

Al-Powered Imaging: New Horizons in Fighting Cancer

Corporate Update May 2025

MEDIAN TECHNOLOGIES



Disclaimer: Forward-Looking Statements



This presentation contains forward-looking statements. These statements are not historical facts. They include projections and estimates as well as the assumptions on which these are based, statements concerning projects, objectives, intentions, and expectations with respect to future financial results, events, operations, services, product development and potential, or future performance.

These forward-looking statements can often be identified by the words "expects," "anticipates," "believes," "intends," "estimates" or "plans" and any other similar expressions. Although Median's management believes that these forward-looking statements are reasonable, investors are cautioned that forward-looking statements are subject to numerous risks and uncertainties, many of which are difficult to predict and generally beyond the control of Median Technologies, that could cause actual results and events to differ materially from those expressed in, or implied or projected by, the forward-looking information and statements.

All forward-looking statements in this presentation are based on information available to Median Technologies as of the date of the presentation. Median Technologies does not undertake to update any forward-looking information or statements, subject to applicable regulations, in particular Articles 223-1 et seq. of the General Regulation of the French Autorité des Marchés Financiers.



Imaging AI,
cloud solutions and
computing power are
revolutionizing cancer care
and drug development

Our people

200+ highly qualified professionals in the US, Europe and China, 25+ nationalities (as of Dec. 31, 2024)

Our growth

Powered by proprietary AI, computer vision and signal processing technologies, strong KOL connections, and medical, scientific, technology partnerships.

eyonis™

With eyonis™, our AI/ML tech-based suite of software as a medical device (SaMD), we help enable clinicians to diagnose cancer patients earlier.

iCRO

Imaging Lab Our **iCRO** central imaging services and advanced **Imaging Lab** offering help our 80+ biopharma clients drive their oncology clinical studies toward successful approval, using AI-driven image insights.

Al Imaging is Redefining the Landscape in Fighting Cancer



Median Technologies leverages AI to bring more value to medical images all along the cancer patient journey

Adding more value to oncology trials

iCRO

Generating more
Al-driven data
for oncology
drug development

Imaging Lab

Providing more accurate
Al-driven diagnosis



- Extract drug efficacy data
- Streamline the clinical trial process
- Select early-stage patient
- Discover predictive imaging biomarkers

- Develop noninvasive, earlystage diagnostic solutions
- Market SaMDs for routine clinical use
- Develop companion diagnostics

A Great Quarter 1 2025 with Landmark Achievements



⊯eyonis

- •With the successful completion of RELIVE, eyonis™ LCS completed the studies required to achieve marketing authorizations in the US and Europe.
- Median successfully achieved

 ISO/IEC 27001:2022 and HDS V2.0

 certifications for eyonis™ activities, a

 critical step to successful marketing of
 eyonis™ suite of SaMDs in the US, in
 Europe and worldwide.

iCRO

- Order backlog and revenues:
 - €6.0 million in Q1 2025 revenues,
 up 11.1% over Q1 2024,
 - €74.8 million all-time high order backlog as of March 31, 2025.
- Order booking from undisclosed Top 3 pharma company, to which Median became preferred vendor in May 2024, is above expectations.
- First successful FDA audit in China.



Shifting the Early Cancer Diagnostic Paradigm with Artificial Intelligence

We are developing the next generation imaging AI/ML Software as a Medical Device (SaMD) to diagnose cancer patients at a stage they can be cured

Q + 1 0 1 5

Lung Cancer Screening (LCS) Challenges and Opportunities



Lack of diagnosis accuracy - a major hurdle to screening adherence & implementation, whilst I-ELCAP study showed 92% survival rate at 15y when diagnosed at stage 1 vs. 5% for stage $4^{(1)}$



Lung cancer facts & figures

- 1st cancer killer worldwide: 1.8M deaths 2022 (19% of all cancer deaths), 2.4M deaths projected in 2030 (2)
- 18% 5-year survival rate:
 - <25% stage 1 cases (68%-92% survival^(3,4))
 - >40% stage 4 cases (<10% 5-year survival (4))
- Rising frequency among never-smokers (20% US & UK) (4)

Why is LDCT screening adherence so low in the high-risk populations?

