

Corporate Presentation

November 2026

HARROW®

Your patients. **Our purpose.**

Safe Harbor

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Harrow. We Are Ophthalmic Pharma.

Diversified provider of ophthalmic disease management solutions in North America

Largest U.S. Portfolio of Prescription Ophthalmic Products

Multiple Growth Drivers Across Large Ophthalmic Markets

Scalable Commercial Platform

PORTFOLIO BREADTH

Delivery Types
Injectable | Topical Drops | Nasal Spray

Product Categories
Branded | Generic | OTC | Compounded

Disease Origins
Anterior | Posterior | Ocular Surface

Payer Types
Commercial | Government | Cash

SELECT PRODUCTS

vevye®	Dry Eye Disease	
tyrvaya®	Dry Eye Disease (nasal)	
IHEEZO®	Ocular Anesthesia	
Triesence®	PF Corticosteroid (Inj.)	
Byooviz™	Anti-VEGF	
Opuviz™ aflibercept-yszy	Anti-VEGF	2027
G-MELT™ Drug Candidate	Sedation	2028

KEY DIFFERENTIATORS

Access and Affordability
Foundational Harrow commitments across our portfolio

Integrated Solutions
HarrowRx simplifies prescribing, ordering, and fulfillment across our broad portfolio

Commercial Infrastructure
Established sales, market access, and distribution capabilities support efficient integration of new products

Harrow was founded to advance the standard of eye care and deliver safe, effective, accessible, and affordable medications that enhance patient compliance and improve clinical outcomes

Investment Highlights

Multiple growth drivers, a scalable commercial platform, and a new product every year

Q3 YOY DEMAND GROWTH

+83%	+21%	+110%
VEVYE TRx	**IHEEZO** units	**TRIESENCE** units

1

Early-Stage Growth, Durable Franchises

Major growth drivers remain early in their adoption curves, addressing large markets with strong patent protection

KEY DRIVERS

VEVYE · IHEEZO
TRIESENCE

RECENT COMMERCIAL INVESTMENTS

2x+	3x	Sales force expansion in 2026; Q3 was the first full quarter
Ocular Surface Disease team	Surgical team	

2

A Scaled Commercial Platform

Established sales, market access and reimbursement infrastructure, built to scale new products efficiently

KEY DRIVERS

Ocular Surface Disease
Retina · Surgical · Access+

PORTFOLIO GROWTH

2 | New products added in 2026: BYOOVIZ (July) and TYRVAYA (October); OPUVIZ planned launch in 2027

3

A New Product Every Year

At least one new product launch each year through the end of the decade, sold through the existing platform

KEY DRIVERS

BYOOVIZ · TYRVAYA
OPUVIZ · G-MELT

PROFITABILITY

$21.2M | Q3 Adjusted EBITDA

4

Built for Operating Leverage

A scalable cost structure positions Harrow to grow revenue faster than operating expenses over time

KEY DRIVERS

Operating Leverage
Existing Infrastructure

Durable Growth: A New Product Every Year

At least one new product every year through the end of the decade, launched within Harrow's existing cost structure and commercial footprint

2026 — LAUNCHED / ACQUIRED

BYOOVIZ
ranibizumab-nuna
Anti-VEGF biosimilar
Launched July 1, 2026

TYRVAYA
varenicline nasal spray
Dry eye disease
Acquired October 2026

BYQLOVI™
clobetasol propionate 0.05%
Post-op inflammation & pain
Launch Q4 2026

2027 — COMMERCIAL LAUNCH

OPUVIZ
aflibercept-yszy
Anti-VEGF biosimilar
Launch 2027

2028 — PIPELINE

YOCHIL™
Midazolam ODT series
Expected 2028

G-MELT™
Ketamine + midazolam ODT
Expected 2028

2029 — PIPELINE

H-N08 TRIESENCE+
PFS Injectable Steroid
Expected H2 2028–H1 2029

CR-01 – Ocular Cancer
Conjunctival delivery device
Ph2 PoC data in Q4 2026
Potential launch 2029/2030

2030 — PIPELINE + BD

Next Launches
Pipeline advancement and business development
Annual cadence continues

Commercial Pipeline

Financials & Outlook

3Q26 | Results and Outlook

Key Financial Metrics and Revenue Conversion

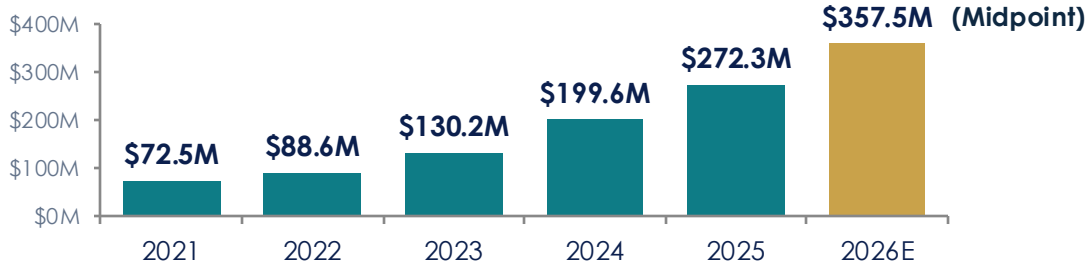
Key Financial Metrics

FIVE-YEAR TRACK RECORD

CONSOLIDATED REVENUE

$ in millions

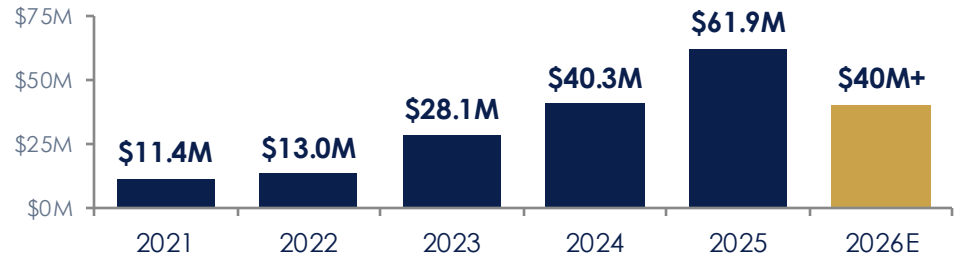
↑ 41% 5-Yr CAGR (2020–2025)



