

FY2024 Q1 Financial Results Presentation

DAIICHI SANKYO CO., LTD.

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Executive Officer, CFO

July 31, 2024

Forward-Looking Statements

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Agenda

① FY2024 Q1 Financial Results

② Business Update

③ R&D Update

④ Appendix



Overview of FY2024 Q1 Results

(Bn JPY)

		FY2023 Q1 Results	FY2024 Q1 Results	YoY	
Revenue		350.8	436.2	+24.3%	85.3
Cost of sales *1		93.6	95.0		1.4
SG&A expenses *1		135.6	167.6		32.0
DXd ADC profit share *2		34.8	56.8		22.0
Other SG&A expenses		100.8	110.8		10.0
R&D expenses *1		77.2	100.7		23.5
Core operating profit *1		44.5	72.9	+63.9%	28.4
Temporary income *1		0.5	20.1		19.6
Temporary expenses *1		0.9	0.0		-0.9
Operating profit		44.0	93.0	+111.2%	48.9
Profit before tax		52.1	110.2		58.1
Profit attributable to owners of the Company		57.0	85.4	+49.8%	28.4
Currency Rate	USD/JPY	137.37	155.89	+18.52	
	EUR/JPY	149.46	167.88	+18.42	

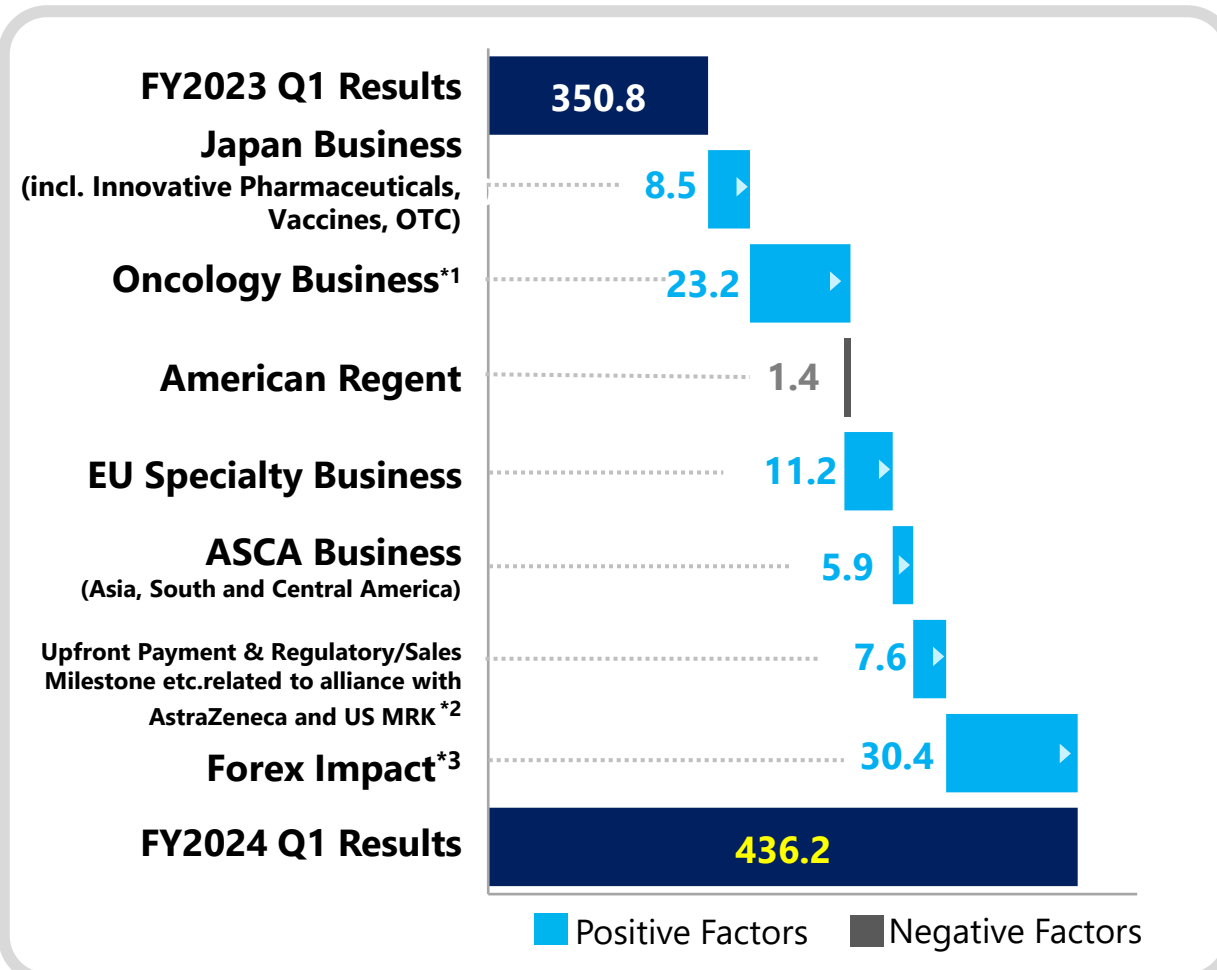
*1 As an indicator of ordinary profitability, "core operating profit" which excludes temporary income and expenses from operating income is disclosed. Income and expenses related to: sale of fixed assets, restructuring (excluding the sales of pipeline and launched products), impairment, loss compensation, reconciliation, and other non-temporary and material gains and losses are included in the "temporary income and expenses". Temporary income and expenses are excluded from results and forecast for cost of sales, SG&A expenses and R&D expenses shown in the list above. The adjustment table from operating profit to core operating profit is stated in the reference data.

*2 DS pays alliance partners 50% of gross profit for the product sales in countries/regions where DS book revenue (excluding Japan) to share profit with the partners.

Revenue

Increased by 85.3 Bn JPY (Increased by 55.0 Bn JPY excl. forex impact)

(Bn JPY)



Positive Factors		Negative Factors	
Japan Business Unit			
Lixiana	+7.0	Daiichi Sankyo	-20.6
Enhertu	+3.4	Espha	
Tarlige	+2.5		
Daiichi Sankyo Healthcare	+2.9		
Realized gains of unrealized gains of inventory for Daiichi Sankyo Espha	+5.6		
Oncology Business Unit*1			
Enhertu	+22.3		
American Regent Unit			
		Venofer	-1.4
EU Specialty Business Unit			
Lixiana	+8.1		
Nilemdo/Nustendi	+3.9		
ASCA (Asia, South and Central America) Business Unit			
Enhertu	+6.6		
Upfront Payment & Regulatory/Sales Milestone etc. related to alliance with AstraZeneca and US MRK *2			
Upfront Payment related to alliance with US MRK	+7.2		

*1 Revenue for Daiichi Sankyo, Inc. and Daiichi Sankyo Europe's oncology products

*2 Merck & Co., Inc., Rahway, NJ, USA

*3 Forex impact USD: +16.9, EUR: +10.1, ASCA: +3.4

Core Operating Profit

Increased by 28.4 Bn JPY (Increased by 30.4 Bn JPY excl. forex impact)

(Bn JPY)

FY2023 Q1 Results

44.5

Revenue

85.3

Cost of Sales

8.0

SG&A Expenses

17.4

R&D Expenses

15.2

Forex Impact

32.4

FY2024 Q1 Results

72.9

■ Positive Factors ■ Negative Factors

Revenue +85.3

incl. forex impact of +30.4

Cost of Sales -8.0

Improvement in cost of sales ratio by change in product mix

SG&A Expenses +17.4

Increase in expenses related to Enhertu
due to an increase in profit share of gross profit with AstraZeneca

R&D Expenses +15.2

Increase in 5DXd ADCs* R&D investments

Forex Impact +32.4 (Profit Decreased)

