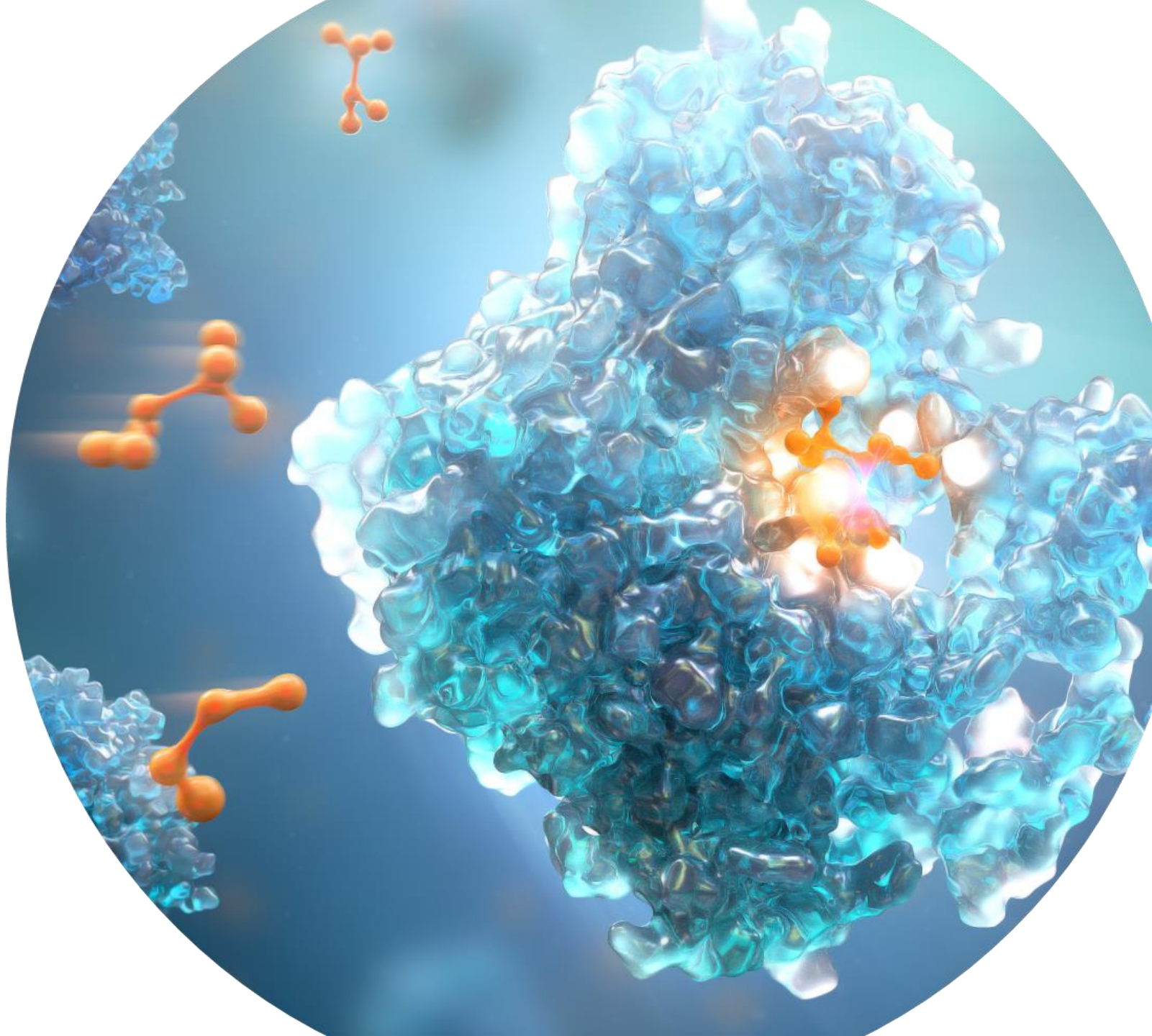




9M and Q3 2023 Results

Conference call and webcast
for investors and analysts

9th November 2023



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, quality 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 questioned, the risk of adverse outcome of litigation and/or governmental investigations, intellectual property-related risks to our products, the risk of failure to achieve strategic plans or meet targets or expectations, 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, the risk of failure in financial control or the occurrence of fraud, the risk of unexpected deterioration in the Group's financial position. Nothing in this document, or any related presentation/webcast, should be construed as a profit forecast.