ADJUSTED EBITDA

$ in millions

↑ 62% 5-Yr CAGR (2020–2025)



Q3 2026 KEY METRICS

REVENUE	BRANDED REVENUE	ADJ. EBITDA
$99.3M	$83.5M	$21.2M
+41% QoQ · +39% YoY	+62% YoY · 84% of total	vs. $(1.2)M in Q2 2026

PRODUCT REVENUE

VEVYE	$39.7M
IHEEZO	$25.3M
TRIESENCE	$10.7M
Specialty	$7.6M
Compounded	$15.8M

$75.3M Cash & Equivalents *(as of September 30, 2026)*

2026 FINANCIAL OUTLOOK

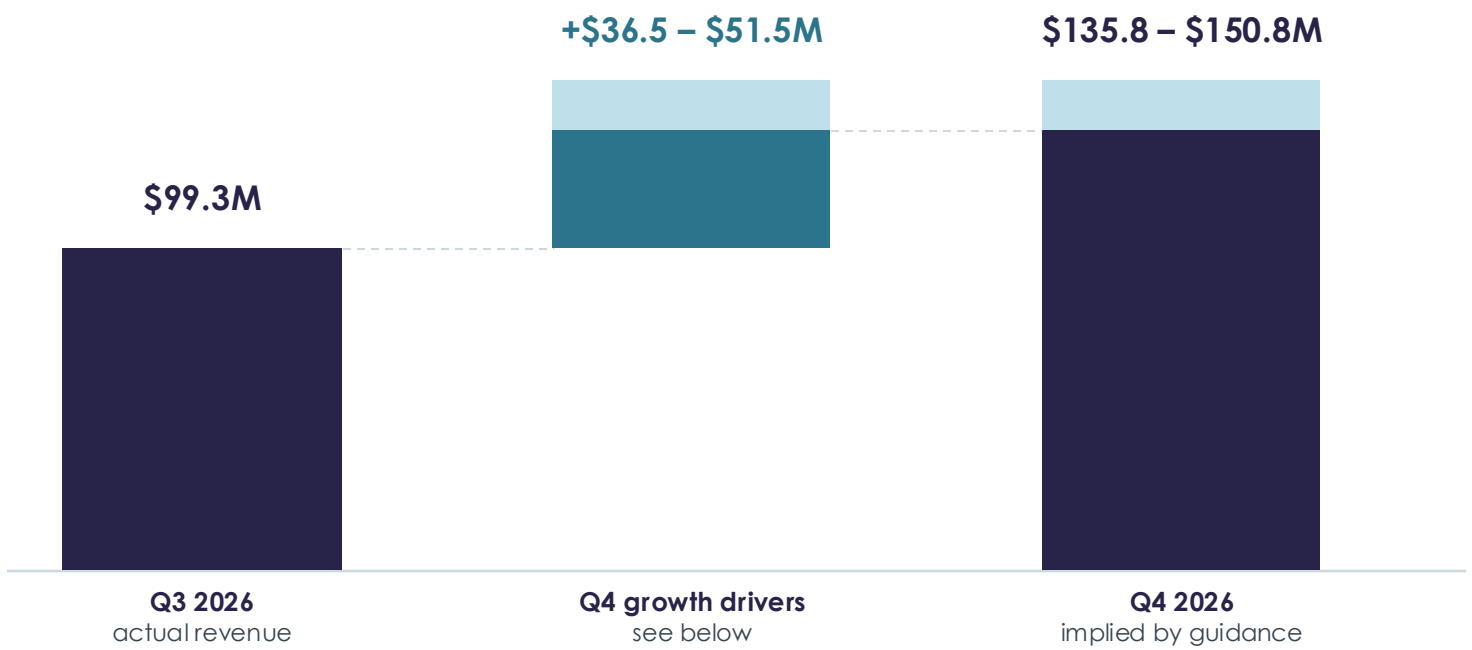
FY '26 Revenue	FY'26 Adj. EBITDA
$350M – $365M	$40M+
Reaffirmed; midpoint ~$357.5M	*Fourth-quarter: $33M+*

See References, slide 30

Q4 Bridge: Path to FY2026 Guidance

Q4 implied by reaffirmed guidance, driven by new revenue sources, seasonal strength and product momentum

Q3 TO IMPLIED Q4 REVENUE · $ IN MILLIONS



WHAT DRIVES THE Q4 STEP-UP

New contributors
First TYRVAYA quarter, BYOOVIZ ramp

Seasonal strength
IHEEZO's peak quarter; year-end specialty and compounding

Product momentum
Continued VEVYE and TRIESENCE growth

WHAT Q4 REQUIRES

$135.8 – $150.8M

Implied Q4 revenue at the low and high end of guidance

~37–52%

Sequential revenue growth vs. Q3

HISTORICAL CONTEXT

~30% average Q3-to-Q4 revenue growth in 2024–2025 (+36% and +24%), before TYRVAYA and BYOOVIZ

PORTFOLIO GROWTH DRIVERS

- IHEEZO's seasonally strongest quarter
- VEVYE momentum from the expanded sales force & improving NPP
- Continued TRIESENCE growth
- BYOOVIZ building from September exit rate
- First quarter of TYRVAYA revenue

Four Focused Selling Teams

Each team built around a common set of prescribers, care setting, and purchasing and reimbursement dynamics

Ocular Surface Disease

Cornea specialists, dry eye practices, comprehensive ophthalmologists & optometrists

Retail & Specialty Pharmacy · Chronic Prescribing

- vevye® (cyclosporine ophthalmic solution) 0.1%
- tyrvaya® (varenicline solution) nasal spray 0.03 mg
- FRESHKOTE® Preservative Free LUBRICANT EYE DROPS
- Flarex® (fluorometholone acetate ophthalmic suspension) 0.1%
- Verkazia® cyclosporine ophthalmic emulsion 0.1%
- ZERVIATE® cetirizine ophthalmic solution, 0.24% FORMULATED WITH HYDRELLA®
- Natacyn® (natamycin ophthalmic suspension) 5% Anti-Fungal Ophthalmic Suspension Rx Only

