

**UNITED STATES  
SECURITIES AND EXCHANGE COMMISSION  
WASHINGTON, D.C. 20549**

**FORM 8-K**

**CURRENT REPORT**

**Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934**

**Date of Report (Date of earliest event reported): January 12, 2023**

**EyePoint Pharmaceuticals, Inc.**

(Exact name of Registrant as Specified in Its Charter)

**Delaware**  
(State or Other Jurisdiction  
of Incorporation)

**000-51122**  
(Commission File Number)

**26-2774444**  
(IRS Employer  
Identification No.)

**480 Pleasant Street**  
**Watertown, Massachusetts**  
(Address of Principal Executive Offices)

**02472**  
(Zip Code)

**Registrant's Telephone Number, Including Area Code: (617) 926-5000**

(Former Name or Former Address, if Changed Since Last Report)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

- Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
- Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
- Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
- Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

**Securities registered pursuant to Section 12(b) of the Act:**

<b>Title of each class</b>	<b>Trading Symbol(s)</b>	<b>Name of each exchange on which registered</b>
Common Stock, par value \$0.001	EYPT	The NASDAQ Global Market

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§ 230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§ 240.12b-2 of this chapter).

Emerging growth company

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act.

**Item 8.01 Other Events.**

On January 12, 2023, EyePoint Pharmaceuticals, Inc. posted an updated investor presentation on its website at [www.eyepointpharma.com](http://www.eyepointpharma.com). A copy of the presentation is filed herewith as Exhibit 99.1 and is incorporated by reference herein.

**Item 9.01 Financial Statements and Exhibits.****(d) Exhibits.**

<u>Exhibit No.</u>	<u>Description</u>
99.1	<a href="#">Investor Presentation of EyePoint Pharmaceuticals, Inc. dated January 12, 2023</a>
104	Cover Page Interactive Data File (embedded within the inline XBRL document)

**SIGNATURES**

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

**EYEPOINT PHARMACEUTICALS, INC.**

Date: January 12, 2023

By: /s/ George O. Elston  
George O. Elston  
Chief Financial Officer

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**EYEPOINT**<sup>®</sup>  
PHARMACEUTICALS

## Investor Presentation

January 2023



# Forward-Looking Statements

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 our expectations regarding the potential benefits of our partnerships and strategic alliances with other companies, as well as the timing and clinical development of our product candidates, including EYP-1901; the potential for EYP-1901 as a sustained delivery treatment for wet age-related macular degeneration and non-proliferative diabetic retinopathy; 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 forward-looking 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; the extent to which COVID-19 impacts our business; our ability to achieve profitable operations and access to needed capital; fluctuations in our operating results; our ability to successfully produce sufficient commercial quantities of YUTIQ® and DEXYCU®; the loss of pass-through reimbursement status for DEXYCU as of January 1, 2023; the success of current and future license agreements, including our agreements with Ocumension Therapeutics, Equinox Science and Betta Pharmaceuticals; termination or breach of current license agreements; our dependence on contract research organizations, co-promotion partners, and other outside vendors and service providers; effects of competition and other developments affecting sales of products; market acceptance of products; effects of guidelines, recommendations and studies; protection of 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; 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.

# EYP-1901: A potential new paradigm in the treatment of retinal disease

## **EYP-1901 in phase 2 clinical trials**

- Bioerodible Durasert® delivering vorolanib, to the posterior segment via a sustained delivery intravitreal (IVT) insert
  - DAVIO 2 - potential 6-month treatment for wet AMD
  - PAVIA - potential 9-month treatment for non-proliferative diabetic retinopathy (NPDR)

## **Vorolanib – a new anti-VEGF MOA for ocular disease**

- A selective tyrosine kinase inhibitor (TKI) that blocks VEGF receptors intracellularly
- Potentially complementary to anti-VEGF biologics
- Positive ocular safety data through Phase 2 trials
- Potential neuroprotection and anti-fibrosis benefits

## **Durasert® - proven IVT drug delivery**

- Sustained ocular drug delivery
- Constant (zero-order kinetics) stable release of drug
- Safely administered to ~80,000 patient eyes across four FDA approved products

TECHNOLOGY

# DURASERT®



## Safe Sustained Intravitreal Drug Delivery

Used in four of six FDA approved intravitreal sustained delivery products

Delivered by a single in-office IVT injection

Continuous, stable release of drug

### Non-Erodible Products

- YUTIQ® (EyePoint)
- ILUVIEN® (Alimera)
- RETISERT® (B&L)
- VITRASERT® (B&L)

### Bioerodible: EYP-1901

- No polyimide coating
- Initial drug burst from insert surface
- Constant, zero-order kinetic release over months

WHY VOROLANIB?

