INSPIREMD, INC.

FORM 8-K
(Current report filing)

Filed 07/09/18 for the Period Ending 07/09/18

Telephone	(888) 776-6804
CIK	0001433607
Symbol	NSPR
SIC Code	3841 - Surgical and Medical Instruments and Apparatus
Industry	Medical Equipment, Supplies & Distribution
Sector	Healthcare
Fiscal Year	12/31

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549

FORM 8-K

CURRENT REPORT
Pursuant to Section 13 or 15(d) of the
Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): July 9, 2018

InspireMD, Inc.

(Exact name of registrant as specified in its charter)

Delaware	001-35731	26-2123838
(State or other jurisdiction of incorporation)	(Commission File Number)	(IRS Employer Identification No.)

4 Menorat Hamaor St. Tel Aviv, Israel	6744832
(Address of principal executive offices)	(Zip Code)

Registrant's telephone number, including area code: (888) 776-6804

(Former name or former address, if changed since last report)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

[ ] Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

[ ] Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

[ ] Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

[ ] Pre-commencement communications pursuant to Rule 13e-4 (c) under the Exchange Act (17 CFR 240.13e-4(c))

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§240.12b-2 of this chapter).

Emerging growth company [ ]

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. [ ]

Item 7.01 Regulation FD Disclosure.

InspireMD, Inc. (the " ***Company*** ") intends, from time to time, to present and/or distribute to the investment community and utilize at various industry and other conferences a slide presentation, which is attached hereto as Exhibit 99.1. The Company undertakes no obligation to update, supplement or amend the materials attached hereto as Exhibit 99.1.

In accordance with General Instruction B.2 of Form 8-K, the information in this Item 7.01 of this Current Report on Form 8-K, including Exhibit 99.1, shall not be deemed "filed" for the purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the " ***Exchange Act*** "), or otherwise subject to the liabilities of that section, nor shall it be deemed incorporated by reference in any filing under the Exchange Act or the Securities Act of 1933, as amended, except as shall be expressly set forth by reference in such a filing.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits

Exhibit Number	Description
99.1	Slide Presentation of InspireMD, Inc. dated July 2018.

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, as amended, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

InspireMD, Inc.

Date: July 9, 2018

By: */s/ Craig Shore*

Name: Craig Shore

Title: Chief Financial Officer

Investor Presentation

NYSE MKT: NSPR

July 2018

Forward Looking Statements

This presentation contains "forward-looking statements." Such statements may be preceded by the words "intends," "may," "will," "plans," "expects," "anticipates," "projects," "predicts," "estimates," "aims," "believes," "hopes," "potential" or similar words. Forward-looking statements are not guarantees of future performance, are based on certain assumptions and are subject to various known and unknown risks and uncertainties, many of which are beyond the Company's control, and cannot be predicted or quantified and consequently, actual results may differ materially from those expressed or implied by such forward-looking statements. Such risks and uncertainties include, without limitation, risks and uncertainties associated with (i) market acceptance of our existing and new products, (ii) negative clinical trial results or lengthy product delays in key markets, (iii) an inability to secure regulatory approvals for the sale of our products, (iv) intense competition in the medical device industry from much larger, multinational companies, (v) product liability claims, (vi) product malfunctions, (vii) our limited manufacturing capabilities and reliance on subcontractors for assistance, (viii) insufficient or inadequate reimbursement by governmental and other third party payors for our products, (ix) our efforts to successfully obtain and maintain intellectual property protection covering our products, which may not be successful, (x) legislative or regulatory reform of the healthcare system in both the U.S. and foreign jurisdictions, (xi) our reliance on single suppliers for certain product components, (xii) the fact that we will need to raise additional capital to meet our business requirements in the future and that such capital raising may be costly, dilutive or difficult to obtain and (xiii) the fact that we conduct business in multiple foreign jurisdictions, exposing us to foreign currency exchange rate fluctuations, logistical and communications challenges, burdens and costs of compliance with foreign laws and political and economic instability in each jurisdiction. More detailed information about the Company and the risk factors that may affect the realization of forward looking statements is set forth in the Company's filings with the Securities and Exchange Commission (SEC), including the Company's Annual Report on Form 10-K and its Quarterly Reports on Form 10-Q. Investors and security holders are urged to read these documents free of charge on the SEC's web site at http://www.sec.gov. The Company assumes no obligation to publicly update or revise its forward-looking statements as a result of new information, future events or otherwise.

