



DEVELOPING TRANSFORMATIVE THERAPIES FOR RETINAL DISEASES

May 2022

NASDAQ: ISEE

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In this presentation, the Company's forward looking statements include statements about the hypotheses underlying, the results of and the implications of post-hoc analyses of the Company's GATHER1 clinical trial evaluating Zimura (avacincaptad pegol or ACP) for the treatment of geographic atrophy, and the potential utility of Zimura. Such forward-looking statements involve substantial risks and uncertainties that could cause the Company's research and development programs, future results, performance or achievements to differ significantly from those expressed or implied by the forward-looking statements. Such risks and uncertainties include, among others, the progress and results of clinical trials and other research and development programs, developments from the scientific and medical community and from the Company's competitors, and other factors discussed in the "Risk Factors" section contained in the quarterly and annual reports that the Company files with the Securities and Exchange Commission.

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Evaluation of GA Lesion Growth by Minimum Distance to the Fovea Center: POST HOC ANALYSIS OF THE GATHER1 TRIAL

Glenn J Jaffe, MD¹
Zane Zemborain, BS¹
Sina Farsiu, PhD¹
Dhaval Desai, PharmD²
Liansheng Zhu, PhD²

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¹Duke University. ²Iveric Bio.

Financial Disclosures

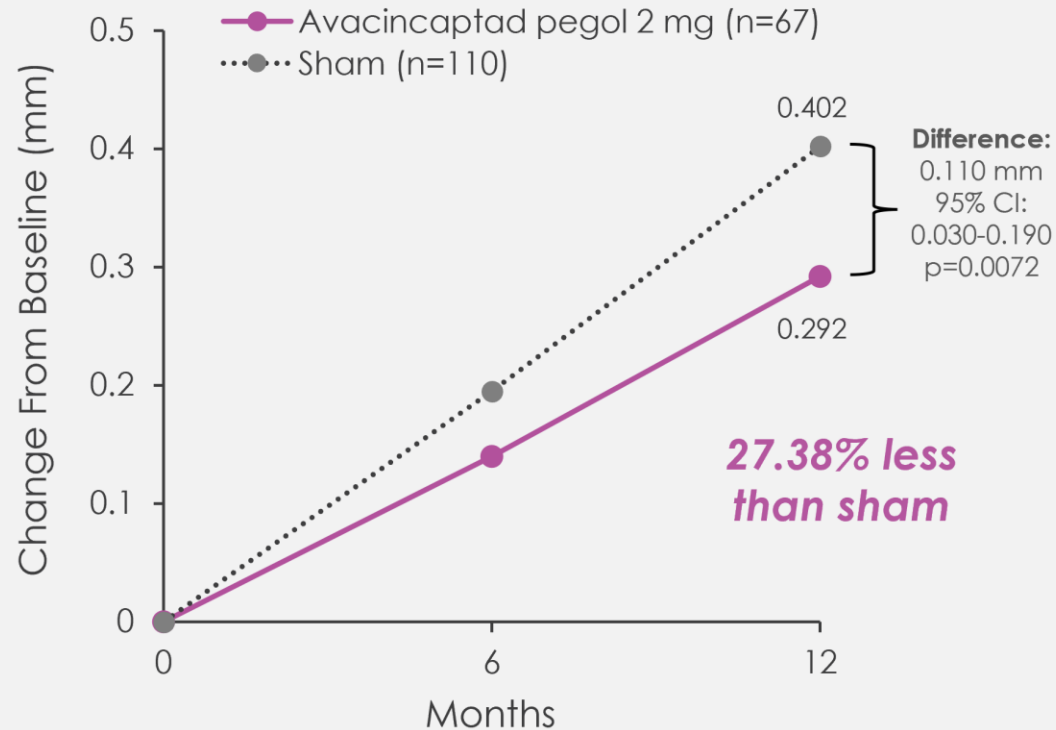
- Roche
- Iveric Bio
- Novartis
- EyePoint
- Annexon

