

Non-Surgical Biotherapeutic Solutions for Tissue Repair & Regeneration

Cautionary Note Regarding Forward-Looking Statements

This presentation contains "forward-looking statements" within the meaning of the Private Securities Litigation Reform Act and other securities laws, including but not limited to the statements related to the commercial potential of our products and product candidates, the anticipated development progress of our products and product candidates, and our expected cash runaway. In some cases, you can identify forward-looking statements by terminology such as "believe," "may," "estimate," "continue," "anticipate," "intend," "should," "plan," "expect," "predict," "potential," or the negative of these terms or other similar expressions. Forward-looking statements are not historical facts, and are based upon management's current expectations, beliefs and projections, many of which, by their nature, are inherently uncertain. Such expectations, beliefs and projections are expressed in good faith. However, there can be no assurance that management's expectations, beliefs and projections will be achieved and actual results may differ materially from what is expressed in or indicated by the forward-looking statements. Important factors that could cause such differences include, but are not limited to the uncertain, lengthy and expensive nature of the product development process; market acceptance of our product and product candidates; the timing and conduct of our studies of our product candidates; our ability to obtain marketing approval of our product and product candidates in the U.S. or other markets; our expectations regarding future growth, including our ability to develop new products; risks related to our contracts with BARDA; our ability to maintain adequate protection of our intellectual property; competition risks; and the need for additional financing. These and other significant factors are discussed in greater detail in MediWound's annual report on Form 20-F for the year ended December 31, 2021, filed with the Securities and Exchange Commission ("SEC") on March 17, 2022, and other filings with the SEC from ti

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NexoBrid development has been supported in part with federal funding from U.S. Biomedical Advanced Research and Development Authority (BARDA), Administration for Strategic Preparedness and Response (ASPR), within the U.S. Department of Health and Human Services (HHS), under ongoing USG Contract numbers HHSO100201500035C and HHSO100201800023C. Contract number HHSO100201500035C provides funding and technical support for the pivotal U.S. Phase 3 clinical study (DETECT) and the marketing approval registration process for NexoBrid as well as its procurement and availability under the expanded access treatment protocol (NEXT) in the U.S. Additional projects for evaluation of NexoBrid funded under the BARDA contract include randomized, controlled pivotal clinical trial for use in pediatric population, establishment of a pre-emergency use data package and development of the health economic model to evaluate the cost savings impact to enable market adoption in the United States.

We maintain our books and records in U.S. dollars and report under IFRS.

Company Highlights



FDA/EMA/PMDA approvals

14 successful clinical trials

120+peer reviewed publications



Diversified portfolio

NexoBrid® - 2022 revenues: \$26-27M EscharEx® - **\$2B*** opportunity



cGMP certified sterile manufacturing facility

Provides capacity to scale revenue growth



BARDA, Vericel, DoD (US), Kaken (JP), BSV (IN)



Solid balance sheet & strong investor base

Cash of ~\$66M**



^{*}TAM - targeted addressable market; Source: Oliver Wyman market research

^{**} includes \$27.5M raised in February 2023

Leadership Team



Nachum (Homi) Shamir Chairman of the Board



Ofer Gonen Chief Executive Officer



Barry Wolfenson EVP Strategy & Corp Dev.



