# Summary of Q&A at the 46th Ordinary General Meeting of Shareholders

We are pleased to provide an overview of the responses to the advance questions and the questions received on the day of the 46th Ordinary General Meeting of Shareholders held on June 26, 2026. Please note that the content has been edited and modified for clarity.

## 1. Responses to Advance Questions

**Q1: Why is the ratio of female internal directors (14%) low compared to the ratio of female outside directors (67%)? Is there a lack of development for capable female internal directors?**

**A1:** Talented female executives are steadily being developed, but the total number remains small at present. Therefore, we will continue to proactively foster their development by enhancing manager training programs and improving work environments that enable employees to balance work and family life. In addition, the ratio of female directors on the Board of Directors as a whole is 23%, securing a level that meets the recommended standards of proxy advisory firms.

## 2. Responses to Questions on the Day of the Meeting

**Q1: Regarding the company name change from "Japan Lifeline" to "JLL Med," is there any concern that name recognition and brand power in the medical field will decline? What is the reason for changing the company name at this time, and what kind of corporate image are you aiming for with the new name?**

**A1:** Japan Lifeline has reached its 45th anniversary since its founding in 1981, and we believe we are currently in our second founding phase. Currently, domestic demand accounts for approximately 97% of our sales, but global expansion is essential for the further growth of our in-house products. However, because there were regions overseas where the registration of the "Japan Lifeline" trademark was difficult, this posed a challenge to our expansion. Therefore, we decided to renew our name to one that is easily recognizable overseas while retaining the letters "JLL," which are an asset to our company. Since "JLL" is a widely recognized and trusted name in the domestic medical field as well, there is no concern about brand deterioration.
From a long-term perspective, as an aspirational vision for achieving net sales approximately 2.5 times current levels in 10 years, we envision a scenario where overseas sales would ideally account for one-third of that total upon its achievement, a concept that is currently driving active internal discussions and brainstorming. As we promote our transformation into a global company through this name change, we ask for our shareholders' continued long-term support.

**Q2: Could you tell us about the negative impact on catheter sales caused by the new arrhythmia treatment PFA (Pulsed Field Ablation), as well as the recovery status and future sales outlook driven by the new product, the "XEROstar" radiofrequency transseptal wire?**

**A2:** In the treatment of atrial fibrillation, the mainstream of the market is shifting from conventional radiofrequency to PFA, a new treatment method, and since we do not currently possess PFA products, it is true

that we are experiencing a negative impact on some products. Because PFA is a non-thermal treatment method, sales of esophageal temperature monitoring catheters, which were previously used to prevent thermal effects on the esophagus, are decreasing. On the other hand, the spread of PFA has reduced procedure times, which has greatly increased the overall number of cases.
Along with this increase in the number of cases, the sales volume of our mainstay intracardiac defibrillation catheters is growing significantly, limiting the negative impact to only a portion of our products. Furthermore, regarding our new product "XEROstar" launched in March of this year, we have confirmed through an internal survey that it has already secured approximately a 20% market share. We estimate the target market size to be approximately 5 to 6 billion yen, and we have set a goal of acquiring a 30% to 40% share by the end of this fiscal year, and are currently striving to further expand sales.

**End**