GATHER1 Overview: Primary Endpoint at Month 12

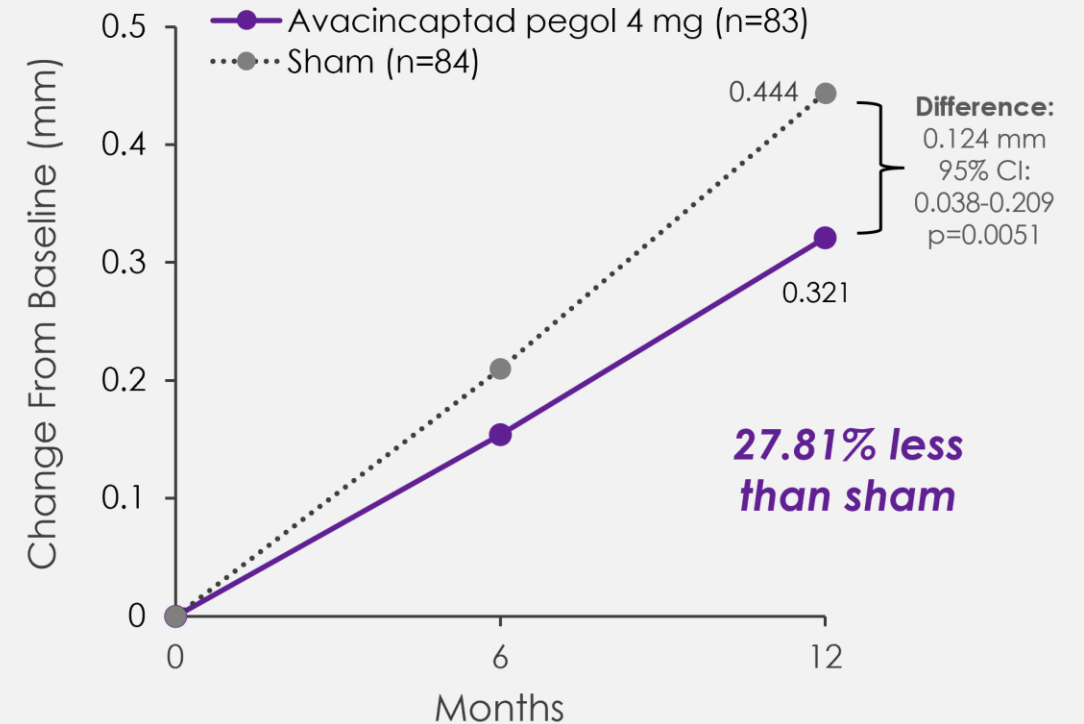
Prospective, randomized, double-masked, Phase 3 trial comparing ACP to sham in patients with GA

