



**VAPOTHERM<sup>®</sup>**

# Initial Public Offering

**NOVEMBER 2018**

# Safe Harbor Statement

Certain statements in this presentation, including responses to questions, contain or may contain “forward-looking statements” within the meaning of the Private Securities Litigation Reform Act of 1995. All statements other than statements of historical facts contained in this presentation are forward-looking statements. In some cases, you can identify forward-looking statements by terms such as “may,” “will,” “should,” “expect,” “plan,” “anticipate,” “could,” “intend,” “target,” “project,” “contemplate,” “believe,” “estimate,” “predict,” “potential” or “continue” or the negative of these terms or other similar expressions, although not all forward-looking statements contain these words. Forward-looking statements include, but are not limited to, statements concerning: estimates regarding the annual total addressable global market for our Precision Flow systems, future results of operations, financial position, research and development costs, capital requirements and our needs for additional financing; commercial success and market acceptance of our Precision Flow systems; competitive companies and technologies in our industry; our ability to enhance our Precision Flow systems, expand our indications and develop and commercialize additional products; our business model and strategic plans for our products, technologies and business, including our implementation thereof; our ability to accurately forecast customer demand for our Precision Flow systems and manage our inventory; our ability to expand, manage and maintain our direct sales and marketing organization, and to distribute our Precision Flow systems in markets outside of the United States; our ability to hire and retain our senior management and other highly qualified personnel; our ability to obtain additional financing in the offering to which this presentation relates or future offerings; our ability to commercialize or obtain regulatory approvals for our products, or the effect of delays in commercializing or obtaining regulatory approvals; FDA or other U.S. or foreign regulatory actions affecting us or the healthcare industry generally, including healthcare reform measures in the United States and international markets; the timing or likelihood of regulatory filings and approvals; our ability to establish and maintain intellectual property protection for our products or avoid claims of infringement; the volatility of the trading price of our common stock; our expectations regarding the use of proceeds from the offering to which this presentation relates; our expectations about market trends; and the other risks described in the “Risk Factors” section in the Company’s Registration Statement on Form S-1, declared effective by the Securities Exchange Commission on November 13, 2018, and the Company’s other filings with the Securities Exchange Commission.

The forward-looking statements in this presentation are only predictions and are based largely on our current expectations and projections about future events and financial trends that we believe may affect our business, financial condition and results of operations. These forward-looking statements speak only as of the date of this presentation and are subject to a number of known and unknown risks, uncertainties and assumptions. Because forward-looking statements are inherently subject to risks and uncertainties, some of which cannot be predicted or quantified and some of which are beyond our control, you should not rely on these forward-looking statements as predictions of future events. The events and circumstances reflected in our forward-looking statements may not be achieved or occur, and actual results could differ materially from those projected in the forward-looking statements. Moreover, we operate in an evolving environment. New risk factors and uncertainties may emerge from time to time, and it is not possible for management to predict all risk factors and uncertainties. Except as required by applicable law, we do not plan to publicly update or revise any forward-looking statements contained herein, whether as a result of any new information, future events, changed circumstances or otherwise.



# VAPOTHERM®

A global medical technology company focused on treating patients with **respiratory distress**



Proprietary  
Hi-VNI®  
Technology

The **only mask-free, clinically validated** alternative to current standard of care for the treatment of respiratory distress

Clinically  
Validated

Over 1.5M  
Patients Treated

Over 13K  
Installed Base

~\$41M  
Revenues\*  
24% YoY Growth



**Severe Difficulty Breathing –**  
Can't inhale enough O<sub>2</sub>  
or clear enough CO<sub>2</sub>

# Respiratory Distress –

**Affects All Ages**  
– pre-term infants, children,  
adults



## THE CAUSES

- Pneumonia
- Heart failure
- Asthma
- COPD

... and many other diseases

A Large  
and  
Growing  
Market

## THE DRIVERS

- Aging population
- Growing prevalence of  
heart failure
- Growing prevalence of COPD

# \$1.5 Billion Global Market – in Current Products, in Current Care Areas Alone

## CURRENT CARE SETTINGS

**HOSPITAL DIRECTORY**

- ↑ Emergency Department
- Intensive Care (ICU)
- ← Long Term Acute Care
- ↪ Neonatal (ICU)
- ↑ Pediatric (ICU)

**12M<sup>1</sup>**  
patients suffering  
respiratory distress

## CURRENT ADDRESSABLE MARKETS

**US**

**Select Ex-US<sup>2</sup>**

**Combined over  
\$1.5BN**

<sup>1</sup> Suffering from respiratory distress in the US and select international markets who can benefit from Vapotherm technology

<sup>2</sup> UK, Germany, Brazil, Mexico, Japan, and select markets

# Traditional Treatment Modalities Have Limitations

## LIMITATIONS

- O<sub>2</sub> delivery only
- Clinically unproven in patients with elevated CO<sub>2</sub>



Oxygen-Based  
Therapies

- 30% patients do not tolerate
- High intensity of care
- Risks: skin breakdown, lung injury, etc.



NIPPV  
(Non-Invasive Positive  
Pressure Ventilation)

TRADITIONAL STANDARD  
OF CARE

35 year-old Technology

- Sedation often required
- Increases clinical risk and cost
- Difficulty weaning



Mechanical Ventilation

INVASIVENESS  
of Modality

ACUITY of Respiratory Distress



# NIPPV:

## Challenging for Many Patients and Clinicians



**TIGHT-FITTING MASK**

- Can't eat / drink / communicate
- Uncomfortable / claustrophobic
- Side effects: skin ulcers / risk of vomiting / aspiration

**ESCALATION THERAPY**

- Start at low pressure, increase as tolerated until patient stabilizes

**PRESSURE VENTILATION**

- Must time their breathing

### ALTHOUGH EFFICACIOUS:

POORLY Tolerated | VARIABLE Administration | FREQUENT Patient Monitoring

# On the Front Lines: Care Giver Experience with NIPPV

## INTERVIEWS WITH CRITICAL CARE NURSES AT THE 2018 NATIONAL TEACHING INSTITUTE & CRITICAL CARE EXPOSITION

**Q** How many of your patients, approximately, experience some sort of anxiety when you're applying a BiPAP or CPAP mask?



