

# ASCO 2018 investor event; breakout 1: Sales & Marketing execution

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# Forward-looking statements

In order, among other things, to utilise the 'safe harbour' provisions of the US Private Securities Litigation Reform Act 1995, we are providing the following cautionary statement: This document contains certain forward-looking statements with respect to the operations, performance and financial condition of the Group, including, among other things, statements about expected revenues, margins, earnings per share or other financial or other measures. Although we believe our expectations are based on reasonable assumptions, any forward-looking statements, by their very nature, involve risks and uncertainties and may be influenced by factors that could cause actual outcomes and results to be materially different from those predicted. The forward-looking statements reflect knowledge and information available at the date of preparation of this document and AstraZeneca undertakes no obligation to update these forward-looking statements. We identify the forward-looking statements by using the words 'anticipates', 'believes', 'expects', 'intends' and similar expressions in such statements. Important factors that could cause actual results to differ materially from those contained in forward-looking statements, certain of which are beyond our control, include, among other things: the loss or expiration of, or limitations to, patents, marketing exclusivity or trademarks, or the risk of failure to obtain and enforce patent protection; effects of patent litigation in respect of IP rights; the impact of any delays in the manufacturing, distribution and sale of any of our products; the impact of any failure by third parties to supply materials or services; the risk of failure of outsourcing; the risks associated with manufacturing biologics; the risk that R&D will not yield new products that achieve commercial success; the risk of delay to new product launches; the risk that new products do not perform as we expect; the risk that strategic alliances and acquisitions, including licensing and collaborations, will be unsuccessful; the risks from pressures resulting from generic competition; the impact of competition, price controls and price reductions; the risks associated with developing our business in emerging markets; the risk of illegal trade in our products; the difficulties of obtaining and maintaining regulatory approvals for products; the risk that regulatory approval processes for biosimilars could have an adverse effect on future commercial prospects; the risk of failure to successfully implement planned cost reduction measures through productivity initiatives and restructuring programmes; the risk of failure of critical processes affecting business continuity; economic, regulatory and political pressures to limit or reduce the cost of our products; failure to achieve strategic priorities or to meet targets or expectations; the risk of substantial adverse litigation/government investigation claims and insufficient insurance coverage; the risk of substantial product liability claims; the risk of failure to adhere to applicable laws, rules and regulations; the risk of failure to adhere to applicable laws, rules and regulations relating to anti-competitive behaviour; the impact of increasing implementation and enforcement of more stringent anti-bribery and anti-corruption legislation; taxation risks; exchange rate fluctuations; the risk of an adverse impact of a sustained economic downturn; political and socio-economic conditions; the risk of environmental liabilities; the risk of occupational health and safety liabilities; the risk associated with pensions liabilities; the impact of failing to attract and retain key personnel and to successfully engage with our employees; the risk of misuse of social medial platforms and new technology; and the risk of failure of information technology and cybercrime. Nothing in this presentation / webcast should be construed as a profit forecast.



# Overview of the Oncology Business Unit

Created to support rapid uptake of the oncology portfolio

## Focus on four franchises



Lung/EGFR



Immuno-Oncology



DDR/women's cancers



Haematology

## Focus on top-8 markets



United States  
Japan  
China  
France  
Germany  
United Kingdom  
Italy  
Spain

