

Investor Presentation Fall 2014

Edward Wright, CEO



Forward Looking Statements

The information in this presentation contains so-called "forward-looking" statements. These include statements regarding CRH Medical's expectations and plans relating to its business, statements about CRH Medical's expectations, beliefs, intentions or strategies for the future, which may be indicated by words or phrases such as "anticipate", "expect", "intend", "plan", "will", "we believe", "CRH Medical believes", "management believes", and similar language. All forward-looking statements are based on CRH Medical's current expectations and are subject to risks and uncertainties and to assumptions made. Assumptions include: (i) that the growth of CRH's product sales will continue in a consistent manner; (ii) CRH's costs will not escalate significantly; and (iii) CRH does not incur any extraordinary costs.

Important risk factors that could cause actual results to differ materially from those expressed or implied by such forward-looking statements include: (i) we may not continue to attract Gastroenterologists and other licensed providers to purchase and use the CRH O'Regan System; (ii) the policies of health insurance carriers in the United States may affect the amount of revenue the Company receives; (iii) changes in United States federal or state laws, rules, and regulations; (iv) our senior management has been key to our growth, and we may be adversely affected if we lose any member of our senior management; (v) Our Clinical Sales Representatives may not be able to increase adoption of the CRH O'Regan System; (vi) economic dependence on suppliers and our contract manufacturer; (vii) changes in the industry and the economy may affect the Company's business; (viii) evolving regulation of corporate governance and public disclosure may result in additional corporate expenses; (ix) we may be subject to competition and technological risk which may impact the price and amount of product we can sell; * we may be subject to product liability which may adversely affect our operations; (xi) we may need to raise additional capital to fund future operations; (xii) our business may be impacted by health care reform in the United States; (xiii) we may not have the expertise required to expand internationally. As a single product company, any adverse event directly or indirectly related to the CRH O'Regan System will have a material impact on the Company's financial performance. CRH Medical bases its forward-looking statements on information currently available to it, and assumes no obligation to update them, except as required by law.



