



TCT 2024 Investor Update

October 30, 2024



Safe harbor for forward-looking statements

This presentation contains forward-looking statements within the meaning of Section 27A of the Securities Act of 1933 and Section 21E of the Securities Exchange Act of 1934. Forward-looking statements may be identified by words like "anticipate," "expect," "project," "believe," "plan," "estimate," "may," "intend" and similar words. These forward-looking statements are based on our beliefs, assumptions and estimates using information available to us at the time and are not intended to be guarantees of future events or performance. These forward-looking statements include, among other things, statements regarding our business plans, strategy, performance and goals, including environmental, social and governance (ESG) plans, financial performance and capital allocation priorities, acquisitions and investments, litigation, clinical trials, new and anticipated product launches and approvals and product performance and impact. If our underlying assumptions turn out to be incorrect, or if certain risks or uncertainties materialize, actual results could vary materially from the expectations and projections expressed or implied by our forward-looking statements. These factors, in some cases, have affected and in the future (together with other factors) could affect our ability to implement our business strategy and may cause actual results to differ materially from those contemplated by the statements expressed in this presentation. As a result, readers are cautioned not to place undue reliance on any of our forward-looking statements.

Factors that may cause such differences can be found in our most recent Annual Report on Form 10-K and Quarterly Reports on Form 10-Q filed or to be filed with the Securities and Exchange Commission under the headings "Risk Factors" and "Safe Harbor for Forward-Looking Statements." Accordingly, you are cautioned not to place undue reliance on any of our forward-looking statements. We disclaim any intention or obligation to publicly update or revise any forward-looking statements to reflect any change in our expectations or in events, conditions, or circumstances on which they may be based, or that may affect the likelihood that actual results will differ from those contained in the forward-looking statements except as required by law.



Regulatory disclaimers

ACURATE PRIME™ valve platform	CE Marked. U.S.: Caution: Investigational Device. Limited by Federal (or U.S.) law to investigational use only. Not available for sale.
ACURATE neo2™ valve platform	CE Marked. U.S.: Caution: Investigational Device. Limited by Federal (or U.S.) law to investigational use only. Not available for sale.
LUX-HF ICM with Heart Failure Monitoring	Device under development. Not available for use or sale worldwide.
mCRM™ System	U.S.: Caution: Investigational Device. Limited by Federal (or U.S.) law to investigational use only. Not available for sale. Pending CE Mark.



Financial disclaimers

Market Estimates:

Unless noted otherwise, all references to market sizes, market share positions, and market growth rates are BSX internal estimates. Unless noted otherwise, all references to market sizes represent 2024 estimates and all references to market growth rates represent estimated CAGR from 2025 – 2027.

Non-GAAP Financial Measures:

This presentation contains non-generally accepted accounting principles in the United States (GAAP) measures (denoted with *) in talking about our Company's performance. These non-GAAP financial measures are not in accordance with U.S. GAAP and should not be considered in isolation from or as a replacement for the most directly comparable GAAP financial measures. Further, other companies may calculate these non-GAAP financial measures differently than we do, which may limit the usefulness of those measures for comparative purposes. The reconciliations of those non-GAAP measures to their most comparable GAAP measures are contained within this document including appendices attached to the end of this presentation

All revenue growth rates are operational unless otherwise noted. Operational net sales growth is a non-GAAP measure that excludes the impact of foreign currency fluctuations. Organic net sales growth is a non-GAAP measure that excludes the impact of foreign currency fluctuations and net sales attributable to acquisitions and divestitures for which there are less than a full period of comparable net sales.

Use of Document:

Amounts reported in millions within this presentation are computed based on the amounts in thousands. As a result, the sum of the components reported in millions may not equal the total amount reported in millions due to rounding. Certain columns and rows within tables may not add due to the use of rounded numbers. Percentages presented are calculated from the underlying unrounded amounts.