About InspireMD

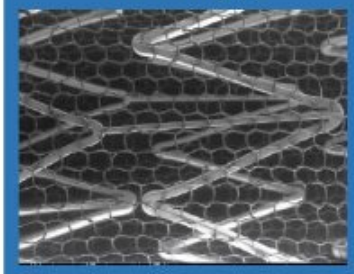
InspireMD is a commercial-stage medical device company developing and marketing innovative embolic prevention systems (EPS) that can prevent harmful consequences associated with conventional medical device procedures, with a primary focus on preventing stroke in patients with carotid artery disease (CAD)

COMPANY

NYSE AMER:	NSPR
Employees:	36
Headquarters:	Tel Aviv
Manufacturing Facility:	Tel Aviv

TECHNOLOGY

Proprietary MicroNet™ technology



PRODUCTS

Commercial:

CGuard™ EPS (Carotid)

MGuard™ EPS (Coronary)

Pipeline:

Next Gen CGuard™

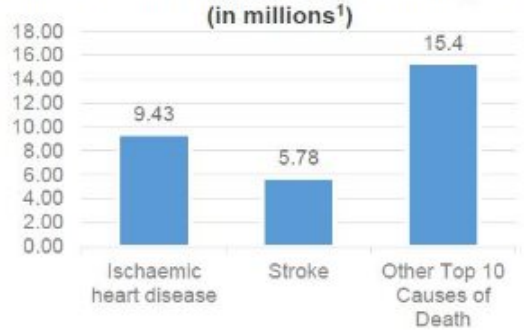
NGuard™ (Neuro)

PVGuard™ (Peripheral)

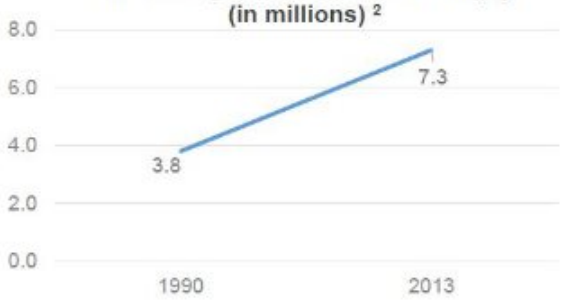
Stroke: the second biggest cause of death globally

- There are 15 million new strokes a year [4]
- In 2016, 5.7 million deaths, were caused by stroke[1]
- 5 million people/year are left permanently disabled[4]
- $34BB in healthcare costs in the U.S. is associated with stroke management[3]
- 7.3 million young people are affected by stroke[2]

Stroke: second biggest cause of death globally (in millions[1])



The number of younger people affected by stroke has risen sharply (in millions) [2]



- Approximately 85% of all strokes are ischaemic strokes, which result from a lack of blood flow to the brain
- Carotid artery disease (CAD) is a major risk factor for stroke
- Approximately 20% of all ischemic strokes are estimated to be caused by CAD (2.2-2.4 million)

[1] http://www.who.int/en/news-room/fact-sheets/detail/the-top-10-causes-of-death
[2] Prevalence of stroke in people aged 20-64 (Neuroepidemiology 2015;45:190-20) in millions
[3] Center For Disease Control and Prevention – Stroke Facts – 2017
[4] http://www.emro.who.int/health-topics/stroke-cerebrovascular-accident/index.html

Addressable device market in stroke prevention

- 2017: ~600,000 patients with high grade carotid stenosis (HGCS) require interventions for CAD. At present, ~80% are surgically treated with carotid endarderectomy (CEA)
- The balance are treated with conventional carotid stents (CAS) with an average of 1.05 stents/procedure
- At a price of $1,650 per stent, the addressable market is more than $1 billion

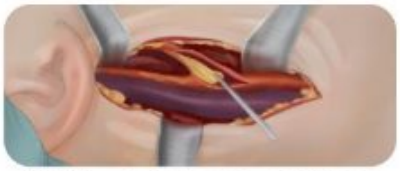
2017 Health Research International Market Report

