

## Slide #1



**M I V**  
THERAPEUTICS

Inspired by Nature

OTC/BB: MIVT Frankfurt: MIV

June 2008




1

## Slide #2

## Safe Harbor Statement

Except for the historical information contained herein, the matters discussed in this presentation are forward-looking statements. Such statements are indicated by words or phrases such as "believe," "will," "breakthrough," "significant," "indicated," "feel," "revolutionary," "should," "ideal," "extremely" and "excited." These statements are made under "Safe Harbor" provisions of the Private Securities Litigation Reform Act of 1995. Actual results may differ materially from those described in forward-looking statements and are subject to risks and uncertainties. See the Company's filings with the Securities and Exchange Commission including, without limitation, the Company's recent Form 10-K and Form 10-Qs, which identify specific factors that may cause actual results or events to differ materially from those described in the forward-looking statements



2

## Slide #3

## Investment Highlights

- Developed a revolutionary technology for a large and dynamic market
  - The 2008 worldwide stent market is projected to be \$5.8 billion (+7% Y/Y)
  - MIV DES address every drawback of the current and next generation DES
  - DES market is beginning to rebound off 2007 lows
- Excellent human data and significant near-term milestones
  - Positive 9-month VESTASYNC I FIM data presented at ACC 2008
  - Numerous clinical trials to be initiated in 2008: VESTASYNC II/III/IV, VESTA-FIM
- Large IP portfolio and strong support from key opinion leaders
  - IP portfolio covers all aspects of the product not just technology
  - Drs. Abizaid, Bonan, Carrozza, Cohen, Kaluza, King, Leon, Moses, Mehran
- Demonstrated consistent achievement of established goals and milestones



3

## Slide #4

## MIV Is Focused On Jump Starting The Stent Market and Increasing DES Usage

- MIV DES promote early complete healing
  - No polymers
  - Low drug dose with targeted encapsulated delivery
  - Drug delivery coating made from naturally occurring substances
- MIV DES require short-term anti-platelet therapy
  - Early complete healing as shown in VESTASYNC I
- MIV DES can access lesions other DES cannot reach
  - Ultra thin-strut stent with low profile
  - Highly flexible stent design
  - Extremely flexible coating



4

Slide #5

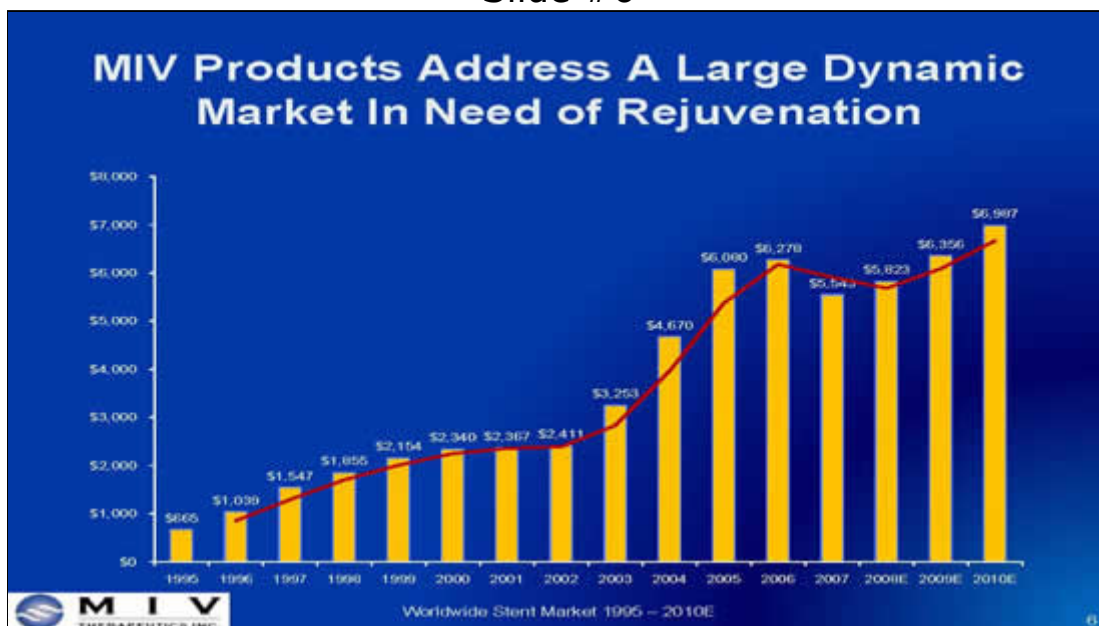
## Management and Advisory

- Management
  - Alan Lindsay: Chairman
  - Mark Landy: President & CEO
  - Patrick McGowan: CFO
  - Rajesh Vaishnav: CEO Biosync
  - Edward Snider: VP Finance
  - Anthony Huston: VP IR and BD
- Board of Directors
  - Alan Lindsay
  - Mark Landy
  - Patrick McGowan
- Scientific Advisory Board
  - Dr. Jeffery Moses
  - Dr. Joseph Carrozza
  - Dr. David Cohen
  - Dr. Spencer King
  - Dr. Greg Kaluza
- Clinical Advisory
  - Dr. Raoul Bonan
  - Dr. Martin Leon
  - Dr. Alexandre Abizaid
- Regulatory Advisory
  - Dr. Semih Oktay
  - Dr. Roxana Mehran



