Passion for Innovation.
Compassion for Patients.™

Daiichi-Sankyo

Global Pharma Innovator with Competitive Advantage in Oncology

DAIICHI SANKYO CO., LTD.

Sunao Manabe
President and CEO

January 13, 2021

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.

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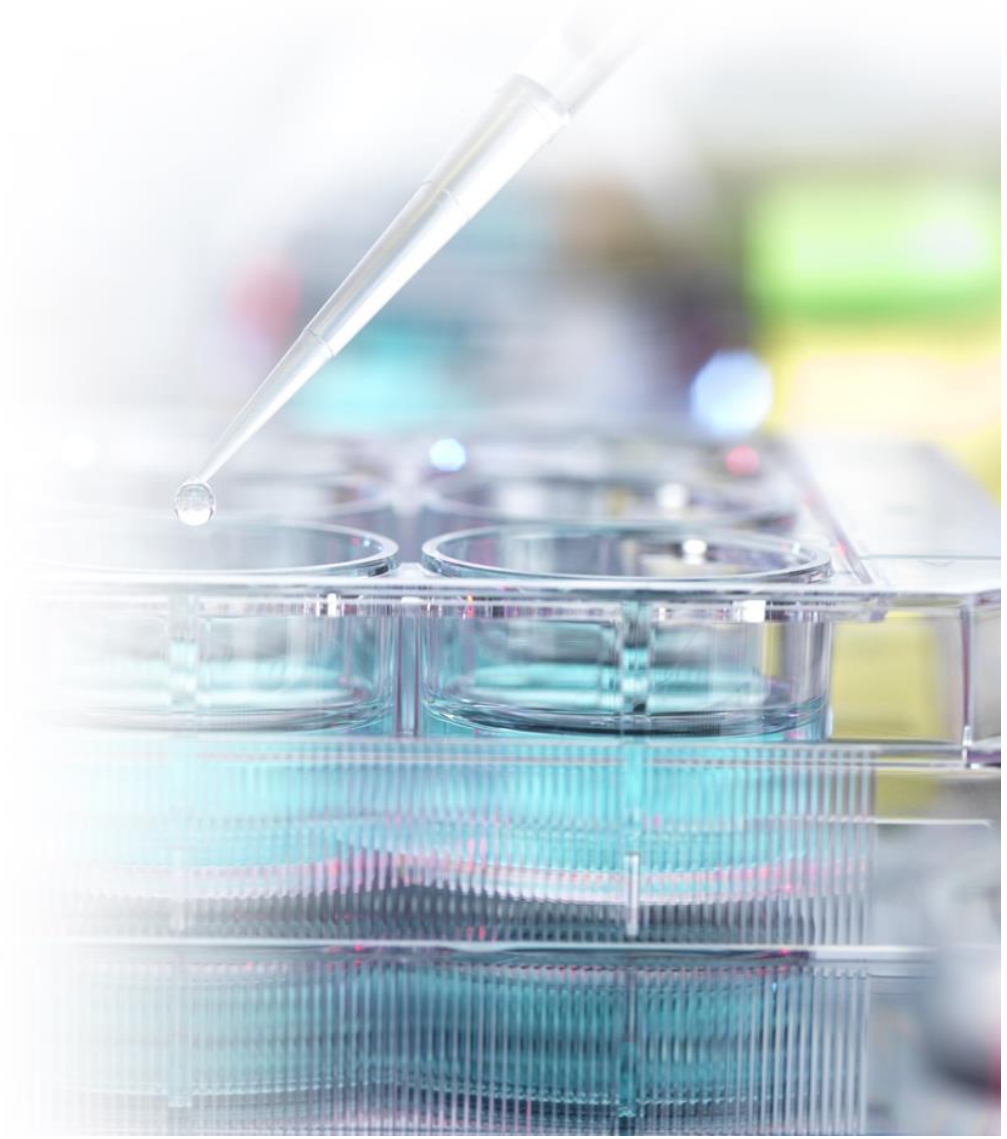
Agenda

1. Overview of Daiichi Sankyo
2. Growth Strategy
3. Maximizing Shareholder Value
4. Appendix



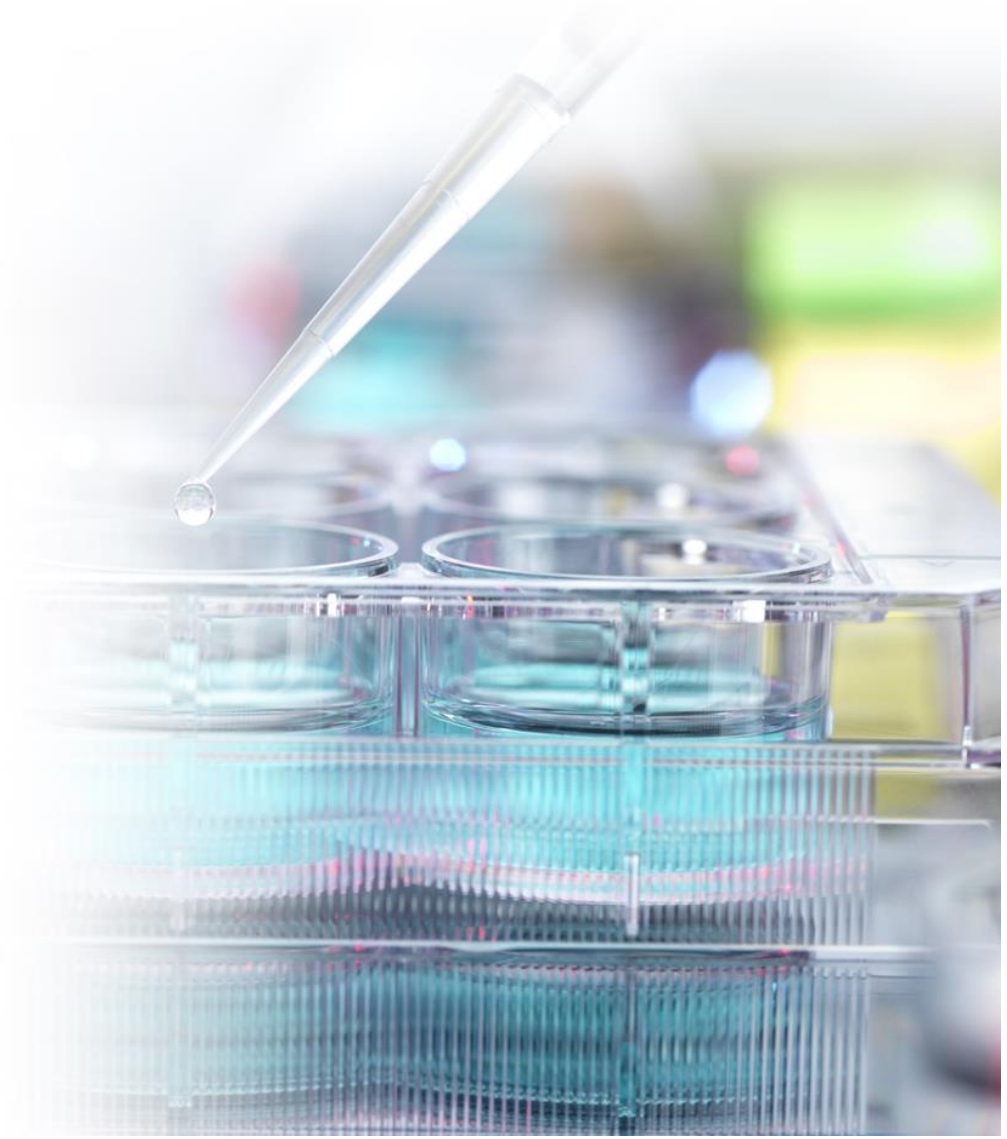
Agenda

1 **Overview of Daiichi Sankyo**

2 **Growth Strategy**

3 **Maximizing Shareholder Value**

4 **Appendix**

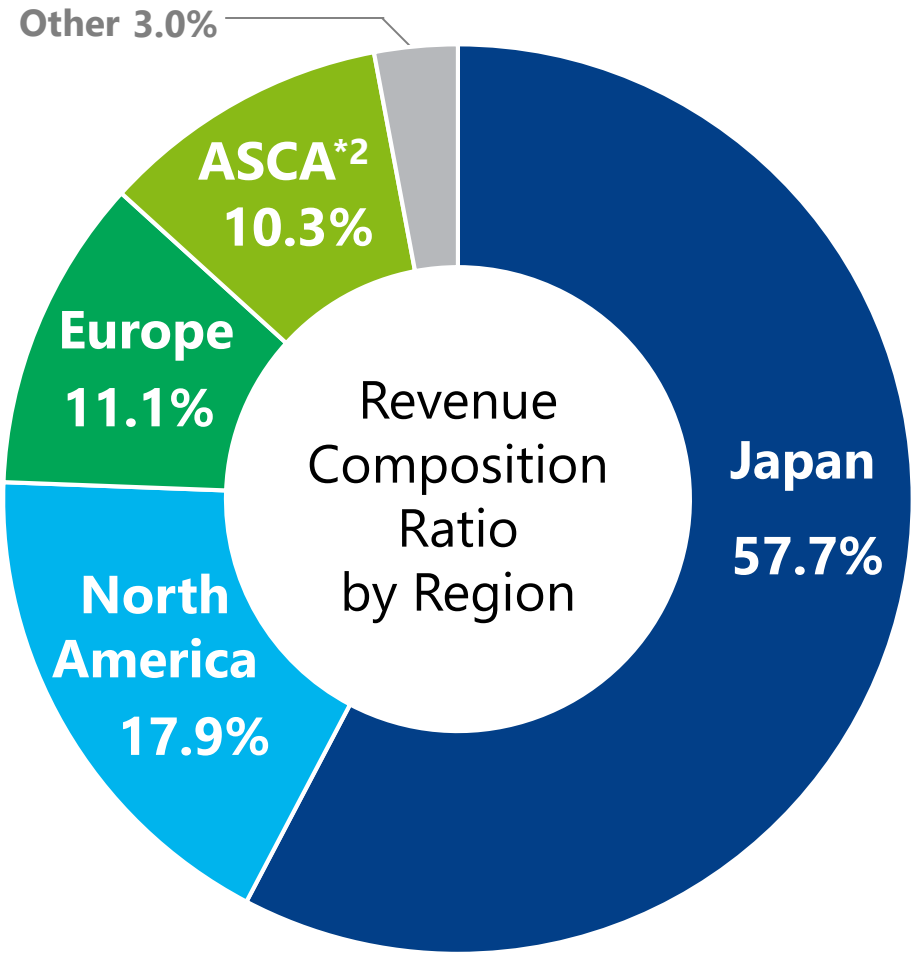


Financial Summary

Overview of FY2020 consolidated P&L

(Bn JPY)

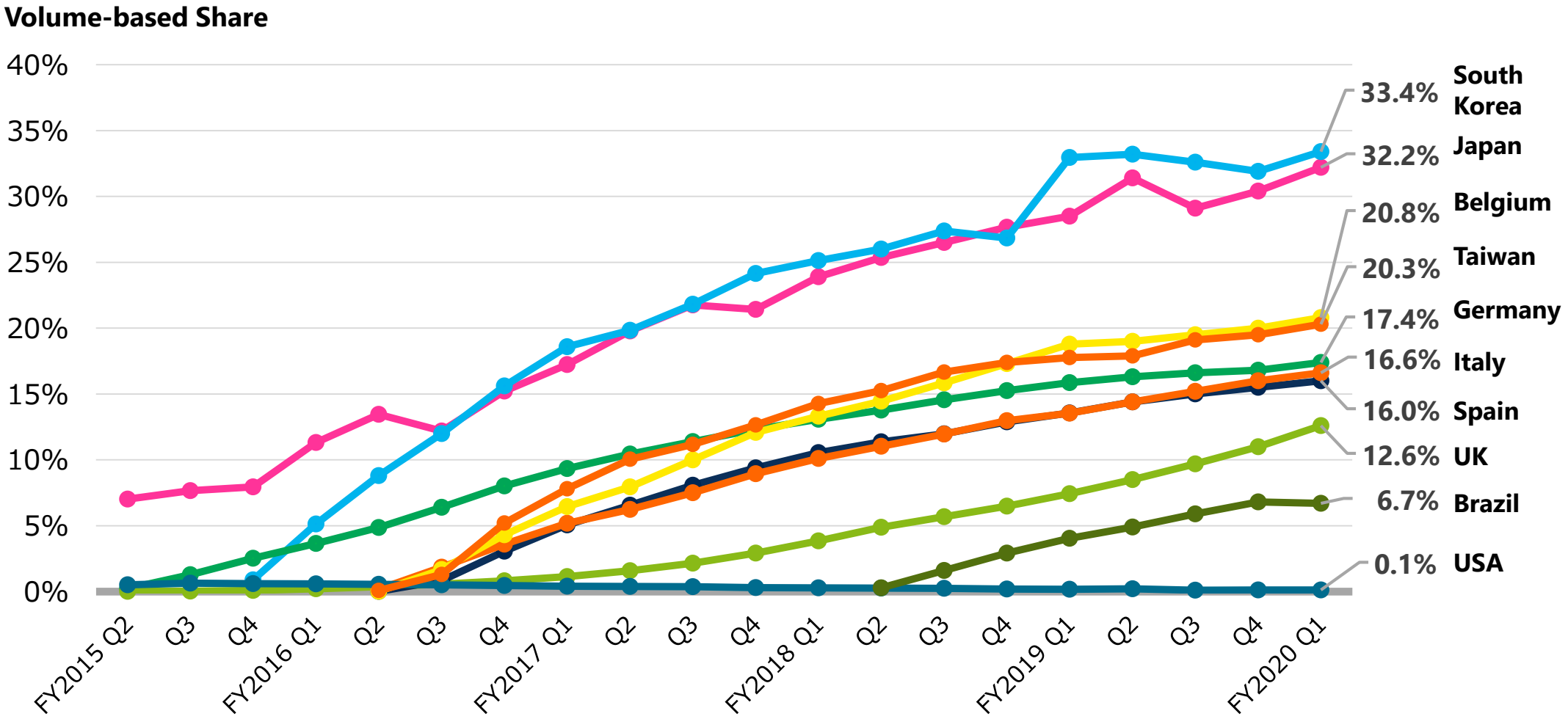
	FY2020 Forecast*1	
		to revenue
Revenue	**960.0**	**100.0%**
Cost of sales	**340.0**	**35.4%**
SG&A expenses	**317.0**	**33.0%**
R&D expenses	**243.0**	**25.3%**
Operating profit	**60.0**	**6.3%**
Profit attributable to owners of the Company	**53.0**	**5.5%**