Stroke prevention in CAD: Surgery vs. Carotid Artery Stenting

Based on CREST trial data, in which only conventional carotid stents were used

Carotid Endarterectomy (CEA)

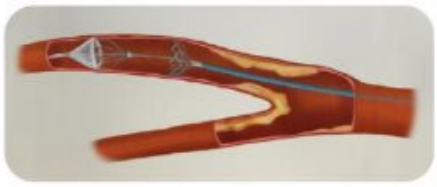
- Low stroke risk[1], but…
- Invasive; risk of surgical complications
  - Myocardial Infarction[1]
  - Risk of cranial nerve injury[2]
  - Esthetic concern



CREST: 2.1% unresolved facial nerve at 6 months[2] (80% motor)

Filter Protected Stenting (CAS)

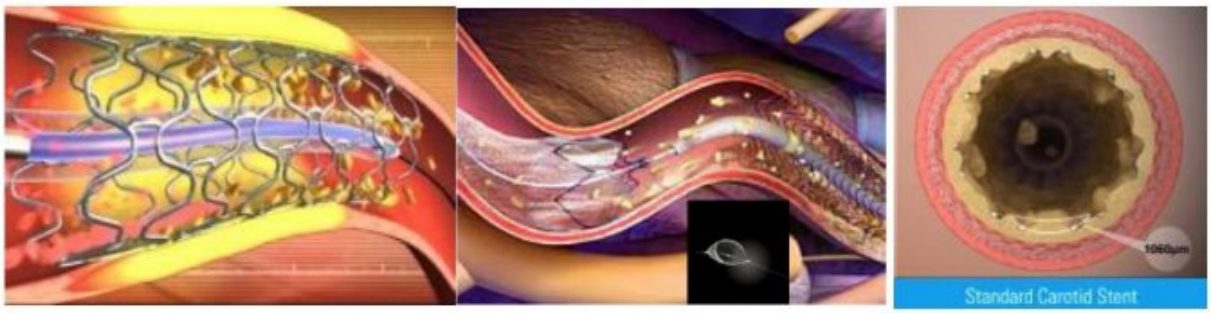
- Patient friendly, long-term durability[1],
- Non-Invasive; risk complications
  - Procedural minor stroke risk (with conventional stents)[1]
  - Post-procedural minor stroke risk(with conventional stents)[1]



[1]CREST Trial: N Engl J Med 2010;363:11-23
[2] Circulation. 2012;125:2256-2264

Embolization Following Carotid Artery Stenting

Plaque protrusion through stent struts occurs in up to 65% of conventional carotid stents in relation to plaque morphology/symptomatic status and stent type, providing a mechanism for post carotid artery stenting (CAS) cerebral embolization, either directly or via additional thrombus formation.*

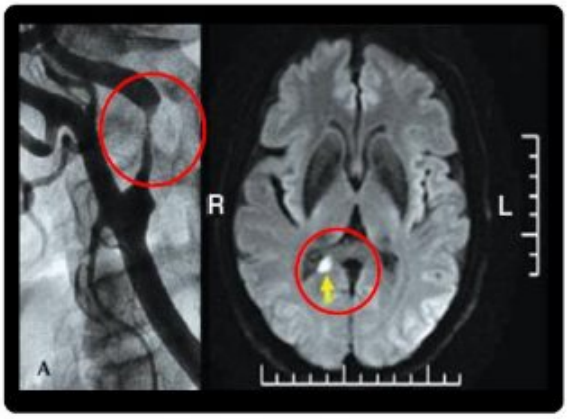


https://biotextiles2015.wordpress.com/embolic-protection-device/

2/3 of CAS neurovascular events (stroke, TIA) are POST-procedural.**

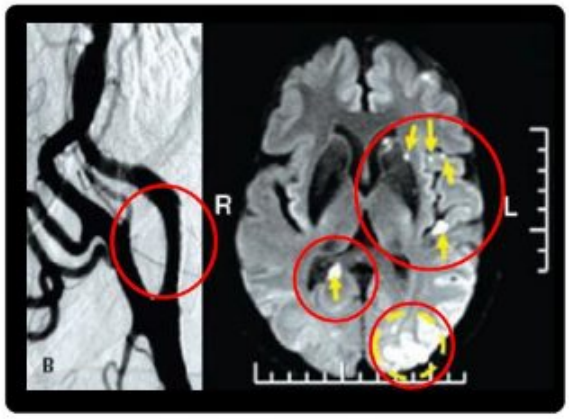
* Musialek, et al. Eurointerventions 2016;12 August 2016.
** Bosiers et al. Eur J Vasc Endovasc Surg Vol 33, Feb 2007.