MEAN RATE OF GROWTH IN GA AREA AS MEASURED BY SQUARE ROOT TRANSFORMATION OVER 12 MONTHS

Avacincaptad pegol 2 mg vs sham

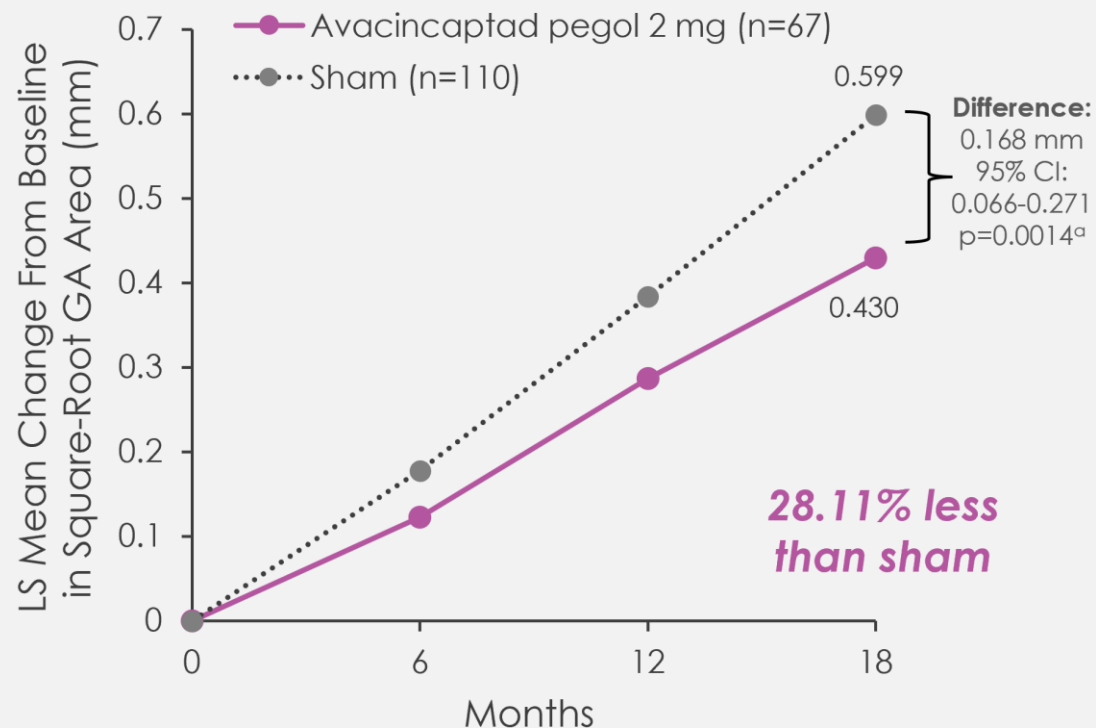


Avacincaptad pegol 4 mg vs sham

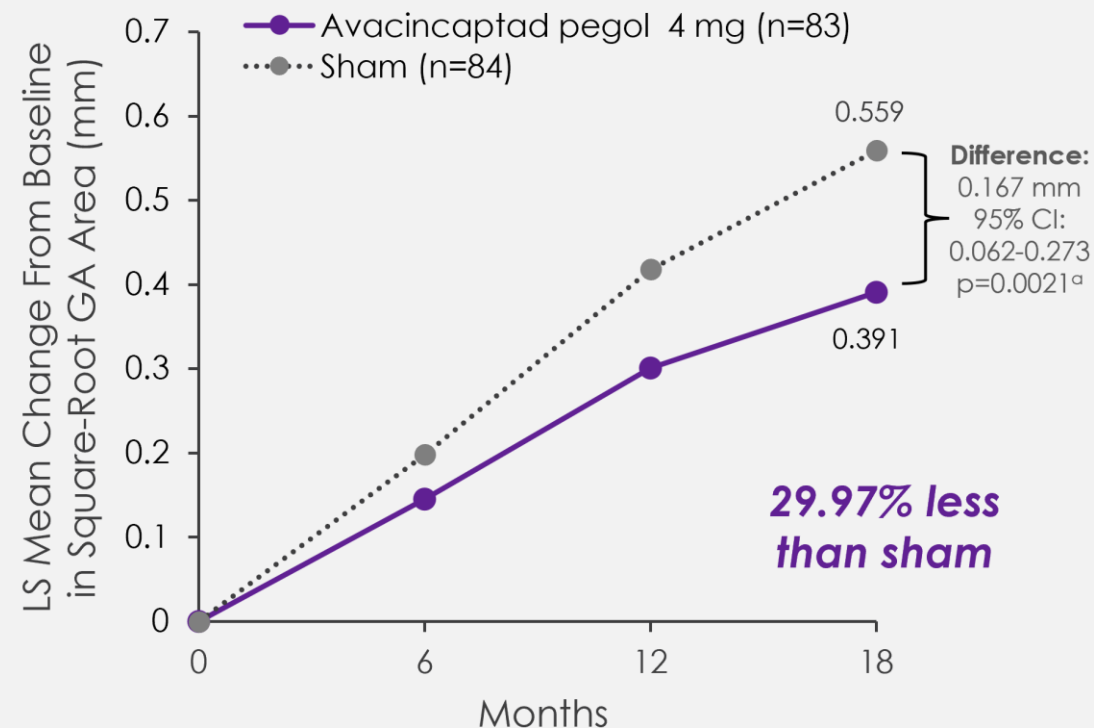


GATHER1 Overview: Analysis Through 18 Months