9M and Q3 2023 Results

Conference call agenda

CEO Opening Remarks

Pascal Soriot

Chief Executive Officer

Financial Results

Aradhana Sarin

Chief Financial Officer

Oncology

Dave Fredrickson

EVP, Oncology Business

Susan Galbraith

EVP, Oncology R&D

BioPharmaceuticals

Ruud Dobber

EVP, BioPharmaceuticals Business

Sharon Barr

EVP, BioPharmaceuticals R&D

Rare Disease

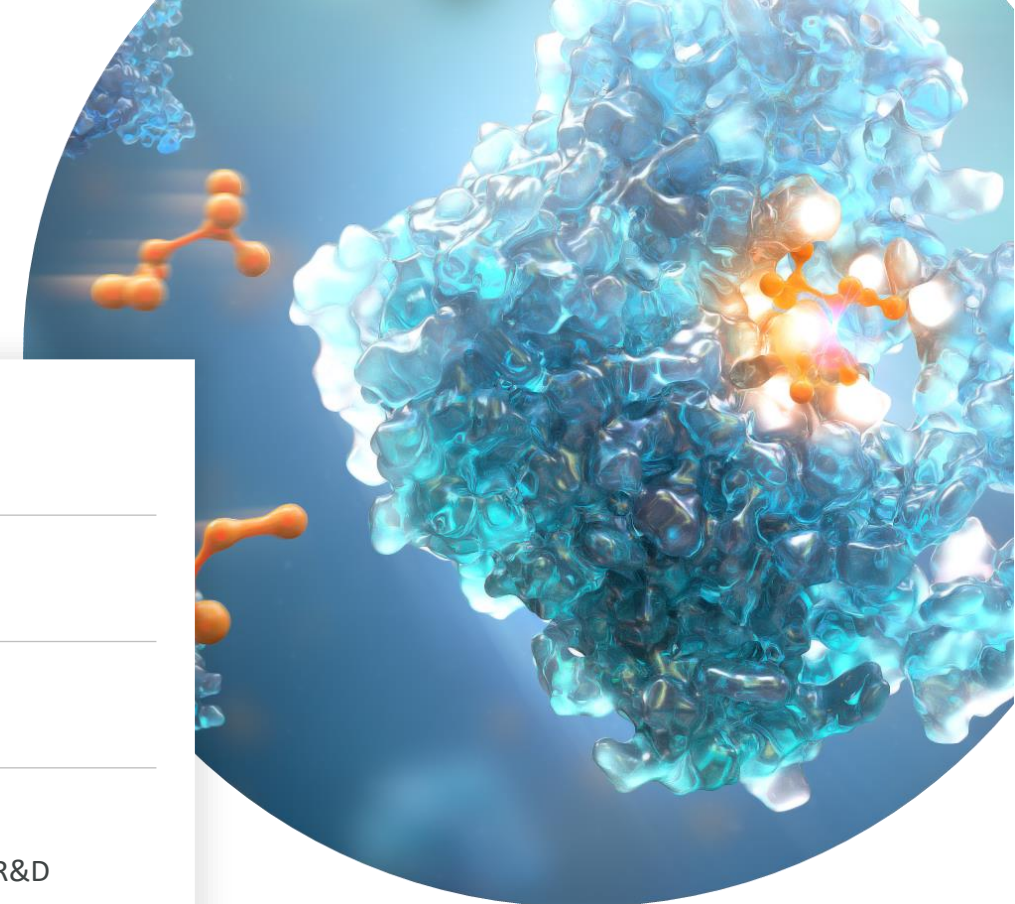
Marc Dunoyer

Chief Executive Officer, Alexion

CEO Closing Remarks, Q&A

Pascal Soriot

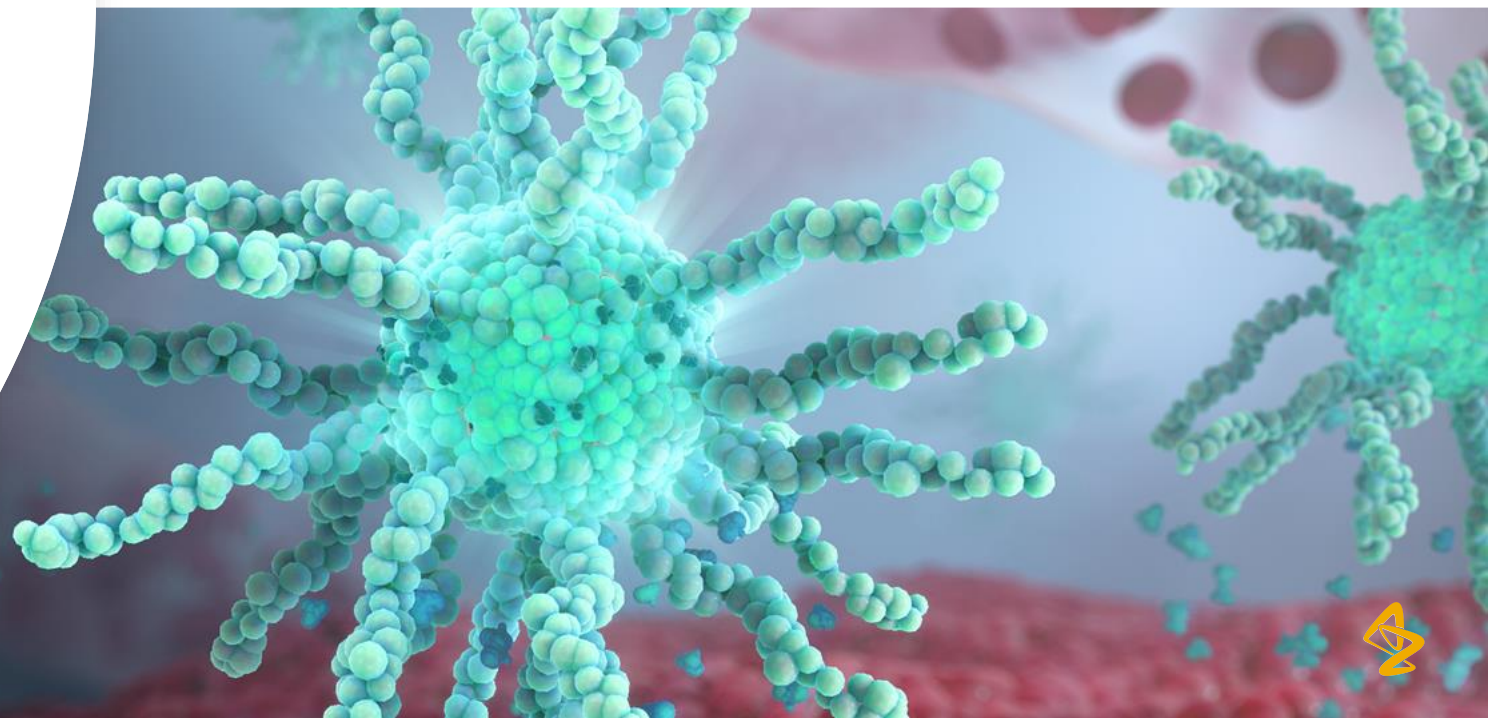
Chief Executive Officer



CEO Opening Remarks

Pascal Soriot

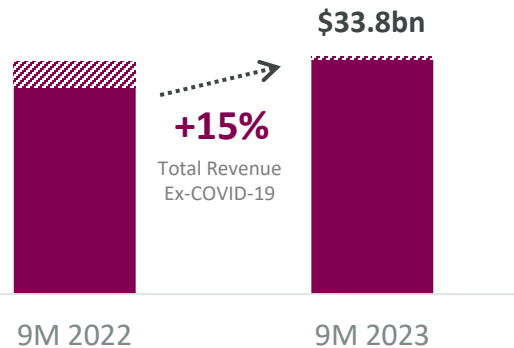
CHIEF EXECUTIVE OFFICER




Benefitting from broad-based, diverse sources of revenue

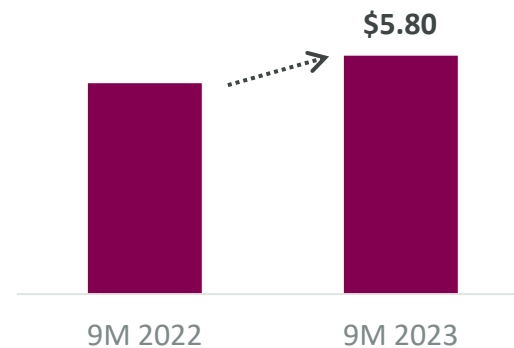
Strong commercial performance and financial delivery in 9M 2023

Total Revenue | +5%



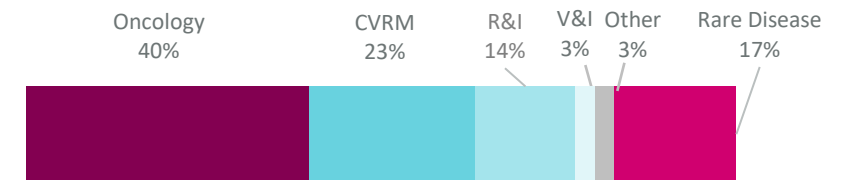
 Vaxzevria/COVID-19 mAbs¹
Total Revenue

Core EPS | +17%

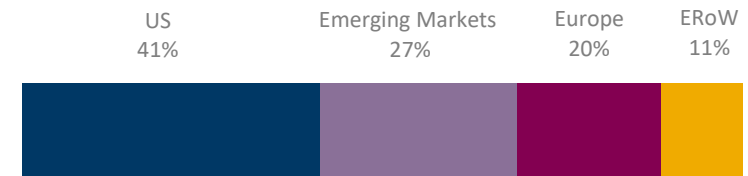


Broad-based, diverse source of Total Revenue

9M 2023 | % Total Revenue by therapy area



9M 2023 | % Total Revenue by geography



2023 guidance updated: Core EPS now expected to increase by a low double-digit to low-teens %

All growth rates at CER. Due to rounding, the sum of a number of dollar values and percentages may not agree to totals.

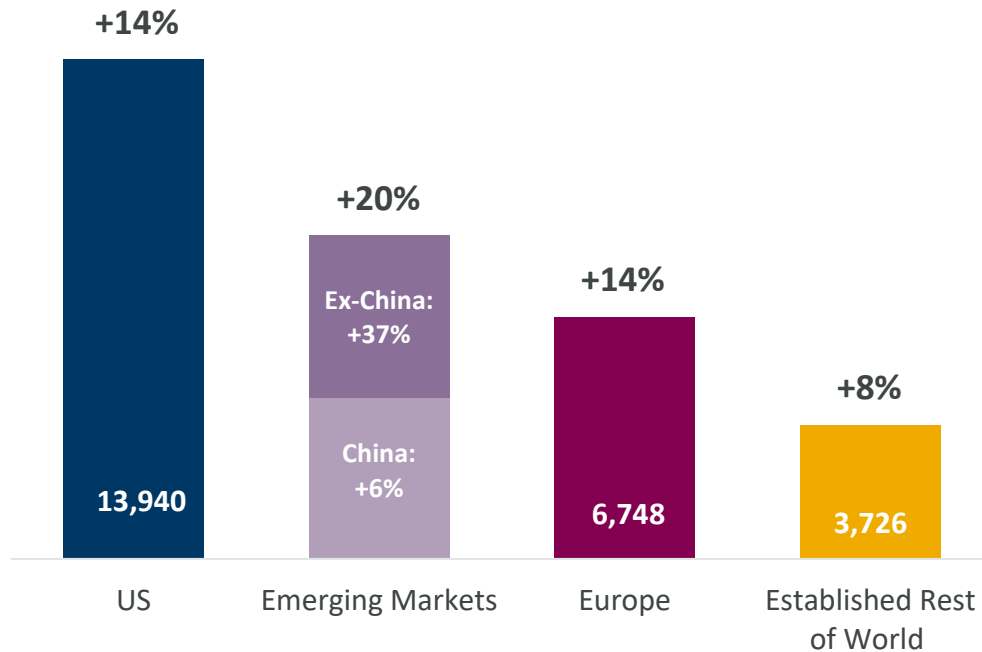
1. COVID-19 mAbs = *Evusheld* and AZD3152, the antibody currently in development. CER = constant exchange rates; mAb = monoclonal antibody; EPS = earnings per share; CVRM = Cardiovascular, Renal & Metabolism; R&I = Respiratory & Immunology; V&I = Vaccines & Immune Therapies; ERoW = Established Rest of World.