Lack of awareness of screening programs

Shortage of highly trained radiologists Challenge to
access screening
sites & lack of
appropriate
at-scale screening
devices

Low SoC diagnosis
accuracy generating
unmanageable
False Positives &
too many False
Negatives

Lung Cancer Screening programs

LCS programs implemented (Low Dose CT)		Target population
US	 USPSTF guidelines New CPT code: \$650 for Al quantitative CT tissue characterization 	14.5 M (USPSTF 2021) Near future: 30M
EU	UK, Poland, Croatia Germany - Developing in IT/DE/FR	EU T5: 22M (e)
Asia	South Korea & China regionally Japan in study phase	ASIA T3: 100M (e)

^[1] https://www.redjournal.org/article/S0360-3016(19)30110-5/fulltext

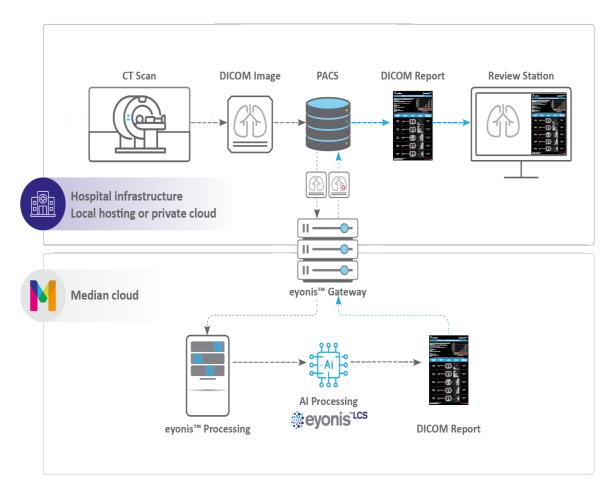
^[2] Cancer Tomorrow, IARC, Global Cancer Observatory 2020 - WHO

^[3] https://www.lungambitionalliance.com/our-initiatives/lung-cancer-screening-the-cost-of-inaction.htm

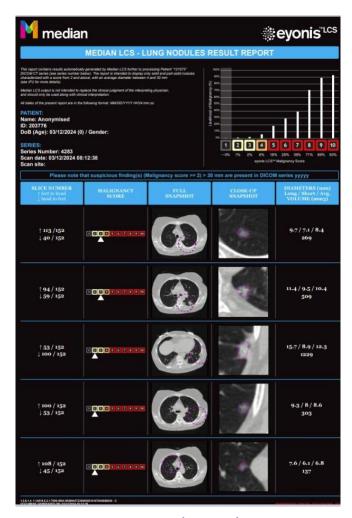
^[4] https://nrdrsupport.acr.org/support/solutions/articles/11000093991-lcsr-state-reports

eyonis™ LCS Will Significantly Impact Lung Cancer Screening





Seamless integration in the radiology workflow



Low Dose CT (LDCT) image standardized reporting

eyonis™ LCS Device Performances (May 2024)



eyonis™ LCS CADe/CADx Algo4v2.2 NLST Test Set

Nodule detection and characterization

Dataset

- Training (LIDC/IDRI + NLST):
 - 7,699 patients (543 cancers) 158,686 Nodules
- Test (NLST (independent from Train)):
 - 2,163 Patients (136 cancers) / 36,208 Nodules (146 cancers)

Annotation/Truthing

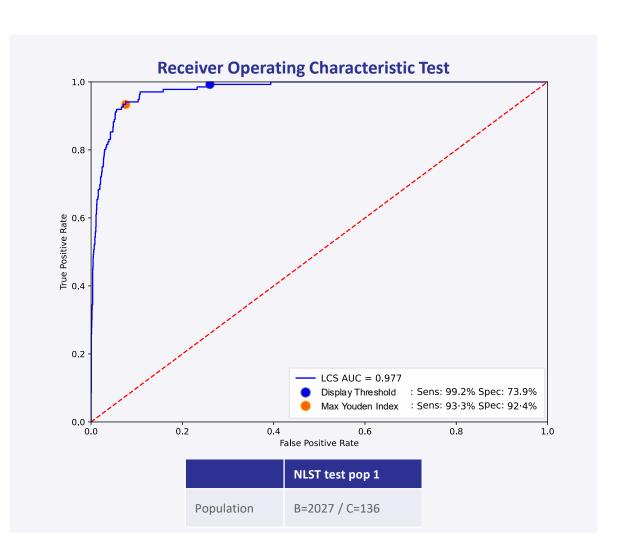
- Biopsy proven cancers, ≥12 month stable benign
- Radiologist detected and segmented nodules, micronodules, and focal abnormalities

Model

Deep Neural Networks (2D + 3D)[US Patent Granted]
 & 3D-Morphological[Patents Pending] & Radiomics

Performances

- AUC = 0.977
 - Max Youden Index: Sens 93.3% Spec 92.4%
 - Display threshold: Sens 99.2% Spec 73.9% for 0.481 FP/scan
 - 30.6% positive screening reports



eyonis™ LCS Unique Value Proposition





Seamlessly & effortlessly:

Identify malignant nodules earlier

Minimize Reduce indeterminate nodules positives

- Exceptional manufacturer performance: 93.3% sensitivity for 92.4% specificity
- Existing applicable \$650 CPT III code
- Unique CADe/CADx SaMD, seamlessly integrated in the radiology workflow
- Save patients lives by reducing false negatives & false positives
- Reduce unnecessary procedures and healthcare spending