*1 Forecast as of Oct. 30, 2020
*2 Asia, South & Central America

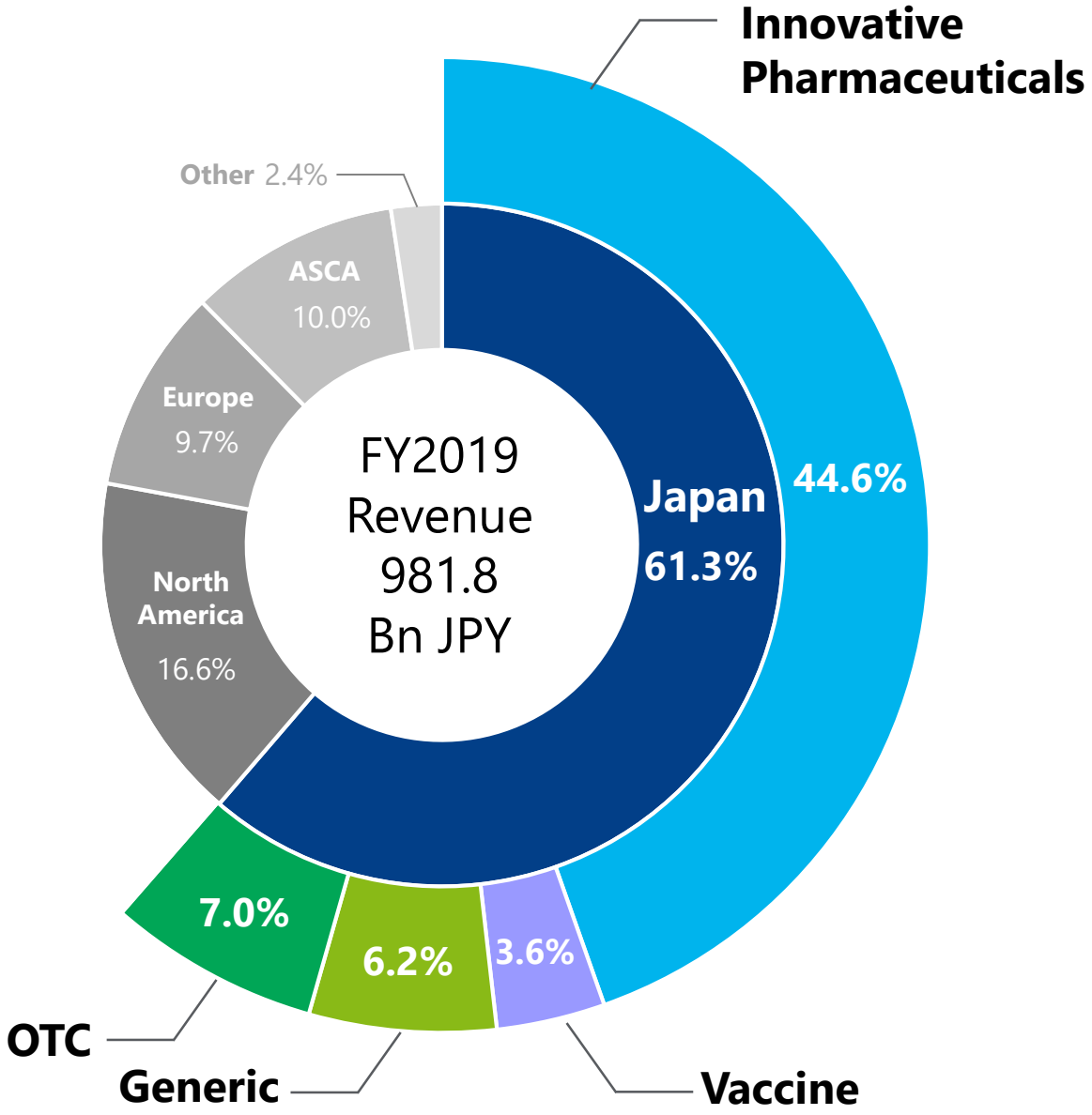
Edoxaban Global Growth

- **Steady growth across markets**
- **Global revenue (FY2020 forecast*): 160.9 Bn JPY**



*Forecast as of Oct. 30, 2020

Japan Business: No.1 market share (FY2016-FY2019)



Business Model for Sustainable Growth

Continuous launch & growth of DS original products

Lixiana®, Tarlige®, ENHERTU®, etc.

Market share No. 1

Growth of Japanese business

No.1 sales rep evaluation

High external evaluation for commercial capabilities

Acquire competitive new products

PRALIA®/Ranmark®*, VIMPAT®, etc.

Growth of acquired products

Top class commercial capabilities in quantity and quality

*US product name: Prolia®/XGEVA®

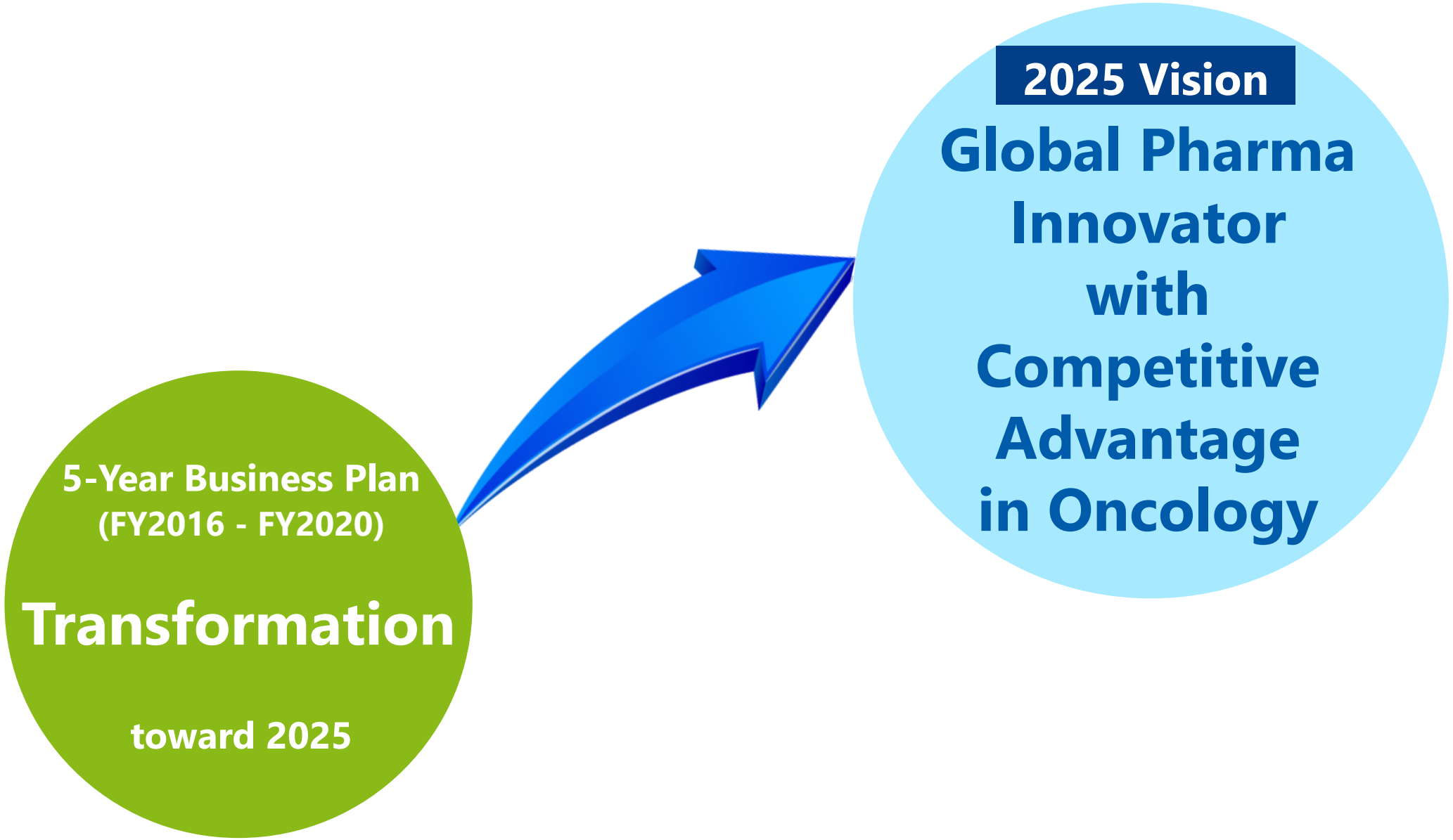
1 Overview of Daiichi Sankyo

2 **Growth Strategy**

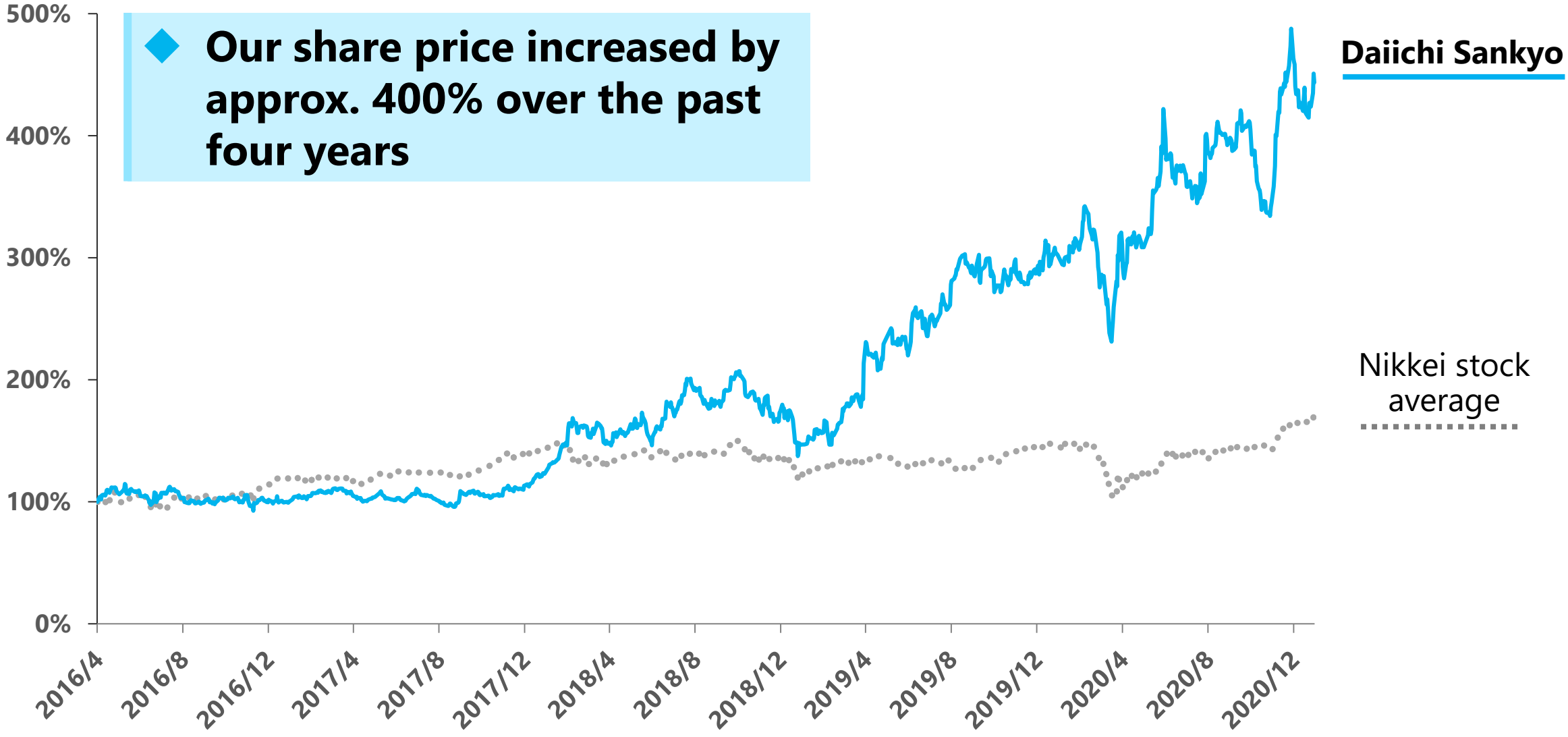
3 Maximizing Shareholder Value

4 Appendix

Current 5-Year Business Plan and 2025 Vision



Share Price During the Current 5-Year Business Plan

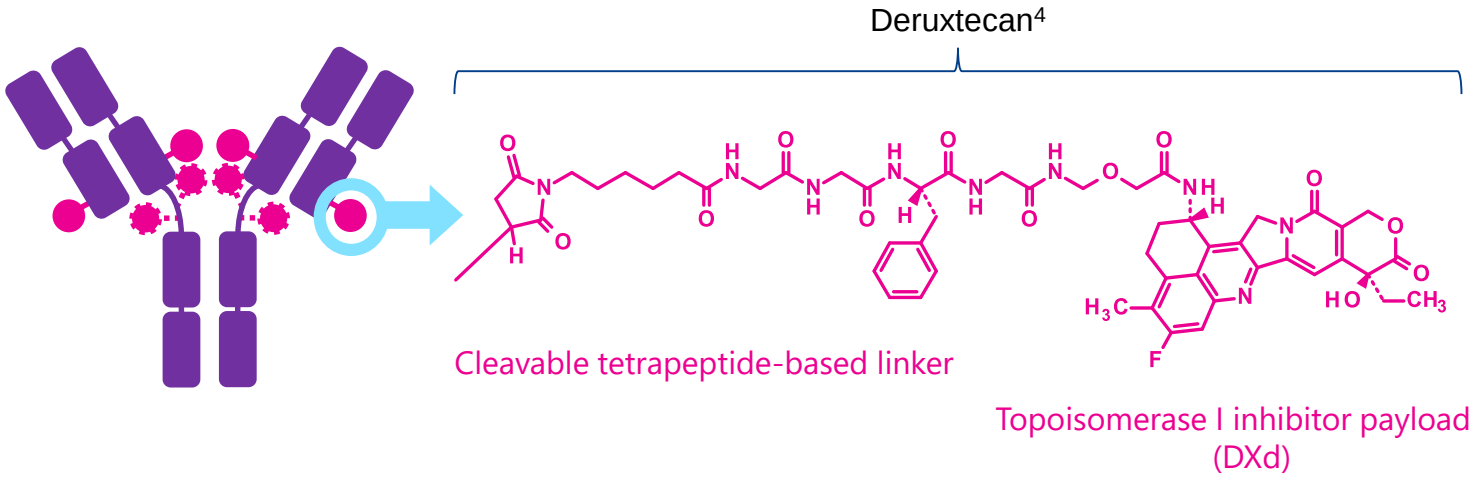


Our Proprietary Antibody Drug Conjugates (ADC)