Joe Fitzgerald

Executive Vice President & Group
President, Cardiology



The Cardiology group

~\$38B served market in 2024E growing ~8% through 2027E

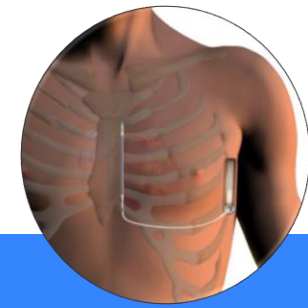
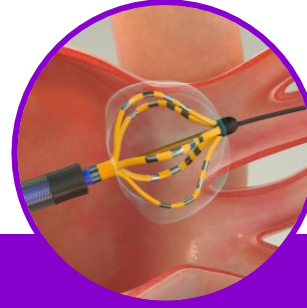
Boston
Scientific

Interventional Cardiology
Therapies (ICTx)

WATCHMAN

Electro-
physiology (EP)

Cardiac Rhythm Management
(CRM)



Coronary
Therapies (CT)

Structural Heart
Valves (SHV)

Access Solutions

Core Cardiac
Rhythm
Management

Cardiac
Diagnostics &
Services

\$8.6B market
HSD Growth

\$6.7B market
HSD Growth

\$1.7B market
DD Growth

\$10B market
DD Growth

\$9.2B market
LSD Growth

\$2.4B market
MSD Growth



Well-positioned for accelerated growth

Achieved 23%* global growth in Cardiology YTD 2024

YTD 2024 Global Growth and Milestones



U.S. Growth

27%*



International Growth

18%*

12%*

ICTx

19%*

WATCHMAN

126%*

EP

3%*

CRM

AGENT™ Drug-Coated Balloon
 • FDA Approval & Launch in U.S.

AVVIGO™+ Multi-Modality Guidance System
 • Health Canada Approval & Launch in Canada
 • CDSCO Approval & Launch in India

ACURATE Prime™ Aortic Valve System
 • CE Mark & Launch in Europe

WATCHMAN TruSteer™
 • FDA Approval & Launch in U.S.

OPTION Clinical Trial
 • Data to be presented at AHA in Nov.

WATCHMAN FLX™ Pro LAAC Device
 • Surpassed half million patients treated with WATCHMAN therapy

FARAPULSE™ Pulsed Field Ablation System
 • FDA Approval & U.S. Launch
 • NMPA Approval & Launch in China
 • PMDA Approval in Japan

FARAWAVE™ NAV Pulsed Field Ablation Catheter
 • FDA Approval

FARAVIEW™ Software Module
 • FDA 510(k) Clearance

INGEVITY™+ Pacing Leads
 • FDA Approval of Indication to include left bundle branch area pacing

MODULAR ATP and APPRAISE ATP
 • Positive data presented at HRS

LUX-Dx II+ Insertable Cardiac Monitor System
 • CE Mark



Significant growth drivers throughout the portfolio

Interventional Cardiology Therapies (ICTx)

Coronary Therapies (CT)



AGENT™ Drug-Coated Balloon



AVVIGO™ + Multi-Modality Guidance System

Structural Heart Valves (SHV)



ACURATE Prime™ Aortic Valve System

WATCHMAN (WM)



WATCHMAN FLX™ PRO and Next Gen WATCHMAN

Electro-physiology (EP)



FARAVIEW™ Software and FARAWAVE™ NAV Ablation Catheter



Cardiac Rhythm Management (CRM)

Core CRM



mCRM™ System



Next Gen CRM platform

Diagnostics (Dx)



LUX-Dx II+™ and LUX-HF ICM



BodyGuardian™ MINI UL Remote Cardiac Monitor



Lance Bates

Global President, Interventional
Cardiology Therapies



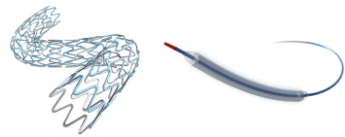
2024E served markets \$15B

Growing ~8% through 2027E



Drug Eluting Therapies

\$3.1B
HSD Growth



SYNERGY™ XD Stent System

AGENT™ Drug-Coated Balloon



Complex PCI

\$4.2B
HSD Growth



ROTAPRO™ Rotational Atherectomy Device

WOLVERINE™ Coronary Cutting Balloon



PCI-Guidance

\$1.3B
LDD Growth



AVVIGO™+ Multi Modality Guidance System
COMET™ Pressure Guidewire



TAVR

\$6.7B
HSD Growth



ACURATE Prime™ Aortic Valve System

SENTINEL™ Cerebral Protection System

Diversification in high-growth markets, including mechanical circulatory support with the VITALYST system, increases over the long-range plan



AGENT DCB & AVVIGO+ Imaging

Broad portfolio to provide right tools at right time



AVVIGO™+ Multi-Modality Guidance System

Launched in **45+ countries**



Class 1A indication for intravascular imaging in ESC Guidelines

- Highest level of guidelines recommendation
- Backed-up by several clinical studies
- For complex lesions including LM, bifurcation & long lesions