Dr. Ety Klinger Chief R&D Officer



Tzvi Palash **Chief Operating Officer**



Boaz Gur-Lavie Chief Financial Officer



Dr. Robert J. Snyder **Chief Medical Officer**















Andersen CONSULTING













Johnson Johnson







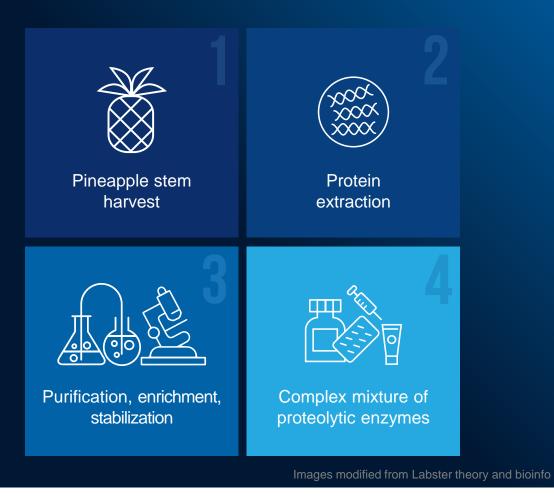




Johnson Johnson

Clinically and Commercially Validated Protein-Based Therapies

Proprietary IP protected manufacturing process



Selective enzymes target only non-viable tissue



Viable tissues preserved; healing begins



Multibillion Dollar Portfolio

Commercial



Disruptive therapy for burn care

Indication: Eschar removal of deep partial and full thickness burns

Classification: Orphan biological drug

Target users: Hospitalized patients

Substantial U.S. government support

Development status: FDA/EU/JP approved

TAM* (U.S.): >\$300M

Pipeline



Indication: Debridement of chronic /

hard-to-heal wounds

Classification: Biological drug

Optimized for outpatient setting

Development status: Phase III ready



Pipeline

MW005

Biotherapy for non-melanoma skin cancers**

Indication: Treatment of non-melanoma

skin cancers

Classification: Biological drug

Optimized for outpatient setting

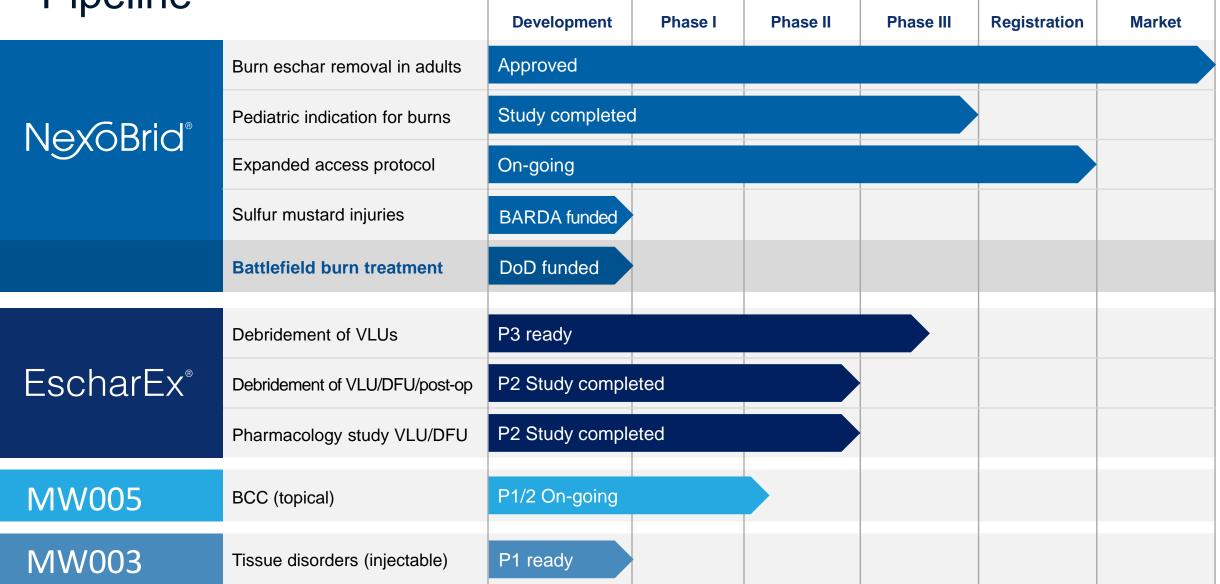
Development status: Phase I/II

TAM* (U.S.): >\$1B

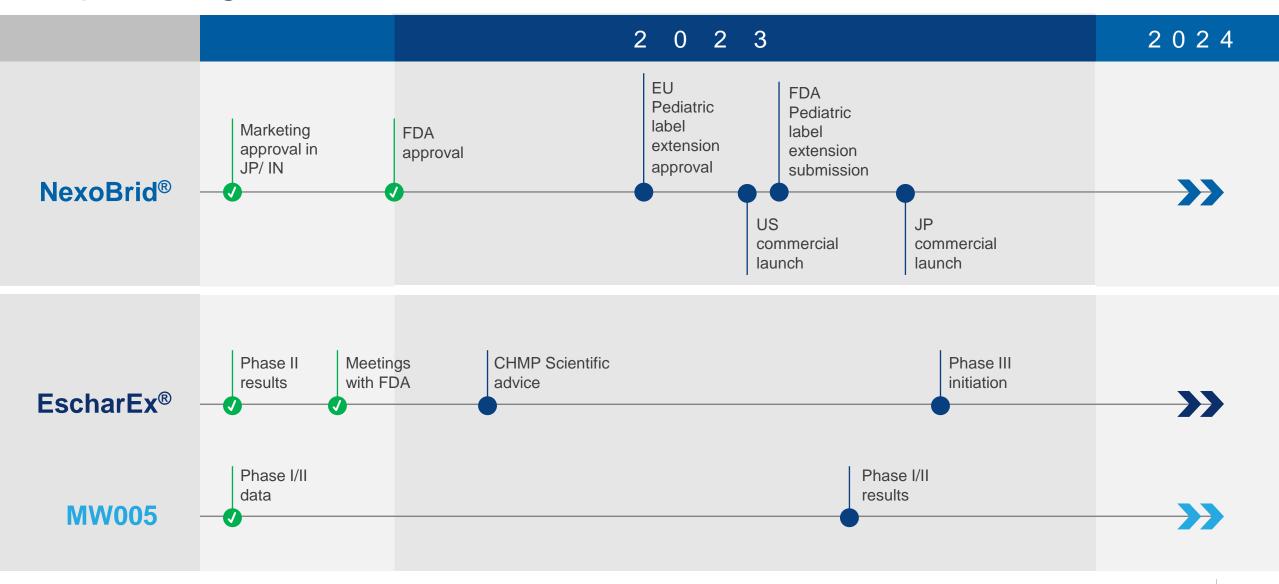


MW005

Pipeline



Upcoming Milestones



Financial Highlights



BALANCE SHEET

\$42M in cash* as of December 31, 2022

\$27.5M financing
Cash runway - through profitability

High quality investor base



REVENUES

2022 revenues of **~\$26-27M**NexoBrid is profitable

2023 Product revenues >50% growth

