Passion for Innovation. Compassion for Patients.™



FY2019 Q3 Financial Results Presentation

DAIICHI SANKYO CO., LTD.

Toshiaki Sai Executive Vice President and CFO

January 31, 2020

Forward-Looking Statements



Management strategies and plans, financial forecasts, future projections and policies, and R&D information that Daiichi Sankyo discloses in this material are all classified as Daiichi Sankyo's future prospects. These forward looking statements were determined by Daiichi Sankyo based on information obtained as of today with certain assumptions, premises and future forecasts, and thus, there are various inherent risks as well as uncertainties involved. As such, please note that actual results of Daiichi Sankyo may diverge materially from Daiichi Sankyo's outlook or the content of this material. Furthermore, there is no assurance that any forward-looking statements in this material will be realized. Regardless of the actual results or facts, Daiichi Sankyo is not obliged and does not have in its policy the duty to update the content of this material from the date of this material onward.

Compounds under discussion are investigational agents and are not approved by the FDA or any other regulatory agency worldwide as a treatment for indications under investigation. Efficacy and safety have not been established in areas under investigation. There are no guarantee that these compounds will become commercially available in indications under investigation.

Daiichi Sankyo takes reasonable care to ensure the accuracy of the content of this material, but shall not be obliged to guarantee the absolute accuracy, appropriateness, completeness and feasibility, etc. of the information described in this material. Furthermore, any information regarding companies, organizations or any other matters outside the Daiichi Sankyo Group that is described within this material has been compiled or cited using publicly available information or other information, and Daiichi Sankyo has not performed in-house inspection of the accuracy, appropriateness, completeness and feasibility, etc. of such information, and does not guarantee the accuracy thereof.

The information described in this material may be changed hereafter without notice. Accordingly, this material or the information described herein should be used at your own judgment, together with any other information you may otherwise obtain.

This material does not constitute a solicitation of application to acquire or an offer to sell any security in the United States, Japan or elsewhere.

This material disclosed here is for reference purposes only. Final investment decisions should be made at your own discretion.

Daiichi Sankyo assumes no responsibility for any damages resulting from the use of this material or its content, including without limitation damages related to the use of erroneous information.

Agenda





Overview of FY2019 Q3 Results

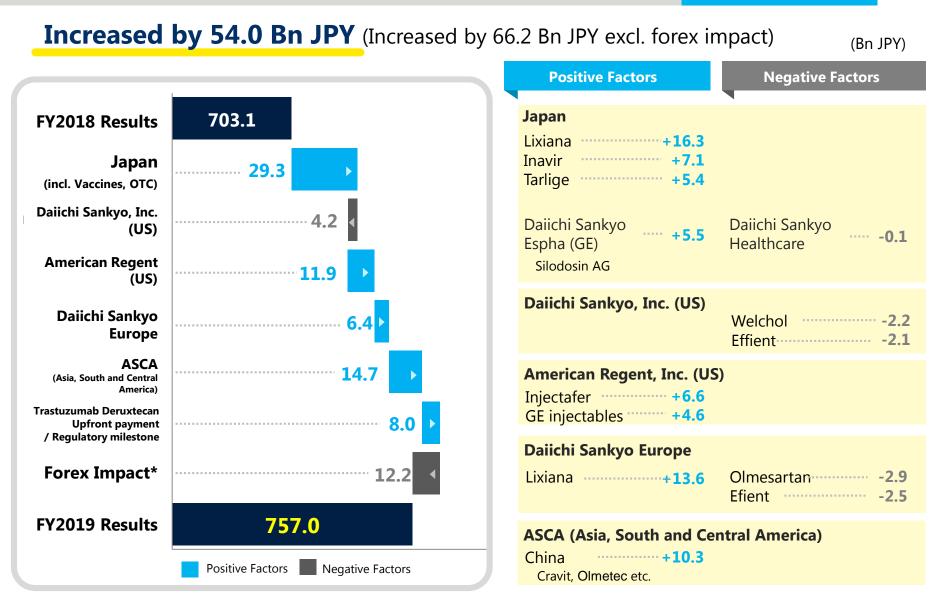


(Bn JPY)

	FY2018 Q3 YTD Results	FY2019 Q3 YTD Results	YoY
Revenue	703.1	757.0	+7.7% + 54.0
Cost of Sales	264.9	256.3	-8.6
SG&A Expenses	198.5	208.2	+9.7
R&D Expenses	142.6	136.9	-5.6
Operating Profit	97.1	155.6	+60.3% +58.5
Profit before Tax	98.0	160.0	+62.0
Profit attributable to owners of the Company	78.8	134.3	+70.4% +55.5
Currency USD/JPY	111.15	108.67	-2.48
Currency USD/JPY Rate EUR/JPY	129.49	121.05	-2.48

Revenue





Operating Profit



Increased by 58.5 Bn JPY

(Increased by 40.8 Bn JPY excl. forex impact and special items)

FY2018 Results	97.1	(Bn JPY)
Revenue	····· 54.0 >	Revenue +54.0 incl. forex impact of -12.2
Cost of Sales	7.7	Cost of Sales +7.7 (Cost increased) Increase by revenue increase Improvement in cost of sales ratio by product mix
SG&A Expenses R&D Expenses	21.4 ≤ 	 SG&A Expenses +21.4 (Cost increased) Increase by establishment of the oncology business structure in US
Forex Impact Special Items	9.1	 R&D Expenses -3.7 (Cost decreased) Decrease by trastuzumab deruxtecan cost share with AstraZeneca Increase by enhancement of oncology development structure
FY2019 Results	155.6	Forex Impact-9.1 (Cost decreased)Cost of Sales-2.7
F12013 Results		SG&A Expenses -4.5 R&D Expenses -1.9
	Positive Factors Negative Factors	Special Items -20.8 (Cost decreased) See next slide for details

