EYEPOINT PHARMACEUTICALS R&D DAY 2024 •

UNIVERSITY CLUB | NEW YORK CITY | JUNE 26, 2024



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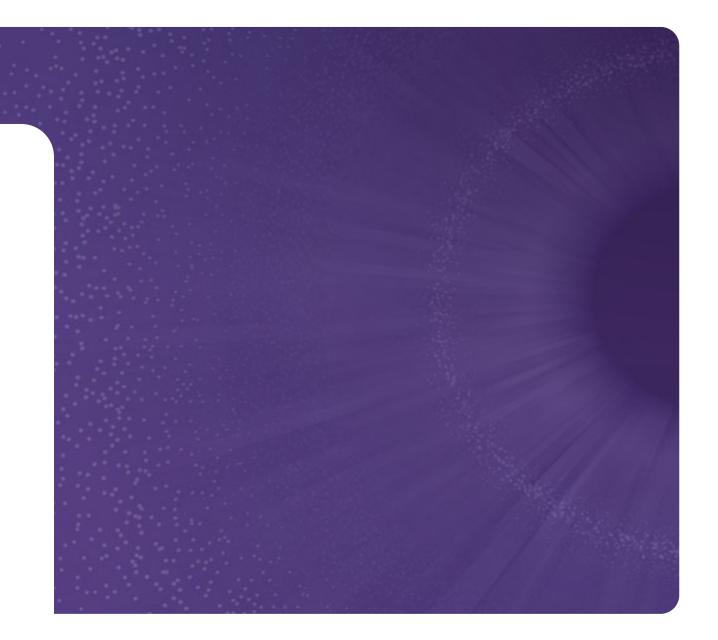
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Various statements made in this presentation are forward-looking, within the meaning of the U.S. Private Securities Litigation Reform Act of 1995, and are inherently subject to risks, uncertainties and potentially inaccurate assumptions. All statements that address activities, events or developments that we intend, expect, plan or believe may occur in the future, including but not limited to statements about the sufficiency of our existing cash resources through topline data for Phase 3 clinical trials for DURAVYU[™] in wet AMD; our expectations regarding the timing and clinical development of our product candidates, including DURAVYU and EYP-2301; the potential for DURAVYU as a novel sustained delivery treatment for serious eye diseases, including wet age-related macular degeneration, non-proliferative diabetic retinopathy and diabetic macular edema; and our longer term financial and business goals and expectations, are forward-looking statements. Some of the factors that could cause actual results to differ materially from the anticipated results or other expectations expressed, anticipated or implied in our forwardlooking statements are risks and uncertainties inherent in our business including, without limitation: the effectiveness and timeliness of clinical trials, and the usefulness of the data; the timeliness of regulatory approvals; our ability to access needed capital; termination or breach of current and future license agreements; our dependence on contract research organizations and other outside vendors and service providers; effects of guidelines, recommendations and studies; protection of our intellectual property and avoiding intellectual property infringement; retention of key personnel; product liability; industry consolidation; compliance with environmental laws; manufacturing risks; risks and costs of international business operations; volatility of our stock price; possible dilution; absence of dividends; the impact of instability in general business and economic conditions, including changes in inflation, interest rates and the labor market; and other factors described in our filings with the Securities and Exchange Commission. We cannot guarantee that the results and other expectations expressed, anticipated or implied in any forward-looking statement will be realized. A variety of factors, including these risks, could cause our actual results and other expectations to differ materially from the anticipated results or other expectations expressed, anticipated or implied in our forward-looking statements. Should known or unknown risks materialize, or should underlying assumptions prove inaccurate, actual results could differ materially from past results and those anticipated, estimated or projected in the forward-looking statements. You should bear this in mind as you consider any forward-looking statements. Our forward-looking statements speak only as of the dates on which they are made. We do not undertake any obligation to publicly update or revise our forward-looking statements even if experience or future changes makes it clear that any projected results expressed or implied in such statements will not be realized.

INTRODUCTIONS AND AGENDA

JAY DUKER, MD I PRESIDENT AND CHIEF EXECUTIVE OFFICER





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R&D Day Speakers: Management

Jay Duker, MD President and CEO

>30 years managing retinal diseases and is a 12-time clinical trial investigator/co investigator; he has started three companies and has published >345 ophthalmic journal articles. Previous Director of the New England Eye Center (NEEC) and Professor and Chair of the Department of Ophthalmology at Tufts Medical Center and the Tufts University School of Medicine in Boston.

George O. Elston EVP and CFO

>25 years of diverse financial and executive leadership in the biopharmaceutical sector with strong record of execution across strategic, operational, financial goals to drive shareholder value. He has established strong relationships across wall street and pharma/biotech resulting in transformative company-building and M&A transactions.

Ramiro Ribeiro, MD, PhD CMO

Extensive experience encompassing clinical practice as a retina specialist, academia and the pharmaceutical industry with a strong track record of successfully bringing novel therapies to patients globally. Previous Head of Clinical Development at Apellis where he successfully led the end-to-end clinical process for FDA approval of SYFOVRE.



R&D Day Speakers: KOL Guest Speakers



Carl D. Regillo, MD, FACS

Professor of Ophthalmology at Thomas Jefferson University; Chief of Retina Service at Wills Eye Hospital; Founder of Wills Eye Clinical Retina Research Unit in Philadelphia and Partner, Mid Atlantic Retina

Yasha S. Modi, MD

Associate Professor of Vitreoretinal Surgery, Retinal Disease and Uveitis at New York University; Director of Teleretina



R&D Day: Agenda (1/2)

PRESENTATION SPEAKER

Introductions	Jay Duker, M.D.
Company Overview	Jay Duker, M.D.
DURAVYU™ (vorolanib intravitreal insert) Overview	Jay Duker, M.D.
DURAVYU™: Phase 2 DAVIO 2 Clinical Results and Sub- Group Analyses	Yasha S. Modi, M.D.
DURAVYU™: Phase 2 DAVIO 2 12-Month Topline Results	Carl D. Regillo, M.D.

DURAVYU[™] has been conditionally accepted by the FDA as the proprietary name for EYP-1901. DURAVYU is an investigational product; it has not been approved by the FDA. FDA approval and the timeline for potential approval is uncertain.



R&D Day: Agenda (2/2)

PRESENTATION SPEAKER

DURAVYU™: Pivotal Phase 3 Plans for Wet AMD	Jay Duker, M.D. Ramiro Ribeiro, M.D., Ph.D.
Early Pipeline	Jay Duker, M.D.
Key Opinion Leader Insights and Discussion	Jay Duker, M.D. Carl D. Regillo, M.D. Yasha S. Modi, M.D.
Q&A	All
Closing Remarks	Jay Duker, M.D. Ramiro Ribeiro, M.D., Ph.D.



