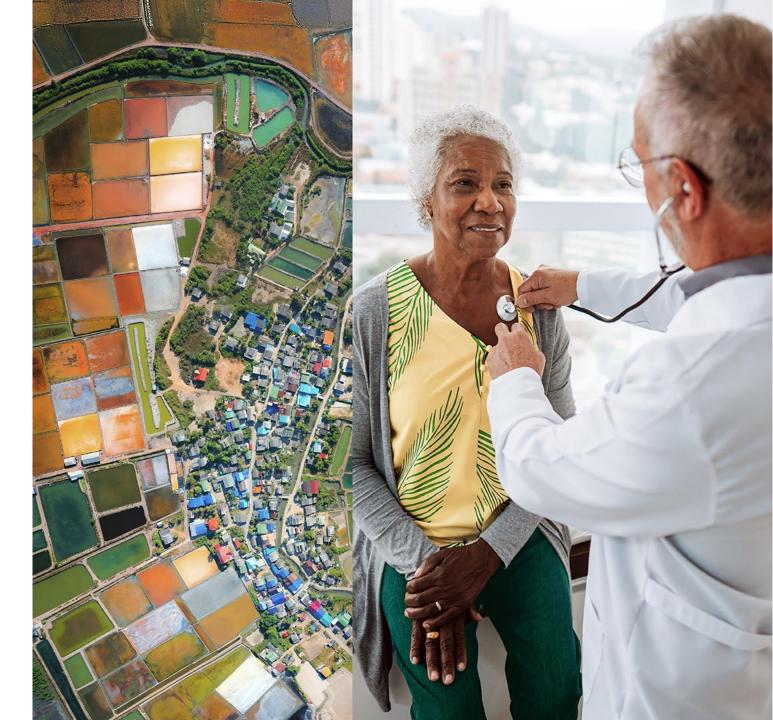


# Health Equity at AstraZeneca

**Event for investors and analysts** 

**15 November 2024** 



## Forward-looking statements

In order, among other things, to utilise the 'safe harbour' provisions of the US Private Securities Litigation Reform Act of 1995, AstraZeneca (hereafter 'the Group') provides 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 the Group believes its 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 the Group undertakes no obligation to update these forward-looking statements. The Group identifies 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 the Group's control, include, among other things: the risk of failure or delay in delivery of pipeline or launch of new medicines; the risk of failure to meet regulatory or ethical requirements for medicine development or approval; the risk of failures or delays in the quality or execution of the Group's commercial strategies; the risk of pricing, affordability, access and competitive pressures; the risk of failure to maintain supply of compliant, guality medicines; the risk of illegal trade in the Group's medicines; the impact of reliance on third-party goods and services; the risk of failure in information technology or cybersecurity; the risk of failure of critical processes; the risk of failure to collect and manage data in line with legal and regulatory requirements and strategic objectives; the risk of failure to attract, develop, engage and retain a diverse, talented and capable workforce; the risk of failure to meet regulatory or ethical expectations on environmental impact, including climate change; the risk of the safety and efficacy of marketed medicines being guestioned; the risk of adverse outcome of litigation and/or governmental investigations; intellectual property related risks to the Group's products; the risk of failure to achieve strategic plans or meet targets or expectations; the risk of failure in financial control or the occurrence of fraud; the risk of unexpected deterioration in the Group's financial position; the impact that global and/or geopolitical events may have or continue to have on these risks, on the Group's ability to continue to mitigate these risks, and on the Group's operations, financial results or financial condition. Nothing in this document, or any related presentation/webcast, should be construed as a profit forecast.



# Agenda

I. Sustainability at AstraZeneca	Pam Cheng
II. Our Health Equity Journey	Dave Fredrickson and Marc Dunoyer
III. Our Health Equity Strategy	
IV. Equity in Action	
V. Q&A Panel	Health Equity Leadership Team