Strong growth across regions, therapy areas

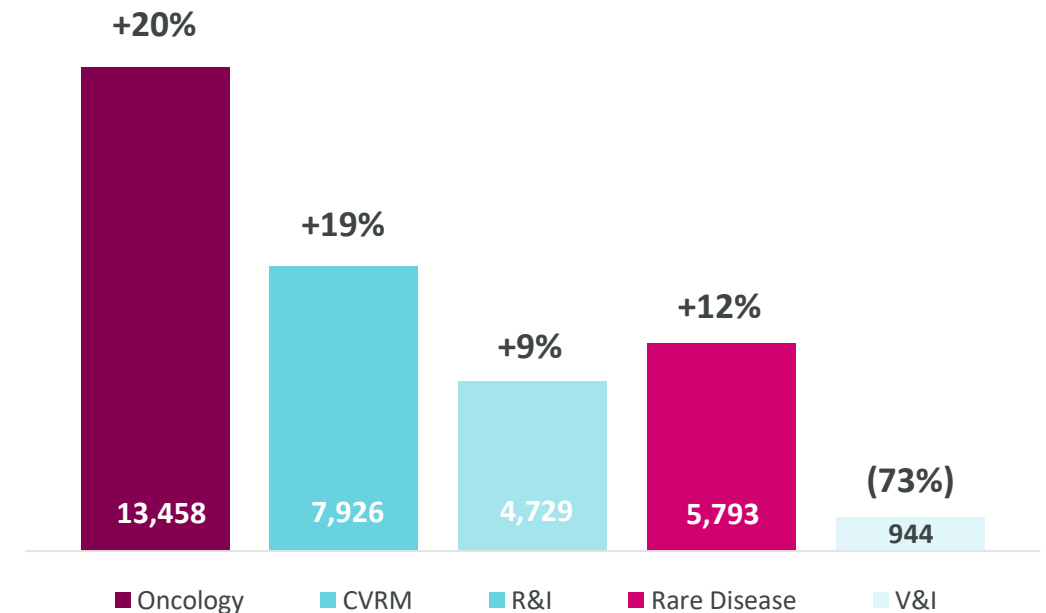
Double-digit growth across US, EM and EU

9M Total Revenue ex-COVID-19 (USD millions) and Growth vs PY



Strong growth across Oncology, CVRM, R&I and Rare Disease underpinning FY outlook

9M Total Revenue (USD millions) and Growth vs PY



AstraZeneca – building the pipeline of the future

Delivering sustainable, industry-leading growth



CELL THERAPY



GENE THERAPY



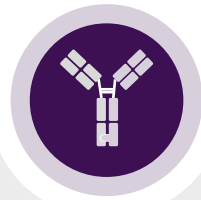
EPIGENETICS



T-CELL ENGAGERS



NOVEL ADCs



IO BISPECIFICS



OLIGONUCLEOTIDES



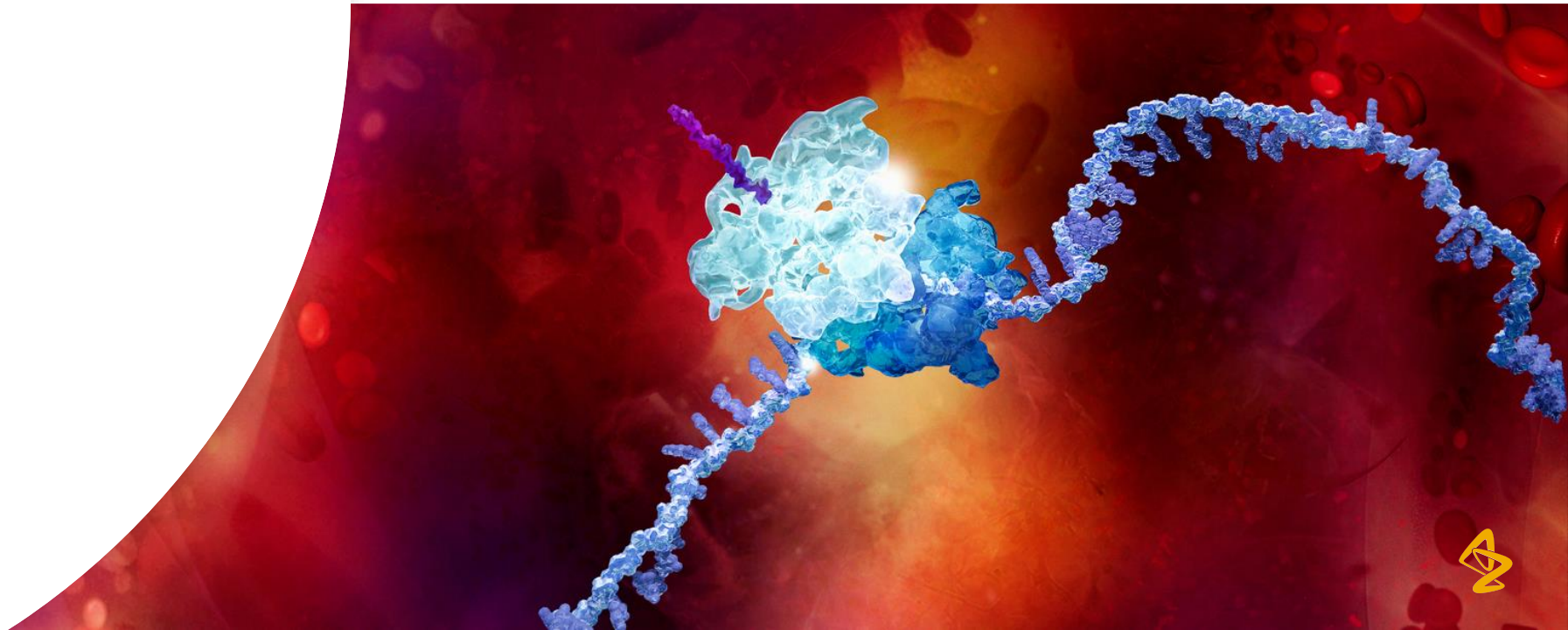
RNA THERAPIES

Therapy area leadership, broad pipeline and focused investment to deliver transformative new medicines

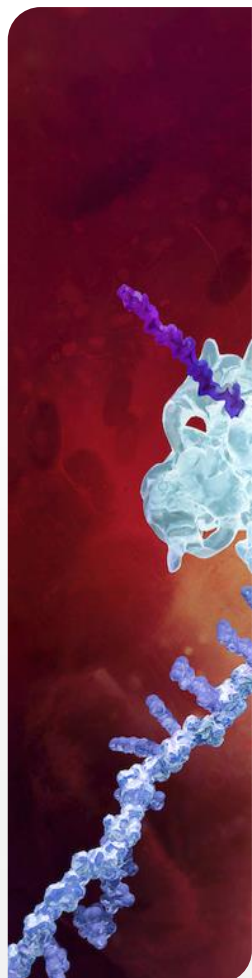


Financial Results

Aradhana Sarin
CHIEF FINANCIAL OFFICER



9M 2023 – Reported profit and loss



	9M 2023 \$m	CER change %	% Total Revenue	Q3 2023 \$m	CER change %	% Total Revenue
Total Revenue	33,787	5	100	11,492	6	100
- Product Sales	32,466	4	96	11,018	5	96
- Alliance Revenue	1,004	99	3	377	75	3
- Collaboration Revenue	317	(28)	1	97	(47)	1
Product Sales Gross margin	81.6%	+12 pp		81.0%	+10 pp	
Total operating expense ¹	(22,101)	6	65	(7,513)	9	65
- R&D expense	(7,862)	12	23	(2,584)	4	22
- SG&A expense	(13,845)	2	41	(4,800)	12	42
Other operating income and expense	1,233	>3x	4	70	(33)	1
Operating profit	6,959	>2x	21	1,954	69	17
Tax rate	17%			17%		
Reported EPS	\$3.22	>2x		\$0.89	(6)	

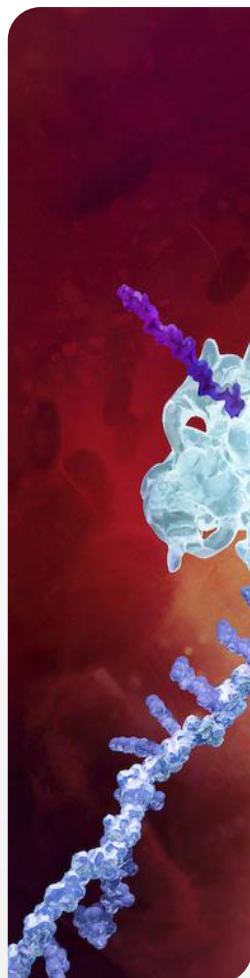
Due to rounding, the sum of a number of dollar values and percentages may not agree to totals.

⁹ Absolute values at actual exchange rates; changes at CER. Product Sales Gross margin excludes the impact of Alliance and Collaboration Revenue and any associated costs, thereby reflecting the underlying performance of Product Sales.

1. Total operating expense includes distribution, R&D and SG&A expenses. R&D = Research & Development; SG&A = Sales, General & Administrative; EPS = earnings per share; pp = percentage points; CER = constant exchange rates.



9M 2023 – Core profit and loss



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Total Revenue	33,787	5	100	11,492	6	100
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- Alliance Revenue	1,004	99	3	377	75	3
- Collaboration Revenue	317	(28)	1	97	(47)	1
Product Sales Gross margin	82.4%	+2 pp		81.4%	+1 pp	
Total operating expense ¹	(17,452)	7	52	(5,969)	6	52
- R&D expense	(7,353)	7	22	(2,485)	5	22
- SG&A expense	(9,705)	8	29	(3,355)	7	29
Other operating income and expense	1,172	>3x	3	70	(34)	1
Operating profit	11,782	16	35	3,545	9	31
Tax rate	19%			19%		
Core EPS	\$5.80	17		\$1.73	9	

Due to rounding, the sum of a number of dollar values and percentages may not agree to totals.