Cath labs utilizing AVVIGO+ use imaging in **2x** more procedures compared to AVVIGO



Driving broad portfolio usage through proper imaging and vessel preparation in AGENT DCB cases



IVUS use occurred in

96%

of AGENT cases*
4% OCT

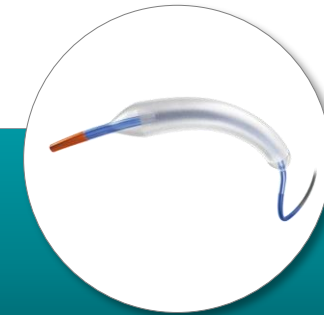
A device was used to prep the vessel in

100%

of AGENT cases*

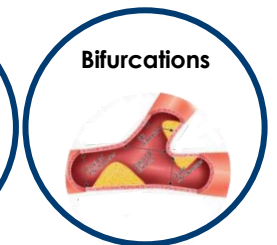
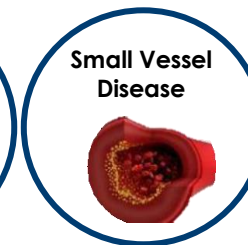
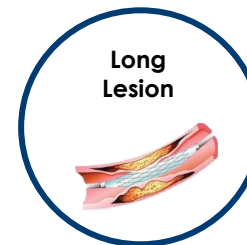


*US LMR Cases



AGENT™ Drug-Coated Balloon

Potential growth through **indication and matrix expansions**



AGENT IDE **40mm Long Lesion Cohort** underway with the first patient enrolled

A large teal arrow graphic pointing to the right, starting from the left edge of the slide and ending at the right edge. It is positioned on the left side of the slide, with its tip pointing towards the center.A small logo consisting of three overlapping arrow shapes pointing to the right. The leftmost arrow is dark blue, the middle one is purple, and the rightmost one is teal.

Dr. Janar Sathananthan

Chief Medical Officer, Interventional
Cardiology Therapies



ACURATE IDE Trial Design

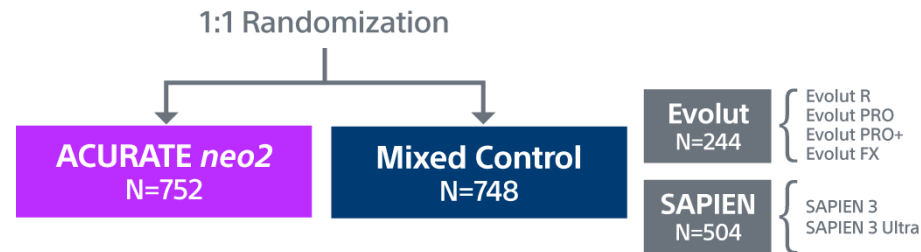
Largest randomized, head-to-head comparison of ACURATE & commercial TAVR platforms



Prospective, multicenter, randomized study

N=1500 patients with symptomatic severe native aortic stenosis indicated for TAVR

Operators pre-specify valve type to be used if randomized to Control



- **Primary Endpoint: Composite of all-cause mortality, stroke or rehospitalization[†] at 1 year**
- Follow-Up: Discharge/7d post-procedure, 30d, 6mo, 1-10y post-procedure



Trial complexity: 1,500 all-risk patients enrolled nearly four years during global COVID-19 pandemic



Enrollment pace: Nearly four-year enrollment, with average of 2.9 months between each sites implant



Supply constraints: Constraints on BAV supply and availability of BAV sizes (for pre- and post-dilation)



Low operator experience: 72% of implanters implanted ≤ 5 ACURATE neo2 valves



Staffing and case support: COVID restrictions on international proctor support

[†] Hospitalization for valve-related symptoms or worsening congestive heart failure (NYHA class III or IV); per VARC-2 definition



