



Forward-Looking Statements



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Certain financial measures, including adjusted operating expenses ("non-GAAP financial measures"), were not prepared in accordance with generally accepted accounting principles in the United States ("GAAP") and are presented in this presentation to provide information that may assist investors in understanding the Company's financial and operating results. The Company believes these non-GAAP financial measures are important performance indicators because they exclude items that are unrelated to, and may not be indicative of, the Company's core financial and operating results. These non-GAAP financial measures, as calculated, may not necessarily be comparable to similarly titled measures of other companies and may not be appropriate measures for comparing the performance of other companies relative to the Company. These non-GAAP financial measures are not intended to represent, and should not be considered more meaningful measures than, or alternatives to, measures of operating performance as determined in accordance with GAAP. To the extent the Company utilizes such non-GAAP financial measures in the future, it expects to calculate them using a consistent method from period to period. Consistent with Securities and Exchange Commission regulations, the Company has not provided a reconciliation of forward-looking non-GAAP financial measures to the most directly comparable GAAP financial measures in relation to the "unreasonable efforts" exception set forth in the applicable regulations. Because there is substantial uncertainty associated with predicting any future adjustments that may be made to the Company's GAAP financial measures including the non-GAAP financial measures. For a reconciliation of non-GAAP financial measures referenced in this presentation to the most directly comparable GAAP measure, please refer to the Company's earnings release issued on May 2, 2024.



Sight Sciences

MISSION STATEMENT

Develop transformative, interventional technologies that allow eyecare providers to procedurally elevate the standards of care – empowering people to keep seeing.



A Glimpse Ahead

Innovation leader in two large, growing, underserved markets

Near-term catalysts expected in market access

Plan to return to double-digit revenue growth

Strong balance sheet supports significant investments in R&D pipeline, clinical and commercial infrastructure

Strong gross margin and improving leverage on operating expenses

The transformation of chronic eye disease treatment is underway

The Path to Early Intervention

A STRATEGIC ROADMAP TO TRANSFORM EYECARE

Identify

Identify patients who can benefit from intervention

- 3.4M U.S. patients diagnosed with Primary Open-Angle Glaucoma (POAG)¹
- 18M U.S. patients diagnosed with dry eye disease (DED)²

Embrace

Embrace intervention as a better alternative to medication management

- Nearly 40% of open-angle glaucoma patients are non-compliant with their medications³
- 95% of the current dry eye market is dominated by Rx and OTC eyedrops that do not address the underlying causes of MGD⁴

Shift

Shift the care continuum to address underlying disease over symptom management

- In GEMINI, our interventional glaucoma treatment achieved 29% IOP reduction sustained after 3 years on average. 74% of GEMINI patients were medication-free after 3 years⁵
- Our interventional dry eye disease therapy was superior to leading comparator prescription eye drops in tear break-up time and saw significant improvements in all studied signs and symptoms⁶

GOAL

Reduce patient burden. Slow disease progression. Improve outcomes.

¹ Source: Market Scope 2023 Report. ² Source: Market Scope's Q1-2023 US Ophthalmologist Survey. ³ Source: Market Scope 2023 Dry Eye Products Report. ⁴ Source: Greenwood MD et al. 36-Month Outcomes from the Prospective GEMINI Study: Canaloplasty and Trabeculotomy Combined with Cataract Surgery for Patients with Primary Open-Angle Glaucoma. *Clinical Ophthalmology* (2023) Volume 17 Pages 3817-3826. ⁵ Source: Ayres SD et al. A Randomized, Controlled Trial Comparing TearCare® and Cyclosporine Ophthalmic Emulsion for the Treatment of Dry Eye Disease (SlevaRA). *Clinical Ophthalmology* (2023) Volume 17 Pages 3925-3940.

OUR MARKETS

Glaucoma



Glaucoma

Leading cause of irreversible blindness²

Predominantly managed with daily eye drops (compliance often poor)¹



Normal



Mild



Moderate



Severe

Large + Underserved Markets

\$6.0 billion addressable U.S. market²

3.4 million U.S. patients diagnosed with POAG³

¹ Newman-Casey PA, Robin AL, Blachley T, Farris KB, Heider M, Reznick K, Lee PP. The most common barriers to glaucoma medication adherence: A cross-sectional survey. *Ophthalmology*. 2015; Jul;123(7):1324-30. doi: 10.1016/j.ophtha.2015.03.026. ² Represents Company analysis of third-party estimates in 2021. ³ Source: Market Scope 2023 reports.

Primary Open-Angle Glaucoma (POAG)

The Conventional Outflow Pathway is an important focal point in treating POAG.

POAG is similar to a clog in a kitchen sink:

- The eye's natural drainage system is called the **conventional outflow pathway**.
- Blockage of this system prevents aqueous fluid from draining.
- When aqueous fluid cannot drain, intraocular pressure (IOP) rises.
- Elevated IOP can lead to optic nerve damage and may result in irreversible blindness.