Special Items



(Bn JPY)

					(2.1.51.1)
	FY2018 Q3 YTD Results		FY2019 Q3 YTD Results		ΥοΥ
			Restructuring costs in Supply Chain	1.3	
Cost of Sales			Impairment loss (intangible assets)* ¹	3.8	-13.7
			Gain on sales of subsidiary* ²	-18.8	
SG&A Expenses	Gain on sales of fixed assets	-3.5	Gain on sales of fixed assets ^{*3}	-10.6	-7.2
R&D Expenses					
Total		-3.5		-24.3	-20.8
Special items :	*1 Morphabond, Roxybond *2 Takatsuki Plant *3 Nihonbashi building				reased items ed in Q3

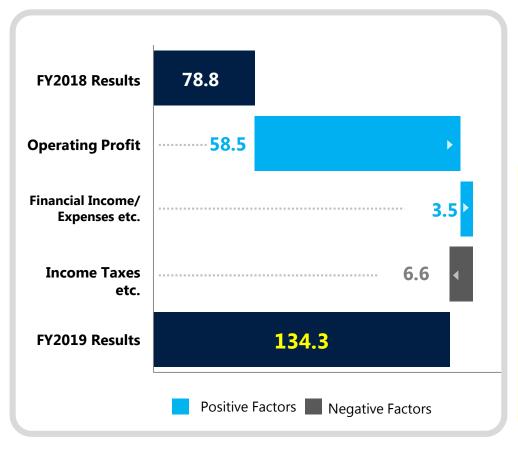
Items having a transitory and material impact on operating profit are defined as "Special items".

Specifically, gains and losses related to: sale of fixed assets, restructuring, impairment, litigation, etc. amounting to 1 billion JPY or more are defined as "Special items".

Profit Attributable to Owners of the Company



Increased by 55.5 Bn JPY



(Bn JPY)

Income Taxes etc. +6.6 (Cost increased)

	FY2018	FY2019	ΥοΥ
Profit before Tax	98.0	160.0	+62.0
Income Taxes etc.	19.1	25.8	+6.6
Tax rate	19.5%	16.1%	-3.4%

(Reference: Tax rate) FY2018: Impact of the tax rate reduction in US FY2019: Impact of introduction of consolidated taxation system

Revenue: Major Business Units (incl. Forex Impact)



(Bn JPY)

	FY2018 Q3 YTD Results	FY2019 Q3 YTD Results	ΥοΥ
Japan	395.7	422.3	+26.6
Daiichi Sankyo Healthcare	52.9	52.9	-0.1
Daiichi Sankyo, Inc.	28.6	23.8	-4.8
Olmesartan	7.9	7.8	-0.1
Welchol	11.0	8.6	-2.4
American Regent, Inc.	90.1	99.7	+9.6
Injectafer	33.7	39.3	+5.7
Venofer	24.1	23.3	-0.8
GE injectables	28.2	32.1	+3.8
Daiichi Sankyo Europe	66.0	67.7	+1.7
Lixiana	33.3	43.9	+10.5
Olmesartan	21.0	16.9	-4.1
Efient	4.6	1.9	-2.7
ASCA (Asia, South and Central America)	63.1	73.5	+10.4
Currency USD/JPY	111.15	108.67	-2.48
Rate EUR/JPY	129.49	121.05	-8.44

Revenue: Major Products in Japan



(Bn JPY)

		FY2018	FY2019	
		Q3 YTD	Q3 YTD	ΥοΥ
		Results	Results	
Lixiana	anticoagulant	49.3	65.6	+16.3
Nexium	ulcer treatment	61.0	62.3	+1.3
Memary	Alzheimer's disease treatment	39.5	40.2	+0.7
Pralia	treatment for osteoporosis/ inhibitor of the progression of bone erosion associated with rheumatoid arthritis	21.0	24.3	+3.3
Tenelia	type 2 diabetes mellitus treatment	19.9	19.7	-0.2
Loxonin	anti-inflammatory analgesic	24.3	22.7	-1.6
Inavir	anti-influenza agent	4.5	11.5	+7.1
Ranmark	treatment for bone complications caused by bone metastases from tumors	12.7	14.0	+1.3
Efient	antiplatelet agent	10.9	11.1	+0.2
Rezaltas	antihypertensive agent	12.2	11.6	-0.6
Canalia	type 2 diabetes mellitus treatment	6.9	9.8	+3.0
Vimpat	anti-epileptic agent	4.8	8.5	+3.7
Omnipaque	contrast agent	9.5	8.4	-1.1
Olmetec	antihypertensive agent	11.9	9.4	-2.5





FY2019 Forecast



			(Bn JPY)	
	FY2019 Forecast (as of Oct.)	FY2019 Forecast (as of Jan.)	vs. Forecast (as of Oct.)	Major factors> Japan+9.0> Daiichi Sankyo, Inc.+4.0(incl. ENHERTU+2.0)
Revenue	955.0	970.0	+15.0	 Trastuzumab Deruxtecan regulatory milestone +0.9
Cost of Sales	330.0	335.0	+5.0	Major factors
SG&A Expenses	290.0	290.0	-	> Increase by revenue increase
R&D Expenses	210.0	210.0	-	
Operating Profit	125.0	135.0	+10.0	Major factors
Profit before Tax	125.0	135.0	+10.0	 Profit before Tax +10.0 Decrease in income taxes etc. +10.0
Profit attributable to owners of the Company	90.0	110.0	+20.0	 ✓ Impact of introduction of consolidated taxation system (Ref. FY2019 Forecast (as of Jan.) Tax rate : 18.5%)
Currency Rate USD/JPY EUR/JPY	109.31 125.71	109.01 123.29	· ·	of currency rate for Q4 10, EUR/JPY : 130





ENHERTU(DS-8201): Approved & Launched in U.S.