5

Slide #6




## Slide #7

## Current DES Are Out Of Favor

- "Anti-Platelet Hassle Factor"
  - Balance long-term anti-platelet therapy with future medical and dental requirements
- Increased stent thrombosis and revascularization rates
  - Delayed or incomplete healing
- Poor deliverability
  - Suboptimal profile and flexibility

Annual sales of drug-eluting stents have dropped by ~\$1.0 billion from \$5.4 billion in 2006

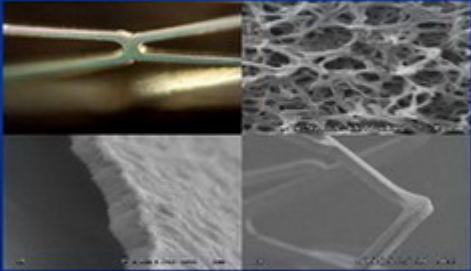


7

## Slide #8


## MIV DES Combine A Novel NanoPorous HAp Surface Modification With Lipid Drug Delivery Technologies And Release Drug In Capsules

The hydroxyapatite lattice provides the structural rigidity required to allow the use of lipid drug delivery technologies that deliver drug in capsules



The drug mixtures are loaded into the hydroxyapatite pores forming an ultra flexible drug delivery coating that is 0.6 microns thin and extremely durable

MIV DES do not require more time or resources to manufacture than current DES and have current DES-like margins





8

## Slide #9

## Drug Encapsulation Positively Impacts Safety And Drug Efficacy

- Improves the uptake of drug by local cells
- Targets the delivery of drug against specific cells
- Houses drug in a capsule protecting surrounding tissue
- Can amplify or suppress the different mechanisms of action of a single drug at different time points in the elution curve
- Provides a hydrophobic matrix to deliver hydrophilic drugs



9

## Slide #10

## A Massive Technology Advantage

Thin Struts  
No Polymers  
Low Drug Dose  
Complete Healing  
Competitive Efficacy  
Excellent Deliverability  
Short Anti-Platelet Therapy

A Drug Eluting Stent With The Safety Profile  
And Deliverability of A Bare Metal Stent



10

## Slide #11

## Three Core Technologies Covered By A Large IP Portfolio

1. Ultra thin-strut stent
2. HAp surface modification
3. Encapsulated drug delivery

Continually strengthening intellectual property position with technological advancements




11

## Slide #12

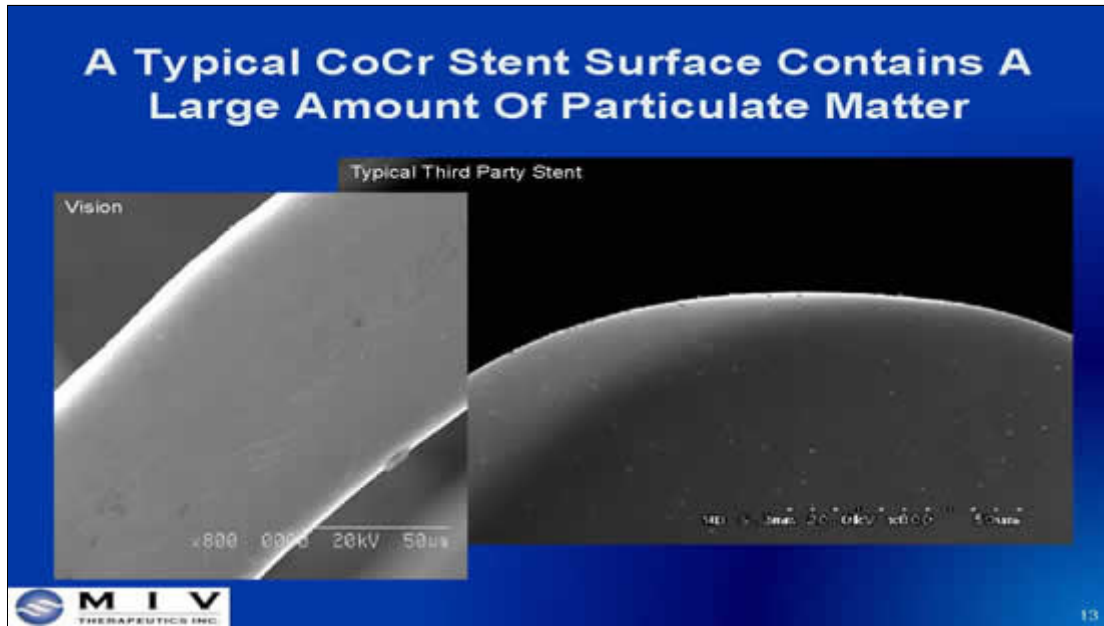
## Protea™ Design Characteristics

- Ultra thin struts and low delivery profile
- Highly flexible with excellent radial strength
- Achieves a uniform distribution of drug to tissue
- Pristine surface finish with little particulate matter



