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Axonics

Investor Presentation

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Axonics® Vision and Philosophy

To be the global leader for incontinence solutions by providing customer-centric products to treat bladder and bowel dysfunction and improve the quality of life for patients and their families

Clarity of Purpose

Thoughtful Innovation

Integrity and Quality

Axonics Overview

Large and Significantly Underpenetrated Markets	▪ In the U.S., 40M adults suffer from overactive bladder (OAB) and 20M women suffer from stress urinary incontinence (SUI) ▪ High unmet clinical need exists due to limitations of legacy sacral neuromodulation (SNM) and urethral bulking products ▪ Both markets are poised to meaningfully expand, driven by Axonics innovation and increased patient awareness
Innovative Products	▪ Axonics introduced the first rechargeable SNM system. It is designed to last at least 15 years in the body, with a patient-friendly recharging experience and full-body MRI compatibility (1.5T and 3.0T) ▪ Bulkamid® is a next-gen bulking agent clinically proven to retain its bulking characteristics and efficacy for up to 7 years
Strong Clinical Data in FDA Pivotal Studies	▪ SNM: 88% therapy responder rate at 24 months; leaks reduced from 5.6 at baseline to 1.0 at 24 months[1] ▪ Bulkamid: 77% of women reported that their incontinence was either “dry, much improved or improved” at 12 months[2] ▪ Strong safety profile with no unanticipated adverse events were reported in either of the studies
Large Commercial Footprint	▪ ~220 person U.S. field team; ~30 person EU field team; extensive experience in urology and neuromodulation ▪ Secured agreements with national and regional hospital systems in the U.S. ▪ Strong value proposition to customers, with full complement of solutions for OAB, SUI, bowel and mixed incontinence
Attractive Financial Profile	▪ Net revenue of $112 million in 2020, the first full year of Axonics’ commercial launch in the U.S. ▪ Long-term gross margin profile of low-to-mid 70s; significant operating leverage inherent in business model ▪ Company is well capitalized, with over $320 million of cash on the balance sheet (pro forma May 2021 equity offering)

1. ARTISAN-SNM pivotal study 2-year clinical results: https://onlinelibrary.wiley.com/doi/epdf/10.1002/nau.24615
2. Sokol ER, Karram MM, Dmochowski R. Efficacy and safety of polyacrylamide hydrogel for the treatment of female stress incontinence: a randomized, prospective, multicenter North American study. J Urol. 2014 Sep;192(3):843 9

Strong Management Team with Decades of Medical Technology Experience

Axonics

Raymond W. Cohen

Chief Executive Officer

- *35+ Years of Experience*

VESSIX VASCULAR
BIOLIFE SOLUTIONS
SPECTRUM PHARMACEUTICALS
CARDIAC SCIENCE

Dan Dearen

President & CFO

- *30+ Years of Experience*

VESSIX VASCULAR
EY Building a better working world
Q3DM

Rinda Sama

Chief Operating Officer

- *15+ Years of Experience*

VESSIX VASCULAR
CARDIAC SCIENCE

Karen Noblett, M.D.

Chief Medical Officer

- *25 + Years of Clinical Experience*

UCR School of Medicine
SCHOOL OF MEDICINE
UNIVERSITY of CALIFORNIA • IRVINE
Discover • Teach • Heal

John Woock, Ph.D.

Chief Marketing Officer

- *10+ Years of Experience*

STANFORD biodesign
McKinsey&Company

Al Ford

Chief Commercial Officer

- *20+ Years of Experience*

CARDIAC SCIENCE
CSI CRITICARE SYSTEMS, INC.

SNM Overview

Overactive Bladder and Fecal Incontinence: High Prevalence and Debilitating Impact on Quality of Life

Overactive Bladder (OAB)

Sudden urge to urinate; may result in urinary urgency incontinence (UUI) and/or urinary frequency (UF)

Fecal Incontinence (FI)

Inability to control bowel function, including involuntary loss of solid or liquid feces

- OAB affects over **40M adults** and FI affects over **18M adults** in the US[1] (some adults suffer from both UUI and FI)
- Only **half** of those with severe symptoms seek treatment[2]
- OAB and Fl have a significant **negative impact** on **quality of life**, mental health, sleep, productivity, and social activities[1,3]
- **80%+** of patients prescribed medications **discontinue use** within 6 months based on unmet treatment expectations, adverse effects, and cost[3]
- SNM is **broadly reimbursed**[4] by government and private payors
- U.S. SNM market is estimated to be over $700 million in 2021[5]

1. Stewart WF et al. Prevalence and burden of overactive bladder in the United States. World J Urol. 2003 May;20(6):327-36; Whitehead WE et al. Fecal Incontinence in US adults: Epidemiology and Risk Factors. Gastroenterology. 2009; 137:512–517.
2. Shaw, et al., "Barriers to Help Seeking in People with Urinary Symptoms." *Fam Pract*, Feb 2001.
3. Reynolds, et al., "The Burden of Overactive Bladder on US Public Health." *Curr Bladder Dysfunct Rep*, Mar 2016.
4. CMS National Coverage Determination (NCD) is established for sacral nerve stimulation.
5. Wall Street research.

Sacral Neuromodulation Overview

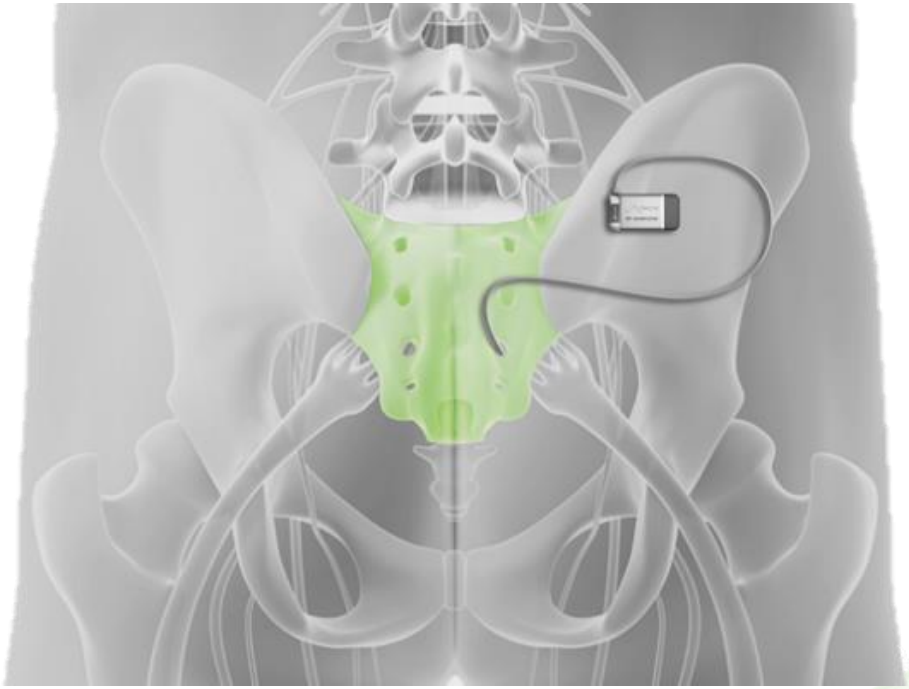
SNM therapy has been commercially available in the United States for **over 20 years** and has been **clinically proven** to provide a safe, effective, durable solution to OAB and FI