Consequences Range from Neurological Deficit to Stroke



Pre-Procedure

Pre-intervention showing 90% occlusion of the carotid artery and an MRI showing an old white matter infarction (obstruction).



Post-Procedure

Post-intervention showing successful opening of the occluded carotid artery with conventional stenting and an MRI showing multiple micro-infarcts (obstructions) post-procedure due to liberation of embolic particles.

Cano et al. Rev Bras Cardiol Invasiva 2013; 21(2): 158-64.

CGuard™ EPS has been shown to prevent embolic debris passing into the carotid artery

Conventional Carotid Stent

Carotid plaque can protrude through the mesh

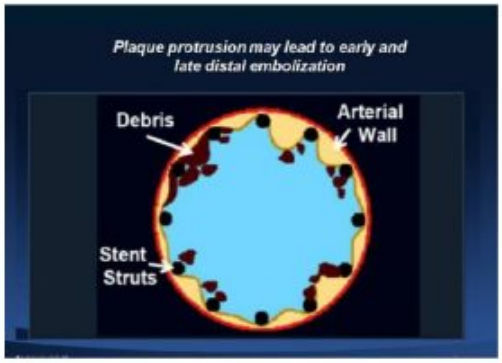
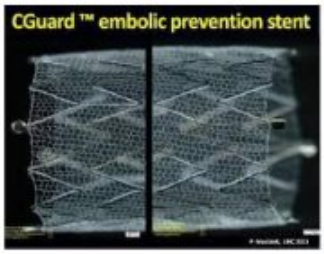


Image presented at TCT 2014
https://www.tctmd.com/conference/tct-2014
https://www.nyp.org/locations/newyork-presbyterian-columbia-university-medical-center

CGuard™ EPS

- The MicroNet™ **permanently covers** plaque and stops "debris" from passing through the mesh.



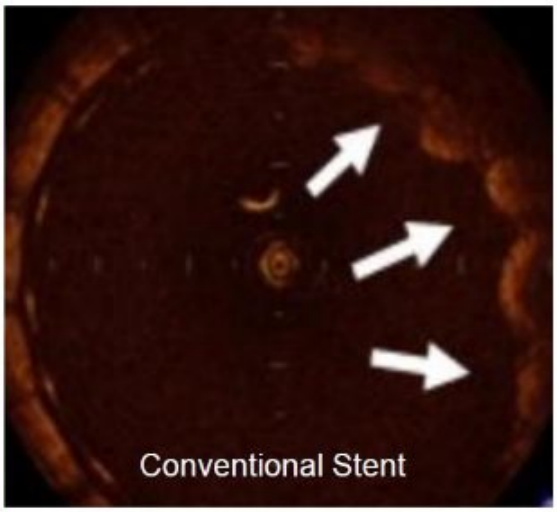
- Ultrathin PET mesh made of a single 20 micron fibre from a biocompatible polymer - widely used in other medical implants
- MicroNet™ acts as a "safety net" with greater vessel area coverage to prevent plaque protrusion through the stent into the blood vessel

Case reports courtesy Dr. Gianmarco de Donato, Department of Medicine Surgery and Neuroscience Universita degli studi di Siena, Italy.

