

# *The Cure for Chronic Wounds*

## **E-QUIRE Corp**



OTCQB: EQUR

November 2016

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## OPPORTUNITY

- Huge market size - \$25B worldwide
- Growing medical problem – Chronic Wounds > 8% annual growth in the western world
- Numerous types of treatments - No real solution
- Real need to reduce medical economic burden by National Health Systems
- World wide recognition for our proprietary Electrical Stimulation technology
- Successful Clinical studies completed in Israel and Italy
- Short time to market – immediate in most countries, and ~3 years in the USA
- Defined path for FDA approval in the U.S. and commercialization in selected international countries
- Ideal investment/return profile



**E-QURE**  
ELECTRIC QUICK ULCER REMEDY

## EXECUTIVE OVERVIEW

E-QURE Corp. (OTCQB: EQUR); proprietary Electric Quick Ulcer Remedy (E-QURE) BST. Electrical Stimulation (ES) treatment has been proven to be the most effective for quick, painless and friendly healing of chronic, hard-to-heal wounds and ulcers.

- Proprietary technology: USpat 6,941,173, Valid Until May 2021 – **Following patents will come**
- Three main shareholders are the founders - Ron Weissberg, Ohad Goren and Itsik Ben Yesha – **Close personal management.**
- Strong Scientific Advisory Board and clinical studies supporting methodology – **Clinical validation projects will follow**
- Market Cap (July 15, 2016) - \$3 million – **Huge upside value potential**
- Commercialization process has begun – **Commercial independence within few years**
- Funds available for operation – until Q4 of 2016 – **Need for limited funding in the future.**
- Additional Information – [www.e-qure.com](http://www.e-qure.com)



E-QUIRE  
ELECTRIC QUICK ULCER REMEDY

# WOUND CARE – HUGE MARKET OPPORTUNITY

\$25 billion annually is spent treating wound care in the U.S. alone. On a global scale, there are no other significant players in providing Electrical Stimulation (ES) treatment to cure wounds quicker and faster.

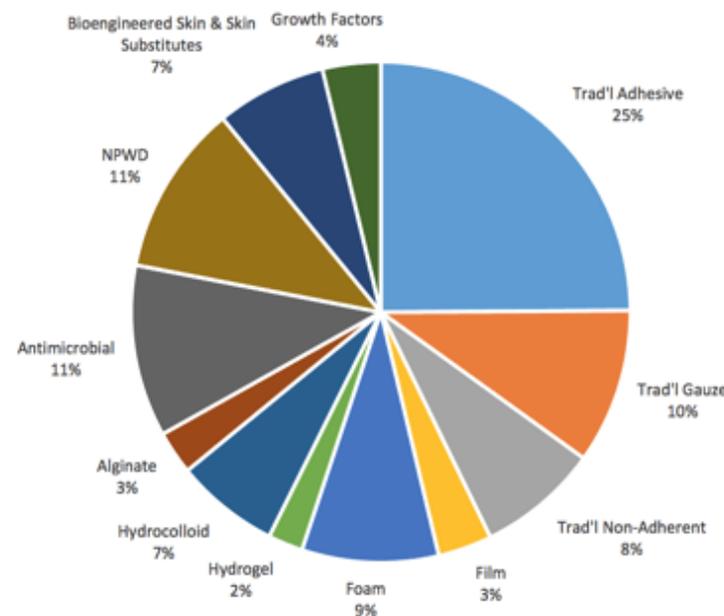
## A Rising Scourge

Why improvements in wound healing are so important

- ◆ **An estimated \$25 billion** is spent annually on treating chronic wounds on patients in the U.S.
- ◆ **6.5 million people** are affected by chronic wounds.
- ◆ **Wounds are associated with diabetes**, clogging of the arteries, vein diseases, neurological problems, rheumatologic illnesses, inflammation of blood vessels and other medical difficulties.
- ◆ **Up to 25% of all diabetics** will develop a diabetic foot ulcer or wound.
- ◆ **Wound infections are the most expensive** complications following surgery and are a major source of bacteria that drive infection rates in hospitals.
- ◆ **Wounds will become more common** with an aging population and increasing prevalence of chronic disease.
- ◆ **Obese patients are at greater risk** of wounds because poor nutrition and circulation impede healing and skin folds increase infection risk.