12

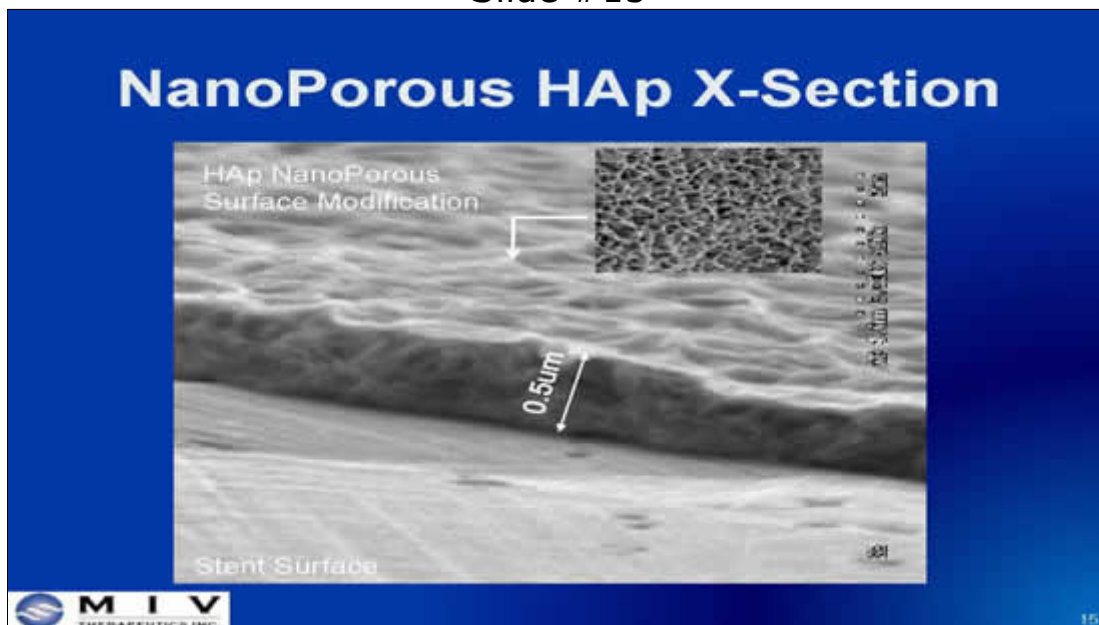
Slide #13



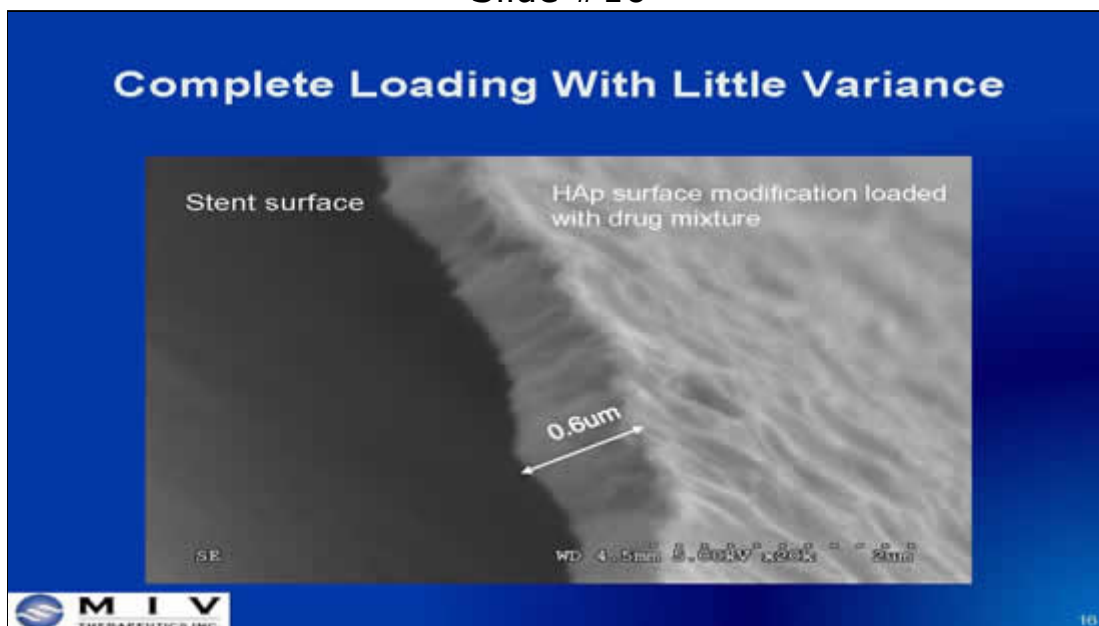
Slide #14



Slide #15

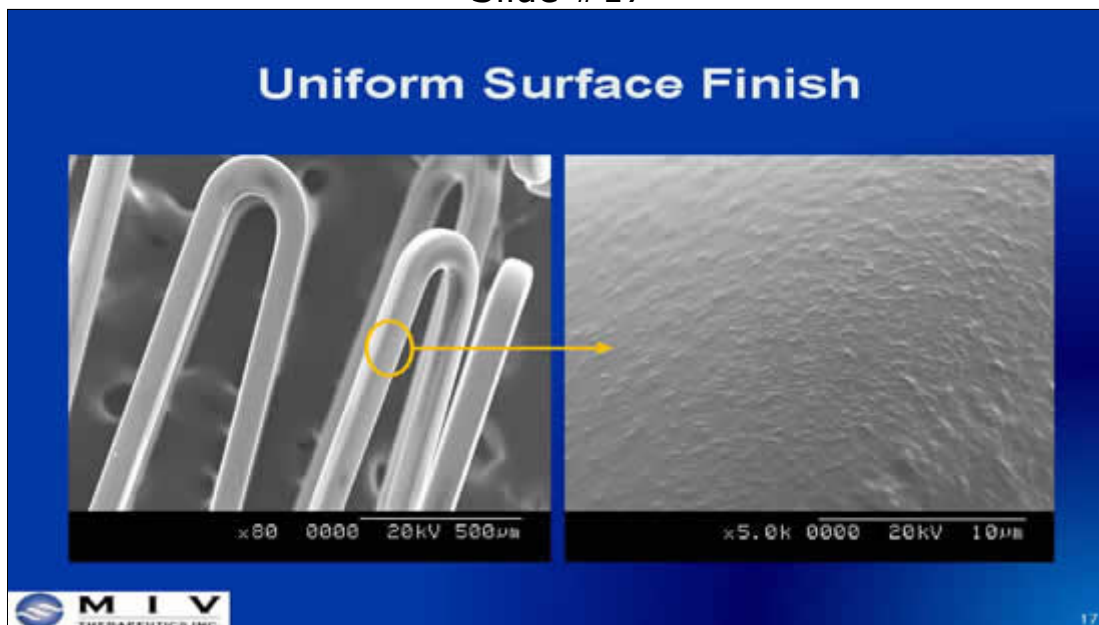


Slide #16

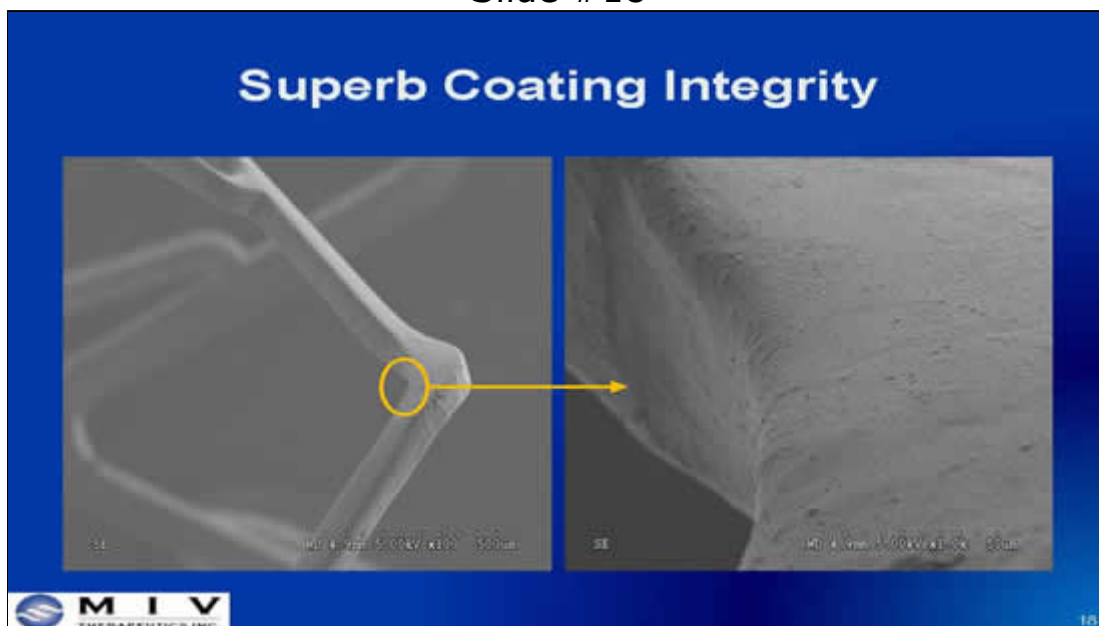




Slide #17







Slide #18



Slide #19

## 60% Less Drug Than Cypher® 25% Thinner Struts Than Xience™

Minimizing Strut and Polymer Thickness to reduce Injury and aid re-endothelialization