Approved in Dec. 2019 (First-time-in-human to US approval 4 years 3 months) Launched in Jan. 2020



NDC 65597-406-01

NDC 65597-406-01

ENHERTU

travenous Infusion On

Rx only

ENHERTU[®] (fam-trastuzumab deruxtecan-nxki) For Injection

100 mg per vial

For Intravenous Infusion Only Dispense the enclosed Medication Guide to each patient. Reconstitute and Dilute prior to administration Single-Dose Vial Discard Unused Portion CAUTION: Cytotoxic Agent KEEP REFRIGERATED 1 vial Co Daiichi-Sankyo AstraZeneca

Indication*:

Treatment of adult patients with unresectable or metastatic HER2 positive breast cancer who have received two or more prior anti-HER2based regimens in the metastatic setting

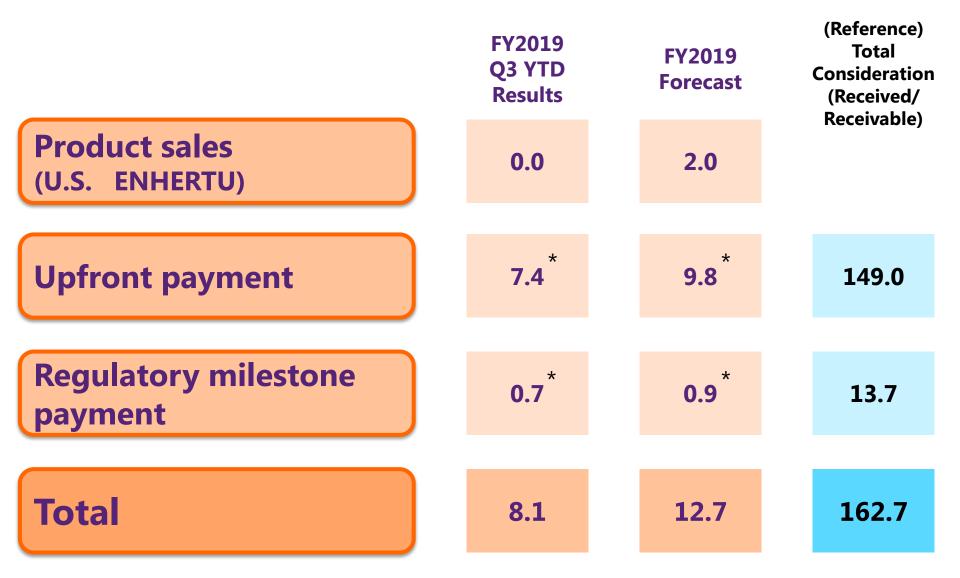


*This indication is approved under accelerated approval based on tumor response rate and duration of response. Continued approval for this indication may be contingent upon verification and description of clinical benefit in a confirmatory trial. ENHERTU is approved with a Boxed WARNING for Interstitial Lung Disease (ILD)/pneumonitis and Embryo-Fetal Toxicity.

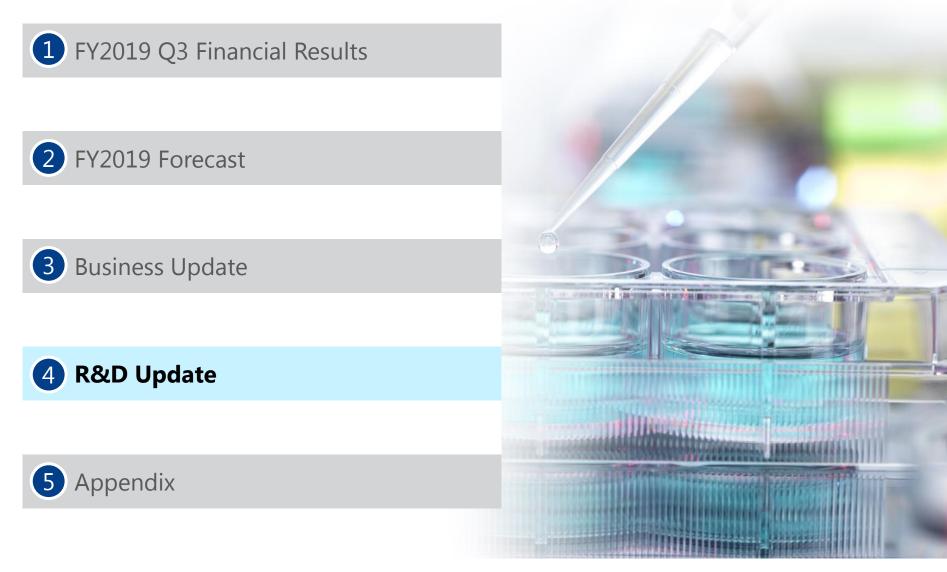
Trastuzumab Deruxtecan (DS-8201): Revenue



(Bn JPY)











