

THE
KIYOSAKI LETTER

YOUR GUIDE TO FINANCIAL FREEDOM

SPECIAL SITUATION REPORT: CNXU / CONEXEU SCIENCES

The Tissue Wall Street Can't Print



KIYOSAKI
RESEARCH



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Introduction

In 1989, a small company in California received FDA approval for a wrinkle treatment called Botox.

The medical community didn't take it seriously. The product was a repurposed neurotoxin originally studied for crossed eyes and muscle spasms. The trade press called it a niche curiosity. Wall Street barely noticed.

Within two decades, Botox had become one of the most recognized drugs in the world. The company that owned it, Allergan, eventually sold to AbbVie for \$63 billion. The category Botox created—injectable aesthetics—grew into an \$11 billion global market.

Nobody remembers the dermatologists who said it was a fad. They remember the people who saw what was coming and got there first.

My Rich Dad taught me a long time ago that the biggest fortunes are rarely made in the obvious company everyone is talking about. They're made in the businesses feeding the explosion behind the scenes. During the gold rush, it was the merchants selling picks and shovels. During the oil boom, it was the pipeline operators. During the early internet years, it was the companies selling routers and servers.

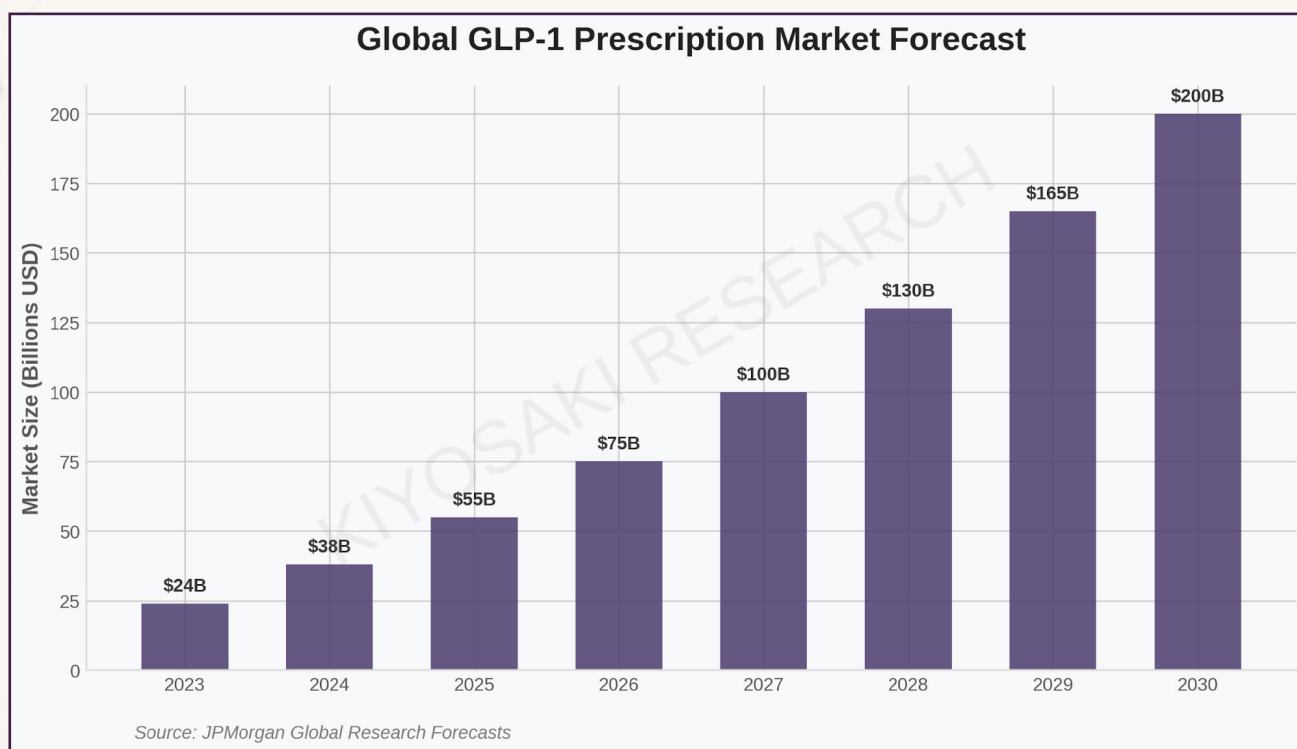
And right now, in 2026, the biggest explosion in modern medicine is happening in plain sight. Most investors are watching the wrong end of it.