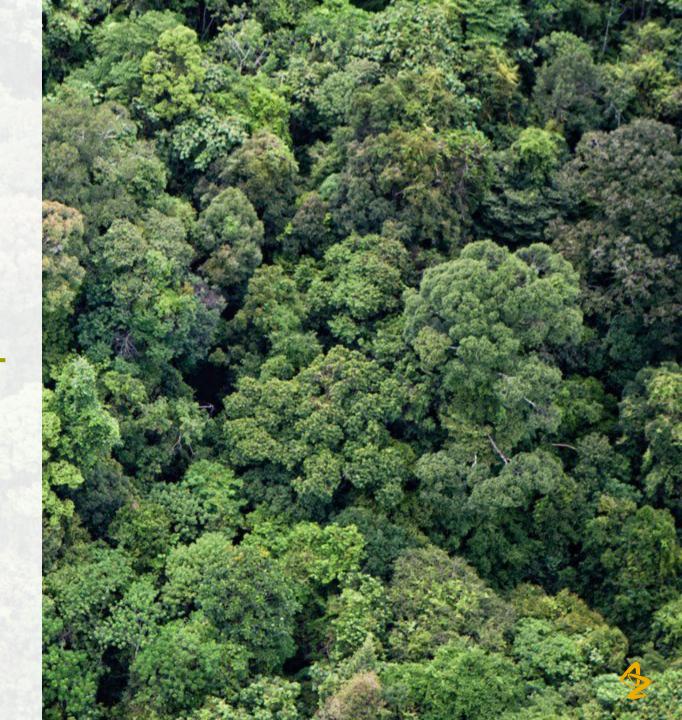


# Sustainability at AstraZeneca



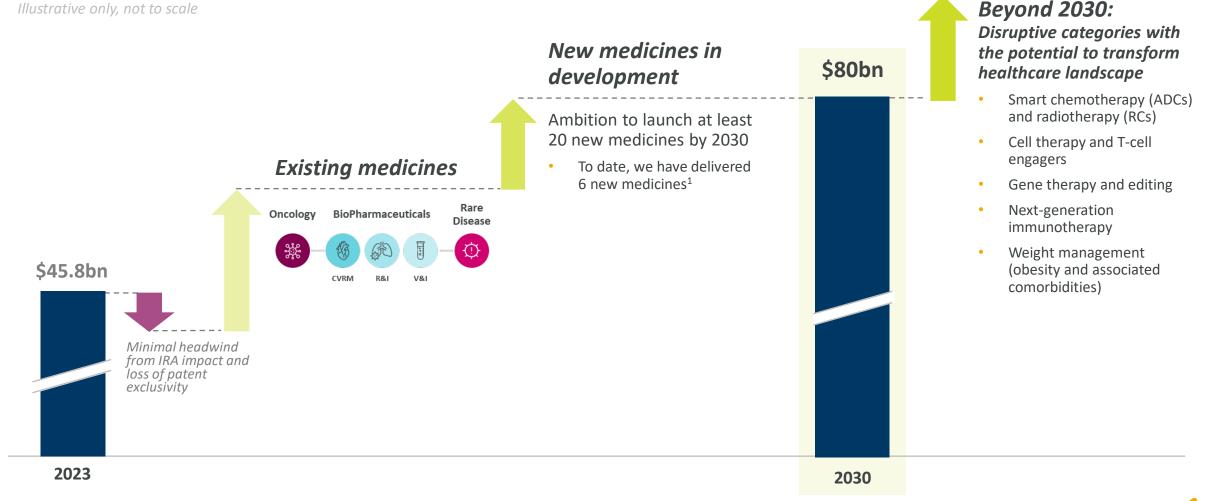
### **Pam Cheng**

EXECUTIVE VICE PRESIDENT, GLOBAL OPERATIONS, INFORMATION TECHNOLOGY AND CHIEF SUSTAINABILITY OFFICER



### Ambition – \$80bn Total Revenue by 2030 & sustained 2030+ growth Working on "today, tomorrow and the day after"

Illustrative only, not to scale

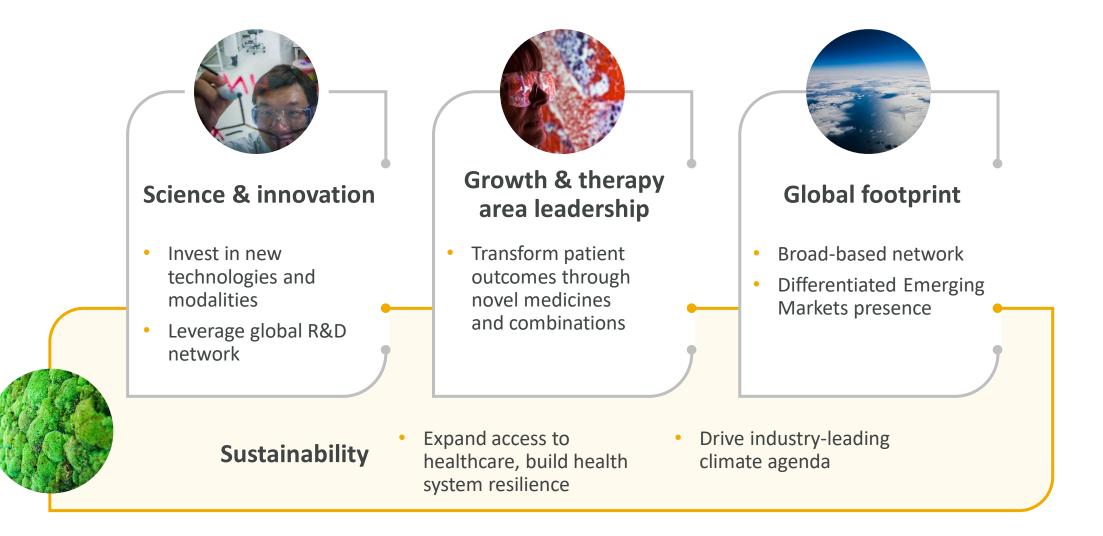


Note: Ambition to achieve \$80bn in Total Revenue by 2030 is risk-adjusted, based on latest long-range plan - see 'Forward looking statements' slide for forward looking statement.

Medicines and assets listed reflect key contributors to 2030 Total Revenue ambition; however, this list is not exhaustive. Medicines and assets listed in alphabetical order and sorted by therapy area.

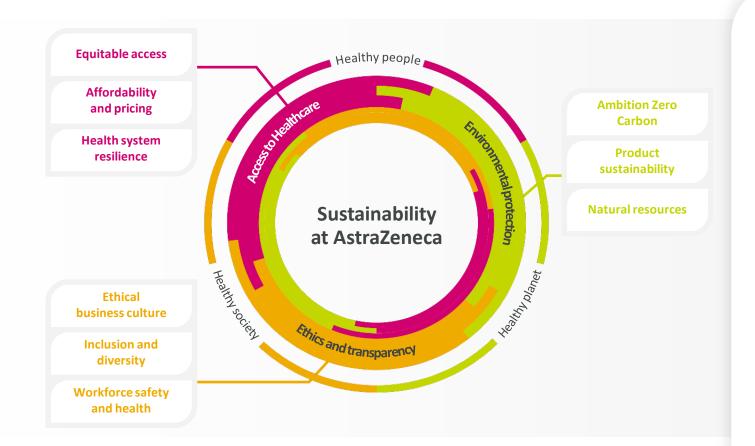
5 1. NME ambition tracking from date of first regulatory approval, dated from November 2022, total as of November 2024. CVRM = Cardiovascular, Renal & Metabolism; R&I = Respiratory & Immunology; V&I = Vaccines & Immune Therapies; ADC = antibody-drug conjugate; RC = radio-conjugate.

## Sustainability is core part of achieving our ambitions



## Industry-leading efforts in Sustainability

Our three interconnected priorities underpinned by nine focus areas



# Progress on our leadership in sustainability includes:

### 15

public and private sector organisations convened by AstraZeneca CEO through the SMI to accelerate transition to net-zero health systems

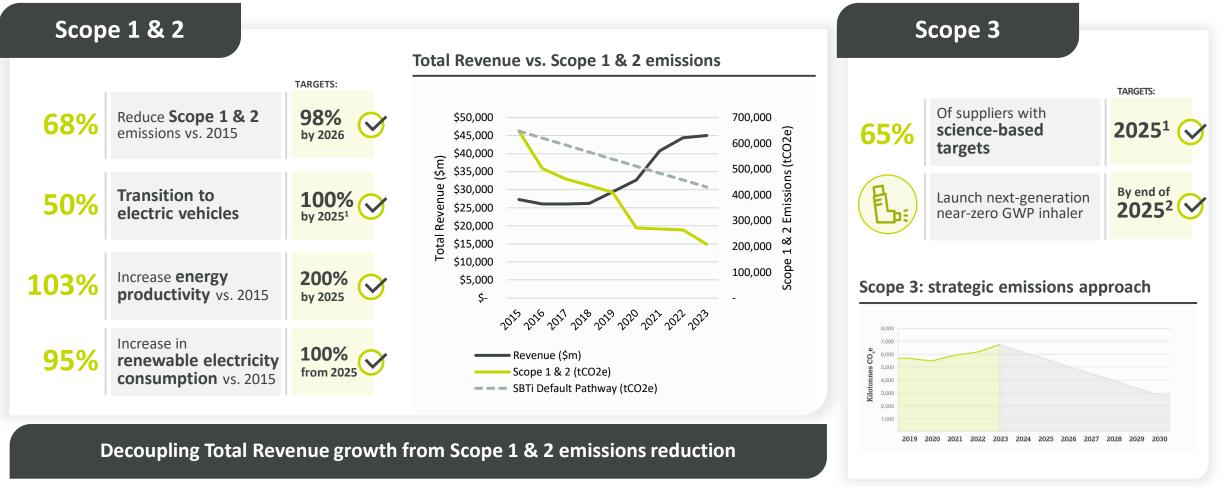
### **87%**

of employee survey respondents say that they understand their contributions to our sustainability priorities

## 25/27

of sustainability targets in Sustainability Data Annex are **"on plan"** 

## Driving bold decarbonisation through Ambition Zero Carbon



#### Metric "on plan"

1. By 2025, 95% of our suppliers by spend covering purchased goods and services and capital goods, and 50% of our suppliers by spend covering upstream transportation and distribution and business travel, will have SBTs.

8 2. Timelines subject to regulatory review and approval processes

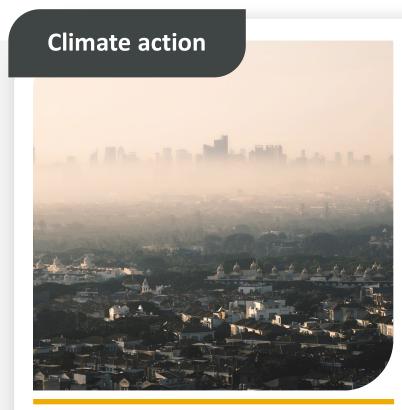
tCO2e = tonnes of carbon dioxide equivalent; SBTi = Science Based Targets Initiative; GWP = Global Warming Potential.

