

Meet AZN management: ASCO 2020

Virtual breakout 3: *Lynparza*

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IR moderator: Nick Stone

1 June 2020

Webinar is being recorded



Forward-looking statements disclaimer

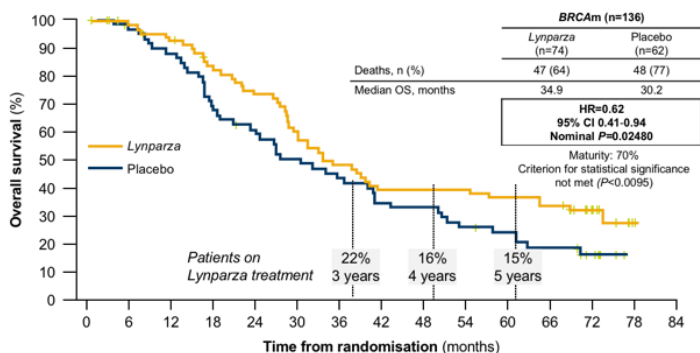
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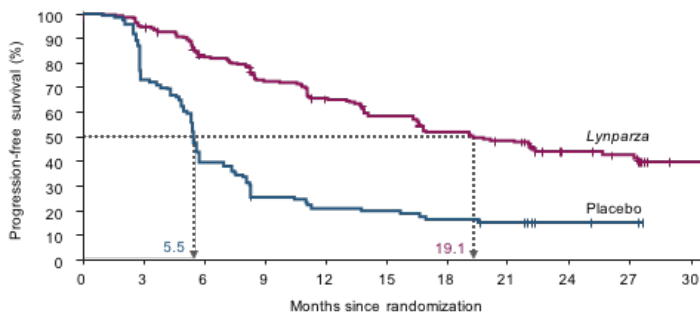
Lynparza: ovarian cancer

The most comprehensive PARPi¹ development programme in ovarian cancer

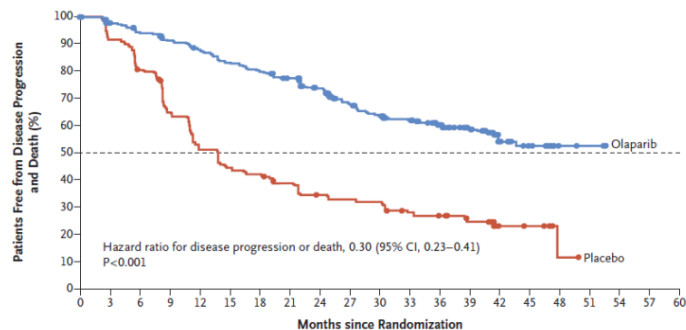
Study 19: 3L+



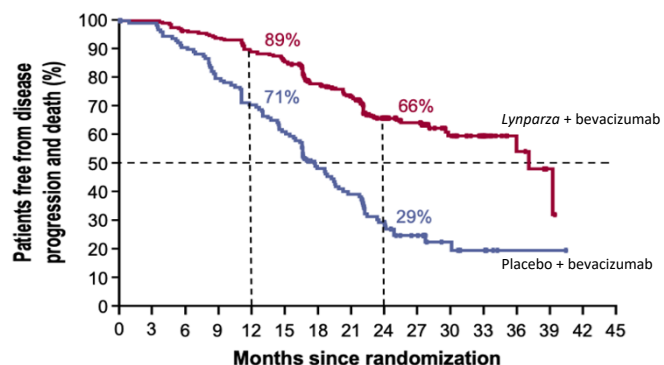
SOLO-2: 2L maintenance



SOLO-1: 1L maintenance



PAOLA-1: 1L (HRD+ve²)



ASCO 2020: continued advancement of science supporting Lynparza

Phase III SOLO2

- Final OS for maintenance treatment in BRCA³-mutated PSR⁴ OC⁵

Other

- Phase IIIb OPINION IA⁶: maintenance of non-germline BRCA1/2-mutated PSR OC
- Phase III: Lynparza or the combination of cediranib and Lynparza to standard platinum-based CTx⁷ in recurrent platinum-sensitive OC
- Phase II LIGHT: PSR ovarian cancer by BRCA mutation and HRD status

Source: Study 19, abstract 5501, ASCO 2016; and SOLO-2, 2 - Late Breaking Abstract, SGO 2017.