Retina

Retina specialists & multi-specialty practices for in-office procedures

In-Office Procedures · Buy-and-Bill / J-Codes

- IHEEZO™ (chloroprocaine HCl ophthalmic gel) 3%
- IOPIDINE® (apraclonidine hydrochloride ophthalmic solution)
- Byooviz™ (ranibizumab-nuna) 0.05mL Injection
- Opuviz™ aflibercept-yszy
- Triesence® (triamcinolone acetonide injectable suspension) 40 mg/mL
- Vigamox® (moxifloxacin HCl ophthalmic solution) 0.5% as base

Also Supported by SURGICAL
TRIESENCE · VIGAMOX

Surgical

Cataract & refractive surgeons and the ambulatory surgery centers where they operate

Operating Room Through Post-Op Care

- Triesence® (triamcinolone acetonide injectable suspension) 40 mg/mL
- Maxidex® (dexamethasone ophthalmic suspension) 0.1%
- Nevanac® (nepafenac ophthalmic suspension) 0.1%
- ILEVRO® (nepafenac ophthalmic suspension) 0.3%
- TobraDex® ST (tobramycin/dexamethasone ophthalmic suspension) 0.3%/0.05% FORMULATED WITH XanGen®
- Maxitrol® (neomycin and polymyxin B sulfates and dexamethasone ophthalmic suspension)
- Vigamox® (moxifloxacin HCl ophthalmic solution) 0.5% as base

PIPELINE
G-MELT · YOCHIL
Next-Gen TRIESENCE (H-N08)

Access+

Dedicated to compounded products

imprimis Rx® A HARROW COMPANY

WORKS ALONGSIDE ALL THREE BRANDED TEAMS

Supports Ocular Surface Disease, Retina, and Surgical customers with compounded medications for specific patient and practice needs

Ocular Surface Disease

VEVYE | TYRVAYA | FRESHKOTE PF | FLAREX | VERKAZIA | ZERVIATE | NATACYN

Ocular Surface Disease Portfolio

A broad ocular surface portfolio, sold by one commercial team calling on the same prescribers

vevye® (cyclosporine ophthalmic solution) 0.1%

Cyclosporine ophthalmic solution 0.1%; water-free

WATER-FREE CYCLOSPORINE

tyrvaya® (varenicline solution) nasal spray 0.03 mg

Varenicline solution nasal spray 0.03 mg

NASAL TEAR STIMULATION

FRESHKOTE® Preservative Free LUBRICANT EYE DROPS

Preservative-free lubricant eye drops

OTC LUBRICANT

Flarex® (fluorometholone acetate ophthalmic suspension) 0.1%

Fluorometholone acetate ophthalmic suspension 0.1%

CORTICOSTEROID

Verkazia® cyclosporine ophthalmic emulsion 0.1%

Cyclosporine ophthalmic emulsion 0.1%

VKC THERAPY

ZERVIATE® cetirizine ophthalmic solution, 0.24% FORMULATED WITH HYDRELLA®

Cetirizine ophthalmic solution 0.24%

ANTIHISTAMINE

Natacyn® (natamycin ophthalmic suspension) 5% Anti-Fungal Ophthalmic Suspension Rx Only

Natamycin ophthalmic suspension 5%; the only FDA-approved ophthalmic antifungal

ANTIFUNGAL

ONE TEAM, ONE CALL

~40 new experienced sales professionals added with TYRVAYA; one team promoting the full Ocular Surface portfolio to overlapping prescribers

Q3 2026 Highlights

VEVYE

Revenue of $39.7M, +75% YoY and +35% QoQ; improving prescription economics following business-rule changes

TYRVAYA

Closed acquisition Oct. 1, 2026; early prescription growth and first revenue contribution in Q4

VERKAZIA

Relaunch progressing, supported by expanded field presence and established prescriber relationships

NATACYN

U.S. relaunch gaining traction; fungal blepharitis study data expected Q4

VEVYE: Best-in-Class for DED

vevye® (cyclosporine ophthalmic solution) 0.1%

The first and only water-free cyclosporine for the signs and symptoms of dry eye disease

~22x **More cyclosporine delivered into the cornea vs. Restasis**
Preclinical ex-vivo corneal penetration study data

Rapid Onset

Fastest-working immunomodulator for DED

Durable Effect

Significant staining improvement by Day 15, sustained to 56 weeks

Well-Tolerated

99.8% of patients experience no or mild instillation pain

IP Protection

Orange Book–listed patents expiring in 2039

MARKET OPPORTUNITY

DED Patient Funnel

38M+	Americans with dry eye symptoms
16.4M	Diagnosed U.S. adults (6.8%)
9.0M	Moderate-to-severe disease
1.2M	**On Rx therapy**