## Focus on four core commercial functions



Marketing and pricing



Medical affairs and diagnostics



Strategy and market analysis



Sales and market access



# Payer landscape

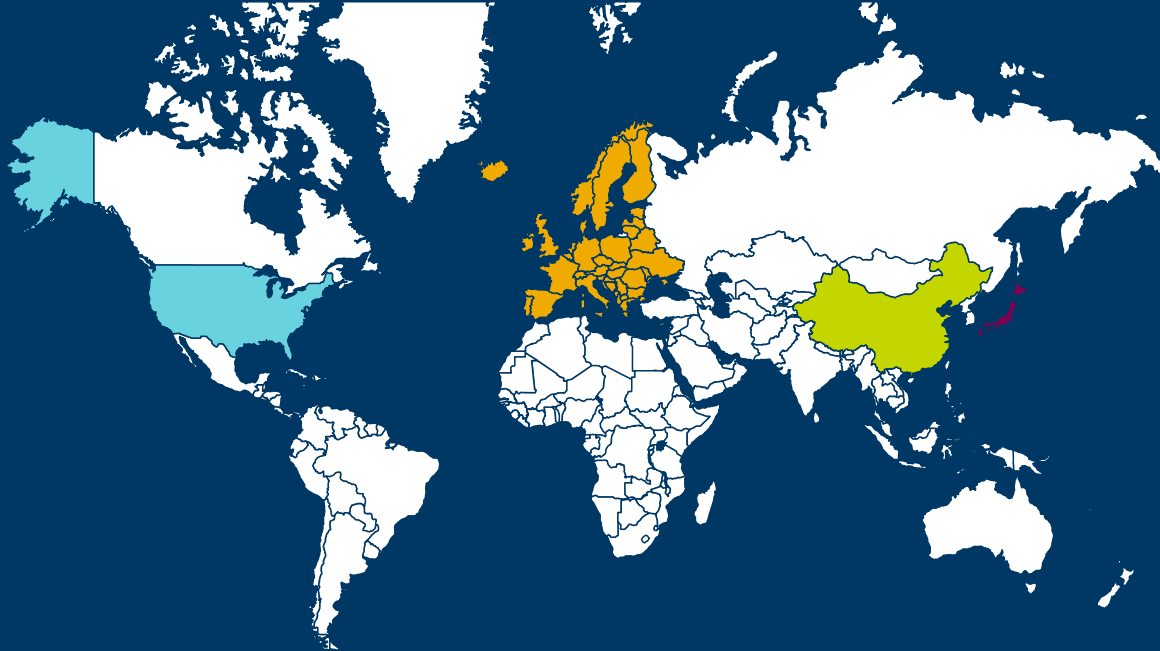
## Constantly-evolving landscape

### US

- Innovation still rewarded
- President Trump's drug-pricing blueprint - potential impact?
- Accelerated vertical integration
- Access 360 programme to assist patients

### Europe

- Higher evidence bar
- Pricing negotiations remain challenging
- Diminished access conditions or limited to sub-populations



### China

- NRDL updated 2017 (*Iressa* now included)
- More frequent NRDL updates expected to improve access, but with price discount
- Overall, remains mainly out-of-pocket with patient-assistance programs