Let me show you what I mean.

The Trade Wall Street Has Already Priced—And the One It Hasn't

You already know the story. The GLP-1 weight-loss drugs—Ozempic, Wegovy, Mounjaro, Zepbound—are reshaping global medicine. Eli Lilly's tirzepatide franchise did roughly \$36.5 billion in sales last year. Approximately 170 weight-loss drugs are currently in development.

Roughly 1 in 8 American adults has now taken a GLP-1 prescription. JPMorgan analysts forecast the global GLP-1 prescription market to reach \$200 billion by 2030 [1]



Source: JPMorgan Global Research Forecasts

That is the trade everyone is chasing. Lilly. Novo Nordisk. The companies making the drugs themselves.

And the easy money in that trade has already been made.

Lilly and Novo together added roughly \$700 billion in combined market value during the run-up. The story is now mainstream. The valuations reflect it. If you weren't in by 2023, you're paying retail today.

But the trade that I believe matters more is the one Wall Street still hasn't priced in.

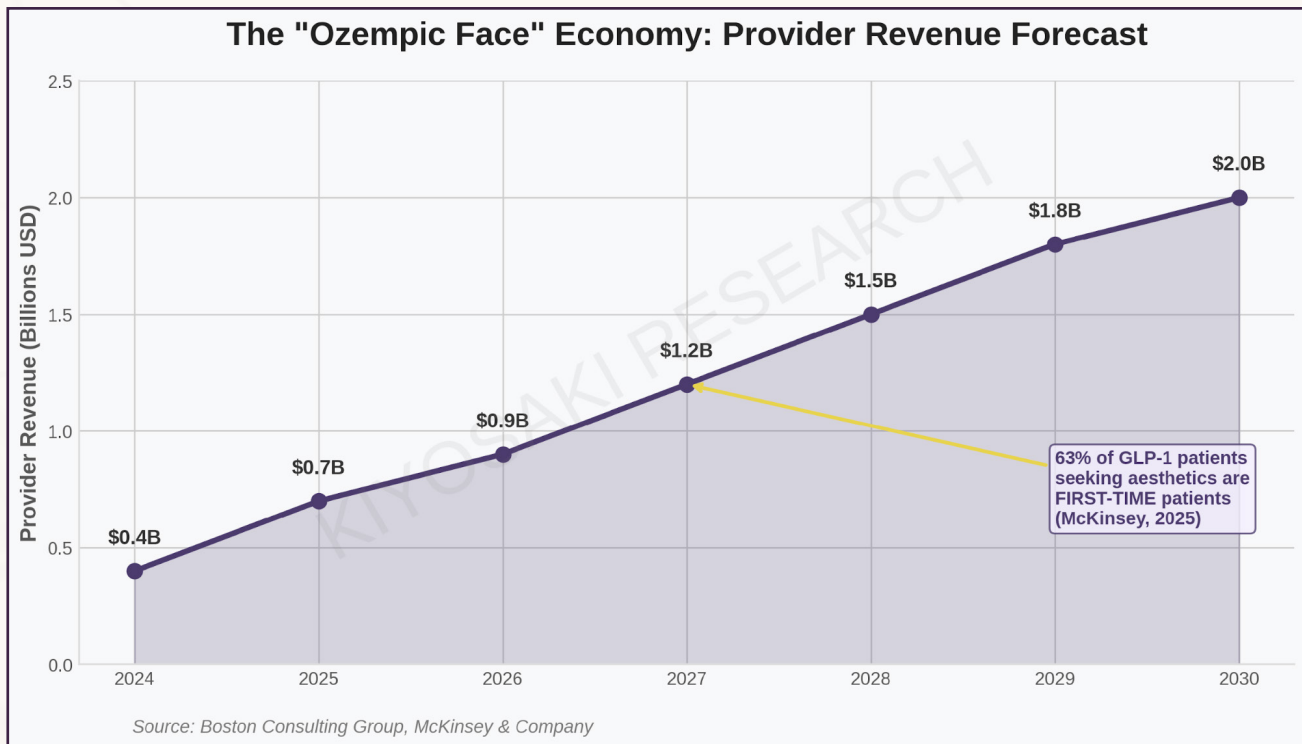
When tens of millions of patients lose the weight—sometimes 40, 60, even 100 pounds in 12 months—they look in the mirror and see a hollowed-out, prematurely aged version of themselves staring back. The face deflates. The hands look skeletal. The skin hangs in places it never used to.



