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FY2021 Q1 Financial Results Presentation

DAIICHI SANKYO CO., LTD.

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Director, Executive Officer, CFO

July 30, 2021

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Agenda

1 FY2021 Q1 Financial Results

2 Business Update







Overview of FY2021 Q1 Results



				(Bn JPY)
		FY2020 Q1 Results	FY2021 Q1 Results	ΥοΥ
Revenue		236.9	264.1	+11.4% 27.1
Cost of sales		82.2	85.2	2.9
SG&A expenses		71.8	81.2	9.4
R&D expenses		48.9	54.0	5.2
Core operating profit		34.1	43.7	+28.2% 9.6
Other revenue		0.1	2.1	2.0
Other expenses		0.0	0.0	-0.0
Operating profit		34.1	45.8	+34.1% 11.6
Profit before tax		41.4	47.1	5.7
Profit attributable to owners of the Company		31.9	35.2	+10.6% 3.4
Currency	USD/JPY	107.62	109.49	+1.87
Rate	EUR/JPY	118.47	131.95	+13.48

As an indicator of ordinary profitability, "core operating profit" which excludes temporary gains and losses (other revenue and other expenses) from operating income is disclosed. Gains and losses 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 gains and losses".

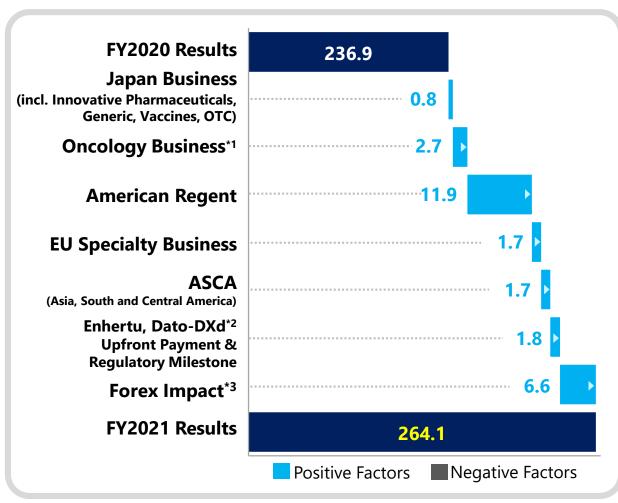
Temporary gains and losses are excluded from results and forecast for cost of sales, SG&A expenses and R&D expenses shown in the list above.

Revenue



(Bn JPY)

Increased by 27.1 Bn JPY (Increased by 20.5 Bn JPY excl. forex impact)



*1 Revenue for Daiichi Sankyo, Inc. and Daiichi Sankyo Europe's oncology products *2 Dato-DXd: Datopotamab deruxtecan (DS-1062)

*3 Forex impact USD: +0.9, EUR : +3.5, ASCA: +2.2

Positive Factors		Negative Factors	
Japan Business Unit Lixiana Tarlige Enhertu Daiichi Sankyo Espha Ezetimibe AG, Memantine AG etc Daiichi Sankyo Healthcare Roxionin	+3.1 +2.8 +2.0 +2.5 +1.1	Memary -10 Vaccines business -1 Rotarix	.5
Oncology Business⁺¹ Unit Enhertu	+5.6	Olmesartan -2	.2
American Regent Unit Injectafer GE injectables	+5.2 +5.1		
EU Specialty Business Unit Lixiana	+4.6	Gain on sales of transferring	.2
Enhanty Data DVd*2 Unfrant	Daymaar	t & Dogulatowy Milectore	

Enhertu, Dato-DXd^{*2} Upfront Payment & Regulatory Milestone

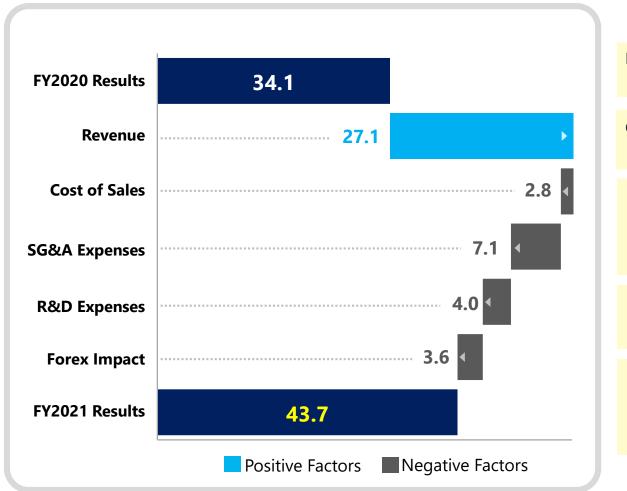
Dato-DXd upfront payment ----- +1.5

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Core Operating Profit



Increased by 9.6 Bn JPY (Increased by 6.6 Bn JPY excl. forex impact)



(Bn JP	Y)
Revenue +27.1 incl. forex impact of +6.6	
Cost of Sales +2.8 (Profit decreased) Improvement in cost of sales ratio by change in product mix	
SG&A Expenses +7.1 (Profit decreased) Increase in expenses related to Enhertu due to an increase in profit share o gross profit with AstraZeneca	f
R&D Expenses +4.0 (Profit decreased) Increase in 3ADCs* R&D investments	
Forex Impact+3.6 (Profit decreased)Cost of Sales+0.1SG&A Expenses+2.3R&D Expenses+1.2	

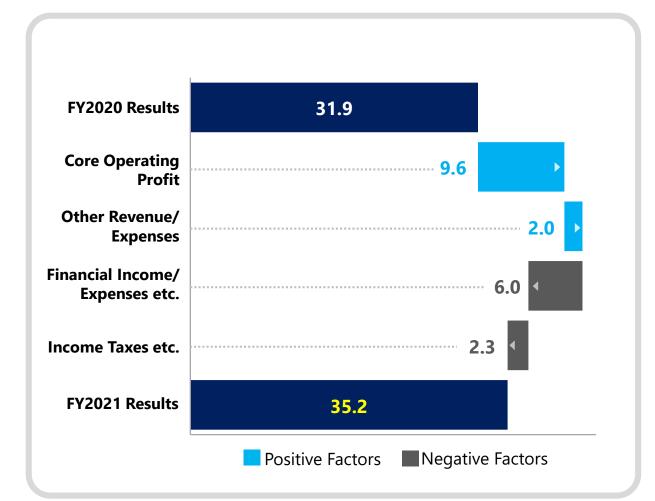
* 3ADCs: 1) Enhertu, Trastuzumab deruxtecan (T-DXd, DS-8201), 2) Datopotamab deruxtecan (Dato-DXd, DS-1062) and 3) Patritumab deruxtecan (HER3-DXd, U3-1402)