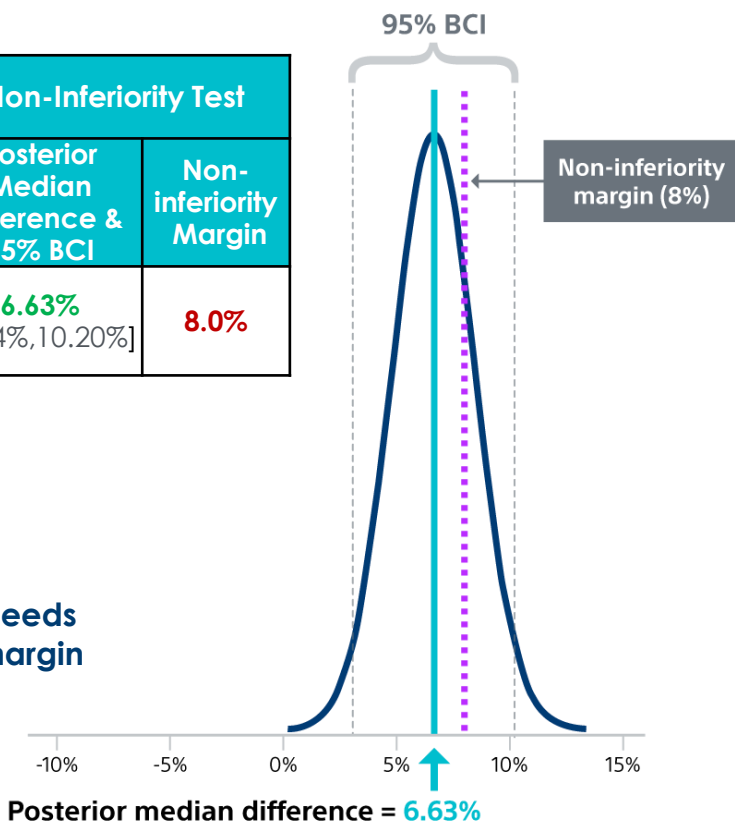
ACURATE IDE Primary Endpoint

Primary Endpoint through 1-Year

Death, stroke or rehospitalization†

Posterior Median & 95% BCI		Non-Inferiority Test	
ACURATE neo2	Control	Posterior Median Difference & 95% BCI	Non-inferiority Margin
16.16% [13.38%,19.07%]	9.53% [7.47%,11.89%]	6.63% [3.04%,10.20%]	8.0%

Upper bound of 95% BCI exceeds prespecified non-inferiority margin



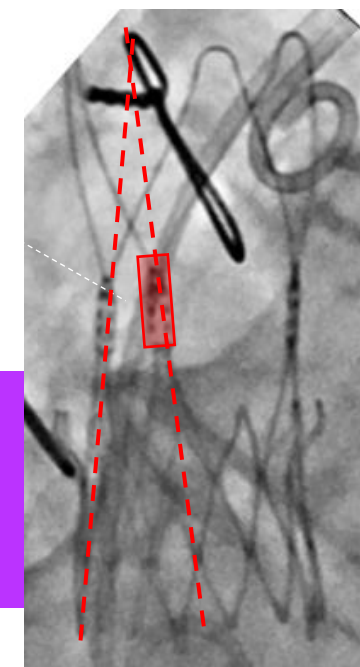
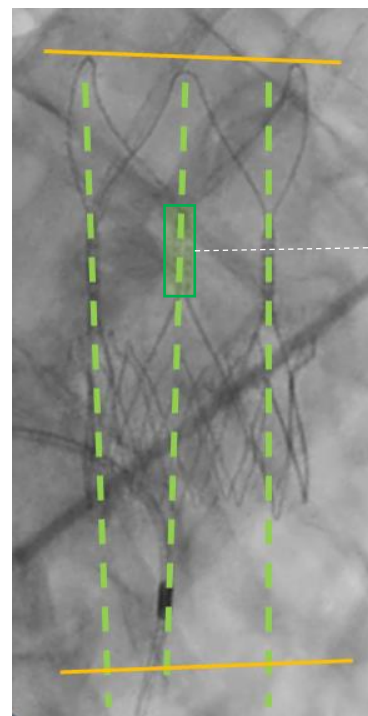
Non-inferiority of ACURATE neo2 vs. Control for the primary endpoint was not met

† Hospitalization for valve-related symptoms or worsening congestive heart failure (NYHA class III or IV); per VARC-2 definition