Efficacy of SNM therapy:

- Mild electrical pulses targeting the sacral nerves restore normal communication between the brain and the bladder
- Therapy supported by a large compendium of peer-reviewed publications
- Hundreds of thousands of patients have been implanted worldwide

Historic shortcomings of legacy SNM technology (Medtronic InterStim II):

- Surgically explanted and replaced every 3-5 years due to battery depletion
- Size of implanted device can result in pain and discomfort
- Complicated patient programmer
- Head-only MRI compatibility limited adoption and required explant for a full-body MRI scan

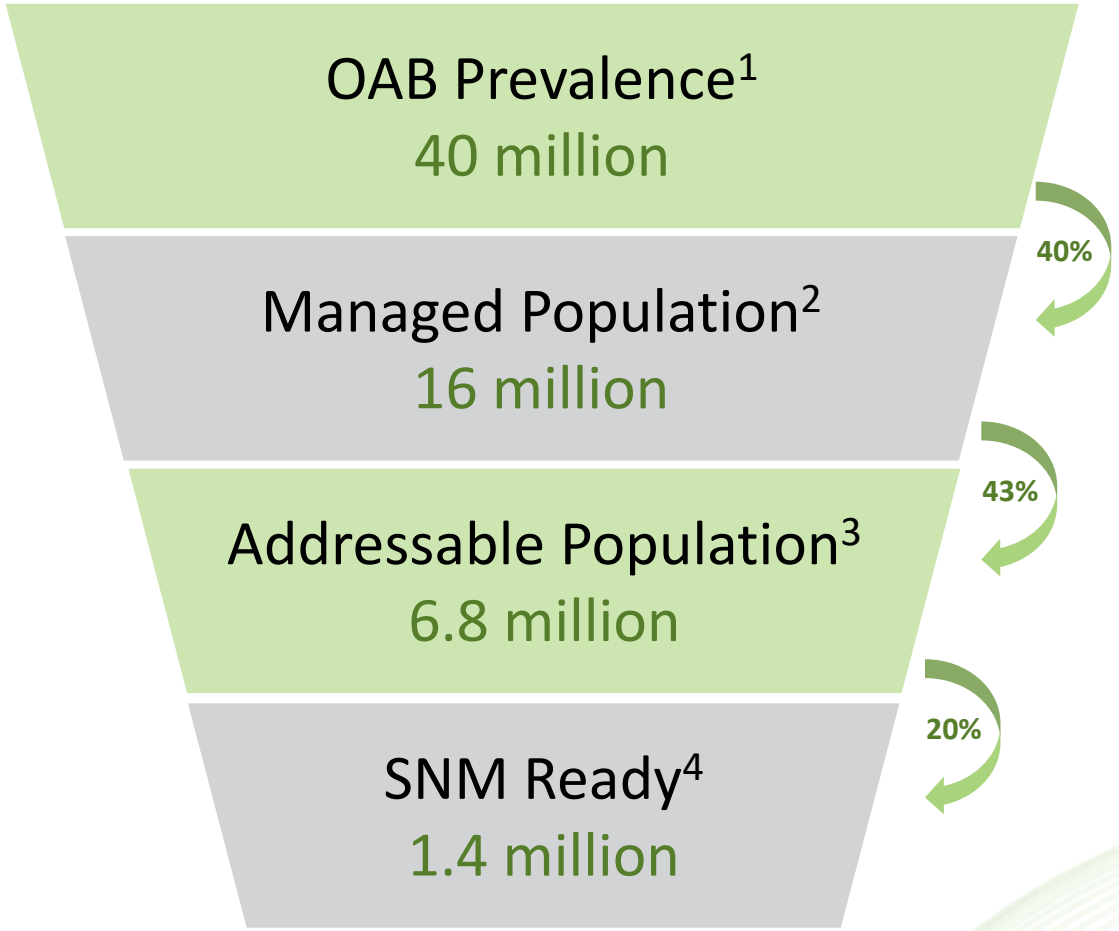


Sacral Neuromodulation – U.S. Market Opportunity

Significant Clinical Need, Low Penetration

- **OAB prevalence:** 40 million (16% or one in 6 adults) have symptoms of OAB
  - Only 40% of this group seeks medical attention **(managed population)** due to embarrassment, misconception that leaking is part of aging, etc.
- **Addressable population:** 6.8 million have underlying cause of OAB that is treatable with SNM
  - Approximately 85% of the addressable population are women
  - Approximately 3.5 million Americans are on second-line drug therapy and working their way through the care pathway[5]
  - A limited number of second line patients have historically advanced to third line therapy
    - Primarily due to lack of awareness of SNM therapy and drawbacks of existing third line therapies (PTNS, Botox and InterStim II)
- **SNM ready population:** 1.4 million are SNM eligible, representing a multibillion-dollar U.S. market opportunity.
  - *An additional 5+ million patients are either active in the care pathway or are currently "lost" (stopped taking meds and suffering in silence)*
  - *In 2020, there were approximately 35,000 SNM procedures in the United States, implying a penetration rate of less than 1% of the addressable population*

U.S. SNM Market Opportunity



1. Stewart WF et al. Prevalence and burden of overactive bladder in the United States. World J Urol. 2003 May;20(6):327-36; Whitehead WE et al. Fecal Incontinence in US adults: Epidemiology and Risk Factors. Gastroenterology. 2009; 137:512–517.
2. Ricci JA et al. Coping strategies and health care-seeking behavior in a US national sample of adults with symptoms suggestive of overactive bladder. Clin Ther. 2001 Aug;23(8):1245-59.
3. Milsom I et al. How widespread are the symptoms of an overactive bladder and how are they managed? A population-based prevalence study. BJU Int. 2001 Jun;87(9):760-6.
   Chancellor MB et al. Long-term patterns of use and treatment failure with anticholinergic agents for overactive bladder. Clin Ther. 2013 Nov;35(11):1744-51.
4. Fan Y et al. Differential diagnosis of female overactive bladder. ICS/IUGA 2010 Toronto abstract; Blaivas JG et al. Differential diagnosis of overactive bladder in men. J Urol. 2009 Dec;182(6):2814-7.
5. IQVIA prescription data.