Profit Attributable to Owners of the Company



(Bn JPY)

Increased by 3.4 Bn JPY



Other Revenue/Expenses -2.0 (Profit increased) FY2021: Gains related to sale of Osaka logistics center	-2.1
Financial Income/Expenses etc. +6.0 (Profit Decreased)	
 FY2020: Financial income due to decrease in contingent consideration of Ambit/quizartinib acquisition 	+4.7
Deterioration in forex gains/losses	+0.6

Income Taxes etc. +2.3 (Profit Decreased)

	FY2020 Q1	FY2021 Q1	YoY
Profit before Tax	41.4	47.1	+5.7
Income Taxes etc.	9.6	11.8	+2.3
Tax rate	23.1%	25.2%	+2.1%

Revenue: Business Units (incl. Forex Impact)



				(Bn JPY)
		FY2020 Q1	FY2021 Q1	ΥοΥ
		Results	Results	
Japan Business		130.2	129.1	-1.1
Daiichi Sankyo Healthcare		14.3	15.4	+1.1
Oncolgy Business		11.6	14.5	+2.9
Enhertu		5.0	10.8	+5.8
Turalio		0.3	0.6	+0.3
American Regent		26.5	39.1	+12.6
Injectafer		9.4	14.9	+5.4
Venofer		6.9	7.9	+1.0
GE injectables		8.5	13.8	+5.3
EU Speciality Business		27.7	32.7	+5.0
Lixiana		16.4	23.4	+7.0
Nilemdo/Nustendi		-	0.7	+0.7
Olmesartan		5.2	5.6	+0.4
ASCA (Asia, South and Cer	ntral America)	22.5	26.5	+3.9
Currency	USD/JPY	107.62	109.49	+1.87
Rate	EUR/JPY	118.47	131.95	+13.48

Revenue: Major Products in Japan



				(Bn JPY)
		FY2020 Q1 Results	FY2021 Q1 Results	ΥοΥ
Lixiana	anticoagulant	19.8	22.9	+3.1
Nexium	ulcer treatment	19.9	19.7	-0.2
Pralia	treatment for osteoporosis/ inhibitor of the progression of bone erosion associated with rheumatoid arthritis	8.7	9.2	+0.5
Tarlige	pain treatment	4.3	7.1	+2.8
Tenelia	type 2 diabetes mellitus treatment	6.6	6.4	-0.2
Ranmark	treatment for bone complications caused by bone metastases from tumors	5.0	5.1	+0.2
Loxonin	anti-inflammatory analgesic	6.2	5.8	-0.4
Vimpat	anti-epileptic agent	3.8	4.5	+0.7
Canalia	type 2 diabetes mellitus treatment	3.9	4.3	+0.4
Efient	antiplatelet agent	3.8	4.1	+0.3
Enhertu	anti-cancer agent (HER2-directed antibody drug conjugate)	0.2	2.2	+2.0
Rezaltas	antihypertensive agent	3.6	3.3	-0.3
Inavir	anti-influenza agent	0.6	0.3	-0.3

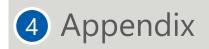
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1 FY2021 Q1 Financial Results

2 Business Update







ENHERTU[®]: Revenue



(Bn JPY)

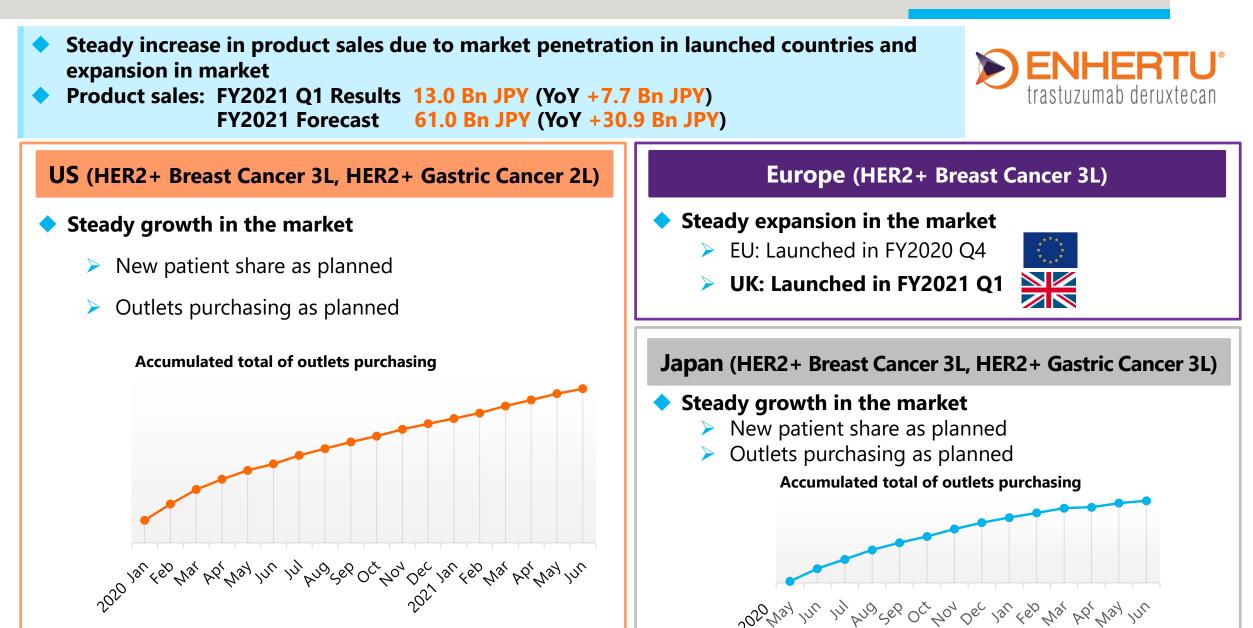
		FY2021 Q1 F	Results	FY2021 Forecast <a>Reference		
			ΥοΥ	(as of Jul.)	vs. as of Apr.	Consideration
Product Sales		13.0	7.7	61.0	-8.4	-
	Japan	2.2	2.0	13.4	-	-
	US	9.6	4.6	42.4	-8.0	-
	Europe	1.2	1.2	5.1	-0.4	-
	ASCA	-	-	0.2	-	-
Up	front payment	2.5 ^{*1}	-	9.8 ^{*1}	-	149.0
Re	gulatory milestone payment	0.6 *1	0.3	2.2 ^{*1}	-2.6	33.7
	US HER2+ Breast Cancer 3L	0.2	-	0.9	-	13.7
	EU HER2+ Breast Cancer 3L	0.1	0.1	0.5	-	7.9
	US HER2+ Gastric Cancer 2L + 3L	0.2	0.2	0.8	-	12.1
	US HER2+ or HER2 Mutant NSCLC 2L	-	-	-	-2.6 ^{*2}	-
	Total	16.0	8.1	73.1	-11.0	182.7