3ADCs: DS-8201 Update

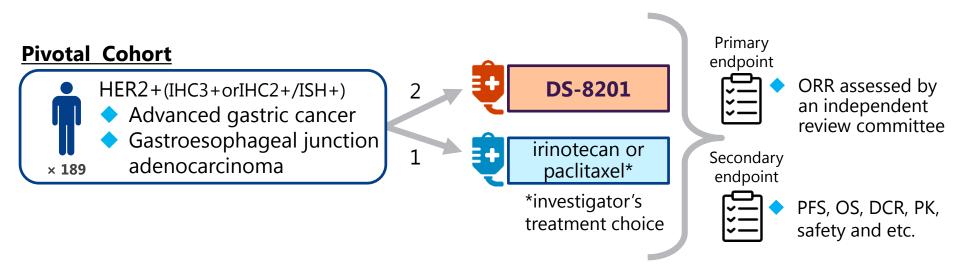
Alpha: Specialty Medicine Update

Upcoming News

DS-8201 : DESTINY-Gastric01 Results



DS-8201's first study results with a control arm



About gastric cancer (GC)

- Approximately 1 million new cases and 800,000 deaths worldwide (in 2018), half of which occured in East Asia (especially in JP and S. Korea) *
- HER2 positive rate in GC is about 20%, 1st line treatment is Herceptin + chemotherapy and no other HER2 treatment has been approved **

*Source: World Cancer Research Fund International. Stomach Cancer Statistics. 2018. Accessed January 6, 2019: <u>https://www.wcrf.org/dietandcancer/cancer-trends/stomach-cancer-statistics</u> **Source: NCCN Guidelines® Gastric Cancer. Version 4.2019. December 20, 2019

DS-8201 : DESTINY-Gastric01 Results



Efficacy

- Primary endpoint: achieved statistically significant and clinically meaningful improvement in objective response rate (ORR), as assessed by an independent review committee, in patients treated with DS-8201 versus investigator's choice of chemotherapy
- Secondary endpoint: achieved statistically significant and clinically meaningful improvement in overall survival (OS) within interim analysis, in patients treated with DS-8201 versus investigator's choice of chemotherapy

<u>Safety</u>

- No new safety concerns were identified
- About interstitial lung disease (ILD) and pneumonitis
 - Majority of drug-related ILD and pneumonitis were grade 1 and 2
 - Two grade 3 and one grade 4, no grade 5

sNDA planned in FY2020 Q1 in Japan (SAKIGAKE)
 Results are planned to be presented at ASCO 2020





3ADCs: DS-8201 Update

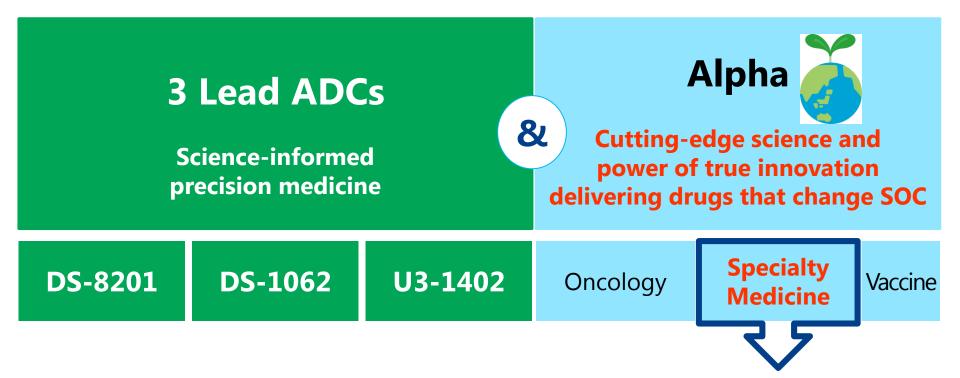
Alpha: Specialty Medicine Update

Upcoming News

Today's Focus



Announced new strategy at R&D Day 2019

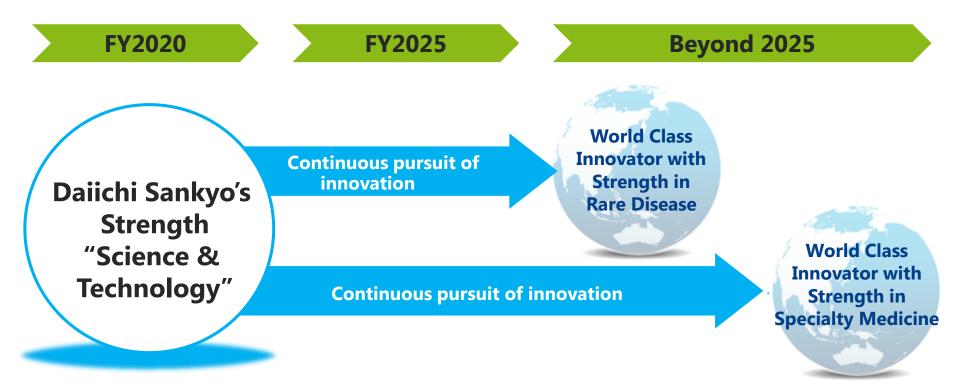




Mid-Long Term Specialty Medicine Vision



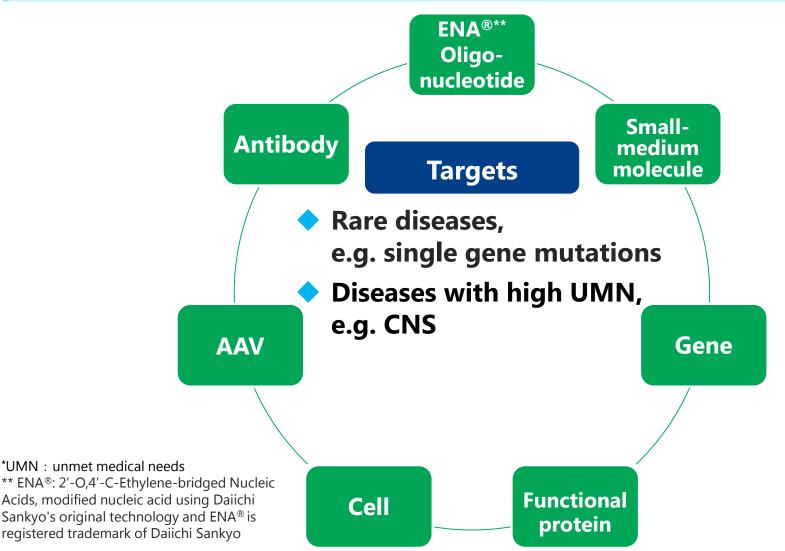
Provide innovative medicines to patients suffering from diseases for which effective treatments are not available or where existing treatments are not sufficiently effective



