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Compassion for Patients.™



FY2025 Q2 Financial Results Presentation

DAIICHI SANKYO CO., LTD.

Hiroyuki Okuzawa

President and CEO

October 31, 2025

Forward-Looking Statements



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- 2 FY2025 Forecast
- **3** Business Update
- 4 R&D Update
- 5 Appendix



Overview of FY2025 Q2 Results



(Bn JPY)

	FY2024 Q2 YTD Results	FY2025 Q2 YTD Results	YoY
Revenue	882.7	975.4	+10.5% 92.6
Cost of sales*1	193.0	218.8	25.8
SG&A expenses *1	329.9	381.2	51.3
DXd ADC profit share *2	104.8	133.2	28.4
Other SG&A expenses	225.1	248.0	23.0
R&D expenses *1	193.3	216.8	23.5
Core operating profit*1	166.6	158.6	-4.8%
Temporary income*1	20.3	4.2	-16.1
Temporary expenses*1	0.0	18.5	18.5
Operating profit	186.9	144.2	-42.7
Profit before tax	192.6	163.2	-29.4
Profit attributable to owners of the Company	146.7	130.8	-10.8%
Currency USD/JPY	152.62	146.04	-6.58
Exchange Rate EUR/JPY	165.93	168.06	+2.13

^{*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, settlement, 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 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.

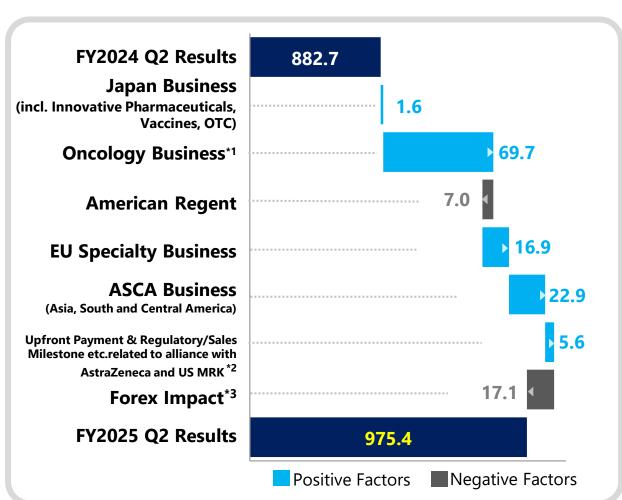
^{*2} DS pays alliance partners 50% of gross profit for the product sales in countries/regions where DS book revenue (excluding Japan) to share profit with the partners.

Revenue



Increased by 92.6 Bn JPY (Increased by 109.7 Bn JPY excl. forex impact)

(Bn JPY)



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

*2 Merck & Co., Inc., Rahway, NJ, USA *3 Forex impact USD: -15.2, EUR: +2.8, ASCA: -4.6

Positive Factors	Negative Factors
Japan Business UnitBelsomra+9.7Datroway+5.6Lixiana+5.3Tarlige+4.4Enhertu+2.4	Realized gains of unrealized
Oncology Business Unit ¹ Enhertu +57.0 Datroway +10.6	
American Regent Unit	Injectafer -4.8 Venofer -1.6
EU Specialty Business Unit Nilemdo/Nustendi +11.8 Lixiana +4.9	
ASCA (Asia, South and Central Americ Enhertu +14.1	a) Business Unit

Upfront Payment & Regulatory/Sales Milestone etc. related to alliance with AstraZeneca and US MRK*2

AstraZeneca +3.3
US MRK +2.3

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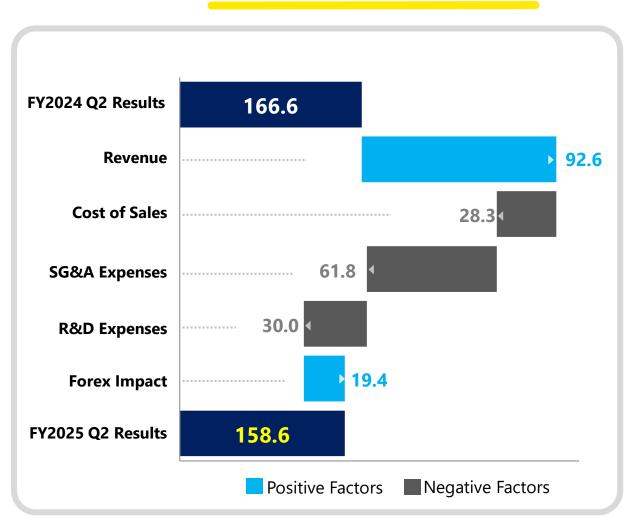
Core Operating Profit



(Bn JPY)

Decreased by 8.0 Bn JPY (Decreased by 10.4 Bn JPY excl. forex impact)

Revenue



incl. forex impact of -17.1

Cost of Sales +28.3

Increase in expenses related to sales expansion
Increase due to write-down of Inventories, etc

SG&A Expenses +61.8

Increase in expenses related to Enhertu and Datroway
Due to an increase in profit share of gross profit with AstraZeneca

R&D Expenses +30.0

Increase in 5DXd ADCs*1 R&D investments

+92.6

Forex Impact*2 -19.4 (Profit Increased)

Cost of Sales

SG&A Expenses

R&D Expenses

-2.5

-10.5

-6.4

*2 Forex Impact related to revenue (-17.1) is not included

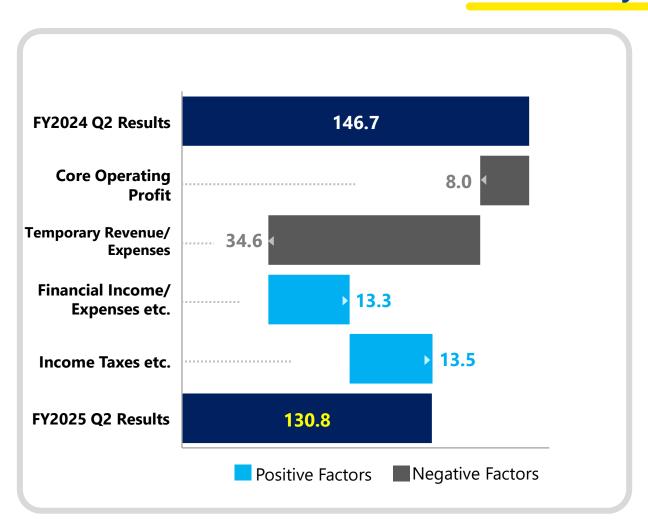
^{*1} ENHERTU®: trastuzumab deruxtecan (International Nonproprietary Name: INN), T-DXd, DS-8201 (HER2-directed ADC), **Datroway**®: datopotamab deruxtecan (INN), DS-1062 (TROP2-directed ADC), **HER3-DXd**: patritumab deruxtecan (INN), U3-1402 (HER3-directed ADC), **I-DXd**: ifinatamab deruxtecan (INN), DS-7300 (B7-H3-directed ADC), **R-DXd**: raludotatug deruxtecan, DS-6000 (CDH6-directed ADC)

Profit Attributable to Owners of the Company



Decreased by 15.9 Bn JPY

(Bn JPY)



	FY2024 Q2 Results	FY2025 Q2 Results	YoY
Temporary Income	20.3*1	4.2 ^{*2}	-16.1
Temporary Expenses	0	18.5 ^{*3}	+18.5

- *1 Gains on stock transfer of Daiichi Sankyo Espha (16.3)
- *2 Incomes related to litigation with former shareholders of Ranbaxy(4.2)
- *3 CMO Compensation Fee (12.7) / Write-down of Inventories of Datroway/HER3-DXd(4.6)

Financial Income/Expenses etc. +13.3 (Profit Increased)

- Improvement in forex gains/losses +13.4
- Improvement in investment securities +2.2 valuation gains/losses
- Decrease in interest income -3.1

Income Taxes etc. -13.5 (Profit Increased)

	FY2024 Q2 Results	FY2025 Q2 Results	YoY
Profit before Tax	192.6	163.2	-29.4
Income Taxes etc.	45.9	32.4	-13.5
Tax rate	23.8%	19.9%	