CYPHER®	TAXUS® Liberté	ENDEAVOR™	XIENCE™ V
			
<b>Strut Thickness:</b> 140 µm	<b>Strut Thickness:</b> 132 µm	<b>Strut Thickness:</b> 91 µm	<b>Strut Thickness:</b> 81 µm
<b>Polymer Thickness:</b> 13.7 µm	<b>Polymer Thickness:</b> 16.4 µm	<b>Polymer Thickness:</b> 4.8 µm	<b>Polymer Thickness:</b> 7.8 µm
PEVA+PBMA Sirolimus	SBBS Paclitaxol	PC ABT 578	Fluoropolymer Everolimus
154 µM	148 µM	96 µM	89 µM

Photos & data are for Abbott Vascular

\* VESTAync™ 57µg/19mm stent or 3.0µg/mm Vs. Cypher® 140µg/18mm stent or 7.8µg/mm

**VESTAync**


<b>BMS Strut Thickness</b>	85 µm
<b>Coating Thickness</b>	0.6 µm
<b>Coating Material</b>	HAp + Lipid
<b>Drug Dose</b>	57 µg Sirolimus™
<b>DES Strut Thickness</b>	< 66 µm
<b>Source</b>	MIV

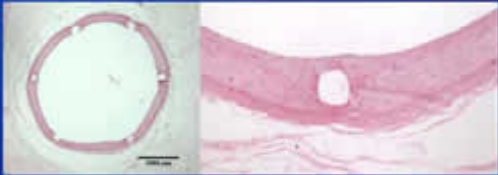

19

Slide #20

## Excellent Morphometric Data


VESTAync™			Cypher®		
Injury Score	S/A Ratio	NI Stent (µm)	Injury Score	S/A Ratio	NI Stent (µm)
0.3 ± 0.5	1.1 ± 0.1	236 ± 93	0.4 ± 0.5	1.1 ± 0.1	282 ± 102





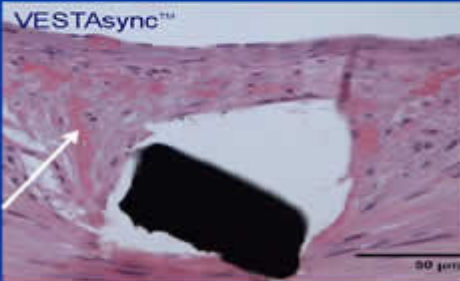
At 28 days the VESTAync™ showed good neointimal healing with complete strut coverage and little inflammation versus incomplete healing with uncovered struts and high levels of inflammation for the Cypher®

Source: van der Giessen EUROPCR 2007


20

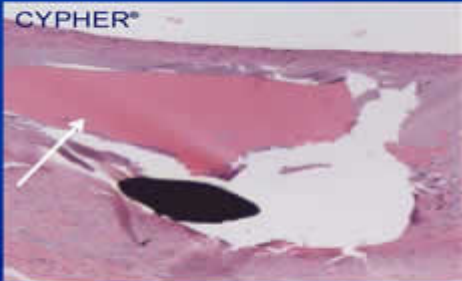
Slide #21

## 75% Less Fibrinoid Material



VESTAsync™


Minimal Fibrinoid (.03%)



