Nexstim

Targeting a paradigm shift in stroke rehabilitation

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Nexstim's NBS System is cleared by the FDA for assessment of the motor and speech cortices for pre-procedural planning. The NBT System is not cleared for commercial distribution in the United States.

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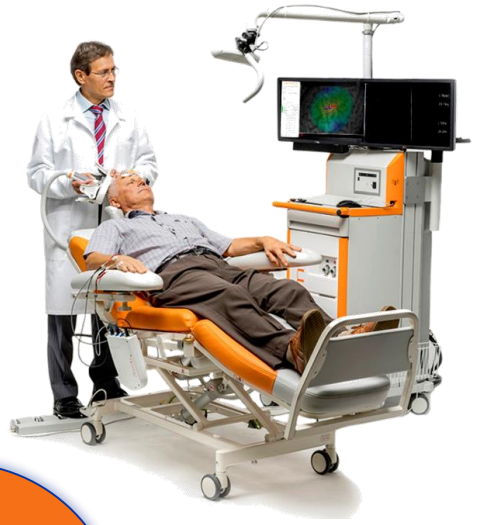
Introducing Nexstim – The Navigated Brain Stimulation (NBS) Company



CE mark & FDA clearance for e-field based navigation

Continued growth in Pre-Surgical Mapping

NBT® future focus on high potential therapeutic applications

Strong IP – technology and software

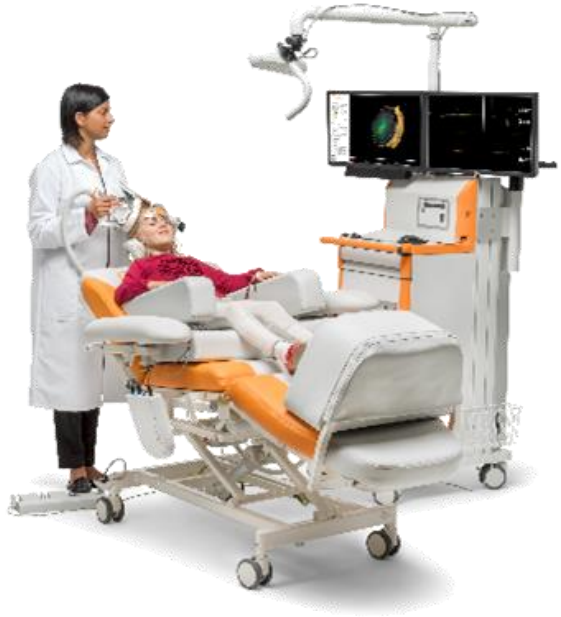
Experienced management team & international Board

High margins for systems & consumable

Targeted growth in Europe, US & Asia

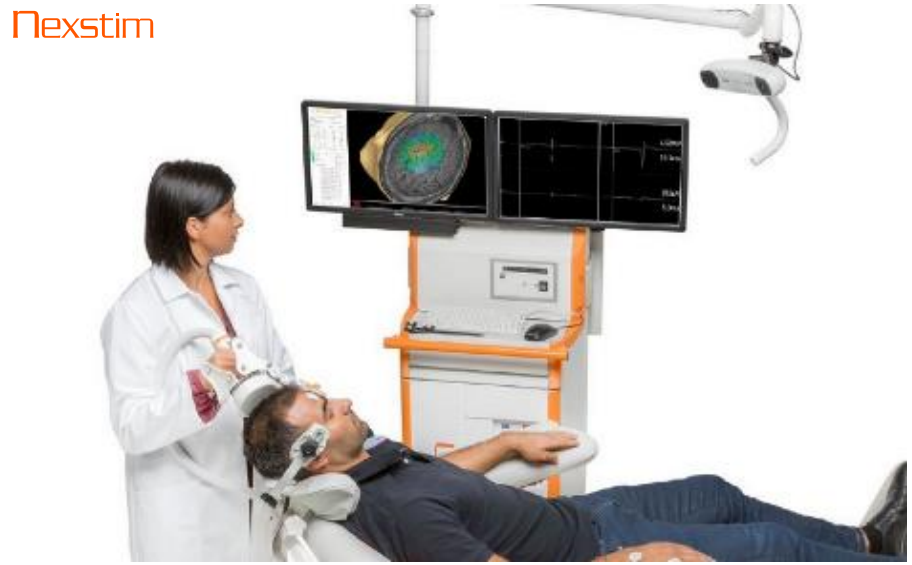
NBS Pre-Surgical Mapping Overview

- Maps the Motor and Speech Cortex prior to tumour surgery
- Application in epilepsy
- The NBS system links
  - Brain anatomy (MRI)
  - Location of the TMS (navigation)
  - Muscle response (EMG)
- Navigation is the key – NBS system visualizes the precise area of the brain that is affected