# Building more sustainable and resilient healthcare systems across the world

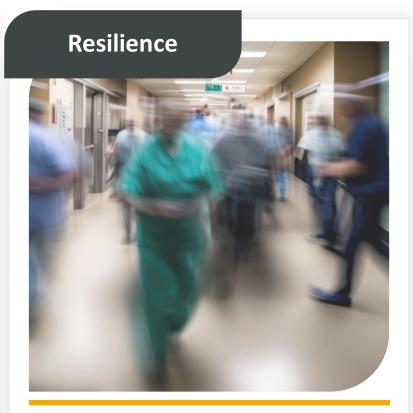


### Partnering to drive focused interventions, policy change and scalable action

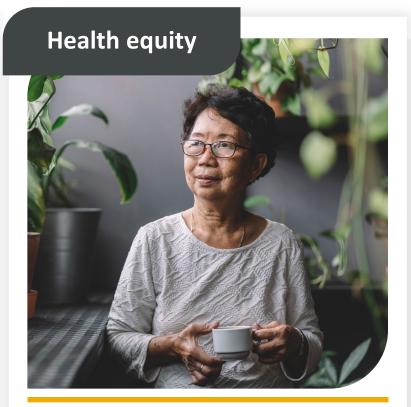
## Acting now to secure a sustainable future for all



The climate crisis is worsening the burden of disease



Health systems are unable to cope with rising demands



Health disparities are widening within and between countries

# Health Equity at AstraZeneca

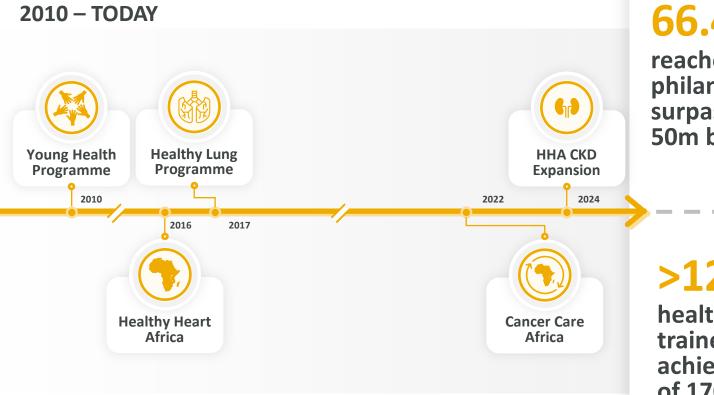


### Dave Fredrickson

EXECUTIVE VICE PRESIDENT, ONCOLOGY BUSINESS



# Our journey to date: A foundation of successful philanthropic programmes



## 66.4m people

reached through philanthropic programs<sup>1</sup> surpassing target of 50m by 2025



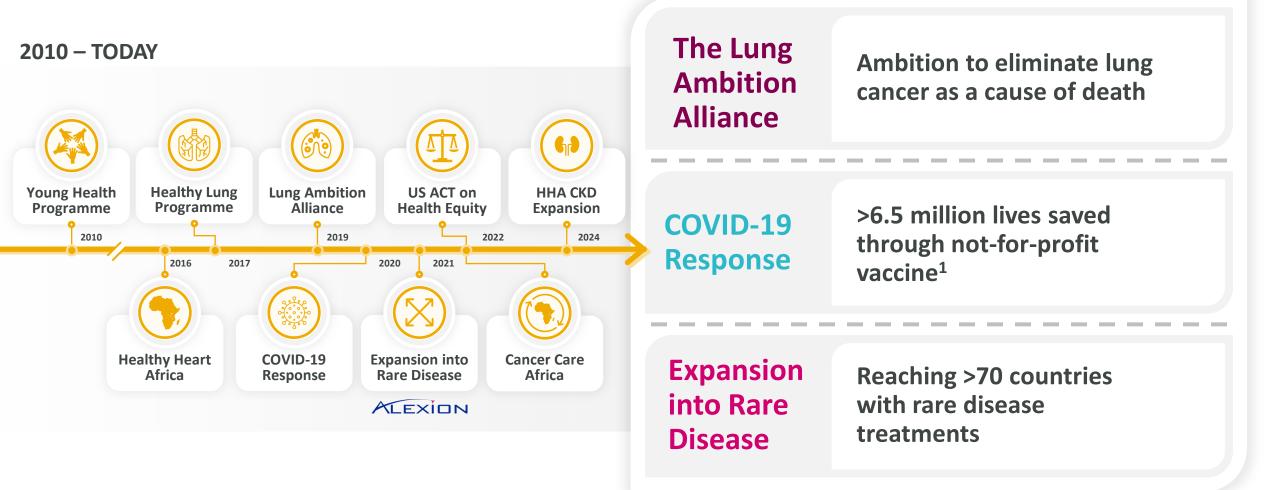
## >127,300

healthcare workers trained<sup>2</sup> on-plan to achieve target of 170,000 by 2025



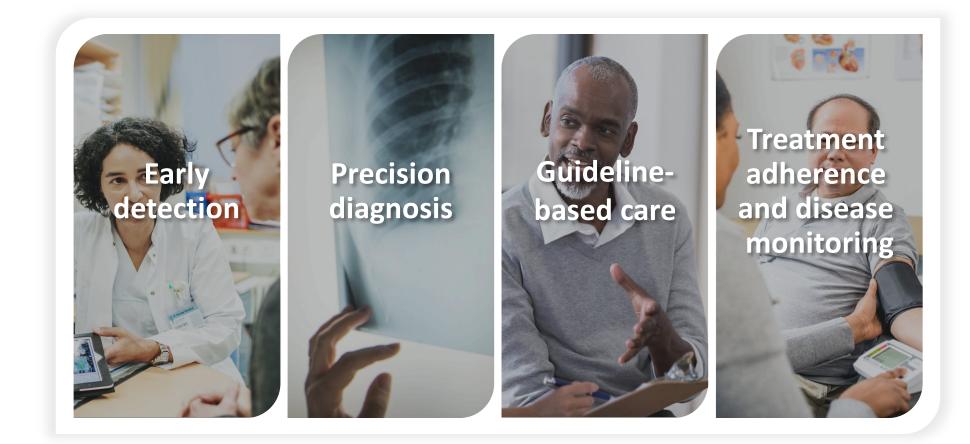
12

Our journey to date: Expanding access via strategic adjacencies across our therapeutic areas

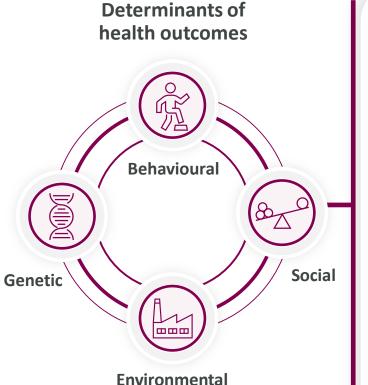


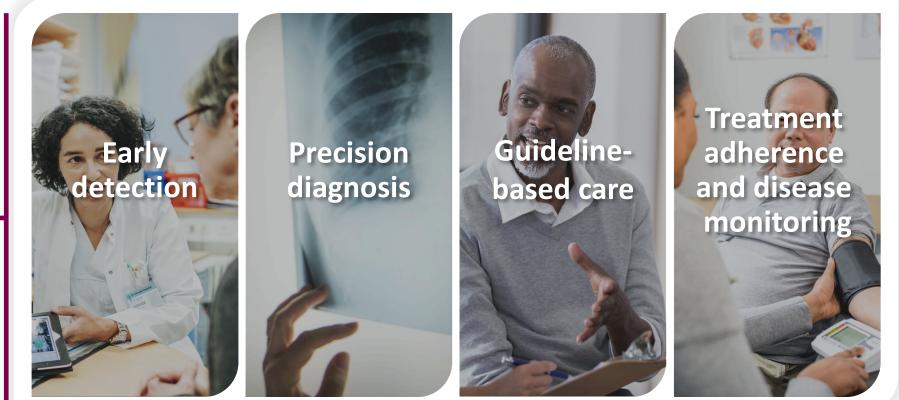
13 1. AstraZeneca supplied >3bn doses of Vaxzevria to >180 countries which helped >6 million lives worldwide in its first year of availability (December 2020 – December 2021). ACT = Accelerate Change Together; HHA = Healthy Heart Africa; CKD = chronic kidney disease.