DXd ADCs are composed of 3 components[1,2]:

- A monoclonal antibody attached to:
- A topoisomerase I inhibitor payload, an exatecan derivative, via
- A tetrapeptide-based cleavable linker

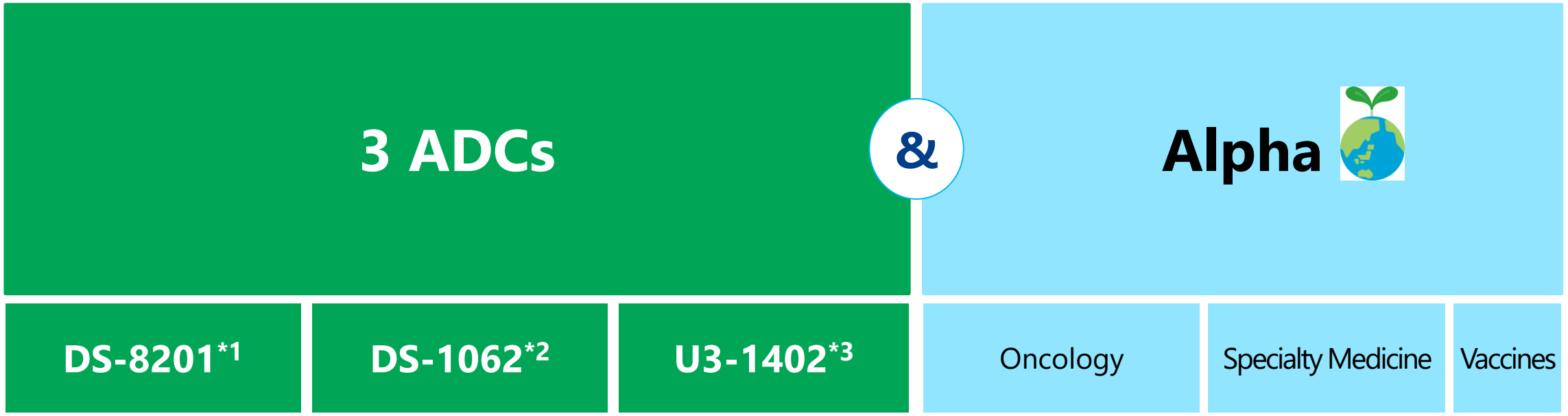
DXd ADC Technology[b]



- Payload mechanism of action: topoisomerase I inhibitor [a,1-5]
- High potency of payload [a,2-5]
- Optimized drug to antibody ratio [a,c,1-4]
- Payload with short systemic half-life [a,c,2,3]
- Stable linker-payload [a,2,3,5]
- Tumor-selective cleavable linker [a,2-6]
- Bystander antitumor effect [a,2,7]

1 Okajima D, et al. Poster presented at: AACR-NCI-EORTC International Conference; October 26-30, 2019; Boston, MA [abstract C026].; **2** Nakada T, et al. Chem Pharm Bull (Tokyo). 2019;67(3):173-185. ; **3** Ogitani Y, et al. Clin Cancer Res. 2016;22(20):5097-5108.; **4** Hashimoto Y, et al. Clin Cancer Res. 2019;25:7151-7161. ; **5** Koganemaru S, et al. Mol Cancer Ther. 2019;18:2043-2050.; **6** Haratani K, et al. J Clin Invest. 2020;130(1):374-388.; **7** Ogitani Y, et al. Cancer Sci. 2016;107(7):1039-1046.
a The clinical relevance of these features is under investigation.; **b** Image is for illustrative purposes only; actual drug to antibody ratio and drug positions may vary.; **c** Based on animal data.

Our R&D strategy: 3 and Alpha



◆ **3 and Alpha strategy**

- **Allocate financial/human resources with priority to maximize the 3 ADCs**
- **Focus on activities with potential to change the current Standards of Care for Alpha**

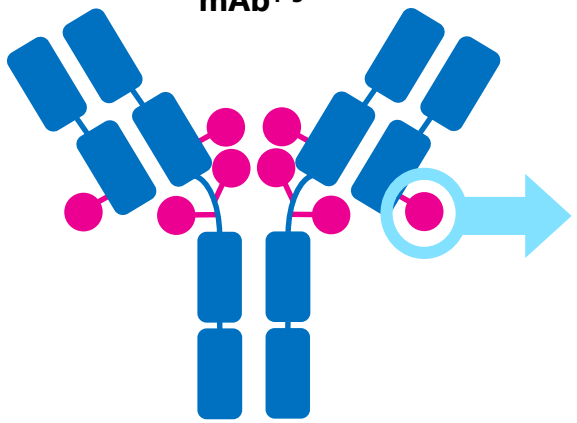
*1 DS-8201/trastuzumab deruxtecan; *2 DS-1062/datopotamab deruxtecan ; *3 U3-1402/patritumab deruxtecan

DS-8201: HER2 Directed ADC

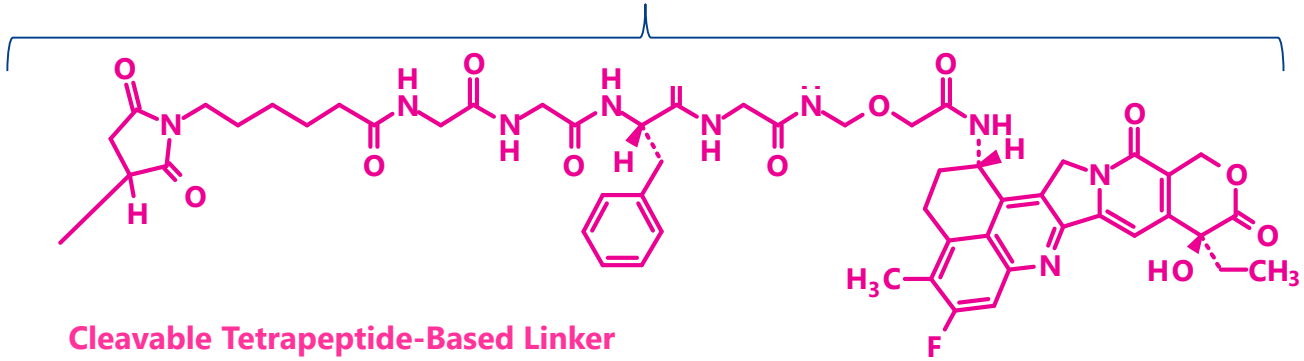
DS-8201 is an ADC composed of 3 components[1,2]:

- A humanized anti-HER2 IgG1 mAb with the same amino acid sequence as trastuzumab, covalently linked to:
- A topoisomerase I inhibitor payload, an exatecan derivative, via
- A tetrapeptide-based cleavable linker

Humanized anti-HER2 IgG1 mAb[1-3]



Deruxtecan[1,2]



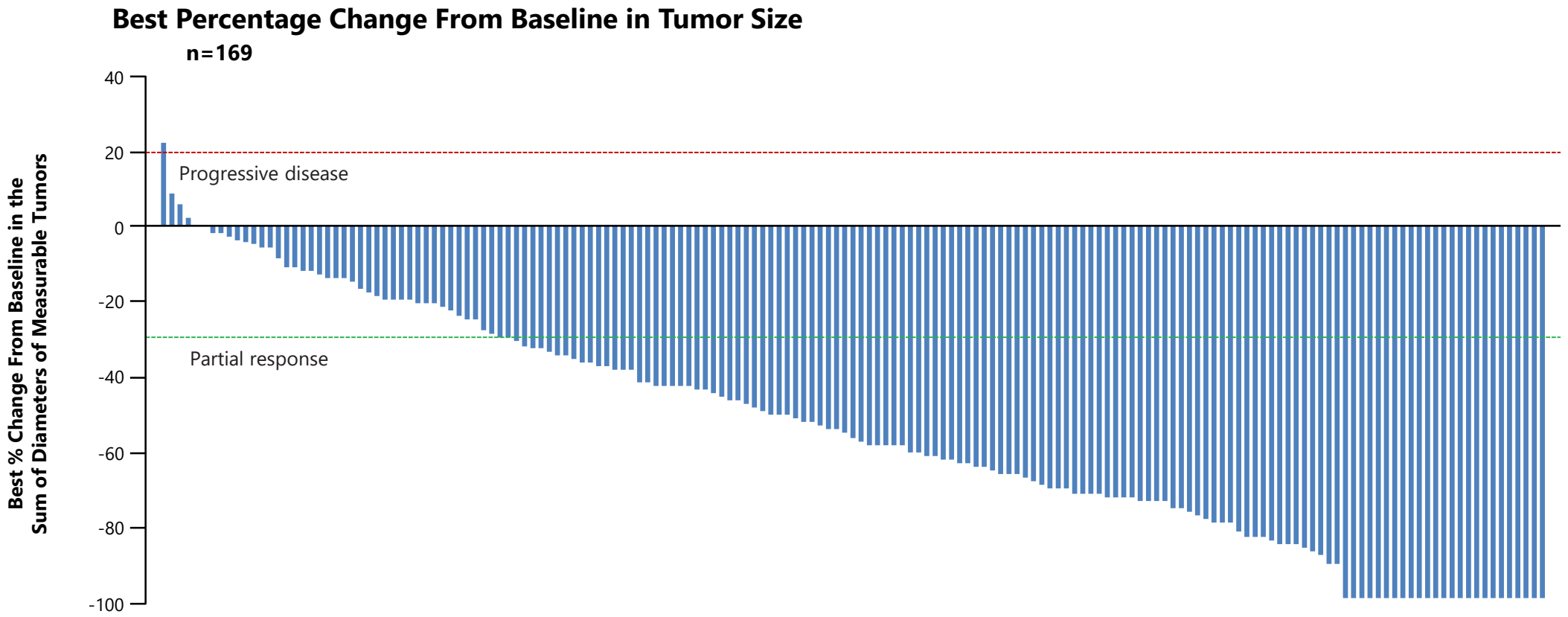
Cleavable Tetrapeptide-Based Linker

Topoisomerase I Inhibitor payload
(DXd=DX-8951f derivative)

1 Nakada T, et al. *Chem Pharm Bull (Tokyo).* 2019;67(3):173-185.; **2** Ogitani Y, et al. *Clin Cancer Res*. 2016;22(20):5097-5108.; **3** Trail PA, et al. *Pharmacol Ther.* 2018;181:126-142.

DS-8201: Efficacy - Breast Cancer (DESTINY-Breast01)

Confirmed ORR: 61.4% (95% CI, 54.0%–68.5%)



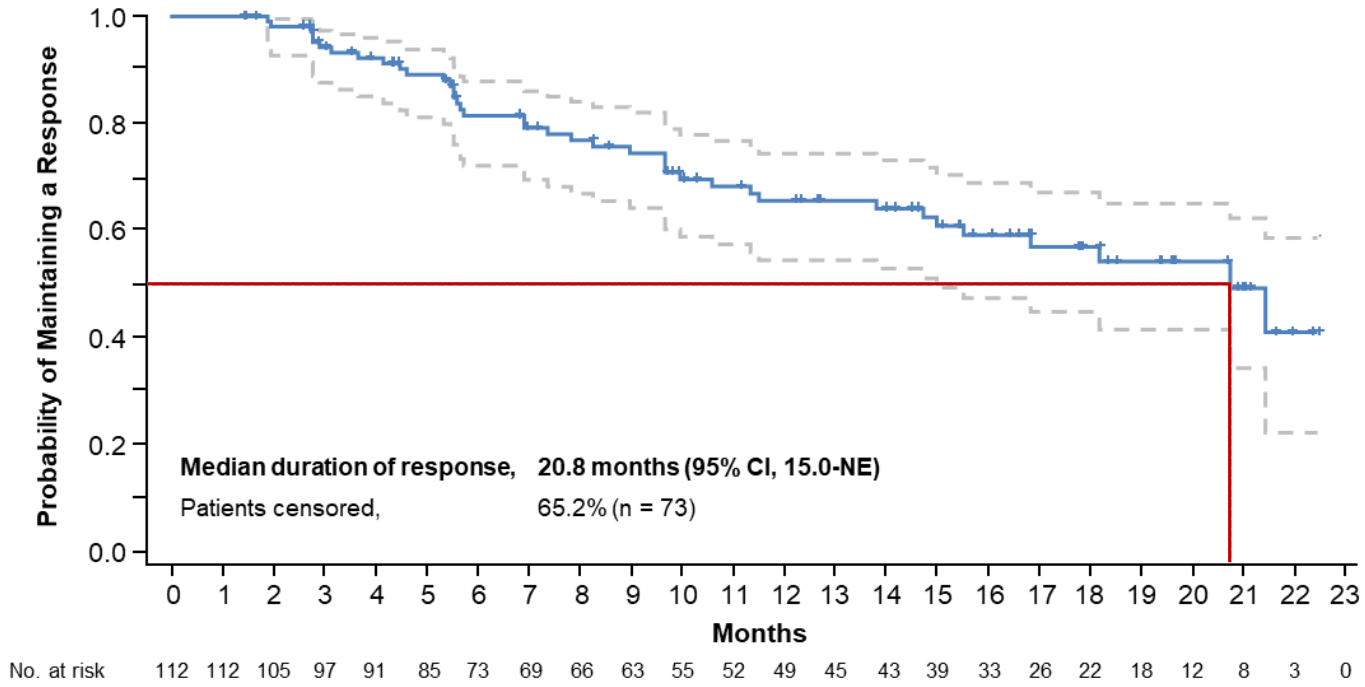
Source: S. Modi et al., Abstract #1190; PD3-06, SABCS 2020

ENHERTU® is approved in US with a Boxed WARNING for Interstitial Lung Disease (ILD)/pneumonitis and Embryo-Fetal Toxicity.

