Pressure Enabled Regional Immuno-oncology (PERIO™) Trials Update

November 2022

Update on the PERIO 01 and PERIO 02 Clinical Studies

- First-in-human experience in patients with liver tumors well-tolerated, with no serious adverse events related to TriNav® or procedure as monotherapy or in combination with checkpoint inhibitors
- Consistent with hypothesis that SD-101 delivered via TriNav® can enable broad immune effects in liver tumors and eliminate myeloid derived suppressor cells (“MDSC”)
- Continuing SD-101 program development, with more pivotal milestones expected over the next 6 months

https://periotrial.com

PERIO 01 for uveal melanoma with liver metastases (NCT04935229)

PERIO 02 for intrahepatic cholangiocarcinoma and hepatocellular carcinoma (NCT05220722)

Upcoming Milestones

More Pivotal Data Expected in Next 6 Months

November 2022
- Initial biopsy data readout
- Expanded from 5 to 9 clinical sites

December 2022
PERIO 01 and PERIO 02 Phase 1 early response data available

January 2023
- PERIO 01 and PERIO 02 SD-101 + dual checkpoint inhibitor cohort
- Society of Interventional Oncology
- OncoPig TriNav® vs. standard microcatheter data release planned (pre-clinical)
- MD Anderson Cancer Center Y90 study opening

February 2023
Phase 2 for Uveal Melanoma and Intrahepatic Cholangiocarcinoma Institutional Review Board submissions planned

March 2023
- PERIO SD-101 interventional radiology report and pre-clinical pancreas data release planned
- Society of Interventional Radiology

April 2023
- American Association for Cancer Research
- PERIO biopsy data and pre-clinical OncoPig (TriNav® vs. standard delivery PD-1) data release planned

June 2023
- American Society of Clinical Oncology
- PERIO 01 and PERIO 02 response data and PERIO 03 safety data release planned
- PERIO 01 and PERIO 02 durable response data available

Pressure-Enabled Regional Immuno-Oncology
PERIO 01 and PERIO 02 Clinical Studies

Evaluating SD-101 in combination with checkpoint inhibitors in adults with uveal melanoma liver metastases, advanced hepatocellular carcinoma, and advanced intrahepatic cholangiocarcinoma

Overview

- Both studies initiated at The University of Texas MD Anderson Cancer Center and now open at nine sites
- First two studies in a series of clinical trials assessing TriSalus' immunotherapy platform across multiple indications
- First patients enrolled in May 2022;

27 **patients** treated to date with **123** **infusions**

- Planning to execute registrational phase 2 studies in the first half of 2023; durable response data available in June

PERIO 01

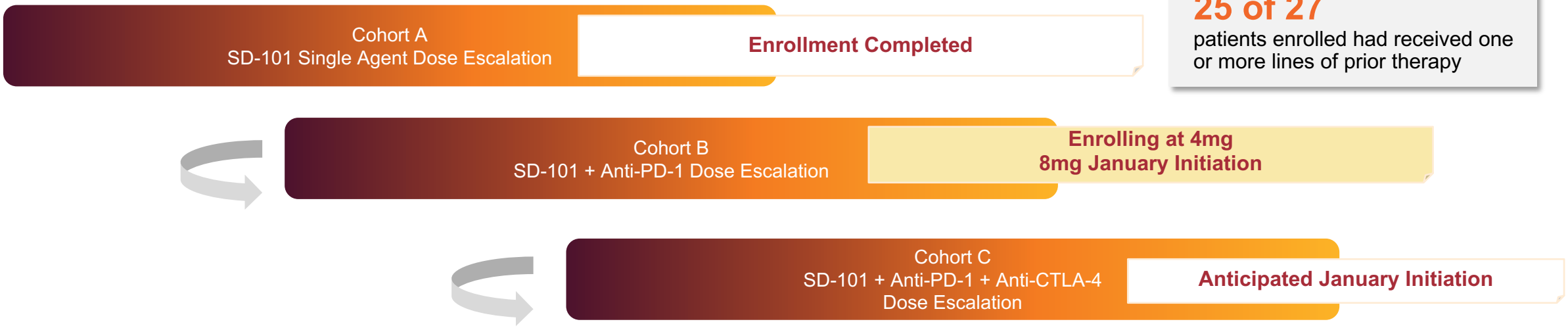
- SD-101 monotherapy – 13 patients treated
- SD-101 + CPI – 7 patients treated (2 mg)
  - Enrolling at higher dose levels (4 mg and 8 mg)