Direction for Specialty Medicine



- Target diseases without effective treatment and with high UMN*
- Leverage our various modalities for a variety of etiologies



Projects Using ENA® Technology

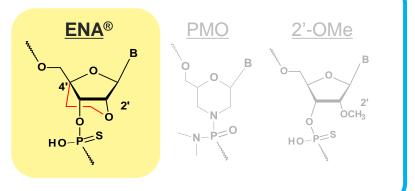


Superior profile

High affinity to DNA and RNA
 Event purplease resistance

Excellent nuclease resistance

=>Strong efficacy expected e.g. effect on myocardial in Duchenne Muscular Dystrophy (DMD) patients



Target Organ	Target Disease (MoA)	DS#	Dosing Route	Stage
	DMD (Exon 45 skipping)	DS-5141	S.C.	Ph1/2
A K	DMD (Exon 44 skipping)	DS-5144	S.C.	Preclin.
d 🕅 🕅	DMD (Exon 50 skipping)	DS-5150	S.C.	Preclin.
8	DMD (Exon 51 skipping)	DS-5151	S.C.	Preclin.
J L	DMD (Exon 53 skipping)	DS-5153	S.C.	Preclin.
	GSD Ia [*] (splicing correction)	DS-4108	S.C.	Preclin.

Project Using ENA® Technology: DS-5141

Co-development with ODTI*

Stage: Phase 1/2 (planning to obtain TLR at the end of CY2020)

ENA® Oligonucleotide

Target Disease

Duchenne Muscular Dystrophy (amenable to Exon 45 skipping)

- X-linked recessive muscle disorder caused by abnormalities in the dystrophin gene resulting in the absence of dystrophin protein production
- Muscle weakness progresses with age, and many patients die of respiratory or cardiac failure in their 20s or 30s

Approved Drug Therapy	Prevalence ^{**}
 No Exon 45 skipping drug is available 	1 in 3,500 boys
 Exon 51 skipping: Eteplirsen (Sarepta) Exon 53 skipping: Golodirsen (Sarepta) 	Source: Ann Neurol. 2012 Mar;71(3):304-13

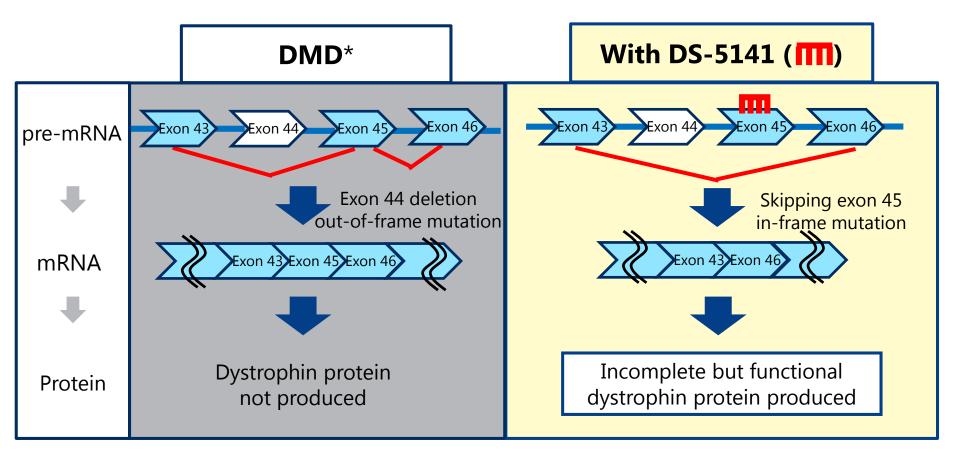
*Orphan Disease Treatment Institute Co., Ltd. (ODTI was founded in 2013 through joint investment with a fund run by the Innovation Network Corporation of Japan and Mitsubishi UFJ Capital Company Limited.) **Patients expected to benefit from Exon 45 Skipping treatment



DS-5141: Potential Treatment Pathway for DMD



ENA® oligonucleotide modifies the reading frame by skipping Exon 45 during the splicing process, leading to the production of incomplete but functional dystrophin proteins



Project Using ENA® Technology: DS-4108

Collaborative research with Kobe Gakuin University, National Center for Child Health and Development, and Hiroshima University

Stage: Preclinical

Target Disease

Glycogen storage disease type Ia (with G6PC c.648G>T)

- Congenital deficiency of glucose-6-phosphatase (G6Pase, gene name: G6PC) causes fasting hypoglycemia, hepatomegaly, and hepatic adenomal
- G6PC c.648G>T is common mutation in East Asia including Japan and aberrant splicing causes lack of G6Pase function

Approved Drug Therapy	Prevalence
 No medical therapy currently available Symptom management with strict diet: frequent intake (7-8/day) of unheated corn starch / special milk for the treatment of glycogen disease and continuous infusion at night to prevent hypoglycemia. Lactose, sucrose, fructose intake restriction to prevent acidosis 	1 in 100,000 new born Source: https://www.shouman.jp/disease/details/08_05_066/