Axonics r-SNM® System

Approved for full-body 1.5/3.0T MRI scans

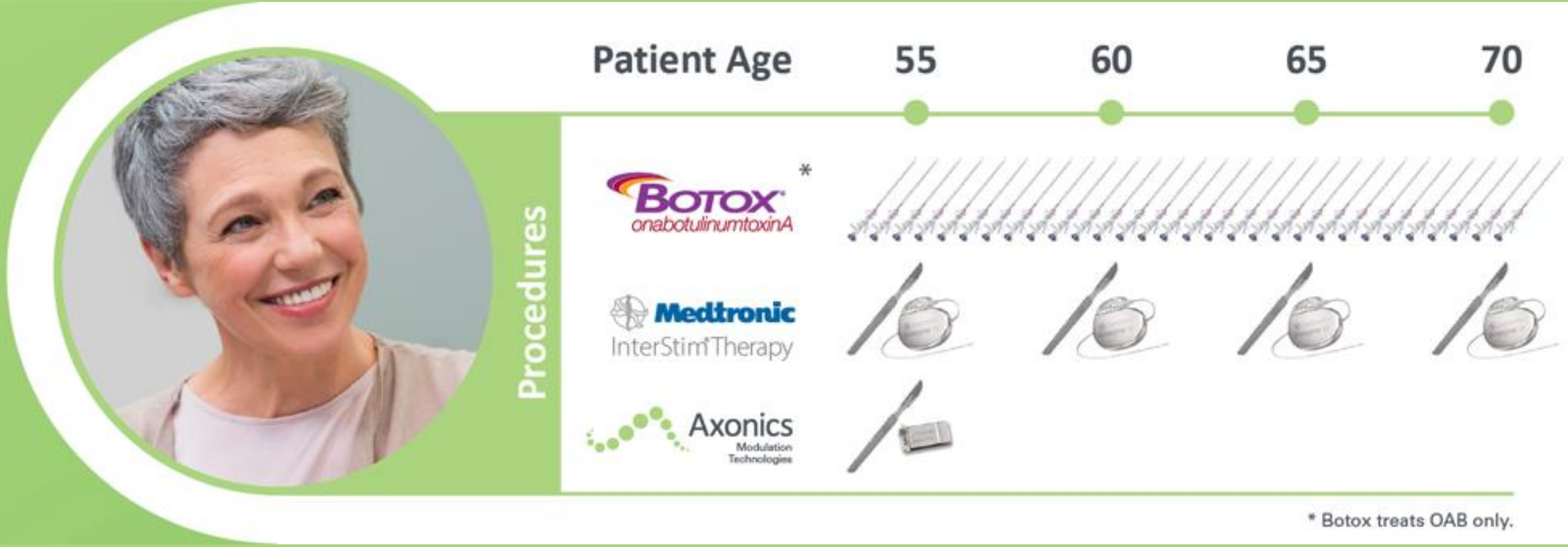
Approved in U.S., Europe, Canada and Australia

Rechargeable miniaturized implantable neurostimulator (INS) with 15+ year life

Simplified programmer, wireless charging system and easy-to-use remote control

Axonics Therapy is Long-lived and Fuss-free

Axonics is approved for 15+ year life in the body



Axonics Therapy significantly reduces the need for frequent treatments or device replacement surgeries

(1) BOTOX injections are typically required every six months to maintain reduction of OAB symptoms.
(2) Patients with the Interstim typically require replacement surgery every three to five years.

Axonics Therapy Has Significant and Distinct Advantages Compared to Legacy SNM Technology

Titanium-ceramic INS construction allows for miniaturization and highly efficient charging with minimal heating

- **Size:** 60% smaller and half the weight compared to InterStim II
- **Implant Life**: 15+ years; 3-4x longer life than InterStim II[1]
- **Constant Current Stimulation**: consistent and reliable therapy by adjusting output automatically
- **Modern, Convenient and Durable:** efficient and safe charging, wireless communication
- **Full-Body MRI Compatible**

1. Based on a comparison of Axonics' label versus published InterStim II label.

Patients Prefer the Axonics System Over InterStim II

Axonics

Axonics surveyed 137 patients being treated with Axonics Therapy who had previously been implanted with a Medtronic InterStim II™ device. The survey asked patients about their experience with Axonics Therapy and to make comparisons to their InterStim experience.

83% of patients would recommend Axonics Therapy to a friend, while only 5% would recommend the InterStim™ II System

Patients said the most beneficial features of their Axonics System are:

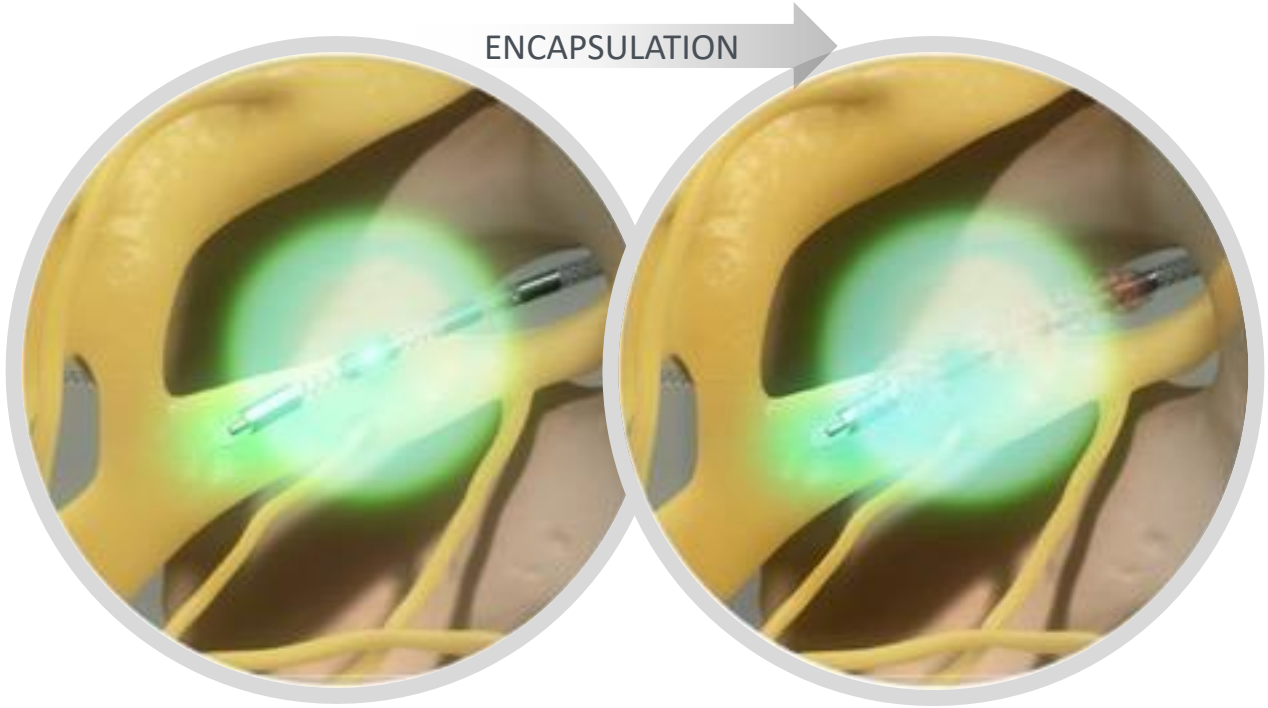
1. Long Life (15 years)
2. MRI Conditional Safety
3. Easy Remote Control