R&D Day: Agenda

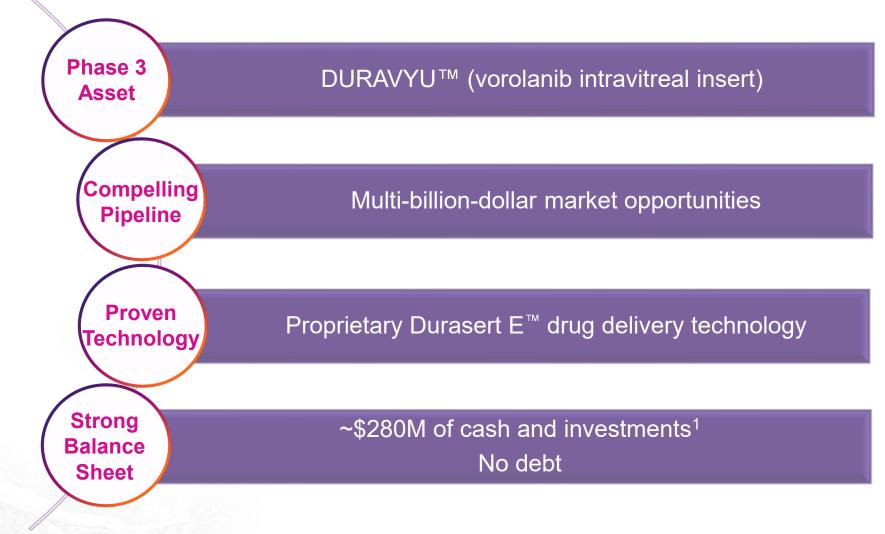
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COMMITTED TO DEVELOPING THERAPEUTICS TO IMPROVE THE LIVES OF PATIENTS WITH SERIOUS RETINAL DISEASES



Phase 3 Clinical Stage Company Leveraging Proven Delivery Technology



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1-Unaudited estimate for June 30, 2024



Pipeline Represents Potential Multi Billion-Dollar Product Opportunities

Durasert E [™] Programs	Indication	Discovery	Pre-Clin	Phase 1	Phase 2	Phase 3	Next Milestone
	Wet AMD	STATIS		I-INFERIOR TO	osoc	•	First Phase 3 Trial 2H 2024
DURAVYU (EYP-1901) – vorolanib in Durasert E™ (tyrosine kinase inhibitor)	NPDR		BIOLOGIC EFF INUED FAVOR	FECT AND RABLE SAFET	Y		12-month data Q3 2024
	DME		FULLY ENROI	LED			Topline data in Q1 2025
EYP-2301 – razuprotafib in Durasert E™ (TIE-2 agonist)	serious retinal diseases						Pre-clin tox and PK data
Complement inhibition	GA						Potential product candidate in 2024
11 • ©2024 EyePoint Pharmaceuticals,	Inc. All Rights Reserved.			ular degeneration; EOP2 pathy; DME, diabetic ma			

TECHNOLOGY

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BIOERODIBLE DURASERT E™



Safe, Sustained-Release IVT Drug Delivery

- Delivered via a standard in-office IVT injection
- Continuous, daily therapeutic dose
- Zero-order kinetics drug release

Durasert E[™]: bioerodible

- Drug embedded within a bioerodible matrix as a solid insert
- Designed to deplete drug load before matrix fully erodes
 - ► DURAVYU[™]

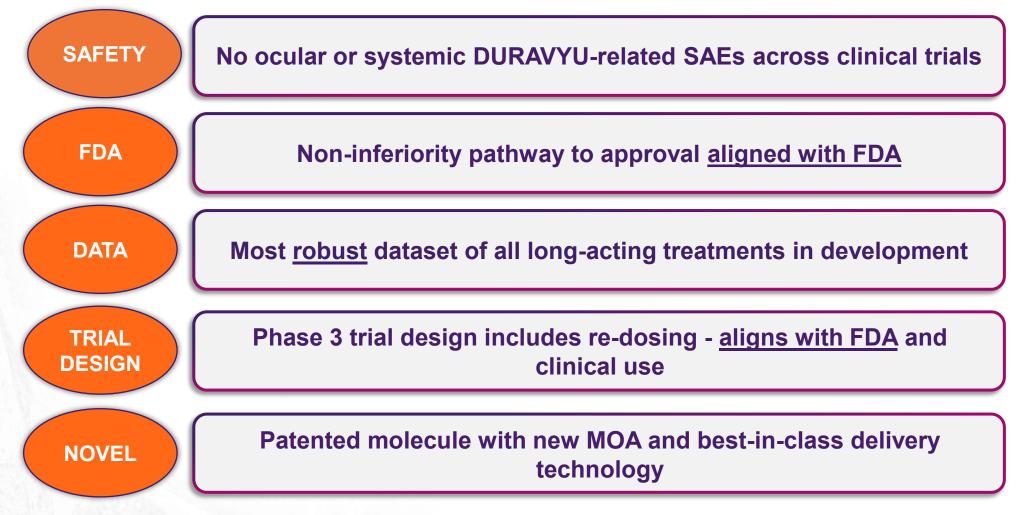


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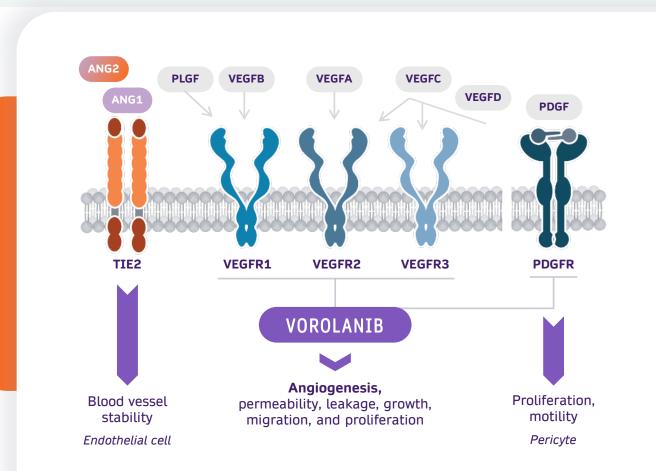
DURAVYU entering Phase 3 with robust dataset and FDA alignment on approval pathway





Vorolanib is a Potent and Highly Selective Pan-VEGF Receptor Inhibitor

- Best-in-class TKI
- Composition of matter patent into 2037
- Demonstrated neuroprotection
- Potential antifibrotic
- Does not inhibit TIE-2¹

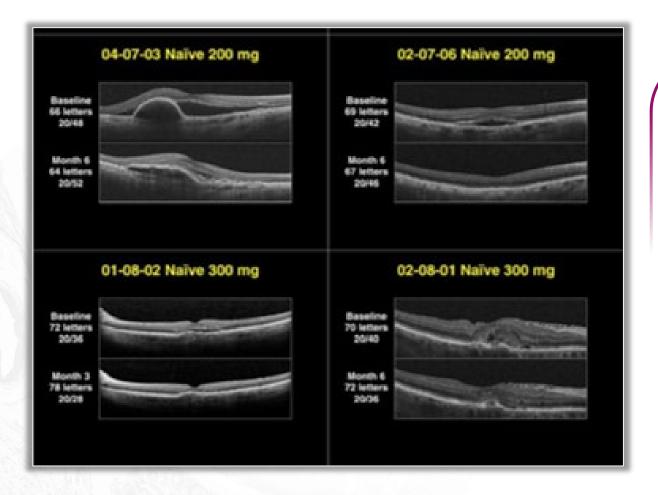


Sophie Bakri, M.D., et al. PLOS ONE,

https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0304782, 2024. VEGF(R), vascular endothelial growth factor (receptor); TKI, tyrosine kinase inhibitor; PDGF(R), platelet-derived growth factor (receptor); TIE-2, tyrosine-protein kinase receptor



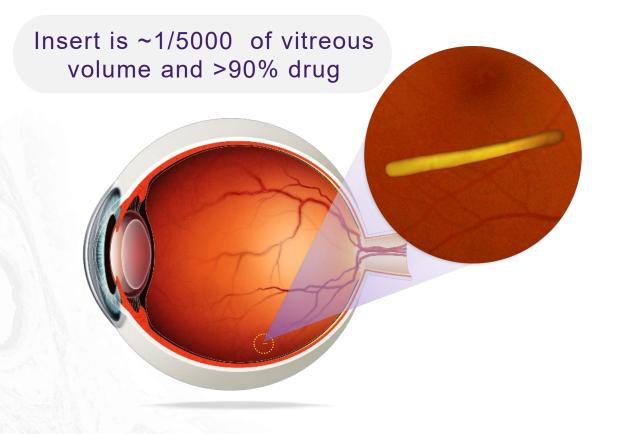
Vorolanib Demonstrated Compelling Clinical Activity in wet AMD Delivered Orally