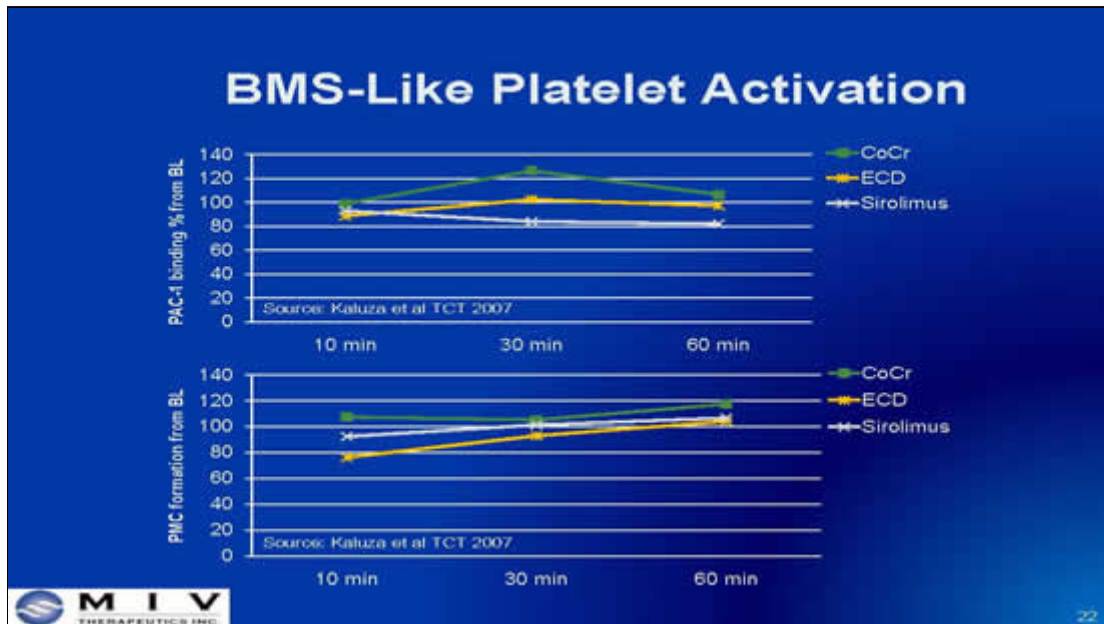
CYPHER®

Excessive Fibrinoid (.12%)

At 28 Days the VESTAsync™ exhibited a statistically significant ( $P < 0.05$ ) lower amount of fibrinoid material, a marker for delayed healing  
 Source: van der Giessen et al EUROPCR 2007

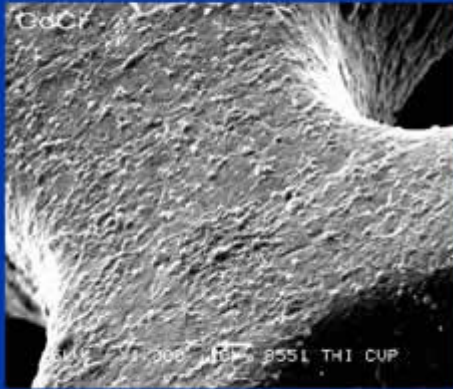

21

Slide #22



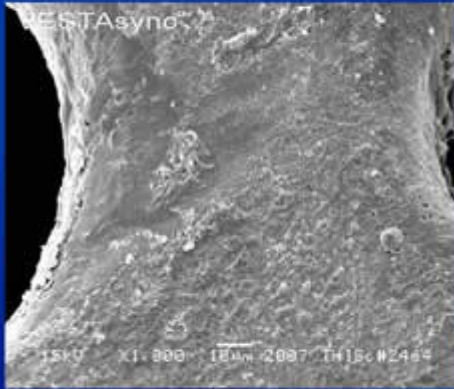
Slide #23

## BMS-Like Protein Deposition



GdCr

15KV X1,000 18um 2007 TH156 #2449



VESTAsync

15KV X1,000 18um 2007 TH156 #2449

**M I V**  
THERAPEUTICS INC.

23

Slide #24

## Positive VESTASYNC I Study

Single De novo lesions in native coronary arteries of 15 Patients  
 Stent diameters : 3.0 and 3.5mm  
 Lesion length: ≤ 14mm  
 Stent length: 19mm  
 PI: Alexandre Abizaïd MD, PhD

**Clinical follow-up**

1 m    4 m    6 m    9 m    12 m    24m

**QCA / IVUS follow-up**

Primary Endpoint

Secondary Endpoints

**Single Center:**  
Brazil (Instituto Dante Pazzanese)

In-stent lumen loss at four-month follow-up by QCA

MACE up to 24 months  
 Acute success  
 TLR and TVR up to 24 months  
 In-stent and in-segment NIH volume at 4 months

**Dual anti-platelet therapy for 5 months**


**M I V**  
THERAPEUTICS INC.

24

## Slide #25

## Typical Patient Demographics


Characteristics	N = 15 Patients
Mean age, years	63,8
Female gender, n(%)	6 (40%)
Hypertension, n(%)	9 (60%)
Dislipidemia, n(%)	7 (47%)
Diabetes, n(%)	5 (33%)
Smoking, n(%)	7 (47%)
Family history of CAD, n(%)	6 (40%)
Previous MI, n(%)	7 (47%)
Previous CABG, n(%)	2 (13%)
Stable angina n(%)	15 (100%)

 25

## Slide #26

## 100% Procedure Success

Variable	Lesions (n = 15)
Pre-dilatation, n(%)	15 (100%)
Post-dilatation, n(%)	7 (47%)
Number of stents per lesion	1
Stent mean length, mm	19 mm
Mean final deployment pressure, ATM	12,4 atm
Acute/subacute stent thrombosis, n(%)	0
Angiographic success, n(%)	15 (100%)
Procedure success, n(%)	15 (100%)

 26

Slide #27

### The VESTASYNC-I FIM Study Met Its Primary Safety And Efficacy Endpoints. Matched QCA Analysis Of 12 pts At 4 And 9 Months Showed No Increase In LLL (P=0.9)

