



THE  
BLADDER CANCER  
COMPANY

## **SUO 2023 Meeting: New Real World Evidence shows Significant Decrease in Risk of Bladder Cancer Recurrence with Blue Light Cystoscopy**

**Press release – Oslo, Norway, December 1, 2023: Photocure ASA (OSE: PHO), The Bladder Cancer Company, announces that new evidence from routine clinical practice in the Veterans Affairs (VA) healthcare system was presented at the 24<sup>th</sup> Annual Society of Urologic Oncology (SUO) meeting demonstrating a significantly reduced risk of tumor recurrence (33%) in non-muscle invasive bladder cancer (NMIBC) patients who received Blue Light Cystoscopy (BLC<sup>®</sup>) compared to patients who only underwent standard White Light Cystoscopy (WLC).**

The abstract and Poster entitled “Comparing white light versus blue light cystoscopy recurrence outcomes among non-muscle invasive bladder cancer patients in an equal access setting: a propensity scored matched analysis” was presented on Thursday, November 30, by Sanjay Das, MD. The data presented stemmed from data in patients treated within the Veteran Affairs Healthcare System (VA HCS) that underwent BLC or WLC for NMIBC.\*

Methodology: a total of 337 BLC recipients were first identified and compared to 337 WLC recipients using 1:1 propensity score matching. The cohorts predominantly were high-grade patients (64%) treated with the current standard of care, including adequate BCG treatment when appropriate. The study used the Kaplan-Meier method to estimate event-free survival and Cox regression to determine the association between the type of cystoscopy (BLC vs. WLC) and recurrence.

The authors concluded that overall, the risk of recurrence was significantly lower following use of BLC (Hazard Ratio 0.67; p-value: 0.006) compared to WLC alone. Furthermore, there were no statistically significant changes in recurrence based on racial stratification, suggesting that the equal access nature of the VA provides best standard of care.

*“This multi-phased study shows Photocure’s commitment to support the evaluation of long-term clinical utility, cost effectiveness of BLC technology, and addressing disparities in the care of NMIBC using real world evidence (RWE). Going forward we expect further valuable insights through RWE analyses in collaboration with the Veterans Affairs Healthcare System”,* said Anders Neijber, Photocure’s Chief Medical Officer.

The data were presented at the Annual Meeting of the Society of Urologic Oncology (SUO) meeting held November 30 – December 2, 2023, in Washington DC, USA.

Read the abstract here:

<http://suo-abstracts.secure-platform.com/a/gallery/rounds/18/details/2898>

\*NMIBC: non-muscle-invasive bladder cancer

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### **About Bladder Cancer**

Bladder cancer ranks as the 8th most common cancer worldwide – the 5th most common in men – with 1 720 000 prevalent cases (5-year prevalence rate)<sup>1a</sup>, 573 000 new cases and more than 200 000 deaths in 2020.<sup>1b</sup>

Approx. 75% of all bladder cancer cases occur in men.<sup>1</sup> It has a high recurrence rate with up to 61% in year one and up to 78% over five years.<sup>2</sup> Bladder cancer has the highest lifetime treatment costs per patient of all cancers.<sup>3</sup>

Bladder cancer is a costly, potentially progressive disease for which patients have to undergo multiple cystoscopies due to the high risk of recurrence. There is an urgent need to improve both the diagnosis and the management of bladder cancer for the benefit of patients and healthcare systems alike. Bladder cancer is classified into two types, non-muscle invasive bladder cancer (NMIBC) and muscle-invasive bladder cancer (MIBC), depending on the depth of invasion in the bladder wall. NMIBC remains in the inner layer of cells lining the bladder. These cancers are the most common (75%) of all BC cases and include the subtypes Ta, carcinoma in situ (CIS) and T1 lesions. In MIBC the cancer has grown into deeper layers of the bladder wall. These cancers, including subtypes T2, T3 and T4, are more likely to spread and are harder to treat.<sup>4</sup>

1 Globocan. a) 5-year prevalence / b) incidence/mortality by population. Available at: <http://gco.iarc.fr/today>, accessed [January 2022].

2 Babjuk M, et al. Eur Urol. 2019; 76(5): 639-657

3 Sievert KD et al. World J Urol 2009;27:295–300

4 Bladder Cancer. American Cancer Society. <http://www.cancer.org/cancer/bladder-cancer.html>

### **About Hexvix®/Cysview® (hexaminolevulinate HCl)**

Hexvix/Cysview is a drug that preferentially accumulates in cancer cells in the bladder, making them glow bright pink during Blue Light Cystoscopy (BLC®). BLC with Hexvix/Cysview, compared to standard white light cystoscopy alone, improves the detection of tumors and leads to more complete resection, fewer residual tumors, and better management decisions.

Cysview is the tradename in the U.S. and Canada, Hexvix is the tradename in all other markets. Photocure is commercializing Cysview/Hexvix directly in the U.S. and Europe and has strategic partnerships for the commercialization of Hexvix/Cysview in China, Chile, Australia, New Zealand and Israel. Please refer to <http://photocure.com/partners/our-partners> for further information on our commercial partners.

### **About Photocure ASA**

Photocure: The Bladder Cancer Company delivers transformative solutions to improve the lives of bladder cancer patients. Our unique technology, making cancer cells glow bright pink, has led to better health outcomes for patients worldwide. Photocure is headquartered in Oslo, Norway and listed on the Oslo Stock Exchange (OSE: PHO). For more information, please visit us at [www.photocure.com](http://www.photocure.com), [www.hexvix.com](http://www.hexvix.com), [www.cysview.com](http://www.cysview.com)

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