~93% of diagnosed U.S. patients are not on Rx

~20% annual Rx growth
DED Rx volumes growing ~20% annually over last 2 years

See References, slide 30

VEVYE Q3 2026 Key Metrics

+35%

Revenue Growth

Q3 '26 vs. Q2 '26

+17%

TRx Growth

Q3 '26 vs. Q2 '26

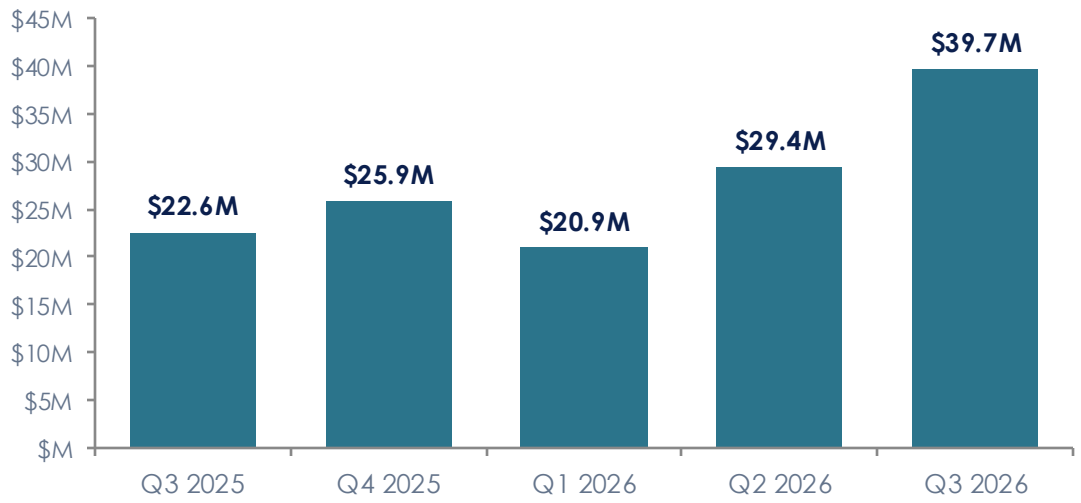
+83%

TRx Growth

Q3 '26 vs. Q3 '25

Quarterly Revenue

U.S. net revenue | Q3 '25 → Q3 '26



Q3 Highlights

Record Revenue, Continued Prescription Growth

- Record $39.7M in quarterly revenue (+75% YoY), with total prescriptions +17% QoQ and +83% YoY

Expanded Sales Force Driving Adoption

- Field organization more than doubled in 2026; growing productivity, with further opportunity as territories mature

Improving Prescription Economics

- Business-rule refinements driving a greater proportion of covered prescriptions

Third Major Coverage Win of 2026 Supports Growth

- Expanded coverage with a major PBM (~10M lives), effective January 1, 2027, further expanding VEVYE's commercial opportunity

See References, slide 29

TYRVAYA: Integrated and Off to a Strong Start

The only FDA-approved nasal spray for dry eye disease, now part of our Ocular Surface team alongside VEVYE

INITIAL TRACTION UNDER HARROW

~40
Experienced commercial personnel joined Harrow's Ocular Surface team and are now in the field

Continuity
Reps are calling on many of the same prescribers they supported before the acquisition

Early demand
Prescription demand growing, with first revenue expected in Q4

WHY TYRVAYA

The mechanism
- First FDA-approved nasal spray for dry eye disease; stimulates natural tear production through the trigeminal pathway
- No drop and no drug on the eye; works through the nose
- Tear production increases ~5 minutes after the first dose

Clinical evidence
- Proven in ONSET-1, ONSET-2 and MYSTIC; 1,000+ patients studied
- ~50% of patients had a significant tear increase at 4 weeks vs. 14–28% on vehicle
- FDA-approved October 2021

Opportunity
- Patients who struggle with or resist eye drops
- ~45M U.S. contact lens wearers; no lens removal required
- Aqueous-deficient DED, drop fatigue or poor adherence

ZERO …
Contraindications · Ocular AEs · Label Warnings



- 2 bottles = 30-day supply
- 60 sprays per bottle (4.2 mL each)
- 0.03 mg varenicline solution

>$30M 2027 revenue
Expected TYRVAYA contribution

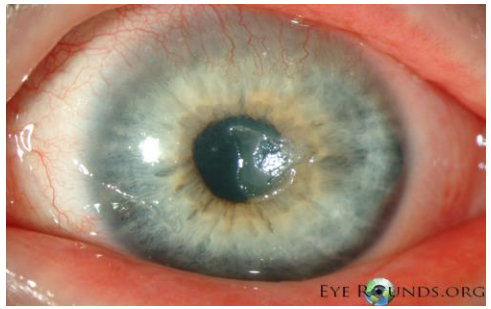
THE DEAL Closed Oct. 2026 · $30M upfront + up to $70M in net-sales milestones · Funded with cash on hand · Global rights ex-Japan · 12 Orange Book patents to 2035

The VERKAZIA® Opportunity

VKC is a chronic allergic eye disease — driven by immune dysregulation, across a spectrum (from highly underdiagnosed mild cases to severe and sight-threatening cases), which primarily affects children, but can reach into adulthood

THE DISEASE SPECTRUM





Chronic inflammation can progress to corneal damage and vision-threatening complications

MILD VKC Underdiagnosed; itching, redness with few Rx options beyond antihistamines; large patient population

SEVERE VKC Sight-threatening; corneal damage risk without adequate treatment

STEROID RISKS Glaucoma/cataract risks make long-term steroid use untenable in children

WHY IT MATTERS — THE CLINICAL GAP

~61%
of VKC patients are inadequately controlled on antihistamines alone

0
Alternative FDA-approved steroid-sparing therapies

THE GAP: Antihistamines treat symptoms. Steroids carry long-term risk. **No steroid-sparing immunomodulator has addressed the full VKC population** — leaving a large unmet need across both mild and severe disease

THE VERKAZIA OPPORTUNITY

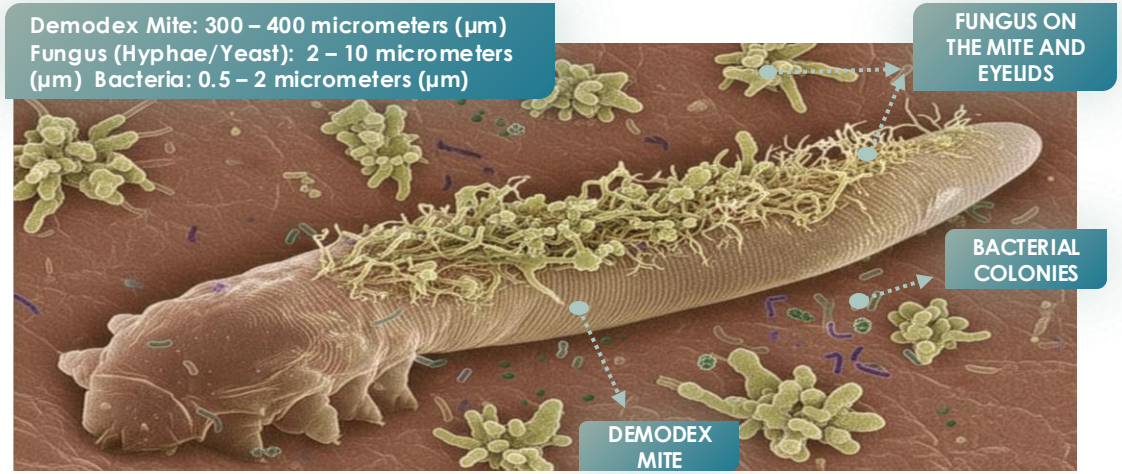
- **Only steroid-sparing immunomodulator approved for VKC**
- Clinically proven: significant corneal improvement, symptom reduction & less steroid rescue vs. control
- Guideline-supported: 2023 consensus recommends early CsA use for long-term management
- **Mild (new-to-Rx) and severe (steroid-dependent) patients represent a large, underpenetrated opportunity**