ACURATE Implant Quality Analysis

Parallel Commissure Posts → Expanded Valve

Non-Parallel Commissure Posts → Under-Expanded Valve



Commissure post

Valve frame under-expansion was present in ~20% of ACURATE neo2 cases

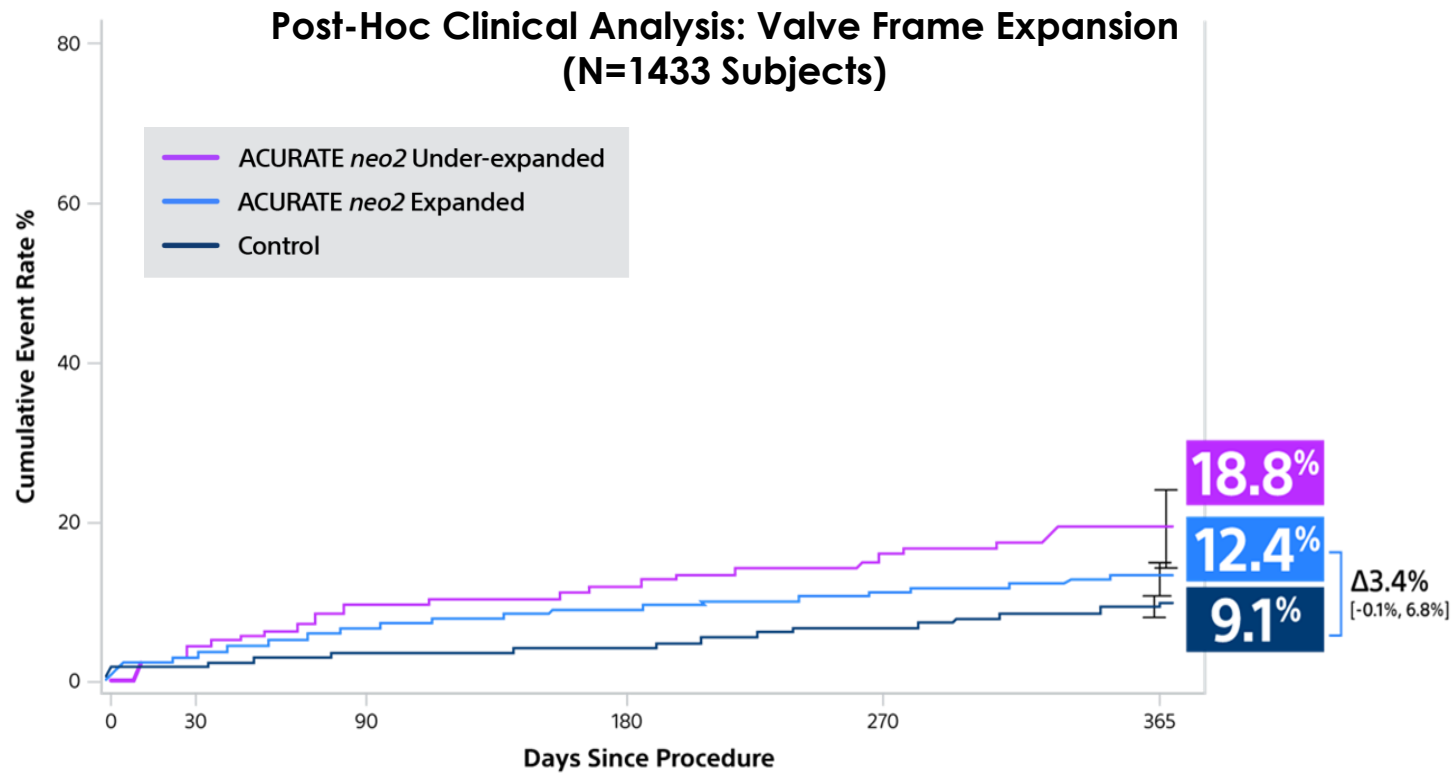
Potential procedural technique association: Pre- and post-dilation inconsistent with commercial practice due to use of smaller-than-recommended balloons



ACURATE IDE Post-Hoc Analysis

Analyzed outcomes for expanded & under-expanded valve frame

Time-to-Event Analysis through 1 Year Death, stroke, or rehospitalization[†]



The rate of the composite endpoint of death, stroke, or rehospitalization were similar for expanded ACURATE *neo2* valves vs. the control 12.4% vs. 9.1%; Δ3.4% [-0.1%, 6.8%]

[†] Hospitalization for valve-related symptoms or worsening congestive heart failure (NYHA class III or IV); per VARC-2 definition