2023 Product **gross margin >50%**; scale-up drives further increase



COMMERCIALIZATION

Global expansion via strategic collaborations (Vericel, Kaken, BSV, GAG)

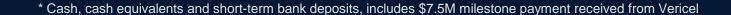
Up to **\$209M** support by BARDA

EU direct sales force (CAGR >20%)



ANALYSTS:

- Josh Jennings, MD, Cowen
- Jacob Hughes, Wells Fargo
- Francois Brisebois, Oppenheimer
- Swayampakula Ramakanth, PhD, HCW
- David Bouchey, Aegis
- Jason McCarthy, Ph.D, Maxim







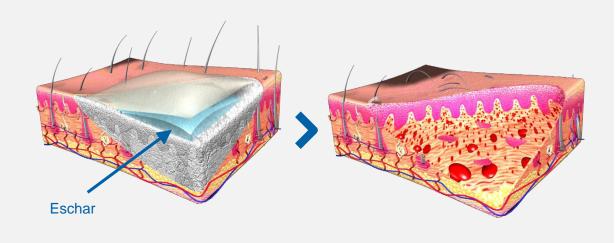
Validated & commercialized

Approved in the U.S., EU, JP, IN; 12,000 patients treated globally to date



Clear Unmet Need for Early, Effective and Selective Non-Surgical Eschar Removal in Severe Burns

Eschar Removal is the 1st Critical Step in Burn Care



Prevents local infection and sepsis

Avoids further deterioration and scarring

Enables initiation of wound healing

Allows visual assessment of wound bed

Current Practice* is Traumatic & non-selective



Loss of healthy tissue & blood

Challenging in delicate areas

Requires surgical team, operating room

NexoBrid®



Indicated for eschar removal of deep-partial & full-thickness thermal burns

Disruptive Bioactive Therapy for Burn Care

Significantly reduces need for surgery & improves patient outcomes



A sterile mixture of proteolytic enzymes

Effectively removes eschar within 4 hours without harming viable tissue or blood loss

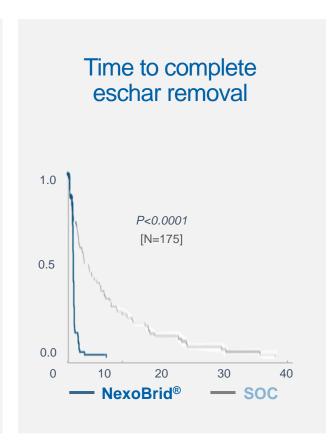
Allows for early visual assessment of the wound

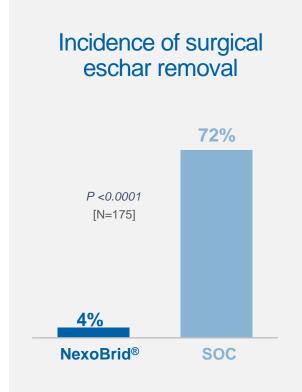


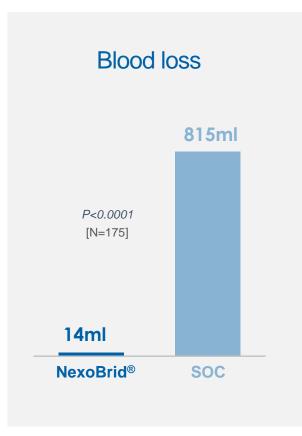
Easy-to-use, topical application at patient's bedside