CGuard™ EPS has been shown to prevent debris passing into the carotid artery

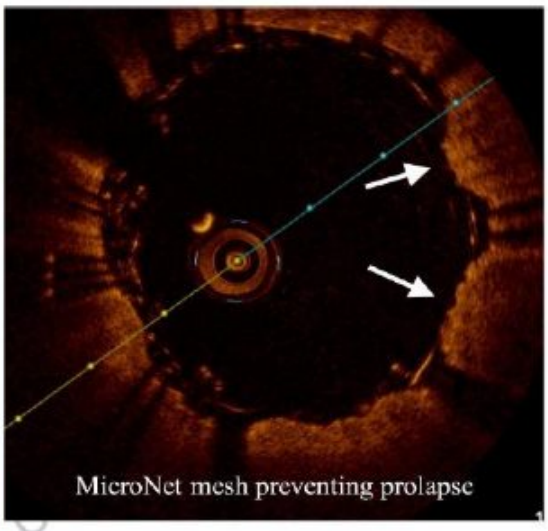
Conventional Carotid Stents [1]

No plaque coverage - leading to plaque protrusions or prolapse passing into the vessel lumen



CGuard™ EPS [2]

The MicroNet™ **permanently covers** plaque and prevents "debris" from passing through the mesh.



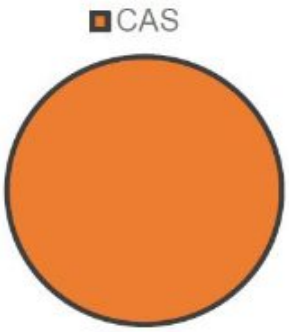
[1]Yoshimura, et al. J A C C : Cardiovascular Imaging 4; 4, 2011 : 43 2-6
2 Umemoto. et al. Eurointervention 192 2017

The potential paradigm shift with CGuard™

Carotid procedures today are primarily surgical

MicroNet™ covered stents could become the Gold Standard

Carotid procedures tomorrow could be mostly minimally invasive with CGuard™

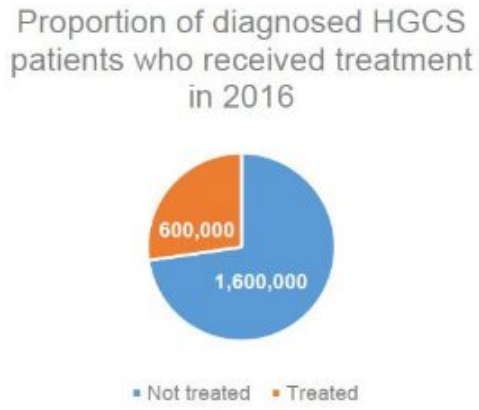


100% of addressable market - $1.0 Billion

2017 Health Research International Market Report

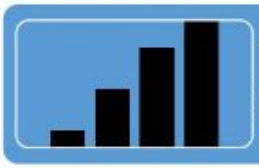
CGuard™ : market potential in stroke prevention

In 2016…



2017 Health Research International Market Report

A body of evidence is accumulating that show CGuard™ has nearly-eliminated peri-procedural and 30-day complications [1]



Ten-year follow-up from the CREST trial in patients with symptomatic and asymptomatic carotid stenosis shows that CAS and CEA produce the same clinical benefit

Conventional carotid stents are associated with a higher risk of (mostly minor) strokes up to 30 days after the procedure.[2] This could be caused by atherosclerotic plaques protruding through the struts of the stent

The rate of any procedural stroke, death MI or postprocedural ipsilateral stroke at 30 days following CEA was 4.5% in the CREST trial [2]

Data from more than 1237[3] patients treated with CGuard™ EPS in clinical trials/registries show an overall 30-day complication rate below 1%

1. Postepy Kardiol Interwencyjnej. 2017; 13(2): 95–106
2. CREST https://www.nejm.org/doi/full/10.1056/NEJMoa0912321
3. Internal data

Positive CGuard™ Clinical Experience

CARENET Clinical Trial (2014)

- 30 Patient Safety and Efficacy clinical trial
- **Zero major adverse cardiac or cerebral events (MACCE)** at 30 days (Comparative data 5.72%*)
- **50% fewer new ischemic lesions** with lesion volume being 10x times smaller compared to historical non-mesh carotid artery stenting data
- **All new ischemic lesions fully resolved at 30 days** except one
- 3.6% MACCE rate at 6 months (Comparative data 8.09%**)
- **Zero strokes or stroke related deaths at 12 months**

PARADIGM 101 Clinical Trial (2015 and 2016)

- 101 patient trial evaluating CGuard EPS in unselected, consecutive carotid patients (all-comers)
  - **99.1% device success**
  - **0% MACCE (Death/stroke/MI) @ 48 hr**
  - **0% MACCE @ 30 day**
  - **Zero strokes or stroke related deaths at 12 months**