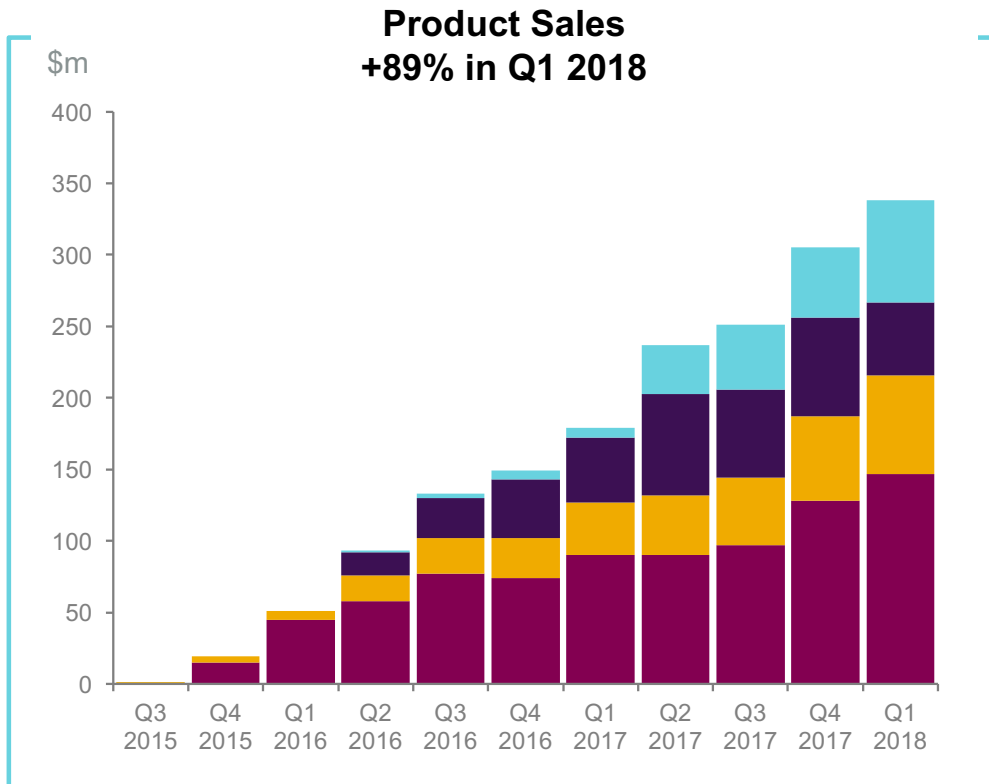
### Japan

- More frequent price revisions for high budget-impact drugs and indication expansion
- Introduction of cost effectiveness assessment



# Tagrisso: case study

## From accelerated approval to T790M<sup>1</sup> standard of care in two years



**Milestones in 2nd-line T790M**

- >75 launch countries**  
Global in-market regulatory, pricing and reimbursement capabilities
- ~70% T790M testing in major markets**  
Customer engagement programmes
- >30,000 patients treated**  
Sales and marketing focused on rapid growth

**\$1 billion in rolling four quarters within 10 quarters from launch**

1. Substitution of threonine (T) with methionine (M) at position 790 of exon 20 mutation.  
Chart legend: **US** **Europe** **Established** **Rest of World** **Emerging Markets**.  
Absolute values at actual exchange rates; change at CER.



# Tagrisso: first line next

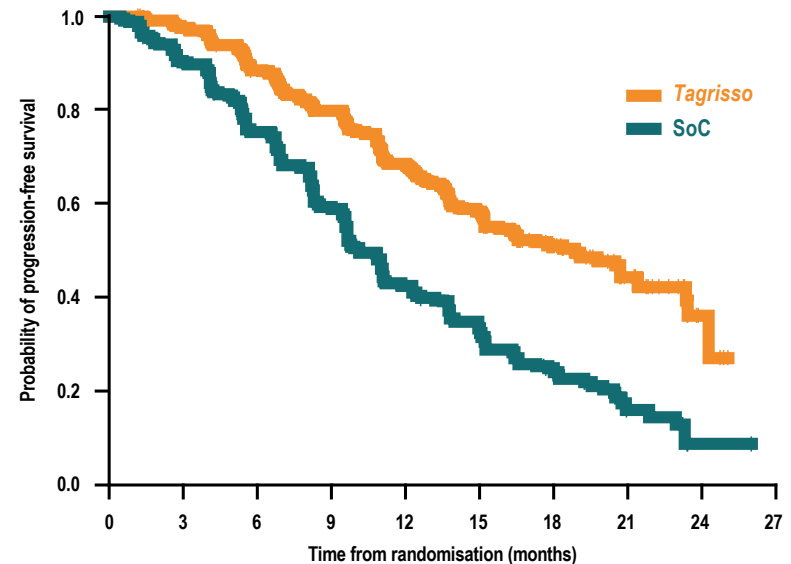
## Enabling more patients to benefit for a significantly longer duration

With 1st-line *Tagrisso*, physicians can treat 10/10 of EGFRm<sup>1</sup> patients; ~3x more than 2nd-line T790M



Only ~3/10 EGFRm patients can receive *Tagrisso* 2nd line (those who survive to 2nd line and test positive for T790M)

Longer duration: median progression-free survival in the FLAURA trial was 18.9 months