1. **Drain Cover** (trabecular meshwork): allows excess aqueous fluid to enter drainage system
2. **Sink Pipe** (Schlemm's Canal): conducts excess aqueous fluid to exit pathways known as collector channels
3. **House Plumbing** (collector channels): leads excess aqueous fluid out of the eye into the venous system



OUR FLAGSHIP TECHNOLOGY

Effective + Intuitive Intervention



Comprehensive treatment of diseased conventional outflow pathway

Leading Clinical Trial and Registry Results: ROMEO, GEMINI, AAO IRIS® Registry

>200K Cases Performed¹

Offering a comprehensive intervention that drives leading clinical outcomes for Primary Open-Angle Glaucoma (POAG)

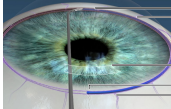
¹ Estimate based on units of OMNI (and predicates) shipped as of March 31, 2024.

OMNI Comprehensively Treats the Conventional Outflow Pathway

Minimally Invasive + Efficacious

A comprehensive procedure enabled by the OMNI Surgical System to help restore natural outflow in the eye with up to 360° treatment of all three areas of resistance in the conventional outflow pathway

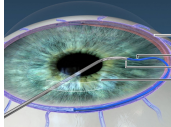
Treatment of Canal and Collector Channels



Cannula Tip
Schlemm's Canal

Clear Corneal
Microincision
Microcatheter
Collector Channels

Treatment of Trabecular Meshwork



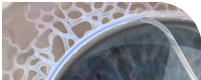
Trabecular Meshwork

Microcatheter
Cannula Tip
Clear Corneal
Microincision

Broad FDA Indication

ALLOWS FOR STANDALONE AND COMBINATION CATARACT UTILIZATION

OMNI® Surgical System is the only Minimally Invasive Glaucoma Surgery (MIGS) device with an FDA indication that allows for:



Use in **Standalone or combo cataract** procedures

+

Access to **360 degrees** of the diseased conventional outflow pathway through a clear corneal microincision

+

Comprehensive treatment of all three areas of resistance* in the diseased conventional outflow pathway

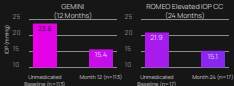
+

Use in adult patients with POAG **across the spectrum of disease severity**

* Trabecular meshwork, Schlemm's canal, and collector channels

Consistent Efficacy of OMNI in Standalone (SA) and Combination Cataract (CC) Clinical Trials

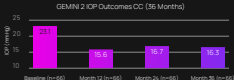
COMBINATION CATARACT



STANDALONE



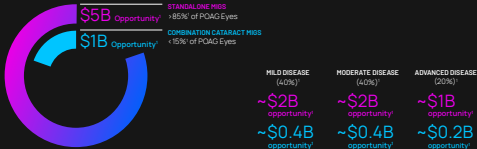
EFFICACY DEMONSTRATED OUT TO 3 YEARS



References: GEMINI (Clin Ophthalmol. 2022;16:1205-1214); ROMEO (J Cataract Refract Surg. 2021;47(7):907-915); Ophthalmol Glaucoma. 2021;4(2):173-81); TREY (Int Ophthalmol (2022)); ROMEO 3 year (Clin Ophthalmol. 2023;17:1067-1066); GEMINI 2: Greenwood MD et al. 36-Month Outcomes from the Prospective GEMINI Study: Canaloplasty and Trabeculotomy Combined with Cataract Surgery for Patients with Primary Open-Angle Glaucoma. Clinical Ophthalmology. (December 2021)

OMNI Addresses All Six Minimally Invasive Glaucoma Surgery (MIGS) POAG Categories

Allows surgeons to customize treatment



¹ Represents Company analysis of third-party estimates based on 2023 data

Large and Unmet Clinical Need for Standalone MIGS

Combination Cataract

<15% of POAG eyes¹, >90% of MIGS procedures²

Established, growing market

Benefits from inherent IOP-lowering effect of cataract surgery

Share-taking driven by efficacy, fast recovery times and attractive safety profile

Standalone

>85% of POAG eyes¹, <10% of MIGS procedures²

Large, underserved patient population

MIGS procedure is the SOLE reason for operating room visit

Standalone adoption requires a procedure with robust safety and efficacy, without the benefit of cataract surgery

¹ Represents Company analysis of third-party estimates based on 2023 data.

² Company estimates based on independent third-party analytics data based on 2023 data.