See References, slide 30

The NATACYN® Opportunity

Blepharitis is not a single infection — it is a microbiome imbalance (or dysbiosis) of the eyelid margin, driven by multiple etiologic pathogens

THE ETIOLOGIC TRIAD



BACTERIA Staphylococcus — lipases, toxins, biofilms

DEMODEX MITES Mechanical damage, bacterial vectors

FUNGI Candida / Malassezia — under-recognized and persistent

WHY IT MATTERS — THE CLINICAL GAP

~50%
of patients fail when only bacteria or mites are treated

~79%
of chronic cases show fungal elements; a largely untreated base

THE GAP: Antibiotics treat bacteria; Xdemvy® treats mites; there is **no standard therapy that addresses the fungal component** — leaving post-Xdemvy non-responders symptomatic.

THE NATACYN OPPORTUNITY

- **Only FDA-approved ophthalmic antifungal**
- Triple-therapy is biologically rational: antibacterial + antiparasitic + antifungal addresses all three pathogens
- Entry point: Xdemvy® non-responders — a large, underpenetrated refractory population
- Investigator-initiated study: first patients enrolled in Q2 2026; topline data expected Q4 2026

See References, slide 30

Retina

IHEEZO | BYOOVIZ | OPUVIZ
IOPIDINE | TRIESENCE | VIGAMOX



Retina Portfolio

A broad and complementary retina portfolio, supported by one established commercial team

IHEEZO™ (chloroprocaine HCl ophthalmic gel) 3%

Chloroprocaine HCl ophthalmic gel 3%

OCULAR ANESTHETIC

Byooviz® ranibizumab-nuna

Ranibizumab-nuna; LUCENTIS® biosimilar

ANTI-VEGF BIOSIMILAR

Opuviz™ aflibercept-yszy

Aflibercept-yszy; EYLEA® biosimilar, launching 2027

ANTI-VEGF BIOSIMILAR

IOPIDINE® (apraclonidine hydrochloride ophthalmic solution)

Apraclonidine ophthalmic solution 1%

INTRAOCULAR PRESSURE CONTROL

Triesence (triamcinolone acetonide injectable suspension) 40 mg/mL

Triamcinolone acetonide injectable suspension 40 mg/mL

Also sold by the Surgical team

CORTICOSTEROID

Vigamox® (moxifloxacin HCl ophthalmic solution) 0.5% as base

Moxifloxacin ophthalmic solution 0.5%

Also sold by the Surgical team

ANTIBIOTIC

Q3 2026 Highlights

IHEEZO

Revenue of $25.3M, +15% YoY and +62% QoQ; QUELL adds our first randomized data in retina

BYOOVIZ

Ordering accounts grew each month of Q3; demand built through September and carried into Q4

OPUVIZ

2027 launch planned, leveraging established retina accounts and BYOOVIZ experience

IOPIDINE

J-code effective July 1, 2026; encouraging initial physician reception

IHEEZO Overview

Physician-administered ophthalmic gel for ocular surface anesthesia; FDA-approved September 2022

First-in-Class
First approved use of chloroprocaine in the US ophthalmic market

Large TAM
~14M+ annual U.S. ocular procedures require surface anesthesia

Reimbursement
Permanent J-code (J2403) in the in-office setting

IP Runway
Two Orange Book patents, latest expiring 2039

IHEEZO™ (chloroprocaine HCl ophthalmic gel) 3%

Clinical studies demonstrated:



IHEEZO worked rapidly



IHEEZO had lower pain scores vs. tetracaine



Sufficient anesthesia to perform the surgical procedure



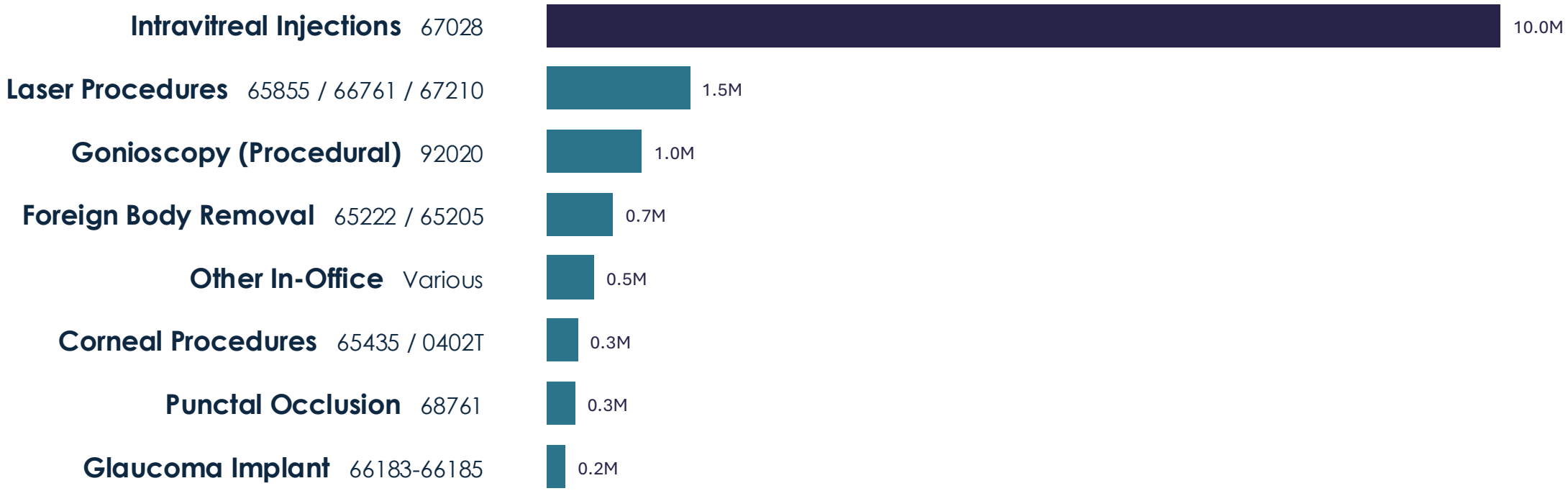
No patient required supplemental dosing

See References, slide 30

IHEEZO Total Addressable Market

All eight procedure categories are IHEEZO-applicable | CPT codes shown with each procedure