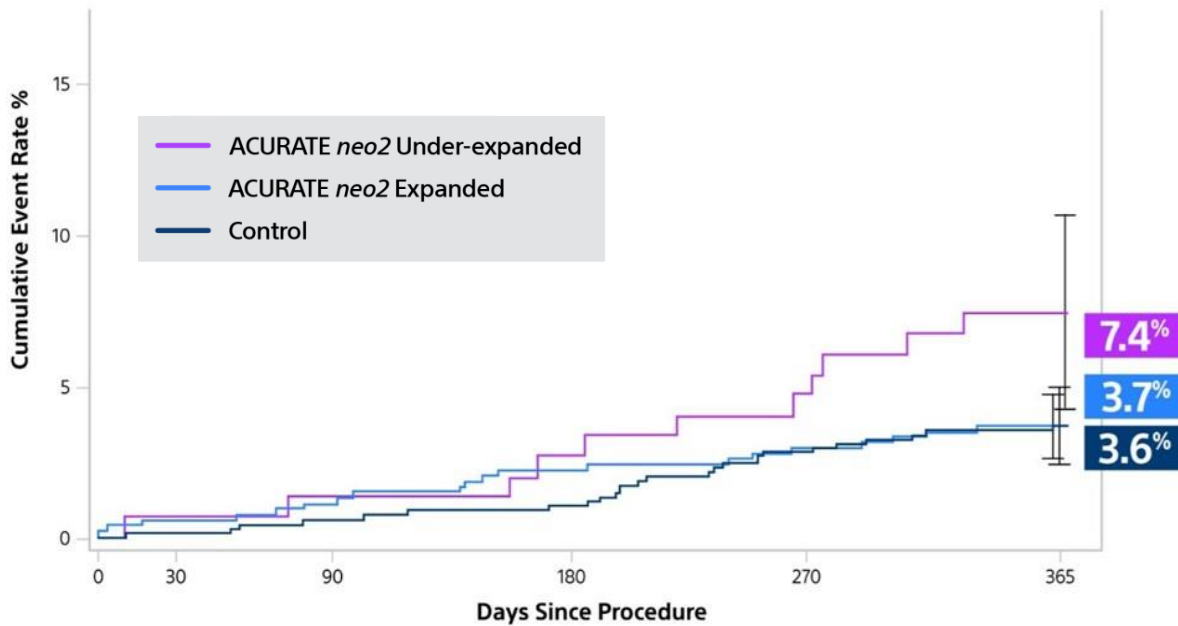
ACURATE IDE Post-Hoc Analysis

Analyzed outcomes for expanded & under-expanded valve frame



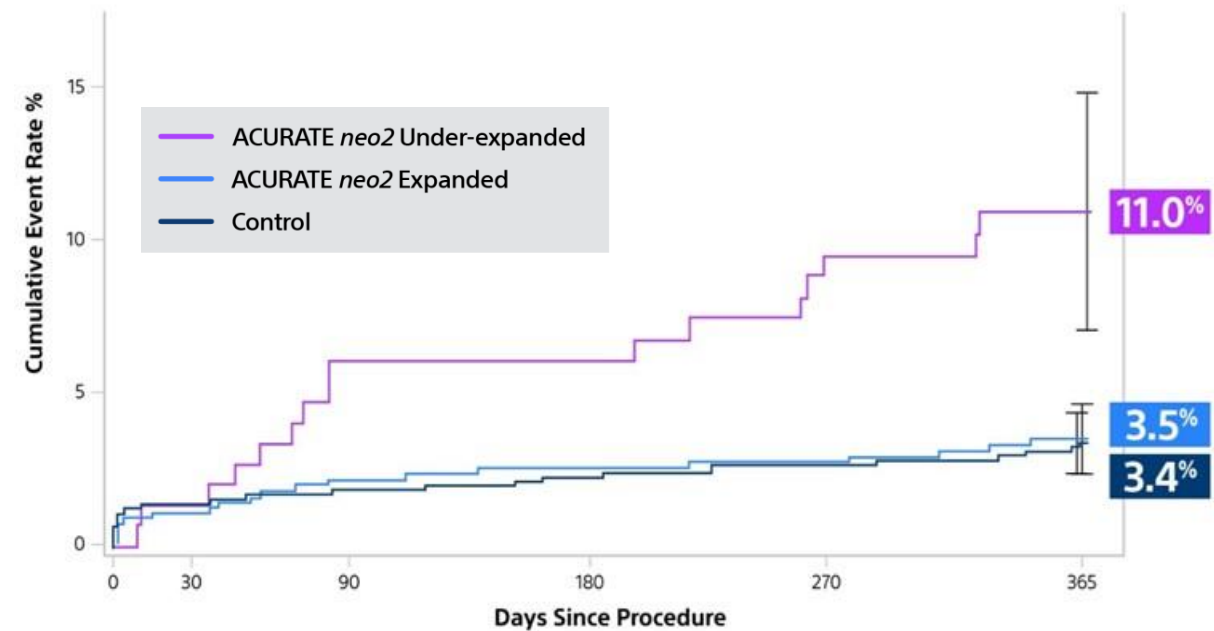
Time-to-Event Analysis through 1 Year Death