## Vorolanib binds receptors of all VEGF growth factors

### Vorolanib is a selective and patent protected tyrosine kinase inhibitor (TKI)

- Intracellular binding of all vascular endothelial growth factor (VEGF) receptors
- Differentiated mechanism of action versus anti-VEGF biologics that potentially works complementary
- In-vivo studies demonstrate encouraging neuroprotection and anti-fibrosis data
- Phase 1 and Phase 2 clinical trials as an oral therapy showed compelling safety and efficacy data with no ocular toxicity observed<sup>1,2</sup>

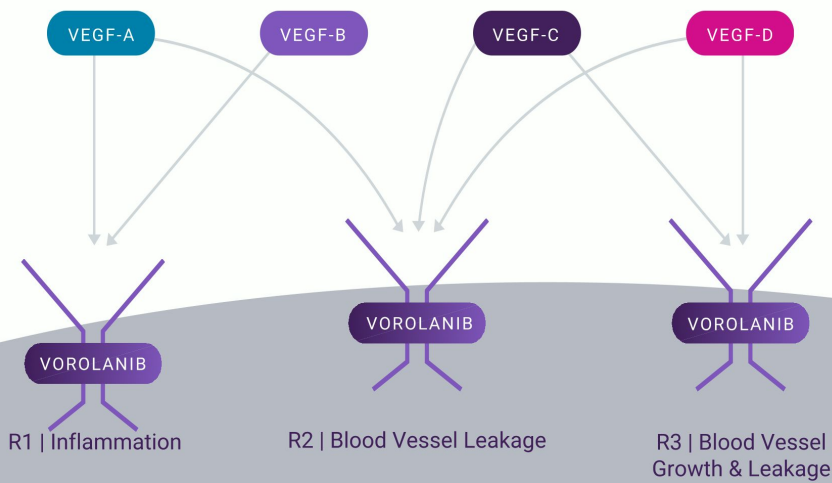
1. Jackson et al. JAMA Ophthalmol 2017  
2. Cohen MN et al. Br J Ophthalmol. 2021

5 | INVESTOR PRESENTATION

 EYEPOINT  
PHARMACEUTICALS

# Vorolanib binds receptors of all VEGF growth factors with strong affinity to VEGF receptor 2 - a receptor associated with blood vessel leakage

## VEGF SIGNALING PATHWAYS

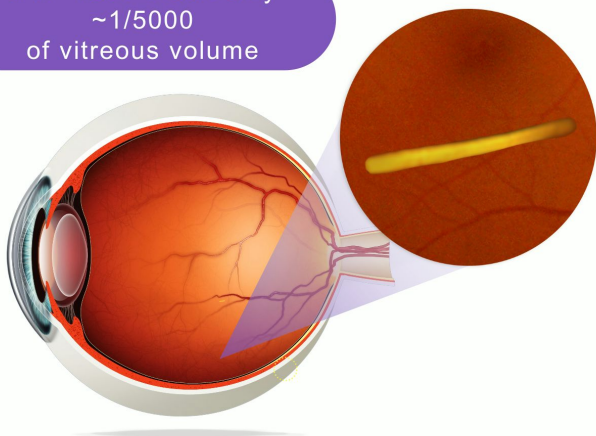


## VOROLANIB INHIBITS VEGFR

- Binds to the intracellular domain of tyrosine kinases
- Targets the angiogenic VEGF receptors R1, R2 and R3 with high potency

# EYP-1901 delivers VEGF receptor binding vorolanib in Bioerodible Durasert®

EYP-1901 insert only  
~1/5000  
of vitreous volume



## EYP-1901

- A single IVT injection of up to 3 inserts
- Bioerodible formulation of Durasert
- Initial drug burst from surface of insert to rapidly reach therapeutic levels in ocular tissues
- Zero order kinetics release expected to provide consistent drug levels through treatment course
- Vorolanib binds all VEGFR; blocking all isoforms of VEGF as well as PDGF



EYP-1901

# PHASE 1 DAVIO CLINICAL TRIAL 12 MONTH RESULTS

# EYP-1901 Phase 1 DAVIO clinical trial enrolled 17 patients with previously treated wet AMD over four different dosages

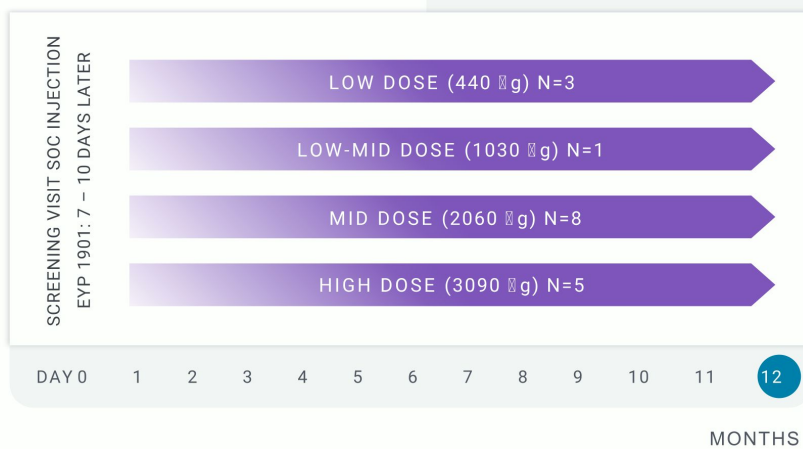
RESULTS: MONTH 12 FULL READ

## Primary Endpoint: Safety

- Ocular and non-ocular TEAEs through month-12

## Secondary Endpoints

- Supplemental anti-VEGF therapy through 6-months
- Change in BCVA from baseline
- CST as measured by OCT