Cost of Sales +9.4

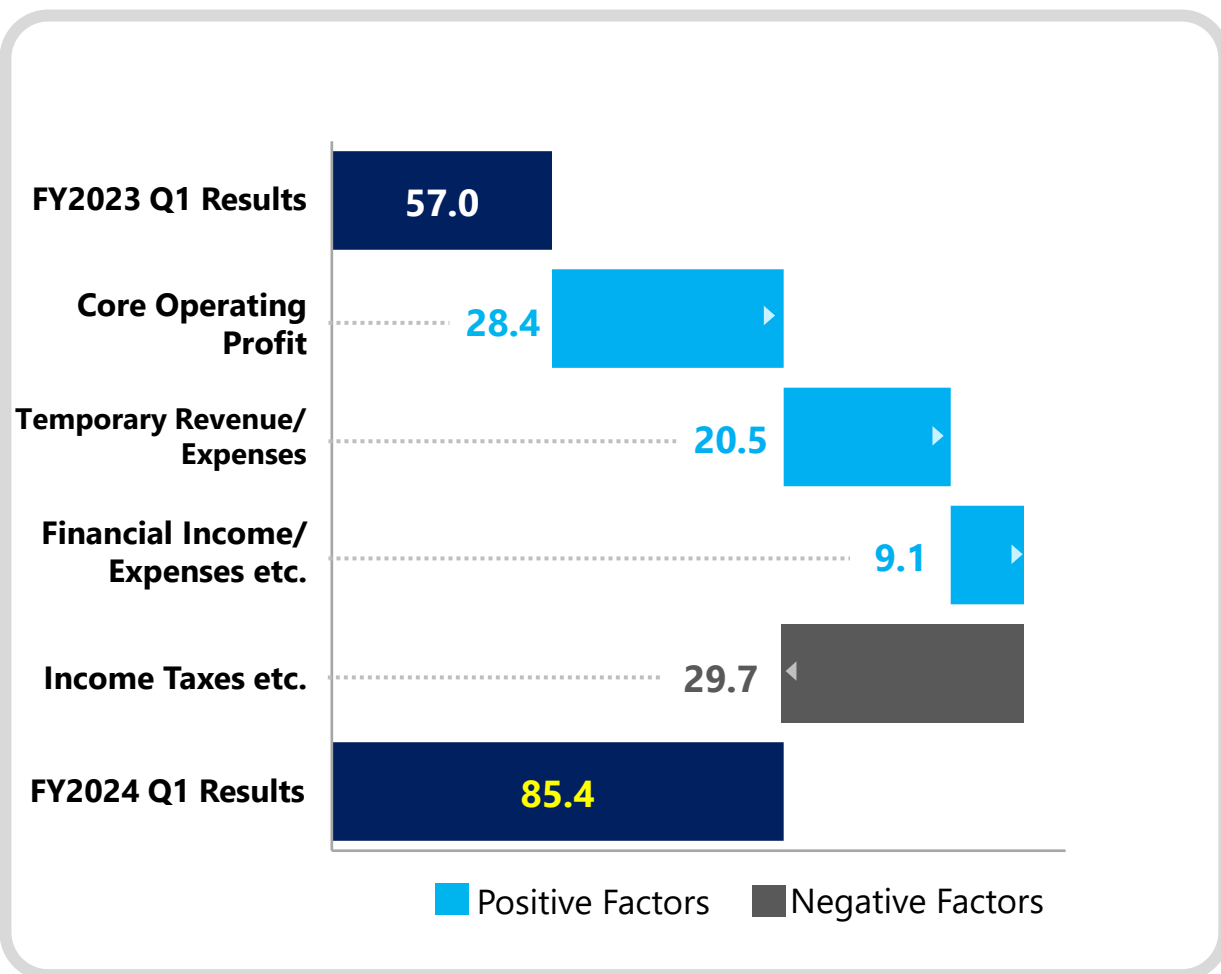
SG&A Expenses +14.6

R&D Expenses +8.4

Profit Attributable to Owners of the Company

Increased by 28.4 Bn JPY

(Bn JPY)



Temporary Income/Expenses **+20.5 (Profit Increased)**

	FY2023 Q1 Results	FY2024 Q1 Results	YoY
Temporary Income	0.5	20.1 ^{*1}	+19.6
Temporary Expenses	0.9	0.0	-0.9

^{*1} Gains on stock transfer of Daiichi Sankyo Espha (16.3)

Financial Income/Expenses etc. **+9.1 (Profit Increased)**

- Improvement in forex gains/losses +7.8
- Increase in interest income +2.8
- Deterioration in investment securities valuation gains/losses -1.2

Income Taxes etc. **+29.7 (Profit Decreased)**

	FY2023 Q1 Results	FY2024 Q1 Results	YoY
Profit before Tax	52.1	110.2	+58.1
Income Taxes etc.	-4.9	24.8	+29.7
Tax rate	-9.4%	22.5%	

Agenda

① FY2024 Q1 Financial Results

② **Business Update**

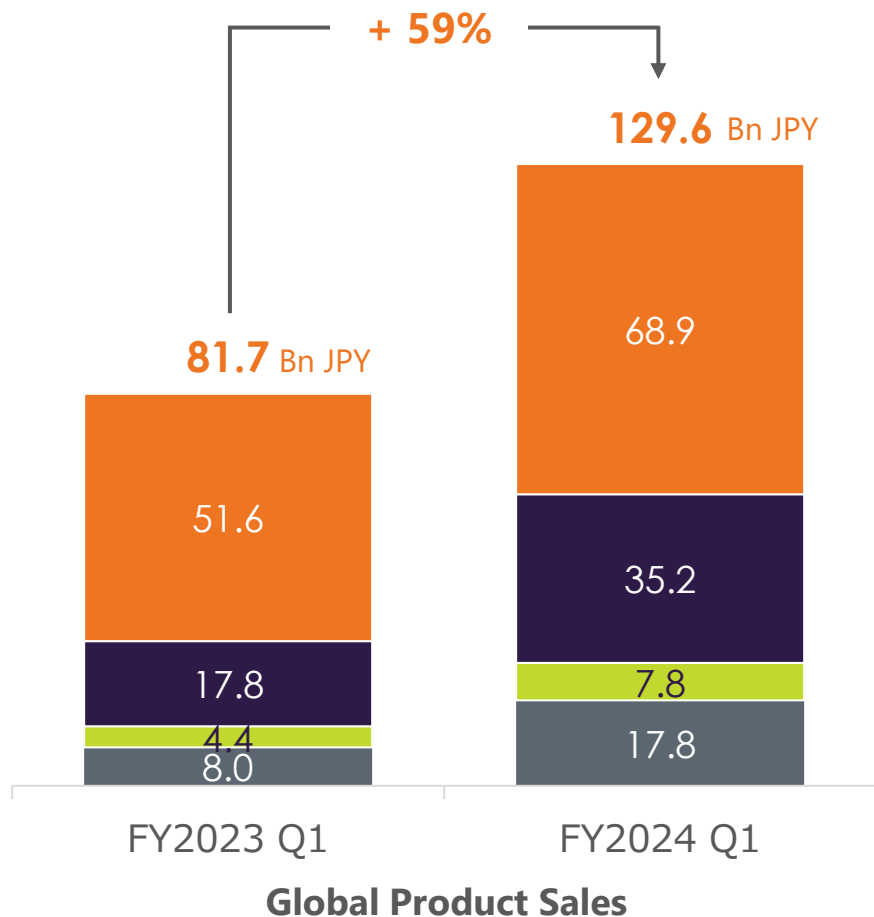
③ R&D Update

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Global Product Sales

Q1 Product Sales Result **¥129.6Bn** (YoY **+¥47.9Bn**) FY2024 Forecast **¥508.4Bn** (YoY **+¥112.4Bn**)



◆ Key Growth Factors (YoY Quarterly Results)

Achieved over two digits growth rate in all regions leading by HER2+ BC 2L and HER2 low BC (post-chemo)

US

(+34%)

Maintained the No.1 new patient share in BC, GC, NSCLC; Steadily increased sales uptake in HER2+ tumor-agnostic

EU

(+98%)

Expanded sales mainly in Germany, France, Italy; Maintained the No. 1 new patient share in HER2+ BC 2L and HER2 low BC (post-chemo)

Japan

(+78%)

Maintained the No.1 new patient share in all indications

ASCA

(+122%)

Expanded sales mainly in Brazil and China

◆ Other Progresses: NCCN Guideline Updates

Biliary Tract Cancers, NSCLC, Occult Primary, Pancreatic Adenocarcinoma, Colon Cancer, Rectal Cancer, Small Bowel Adenocarcinoma (April)

Head and Neck Cancers, Vulvar Cancer, Bladder Cancer (May)

Other Regional Initiatives

Japan

- ◆ **Ezharmia® Anti-Cancer Agent / EZH1 and EZH2 Inhibitor**
 - **Approved for the treatment of adult patients with relapsed or refractory peripheral T-cell lymphoma (PTCL) in June 2024**
- ◆ **Belsomra® Anti-Insomnia Treatment / Dual Orexin Receptor Antagonist**
 - Decision made to transfer of distribution rights from MSD to Daiichi Sankyo in July 2024
 - Daiichi Sankyo will be responsible for sales and promotional activities from October 1, 2024 onwards



EU

- ◆ **Nilemdo®/Nustendi® Cholesterol-lowering agent**
 - 2024 May **Approved for treatments to reduce the risk of adverse cardiovascular events**
 - The first and only non-statin LDL-C-lowering treatments indicated for primary and secondary prevention of cardiovascular events

Major Updates on Patent Disputes

Dispute with Seagen (SGN) regarding Daiichi Sankyo ADC ① (Arbitration on ADC Technology)

- ◆ **May 2024** Final award issued by an arbitrator has been finalized
- ◆ **Jun. 2024** **SGN has paid DS based on the Final award**
 - SGN has paid DS **approx. U.S. \$47 million** (approx. 7.5 bn JPY) in connection with **attorneys' fees and costs** plus interest awarded by the arbitrator of the party's dispute.
 - The payment has been booked as **reversal of SG&A** in the FY2024 Q1 financial results.