Sources: Johns Hopkins School of Medicine; Wound Repair and Regeneration ; WSJ reporting  
The Wall Street Journal

Global Market Wound Care Segments, 2015



# HEALTH CARE COSTS FOR CHRONIC WOUNDS TOP \$20B ANNUALLY IN THE USA ALONE



- **Chronic wounds** (wounds that have not proceeded through a reparative process in three months) affect over **five million Americans each year**, resulting in over \$20 billion in health care costs.
- Individuals with disabilities and diabetes, as well as the elderly, have the highest risk of developing chronic wounds. Patients afflicted with chronic wounds suffer from physical pain and disabilities in addition to psychological and emotional stresses and poor quality of life.
- Current treatments for chronic wounds include cleansing, debridement, maintaining a moist tissue environment and in advanced cases amputation may become necessary.
- Death, especially in elderly patients, may result from sepsis that can be associated with chronic wounds.

*Source: NIH (National Institute Of Health)*

# E-QURE SOLUTION – BIOELECTRICAL SIGNAL THERAPY (BST)



- ✓ 60 - 90 minutes per day
- ✓ 45 - 60 days of treatment
- ✓ Both Home and Clinic Care
- ✓ Complies with standard of care
- ✓ Painless and easy to use
- ✓ Approved for use in Europe (CE), pending approval in Australia, Canada & Israel.
- ✓ Device includes Stimulus Generator and soft surface disposable electrodes
- ✓ Electrodes placed on the sides of the ulcer where they can remain for up to 3 days. Electrodes are replaced when bandages are replaced.

**[Introduction Movie](#)**

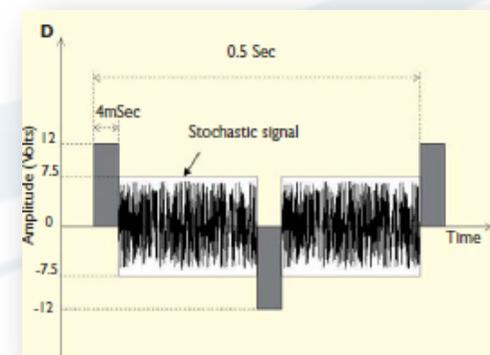


E-QUIRE  
ELECTRIC QUICK ULCER REMEDY

## E-QUIRE BST DEVICE – HOW DOES IT WORK

The “**current of injury**” measured during the natural healing process is absent or weak with chronic wounds

- A unique **patented waveform signal that mimics** the naturally occurring **current of injury** is transmitted to the skin surface around the wound site
- The BST signal enables both the **stimulation** of sensory nerves and direct stimulation of the ulcer tissues
- The nervous system interprets the transmitted pulse from the damaged area and **initiates healing activity** to the wound tissues

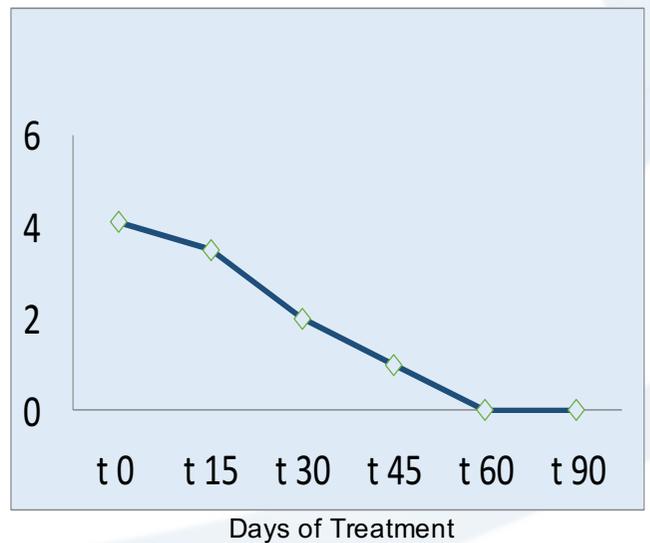


# E-QUIRE BST TREATMENT – CASE SAMPLE

Cured Diabetic Foot Ulcer of 27 months Wound Age within 60 Days.



