

35% reduction in post-FESS medical/surgical therapies

46% reduction in frank polyposis

40% reduction in need for oral steroids

PROPEL's meta-analysis provides Level 1-A evidence - a first in ENT - demonstrating the benefit of localized steroid release in the post-FESS period¹



2 PROPEL DELIVERS

3 PROPEL MAINTAINS

PROPEL CLINICALLY PROVEN.

Safety and efficacy of PROPEL Steroid-Releasing Implant has been studied in three prospective clinical trials conducted in the United States enrolling a total of 205 patients.

PROPEL provides clinically and statistically significant benefits to patients.

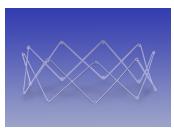
- Maintains patency by reducing post-operative adhesions, inflammation, polyposis & middle turbinate lateralization. Reducing these post-op factors is proven to improve long term outcomes and reduce the need for revision surgery 2
- Decreases need for post-operative medical and surgical therapies, including adhesion lysis and oral steroid therapy.

Studied in a Broad Patient Population:

- > 60% polyps at baseline
- > 30% prior sinus/nasal surgery
- > 12 Mean Lund-Mackay CT stage

Safety Demonstrated:

- · Ocular safety: No clinically significant changes from baseline in intraocular pressure or lens opacities
- · Systemic safety: No evidence of systemic steroid exposure or adrenal-pituitary axis suppression





PROPEL VS. CONTROL AT 30 DAYS.3



Control Implant on right side at day 0



PROPEL Steroid-Releasing Implant



Control side at day 30



PROPEL side at day 30

PRODUCT NAME:

PROPEL™ mometasone furoate implant, 370ug

MANUFACTURER AND CATALOG:

Intersect ENT #70011

VENDOR CONTACT INFORMATION:

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1) Han JK, Marple BF, Smith TL et al. Int Forum Allergy Rhinol. 2012; 2:271-279. 2) Kennedy et al. Laryngoscope. 2001; 110 (Suppl. 94): 29-31

3) Murr AH, Smith TL, Hwang PH et al. Int Forum Allergy Rhinol. 2011; 1 (1):23-32.