Post-Hoc Clinical Analysis: Valve Frame Expansion (N=1433 Subjects)



Time-to-Event Analysis through 1 Year Stroke

Post-Hoc Clinical Analysis: Valve Frame Expansion (N=1433 Subjects)



Rates of death and stroke at 1 year are comparable for ACURATE neo2 for the Expanded and Control arms

[†] Hospitalization for valve-related symptoms or worsening congestive heart failure (NYHA class III or IV); per VARC-2 definition

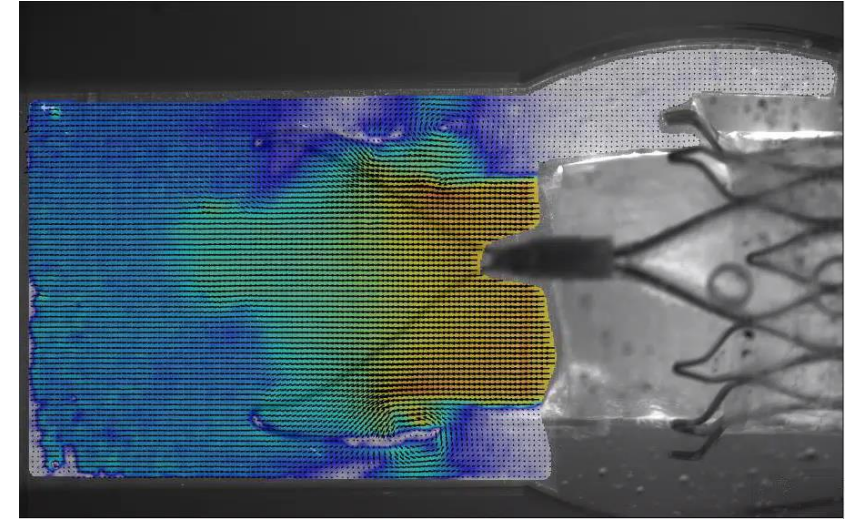
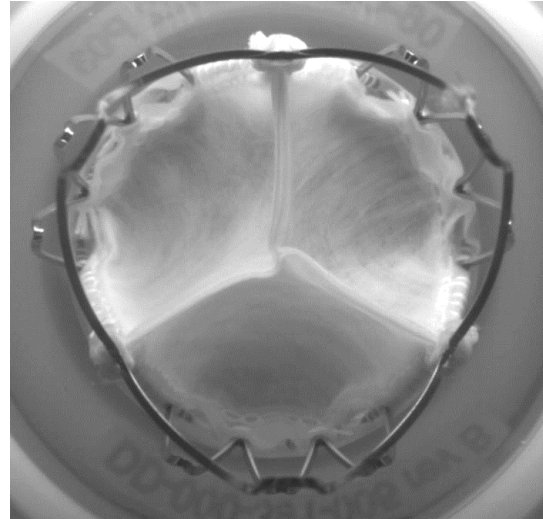