"CGuard can safely be used on more than 90% of all-comer patients that have carotid artery stenosis."
P. Musialek, MD

* Trials included in analysis: ARCHeR pooled, ARMOUR, BEACH, CABERNET, CREATE, EMPIRE, EPIC, MAVErIC 1+2, MAVErIC International, PRIAMUS, SAPPHIRE, SECURITY, PROFI, ICSS
** Values extrapolated from event curves

Additional Independent Clinical

Independent study conducted in 30 patients with internal carotid artery disease

Clinical results (2016)

- **100% success** in implanting the CGuard™ EPS
- No peri- or post-procedural complications
- **No deaths, major adverse events, minor or major strokes**, or new neurologic symptoms during the six months following the procedure
- All vessels treated with the CGuard™ system remained patent (open) at six months
- DW-MRI performed in 19 of 30 patients found **no new ipsilateral lesions after 30 days and after six months** compared with baseline DW-MRI studies

Clinical Results and Mechanical Properties of the Carotid CGUARD Double-Layered Embolic Prevention Stent

"CGuard EPS is an important new treatment option for both symptomatic and asymptomatic carotid artery stenosis patients."

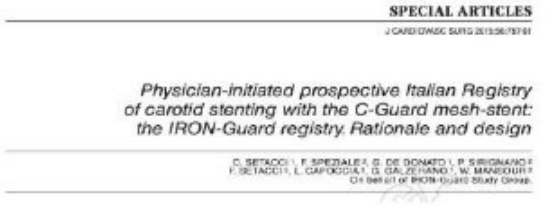
C. Wissgott, MD

Wissgott, et.al. J Endovasc Ther 2016.

Additional Independent Clinical Data

The Iron-Guard Registry

- Physician initiated
- 12 large Italian medical centers
- 200 patients


SPECIAL ARTICLES

Physician-initiated prospective Italian Registry of carotid stenting with the C-Guard mesh-stent: the IRON-Guard registry. Rationale and design

Clinical Results

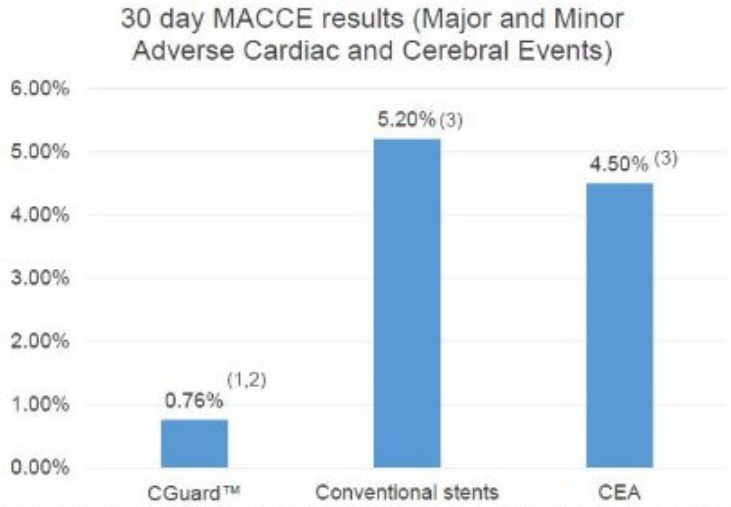
- **100% success** in implanting the CGuard EPS
- **No major adverse cerebrovascular cardiac events** at 30 days
- DW-MRI performed in 61 of 200 patients found **only 19% new lesions** between 24-72 hours
  - CARENET reported 37% new lesions in 30 patients
  - PROFI reported 66% new lesions in 62 patients

"The IRON-Guard Registry shows promising results in this interim analysis with a low incidence of complications and the lowest reported rate of new MRDWI lesions