Dispute with SGN regarding Daiichi Sankyo ADC ② (Disputes regarding SGN's U.S. patent)

- ◆ **Nov. 2023** **DS appealed to the U.S. Court of Appeals for the Federal Circuit (CAFC) the amended final judgment*** by the U.S. District Court for the Eastern District of Texas

*The Court's amended final judgment requires DS to pay SGN a royalty of 8% on sales of ENHERTU® from Apr. 1, 2022 through Nov. 4, 2024 (the expiry of SGN's U.S. patent) in addition to the 41.8 Mn USD in damages previously awarded by the Court in July 2022 (Oct. 2023)

- ◆ **May 2024** **SGN appealed to CAFC the Final Written Decision* in a Post Grant Review (PGR)**

*The U.S. Patent and Trademark Office (USPTO) rendered a Final Written Decision invalidating all challenged claims of SGN's U.S. patent in a Post Grant Review (PGR) (Jan. 2024)

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③ **R&D Update**

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5DXd ADCs Update

Next Wave Update

WCLC/ESMO 2024

News Flow

Establish and expand DXd ADCs to address the broader spectrum of Breast Cancer



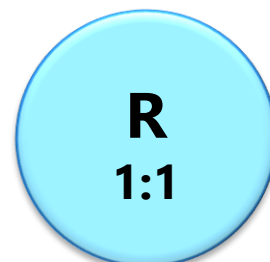
- Pivotal studies only, not exhaustive
- Box size does not reflect the patient population
- Box indicates current potential target segment

DESTINY-Breast06 primary analysis data presented at ASCO 2024

DESTINY-Breast06 study design

Key Eligibility

- HR positive mBC
- HER2 low (IHC 1+ or IHC 2+/ISH-) or HER2 ultralow (IHC 0 with membrane staining)*
- Chemotherapy naïve in the mBC setting



HER2 low: n=713
HER2 ultralow: n=153

ENHERTU® 5.4 mg/kg q3w

TPC

- HER2 low and HER2 ultralow mBC after one or more treatments of endocrine therapy
- The study covers ~85% of HR positive and HER2 negative mBC by previous definition, which consists of 60-65% of HER2 low and 20-25% of HER2 ultralow

Primary endpoint

- PFS (BICR) in HER2 low

Secondary endpoint

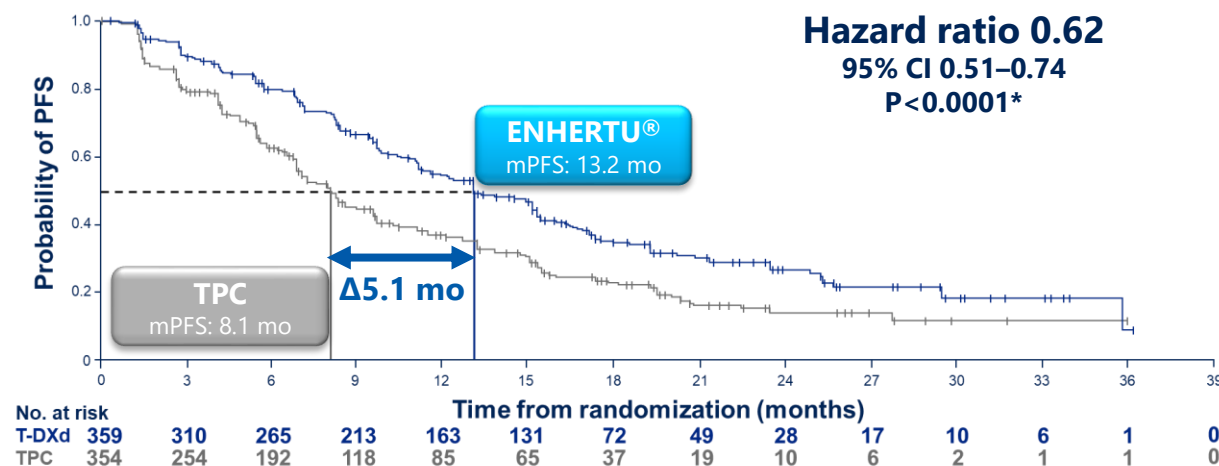
- PFS (BICR) in ITT (HER2 low + ultralow)
- OS in HER2 low
- OS in ITT (HER2 low + ultralow)
- Safety and tolerability

*Study enrollment was based on central HER2 testing. HER2 status was determined based on the most recent evaluable HER2 IHC sample prior to randomization. HER2 ultralow was defined as faint, partial membrane staining in ≤10% of tumor cells (also known as IHC >0<1+)

ASCO: American Society of Clinical Oncology, BC: breast cancer, BICR: blinded independent central review, HR: hormone receptor, IHC: immunohistochemistry, ISH: in situ hybridization, ITT: intent-to-treat, mBC: metastatic breast cancer, PFS: progression free survival, OS: overall survival, q3w: every 3 weeks, TPC: treatment of physician's choice, i.e., capecitabine, nab-paclitaxel, paclitaxel

ENHERTU® demonstrated a statistically significant and clinically meaningful PFS benefit in HR positive, HER2 low and HER2 ultralow mBC

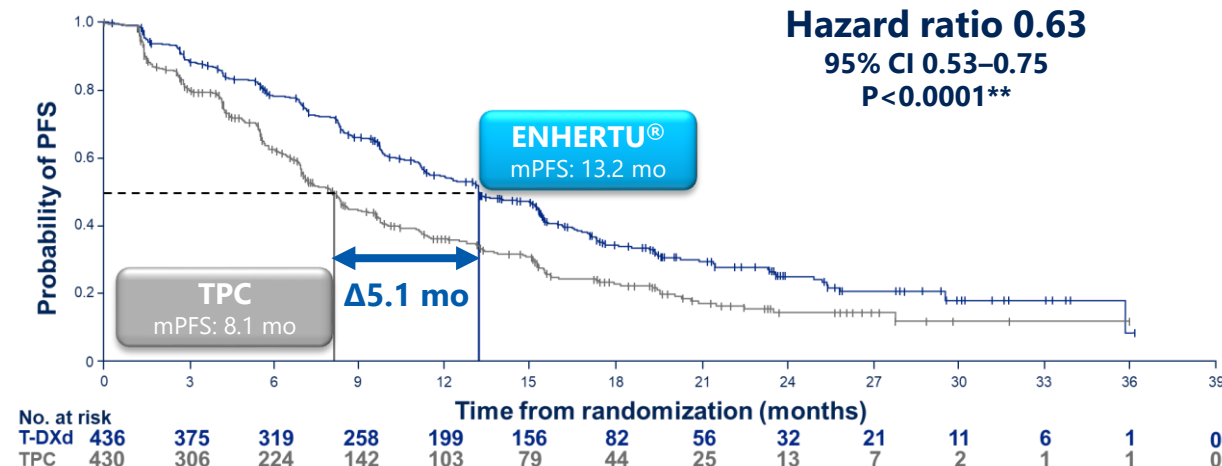
PFS (BICR) in HER2 low



Data cutoff: March 18, 2024

*P-value of <0.05 required for statistical significance

PFS (BICR) in ITT (HER2 low and HER2 ultralow)



