



CytoSorbents™

Working to save lives
together.

NASDAQ: CTSO

Investor Presentation
August 2026

Safe Harbor Statement

Statements in this presentation include forward-looking statements intended to qualify for the safe harbor from liability established by the Private Securities Litigation Reform Act of 1995. These forward-looking statements include, but are not limited to, statements about our plans, objectives, future targets and outlooks for our business, representations and contentions, and the outcome of our regulatory submissions, and are not historical facts and typically are identified by use of terms such as “may,” “should,” “could,” “expect,” “plan,” “anticipate,” “believe,” “estimate,” “predict,” “potential,” “continue” and similar words, although some forward-looking statements are expressed differently. You should be aware that the forward-looking statements in this presentation represent management’s current judgment and expectations, but our actual results, events and performance could differ materially from those in the forward-looking statements. Factors which could cause or contribute to such differences include, but are not limited to, our restructuring of our direct sales team and strategy in Germany, the impact of geopolitical events including the recent war in Iran, our ability to successfully obtain U.S. FDA and Health Canada regulatory approval and marketing authorization, our ability to complete our strategic workforce and cost reduction plan to reduce costs, optimize operations, and achieve operating cash-flow break-even in the second half of 2026, our ability to appropriately finance the Company, including our ability to meet our financial obligations and comply with the covenants under our existing debt agreement, our ability to fund and develop new and existing research and development programs, and the risks discussed in our Annual Report on Form 10-K, filed with the SEC on March 30, 2026, as updated by the risks reported in our Quarterly Reports on Form 10-Q, and in the press releases and other communications to shareholders issued by us from time to time which attempt to advise interested parties of the risks and factors which may affect our business. We caution you not to place undue reliance upon any such forward-looking statements. We undertake no obligation to publicly update or revise any forward-looking statements, whether as a result of new information, future events, or otherwise, other than as required under the Federal securities laws.

About Non-GAAP Financial Measures

To supplement our condensed consolidated financial statements, we use the non-GAAP financial measures of EBITDA, which measures earnings before interest, income taxes, depreciation and amortization, and Adjusted EBITDA which further excludes non-cash stock compensation expense, the gain or loss of foreign exchange translation, and restructuring charges. We also use the non-GAAP financial measures of Adjusted Net Income or Loss and Adjusted Net Income or Loss Per Share which excludes non-cash stock compensation expense, the gain or loss of foreign exchange translation, and restructuring charges from Net Loss and Net Loss Per Share, respectively. Additionally, we use the non-GAAP financial measure of Negative Free Cash Flow which consists of net cash used in operating activities plus net cash used in investing activities. These non-GAAP measures are not based on any comprehensive set of accounting rules or principles and should not be considered a substitute for, or superior to, financial measures calculated in accordance with GAAP and may be different from non-GAAP measures used by other companies. In addition, these non-GAAP measures should be read in conjunction with our financial statements prepared in accordance with GAAP. The reconciliations of the non-GAAP measures to the most directly comparable financial measures calculated and presented in accordance with GAAP should be carefully evaluated. We use these non-GAAP financial measures for financial and operational decision-making and as a means to evaluate period-to-period comparisons. We believe that these non-GAAP financial measures provide meaningful supplemental information regarding our performance and that both management and investors benefit from referring to these non-GAAP financial measures in assessing our performance and when planning, forecasting, and analyzing future periods. We believe these non-GAAP financial measures are useful to investors because (1) they allow for greater transparency with respect to key metrics used by management in its financial and operational decision-making and (2) they are used by investors and the analyst community to help them analyze the performance of our business, the Company’s cash available for operations, and the Company’s ability to meet future capital expenditure and working capital requirements. For a reconciliation of non-GAAP financial measures to the most comparable GAAP measure, see the reconciliation included in the financial tables. All non-GAAP adjustments are presented pre-tax.

Regulatory Disclaimer

CytoSorb

- CE Mark Approval in Europe for the following APPROVED Indications for Use:
 - Cytokine Removal
 - Bilirubin and Myoglobin Removal
 - Ticagrelor and Rivaroxaban removal during cardiothoracic surgery
- CytoSorb is NOT yet cleared/approved by the FDA or Health Canada

DrugSorb-ATR

- INVESTIGATIONAL DEVICE: Limited by U.S. Federal Law to Investigational Use Only
- It is NOT yet cleared/approved by FDA, Health Canada, or other Global Regulatory Agency, and it is NOT commercially available for sale
- Proposed Indication for Use: *To reduce the severity of perioperative bleeding in patients undergoing coronary artery bypass grafting (CABG) within 2 days of ticagrelor discontinuation*

HEMODEFEND-BGA

- Pre-clinical device preparing for human clinical trials
- It is NOT cleared/approved by FDA, Health Canada, or other Global Regulatory Agency

CytoSorbents Overview

- U.S.-based medical device company (Nasdaq: CTSO) specializing in blood purification to treat life-threatening conditions in the intensive care unit and cardiac surgery with its proprietary, biocompatible, porous polymer bead technology

CytoSorb is the first and most studied CE-mark approved extracorporeal cytokine adsorber in the European Union, is manufactured by CytoSorbents in the U.S.

- Distributed in more than 70 countries worldwide, with 300,000+ human treatments to date
- Approved for:
 - Cytokine Removal
 - Bilirubin and Myoglobin Removal
 - Ticagrelor and Rivaroxaban removal during cardiothoracic surgery
- \$37.3M in sales (ttm 6/30/26) with 72% gross margins – High margin razorblade
- Strategic Partnerships with Fresenius Medical Care, B Braun, and Terumo Cardiovascular
- U.S. government support for the technology with ~\$50M in grants, contracts, other non-dilutive funds from NIH, NHLBI, DARPA, DHA, US Army, US Air Force, JPEO-CBD, USSOCOM, etc.

DrugSorb^{ATR} Pursuing U.S. FDA and Health Canada approval of DrugSorb-ATR to reduce perioperative bleeding risk in patients on blood thinners during cardiac surgery

HEMODEFEND-BGA Funded by \$16M in DoD funding – targeting the holy grail of “Universal Plasma”

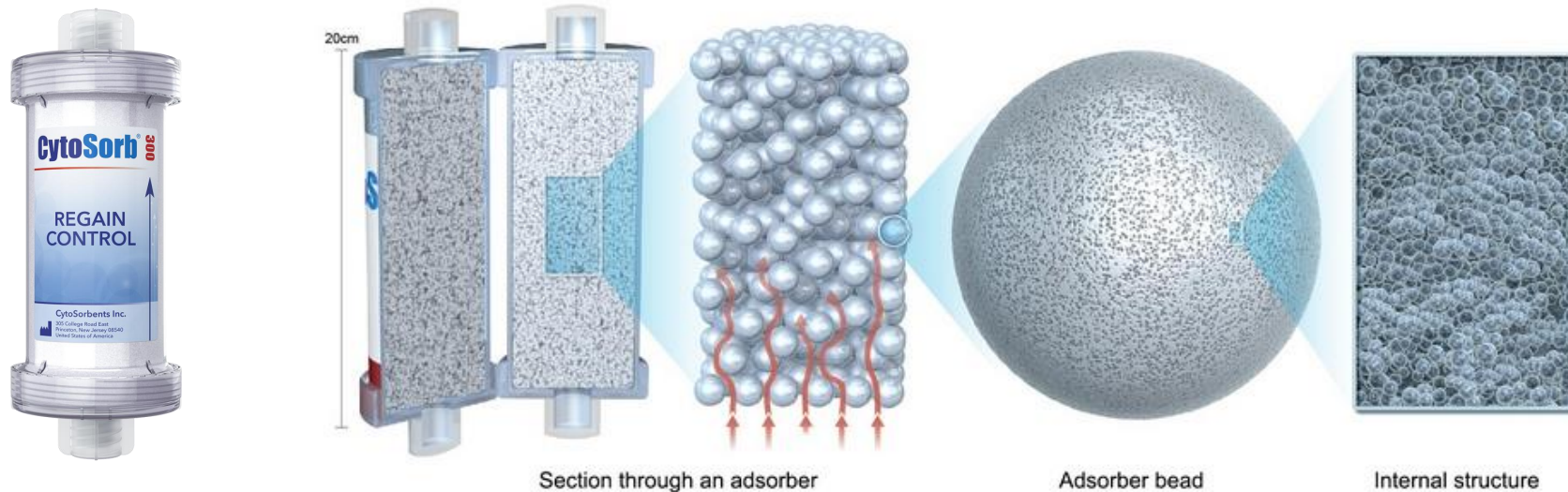
- Q2 2026 cash burn was \$200K (less restructuring costs). Anticipating operating cash flow breakeven in 2H 2026 and future profitability