- Reduced supplemental therapy
 versus anti-VEGF PRN for all doses
- No ocular toxicity
- Systemic use significantly reduced
 fellow eye conversion
- Meaningful reduction in mean OCT
 thickness in treatment-naive patients



DURAVYU: Vorolanib in Bioerodible Durasert E[™]



- Immediately bioavailable
- Controlled release for at least six
 months enables redosing regimen
- No free-floating drug fully eluted prior to bioerosion of matrix
- Routine intravitreal injection
- Shipped and stored at ambient temperature



DURAVYU Demonstrated Clinically Meaningful Safety and Efficacy Outcomes Across Multiple Indications

DURAVYU HAS BEEN TESTED IN 191 PATIENTS TO DATE ACROSS DIFFERENT INDICATIONS

Trial	n size	Indication	Safety	Key Efficacy Outcomes
DAVIO	17	wet AMD		 Stable BCVA and OCT 74% reduction in treatment burden
DAVIO 2	161	wet AMD	Favorable safety profile No DURAVYU	 Statistically non-inferior BCVA >80% reduction in treatment burden Stable OCT
PAVIA	77	NPDR	related ocular or systemic SAEs	 Stable to improved disease severity up to 9- months; trial continuing 12 months
VERONA	27	DME		Trial underway

Interim, masked safety as of June 2024

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Wet AMD, wet age-related macular degeneration; NPDR, non-proliferative diabetic retinopathy; DME. diabetic macular edema



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There is a Significant Need for More Durable Therapies in Wet AMD



Many patients with wet AMD are chronically undertreated

 >80% of Retina Specialists say undertreatment is due to patient noncompliance, scheduling limitations or provider preference for less frequent dosing¹



Current "treat and extend" protocol still places significant burden on physicians and patients

Chronic disease treated with short acting anti-VEGF biologics



- A delay in care/missed visit can result in vision loss
 - A delay in treatment of only 5.34 weeks resulted in vision loss²

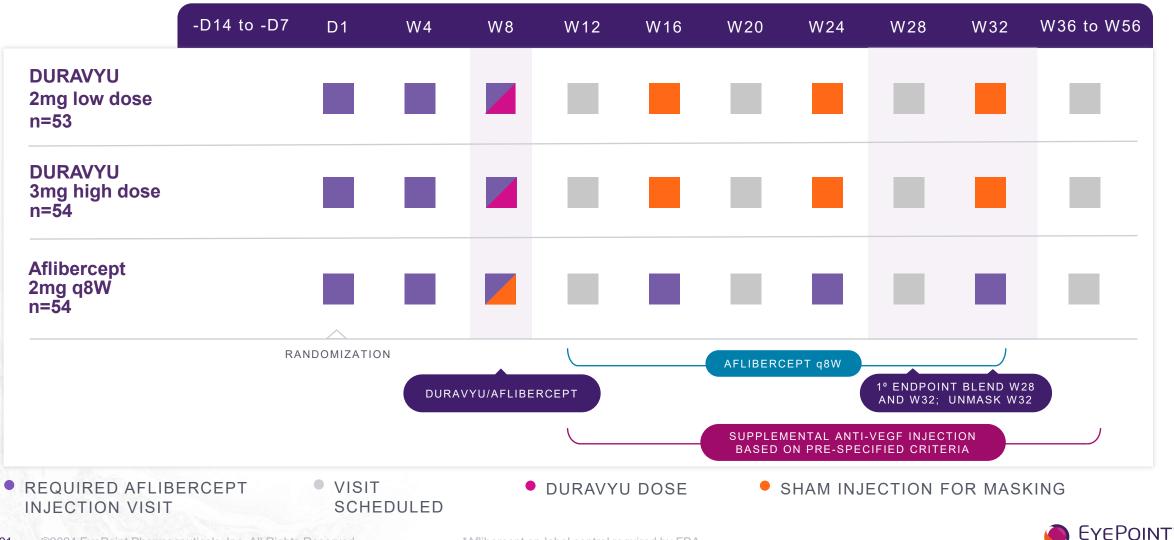


- An aging population means significantly more injections in a patient's lifetime
 - Current anti-VEGF treatments are dosed on average every two months in the United States³

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1. 2022 PAT Survey; 2. American Academy of Ophthalmology, *The Effect of Delay in Care Among Patients Requiring Intravitreal Injections*, Welin Song, BS et al; 3. NIH *Current and Upcoming Anti-VEGF Therapies and Dosing Strategies for the treatment of neovascular AMD: a comparative review*, Saira Khanna et al, Dec. 2019

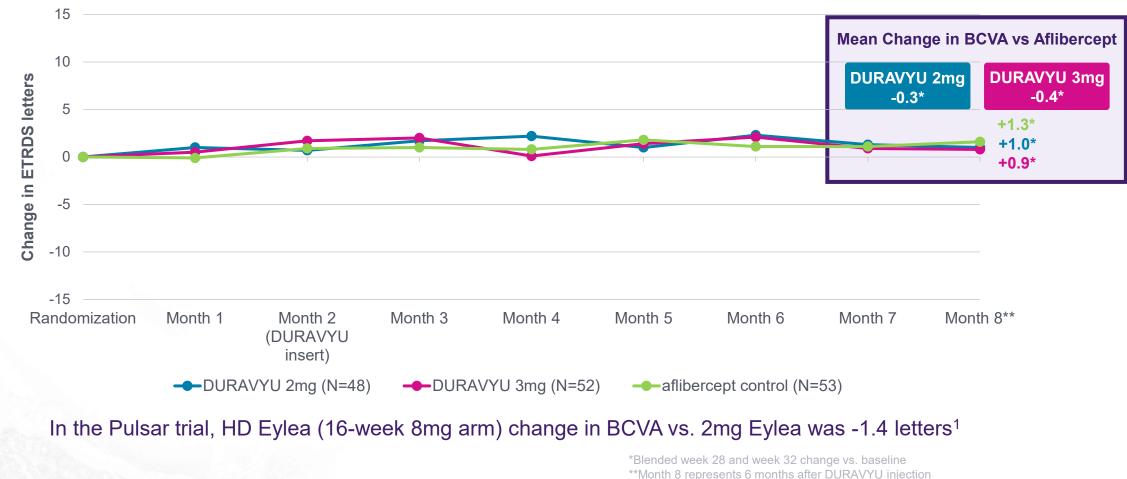
DAVIO 2 Clinical Trial is Randomized, Double-Masked, Aflibercept Controlled* with a Single DURAVYU Treatment at Two Doses



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*Aflibercept on-label control required by FDA

DURAVYU was Statistically Non-Inferior in Change in BCVA Compared to the Aflibercept Control (95% CI)



MEAN CHANGE IN BCVA FROM BASELINE

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 1 – AAO 2022 presentation, Paolo Lanzetta, on behalf of the PULSAR study investigators

CI, Confidence Interval PRELIMINARY DATA – PENDING FINAL ANALYSIS



Clinically Meaningful Reduction in Treatment Burden Retrospectively Supports DURAVYU as a Maintenance Treatment For Wet AMD

	DURAVYU 2mg	DURAVYU 3mg
Mean number of injections week 8 through week 32	0.55	0.73
Mean number of injections 6 months prior to screening*	4.98	5.02
Reduction in treatment burden vs. 6 months prior (%)	89%	85%