1. Poly ADP ribose polymerase (PARP) inhibitor.
2. Homologous recombination deficiency (HRD) positive, including tBRCAm.
Source: SOLO-1, ESMO 2018; and PAOLA-1, ESMO 2019.

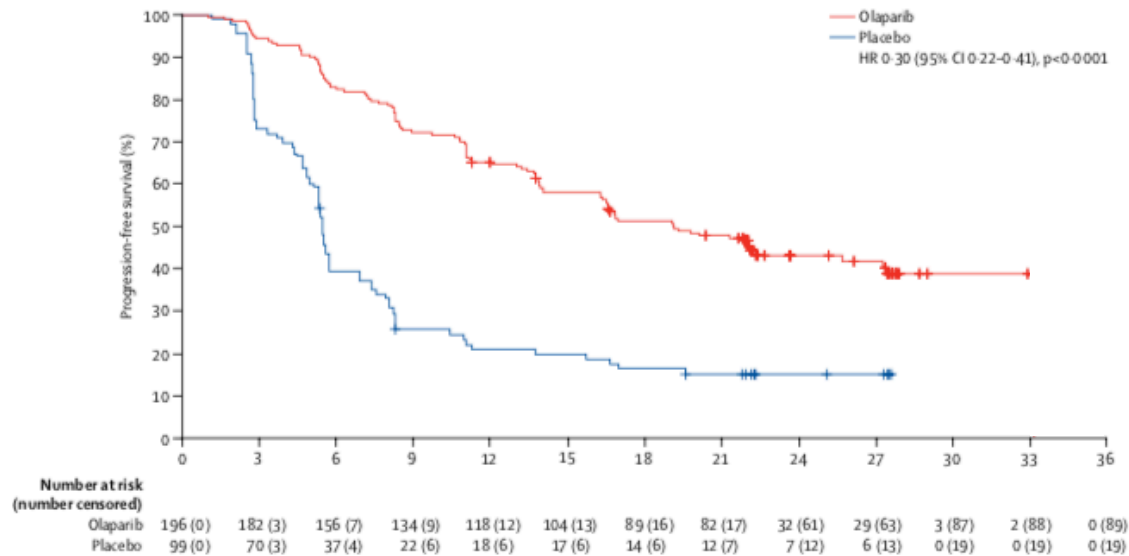
3. Breast cancer susceptibility gene 1/2 mutation 4. Platinum-sensitive relapsed 5. Ovarian cancer 6. Interim analysis 7. Chemotherapy.



Lynparza: SOLO2 final OS

Maintenance treatment for PSR OC patients with gBRCA positive tumours

PFS: 63% maturity with a median follow up ~22 months

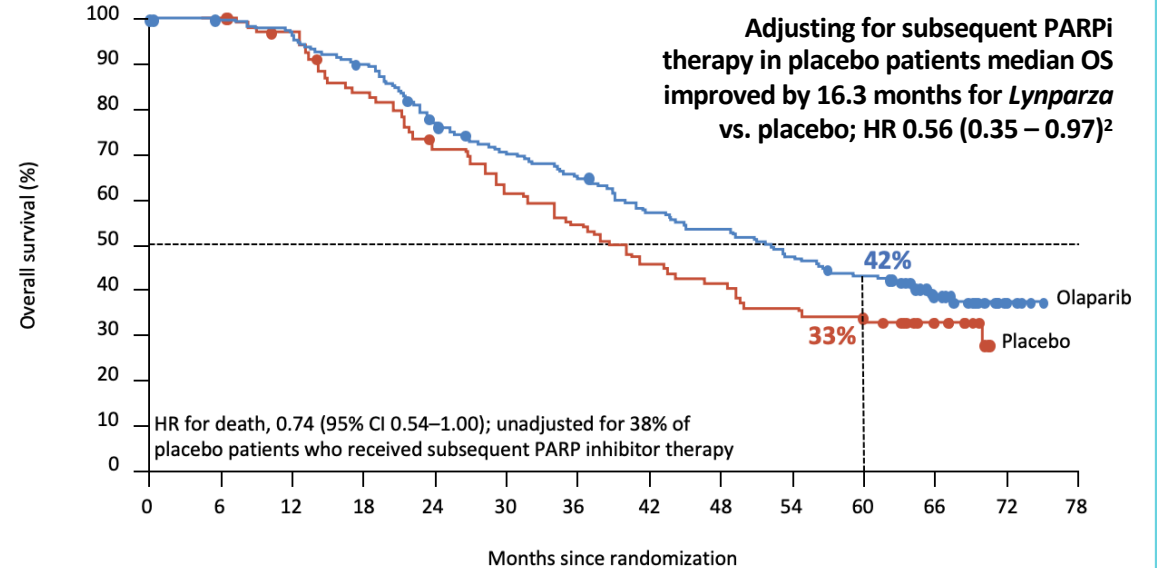


Significant improvements in TFST¹ and time to second subsequent therapy at the initial trial analysis