*1 Revenue recognized in each period

*2 Revenue based on the assumption that milestone will be achieved in FY2021; Expected consideration converted with forex rate of 105 JPY to 1 USD : 13.1 billion yen

ENHERTU[®]: Performance in Each Region





Japan: New Product Approval



Oncolytic virus G47Δ* (product name: DELYTACT®) was approved in June 2021, which was co-developed with Dr. Todo of the Institute of Medical Science, The University of Tokyo
 The first oncolytic virus in the world to target malignant glioma

- Generic name: teserpaturev
- Indication: malignant glioma
 - > Grade III and grade IV among glioma which originates in glial cells in brain tissue
 - > Estimated number of new patients in Japan: around 2,800 patients annually
- Overview of the approval
 - The approval is primarily based on the results of Japan Ph2 study (investigator initiated study) in patients with residual or recurrent glioblastoma conducted by Dr. Todo of the Institute of Medical Science, The University of Tokyo
 - Received conditional and time-limited approval which requires verification of clinical benefit and safety within 7 years for all patients treated with DELYTACT[®]

*G47∆

The third generation oncolytic herpes simplex virus type 1 created by Dr. Todo and his colleagues at the Institute of Medical Science, The University of Tokyo. DELYTACT[®] has triple mutation within the viral genome and is designed to replicate selectively in cancer cells.



1 FY2021 Q1 Financial Results

2 Business Update

3 R&D Update





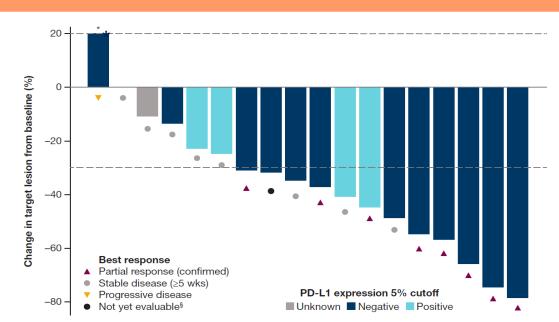


3ADCs update
Alpha update
WCLC/ESMO 2021
News Flow

ENHERTU[®]: Breast cancer



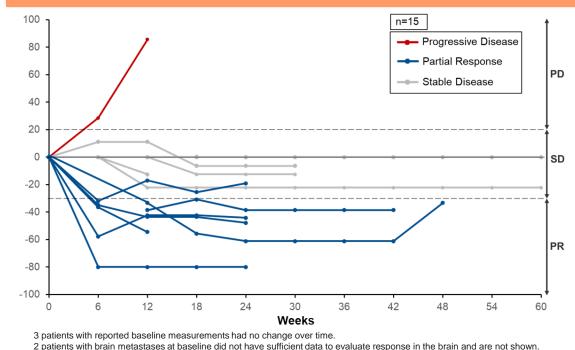
- **DESTINY-Breast03 study** (HER2+, 2L, Ph3): TLR of interim analysis anticipated in FY2021 Q2 as originally planned
- DESTINY-Breast09 study (HER2+, 1L, Ph3): First patient dosed in June
- Presented interim results of BEGONIA study and subgroup analysis data of DESTINY-Breast01 study in patients with brain metastasis at ASCO 2021



BEGONIA interim results (durvalumab combo)

* If the best percentage change from baseline of target lesions cannot be calculated due to progression, withdrawal or death, the value is imputed at +20% ‡ Number of subjects that had the opportunity to complete at least two on-treatment disease assessments or have PD or death

The confirmed ORR was 66.7% in Arm 6 (HER2 low/ER-/PR-BC, ENHERTU[®]+durvalumab) of BEGONIA study.



Durable responses were observed in patients with stable, treated brain metastases.

DESTINY-Breast01 brain met subgroup analysis

BC: breast cancer, ER: estrogen receptor, ORR: objective response rate, PR: progesterone receptor, TLR: top line results

ENHERTU[®]: Gastric cancer

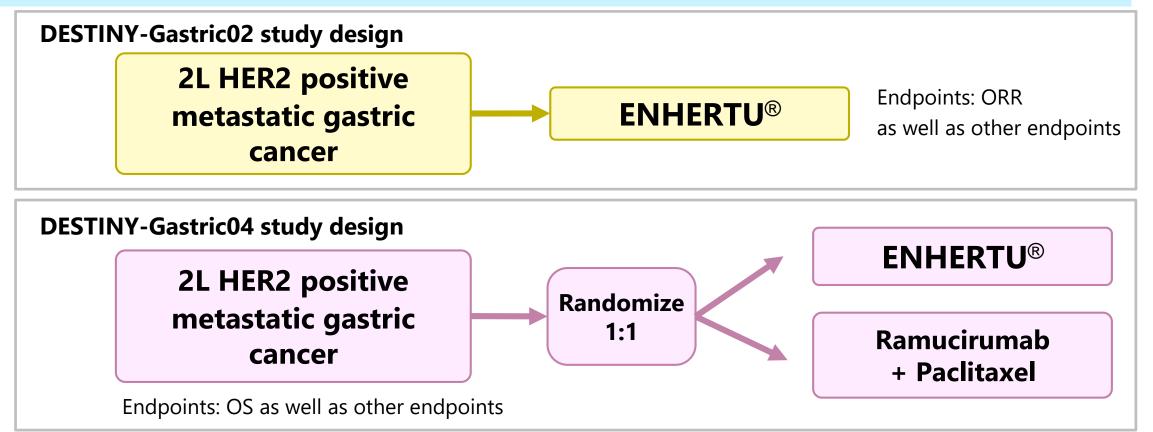


DESTINY-Gastric02 study (HER2+, 2L, Ph2, US/Europe): TLR obtained in June

Filing strategy currently under discussion with European health authority in FY2021 2H.