NexoBrid® - Phase III Studies Demonstrate Superiority









No safety issues after 24 month follow-up

Non-inferiority in time to complete wound closure & scarring

Consistent with EU Phase III study & pediatrics Phase III study

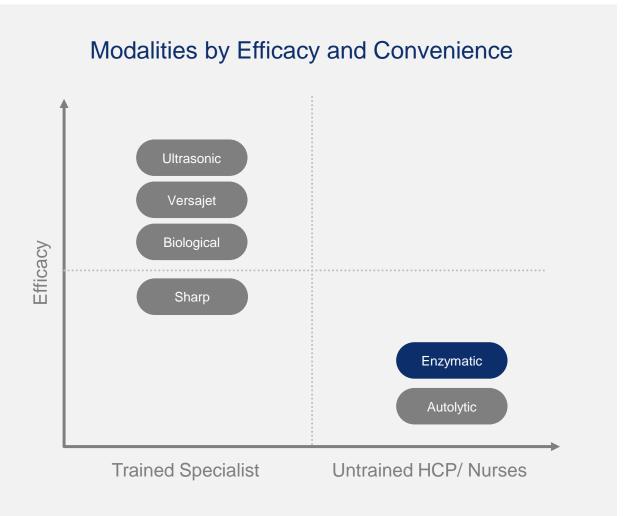
ESCOALEX® Next-Generation Enzymatic Debridement for Wound Care

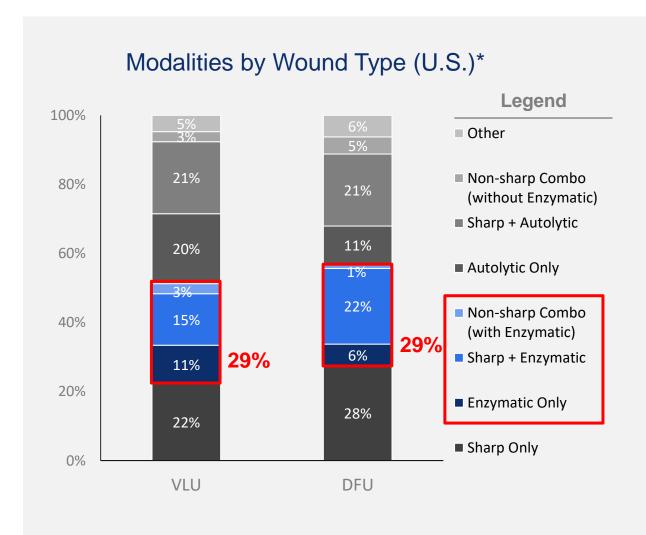
Superior to SOC -Sets a new bar for efficacy Targets **\$2B market** opportunity