Characteristics of “Ozempic Face.”
Source: <https://levamedical.com/>

The popular press has given it a name: **“Ozempic Face.”**

Boston Consulting Group projects the provider revenue from this single problem will grow from roughly \$700 million in 2025 to \$2 billion by 2030. McKinsey reports that 62% of GLP-1 patients are already concerned about loose skin, and 63% of patients now seeking facial aesthetic procedures are new to the category—first-time aesthetic patients driven into clinics by GLP-1-related concerns.



Source: Boston Consulting Group, McKinsey & Company

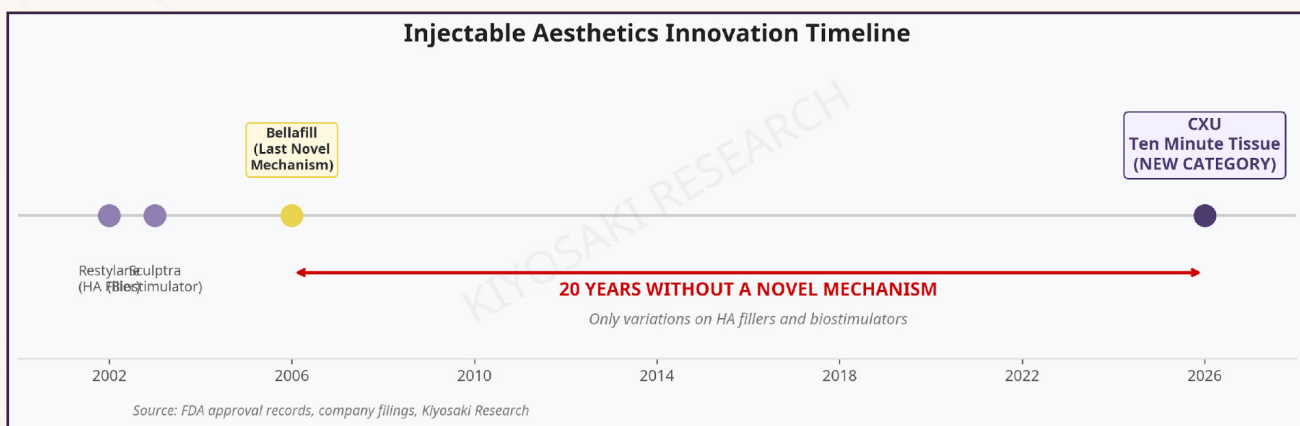
A new economy is forming behind the GLP-1 revolution. It is downstream from the drugs. It is invisible in the headline numbers. And the legacy aesthetics industry—the \$11 billion market dominated by Botox, Juvederm, and Restylane—was not built to address it.

An \$11 Billion Industry Frozen in Time

Here is something most investors don't realize.

The last truly novel mechanism of action introduced into injectable aesthetics was a biostimulator called Bellafill, which received FDA approval in 2006. That was twenty years ago. Twenty years.

Since then, virtually every "new" injectable that has come to market has been a variation on the same two technologies: hyaluronic acid fillers (Juvederm, Restylane, Belotero, Revanesse, RHA, Saypha, Evolysse, and others), or older biostimulators (Sculptra and Radiesse, both approved in the mid-2000s). New brand names. New flavors. Same mechanism. No category-defining innovation.




Source: FDA approval records, company filings, Kiyosaki Research

This matters now because the GLP-1 patient does not need what those products do. Hyaluronic acid fillers are temporary volumizers. They sit under the skin like a small water balloon, holding shape for six to twelve months, then dissolving. They were designed for crow's feet and lip plumping. They were not designed to restore the structural tissue scaffold that rapid weight loss strips out.