CytoSorbentsTM

The Power of the Bead

Hemocompatible, highly porous polymer bead platform technology that act like tiny sponges to remove harmful substances from blood by pore capture, adsorption, and concentration

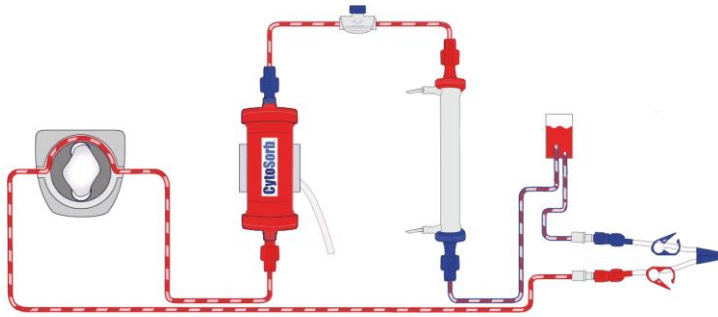


- Excellent removal of a broad range of substances from whole blood and plasma
- Solid state porous polymer chemistry that does not use ligands, antibodies, cells, or biologics
- 20 issued U.S. patents and multiple patents issued and pending worldwide

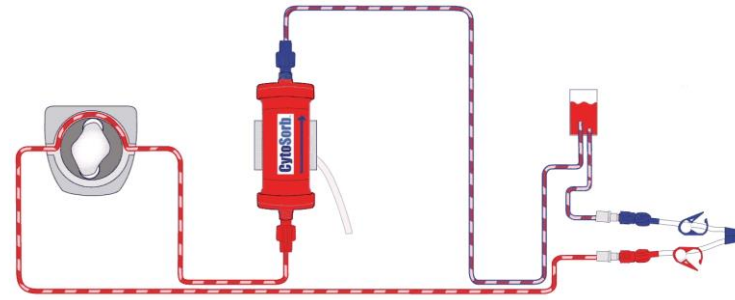
Products are “Plug and Play” Compatible

Compatible with Existing Blood Pump Infrastructure In Hospitals Today

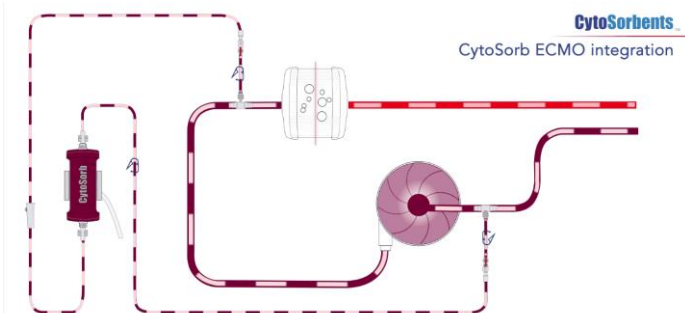
Dialysis or CRRT (Continuous Renal Replacement Therapy)



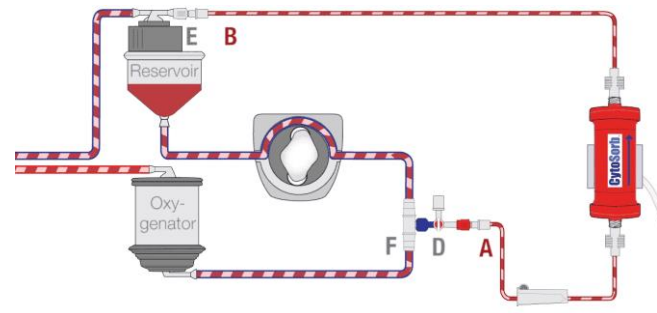
Hemoperfusion (Standalone Treatment)



ECMO (Extracorporeal Membrane Oxygenation)

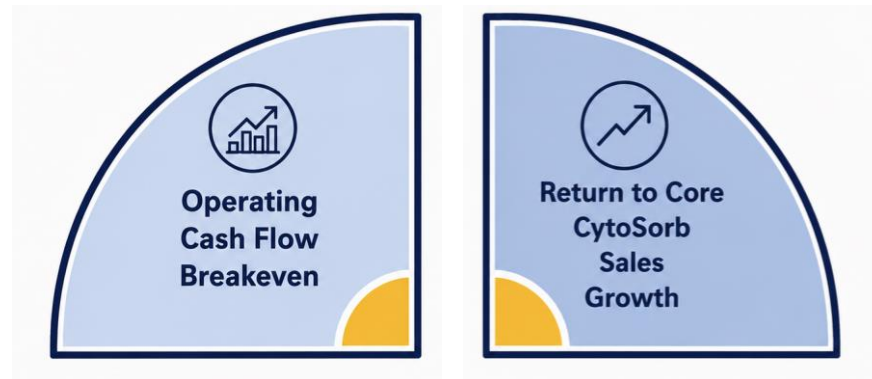


CPB (Cardiopulmonary Bypass)



Four Independent Key Drivers of Value Creation

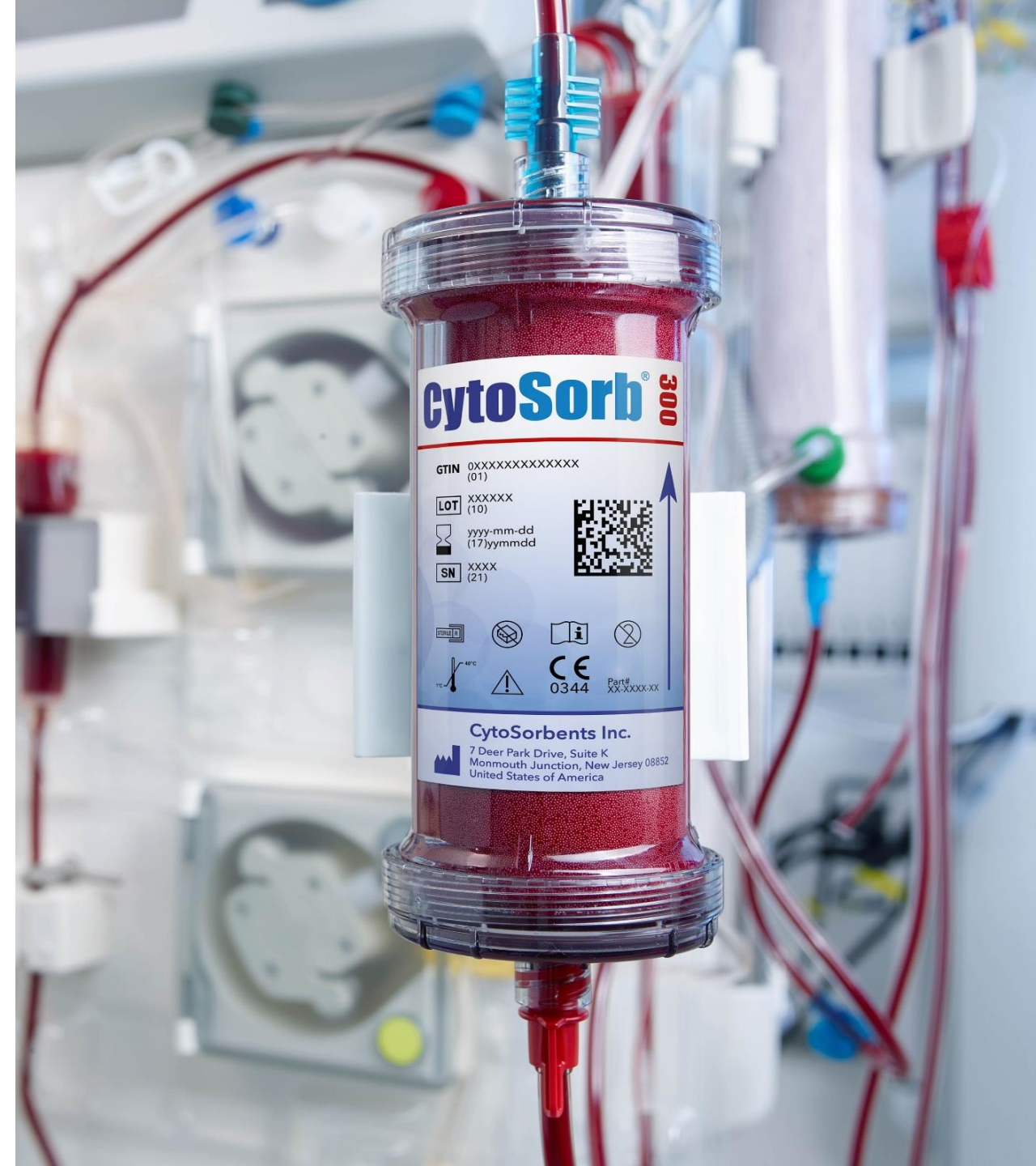




CytoSorb

Our Core Business

CytoSorb is E.U. CE Mark approved but not yet cleared or approved in the U.S./Canada



CytoSorb is Expanding the Dimension of Blood Purification

CytoSorb is a powerful blood purification technology CE-mark approved in the E.U. to reduce cytokines, bilirubin, myoglobin, and blood thinners like ticagrelor & rivaroxaban. It removes many substances that dialysis cannot.