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Revision to the forecast



(Bn JPY)

	FY2025 Forecast	FY2025 Forecast	vs. Forecast
	(As of Apr.)	(As of Oct.)	
Revenue	2,000.0	2,100.0	+100.0
Cost of sales *1	430.0	460.0	+30.0
SG&A expenses *1	765.0	830.0	+65.0
DXd ADC profit share *2	265.0	300.0	+35.0
Other SG&A expenses	500.0	530.0	+30.0
R&D expenses *1	455.0	460.0	5.0
Core operating profit *1	350.0	350.0	+0.0
Temporary income *1	-	5.0	+5.0
Temporary expenses *1	-	20.0	+20.0
Operating profit	350.0	335.0	-15.0
Profit before tax	370.0	355.0	-15.0
Profit attributable to owners of the Company	300.0	288.0	-12.0

Revenue

- : Increase by forex impact
- : Sales expansion of Datroway in US and JPN, Enhertu in US, etc.
- : Sales decrease of Injectafer and Venofer in ARU, etc.
- : Decrease due to regulatory milestones payment for Enhertu

Cost of Sales

- : Increase due to upward revision of revenue forecast and forex impact
- : Increase due to write-down of Inventories, etc.

SG&A Expenses

- : Increase by forex impact
- : Increase due to an increase in profit share of gross profit with AstraZeneca, etc.

R&D Expenses

: Increase by forex impact, etc

Currency	USD/JPY	140.00	148.02	+8.02
Exchange Rate	EUR/JPY	160.00	169.03	+9.03

Forex Impact vs. as of Apr.

Revenue : +68.0 Bn JPY Core operating profit : +6.0 Bn JPY

Assumption of currency rate for Q3 and Q4: USD/JPY 150, EUR/JPY 170

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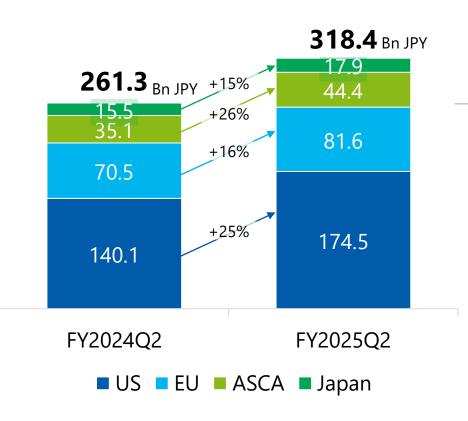
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Performance



Achieved First Billion-Dollar Quarter Maintained No.1 New Patient Share across Major Countries and Regions



Q2 YTD Global Product Sales Result **318.4 Bn JPY**YoY **+57.1 Bn JPY (+21.9%)** Progress vs Apr. Forecast **48.1%**

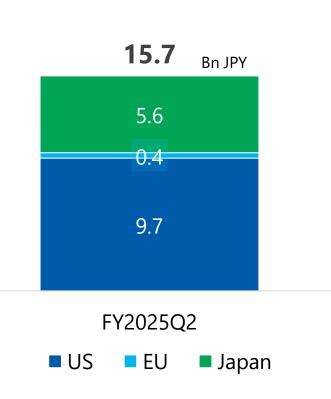
- ◆ Updated annual forecast
 - Oct. forecast 694.2 Bn JPY (vs Apr. forecast +32.1 Bn JPY)
- ◆ HR positive, HER2 low or ultralow BC (chemo naïve)
 - Solid progress in market penetration in US and Germany
 - Maintained No.1 new patient share in the US
 - Germany led the sales growth in EU as the only launched market
 - Indication launched in Japan in Aug.



Performance



Robust Sales Growth over the Initial Forecast in US and Japan Treated Over 2,000 Patients Globally since Launch



Q2 YTD Global Product Sales Result **15.7 Bn JPY**YoY **+15.7 Bn JPY (-%)** Progress vs Jul. Forecast **72.9%**

- ◆ Updated annual forecast: Oct. forecast **37.8 Bn JPY** (vs Jul. forecast +16.2 Bn JPY)
 - ➤ Larger number of eligible patients than expected due to high unmet needs
- ◆ HR positive and HER2 negative BC: Steady sales growth in US and Japan
 - > Raised awareness of safety management such as stomatitis
 - > 35+ countries and regions regulatory approved to date
- ◆ EGFR-mutated NSCLC: Strong sales uptake in the US as the only TROP2-directed ADC approved





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5DXd ADCs Update

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News Flow

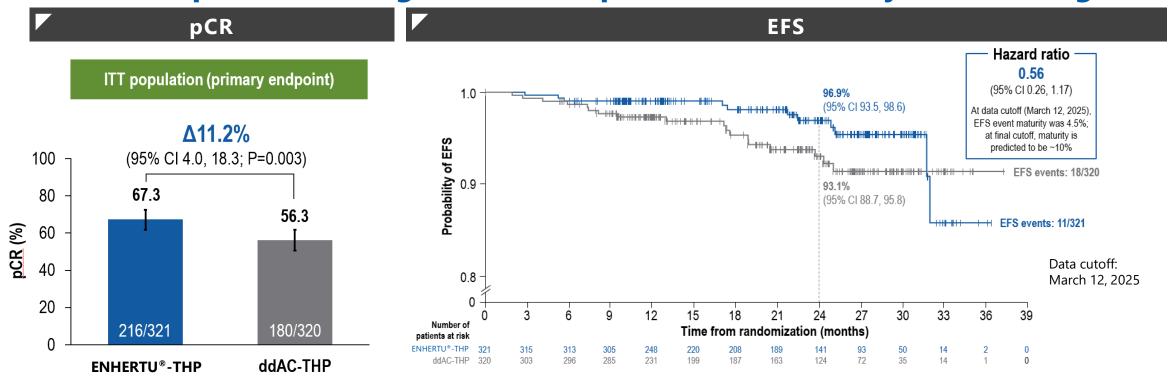


Advancing ENHERTU® into Early HER2+ Breast Cancer



DESTINY-Breast11 Ph3 (ESMO 2025)

ENHERTU® followed by THP showed statistically significant and clinically meaningful improvement in pCR rate in high-risk HER2 positive eBC neoadjuvant setting



- ENHERTU®-THP arm showed 11.2% improvement in pCR rate compared to the ddAC-THP arm (95% CI 4.0-18.3)
- ENHERTU®-THP arm showed an early positive trend in EFS compared to the ddAC-THP arm (HR: 0.56; 95% CI 0.26-1.17)
- The safety profile of ENHERTU®-THP arm was favorable compared to the ddAC-THP arm, lower rates of Grade ≥3 AEs, serious AEs, and AEs leading to dose reductions/interruptions. ILD rates were low and similar between the two arms

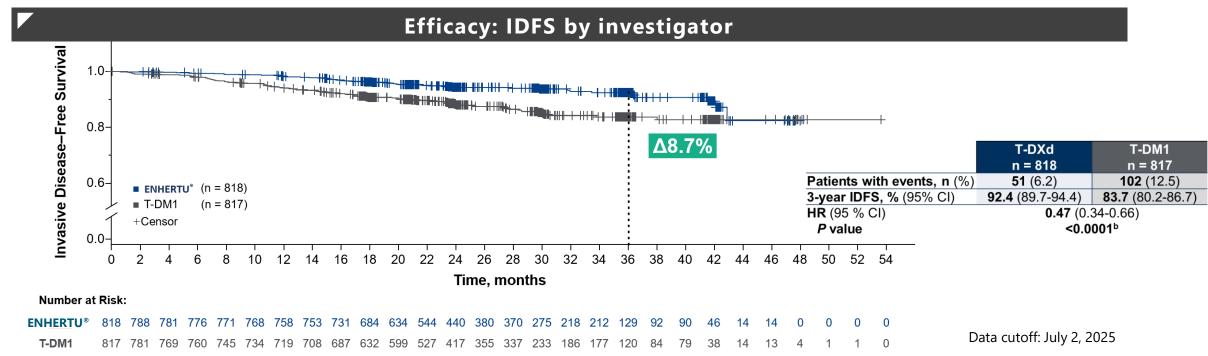


Advancing ENHERTU® into Early HER2+ Breast Cancer



DESTINY-Breast05 Ph3 (ESMO 2025)

ENHERTU® demonstrated a clinically meaningful and statistically significant benefit in patients with high-risk HER2 positive eBC following neoadjuvant therapy



- ENHERTU® showed a three-year IDFS rate of 92.4%, reduced the risk of invasive disease recurrence or death by 53 % (95CI: 0.34-0.66; p<0.0001) compared to T-DM1
- Clinically meaningful benefit was observed in additional secondary endpoints of DRFI (HR, 0.49 [95% CI, 0.34-0.71]) and BMFI (HR, 0.64 [0.35-1.17])
- The overall safety profiles of ENHERTU® and T-DM1 were generally manageable with no new safety signals



Regulatory Updates



DESTINY-Breast06, DESTINY-Breast09, DESTINY-Breast11 etc.