Axonics survey. Company data on file.

Axonics Employs Constant Current Stimulation

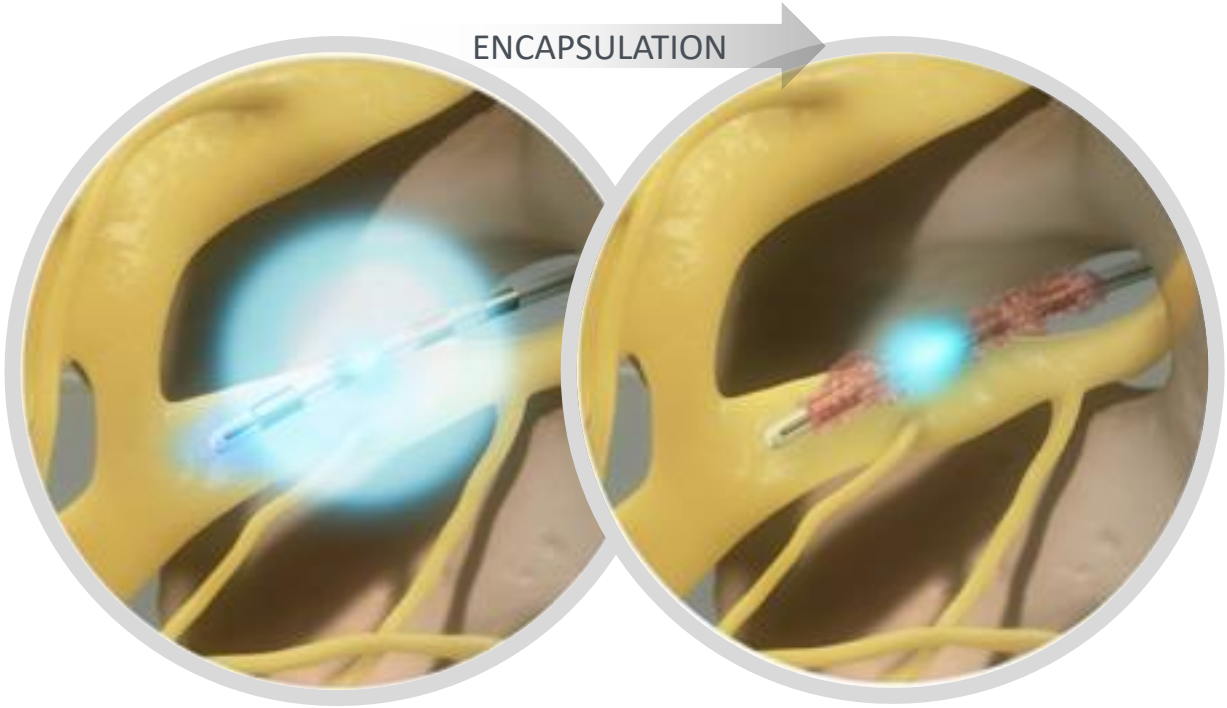
Scar tissue encapsulates foreign objects placed in the body, which causes tissue impedance to increase and creates resistance to the flow of current. The legacy standard of care, InterStim II, employs constant voltage.

CONSTANT CURRENT



Current delivery stays the same, providing more consistent therapy

CONSTANT VOLTAGE



Current delivery decreases resulting in smaller stimulation field

Lettieri C, et al. *Eur J Neurol. 2015*

Axonics System is Efficient and Easy to Recharge

CHARGE ONCE A MONTH

ONE HOUR CHARGE TIME

Overview of Axonics' Clinical Studies

	ARTISAN-SNM	RELAX-OAB
PURPOSE	To gain U.S. FDA approval	Post CE-Mark study
POPULATION	▪ Urinary Urgency Incontinence ▪ 14 sites in U.S. and 5 in Western Europe	▪ Urinary Urgency Incontinence and Urinary Urgency Frequency ▪ 7 sites in Western Europe
SIZE	▪ **129** subjects implanted	▪ **51** subjects implanted
STATUS	▪ 6-month results published in *Journal of Urology* ▪ 1-year results published in *Neurourology and Urodynamics*[1] ▪ 2-year results published in *Neurourology and Urodynamics*[2]	▪ 1-year results published in *Neurourology and Urodynamics* ▪ 2-year results published in the *Neurourology and Urodynamics*[3]

1. ARTISAN 1Y manuscript: https://onlinelibrary.wiley.com/doi/full/10.1002/nau.24376
2. ARTISAN 2Y manuscript: https://onlinelibrary.wiley.com/doi/epdf/10.1002/nau.24615
3. RELAX 2Y manuscript: https://onlinelibrary.wiley.com/doi/10.1002/nau.24317

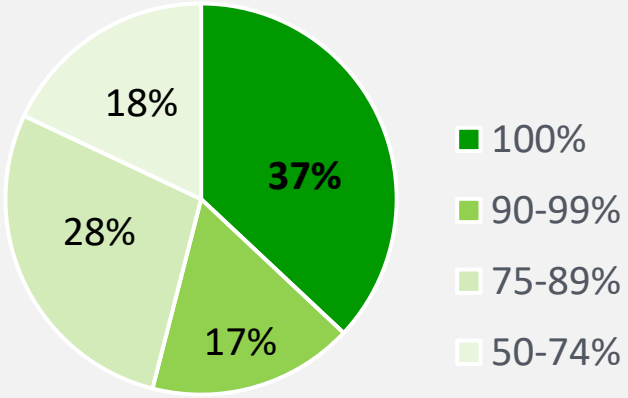
ARTISAN-SNM: 2-year Responder Rate Highest Ever Reported in SNM Clinical Literature

