American Urological Association New Bladder Cancer Guidelines Support Imagin Medical’s Objective

Imagin Medical is the developer of the ultrasensitive i/Blue Imaging System that will establish a new standard of care for urologists in the early detection of bladder cancer through endoscopes.

Vancouver, B.C. and Boston, MA, August 1, 2016 – Imagin Medical (CSE: IME) (OTC PINK: IMEXF) (Frankfurt/Stuttgart Stock Exchanges: DPD2) (the “Company”) is announcing that the recent publication of the new American Urological Association’s (AUA) Guidelines for the diagnosis and treatment of bladder cancer strongly validates the Company’s objective of developing the i/Blue Imaging System for the early detection of the disease.

The survival rate for the majority of patients with non-muscle invasive bladder cancer (NMIBC) is favorable; however, the progression to muscle-invasive bladder cancer (MIBC) and the rates of recurrence – between 40-70% - are not. These rates depend on several clinical and pathologic factors, including the critical ability to remove all the cancerous cells during the initial diagnostic procedure (TURBT: transurethral resection for bladder tumor).

A Clinical Principle of the AUA states that during the initial diagnosis of a patient with bladder cancer, a clinician should perform a complete visual examination of the bladder tumor(s), when technically feasible. White light cystoscopy (WLC), using an endoscope with white light (visible light), has been the standard of care for over thirty years. With this technology, the surgeon usually sees the tumor only when it protrudes above the wall of the bladder, missing other cancerous cells that are flat or along the margins and not detectable with this method.

In 2011, the FDA approved Blue light cystoscopy (BLC), a combination of blue light and fluorescent imaging agents. Although this method produces greatly improved images, the technique has proven impractical due to the full hour it takes for the bladder to metabolize the drug. In its most recent guidelines, however, the AUA has strongly recommended (Grade B rating) that this method be used instead of the WLC in the initial diagnostic procedure,
based on a recent analysis of 13 trials that concluded the risk of bladder cancer recurrence is decreased with fluorescent cystoscopy versus WLC at short-term.

Imagin expects the i/Blue Imaging System to produce images far superior to either method by combining advanced optics that are 100,000 times more sensitive with blue light and fluorescent imaging agents, and in less than one quarter of the time (less than 15 minutes compared to one hour). These advancements would make i/Blue practical for the O.R. and, potentially, for the less expensive physicians’ office.

“These findings and recommendations from the AUA provide even more evidence of why we believe that the i/Blue Imaging System will provide a major advancement in the successful diagnosis and treatment of bladder cancer and drive rapid revenue growth,” said Jim Hutchens, Imagin President and CEO. “We’re on track to providing a practical solution to reducing bladder cancer recurrence rates as well as healthcare costs.”

About Imagin Medical
Imagin Medical is developing imaging solutions for the early detection of cancer through the use of endoscopes. The Company believes it will radically improve the way physicians detect cancer. Imagin’s initial target market is bladder cancer, a major cancer worldwide, the sixth most prevalent in the U.S., and the most costly cancer to treat due to a greater than 50% recurrence rate. Developed at the Lawrence Livermore National Laboratory, this advanced, ultrasensitive imaging technology is based upon improved optical designs and advanced light sensors. Learn more at www.imaginmedical.com.

ON BEHALF OF THE BOARD:

Jim Hutchens,

President & CEO

For further information, contact:
Bill Galine, Investor Relations
Telephone: (775) 737-3292
Email: billgaline@gmail.com

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