CytoSorb is designed to work like the liver



Large Molecules and
Fat soluble substances

Cytokines
Inflammatory mediators
Bacterial toxins
Liver toxins
Proteins and peptides
Fat-soluble drugs



Dialysis is designed to work like the kidney



Small Molecules and
Water soluble substances

Urea, Ammonia
Electrolytes
Water
Water-soluble drugs



CytoSorb has 7 football fields of surface area to bind toxins versus
 $\frac{3}{4}$ of a ping pong table for a dialyzer

Targets Deadly Conditions That Afflict Millions of People

Critical Care

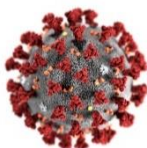
Removes the “fuel to the fire” of massive uncontrolled inflammation that is often associated with organ failure and death



Sepsis



Influenza



COVID-19



Lung Injury



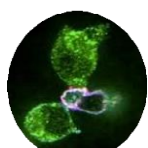
Trauma



Surgical Complications



Burn Injury



Cytokine Release Syndrome



Liver Failure



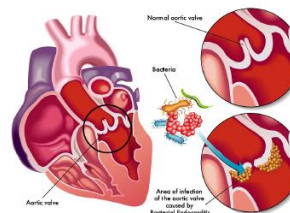
Pancreatitis

Cardiothoracic Surgery

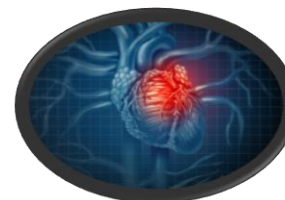
Reduces inflammation and blood thinners, targeting reduction in complications of cardiac surgery like sepsis, bleeding, shock, and others



Life-threatening bleeding due to anti-thrombotic “blood thinners”



Infective Endocarditis



High Risk Procedures

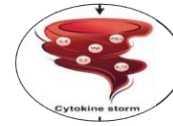
CytoSorb Has Much Larger ICU Opportunity than Dialysis



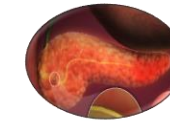
Sepsis, Septic Shock,
Other Shock



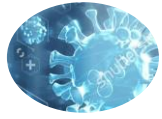
Liver
failure



Cytokine storm/
Cytokine release
syndrome



Pancreatitis



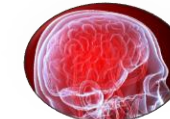
Infectious diseases
(flu, COVID-19, other)



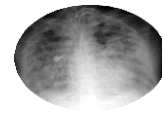
Burn injury



Post-surgical
complications
Organ transplant



Neuroinflammation



Acute Respiratory
Distress Syndrome
(ARDS)



Trauma,
Rhabdomyolysis



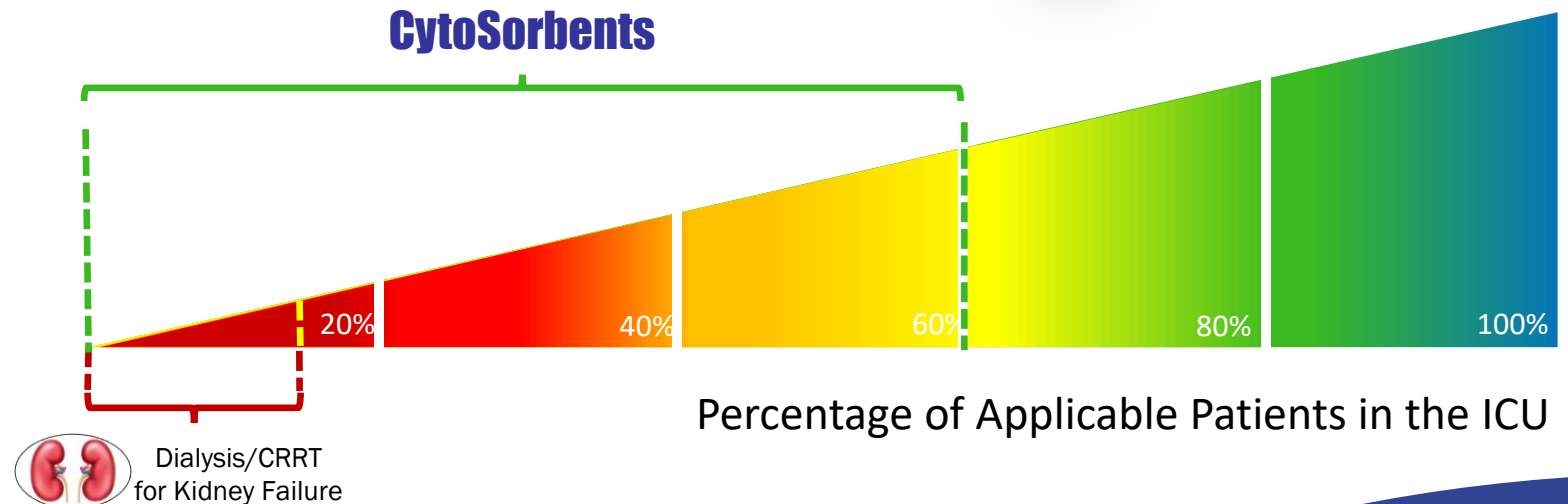
High risk surgical
procedures, aortic
surgery, Infective
endocarditis



Drug overdose
Blood thinner toxicity

CytoSorb, by removing cytokines and inflammatory toxins, can be used to help reduce severe inflammation that plays a dangerous role in 40-60% of patients in the ICU.

Compare this to the only 10-15% of patients who require dialysis in the ICU that generates billions of dollars in revenue for major dialysis companies.



CytoSorbentsTM

CytoSorb Supported by a Wealth of Clinical Data

CytoSorbents™

CytoSorbents & TechnologyFor Healthcare ProfessionalsAbout usFor InvestorsEvents & Media

Literature Database

03/2026

Hemoadsorption in Critical Care: Real World Outcomes from the International COSMOS Registry

Ferrer R, Kirschning T, Unglaube M, Malewicz-Oeck N, Kreutz J, Tholl M, Tyczynski B, Hendler D, Klaus T, Taccone FS. Crit Care 2026; 30(1):P294

Introduction: COSMOS is a prospective, international registry (NCT05146336) capturing utilization patterns and clinical outcomes with CytoSorb® (CS) use in critical care patients...

Read article

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See tags

02/2026

The International, Prospective COSMOS (CytoSorb® TreatMent Of Critically Ill PatientS) Registry: Results from the first 300 patients

Ferrer R, Thielmann M, Unglaube M, Kirschning T, Baumann A, Kreutz J, Kribben A, Tyczynski B, Guenther U, Hendler D, Scharf C, Germano N, Bellgardt M, El-Essawi A, Hohlstein P, Guenther T, Schulte PC, Auccella F, Marquez Fernandez M, Koestenberger M, Bottari G, Hidalgo J, Teboul JL, Tomescu D, Klaus T, Fan W, Scheier J, Deliaris EN, Taccone FS. J Anesth Analg & Crit Care 2026; 6(1):41

Background

The international prospective COSMOS Registry tracks CytoSorb® (CS) utilization patterns...