10 Absolute values at actual exchange rates; changes at CER. Product Sales Gross margin excludes the impact of Alliance and Collaboration Revenue and any associated costs, thereby reflecting the underlying performance of Product Sales.

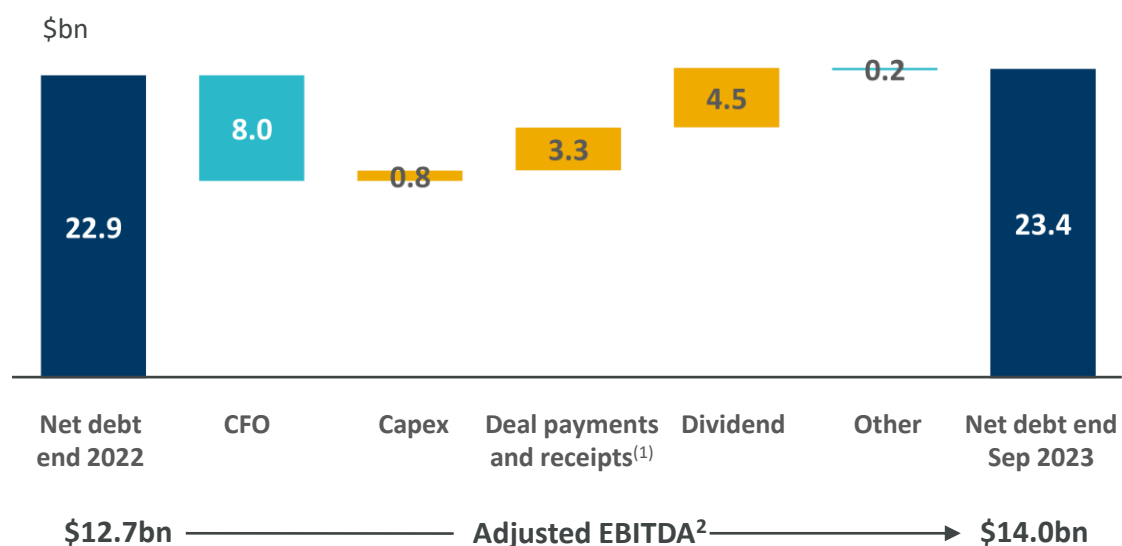
1. Total operating expense includes distribution, R&D and SG&A expenses. R&D = Research & Development; SG&A = Sales, General & Administrative; EPS = earnings per share; pp = percentage points; CER = constant exchange rates.



Cash Flow, Net Debt and 2023 Financial Guidance

Continued EBITDA improvement

Net Debt bridge



Net Debt/EBITDA: 1.7x

Updated 2023 Guidance (CER)

Total Revenue

- Mid single-digit % increase
(previously low-to-mid single-digit % increase)

Total Revenue excluding COVID-19 medicines

- Low-teens % increase
(previously low double-digit % increase)

Core EPS

- Low double-digit to low-teens % increase
(previously high single-digit to low double-digit % increase)

**Low single digit adverse FX impact on Total Revenue
Mid single-digit adverse FX impact on Core EPS³**

Due to rounding, the sum of a number of dollar values and percentages may not agree to totals.

1. Comprises disposal of intangible assets, movement in profit participation liability, purchase of intangible assets, payment of contingent consideration on business combinations, purchase and disposal of non-current asset investments, payment of Acerta Pharma share purchase liability and acquisitions of subsidiaries, net of cash acquired. 2. Rolling 12m EBITDA adding back the impact of unwind of inventory fair value uplift recognised on acquisition of Alexion of \$387m (FY 2022: \$3,484m).

11 AstraZeneca credit ratings: Moody's: short-term rating P-1, long-term rating A2, outlook stable. S&P Global Ratings: short-term rating A-1, long-term rating A, outlook stable. 3. Assuming average September 2023 foreign exchange rates for October to December 2023. EBITDA = earnings before interest, tax, depreciation and amortisation; CFO = net cash inflow from operating activities; CER = constant exchange rates; EPS = earnings per share.



Capital allocation

Capital allocation strategy unchanged

Reinvestment in the business

Free cashflow post-Capex

Maintain a strong investment-grade credit rating

Value-enhancing business development

Progressive dividend policy

Priority remains reinvesting in our business

Investments to drive future growth

- Currently >120 projects in Phase II/III development
- Investments behind launches in new indications and strengthening leadership in existing therapy areas
- Continued investments in new technologies and platforms including cell and gene therapies
- Value accretive deals
- Continue to leverage partnerships to drive innovation and bring medicines to markets quicker

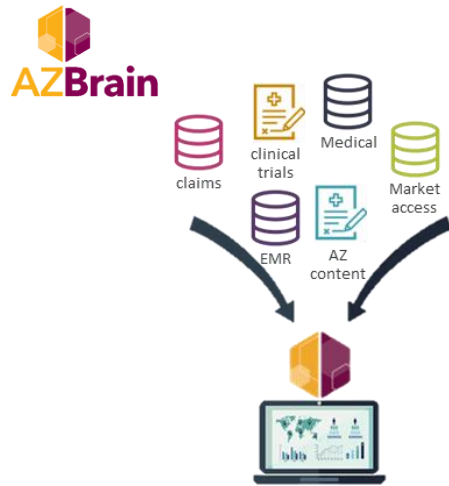
>20 new approvals in major markets YTD



AstraZeneca – AI in Commercial

DRIVING FASTER, BETTER DECISION MAKING | *harnessing technology to deliver better patient outcomes*

Delivering real-time insights



Advanced analytics enhance real-time decision making

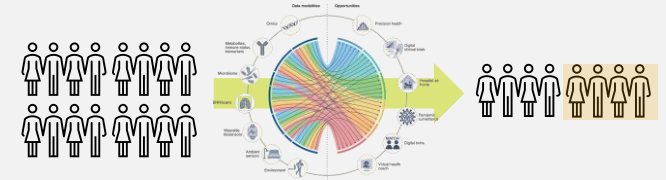
Addressing unmet needs and personalising engagement