NBS vs. Direct Cortical Stimulation (DCS) motor mapping

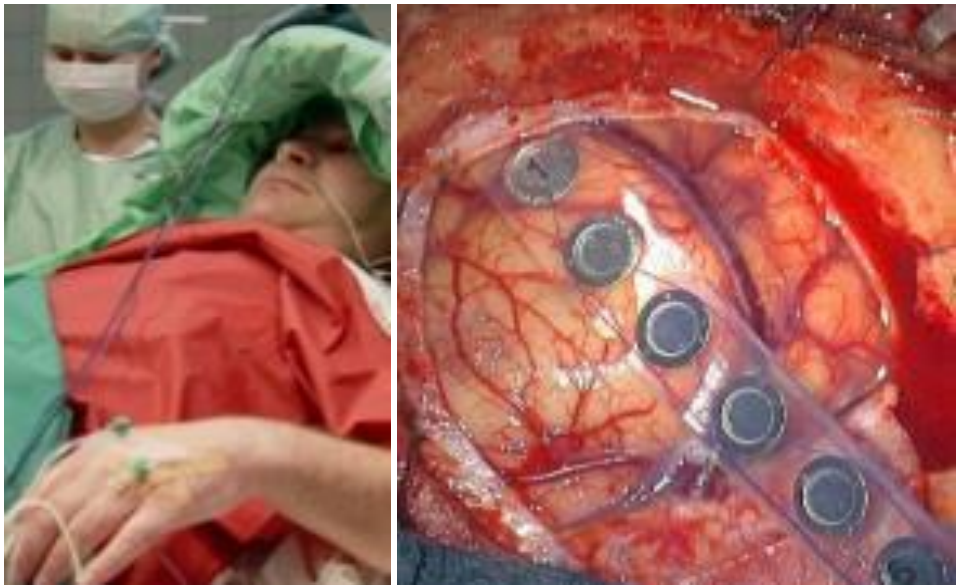
Nexstim's NBS



Non-invasive

Mapping possible days or weeks prior to surgery

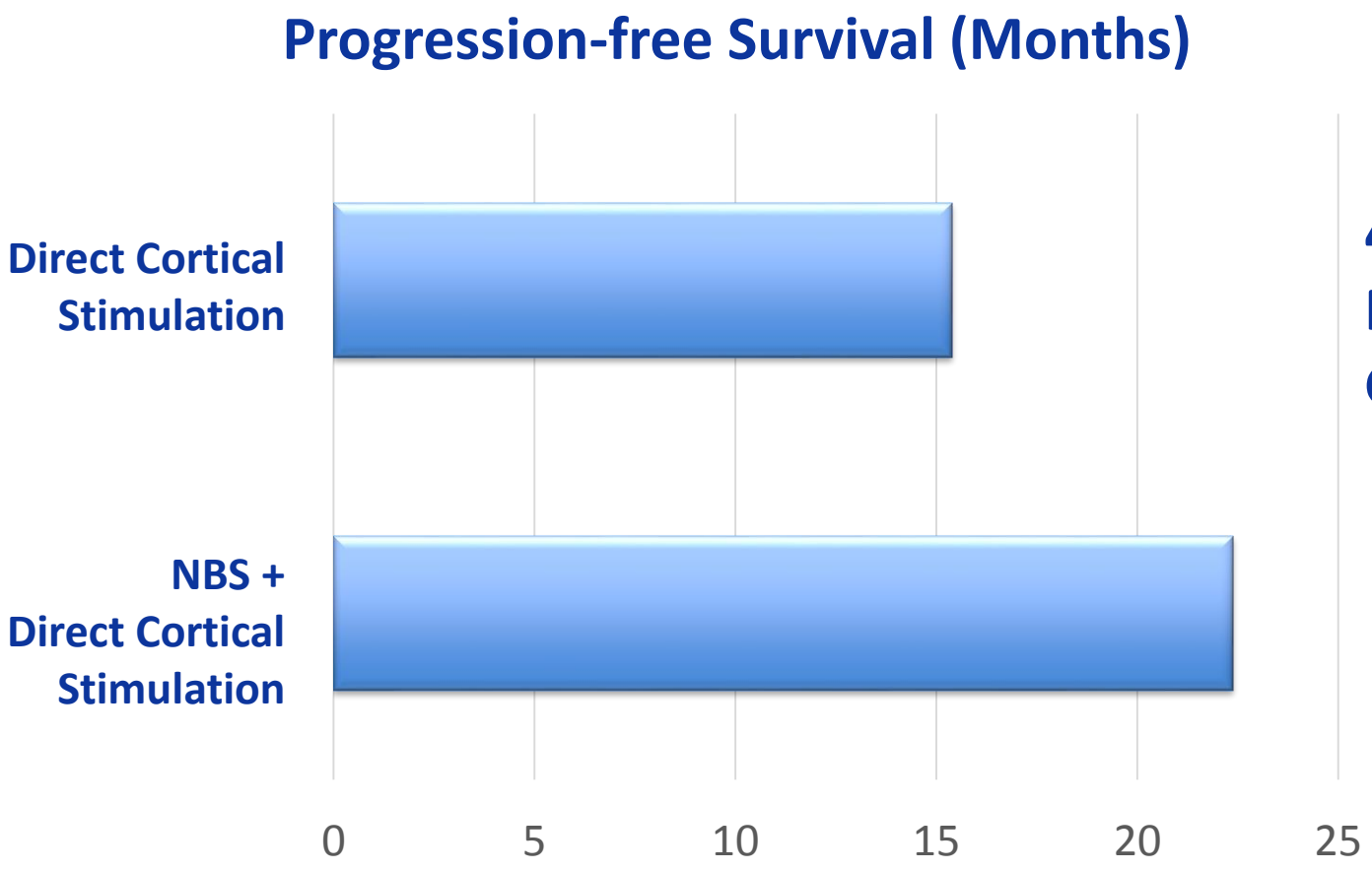
DCS - Current "gold standard"