Estimated Annual U.S. Procedure Volume (millions)



~14M+ Estimated Annual U.S. In-Office Procedures | *Standard of Care Requires Ocular Surface Anesthesia*

See References, slide 30

IHEEZO Q3 2026 Key Metrics

62,210
Customer Unit Demand*
Q3 '26; 5% below record Q2 '26

+21%
Unit Demand Growth
Q3 '26 vs. Q3 '25

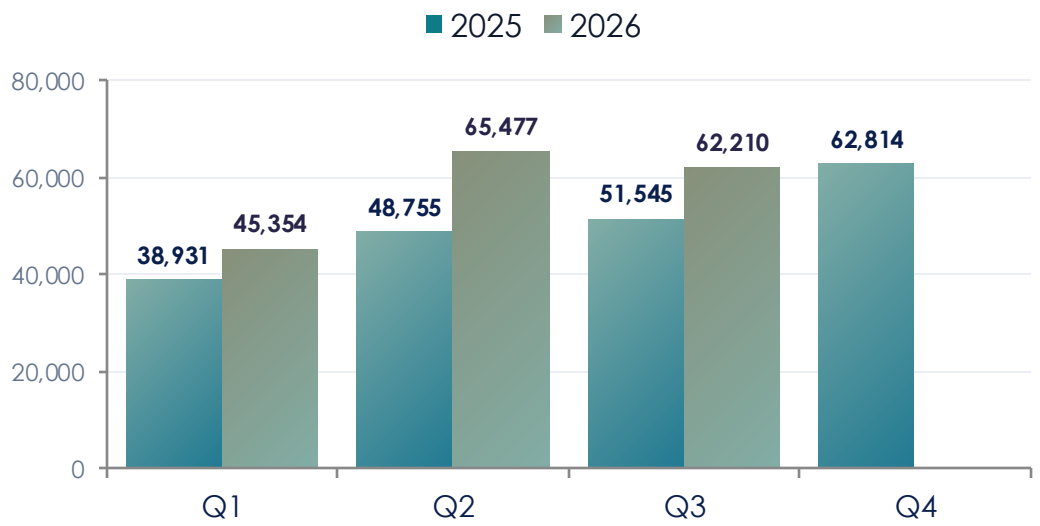
+62%
Sequential Revenue Growth
Q3 '26 vs. Q2 '26

Q4
Historically Strongest Quarter
Seasonal demand

Quarterly Customer Unit Demand*

+21% YoY
Q3 '26 vs. Q3 '25

Customer unit demand per quarter | 2025 vs. 2026



**Customer unit demand reflects distributor shipments to practices, not necessarily units used. Harrow recognizes IHEEZO revenue upon shipment to distributors; demand and revenue may differ in any given quarter*

See References, slide 30

Q3 Highlights

Strong Year-over-Year Growth
- Customer unit demand of 62,210 units, +21% YoY

Q3 Demand Reflects Seasonality and Q2 Practice Stocking
- Units 5% below record Q2, reflecting IHEEZO's historically slowest quarter and elevated practice-level purchases in Q2

Expanding Customer Adoption
- New account wins and deeper penetration of existing accounts have more than offset units lost with ASC pass-through status

Positioned for a Strong Fourth Quarter
- Entering IHEEZO's historically strongest quarter, supported by a growing customer base
- Less than 2% market penetration, with substantial growth opportunity

IHEEZO QUELL Phase 4 Topline Results

Primary endpoint inconclusive; all exploratory findings favored IHEEZO on post-procedure pain and tolerability measures

Successful Anesthesia
Primary endpoint; non-inferiority not met

IHEEZO 63 of 115 patients	**55.2%**
Proparacaine + subconjunctival lidocaine 68 of 113 patients	59.7%

Procedural Pain
Identical cumulative pain scores

IHEEZO	**2.0**
Proparacaine + subconjunctival lidocaine	2.0

Pain Through 24 Hours
Lower cumulative pain with IHEEZO

IHEEZO	**2.9**
Proparacaine + subconjunctival lidocaine	3.7

Adverse Events
Fewer AEs with IHEEZO

IHEEZO	**27%**
Proparacaine + subconjunctival lidocaine	47%

Study Design

Evaluating a topical gel against an anesthetic regimen that includes a highly potent injection

Design	Phase 4, multisite, randomized, double-masked; 231 patients undergoing intravitreal injections
Comparator	Proparacaine drops plus a subconjunctival lidocaine injection
IHEEZO	Topical gel; no additional anesthetic injection
Primary endpoint	Pain score of 0 (no pain) or 1 (pressure only) before and after injection; 12-point non-inferiority margin

Key Findings

Primary Endpoint Not Met; Result Inconclusive
Study designed assuming 88% success per group; at the observed ~57%, ~114 patients per group could not produce a confidence interval narrow enough to fit the 12-point margin

Identical Procedural Pain
Same cumulative pain scores despite IHEEZO not requiring an additional anesthetic injection

Lower Post-Procedure Pain with IHEEZO
Exploratory findings showed lower pain in the hours after the procedure and through 24 hours

Less Ocular Surface Staining and Dryness with IHEEZO
Staining (study eye): IHEEZO +1.7 vs. routine +3.2, suggesting less damage to the ocular surface
Dryness (SPEED): IHEEZO +0.5 vs. routine +1.7 same day; IHEEZO −0.5 vs. routine +0.3 at 24 hours

Fewer Adverse Events with IHEEZO
No serious adverse events in either group

Pain scores are patient-reported; lower scores indicate less pain. Primary endpoint percentages are CMH-weighted (stratified by site and baseline SPEED); difference: 4.5 percentage points (95% CI: −7.6 to 16.4); prespecified non-inferiority margin: 12 percentage points. Full analysis set: 228 patients (231 randomized; 3 discontinued post-randomization). Staining and SPEED values are mean changes from similar baselines. Secondary efficacy findings are exploratory. Full results expected at Hawaiian Eye & Retina, January 2027.