Read article

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197 / 1186 documents with these filter options

liver failure

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New! (2)

Peer Reviewed Published Data (111)

Recommended Literature (8)

Document type

And

Or

Animal models (1)

Case of the Week / Month (110)

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Clinical study (8)

In Vitro study (5)

Multicentre study (6)

2025 WEBINAR

REGISTER NOW

Turning the Tide in Sepsis and Septic Shock: Real World Insights with CytoSorb®

PD Dr. Kevin Pilarczyk

Prof. Zsolt Molnar

Dr. Tobias Hübner

Dr. Phillip Chan

Wednesday, Sep 10, 2025
5pm CEST / 11am EDT

CytoSorbents™

2025 WEBINAR

REGISTER NOW

New insights on hemoadsorption in endocarditis

Prof. T. Folliguet

Prof. D. Wendt

Sept 3, 2025
17:00-18:00 CEST

CytoSorbents™

Recording now available!

What's new in Rhabdomyolysis?

Prof. J. Kielstein, Dr. V. Humbert

CytoSorbents™

CytoSorb® in Septic Shock:

New meta-analysis highlights promising benefits of adjunctive hemoadsorption therapy

Targeted use of CytoSorb linked to improved survival and hemodynamic stability

CytoSorbents™

Recording now available!

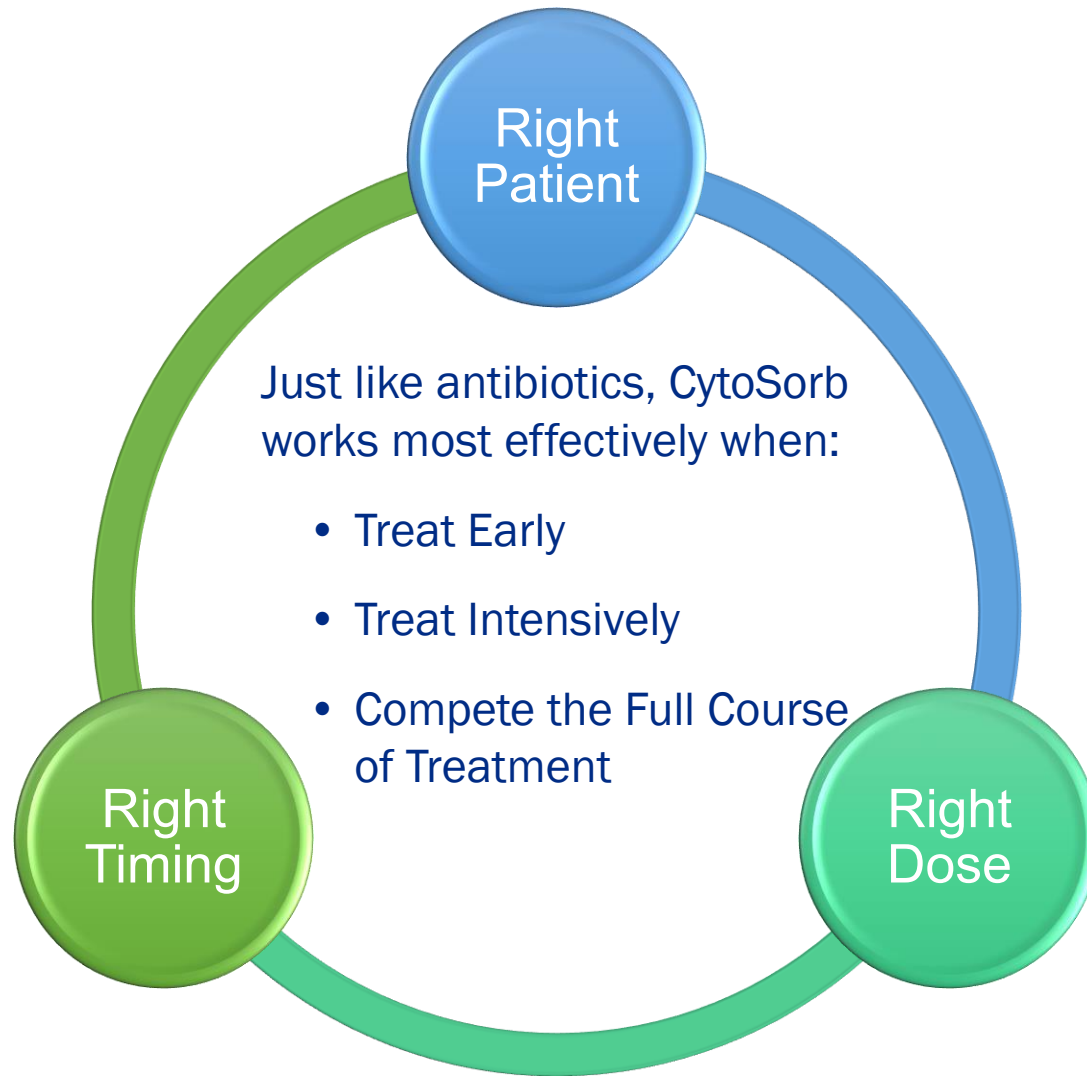
New Insights on Hemoadsorption in Septic Shock

Dr. Ricard Ferrer

CytoSorbents™

12 |

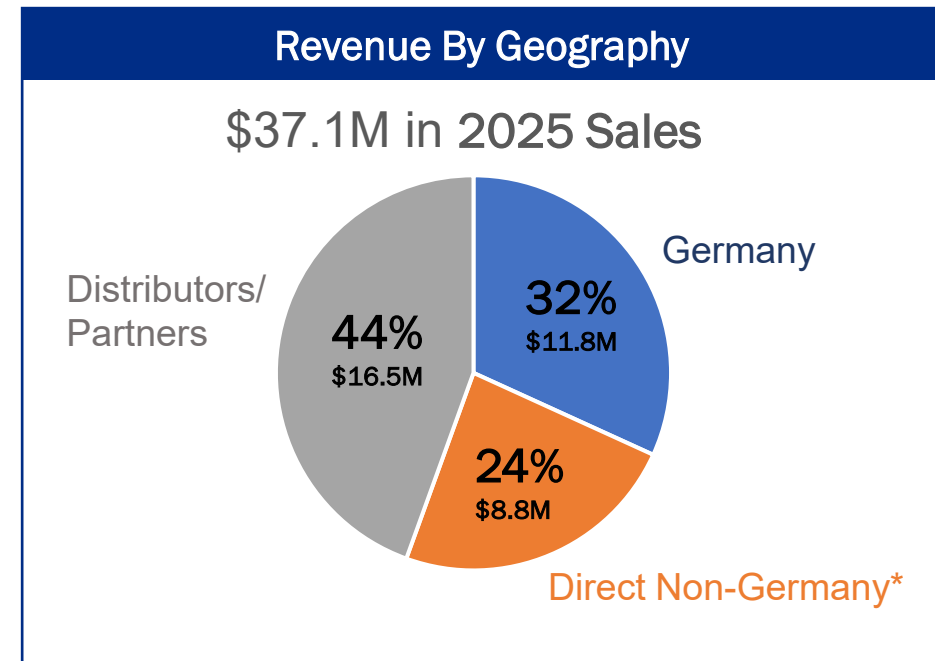
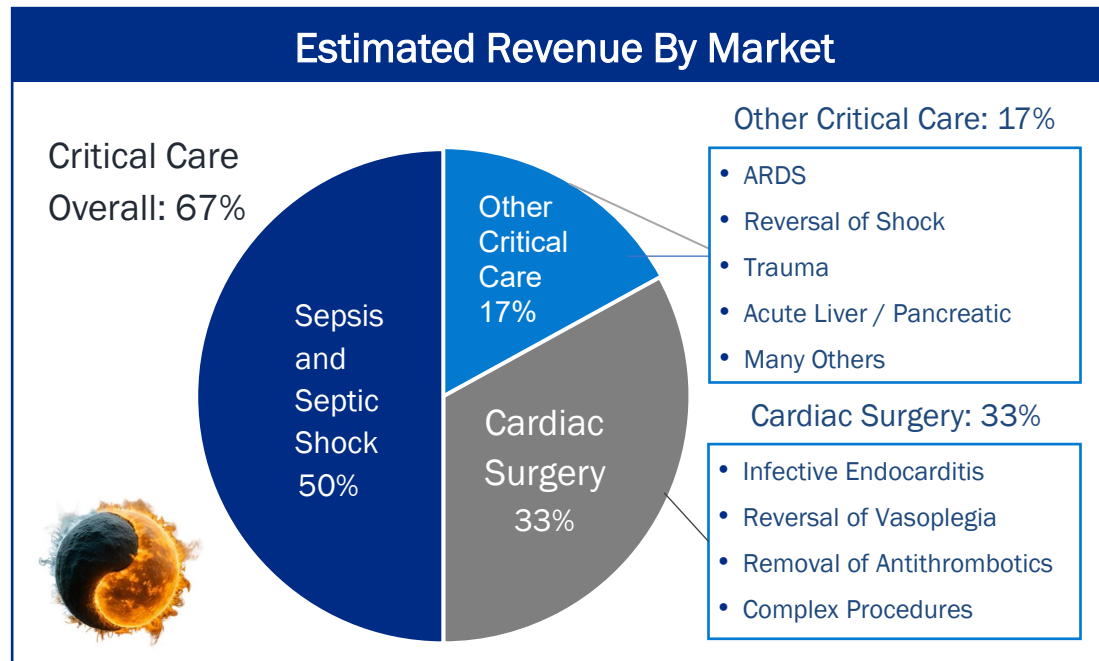
The Key to Success: Right Patient, Right Timing, Right Dosing



