3±13.9 Y	48.3±13.7 Y
Sex	57.5% Female	69.0% Female
Systemic Uveitis Tx	50.6%	50.0%
Disease Duration	7.8±6.7 Y	5.6±6.8 Y
Vitreous Haze $\geq 1+$	44.8%	50.0%
A/C Cells $\geq 1+$	11.5%	21.4%
ETDRS BCVA (letters)	66.9±15.5	64.9±15.5
Phakic – no cataract	19.5%	28.6%
Phakic – cataract	28.7%	21.4%
IOP	13.9 ± 3.1 mmHg	13.6 ± 3.2 mmHg

Results: 005

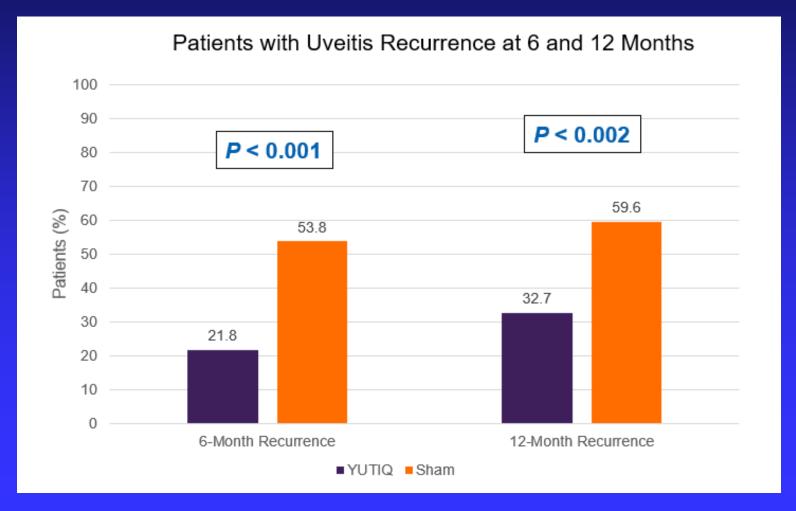
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Subject Characteristics	FAi	Sham
)	(N=101)	(N=52)
Age	39.9±12.9 Y	40.6±13.7 Y
Sex	61.4% Female	65.4% Female
Systemic Uveitis Tx	38.6%	38.5%
Disease Duration	3.1±3.0 Y	3.6±3.0 Y
Vitreous Haze $\geq 1+$	63.4%	73.1%
A/C Cells $\geq 1+$	7.9%	5.8%
ETDRS BCVA (letters)	66.4±15.8	63.6±16.8