ENA®

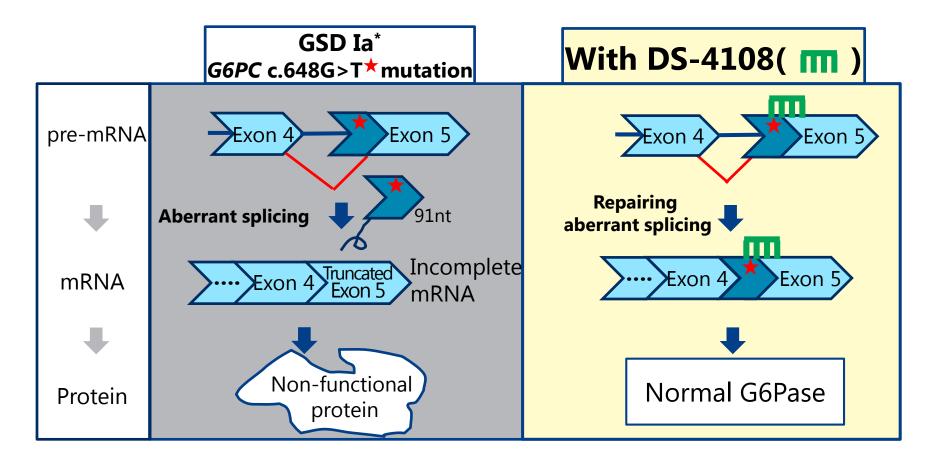
Oligo-

nucleotide

DS-4108: Potential Treatment Pathway for GSD Ia



Correct the aberrant splicing by ENA® oligonucleotide and induce production of normal G6Pase



Other Rare Disease Project: DS-1211

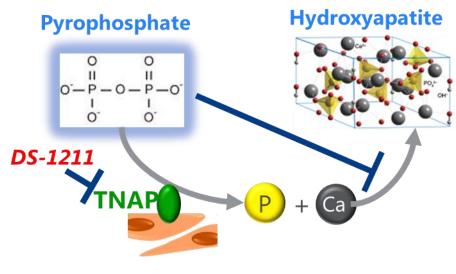


Stage: Phase 1



Mode of Action

TNAP* inhibitor



Target Disease

Pseudoxanthoma elasticum (PXE)

 Mutation in ABCC6 gene results in low level of a calcification inhibitor, pyrophosphate, leading to skin lesions, visual impairments, cardiovascular diseases, and gastrointestinal disorders

Approved Drug Therapy	Estimated Number of Patients
	JP/US/EU5: 160,000
available	Source: Calculated based on Uitto et al., Expert Opin Orphan Drugs. 2014

*TNAP: tissue nonspecific alkaline phosphatase

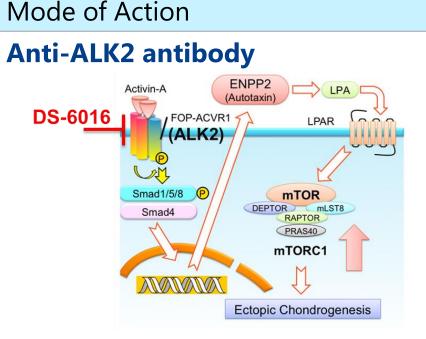
Other Rare Disease Project: DS-6016

Daiichi-Sankyo

Collaborative research with Saitama Medical University Stage: Preclinical



August 2017: adopted for support under CiCLE program of AMED



Target Disease

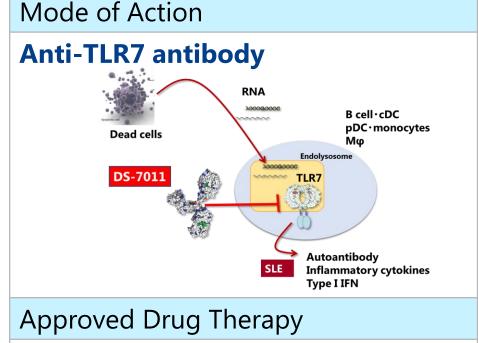
Fibrodysplasia Ossificans Progressiva (FOP)

- ALK2 genes (responsible for osteogenesis) mutation cause activated ALK2 to transmit excessive osteogenic signals and form bone in tissues that are not normally formed
- Decreased mobility due to osteogenesis worsens with age and total mobility assistance is usually required in people aged 40 years and older

Approved Drug Therapy	Estimated Number of Patients
 No medical therapy currently available 	Japan: 60-84, US: 285 Source: https://www.nanbyou.or.jp/entry/54 Source: https://www.ifopa.org/what_is_fop

Non-Rare Disease Project: DS-7011

- Collaborative research with the Institute of Medical Science, The University of Tokyo
- Stage: Preclinical
- December 2019: adopted for support under CiCLE program of AMED



Belimumab (GSK)

Target Disease

Systemic lupus erythematosus(SLE)

Autoimmune diseases that cause systemic symptoms such as fever and malaise, and inflammation of joints, kidneys, and skin