## Care gaps exist at every step of the patient journey

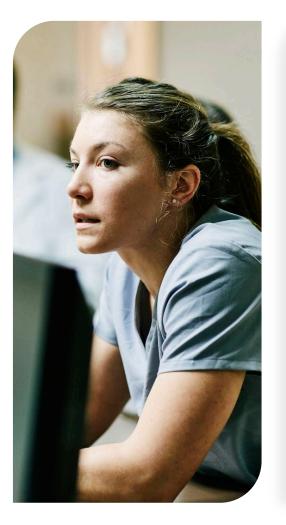


## Determinants of health outcomes amplify these care gaps globally





# Broadening "Access to Healthcare" to "Health Equity" at AstraZeneca



### The journey to our Health Equity strategy

**Evaluate** current and future health equity initiatives

>170 existing heath equity-related initiatives across our organisation

>40

additional high-impact ideas and initiatives identified

Conducted interviews and workshops with stakeholders across

health ecosystem

Engage

key stakeholders

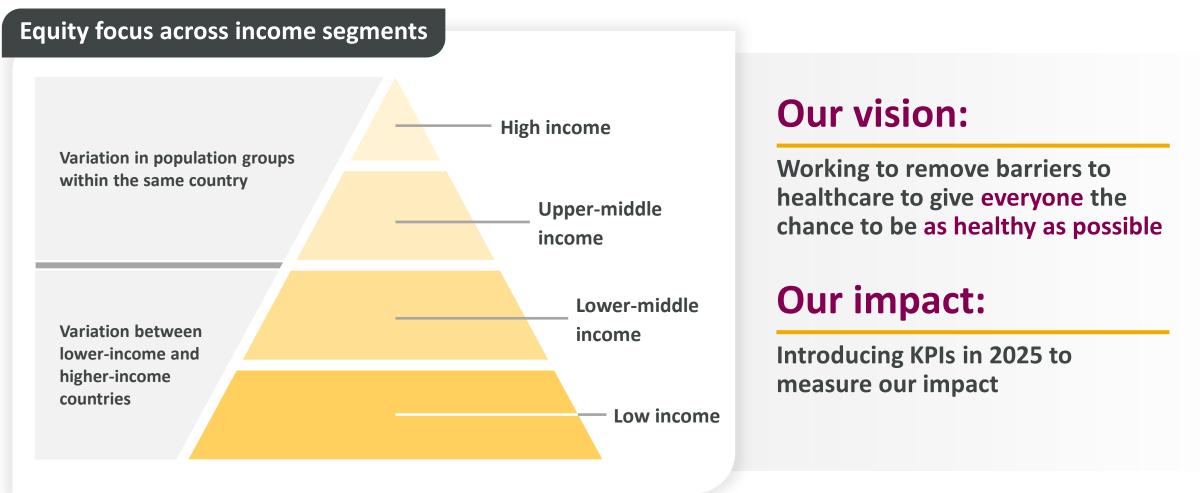
to enable change

Action
high-impact
opportunities

Embedding health equity across our global organisation via market-tailored framework

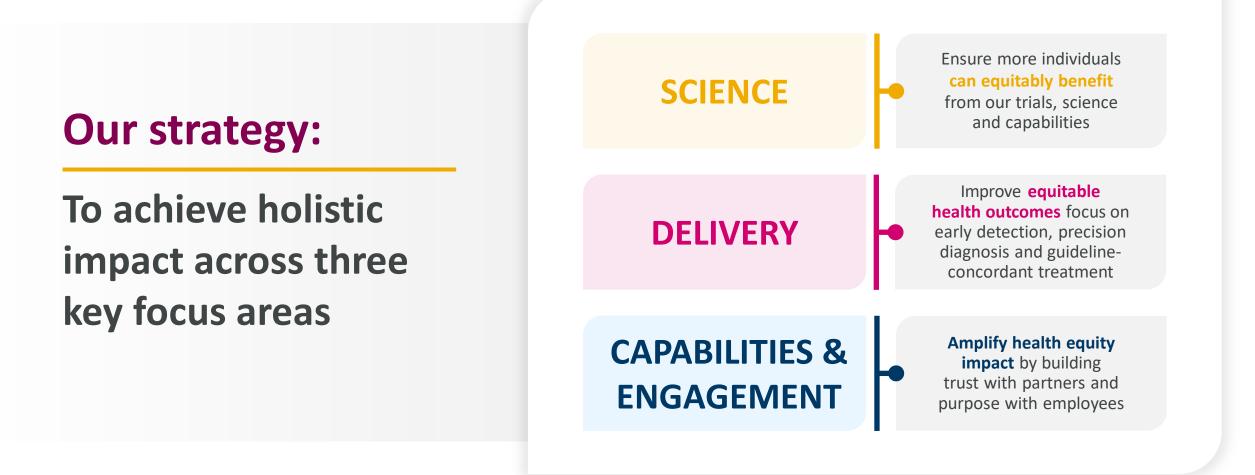
S

## Our vision is to drive health equity across all healthcare systems and income segments



17

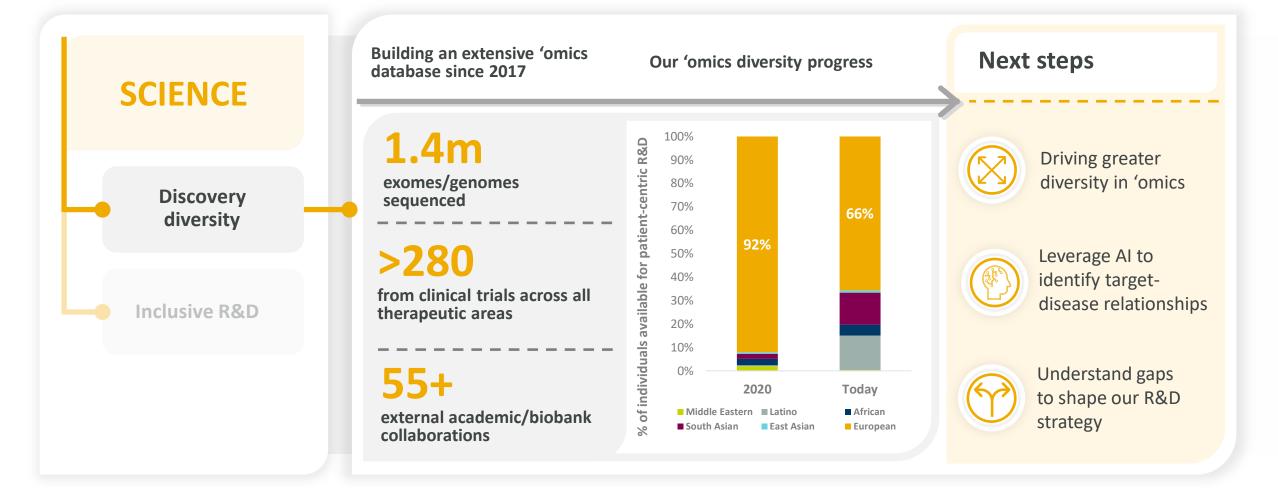
## Our Health Equity strategy underpinning our ambition