Breast cancer-led indication expansion in each country and region

HR positive and HER2 low or ultralow BC (chemo naïve) (DESTINY-Breast06)

■ Aug 2025: Approved in Japan

HER2 positive BC 1L (DESTINY-Breast09)

- Sep 2025: Filing accepted in the US and Priority Review granted (PDUFA date: Jan 23, 2026)
- Oct 2025: Filing accepted in Japan

HER2 positive BC neoadjuvant therapy (DESTINY-Breast11)

- Aug 2025: Filing accepted in China and Priority Review granted
- Oct 2025 : Filing accepted in the US (PDUFA date: May 18, 2026)

HER2 expressing solid tumors 2L+ (DESTINY-PanTumor02 etc.)

■ Sep 2025: Filing accepted in the EU

HER2 positive GC 2L (DESTINY-Gastric04)

■ Jul 2025: Filing accepted in China and Priority Review granted

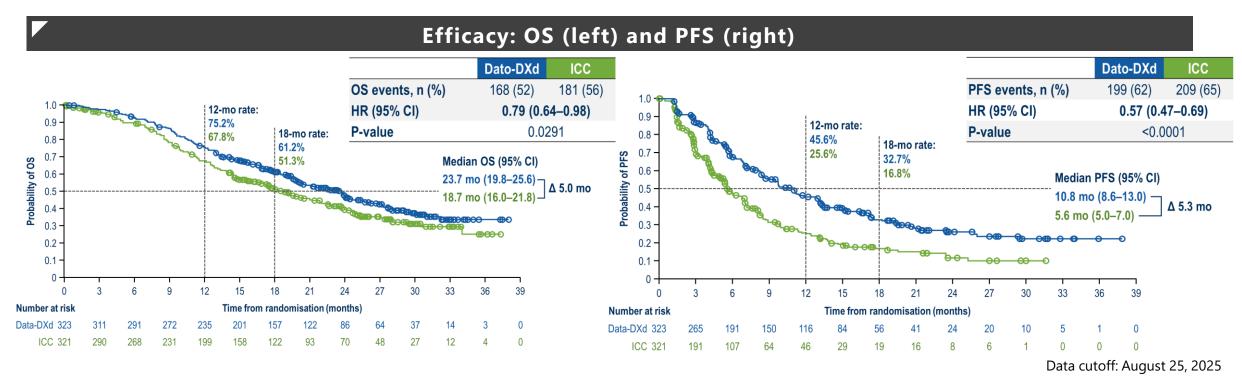


Paving the way for the new 1L SOC in mTNBC



TROPION-Breast02 Ph3 (ESMO 2025)

TROPION-Breast02 met both dual primary endpoints OS and PFS in patients with mTNBC for whom immunotherapy is not an option



- DATROWAY® demonstrated a statistically significant and clinically meaningful improvement in OS and PFS with a 5.0-month improvement in median OS and 5.3-month improvement in median PFS
- ORR with DATROWAY® was more than double that with chemotherapy (62.5% vs. 29.3%)
- The safety profile of DATROWAY® was manageable and generally consistent with the known profile



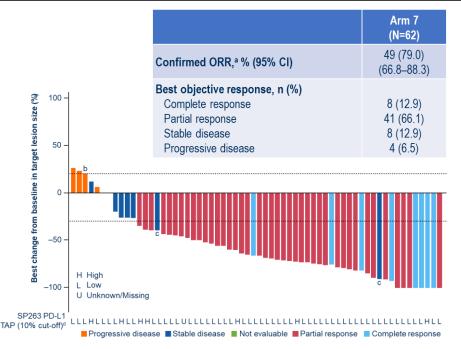
Combination of DATROWAY® + Durvalumab in TNBC

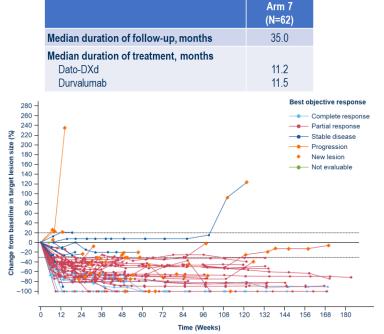


BEGONIA Ph1b/2 (ESMO 2025)

Combination of DATROWAY® + durvalumab demonstrated robust antitumor activity in patients with TNBC regardless of PD-L1 expression

Antitumor Activity in Arm 7: ORR (left), DOR (right)





Median **DOR** was 17.6 months (95% CI 10.5–27.3) Median **PFS** was 14.0 months (95% CI 11.0–21.1)

- Presented results from arm 7 with any PD-L1 expression and arm 8 with high PD-L1 expression at ESMO 2025
- cORR: 79.0% (66.8-88.3, 49/62) in arm 7 and 81.8% (64.5-93.0, 27/33) in arm 8
- The safety profile of the combination was manageable with no new safety signals
- Across both arms, rates of adjudicated drug-related ILD were low, with no Grade ≥3 events
 - TROPION-Breast05, Ph3 study to evaluate the combination of DATROWAY® + durvalumab in PD-L1 positive TNBC is ongoing

Data cutoff: November 29, 2024



New Study to Address an Unmet Need in UC



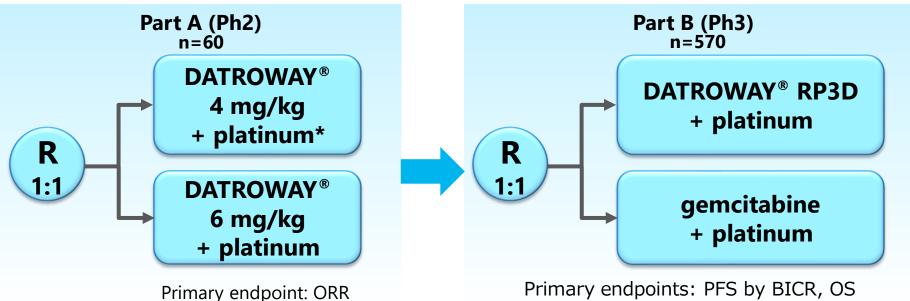
TROPION-Urothelial03 Ph2/3

TROPION-Urothelial03 expands DATROWAY® registration-potential studies beyond lung and breast cancers

Study Design

Eligible patient

- Histologically or cytologically confirmed locally advanced or metastatic urothelial carcinoma
- Progressed during or after enfortumab vedotin plus pembrolizumab combination treatment



Secondary endpoint: DOR

*carboplatin or cisplatin

Primary endpoints: PFS by BICR, OS

Secondary endpoints: PFS by investigator, ORR

- Part A for dose optimization in combination with platinum in metastatic UC and part B for comparison with SOC
- The efficacy results from urothelial cohort of TROPION-PanTumor01 presented at ASCO GU 2025 (n=40, median number of prior lines of therapy: 3) were ORR 25.0% (95% CI 12.7-41.2), mDOR NE (95% CI 2.6-NE) and mPFS 6.9 mo (95% CI 2.9-NE)
- Study started in Oct 2025