Biostimulators are slightly more interesting—they trigger inflammation that produces collagen—but they were designed for static facial volume loss in aging patients, not for the body-wide tissue restructuring problem GLP-1 creates.

Neither technology rebuilds tissue. They mask the absence of it.



The injectable aesthetics industry currently lacks a tool for what is fast becoming the largest single problem in its patient population. That is the gap.

And one little-known biotech is uniquely positioned to fill this gap because their patented platform actually rebuilds the tissue scaffold, rather than just masking the absence of it.

What the University of British Columbia Spent a Decade Building

Conexeu Sciences (NASDAQ: CNXU) is a clinical-stage biotechnology company that holds the global intellectual property rights to a regenerative tissue platform called CXU, marketed under the brand name Ten Minute Tissue.

The technology was developed over ten years at the University of British Columbia. The company has 100% global rights, title, and interest in the patents, which have been granted in over 40 countries including the United States, the European Union, Japan, Australia, and Canada. The platform is backed by 11 peer-reviewed publications in journals including *Acta Biomaterialia*, *Tissue Engineering*, *Experimental Dermatology*, and the *Journal of Burn Care*.

This is not a stock-screener prospect that surfaced last month. The science has been in development longer than most of the dermatology fellowships practicing today.


Here is what makes CXU different from anything else on the market.

CXU is a flowable, temperature-sensitive collagen scaffold. At room temperature, it behaves like a liquid—thin enough to pass through a 30-gauge needle, the same diameter dermatologists already use for Botox and hyaluronic acid fillers. The moment it reaches human body temperature, around 37 degrees Celsius, it undergoes rapid gelation. It transforms from a liquid into a structured gel scaffold, in place, in roughly ten minutes.

That is the namesake. Ten Minute Tissue.



And here is why it matters: that scaffold is designed to mimic the body's own extracellular matrix—the structural tissue framework that holds skin, fat, and connective tissue in proper alignment. When the body recognizes it, host cells migrate in. New blood vessels form. Real tissue grows into the scaffold from the inside out.



Hyaluronic acid fillers do not do this. Biostimulators do not do this. CXU is, by patent and by published mechanism, a different class of injectable entirely.

The company calls it “bioregeneration.” In plain English: instead of filling a hole, the technology rebuilds the tissue that should have been there.

The Operators Behind the Science

My Rich Dad used to say that you don't bet on the racehorse. You bet on the jockey.

In early-stage biotech, the team is the company. A breakthrough technology in the wrong hands is a press release. A modest technology in the right hands becomes a category leader. The people behind Conexu Sciences are, in my opinion, the strongest single argument for putting this company on a research list today.



Conexu CEO Miles D. Harrison
Source: thedermdigest.com

The CEO is Miles D. Harrison. Before joining Conexu, he was President and General Manager of Galderma North America—the same Galderma that sells Restylane, Sculptra, and Dysport. Galderma is the second-largest player in the injectable aesthetics industry. Harrison served on the executive team during Galderma's \$10.2 billion sale to private equity firm EQT in 2024.

Read that paragraph again. The person now running Conexu spent his career inside the industry Conexu is preparing to disrupt. He knows the customers. He knows the channels. He knows the playbook because he wrote part of it.

The Chief Scientific Officer is Dr. Claudia Chavez. She holds a Ph.D. in Experimental Medicine and has spent over 25 years in clinical research and tissue engineering, with more than 12 years specifically working on the CXU platform.

The Chief Medical Officer is Dr. Brian K. Pilcher, formerly CMO at Suneva Medical and VP of Medical Affairs at Merz North America—another major aesthetics player.