Invasive

Mapping during surgery

NBS Pre-Surgical Mapping makes the difference to clinical outcome



46% Increase in PFS in Low Grade Gliomas[1]

1 Dietmar Frey, Peter Vajkoczy, and Thomas Picht **Navigated transcranial magnetic stimulation improves the treatment outcome in patients with brain tumors in motor eloquent locations** Neuro Oncology 2014 : nou110v1-nou110

NBT® (Navigated Brain Therapy) has potential for multiple therapeutic applications due to precise navigation

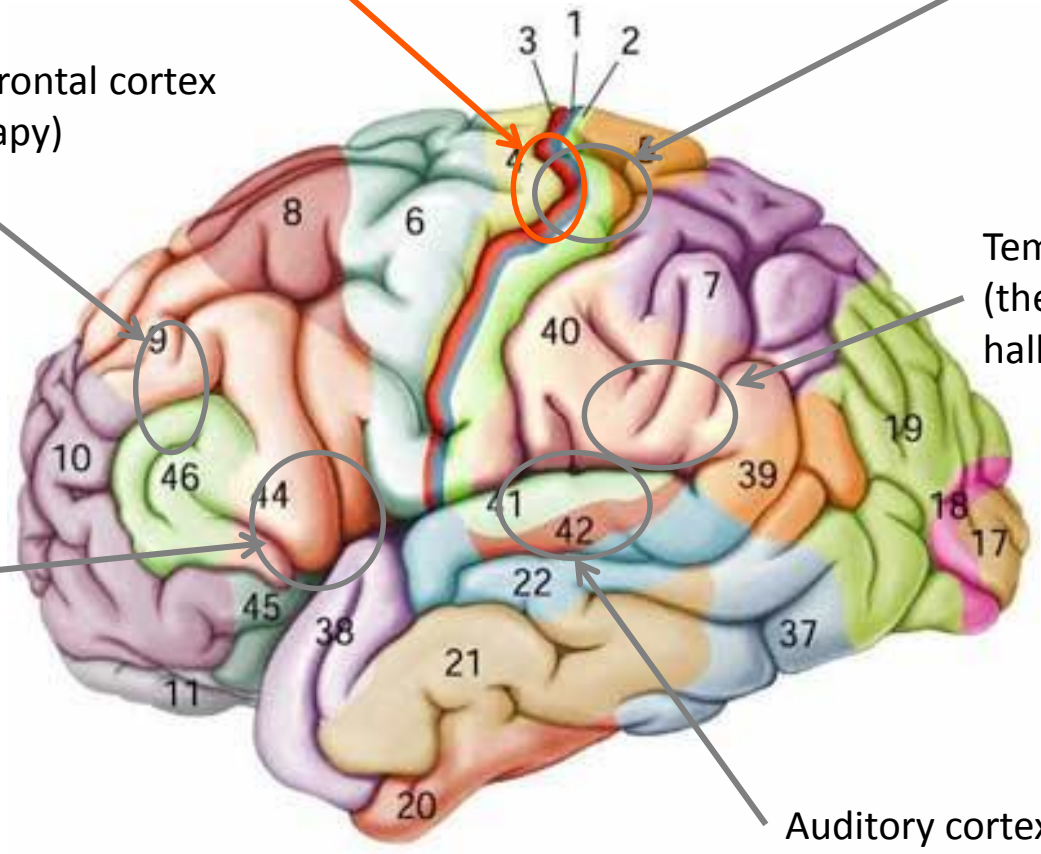
Primary motor cortex (stroke rehabilitation therapy)