1. Time to first subsequent therapy.

Source: *The Lancet Oncology* 2017; 18: 1274–84.

SOLO2: median OS improved by 12.9 months with maintenance Lynparza over placebo (p-value: 0.0537)



TFST: 28% of patients (vs. 13% of placebo patients) were alive and had not received subsequent therapy at 5 years

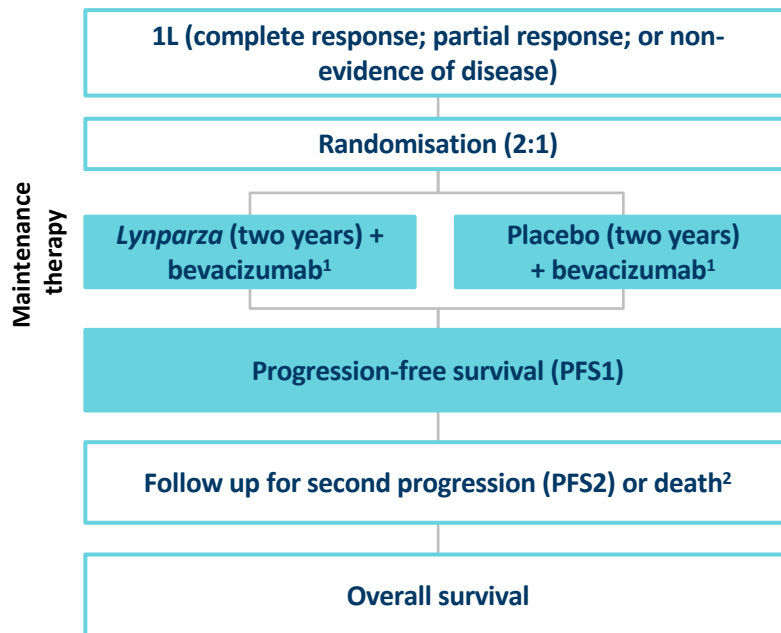
2. Prespecified adjusted OS analysis (RPSFT model, re-censored): to adjust for subsequent PARP inhibitor therapy in placebo group. The RPSFT model (re-censored) adjusts for the 38% of placebo patients who received subsequent PARP inhibitor therapy. RPSFT: rank preserving structural failure time model. Source: abstract 6002, ASCO 2020.