WoundArea (cm<sup>2</sup>)



# CLINICAL STUDIES: ISRAEL & ITALY



## **ISRAEL: Multi Center, Double-blind, Randomized, Placebo-controlled study (Monitored by Harrison Group)**

In-patients, with stage III, non-diabetic pressure ulcers lasting  $\geq 90$  days, per NPUAP scoring system  
8 weeks treatment followed by 12-week follow-up

### **Results:**

- 5 times Closure rate with E-QURE – BST vs. Control group.  $p=0.044$
- Twice Faster epithelia progression with BST vs. Control group.  $p=0.033$
- No unanticipated adverse events

Conclusion:

**study has established complete safety and efficacy results**

<https://docs.google.com/file/d/0BzBBIZuLOk4iaWRqd2JHdEhaakk/edit?usp=sharing>

## **TURIN, ITALY: Observational case series to evaluate the effect and tolerability of E-QURE BST (Prof Ricci – Journal of Wound Care 2010)**

- 9 patients with 11 ulcers (Wound age: 18 months to 20 years)
- E-QURE BST treatment 30 minutes, 3 times a day, for 60 days

### **Results:**

- Mean wounds area reduction 82.5% (SD=25.2%)
- Full closure rate (healing) 45% within the 60 days period

[http://www.journalofwoundcare.com/cgi-bin/go.pl/library/article.cgi?uid=47278;article=JWC\\_19\\_3\\_96\\_103](http://www.journalofwoundcare.com/cgi-bin/go.pl/library/article.cgi?uid=47278;article=JWC_19_3_96_103)

## CLINICAL STUDIES: ISRAEL & ITALY (CONT)



**Prof. Fraccalvieri, 2008-2010** Observational case series to evaluate the effect of E-QURE BST on Chronic wounds not responding for 3 months to traditional dressing, surgery or negative pressure therapies (NPWT).

### Treatment:

- 21 patients for wound healing (up to 20 sq cm)
- 11 patients for wound related pain (Average VNS 8.7)

### Results:

- 87% full wound closure in average time of 97 days (range 10 – 150 days)
- 45% complete pain disappearance in 7 days (From 8.5 to 1.0)
- Other 36% Reduction in pain in 7 days (from 9.3 to 3.2)
- Remaining 19% (two patients) had very severe pain which required daily treatment with morphine painkillers. Both patients reported a reduction of pain from 9.5 to 2.5 after 7 days and stopped morphine painkillers in 14 days.

Source:  
Electrical stimulation for difficult wounds: only an alternative procedure? International Wound Journal Marco Fraccalvieri Marco Salomone Enrico M Zingarelli Filippo Rivarossa Stefano Bruschi  
DOI: 10.1111/iwj.12194

<http://onlinelibrary.wiley.com/doi/10.1111/iwj.12194/abstract>

**Prof. Ricci, June 2009** Observational case series to evaluate the effect and tolerability of E-QURE BST on extremely hard-to-heal (recalcitrant) wounds.

### Treatment:

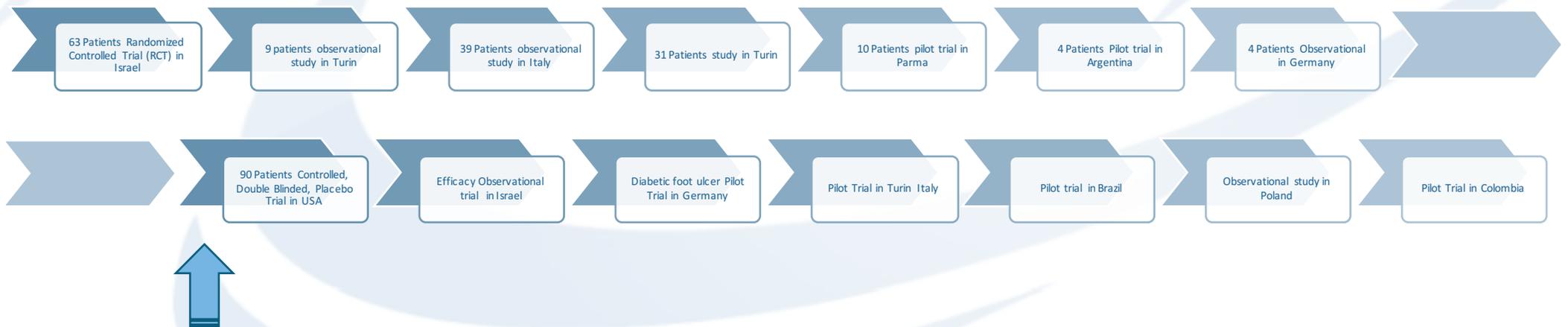
39 patients with 40 ulcers (Wounds age: 6 months to 40 years)  
E-QURE BST treatment 30 minutes, 3 times a day, for 60 days

### Results:

- Full closure rate (healing) 45%
- Partial closure: 25% of wounds show area reduction >40%
- Partial closure: 20% of wounds show area reduction <40%

## ADDITIONAL CLINICAL VALIDATIONS

- ✓ Numerous publications and Meta-Studies endorsing Electrical Stimulations for wound healing.
- ✓ Additional observational trials are planned for the next few years for further clinical validation.
- ✓ Conferences participations is planned for BST wide industry exposure.
- ✓ Planned validation studies to be completed by end of 2017.