**Science** 

#### **Equity in Action**

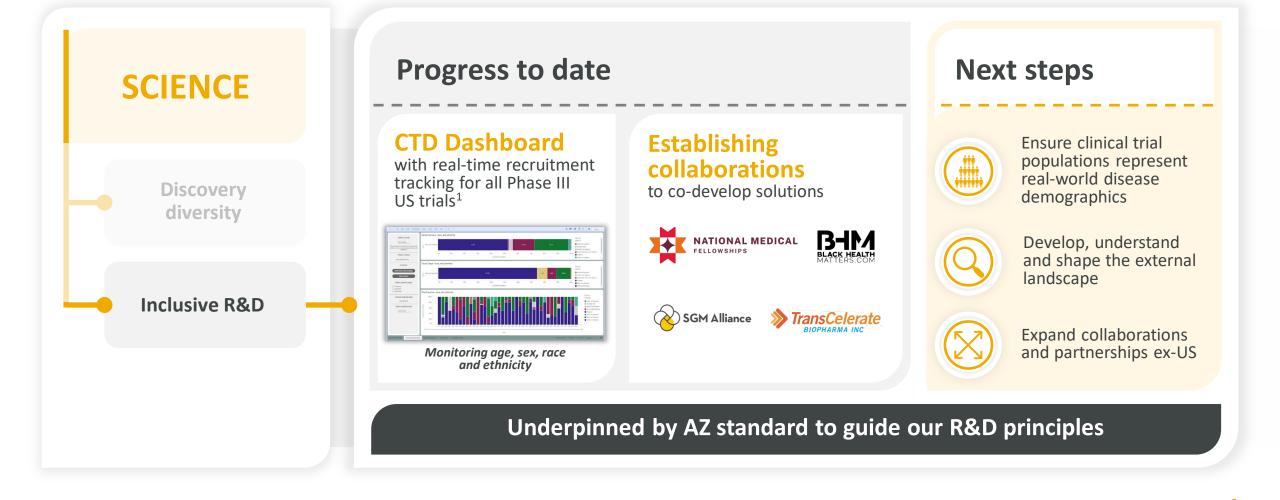
# Leading in discovery diversity with our genomics initiative



Science

Equity in Action

# Committed to enrolling diverse clinical trial populations to improve equitable access



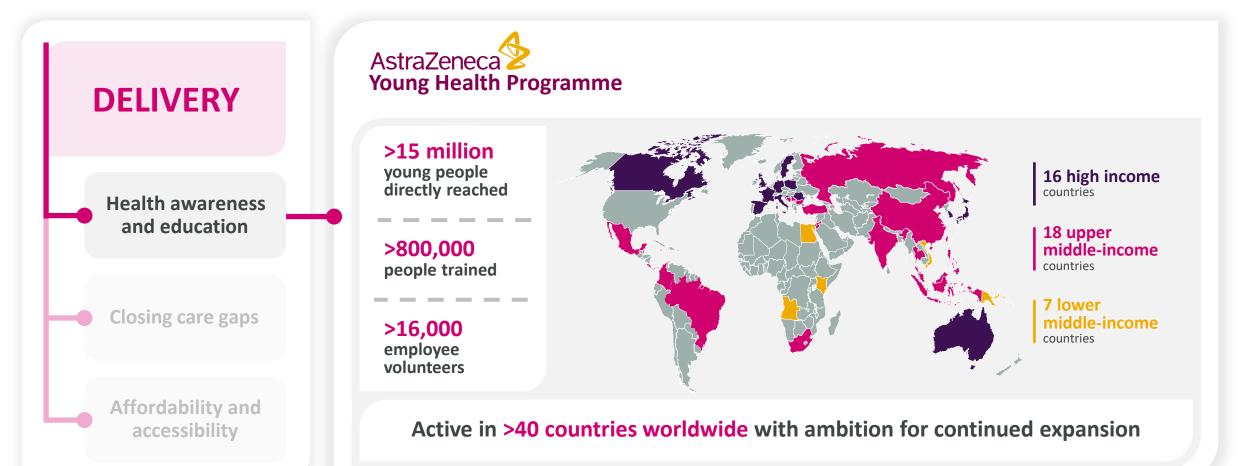
20

#### Strategy

**Equity in Action** 

Delivery

We remain committed to our philanthropic efforts: growing impact from Young Health Programme