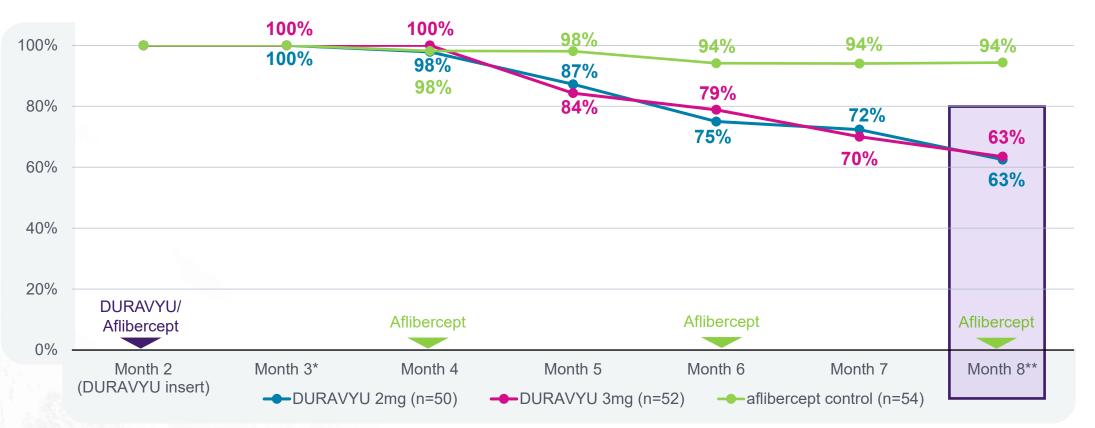
DURAVYU Demonstrated a Meaningful Reduction in Treatment Burden Prospectively vs. the Aflibercept Control Arm

	DURAVYU 2mg	DURAVYU 3mg	Aflibercept 2mg q8W
Mean number of injections week 8 through week 32	0.55	0.73	3.28
Reduction in treatment burden vs. aflibercept control (%)	83%	78%	NA



Nearly Two-Thirds of Eyes Treated with DURAVYU were Supplement-Free up to Six Months

DESPITE EOM AFLIBERCEPT INJECTIONS, 6% OF THE CONTROL GROUP REQUIRED ADDITIONAL SUPPLEMENTATION



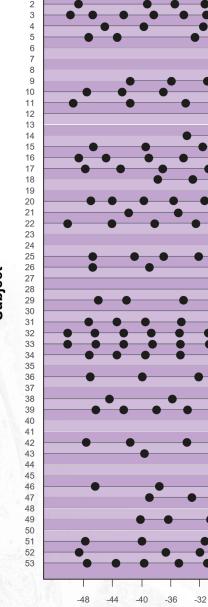
SUMMARY OF SUPPLEMENT-FREE RATES BY MONTH

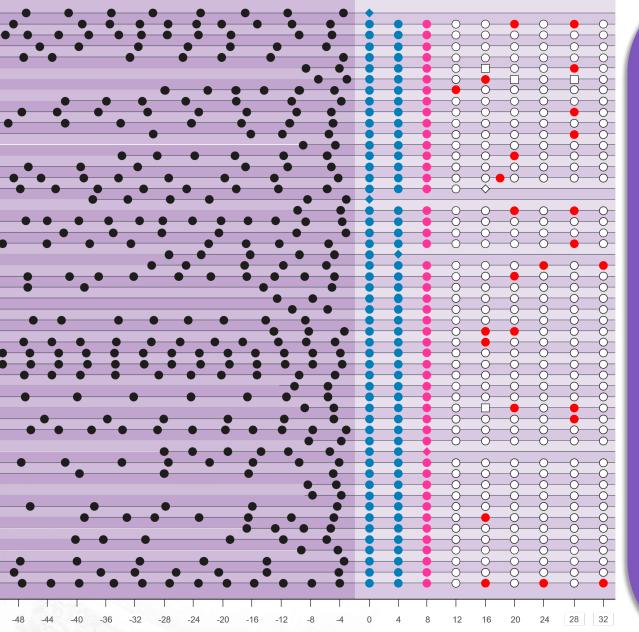
*First visit patients are eligible to be supplemented EOM, every-other-month PRELIMINARY DATA – PENDING FINAL ANALYSIS

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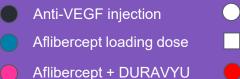




Weeks

DURAVYU 2mg Dose Reduced Treatment Burden by 89% Compared to Prior 6 Months

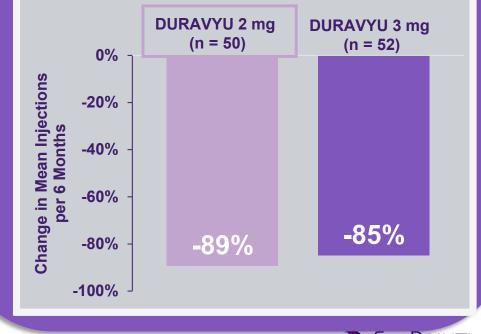
Injections in year prior and during the DAVIO 2 trial





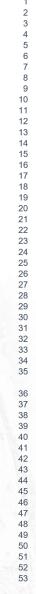
Missed Visit

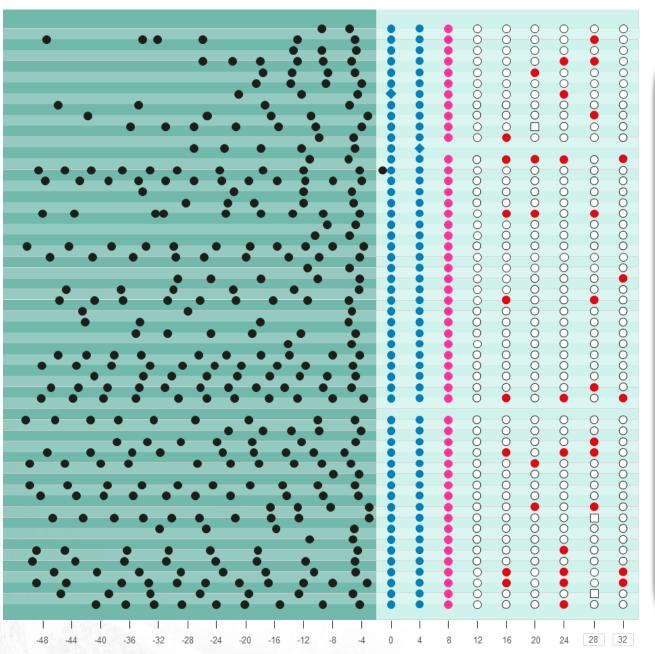
Supplemental injection



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DURAVYU 3mg Dose Reduced Treatment Burden by 85% Compared to Prior 6 Months

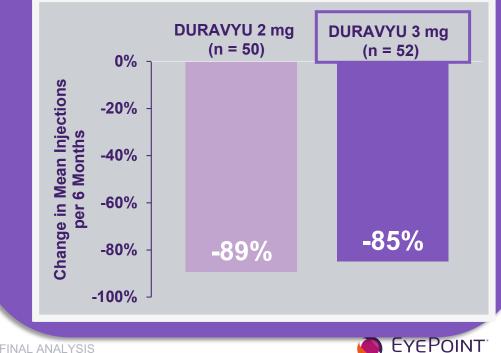
Injections in year prior and during DAVIO 2 trial