Variable (n=15)	In-Stent 4-Month	In-Segment 4-Month
MLD, mm	2.34 ± 0.36	2.02 ± 0.37
% Diameter stenosis	13.8 ± 7.0	23.6 ± 8.8
Late lumen loss, mm	0.30 ± 0.25	0.16 ± 0.29
Restenosis*, % (n)	0.0 (0)	0.0 (0)

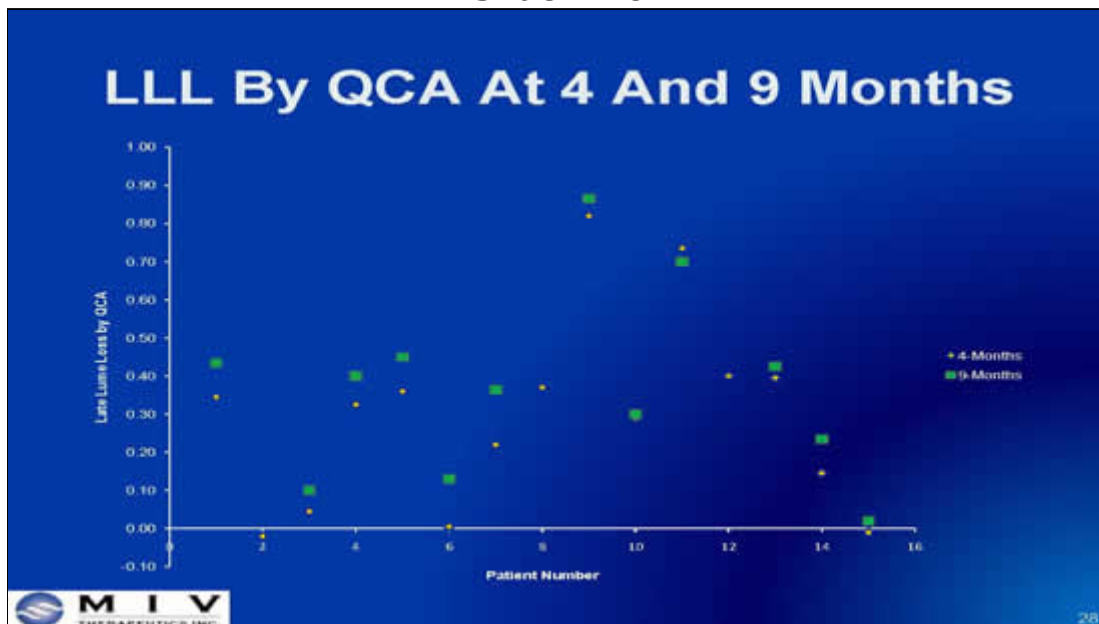
  

Variable (n=12**)	In-Stent 4-Month	In-Segment 4-Month	In-Stent 9-Month	In-Segment 9-Month
MLD, mm	2.33 ± 0.34	2.05 ± 0.37	2.27 ± 0.33	2.02 ± 0.29
% Diameter stenosis	±	±	15.9 ± 8.2	23.6 ± 9.5
Late lumen loss, mm	0.31 ± 0.26	0.17 ± 0.32	0.37 ± 0.24	0.20 ± 0.31
Restenosis*, % (n)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)

\* Defined as diameter stenosis ≥ 50% at angiographic follow up  
 \*\* 3 patients refused 9-month follow up  
 Abizaid et al ACC 2008

27

Slide #28



Slide #29


### Matched IVUS Analysis Of 11 Patients At 4 And 9 Months Showed No Increase In NIH Volume Or Percentage Obstruction (P=0.8)

Variable	Baseline n=14*	4-Month n=14*
Vessel Volume (mm <sup>3</sup> )	276.7 ± 117.1	276.6 ± 84.8
Stent Volume (mm <sup>3</sup> )	145.7 ± 14	142 ± 0.5
Lumen Volume (mm <sup>3</sup> )	145.8 ± 47.5	138.8 ± 33.5
NIH Volume (mm <sup>3</sup> )	N/A	<b>3.9 ± 3.3</b>
Mallapposition Volume (mm <sup>3</sup> )	0.15 ± 0.5	0.09 ± 0.3
% Stent Obstruction	N/A	<b>2.6 ± 2.22</b>