Avacincaptad pegol 2 mg vs sham



Avacincaptad pegol 4 mg vs sham

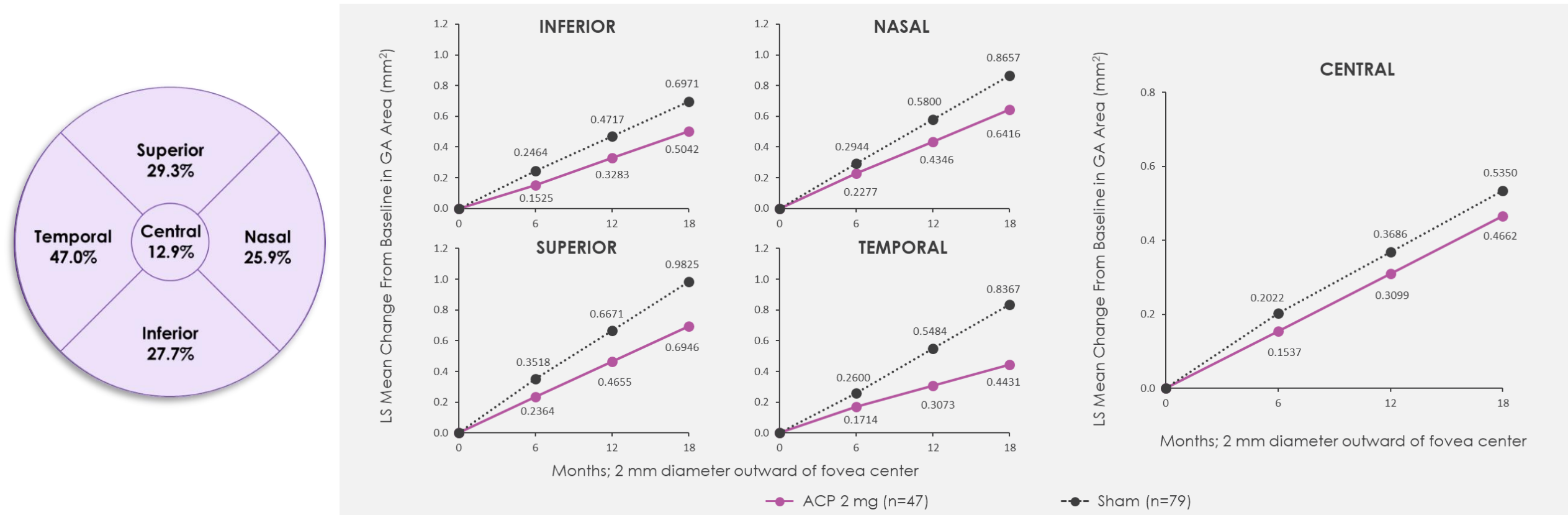


M18 results consistent with primary endpoint

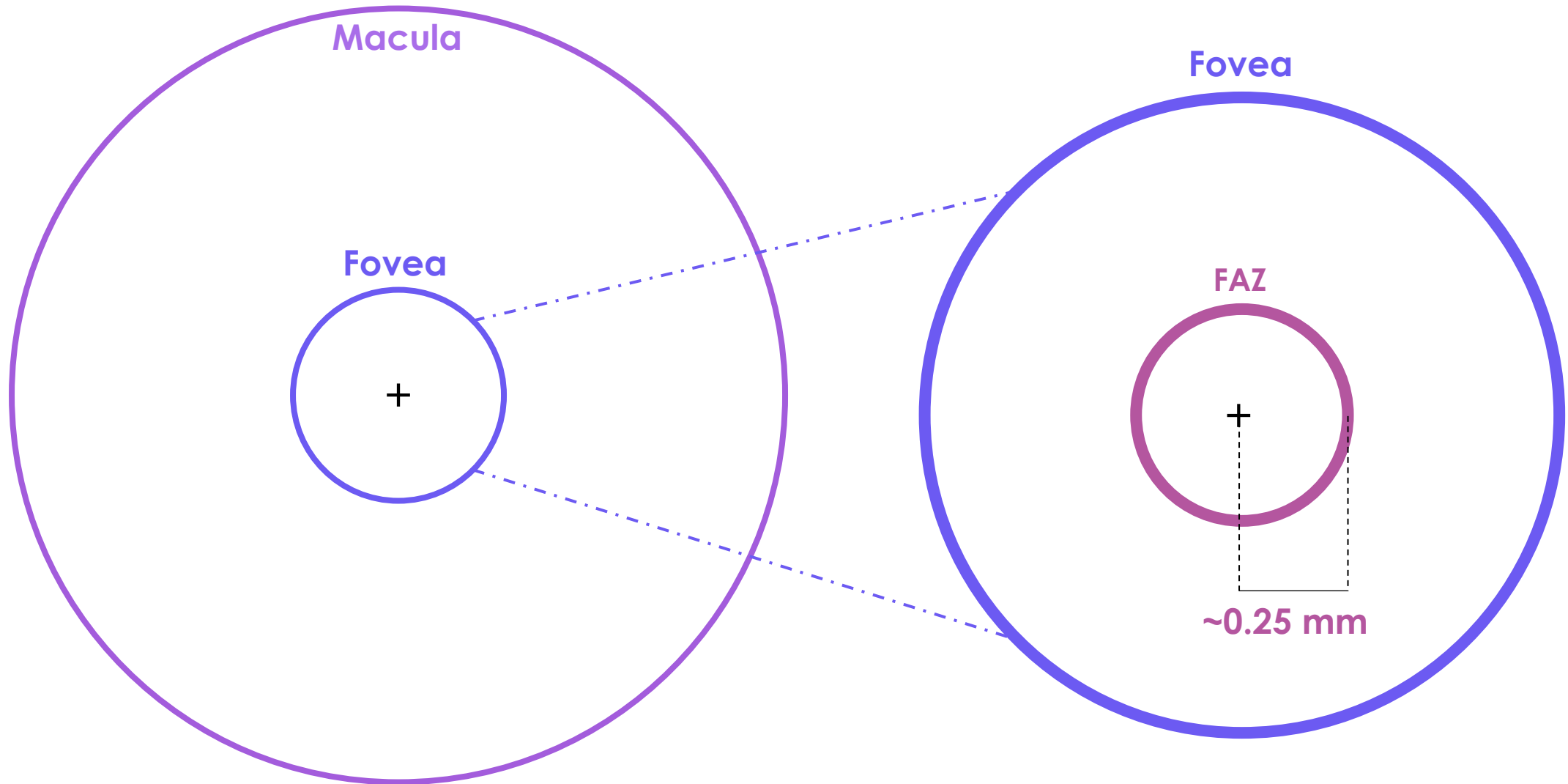
^a18-month P values are descriptive in nature.
Jaffe GJ, et al. *Ophthalmology*. 2021;128(4):576-586.