ORR: overall response rate

DS-8201: Efficacy - Breast Cancer (DESTINY-Breast01)

Duration of Response: 20.8 months (median)



Standard of care in first-line mBC:
the CLEOPATRA Study in 1st line mBC
THP (trastuzumab, pertuzumab and docetaxel)
Duration of response = **20.2 months** (95% CI, 16.0 to 24.0)
S Swain J Baselga et al NEJM2015

Intent-to-treat analysis	**June 2020 data cutoff** **DS-8201 5.4 mg/kg** (N = 184)
Duration of follow-up, median (range)	20.5 months (0.7-31.4)
Patients remaining on treatment	20.1% (n = 37)
Confirmed ORR by ICR	**61.4% (n = 113)** (95% CI, 54.0%-68.5%)

Source: S. Modi et al., Abstract #1190; PD3-06, SABCS 2020

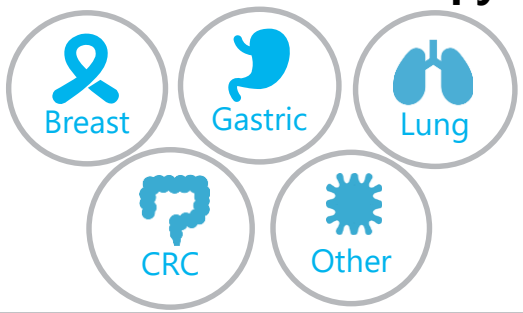
DS-8201: Strategic Collaboration

- **Co-development and co-commercialization with AstraZeneca (entered in Mar. 2019)**
  - **Maximize the value of DS-8201 by accelerating development & commercialization**
  - **Accelerate building in-house global oncology infrastructure**
  - **Expand resource allocation for other ADC assets**

Daiichi-Sankyo AstraZeneca

Development

- **Co-develop** as **mono-therapy** and **combination therapy**



Commercial

- **Global (excluding Japan)**
  The companies will **co-promote** and **share profits**
- **Japan**
  Daiichi Sankyo will **solely commercialize** and **pay royalty** to AstraZeneca

Financial Consideration

- Up to **US$ 6.9 Bn (759.0 Bn JPY*) in total**

  Including upfront payment, regulatory / sales-related milestones and other contingencies

  * US$1= 110 JPY

DS-8201 / ENHERTU®: Launch and Expansion in Region and Indication

- **Launched in 2020 (US/JP) – Breast cancer 3rd line therapy**
- **Expansion in region and indication is progressing steadily**

Breast

HER2 Positive Breast Cancer 3L

- **January 2020**
  Launched in US*1
- **May 2020**
  Launched in JP*2
- **July 2020**
  MAA accepted in EU
  - ✓ **Recommended for approval by CHMP in Dec. 2020**

  (Approval anticipated in FY2020 Q4)

Gastric

HER2 Positive Gastric Cancer 3L

- **September 2020**
  Indication expanded in JP*3
- **October 2020**
  sBLA accepted in US
  (PDUFA Date: Feb. 28, 2021)

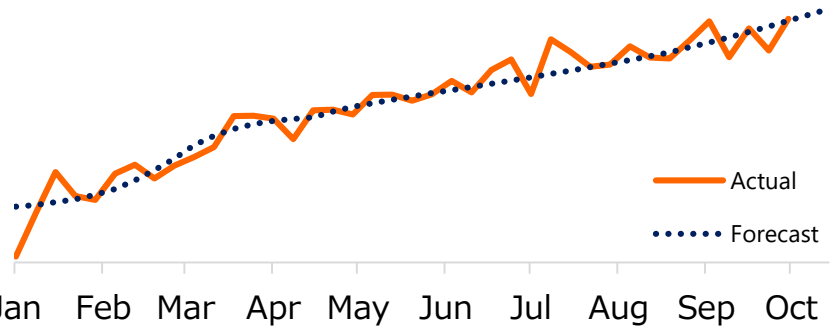
*1 Treatment of adult patients with unresectable or metastatic HER2 positive breast cancer who have received two or more prior anti-HER2-based regimens in the metastatic setting
*2 Treatment of patients with HER2 positive unresectable or recurrent breast cancer after prior chemotherapy (limit the use to patients who are refractory or intolerant to standard treatments)
*3 Treatment of patients with HER2 positive unresectable advanced or recurrent gastric cancer that has progressed after chemotherapy

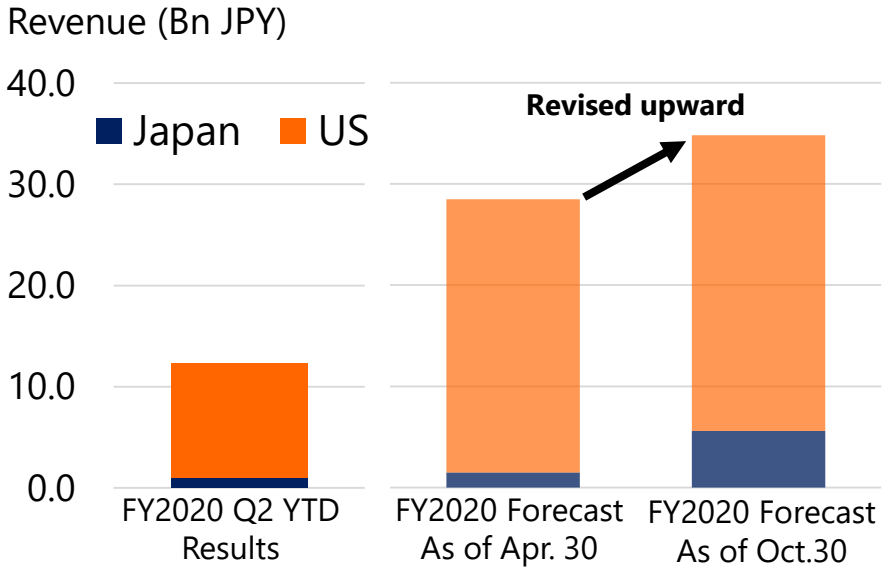
ENHERTU®: Performance in US and Japan

- **Strong market penetration**
- **Product sales FY2020 forecast*: 34.9 Bn JPY (+6.4 Bn JPY vs initial plan)**

US

- Total number of unique outlets purchasing ENHERTU® since launch is approximately 1,600, and number of repeat outlets is approximately 1,300
- Encouraging increase in demand
  - ✓ENHERTU® units shipped to account in Oct. increased more than 60% from Mar.





Japan

- Providing product information with the highest priority on safety
- ENHERTU® delivered only to medical institutions that meet doctor and facility requirements

*Forecast as of Oct. 30, 2020

DS-8201: Development to Maximize Value

Daiichi-Sankyo

◆ **Accelerating development to expand indications for early treatment lines of HER2 positive breast cancer and HER2 low expressing breast cancer**

As of December 2020			~FY2019	FY2020	FY2021	Under Discussion
HER2 Positive		Metastatic 3L	DESTINY-Breast01 monotherapy			
			DESTINY-Breast02 monotherapy			
		Metastatic 2L	DESTINY-Breast03 monotherapy			
				DESTINY-Breast07 combination (2L/1L) Ph1		
		Metastatic 1L			DESTINY-Breast09 combo Ph3	
		Post-neoadjuvant		DESTINY-Breast05 monotherapy vs. T-DM1		
		Neoadjuvant				Phase 3
		Adjuvant				Phase 3
HER2 Low	HR+/ HR-	Metastatic Post Chemo	DESTINY-Breast04 monotherapy			
				DESTINY-Breast08 combination Ph1		
		Post-neoadjuvant				Phase 3
	HR+	Metastatic Chemo Naive		DESTINY-Breast06 monotherapy		
		Metastatic Endocrine Therapy				Phase 3
	HR-	Metastatic 1L		BEGONIA (durvalumab combination)		
		Neoadjuvant				Phase 3

Ph 1 ongoing
Ph 2 ongoing
Ph 3 ongoing
Completed
New

Study initiation points for FY2020 H2 are all shown as beginning of H2. Study initiation points for FY2021 are all shown as beginning of FY2021.

DS-8201: Development to Maximize Value

Daiichi-Sankyo

◆ **Accelerating development to expand indications for early treatment lines of HER2 positive gastric cancer and treatment of lung cancer**

As of December 2020			~FY2019	FY2020	FY2021	Under Discussion
Gastric	HER2 Positive	Advanced/ Metastatic 3L~	DESTINY-Gastric01 monotherapy (HER2 low in exploratory cohort)			
		Advanced/ Metastatic 2L		DESTINY-Gastric02 monotherapy (2L) - West		
				DESTINY-Gastric03 combination (2L/1L)		
					DESTINY-Gastric04 monotherapy Ph3	
		Advanced/ Metastatic 1L				Phase 3
Lung	HER2 Expressing	Advanced/ Metastatic 2L~	DESTINY-Lung01 monotherapy			
				HUDSON (durvalumab combination)		
		Advanced/ Metastatic 2L				Phase 3 monotherapy
		Advanced/ Metastatic 1L			DESTINY-Lung03 combination Ph1	
						Phase 3 combination
	HER2 Mutated	Advanced/ Metastatic 2L~	DESTINY-Lung01 monotherapy			
					DESTINY-Lung02 monotherapy Ph2	
		Advanced/ Metastatic 1L				Phase 3
	Expressing/ Mutated	Early disease				Phase 3 combination

Ph 1 ongoing
Ph 2 ongoing
Ph 3 ongoing
Completed
New

Study initiation points for FY2020 H2 are all shown as beginning of H2. Study initiation points for FY2021 are all shown as beginning of FY2021.

DS-8201: Development to Maximize Value

Daiichi-Sankyo

◆ Accelerating development to expand indications for colorectal cancer and other tumors and I/O combination therapy

As of December 2020			~FY2019	FY2020	FY2021	Under Discussion
CRC	HER2 Expressing	Metastatic 3L	DESTINY-CRC01 monotherapy (HER2 Low in exploratory cohort)		DESTINY-CRC02 monotherapy Ph2	
		Metastatic 2L				Phase 3 combination
		Metastatic 1L				Phase 3 combination
Other Tumors	HER2 Expressing	Metastatic 2L	Nivolumab combination (breast, bladder)			
				Pembrolizumab combination (breast, NSCLC)		
				DESTINY-PanTumor02		
		Ovarian				Phase 2 combination
	HER2 Mutated	Metastatic 2L			DESTINY-PanTumor01 Ph2	

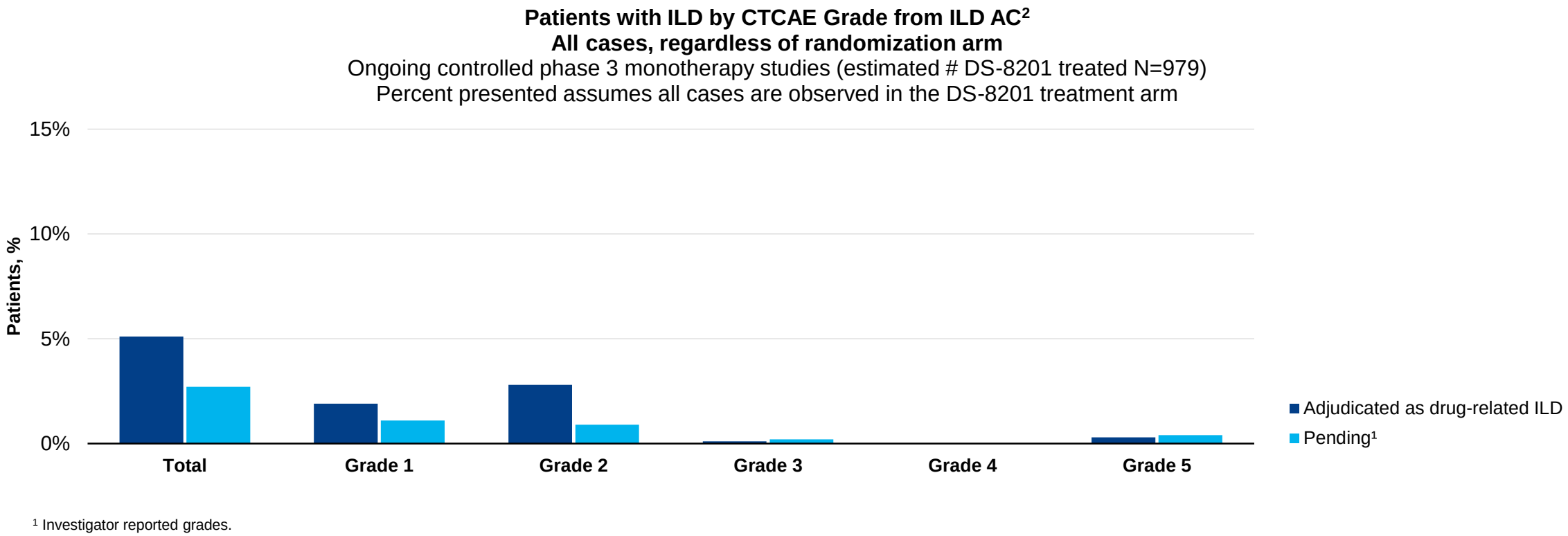
Ph 1 ongoing
Ph 2 ongoing
Ph 3 ongoing
Completed
New

Study initiation points for FY2020 H2 are all shown as beginning of H2. Study initiation points for FY2021 are all shown as beginning of FY2021.

DS-8201: ILD Management

◆ Conducting clinical studies through investigator safe use campaign to detect and manage ILD

Cumulative ILD data, all phase 3 monotherapy studies as of Nov.15, 2020, preliminary data



[1] Investigator reported grades.