Lynparza: PAOLA-1

1L maintenance treatment with bevacizumab

PAOLA-1: 1L ovarian cancer

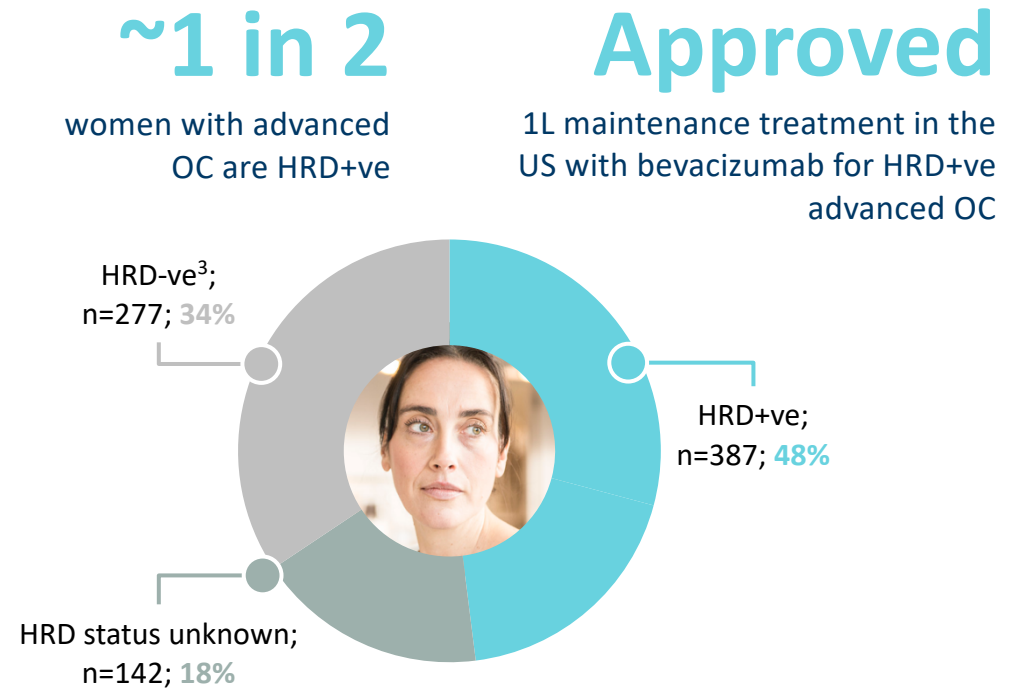


PAOLA-1 representative of patients with advanced OC; selection was not restricted by surgical outcome or BRCA mutation status

1. Bevacizumab: 15mg/kg, every 3 weeks for a total of 15 months, including when administered with chemotherapy 2. Secondary endpoints.

Source: abstract 935PD, ESMO 2017.

PAOLA-1: biomarker subgroups



PAOLA-1 demonstrated the predictive value of HRD testing >37 months mPFS for patients treated with Lynparza + bevacizumab

3. HRD negative.

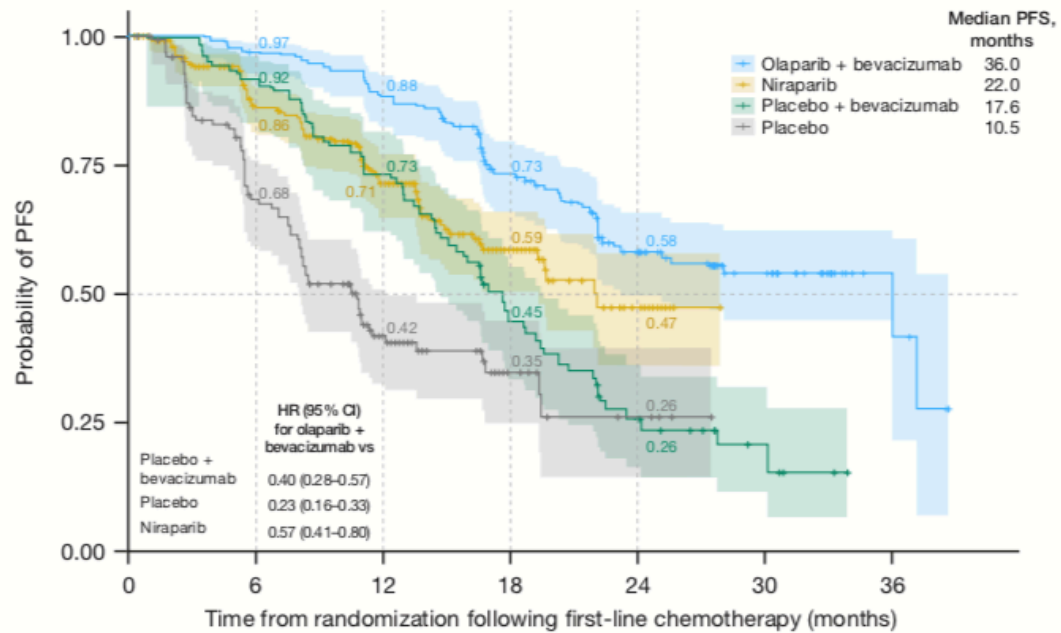
Source: ESMO 2019.