Previous Post Hoc Analysis: Macula Regions

Decrease in GA growth observed with ACP 2 mg vs sham at all locations and in line with natural history, non-transformed (mm²)



Evaluating GA Lesion Growth by Minimum Distance to the Fovea Center: Approximate Anatomical Correlates

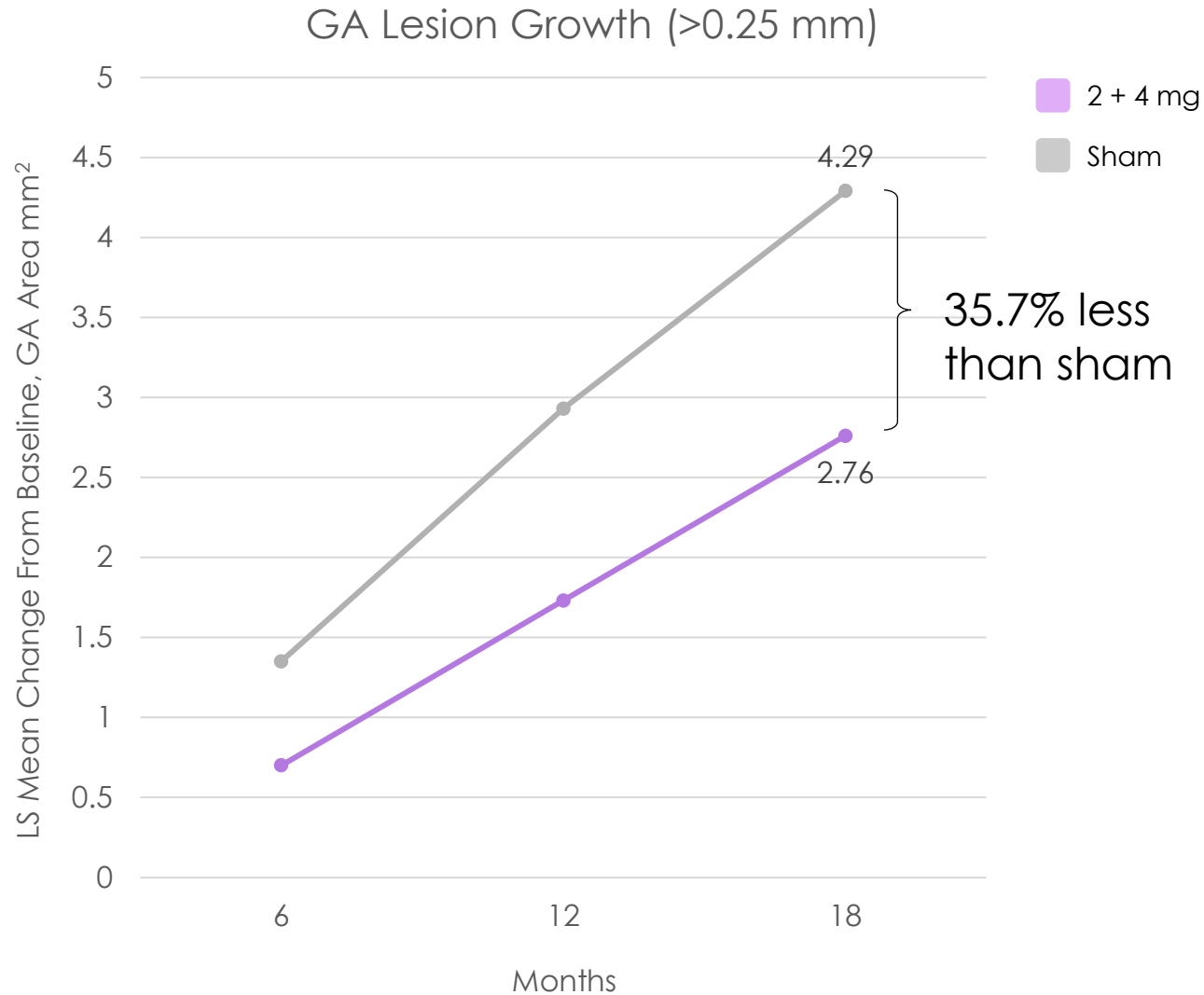


Fovea center distance-dependent effect on GA lesion growth

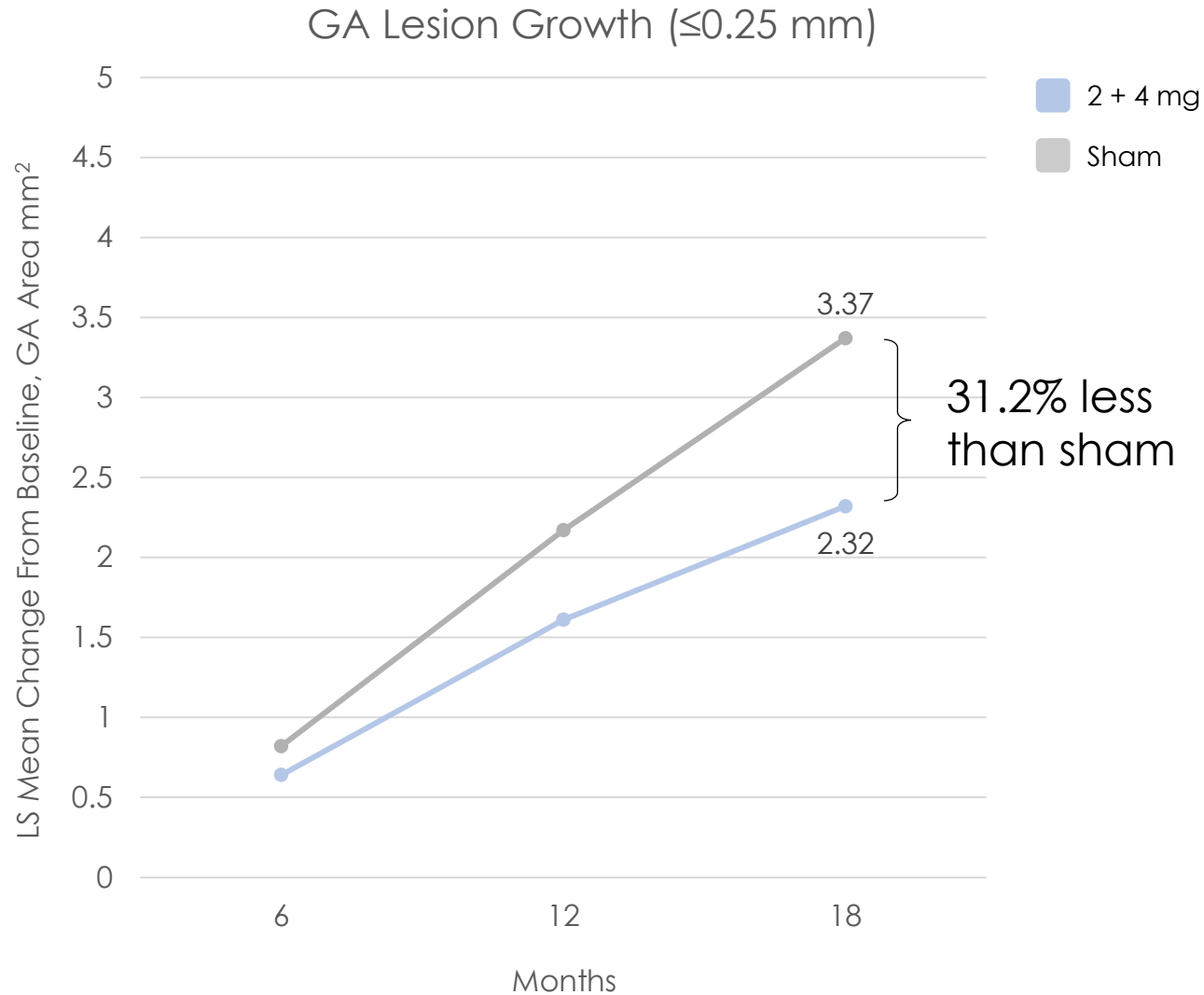
- Study eyes with Heidelberg FAF and OCT at selected visits
 - 47 ACP 2 mg eyes
 - 57 ACP 4 mg eyes
 - 79 sham eyes
- Minimum distance measured from the closest lesion edge to fovea center
 - Subgroup analysis: ≤ 0.25 mm or > 0.25 mm to fovea center (closest lesion edge inside or outside the FAZ)
 - Multivariate regression of GA lesion change on minimum distance to fovea center