**“** Not going to say 100%...but at least 80%.



**“** 20-30% I would say at least...they just get agitated.



**“** Almost all of them... a lot of our patients feel claustrophobic with the masks.

**Q** How do you deal with that? What happens to those?



**“** Some of them we negotiate and do the off for a while, on for a while. Some of them we have to do medication to make them calm. Sometimes somebody has to sit with them.



**“** We give them medications, anxiety medications; Ativan, Valium, and sometimes it progresses to more aggressive treatment, you know, having to be intubated and things like that.

\* Each of these statements is an expression of opinion of the individual making the statement and not of the Company and is not intended to be representative of all cases. You should not rely on any of these statements, individually or in combination, when making an investment decision.



# Hi-VNI Technology: Attractive Alternative to NIPPV



## NON-OCCLUSIVE NASAL CANULA

- No mask-fitting required
- Easy to eat / drink / talk
- Better tolerated and more comfortable

## DE-ESCALATION THERAPY

- Appropriate to start at high flows

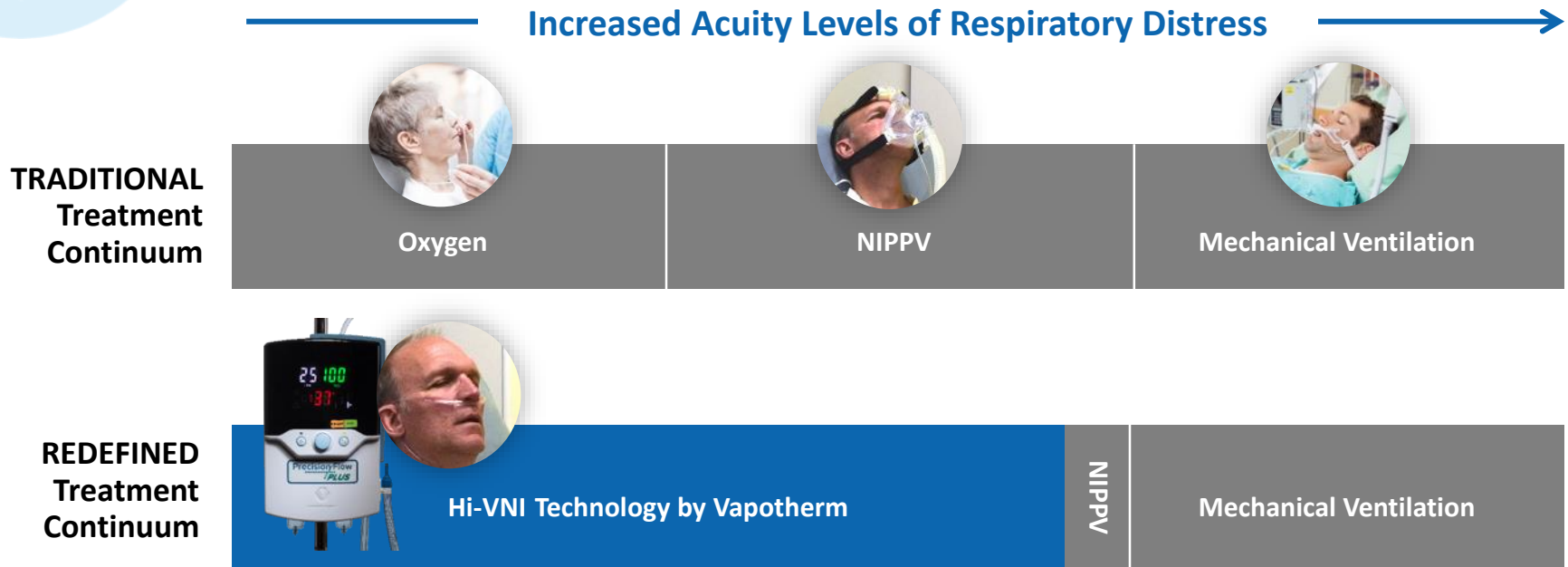
## NO POSITIVE PRESSURE

- Decreases risk of soft tissue damage

Clinically validated to be AS EFFICACIOUS AS NIPPV for spontaneously breathing patients AND:

BETTER Tolerated | EASIER Administration | REDUCED Patient Monitoring Potential

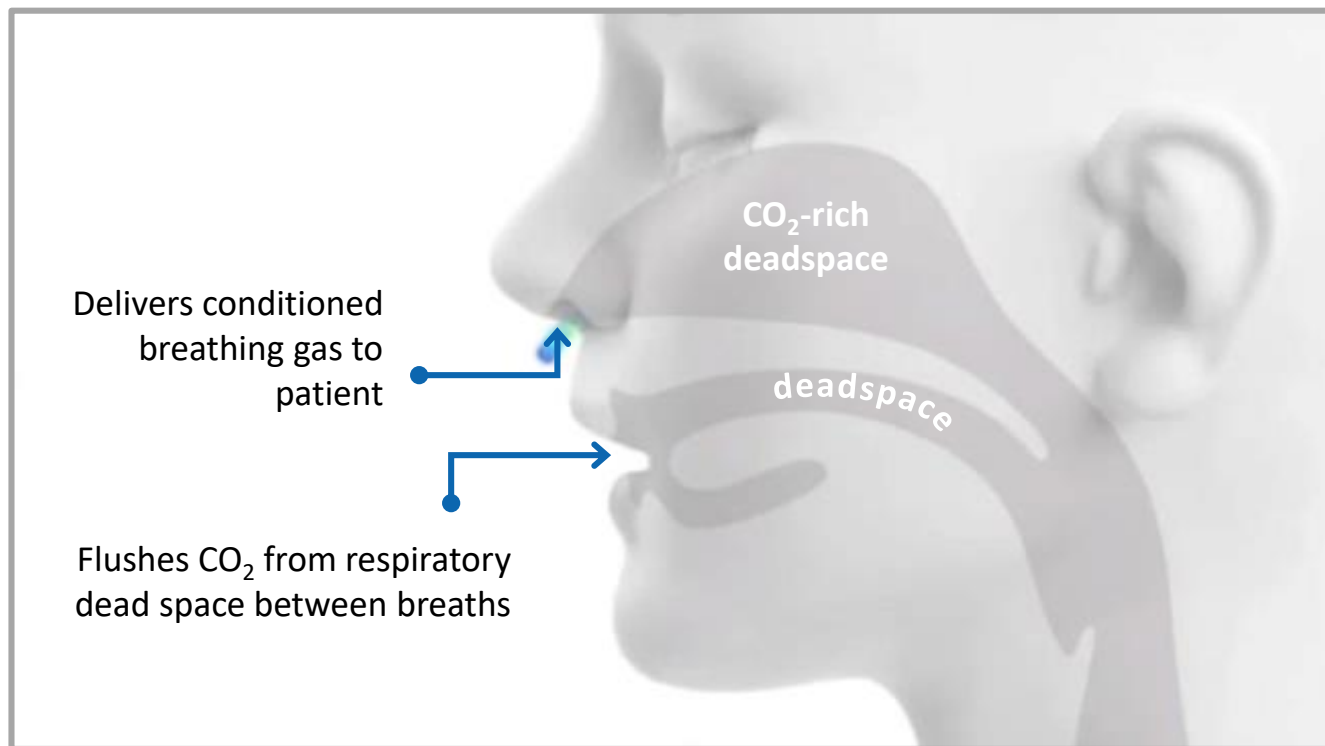
# Hi-VNI Technology **Redefines the Continuum** of Care for Respiratory Distress



“ High velocity nasal insufflation of oxygen is easier to set up than NIPPV. Should this study’s findings be replicated in larger studies, Hi-VNI might replace NIPPV in EDs, intensive care units, and ambulances. ”

NEJM  
Journal Watch – Feb 2018

# Hi-VNI Technology: Breakthrough Solution to Help **Avoid Intubation**



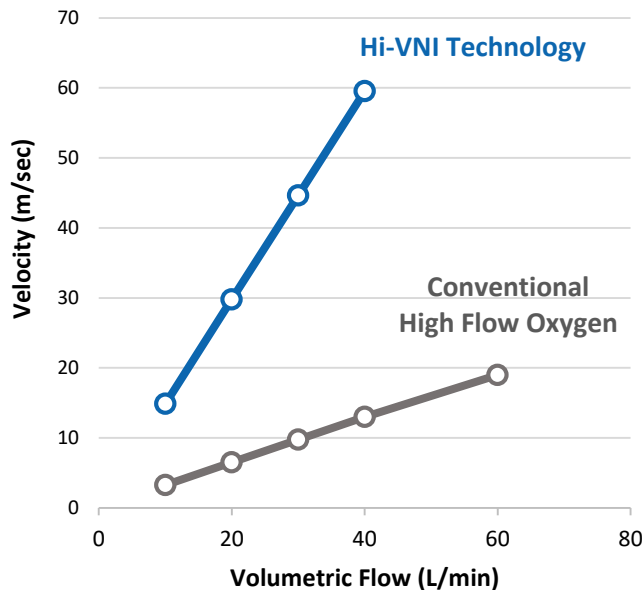
## OUR SECRET SAUCE

High **VELOCITY**  
... in an open system

Proper **HUMIDIFICATION**  
... delivers adequately conditioned oxygen

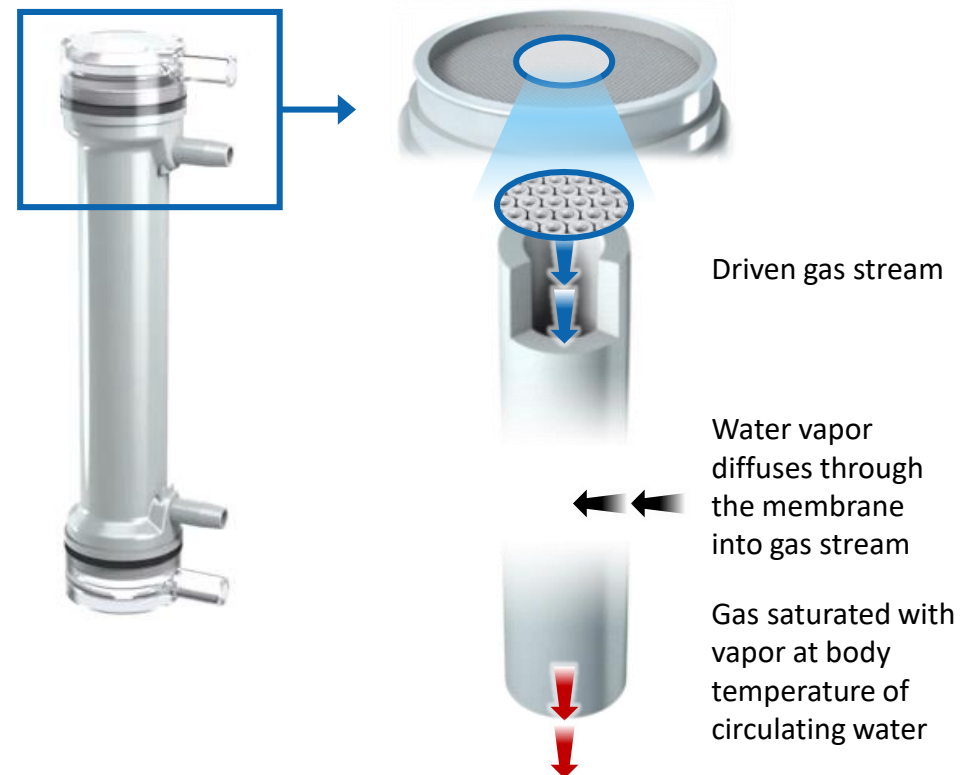
# Delivering **Velocity** and **Humidification** with Hi-VNI Technology