Optimising identification of at-risk patients

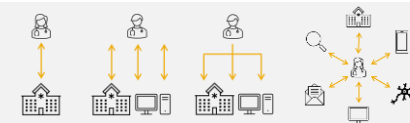


>6m analysed handwritten EMR notes in 24hrs

Applying AI and deep multimodal data to identify high responders



Predicting treatment eligible patient presentation in clinic

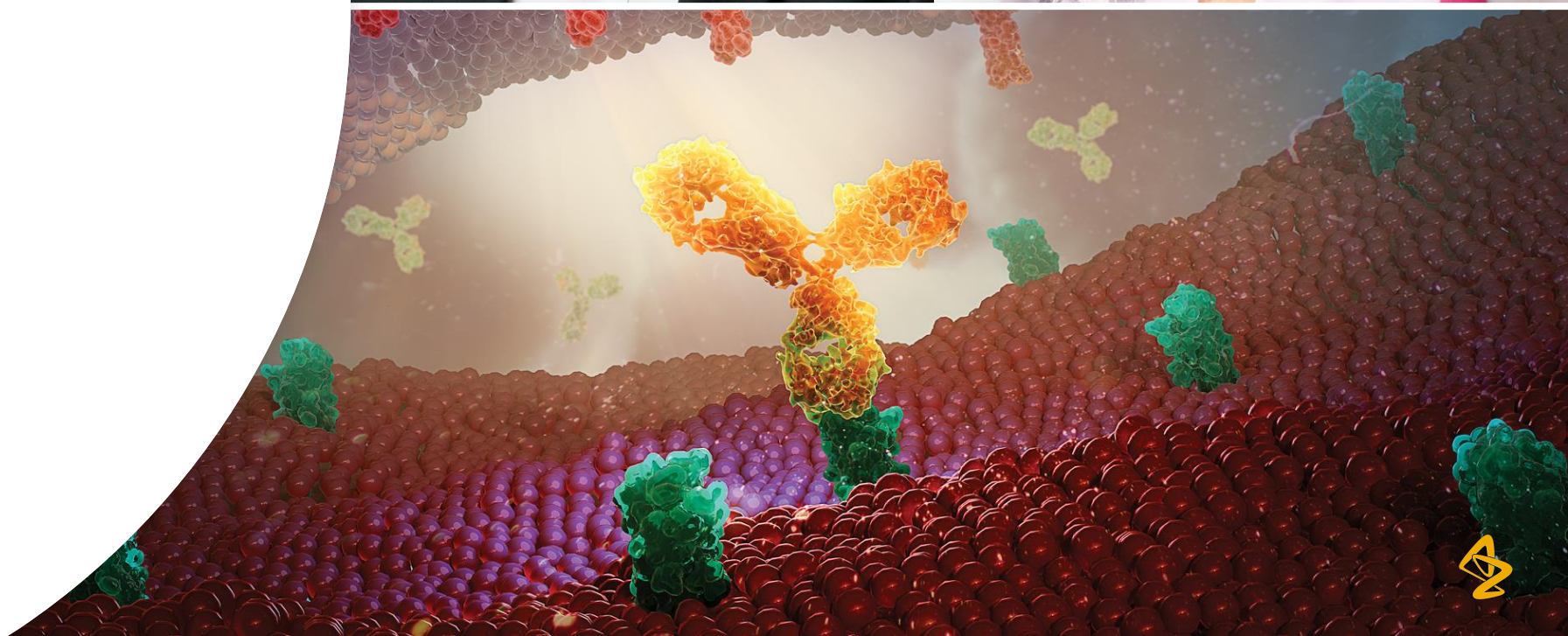


Oncology



Dave Fredrickson
ONCOLOGY BUSINESS

Susan Galbraith
ONCOLOGY R&D

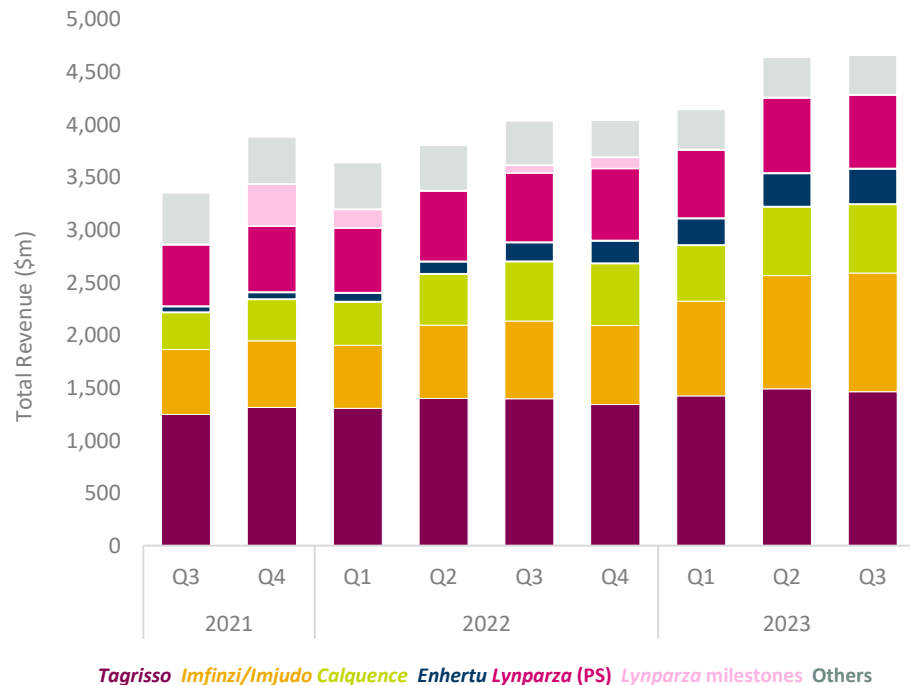


Oncology – 9M and Q3 2023

Total Revenue +20% in 9M 2023 fueled by strong global demand growth

Oncology

9M 2023 \$13.5bn, +20%



Q3 2023: key dynamics

- **Tagrisso** +6%, continued ADAURA and FLAURA global demand growth, short-term impact from anti-corruption campaign in CN
 - **Lynparza PS** +8%, EU, ERoW, EM demand growth slightly offset by 2L OC label restriction, decreased PARPi use in the US
 - **Imfinzi/Imjudo** +54%, continued strong global launch momentum
 - **Calquence** +15%, preferred BTKi across 1L and r/r CLL
 - **Enhertu** +86%, penetration in DB03, DB04 and new global launches uptake ex-US
-
- New indications: EU, JP (*Enhertu* DL02), CN (*Calquence* CLL/SLL)
 - Regulatory update: US (*Tagrisso* FLAURA2 Priority Review, *Imfinzi* AEGEAN submission acceptance)

All growth rates at CER.

CER = constant exchange rates; NRDL = National Reimbursement Drug List; PS = Product Sales; EU = Europe; ERoW = Established Rest of World; EM = Emerging Markets; CN = China; 2L = 2nd-line; OC = ovarian cancer; PARPi = poly (ADP-ribose) polymerase inhibitor; BTKi = bruton tyrosine kinase inhibitor; 1L = 1st-line; r/r CLL = relapsed/refractory chronic lymphocytic leukaemia; DB03 = DESTINY-Breast03; DB04 = DESTINY-Breast04; DL02 = DESTINY-Lung02; SLL = small lymphocytic lymphoma.

Collaboration partners: Daiichi Sankyo (*Enhertu*), Merck & Co., Inc. (*Lynparza*).



Oncology – *Tagrisso* and *Calquence*

Leading value propositions, commercial execution reinforce future growth opportunity

Establishing *Tagrisso* for every *EGFRm* patient

Best-in-class QD oral regimen, leading benefit/risk profile

Stage I-III resectable

ADAURA Adjuvant *Tagrisso*

- Expand reimbursement
- Increase referral rates (>80%) and adjuvant treated (>65%)

Stage III unresectable

LAURA *Tagrisso* post-CRT

- Drive *EGFRm* testing in Stg. III unresectable

HLR H1 2024

1L metastatic

FLAURA *Tagrisso*

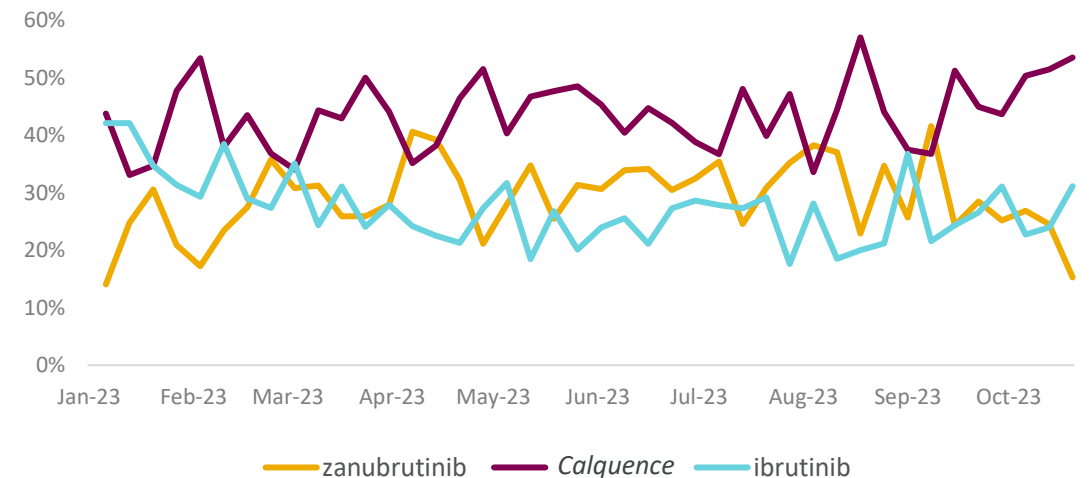
- Support longer DoT globally (>22 mo)

FLAURA2 *Tagrisso* + CTx

- Address patients with highest unmet need (L858R, CNS mets)
- Further extend DoT

Calquence maintaining BTKi leadership in face of competition

BTKi NBRx share



LCM and combination opportunities reinforce *Tagrisso* as backbone TKI

NeoADAURA | PACIFIC-4 | SAFFRON / SAVANNAH | Dato-DXd combos

Sustained 1L CLL leadership, recovery in r/r share

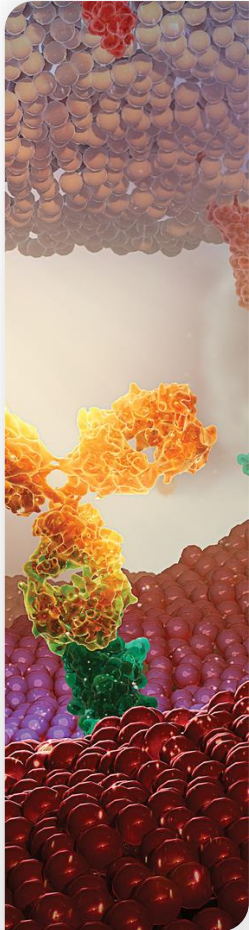
Source: Based on internal new to brand prescription (NBRx) analysis by AstraZeneca UK Limited using IQVIA US National Prescription Audit Market Dynamics (NPA MD) for the period of September 2023, reflecting estimates of real-world activity. Copyright IQVIA. All rights reserved.

EGFRm = epidermal growth factor receptor mutated; QD = once daily; 1L = 1st-line; CRT = chemoradiotherapy; SoC = standard-of-care; IO = immunotherapy; Stg. = stage; OS = overall survival; DoT = duration of therapy; mo. = months; CTx = chemotherapy; CNS = central nervous system; TKI = tyrosine kinase inhibitor; Dato-DXd = datopatomab deruxtecan; BTKi = bruton tyrosine kinase inhibitor; NBRx = new-to-brand prescription; CLL = chronic lymphocytic leukemia; r/r = relapsed/refractory.