Lynparza: PAOLA-1 and PRIMA¹

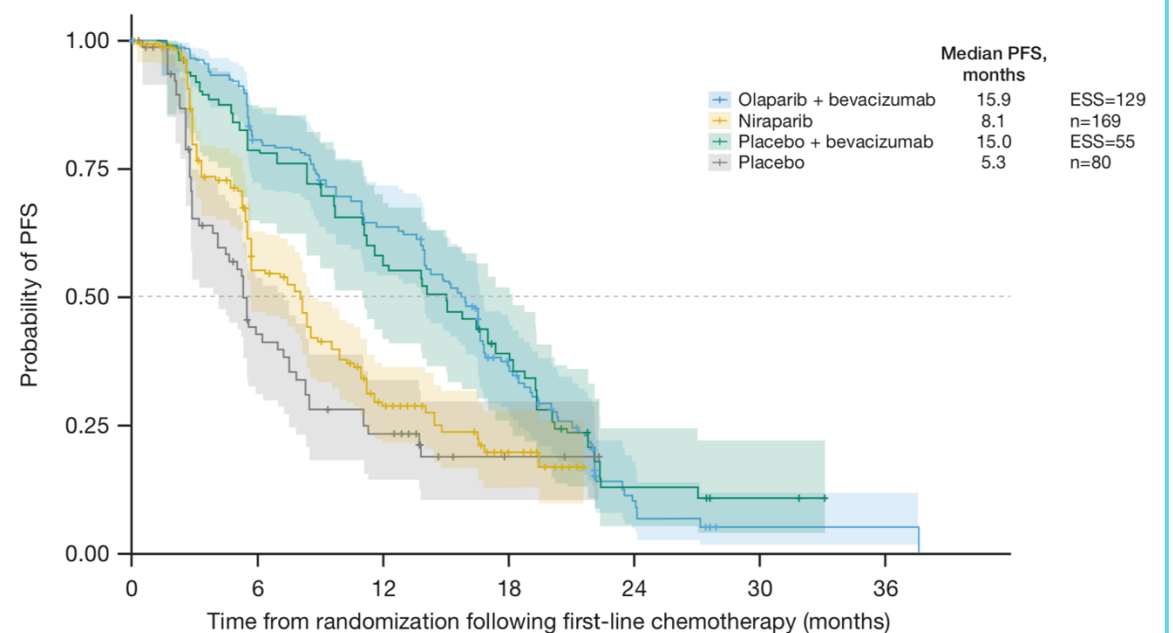
Maintenance treatment essential; HRD testing critical to obtain longest mPFS

Indirect treatment comparison of PAOLA-1 and PRIMA PFS: HRD+ve²



After adjustment, in HRD+ve patients, the benefit was greatest with *Lynparza* + bevacizumab combination therapy

Indirect treatment comparison of PAOLA-1 and PRIMA PFS: HRD-ve²



After adjustment, in HRD-ve patients, the benefit was greatest with either of the bevacizumab containing regimens (bevacizumab alone or *Lynparza* + bevacizumab)

1. Niraparib (by Tesaro/GSK); <https://clinicaltrials.gov/ct2/show/NCT02655016>.

2. Adjusted analysis, formal matching analysis of the PAOLA-1 patients' characteristics to the PRIMA patients' characteristics, in the absence of randomized controlled trial. Source: poster 223, ASCO 2020.

Source: poster 223, ASCO 2020.



Lynparza: ovarian cancer

Continued global expansion

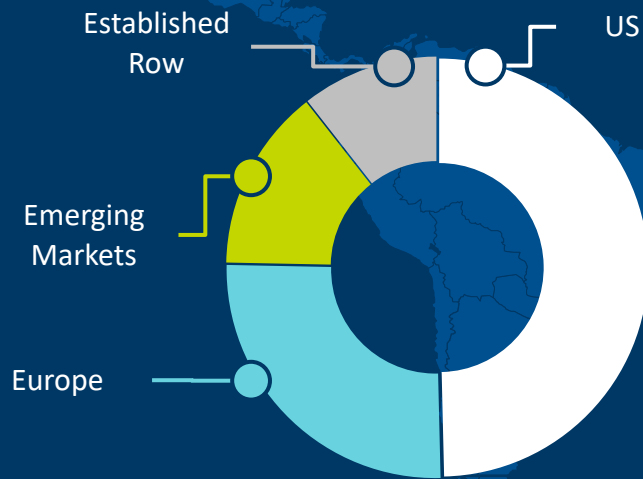
+69%

Product sales growth Q1 2020

\$397m

Product sales Q1 2020

Product sales by region



Tumour/setting	US	Europe	Japan	China	Country approvals	Countries reimbursed
Ovarian	✓	✓	✓	✓	73	>40
Breast	✓	✓	✓	⚙️	64	8
Pancreatic	✓	⚙️	⚙️		4	1
Prostate	✓	⚙️	⚙️		1	1