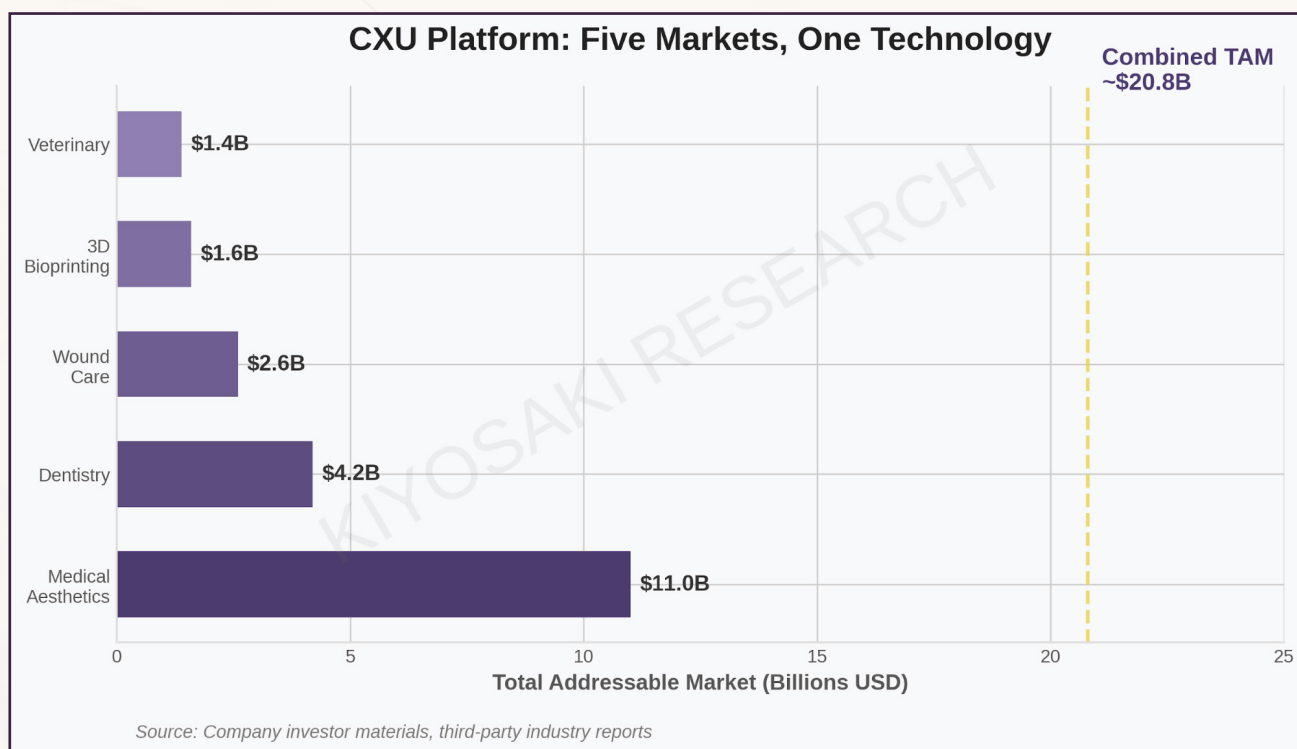
This is not a team built around a single scientist with a single patent. This is a coordinated team of operators, clinicians, and capital-markets professionals—the kind of bench you would expect to see assembled around a company that intends to be acquired, not one that intends to run a single-product clinical trial and disappear.

One Formula. Five Markets. A \$20 Billion Combined TAM.


The strategic argument for Conexeu does not rest on aesthetics alone. The CXU platform was engineered as a horizontal technology—the same core formulation, with the same regulatory pathway, targeting five distinct markets.

According to the company's investor materials, the five markets are:

- **Wound Care** — a \$2.6 billion global market. The company's lead 510(k) submission targets this indication and is currently planned for Q1 2027.
- **Dentistry** — a \$4.2 billion global market. Soft tissue and gum regeneration.
- **Veterinary** — a \$1.4 billion global market. Notably, this indication is not federally regulated, meaning Conexeu can begin generating revenue here without FDA clearance.
- **3D Bioprinting** — a \$1.6 billion global market. Tissue scaffolds for personalized medical grafts.
- **Medical Aesthetics** — the \$11 billion injectables market. This is the long-tail, highest-margin opportunity.