## High **VELOCITY**



... creates efficient flush – even in patients breathing rapidly

## Proper **HUMIDIFICATION**



... allows patient comfort and ability to tolerate therapy

# Our Connected, Mobile, Adaptable Precision Flow Systems

Capital Unit

PRECISION FLOW PLUS



Vapotherm  
Transfer Unit



Electronic Components;  
Input Gas Controls

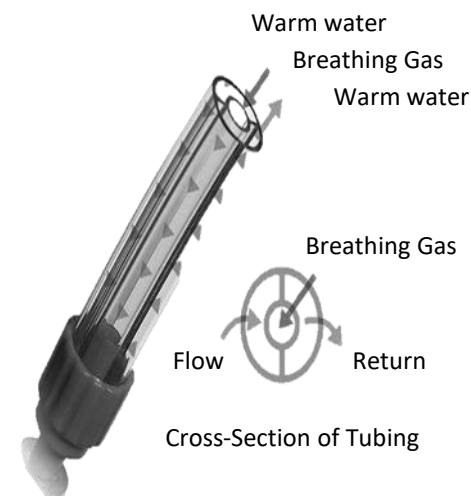
Disposables

PATIENT CIRCUIT



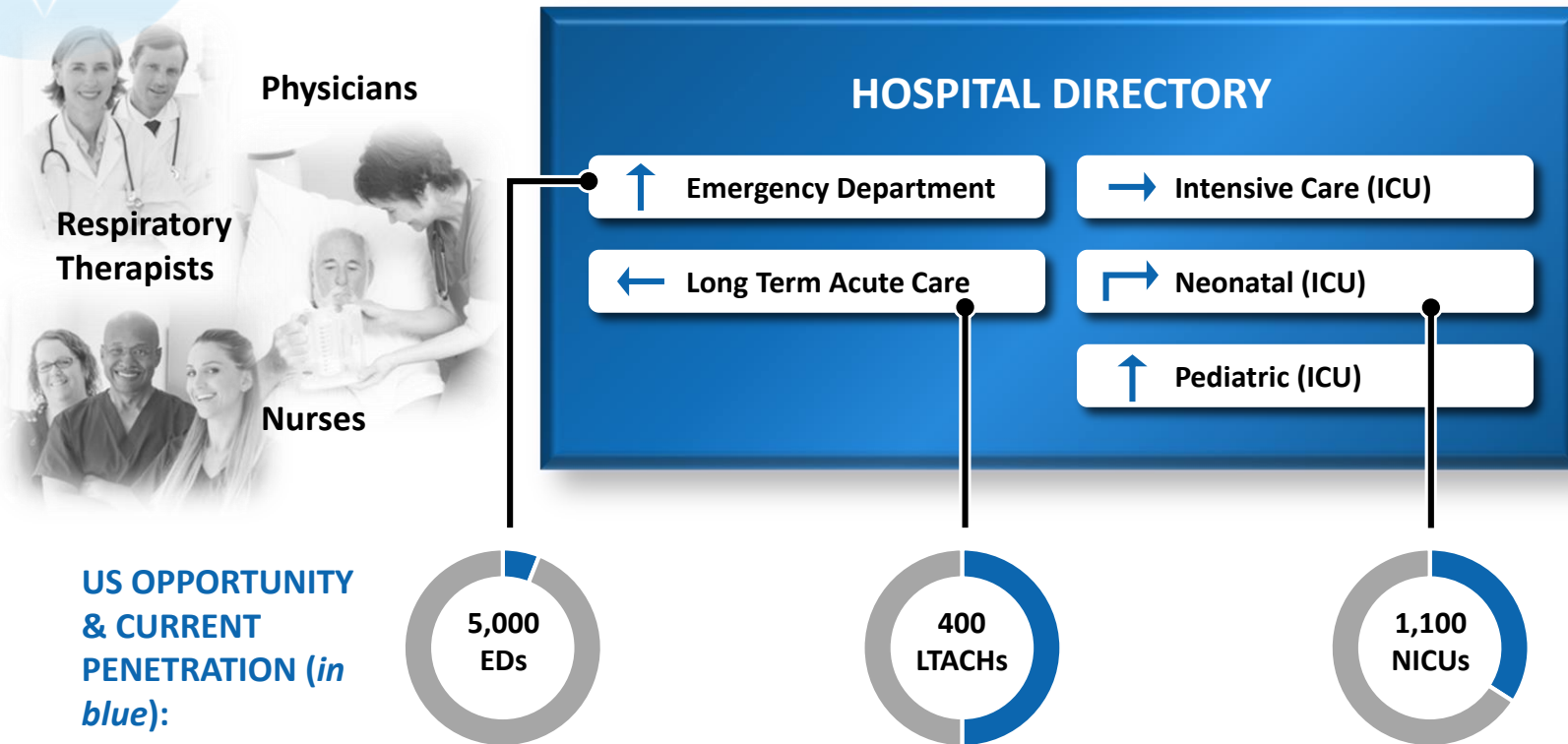
Breathing Gas

DELIVERY TUBE



Triple-lumen Delivery Tube  
Small-bore Nasal Interfaces  
and Adapters

# Broad Use Today Across Care Areas ... and Care Givers



## GROWTH FOCUS

Emergency departments

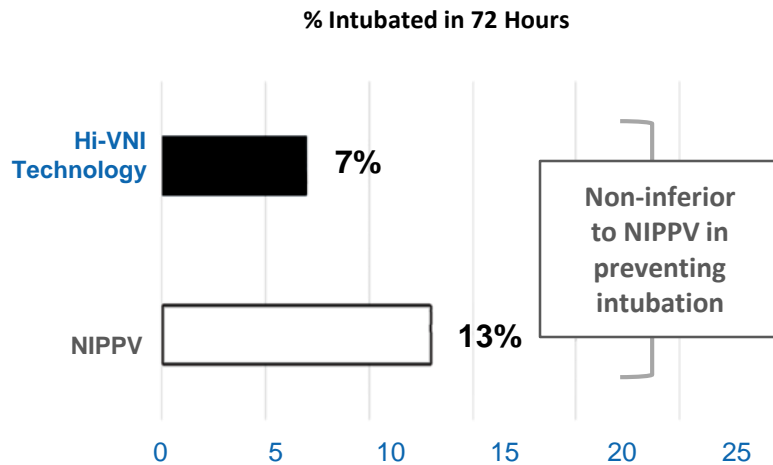
New hospital departments

New areas  
pre- and post-hospital

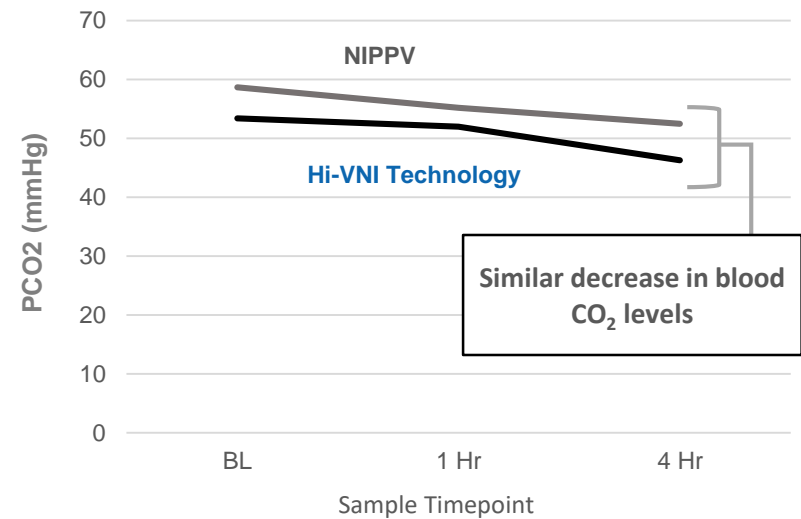