⚙️ Under regulatory review



Patient focus: health economic analysis in Italy to demonstrate the added benefit that *Lynparza* offers to patients

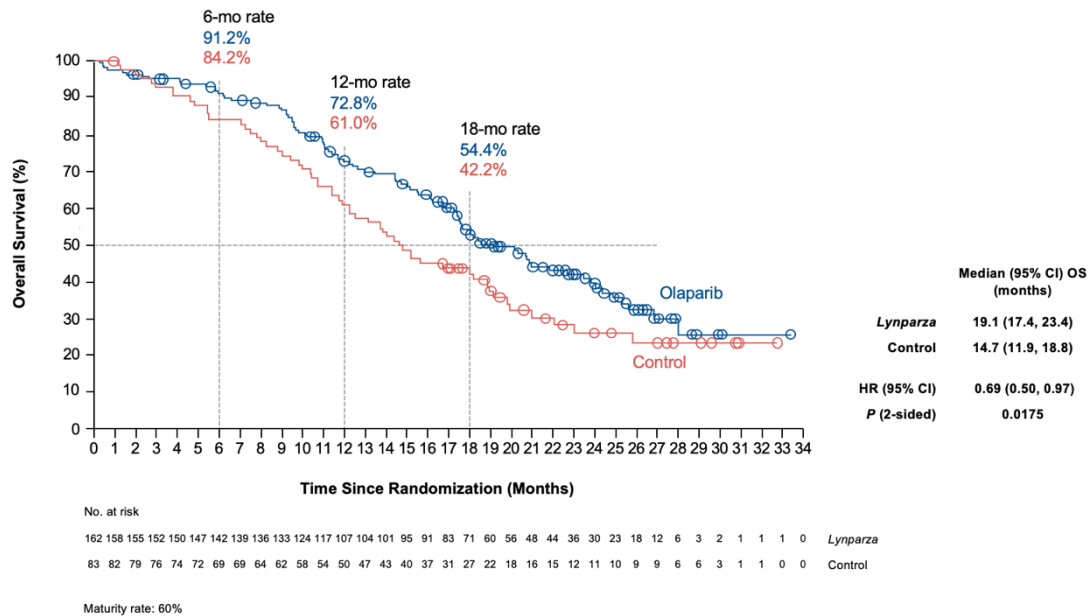
AstraZeneca showed the cost-effectiveness of a preventive testing strategy in relatives of patients with BRCA mutated ovarian cancer versus a no testing strategy. The evaluation showed how it is cost-effective to include BRCA tests for patients and family of those with a family history of breast/ovarian cancer.

Product sales at actual exchange rates; change at constant exchange rate.
Source: AstraZeneca data on file.



Lynparza: the only PARPi to improve overall survival in prostate cancer patients¹

PROfound, cohort A



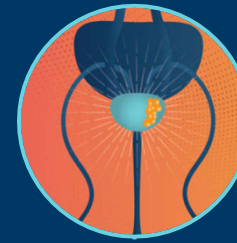
1. Lynparza vs. enzalutamide or abiraterone in a biomarker-based subset BRCA1/2 or ATM²-mutatations.

2. Ataxia telangiectasia mutated.

Source: J. de Bono et al, Olaparib for Metastatic Castration-Resistant Prostate Cancer, *The New England Journal of Medicine*, 28 May 2020.

What's now: Phase III lifecycle management, major

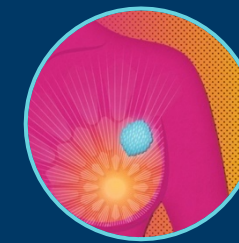
Castration-resistant prostate cancer



2021
2L prostate cancer: regulatory decision (JP)

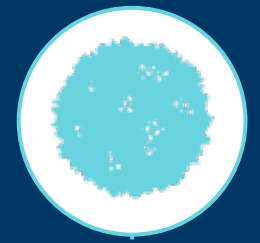
1L castration-resistant prostate cancer: data readout, regulatory submission

Adjuvant breast cancer



2021
Adjuvant breast cancer: data readout, regulatory submission

Combinations



2021+
1L advanced ovarian cancer: data readout



Questions & Answers

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Webinar

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or type your question into the Q&A box
(alternative)

Phone

*6 - Toggle mute/unmute

*9 - Raise hand



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