F. Spezaile, MD and P. Sirignano, MD

CGuard™ EPS vs conventional stents and surgery

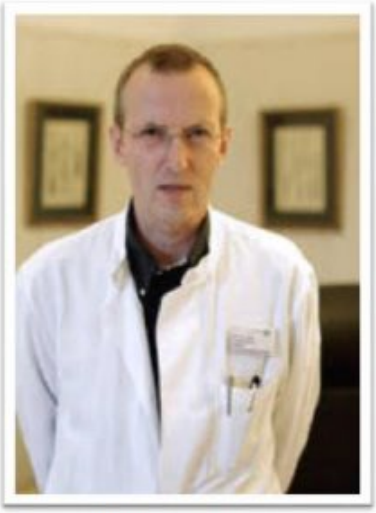
- CGuard™ shows strong benefits compared to both conventional carotid stents and surgery
- CGuard™ is a widely researched next generation carotid device stent (7 completed clinical trials and 4 ongoing trials)
- Long term sustained and consistent benefit (MACCE 0.9% @ 12 months)[4]



*NOTE: *IRON-GUARD, Wisggott and Casana trials are not included in this calculation of the CGuard data as these trials were not independently monitored*

[1] JACC Cardiovasc Interv 2015 Aug 17. 8:1229-1234
[2] EuroIntervention 2016 Aug 05. 658-70
[3] N Engl J of Med 2010 July 1. 11-23
4 Musialek et. al. TCT 2016 Featured Research Presentation

A leading vascular surgeon's view



Prof. Ralf Kolvenbach,
Head of Cardiovascular Diseases
Medical Director of the Catholic Hospitals,
Duesseldorf, Germany

"*As a vascular surgeon I am very experienced with CEA.* ***From my perspective the near future will show a shift towards carotid stenting because of mesh covered stents.***

The CGuard™, in comparison to other [carotid] stents, even in comparison to other mesh covered stents, is a very easy to use device.. *When I use other mesh covered stent grafts I need very complicated measurements ….. With CGuard™ …very simple, you take it off the shelf and you use it and that's it.*

Patient risks associated with stenting using CGuard™ are far lower than those associated with CEA or with other types of carotid stents. ***CGuard™ will become a major factor in preventing strokes caused by carotid artery disease.***

With CGuard™ … we can get excellent results…probably better than open surgery … the Gold Standard"

https://www.youtube.com/watch?v=A-FNpvP8PVQ

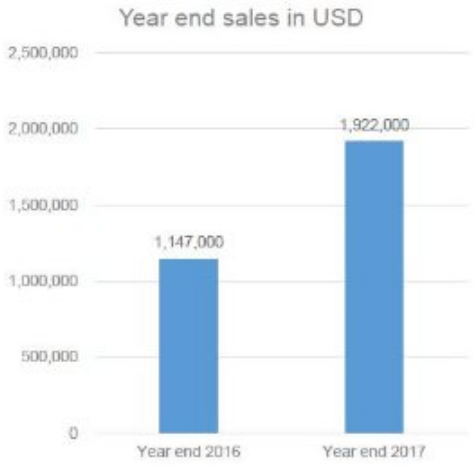
Sales Performance

Following the change in sales and distribution strategy in early 2017…

- **132%** increase in **CGuard™ EPS** sales for Q1 2018 compared to Q1 2017
- **77%** increase in company revenues for Q1 2018 compared to Q1 2017
- **5 consecutive quarters** of double digit growth
- Increase in global presence

CGuard™ EPS - accelerating sales growth

- Growth trends have been consistent for 2017/2018
- Quarter to quarter Q1 sales have more than doubled



Accelerating CGuard™ EPS sales growth: Germany

- German sales are on a positive trajectory following the change in distributors last year with full implementation occurring mid-way through Q3 2017
- CGuard™ Q1 sales in Germany for 2018 alone are 64% of sales in Germany for the whole of 2017

Accelerating CGuard™ EPS sales growth: Italy

- CGuard™ sales in Italy have been strong over the last three years with continuing momentum
- Q1 comparisons between 2017 and 2018 show an 85% increase

Implementing our strategy: Overview

InspireMD is seeking to become the leading stroke prevention company, focused on reducing the global burden of stroke

1

- **Transition Vascular Surgeons to CGuard™**
- Advisory boards, surgeon specific clinical registries, centres of excellence
- Publish, present, and communicate all data demonstrating that CGuard™ is as safe as CEA
- Establish a presence at major vascular surgery meetings
- Expand digital, social and other tools to more effectively communicate
- Partner with appropriate societies focused on Stroke