88%

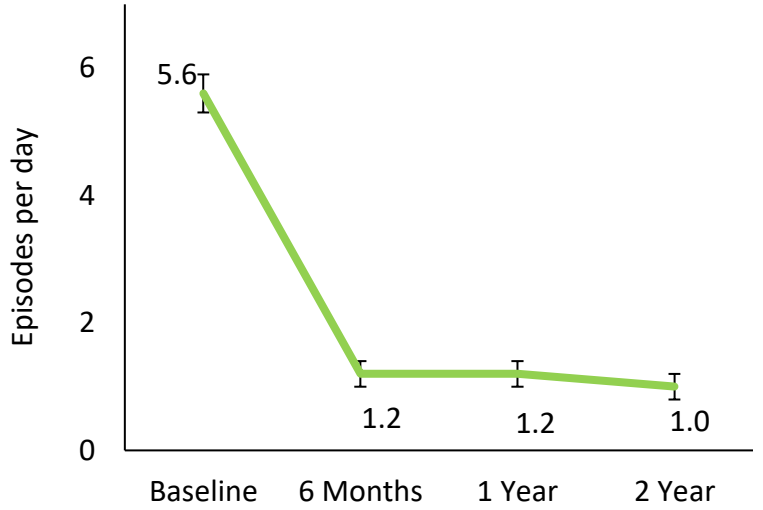
of **all implanted patients** were therapy responders at 2-years post-implant

Magnitude of Urge Leak Reduction in Therapy Responders

(% of subjects)



LEAKS



Safety at 2-Years

- Strong safety profile
- No serious device-related adverse events
- No unanticipated adverse events

Note: number of patients at baseline was 129 and at 2-years was 121.
Source: ARTISAN-SNM pivotal study 2-year data; https://onlinelibrary.wiley.com/doi/epdf/10.1002/nau.24615

Axonics System Has Significant Advantages Compared to Competitor's Rechargeable System

	Medtronic InterStim™ Micro		Axonics		THE AXONICS ADVANTAGE
Implant Life	15 years		15 years		Innovative SmartCase™ technology: the titanium-ceramic neurostimulator design enables safe and durable long-term performance[1]
Stimulation Delivery	Constant Current		Constant Current		• A proven waveform: 88% therapy success at 2-years with limited need to adjust therapy • A simple patient Remote Control, leveraging the benefit of Constant Current stimulation
Full-Body MRI	1.5	3T	1.5	3T	Driven by SmartMRI™ technology, the Axonics System was designed for an easy MRI experience – and was the first SNM System with 3T MRI
Typical Recharging Expected Interval Expected Duration	2 weeks 1 hour		1 Month 1 hour		• Over double the recharge interval offering patients the most flexibility in recharging • Patients will save over 250 hours of charging time compared to Interstim Micro patients • Proven safe and satisfactory charging: 96% satisfaction at 1-year and 100% at 3-years
Programming Approach	Provide patient default programming options; patient "finds" best program		Utilize programming algorithm to find best program; minimize patient burden		Proprietary algorithm based on intraoperative placement and responses simplifying the programming process for clinicians and patients
Clinical Studies validating patient experience	No published studies completed		2 prospective studies		Proven results supported by clinical data and patient satisfaction data

Note: based on a comparison of Axonics' label versus published InterStim Micro label.

Axonics Has Validated the Patient Experience With Strong Clinical Data (ARTISAN-SNM 2-year data)

Clinical data on patient experience	Axonics	Medtronic InterStim™ Micro
Therapy success rate	93%	No clinical data
Patient satisfaction with therapy	94%	No clinical data
Patients would undergo therapy again	93%	No clinical data
Acceptability of charging experience	94%	No clinical data
Charging is “EASY”	91%	No clinical data

Source: ARTISAN-SNM pivotal study 2-year data; https://onlinelibrary.wiley.com/doi/epdf/10.1002/nau.24615

Partnership and Support Are Critical to How Axonics Works with Customers

Axonics is committed to partnering with clinicians to advance patient care by providing support that includes:

- Expert clinical support
- Marketing materials to raise patient awareness
- End to end staff/patient education and training
- Patient Care Manager system to streamline and coordinate patient support

Axonics aims to empower clinical teams to help educate their community and to implement the most innovative technology in sacral neuromodulation therapy.

Sales and Marketing Strategy

We have targeted the top 1,000 implanting centers – urologists, urogynecologists and colorectal surgeons that are trained and have experience performing SNM procedures

SNM Marketing Strategy

- Target high volume U.S. SNM implanters
  - ~90% of historical SNM sales are in the U.S.
  - ~80% of U.S. implant volume is generated by the top 1,000 implanting centers
- Promote broader awareness of SNM therapy with patients and providers
- Focus on building long-lasting physician relationships

SNM Commercialization Strategy

United States

- Initial hiring and training completed in June 2019
- Highly trained commercial team with significant urology and/or neurostimulation experience
- Over 100 sales representatives and regional sales managers in U.S.
- Clinical support staff of ~110

International

- Selectively pursue attractive ex-U.S. markets
- Canada, England, Germany, Netherlands, Norway and Switzerland
- 6 sales reps and 2 clinical support staff in EU