Standalone Market Development is Underway

Claims data indicate increasing standalone usage of codes associated with OMNI¹

OMNI technology meets enhanced efficacy and safety needs for standalone procedures

- ROMEO
- ROMEO two-year extension
- TREY
- Sole purpose of OR visit – degree and consistency of efficacy crucial to surgery decision

Market development efforts to expand MIGS both in combination cataract and standalone use cases and train new MIGS surgeons

Commercial team is focused on driving awareness of benefits of interventions for appropriate POAG patients who do not require cataract surgery



¹ Based on estimated patient visits with CPT codes 66704 and 66820 from third-party data analytics provider during 2021-2023.

Surgical Glaucoma Pipeline

Developing Comprehensive Best-in-Class Portfolio

CURRENT PRODUCTS

OMNI

Sight Sciences

SION

Sight Sciences

IN THE PIPELINE

Injection of Sustained
Release Pharmaceutical (Rx)*

Implantable Canalicular
Scaffold (MIGS)*

Suprachoroidal
Implant (MIGS)*

*This pipeline product is under development and is not commercially available. The Company may suspend or discontinue pipeline development projects at any time.

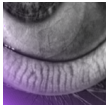
Dry Eye Disease



Dry Eye Disease

Linked to screen time, age (postmenopausal women, men 50+), systemic medication use

Predominantly managed with daily eye drops (compliance often poor)¹



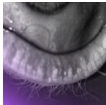
Normal



Mild



Moderate



Severe

Large + Underserved Markets

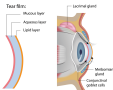
\$2.5 billion core addressable U.S. market^{2,3}

>11 million U.S. patients diagnosed with Meibomian Gland Disease (MGD)^{2,3}

¹ Uchino M. Adherence to Eye Drops Usage in Dry Eye Patients and Reasons for Non-Compliance - A Web-Based Survey. J Clin Med. 2020 Jan; 9(2): 3673. ²2022 Market Scope Report. ³Represents Company analysis of third-party estimates in 2022.

Overview: Tears and Meibomian Gland Disease (MGD)

TEAR FILM ANATOMY



- Tears consist of three layers
- Outermost layer consists of oily substance called meibum
 - Coats and protects inner layers
 - Prevents premature evaporation

MEIBOMIAN GLANDS



- Healthy meibomian glands release liquid meibum with each blink
- In patients with MGD, obstructions form within glands and prevent release of meibum
 - Results in premature tear evaporation and dry eye
 - These obstructions need to be melted or liquified and evacuated from the glands to allow for the healthy production of liquid meibum

~\$2.5 Billion Core MGD Opportunity



U.S. patients diagnosed with
Dry Eye Disease (DED)¹

17.9
million¹

Up to 86% of DED is
associated with poor tear
quality due to meibomian
gland disease (MGD)^{1,2}

11.6 – 15.4
million U.S. MGD patients^{1,2}

Targeted patients estimated
to need 1.3 procedures per
year³

\$2.2 – \$2.9
billion core opportunity⁴

¹Market Scope 2025 Dry Eye Products Report. ²Lemp MA, Crews LA, Bron AJ, Foulks GN, Sullivan SD. Distribution of aqueous-deficient and evaporative dry eye in a clinic-based patient cohort: a retrospective study. *Cornea*. 2012;31(5):472-478. ³Assuming one treatment per year for patients with moderate MGD and two treatments per year for patients with severe MGD. ⁴At current ASP for Dry Eye treatment kits.

Dry Eye Disease (DED): Large + Underserved Disease State

95%

Current market dominated by Rx and OTC eyedrops that do not address the underlying causes of MGD¹

5.7 – 7.5

million moderate to severe MGD DED patients^{1,2}

~50% of DED patients are moderate to severe¹ (most likely to seek treatment + targeted patient population in SAHARA RCT)

- Existing dry eye treatments mostly focus on increasing tear volume in aqueous deficient patients
- No interventional standard of care for treatment of MGD
- The market in the US for dry eye medications (Rx) was \$1.1 billion in 2023³
- Poor compliance is often seen with a reliance on Rx and OTC eyedrops⁴

¹Market Scope 2023 Dry Eye Products Report. ²Lemp MA, Crews LA, Bron AJ, Foulks GN, Sullivan SD. Distribution of aqueous-deficient and evaporative dry eye in a clinic-based patient cohort: a retrospective study. *Cornea*. 2012;31(5):472-476. ³2023 Dry Eye Products Market Scope. ⁴Newman-Casey PA, Robin AL, Bachley T, Farris KB, Heister M, Resnicow K, Lee PP. The most common barrier to glaucoma medication adherence: A cross-sectional survey. *Ophthalmology*. 2015; Jul;122(7):1358-66. doi: 10.1016/j.ophtha.2015.03.021

Targeted + Intuitive Intervention

TearCare

Sight Sciences



Comprehensive treatment
of diseased meibomian glands

Leading Clinical Trial Results:
SAHARA, OLYMPIA

> 55K Cases
Performed¹

Offering a comprehensive intervention that drives leading clinical outcomes for evaporative dry eye disease

¹ Estimate based on Dry Eye Treatment Lids shipped as of March 31, 2024.