In the 2nd-line T790M setting (AURA3 trial), median progression-free survival for *Tagrisso* was 10.1 months

1. Epidermal growth factor receptor mutation.

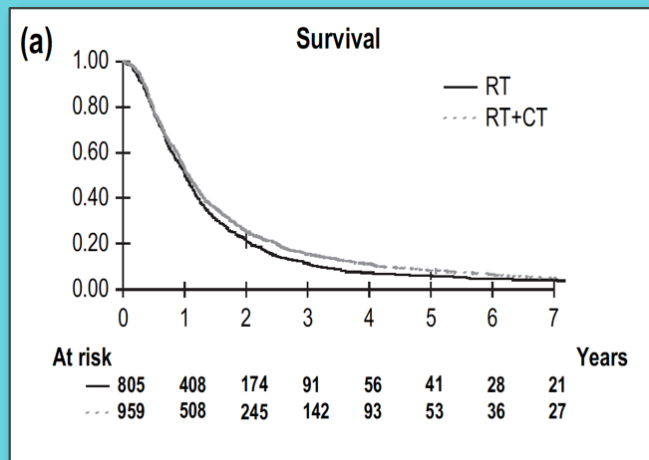


# Unresectable Stage III NSCLC<sup>1</sup>

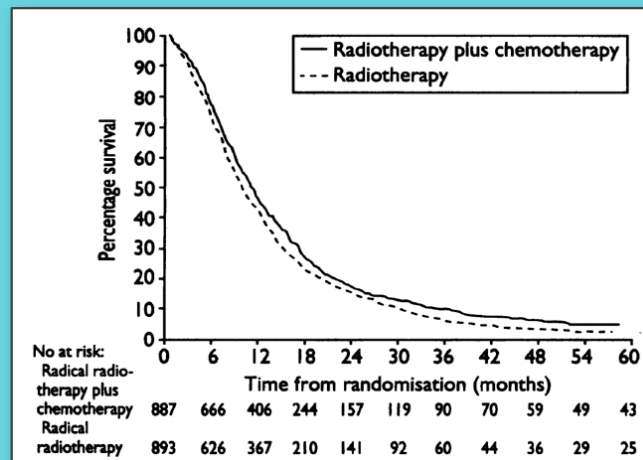
## No major medical advances in Stage III for 25+ years

- Despite curative intent with CRT<sup>2</sup>, 9/10 progress
- Before PACIFIC
  - All attempts to improve upon CRT failed
  - Treatment strategy post CRT was 'active surveillance'

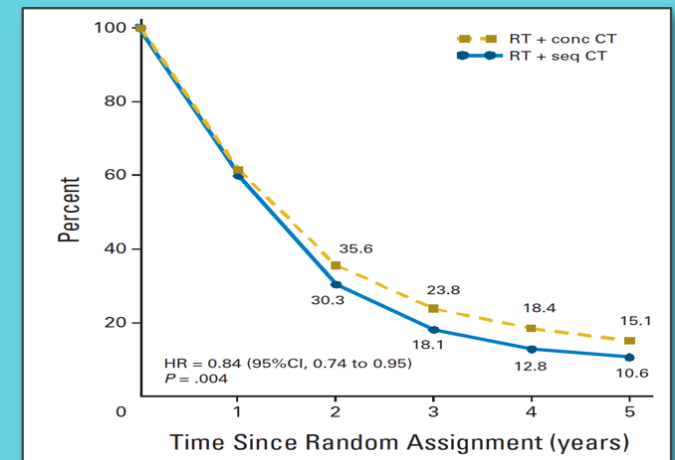
### RT vs. concurrent CT/RT



### RT vs. sequential CT/RT



### Sequential vs. concurrent CT/RT



1. Non-small cell lung cancer.  
2. Chemo-radiation therapy.  
Source: NSCLC Collaborative Group. BMJ, 1995; 311: 899-909.