Oncology – R&D highlights

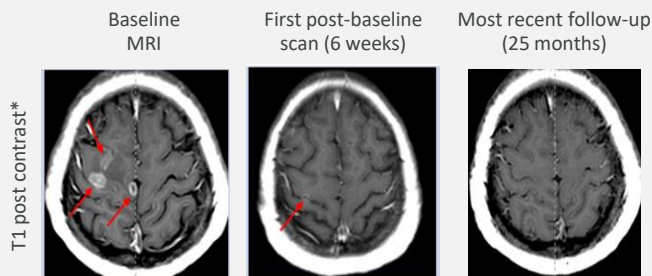
Data at WCLC and ESMO reinforce AstraZeneca leadership across tumour types



Consolidating leading position in *EGFR*m lung | FLAURA2^{1,2}

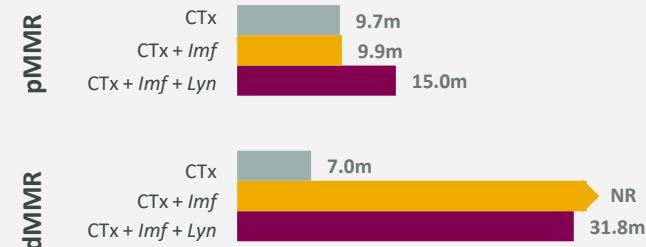
- FLAURA2 – longest mPFS >29 mo
- >50% patients with CNS metastases at baseline showed complete response

FLAURA-2 patient with CNS LMD showed deep, durable response



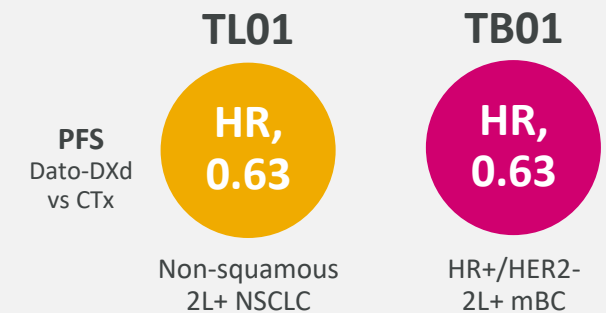
Expanding into new tumour types in gynae | DUO-E³

- First IO + PARP inhibitor option for 1L advanced endometrial
- Deeper benefit with *Lynparza* in pMMR and PD-L1+ subgroups



Dato-DXd beat conventional monotherapy CTx | TL01, TB01^{4,5}

- Best-in-class profile supports combination with IO
- Broad potential in earlier lines and other tumour types

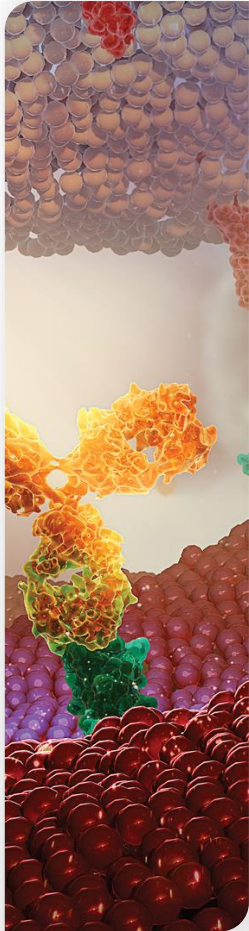


*Lesions in the right precentral gyrus ("motor cortex"), patient scans with permission from FLAURA2 investigator. 1. Janne PA et al. Abstract PLO3.13 presented at World Conference on Lung Cancer 2023; 2. Janne PA et al. Abstract #LBA68 presented at European Society of Medical Oncology 2023; 3. Westin S et al. Abstract #LBA41 presented at European Society of Medical Oncology 2023; 4. Ahn M et al. Abstract #LBA12 presented at European Society of Medical Oncology 2023; 5. Bardia et al. Abstract #LBA11 presented at European Society of Medical Oncology 2023. WCLC = World Conference on Lung Cancer; ESMO = European Society of Medical Oncology; *EGFR*m = epidermal growth factor receptor mutation; NSCLC = non-small cell lung cancer; 1L = 1st-line; CNS = central nervous system; CR = complete response; NEJM = New England Journal of Medicine; CTx = chemotherapy; LMD = leptomeningeal disease; MRI = magnetic resonance imaging; gynae = gynaecological; IO = immunotherapy; PARP = poly (ADP-ribose) polymerase; p/dMRR = proficient / deficient mismatch repair; PD-L1 = programmed death-ligand 1; *Imf* = *Imfinzi*; *Lyn* = *Lynparza*; NR = not reached; Dato-DXd = datopotamab deruxtecan; combo = combination; mPFS = median progression-free survival; HR = hazard ratio; 2L = 2nd-line; HR+ = hormone-receptor positive; HER2- = human epidermal growth factor receptor 2 negative; mBC = metastatic breast cancer. Collaboration partner: Daiichi Sankyo (Dato-DXd).

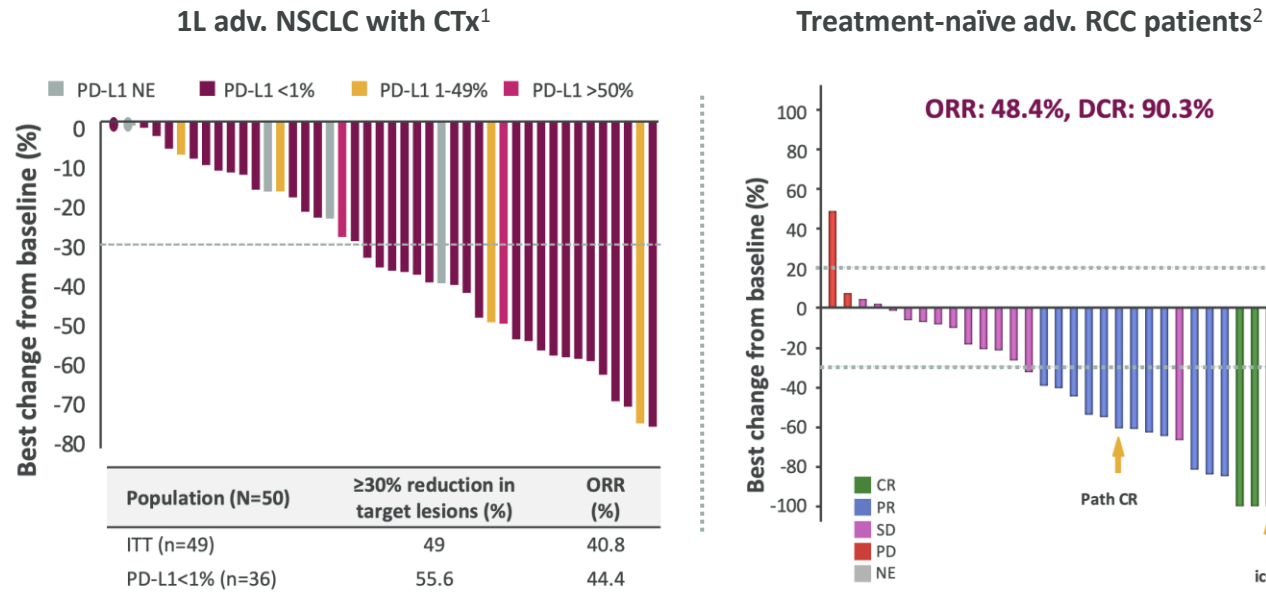


Oncology – R&D highlights

Volrustomig leading new wave of immuno-oncology bispecific molecules

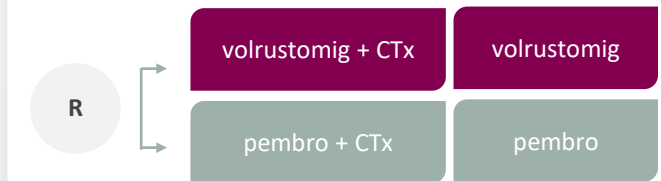


Encouraging early phase data for volrustomig first-in-class monovalent bispecific molecule targeting PD-1 and CTLA-4



Four bispecific Phase III trials announced

eVOLVE-Lung02 | 1L mNSCLC PD-L1 < 50%



- **eVOLVE-Cervical** | volrustomig following ccRT in high risk LA cervical cancer
- **eVOLVE-Meso** | volrustomig + CTx then volrustomig in newly diagnosed unresect. malignant pleural mesothelioma
- **ARTEMIDE-Bi01** | rilvegostomig + CTx in biliary tract cancer after resection with curative intent

Rapidly advancing IO bispecific programmes into **Phase III** with potential to **combine with ADCs**

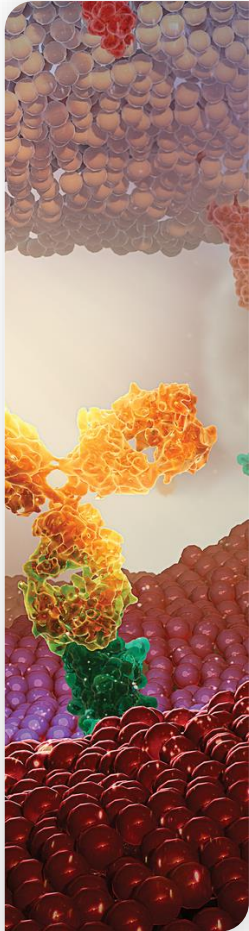
1. Ahn MJ et al. Abstract #LBA56 presented at European Society of Medical Oncology 2022; 2. Voss M et al. Abstract #1883MO presented at European Society of Medical Oncology 2023.