Results

Decrease in GA Growth Observed With ACP vs Sham in Subgroups With GA Distance >0.25 mm to Fovea Center

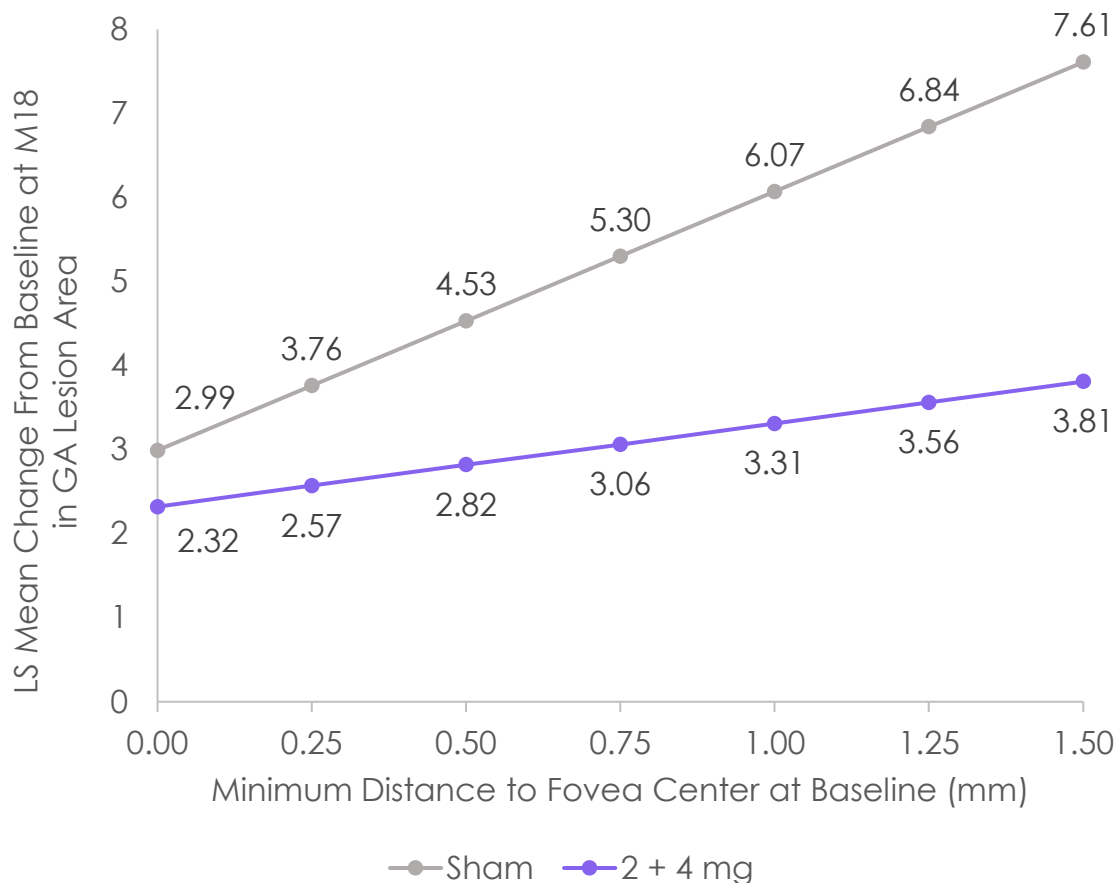


Decrease in GA Growth Observed With ACP vs Sham in Subgroups With GA Distance ≤ 0.25 mm to Fovea Center