Primary motor/sensory cortex (pain therapy)

Dorsolateral prefrontal cortex (depression therapy)

Temporoparietal cortex (therapy for auditory verbal hallucinations in schizophrenia)

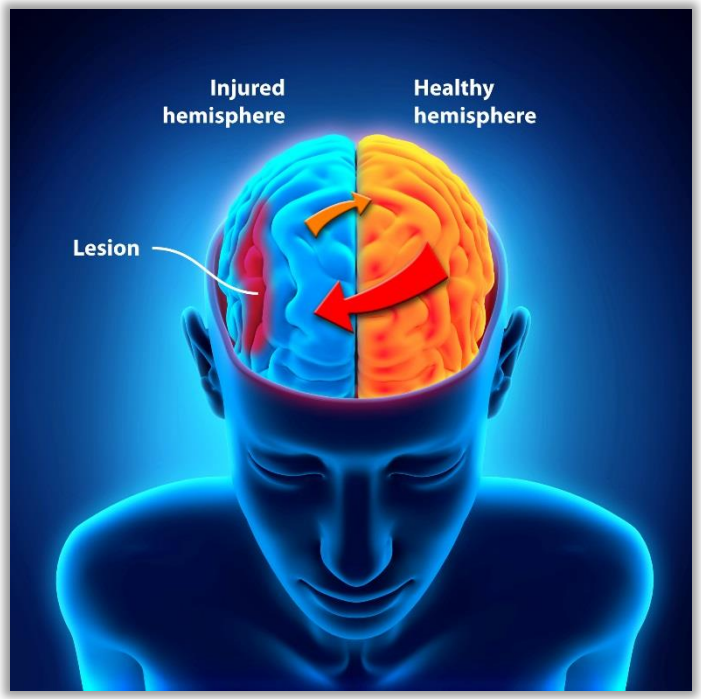
Broca's area (aphasia therapy)



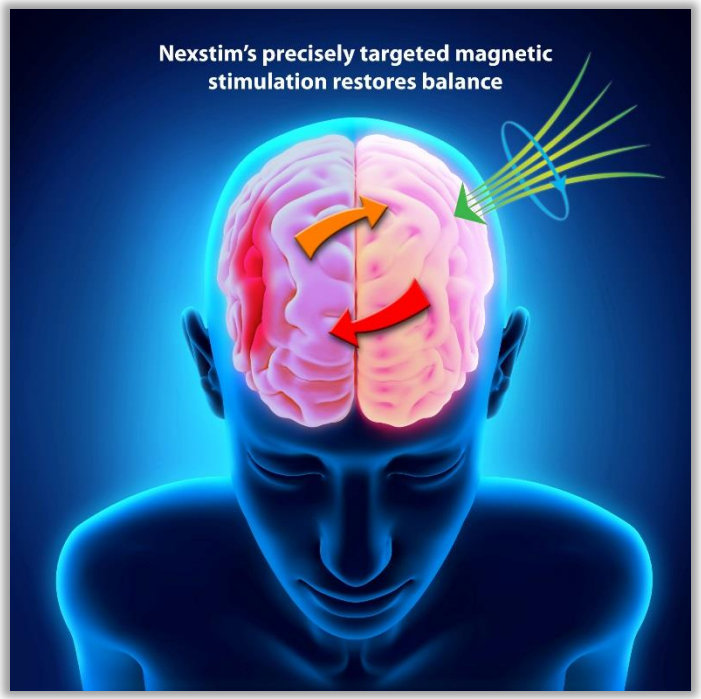
Auditory cortex (tinnitus therapy)

NBT® for stroke rehabilitation – how it works

Validated e-Field Navigation gives Competitive Edge



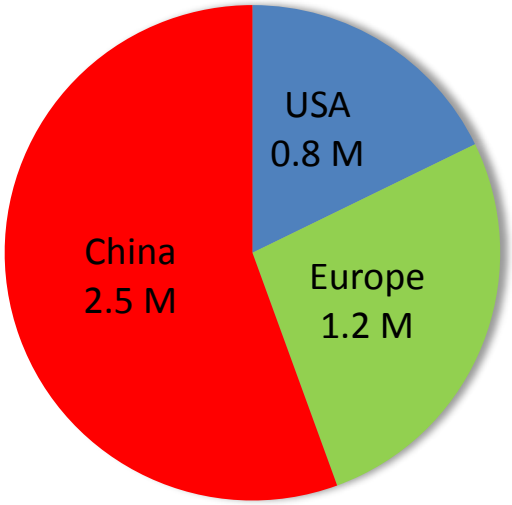
Using a patient's own MRI scan as a guide, Nexstim provides precisely targeted, personalized, magnetic stimulation to temporarily inhibit the healthy side of the brain, normalising the balance between the hemispheres.