SNM Market is Poised to Double in 3-5 Years

Key Drivers Accelerating SNM Market Growth

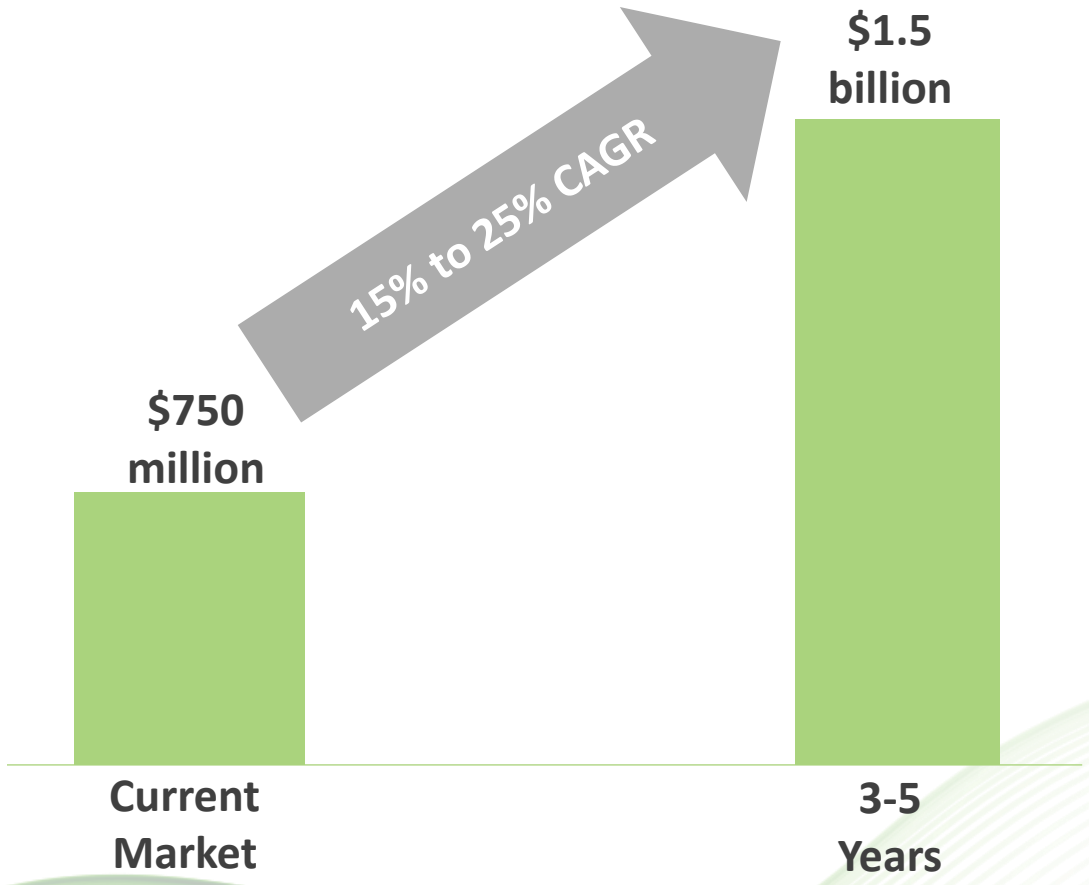
Innovation by Axonics driving more patients to say "Yes" to SNM

- ✓ Long-lived device: 15+ year life is more attractive to patients
- ✓ Full-body MRI compatibility vs. InterStim II required device explant
- ✓ Higher efficacy and patient satisfaction rates than InterStim II
- ✓ Axonics device is 60% smaller than InterStim II
- ✓ Simple, easy to use patient accessories vs. fussy InterStim II
- ✓ Innovation driving market expansion – SCS analogue

Increasing patient awareness

- ✓ SNM historically a "secret therapy" due to incumbent's monopoly and lack of investment in patient awareness
- ✓ Axonics committed to raising awareness in partnership with implanting physicians
- ✓ Investing in direct to patient marketing programs to help educate patients about their condition and therapy options

SNM Market Expansion Opportunity[1]



1. This forward-looking statement is subject to a number of risks, uncertainties and assumptions. Please see disclaimer on slide 2 for more information.

Product Development Pipeline

Second-generation INS that extends the time between **recharging sessions to once a month** was approved by the FDA in April 2020**.**

Began shipping to U.S. customers in August 2020.

Third-generation INS that provides patients the ability to make **broader stimulation parameter adjustments** at home was approved by the FDA in February 2021**.**

Began shipping to U.S. customers in March 2021.

Developed a **non-rechargeable** device that utilizes a primary cell battery.

Anticipated FDA filing in June 2021.[1]

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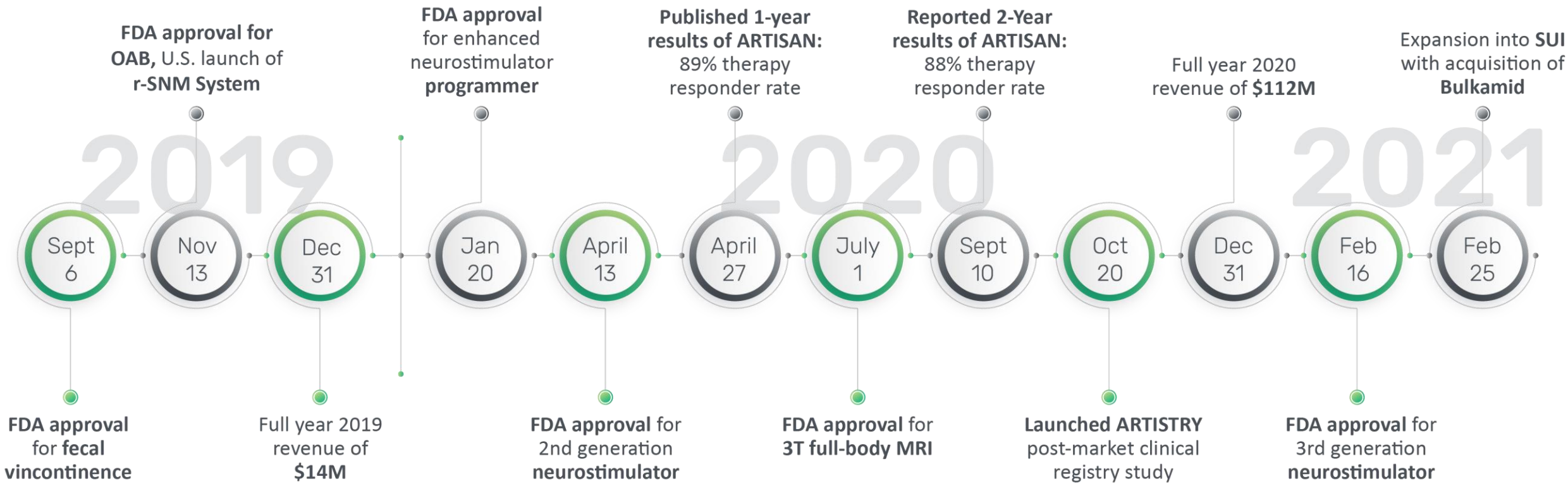
Axonics Milestones