- Anti-VEGF injection
- No injection
- Aflibercept loading dose

Aflibercept + DURAVYU

- Missed Visit
- Supplemental injection

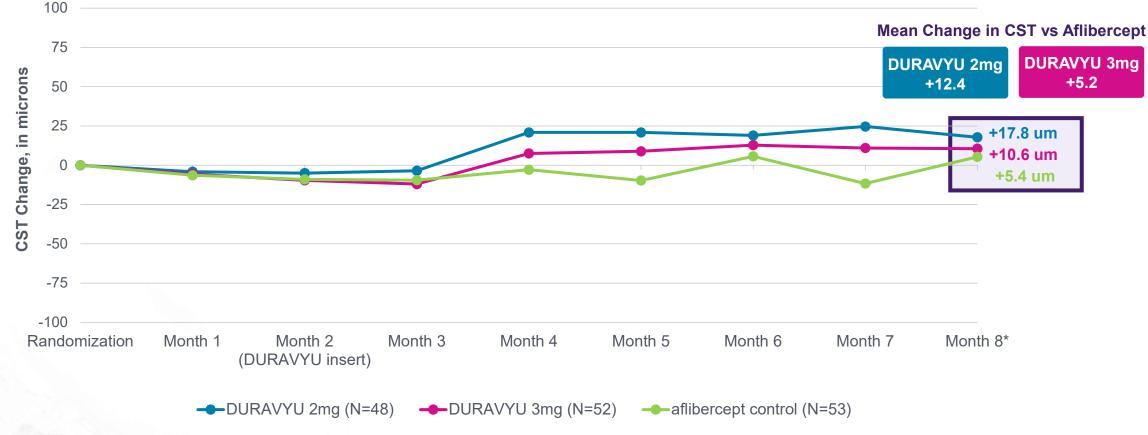
PHARMACEUTICALS



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PRELIMINARY DATA - PENDING FINAL ANALYSIS

Data from DAVIO 2 Suggests Strong Anatomic Control at 6-Months Compared to the Aflibercept Control

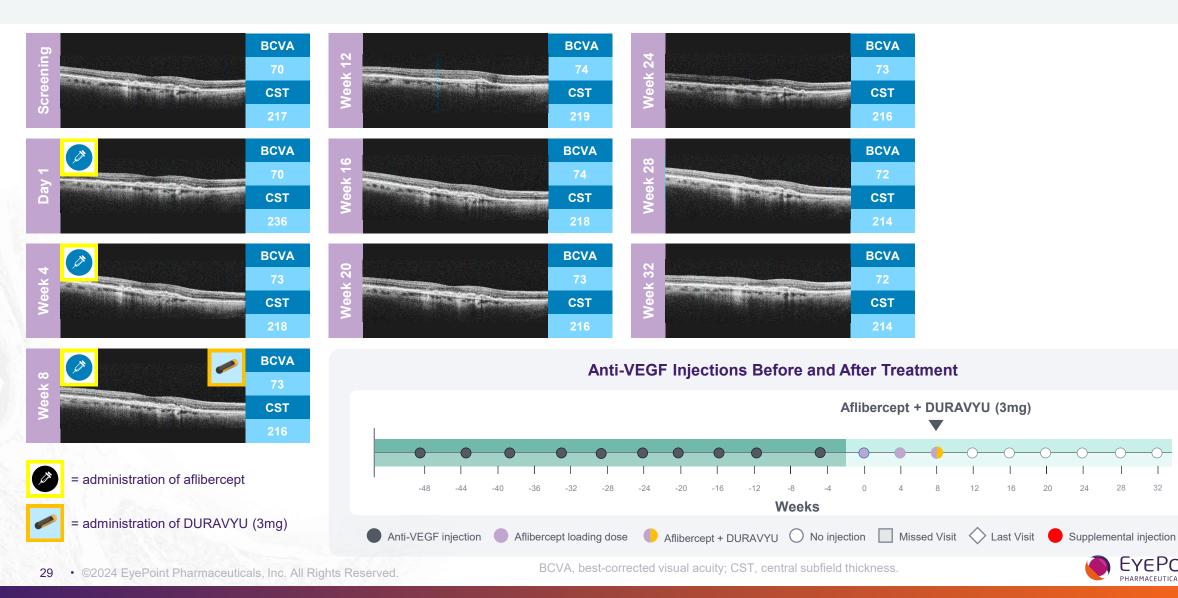


MEAN CHANGE IN CST

**Month 8 represents 6 months after first DURAVYU injection PRELIMINARY DATA – PENDING FINAL ANALYSIS



DAVIO 2 Case Study: Patient with Frequent Anti-VEGF Injections Was Maintained for at Least Six Months After Receiving DURAVYU



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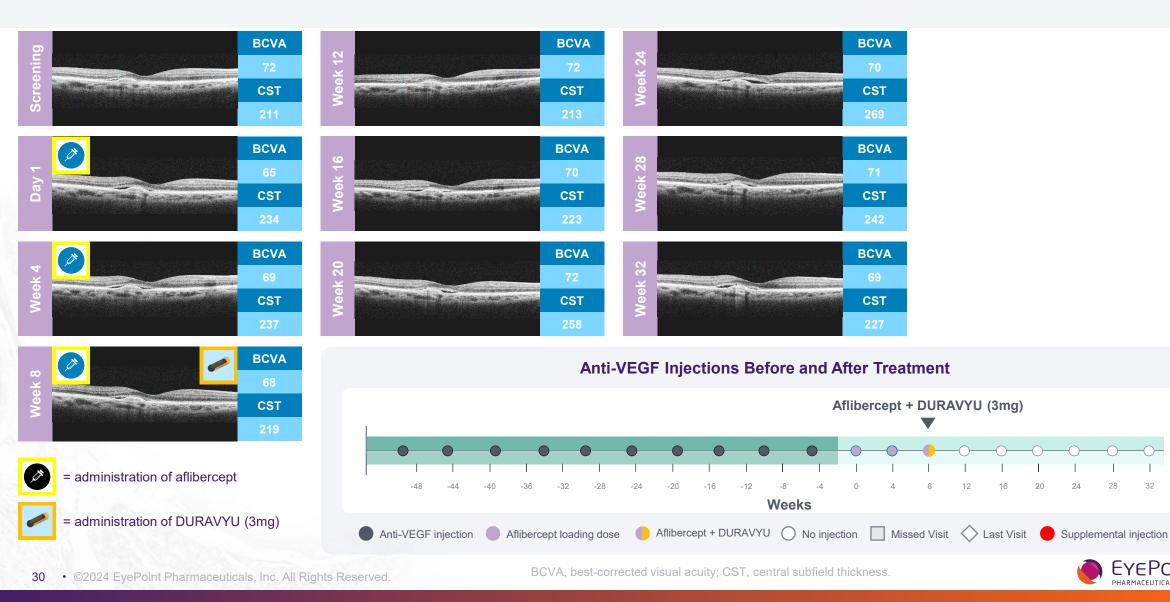
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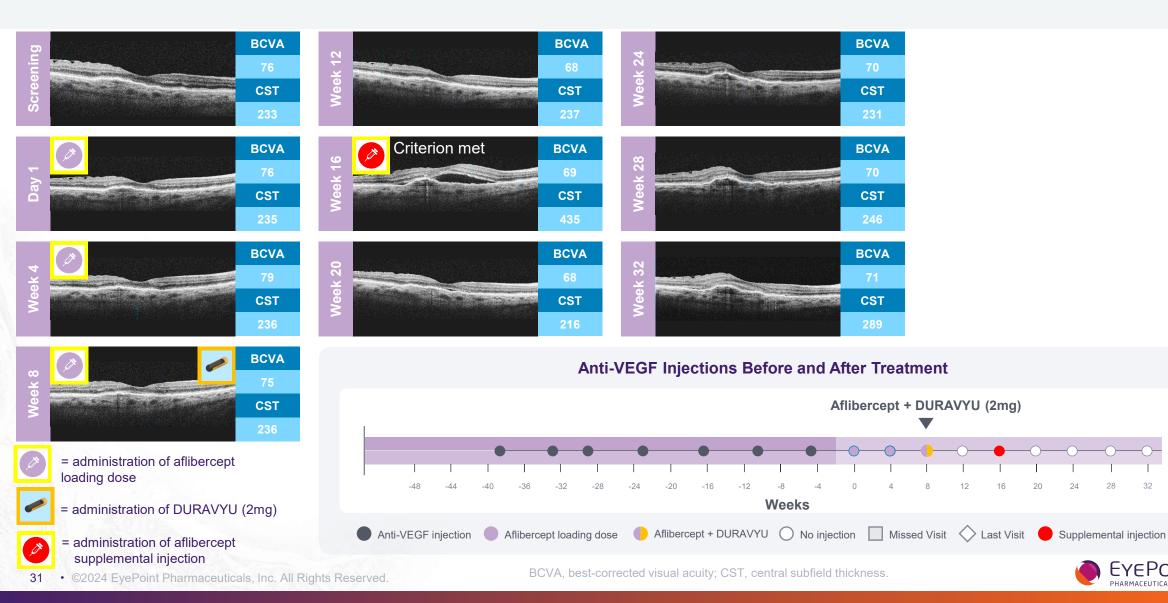
DAVIO 2 Case Study: Patient Treated with DURAVYU had Fluctuations in Fluid without Impact on Vision