ILD: interstitial lung disease

DS-8201: Post-Marketing Cumulative ILD Reported Data

US (as of November 15, 2020)

1,067.2	13	2
Patient-years	ILD events reported	Fatal cases

Japan (as of November 15, 2020)

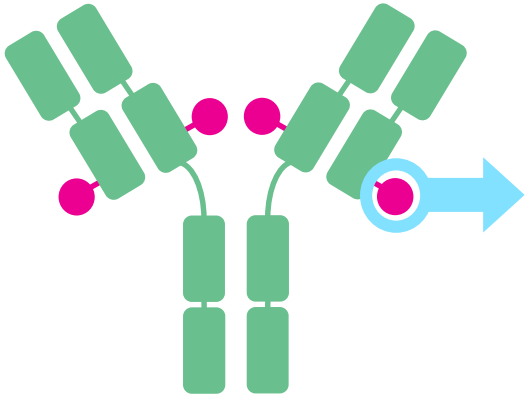
162.8	16	0
Patient-years	ILD events reported	Fatal cases

DS-1062: TROP2 Directed ADC

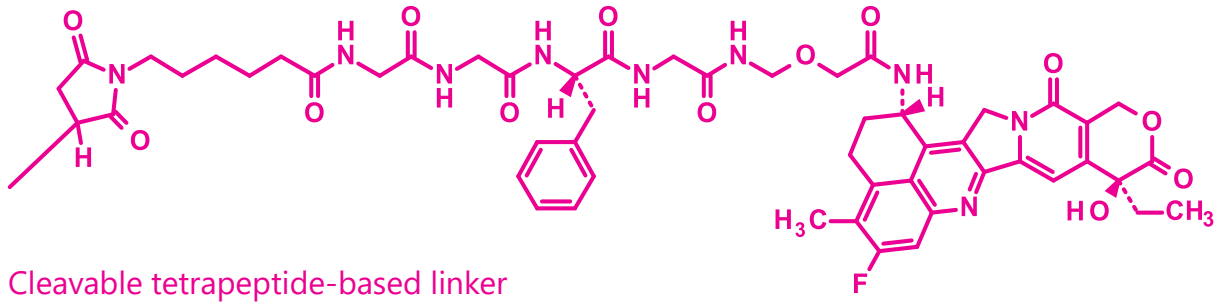
DS-1062 is an ADC composed of 3 components[1,2]:

- A humanized anti-TROP2 IgG1[3] monoclonal antibody attached to:
- A topoisomerase I inhibitor payload, an exatecan derivative, via
- A tetrapeptide-based cleavable linker

Humanized anti-TROP2 IgG1 mAb



Deruxtecan[a,4]



Cleavable tetrapeptide-based linker

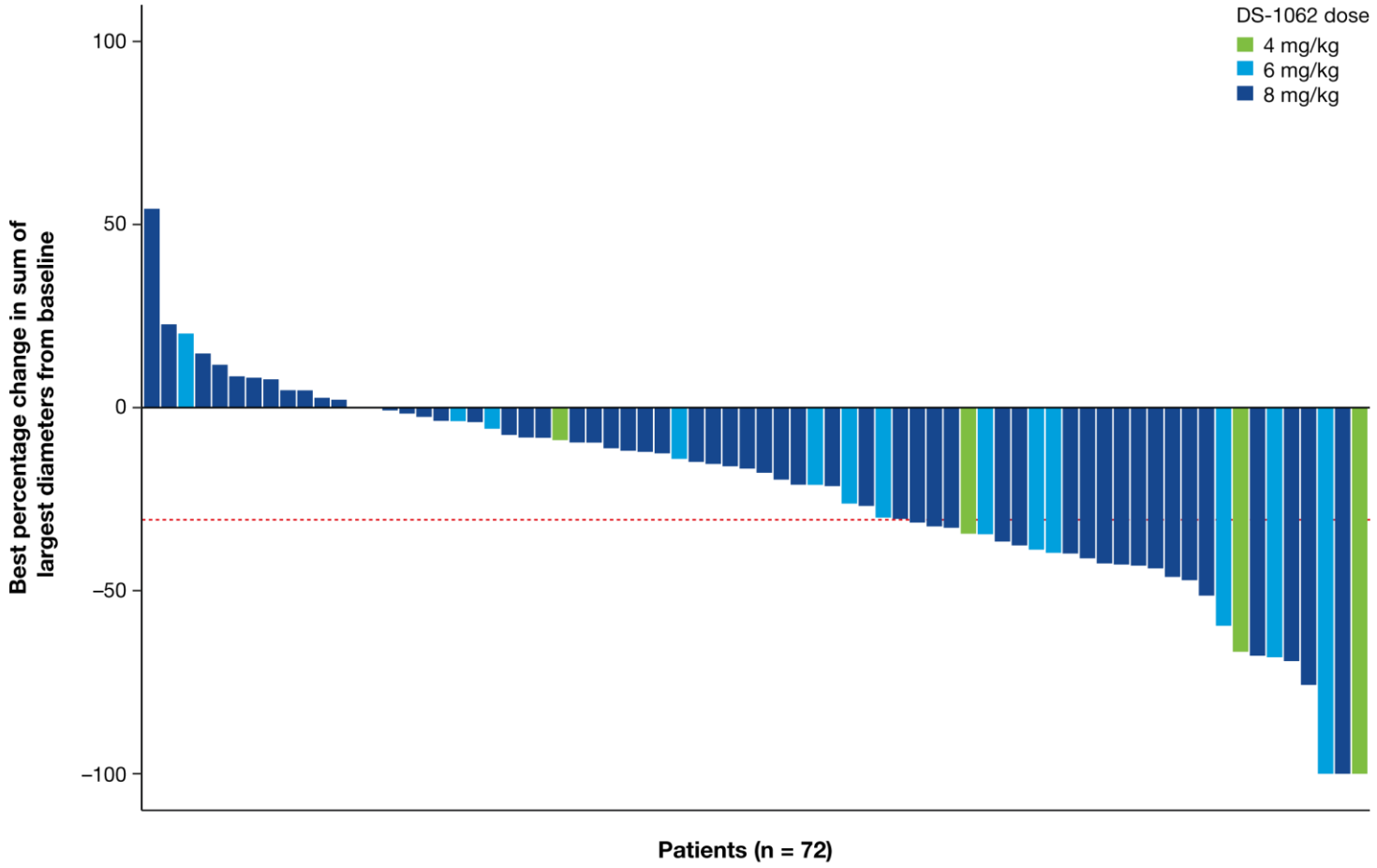
Topoisomerase I inhibitor payload (DXd)

1 Okajima D, et al. Poster presented at: AACR-NCI-EORTC International Conference; October 26-30, 2019; Boston, MA [abstract C026].; **2** Nakada T, et al. *Chem Pharm Bull.* 2019;67(3):173-185.; **3** Daiichi Sankyo Co. Ltd. DS-1062. Daiichi Sankyo.com. Accessed October 6, 2020. https://www.daiichisankyo.com/media_investors/investor_relations/ir_calendar/files/005438/DS-1062%20Seminar%20Slides_EN.pdf; **4** Krop I, et al. Oral presentation at: SABCS Symposium; December 10-14, 2019; San Antonio, TX [abstract GS1-03].

a Image is for illustrative purposes only; actual drug positions may vary.

DS-1062: Efficacy - NSCLC Phase 1 study

- **Phase 1 study is progressing smoothly**
- **Interim data presented at ASCO 2020**



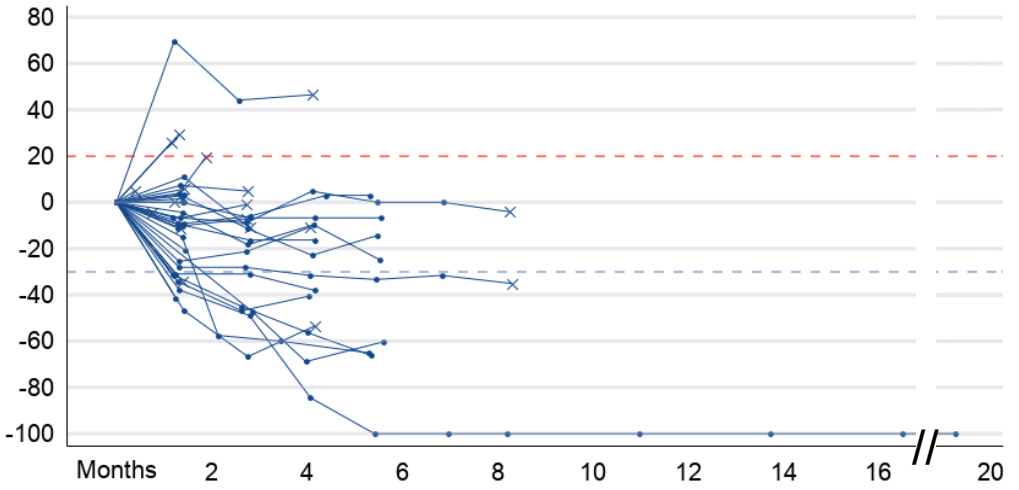
Interim data of dose escalation and expansion from the phase 1 study of DS-1062, a trophoblast cell-surface antigen 2 (TROP2) ADC in patients with advanced NSCLC presented at ASCO 2020

DS-1062: Efficacy - NSCLC Phase 1 study

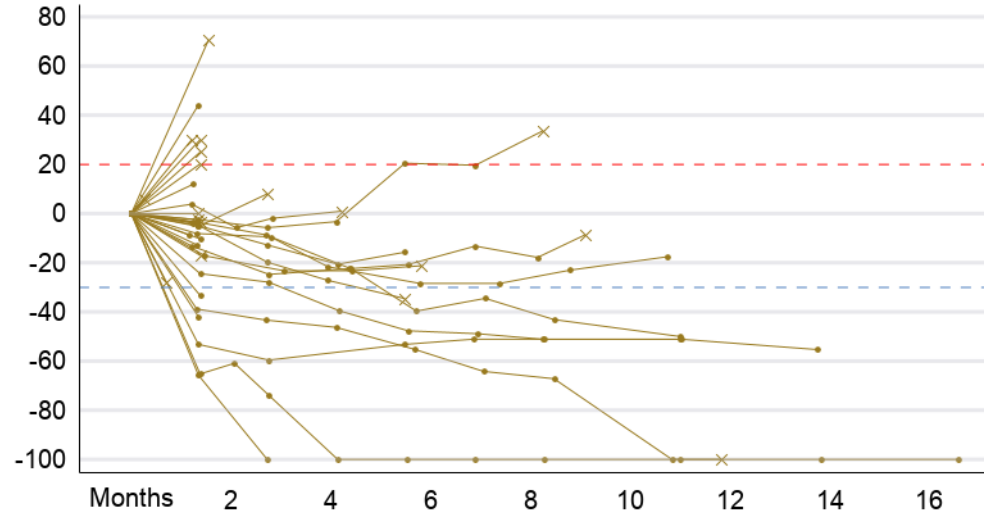
Preliminary data indicates potential for similar durability as DS-8201

Spider plots of target lesions, based on BICR by dose

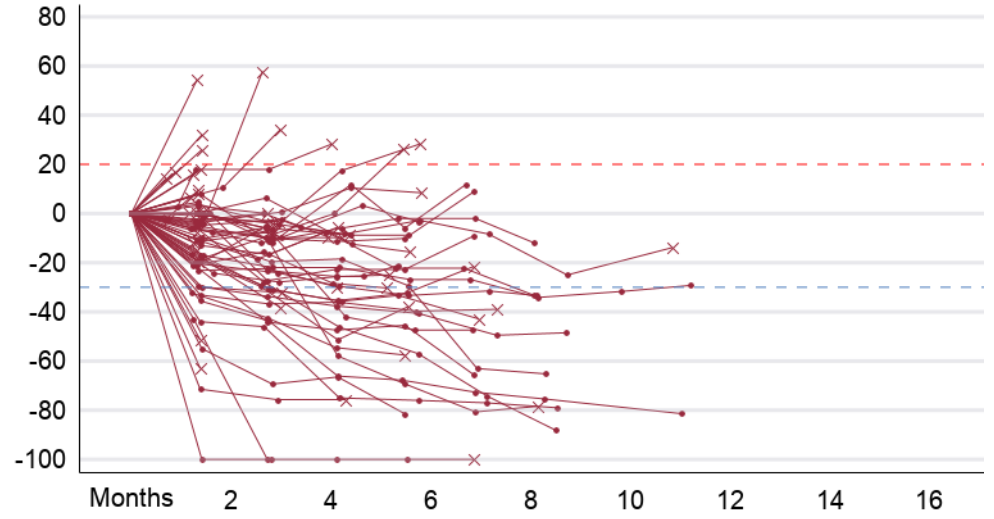
4 mg/kg



6 mg/kg



8 mg/kg



Source data on file. Preliminary. DCO: 4 Sept 2020. All patients, regardless of response.

DS-1062: Strategic Collaboration

◆ **Co-development and co-commercialization with AstraZeneca (entered in July 2020)**

- **Maximize the value of DS-1062 by accelerating and expanding development**
- **Allocate resources rapidly with flexibility to DXd-ADC / Alpha portfolio**

Daiichi-Sankyo AstraZeneca

Development	Commercial	Financial Consideration
◆ **Co-develop** as **mono-therapy** and **combination therapy** 	◆ **Global (excluding Japan)** The companies will **co-promote** and **share profits** ◆ **Japan** **Daiichi Sankyo** will **solely commercialize** and **pay royalty** to AstraZeneca	◆ Up to **US$ 6.0 Bn (660.0 Bn JPY*) in total** Including upfront payment, regulatory and sales-related milestones * US$1= 110 JPY

DS-1062: Development to Maximize Value

◆ Development with utmost focus in lung and breast cancer is underway

NSCLC

- ➢ **Pivotal Phase3 study in post IO/chemo started in December 2020**
  - ✓ TROPION-Lung01: NSCLC without actionable mutations
- ➢ **Phase1 studies in IO combination are underway**
  - ✓ TROPION-Lung02: Combination with pembrolizumab
  - ✓ TROPION-Lung04: Combination with durvalumab
- ➢ **Phase2 study in post platinum-based chemotherapy/ EGFR TKI started in December 2020**
  - ✓ TROPION-Lung05: NSCLC with actionable mutations

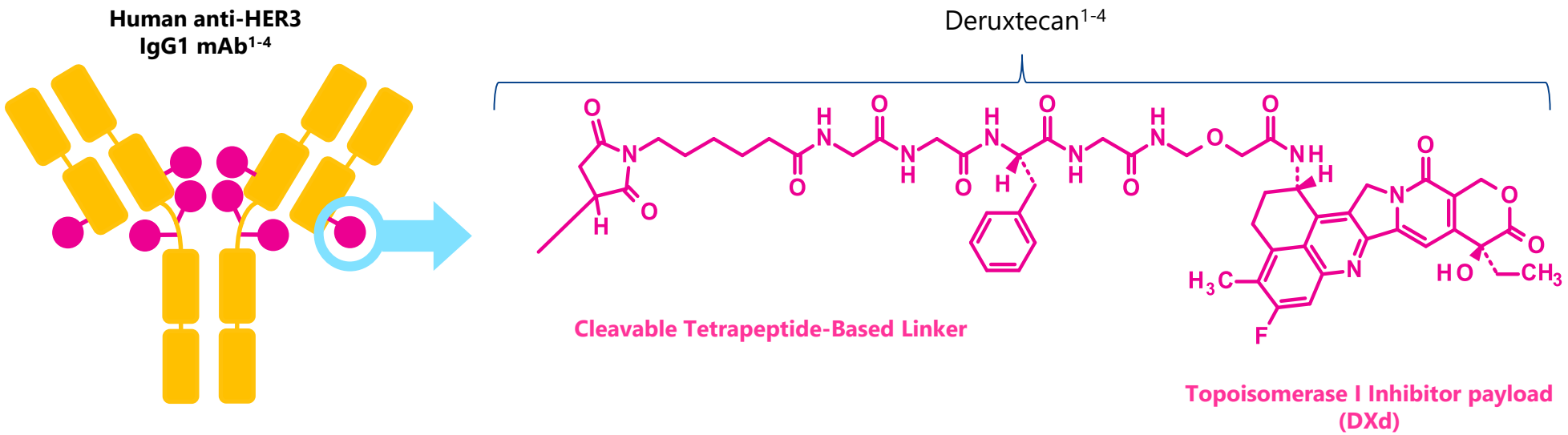
Breast Cancer, Other Cancers

- ➢ **TNBC cohort was added to ongoing Phase1 study in July 2020**
- ➢ **Other tumor cohorts planned**