Before and after treatment of a patient with liver disease

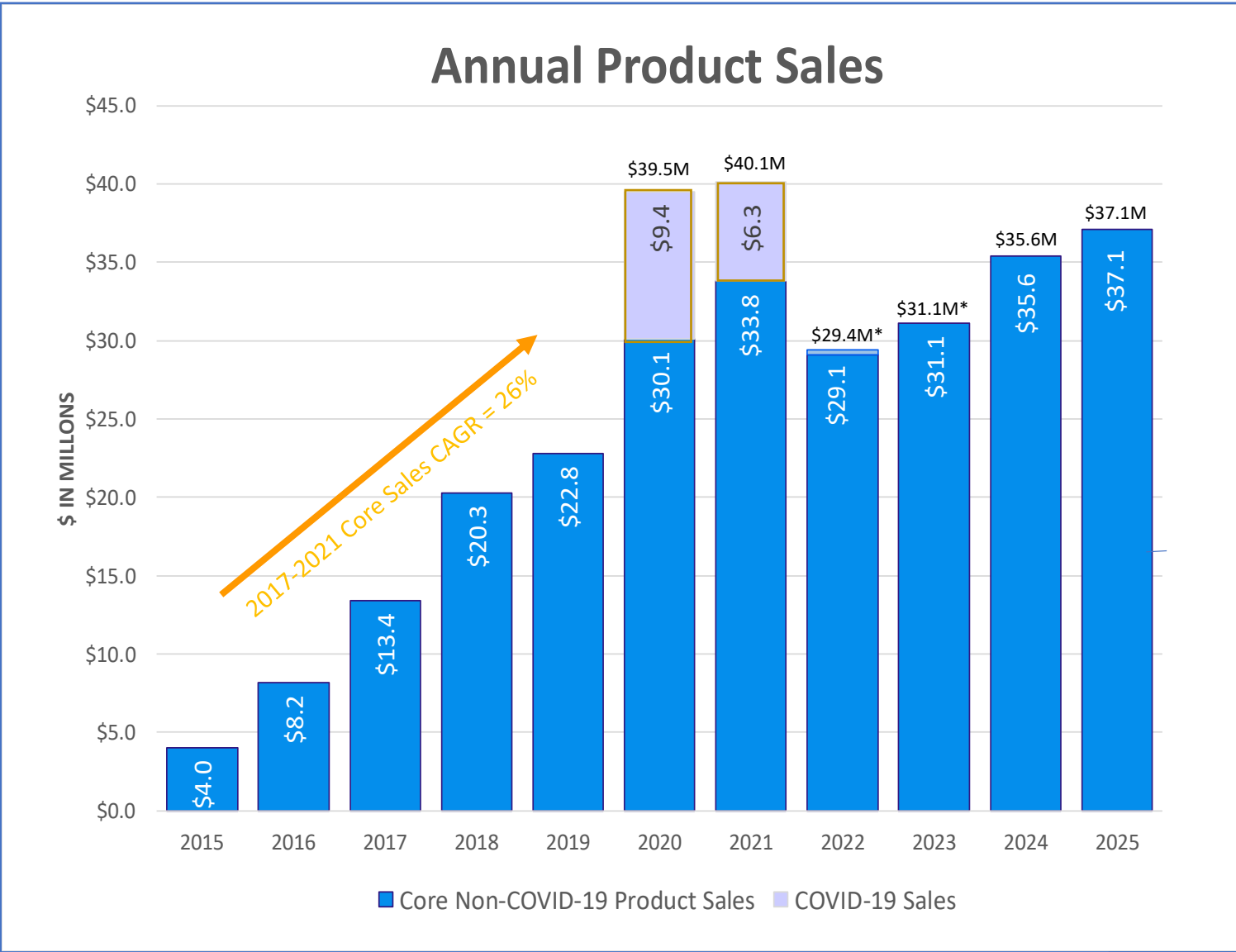
CytoSorb Commercialization Focus

- We sell CytoSorb in more than 70 countries worldwide with more than 300,000 treatments to date
- Sell Direct in Germany and 9 other countries & through Distributors and partners in the remainder



* Austria, Switzerland, Poland, Netherlands, England, Wales, North Ireland, Scotland, Ireland

A History of Strong Annual Sales Growth



Progress Towards Operating Cash Flow Breakeven

\$9.6M

Q2 2026 Revenue

↑73%
Gross Margins

27%
Operating Loss
Improvement

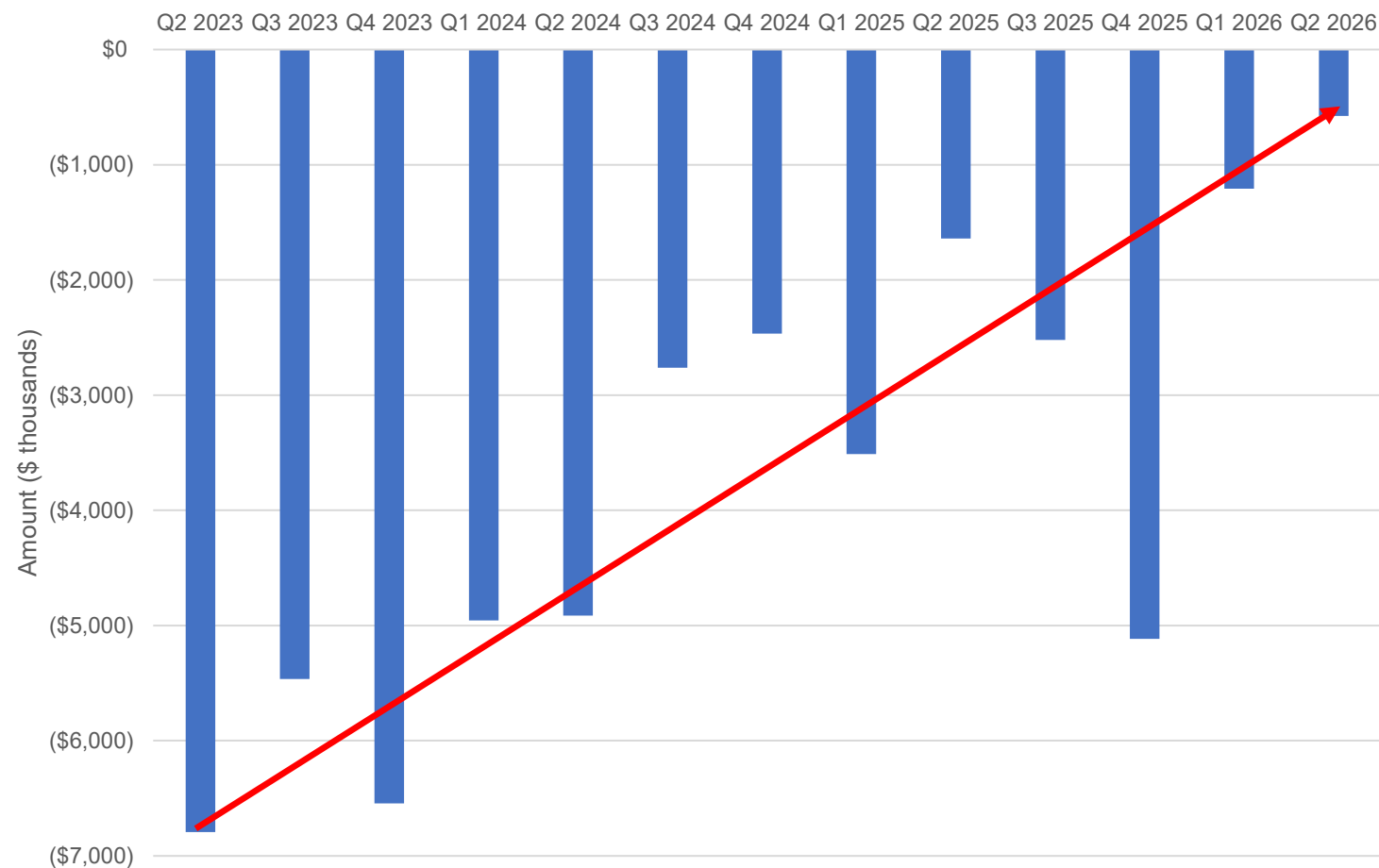
38%
Adjusted EBITDA
Improvement

~\$200K
Operating Cash Burn*

CytoSorbents™

Driving to Operating Cash Flow Breakeven in 2H 2026

Negative Free Cash Flow by Quarter (Q2 2023 - Q2 2026)