10

eyonis™ LCS - Continuous Success Supporting Regulatory Submissions in May and June 2025





Design Phase

Al Model Research, Definition, Train/Tune/Test Verification

Independent Verification

Performance Validation

Standalone Validation

Clinical Validation

Multi Reader Multi Case Regulatory Submission & Clearance

Review
DA / CE Mar

2022 - 2023

CADe

CADX

CADX

CADe/x



TRAIN & TUNE

Based on a cohort of 8,709 patients (620 cancer) (LIDC: 1,010+ NLST: 7,699) May 2024

Manufacturer Values (MV) test

Performed to determine eyonis™ LCS performance

Sensitivity 93.3 %
Specificity 92.4 %
AUC=0.977

All cancer stages, at patient level

Cancer + benign Based on a cohort of **2,163** patients (**NLST data**) **June 2024**

Independent
Verification (IV) Study

Performed to verify eyonis™ LCS performance on an independent patient cohort

Sensitivity 93.4 %

Specificity 87.4 % AUC= 0.949

All cancer stages, at patient level

Based on an independent

ENRICHED (COPD)

cohort of 273 patients

(91 Cancers / 182 Benian)

Aug 2024

REALITY,

1st pivotal study

Performed to validate eyonis™ LCS standalone performance to diagnose cancer compared to ground truth

AUC= 0.903

All 10 primary & secondary endpoints met

All cancer stages, at patient level

Based on an ENRICHED cohort of 1,147 patients (342 Cancers / 805 Benign)

Q1 2025

RELIVE,

2nd pivotal study,

MRMC

Performed to demonstrate that eyonis™ LCS increases clinician performance in analyzing LDCT LCS images

Primary endpoint met with statistical significance p value = 0.027

Based on an ENRICHED cohort of 480 patients (160 Cancers / 320 Benian)

Q2 - Q3 2025

Submission
Acknowledgment
Completeness
Review
Substantive Review
Interactive Review
Decision

Substantive
Equivalence Letter
EXPECTED
IN Q3 2025

eyonis[™] LCS Pivotal Standalone REALITY Study Clinicaltrials.gov identifier: NCT06576232



A study to evaluate the performance of eyonis™ LCS to detect, localize and characterize pulmonary nodules at baseline (first scanner of the patient) compared to the ultimate biopsy ground truth

- Data from 5 academic centers + 2 data providers
- Enriched population: 342 cancers, 805 benign cases (1,147 cases in total)
- Objectives:
 - 1. Assess device's standalone performance in characterizing positive and negative patients
 - 2. Assess device's standalone performance in detecting and characterizing suspicious/malignant nodules

Ground truth Generation

- 2 + 1 truthers (regular truthers experienced radiologists + adjudicator truthers - senior radiologists), w/ all clinical data
- Assess lesions' location, segmentation, type, malignancy / benign status to establish "ground truth"

eyonis™ LCS SaMD image analysis

- End-to-end analysis by AI/ML tech based SaMD CADe/x
- Detection, localization, segmentation & malignancy score
- Generate a statistical report

Statistical Analysis

Comparison of truthers ground truth VS. eyonis™ LCS SaMD output: "How good is eyonis™ LCS"

Primary Endpoint:

AUROC that measures eyonis™ LCS performance on patient level data > 0.8

REALITY Study Results: Primary and Secondary Endpoints Met Median



High performance for detection and characterization of cancerous nodules in challenging population (i.e., highly enriched population)

ROC Curve for primary endpoint Area Under the Curve = 0.9035 1.00 -0.75 -Sensitivity 0.50 -0.25 -0.00 -

Study population: highly enriched population

- 1,147 US and EU patients
- 343 Cancers / 805 Benign
- **Primary endpoint met with excellent AUC**

AUC = 0.9035 [0.881-0.926], p value < 0.001

	Sensitivity	Specificity
Cancer/non-cancer Characterization (Max Youden Index)	80.1%	86.6%
Suspicious nodules detection (Display Threshold)	97.7%	51.2%

All secondary endpoints met with statistical significance (10 secondary endpoints)

0.50

1 - Specificity

0.75

1.00

0.25

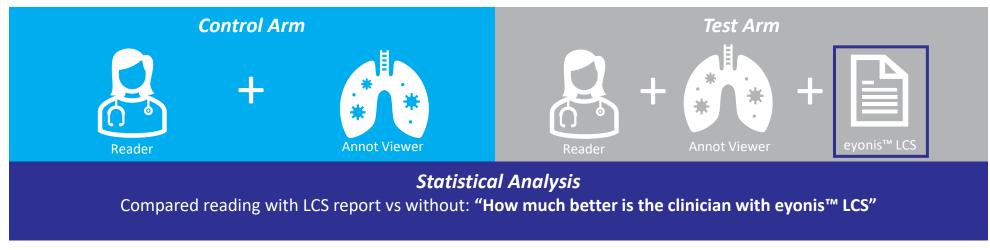
0.00

eyonis™ LCS Pivotal RELIVE Trial (MRMC Trial)