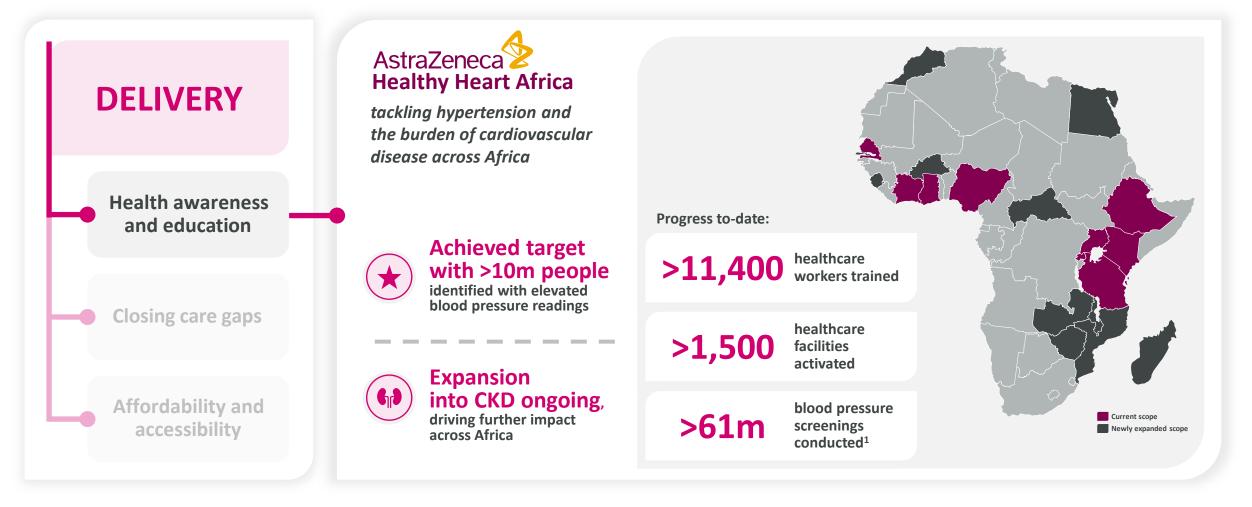


#### Strategy

**Equity in Action** 

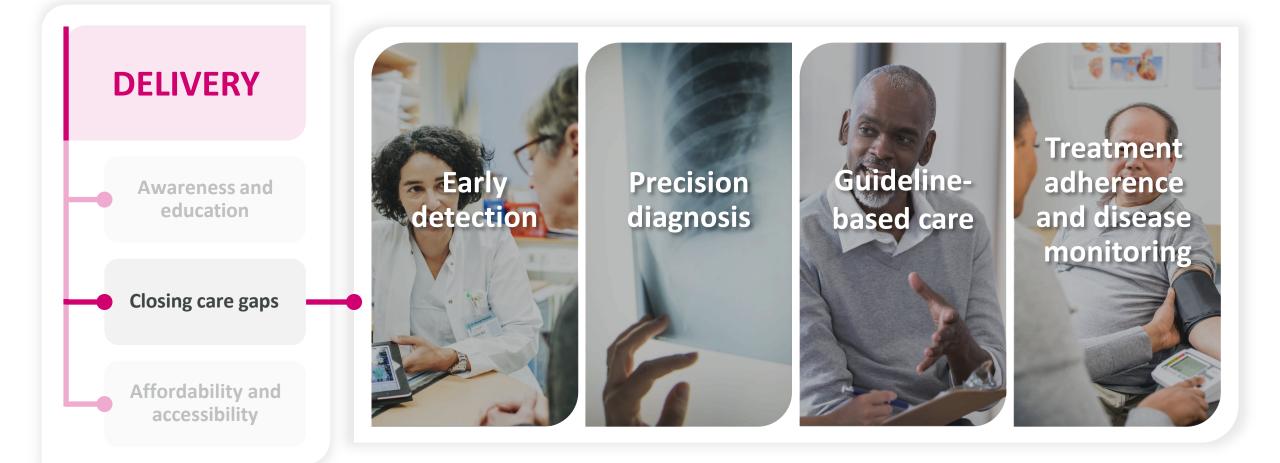
Delivery

## We remain committed to our philanthropic efforts: Health Heart Africa expanding into CKD



Delivery

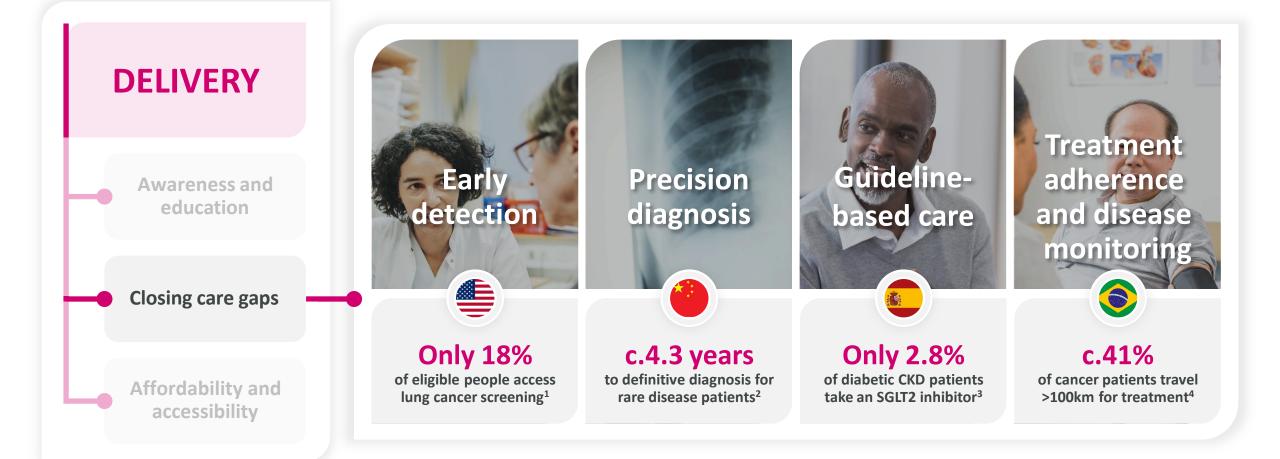
# Partnering along the entire patient journey to close care gaps and improve equitable outcomes



23

Delivery

# Partnering along the entire patient journey to close care gaps and improve equitable outcomes



1. Bandi P, et al. Lung Cancer Screening in the US, 2022. JAMA Intern Med. 2024;184(8):882–891. 10.1001/jamainternmed.2024.1655. 2. Yan X, et al, Int J Environ Res Public Health. 2020 Mar 8;17(5):1757. 3. Alcazar R, et al, Clin

24 Kidney J. 2022 Mar 5;15(7):1415–1424.4. Fonseca B, et al, The Lancet Regional Health – Americas, Volume 7100153 March 2022.

CKD = chronic kidney disease; SGLT2 = sodium glucose cotransporter-2.

Delivery

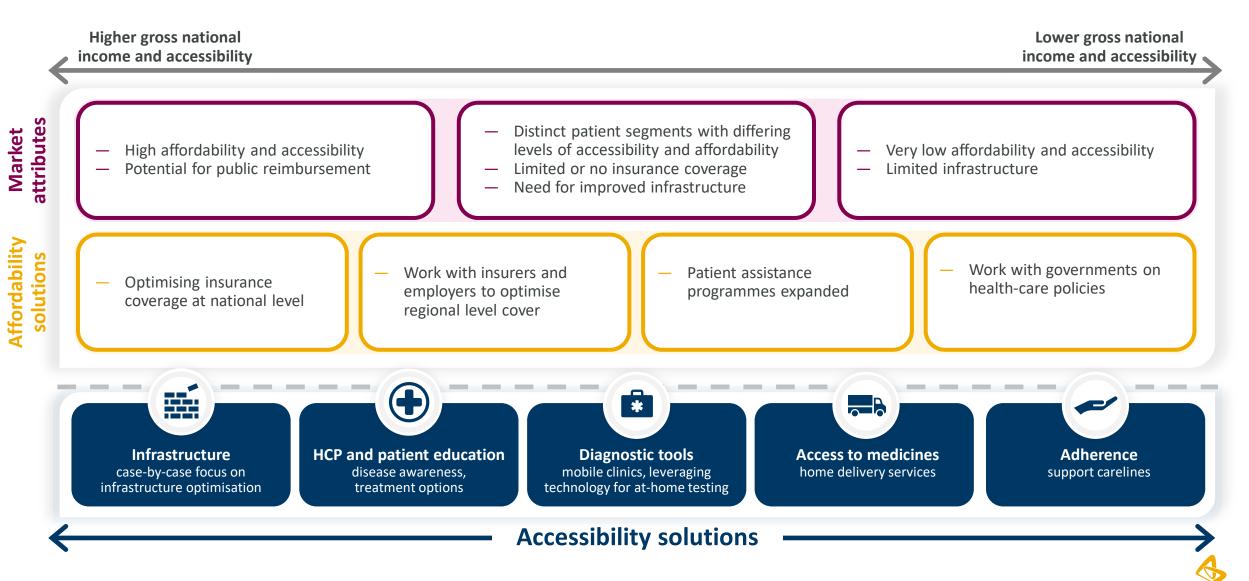
## Our four principles to sustainable affordability Multiple factors influence affordability and accessibility