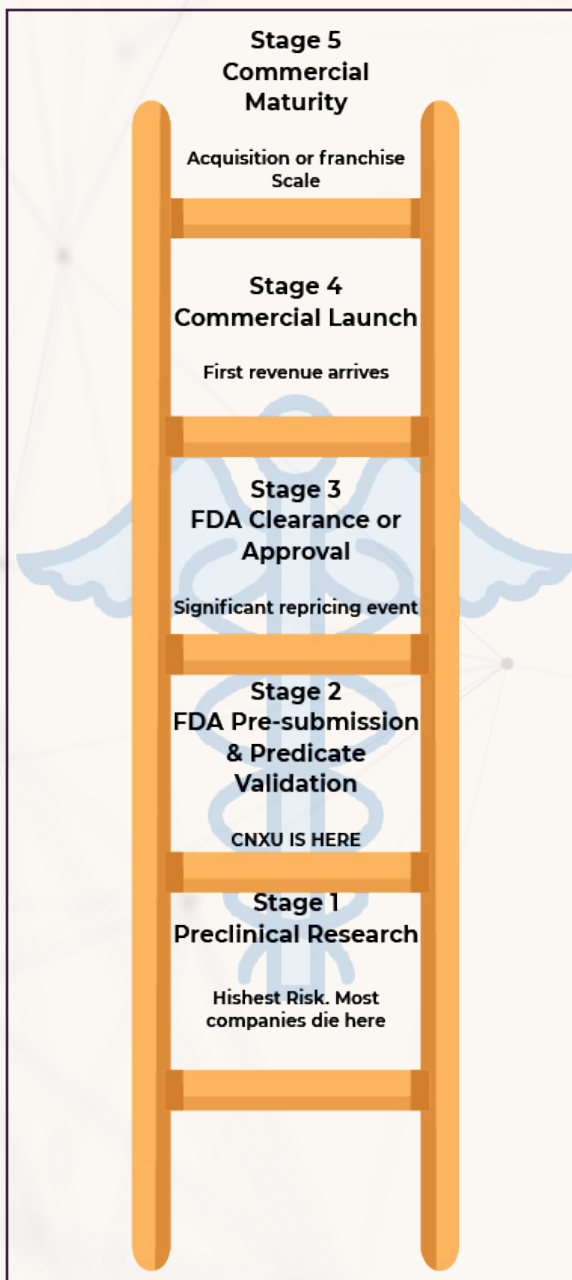
Source: Company investor materials, third-party industry reports



Add those addressable markets together and you arrive at a combined global TAM of approximately \$20 billion. One platform technology. Five distinct revenue paths. That is the kind of vertical optionality I look for in any early-stage research candidate.

How Biotech Companies Create Value (And Where Conexeu Sits Today)

Every operating medical device company on earth was once just a preclinical concept. The journey from that starting point to a marketed product follows a relatively predictable path.