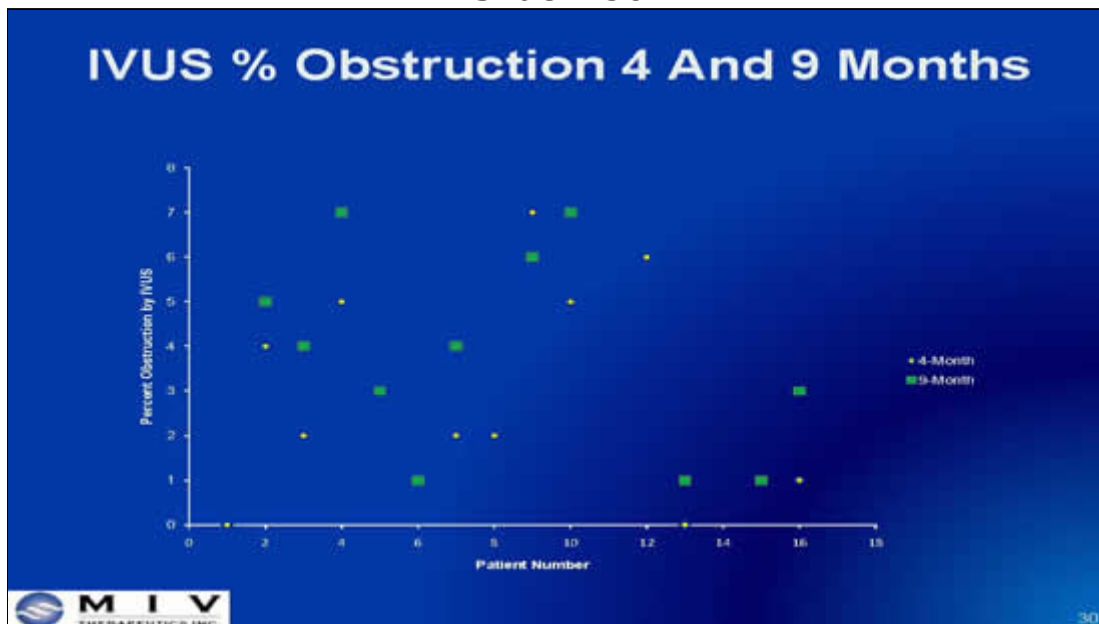
  

Variable	4-Month N= 11 P*	9-Month N= 11 P*
Vessel Volume (mm <sup>3</sup> )	286.9 ± 87.4	296.8 ± 85.6
Stent Volume (mm <sup>3</sup> )	140.5 ± 36.7	143.1 ± 41.4
Lumen Volume (mm <sup>3</sup> )	136.3 ± 34.2	136.8 ± 38.2
NIH Volume (mm <sup>3</sup> )**	<b>4.3 ± 3.5</b>	<b>6.1 ± 4.9</b>
Mallapposition Volume (mm <sup>3</sup> )	0.14 ± 0.34	0.13 ± 0.36
% Stent Obstruction**	<b>2.8 ± 2.2</b>	<b>3.8 ± 2.3</b>

\* IVUS console malfunction has prevented retrieval of data for patient #14  
\*\* 3 patients refused 9-month follow up  
Atizaid et al ACC 2006


29


Slide #30



## Slide #31

## No Major Cardiac Events No Plavix For 8 Months


Variable	Patients (n=15)
<b>In-hospital</b>	
Death, n(%)	0
MI, n(%)	0
TLR, n(%)	0
Stent thrombosis, n(%)	0
<b>4-month follow-up</b>	
Death, n(%)	0
MI, n(%)	0
TLR, n(%)	0
TVR, n (%)	0
Stent thrombosis, n(%)	0
<b>9-month follow-up</b>	
Death, n(%)	0
MI, n(%)	0
TLR, n(%)	0
TVR, n (%)	0
Stent thrombosis, n(%)	0

 31

## Slide #32

## Robust Clinical Trial Pipeline

	VESTASYNC II	VESTASYNC III / VESTA-FIM	VESTASYNC IV
Product	VESTAsync™	VESTAsync™/ VESTAcor™	VESTAsync™
Start Date	May 2008	June /June 2008	July 2008
Clinical Investigator	Abizaid	TBD/Serruys	TBD
Location	Brazil	India /Rotterdam	India
Number of Patients	120	30 /15	100
Follow-Up	9 Months	9 Months	9 Months

 32



## Slide #33

**Financial Data as of 2/29/08**

- Shares issued: 113 million
- Fully diluted: 175 million
- Diluted market cap: \$30 million
- Revenues\*: \$0.74 million
- Cash: \$3.31 million
- Monthly burn\*\*: \$0.55 million

\* Calendar 2007

\*\* Excluding capital expenditures and animal and human trials



33

## Slide #34

**Consistently Achieving Goals**

- ✓ 3Q07 Smith & Nephew collaboration
- ✓ 4Q07 Positive 4-month VESTASYNC I FIM data
- ✓ 4Q07 GenX Indian FDA approval
- ✓ 4Q07 Indian market launch
- ✓ 2Q08 9-month VESTASYNC I FIM follow up
- ✓ 2Q08 VESTASYNC II Pivotal CE Mark Trial
- 3Q08 VESTA-FIM and VESTASYNC III



34

## Slide #35

## Innovation Drives Valuation

- Differentiated approach and a strong patent position
- Strong proof of concept in animals and humans
- Opportunity to revolutionize DES therapy and significantly expand the stent market and usage