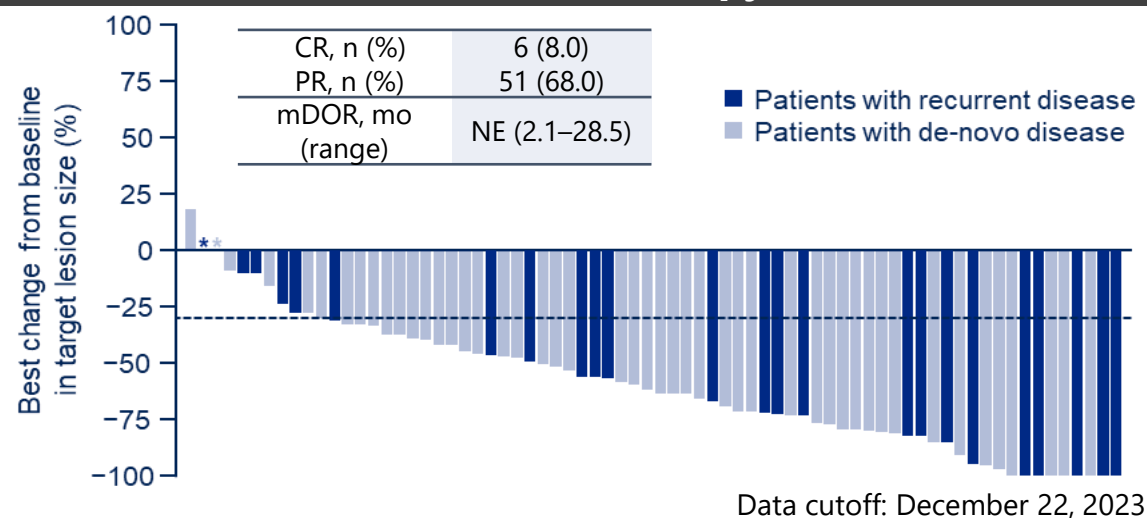
Data cutoff: March 18, 2024

**P-value of <0.015 required for statistical significance

- Demonstrated mPFS of 13.2 months in ITT population (HR positive HER2 low and HER2 ultralow).
- Efficacy in the HER2 ultralow population was consistent with that in the HER2 low population.
- No new safety signals were identified. Adjudicated as drug-related ILD grade ≥3 occurred in 1.4% of patients treated with ENHERTU® (three for grade 3 and grade 5, respectively)
- Plan to file in US, EU and Japan

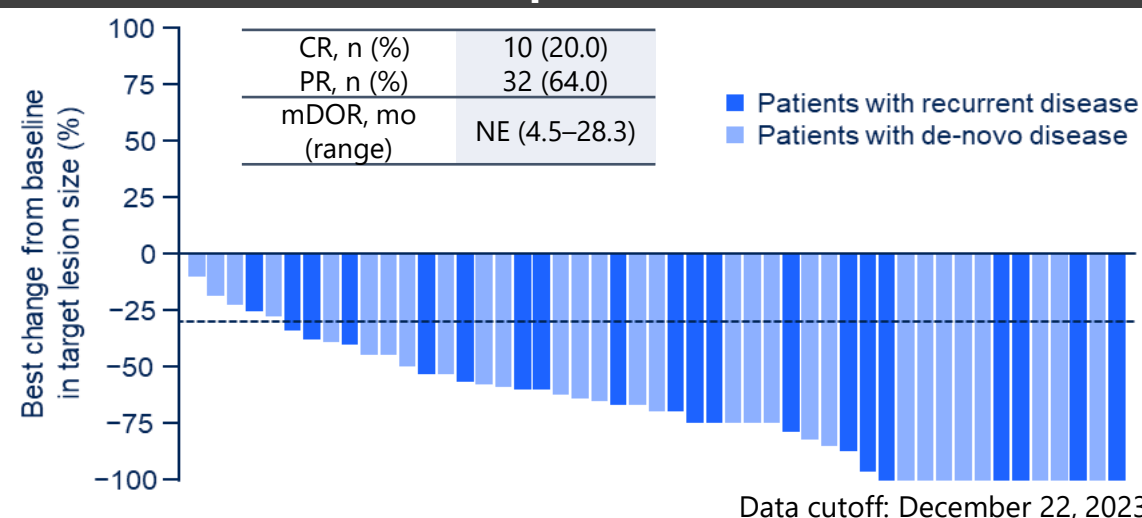
Interim analysis of the Ph1b/2 study to evaluate ENHERTU® combination w/ or w/o pertuzumab in 1L HER2 positive BC shows robust efficacy and durability

ENHERTU® monotherapy (n=75)



Confirmed ORR, % (80% CI) 76.0 (68.5–82.4)

ENHERTU® + pertuzumab (n=50)



Confirmed ORR, % (80% CI) 84.0 (75.3–90.5)

- ENHERTU® monotherapy and combo with pertuzumab showed robust efficacy
 - ✓ Confirmed ORR: mono 76.0%, combo 84.0%
 - ✓ PFS rate at 12 months: mono 80.8%, combo 89.4%
- The safety profiles of ENHERTU® and pertuzumab combination were consistent with their individual known profiles
 - ✓ The incidence of adjudicated ILD events: mono 9.3%, combo 14.0%, all ILD incidences were Gr3 or lower
- This dataset of ENHERTU® for 1L treatment of HER2 positive mBC may provide a preliminary insight for DESTINY-Breast09 study

Based on the outcome from DESTINY-PanTumor02 study*, a new Ph3 study for 1L BTC in combination with rilvegostomig has been planned

DESTINY-BTC01 study design

Key Eligibility

- Advanced or metastatic BTC or GBC
- No prior treatment in advanced or metastatic setting.
- HER2 expressing (IHC 3+/2+)

Safety Run-in

ENHERTU® 5.4 mg/kg
+ rilvegostomig** 750 mg q3w until PD
(n=20)

R
1:1:1

N=600

Arm A

ENHERTU® + rilvegostomig

Arm B

ENHERTU® monotherapy

Arm C

gemcitabine
+ cisplatin or carboplatin
+ durvalumab

Primary endpoint: OS in IHC 3+

Secondary endpoint: OS (ITT), PFS, ORR, DOR, Safety etc.

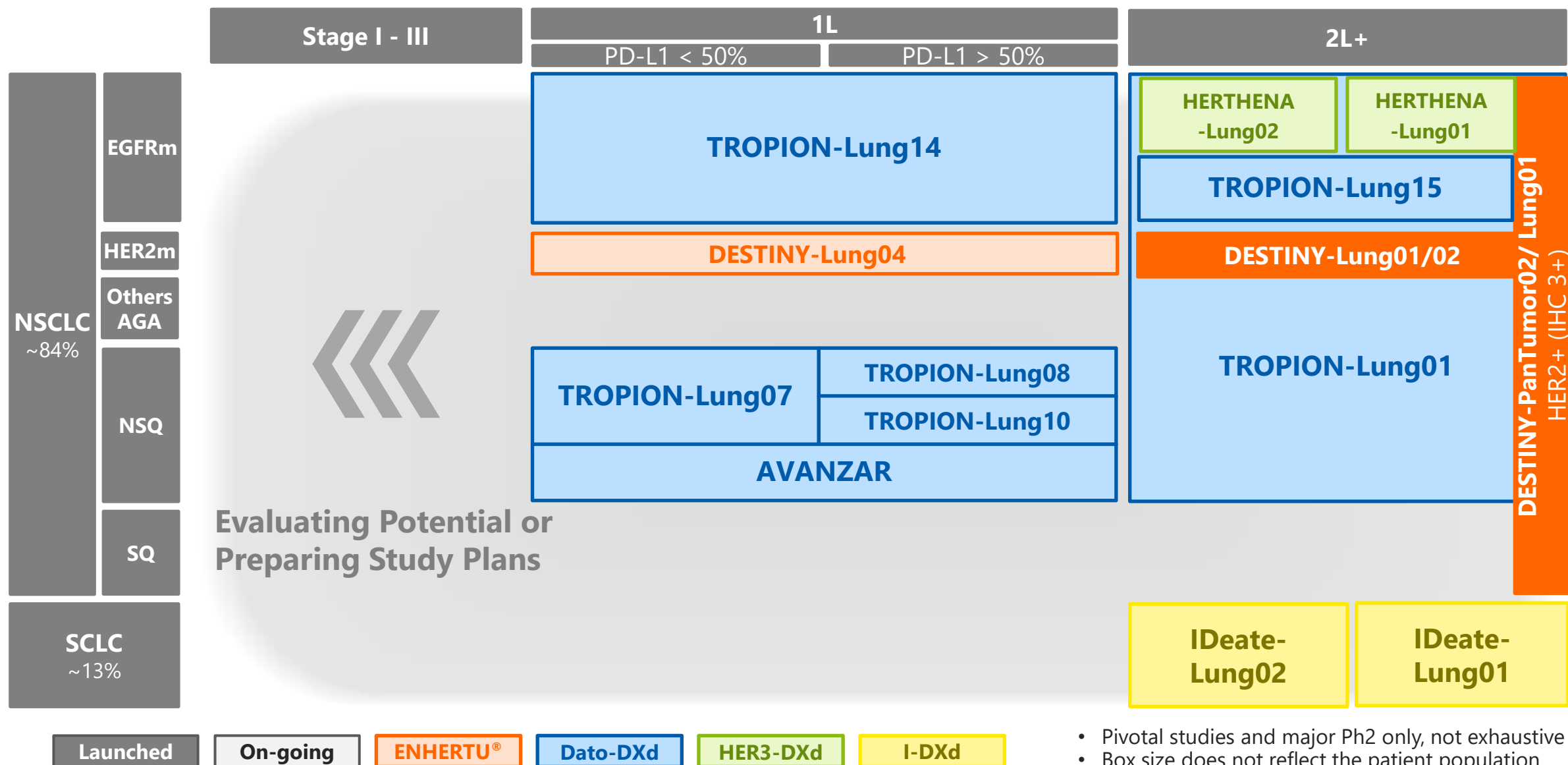
- DESTINY-PanTumor02 BTC cohort ORR: IHC 3+: 56.3% (n=16)
- Plan to start in FY2024 H1