# EYP-1901 Phase 1 DAVIO clinical trial demonstrated favorable overall safety data at 12-months meeting primary endpoint

## Ocular AEs of particular interest:

- No vitreous floaters
- No endophthalmitis
- No retinal detachment
- No implant migration in the anterior chamber
- No retinal vasculitis
- No posterior segment inflammation

- No ocular serious adverse events (SAEs)
- No drug-related systemic SAEs
- No evidence of vorolanib-related ocular or systemic toxicity

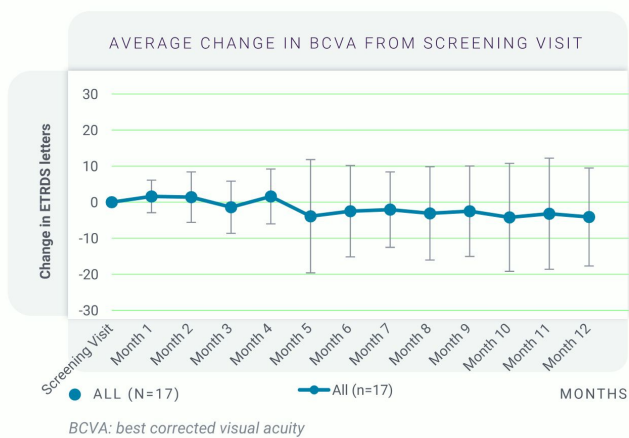
- No Durasert-related toxicity or tolerance issues
- No dose limiting toxicity

## Ocular AEs observed:

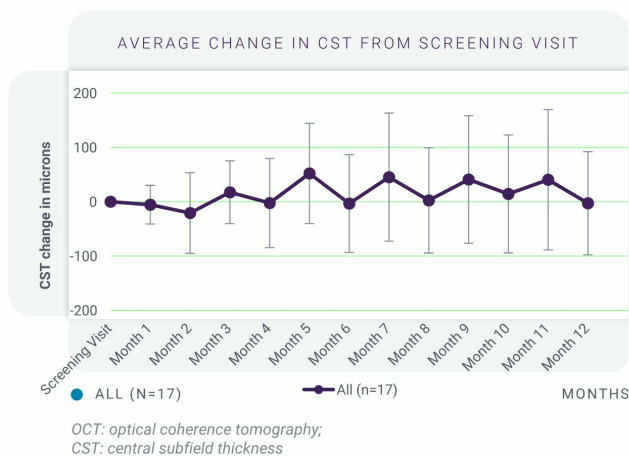
- One eye: mild asymptomatic anterior chamber cell/flare;
  - ▣ treated with Maxitrol® eyedrops – resolved in 8 days – no sequelae or recurrence
- One eye: asymptomatic vitreous hemorrhage from injection; observed