ClinicalTrials.gov Identifier: NCT06751576

- 480 patients (160 cancers, 320 benign cases) and 16 readers
- Enriched cohort with a 1:2 distribution of cancer positive and cancer negative patients
- Paired-split-plot design
- Objective: Demonstrate that eyonis™ LCS improves clinician performance in analyzing LDCT lung screening scans, reducing FPs and unneeded follow-up procedures



Primary Endpoint

Difference between with & without Median LCS in AUROC values that measures the modality performances on patient level data. Superiority with LCS report vs without to be achieved.

RELIVE Clinical Trial Results: Primary and Key Secondary Endpoints Met

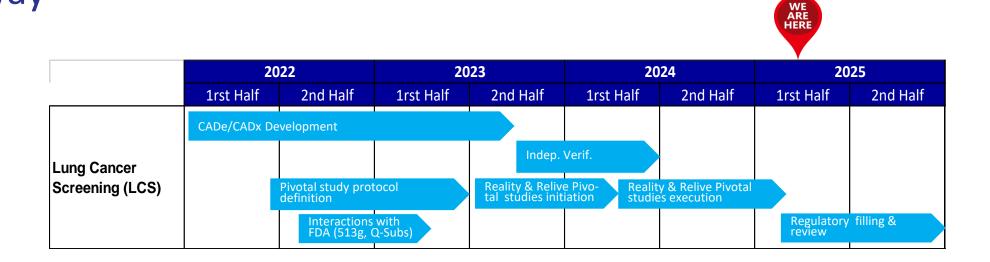
eyonis™ LCS successfully completed its clinical validation

- Primary endpoint: Difference between with & without eyonis™ LCS in AUROC values that measures the modality performances on patient level data. Superiority with LCS report vs without to be achieved.
- Topline results announced on Feb. 3, 2025: eyonis™ LCS met its primary endpoint with statistical significance (p value<0.027) in RELIVE study.
- Final results announced on March 31, 2025: eyonis™ LCS confirmed efficacy and safety in RELIVE pivotal study. All secondary endpoints required to support eyonis™ LCS intended use and desired marketing claims were achieved.



Upcoming Key Milestones for eyonis™ LCS Regulatory Pathway



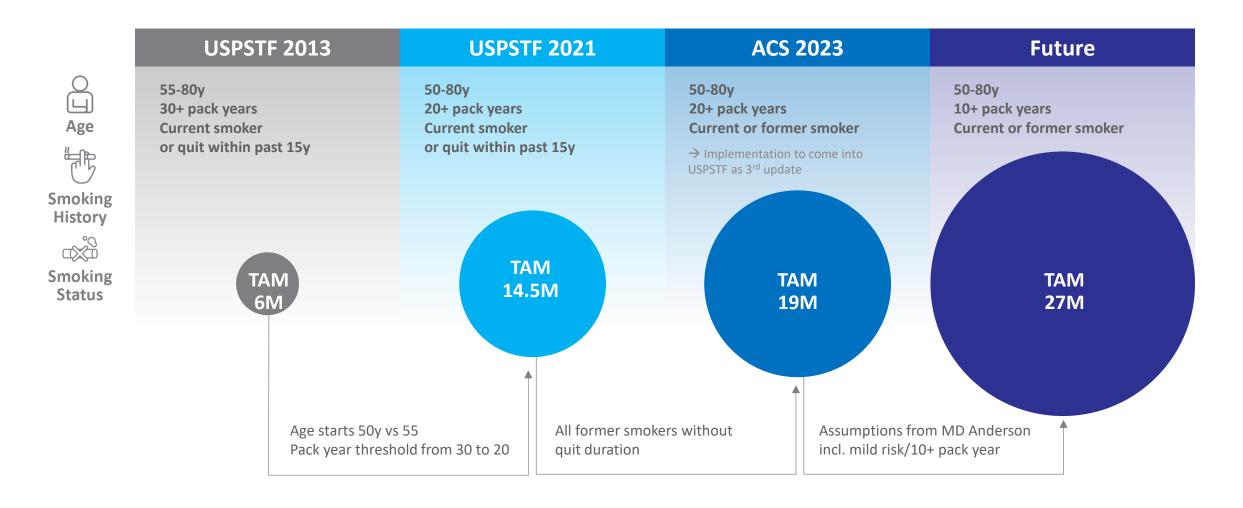


eyonis™ LCS filings - FDA 510(k)	May 2025
eyonis™ LCS filings – CE marking	June 2025
Expected FDA clearance assuming normal review time	Q3 2025
Expected Commercial Launch in the US	Q4 2025
Expected CE marking assuming normal review time	Q1 2026