U3-1402: HER3 Directed ADC

U3-1402 is an ADC composed of 3 components[1-4]:

- A fully human anti-HER3 IgG1 mAb (patritumab), covalently linked to:
- A topoisomerase I inhibitor payload, an exatecan derivative, via
- A tetrapeptide-based cleavable linker

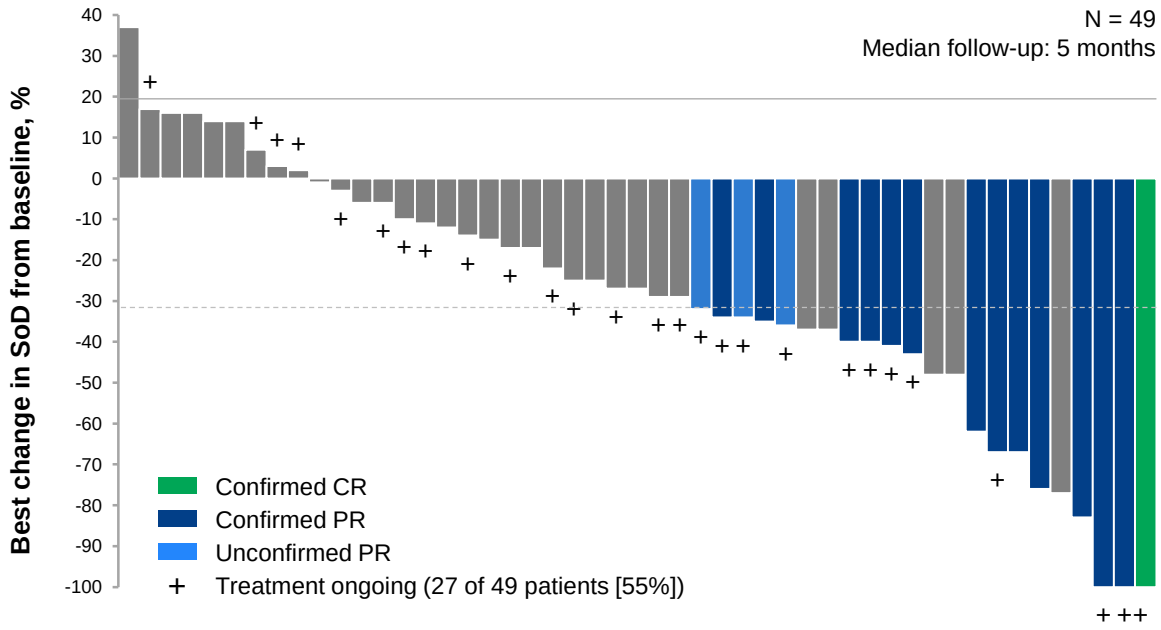


1 Hashimoto Y, et al. Clin Cancer Res. 2019;25:7151-7161.; **2** Nakada T, et al. Chem Pharm Bull (Tokyo). 2019;67(3):173-185.; **3** Ogitani Y, et al. Clin Cancer Res. 2016;22(20):5097-5108.; **4** Koganemaru S, et al. Mol Cancer Ther. 2019;18:2043-2050.

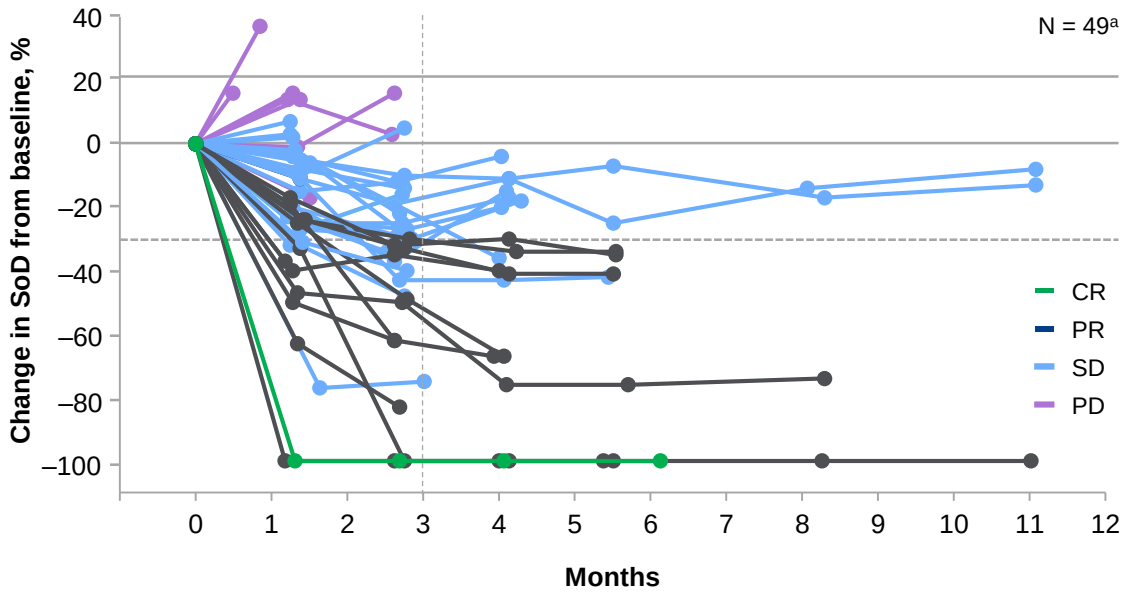
U3-1402: Efficacy - EGFR-mutated NSCLC Phase1 study

- **Phase1 study is progressing smoothly**
- **Interim data presented at ESMO 2020**

EGFR-mutated NSCLC post TKI and platinum-based chemotherapy



Spider plot



Source: Yu et al., ESMO 2020. U31402-U102 (NCT03260491)

U3-1402: Development to Maximize Value

◆ Accelerating development for fast-to-market in EGFRm NSCLC

EGFR Mutant NSCLC

- **Pivotal Phase2 study planned to start in January 2021**
  - ✓ HERTHENA-Lung01:
    Post platinum-based chemotherapy/EGFR TKI
- **Phase1 osimertinib combination study planned to start in January 2021**

Colorectal Cancer

- **Phase2 study started in September 2020**

Breast Cancer

- **Phase1/2 study is progressing smoothly**
- **Interim data presented at SABCS 2020**

ADC Assets

Seven ADC Assets

Project (Target)	Potential indications	Discovery / Pre-clinical / Clinical / Pivotal/ approved
DS-8201 (HER2)	Breast, Gastric NSCLC, CRC, etc.	
DS-1062 (TROP2)	NSCLC, Breast	
U3-1402 (HER3)	NSCLC, CRC, Breast	
DS-7300 (B7-H3)	SCCHN, NSCLC, Esophageal, etc.	
DS-6157 (GPR20)	GIST	
DS-6000 (CDH6)	Renal, Ovarian	
DS-3939 (TA-MUC1)	Solid tumors	

NSCLC: non-small cell lung cancer, CRC: Colorectal cancer, SCCHN: squamous cell carcinoma of the head and neck, Gastrointestinal Stromal Tumor

Creating “Beyond ADC” Assets to Achieve Sustainable Growth

Daiichi-Sankyo

Advancing drug discovery research by using wide variety of modalities to create innovative therapies

Next Generation ADC

ENA® Nucleotide

Gene Therapy

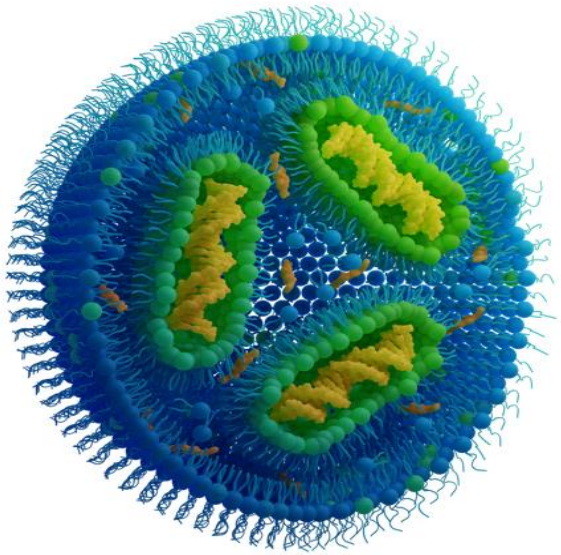
Bispecific Antibody

Cell Therapy

LNP/mRNA

COVID-19 Countermeasures

- **Developing mRNA vaccine leveraging our modality research**
- **Encouraging data obtained from non-clinical pharmacology studies: Clinical study is planned to start in Mar. 2021**



DS-5670: LNP-mRNA

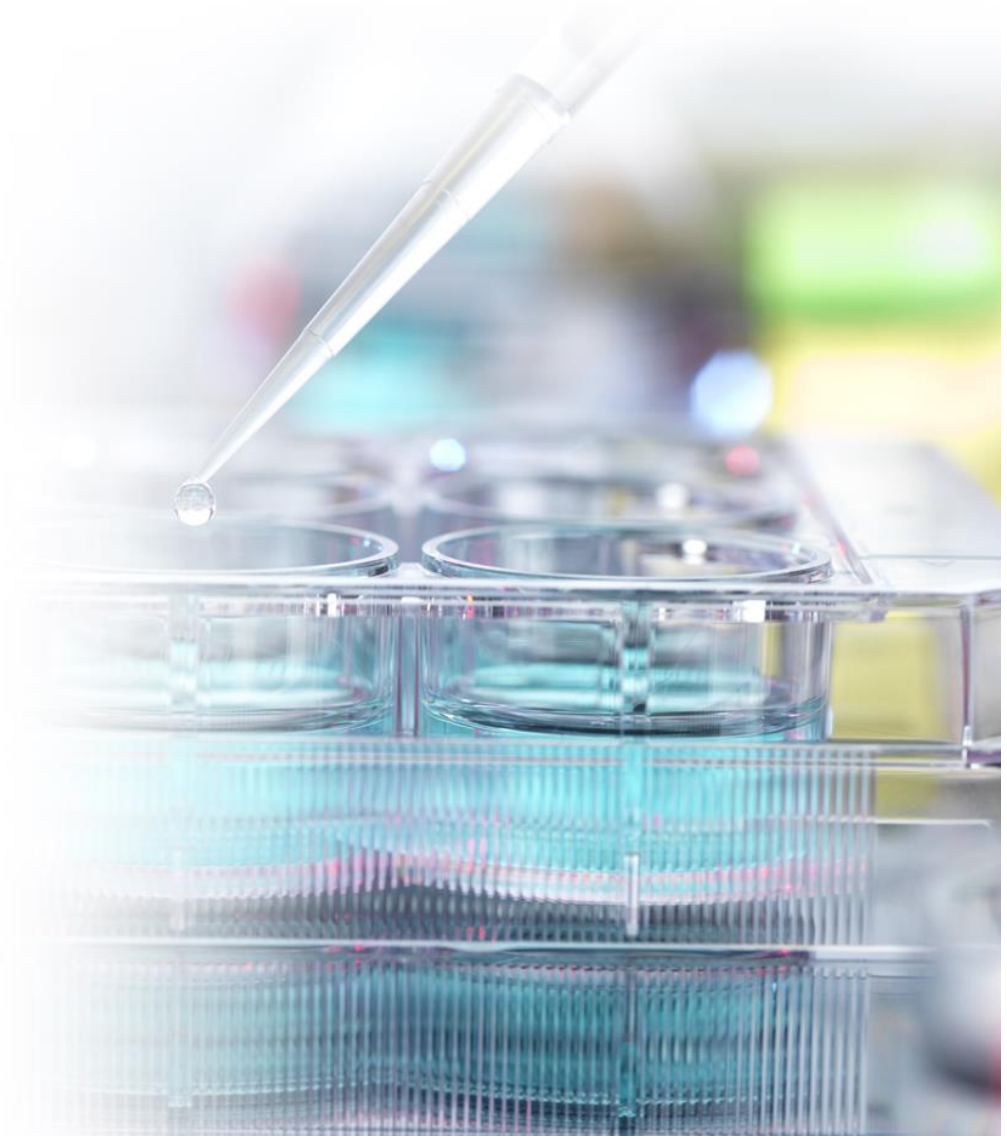
- DS original cationic lipid
- Efficient encapsulation of mRNA in nanoparticles, and efficient delivery of mRNA to cells
- Applying to pandemic and other vaccines

1 Overview of Daiichi Sankyo

2 Growth Strategy

3 **Maximizing Shareholder Value**

4 Appendix



Shareholder Returns

◆ Decided dividend increase, acquisition and cancellation of own shares in FY2020 to enrich shareholder returns

Shareholder Returns Policy: FY2016 - FY2022

Annual Ordinary Dividend 70 JPY*1 or more + **Flexible acquisition of own shares** = **Total Return Ratio*2 100% or more**

Dividend increase

- Annual dividend forecast for FY2020
  - ✓ **Increased by 11 JPY per share (70 JPY → 81 JPY*1)**

Acquisition of own shares

- Total amount of acquisition cost
  - ✓ **100.0 Bn JPY (max.)**
- Total number of shares
  - ✓ **60 Mn shares (max.)**
- Acquisition period
  - ✓ **From Nov. 2020 to Mar. 2021**

Cancellation of own shares

- Number of shares
  - ✓ **180 Mn shares**
  - ✓ **Cancel except for the shares to be used for stock option and restricted share-based remuneration**
- Cancellation date
  - ✓ **Apr. 15, 2021**

*1 Pre-split base; Share split, three-for-one (effective date: Oct. 1, 2020)
*2 Total return ratio = (Dividends + Total acquisition costs of own shares) / Profit attributable to owners of the company