* Based on the three Ph2 studies including DESTINY-PanTumor02, ENHERTU® was approved in US for tumor agnostic HER2 directed therapy for metastatic HER2 positive solid tumors in Apr 2024

** Rilvegostomig is a PD-1/TIGIT bispecific antibody in a clinical development by AstraZeneca

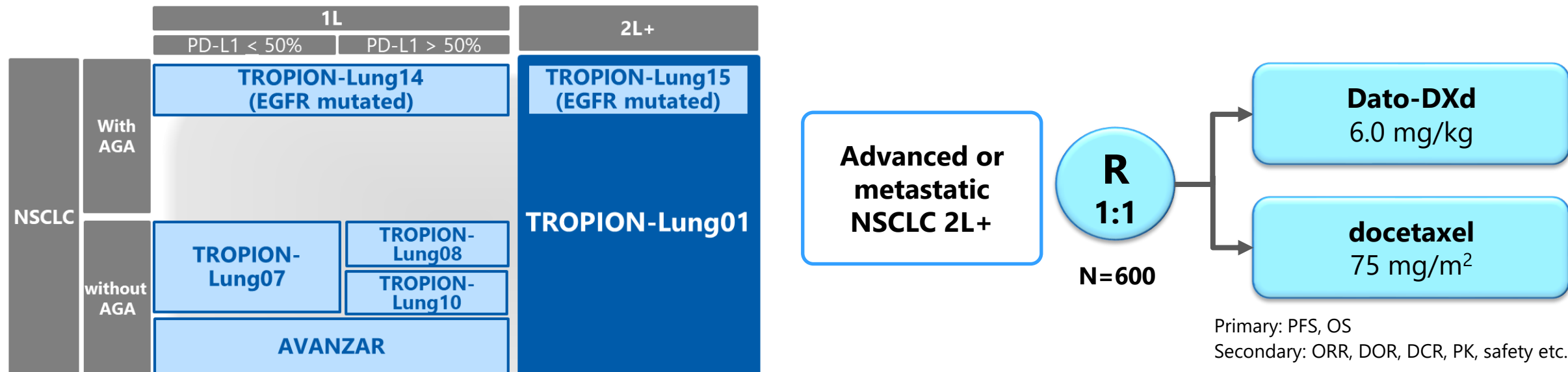
BTC: biliary tract cancer, DOR: duration of response, GBD: gallbladder cancer, IHC: immunohistochemistry, ITT: intent-to-treat, mBTC: metastatic biliary tract cancer, ORR: objective response rate, OS: overall survival, PD: progressive disease, PFS: progression free survival, q3w: every 3 weeks

Establish and expand DXd ADCs to address the broader spectrum of Lung Cancer



- Pivotal studies and major Ph2 only, not exhaustive
- Box size does not reflect the patient population
- Box indicates current potential target segment

Topline overall survival (OS) results were announced in May 2024



- Dual primary endpoint PFS BICR statistically significant improvement driven by NSQ NSCLC population (ESMO 2023)
- Clinically meaningful OS improvement in NSQ NSCLC compared to docetaxel
- No new safety concerns identified. No new ILD of any grades were adjudicated as drug related
- In process of sharing the OS data package with regulatory agencies
- PDUFA date in US: Dec 20th, 2024

A subgroup analysis of Ph1 Dato-DXd combination study with pembrolizumab w/ or w/o PBC presented at ASCO 2024

TROPION-Lung02 study

- 1L advanced or metastatic NSCLC without AGA
- Combination
 - ✓ Doublet: Dato-DXd + pembrolizumab
 - ✓ Triplet: Dato-DXd + pembrolizumab + PBC
- Study objectives
 - ✓ Primary: safety and tolerability
 - ✓ Secondary: efficacy, PK, and antidrug antibodies

Efficacy outcomes in 1L patients, overall and by PD-L1 status^{a,b}

	All 1L (n=96)		1L PD-L1 <1% (n=34)		1L PD-L1 1–49% (n=42)		1L PD-L1 ≥50% (n=20)	
	Doublet (n=42)	Triplet (n=54)	Doublet (n=18)	Triplet (n=16)	Doublet (n=19)	Triplet (n=23)	Doublet (n=5)	Triplet (n=15)
ORR, n (%)	22 (52)	30 (56)	8 (44)	5 (31)	9 (47)	17 (74)	5 (100)	8 (53)
[95% CI]	[36–68]	[41–69]	[22–69]	[11–59]	[24–71]	[52–90]	[48–100]	[27–79]
DCR, n (%)	37 (88)	48 (89)	16 (89)	15 (94)	16 (84)	20 (87)	5 (100)	13 (87)
[95% CI]	[74–96]	[77–96]	[65–99]	[70–100]	[60–97]	[66–97]	[48–100]	[60–98]
mDOR, mo	NE	12.9	NE	12.9	12.0	14.6	NE	18.1
[95% CI]	[9.7–NE]	[5.7–NE]	NE	[4.1–NE]	[4.2–NE]	[4.2–NE]	[5.5–NE]	[4.1–NE]
Patient segment	TROPION-Lung07						TROPION-Lung08	

^a Evaluated locally by tumor proportion score using immunohistochemistry (22C3 assay).

^b Responses with confirmed CR/PR.