# EYP-1901: Visual Acuity (VA) and Central Subfield Thickness (CST) Stable 12 Months after Single Treatment

For all 17 eyes at 12 months | BCVA = -4.1 letters

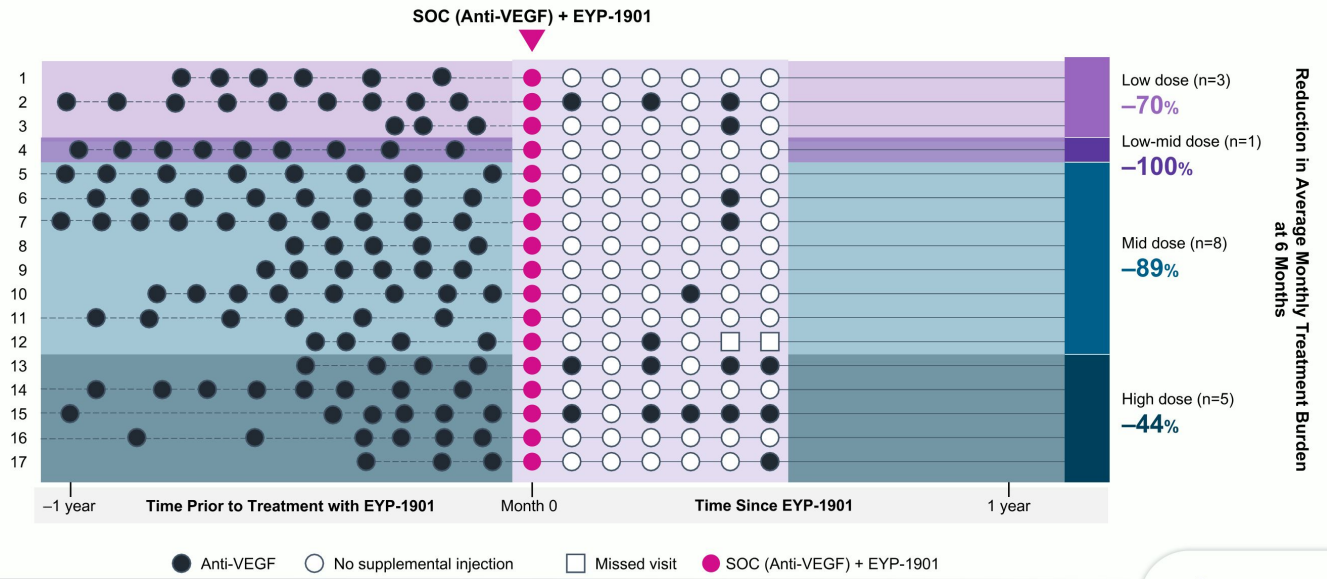


For all 17 eyes at 12 months | CST on OCT = -2.8 microns



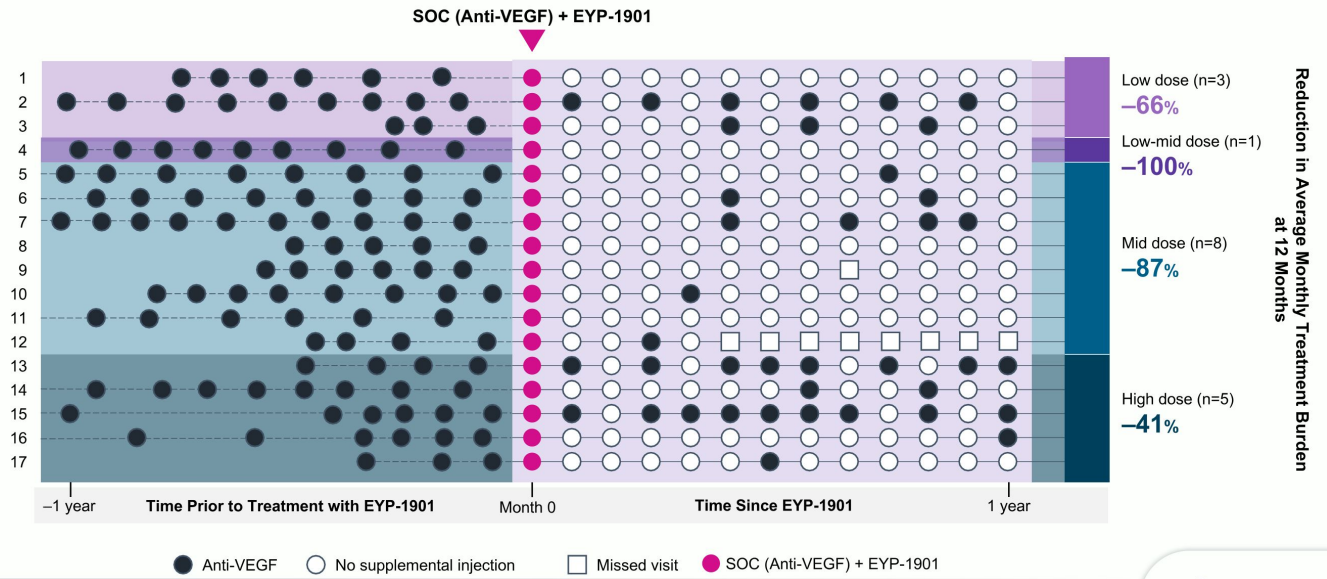
# EYP-1901 Phase 1 DAVIO clinical trial demonstrated clinically significant reduction in treatment burden of 75% at 6-months

## SOC Anti-VEGF Injections Before and After Treatment



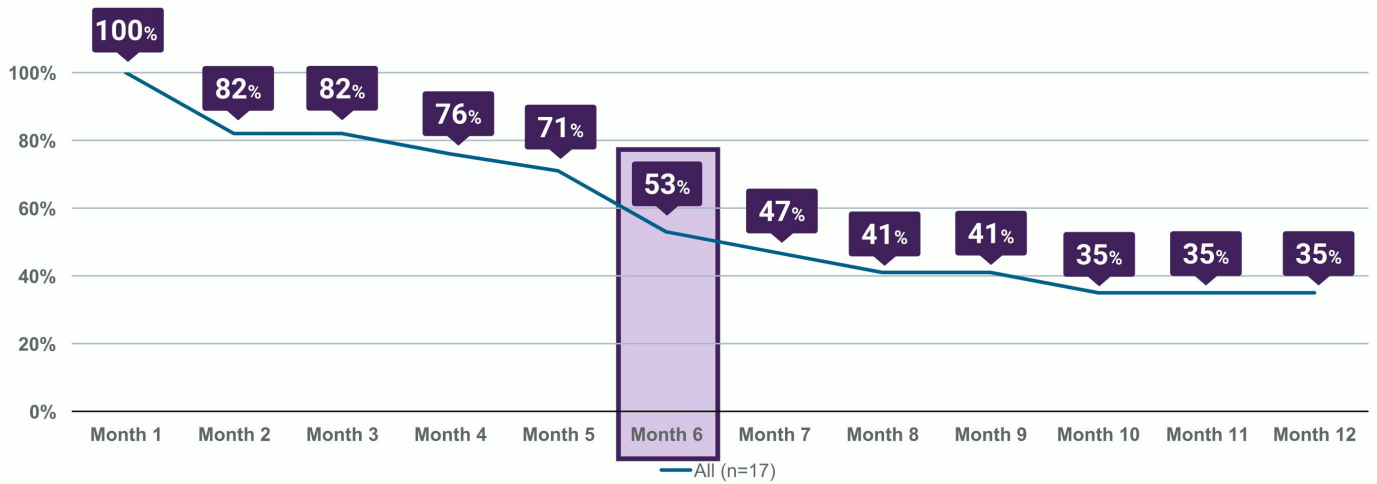
# EYP-1901 Phase 1 DAVIO clinical trial continues clinically significant reduction in treatment burden of 73% at 12-months