PERIO 02

- SD-101 monotherapy – 3 patients treated
- SD-101 + CPI – 4 patients treated (2 mg)
  - Enrolling at higher dose levels (4 mg and 8 mg)

PERIO 01 and PERIO 02 Clinical Study Overview

PHASE 1 STUDY DESIGN



25 of 27
patients enrolled had received one or more lines of prior therapy

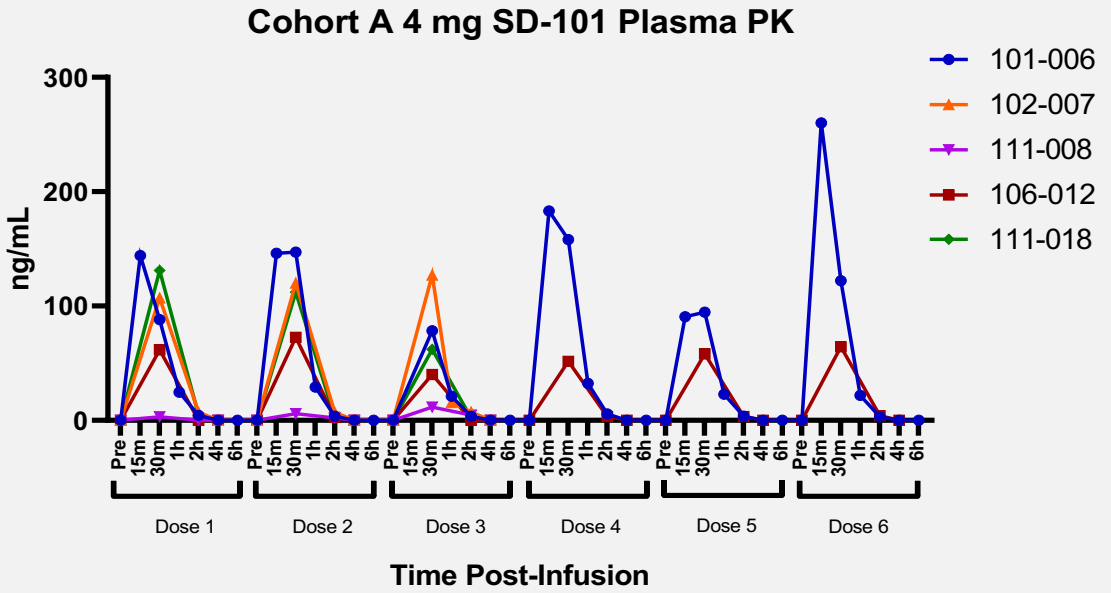
PLANNED REGIMEN

SD-101 via TriNav® | Checkpoint via Systemic Infusion

PERIO 01 and PERIO 02 Update: First In-Human Experience Well-Tolerated

First-in-human experience consistent with hypothesis that TriNav® can achieve high liver SD-101 levels with limited systemic exposure

- High SD-101 levels in liver following infusion with TriNav®
- Transient (<2 hour) detection in serum following SD-101 infusion with TriNav®
- No serious immune related adverse events reported to date[1]

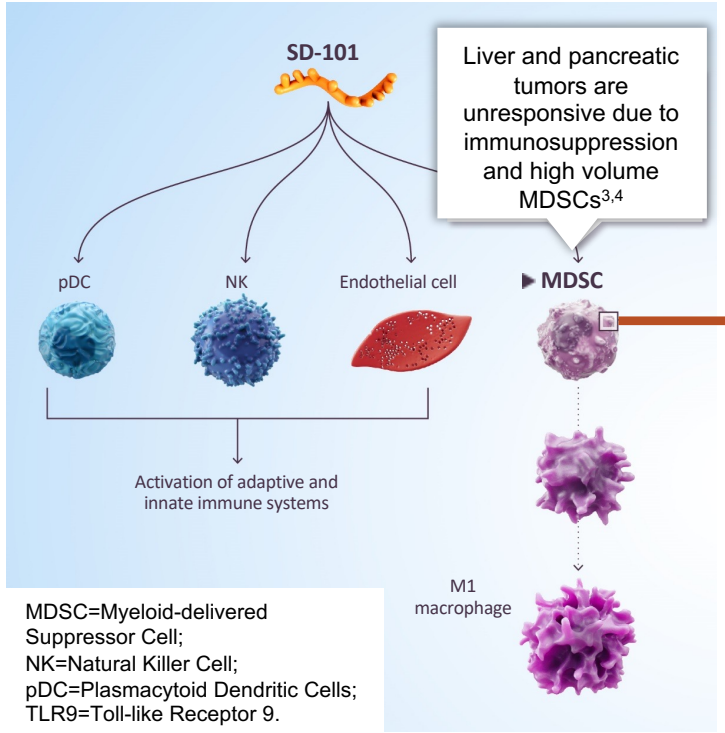


(1) No serious cytokine related events (one grade 2 cytokine release syndrome)
No serious (grade 4 or 5) clinically significant liver or biliary serious adverse events
No dose discontinuations due to treatment related serious advents
No serious adverse events related to TriNav® or procedure