Estimated Number of Patients

JP/US/EU5: 530,000

Source: DRG Landscape & Forecast Systemic Lupus Erythematosus Nov 2018



Nove

Antibody





3ADCs: DS-8201 Update

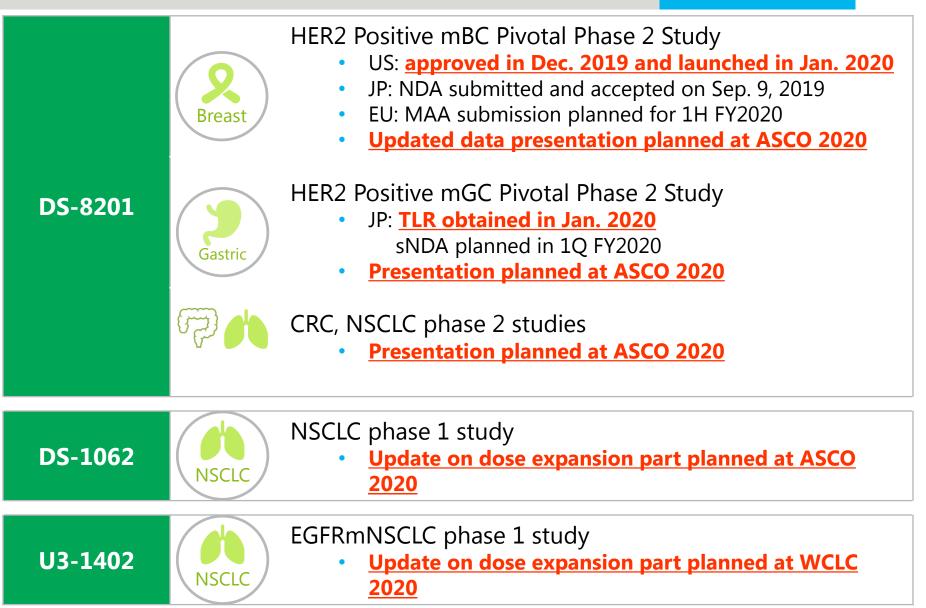
Alpha: Specialty Medicine Update

Upcoming News

3ADCs: Upcoming News

As of January 2020

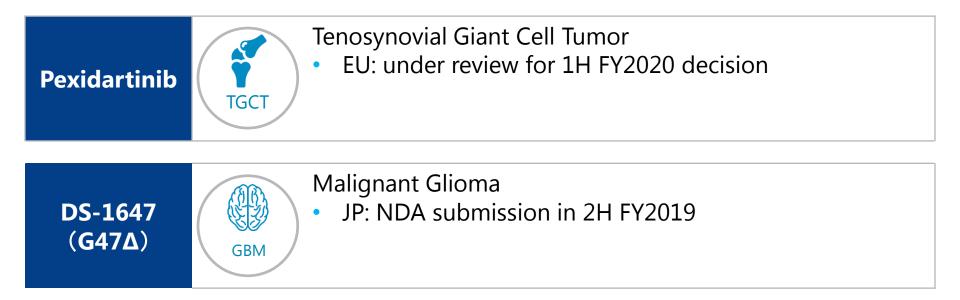




Alpha: Upcoming News

As of January 2020









FY2019 R&D Major Milestones

As of January 2020



	Destant	Target Indications and Studies	FY2019				FY2020
	Project		Q1	Q2	Q3	Q4	Q1~
3 ADCs		P2 pivotal: breast cancer (HER2 positive post T-DM1)		JP/US submitted	US approved	US launched	EU submission
		P2 pivotal: gastric cancer (HER2 positive, 3L) (JP/Asia)				<u>TLR</u>	JP submission
	DS-8201	P2: gastric cancer (HER2 positive post trastuzumab) (US/EU)			Study started		
		P1: breast cancer and NSCLC with pembrolizumab (US/EU)				Study start planned	
	U3-1402	P1: NSCLC (JP/US)		Started dose expansion			
	DS-1062	P1: NSCLC(JP/US)		Started dose expansion			
Alpha	Quizartinib	P3: AML (relapsed/refractory)	JP approved US CRL		JP launched EU EMA CHMP negative opinion		
	Pexidartinib	P3: tenosynovial giant cell tumor (US/EU)		US approved/ launched			EU decision
	DS-1647	IIS: malignant glioma (JP)				Submission	
	DS-3201	P2: Adult T-cell leukemia/lymphoma (JP)			Study started		
		P1: small cell lung cancer (US)	Study started				
	DS-1205	P1: NSCLC with osimertinib (Asia)	Study started				
	DS-7300	P1/2: solid tumors (JP/US)			Study started		
	DS-6157	P1: gastrointestinal stromal tumors (GIST)				Study start planned	
	Laninamivir	P3: influenza (nebulizer formulation) (JP)	Approved		Launched		
	DS-2741	P1: atopic dermatitis (JP)				Study started	

AML: acute myeloid leukemia, CRL: complete response letter, IIS: investigator initiated study, NSCLC: non-small-cell lung cancer Underlined in red: new or updated from Q2 FY2019, blue: achieved