# Compelling Clinical Data

## INTUBATION RATES Hi-VNI TECHNOLOGY vs. NIPPV



## BLOOD CARBON DIOXIDE LEVELS OVER TIME



A 204-patient, multi-site prospective randomized controlled trial showed Hi-VNI is a safe and effective alternative to NIPPV for all cause respiratory distress patients

# Expanded **FDA** Indications for Use



APRIL 2018

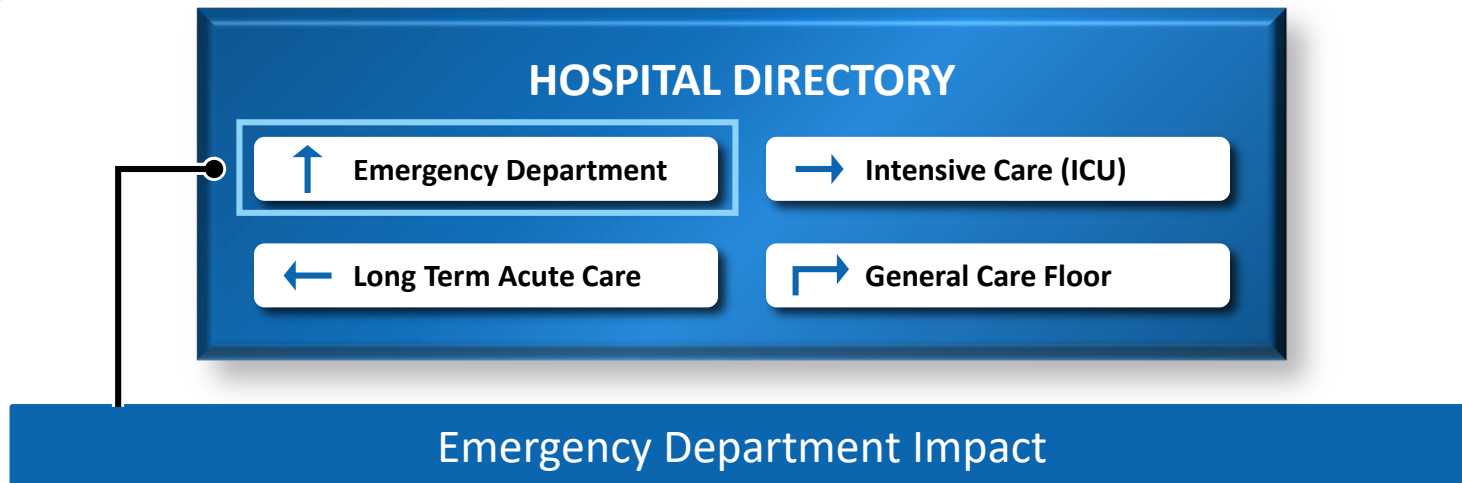
## *De novo* Grant for Expanded Indication for Use with Updated Version of Precision Flow Systems

Created new category and expanded indication for use:  
The updated version of our system is the **ONLY** product listed

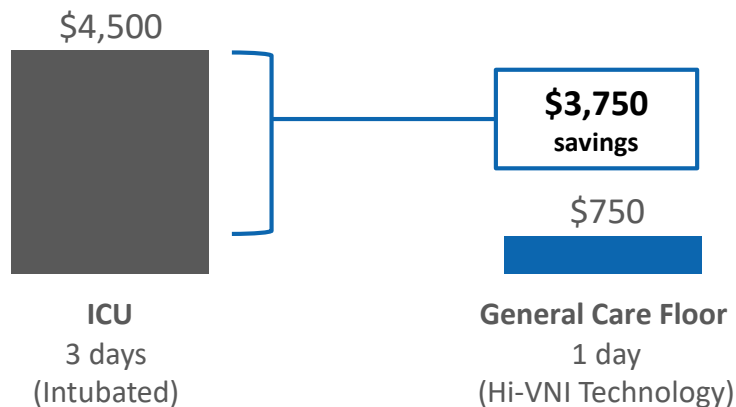
We believe validates clinical differentiation and value proposition,  
establishing Hi-VNI as attractive alternative to NIPPV