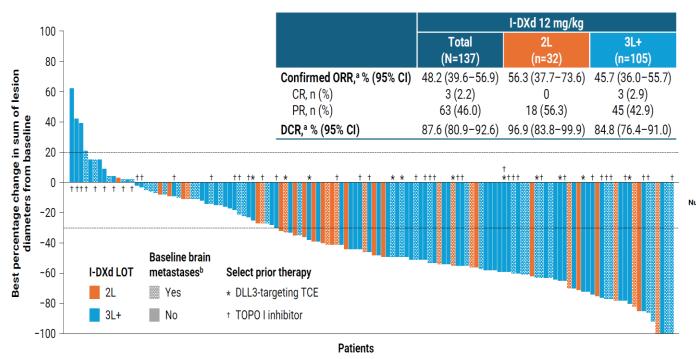
Striving to Fill the Unmet Need in SCLC

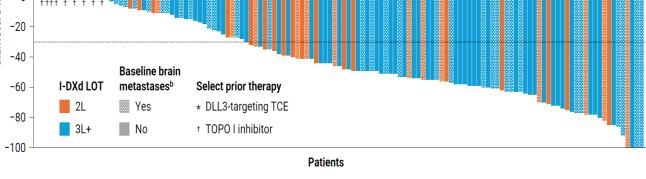


IDeate-Lung01 Ph2 (WCLC 2025)

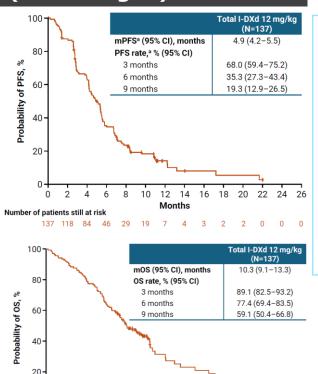
I-DXd demonstrated remarkable efficacy in previously treated ES-SCLC

Efficacy: ORR (left), PFS (upper right), OS (lower right)





- The overall confirmed ORR was 48.2%.
 - ✓ The ORR for 2L was 56.3%, and for 3L and beyond was 45.7%
- I-DXd 12 mg/kg showed mPFS 4.9 mo, and mOS 10.3 mo



IDeate-Lung01

- ✓ Evaluating the efficacy and safety of I-DXd monotherapy in ES-SCLC
- ✓ Comparing 8 mg/kg and 12 mg/kg in the doseoptimization phase
- √ 12 mg/kg selected for the expansion phase
- ✓ Primary endpoint: ORR

Data cutoff: March 3, 2025

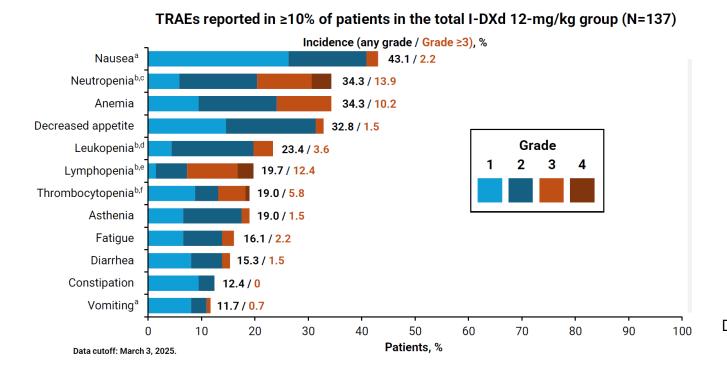
Striving to Fill the Unmet Need in SCLC



IDeate-Lung01 Ph2 (WCLC 2025)

Safety profile of I-DXd 12 mg/kg was manageable and consistent with previous studies

Safety



- Among the most common TRAEs, the majority were Grade 1 or 2
- Adjudicated treatment-related ILD reported in 17 patients (12.4%):
 - ✓ Grade 1 or 2, n=11 (8.0%)
 - ✓ Grade 3, n=4 (2.9%)
 - ✓ Grade 5, n=2 (1.5%)

Data cutoff: March 3, 2025

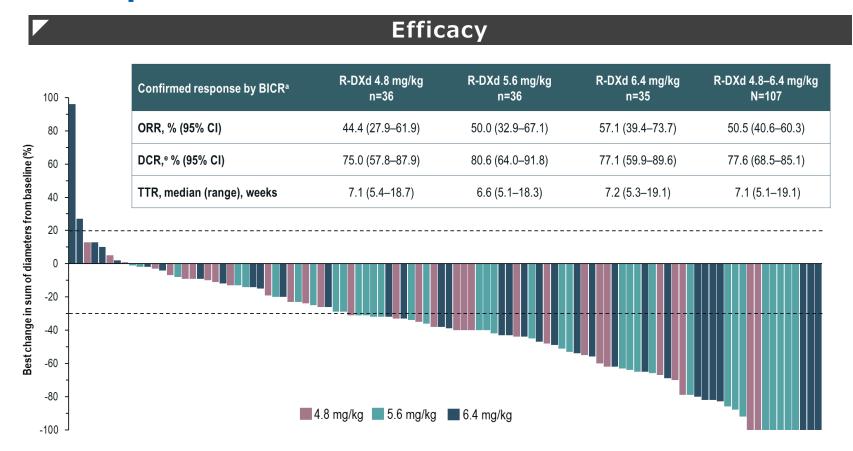
 The FDA granted Breakthrough Therapy Designation to I-DXd for ES-SCLC progressed after platinum-based chemotherapy in Aug 2025

Confirmed Clinical Meaningful Responses in Ph2 Part



REJOICE-Ovarian01 Ph2/3 (ESMO 2025)

R-DXd monotherapy demonstrated promising antitumor activity in platinum-resistant ovarian cancer in all doses evaluated



Data cutoff: February 26, 2025

- Doses 4.8-6.4 mg/kg (n=107) showed confirmed ORR of 50.5% (3 CRs, 51 PRs)
- Clinically meaningful antitumor activity observed across wide range of CDH6 expression levels
- Safety profile appears manageable and consistent with Ph1 study
- 5.6 mg/kg selected for Ph3 part to evaluate monotherapy vs. TPC (gemcitabine, PLD, topotecan, paclitaxel)
- FDA granted Breakthrough Therapy Designation for CDH6-expressing platinum-resistant OVC previously treated with bevacizumab in Sep 2025

5DXd ADCs Other Clinical and Regulatory Approval Status Updates



ENHERTU®

Oct 2025: DESTINY-Lung06 (Ph3) started for 1L of HER2 overexpressing NSQ NSCLC

DATROWAY®

■ Aug 2025: Approved in China for chemo treated HR+/HER2- BC (TROPION-Breast01)

HER3-DXd

■ Aug 2025: HERTHENA-Breast04 (Ph3) started for HR+/HER2- BC (IHC 0 or 1+ or 2+/ISH-) who received one line of CDK4/6 inhibitor and ET

I-DXd

■ Aug 2025: IDeate-Prostate02 (Ph1/2) started for metastatic CRPC



5DXd ADCs Update

Next Wave Update

News Flow

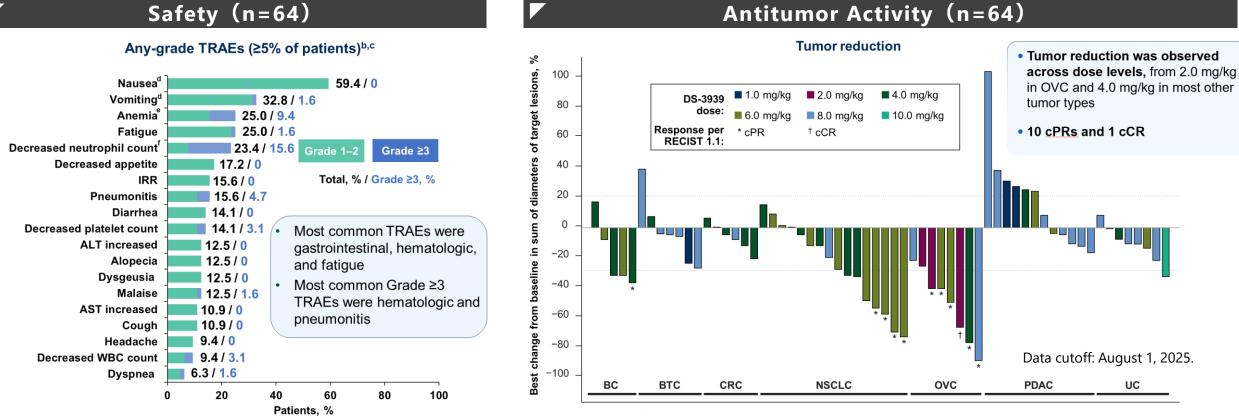
DS-3939

Initial Results from a FIH Study Dose Escalation Part



Ph1/2 (ESMO 2025)