2

- **Transition current users of conventional carotid stents to CGuard™**
- Persuade current users of conventional carotid stents to switch to CGuard™ through communication of clinical data
- Continue to support investigator initiated clinical registries
- Continue to engage advisory board and continue to develop network of KOLs

3

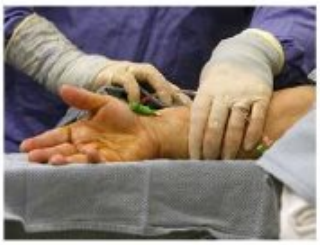
- **Expand footprint in existing geographical areas**
- Focus on larger growing markets – Germany, Italy, Poland
- Support regional clinical and clinical specialty registries to build on the clinical database and broaden support
- Initiate discussions with the National Institute for Health and Clinical Excellence in the UK who set clinical guidelines

4

- **Continue geographical expansion where strategically relevant**
- Continued focus on markets where a CE mark is already in place
- Increase efforts in China and Japan
- Submit US IDE

CGuard™ Product Development*

- US FDA
  - Pre-IDE FDA submission for CGuard™ February 2017
  - Formal FDA meeting held April 2017
  - 6-9 months of pre-clinical work required to file IDE application to begin a US clinical trial
- Next generation CGuard™ - 5 French CGuard™



  - Minimally invasive devices trending smaller for broader and easier usage
  - Interventional neuroradiologists are major players in stroke treatment and tend to prefer lower profile devices
  - Advantageous in the Asia Pacific markets
  - Transradial delivery (delivery from the wrist vs. femoral artery) gaining favor among interventionalists
- Proactively evaluating synergistic opportunities to further broaden the product portfolio and take advantage of the global distribution network that has been developed

*Subject to sufficient funding

Intellectual Property Portfolio

- Proprietary platform technology supported by a robust intellectual property portfolio
- Continue to strengthen and broaden patent protection globally to enable future pipeline products

PATENT RIGHTS	ISSUED	ALLOWED	PENDING
USA	8	0	8
Rest of World	33	1	15

Leadership

Significant track records of success

Dr. James Barry	President and CEO	Boston Scientific, Pfizer
Craig Shore	CFO	Pfizer, GE
Agustin Gago	CCO	Delcath Systems, Inc., angiodynamics, EZ EM
Paul Stuka	Chairman	OSIRIS, Fidelity Investments
Michael Berman	Director	Boston Scientific, Velocimed, LUTONIX
Dr. Campbell Rogers	Director	HeartFlow, Cordis, Harvard Medical School
Thomas Kester	Director	Kester Search Group, KPMG
Sol Barer, Ph.D.	Special Advisor to the Board	Celgene, TEVA

Recent/Upcoming Anticipated Milestones

InspireMD

Continued clinical trial/registry results

Continued market execution and revenue growth

*Subject to sufficient funding

Summary

- Focused on the deadly and catastrophic problem of stroke that is estimated to cost the healthcare system more than $34BB annually in the US alone
- The current addressable market for CGuard™ EPS is estimated to be $1BB with the potential to further expand into the 1.6MM patient population which is diagnosed but not treated
- Currently, vascular surgeons treat the majority of patients with carotid artery disease: Focus will be on converting the vascular surgeons to use CGuard™ EPS
- Strong and consistent clinical data continues to validate the safety profile of CGuard™ EPS even in a large "all comer" patient population with data indicating sustained benefit out to 2 years
- New commercial strategy beginning to take hold as indicated by sales growth over the last year
- Increasingly more presentations and live clinical cases with CGuard™ are featured at major and regional clinical conferences
- Beginning to focus more efforts on the major markets in Asia, including China and Japan
- Product pipeline to support continued growth in all geographies, including the United States

NYSE AMER: NSPR

Stock Price (7/6/2018):	$0.25
Average 3 Month Volume (7/6/2018):	886 K
Shares Outstanding (7/6/2018):	21.7 M
Shares Outstanding Including full conversion of preferred shares and prefunded warrants (7/6/20188):	44.7 M
Market Capitalization including full conversion of preferred shares (7/6/2018):	$11.2 M
Headquarters:	Tel Aviv, Israel
# of Employees (7/6/18)	36

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