Liver tissue levels up to 2340 ng/ml at 8 mg dose level in Cohort A

SD-101 Dual Mechanism — MDSC Elimination and Broad Immune Cell Activation

Reversing immunosuppression to enhance tumor responsiveness[1,2]



MDSC=Myeloid-delivered Suppressor Cell;
NK=Natural Killer Cell;
pDC=Plasmacytoid Dendritic Cells;
TLR9=Toll-like Receptor 9.

1. SD-101 Binds to TLR9
2. MDSC death
3. MDSC conversion to M1 macrophages

1

Broad immune modulation of the tumor[5,6,7]

- Phase 2 data in other indications
- Drives T-cell infiltration

2

Liver and pancreas tumor specific[6]

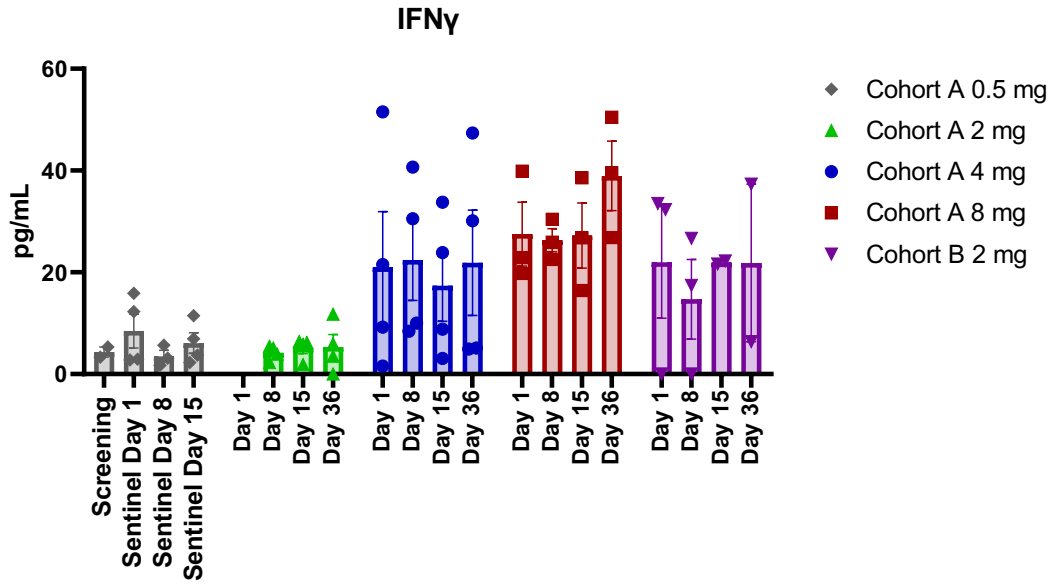
- MDSC associated gene reduction in initial studies6
- Attacks liver-specific MDSC pathways8

1) Looi, C.K., et al. J Exp Clin Cancer Res. 2019 Apr 15;38(1):162.
2) Ribas A., et al. Cancer Discov. 2018;8(10):1250.
3) Feig, C. et al. The Pancreas Cancer Microenvironment. Clin. Cancer Res. 18, 4266–4276 (2012).
4) Cancer Immunol Immunother. 2015 Feb; 64(2): 149–159.
5) TriSalus data on file
6) TriSalus clinical data on file (PERIO-1) and Ghosh, et al. Cancer Gene Therapy. 2022 June 14 (online ahead of print).
7) Journal of Clinical Oncology 37, no. 15_suppl (May 20, 2019) 9534-9534.
8) Guha et al. Oncogene 2020 November 4 (online ahead of print).