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DAVIO 2 Case Study: Patient Treated with DURAVYU Remained Dry with Only One Supplemental Injection



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DURAVYU Phase 2 DAVIO 2 Clinical Trial in Wet AMD Met All Primary and Secondary Endpoints

Endpoint	2mg	3mg	
✓ Primary: Non-inferior change in BCVA vs. aflibercept	- 0.3 letters	- 0.4 letters	
Secondary: Favorable safety profile ¹	No DURAVYL	J-related SAEs	
Secondary: Reduction in treatment burden vs. 6 mos prior	89%	85%	
Secondary: Reduction in treatment burden vs. aflibercept	83%	78%	
✓ Secondary: Supplement-free up to 6 months	63% 88% of eyes had 0 or only 1 supplemental injections	63% 83% of eyes had 0 or only 1 supplemental injections	
Secondary: Anatomical control vs. aflibercept	+12.4um	+5.2um	



PHASE 2 DAVIO 2 TRIAL IN WET AMD

SUB-GROUP ANALYSIS





Sub-Group Analysis of Supplement-Free Patients Demonstrated Eyes Treated with DURAVYU had Numerically Better Visual Acuity vs. Control

TO SIX MONTHS MEAN CHANGE IN BCVA FROM BASELINE 15 Mean Change in BCVA vs Aflibercept 10 **Change in ETRDS letters DURAVYU 3mg DURAVYU 2ma** +0.1* +0.6*5 +2.3* +1.9* +1.7*-5 -10 -15 Randomization Month 1 Month 2 Month 3 Month 4 Month 5 Month 6 Month 7 Month 8** (DURAVYU insert) DURAVYU 2mg sub-group (N=30) DURAVYU 3mg sub-group (N=33) *Blended week 28 and week 32 change vs. baseline

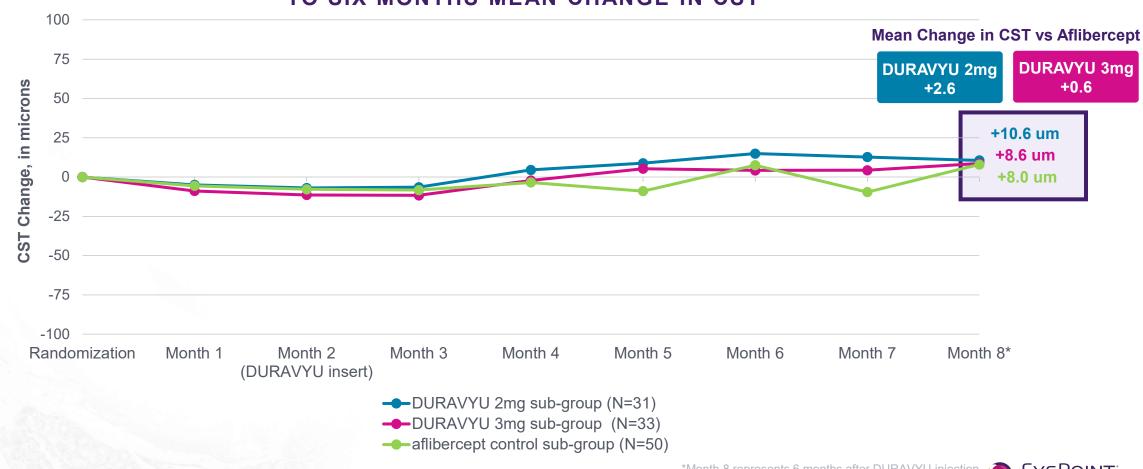
SUB-GROUP ANALYSIS OF PATIENTS SUPPLEMENT-FREE UP

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**Month 8 represents 6 months after DURAVYU injection . PRELIMINARY DATA - PENDING FINAL ANALYSIS

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Sub-Group Analysis of Supplement-Free Patients Demonstrated Strong Anatomic Control Up to 6-Months Compared to the Aflibercept Control



SUB-GROUP ANALYSIS OF PATIENTS SUPPLEMENT-FREE UP TO SIX MONTHS MEAN CHANGE IN CST

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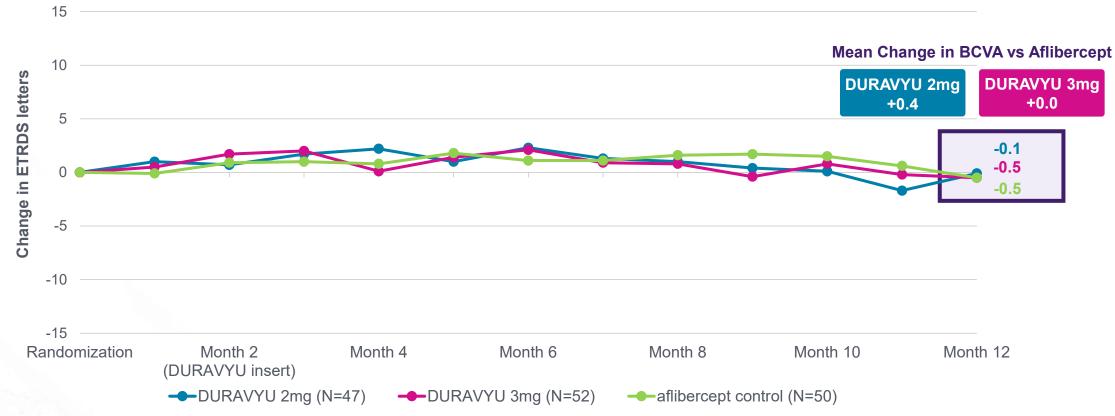
*Month 8 represents 6 months after DURAVYU injection PRELIMINARY DATA – PENDING FINAL ANALYSIS



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Nearly Identical BCVA Compared to Aflibercept Through 12-Months After a Single Injection; Statistically Significant (95% CI)



MEAN CHANGE IN BCVA FROM BASELINE

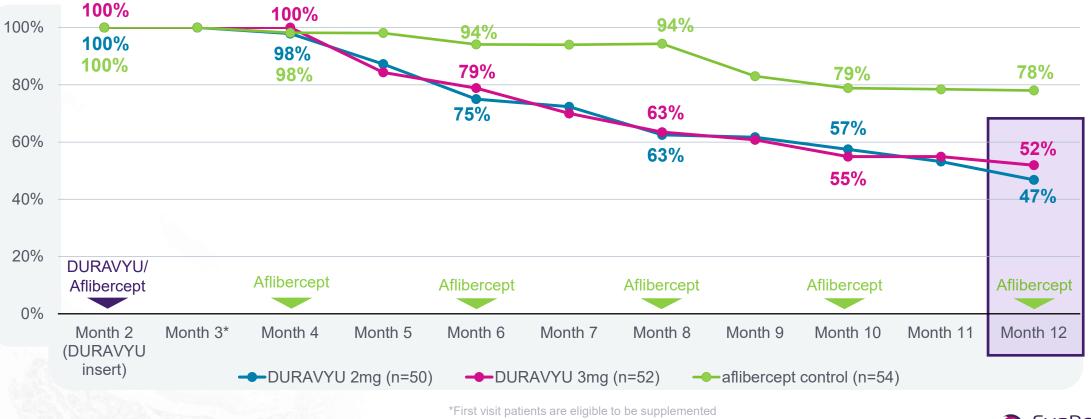


PRELIMINARY DATA - PENDING FINAL ANALYSIS



Clinically Meaningful Supplement-Free Rates in DURAVYU Treated Eyes After Single Injection