Data cutoff: October 31, 2023

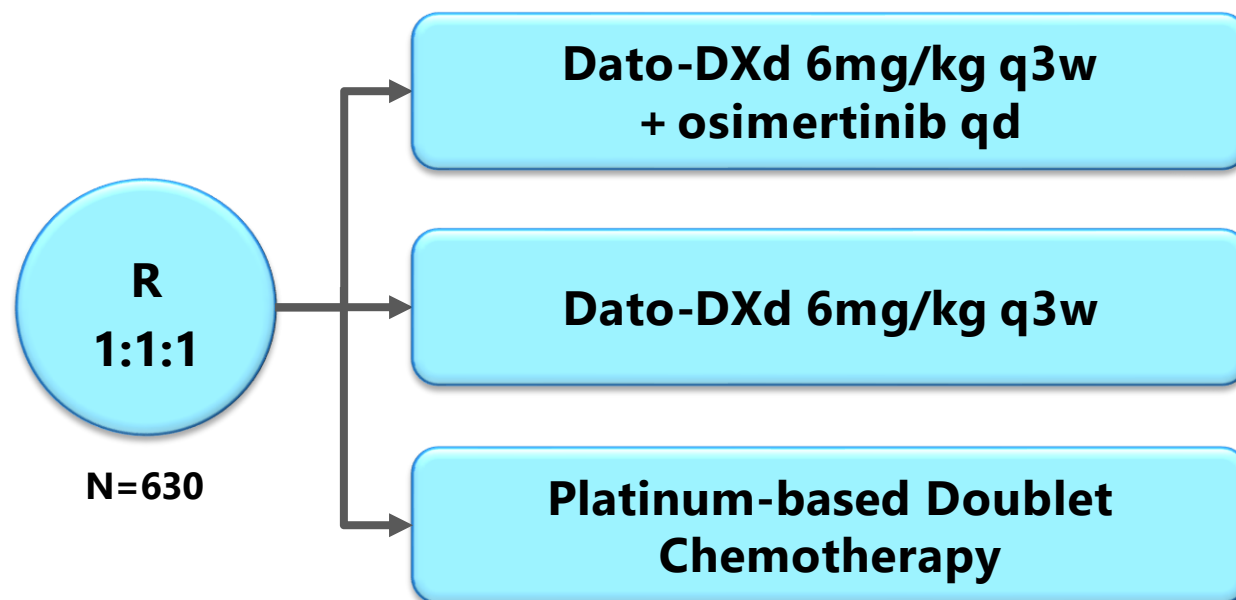
- Both doublet and triplet regimens showed durable antitumor activity across all levels of PD-L1 expression
- Tolerability of the combinations were consistent with their individual known profiles. No new safety signals observed.
- The data support continuous evaluation of Dato-DXd combinations in TROPION-Lung07 and TROPION-Lung08

New Ph3 study in 2L+ EGFR mutated NSCLC to evaluate Dato-DXd combination w/ or w/o osimertinib starts in FY2024 H1

TROPION-Lung15 study design

Key Eligibility

- Advanced or metastatic NSQ NSCLC who have progressed on prior osimertinib
- Less than or equal to 2 prior lines of EGFR TKI treatments
- Sensitizing EGFR mutations



Primary endpoint

- PFS

Secondary endpoint

- OS, ORR, DOR, Safety etc.

FDA issued **Complete Response Letter** for BLA based on HERTHENA-Lung01 in June 2024

Clinical studies of HER3-DXd in EGFR mutated NSCLC

Advanced/Metastatic

1L

2L

3L

**HERTHENA-
Lung02 Ph3**
(HER3-DXd mono vs
chemo)

**HERTHENA-
Lung01**
**registrational
Ph2**

osimertinib combination Ph1b

- Filing was accepted based on HERTHENA-Lung01 study data by the FDA in Dec 2023
- In June 2024, due to findings pertaining to an inspection of a third-party manufacturing facility, the FDA notified that they did not approve HER3-DXd by the PDUFA date, Jun 26th 2024
 - The CRL did not identify any issues with the efficacy or safety data submitted
 - Withdrawal and resubmission of the BLA is not required
- DS will work closely with the FDA and the manufacturer to address the feedback as quickly as possible
- Majority of regulatory submissions in countries and regions outside the US will be done with upcoming HERTHENA-Lung02 study data as originally planned (TLR: FY2024 H1)

Dato-DXd

- May 2024 : TROPION-Lung10 Ph3 combination study with rilvegostomig for PD-L1 \geq 50% NSCLC 1L started
- May 2024 : TROPION-Lung14 Ph3 combination study with osimertinib for EGFR mutated NSCLC 1L started

I-DXd

- May 2024 : IDeate-Pantumor02 Ph2 study for solid tumors 2L+ started

5DXd ADCs Update

Next Wave Update

WCLC/ESMO 2024

News Flow

Valemetostat (relapsed/refractory peripheral T-cell lymphoma [PTCL])

- Jun 2024: Approval in Japan

TARLIGE[®] (mirogabalin) (diabetic peripheral neuropathic pain [DPNP])

- Jun 2024: Approval in China

DAICHIRONA[®] (COVID-19 mRNA vaccine)

- Apr 2024: Filing accepted in Japan for omicron strain booster vaccination in children aged 5 to 11 years
- May 2024: Revision of the package insert allowing for a single administration to patients aged 12 years or older.*
- Jun 2024: Filing accepted in Japan as a vaccine against the strain selected by the Ministry of Health, Labour and Welfare for this fiscal year

* Minor changes based on the notification issued by the Ministry of Health, Labour and Welfare.

5DXd ADCs Update

Next Wave Update

WCLC/ESMO 2024

News Flow

WCLC/ESMO 2024 Highlight

Speakers



Ken Takeshita
Head of Global R&D



Mark Rutstein
Head of Global Oncology
Clinical Development

Date & time Format

Tuesday, September 17th, 2024
8:00-9:30am (EDT)
9:00-10:30pm (JST)

Virtual (Zoom)

Content will be delivered
on-demand after the meeting

5DXd ADCs Update

Next Wave Update

WCLC/ESMO 2024

News Flow

FY2024 News Flow

As of Jul 2024

Planned major data disclosures

WCLC (Sep 7 -10, 2024)

ENHERTU® **DESTINY-Lung03: HER2+ NSCLC, 1L, Ph1b**
• First data release

I-DXd **IDeate-Lung01: SCLC, 2L+, Ph2**
• Interim data

ESMO (Sep 13-17, 2024)

ENHERTU® **DESTINY-Gastric03: HER2+ GC, GEJC and esophageal cancer, 2L+/1L, Ph1b/2**
• Dose expansion part first data release

Dato-DXd **TROPION-PanTumor03: solid tumors, 2L+, Ph2**
• Endometrial cancer and ovarian cancer, first data release

DS-9606 **Solid tumors, Ph1**
• First data release

Regulatory decisions

ENHERTU® DESTINY-Gastric06: HER2+ GC, 3L+
• CN: FY2024 H1
DESTINY-Lung05: HER2 mutant NSCLC, 2L+
• CN: FY2024 H2

Dato-DXd TROPION-Lung01: NSCLC, 2L+
• US : FY2024 H2
TROPION-Breast01: HR+ and HER2 low or negative BC, 2/3L
• JP/US: FY2024 H2

DAICHIRONA® **COVID-19 mRNA vaccine (mutant strain), Children aged 5 to 11 years**
• JP: FY2024 H2

Planned regulatory filing※

ENHERTU® **DESTINY-Breast06: HR+/HER2 low BC, chemo naïve**
• JP/EU: FY2024 H1
• US: FY2024 H2

Key data readouts

ENHERTU® DESTINY-Breast11* : HER2+ BC, neoadjuvant, Ph3
• FY2024 H2

Dato-DXd TROPION-Breast02* :
PD-1/PD-L1 ineligible TNBC, 1L, Ph3
• FY2024 H2

HER3-DXd HERTHENA-Lung02* :
EGFR mutated NSCLC, 2L, Ph3
• FY2024 H1

Bold: update from FY2023 Q4

BC: breast cancer, ESMO: European Society for Medical Oncology, GC: gastric cancer, GEJC: gastroesophageal junction cancer, HR: hormone receptor, NSCLC: non-small cell lung cancer, SCLC: small cell lung cancer, TNBC: triple negative breast cancer, WCLC: World Conference on Lung Cancer

Timeline indicated is based on the current forecast and subject to change

※ Timeline for "Planned regulatory filing" indicates expected filing acceptance date

*: event-driven study

Agenda

① FY2024 Q1 Financial Results

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③ R&D Update

④ **Appendix**



Revenue: Business Units (incl. Forex Impact)

(Bn JPY)

	FY2023 Q1 Results	FY2024 Q1 Results	YoY
Japan Business	119.0	117.7	-1.3
Daiichi Sankyo Healthcare	17.1	20.0	+2.9
Oncolgy Business	70.6	106.4	+35.8
Enhertu	69.4	104.1	+34.7
Turalio	1.2	1.5	+0.3
Vanflyta	-	0.9	+0.9
American Regent	50.7	55.9	+5.3
Injectafer	13.2	15.8	+2.6
Venofer	15.8	16.3	+0.6
GE injectables	18.3	20.6	+2.3
EU Specialty Business	41.5	59.2	+17.7
Lixiana	32.3	45.4	+13.1
Nilemdo/Nustendi	3.0	7.8	+4.8
Olmesartan	4.7	5.3	+0.5
ASCA (Asia, South and Central America) Business	39.5	48.7	+9.2

Currency	USD/JPY	137.37	155.89	+18.52
Rate	EUR/JPY	149.46	167.88	+18.42

Revenue: Major Products in Japan

(Bn JPY)