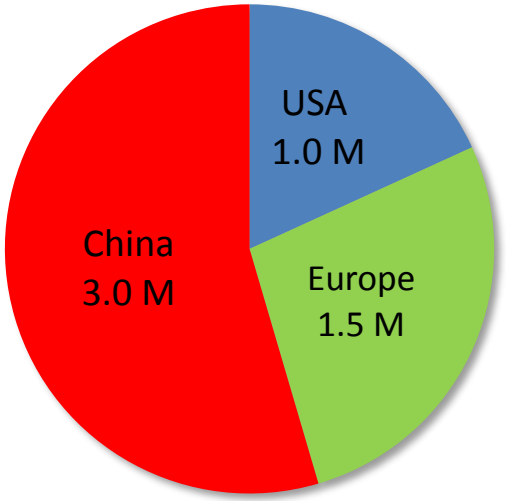
Because the injured side is no longer dominated by the healthy side of the brain, it is more responsive to the physiotherapy. This results in limb movement being potentially restored more quickly to better functionality.

Market opportunity in stroke rehabilitation

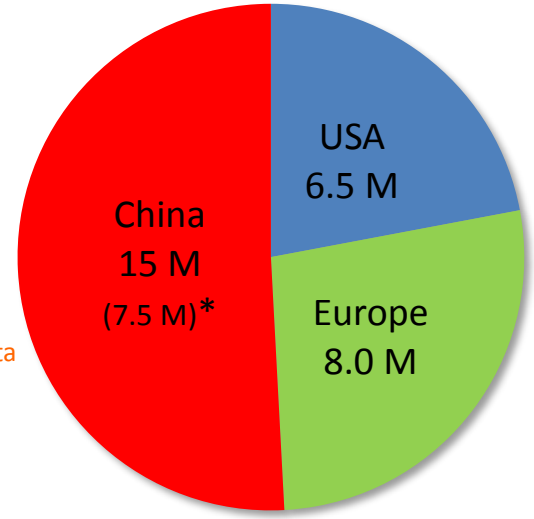
2015 Incidence of stroke



2025 Incidence of stroke



2015 Stroke survivors



*Published data

- Target patients with upper limb paralysis
- Focus on the period over 3 months post stroke

Status of Regulatory Development for Stroke

- CE mark for stroke rehabilitation
- Nexstim submitted 510(k) De Novo documentation to the FDA based on the clinical data in June 2016
- The Pre-submission includes full data from a total of 173 patients from the Phase III multi-centre clinical trial. Positive data from the control group explained by active sham coil
- Feedback meeting with FDA September 14th, 2016
  - Agreed to a limited size supplementary trial
  - Will submit trial protocol in October 2016 and estimated trial design approval by the FDA early in 2017
  - An established financing plan is in place for supporting trial
- Preparation for SFDA and PMDA filing

Other indications

- **Chronic pain**
  - CE mark for treatment
  - Chronic neuropathic pain trial with Nexstim's NBT® has been completed
  - The study demonstrated 44% of patients obtained clinically meaningful pain relief of at least 3 weeks' duration
  - Second study using Nexstim's technology at The Walton Centre, the only specialist neuroscience centre in the NHS, to show long term effect of NBT® in chronic pain
- **Tinnitus**
  - Promising conclusions from pilot study done by Turku University Hospital and University of Turku, Finland
  - Preliminary observations suggest that E-field - rTMS may improve the current treatment options for intractable tinnitus
- **Depression**
  - NBT® CE-marked for use in treatment of depression. In KOL use to treat severe cases instead of ECT