DS-3939 demonstrated a manageable safety profile and promising preliminary antitumor activity against multiple solid tumors in previously treated patients



- Most common TRAEs were gastrointestinal, hematologic, and fatigue; most were Grade 1 or 2
- Adjudicated treatment-related ILD/pneumonitis was reported in 7/64 patients (10.9%); most were Grade 2
- Dose expansion and optimization are ongoing; multiple tumor types are being enrolled

CD37-directed ADC for Hematological Malignancies



DS3790 is a DXd ADC, targeting CD37-expressing hematological malignancies

Study design (n=420 in total) Dose escalation Dose expansion & combination assessment **Eligible Patient** Histologically documented **DS3790** hematologic malignancies monotherapy Adequate organ and bone marrow function DS3790 + **DS3790** combination drug A ECOG PS of 0, 1 or 2 DS3790 + combination drug B Primary outcome measure: safety, PK SOC

- CD37 is highly and widely expressed in B-cell malignancies
- Plan to start FIH Ph1/2 study in FY2025 H2

Primary outcome measure: CRR

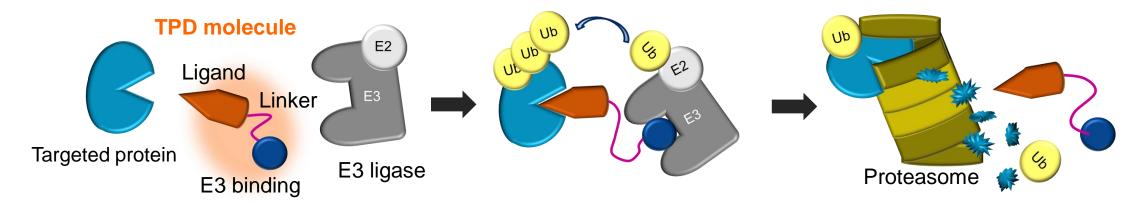
Secondary outcome measure: ORR, BOR, DCR etc.

New Program for Solid Tumors including CRPC



The first Daiichi Sankyo original targeted protein degradation (TPD) molecule

Mechanism of Action of TPD Molecule



E3 ligase* is recruited to the targeted protein by the TPD molecule

Ubiquitin** is transferred to the targeted protein

Ubiquitinated target is degraded by proteasome

- The targeted protein is not disclosed
- Plan to start FIH study in solid tumors in FY2025 H2

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^{*}E3 ligase: enzyme which facilitates the transfer of ubiquitin from E2 ubiquitin-conjugating enzyme to targeted proteins

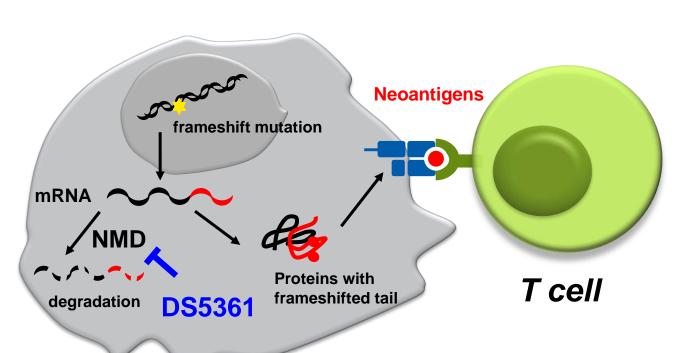
^{**}Ubiquitin: protein which is bound to other proteins and functions in various ways such as a marker for degradation

New Program for Solid Tumors



DS5361 is a small molecule NMD inhibitor, expecting antitumor immunity by increasing neo-antigens derived from frameshift mutations

Mechanism of Action



- Potential first-in-class orally available small molecule inhibitor targeting nonsense-mediated mRNA decay (NMD)
- Since NMD suppresses neoantigens derived from frameshift mutations, NMD inhibition is a potential strategy to increase neoantigen burden
- DS5361 enhanced antigen presentation and demonstrated immune-dependent anti-tumor efficacy, including T-cell activation, in preclinical studies
- Combination benefits with immune checkpoint inhibitors have been confirmed in mouse models
- FIH study started in Oct 2025

Tumor

FIH: first-in-human



5DXd ADCs Update

Next Wave Update

News Flow

FY2025 News Flow



As of Oct 2025

Upcoming regulatory decisions

ENHERTU®

DESTINY-Breast09: HER2 positive BC, 1L, Ph3
• US: FY2025 H2

DESTINY-Breast11: HER2 positive BC, neoadjuvant, Ph3

• US: FY2026 H1

Upcoming ke	y data readouts
ENHERTU®	DESTINY-Lung04: HER2 mutation NSCLC, 1L • FY2026
DATROWAY®	TROPION-Lung07: non-squamous NSCLC, w/o AGA, PD-L1 TPS <50%, 1L, pembrolizumab ± PBC combo, Ph3, • FY2026
	TROPION-Lung08*: NSCLC, w/o AGA, PD-L1 TPS ≥50%, 1L, pembrolizumab combo, Ph3 • FY2026
	TROPION-Lung15: EGFR mutated NSCLC progressed on prior osimertinib, 2L+, mono or osimertinib combo, Ph3 • FY2026
	AVANZAR*: NSCLC, w/o AGA, 1L, durvalumab + carboplatin combo, Ph3 • CY2026 H1
	TROPION-Breast05: TNBC, PD-L1 positive, 1L,
	durvalumab combo, Ph3 • FY2026

Bold: update from FY2025 Q1

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

^{*} Due to the protocol revision, the inclusion criteria are limited to non-squamous NSCLC

Upcoming IR Events



Sustainability Meeting

Date, time and format

Friday, November 28, 2025 3:30-5:00pm JST On site + Virtual (Zoom)

Speakers

- Hiroyuki Okuzawa President and CEO
- Shizuko Ueno
 Director, Executive Officer (Head of Japan Business Unit)
- Yasuhiro Komatsu
 Outside Director (Independent Director)
- Takaaki Nishii
 Outside Director (Independent Director)

Science & Technology Day 2025

Date, time and format

Monday, December 15, 2025 5:30-7:30pm EDT Tuesday, December 16, 7:30-9:30am (JST) Virtual (Zoom)

Speakers

- Hiroyuki Okuzawa President and CEO
- Ken Keller
 Head of Global Oncology Business
- Hiroto Kashiwase
 Head of Global Technology
- Ken Takeshita
 Head of Global R&D
- Yuki Abe
 Head of R&D Division

Q&A





Hiroyuki Okuzawa President and CEO



Ken Takeshita Head of Global R&D



Ken Keller Head of Global Oncology Business Senior Executive Officer, CFO



Koji Ogawa



Agenda

- 1 FY2025 Q2 Financial Results
- 2 FY2025 Forecast
- 3 Business Update
- 4 R&D Update
- **5** Appendix



Revenue: Business Units (incl. Forex Impact)