It's a great time to be a **GASTROENTEROLOGIST**





20%

of colonoscopy patients
HAVE HEMORRHOIDS



Often, Gl's do NOTHING for them



Market Opportunity

15M colonoscopies per year

20% hemorrhoids

3 M available patients

available

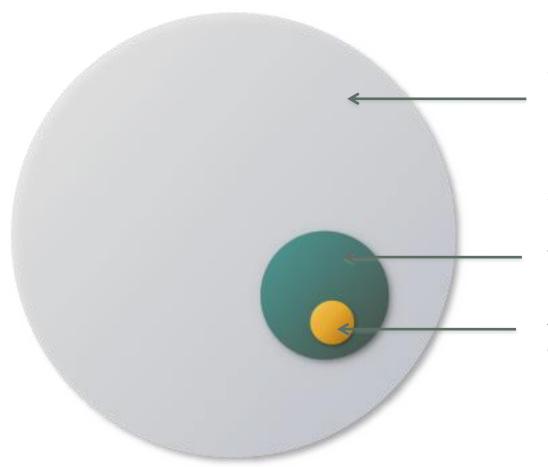
average treatments per patient

7.5M available treatments

\$65 revenue to CRH per treatment

CRH's market opportunity \$500M

Significant upside



Approximately
6,735 gastroenterologists
have not been trained yet

Approximately

1,765 gastroenterologists
trained to date

A small percentage of our customers account for most of our revenue

More Gls, More Power users

CRH Medical

A MARKETING & DISTRIBUTION

company focused on

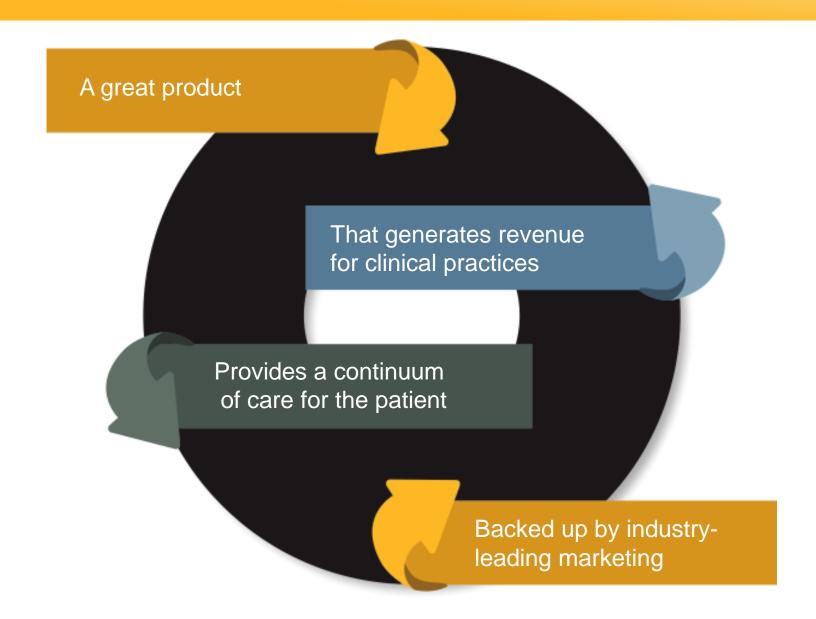
GI practices

Creates awareness for their practices

Provides patients with a safe and effective product

Help GIs increase procedures

Our Value Proposition



>525,000 procedures performed



- Intellectual property
- Manufacturing
- Marketing
- Distribution to physicians



The O'Regan System is Clinically Proven

lain M. Cleator, Mihaela M. Cleator The Long Term Results of Hemorrhoid Banding Using The CRH O'Regan Disposable Suction Ligator

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(HISS) programme: analysis of a two-year pilot. J Hosp Infect. 2003 Apr;53(4):259-67.

Robert A. Ganz. MD. FASGE Healthcare "Reform" -A Potential Crisis For Practitioners!

Christina Frangou. Which Hemor ptions Gastroenterology and ndoscopy News, May 2009 & eneral Surgery News, April 2009

rhoid Therapy? Expert Reviews Neal Osborn, MD, MSc, Hemorrhoid Treatment Using Rubber Band Ligation, The Journal of Medicine, November/December 2009

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Gustavo A. Machicado, MD,

Therapy for Internal

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Dennis M. Jensen, MD Definitive

Hemorrhoids-New Opportuni-

in M. Cleator, Mihaela M. Cleator, wid Johnson, Bergein F. Over-It Eight Years of Hemorrhoid inding Experience with the Regan Ligator

Neal Osborn, MD, MSc Hemorrhoid Treatment: The Gastroenterologist Perspective. A Year in Review.

Neal Osborn, MD, MSc, Je Higgins-Walzer, Steven Mc Hemorrhold Treatment in **Outpatient Gastroenterol** Practice Using the O'Reg Disposable Bander is Sat and Effective

Jack manufalling. prehensive Non-Surgical Anorectal Care to the Gastroenterology Fellowship Training: The University of South Alabama Experience

Cheetham MJ, Cohen CR, Kamm MA et al. A randomized, controlled trial of diathermy hemorrhoidectomy vs. stapled hemorrhoidectomy in an intended day-care setting with Iongerterm follow-up. Dis Colon Rectum. 2003 Apr;46(4):491-7.

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Dimitrios Paikos, et al. "Banding Hemorrhoids Using the O' Regan Disposable Bander. Single Center Experience."

Mitchel Guttenplan, MD. FACS, David A. Johnson, MD, FACP, FACG, FASGE, Bergein Overholt, MD, MACG, FACP, FASGE Hemorrhoid Care Rubber Band Ligation Using the CRH O'Regan System™ EndoEconomics. Winter 2010

Sutherland LM. Burchard AK. Matsuda K et al A systematic review of stapled hemorrhoidectomy. Arch Surg. 2002 Dec. 137(12):1395-406; discussion 1407.