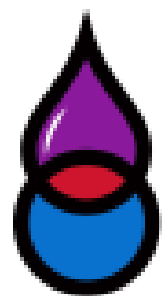


Driving improved cash burn through efficiencies and cost reductions

- \$5.9 million in cash, cash equivalents and restricted cash at Q2 compared to \$6.3 million at Q1
- Net operating cash burn of \$0.4 million in Q2 inclusive of \$0.2 million of restructuring-related payments in the quarter
- 23% reduction in headcount since September of 2025
- Continue to expect cash flow break even in the 2H of 2026

* Negative Free Cash Flow = Net cash used in operating activities plus net cash used in investing activities

CytoSorbentsTM



The Opportunity of
DrugSorb™
ATR



Blood Thinners and Cardiac Surgery

Tens of millions of patients globally take Direct Oral Anticoagulants (e.g, DOACs like Eliquis® and Xarelto®) and antiplatelet agents (e.g, Brilinta®) either chronically or acutely to reduce risk of heart attack, stroke, and other serious thrombotic complications



Each year, an estimated 10% will require emergent or urgent surgery, including cardiac surgery

- ~5-10% of emergency cardiac surgeries involve patients on chronic DOAC therapy
- ~5-10% of heart attack patients on antiplatelet agents are not eligible for a stent and require CABG surgery

Blood thinners significantly increase the risk of perioperative bleeding in cardiac surgery. Delay of surgery for multiple days to “washout” the drug is typically recommended to reduce this risk

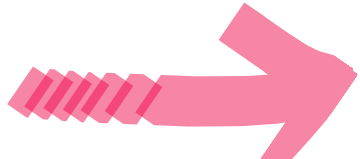
But in patients needing urgent cardiothoracic surgery:

- Many patients cannot wait due to the need for emergency surgery
- Waiting for drug washout may increase the risk of poor patient outcomes (e.g. thrombotic events, clinical instability, and sudden death) and wastes valuable hospital resources



DrugSorb-ATR has received two FDA Breakthrough Designations, highlighting the lack of available effective therapies for this problem. We believe DrugSorb-ATR has the potential to address this pervasive and serious unmet medical need

Brilinta[®] and the Use Case for DrugSorb[™] ATR



weekly plan						
monday	tuesday	wednesday	thursday	friday	saturday	sunday
	X	X	X	X	X	

The ultimate goal of DrugSorb-ATR is to allow patients to get the critical surgery they need without delay while reducing or preventing bleeding complications



The Pivotal STAR-T RCT Paper Is Now Published

Mack et al

Perioperative Management

Randomized, sham-controlled trial of intraoperative ticagrelor removal to reduce perioperative bleeding

Michael J. Mack, MD,^a Richard Whitlock, MD,^b Michael W. A. Chu, MD,^c Bradley Taylor, MD,^d Elias A. Zias, MD,^e David Liu, MD,^f Adam N. Protos, MD,^g Chris Rokkas, MD,^h Marc Pelletier, MD,ⁱ Chun W. Choi, MD,^j Tarit Saha, MD,^k Frank W. Sellke, MD,^l David J. Schneider, MD,^m Vinod H. Thourani, MD,ⁿ James Douketis, MD,^o Cyril David Mazer, MD,^p Weihong Fan, MS,^q Efthymios N. Deliargyris, MD,^q and Charles Michael Gibson, MD,^{r,s} on behalf of the Safe and Timely Antithrombotic Removal-Ticagrelor (STAR-T) Investigators

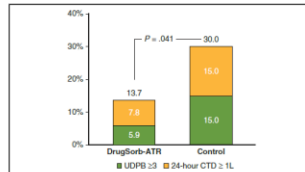
ABSTRACT

Objective: Patients on ticagrelor who are undergoing cardiac surgery before completing guideline-recommended washout are at high risk for severe bleeding. This study evaluated whether a novel drug removal device reduces bleeding in patients operated within 2 days from ticagrelor discontinuation.

Methods: Eligible patients were randomized 1:1 to intraoperative DrugSorb-ATR or sham control. Primary safety end point was adverse events at 30 days. Efficacy was assessed by composite end points comprising bleeding events using Universal Definition of Perioperative Bleeding (UDPb) and 24-hour chest tube drainage (CTD) in the overall and isolated coronary artery bypass grafting (CABG) populations with a hierarchical win ratio (WR) method.

Results: In total, 140 patients were randomized; 132 had surgery and received a study device; and 92% were isolated CABG. Mean age was 65 ± 5 years, and 15% were female. The primary safety end point was met, with similar adverse events reported between groups. The primary efficacy end point was not met in the overall or CABG populations (Win ratio [WR], 1.07; 95% CI, 0.72-1.58; $P = .748$ and WR, 1.33; 95% CI, 0.86-2.04; $P = .202$ respectively). The supplementary efficacy end point was met in the CABG population (WR, 1.59; 95% CI, 1.02-2.46, $P = .041$) with significant reductions also shown in large CTD bleeding events ($P = .016$) and major bleeding, a composite of severe bleeding events or 24-hour CTD ≥ 1 L ($P = .041$). The number needed to treat to prevent a major bleed was 6.

Conclusions: Intraoperative use of DrugSorb-ATR is safe in patients operated within 2 days of ticagrelor discontinuation. Although the primary end point was not met in the overall population, there were significant reductions in severe bleeding events in the prespecified CABG population. (J Thorac Cardiovasc Surg 2026; ■:1-10)



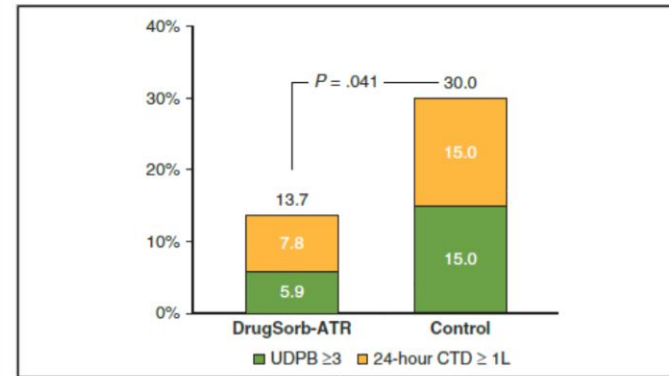
Major bleeding, a composite of severe bleeding events (UDPb ≥ 3) or 24-hour CTD ≥ 1 L.

CENTRAL MESSAGE

Intraoperative DrugSorb-ATR use for ticagrelor removal is safe and can reduce the severity of bleeding after isolated CABG in patients operated within 2 days of drug discontinuation.

PERSPECTIVE

Antithrombotic drug-related perioperative bleeding risk is a major clinical issue frequently resulting in surgical delays. The present study showed that the intraoperative use of a device that can remove ticagrelor from blood was safe and reduced severe bleeding events among patients undergoing CABG within 2 days of ticagrelor discontinuation.



Major bleeding, a composite of severe bleeding events (UDPb ≥ 3) or 24-hour CTD ≥ 1 L.

CENTRAL MESSAGE

Intraoperative DrugSorb-ATR use for ticagrelor removal is safe and can reduce the severity of bleeding after isolated CABG in patients operated within 2 days of drug discontinuation.