# Improved Patient Experience with Reduced Cost of Care

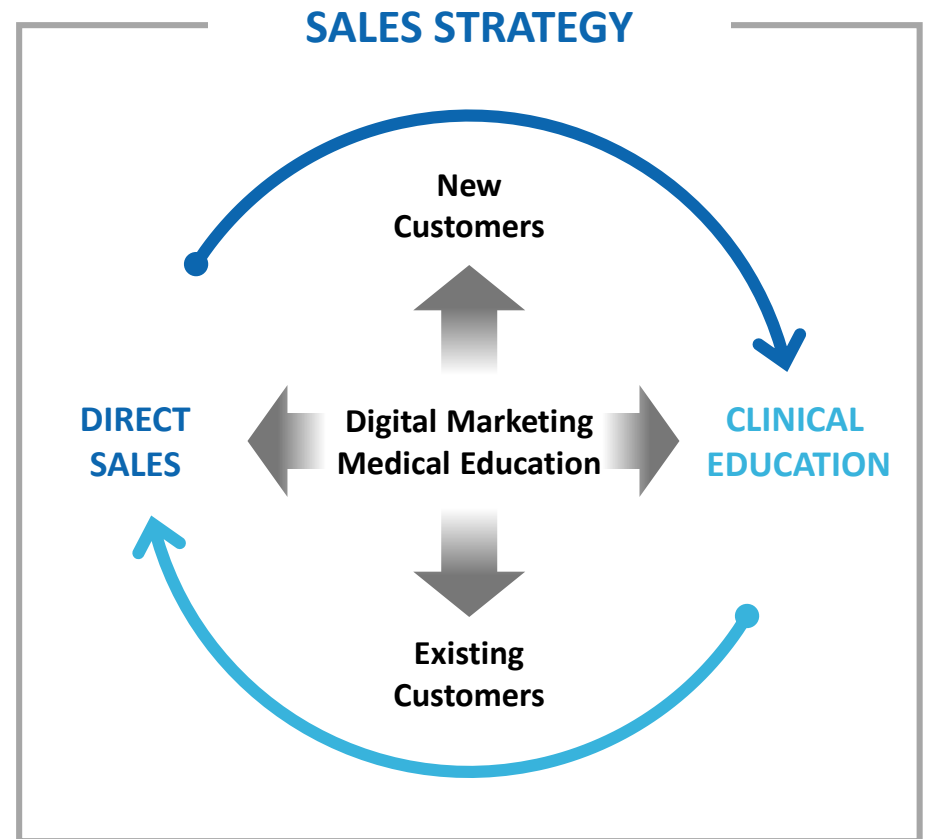
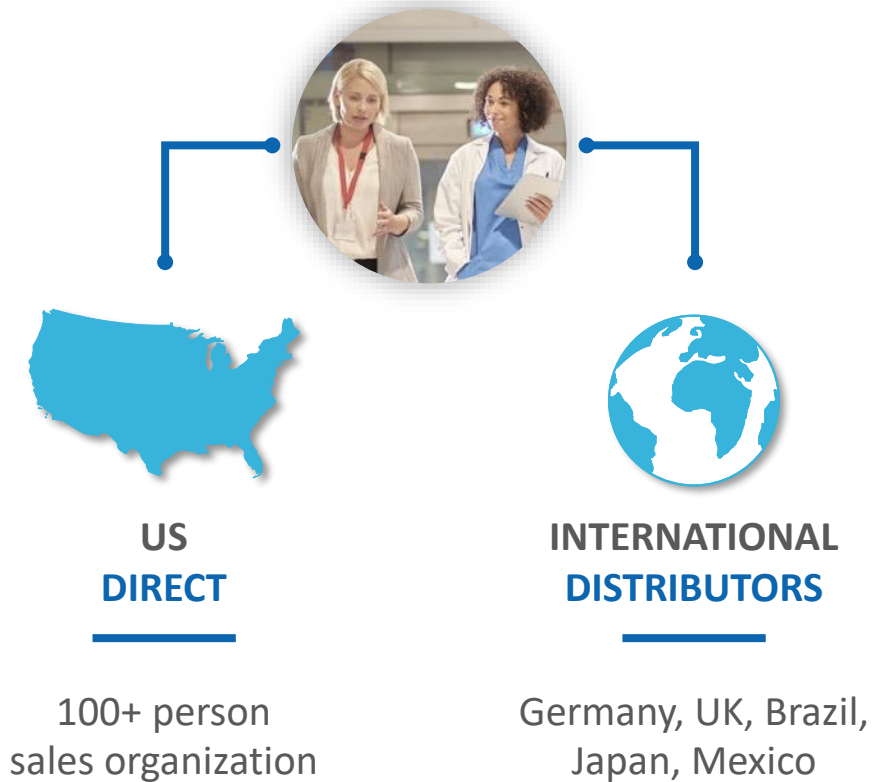


**(One Patient; Two Visits)<sup>1</sup>**



1. A single-patient case study report from Athens Regional Medical Center

# Clinically-Focused Sales Approach

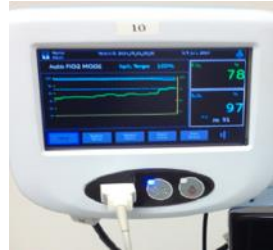


# Pipeline of **New Products**



## Updated Precision Flow Systems

- Updating electronics to comply with new regulatory requirements in Europe
- Updating software to meet requirements of *de novo* grant