DESTINY-Gastric04 study (HER2+, 2L, Ph3, global): First patient dosed in June

- Ph3 study with overall survival as primary endpoint in patients with 2nd line metastatic gastric cancer
- The study data is required for filing in Japan



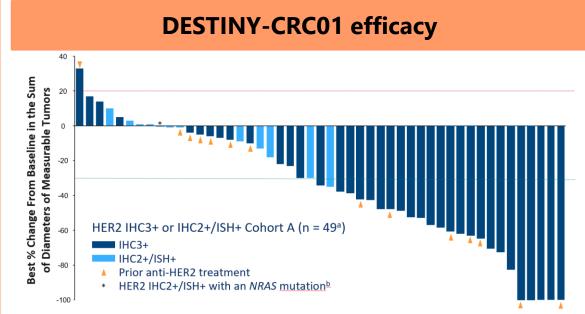
ENHERTU[®]: NSCLC, CRC



DESTINY-Lung01 study (HER2 mutated/overexpressing, 2L+, Ph2): TLR obtained in June

- HER2 mutated: Granted breakthrough therapy designation in US, filing strategy to be discussed with health authorities
- HER2 overexpressing: Development strategy under discussion based on the data

Presented DESTINY-CRC01 study (HER2 expressing, 3L+, Ph2) final results at ASCO 2021



^a4 patients from the full analysis set were excluded since 1 patient had no measurable target lesion and 3 patients had no postbaseline data. ^bBy local assessment.

Promising efficacy profile, ORR 45.3%, mDOR 7 months, mPFS 6.9 months, mOS 15.5 months, were observed in HER2 positive cohort (Cohort A)

DESTINY-CRC01 safety

Adverse Events in ≥20% of Patients

	HER2 IHC3+ or IHC2+/ISH+ Cohort A (n = 53)	HER2 IHC2+/ISH– Cohort B (n = 15)	HER2 IHC1+ Cohort C (n = 18)	Ove (N =	
n (%)	Any Grade	Any Grade	Any Grade	Any Grade	Grade ≥3
Patients with any TEAE	53 (100)	15 (100)	18 (100)	86 (100)	56 (65.1)
Nausea	37 (69.8)	9 (60.0)	7 (38.9)	53 (61.6)	5 (5.8)
Anemia	21 (39.6)	4 (26.7)	6 (33.3)	31 (36.0)	12 (14.0)
Fatigue	21 (39.6)	7 (46.7)	3 (16.7)	31 (36.0)	1 (1.2)
Decreased appetite	18 (34.0)	5 (33.3)	7 (38.9)	30 (34.9)	0
Platelet count decreased	17 (32.1)	4 (26.7)	7 (38.9)	28 (32.6)	8 (9.3)
Vomiting	23 (43.4)	3 (20.0)	1 (5.6)	27 (31.4)	1 (1.2)
Neutrophil count decreased	20 (37.7)	2 (13.3)	4 (22.2)	26 (30.2)	19 (22.1)
Diarrhea	19 (35.8)	0	4 (22.2)	23 (26.7)	1 (1.2)

Interstitial Lung Disease (ILD)

All Patients (N=86)	n (%)
Grade 1	0
Grade 2	4 (4.7)
Grade 3	1 (1.2)
Grade 4	0
Grade 5	3 (3.5) ^a
Any Grade/Total	8 (9.3) ^{<u>b.c</u>}

- Safety profile is consistent with the known safety profile
- Careful monitoring and prompt intervention for ILD are required

AE, adverse events; ILD, interstitial lung disease ^a2 patients were from cohort A, 1 from cohort B. ^b4 patients were from cohort A, 3 from cohort B and 1 from cohort C. ^cILD grades are the highest/most severe grade recorded in a patient.

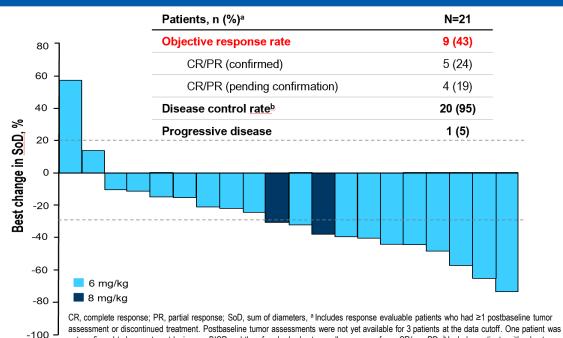
CRC: colorectal cancer, DOR: duration of response, ORR: objective response rate, OS: overall survival, PFS: progression free survival, TLR: top line results

Dato-DXd: Breast cancer, NSCLC



Presented interim results of TROPION-PanTumor01 study TNBC cohort at ESMO BC 2021
 Presented interim results of TROPION-PanTumor01 study NSCLC cohort at ASCO 2021

TNBC cohort interim results



not confirmed to have a target lesion per BICR and therefore had a best overall response of non-CR/non-PD; ^b Includes patients with a best overall response of CR, PR, stable disease, or non-CR/non-PD.