# THE ULCER HEALING CONSENSUS IN FAVOR OF ELECTRICAL STIMULATION (ES)



There is a consensus that:

**electrical stimulation (ES) facilitates wound healing.**

ES is recommended by guidelines issued by both EPUAP and NPUAP (EU and US Pressure Ulcers Advisory Panels) for the treatment of recalcitrant pressure ulcers.

NIH site expresses a statement preferring ES:

"ES is the use of electrical current to stimulate a number of cellular processes important to pressure ulcer healing. **ES appears to be most effective on healing recalcitrant Stages III and IV pressure ulcers.** Thus, electrical stimulation should be considered for non-healing pressure ulcers."

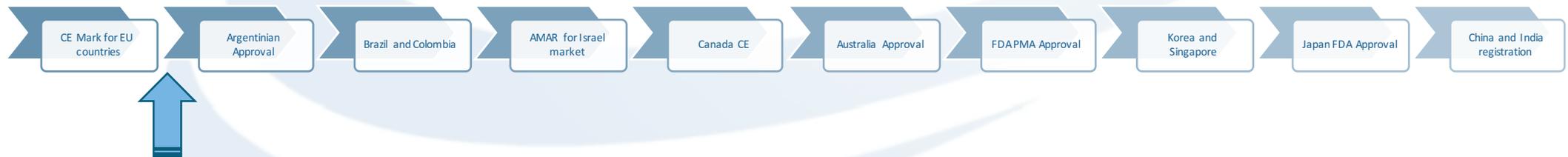
<http://www.ncbi.nlm.nih.gov/books/NBK2650/#ch12.s20>

[http://www.epuap.org/guidelines/Final\\_Quick\\_Treatment.pdf](http://www.epuap.org/guidelines/Final_Quick_Treatment.pdf)



## REGULATORY APPROVALS PATHWAY

- ✓ CE Mark – EU Conformity Approval granted.
- ✓ Pursuing Local registrations and Marketing approvals in various countries.
- ✓ Primary markets for the company product include USA, Germany, Italy, Israel, South America, Australia, Canada France and England
- ✓ Regulatory approvals for all major markets is expected to be completed by end of 2018



## BUSINESS MODEL

- BST Device is leased by clinics, hospitals and physicians to maintain control on devices location and use.
- Days of treatment is being sold by charging for the disposable electrodes. Electrodes designed for 1,2 or 3 days of treatment.
- Price is based on patient cost, considering reimbursement scheme.
- Territories are managed by assigned distributors or business partners, sharing revenues with the company
- Strategic countries will be handled by the company.
- E-QURE target to position 5000 active devices by end of 2018 worldwide treating 20,000 patients at potential 1,000,000 days of treatment.
- Reaching economic break even by 2019



## US REGULATORY PATHWAY

- ✓ Designed for PMA process. No predicate available
- ✓ Discussions with FDA as to trial design and conduct is in final stages
- ✓ Trial protocol synopsis
  - ✓ Primary endpoints: complete closure within 60 days and device safety.
  - ✓ 90 patient double arms, double blinded, controlled trial.
  - ✓ 45 Patients with BST treatment
  - ✓ 45 Patients with sham placebo treatment
  - ✓ Strict inclusion and exclusion criteria to ensure homogenous population
  - ✓ Pressure ulcers, in-patients only that have shown no improvement for at least 30 days
- ✓ Total regulatory pathway for the BST device into 2017.



# REIMBURSEMENT FOR ES IN THE USA



## Existing CMS Reimbursement Code

- Healthcare Common Procedure Coding System (HCPCS) code E0769
- Reimbursement of up to \$70 per day
- Reimbursement amount to the patient is roughly \$3,000 (based on 60 days)
- Adjunctive treatment to standard of care (SOC) for non-healing wounds

“The use of ES and electromagnetic therapy for the treatment of wounds are considered adjunctive therapies, and will only be covered for chronic Stage III or Stage IV pressure ulcers, arterial ulcers, diabetic ulcers, and venous stasis ulcers. Chronic ulcers are defined as ulcers that have not healed within 30 days of occurrence. ES or electromagnetic therapy will be covered only after appropriate standard wound therapy has been tried for at least 30 days and there are no measurable signs of improved healing. This 30-day period may begin while the wound is acute.”