De-risked: Based on a validated technology



Approaches in **Chronic Wound Debridement** are abundant but sub-optimal





EscharEx®



Targeting debridement of chronic and hard-to-heal wounds

Next-Generation Enzymatic Debridement - Wound Bed Preparation within Days



VLU

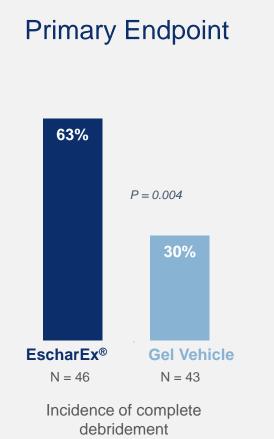


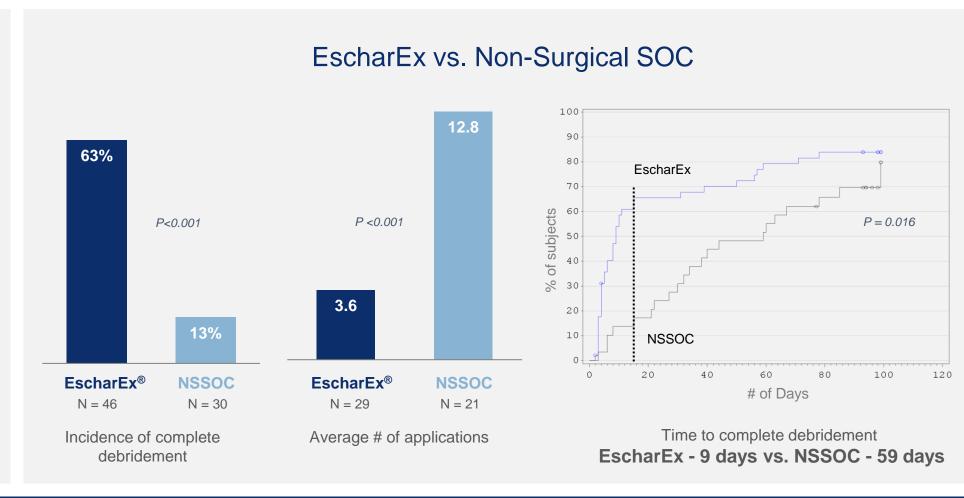


DFU

- Investigational drug containing a sterile mixture of proteolytic enzymes
- Debrides chronic wounds in 4-6 daily applications
- Inline with current treatment workflows and reimbursement landscape
- Easy to use, daily topical application for outpatient setting
- Extended IP protection

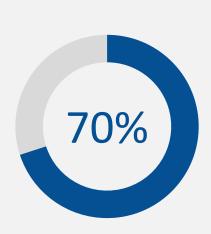
EscharEx® Phase II Studies - High Efficacy vs. SOC



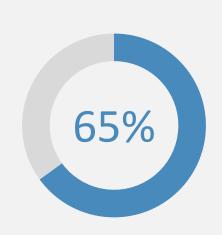


Current enzymatic treatment has limited efficacy and is slow acting

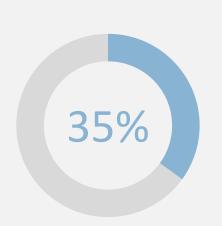
EscharEx® Phase II Pharmacology Results: Fast, Safe, Effective



Patients achieved complete debridement within 8 applications (avg 3.9 applications)



Bioburden reduction by end of treatment



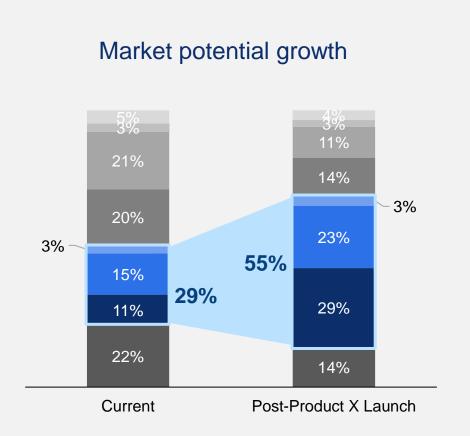
Decrease in wound size by end of a two-week follow-up

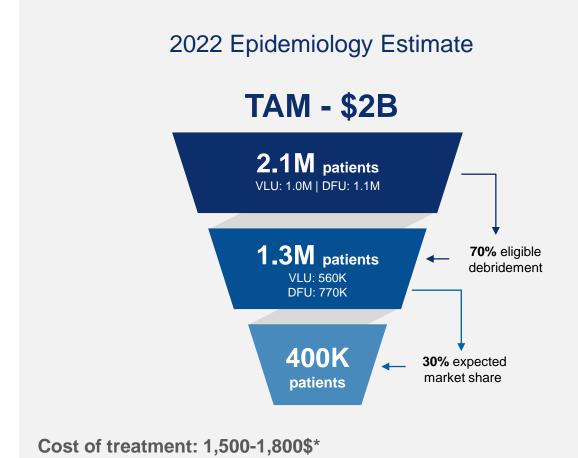


Biofilm was reduced substantially for all patients positive for biofilm at baseline

Reduction in wound size, biofilm and bacterial burden

EscharEx® U.S. Market Opportunity





EscharEx® anticipated to draw share from all other debridement modalities

MW005

Novel biotherapy for Non-Melanoma Skin Cancer

Effective and safe topical application

BCC is the most frequently diagnosed skin cancer in the U.S.



MW005



Novel Biotherapy for Non-Melanoma Skin Cancer



The Market

- 4.3M annual cases of Basal Cell Carcinomas diagnosed in the US
- Surgery is the SOC; topical products have high AEs & recurrence rates

The Product

- Investigational drug containing a sterile mixture of proteolytic enzymes
- Easy to use, high potency, 5-7 topical applications
- US Phase I/II study, demonstrated efficacy, safety and tolerability

Investment Highlights

\$26-27M revenues mainly from non-products

NexoBrid[®]
FDA approved

Robust EscharEx®
Phase II results

\$42M in cash

\$27.5M financing

EscharEx®
Phase III initiation

Scale-up manufacturing facility

NexoBrid®
Product revenue
growth >50%

\$30-40M Revenues from products

Additional revenues (BARDA, DoD)

Gross Margin >60%

EscharEx® approval

Cashflow positive

>\$100M Revenues with contribution from EscharEx®

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2024-5

2026-7