Source: Kiyosaki Research

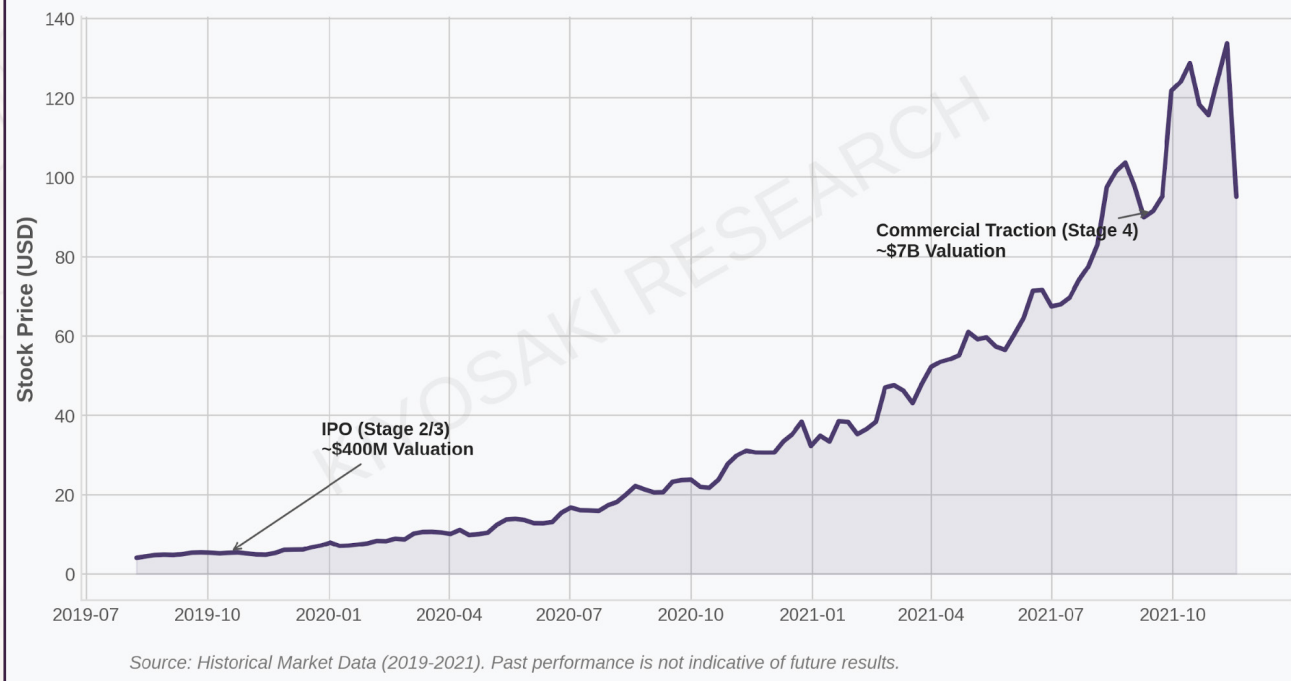
- **Stage 1:** Preclinical research. Highest risk. Most companies die here.
- **Stage 2:** FDA pre-submission and predicate validation. The science is real, the patents are filed. (Conexeu sits here today).
- **Stage 3:** FDA clearance or approval. The agency clears the device.
- **Stage 4:** Commercial launch. First revenue arrives.
- **Stage 5:** Commercial maturity. The product is generating revenue, and either acquired or scaled.

The biggest price appreciation in medical device stocks happens between stages two and four. By the time a product is in market and revenue is flowing, the equity has typically already been re-rated. The investors who make the largest returns are those who took the regulatory risk before the regulatory event.

Let me show you what that looks like.

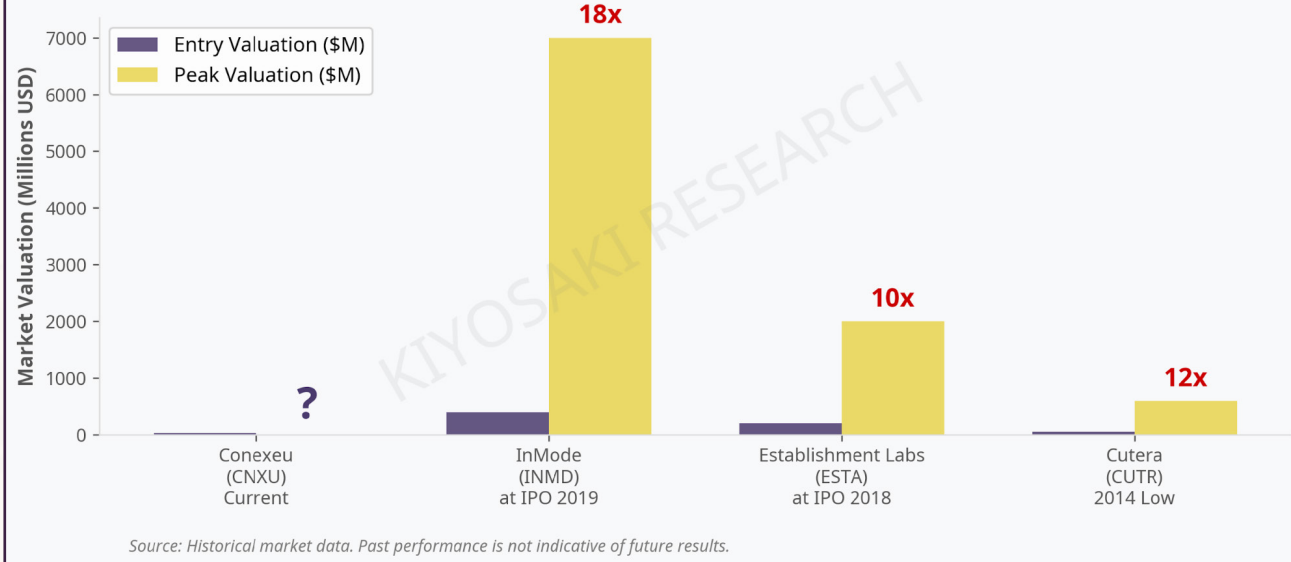
Inmode (NASDAQ: INMD), an Israeli medical aesthetics device company, came public in 2019 at a market cap of roughly \$400 million. By 2021, after demonstrating commercial traction with its energy-based devices, the company traded at over \$7 billion. That is a 17x repricing in 24 months—not because the science changed, but because the market shifted from “will this work” to “this is working.”

