

Press release
Malmö, Sweden August 23, 2018

Acarix presenting the CADScor®System at ESC in Munich: a revolutionary technology for early and rapid rule out of Coronary Artery Disease

Visit us at booth D500 Exhibition hall A2

Acarix AB's (publ) ("Acarix") ultra-sensitive acoustic CADScor®System for Coronary Artery Disease risk assessment will be on display at ESC in Munich, Germany, August 25-28. The CADScor®System has been validated clinically to rule out Coronary Artery Disease with 96 to 97% negative predictive value. The device is gaining interest and increased use across Germany and Denmark, key Swedish hospitals are testing the system and expansion in other European countries is under way. At ESC 2018, both in the exhibition booth and at a special session Tuesday Aug 28, 15:45-16:40, "e-Cardiology / Digital Health", there will be opportunities to get first-hand information about the CADScor®System and to meet experts with experience from using the system in clinical practice.

The low diagnostic yield of current non-invasive testing in patients with suspected coronary artery disease has recently been described by Christina Thering et al.¹ for a large hospital based sample. Acarix CADScor®System has been developed to add a reliable and simple diagnostic aid to the non-invasive diagnostic landscape that is easy to handle as a first line test in each clinical setting. The system is noninvasive, radiation free and delivers a result in less than 10 minutes.

At ESC, visitors will hear how the performance of the CADScor®System has recently been further documented. The system's Algorithm v3 database contains 2260 patients and performs with a sensitivity of 88.7%, specificity of 53.5% and a negative predictive value (NPV) of 95.9% for diagnosing CAD (stenosis >50%) vs. non-CAD (stenosis < 30%). The NPV is 97.2% for diagnosing CAD (stenosis >50%) vs. non-obstructive CAD (stenosis >30% - <50%) plus non-CAD (stenosis < 30%) (publication in preparation). Furthermore, a new study, Dan-NICAD II, is ongoing involving 1,500-2,000 patients with a low-to-intermediate likelihood of CAD from four Danish hospitals. The results are expected to further improve the CADScor®System's already high NPV, to include patients aged <40 years and to provide health economic documentation supporting its use as a fast and safe frontline assessment to reduce patient referrals.

Acarix interim CEO Christian Lindholm commented: *"Coronary Artery Disease affects more than 120 million people worldwide but the current diagnostic pathway, which can rapidly escalate to imaging and coronary angiograph, can be significantly improved. For a substantial proportion of patients presenting with chest pain symptoms to their general practitioner, CAD can be ruled out with our CADScor®System. Consequently, patients with symptoms unrelated to CAD do not have to be referred to expensive and potentially harmful, further tests while only the patients who need further diagnostic tests get them. We are highly encouraged by feedback from our growing German user base and look forward to generating further interest at ESC."*

Acarix CADScor®System is on display at booth D500 - Exhibition Hall A2, ESC 2018

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Notes to editors:

[Acarix, CADScor®System and cardiac sound measurement](#)

Acarix was established in 2009 and is listed on Nasdaq First North Premier. Acarix's CADScor®System uses

an advanced sensor placed on the skin above the heart to listen to the sounds of cardiac contraction movement and turbulent flow. It has been designed to be an all-in-one system in the sense that the heart signal will be recorded, processed, and displayed as a patient specific score, the CAD-score, on the device screen. Readings are obtained in less than 8 minutes. Safe and suitable for use in both out- and inpatient settings, the CADScor® System thus has the potential to play a major role in patient triage, avoiding the need for many patients to undergo stressful invasive diagnostic procedures.

Acarix CADScore System in the scientific program, Tuesday Aug 28, 15:45-16:40

Samuel Emil SCHMIDT (Aalborg O, Denmark) will present the Acarix CADScore System on the Digital Health Stage - Exhibition Hall 3 during the special session "e-Cardiology / Digital Health". Dr SCHMIDT will be available for media immediately after the session.

Experts prepared to talk to media are

Claus Bo Vøge Christensen

Since its founding in 2009, he has been working as COO for Acarix in Lyngby, Denmark. He leads the clinical research and production of the CADScor® system. Contact: dkcbc@acarix.com

Prof. Dr. Samuel Schmitt

Professor in the Department of Health Informatics and Computer Science at the University of Aalborg, Denmark. Prof. Schmidt has been working on the idea of acoustic detection of coronary stenoses since 2004 and has published extensively on this topic. Contact: sschmidt@hst.aau.dk

Prof. Dr. Morten Bøttcher

is Head of the Center for Cardiac Imaging at the Western Hospital Unit in Denmark and Associate Professor at the University of Aarhus. Dr. Bøttcher is the principle investigator of the Dan NICAD studies and has a long-term interest in research activities in the non-invasive and invasive diagnosis of ischemic heart disease. Contact: mboe@dadlnet.dk

Prof. Dr. Peter Clemmensen

Professor of Cardiology at the Heart Center Hamburg-Eppendorf and the Nykøbing F Hospital, University of Southern Denmark, Odense, Denmark. His research focuses primarily on the assessment of reperfusion therapies in patients with myocardial infarction, invasive cardiology and antithrombotic therapies as well as risk stratification in patients with CHD, including cardiac markers and electrocardiology. Contact: p.clemmensen@uke.de

Contact at the conference center in Munich for setting up interviews: Per Persson; seppe@acarix.com

Presstext: www.acarix.com

Recently published

Dan-NICAD 2 study: Diagnostic performance of an acoustic-based system for coronary artery disease risk stratification <http://heart.bmj.com/content/early/2017/11/09/heartjnl-2017-311944>.

“Low diagnostic yield of non-invasive testing in patients with suspected coronary artery disease: results from a large unselected hospital-based sample”: *European Heart Journal - Quality of Care and Clinical Outcomes*, qcx048, <https://doi.org/10.1093/ehjqcco/qcx048> (<https://academic.oup.com/ehjqcco/advance-article-abstract/doi/10.1093/ehjqcco/qcx048/4756379?redirectedFrom=fulltext>)

1) Thering C et al. Low diagnostic yield of non-invasive testing in patients with suspected coronary artery disease: results from a large unselected hospital-based sample. *European Heart Journal - Quality of Care and Clinical Outcomes*, <https://doi.org/10.1093/ehjqcco/qcx048>
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