See References, slide 30

Surgical

TRIESENCE | MAXIDEX | NEVANAC | ILEVRO
TOBRADEX ST | MAXITROL | VIGAMOX

Pipeline: G-MELT | YOCHIL | Next-Gen TRIESENCE (H-N08)

Surgical Portfolio

One surgeon, one surgical episode — a comprehensive portfolio spanning postoperative care

Triesence (triamcinolone acetonide injectable suspension) 40 mg/mL

Triamcinolone acetonide injectable suspension 40 mg/mL

Also sold by the Retina team

CORTICOSTEROID

Maxidex® (dexamethasone ophthalmic suspension) 0.1%

Dexamethasone ophthalmic suspension 0.1%

CORTICOSTEROID

Nevanac (nepafenac ophthalmic suspension) 0.1%

Nepafenac ophthalmic suspension 0.1%

NSAID

ILEVRO (nepafenac ophthalmic suspension) 0.3%

Nepafenac ophthalmic suspension 0.3%

NSAID

TobraDex ST (tobramycin/dexamethasone ophthalmic suspension) 0.3%/0.05% FORMULATED WITH XanGen

Tobramycin / dexamethasone ophthalmic suspension

ANTIBIOTIC + STEROID

Maxitrol® (neomycin and polymyxin B sulfates and dexamethasone ophthalmic suspension)

Neomycin / polymyxin B / dexamethasone

ANTIBIOTIC + STEROID

Vigamox (moxifloxacin HCl ophthalmic solution) 0.5% as base

Moxifloxacin ophthalmic solution 0.5%

Also sold by the Retina team

ANTIBIOTIC

PIPELINE

G-MELT · YOCHIL

Next-Gen TRIESENCE

(H-N08)

Expected 2028–2029

Q3 2026 Highlights

TRIESENCE

Record quarter: revenue exceeded $10 million for the first time under Harrow ownership; unit demand +37% vs. Q2 and +110% YoY; clinical study data expected in early 2027

Surgical Sales Force

Expanded surgical team fully deployed supporting broader portfolio promotion

G-MELT

NDA submission expected November/December 2026

TRIESENCE Overview

Triesence (triamcinolone acetonide injectable suspension) 40 mg/mL

Injectable suspension (triamcinolone acetonide 40 mg/mL) with separate reimbursement in every traditional care setting

Regulatory

Only FDA-approved preservative-free synthetic corticosteroid for injectable ophthalmic use

Supply

5-year supply agreement with CMO; next-generation product candidate in development (H2 2028 / H1 2029 launch)

Reimbursement

Product-specific J-code (J3300); CMS pass-through status since April 2025

IP Protection

Orange Book–listed patents through 2029; next-generation launch expected pre-expiry

Commercial Expansion into Ocular Inflammation

7M+ Annual potential U.S. use cases in ocular inflammation

96% Covered Lives

~$38 Patient Out-of-Pocket

- Consistent favorable post-op outcomes reported by physicians
- Removes reliance on patient eye drop compliance
- Reimbursed in every care setting — ASC, HOPD, and office

See References, slide 30

TRIESENCE Q3 2026 Key Metrics

$10.7M

Revenue

Record quarterly revenue

20,022

Customer Unit Demand*

Strongest quarter under Harrow

+37%

Sequential Unit Growth

Q3 '26 vs. Q2 '26

+110%

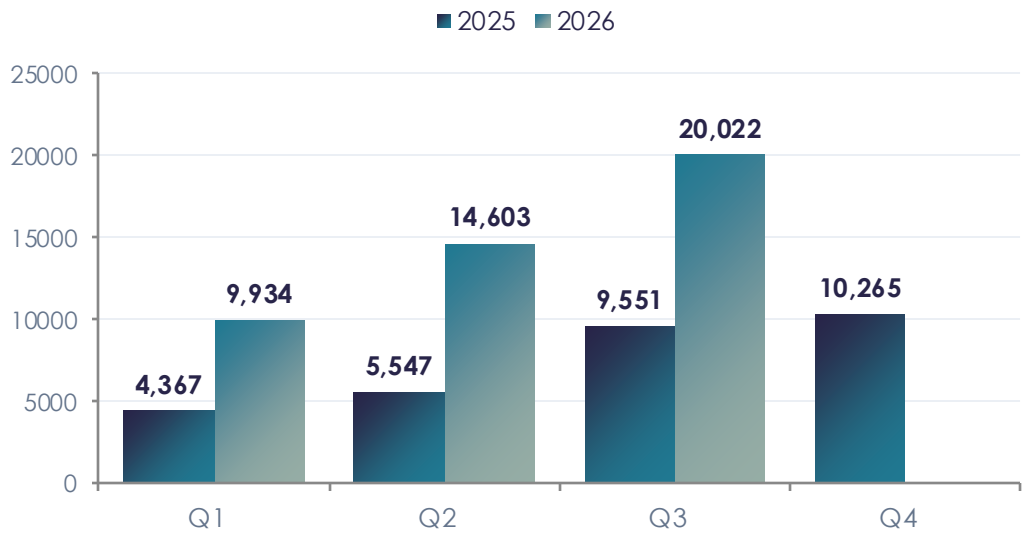
Unit Demand Growth

Q3 '26 vs. Q3 '25

Quarterly Unit Demand

+110% YoY

Unit demand per quarter | Q1 '25 → Q3 '26



**Customer unit demand reflects distributor shipments to practices, not necessarily units used. Harrow recognizes TRIESENCE revenue upon shipment to distributors; demand and revenue may differ in any given quarter*

See References, slide 30

Q3 Highlights

Strongest Quarter Under Harrow Ownership

- Revenue exceeded $10 million for the first time under Harrow ownership
- 20,022 units, +37% vs. Q2 and +110% vs. Q3 2025