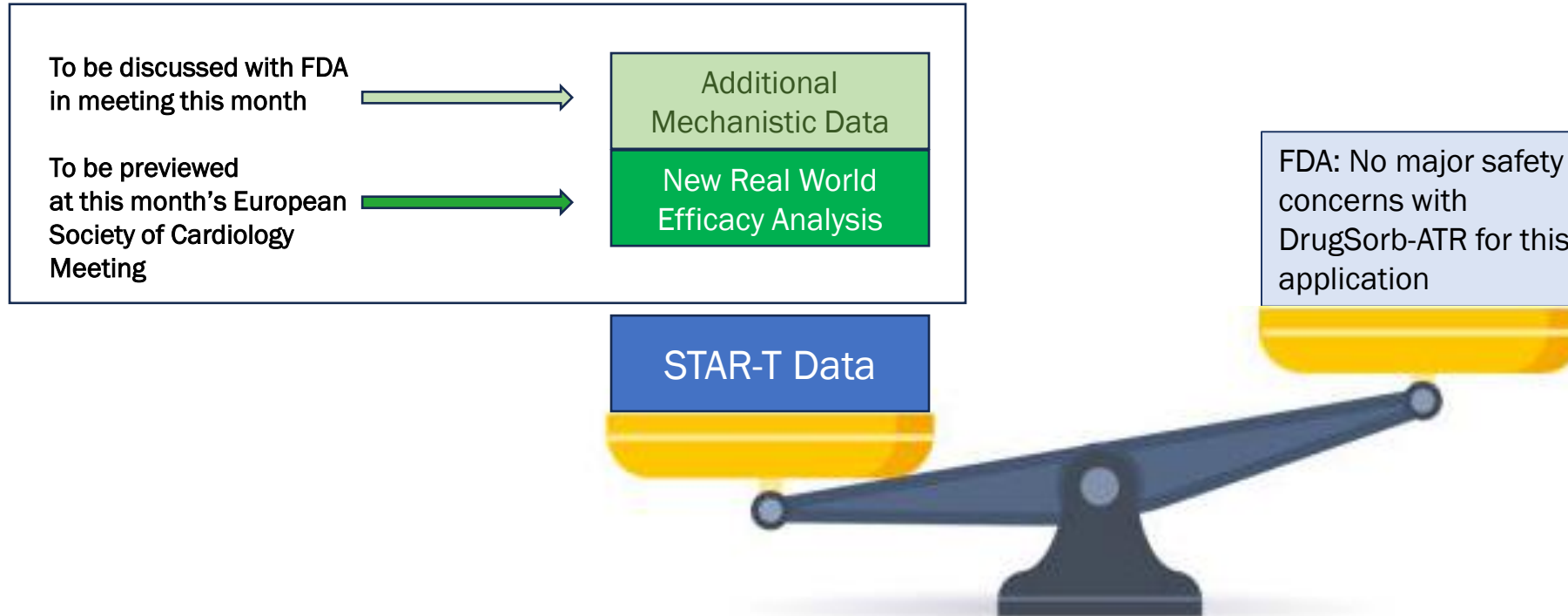
- Significant 16.3% absolute reduction in major bleeding (13.7% treatment vs 30.0% control, $p = 0.041$)
- 57.7% relative reduction in major bleeding
- NNT = 6: Six patients need to be treated to prevent 1 serious bleeding event

FDA Regulatory Path for DrugSorb-ATR and Brilinta®

Planning second De Novo Submission to FDA, where standard of approval is that:

Probable Benefit Outweighs Probably Risk

Targeting New De Novo Submission in Q1 2027
Potential Marketing Approval in mid-2027



CytoSorbents™

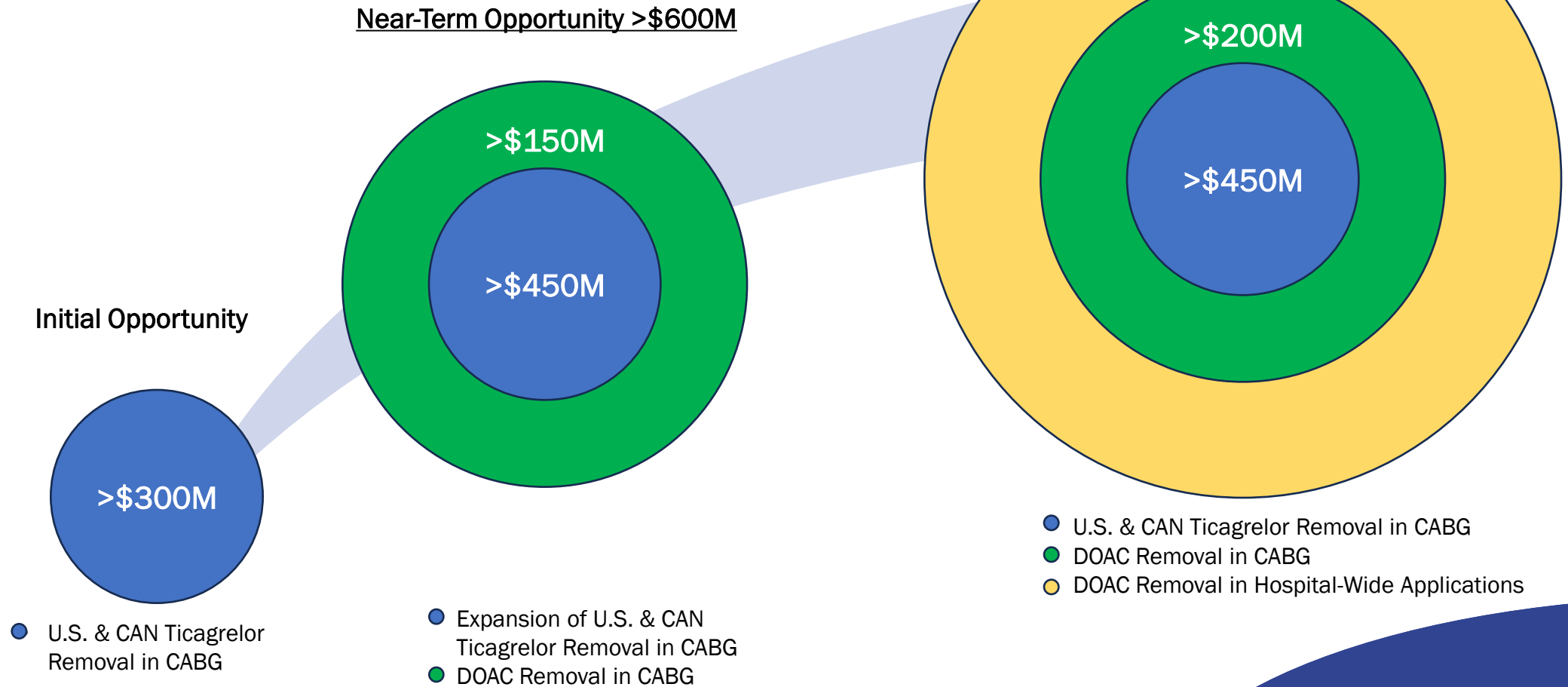
Meanwhile, Evidence Base for ATR Continues to Grow

- Later this month in Munich at **ESC 2026 (Aug 28-31)**, the world's largest CV conference, two additional analyses on antithrombotic removal in cardiac surgery will be presented:
 - *Intraoperative ticagrelor removal to reduce bleeding after urgent CABG: Matched comparison of patient level observational data*
 - *Intraoperative antithrombotic removal during urgent CABG: Early German experience with a novel hemoadsorption device*
- *These rigorous RWE analyses highlight the increasing adoption of our technology as part of the operative protocols at leading European heart centers and the bleeding reductions with the use of our device*

Potential Second Shot on Goal: DOAC Removal

- Tens of millions of patients are on chronic or lifelong Direct Oral Anticoagulant (DOAC) therapy for diseases such as atrial fibrillation, DVT, pulmonary embolism, and peripheral vascular disease. Eliquis® (#7 pharmaceutical in the world with \$14.4B in global 2025 sales) and Xarelto® (\$5.1B global 2025 sales) are the market leaders
- We have previously discussed our intention to pursue an expanded label for DrugSorb-ATR to include removal of DOACs in cardiac surgery following an initial marketing approval
- Given delays in the ticagrelor submission, we have now scheduled a separate pre-submission meeting with FDA in August 2026 to review the data currently available for the DOAC indication and determine what, if any, additional information may be required to support a parallel De Novo submission for DOAC removal
- This strategy is consistent with our second FDA Breakthrough Device Designation for DrugSorb-ATR to remove DOACs during cardiac surgery

Large Total Addressable Market



CytoSorbents™



Unlocking the Strategic Value of
HEMODEFEND-BGA
For Universal Blood Products

CytoSorbentsTM

Multiple Blood Products. Millions of Units. One Compatibility Platform

HemoDefend is filter platform that removes anti-A and anti-B blood group antibodies that can be used across several major blood-product categories to create “Universal” products that can be given to any patient regardless of blood type