The "Clearance Stage" Repricing Curve: InMode (INMD)



Source: Historical market data (2019-2021). Past performance is not indicative of future results.

Medical Aesthetics Device Companies: Entry vs. Peak Valuation



Source: Historical market data. Past performance is not indicative of future results.

Establishment Labs (NASDAQ: ESTA) came public at under \$200 million in 2018. After 510(k) clearance for its Motiva implants, it briefly traded above \$2 billion

Conexu is earlier than all of them. The company is in preclinical with a target 510(k) submission within twelve months for its lead indication. If that submission is filed on schedule, and if the agency clears it on a typical predicate timeline, the repricing curve from preclinical-stage to clearance-stage device companies is well documented in the historical record.

What Could Go Wrong (The Dirty Laundry)

I would never ask a *Kiyosaki Letter* reader to consider a position in any company—especially an early-stage one—without being honest about what could go wrong. There is real risk here.

Most preclinical biotechs are money pits. For every device that achieves FDA clearance, dozens of equally promising candidates fail at the regulatory step, at manufacturing scale, or at commercial adoption. Medical devices are a graveyard of press releases.

This is a pre-revenue, clinical-stage company. The CXU platform has been validated extensively in preclinical models, but it has not yet completed FDA-cleared human clinical trials in the United States.

The timeline to revenue is long. The lead wound care indication targets a 510(k) submission in Q1 2027. The high-margin aesthetics indication is on a PMA pathway with a market entry estimate of 2030 or beyond. Even in an optimistic scenario, this is a multi-year hold.

Capital structure risk is real. You should expect dilution between today and commercial launch. That is normal for biotech at this stage, but it means your percentage ownership will shrink over time even if the equity price rises.

None of these risks are disqualifying. They are the price of admission at this stage of the medical device development ladder.

Why I Believe the Window Is Open Right Now

There are three reasons I am presenting Conexeu Sciences to Kiyosaki Letter readers at this moment rather than six months from now.

First, the company is currently sub-radar. The ticker CNXU is relatively new on the NASDAQ. Most institutional screening tools have not yet indexed the story.

Second, the GLP-1 aesthetics story is still being discovered by the popular financial press. Once a category becomes consensus, the easy returns are typically gone. We are early in that arc, not late.

Third, the company has the regulatory catalyst within sight. A Q1 2027 510(k) submission is a near-term, binary event.

Add it together: a sub-radar listing, a story still being discovered, and a near-term regulatory catalyst. The screening tools haven't indexed it yet. But with a leadership team that just sold their last company for \$10.2 billion, the institutional money will not stay blind to this for long.

That is the window.

Action to Take: Consider a speculative allocation in Conexeu Sciences (NASDAQ: CNXU).

This is a special situation. Allocate no more than 0.5% to 1% of your portfolio.

This is a long-term hold measured in years, not months.

Good investing,



A handwritten signature in black ink that reads "Robert Kiyosaki".

Robert Kiyosaki
Editor, The Kiyosaki Letter

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Forward-looking statements: This report contains forward-looking statements regarding regulatory timelines, market opportunities, and commercialization estimates. These statements are subject to risks and uncertainties and actual results may differ materially. CXU is an investigational medical device that has not been cleared or approved by the FDA for commercial distribution in the United States. All performance statements referenced from preclinical data are not predictive of clinical outcomes. Market size estimates are based on third-party industry reports and the company's own internal analyses, which have not been independently verified.



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