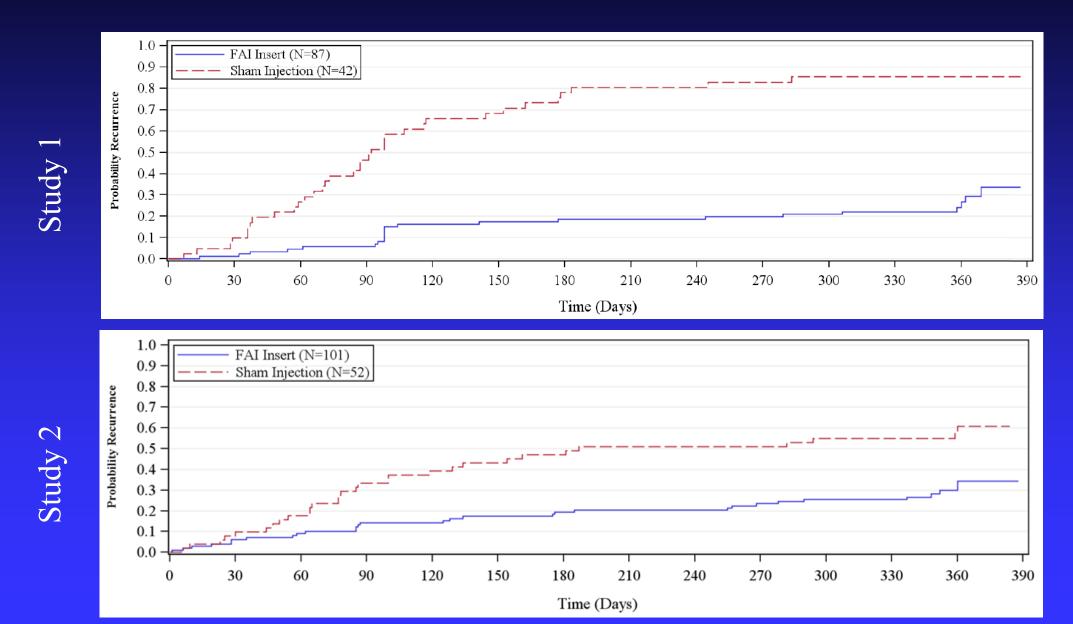
Results: NIPU Recurrence Study 001



Results: NIPU Recurrence Study 005



Results: NIPU Recurrence



Use of Adjunctive Therapies by 12 months (PSV-FAi-001)

Therapy	FAi	Sham
Systemic steroids or immunosuppressants	19.5%	40.5%
Intra-periocular steroids	6.9%	61.9%
Topical steroids	20.7%	47.6%

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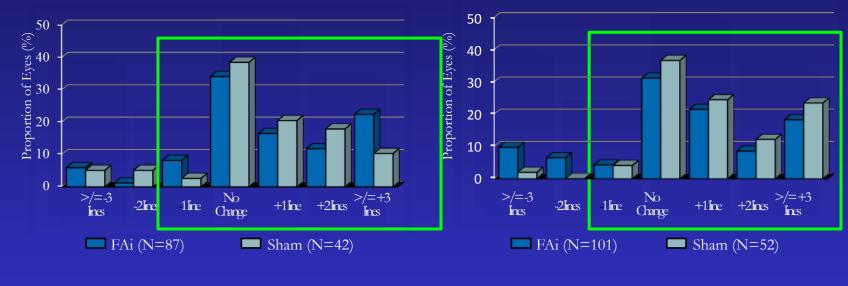
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Results: BCVA