PD-(L)1 = programmed cell death (ligand) 1; CTLA-4 = cytotoxic T lymphocyte antigen 4; 1L = 1st-line; adv.= advanced; (m)NSCLC = (metastatic) non-small cell lung cancer; CTx = chemotherapy; NE = not evaluable; ORR = objective response rate; ITT = intention-to-treat; RCC = clear cell renal carcinoma; DCR = disease control rate; path/icPR = pathologic/immune confirmed complete response; PR = partial response; SD = stable disease; R = randomise; pembro = pembrolizumab; LA = locally advanced; ccRT = concurrent chemoradiotherapy; volrust = volrustomig; observ = observation; nivo = nivolumab; ipi = ipilimumab; IO = immuno-oncology; ADC = antibody drug conjugate. Collaboration partner: Compugen (rilvegostomig).



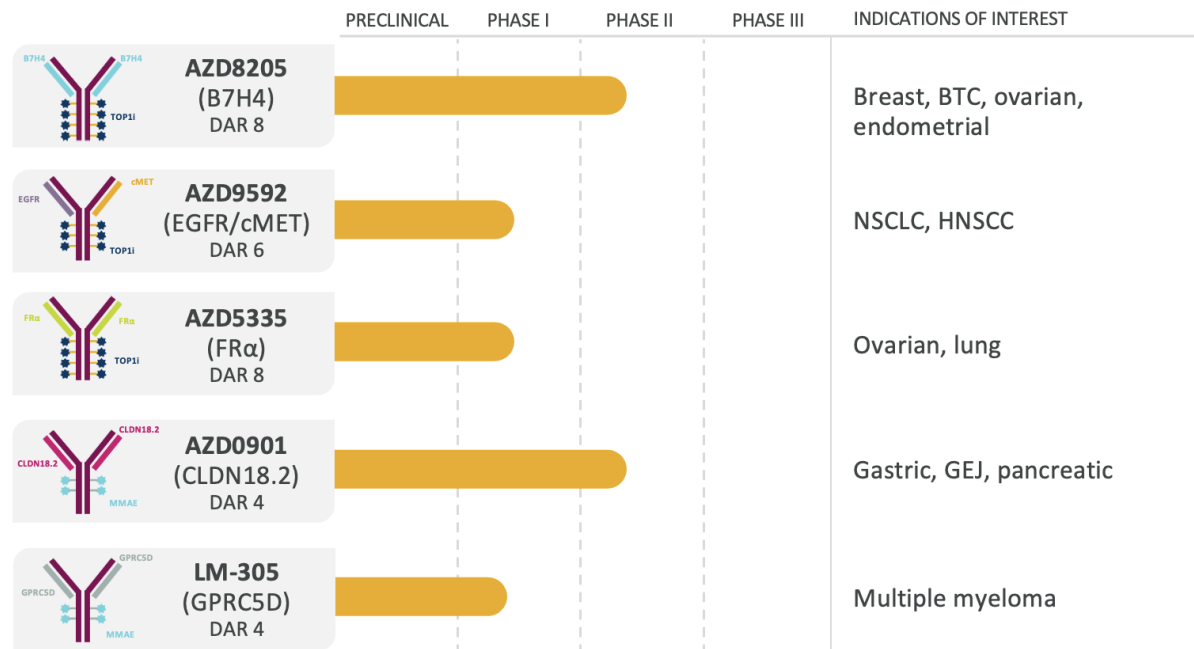
Oncology – R&D highlights

Establishing AstraZeneca portfolio of differentiated ADCs



Five wholly owned ADCs already in the clinic

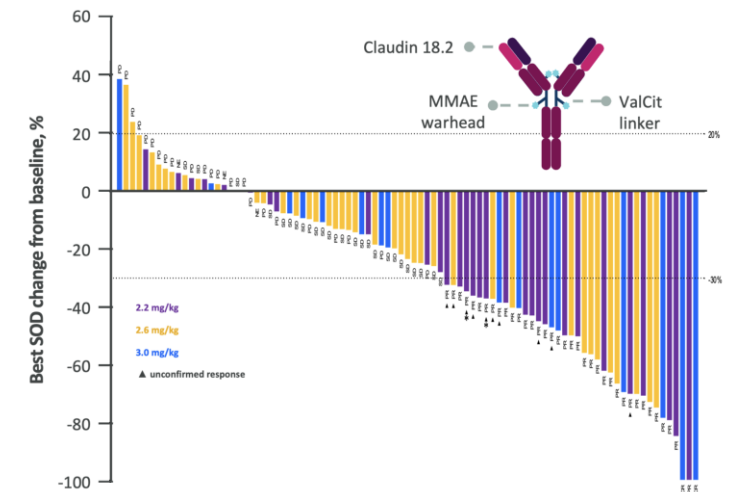
Clinical stage trials ongoing in lung, breast, haematology, GYN/GU and GI



AZD0901

Promising efficacy in gastric / GEJ cancer

BoR in gastric / GEJ cancer (IHC 2+, $\geq 20\%$ TC)¹
Phase I dose escalation / expansion



Broader clinical development programme in progress

1. Xu RH et al. Abstract 434420 presented at ASCO Virtual Plenary on 7 November 2023. ADC images for illustrative purposes only; actual drug positions may vary.

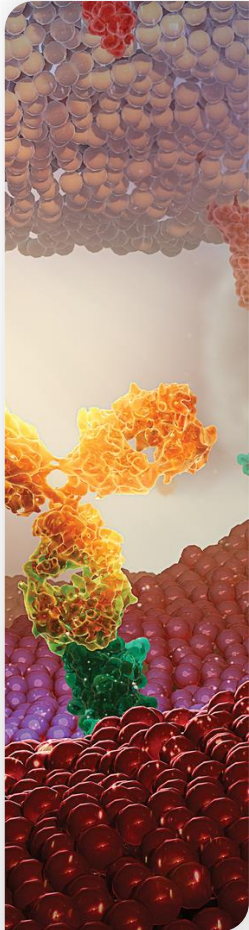
ADC = antibody drug conjugate; GYN = gynaecological; GU = genitourinary; GI = gastrointestinal; B7H4 = B7 homolog 4; DAR = drug to antibody ratio; EGFR = epidermal growth factor receptor; cMET = mesenchymal-epithelial transition factor; FR α = folate receptor alpha; CLDN18.2 = claudin 18.2; GPRC5D = G-protein coupled receptor C family 5D; TOP1 = topoisomerase 1 inhibitor; MMAE = monomethyl auristatin E; BTC = biliary tract cancer; NSCLC = non-small cell lung cancer; HNSCC = head and neck squamous cell carcinoma; GEJ = gastroesophageal junction; BoR = best overall response; IHC = immunohistochemistry; TC = tumour cell; CR = complete response; PR = partial response; SD = stable disease; PD = progressive disease; NE = not evaluable.

Collaboration partner: Keymed Biosciences (AZD0901).



Oncology – R&D highlights

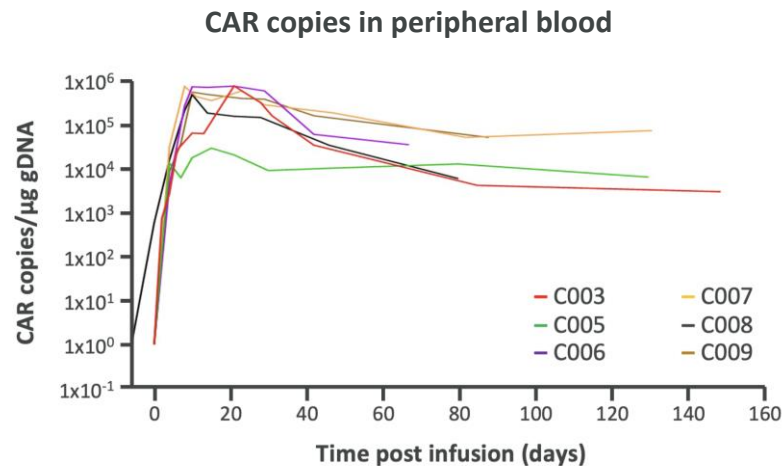
In-house development and strategic collaborations expand our reach in cell therapy