Key performance indicators

EUR in thousands	H1 2016 6 months	H1 2015 6 months	FY 2015 12 months
Net sales	892.5	643.2	2,527.9
Personnel expenses	-2,214.6	-1,906.1	-3,969.8
Depreciation and amortisation	-168.8	-168.7	-386.0
Other operating expenses	-2,410.8	-3,422.9	-7,843.1
Profit/ -Loss for the period	-4,226.5	-4,555.0	-9,827.0
Earnings per share (EUR)*	-0.53	-0.64	-1.37
Diluted earnings per share (EUR)*	-0.47	-0.58	-1.24
Cash flows from operating activities	-5,240.7	-5,275.3	-9,608.6
Cash in hand and at banks	1,815.6	6,071.1	6,874.7
Total equity	-588.1	3,712.0	3,545.1
Equity ratio (%)	-3.24	50.44	44.16
Number of shares in the end of the period (pcs)	8,116,833	7,130,758	8,010,758
Average number of shares during the period (pcs)	8,031,740	7,130,758	7,154,868
Diluted number of shares in the end of the period (pcs)	9,497,698	7,917,698	8,797,698
Diluted average number of shares during the period (pcs)	8,936,160	7,917,698	7,941,808

Net sales increase of 38.8 percent

Includes EUR 1,227.4 thousand of Phase III trial expenses

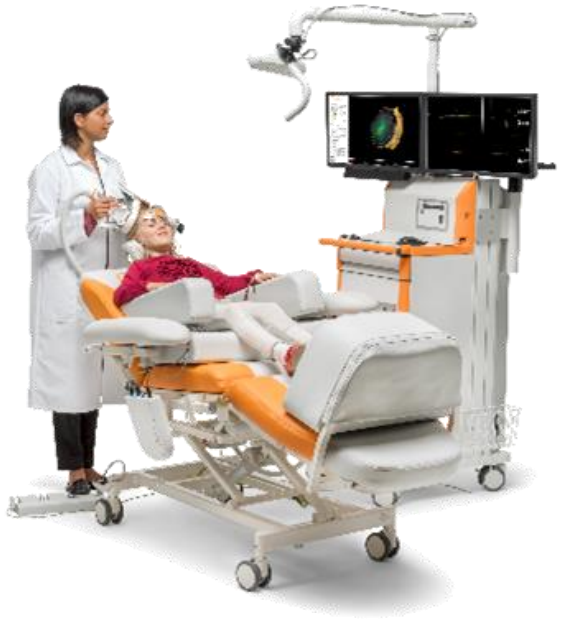
The financing arrangements with Bracknor and Sitra, combined with the strategic changes in the organization (targeting annual savings of EUR 2.3 million), is estimated to finance the Company until beginning of financial year 2018.

Nexstim Strategic Actions

- Move to full distributor model for Pre-surgical mapping
- Focus on therapeutic applications
- Exploit CE marked approval in Stroke
- File the 510(k) De Novo submission for stroke
- Geographic expansion to include key Asian territories
- Develop partner agreements for key geographic territories and therapeutic applications

Nexstim Funding

- Agreed a two year funding arrangement with Bracknor Investment and Finnish Innovation Fund Sitra
- Funding arrangement is a combination of EUR 5 million of convertible bonds, EUR 6.5 million stand-by equity facilities, EUR 0.5 million direct share issue and EUR 5 million warrants
- Costs aligned to therapy strategy, targeting annual savings of EUR 2.3 million



Nexstim

Thank you

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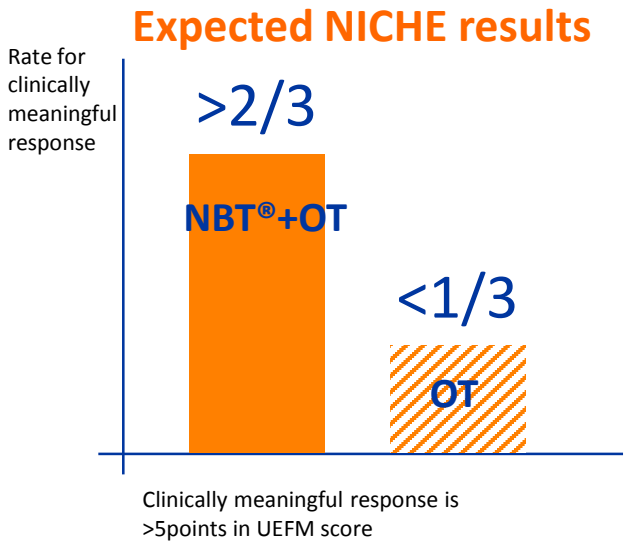
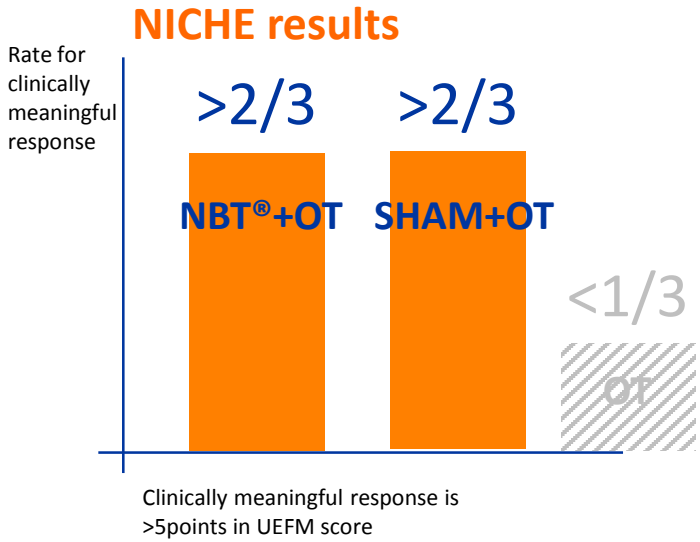
Clinical evidence from NICHE, Phase III multi-center trial