		FY2023 Q1 Results	FY2024 Q1 Results	YoY
Lixiana	anticoagulant	27.9	34.9	+7.0
Tarlige	pain treatment	11.7	14.2	+2.5
Pralia	Treatment for osteoporosis/ inhibitor of the progression of bone erosion associated with rheumatoid arthritis	10.7	11.1	+0.4
Vimpat	anti-epileptic agent	6.4	8.1	+1.6
Enhertu	anti-cancer agent (HER2-directed antibody drug conjugate)	4.4	7.8	+3.4
Ranmark	treatment for bone complications caused by bone metastases from tumors	5.0	5.4	+0.4
Efient	antiplatelet agent	6.1	8.1	+1.9
Canalia	type 2 diabetes mellitus treatment	4.1	4.3	+0.2
Loxonin	anti-inflammatory analgesic	4.0	3.5	-0.5
Inavir	anti-influenza treatment	0.1	0.2	+0.0
Minnebro	antihypertensive agent	2.1	2.6	+0.5

5DXd ADCs Revenue (incl. Forex Impact)

(Unit: Bn JPY)

	FY2024 Q1 Results	YoY	FY2024 Forecast	YoY
ENHERTU	134.8	+48.2	585.4	+136.2
Product Sales	129.6	+47.9	508.4	+112.4
Upfront and Milestone Payments	5.2	+0.4	77.0	+23.7
Dato-DXd	1.6	-	17.6	+11.2
Product Sales	-	-	5.6	+5.6
Upfront and Milestone Payments	1.6	-	12.0	+5.6
HER3-DXd	2.0	+2.0	23.1	+19.6
Product Sales	-	-	4.2	+4.2
Upfront and Milestone Payments	2.0	+2.0	18.9	+15.4
I-DXd	3.7	+3.7	14.7	+8.1
Upfront and Milestone Payments	3.7	+3.7	14.7	+8.1
DS-6000 (R-DXd)	1.5	+1.5	6.2	+3.4
Upfront and Milestone Payments	1.5	+1.5	6.2	+3.4
5DXd ADCs Total	143.6	+55.4	646.9	+178.5

5DXd ADCs Upfront and Milestone Payments

(Unit: Bn JPY)

Asset	Item	FY2024 Q1 Results	YoY	FY2024 Forecast	YoY	Total Consideration
ENHERTU	Upfront Payment	2.6	+0.1	10.2	+0.1	149.0
	Regulatory Milestones	2.4	+0.3	9.4	-2.9	137.7
	Quid Related Payment	0.3	0	1.2	0	17.2
	Sales Milestone	-	-	56.2	+26.6	42.8
Dato-DXd	Upfront Payment	1.6	-	6.4	-	115.9
	Regulatory Milestones	-	-	5.6	+5.6	-
AZ Alliance Total		6.8	+0.4	89.0	+29.3	462.6
HER3-DXd	Upfront Payment	2.0	+2.0	18.9	+15.4	112.7
I-DXd	Upfront Payment	3.7	+3.7	14.7	+8.1	225.4
DS-6000 (R-DXd)	Upfront Payment	1.5	+1.5	6.2	+3.4	112.7
US Merck Alliance Total		7.2	+7.2	39.8	+26.9	450.8

Major R&D Milestones (ENHERTU®)

As of Jul 2024

Project	Target indication [phase, study name]	FY2024		FY2025
		H1	H2	
ENHERTU®	• HER2+, adjuvant* [Ph3, DESTINY-Breast05]			• TLR anticipated
	• HR+/HER2 low, chemo naive [Ph3, DESTINY-Breast06]	• Planned regulatory filing** (JP/EU)	• Planned regulatory filing** (US)	
	• HER2+, 1L [Ph3, DESTINY-Breast09]			• TLR anticipated
	• HER2+, neoadjuvant [Ph3, DESTINY-Breast11]		• TLR anticipated	
	• HER2+, 2L [Ph3, DESTINY-Gastric04]			• TLR anticipated
	• HER2+, 3L+ [Ph2, DESTINY-Gastric06]	• Regulatory decision anticipated (CN)		
	• HER2 exon 19 or exon 20 mutation, 2L+ [Ph2, DESTINY-Lung05]		• Regulatory decision anticipated (CN)	
	• HER2 exon 19 or exon 20 mutation, 1L [Ph3, DESTINY-Lung04]			• TLR anticipated
	• HER2 expressing, 1L [Ph3, DESTINY-BTC01]	• Study start planned		
	• HER2 expressing tumors [Ph2, DESTINY-PanTumor02]	• Approved (US)		

Bold: update from FY2023 Q4

BC: breast cancer, BTC: biliary tract cancer, GC: gastric cancer, HR: hormone receptor, NSCLC: non-small cell lung cancer, TLR: Top Line Results

*: Adjuvant therapy for HER2 positive breast cancer patients with residual invasive disease following neoadjuvant therapy

** Timeline for "Planned regulatory filing" indicates expected filing acceptance date

Timeline indicated is based on the current forecast and subject to change

Major R&D Milestones (Dato-DXd)

As of Jul 2024

Project	Target indication [phase, study name]	FY2024		FY2025
		H1	H2	
Dato-DXd	• 2L+, non-squamous , [Ph3, TROPION-Lung01]		• Regulatory decision anticipated (US)	
	• 1L, non-squamous, PD-L1 high, rilvegostomig combo [Ph3, TROPION-Lung10]	• Study started		
	• 1L, EGFR mutated, osimertinib combo [Ph3, TROPION-Lung14]	• Study started		
	• 2L+, EGFR mutated, osimertinib combo [Ph3, TROPION-Lung15]	• Study start planned		
	• 1L, w/o AGA, durvalumab combo [Ph3, AVANZAR]			• TLR anticipated (CY2025 H2)
	• HR+ and HER2 low or negative, 2/3L [Ph3, TROPION-Breast01]		• Regulatory decision anticipated (JP/US)	• Regulatory decision anticipated (EU)
	• TNBC, PD-1/PD-L1 ineligible, 1L [Ph3, TROPION-Breast02]		• TLR anticipated	

Bold: update from FY2023 Q4

AGA: actionable genomic alterations, BC: breast cancer, HR: hormone receptor, NSCLC: non-small cell lung cancer, TLR: top line results, TNBC: triple-negative breast cancer

Timeline indicated is based on the current forecast and subject to change

Major R&D Milestones (HER3-DXd, I-DXd, DS-6000)

As of Jul 2024

Project		Target indication [phase, study name]	FY2024		FY2025
			H1	H2	
HER3-DXd	NSCLC	• EGFR mutated, 3L [Ph2, HERTHENA-Lung01]	• CRL received (US)		
		• EGFR mutated, 2L [Ph3, HERTHENA-Lung02]	• TLR anticipated		
I-DXd	SCLC	• 2L+ [Dose optimization, Ph2, IDeate-Lung01]		• TLR anticipated	
		• 2L [Ph3, IDeate-Lung02]	• Study start planned		
		• 1L [Ph1b/2, IDeate-Lung03]	• Study start planned		
	Other tumors	• Endometrial cancer, SCCHN, etc., 2L+ [Ph2, IDeate-Pantumor02]	• Study started		
DS-6000 (R-DXd)	OVC	• Platinum resistant, 2L+ [Ph2/3, REJOICE-Ovarian01]	• Study started		

Bold: update from FY2023 Q4

CRL: complete response letter, NSCLC: non-small cell lung cancer, OVC: ovarian cancer, SCCHN: squamous cell carcinoma of the head and neck, SCLC: small cell lung cancer, TLR: top line results
Timeline indicated is based on the current forecast and subject to change

Major R&D Milestones (Next Wave)

As of Jul 2024

Project	Target indication [phase, study name]	FY2024		FY2025
		H1	H2	
valemetostat	• r/r PTCL [Registrational Ph2, VALENTINE-PTCL01]	• Approval (JP)		
mirogabalin	• DPNP	• Approved (CN)		
DAICHIRONA®	• COVID-19 mRNA vaccine (mutant strain), Children aged 5 to 11 years [Ph2/3]	• Filing accepted (JP)	• Regulatory decision anticipated (JP)	
	• COVID-19 mRNA vaccine (mutant strain), single dose, aged 12 years and over [Ph3]	• TLR obtained ※		
MMR vaccine (VN-0102)	• mixed measles-mumps-rubella vaccine [Ph3]	• Filing accepted (JP)		