(Bn JPY) **FY2024 Q2 YTD** FY2025 Q2 YTD YoY Results Results **Japan Business** 239.7 249.9 +10.3 **Daiichi Sankyo Healthcare** 42.5 45.9 +3.4 215.5 273.0 **Oncolgy Business** +57.4 **Enhertu** 210.7 256.1 +45.5 **Datroway** 10.1 +10.1 Turalio 3.2 -0.2 3.0 1.7 +2.1 Vanflyta 3.8 **American Regent** 108.1 96.8 -11.3 Injectafer 28.5 22.6 -5.8 Venofer 29.7 26.9 -2.9 **GE** injectables 43.7 40.9 -2.8 **EU Specialty Business** 118.2 136.8 +18.6 Lixiana 90.6 96.8 +6.2 Nilemdo/Nustendi 16.4 28.6 +12.1 9.5 Olmesartan 10.3 +0.8 99.6 117.9 +18.3 ASCA (Asia, South and Central America) Business 146.04 Currency USD/JPY 152.62 -6.58 **Exchange Rate EUR/JPY** 165.93 168.06 +2.13

Revenue: Major Products in Japan



(Bn JPY)

		FY2024 Q2 YTD Results	FY2025 Q2 YTD Results	YoY
Lixiana	anticoagulant	67.9	73.2	+5.3
Tarlige	pain treatment	27.8	32.2	+4.4
Pralia	Treatment for osteoporosis/ inhibitor of the progression of bone erosion associated with rheumatoid arthritis	21.1	22.6	+1.5
Enhertu	anti-cancer agent (HER2-directed antibody drug conjugate)	15.5	17.9	+2.4
Efient	antiplatelet agent	15.7	18.0	+2.3
Vimpat	anti-epileptic agent	15.5	16.8	+1.4
Belsomra	Anti-Insomnia Treatment	-	9.7	+9.7
Ranmark	treatment for bone complications caused by bone metastases from tumors	10.4	10.0	-0.4
Canalia	type 2 diabetes mellitus treatment	8.1	7.7	-0.5
Minnebro	antihypertensive agent	4.8	5.3	+0.5
Loxonin	anti-inflammatory analgesic	6.8	5.9	-0.9
Emgality	prophylaxis of migraine attacks	5.1	6.3	+1.1
Inavir	anti-influenza treatment	0.2	0.0	-0.2

5DXd ADCs Revenue (incl. Forex Impact)



(Unit: Bn JPY)

	FY2025 Q2 YTD Results	YoY	FY2025 Forecast (as of Oct.)	vs Apr Forecast
ENHERTU ®	330.3	+58.6	808.3	+47.0
Product Sales	318.4	+57.1	694.2	+32.1
Upfront and Milestone Payments, etc.	11.9	+1.5	114.0	+14.8
DATROWAY ®	20.8	+17.6	46.2	+16.3*
Product Sales	15.7	+15.7	37.8	+16.2*
Upfront and Milestone Payments, etc.	5.1	+1.9	8.4	+0.1
HER3-DXd	7.1	+2.7	13.1	** -3.2
Upfront and Milestone Payments, etc.	7.1	+2.7	13.1	-3.2
I-DXd	7.6	-0.2	15.1	-
Upfront and Milestone Payments, etc.	7.6	-0.2	15.1	-
R-DXd	3.3	-0.2	21.5	+1.1
Upfront and Milestone Payments, etc.	3.3	-0.2	21.5	+1.1
5DXd ADCs Total	369.0	+78.5	904.2	+61.1

^{*} DATROWAY product sales: vs July Forecast

^{**} Extension of the exclusivity period for HER3-DXd

5DXd ADCs Upfront and Milestone Payments



(Unit: Bn JPY)

Asset	ltem	FY2025 Q2 YTD Results	YoY	FY2025 Forecast (as of Oct)	vs Apr Forecast	Total Consideration (as of Sep 2025)
	Upfront Payment	5.1	-	10.2	-	149.0
ENHERTU [®]	Regulatory Milestones	6.2	+1.5	23.1	+10.5	185.9
ENHERIO	Quid Related Payment	0.6	-	1.2	-	17.2
	Sales Milestone	-	-	79.6	+4.3	100.8
DATROWAY [®]	Upfront Payment	3.2	-	6.4	-	115.9
DATROWAY	Regulatory Milestones	1.9	+1.9	2.1	+0.1	6.6
AZ Allia	nce Total	16.9	+3.3	122.4	+14.9	575.4
	Upfront Payment	6.8	+2.9	12.7 **	-3.1	224.9
HER3-DXd	Satisfaction of Quid Rights *	0.2	-0.2	0.4 **	-0.1	7.3
	Upfront Payment	7.3	-	14.7	-	225.4
I-DXd	Satisfaction of Quid Rights *	0.2	-0.2	0.5	-	7.3
	Upfront Payment	3.1	-	21.1	+1.1	112.7
R-DXd	Satisfaction of Quid Rights *	0.2	-0.2	0.4	+0.0	7.3
US Merck A	Illiance Total	17.9	+2.3	49.7	-2.1	584.8

^{* &}quot;Quid rights" (worth \$150 mil.) that was held under the strategic alliance agreement with US Merck and was appropriated as part of consideration to obtain MK-6070 is booked as deferred revenue

^{**} Extension of the exclusivity period for HER3-DXd

Major R&D Milestones (ENHERTU®)



As of Oct 2025

	Project		Population/regimen	FY2	025	FY2026
			[phase, study name]	H1	H2	F12020
			 HER2+, adjuvant*¹ [Ph3, DESTINY-Breast05] 		• TLR obtained	
		D.	 HR+/HER2 low or HER2 ultralow, chemo naive [Ph3, DESTINY-Breast06] 	Approved (JP)Filling accepted (CN)		
		BC	 HER2+, 1L, pertuzumab combo*² [Ph3, DESTINY-Breast09] 	TLR obtainedFilling accepted (US)	Filling accepted (JP)Regulatory decision anticipated (US)	
			 HER2+, neoadjuvant, mono followed by THP [Ph3, DESTINY-Breast11] 	TLR obtainedFilling accepted (US/CN)	•	
		GC	• HER2+, 2L [Ph3, DESTINY-Gastric04]	• Filling accepted (CN)		
E	ENHERTU® NSCLC	NSCLC	 HER2 mutation, 1L [Ph3, DESTINY-Lung04] 			• TLR anticipated
		NOCEC	 HER2 overexpression, 1L, pembrolizumab combo [Ph3, DESTINY-Lung06] 		• Study started	
		OVC	 HER2 expressing, bevacizumab combo [Ph3, DESTINY-Ovarian01] 	Study started		
	EC	EC	 HER2 expressing, pMMR,1L, rilvegostomig or pembrolizumab combo [Ph3, DESTINY-Endometrial01] 	• Study started		
			 HER2 expressing, adjuvant [Ph3, DESTINY-Endometrial02] 		Study start planned	
		Other tumors	 HER2 expressing tumors [Ph2, DESTINY-PanTumor02] 	• Filling accepted (JP/ EU)		

Bold: update from FY2025 Q1

BC: breast cancer, EC: endometrial cancer, GC: gastric cancer, HR: hormone receptor, NSCLC: non-small cell lung cancer, OVC: ovarian cancer, pMMR: mismatch repair proficient, THP: taxane (paclitaxel or docetaxel) + trastuzumab + pertuzumab, TLR: top line results

^{*1} Adjuvant therapy for HER2 positive breast cancer patients with residual invasive disease following neoadjuvant therapy, *2 Monotherapy arm remains blinded until final PFS analysis Timeline indicated is based on the current forecast and subject to change

Major R&D Milestones (DATROWAY®)



As of Oct 2025

Project		Population/regimen	FY2025		EV2026
		[phase, study name]	H1	H2	FY2026
	NSCLC	• EGFR mutated, previously treated EGFR-directed therapy and PBC [Ph2, TROPION-Lung05*1]	Approved (US)		
		 non-squamous, w/o AGA, PD-L1 TPS <50%, 1L, pembrolizumab ± PBC combo [Ph3, TROPION-Lung07] 			• TLR anticipated
		 w/o AGA, PD-L1 TPS ≥50%, 1L, pembrolizumab combo [Ph3, TROPION-Lung08*²] 			• TLR anticipated
DATROWAY [®]		 EGFR mutated, progressed on prior osimertinib, 2L+, mono or osimertinib combo [Ph3, TROPION-Lung15] 			• TLR anticipated
		 w/o AGA, 1L, durvalumab + carboplatin combo [Ph3, AVANZAR*²] 			R anticipated CY2026 H1)
	ВС	 HR+ and HER2 low or negative, 2/3L [Ph3, TROPION-Breast01] 	Approved (EU)Approved (CN)		
		 TNBC, not an option for PD-1/PD-L1 inhibitor, 1L [Ph3, TROPION-Breast02] 		• TLR obtained	
		 TNBC, PD-L1 positive, 1L, durvalumab combo [Ph3, TROPION-Breast05] 			• TLR anticipated
	UC	 Post EV + pembrolizumab combo treatment, PBC combo [Ph2/3, TROPION-Urothelial03] 		• Study started	