## Modules to simplify and automate adjustments to Precision Flow systems' delivery of oxygenated breathing gas

- Recently completed clinical trials in pre-term infants



## Next Generation Hi-VNI Technology Product

- Provide high-velocity nasal insufflation using a portable device, removing requirement for access to built-in wall outlets that provide compressed air

**Enhance**  
Current Portfolio

**Market-Expanding**  
Products

We Hire,  
Develop  
and Retain  
**Talented  
People** in  
the Medical  
Industry





# Management Team with Proven Track Record

## MANAGEMENT TEAM

**Joe Army**

President and CEO



**John Landry**

VP & CFO



**Lindsay Becker**

VP HR



**David Blouin**

VP US Sales



**John Coolidge**

VP Operations



**Marc Davidson**

VP R&D



**Jill Dooling**

VP Strategic Accts



**George Dungan**

VP Science and Innovation



**Lise Halpern**

VP Marketing



**Richelle Helman**

VP RA/QA



**Michael McQueen**

VP MedED



**Gregoire Ramade**

VP International



# Experienced Board

## BOARD OF DIRECTORS

**Jim Liken**

Chairman



**Geoff Pardo**

Investor



**Joe Army**

President and CEO



**Craig Reynolds**

Independent



**Tony Arnerich**

Investor



**Neal Armstrong**

Independent



**Bess Weatherman**

Independent



**Marina Hahn**

Independent



## STRONG INVESTOR BASE

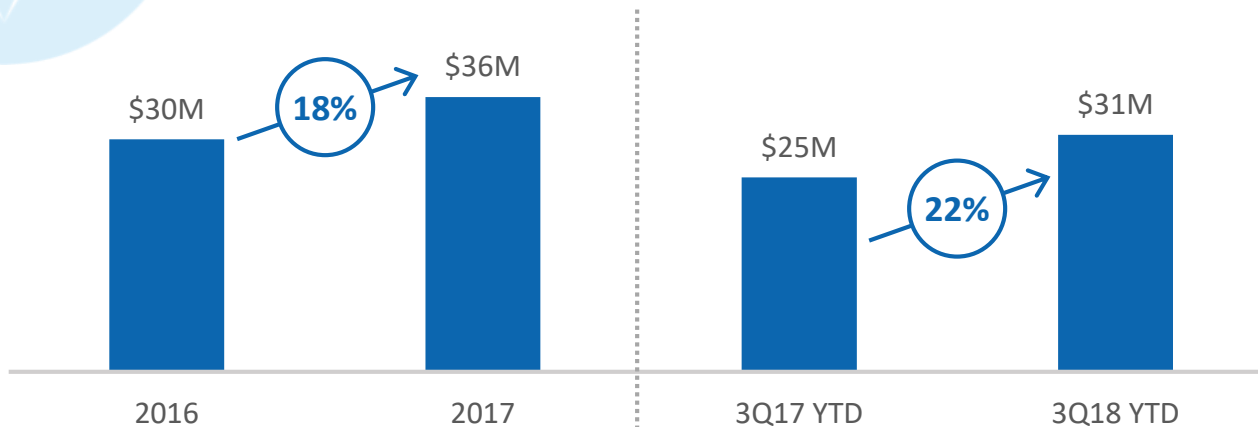


**Adage Capital Management, L.P.**



**Redmile Group**

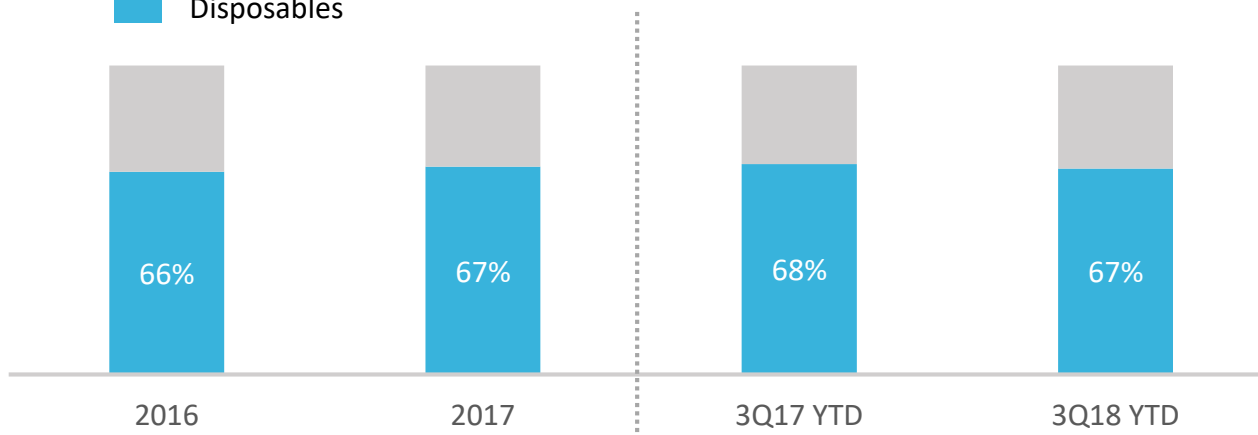
# Revenue



As of September 30, 2018,  
global installed base  
of over 13,000  
capital units