Cash Allocation for Maximizing Shareholder Value

- **Maximize future shareholder value through aggressive investment in our pipeline**

5-Year Business Plan (FY2021~25): to be Announced Soon

Daiichi-Sankyo

Maximize the value of 3 lead ADCs

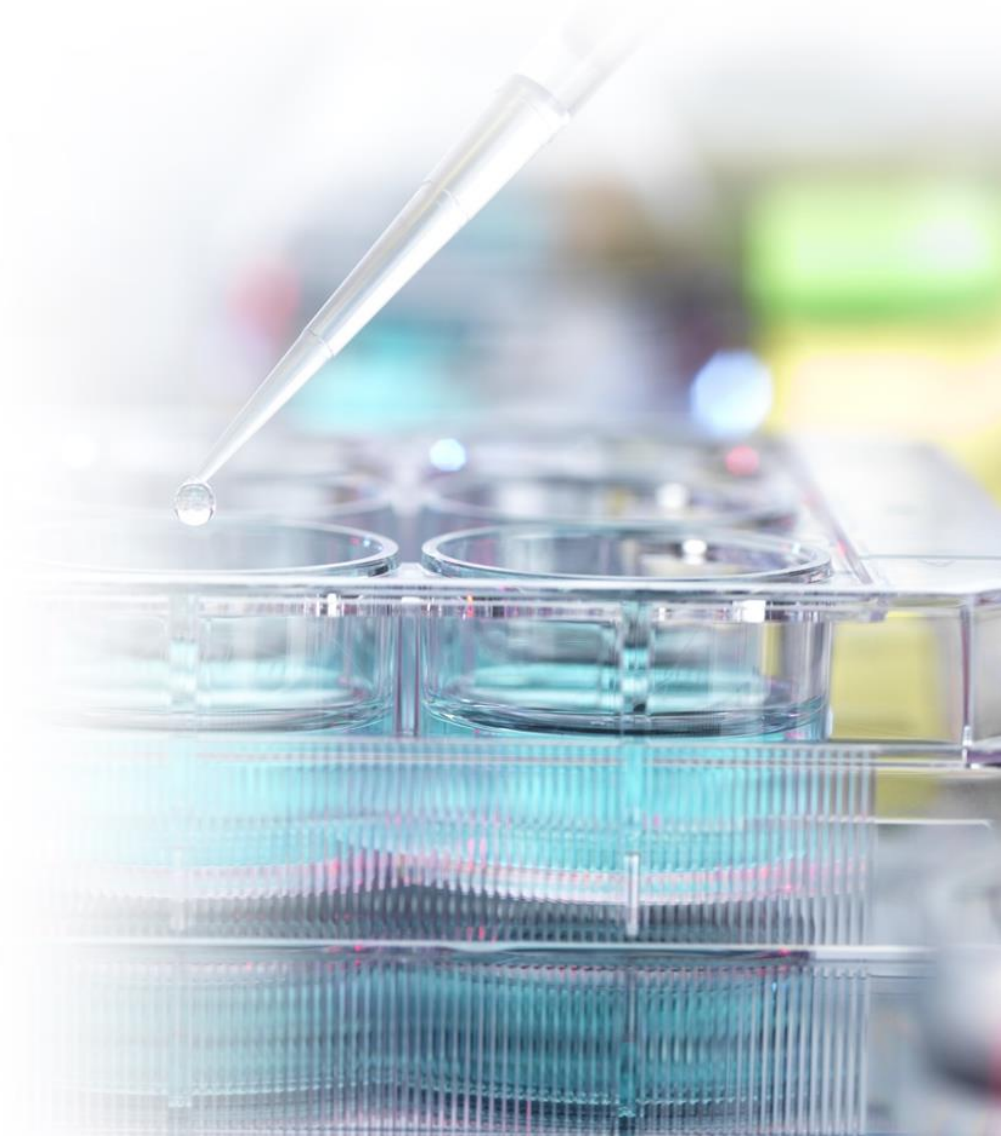
Strive for sustainable growth

1 Overview of Daiichi Sankyo

2 Growth Strategy

3 Maximizing Shareholder Value

4 **Appendix**



Upcoming News

January – March 2021

DS-8201:
DESTINY-Lung01
HER2 expressing cohort
(Late-Breaker)

DS-1062:
Phase 1 NSCLC update

U3-1402:
Phase 1 NSCLC update

April – June 2021

DS-8201:
DESTINY-Gastric01,
biomarker analysis

U3-1402:
Phase 1 NSCLC update

Upcoming Catalysts

DS-8201:
EU DESTINY-Breast01 approval
US DESTINY-Gastric01 approval

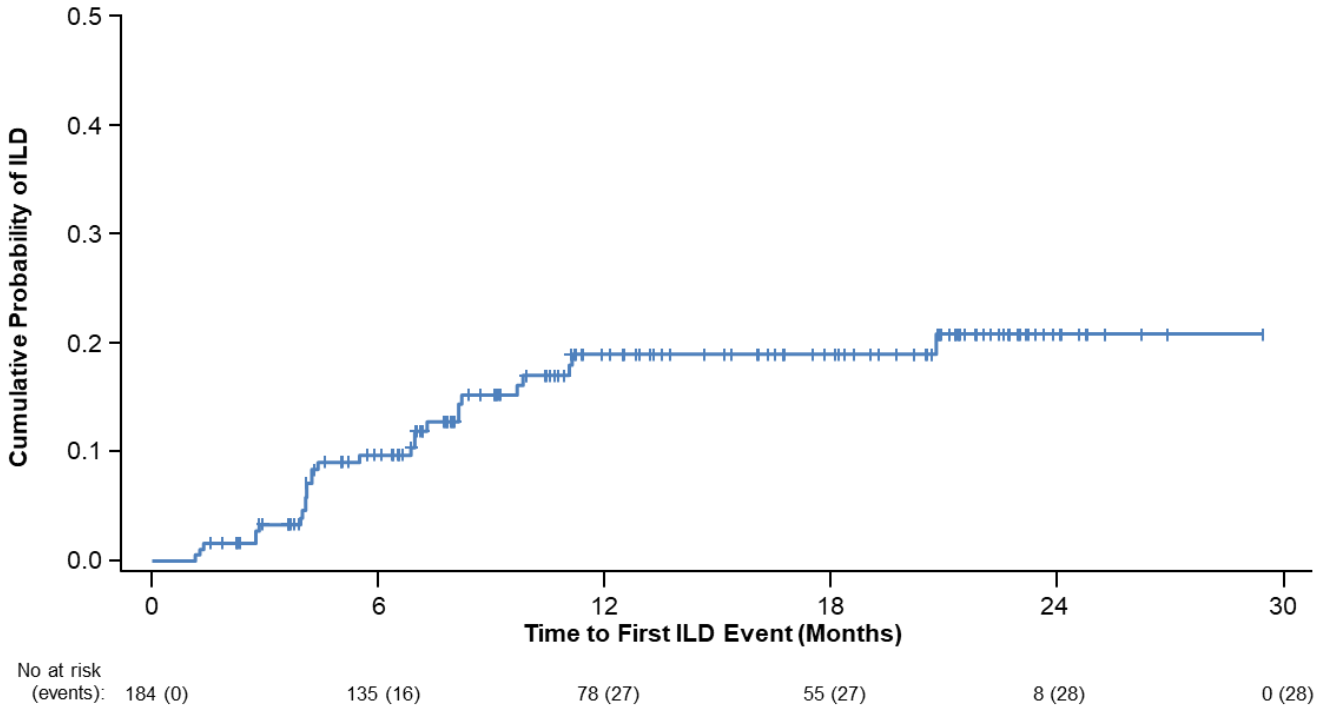
DESTINY-Breast02 data
DESTINY-Breast03 data
DESTINY-Breast04 data

EU DESTINY-Gastric01 submission

DS-8201: ILD & safety update (DESTINY-Breast01)

ILD risk appears to flatten after 12 months

Cumulative Probability of Adjudicated Drug-related Interstitial Lung Disease (ILD)



n (%)	August 2019 data cutoff DS-8201 5.4 mg/kg (N = 184)	June 2020 data cutoff DS-8201 5.4 mg/kg (N = 184)
Any TEAE	183 (99.5)	183 (99.5)
Drug-related	183 (99.5)	183 (99.5)
TEAE grade ≥3	105 (57.1)	113 (61.4)
Drug-related	89 (48.4)	97 (52.7)
TEAE associated with discontinuation	28 (15.2)	34 (18.5)
Drug-related	27 (14.7)	33 (17.9)

Source: S. Modi et al., Abstract #1190; PD3-06, SABCS 2020

DS-1062: Safety (Ph1 study in advanced NSCLC)

- MTD: 8 mg/kg
  (2 DLTs at 10 mg/kg: 1 mucosal inflammation [grade 3], 1 stomatitis [grade 3])
- TEAEs led to DS-1062 withdrawal in 7 patients (5%)
- SAE in 20 patients (15%)
- 8 ILD events (5.8%) adjudicated as treatment related
  (1 grade 1, 4 grade 2, 1 grade 3, 2 grade 5 i.e., 1.45%, onset at cycle 2 and 3)

	Patients treated with DS-1062 (N = 138)	
TEAE in ≥ 15% subjects	**All grades, n (%)**	**Grade ≥3, n (%)**
Any TEAE	129 (94)	62 (45)
TEAEs in ≥15% of patients, by preferred term		
Nausea	60 (44)	0
Fatigue	56 (41)	4 (3)
Stomatitis	47 (34)	4 (3)
Alopecia	46 (33)	0
Vomiting	37 (27)	0
Decreased appetite	31 (23)	0
Infusion-related reaction	29 (21)	0
Anemia	26 (19)	4 (3)
Constipation	26 (19)	1 (1)
Cough	26 (19)	1 (1)
Mucosal inflammation	25 (18)	4 (3)
Rash	25 (18)	0
Dyspnea	23 (17)	6 (4)
Diarrhea	20 (15)	0

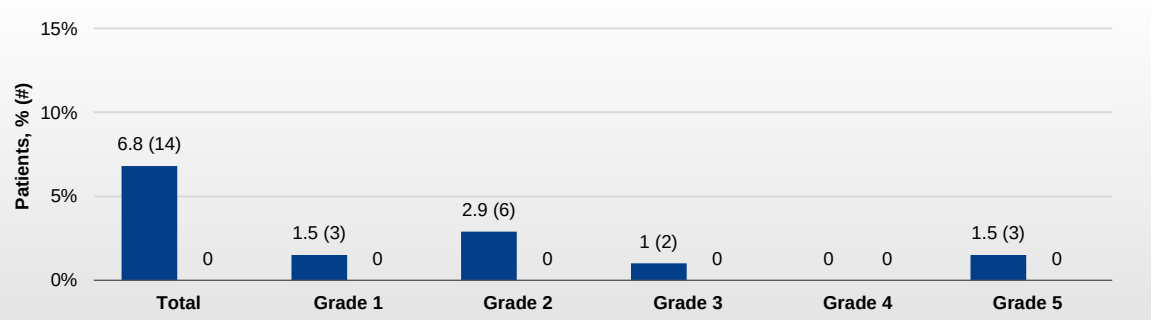
TEAE, treatment-emergent adverse event.

Interim data of dose escalation and expansion from the phase 1 study of DS-1062, a trophoblast cell-surface antigen 2 (TROP2) ADC in patients with advanced NSCLC presented at ASCO 2020

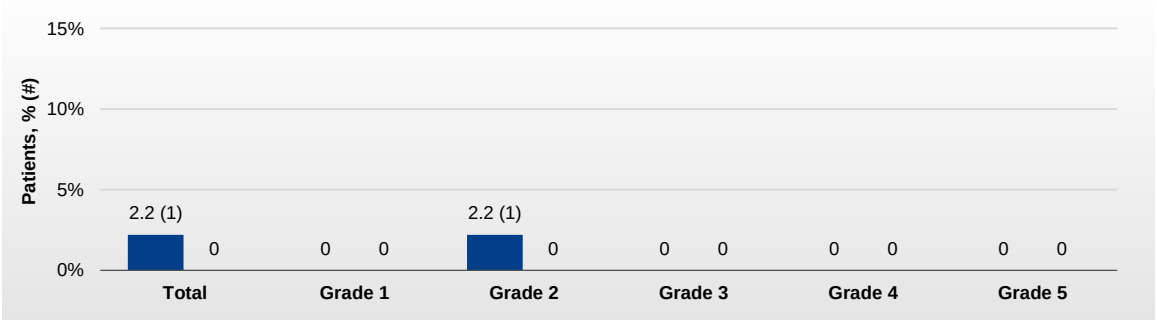
DS-1062: NSCLC cumulative ILD, by dose
As of September 4, 2020

Adjudicated as drug-related ILD
Pending[1]

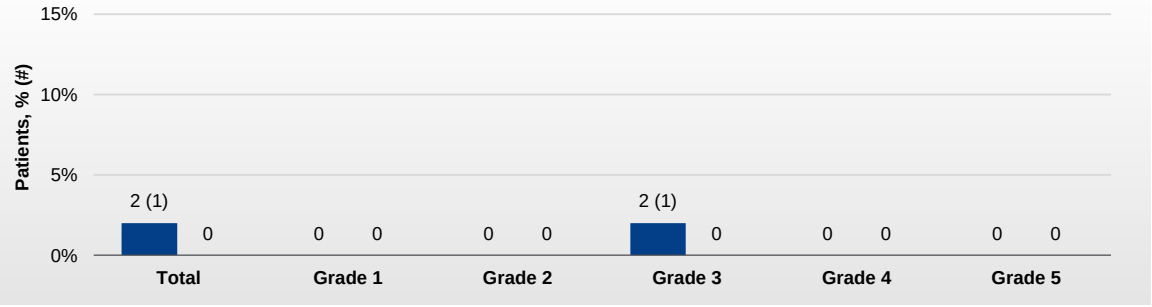
All doses, NSCLC, % (N) (total N=205)



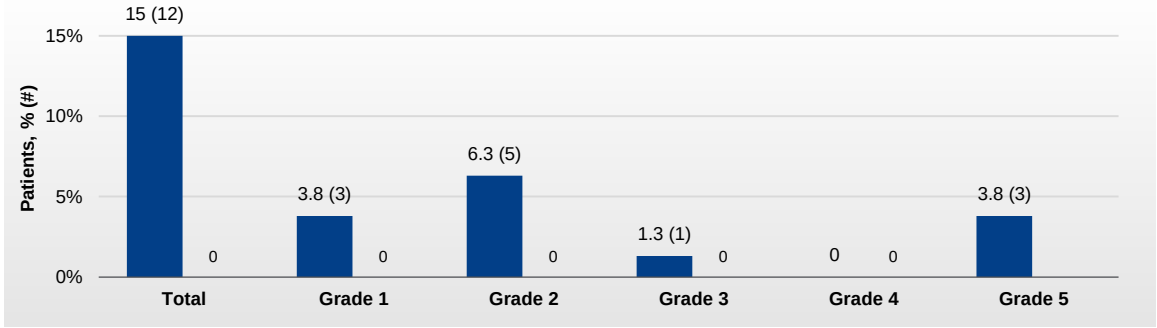
6.0 mg/kg, NSCLC (N=45)



4.0 mg/kg, NSCLC (N=50)



8.0 mg/kg, NSCLC (N=80)



[1] Investigator reported grades.