Delivery

#### **Equity in Action**

## Affordability and accessibility varies by market



#### Strategy

Engagement

**Equity in Action** 

### Capabilities and engagement Building trust with partners and purpose with employees



# Equity in Action across AstraZeneca



### Dave Fredrickson

EXECUTIVE VICE PRESIDENT, ONCOLOGY BUSINESS



### Marc Dunoyer

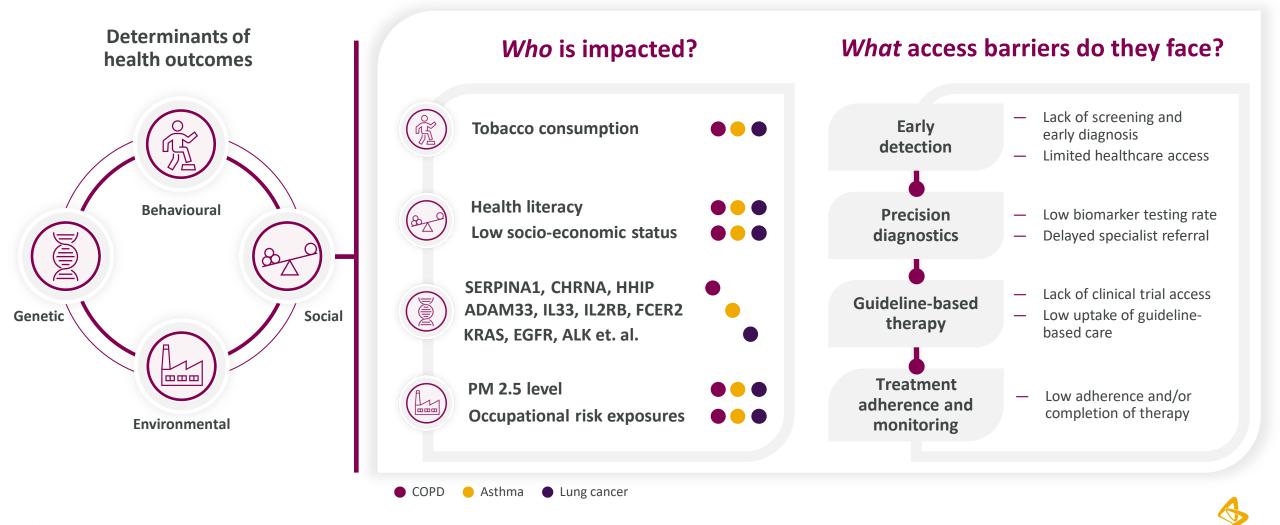
CHIEF EXECUTIVE OFFICER, ALEXION AND CHIEF STRATEGY OFFICER, ASTRAZENECA

## Lung health is a key priority for AstraZeneca

29

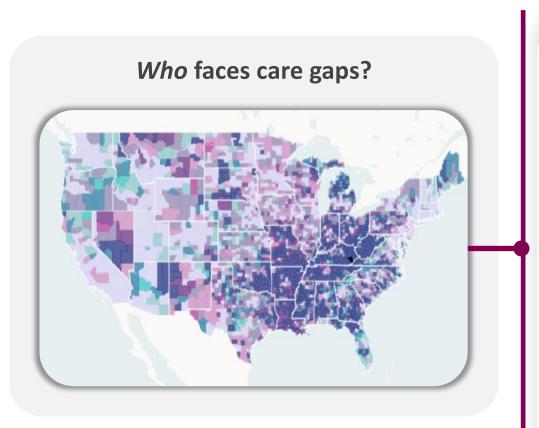
	Unmet need and opportunity	Deep pipeline and ambitions	Our leading medicines
Lung cancer	<b>1/5 of all cancers</b> causing 1.8m deaths in 2020 <sup>1</sup>	>50% of lung cancer patients to be eligible for AstraZeneca medicine by 2030	TAGRISSO° <b>ENHERTU</b> <b>IMFINZI°/ © IMJUDO</b> ™
COPD	<b>3rd leading cause</b> of death <sup>2,3</sup>	Addressing heterogeneity of disease through broad pipeline	BREZTRI AEROSPHERE Symbicort <sup>®</sup>
Asthma	<b>Only 20% biologic</b> <b>penetration</b> in severe asthma <sup>4</sup>	Substantial opportunity in Emerging Markets including China	AIRSUPRA <sup>™</sup>
29% of lung cancer d	eaths associated with air poll	ution <sup>5</sup> c.75% of COPD GHG emis	ssions associated with hospital care <sup>6</sup>

## Lung health outcomes are influenced by similar barriers across the patient journey



30 SERPINA1 = serpin family A member 1; CHRNA = cholinergic receptor nicotinic alpha; HHIP = hedgehog interacting protein; ADAM33 = ADAM metallopeptidase domain 33; IL33 = interleukin 33; IL2RB = interleukin 2 receptor beta; FCER2 = Fc epsilon receptor 2; KRAS = Ki-ras2 Kirsten rat sarcoma viral oncogene homolog; EGFR = epidermal growth factor receptor; ALK = anaplastic lymphoma kinase; PM 2.5 = particulate matter 2.5.

# Understanding care gaps with precision analytics to maximise our impact in lung health



# Identify and execute on actionable drivers of disparities:



Areas with low lung cancer incidence and higher mortality rates to inform **stage shift strategy in hotspot areas of inequity** 



Regions with high incidence COPD, underdiagnosis and not receiving standard-of-care due to inequities



How our clinical trial sites map against areas of highest relative inequity and where populations underserved by clinical trials are located

31

## Driving early detection of disease through lung screening programs



### Al-powered diagnostic partnership

 — 17% improvement in detecting lung nodules<sup>1</sup>

- Applicable to LMICs

UK lung cancer screening programme

driving more lung cancer diagnoses in deprived groups<sup>2</sup>

- Drove initial awareness campaign
- Supported evidence generation and economic modelling
- Advocated for policy change

QUICE.al Smi

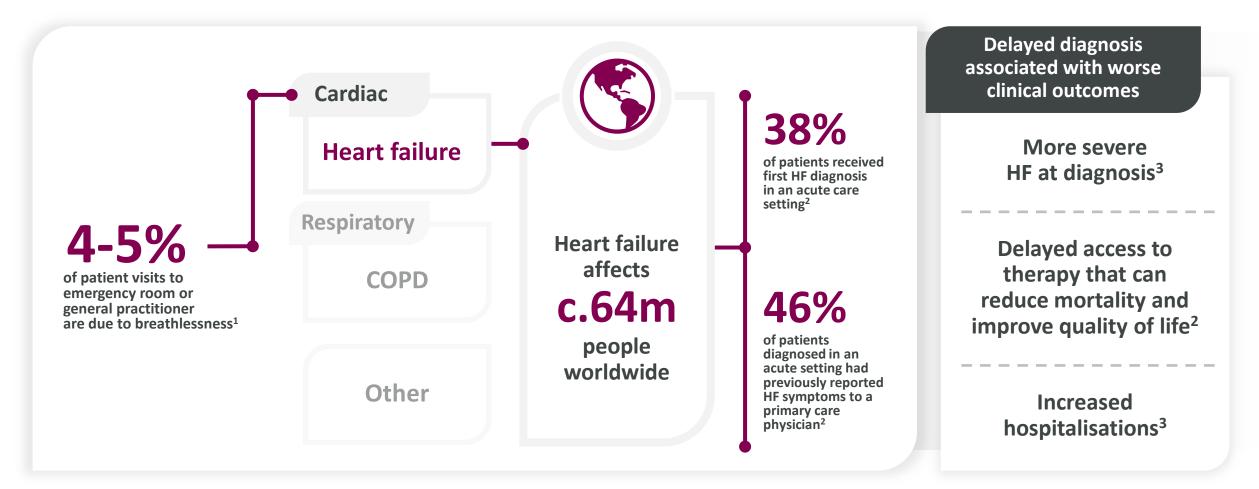
On track to screen **5 million** patients by 2025



Targeted Lung Health Check Programme

**Opportunity for a collaborative approach for the detection of lung diseases** 

## Breathlessness is a common symptom across diseases; delayed diagnosis associated with worse outcomes



# Accelerating diagnosis of heart failure and COPD through community-based screening

# Leveraging AI to accelerate detection of Heart Failure

- Validated AI-assisted ultrasound testing outside of hospital setting<sup>1</sup>
- Reduced waiting time from 12 months to <6 weeks in Scotland</li>
- Ongoing SYMPHONY trial to expand application in 5 countries

Partnering with:



### Innovative Community outreach through sports club

- Heart and lung screening hub in one of the UK's most deprived areas
- Building trust with hard-to-reach patient group
- >1,000 screened driving new HF, hypertension and COPD diagnoses

Partnering with:

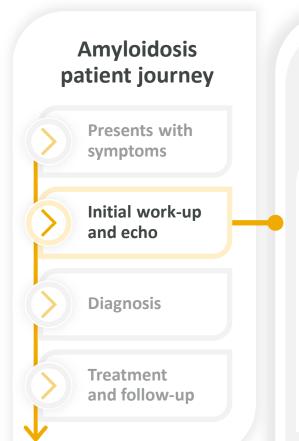




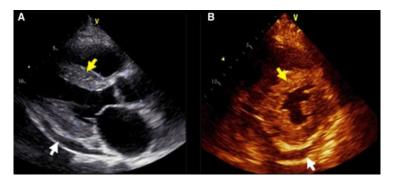
Strategy

**Equity in Action** 

## Improving cardiac amyloidosis diagnosis through innovative AI partnerships



Enhancing detection of amyloidosis signatures via AI software



Echocardiogram is a key early exam, yet there is low detection of amyloidosis due to manual processing

#### Accelerating amyloidosis disease detection to drive earlier intervention and improve patient outcomes

Partnering with:



Validating in community setting to demonstrate earlier patient identification outside of hospital care

**FDA Clearance** 



Developing Al software medical device to analyse echocardiogram videos



## Amyloidosis is a strategic priority across CVRM and Rare Disease A portfolio to address the two most prevalent cardiac amyloidosis