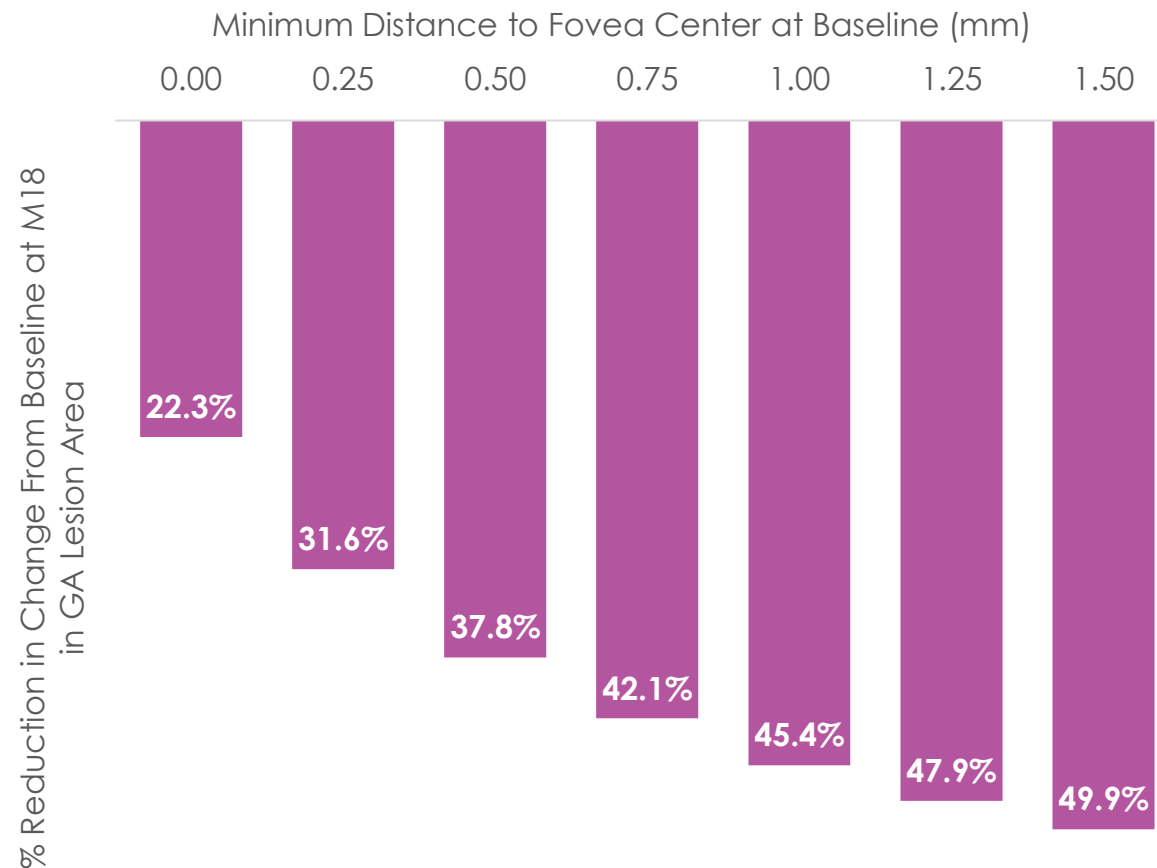


Greater Reduction in ACP vs Sham for Patients With Lesions Farther Away From Fovea Center Point, M18

Change From Baseline in Lesion Area (mm²)



% Reduction



- In this post hoc analysis, drug effect was observed regardless of distance from fovea
- Greater drug effect observed for distances further from fovea
- Findings are consistent with overall GATHER1 results and post hoc analysis of 5 standardized macula regions
- Results from these analyses suggest early treatment may have greater impact

THANK YOU!

GATHER1 INVESTIGATORS

DUKE READING CENTER TEAM

