

Hong Kong Exchanges and Clearing Limited and The Stock Exchange of Hong Kong Limited take no responsibility for the contents of this announcement, make no representation as to its accuracy or completeness and expressly disclaim any liability whatsoever for any loss howsoever arising from or in reliance upon the whole or any part of the contents of this announcement.



Jenscare Scientific Co., Ltd.
寧波健世科技股份有限公司

(A joint stock company incorporated in the People's Republic of China with limited liability)
(Stock Code: 9877)

VOLUNTARY ANNOUNCEMENT
RESULTS OF SIX-MONTH CLINICAL FOLLOW-UP
OF LUX-VALVE PLUS TRAVEL II STUDY RELEASED

This announcement is made by Jenscare Scientific Co., Ltd. (the “**Company**”, together with its subsidiaries, the “**Group**”) on a voluntary basis to provide the shareholders and potential investors of the Company with updated information in relation to the latest business and new product development of the Group.

The board (“**Board**”) of directors (“**Directors**”) of the Company is pleased to announce that recently, the results of six-month clinical follow-up of multicenter clinical trial of LuX-Valve Plus transvascular tricuspid valve replacement system (“**TRAVEL II**”) were officially published at New York Valves 2024 and the 18th Oriental Congress of Cardiology together with the World Congress of Cardiology.

TRAVEL II is a prospective, multicenter and single-arm clinical trial, which primarily evaluates the long-term safety and efficacy of LuX-Valve Plus in the application on patients with severe tricuspid regurgitation. The TRAVEL II clinical trial enrolled a total of 96 patients from 15 centers in China.

The results of this clinical study showed:

- (1) The device success rate was about 97%; and
- (2) The average device operation time was 35.56 ± 20.82 minutes.

The efficacy results showed:

- (1) All patients had an improved tricuspid regurgitation grade, 30-day data showed that 100% of patients had no moderate or above tricuspid regurgitation (TR), and six-month data showed that 97.62% of patients had no moderate or above TR; and
- (2) In terms of New York Heart Association cardiac function improvement, 30-day data demonstrated that 80.43% of patients improved from pre-procedure class III/IV to class I/II, and six-month data demonstrated that 91.86% of patients improved from pre-procedure class III/IV to class I/II; and
- (3) In terms of quality of life, 30-day data demonstrated that patients improved their Kansas City Cardiomyopathy Questionnaire scores, on average, by 15 points, and six-month data demonstrated that patients improved their Kansas City Cardiomyopathy Questionnaire scores, on average, by 20 points.

The safety results showed*:

Clinical Event Committee (CEC)-Adjudicated Composite Events (FAS, N=96)

	30 days	Six months
All-cause mortality	1 (1.04%)	2 (2.08%)
Long-term mechanical ventilation (>72 hours)	0 (0.00%)	0 (0.00%)
Acute renal failure	1 (1.04%)	1 (1.04%)
Acute liver failure	0 (0.00%)	0 (0.00%)
Severe paravalvular leakage	2 (2.08%)	2 (2.08%)
New onset III°AVB requiring permanent pacemaker implantation	1 (1.04%)	1 (1.04%)
Requirement of ECMO or IABP	0 (0.00%)	0 (0.00%)
Myocardial infarction	0 (0.00%)	0 (0.00%)
Stroke	0 (0.00%)	0 (0.00%)
Conversion to surgical tricuspid valve replacement or tricuspid valvuloplasty	3 (3.13%)	3 (3.13%)
Cardiovascular injury requiring surgical intervention (heart perforation, vascular injury)	0 (0.00%)	0 (0.00%)
Life-threatening massive bleeding	0 (0.00%)	0 (0.00%)
Composite event rate	7 (7.29%)	8 (8.33%)

*Note: As disclosed in the voluntary announcement dated October 31, 2023, the 30-day composite event rate was 6 (6.45%), among which, new onset III°AVB requiring permanent pacemaker implantation was 2 (2.2%), conversion to surgical tricuspid valve replacement or tricuspid valvuloplasty was 1 (1.1%), and severe paravalvular leakage was 1 (1.1%). This change was mainly due to a more stringent definition of adjudication criteria and the alignment of sample size.

The results of six-month clinical follow-up of TRAVEL II study showed that LuX-Valve Plus demonstrated promising mid-term clinical performance with no noticeable increase in safety events and continued improvement in efficacy over a longer clinical observation period, enabling the patients to have more enhanced cardiac function, and enjoy more quality of life and sustained clinical benefits.

As of the date of this announcement, nearly 600 implantation cases have been completed worldwide for transcatheter tricuspid valve replacement system products independently developed by the Company, and the longest follow-up record was over 5 years. The Company will continue to promote the application and commercialization of its products around the world.

Cautionary Statement as required by Rule 18A.05 of the Rules Governing the Listing of Securities on The Stock Exchange of Hong Kong Limited: There is no assurance that the Company will ultimately develop, market and/or commercialize LuX-Valve Plus successfully. Shareholders and potential investors of the Company are advised to exercise caution when dealing in the shares of the Company.

By Order of the Board
Jenscare Scientific Co., Ltd.
Mr. LV Shiwen
Chairman and Executive Director

Hong Kong, July 2, 2024

As at the date of this announcement, the executive Directors are Mr. LV Shiwen and Mr. PAN Fei; the non-executive Directors are Mr. TAN Ching, Mr. ZHENG Jiaqi, Ms. XIE Youpei and Mr. CHEN Xinxing; and the independent non-executive Directors are Dr. LIN Shoukang, Ms. DU Jiliu and Dr. MEI Lehe.