USA TAM Evolution Horizon

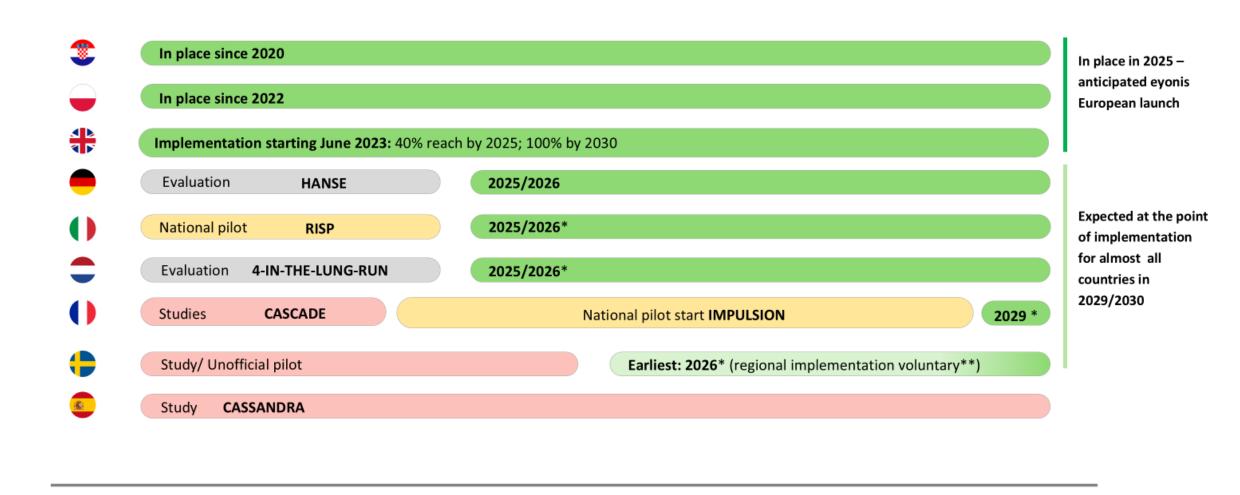


Lung cancer screening program in place - evolving LCS guidelines will broaden Total Addressable Market



LCS Status in Europe: Croatia, Poland & UK Have Programs





^{*} Estimated, not based on any authority communication

LCS: Lung cancer screening

^{**} Assumed implementation rule

Favorable US Pricing & Reimbursement Context



Existing CPT III codes for tissue characterization under CT - 0721T & 0722T CMS payment for 2 CPTIII codes assigned to New Tech APC 1508 - Level 8 (\$601 - \$700)

Total Medicare Hospital payment is LDCT \$107 + eyonis LCS \$650

Codes CPT code	CPT description	Existing LDCT images	Hospital Outpatient Payment
71271 APC 5522	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	LDCT	\$107
0721T APC 1508	Quantitative CT tissue characterization, including interpretation and report, obtained without concurrent CT examination of any structure contained in previously acquired diagnostic imaging Do not report 0721T in conjunction with 71271	YES	\$650
0722T APC 1508	0721T but with concurrent CT examination is code 0722T Use 0722T in conjunction with 71271	NO	\$650 + \$107

These two procedures provide an LDCT and tissue characterization & are billed on separate days

The tissue characterization is "added-on" to the LDCT & are billed on the same day

CMS CY 2023 Medicare Hospital Outpatient Prospective Payment System and Ambulatory Surgical Center Payment System Final Rule

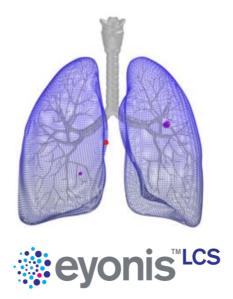
2025 Key Milestones for eyonis™ LCS Launch Strategy



- Continued engagement with US KOLs pulmonologists & radiologists and initiate device trial use under research agreements
- 2 Engage payers with HEO-M for reimbursement discussions
- 3 Launch Health Economics studies to support reimbursement
- 4 Implement US commercial organization
- 5 Reach-out to distribution partners

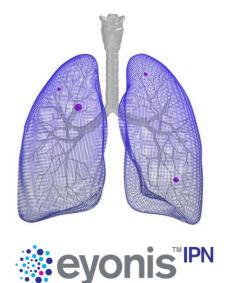
Median's eyonis™ Suite: Pan Cancer Early Diagnostics Test



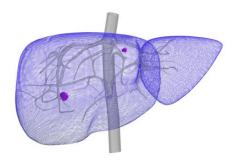


Filings: Q2 2025

Market Launch: Q4 2025



Nodules
Ongoing development





Hepatocellular Carcinoma
Ongoing development

Portfolio expansion:

- Pancreatic cancer
- Prostate cancer

iCRO Imaging AI is revolutionizing drug development

Q + D D 1 5)

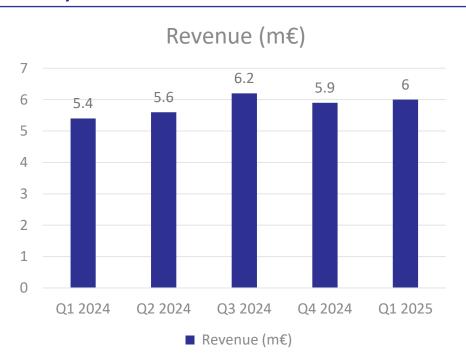
With our **central imaging services**, we provide our global biopharma customers with key data on patient response from phases I to III oncology studies.

Our **Imaging Lab services** drive oncology drug development success with transformative AI insights.

iCRO Business Q1 2025: Growth Trend with Sustained Order Backlog



Quarterly business evolution





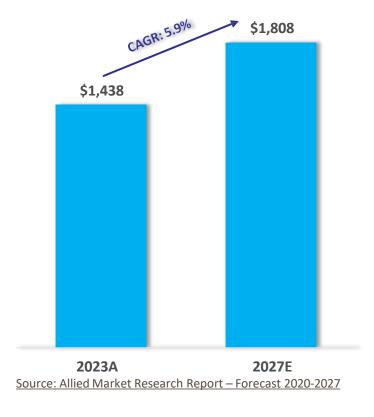
Q1 2025 financial information (unaudited, as of March 31, 2025)

- Order backlog at €74.8 million, the Company's highest backlog ever.
- Q1 2025 revenue at €6.0 million, one of the highest quarters.

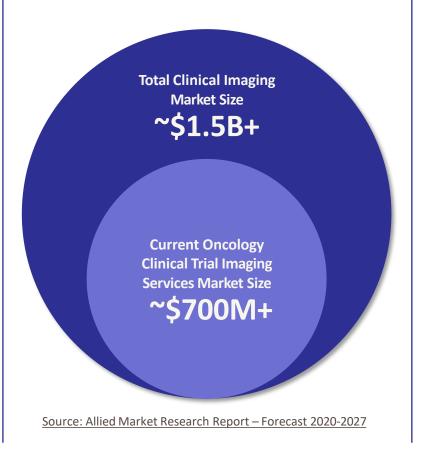
iCRO Addresses Large Market with Long-Term Durable Growth Median



Projected Clinical Trial Imaging Services TAM Over Time (\$ in million)



Long Term Market Opportunity



Opportunities

- Median is the only tech driven imaging CRO.
- Fragmented market.
- Continued innovation in Drug Development will drive future growth.
- Advanced AI/ML will unlock new insights.

iCRO: Central Imaging Services for Oncology Trials



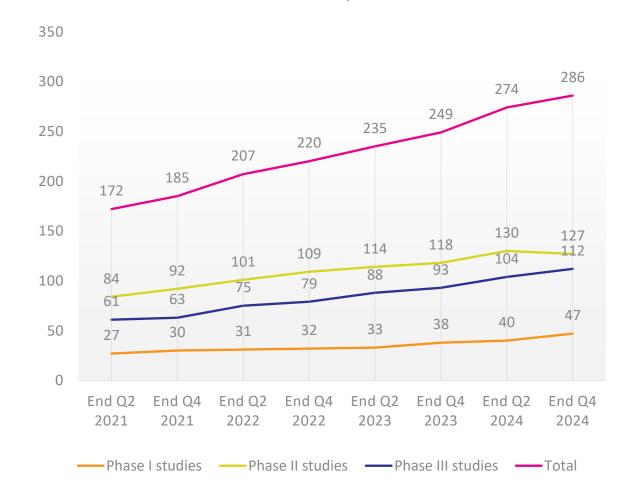
- Global footprint: USA, Europe, Asia
- 4K+ site network
- 80+ biopharmaceutical clients worldwide
- Preferred imaging services provider to 2 of the Top 3 pharma in Oncology globally
- 6 successful FDA inspections, 25 successful Chinese NMPA inspections
- Early 2025: on site successful FDA inspection in China



As of March 31, 2025

Cumulative contracted and less than 12-month awarded studies, since the beginning of the iCRO activity, and until March 31, 2025