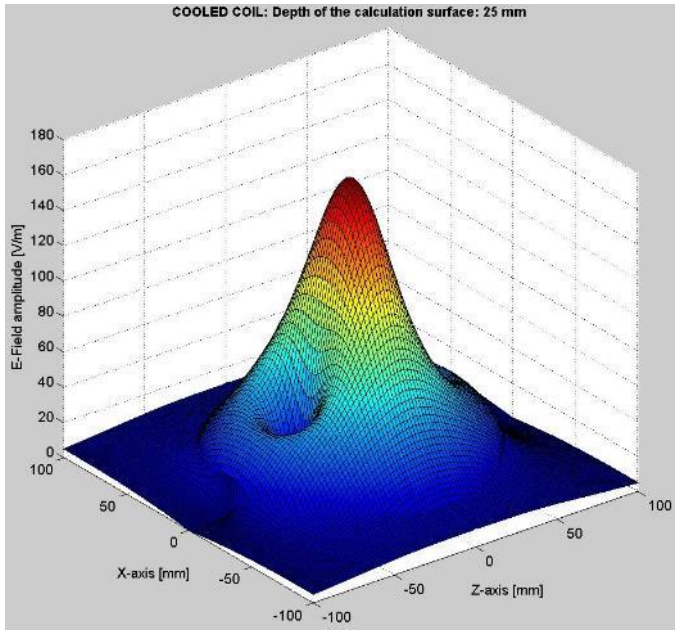


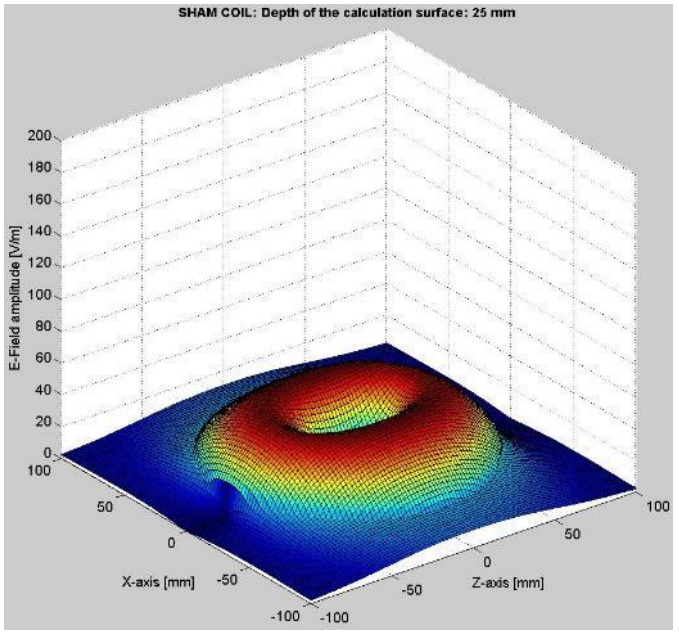
- The clinical Phase III multi-center stroke trial was stopped after 138 patients at end of March 2016
- Significant and clinically meaningful responses from both active and sham patient groups
- Dr. Richard Harvey[2] (RIC) "The overall level of functional improvement in NICHE is high for this post-acute stroke patient population. This degree of therapeutic response is a very positive step forward for arm and hand recovery in patients with stroke. Further exploration of this technology to enhance the current rehabilitation outcomes to this extent is a next step to pursue."
- No safety concerns were observed with any of the 199 patients enrolled in the trial
- Nexstim submitted the 510(k) De Novo documentation to the FDA based on the clinical data in June 2016. The submission includes full data from a total of 173 patients

2 Dr. Richard Harvey, Medical Director, Center for Stroke Rehabilitation, Rehabilitation Institute of Chicago (RIC)

Nexstim Active NICHE coil vs. SHAM coil

- **Nexstim Active Coil** creates a cone –like magnetic field to induce the stimulating electric field. This allows NBT to be accurate with stimulation area and dose to be titrated to evoke MEP's from pyramid tracts in the motor cortex.
- This is the normal TMS coil/magnetic field shape and there are 8.000+ publications with similar coils.
- **Nexstim SHAM coil** creates a donut-like magnetic field to induce a weak stimulating electric field which is around 30% of the Active coil e-field with same simulator output.
- The donut-like field, when navigated to be exactly around target on the motor cortex, may induce a stimulating field leading to surround inhibition on the pyramid tracts located in the void in the middle.