TearCare: Designed to Treat Meibomian Gland Disease (MGD)

TearCare is the only interventional, open-eye, dry eye technology designed to melt and comprehensively remove meibomian gland obstructions and restore gland functionality and healthy oil production.

01 Application



Thin, wearable SmartLids® conform to the eyelid and allow natural blinking



02 Therapy



Precise, consistent, software-controlled thermal therapeutic melting cycle (40-42° C at the inner eyelid for 15 minutes)¹



03 Expression



Comprehensive clearing protocol allows providers to manually evacuate the melted meibum comfortably

¹ Blackie CA, Solomon JD, Greiner JG, Holmes M, Korb DR. Inner eyelid surface temperature as a function of warm compress methodology. *Optom Vis Sci*. 2009 Aug;86(8):676-83. doi: 10.1097/OPT.0b013e31819121ad. PMID: 19677314.

SAHARA RCT

PUBLICATION: CLINICAL OPHTHAMOLOGY

DATE: DEC 2023

Randomized Controlled Trial comparing TearCare and Restasis®



Superiority + Durability¹

+

TearCare vs Restasis²

+

Large Trial (N=345)

+

Randomized

+

Masked

SAHARA RCT: Results

TearCare Superior to Restasis in Tear Breakup Time Improvement

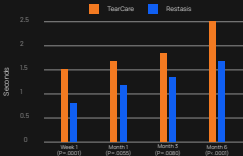
TearCare Results at 6 Months

- Superior to Restasis¹ in tear break-up time
- Non-inferior to Restasis in OSDI²
- Significant improvements in all 10 signs and symptoms

Next Steps

- Publish 12-month crossover clinical data in 1H'24
- Conclude 2-year follow up by YE '24, to be published in 2025

Absolute Change from Baseline at Each Time Point



¹Endpoints for SAHARA include superiority over Restasis at six months in our primary objective endpoint, tear break-up time. Study designed for 24 months to assess duration of effectiveness.

²Ocular Surface Disease Index is a commonly used patient-reported survey to assess dry eye severity.

TearCare Strategy: Targeted + Scalable Growth

Actively Engaging in Pursuit of Equitable
Market Access

With the power of TearCare, we can:

- **improve the lives of U.S. MGD patients**
- Scale commercial resources with market access wins
- Target ~9,000 physicians identified as most likely to adopt MGD treatment procedures
- Leverage a large installed customer base, over 55,000 SmartLids Sold,¹ built across real-world testing and data collection since 2019

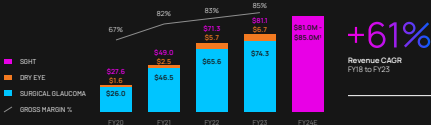




What's Next

Healthy Revenue Growth and Top-Tier Gross Margins

ANNUAL REVENUE & GROSS MARGIN %



FY23 Y/Y Revenue

+14% SGHT
+13% Surgical Glaucoma
+18% Dry Eye

FY23 Gross Margin %

85.3% SGHT
88.1% Surgical Glaucoma
84.8% Dry Eye

FY24 Guidance

Revenue \$81M - \$85M¹
Adj. OpEx² \$107M - \$110M¹

Historical financial results, including with respect to revenue and gross margin, may not be indicative of future financial results due to numerous risks and uncertainties, including those addressed in the "Risk Factors" section of the Company's filings with the U.S. Securities and Exchange Commission. ¹The Company expects for full-year 2024 revenue of \$81.0 to \$85.0 million and adjusted operating expenses of \$107.0 to \$110.0 million, as of the Company's earnings release dated May 3, 2024. ²Adjusted operating expense² is a non-GAAP financial measure, which is calculated as operating expenses less stock-based compensation expense, depreciation and amortization, and restructuring costs. For a reconciliation of adjusted operating expenses to operating expenses, please refer to our earnings release issued on May 3, 2024.

Strategic Value Creation Initiatives Represent Sustainable Growth Drivers

Expand OMNI Utilization

- Certification of new OMNI surgeons
- Gain share in combination cataract segment
- Continue developing standalone MIGS segment
- Generate additional clinical evidence
- Optimize coverage and equitable reimbursement
- Develop international markets

TearCare Access + Expansion

- Pursue coverage and equitable reimbursement
- Generate additional clinical evidence
- Grow commercial team
- Expand adoption and usage





Why Now?

Innovation leader in two large, growing, underserved markets

Near-term catalysts expected in market access

Plan to return to double-digit revenue growth

Strong balance sheet supports significant investments in R&D pipeline, clinical and commercial infrastructure

Strong gross margin and improving leverage on operating expenses

The transformation of chronic eye disease treatment is underway



Thank you!

If you have any questions, please contact
investor.relations@sightsciences.com