Source: CMS

<http://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=131&ncdver=3 &DocID=270.1 &bc=gAAAAgAAAAAA%3D%3D&>

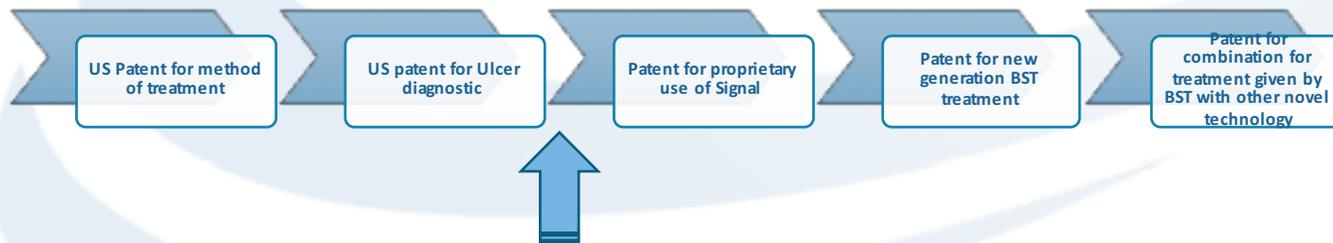
# IP PROTECTION

**US pat 6,941,173 granted – 2005, Valid Until May 2021**

Claim no 1:

A method for the treatment of a sore, the method comprising the steps of: (a) situating electrodes in a vicinity of the sore of a patient to be treated, and (b) externally inducing a percutaneous flow of electrical current between said electrodes by establishing at least one voltage wave form across said electrodes, wherein said at least one voltage wave form includes a wave form designed to substantially mimic characteristic natural voltage wave form emissions of at least one electrically active sore.

<https://www.google.com/patents/US6941173?dq=6,941,173&hl=en&sa=X&ei=oTdmUuziK-eO4ASQ8ICgAw&ved=0CDkQ6AEwAA>



# FINANCING NEEDS FOR E-QUIRE STRATEGY: 2017 – 2019



- **FDA Approval**
- **Europe Commercial Development**
- **USA Market Penetration**
- **South America Commercial Development**
- **Asia Regulation and Commercial Development**
- **Other Financial Needs**



# MANAGEMENT TEAM



- **Mr. Ron Weissberg** - *Chairman* - Over 20 years of executive experience in the Financial industry in companies specializing in Real Estate, Insurance, Rating & Credit Agencies, and Investment Funds. Extensive experience in the Bio-Med industry around the world. Holds an MBA, New York University and BSc. Industrial Engineering and Management, Cum Laude, Technion, Haifa, Israel.
- **Mr. Ohad Goren** - *CEO* – Over 20 years of experience in High-Tech and Bio-Tech Management. Former CEO of Pollogen – Medical Device Company , Former CEO of LifeWave – Medical Device Company, Support Sales Manager of Oracle Israel, Deputy Consul - Israel Foreign Ministry, Israeli Embassy-Washington DC. Holds a B.Sc In Economics and Business Management from the University of Maryland USA.
- **Mr. Itsik Ben Yesha** - *CTO* - Over 30 years of experience in High-tech and Bio- Tech R&D and Management. Former CTO & Executive VP of LifeWave, CFO & Executive VP of Valor, Founder and Partner in Hisense (BabySense), CFO of Innowave (Tadiran Wireless Telecom). Hold a B.Sc in Aeronautical Engineering from Technion Haifa, and MBA, Cum Laude, Tel Aviv University , Israel.