ACURATE *neo2* Outcomes Analysis

ACURATE valve under-expansion a potential contributing factor to clinical events

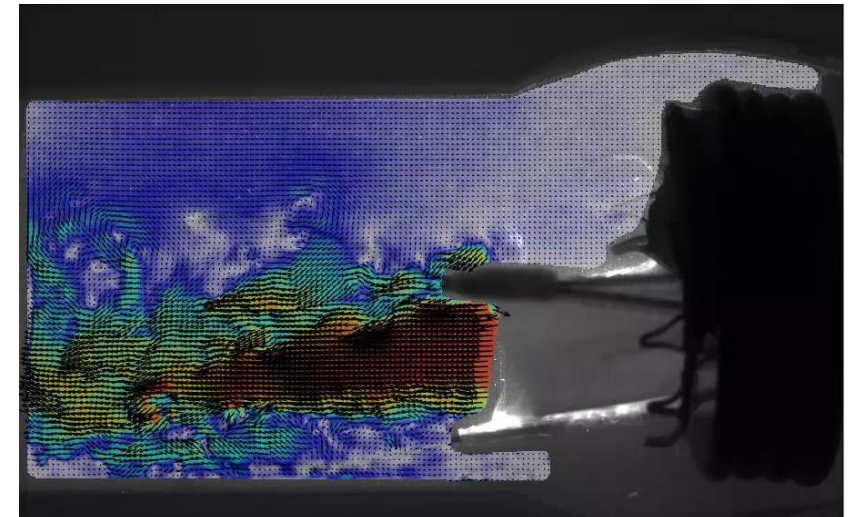
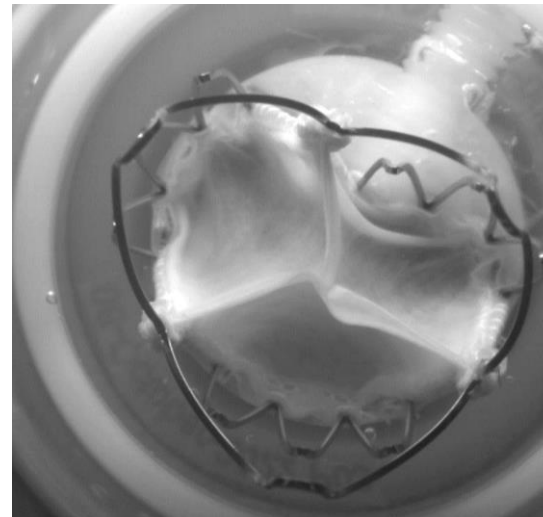
Expanded ACURATE *neo2* valve

- Laminar flow
- Adequate washout



Under-expanded ACURATE *neo2* valve

- Turbulent flow
- Reduced washout





ACURATE Prime™ Aortic Valve System

Differentiated features to drive platform adoption globally

**Boston
Scientific**
Advancing science for life™



EXPANDED TREATMENT RANGE

20.5mm – 29mm

VALVE FRAME ENHANCEMENT

Equalized distribution of radial force

QUICK RELEASE

90 degree quick & controlled deployment



**Launched in Europe
October 17, 2024**

Limited Market Release
progressing well



Prof. Ole De Backer, Rigshospitalet, Denmark



Other Relevant TCT Data

PROTECTED TAVR Post-Hoc Analysis



- **1,833 patients** enrolled in U.S.
- TAVR with SENTINEL™ Cerebral Protection System associated with:
 - **Significantly lower** rate of all-stroke/disabling stroke at discharge/72h
 - Patients discharged within 72h more likely to be discharged home with **no additional services needed**
- **No difference** between groups for:
 - All-cause mortality
 - Acute kidney injury
 - Access site-related vascular complications

AGENT DCB Subgroup Analyses



- **Three** subgroup analyses from 600-patient AGENT IDE trial - first RCT of DCB vs. balloon angioplasty in patients with ISR:
- Demonstrated **consistent benefit of AGENT Drug-Coated Balloon** for broad array of patients
 - Minorities vs. White (similar risk reduction in 1-year target lesion failure)
 - Small vs. large vessels (consistent safety and efficacy)
 - Male vs. female (similarly safe and effective)

HEAL-LAA Primary Endpoint

HEAL LAA

CLINICAL TRIAL

- **First 500 patients** enrolled
- **Met the six-month primary safety endpoint:**
 - All-cause mortality, all stroke, systemic embolism, major bleeding
- **Met 45-day primary efficacy endpoint** with zero cases of leak >5mm
- **No adverse events** with WATCHMAN FLX™ Pro LAAC Device related to DRT through 6 months



APPENDIX



Supplemental non-GAAP disclosures

	Nine Months Ended September 30, 2024		
	Reported Basis	Impact of Foreign Currency Fluctuations	Operational Basis
Cardiology Net Sales Growth by Business Unit			
<i>Interventional Cardiology Therapies</i>	10 %	2.1 %	12 %
<i>Watchman</i>	19 %	0.3 %	19 %
<i>Cardiac Rhythm Management</i>	3 %	0.4 %	3 %
<i>Electrophysiology</i>	124 %	1.4 %	126 %
Cardiology	<u>22 %</u>	<u>1.1 %</u>	<u>23 %</u>

	Nine Months Ended September 30, 2024		
	Reported Basis	Impact of Foreign Currency Fluctuations	Operational Basis
Cardiology Net Sales Growth by Region			
U.S.	27 %	—%	27 %
International	16 %	2.5 %	18 %