Demonstrated promising efficacy and manageable safety profile in heavily treated patients with metastatic TNBC

NSCLC cohort interim results

Deat Overall Deanance (DICD)

Best Overall Response (BICR)						
	Dato-DXd Dose					
Patients ^a	4 mg/kg (n=50)	6 mg/kg (n=50)	8 mg/kg (n=80)			
ORR, n (%)	12 (24)	13 (26)	19 (24)			
CR/PR	10 (20)	11 (22)	19 (24)			
CR/PR (too early to be confirmed)	2 (4)	2 (4)	0			
DCR, n (%)	38 (76)	35 (70)	64 (80)			
PD, n (%)	7 (14)	10 (20)	7 (9)			
DOR, median (95% Cl), mo	NE (2.8-NE)	10.5 (4.1-NE)	9.0 (5.8-NE)			
PFS, median (95% Cl), mo ^b	4.3 (3.5-8.4)	6.9 (2.7-8.8)	5.2 (4.1-7.1)			

BICR, blinded independent central review; CR, complete response; DCR, disease control rate; DOR, duration of response; NE, not evaluable; ORR, objective response rate; PD, progressive disease; PFS, progression-free survival; PR, partial response.

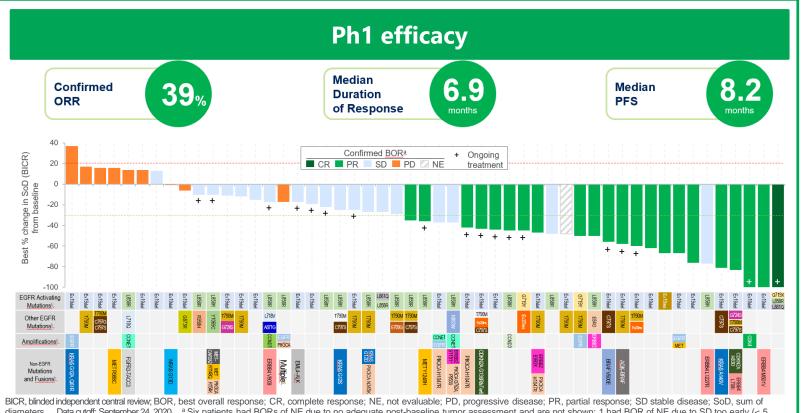
^a Includes response evaluable patients who had ≥1 postbaseline tumor assessment or discontinued treatment. ^b Median PFS was limited by immature duration of follow-up in the 4- and 6-mg/kg dosing cohorts.

Demonstrated promising efficacy and manageable safety profile in patients with advanced or metastatic NSCLC
 The study data and analysis support 6mg/kg as the dose for the pivotal trial

HER3-DXd: NSCLC



EGFR mutated NSCLC Ph1 study (combination with osimertinib): First patient dosed in June
 Presented interim results of Ph1 monotherapy EGFR mutated NSCLC cohort at ASCO 2021



BICR, blinded independent central review; BOR, best overall response; CR, complete response; NE, not evaluable; PD, progressive disease; PR, partial response; SD stable disease; SoD, sum of diameters. Data cutoff: September 24, 2020. ^a Six patients had BORs of NE due to no adequate post-baseline tumor assessment and are not shown; 1 had BOR of NE due to SD too early (< 5 weeks) and is shown with hatched markings ^b Genomic alterations known to be associated with EGFR TKI resistance identified in assays of tumor tissue/ctDNA in blood, collected prior to treatment with HER3-DXd. ^cCDKN2A A143V; PIK3CA E542K, E545K, E726K; ERBB2 K200N; ERBB3 Q847*, Q849*.

Demonstrated promising efficacy in patients with diverse mechanisms of EGFR TKI resistance

Ph1 safety TEAEs grade \geq 3 in \geq 5% of patients (N=81) Platelet count decreased Neutrophil count decreased Fatique Anemia Dyspnea Febrile neutropenia Hypoxia White blood cell count decreased Hypokalemia Lymphocyte count decreased¹ 25% 50% 75% 100% 0%

Data cutoff: September 24, 2020.

^d Includes thrombocytopenia. ^e Includes neutropenia. ^f Includes hemoglobin decreased. ^g Includes leukopenia. ^h Includes lymphopenia.

Demonstrated manageable safety profile and low rate of discontinuations due to adverse events



3ADCs update

Alpha update

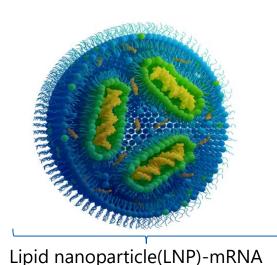
WCLC/ESMO 2021

News Flow

DS-5670 (COVID-19 mRNA vaccine)



Characteristics of DS-5670



DS original cationic lipid is applied

- Most optimized lipid and lipid composition ratio are selected based on efficacy & safety perspectives
- It is expected to be effective against variants as well by targeting Receptor Binding Domain (RBD) instead of full spike protein of SARS-Cov-2

Participating in "Fundamental Research on the Control of a Novel Corona Virus (2019-nCoV)", an initiative supported by the Japan Agency for Medical Research and Development (AMED).
 Initiated Ph1/2 study in March 2021 and completed subject enrollment. Currently evaluating the safety, immunogenicity and recommended dose.

 Planning to initiate active-controlled, non-inferiority confirmatory study this year, enrolling several thousand subjects. Submission for approval and commercialization within CY2022 in the case when all regulatory requirements are satisfied.

DS-3201 (EZH1/2 inhibitor): Presented interim results of NHL Ph1 study at EHA



DS3201-A-J101; NCT02732275

Patients with R/R NHL

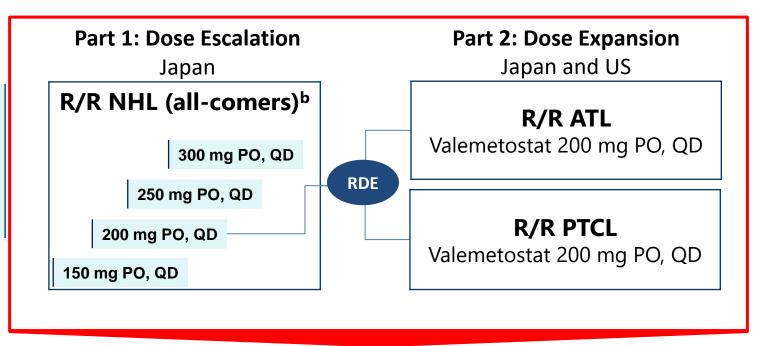
- Age \geq 20 (Japan) or \geq 18 (US) years
- ECOG PS 0 or 1
- Patients with ATL: positive test result for HTLV-1

Primary endpoints

- Safety (including DLTs, TEAEs)
- Recommended phase 2 dose
- Pharmacokinetics

Secondary endpoints

- Safety
- Antitumor effect^a



- Safety analysis: all NHL (N=77)
- Safety and efficacy analyses: T-cell NHL (n=58)
 - PTCL (n=44)
 - ATL (n=14)

^a According to the 2007 revised International Working Group Criteria for Malignant Lymphoma or "Definition, prognostic factors, treatment, and response criteria of adult T-cell leukemia-lymphoma: a proposal from an international consensus meeting." ^b Each dosage was tested with 3 patients.

