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**ANDREAS FOURAS, PHD
FOUNDER & CEO
4DX LIMITED**

Subject: 4Dx Letter of Support

Dear Dr. Fouras,

On behalf of Lung Transplant Foundation and personally, I'm pleased to provide this letter in support of the 4Dx's game-changing 4D lung imaging & pulmonary function analysis technology – 4DxV.

I was greatly impressed to learn that 4DxV, a medical imaging modality, is uniquely capable of quantifying ventilation of pulmonary tissue, thereby providing a step change to the information available to physicians in their assessment of patients with lung diseases. I'm most enthusiastic as 4Dx's Lung Ventilation Analysis Report will deliver game-changing, non-invasive and early clinical assessment of lung function for transplant recipients as well as chronic lung diseases such as IPF, CF and COPD allowing for earlier treatment and better outcomes.

As I know all too well, current clinical assessments and treatments of lung disease are indirect and since many treatments have adverse side effects, they cannot be applied without clear diagnosis. Therefore, earlier and more accurate disease diagnosis by 4Dx technology is the key to successful intervention for controlling disease progression to chronic and fatal stages. Furthermore, 4DxV has the potential to deliver data with richer functional content than CT at a fraction of the dose. 4Dx technology has enormous scope in early diagnosis of variety of neonatal, pediatric and adult lung diseases as well as life changing advancement for medicine by supporting novel therapeutic development.

I strongly believe 4DxV based lung function analysis should be standard protocol for all patients either diagnosed with or at the risk of chronic lung disease. The availability of 4DxV baseline scan on these subjects will allow monitoring of progression of disease as well as adverse events such as exacerbations to allow prevention at early stages.

As a double lung transplant recipient after being diagnosed with pulmonary fibrosis, I have first-hand understanding that current technology is grossly insufficient and simply does not provide enough information for doctors and patients to make timely decisions for



preventing the progression of lung disease to a stage where lung transplant is left as the last resort.

4Dx may provide a unique application for lung transplant subjects by allowing early diagnosis of Bronchiolitis Obliterans Syndrome (BOS). Briefly, at the early onset of BOS, transplant subject may well be asymptomatic with little to no loss of total lung function as assessed by conventional PFT/spirometry, where localized lung function defects are often masked by compensation of well functioning tissue. 4Dx technology uniquely allows localized lung function analysis, where such minor local lung function defects can allow early detection of the onset of BOS, hence providing responses and treatment with a focus on prevention and better quality of life for transplant subjects.

Overall, I'm extremely excited about 4Dx lung imaging & pulmonary function analysis technology and would like to provide my full support and that of the Lung Transplant Foundation to allow rapid translation of this game-changing technology to bedside as a standard of care for patients living with chronic lung disease.

I look forward to continue to work with you and your team at 4Dx, to serve the needs of chronic lung disease and transplant patients.

Sincerely,

Jeff Goldstein, President, Lung Transplant Foundation