DESPITE EOM AFLIBERCEPT INJECTIONS, 22% OF THE CONTROL GROUP REQUIRED ADDITIONAL SUPPLEMENTATION



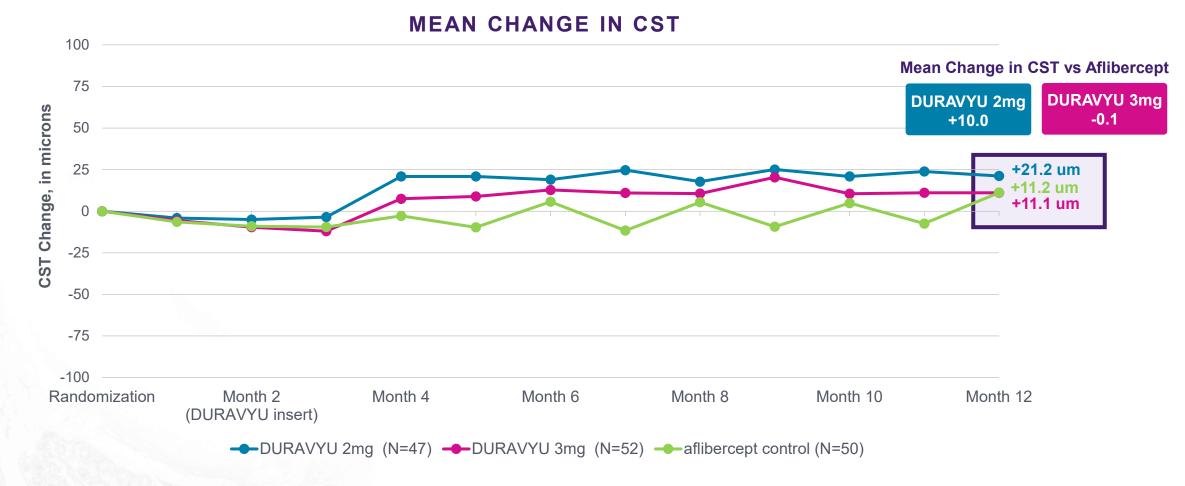
SUMMARY OF SUPPLEMENT-FREE RATES BY MONTH

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EOM, every-other-month PRELIMINARY DATA – PENDING FINAL ANALYSIS



Data from DAVIO 2 Demonstrates Strong Anatomic Control in Eyes Treated with DURAVYU without Saw-Toothing Seen in Aflibercept Arm





DURAVYU Demonstrated a Favorable Safety Profile in the Phase 2 DAVIO 2 Clinical Trial

- No DURAVYU-related ocular or systemic SAEs
- No insert migration into the anterior chamber
- No retinal occlusive vasculitis
- Low patient discontinuation rate
 - No discontinuations were related to DURAVYU treatment

1. As deemed by the investigator Data as of June 14, 2024 SAE, serious adverse event; AE, adverse event; IVT, intravitreal injection PRELIMINARY DATA CUT– PENDING FINAL ANALYSIS



Topline 12-Month DAVIO 2 Data Underscores Highly Positive Results

Efficacy:

- After a single injection, eyes treated with DURAVYU maintained stable visual acuity with strong anatomical control
- Approximately half of DURAVYUtreated eyes were supplement-free up to 12 months

Safety:

 No ocular or systemic DURAVYUrelated SAEs

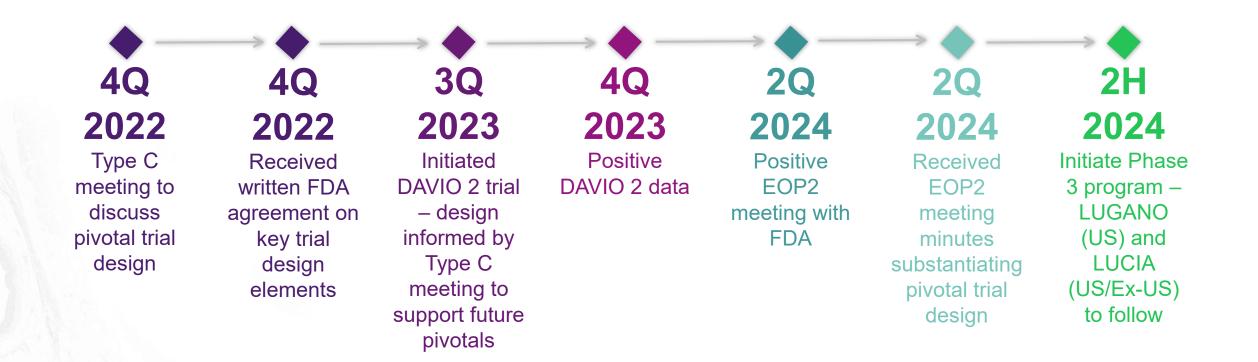


PRESENTATION SPEAKER

DURAVYU™: Pivotal Phase 3 Plans for Wet AMD	Jay Duker, M.D. Ramiro Ribeiro, M.D., Ph.D.
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Q&A	All
Closing Remarks	Jay Duker, M.D.



Clear Regulatory Pathway for Phase 3 Pivotal Trials in wet AMD Informed by Multiple FDA Interactions





Phase 3 Trials are Designed to Enable Global Regulatory Approval of DURAVYU

LUGANO/LUCIA: GLOBAL, RANDOMIZED, DOUBLE-MASKED, AFLIBERCEPT CONTROLLED



ENDPOINTS

Primary Endpoint: difference in mean change in BCVA from Day 1 to Week 52 and 56 (blended) versus aflibercept control

Secondary endpoints: safety, reduction in treatment burden, percent of eyes supplement-free, anatomical stability



Phase 3 Program is Designed to Drive Global Regulatory and Commercial Success

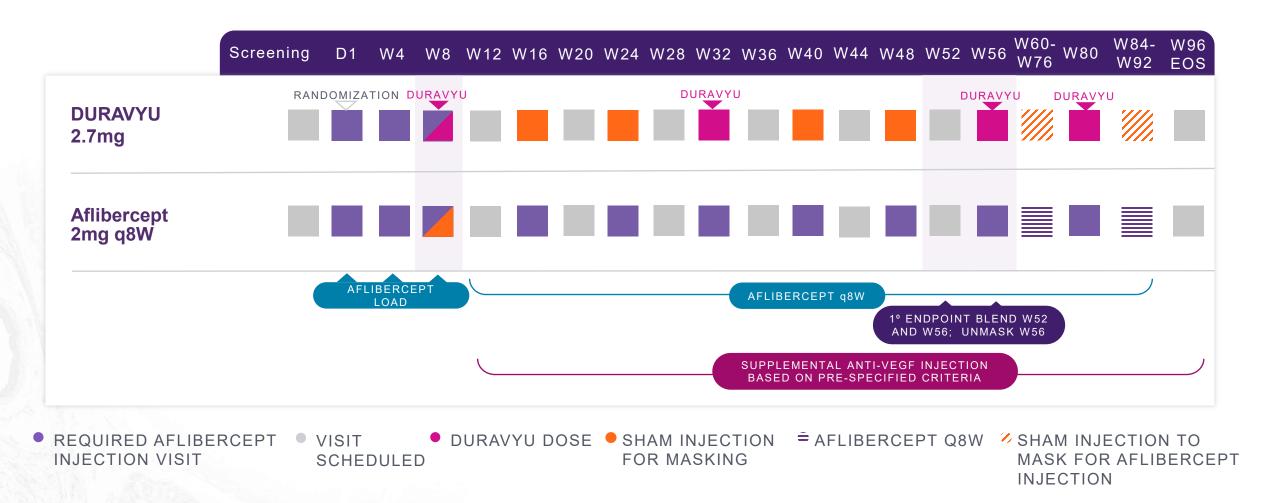
KEY TRIAL DESIGN ELEMENTS

- Only sustained release wet AMD program to evaluate reinjection for label
- Trials will enroll patients with active wet AMD (previously treated and treatment naïve)
- All patients will receive three loading doses of aflibercept
- Sham injections will be used for masking
- Primary efficacy endpoint at 12 months (basis for NDA submission)
 - Safety will be monitored for 24 months