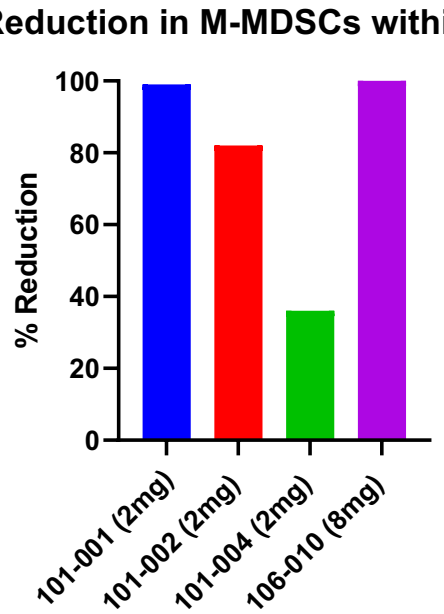
Data Supports Hypothesis that PEDD Can Enable SD-101 to Have Broad Immune Effects in Liver Tumors and Eliminate MDSC

SD-101 Infusion With TriNav® Demonstrated Cytokine Induction and MDSC Elimination

Trend of increasing serum IFNg levels following infusion of SD-101 via TriNav® at increasing doses levels



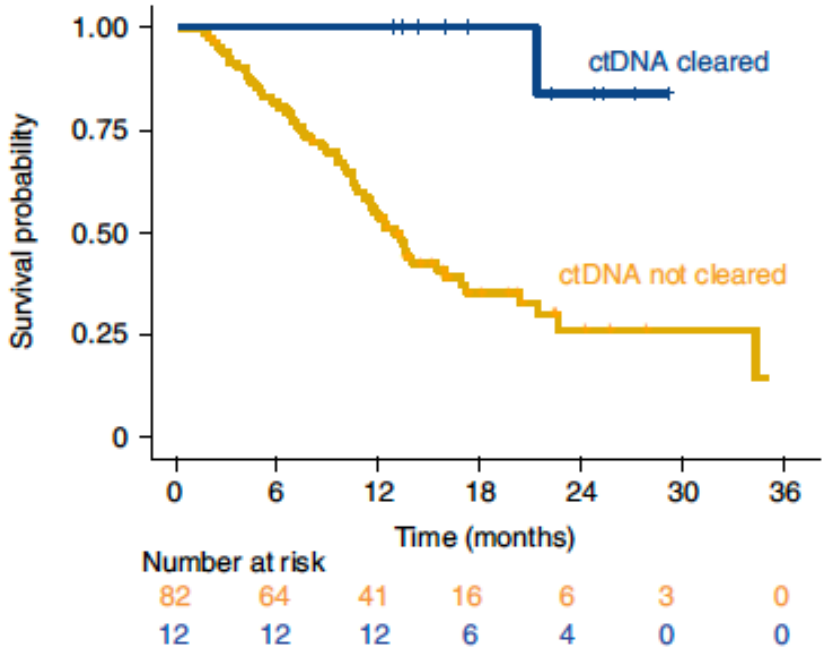
4 of 4 patients with available immunofluorescence data demonstrate decreases in liver tumor monocytic MDSC levels



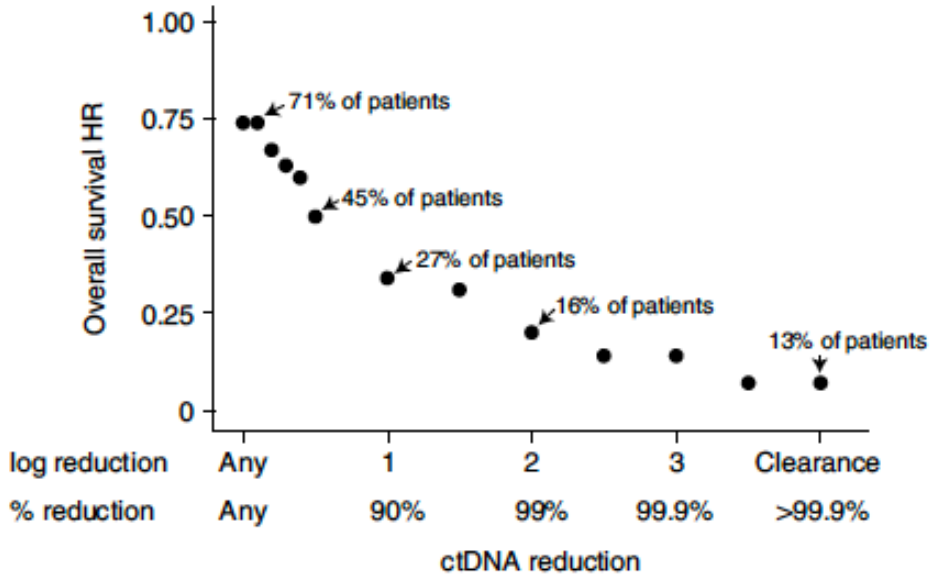
Cytokine levels determined by Luminex assays
% reduction in M-MDSC concentrations within tumors calculated from earliest available time point (Day 1 or Day 57) to latest available time point (Day 57 or Day 100)
M-MDSC concentrations determined by multiplex immunofluorescence microscopy