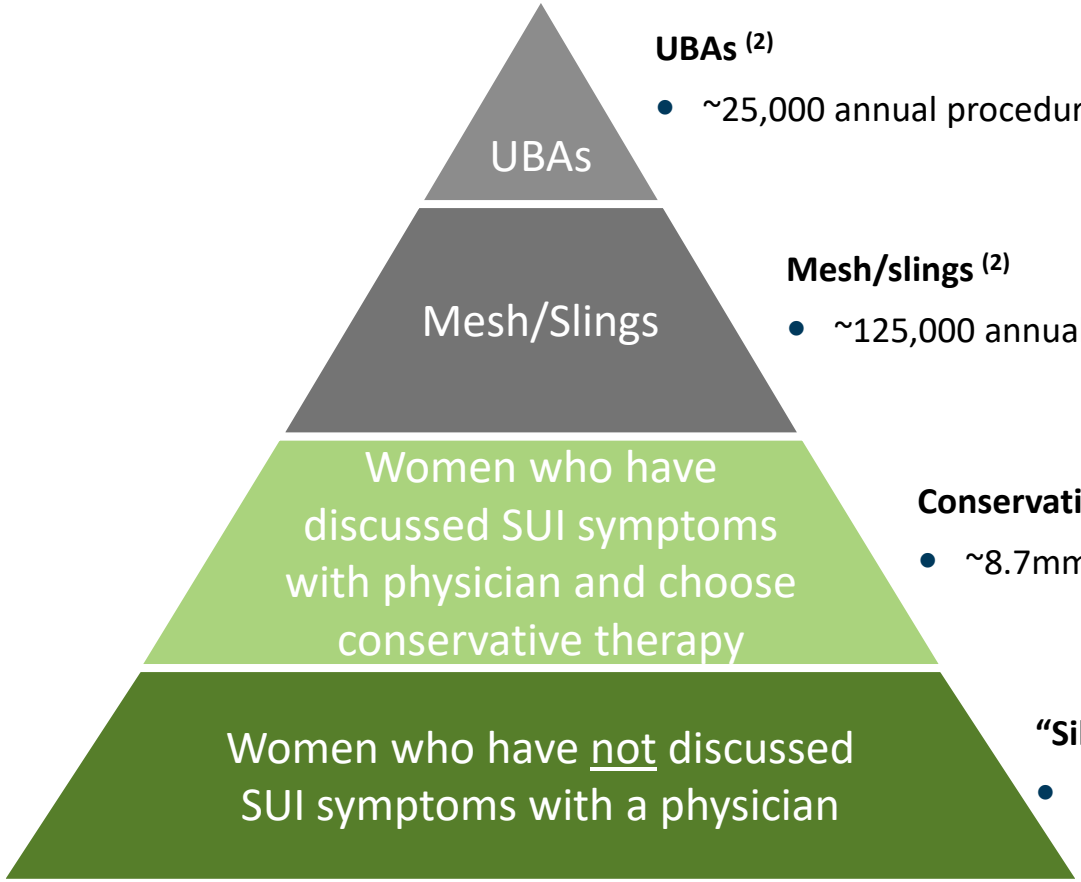
Bulkamid Overview

Significant U.S. Market Opportunity

What is Stress Urinary Incontinence?

- SUI is the unintentional passing of urine during activity or exertion, such as during coughing, laughing, or exercise.
  - It is caused by a weakness of the pelvic floor muscles, preventing the urethra from closing fully when sudden pressure is put on the bladder.
  - SUI afflicts women of all ages, with childbirth as one of the main contributing factors.
  - SUI can have a significant impact on daily life, affecting activities, relationships and emotional well-being.
- The majority of women with SUI are suffering in silence. Of the women who have sought medical treatment, many are offered conservative therapy or opt for no treatment due to limitations of legacy bulking agents and reluctance to undergo a sling procedure.
- Axonics has a significant opportunity to engage with physicians and increase awareness among millions of women suffering in silence that there is an SUI treatment that is clinically proven, safe, and aligns with patients' preference for minimally invasive solutions.

SUI Prevalence of ~20 Million Women in the U.S. (1)



UBAs (2)
- ~25,000 annual procedures

Mesh/slings (2)
- ~125,000 annual procedures

Conservative Therapy (3)
- ~8.7mm patients

"Silent Suffering" (3)
- ~10.8mm patients

(1) Evaluation of uncomplicated stress urinary incontinence in women before surgical treatment. Committee Opinion No. 603. The American College of Obstetricians and Gynecologists. *Obstetrics & Gynecology.* 2014;123:1403–7; U.S. Census Bureau.
(2) Definitive Healthcare claims data and company estimates.
(3) Diokno AC, Burgio K, Fultz NH, Kinchen KS, Obenchain R, Bump RC. Medical and self-care practices reported by women with urinary incontinence. *American Journal of Managed Care*. 2004 Feb;10(2 Pt 1):69-78. PMID: 15011807.

Bulkamid Overview

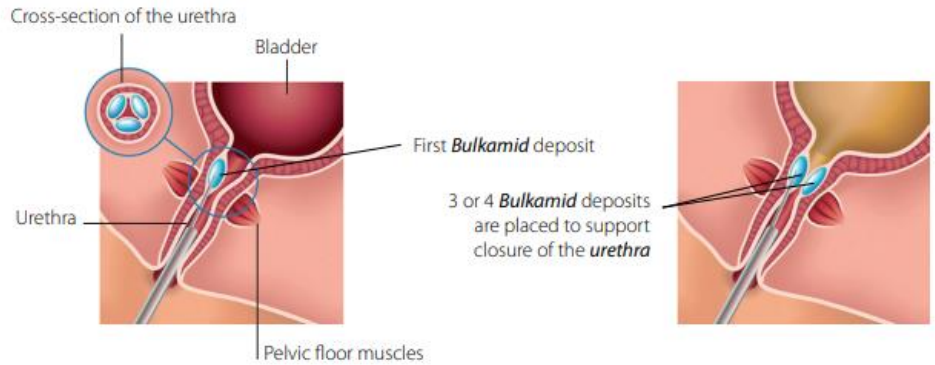
Best-in-class urethral bulking agent (UBA) indicated for the treatment of female stress urinary incontinence (SUI) – urogynecologist / urologist call point

- ✓ SUI treatment with 70-80% success rate
- ✓ Provides women durable SUI relief out to 7 years
- ✓ 70,000+ patients treated to-date across 25+ countries
- ✓ Simple, fast, easy-to-learn and perform procedure
- ✓ Minimally invasive – performed in physician's office or outpatient facility
- ✓ Regulatory approval in U.S. and E.U. with established reimbursement
- ✓ Large, highly underpenetrated market, particularly in U.S.
- ✓ U.S. commercialization in launch phase – strong momentum following launch in mid-2020

Bulkamid is a Next-Generation Urethral Bulking Agent

Bulkamid Procedure

- Bulkamid is injected into the soft tissue of the urethra and adds volume to support the closing mechanism of the urethra, preventing urine from leaking out unintentionally during normal daily activities.
  - Bulkamid is biocompatible, consisting of 97.5% water and 2.5% polyacrylamide.
  - The injections are made into 3-4 locations in the urethral wall; the total volume injected is 1.5-2.0 mL.
- Urethral bulking does not close the urethra totally; the urethra still opens normally to allow for urination.
- The Bulkamid procedure takes around 10-15 minutes and is performed in an outpatient facility under a local anesthetic.
- FDA approved in 2020; CE Mark in 2003.