ATL: adult T-cell leukemia/lymphoma, EHA: European Hematology Association, NHL: non Hodgkin's lymphoma, PTCL: peripheral T-cell lymphoma, R/R: relapsed/refractory

DS-3201 Ph1: Efficacy results



Parameter	All PTCL ^a (N=44)	ATL ^{a,c} (N=14)	
Best response, n (%)			
CR	12 (27.3)	4 (28.6)	
PR	12 (27.3)	4 (28.6)	
SD	5 (11.4)	2 (14.3)	
PD	8 (18.2)	3 (21.4)	
NE	1 (2.3)	0 (0)	
Not done	6 (13.6)	1 (1.7)	
ORR, n (%)	24 (54.5)	8 (57.1)	
95% CI	38.8-69.6	28.9-82.3	
DOR, median, weeks	56.0	_	
(95% CI)	(44.43, –)	(6.14, –)	
TTR, median, weeks	8.14	8.14	
(range)	(4.1-24.1)	(7.3-84.1)	
PFS, median, weeks	52	-	
(95% CI)	(16.14, –)	(8.14, –)	

Best Percent Change From Baseline in Sum of Area in Target Lesions 100 CR Z CRu 80 of Area From Baseline PR SD 60 Relapse/PD 40 20 Sum -20 Best % Change in -40 -60 * * * -80 * * -100 *, ATL; +1, 146.9% increase from baseline; +2, 123.6% increase from baseline

CR, complete response; CRu, complete response unconfirmed; PD, progressive disease; PR, partial response; SD, stable disease

Data cutoff: 2 November 2020. Median follow-up times: PTCL , 19.93 (range, 3.1-68.1) weeks; ATL, 23.07 (range, 3.3-125) weeks.

CR, complete response; DOR, duration of response; ORR, overall response rate; PD, progressive disease; PFS, progression-free survival; PR, partial response; SD, stable disease; TCL, T-cell lymphoma; TTR, time to first response. ^a For PTCL, 42 patients were treated with 200 mg, and 2 were treated with 150 mg. For ATL, 12 patients were treated with 200 mg, and 2 were treated with 150 mg. ^c Consists of 7 patients with acute and 7 patients with lymphomatous subtypes.

> Demonstrated ≥50% ORR and trend for durability of response in relapsed/refractory PTCL and ATL patients who have limited treatment options

DS-3201 Ph1: Most Common TEAEs



Most Common TEAEs (occurring in ≥20% of patients	All Histologies ^c (N=77)		PTCL (N=44)		ATL (N=14)	
with TCL) ^b	All grades	Grade ≥3	All grades	Grade ≥3	All grades	Grade ≥3
Platelet count decreased ^d	47 (61.0)	13 (16.9)	21 (47.7)	5 (11.4)	9 (64.3)	3 (21.4)
Dysgeusia	40 (51.9)	0	20 (45.5)	0	8 (57.1)	0
Anemia	31 (40.3)	9 (11.7)	15 (34.1)	6 (13.6)	5 (35.7)	1 (7.1)
Neutrophil count decreased	27 (35.1)	18 (23.4)	13 (29.5)	8 (18.2)	6 (42.9)	5 (35.7)
Alopecia	26 (33.8)	0	12 (27.3)	0	6 (42.9)	0
WBC count decreased	23 (29.9)	12 (15.6)	10 (22.7)	6 (13.6)	4 (28.6)	3 (21.4)
Diarrhea	22 (28.6)	1 (1.3)	13 (29.5)	0	3 (21.4)	0
Lymphocyte count decreased	22 (28.6)	17 (22.1)	7 (15.9)	6 (13.6)	2 (14.3)	2 (14.3)
ALT increased	16 (20.8)	1 (1.3)	7 (15.9)	0	3 (21.4)	1 (7.1)
Nausea	16 (20.8)	0	11 (25.0)	0	3 (21.4)	0

ALT alanine aminotransferase; BCL, B-cell lymphoma; CTCAE, Common Terminology Criteria for Adverse Events; TEAE, treatment emergent adverse events; WBC, white blood cell. ^a Study sites could choose to enter thrombocytopenia or platelet count decreased as a term. ^b In order of frequency reported for patients with TCL (n=58). ^c Including 19 patients with BCLs. ^d Grade 3 platelet count decreased, CTCAE 5.0 definition: <50,000-25,000/mm³; <50.0-25.0 × 10⁹/L.

- Demonstrated acceptable safety profile by appropriate monitoring and management of adverse events
 - Grade \geq 3 platelet count decrease^a, and thrombocytopenia occurred in 13 patients (16.9%) and 2 patients (2.6%), respectively
 - The median time to platelet count reduction to $\leq 50 \times 10^9$ /L from the first dose was 15 days, and the median time to platelet count recovery to $\geq 50 \times 10^9$ /L was 12 days
 - 6 patients (9.8%) experienced dose interruption or reduction due to platelet count decrease/thrombocytopenia, but no patients discontinued treatment due to platelet count decrease/thrombocytopenia



Clinical studies for ATL/PTCL	Region	Status
 NHL Ph1 study ATL, PTCL and others (NCT02732275/JapicCTI-163173) 	US/JP	 Presented interim data at EHA 2021
R/R ATL Registrational Ph2 study (NCT04102150/JapicCTI-194964)	JP	 Obtained TLR in July Preparation underway for filing in Japan in FY2021 2H
R/R PTCL Registrational Ph2 study VALENTINE-PTCL01 (NCT04703192/jRCT2071200095)	Global	 First patient dosed in June SAKIGAKE designation in Japan