# SCIENTIFIC ADVISORY BOARD



• **Prof. Avi Ohry** - Prof. Ohry is an expert in Rehabilitation Medicine, served as a Consultant to the Israeli Ministry of Health, the Israeli Ministry of Defense, the Israeli Ministry of Foreign Affairs, IDF and other national and international agencies and institutions. . From 1985-1999 he served as the director of the Department of Neuro-Rehabilitation ,at Sheba Medical Center, Tel Hashomer, Israel . Since 2000, he is a (full academic) Professor of Rehabilitation Medicine at Tel Aviv University . Since 1999, he is the Chairman of the department of Rehabilitation Medicine at Reuth Medical Center, Tel Aviv. Prof. Ohry served as Member of Biomedical Advisory Board at LifeWave Ltd. In 2005, he was included in the project/book - “ Caring Physicians of the World “, On behalf of the World Medical Association , as a representative of Israeli Medical Association. His main topics of interest are: Rehabilitation Medicine, Spinal Cord Injuries, Medical humanities, history of Medicine, bio-ethics, Polish-Jewish Medical establishments between the World wars. Long term sequelae of disability , and captivity

• **Dr. Ben Zion Weiner** - Dr. Weiner has been with Teva Pharmaceuticals since 1975. In January 2006, Dr. Weiner joined the Office of the CEO and assumed the role of Chief R&D Officer. Dr. Weiner served as Group Vice President - Global Products from April 2002 until January 2006. Previously, he served as Vice President - Research and Development from 1986 to 2002. He received a Ph.D. in chemistry from the Hebrew University, where he also earned B.Sc. and M.Sc. degrees. He conducted his post-doctorate research at Schering-Plough Corporation in the United States. He was granted the Rothschild Prize for Innovation/Export two times, in 1989 for the development of Alpha D3 for dialysis and osteoporosis patients and in 1999 for the development of Copaxone® for multiple sclerosis.



# INVESTOR INFORMATION

State of Incorporation	Delaware
Year End	12/31
Symbol (OTCQB)	EQR
Recent Price (Nov 2015)	\$0.25
Market Capitalization	~\$6 million
Shares Outstanding	~22 million
Shares Authorized	500 million
Transfer Agent	Transfer Online
Chairman of the Board	Ron Weissberg
Chief Executive Officer	Ohad Goren

Zacks Small-Cap Research		February 26, 2015				
tcr.zacks.com		10 S. Riverside Plaza, Chicago, IL 60606				
<b>E-Qure Corp</b>	(EQR-OTC)					
<b>EQR: WOUND HEALING WITH ELECTRICAL STIMULATION</b>		<b>OUTLOOK</b>				
Current Recommendation	Outperform	EQR has developed an effective, low cost, easy-to-use device for chronic wound management, which addresses a market worth about \$6 billion annually. Results from clinical trials have been very encouraging. Recruitment of patients for a study which is expected to support an FDA filing is underway. We think FDA approval could happen before end of 2016 and product launch in the U.S. could happen towards mid-2017.				
Prior Recommendation	N/A	We think EQR has a compelling story and believe valuation might increase as certain risks abate. Our target price is \$3.50 share. We are initiating coverage with an Outperform rating.				
Date of Last Change	1/30/2015					
Current Price (01/30/2015)	\$1.14					
Target Price	\$3.50					
<b>SUMMARY DATA</b>						
52-Week High	\$4.50	Risk Level	High			
52-Week Low	\$0.61	Type of Stock	N/A			
One-Year Return (%)	\$4.54	Industry	Med Instruments			
Beta	-1.42					
Average Daily Volume (sh)	170					
Shares Outstanding (mil)	21.5	<b>ZACKS ESTIMATES</b>				
Market Capitalization (\$mil)	\$24.6	Revenue (in millions of \$)				
Short Interest Ratio (days)	N/A	Q1	Q2	Q3	Q4	Year
Institutional Ownership (%)	0	(Aug)	(Nov)	(Feb)	(May)	(May)
Insider Ownership (%)	80	2014				\$0 A
Annual Cash Dividend	\$0.00	2015				\$0.20 E
Dividend Yield (%)	0.00	2016				\$1,000 E
5-Yr. Historical Growth Rates		2017				\$3,288 E
Sales (%)	N/A	<b>Earnings per Share</b>				
Earnings Per Share (%)	N/A	(EPS is reported earnings before non-recurring items)				
Dividend (%)	N/A	Q1	Q2	Q3	Q4	Year
		(Aug)	(Nov)	(Feb)	(May)	(May)
P/E using TTM EPS	N/A	2014				(1.74) A
P/E using 2015 Estimate	0	2015				(0.07) E
P/E using 2016 Estimate	0	2016				(0.05) E
		2017				(0.02) E
Zacks Rank	N/A	Zacks Projected EPS Growth Rate - Next 5 Years %				N/A



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