The Board

	Name Nationality		Education	Relevant experience
	Martin Jamieson, Chairman UK	2015 Independent	University of the Arts (CDT) London Higher National Diploma - Business Studies (1979)	Currently board member of C-Major Ltd, LightPoint Medical Ltd and Medway NHS Foundation Hospital Trust. Previously Managing Director Smiths Medical International and CEO at Rayner Group.
	Dr Johan Christenson, Deputy Chairman Sweden	2007 HealthCap	4 years of clinical specialist training at Karolinska Institute, PhD at Karolinska Institute (1991) in neuroscience	Partner at HealthCap and positions on several private company boards. Previously supervised health care portfolio at SEB Företagsinvest.
	Ken Charhut US	2013 Independent	BSc at Cornell (1980) and MBA from U.Chicago (1988)	Member of the Board at two medical industry companies. CEO at Compellon. Previously CEO at other medtech firms.
	Rohan Hoare Australia	2016 Independent	Ph.D. in Physics from Harvard University where he was a Fulbright Scholar	Most recently the President, Neuromodulation at LivaNova. At Cyberonics, Rohan was the COO. Numerous leadership positions at St Jude Medical culminating in President, Neuromodulation Division.
	Dr Ekaterina Smirnyagina France	2013 Capricorn	Postdoctoral fellow at Stanford, PhD at U.Wisconsin-Madison (1996), BSc from Moscow State U (1988)	Partner of Health-Tech Fund Venture Fund at Capricorn Venture Partners. Previously partner at Alta Partners, a healthcare focused VC firm.
	Juliet Thompson UK	2015 Independent	Chartered Accountant ACA; Chartered Institute for Securities (ASCI); BSc Economics (Bristol University)	Experience includes senior roles (Managing Director, Head of Corporate Finance and Partner) at Stifel Financial Corp, Nomura Code Securities, WestLB Panmure, ICI PLC, Deloitte and Touche and HM Treasury.
	Juha Vapaavuori Finland	2006 Sitra	MSc at U.Helsinki (1978)	Chairman of the Board of Directors of FIT Biotech and member of the Board of Directors of KC-Holding 3.

Management team

	Name Nationality	Current position (Nexstim since)	Education	Relevant experience
	Martin Jamieson UK	CEO & Chairman of the Board 2016	University of the Arts (CDT) London Higher National Diploma - Business Studies (1979)	Currently board member of C-Major Ltd, LightPoint Medical Ltd and Medway NHS Foundation Hospital Trust. Previously Managing Director Smiths Medical International and CEO at Rayner Group.
	Henri Hannula Finland	VP, Sales Europe 2001	MSc in technology from Helsinki U. of Technology (2001)	Various roles at Nexstim starting 2001 and VP, Sales Europe since 2013. Comes from position as director of sales
	Rainer Harjunpää Finland	VP, Quality Assur. and Regulatory Affairs, After Sales/Services , 2010	MSc in biomedical engineering from Tampere U. of Technology (1993)	Current position since 2013, previously as director and manager of quality and regulatory affairs
	Gustaf Järnefelt Finland	VP, R&D 2008	MSc at Helsinki U. of Technology (1988)	R&D director 2008-2014. Previously held managerial positions at GE Healthcare Finland
	Mikko Karvinen Finland	CFO 2014	MSc in economics at Helsinki School of Economics (2001)	Previously held CFO and deputy CEO positions at two Nasdaq OMX listed tech-firms
	Jarmo Laine Finland	VP, Medical Affairs 2008	MBA at Helsinki U of Technology (2007) and PhD at U.Helsinki (1995), MD U. Helsinki (1991)	Director of clinical operations 2008-2013. Held several directorial positions at Finnish Red Cross Blood Service
	John Liedtky US	VP, Commercialization, General Manager US, 2016	MBA in marketing at San Diego State University and BA in economics at Indiana University	Previously held Global Marketing Vice Presidency Roles at DJO Global, COVIDIEN and BREG Inc.
	Petriina Puolakka Finland	VP, Legal Affairs 2001	Master of Law at U.Lapland (2001)	Previously director of legal affairs and HR and manager of administration and legal affairs