## SOC Anti-VEGF Injections Before and After Treatment



# EYP-1901 Phase 1 DAVIO clinical trial demonstrated that 53% of patients did not require supplemental anti-VEGF treatment at 6-months

Median time to supplemental anti-VEGF: 6 months



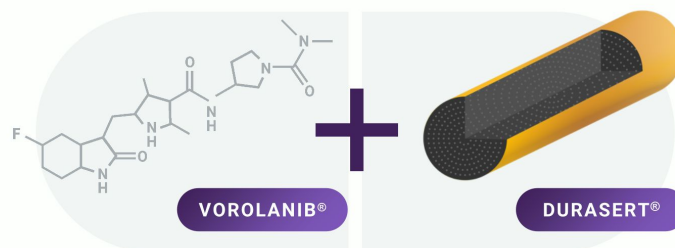
# EYP-1901 Phase 1 DAVIO clinical trial met all objectives

## FAVORABLE SAFETY PROFILE

- No ocular SAEs reported
- No drug-related systemic SAEs reported
- Ocular AEs – majority are mild and expected

## POSITIVE EFFICACY & DURABILITY

- Stabilization of mean BCVA and OCT throughout 6 months was achieved
- 53% supplemental anti-VEGF supplement injection free up to 6-months
- 75% reduction in treatment burden at 6-months