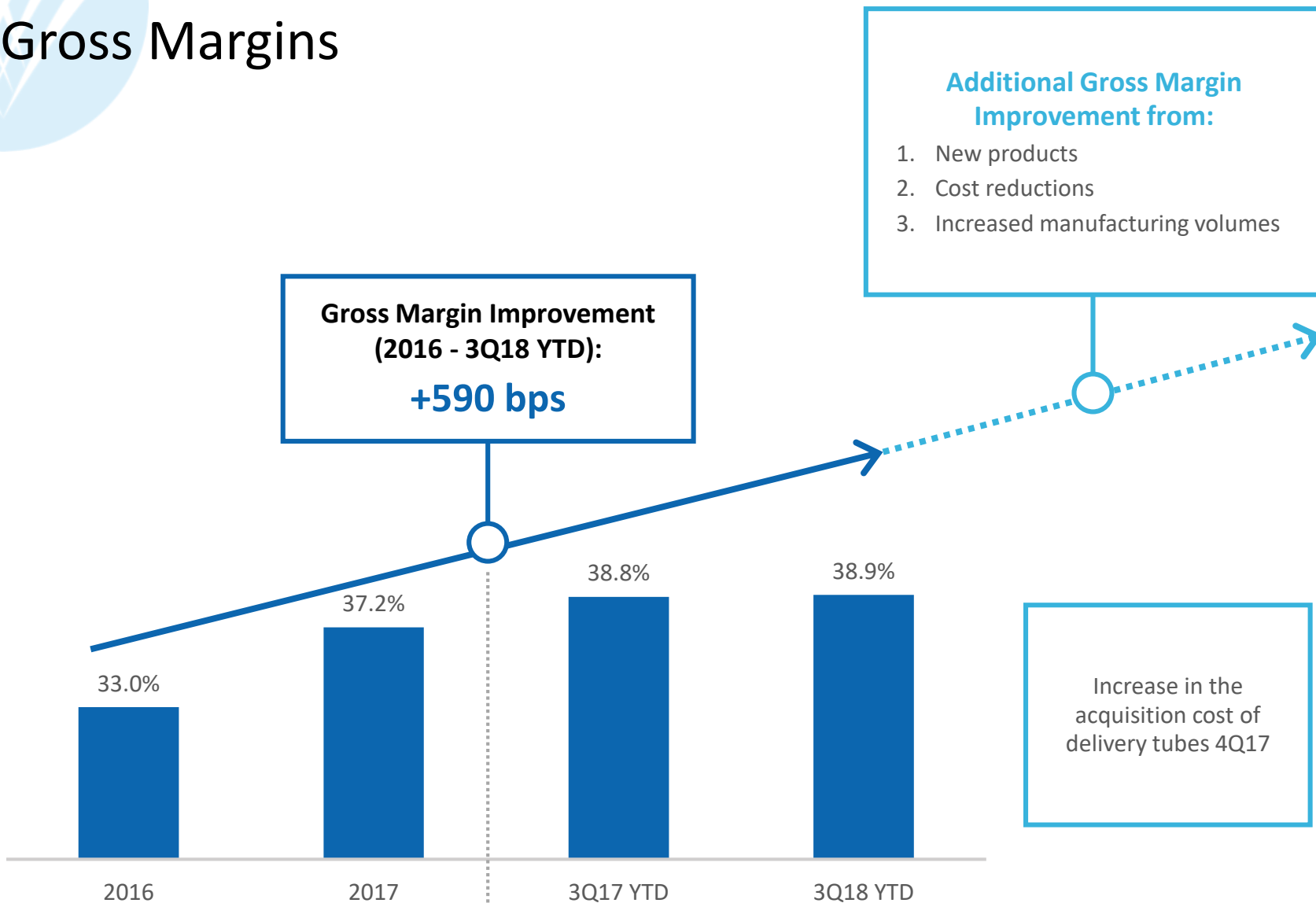
# Disposables as % of Revenue

Capital Units  
Disposables



Disposables revenue  
driving consistent,  
predictable revenue

# Gross Margins



# Historical P&L

|   | FISCAL YEAR ENDING<br>DECEMBER 31 |                   | 9 MONTHS ENDED<br>SEPTEMBER 30 |                   |
|---|-----------------------------------|-------------------|--------------------------------|-------------------|
|   | 2016                              | 2017              | 2017                           | 2018              |
| \$ Thousands                            |                                   |                   |                                |                   |
| <b>Total Revenue</b>                    | <b>\$30,122</b>                   | <b>\$35,597</b>   | <b>\$25,190</b>                | <b>\$30,691</b>   |
| <i>% Growth</i>                         | --                                | 18.2%             | --                             | 21.8%             |
| <b>Gross Profit</b>                     | <b>\$9,939</b>                    | <b>\$13,240</b>   | <b>\$9,780</b>                 | <b>\$11,954</b>   |
| <i>Gross Margin %</i>                   | 33.0%                             | 37.2%             | 38.8%                          | 38.9%             |
| Sales & Marketing                       | 20,026                            | 26,221            | 18,575                         | 24,331            |
| <i>% of Revenue</i>                     | 66.5%                             | 73.7%             | 73.7%                          | 79.3%             |
| G&A                                     | 5,939                             | 8,020             | 5,953                          | 7,789             |
| <i>% of Revenue</i>                     | 19.7%                             | 22.5%             | 23.6%                          | 25.4%             |
| R&D                                     | 6,211                             | 7,569             | 5,441                          | 6,074             |
| <i>% of Revenue</i>                     | 20.6%                             | 21.3%             | 21.6%                          | 19.8%             |
| (Gain) Loss on Disposal of Fixed Assets | (14)                              | 301               | 0                              | 59                |
| <b>Total Operating Expenses</b>         | <b>\$32,162</b>                   | <b>\$42,111</b>   | <b>\$29,969</b>                | <b>\$38,253</b>   |
| <b>Loss from Operations</b>             | <b>(\$22,223)</b>                 | <b>(\$28,871)</b> | <b>(\$20,189)</b>              | <b>(\$26,299)</b> |

# Building Long Term, Sustainable Competitive Advantage



**Disruptive** Hi-VNI **TECHNOLOGY** for the treatment of respiratory distress

**Large** global \$1.5BN+ **MARKET** opportunity

**Compelling body of CLINICAL DATA** and an FDA *de novo* grant of expanded indications for use

**Direct** US **SALES FORCE** and experienced **international DISTRIBUTORS**, supported by clinical team

Robust and **growing** IP **PATENT PORTFOLIO**

**Recurring REVENUE MODEL** with high visibility on our disposables utilization

**Experienced** management **TEAM**, board and investors