On track to be first sustained release wet AMD program with two pivotal trials to enable NDA submission to the FDA



DURAVYU in Wet AMD Phase 3 Pivotal Trial Design





A Broad Patient Population in the Phase 3 Pivotal Trials has the Potential to Enhance Trial Outcomes and Increase Commercial Opportunity

- ✓ Enriches trial to have more supplement-free eyes, which had better outcomes in DAVIO 2
- Ensures broad label and global reimbursement
- ✓ Speeds enrollment; >80 sites already selected
- ✓ Supports real-world clinical use for physicians and patients
- ✓ Three loading doses of aflibercept; all patients will be previously treated when receiving DURAVYU



A Broad Patient Population in the Phase 3 Pivotal Trials has the Potential to Enhance Trial Outcomes and Increase Commercial Opportunity

Highly positive, statistically non-inferior DAVIO 2 results despite tough to treat population

- Average of 10 injections per year prior to enrollment
- Aflibercept arm (q8w) had nearly 25% supplementation rate despite receiving on-label injections
- Supplement-free eyes did the best visually and, in those eyes, DURAVYU performed numerically better than aflibercept visually

In DAVIO 2, eyes that were pseudo naïve¹ had fewer supplements than the overall cohort

We believe the inclusion of treatment naive patients not only expands the potential patient population but also increases the probability of success



Commercial Manufacturing Facility



New manufacturing site for clinical and commercial products



Conveniently located in Northbridge, MA, near EyePoint headquarters



Built to EYPT specifications with no capital investment required preserving cash



Built to US FDA and EU EMA standards



40,000 sqft cGMP manufacturing facility





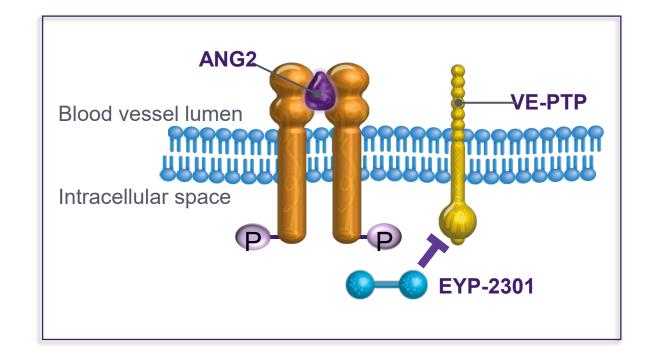
PRESENTATION SPEAKER	PF	RES	ENTA	TION	SPEA	KER
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DURAVYU™: Pivotal Phase 3 Plans for Wet AMD Early Pipeline		Jay Duker, M.D. Ramiro Ribeiro, M.D., Ph.D.	
		Jay Duker, M.D.	
	Key Opinion Leader Insights and Discussion	Jay Duker, M.D. Carl D. Regillo, M.D. Yasha S. Modi, M.D.	
	Q&A	All	
	Closing Remarks	Jay Duker, M.D.	

EYP-2301: Razuprotafib in Durasert E[™] is a Patented TIE-2 Agonist as a Potential New MOA for Treating Serious Retinal Diseases

EYP-2301 targets vascular endothelial protein tyrosine phosphatase (VE-PTP) to promote TIE-2 activation and maintain vascular stability in the retina

- Tie-2 activation combined with VEGF inhibition has the potential to enhance efficacy and extend durability¹ of treatment
- Razuprotafib (f/k/a AKB-9778) delivered subcutaneously demonstrated preclinical and **clinical proof of concept** in posterior segment disease ^{2,3}



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DURAVYU™: Pivotal Phase 3 Plans for Wet AMD	Jay Duker, M.D. Ramiro Ribeiro, M.D., Ph.D.	
Early Pipeline	Jay Duker, M.D.	
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Q&A	All	
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Data from Clinical and Preclinical Studies will be Presented at Multiple Upcoming Meetings

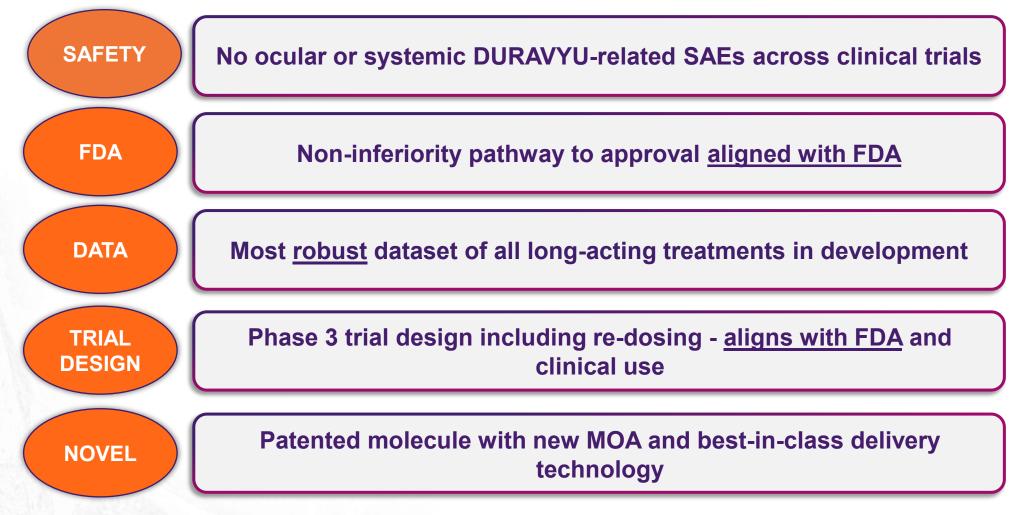
Medical Conference	Data	Timing
ASRS	New DAVIO 2 sub-group analyses	July 2024
American Retina Forum	DAVIO 2 encore presentation	August 2024
Retina Society	Topline DAVIO 2 12-month data	September 2024
EURetina	DAVIO 2 sub-group analyses Topline DAVIO 2 12-month data	September 2024
AAO	DAVIO 2 12-month sub-group analyses	October 2024
FloRetina	DAVIO 2 encore presentation*	December 2024
Publications		Link
Phase I DAVIO Trial: EYP-1901 Bioerodible, Sustained-Delivery Vorolanib Insert in Patients With Wet Age-Related Macular Degeneration Patel S, Storey P, Barakat M, et al. <i>Ophthalmology Science</i> . 2024 Apr 8:4(5)		https://www.ophthalmologyscience.or g/article/S2666-9145(24)00063- 0/fulltext
Vorolanib, sunitinib, and axitinib: A comparative study of vascular endothelial growth factor receptor inhibitors and their anti-angiogenic effects Bakri S, Lynch J, Howard-Sparks M, et al. <i>PLOS One</i> . 2024 June 4		https://journals.plos.org/plosone/article e?id=10.1371/journal.pone.0304782



*Pending submission and acceptance



DURAVYU entering Phase 3 with robust dataset and FDA alignment on approval pathway





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