Not All Bulking Agents Are the Same

- Bulkamid is a non-particulate hydrogel whose bulking effect is directly linked to the volume of gel injected into the urethral wall. Bulkamid maintains its size in the body's tissue as it is resistant to absorption and degradation, making the final cushions created predictable, controllable, and precise.
- Competing particulate-based agents achieve their bulking effect by the micro particles themselves and the body's inflammatory reaction to the particles. As such, the final volume of the cushion in the urethral wall cannot be predicted accurately.

Bulkamid is Attractive, Clinically Effective and Safe

- **Appealing to patients.** Bulkamid was found to be the preferred SUI treatment by women, with 64% selecting this option over other SUI treatments like sling surgery [(1)]
- **Clinically effective.** Numerous clinical studies providing evidence of short-term and long-term efficacy.
  - In FDA clinical study, at 12 months over 75% of women reported that their incontinence was either "dry, much improved or improved" and ~50% of women reported zero stress urinary incontinence episodes. [(2)]
  - In two European studies with results out to 5 and 7 years, ~70-80% of women reported treatment success. [(3)]
- **Safety profile** established over 15+ years with no serious complications.

(1) Dwyer, L., Weaver, E., Rajai, A. et al. "Voice your choice": a study of women's choice of surgery for primary stress urinary incontinence. Int Urogynecol J 31, 769–777 (2020).
(2) Sokol ER, Karram MM, Dmochowski R. Efficacy and safety of polyacrylamide hydrogel for the treatment of female stress incontinence: a randomized, prospective, multicenter North American study. J Urol. 2014 Sep;192(3):843-9
(3) Pai A, Al-Singary W. Durability, safety and efficacy of polyacrylamide hydrogel (Bulkamid(®)) in the management of stress and mixed urinary incontinence: three year follow up outcomes. Cent European J Urol. 2015;68(4):428-33
Brosche T, Kuhn A, Lobodasch K, Sokol ER. Seven-year efficacy and safety outcomes of Bulkamid for the treatment of stress urinary incontinence. Neurourology and Urodynamics. 2021;40:502–508.

Axonics / Bulkamid Combination: a Global Leader for Incontinence Solutions

Clinically Differentiated SUI Solution

- Unique, next-gen bulking agent that offers alternative to invasive sling surgery and less effective UBAs
- Retains bulking characteristics for many years, providing durable, long-lasting relief of SUI symptoms
- Extensive clinical validation with strong safety profile: over 70,000 women treated to date

Leverages Existing Commercial Footprint

- Same call point as SNM – urogynecologists and urologists
- Leverages commercial footprint of ~250-person field team in U.S. and E.U.
- Extends urology platform and enhances value proposition to customers: solutions for both OAB and SUI

Large, Highly Underpenetrated Market

- Approximately 20 million women suffer from SUI in U.S. alone
- Majority of women are unaware of treatment options and have not sought treatment
- Recent commercial launch of Bulkamid in U.S. has created excitement among clinicians

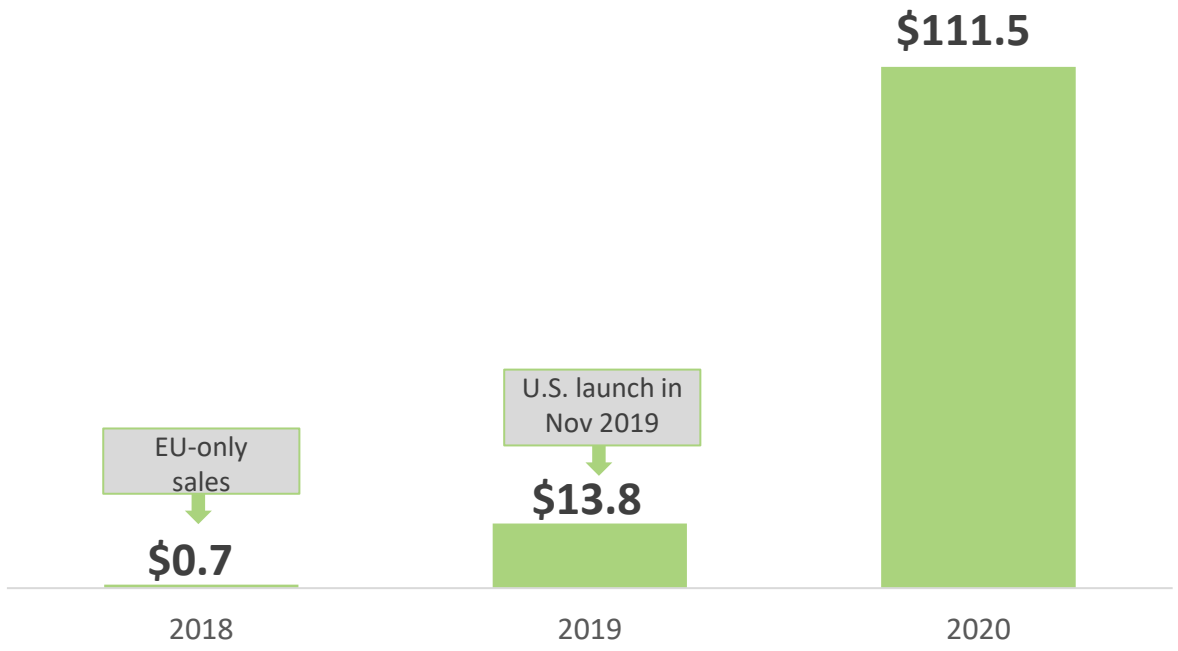
Compelling Financial Profile

- Accretive to revenue growth, gross margin, and operating margin
- Opportunity to meaningfully expand contribution margin given inherent salesforce leverage

Financial Overview

Net Revenue

($ in millions)



FY21 Revenue Guidance[1]

- $176-$180 million, an increase of 58-61% compared to FY20

Gross Margins

- 2020 gross margin of 60.2%, up from 53.0% in 2019
- Low-to-mid 70s gross margin target over next few years[1]

Balance Sheet

- Cash: $320 million *(03/31/21 pro forma May 2021 equity offering)*
- Debt: $75 million *(03/31/21)*

1. This forward-looking statement is subject to a number of risks, uncertainties and assumptions. Please see disclaimer on slide 2 for more information.

Axonics Investment Thesis

Axonics

OAB and SUI are highly underpenetrated and poised for significant market expansion

Axonics' incontinence solutions generate high rates of physician and patient satisfaction

Best-in-class clinical data with proven efficacy and safety profile

Commercial team with significant experience in urology and neurostimulation

Strong organic growth outlook with attractive margin profile