Harry E. Sarles, Jr., MD, FACG Increase Your EASC and Practice Bottom Line by Providing Hemorrhoidal Treatment Fall 2008

effective in peer-reviewed studies

Physician Relations

- Meaningful relationships with KOLs
- Constant interaction with physicians and their practices
- Publications/scientific papers
- Strong presence at medical conferences
- Participation in fellowship programs





MAINTAINING SUSTAINABLE RELATIONSHIPS

> 7 5 %

of practices trained become active users of the O'Regan System

Referral Marketing

You Have Hemorrhoids. Now What?

You have been diagnosed with hemorrhoids. We know you may be in discomfort and are perhaps worried, but now that you know what the problem is, you can do something about it!

Hemorrhoids are best treated before they become so severe that they require surgery, which can be expensive, painful and require a prolonged recovery. The following recommendations are helpful for minimizing an initial bout of rectal bleeding, itching and pain.

While you wait to be treated with the CRH O'Regan System®, here are some helpful tips to reduce the discomfort from your hemorrhoids:

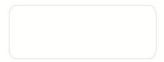
- Take a 15-minute sitz bath (a warm bath with a tablespoon of table salt added) three times per day and after each bowel movement if possible. Gently dry your bottom.
- Avoid constipation by increasing the amount of fiber and liquids in your diet. Stool softeners may also be helpful to avoid constipation.
- Avoid sitting on the commode for more than two minutes to prevent excessive straining. If you can't have a bowel movement in that time, come back later.
- Avoid prolonged sitting or other activities that will increase the pressure on your bottom. If you work at a desk all day, get up and take breaks whenever you can.
- There are many creams or suppositories for hemorrhoids, but they have limited benefits.



CRH O'Regan System[®]

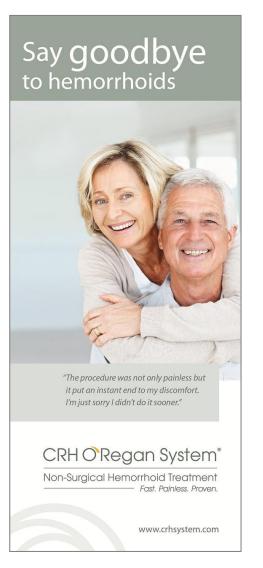
Non-Surgical Hemorrhold Treatment

Fast. Painless. Proven.