**SIX MONTHS MEDIAN  
TIME  
TO SUPPLEMENTAL ANTI-  
VEGF INJECTION**

EYP-1901

**DAVIO PHASE 1 CLINICAL TRIAL  
SUBSET ANALYSIS - SUBJECTS WITH NO EXCESS  
FLUID AT SCREENING  
(N=9)**

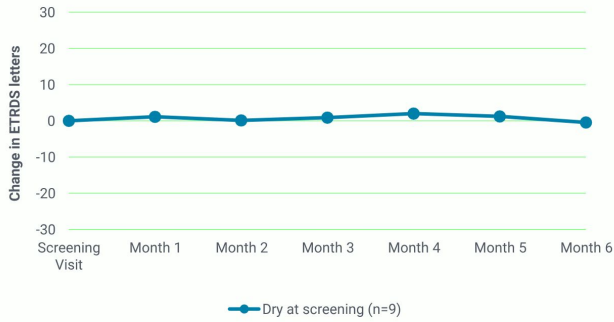


# DAVIO Phase 1 clinical trial included 9 of 17 (53%) subjects with no "excess fluid" at screening

For 9 eyes at 6 months with no excess fluid at screening

BCVA = +1.2 letters at 5 months  
-0.4 letters at 6 months

## Mean change in BCVA from screening visit (n = 9)



BCVA: best corrected visual acuity

CST on OCT = +20.8 microns at 5 months  
-1.0 microns at 6 months

## Mean change in CST from screening visit (n = 9)

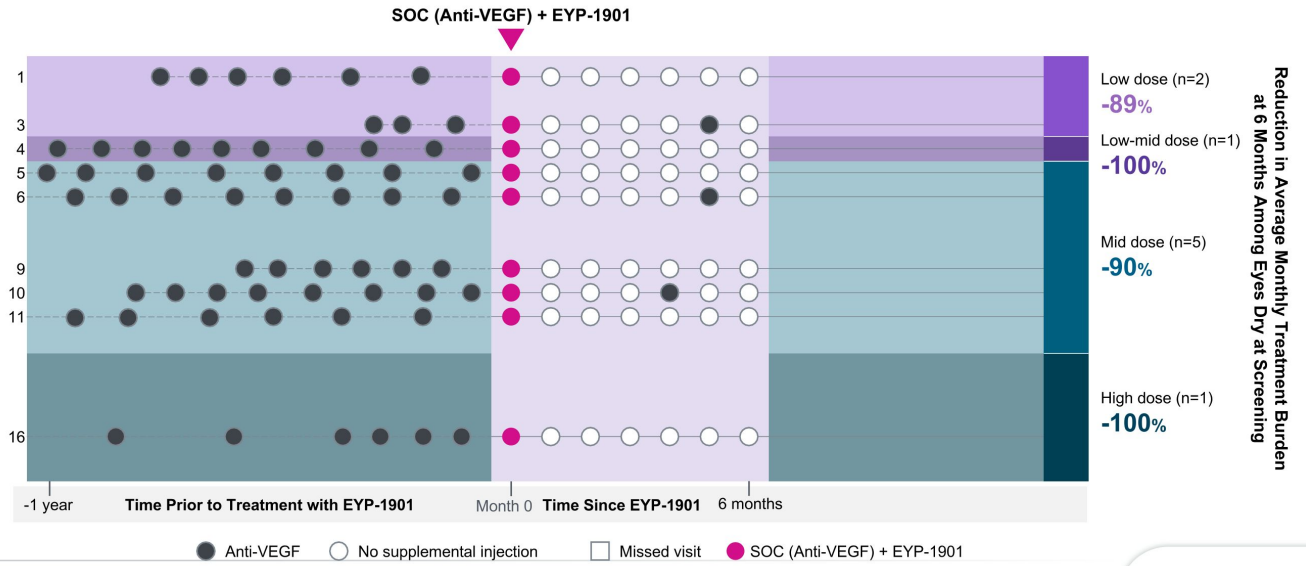


OCT: optical coherence tomography; CST: central subfield thickness



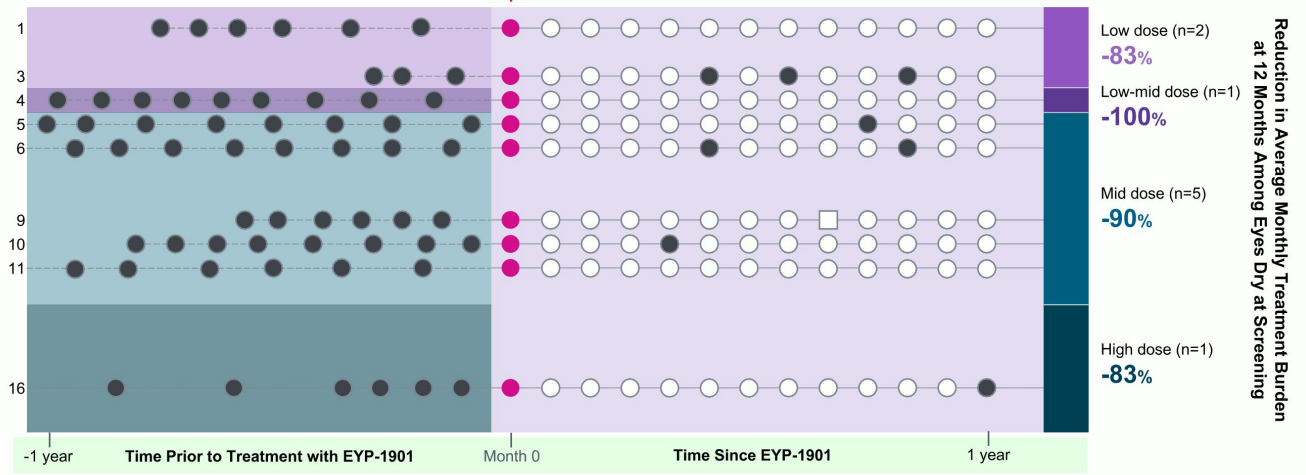
# DAVIO Phase 1 clinical trial showed a 92% reduction in treatment burden at 6 months among subjects with no "excess fluid" at screening (n=9)

## SOC Anti-VEGF Injections Before and After Treatment



# DAVIO Phase 1 clinical trial showed a 89% reduction in treatment burden at 12 months among subjects with no “excess fluid” at screening (n=9)

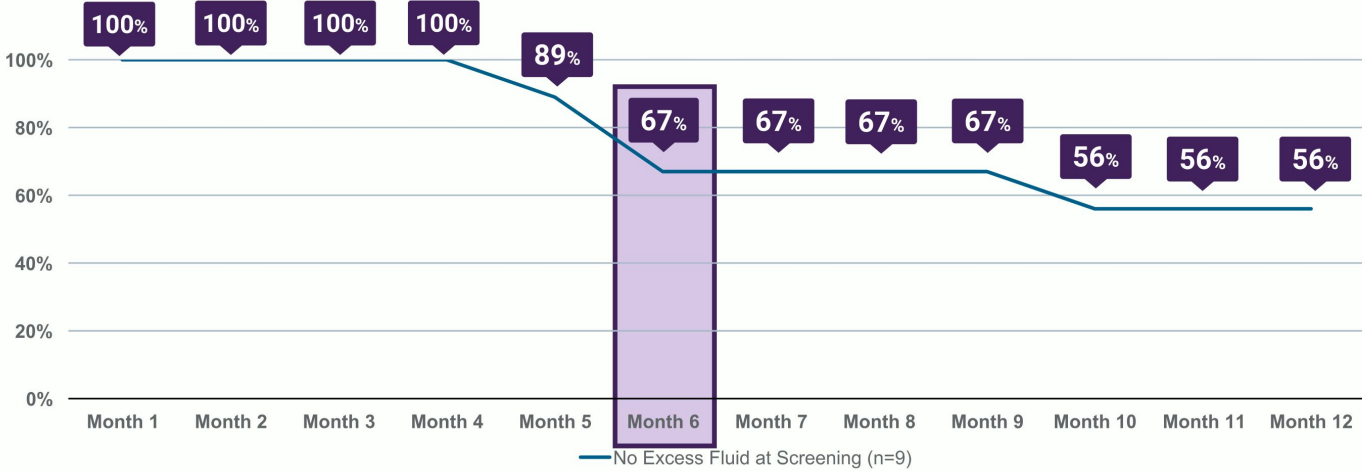
SOC Anti-VEGF Injections Before and After Treatment  
SOC (Anti-VEGF) + EYP-1901



DAVIO 12-month final data

# Subgroup Analysis: Supplemental Injection-Free Rates Up to Each Visit in Subjects with No Excess Fluid at Screening (n=9)