Other Alpha update



Oncology

DS-1594

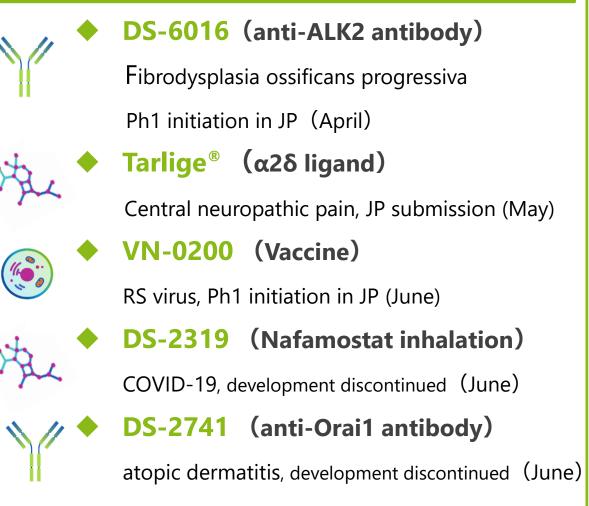
(Menin-MLL binding inhibitor)

AML/ALL Ph1 initiation in US (April)

Pexidartinib
(CSF-1/KIT/FLT3 inhibitor)

Tenosynovial giant cell tumor Ph2 initiation in JP (April)

Specialty Medicine





Alpha update

WCLC/ESMO 2021

News Flow

Planned Presentation at WCLC/ESMO 2021



WCLC 2021:	WCLC 2021: 9/8-14 (Virtual)						
Dato-DXd	Xd TROPION-PanTumor01 (Ph1), NSCLC cohort data update Mini oral presentation						
ESMO 2021: 9	9/16-21 (Virtual)						
Enhertu®	 DESTINY-Lung01 (HER2 mutated/overexpressing, 2L+, Ph2), HER2 mutated cohort data Late breaking session* DESTINY-Breast01 (HER2 positive, 3L, Ph2), updated OS data Poster presentation 						
Dato-DXd	TROPION-PanTumor01 (Ph1 NSCLC cohort), sub-analysis of patients with actionable mutations Late breaking session*						
DS-7300	Solid tumor Ph1/2, Ph1 dose escalation data Oral presentation 						

NSCLC: non small cell lung cancer, OS: overall survival

* Final decision for the acceptance of late breaking abstract will be made after Aug 17

WCLC/ESMO IR event is planned on Sep 22 morning in JP time featuring Ken Takeshita Global R&D Head



Alpha update

WCLC/ESMO 2021

News Flow

FY2021 News Flow



As of July 2021

Planned publications

WCLC (Sep 8-14)					
Dato-DXd	TROPION-PanTumor01: Ph1 NSCLC cohortUpdated data				
ESMO (Sep 16-21)					
Enhertu® DESTINY-Lung01: HER2mutated/overexpressing NSCLC, 2L, • HER2 mutated cohort data* DESTINY-Breast01: HER2 positive BC, 3L, Ph2 • Updated OS data					
Dato-DXd	 <u>TROPION-PanTumor01: Ph1 NSCLC cohort</u> <u>Sub-analysis of patients with actionable mutations*</u> 				
DS-7300	Solid tumor Ph1/2 Ph1 dose escalation data 				

* Final decision for the acceptance of late breaking abstract will be made after Aug 17

Regulatory decisions

Lixiana®	Atrial fibrillation in the very elderly • Japan: FY2021 Q2
Efient®	Ischemic stroke • Japan: FY2021 Q3

Planned regulatory submissions

Enhertu®	DESTINY-Gastric01/02: HER2 positive GC, 2/3L, Ph2 • Europe: FY2021 2H
DS-3201	Registrational Ph2: ATL/L • Japan: FY2021 2H

Key data readouts

Enhertu®	 DESTINY-Breast03: HER2 positive BC, 2L, Ph3 FY2021 Q2 DESTINY-Breast04: HER2 low BC, post chemo, Ph3 FY2021 Q4
Quizartinib	QuANTUM-First: AML, 1L, Ph3 • FY2021 Q3

Underlined: New or updated from ASCO Highlight

AML: acute myeloid leukemia, ATL: adult T-cell leukemia/lymphoma, BC: breast cancer, NSCLC: non small cell lung cancer, OS: overall survival



1 FY2021 Q1 Financial Results

2 Business Update







Major R&D Milestones in FY2021 (3ADCs)



As of July 2021

Project Ta		Target Indications Inhace, study name]		FY2021			
Proj	ject	Target Indications [phase, study name]	Q1	Q2	Q3	Q4	
		HER2+, 2L [P3, DESTINY-Breast03]		TLR anticipated			
	BC	HER2 low, post chemo [P3, DESTINY-Breast04]				TLR anticipated	
		HER2+, 1L [P3, DESTINY-Breast09]	Study started				
ENHERTU [®]	GC	HER2+, 2L [P2, DESTINY-Gastric02]	TLR obtained		Submission anticipated (Europe)		
	GC	HER2+, 2L [P3, DESTINY-Gastric04]	Study started				
		HER2+/mutant [P2, DESTINY-Lung01]	TLR obtained				
	NSCLC	HER2+, combination [P1b, DESTINY-Lung03]		<u>Study start</u> <u>planned</u>			
Dato	-DXd	TNBC, durvalumab combo [P1b/2, BEGONIA]	Study started				
HER3	-DXd	EGFR mutated NSCLC, osimertinib combo [P1]	Study started				

Red underlined: new or updated from FY2020 Q4

BC: breast cancer, GC: gastric cancer, NSCLC: non-small cell lung cancer, TLR: Top Line Results, TNBC: triple negative breast cancer

Major R&D Milestones in FY2021 (Alpha)