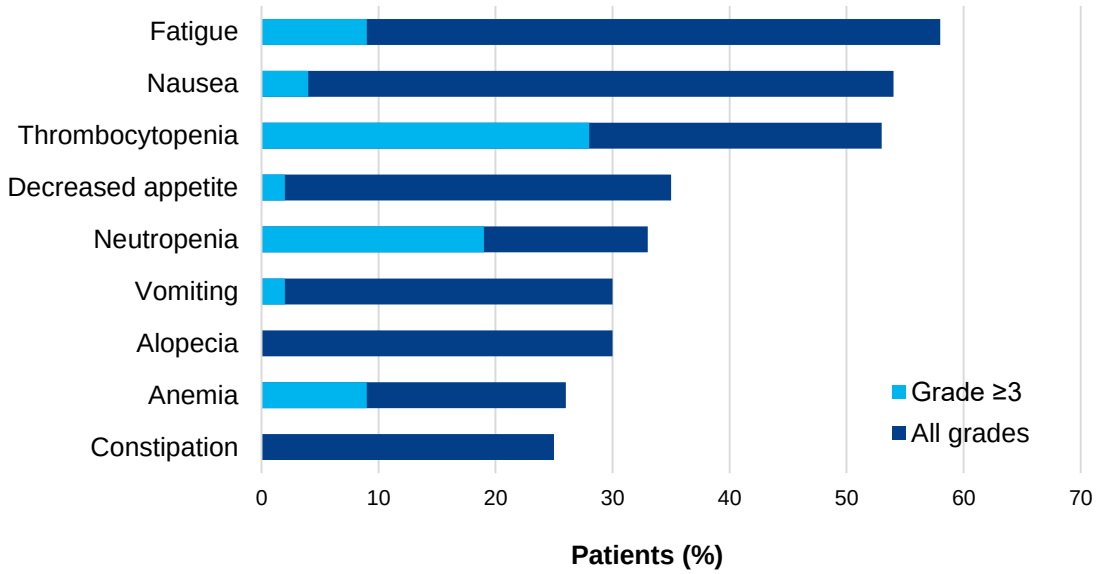
U3-1402: Safety (Ph1 study in advanced EGFRm NSCLC)

5.6 mg/kg, Q3W

TEAEs n (%)	N = 57
TEAEs	57 (100)
Grade ≥3	38 (67)
Associated with discontinuation	5 (9)
Associated with dose reduction	10 (18)
Associated with dose interruption	17 (30)
Associated with death	3 (5)
Treatment-emergent SAEs	21 (37)
Grade ≥3	18 (32)
Treatment related	11 (19)

Three (5.3%) ILD events were adjudicated by an independent central review committee as U3-1402 related

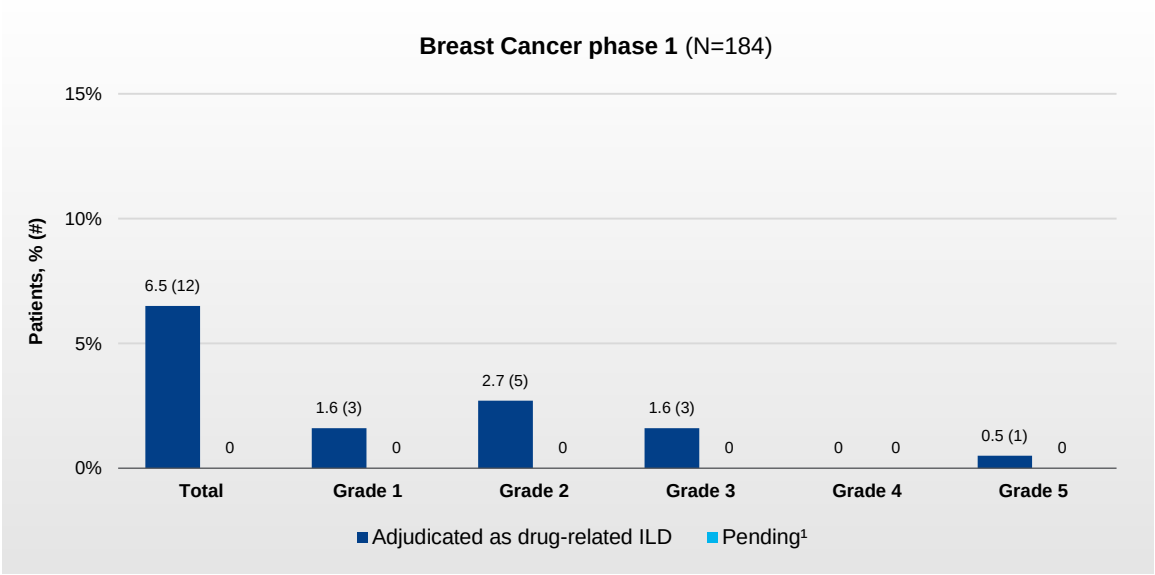
TEAEs in ≥20% of patients, N=57



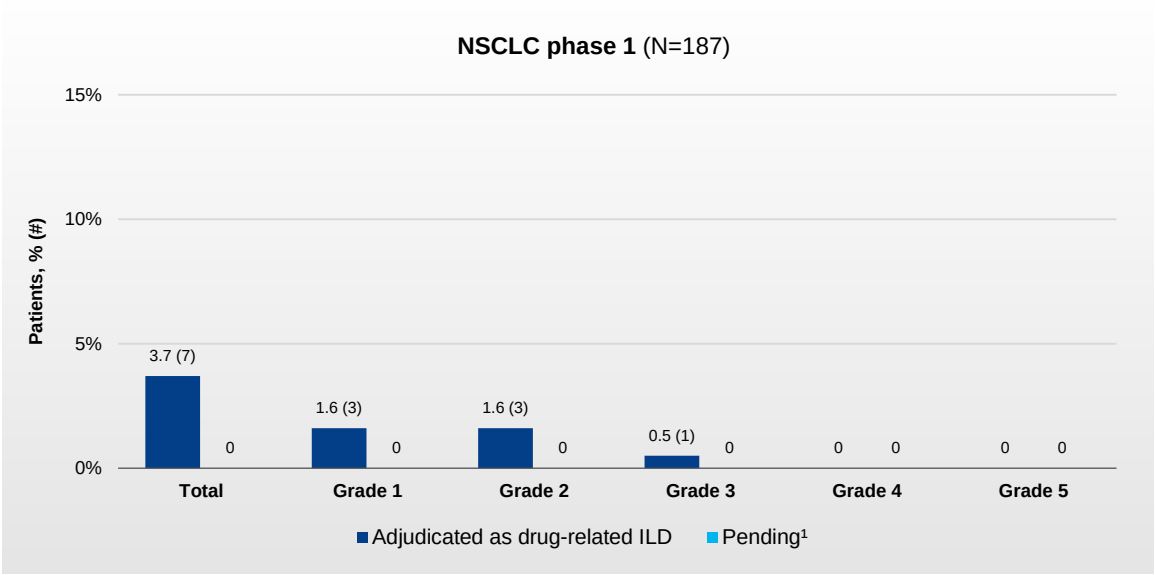
Source: Yu et al., ESMO 2020. U31402-U102 (NCT03260491)

U3-1402: Cumulative ILD data by tumor type
As of November 15, 2020

Patients with CTCAE grade from ILD AC



Patients with CTCAE grade from ILD AC



[1] Investigator reported grades

Early ADC programs

Asset	Target	Potential indications	Status
DS-7300	B7-H3 (DAR ≈ 4)	Solid tumors (SCCHN, NSCLC, Esophageal, etc.)	FIH: October 2019 Delivery model: collaboration with Sarah Cannon, unselected subjects Current status (Phase 1): completed dose level 6 (8 mg/kg); no DLT. Early Clinical Signal with confirmed responses
DS-6157	GPR20 (DAR ≈ 8)	GIST	FIH: May 2020 Delivery model: collaboration with Sarah Cannon; led by Dana Farber Current status (Phase 1): 4th dose level. No DLT.
DS-6000	CDH6* (DAR ≈ 8)	RCC, Ovarian	FIH: FY2020 Q4 (estimated) Delivery model: collaboration with Sarah Cannon
DS-3939	TA-MUC1	Solid tumors	FIH: FY2022 (estimated)

*CDH6: cadherin 6

Major R&D Pipeline: 3 ADCs

As of January 2021

Daiichi-Sankyo

Phase 1		Phase 2		Phase 3	Submitted
(JP/US) NSCLC, TNBC TROPION-PanTumor01	(TBD) HER2+ BC 2L~/1L DESTINY-Breast07	(JP/US/EU/Asia) NSCLC (w actionable mutation) TROPION-Lung05	(US/EU/Asia) TNBC (durvalumab combo) BEGONIA	(JP/US/EU/Asia)HER2+ BC 3L DESTINY-Breast02	(EU)HER2+BC 3L DESTINY-Breast01
(JP/US) NSCLC (w/o actionable mutation, pembrolizumab combo) TROPION-Lung02	(TBD) HER2 low BC chemo naïve/ post chemo DESTINY-Breast08	(JP/US) EGFRm NSCLC HERTHENA-Lung01	(US/EU) HER2+ GC 2L DESTINY-Gastric02	(JP/US/EU/Asia) HER2+ BC 2L DESTINY-Breast03	(US)HER2+GC 3 L DESTINY-Gastric01
(JP/US) NSCLC (w/o (actionable mutation, durvalumab combo) TROPION-Lung04	(US/EU/Asia) HER2+ GC combo, 2L ~/1L DESTINY-Gastric03	(JP/US/EU) HER3+ CRC	(JP/US/EU)HER2+/mutated NSCLC DESTINY-Lung01	(JP/US/EU/Asia) HER2 low BC 3L~ DESTINY-Breast04	
(JP/US/EU/Asia) NSCLC	(EU/Asia)HER2+ NSCLC (durvalumab combo) DESTINY-Lung03		(JP/US/EU)HER2+/mutated NSCLC DESTINY-Lung02	(JP/US/EU/Asia) HER2+ BC post neoadjuvant DESTINY-Breast05	
(JP/US)EGFRm NSCLC (osimertinib combo)	(US/EU) BC, bladder (nivolumab combo)		(US/EU/Asia) NSCLC(durvalumab combo) HUDSON	(JP/US/EU/Asia) HER2 low BC chemo naive DESTINY-Breast06	
(JP/US) HER3+ BC	(US/EU) BC, NSCLC (pembrolizumab combo)		(JP/US/EU) HER2+ CRC DESTINY-CRC01	(JP/US/EU/Asia) NSCLC(w/o actionable mutation) TROPION-Lung01	
			(US/EU/Asia) HER2 mutated tumor DESTINY-PanTumor01		
			(US/EU/Asia) HER2 expressing tumor DESTINY-PanTumor02		

DS-8201 HER2-directed ADC

DS-1062 TROP2-directed ADC

U3-1402 HER3-directed ADC

BC: breast cancer, CRC: colorectal cancer, GC: gastric cancer, NSCLC: non-small cell lung cancer, TNBC: triple negative breast cancer

: Breakthrough Designation (US) : Orphan drug designation (JP/US/EU)

Major R&D Pipeline: Alpha

As of January 2021

Daiichi-Sankyo

Phase 1		Phase 2	Phase 3	Submitted
DS-7300 (JP/US) B7-H3-directed ADC Solid tumors	**DS-3201** (JP/US) EZH1/2 inhibitor Non-Hodgkin's lymphomas (PTCL)	**DS-3201** (JP) EZH1/2 inhibitor ATL/L	**Quizartinib** (JP/US/EU/Asia) FLT3 inhibitor 1L AML QuANTUM-First	**Axicabtagene ciloleucel Axi-Cel™** (JP) Anti CD19 CAR-T cells R/R B-cell lymphoma
DS-6157 (JP/US) 抗GPR20 ADC GIST	**DS-3201** (US) EZH1/2 inhibitor AML, ALL	**DS-1001** (JP) Mutant IDH1 inhibitor Glioma	**Pexidartinib** (JP/Asia) CSF-1/KIT/FLT3 inhibitor Tenosynovial giant cell tumor	**DS-1647 (G47Δ)** (JP) Oncolytic HSV-1 Malignant glioma IIS
DS-1055 (JP/US) Anti-GARP antibody Solid tumors	**PLX2853** (US) BET inhibitor AML	**DS-5141** (JP) ENA oligonucleotide DMD	**Mirogabalin** (JP/Asia) $\alpha_2\delta$ Ligands Central neuropathic pain	**Edoxaban** (JP) FXa inhibitor AF in the very elderly
DS-2741 (JP) Anti-Orai1 antibody Atopic dermatitis	**PLX2853** (US) BET inhibitor Solid tumor	**DS-1211** (US) TNAP inhibitor Pseudoxanthoma elasticum	**Esaxerenone** (JP) MR blocker Diabetic nephropathy	**Prasugrel** (JP) ADP receptor inhibitor Ischemic stroke
	PLX2853 (US) BET inhibitor Gynecologic neoplasms, ovarian cancer		**VN-0102/JVC-001** (JP) Measles mumps rubella combined vaccine	**VN-0107/MEDI3250** (JP) Live attenuated influenza vaccine nasal spray
	PLX2853 (US) BET inhibitor Prostate cancer			

Oncology

Specialty medicine

Vaccine

AF: atrial fibrillation, ALL: acute lymphocytic leukemia, AML: acute myeloid leukemia, ATL/L: adult T-cell leukemia/lymphoma, DMD: Duchenne muscular dystrophy, GIST: gastrointestinal stromal tumor, 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

: SAKIGAKE Designation (JP) : Orphan drug designation (JP/US/EU)

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