Median time to supplemental anti-VEGF: 12 months

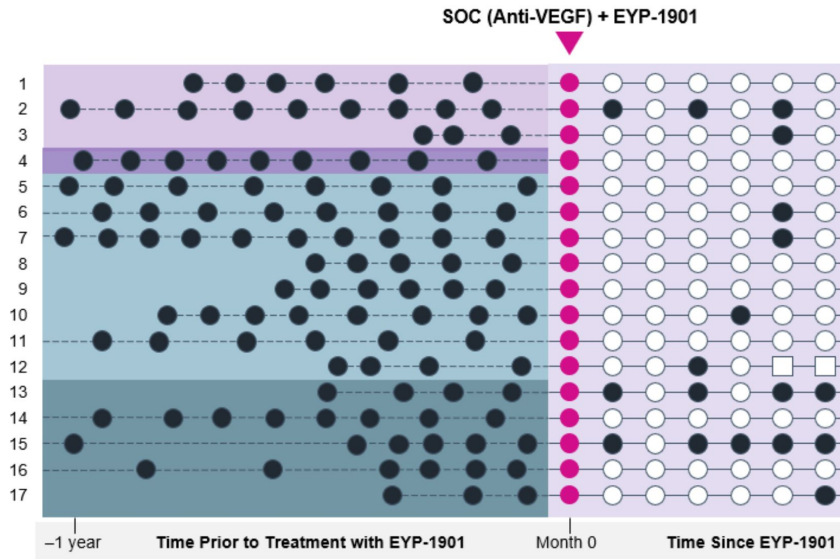


EYP-1901

# TREAT TO MAINTAIN

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# EYP-1901 demonstrated clinically significant reduction in treatment burden of 75% at 6 Months supporting treat to maintain paradigm



## TREAT TO MAINTAIN WITH EYP-1901

- About half of eyes in DAVIO could go up to 6 months on EYP-1901 alone
- Another ~30% received only a single supplemental anti-VEGF during 6-months
- About 15 % failed both SoC and 1901 and required multiple supplements

● Anti-VEGF    ○ No supplemental injection    □ Missed visit    ● SOC (Anti-VEGF) + EYP-1901

# EYP-1901 advancing as a potential complementary “Treat-to-Maintain” therapy in wet AMD

- *Treat* initially with any current anti-VEGF standard-of-care until VA is maximally improved and retina is as dry as possible (*induction phase*)
- *Maintain* with EYP-1901 every six months, supplementing if needed with current anti-VEGF biologic (*maintenance phase*)
- May work complementary with current large molecule anti-VEGFs with differentiated MOA
- Based on DAVIO outcomes, we believe over half of all wet AMD eyes may be maintained visually and anatomically with EYP-1901 alone
- Another segment may require occasional supplemental anti-VEGF at a much-reduced interval

EYP-1901

# WET AMD PHASE 2 CLINICAL TRIAL (DAVIO 2)

## The DAVIO 2 clinical trial in wet AMD is designed to support initiation of Phase 3 clinical trials

- Multi-center randomized Phase 2 clinical trial
- Three arms
  - Arm 1: 3mg EYP-1901
  - Arm 2: 2mg EYP-1901
  - Arm 3: On label aflibercept control
- Up to 150 patients
- Only previously treated wet AMD patients to be enrolled
- Primary outcome is difference in change in BCVA



# EYP-1901 DAVIO 2 clinical trial is randomized, double-masked, aflibercept controlled



EYP-1901

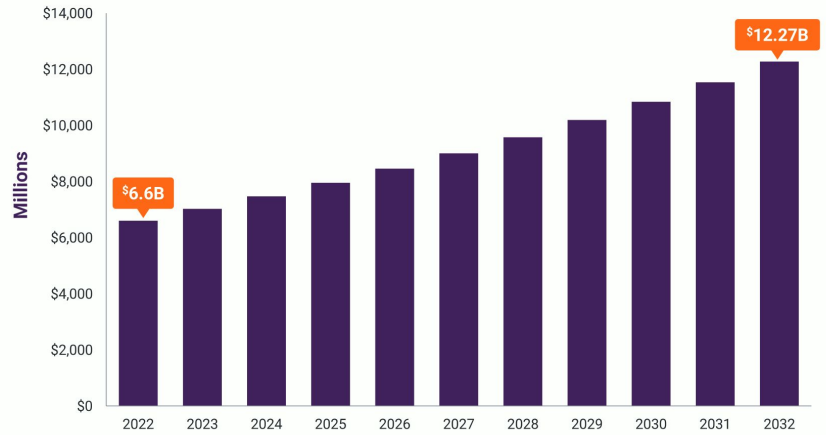
# NON-PROLIFERATIVE DIABETIC RETINOPATHY - PHASE 2 CLINICAL TRIAL (PAVIA)

# Diabetic Retinopathy Market Opportunity

- Leading cause of blindness
- Current SOC is watchful waiting until vision loss
- Significant potential for 9 month sustained delivery with new MOA using vorolanib

Diabetic Retinopathy Market Size Report, 2018-2020 (GrandViewResearch.com), Global Diabetic Retinopathy Market Size Report, Jan. 2022 (MarketDataForecast.com)

## Growing Global DR Market



Analysis includes North America, Europe, Asia Pacific, Latin America, Middle East, and Africa

 **\$12.27 billion**

is the estimated market size by 2032, a result of diabetes prevalence and the aging population

# EYP-1901 Phase 2 NPDR PAVIA clinical trial is non-pivotal, randomized double-masked, day-one single injection with sham control evaluating 9 month sustained delivery