Expanding Customer Adoption

- Expanded commercial team introducing TRIESENCE to more physicians and practices

Growing Momentum in Ocular Inflammation

- Increasing physician adoption and early incorporation into treatment protocols supporting broader, more consistent utilization

Strengthening the Clinical Evidence

- Multicenter study evaluating TRIESENCE in ocular inflammation progressing, with initial data anticipated in early 2027

Next-Generation Product Candidate

- Expected to carry its own NDA; the long-term catalyst for the franchise

G-MELT: IV & Opioid-Free Sedation

Fixed-dose sublingual tablet combining 3 mg midazolam + 50 mg ketamine (non-opioid)

If FDA-approved, G-MELT could be the only on-label product for sedation during cataract surgery

WHAT MAKES G-MELT DIFFERENT

Zydis® sublingual technology

Dissolves in seconds under the tongue. Exclusive license from Catalent; Zydis® has supported 35+ FDA-approved products over nearly three decades

Superior PK profile

Rapid absorption through sublingual mucosa results in rapid, systemic circulation and better bioavailability profile than via GI tract absorption

Pharmacologic synergy

Midazolam offsets the negative effects of ketamine — delivering effective sedation without IV lines or opioids

MARKET OPPORTUNITY

5M+ Annual U.S. cataract surgeries — G-MELT's initial target market

100M+ Potential short-duration procedures in several large markets

PATH TO LAUNCH

Regulatory Milestones

- **Remaining ancillary studies** — *Initiated*
- **Pre-NDA meeting with FDA** — Completed Q4 2026; NDA dossier in preparation
- **NDA Submission** — Expected November/December 2026
- **Potential FDA Approval** — Q4 2027
- **Potential Launch** — 2028

See References, slide 30

YOCHIL: Pediatric Oral Midazolam ODT

Oral dissolving tablet delivering midazolam for sedation, anxiolysis, and amnesia prior to diagnostic, therapeutic, or endoscopic procedures in pediatric patients

WHAT MAKES YOCHIL DIFFERENT

De-risked clinical pathway

Extensive clinical dataset generated through the G-MELT (MELT-300) program, supporting a streamlined 505(b)(2) regulatory pathway

Validated proprietary ODT platform

Built on the same proprietary Zydis® sublingual platform as G-MELT, dissolving under the tongue in seconds

Addresses an unmet pediatric need

Oral midazolam, currently available only as a syrup, can be challenging for children to tolerate, and a fast-dissolving tablet has the potential to improve both the patient and provider experience

BROAD COMMERCIAL OPPORTUNITY

7M+
Annual Pediatric Procedures

Potential broad label across multiple pediatric procedural settings, supporting a significant commercial opportunity

PATH TO LAUNCH

Key Regulatory Milestones

- **End-of-Phase 2 FDA meeting**
  Completed
- **Protocol refinement**
  Incorporating FDA feedback
- **PK bridging study to midazolam syrup**
  Under consideration
- **NDA Submission**
  H2 2027/H1 2028
- **Potential Launch**
  2028

See References, slide 30

Upcoming Catalysts: Key Milestones Through 2027

Regulatory, clinical, commercial and corporate events expected between now and the end of 2027

Q4 2026

G-MELT NDA submission

Filing for sublingual cataract-surgery sedation, moved ahead of the 1H 2027 plan

Expected by year-end 2026

TYRVAYA first revenue

First quarter of contribution following the October 1 acquisition

Q4 2026

Jan 2027

VEVYE coverage win

Major national plan covering 10M+ commercial lives

Effective January 1, 2027

QUELL full results

Phase 4 IHEEZO study in 231 intravitreal injection patients

Hawaiian Eye & Retina, Jan. 2027

Early 2027

FY 2026 results

Q4 results and 2027 guidance, returning to an annual "revenue greater than" format

Early 2027

TRIESENCE study data

Initial data from the multicenter surgical inflammation study

Early 2027

2027

Investor Day

New York City; intend to present preliminary findings from the CR-01 ocular cancer study

March 2027

OPUVIZ launch

EYLEA-referenced biosimilar, a larger opportunity than BYOOVIZ

2027

G-MELT PDUFA date

FDA action date for the NDA, assuming standard review of the year-end 2026 submission

Expected Q4 2027

References

Sources and footnotes for figures cited throughout this presentation

Data sources

Market, prescription, and procedure data are drawn from IQVIA (including Xponent), PhilRx, Vestrum Health, Market Scope, Definitive Healthcare, the AAO IRIS Registry, CMS HCPCS/CPT databases and Medicare Part B payment limit files, company annual reports, Review of Optometry, and Harrow internal data and data on file. U.S. dry eye disease patient funnel: Farrand et al., Am J Ophthalmol 2017;182:90-98 (16.4M diagnosed U.S. adults, 6.8% of adult population); Prevent Blindness (2019) (moderate-to-severe population); and published U.S. analyses of dry eye symptom prevalence and prescription treatment rates. Malhotra K, et al. U.S. trends of anti-VEGF use from 2017–2023. PLOS ONE; aflibercept 2 mg was the most-used anti-VEGF across Medicare, Medicaid and commercial payers

Regulatory and clinical sources

Regulatory information is drawn from FDA Drugs@FDA, the FDA Orange Book, and FDA-approved product labeling. Clinical and conference sources include Ophthalmology (2024), Frontiers in Medicine (2026), the OIS Dry Eye Conference (March 2021), and data presented at ASRS 2026. Certain figures are internal estimates derived from these datasets and from internal development plans.

Non-GAAP financial measures

Adjusted EBITDA is defined as net income (loss), excluding the effects of stock-based compensation, interest, taxes, depreciation, amortization and other non-recurring items. Compound annual growth rates are calculated for the period 2020 through 2025.

Product comparisons

Product comparisons are for illustrative purposes only. No head-to-head clinical trials have been conducted comparing one product versus another. Comparative statements reflect FDA-approved labeling and publicly available information and are not intended as promotional or clinical claims.

Trademarks

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Forward-looking information

Statements regarding anticipated launches, revenue contribution, regulatory milestones, and market opportunity are forward-looking and are subject to the risks and uncertainties described in Harrow's filings with the Securities and Exchange Commission.