Major R&D Pipeline

ADCs

Alpha

As of January 2020



	Generic Name/Project Code/ MOA	Target Indication	Region	Stage
		Breast cancer (HER2 positive post T-DM1)	JP/EU/Asia	NDA ★P2
	Trastuzumab deruxtecan/ DS-8201/anti-HER2 ADC	Breast cancer (HER2 positive vs T-DM1)	JP/US/EU/ Asia	P3
		Breast cancer (HER2 low expression)	JP/US/EU/ Asia	P3
		Gastric cancer (HER2 positive, 3L) 🙎	JP/Asia	★P2
		Gastric cancer (HER2 positive, 2L	US/EU	P2
		Colorectal cancer (HER2 positive)	JP/US/EU	P2
		NSCLC (HER2 positive/mutant)	JP/US/EU	P2
		Breast and bladder cancer (with nivolumab)	US/EU	P1
		Breast and NSCLC (with pembrolizumab)	US/EU	P1 prep
		Breast cancer (HER3 expressing)	JP/US	P1
	U3-1402/anti-HER3 ADC	EGFRm NSCLC	JP/US	P1
	DS-1062/anti-TROP2 ADC	NSCLC	JP/US	P1
		AML (relapsed/refractory) 🤶	US/EU/Asia	P3
	Quizartinib/FLT3 inhibitor	AML (1 st line) 🤶	JP/US/EU/ Asia	P3 LCM
	Pexidartinib/ CSF-1/KIT/FLT3 inhibitor Tenosynovial giant cell tumor		EU	NDA
9y	Axicabtagene ciloleucel/ Axi-Cel [®] /anti-CD19 CAR-T	B-cell lymphoma 🤶	JP	★P2
Oncology	DS-1647(G47Δ)/oncolytic HSV-1	Malignant glioma 🤶	JP	★P2
ő	Valemetostat/	Adult T-cell leukemia/lymphoma	JP	★P2
		Non-Hodgkin's Lymphoma (PTCL 👷)	JP/US	P1
	DS-3201/EZH1/2 inhibitor	AML, ALL	US	P1
		Small cell lung cancer	US	P1
	Milademetan/	Solid tumor (liposarcoma 🤶)	JP/US	P1
	DS-3032/MDM2 inhibitor	AML	JP/US	P1

		Generic Name/Project Code/ MOA	Target Indication	Region	Stage
	Oncology	PLX2853/BET inhibitor	AML	US	P1
		DS-1001/ Mutant IDH1 inhibitor	Glioma	JP	P1
		DS-1205/AXL inhibitor	NSCLC (with gefitinib)	JP	P1
			NSCLC (with osimertinib)	Asia	P1
		DS-7300/anti-B7-H3 ADC	Solid tumor	JP/US	P1
		Edoxaban/FXa inhibitor	Atrial fibrillation in the very elderly	JP	P3 LCM
	10	Prasugrel/anti-platelet agent	Ischemic stroke	JP	P3 LCM
	Specialty Medicines	Esaxerenone/MR-Antagonist	Diabetic nephropathy	JP	P3 LCM
Alpha		Mirogabalin/ $\alpha_2\delta$ ligand	Central neuropathic pain	JP/Asia	P3 LCM
		DS-1040/TAFIa inhibitor	Acute ischemic stroke, acute pulmonary thromboembolism	JP/US/EU	P1
		DS-5141/ENA-oligonucleotide	Duchenne type muscular dystrophy 🔶	JP	P1
		DS-1211/TNAP inhibitor	Inhibition of ectopic calcification	US	P1
		DS-2741/anti-Orai 1 antibody	Atopic dermatitis	JP	P1
	Vaccine	VN-0107/MEDI3250/ live attenuated influenza vaccine nasal spray	Prophylaxis of seasonal influenza	JP	NDA
		VN-0105/DPT-IPV/Hib	Prevention of pertussis, diphtheria, tetanus, poliomyelitis and Hib infection	JP	P3
		VN-0102/JVC-001/ Measles-mumps-rubella vaccine	For measles, mumps, and rubella prophylaxis	JP	P3 prep

ALL: acute lymphocytic leukemia, AML: acute myeloid leukemia, IIS: investigator initiated study, NSCLC: non-small-cell lung cancer, PTCL: peripheral T-cell lymphoma

*: Project in Oncology that is planned to be submitted for approval based on the results of Phase 2 trials

R: SAKIGAKE Designation (Japan) and Orphan Drug Designation (JP/US/EU)

Projects for Out-Licensing



	Discovery/Pre-clinical	Phase 1
Oncology		DS-1001: IDH1 mutant inhibitor Glioma (other than JP)
Specialty	Tryptophanase inhibitor Uremia / Late stage chronic kidney disease	
Specialty Medicine	Long Acting ANP: Long Acting GC-A activator Resistant hypertension / Chronic heart failure	

Abbreviations



Abbrevi ations	English	Implications
AE	Adverse event	Undesirable experience associated with the use of a medical product in a patient
BTD	Breakthrough therapy designation	Designation granted by US FDA that expedites drug development
CR	Complete response	Complete response (complete resolution of cancer)
CRL	Complete response letter	Letter issued by the FDA after completion of its review and determined the application cannot be approved based on the current submission
DCR	Disease control rate	Disease control rate (percentage of patients with controlled disease status)
DLT	Dose limiting toxicity	Dose-limiting toxicities (toxicities that may explain the inability to escalate doses)
DOR	Duration of response	Length of time that a tumor responds to treatment
EGFR	Epidermal growth factor receptor	Epidermal growth factor receptor
MTD	Maximum tolerated dose	The highest dose of a drug or treatment that does not cause unacceptable side effects
ORR	Overall response rate Objective response rate	Overall response rate (expressed as the proportion of patients who responded to treatment and the sum of CR and PR)
OS	Overall survival	Overall survival (time from start of treatment to death)
PD	Progressive disease	Disease progression (worsening disease despite treatment)
PFS	Progression-free survival	Progression-free survival (without cancer progression)
PR	Partial response	Partial response (a reduction in the size of the cancer by 30% or more that lasts for 4 weeks)
SD	Stable disease	The size of the cancer is almost unchanged before and after treatment
TEAE	Treatment emergent adverse event	Any event not present prior to the initiation of the treatments or any event already present that worsens in either intensity or frequency following exposure to the treatments

Inquiries about this document

Daiichi Sankyo Co., Ltd. Corporate Communications Dept.

TEL:+81-3-6225-1126

Email: <u>DaiichiSankyoIR@daiichisankyo.co.jp</u>