# YUTIQ<sup>®</sup> –A sustained delivery treatment of posterior segment uveitis using Durasert

0.18 mg

YUTIQ<sup>™</sup>

(fluocinolone acetonide  
intraocular implant) 0.18 mg

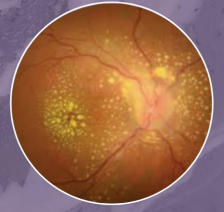
 EYEPOINT<sup>™</sup>  
PHARMACEUTICALS

## PRODUCTS



**CONTINUOUS CALM IN  
UVEITIS**

## Approved for the treatment of posterior segment uveitis



- **Commercially launched in U.S. in 2019**
- **Patent protection to August 2027**
- **Constant and stable release of fluocinolone with Duraserit helps prevent uveitis flares for up to 3 years**

### LICENSE AGREEMENTS

Alimera Sciences, Inc. has rights for non-infectious posterior uveitis in the EMEA

Rights for China, Hong Kong, Taiwan, Macau, Korea and certain SE Asia countries licensed to Ocumension Therapeutics with a royalty on sales payable to EyePoint

## PRODUCTS



# Posterior segment uveitis can permanently damage vision with every flare

60K–100K patients are suffering from posterior segment uveitis in the U.S.

## The need

- Flares can cause blindness
- 30,000 Americans become blind each year because of uveitis
- Uveitis lasts a lifetime and often affects people in middle age
- Conventional treatment is burdensome for patients and caregivers

## The YUTIQ answer

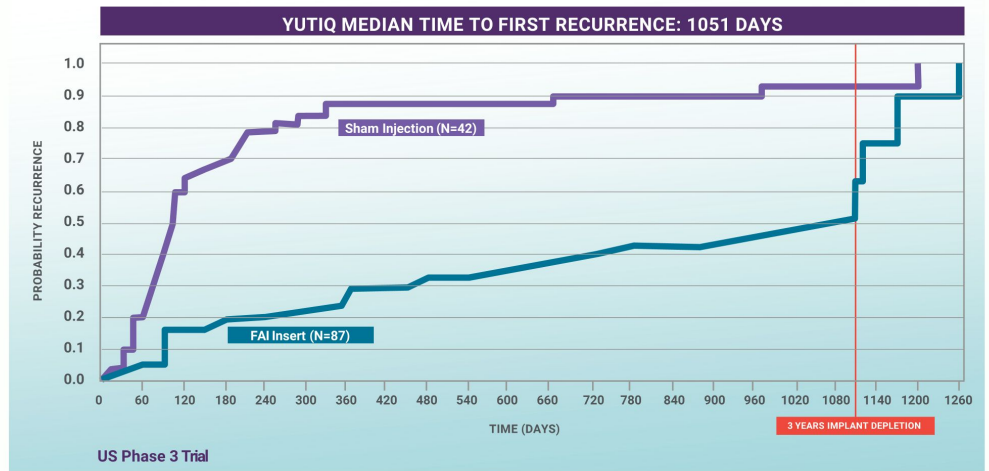
- 3-year continuous treatment in a single injection that controls flares and preserves eyesight
- Single injection in the physician's office
- Gives patients and physicians the confidence that comes with three years of assured compliance

# Continuous 3-year delivery limits blindness-causing flares

## PRODUCTS



### Time to recurrence of uveitis within 36 months



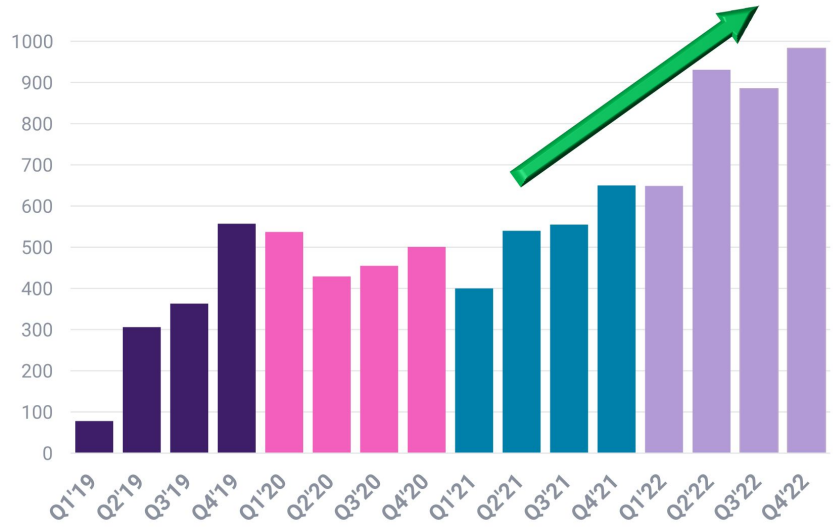


# Record customer demand for YUTIQ in Q4 2022

## PRODUCTS



*\*Customer demand is defined as units purchased by Surgery Centers or physicians from the specialty distributors.*



Solid cash position and cash runway beyond anticipated 2023 value inflection points

## Balance Sheet – December 31, 2022

- \$144 million of cash and investments
- \$40 million of short and long-term debt
- Cash runway into 2H 2024

## Commercial Performance – 2022

- Over \$39.5 million of net product revenues
- Commercial franchise break-even



**EYEPOINT**<sup>®</sup>  
PHARMACEUTICALS

## Investor Presentation

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January 2023