001 12M

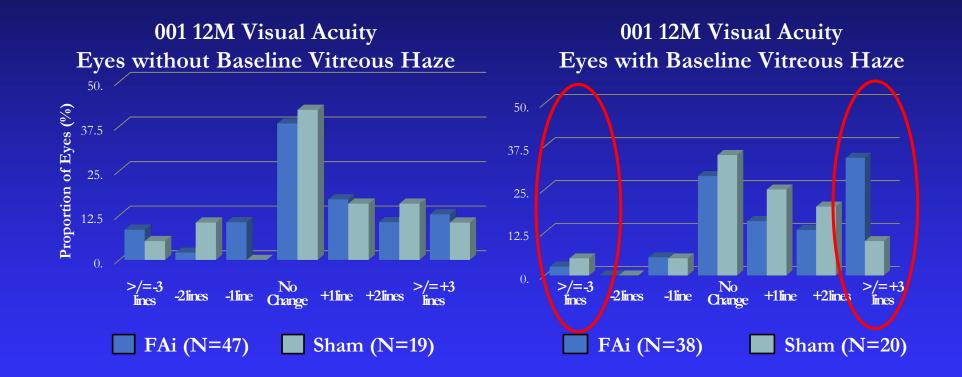
005 12M



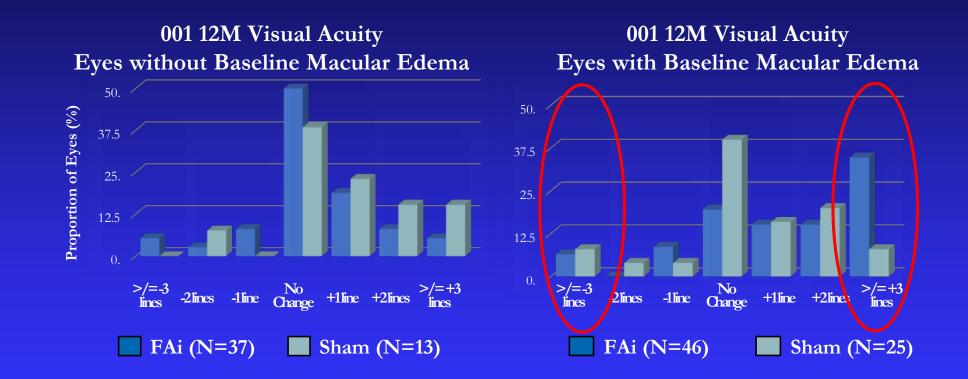
• 5.8/3.3 letters

• 3.0/7.4 letters

Results: Vit Haze/BCVA



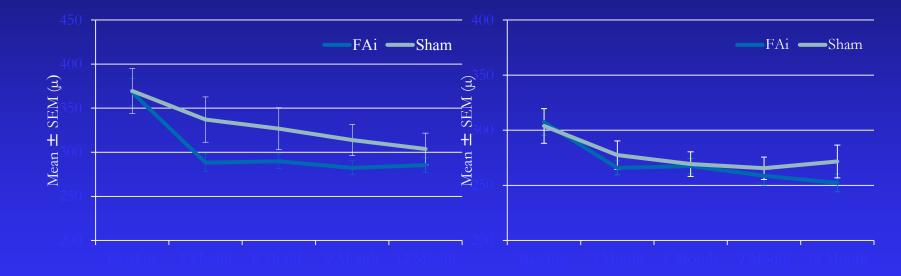
Results: ME/BCVA



Results: Central Subfield Thickness

001 12M

005 12M

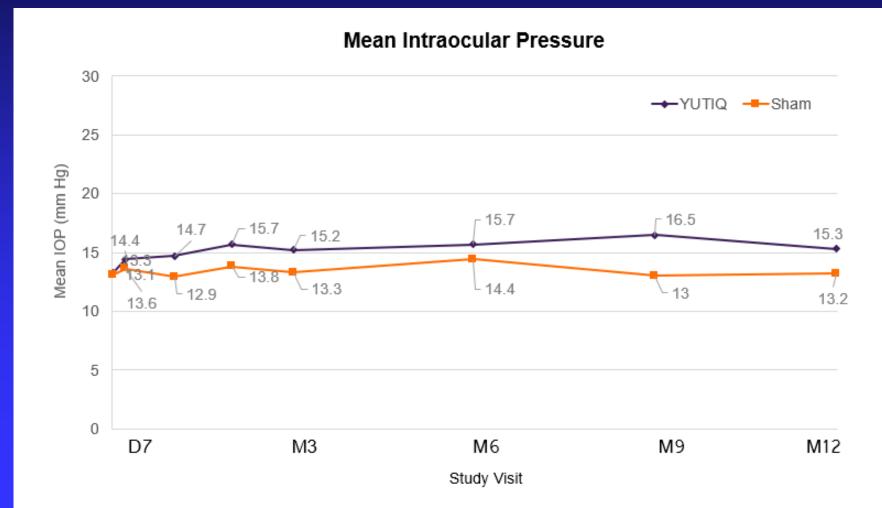




Safety: Mean IOP Study 001

Mean Intraocular Pressure 30 -YUTIQ -Sham 25 Mean IOP (mm Hg) 20 r 15.8 15.7 /- 16.5 15.5 15.6 ∟ 15.2 15.2 15 13.9 - 14.4 - 13.8 - 13.2 12.9 14.1 13.8 13.4 10 5 0 D7 Μ6 M12 M3 М9 Study Visit

Safety: Mean IOP Study 005



Glaucoma Procedures 001 Study 12 months

FAi 4.8%
Sham 3.4%

Glaucoma Procedures 005 Study 12 months



Cataract Extraction 001 Study 12 months

FAi 33.3%
Sham 4.8%

Results: Other Adverse Events

Ocular Adverse Reactions n (%)	YUTIQ (n=226 eyes)	Sham Injection (n=94 eyes)
Cataract*	63/113 (56%)	13/56 (23%)
Visual Acuity Reduced	33 (15%)	11 (12%)
Macular Edema	25 (11%)	33 (35%)
Uveitis	22 (10%)	33 (35%)
Conjunctival Hemorrhage	17 (8%)	5 (5%)
Eye Pain	17 (8%)	12 (13%)
Hypotony Of Eye	16 (7%)	1 (1%)
Anterior Chamber Inflammation	12 (5%)	6 (6%)

*Includes cataract, cataract subcapsular and lenticular opacities in study eyes that were phakic at baseline. 113 of the 226 YUTIQ study eyes were phakic at baseline; 56 of 94 sham-controlled study eyes were phakic at baseline.

Conclusions

- FAi effective NIPU Rx in diverse group
- Extended continuous inflammation control
- Office-based injection
- No unanticipated side effects: IOP and cataract manageable using standard therapies
- Both 3-year studies continue
- FDA approved