Bold: update from FY2025 Q1

AGA: actionable genomic alterations, BC: breast cancer, EV: enfortumab vedotin, HR: hormone receptor, NSCLC: non-small cell lung cancer, PBC: platinum-based chemotherapy, TLR: top line results, TNBC: triple-negative breast cancer, TPS: tumor proportion score, UC: urothelial carcinoma

^{*1} Supported by data from TROPION-Lung01, TROPION-PanTumor01, *2 Due to the protocol amendment, the inclusion criteria are limited to non-squamous NSCLC

^{*}Timeline indicated is based on the current forecast and subject to change

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



As of Oct 2025

Project		Population/regimen	FY2025		F./2026
		[phase, study name]	H1	H2	FY2026
HER3-DXd	NSCLC	• EGFR mutated, 3L [Ph2, HERTHENA Lung01]	 Regulatory submission withdrawn (US) 		
	ВС	 TNBC, HR low and HER2 negative BC neoadjuvant [Ph2, HERTHENA-Breast03] 	Study started		
		 HR+/HER2- BC, post ET and CDK4/6 inhibitor treatment [Ph3, HERTHENA-Breast04] 	• Study started		
	SCLC	• 2L+ [Dose expansion, Ph2, IDeate-Lung01]	• TLR obtained		
I-DXd	ESCC	• 2L [Ph3, IDeate-Esophageal01]	Study started		
	CRPC	• Chemo naïve [Ph3, IDeate-Prostate01]	Study started		
R-DXd	OVC	 Platinum-resistant, 2L+ [Ph2/3, REJOICE-Ovarian01] 	• TLR obtained (Ph2 dose optimization)		
N-DAU	GI cancers	• [Ph2, REJOICE-GI01]	Study started		

Bold: update from FY2025 Q1

Major R&D Milestones (Next Wave)



As of Oct 2025

Project	Target indication	FY2	FY2026	
rroject	[phase, study name]	H1	H2	112020
DS3610	• Solid tumors [Ph1]		• Study start planned	
DS5361	• Solid tumors [Ph1]		• Study started	
DS9051	• Solid tumors including CRPC [Ph1]		• Study start planned	
DS3790	 CD37-expressing hematological malignancies [Ph1/2] 		• Study start planned	

Major R&D Pipeline: 5DXd ADCs ①



As of Oct 2025

Phas	201	Phase	1/2	Phase	
	_				
(US/EU/Asia) HER2 low BC chemo naïve/post chemo(combo) DESTINY-Breast08	(JP/US/EU/Asia) NSCLC	(US/EU/Asia) HER2+ BC 2L+/1L (chemo combo) DESTINY-Breast07	(JP/US/EU/Asia) HER2+ BC 2L+ (trastuzumab (± pertuzumab or tucatinib) combo) HERTHENA-Breast01	(CN) HER2 expressing solid tumors DESTINY-PanTumor03	(JP/US/EU/Asia) ES-SCLC 2L+ IDeate-Lung01
(US/EU/Asia) HER2 overexpressing non- squamous NSCLC 1L (ICI ± PBC combo) DESTINY-Lung03	(JP/US/Asia) EGFR mutated NSCLC 1L/2L (osimertinib combo)	(JP/US/EU/Asia) HER2 expressing GC 2L+/1L (combo) DESTINY-Gastric03	(US/EU/Asia) r/r RMS, HBL (pediatric) LIGHTBEAM-U01	(JP/US/EU/Asia) solid tumors TROPION-PanTumor03	(US/EU/Asia) in prep non-squamous NSCLC 2L KEYMAKER-U01 substudy 01H
(US/EU) BC, NSCLC (pembrolizumab combo)	(JP/US) renal cell carcinoma, ovarian cancer	(US/EU/Asia) TNBC (durvalumab combo) BEGONIA	(JP/US) ESCC, CRPC, squamous NSCLC, SCLC, etc. IDeate-PanTumor01	(JP/US/EU/Asia) EGFR mutated NSCLC 2L (osimertinib combo) ORCHARD	(US/EU/Asia) in prep squamous NSCLC 2L KEYMAKER-U01 substudy 01I
(JP/US) in prep solid tumors (subcutaneous injection)		(JP/US/EU/Asia) solid tumors (saruparib combo) PETRA	(JP/US/EU/Asia) solid tumors 2L+ IDeate-PanTumor02	(US/EU/Asia) resectable early-stage NSCLC neoadjuvant ((durvalumab or rilvegostomig) + PBC combo) NeoCOAST-2	(US/EU/Asia) gastrointestinal cancers REJOICE-GI01
(JP/US) solid tumors TROPION-PanTumor01		(US/EU/Asia) TNBC (durvalumab combo) BEGONIA	(JP/US/EU) ES-SCLC 1L (atezolizumab combo) IDeate-Lung03	(JP/US/EU/Asia) solid tumors HERTHENA-PanTumor01	(JP/US/EU/Asia) solid tumors REJOICE-PanTumor01
(JP/US/EU/Asia) NSCLC (w/o AGA) (pembrolizumab ± PBC combo) TROPION-Lung02		(JP/US/EU/Asia) solid tumors (saruparib combo) PETRA	(US/EU/Asia) chemo-naïve metastatic CRPC (mono or combo) IDeate-Prostate02	(US/EU/Asia) high-risk early stage TNBC, HR low and HER2 negative BC neoadjuvant (pembrolizumab combo) HERTHENA-Breast03	(US/EU/Asia) non-squamous NSCLC 2L KEYMAKER-U01 substudy 01H
(JP/US/EU/Asia) NSCLC (w/o AGA) ((durvalumab, rilvegostomig or volrustomig) ± PBC or sabestomig combo) TROPION-Lung04		(CN) NSCLC, TNBC TROPION-PanTumor02	(US/EU/Asia) in prep stageIV NSCLC 1L (pembrolizumab + PBC combo) KEYMAKER-U01 substudy 01A	(US/EU/Asia) stageIV NSCLC 1L (pembrolizumab combo) KEYMAKER-U01 substudy 01G	(US/EU/Asia) squamous NSCLC 2L KEYMAKER-U01 substudy 01I
		(US/EU/Asia) CRC, BTC, HCC, gastroesophageal cancer 2L+ HERTHENA-PanTumor02	(JP/US/EU/Asia) ESCC 1L (pembrolizumab ± chemo combo) KEYMAKER-U06 substudy 06E		
		(US/EU/Asia) stageIV NSCLC 1L (pembrolizumab + PBC combo) KEYMAKER-U01 substudy 01A	(US/EU/Asia) ES-SCLC 2L KEYNOTE-B98		
			(US/EU/Asia) ovarian cancer, relapsed after PBC (carboplatin, paclitaxel or bevacizumab combo) REJOICE-Ovarian02		
ENHERTU® DATROWAY® (Dato-DXd)	HER3-DXd I-DXd R-D	Xd			

Breakthrough Designation (US)

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

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, HBL: hepatoblastoma, HCC: hepatocellular carcinoma, ICI: immune checkpoint inhibitor, NSCLC: non-small cell lung cancer, PBC: platinum-based chemotherapy, r/r: relapse or refractory, RMS: rhabdomyosarcoma, SCLC: small cell lung cancer, TNBC: triple negative breast cancer