Bold: update from FY2023 Q4

DPNP: diabetic peripheral neuropathic pain, PTCL: peripheral T cell lymphoma, r/r: relapsed/refractory, TLR: top line results

※ The package insert has been revised based on the TLR and a notification issued by the Ministry of Health, Labour and Welfare.
Timeline indicated is based on the current forecast and subject to change

Major R&D Pipeline: 5DXd ADCs

As of Jul 2024



Phase 1		Phase 2	Phase 3	
(US/EU/Asia) HER2+ BC 2L+/1L DESTINY-Breast07	(JP/US/EU/Asia) NSCLC (w/o AGA, pembrolizumab combo) TROPION-Lung02	(CN) HER2 expressing solid tumors DESTINY-PanTumor03	(JP/US/EU/Asia) HER2+ BC adjuvant* ¹ DESTINY-Breast05	(JP/US/EU/Asia) PD-L1 high non-squamous NSCLC (w/o AGA, rilvegostomig combo) 1L TROPION-Lung10
(US/EU/Asia) HER2 low BC Chemo naïve/post chemo DESTINY-Breast08	(JP/US/EU) NSCLC (w/o AGA, durvalumab, rilvegostomig, volrustomig and sabestomig combo) TROPION-Lung04	(JP/US/EU/Asia) solid tumors TROPION-PanTumor03	(JP/US/EU/Asia) HER2 low BC chemo naïve DESTINY-Breast06	(JP/US/EU/Asia) EGFR mutated NSCLC (osimertinib combo) 1L TROPION-Lung14
(JP/US/EU/Asia) HER2+ GC combo, 2L+/1L DESTINY-Gastric03	(US/EU/Asia) TNBC (durvalumab combo) BEGONIA	(JP/US/EU/Asia) EGFR mutated NSCLC (osimertinib combo) 2L ORCHARD	(JP/US/EU/Asia) HER2+ BC 1L DESTINY-Breast09	(JP/US/EU/Asia) in prep EGFR mutated NSCLC (osimertinib combo) 2L TROPION-Lung15
(US/EU/Asia) HER2+ NSCLC (durvalumab, volrustomig and rilvegostomig combo) 1L DESTINY-Lung03	(JP/US/EU/Asia) solid tumors (saruparib combo) PETRA	(US/EU/Asia) resectable early-stage NSCLC (durvalumab combo) neoadjuvant NeoCOAST-2	(JP/US/EU/Asia) HER2+ BC neoadjuvant DESTINY-Breast11	(JP/US/EU/Asia) NSCLC (w/o AGA, durvalumab combo) 1L AVANZAR
(US/EU) BC, NSCLC (pembrolizumab combo)	(JP/US/EU/Asia) NSCLC	(JP/US/EU/Asia) solid tumors HERTHENA-PanTumor01	(JP/EU/Asia) HER2+ GC 2L DESTINY-Gastric04	(JP/US/EU/Asia) TNBC (PD-1/PD-L1 inhibitor ineligible) 1L TROPION-Breast02
(US/EU/Asia) TNBC (durvalumab combo) BEGONIA	(JP/US/Asia) EGFR mutated NSCLC, 1/2L (osimertinib combo)	(JP/US/EU/Asia) ES-SCLC 2L+ IDeate-Lung01	(JP/US/EU/Asia) NSCLC (w/ HER2 exon 19 or exon 20 mutation) 1L DESTINY-Lung04	(JP/US/EU/Asia) TNBC adjuvant* ¹ (mono or durvalumab combo) TROPION-Breast03
(US/EU/Asia) solid tumors (saruparib combo) PETRA	(JP/US) ESCC, CRPC, squamous NSCLC, SCLC, etc. IDeate-Pantumor01	(JP/US/EU/Asia) solid tumors 2L+ IDeate-Pantumor02	(JP/US/EU/Asia) in prep HER2 expressing BTC 1L DESTINY-BTC01	(JP/US/EU/Asia) TNBC neoadjuvant and adjuvant (durvalumab combo) TROPION-Breast04
(JP/US) solid tumors TROPION-PanTumor01	(JP/US/EU/Asia) in prep ES-SCLC, 1L IDeate-Lung03	(JP/US/EU/Asia) platinum-resistant ovarian cancer 2L+ REJOICE-Ovarian01	(JP/US/EU/Asia) non-squamous NSCLC (w/o AGA, pembrolizumab combo) 1L TROPION-Lung07	(JP/US/EU/Asia) PD-L1 positive TNBC 1L (mono or durvalumab combo) TROPION-Breast05
(CN) NSCLC, TNBC TROPION-PanTumor02	(JP/US) renal cell carcinoma, ovarian cancer		(JP/US/EU/Asia) NSCLC (w/o AGA, pembrolizumab combo) 1L TROPION-Lung08	(JP/US/EU/Asia) EGFR mutated NSCLC 2L HERTHENA-Lung02

Regulatory phase

(CN) HER2+ GC 3L DESTINY-Gastric06
(CN) HER2 mutant NSCLC 2L+ DESTINY-Lung05
(US/EU) NSCLC 2L+ TROPION-Lung01
(JP/US/EU/CN) BC* ² 2/3L TROPION-Breast01
(US) EGFR mutated NSCLC 3L HERTHENA-Lung01

 ENHERTU® (T-DXd)
  Dato-DXd
  HER3-DXd
  I-DXd
  DS-6000 (R-DXd)

 Project in oncology that is planned to be submitted for approval in some countries/regions based on the results of phase 2 trials

 Breakthrough Designation (US)
  Orphan drug designation (designated in at least one country/region among JP, US and EU)

* 1 Adjuvant therapy for patients with residual invasive disease following neoadjuvant therapy
 * 2 HR+, HER2 low or negative BC

AGA: actionable genomic alterations, BTC: biliary tract cancer, BC: breast cancer, CRC: colorectal cancer, CRPC: castration-resistant prostate cancer, ESCC: esophageal squamous cell carcinoma, ES-SCLC: extensive stage-small cell lung cancer, GC: gastric cancer, NSCLC: non-small cell lung cancer, SCCHN: squamous cell carcinoma of head and neck, SCLC: small cell lung cancer, TNBC: triple negative breast cancer

Major R&D Pipeline: Next Wave



As of Jul 2024

Phase 1		Phase 2	Phase 3	Regulatory phase
DS-1055 (JP/US) Anti-GARP antibody Solid tumors	DS-7011 (JP/US/EU/Asia) Anti-TLR7 antibody Systemic lupus erythematosus	Valemetostat (EU) EZH1/2 inhibitor BCL	Pexidartinib (JP/Asia) CSF-1/KIT/FLT3 inhibitor Tenosynovial giant cell tumor	DS-5670 (JP) COVID-19 mRNA vaccine (mutant strain), COVID-19 (booster vaccination, 5 to 11 aged children)
DS-9606 (US/EU) Target undisclosed ADC Solid tumors	DS-2325 (EU) KLK5 inhibitor Netherton syndrome	DS-1001 (JP) Mutant IDH1 inhibitor Glioma	Esaxerenone (JP) MR blocker Diabetic nephropathy	VN-0102/JVC-001 (JP) Mixed measles-mumps-rubella vaccine
DS-1103 Anti-SIRPα antibody HER2 expressing or mutant solid tumors, HER2 low BC (ENHERTU® combo)		DS-1211 (US/EU) TNAP inhibitor Pseudoxanthoma elasticum	DS-5670 (JP) COVID-19 mRNA vaccine (mutant strain), COVID-19 (single dose, 12 years old and over)	
DS-3939 Anti-TA-MUC1 ADC Solid tumors		VN-0200 (JP) RS virus vaccine RS virus infection		
DS-1471 Anti-CD147 antibody Solid tumors				
Valemetostat EZH1/2 inhibitor, HER2+ GC, HER2 low BC (ENHERTU® combo) and non-squamous NSCLC (Dato-DXd combo)				

- Oncology
- Specialty medicine
- Vaccine

- Project in oncology that is planned to be submitted for approval in some countries/regions based on the results of phase 2 trials
- SAKIGAKE Designation (JP)
- Orphan drug designation (designated in at least one country/region among JP, US and EU)
- Rare Pediatric Disease Designation (US)
- Fast Track Designation (US)

BC: breast cancer, BCL: B cell lymphoma, GC: gastric cancer

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