Light-chain (AL) amyloidosis



## Being born with a rare disease is inherently inequitable



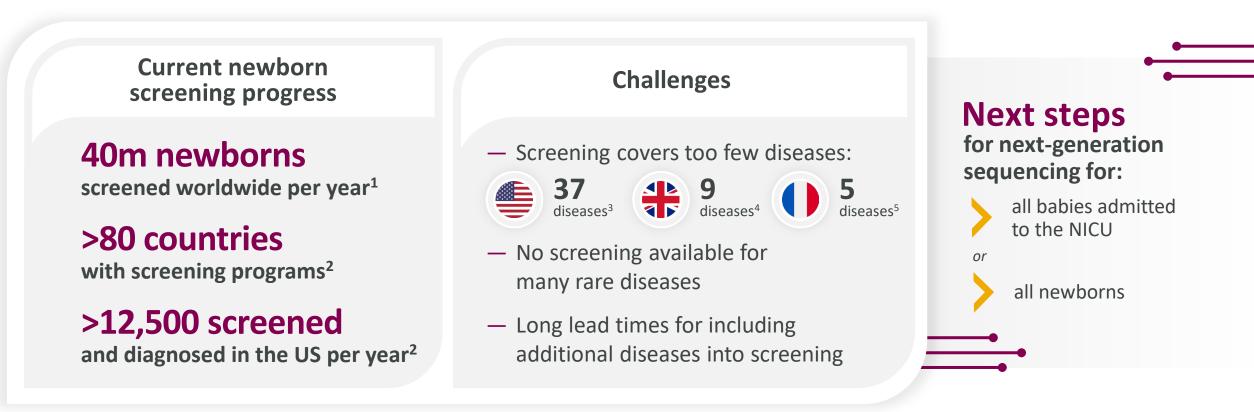
Global Genes Allies in Rare Diseases, 2. Fermaglich LJ, Miller KL, Orphanet Journal of Rare Diseases. 2023 Jun 23;18(1). 10.1186/s13023-023-02790-7, 3. U.S. Department of Health and Human Services; [cited 2024 Jan 17]. Available
from: <a href="https://rarediseases.info.nih.gov/about">https://rarediseases.info.nih.gov/about</a>, 4. Barriers to Rare Disease Diagnosis, Care and Treatment in the U.S.: A 30 Year Comparative Analysis. National Organization for Rare Disorders; 2020 Nov [cited 2023 Feb 8], 5. Charles River Associates The economic cost of living with a rare disease across Europe, October 2024.

## Patients with rare disease face multiple inequities across the diagnosis and treatment pathway





Newborn screening, one of the most successful public health programmes but only covers a small fraction of diseases today



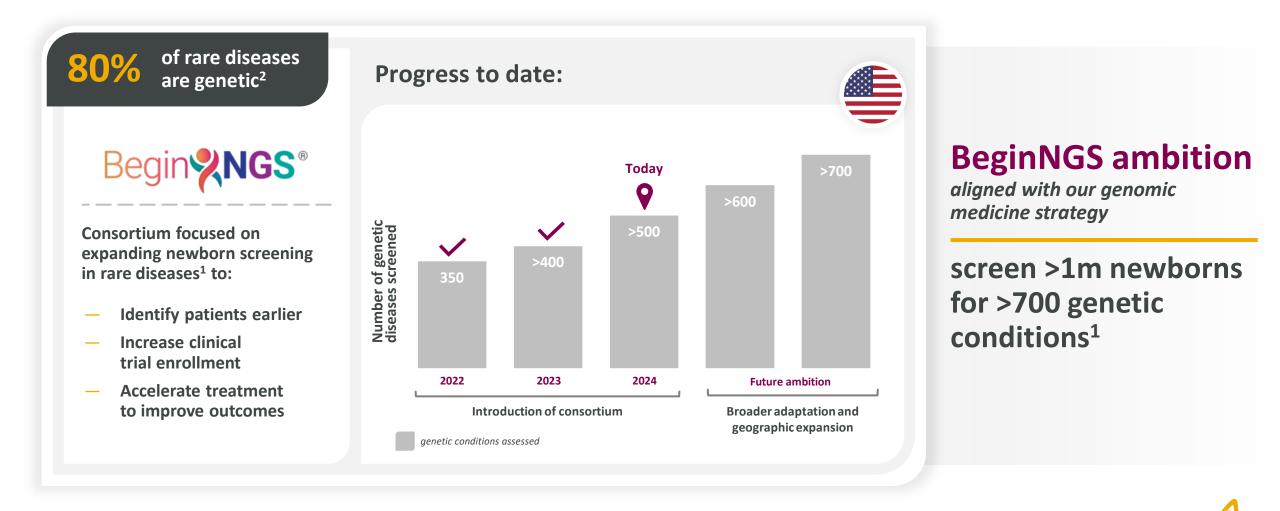
### >5,000 gene therapy trials listed with NIH<sup>6</sup>

International Society for Neonatal Screening October 2023, 2. CDC data, 3. Federal Advisory Committee. (Aug. 2022). Recommended Uniform Screening Panel. Health Resources & Services Administration., 4. Charles River
Associates, A landscape assessment of newborn screening (NBS) in Europe, November 2021. 5. BeginNGS Evolution of Newborn Screening Timeline radygenomics.org; 6. (linicalTrials.gov, as of February 23, 2023. NGS = next-generation screening; NICU = neonatal intensive care unit.

Strategy

**Equity in Action** 

# Establishing newborn screening as standard-of-care as part of 'BeginNGS' genome sequencing consortium



0

## Driving health equity while delivering shareholder value

## **2030 Ambition**



To deliver \$80bn in Total Revenue by 2030, with sustained growth 2030+

– Mid-30s% Core operating margin by 2026

 Beyond 2026, Core operating margin will be influenced by portfolio evolution and the Company will target at least mid-30s%

## **Health Equity Ambition**

### Our vision:

working to remove barriers to healthcare to give everyone the chance to be as healthy as possible

### **Our impact:**

introducing KPIs in 2025 to measure our impact

# **Q&A Session** with Key Health Equity Leaders



Pam Cheng

EXECUTIVE VICE PRESIDENT, GLOBAL OPERATIONS, INFORMATION TECHNOLOGY AND CHIEF SUSTAINABILITY OFFICER



### Stefan Weber

VICE PRESIDENT, POLICY, PATIENT ADVOCACY AND HEALTH EQUITY



### **Dave Fredrickson**

EXECUTIVE VICE PRESIDENT, ONCOLOGY BUSINESS



#### **Marc Dunoyer**

CHIEF EXECUTIVE OFFICER, ALEXION AND CHIEF STRATEGY OFFICER, ASTRAZENECA



#### **Elena Tricca**

VICE PRESIDENT, GLOBAL MARKET ACCESS AND PRICING, BIOPHARMACEUTICALS

## Sustainability Governance at AstraZeneca

#### **Board of Directors – Delegated Committees**

#### **Board Audit Committee**



Philip Broadley Senior Independent Non-Executive Director of the Board, Chair of the Audit Committee



Sheri McCoy Non-Executive Director of the Board



**Deborah DiSanzo** Non-Executive Director of the Board



Anna Manz Non-Executive Director of the Board





Non-Executive Director of the Board, Chair of the Sustainability Committee

**Sustainability Committee** 

Sheri McCoy Non-Executive Director of the Board

Marcus Wallenberg Non-Executive Director of the Board

Andreas Rummelt Non-Executive Director of the Board

#### **Remuneration Committee**



Sheri McCoy Non-Executive Director of the Board, Chair of the Remuneration Committee



Nazneen Rahman Non-Executive Director of the Board



**Philip Broadley** Senior Independent Non-Executive Director of the Board

#### Senior Executive Team (SET)



**Pascal Soriot** Executive Director and Chief Executive Officer



Pam Cheng Executive Vice President, Global Operations, Information Technology and Chief Sustainability Officer



Jeff Pott Chief Human Resources Officer, Chief Compliance Officer and General Counsel



Human Resources

Health Equity



Supply Chain

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