Major R&D Pipeline: 5DXd ADCs 2



As of Oct 2025

Phase 2/3		Regulatory phase			
(JP/US/EU/Asia) platinum-resistant ovarian cancer 2L+ REJOICE-Ovarian01	(JP/US/EU/Asia) HER2+ BC adjuvant* ¹ DESTINY-Breast05	(JP/US/EU/Asia) HER2 expressing pMMR EC 1L (rilvegostomig or pembrolizumab combo) DESTINY-Endometrial01	(JP/US/EU/Asia) NSCLC (w/o AGA) 1L (durvalumab + carboplatin combo) AVANZAR	(JP/US/EU/Asia) EGFR mutated NSCLC 2L HERTHENA-Lung02	(CN) HR+ and HER2 low or HER2 ultralow B0 chemo naïve DESTINY-Breast06
(JP/US/EU/Asia) UC post enfortumab vedotin + pembrolizumab combo treatment (PCB combo) TROPION-Urothelial03	(JP/US/EU/Asia) HER2+ BC 1L (mono) DESTINY-Breast09	(JP/US/EU/Asia) in prep HER2 expressing EC adjuvant DESTINY-Endometrial02	(JP/US/EU/Asia) TNBC (not an option for PD-1/PD-L1 inhibitor) 1L TROPION-Breast02	(US/Asia) HR positive and HER2 negative BC post ET and CDK4/6 inhibitor treatment HERTHENA-Breast04	(JP/US) HER2+ BC 1L (pertuzumab combo) DESTINY-Breast09
	(JP/US/EU/Asia) HER2+ GC 1L (pembrolizumab + FP combo) DESTINY-Gastric05	(JP/US/EU/Asia) non-squamous NSCLC (w/o AGA, PD-L1 TPS <50%) 1L (pembrolizumab ± PBC combo) TROPION-Lung07	(JP/US/EU/Asia) TNBC adjuvant* ¹ (mono or durvalumab combo) TROPION-Breast03	(JP/US/EU/Asia) ES-SCLC 2L IDeate-Lung02	(US/CN) HER2+ BC neoadjuvant (mono followed by THP) DESTINY-Breast11
	(JP/US/EU/Asia) HER2+ and PD-L1 CPS≥1 GC 1L (rilvegostomig + FP combo) ARTEMIDE-Gastric01	(JP/US/EU/Asia) NSCLC (w/o AGA, PD-L1 TPS ≥50%) 1L (pembrolizumab combo) TROPION-Lung08	(JP/US/EU/Asia) TNBC, HR low and HER2 negative BC neoadjuvant and adjuvant (durvalumab combo) TROPION-Breast04	(JP/US/EU/Asia) ESCC 2L IDeate-Esophageal01	(CN) HER2+ GC 2L DESTINY-Gastric04
	(JP/US/EU/Asia) HER2 mutant NSCLC 1L DESTINY-Lung04	(JP/US/EU/Asia) non-squamous NSCLC (w/o AGA, PD-L1 TC ≥50%) 1L (rilvegostomig combo) TROPION-Lung10	(JP/US/EU/Asia) PD-L1 positive TNBC 1L (durvalumab combo) TROPION-Breast05	(JP/US/Asia) chemo-naïve metastatic CRPC IDeate-Prostate01	(JP* ² /EU* ³) HER2 expressing tumors DESTINY-PanTumor02 etc
	(JP/US/Asia) HER2 overexpressing non- squamous NSCLC (w/o AGA, PD-L1 TPS < 50%) (pembrolizumab combo) DESTINY-Lung06	(JP/US/EU/Asia) Stage I adenocarcinoma NSCLC adjuvant (rilvegostomig combo) TROPION-Lung12			
	(JP/US/EU/Asia) HER2 expressing BTC 1L (rilvegostomig combo) DESTINY-BTC01	(JP/US/EU/Asia) EGFR mutated NSCLC 1L (osimertinib combo) TROPION-Lung14			
	(JP/US/Asia) HER2 expressing ovarian cancer 1L maintenance (bevacizumab combo) DESTINY-Ovarian01	(JP/US/EU/Asia) EGFR mutated NSCLC (progressed on prior osimertinib) 2L+ (mono or osimertinib combo) TROPION-Lung15			

Breakthrough Designation (US)

(T-DXd)

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

DATROWAY® (Dato-DXd)

- *1 Adjuvant therapy for patients with residual invasive disease follows
 *2 Filing based on this study and HERALD study (IIS), etc
- *3 Filing based on this study, DESTINY-CRC02, DESTINY-Lung01

AGA: actionable genomic alterations, BC: breast cancer, BTC: biliary tract cancer, CPS: combined positive score, EC: endometrial cancer, ET: endocrine therapy, ES-SCLC: extensive stage-small cell lung cancer, FP: fluoropyrimidine, GC: gastric cancer, HR: hormone receptor, NSCLC: non-small cell lung cancer, PBC: platinum-based chemotherapy, pMMR: mismatch repair proficient, TC: tumor cells, TNBC: triple negative breast cancer, THP: taxane (paclitaxel or docetaxel) + trastuzumab +pertuzumab, TPS: tumor proportion score, UC: urothelial carcinoma

Major R&D Pipeline: Next Wave



As of Oct 2025

Phase 1	Phase 1/2	Phase 2	Phase 3	Regulatory phase
DS-9606 (US/EU) CLDN6-directed ADC Solid tumors	DS-3939 (JP/US/EU/Asia) TA-MUC1-directed DXd ADC Solid tumors	EZHARMIA® (EU) EZH1/2 inhibitor BCL	TURALIO® (Asia) CSF-1/KIT/FLT3 inhibitor Tenosynovial giant cell tumor	VANFLYTA® (CN) FLT3 inhibitor FLT3 -ITD positive AML 1L QuANTUM-First
DS-1103 (US/EU) Anti-SIRPα antibody HER2 expressing or mutant solid tumors, HER2 low BC (ENHERTU® combo)	MK-6070 (DS3280) (US) DLL3 directed tri-specific T-cell engager DLL3 expressing advanced cancer (mono, I-DXd combo or atezolizumab combo) MK-6070-001	DS-1001 (JP) Mutant IDH1 inhibitor Glioma	VANFLYTA® (JP/US/EU/Asia) FLT3 inhibitor FLT3 -ITD negative AML 1L QuANTUM-Wild	VN-0102/JVC-001 (JP) Mixed measles-mumps-rubella vaccine
EZHARMIA [®] (JP/US) EZH1/2 inhibitor HER2+ GC, HER2 low BC (ENHERTU [®] combo) and non-squamous NSCLC (DATROWAY [®] combo)	MK-6070 (DS3280) (US/EUAsia DLL3 directed tri-specific T-cell engager ES-SCLC 2L+ (I-DXd combo) MK-6070-002	TURALIO [®] (JP) CSF-1/KIT/FLT3 inhibitor Tenosynovial giant cell tumor		
DS-2243 (US/EU/Asia) HLA-A*02/NY-ESO directed bispecific T-cell engager Solid tumors	EZHARMIA [®] (JP/US/Asia) EZH1/2 inhibitor NSCLC (w/o AGA and PD-L1 TPS ≥50%) 1L (pembrolizumab combo)			
DS3610 (TBA) in prep STING agonist ADC Solid tumors	DS3790 (TBA) in prep CD37-directed DXd ADC CD37-expressing hematological malignancies			
DS5361 (JP/US) Small molecure NMD inhibitor Solid tumors	DS-7011 (JP/US/EU/Asia) Anti-TLR7 antibody Systemic lupus erythematosus			
DS9051 (US/EU) in prep Targeted protein degradation (TPD) molecule Solid tumors including CRPC				



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

ADC: antibody-drug conjugate, AGA: actionable genomic alterations, AML: acute myeloid leukemia, BC: breast cancer, BCL: B cell lymphoma, CRPC: castration-resistant prostate cancer, ES-SCLC: extensive-stage small cell lung cancer, GC: gastric cancer, NSCLC: non-small cell lung cancer, TBA: to be announced, TPD: targeted protein degradation, TPS: tumor proportion score

Contact address regarding this material

Daiichi Sankyo Co., Ltd.

Corporate Communications Department

TEL: +81-3-6225-1125

Email: DaiichiSankyoIR_jp@daiichisankyo.com