PLATELETS

- ~2.2 million units transfused annually in the U.S.
- Short shelf life and frequent ABO-mismatched use create a strong compatibility need



PLASMA

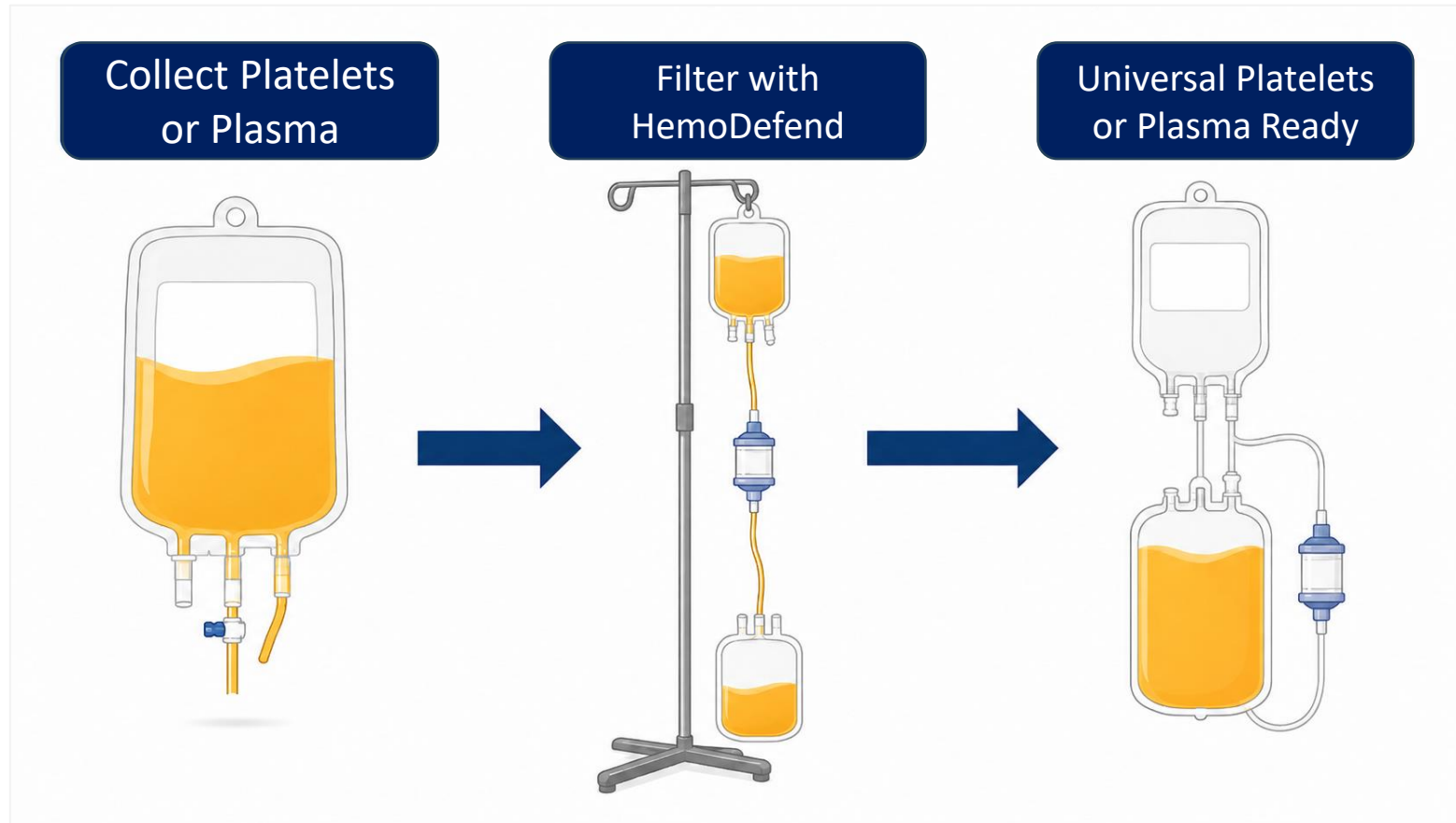
- ~1.9 million units transfused annually in the U.S.
- ABO compatibility remains an important constraint on inventory and use



ADDITIONAL OPPORTUNITIES

- Whole blood
- Freeze-dried plasma
- Military & emergency medicine
- International markets
- Plasma processing applications

Simple By Design



GRAVITY DRIVEN

No capital equipment

~5-10 MINUTES

Simple processing step

SCALABLE

Designed to integrate into existing blood-center workflows

UNIVERSAL

Low-titer, broadly compatible blood

PLATFORM TECHNOLOGY

Same core technology can be applied across multiple blood products and compatible with freeze-dried formats

CytoSorbentsTM

Designed for Broad Use Across the Blood Ecosystem



Blood Centers

Create more broadly compatible products and simplify inventory



Hospitals

Improve access to compatible blood products and reduce reliance on off-type transfusions



Military & Emergency

Enable easier stocking and use when blood type is unknown or time is critical



Plasma Processing

Reduce ABO antibody constraints in plasma-derived products

HemoDefend Has Attracted Support from Leading Organizations

~\$16 MILLION IN NON-DILUTIVE FUNDING

Significant external funding has supported technical development, manufacturing, testing, and regulatory planning—advancing the program while limiting reliance on dilutive capital.

Discussions ongoing for additional non-dilutive funding from the US Govt to fund clinical trials.

POSITIVE FDA ENGAGEMENT

Recent FDA written feedback supported several core elements of the plasma development strategy, including the proposed anti-A/anti-B antibody endpoint and bench-testing approach, providing greater clarity on the path forward.

LEADING ORGANIZATIONS

Testing, Validation, or Engagement with:

- **Leading Blood Centers**
- **Major Government Agencies**
- **Blood transfusion Industry Companies**

Interactions have included feasibility testing, product validation, clinical-development planning, and evidence generation to support regulatory approval and adoption.

GROWING STRATEGIC INTEREST

Major blood-management companies have engaged around potential development support, strategic investment, commercialization capabilities, and other forms of collaboration.

First FDA BLA approved for Freeze Dried Plasma technology, paving way for “Universal Plasma” holy grail

HemoDefend-BGA is a Valuable Asset that Has Significant Strategic and Funding Possibilities

CytoSorbents™

Four Independent Value Drivers. One Uncommon Value



CytoSorbentsTM

CytoSorbents Investment Thesis: Risk-Reward Asymmetry

- CytoSorbents has four largely independent paths to value creation over the next 6–18 months, each of which could be significant catalysts for upside potential
 - 1) Achieving sustainable operating cash-flow breakeven
 - 2) Returning the high-margin CytoSorb franchise to stronger growth
 - 3) Opening the U.S. market through DrugSorb-ATR
 - 4) Unlocking the strategic value of HemoDefend-BGA
- Meanwhile, the company has been executing on its strategy to reduce its cost structure, preserve cash and create a pathway toward financial self-sustainability. Q2 2026 highlighted that progress, including achieving: 73% product gross margins, significantly improved operating performance, and near-breakeven operating cash burn
- We believe our current market valuation discounts our core business and the potential for significant near-term value creation, while reflecting an asymmetric focus on risks such as Nasdaq compliance, regulatory, and financial strength that we are actively working to address

Although time will tell, we believe the combination of multiple independent catalysts, improving underlying fundamentals and a very attractive valuation makes CytoSorbents a compelling investment opportunity

CytoSorbents

NASDAQ: CTSO

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CytoSorbents™

Mission

At CytoSorbents we are passionate about **saving and protecting lives** by advancing blood purification and **transforming the treatment of complex clinical conditions**.

Driven by relentless research, innovation, and strong global partnerships with healthcare providers, we provide solutions that safely **remove harmful substances** from the body, **restoring balance**, and **setting new standards** in patient care.

CytoSorbents™

Vision

To be the global leader in advanced blood purification, redefining how **the most complex and life-threatening conditions** are treated.

Our cutting-edge innovations are designed to save lives, restore health, and **deliver renewed hope to patients worldwide**.

CytoSorbents™

Values

Patient Centric: The Patient is our first priority in every innovation and decision

Innovation: Relentlessly advancing science and technology to redefine the standard of care

Excellence: Working with a sense of urgency to deliver the highest standards of performance, service, reliability and quality

Integrity: Operating with respect, honesty, transparency, and accountability to build trust across our community, patients, and partners.

Collaboration: Working hand-in-hand with each other, healthcare providers, and researchers to create real-world, life-saving solutions.

CytoSorbents™