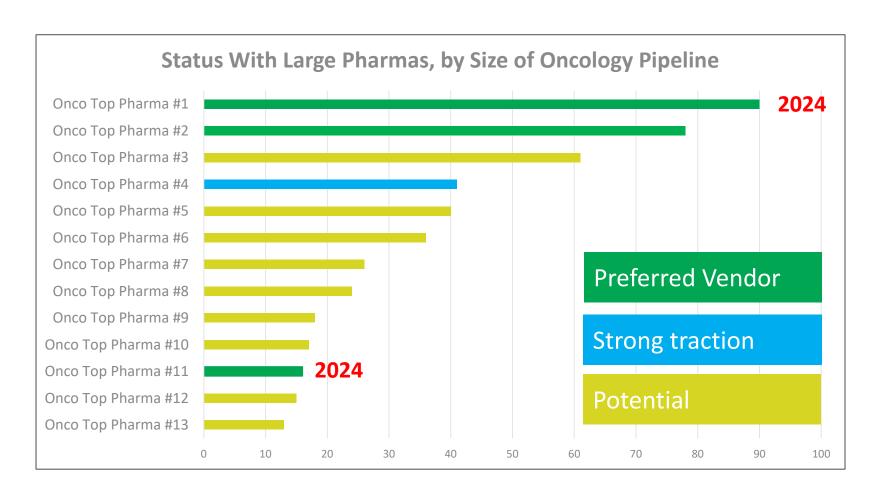
Evolution of oncology studies managed by Median vs phases



Current and Planned Engagement with EU/US Top Pharma



Very Successful Win Rate with Top Pharma providing recurrent revenues In 2024, we were exposed to only 240 RFP's vs ~ 2,400 issued



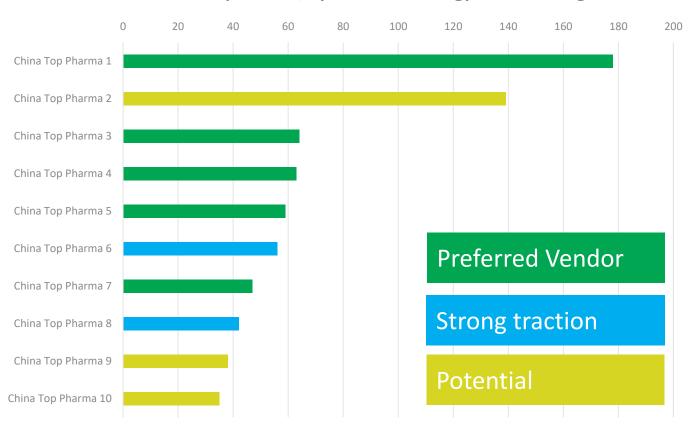


Current and Planned Engagement with APAC Top Pharma



Very well positioned among the Top Pharma in China

Status with China Top Pharma, by Size of # Oncology Trials Running



1st Deal with a Top Pharma in South Korea

> 1st Deal with a Pharma in Japan 2024

Al in Clinical Trials Market to Surge to \$6.55 Billion by 2030

M median

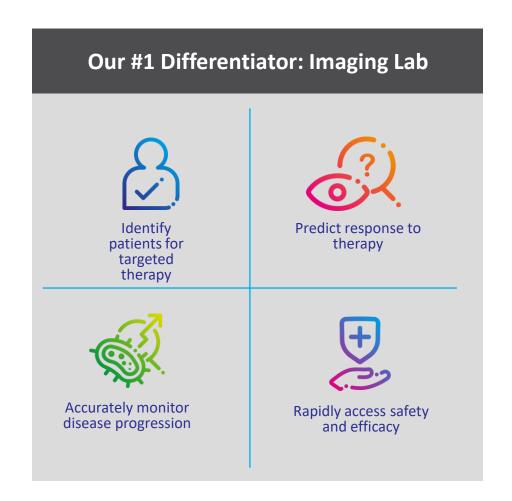
Median's Imaging Lab Provides Al-driven Insights

AI in clinical trials offers unprecedented efficiency, accuracy, and innovation.

The AI in Clinical Trials Market was \$1.59 Bn in 2023 and projected to reach \$6.55 Bn in 2030.

The market continues to witness remarkable growth, driven by the need to develop better, faster and cheaper drugs to market.

Source: MarketDigit



A 3-pillar iCRO Growth Acceleration Strategy Leveraging the Transformative Power of Imaging AI for Drug Development