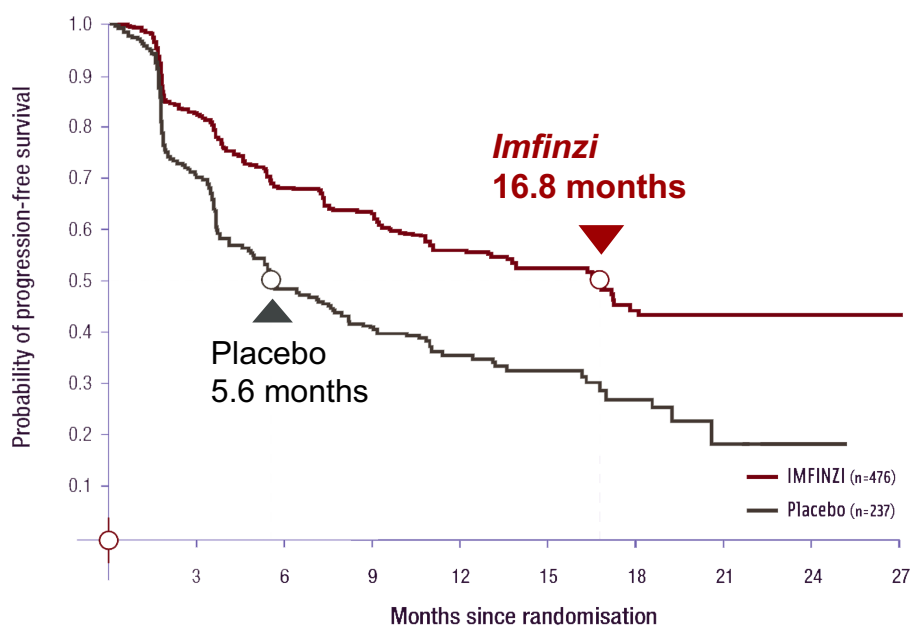
Source: Auperin et al. Ann Oncol, 2006; 17: 473-83.

Source: Auperin et al. J Clin Oncol, 2010; 28: 2181-90.

# The PACIFIC regimen for unresectable Stage III NSCLC

## A new standard of care: CRT followed by *Imfinzi* for up to 12 months

Unprecedented 11.2 months improvement in median progression-free survival with *Imfinzi*



Comparable safety profile with respect to Grade 3 or Grade 4 immune-mediated adverse reactions

Adverse reactions reported in ≥10% of patients in the PACIFIC study				
Adverse reaction	IMFINZI (n=475)		Placebo (n=234)	
	All Grades	Grades 3-4	All Grades	Grades 3-4
<b>Respiratory, thoracic, and mediastinal disorders</b>				
Cough/productive cough	40%	0.6%	30%	0.4%
Pneumonitis/radiation pneumonitis	34%	3.4%	25%	3.0%
Dyspnea <sup>†</sup>	25%	1.5%	25%	2.6%
<b>Gastrointestinal disorders</b>				
Diarrhea	18%	0.6%	19%	1.3%
Abdominal pain <sup>†</sup>	10%	0.4%	6%	0.4%
<b>Endocrine disorders</b>				
Hypothyroidism <sup>†</sup>	12%	0.2%	1.7%	0%
<b>Skin and subcutaneous tissue disorders</b>				
Rash <sup>†</sup>	23%	0.6%	12%	0%
Pruritus <sup>†</sup>	12%	0%	6%	0%
<b>General disorders</b>				
Fatigue**	34%	0.8%	32%	1.3%
Pyrexia	15%	0.2%	9%	0%
<b>Infections</b>				
Upper respiratory tract infections <sup>††</sup>	26%	0.4%	19%	0%
Pneumonia <sup>††</sup>	17%	7%	12%	6%

**25 May 2018:**  
*Imfinzi* significantly improved overall survival

Source: Antonia, et al., The New England Journal of Medicine, 2017.

For footnotes, please see approved US prescribing information (USPI).





# Q&A



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