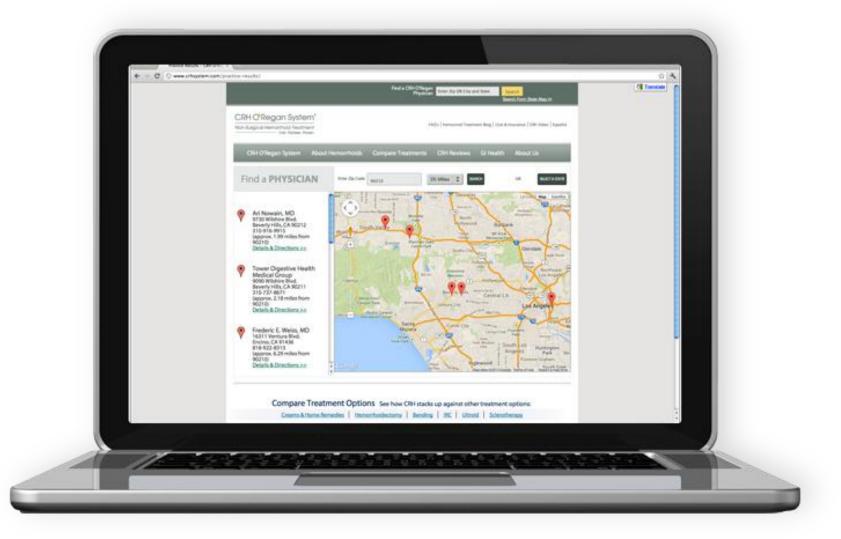


The CRH O'Regan System* is a product of CRH Medical Corporation

www.crhsystem.com



Online Lead Development



Consumer Awareness









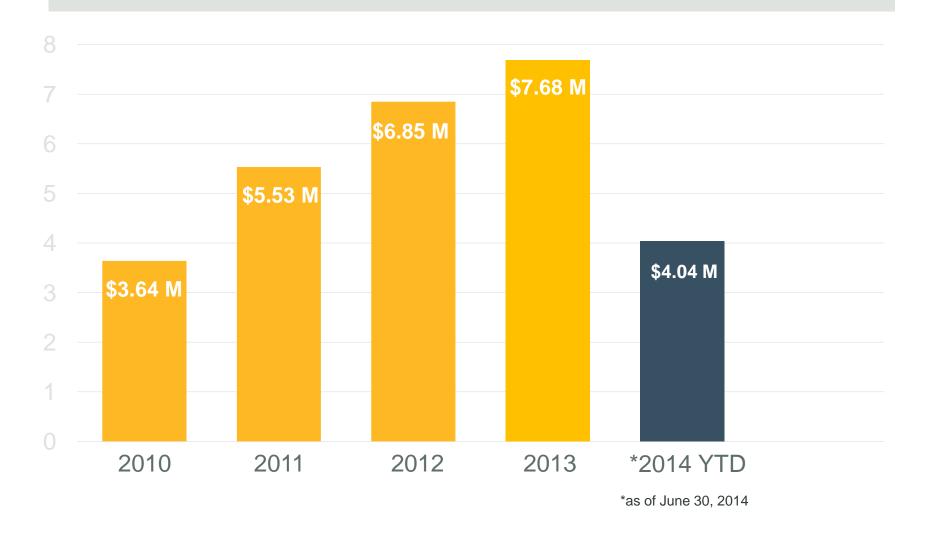
TV

Print

Radio

Top-line Growth

Steady increase in revenue for CRH



Consistently Profitable, Growing Cash

14

CONSECUTIVE PROFITABLE QUARTERS

Q2 2014 net income of \$328 K

7.9_M

OF Q2, 2014

20% more than at Q4, 2013

Revenue Opportunity For GIs



more revenue per minute for ligation versus colonoscopy

Gls receive comparable reimbursement to endoscopic procedures

\$264.81 Ligation 46221 (12 minute procedure in office) (\$376.38 in EASC)

\$570.42 Colonoscopy 45378 (30 minute procedure in EASC)

Achieving OPERATIONAL SCALE

Goodwill created with the Gl community uniquely positions us to evaluate...

- Innovative new products or services
- Opportunities to leverage our platform

Market Size

will have hemorrhoids by age 50

CRH will capitalize on that market with:

A great product that generates revenue for clinical practices

Its continuum of care for the patient

Backed up by industry leading marketing

Management and Directors

EDWARD WRIGHT CEO/Director

Former Executive Vice President of Retail in North America for Cartier

RICHARD BEAR CFO

Former CFO ID Biomedical

DR. ANTHONY F. HOLLER

Chairman of the Board Former CEO of ID Biomedical

DR. IAIN CLEATOR

Director and Medical Director Professor Emeritus of Surgery at the University British Columbia

DR. MITCHELL GUTTENPLAN

Medical Director
Board Certified General Surgeon

DR. DAVID A. JOHNSON, FACP, FACG, FASGE.

Director

Past President of American College of Gastroenterology

DR. BERGEIN F. OVERHOLT, FACP, MACG

Director

Past President of the American Society for Gastrointestinal Endoscopy

TODD PATRICK Director

Former President and Chief Operating Officer of ID Biomedical Corporation

MATT PAULS Director

Managing Member, Fernbank Partners

IAN WEBB Director

Retired partner of the law firm, Borden LadnerGervais LLP

Cap Structure

Shares outstanding 48.8M

Fully-diluted 52.9M

Symbols TSX:CRH

OTCQX: CRMMF

Market cap* \$35M

Average daily volume**

Average daily volume**

35,488

Cash (06/30/2014) \$7.9M

Management & insiders fully diluted

9%

Institutional ownership 18%

*as at July 31, 2014
** July 31, 2013- July 31, 2014



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