1

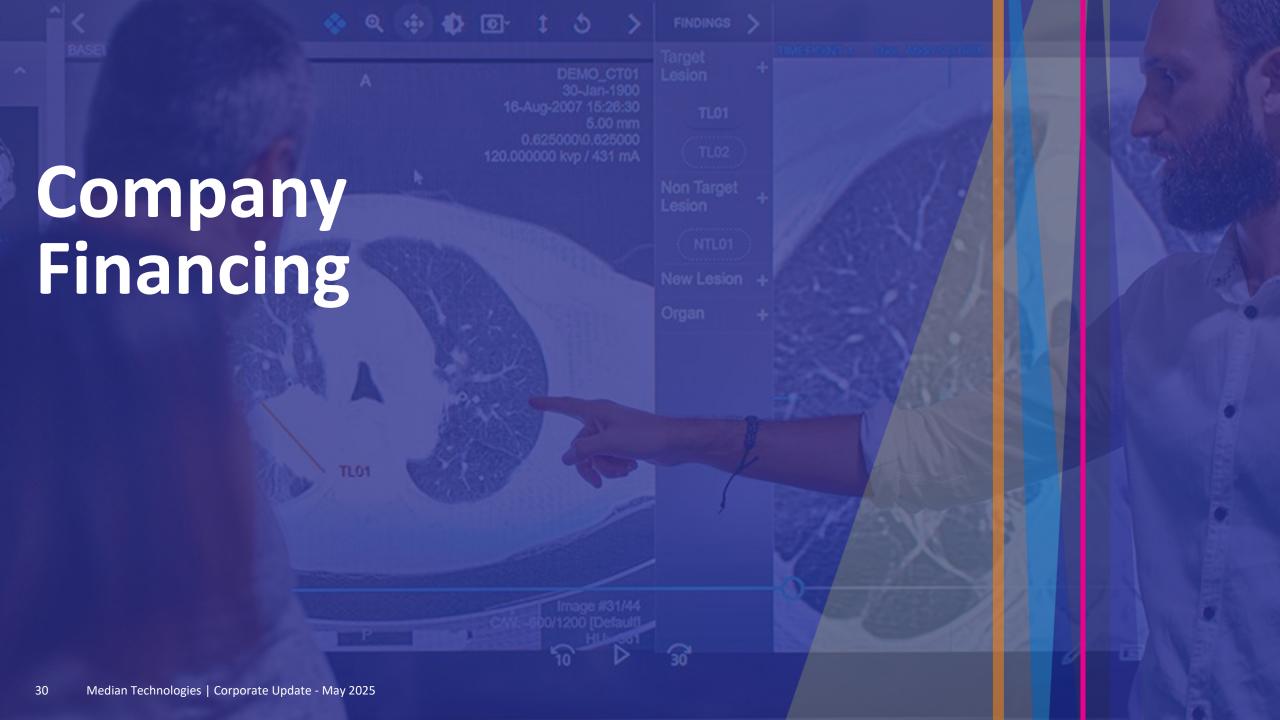
Establish imaging Aldrug development collaborations with pharma groups

2

Be selected as preferred imaging services provider for big pharma groups

3

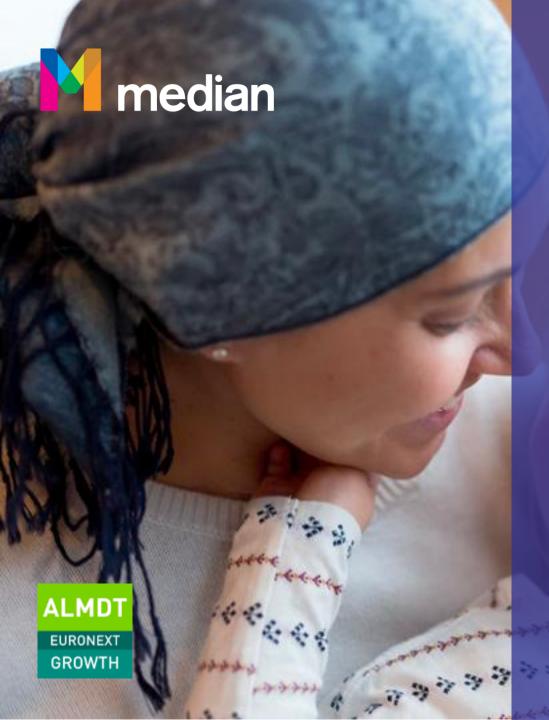
Partner with global and regional CROs



Q1 2025 Achievements



- Operational improvements and organizational changes have led to a significant decrease in the Company's monthly cash burn
- On January 24, 2025: drawdown of €4 million as part of a refinancing bridge (Iris equity line)
- On March 20, 2025: formal approval of maturity extension for the 2020 European Investment Bank (EIB) financing facility (€20 million), reimbursement rescheduled from April to October 2025
- Ongoing final discussions for a new EIB financing facility for €37.5 million



Our Core Values

Leading innovation with purpose

Combine the spirit of innovation with our passion and conviction to help cure cancer and other debilitating diseases.

Committing to quality in all we do

Be dedicated to quality in everything we do. Quality begins with us and we are committed to it.

Supporting our customers in achieving their goals

Listen to the needs of our customers and help make their goals our goals through our innovation, imaging expertise, superior services, and quality solutions.

Putting the patient first

There is a person at the other end of the images we analyze who is counting on us to do everything we can to help make them healthier.

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