Immunocore: ctDNA Predicted Long-term Survival in Uveal Melanoma

Extent of circulating tumor DNA clearance from blood following immunotherapy treatment predicted long term survival in Immunocore clinical trial[1]



↑ctDNA clearance = ↓decreased risk of death



nature medicine

Clinical and molecular response to tebentafusp in previously treated patients with metastatic uveal melanoma: a phase 2 trial

1) Carvajal, R.D., Butler, M.O., Shoushtari, A.N. et al. Clinical and molecular response to tebentafusp in previously treated patients with metastatic uveal melanoma: a phase 2 trial. Nat Med 28, 2364–2373 (2022). https://doi.org/10.1038/s41591-022-02015-7

Circulating Tumor Cells and ctDNA Decreased in Most Patients Following SD-101 Infusions at 2 mg Dose Level

Data pending at higher dose levels

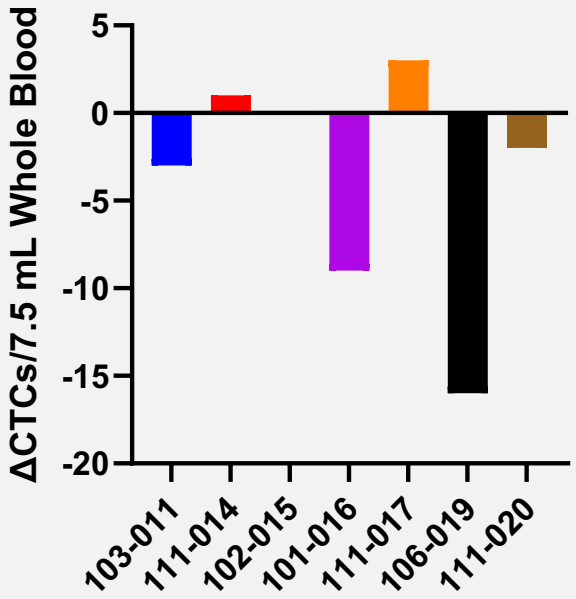
4 of 7*

patients with circulating tumor cell decreases

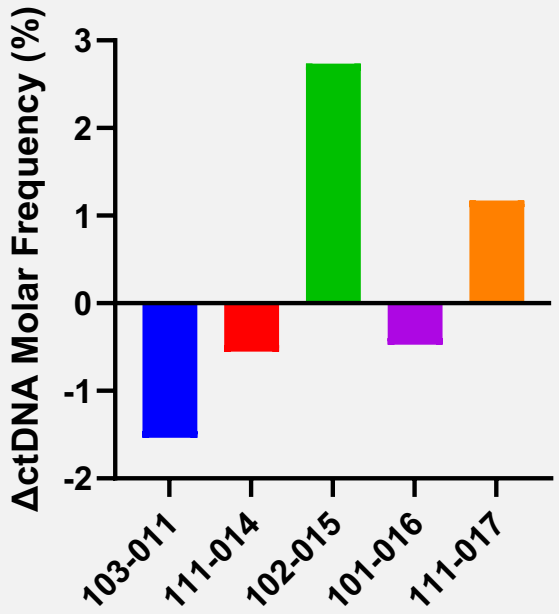
3 of 5*

patients with circulating tumor DNA decreases

Change in CTC Levels



Change in ctDNA Levels



*data available to date

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MTAC and TriSalus and their respective directors and executive officers, under SEC rules, may be deemed to be participants in the solicitation of proxies of MTAC's stockholders in connection with the Business Combination. Investors and security holders may obtain more detailed information regarding the names and interests in the Business Combination of MTAC's directors and officers in MTAC's filings with the SEC, including MTAC's registration statement on Form S-1, which was originally filed with the SEC on November 30, 2020, as amended, and MTAC's 2021 Form 10-K. To the extent that holdings of MTAC's securities have changed from the amounts reported in MTAC's 2021 Form 10-K, such changes have been or will be reflected on Statements of Change in Ownership on Form 4 filed with the SEC. Information regarding the persons who may, under SEC rules, be deemed participants in the solicitation of proxies from MTAC's stockholders in connection with the Business Combination will be set forth in the proxy statement/prospectus forming a part of the Registration Statement. Investors and security holders of MTAC and TriSalus are urged to carefully read in their entirety the proxy statement/prospectus and other relevant documents that will be filed with the SEC, when they become available, because they will contain important information about the Business Combination.

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