Project	Target Indications [phase, study name, region]	FY2021				
Floject	rarget multations [phase, study name, region]	Q1	Q2	Q3	Q4	
Quizartinib	AML, 1L [P3, JP/US/EU/Asia]			TLR anticipated		
Pexidartinib	Tenosynovial giant cell tumor [P2, JP]	Study started				
Teserpaturev/G47∆	Malignant glioma [IIS, JP]	<u>Approved</u>				
DS-3201	ATL/lymphoma [P2 registration, JP]		TLR obtained	Submission anti	cipated (Japan)	
05-5201	PTCL [P2 registration, JP/US/EU/Asia]	Study started				
DS-1594	AML, ALL [P1/2, US]	Study started				
Lixiana [®]	AF in the very elderly [P3, ELDERCARE-AF, JP]		Approval anticipated			
Efient [®]	Ischemic stroke [P3, PRASTRO III, JP]			Approval anticipated		
Tarlige [®]	Central neuropathic pain [P3, JP]	<u>Submitted</u>				
DS-6016	Fibrodysplasia Ossificans Progressiva [P1, JP]	Study started				
VN-0200	RS virus vaccine [P1, JP]	Study started				

Red underlined: new or updated from FY2020 Q4

AF: atrial fibrillation, ALL: acute lymphoblastic leukemia, AML: acute myeloid leukemia, ATL: adult T-cell leukemia, IIS: investigator-initiated study, PTCL: peripheral T-cell lymphoma, TLR: Top Line Results

Major R&D Pipeline: 3ADCs



As of July 2021

Phase 1		Phase 2	Phase 3	<u>Submitted</u>
IP/US) NSCLC, TNBC, HR+ BC ROPION-PanTumor01	(US/EU/Asia) HER2+ BC 2L~/1L DESTINY-Breast07	(US/EU/Asia) TNBC (durvalumab combo) BEGONIA	(JP/US/EU/Asia)HER2+ BC 3L DESTINY-Breast02	
IP/US/EU/Asia) NSCLC w/o actionable mutation, embrolizumab combo) ROPION-Lung02	(US/EU/Asia) HER2 low BC chemo naïve/ post chemo DESTINY-Breast08	(US/EU) HER2+ GC 2L DESTINY-Gastric02	(JP/US/EU/Asia) HER2+ BC 2L DESTINY-Breast03	
IP/US/EU/Asia) NSCLC w/o actionable mutation, urvalumab combo) ROPION-Lung04	(US/EU/Asia) HER2+ GC combo, 2L~/1L DESTINY-Gastric03	(JP/US/EU)HER2+/mutated NSCLC 2L~ DESTINY-Lung01	(JP/US/EU/Asia) HER2 low BC post chemo DESTINY-Breast04	
JS/EU/Asia) TNBC durvalumab combo) EGONIA	(EU/Asia)HER2+ NSCLC (durvalumab combo) 1L DESTINY-Lung03	(JP/US/EU/Asia) HER2 mutated NSCLC 2L~ DESTINY-Lung02	(JP/US/EU/Asia) HER2+ BC post neoadjuvant DESTINY-Breast05	
P/US/EU/Asia) NSCLC	(US/EU) BC, bladder (nivolumab combo)	(US/EU/Asia) NSCLC (durvalumab combo) 2L~ HUDSON	(JP/US/EU/Asia) HER2 low BC chemo naive DESTINY-Breast06	
IP/US)EGFR mutated NSCLC osimertinib combo) IP/US) BC	(US/EU) BC, NSCLC (pembrolizumab combo)	(JP/US/EU) HER2+ CRC 3L DESTINY-CRC01 (JP/US/EU/Asia) HER2+ CRC 3L DESTINY-CRC02 (US/EU/Asia) HER2 mutated tumor DESTINY-PanTumor01 (US/EU/Asia)	(US)HER2+ BC 1L DESTINY-Breast09 (JP/EU/Asia) HER2+ GC 2L DESTINY-Gastric04 (JP/US/EU/Asia) NSCLC (w/o actionable mutation) TROPION-Lung01	
ENHERTU®		HER2 expressing tumor DESTINY-PanTumor02		
Dato-DXd		(JP/US/EU/Asia) NSCLC (w/ actionable mutation) TROPION-Lung05		
HER3-DXd		(JP/US/EU/Asia) EGFR mutated NSCLC HERTHENA-Lung01 (JP/US/EU) CRC 3L		

BC: breast cancer, CRC: colorectal cancer, GC: gastric cancer, NSCLC: non-small cell lung cancer, TNBC: triple negative breast cancer : project in oncology that is planned to be submitted for approval based on the results of phase 2 trials : Breakthrough Designation (US)

Major R&D Pipeline: Alpha



As of July 2021

Phase 1		Phase 2	Phase 3	Submitted
DS-7300 (JP/US) B7-H3-directed ADC Solid tumors	EZH1/2 inhibitor	DS-3201 (JP) EZH1/2 inhibitor ATL/L	Quizartinib (JP/US/EU/Asia) FLT3 inhibitor 1L AML	Tarlige (JP) α²δ Ligands Central neuropathic pain
DS-6157 (JP/US) GPR20-directed ADC GIST DS-6000 (US) CDH6-directed ADC Renal cell carcinoma, ovarian cancer DS-1055 (JP/US) Anti-GARP antibody Solid tumors DS-1211 (US) TNAP inhibitor Pseudoxanthoma elasticum	BET inhibitor	DS-1001 (JP) Mutant IDH1 inhibitor Glioma DS-5141 (JP) ENA oligonucleotide	Pexidartinib (JP/Asia) CSF-1/KIT/FLT3 inhibitor Tenosynovial giant cell tumor Minnebro (JP) MR blocker Diabetic nephropathy VN-0102/JVC-001 (JP) Measles mumps rubella combined vaccine	Lixiana (JP) FXa inhibitor AF in the very elderly Efient (JP) ADP receptor inhibitor Ischemic stroke VN-0107/MEDI3250 (JP) Live attenuated influenza vaccine nasal spray
DS-6016 (JP) Anti-ALK2 antibody Fibrodysplasia Ossificans Progressiva DS-5670 (JP) mRNA vaccine COVID-19	DS-1594 (US) Menin-MLL binding inhibitor AML, ALL VN-0200 (JP) RS virus vaccine RS virus			

Oncology

Specialty medicine

Vaccine

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

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