Innovative armoured CAR-T programme for solid tumour

TGFβRIIDN armouring enhances potential effectiveness CAR-T in solid tumours

AZD7003 (C-CAR031)¹ | armoured GPC3

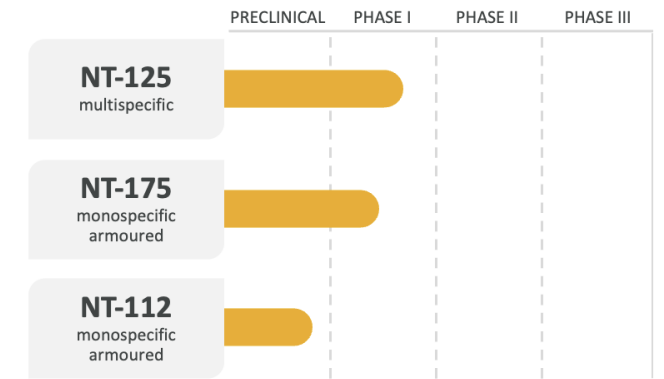


- Encouraging FIH data in HCC
- Strong expansion and persistence of CAR-T cellular kinetics
- Promising anti-tumour activity, objective responses in several patients

AZD0754 | armoured STEAP2

AZD6422 | armoured Claudin 18.2

Advancing T-cell receptor therapies acquired from Neogene



cellectis
EDITING LIFE

Collaboration
announced
Nov 2023

Differentiated allogeneic platform

1. Designed by AstraZeneca and manufactured and developed in China by Cellular Biomedicine group.

CAR(-T) = chimeric antigen receptor(-T cell); TGFβRIIDN = dominant negative transforming growth factor β receptor II; GPC3 = Glypican 3; FIH = first-in-human; HCC = hepatocellular carcinoma; STEAP2 = human 6-transmembrane epithelial antigen of prostate 2; IND = investigational new drug.

Acquisition of Neogene Therapeutics was completed on 16 January 2023, Neogene Therapeutics is a global clinical-stage biotechnology company focused on discovery, development and manufacturing of next-generation T-cell receptor therapies.



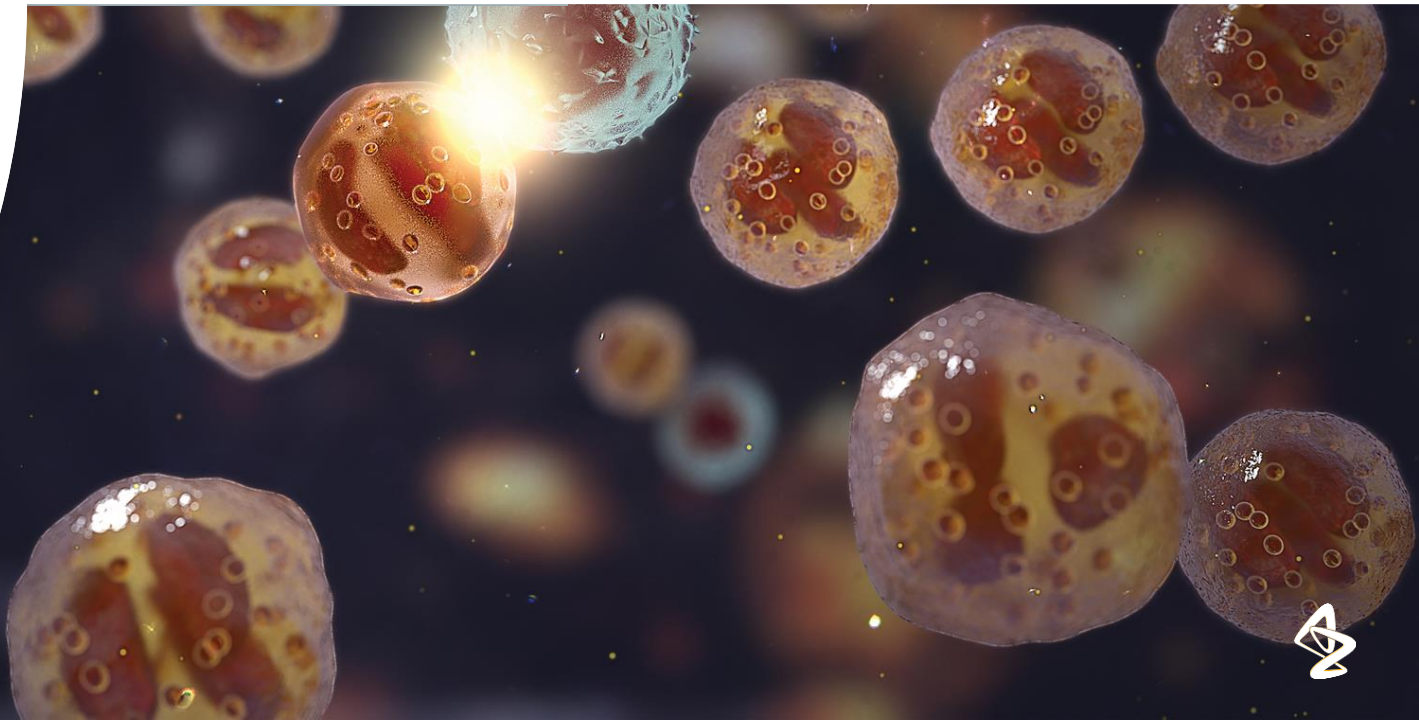
BioPharmaceuticals

Ruud Dobber

BIOPHARMACEUTICALS BUSINESS

Sharon Barr

BIOPHARMACEUTICALS R&D

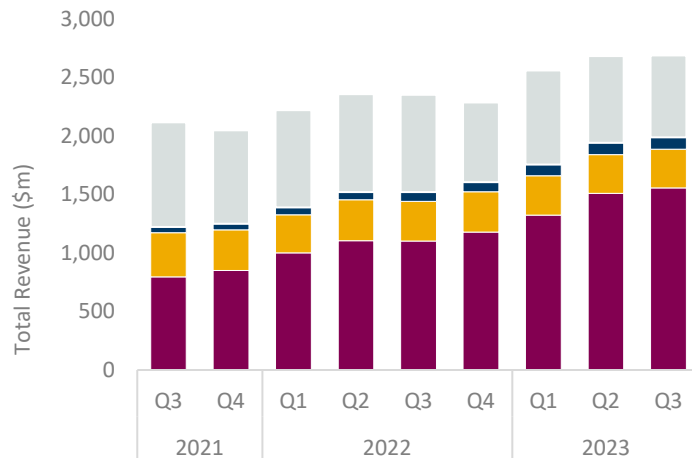


BioPharmaceuticals – 9M and Q3 2023

CVRM Total Revenue +19% in 9M 2023 and strong launch brand momentum in R&I

CVRM

9M 2023 \$7.9bn, +19%



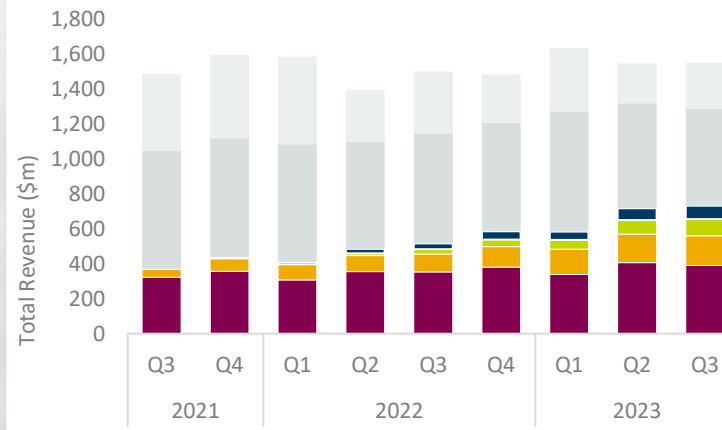
Farxiga Brilinta Lokelma Others

Q3 dynamics

- **Farxiga** +41%, demand growth outpacing SGLT2i
- **Lokelma, roxadustat** both up >30%

R&I

9M 2023 \$4.7bn, +9%



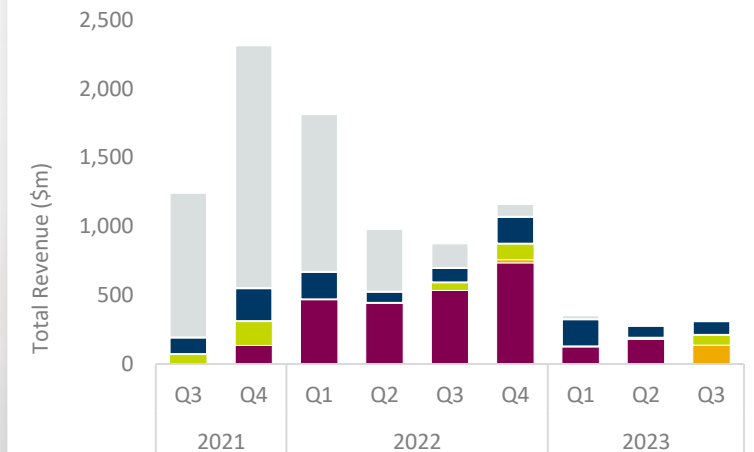
Fasenna Breztri Tezspire Saphnelo Symbicort Others

Q3 dynamics

- **Fasenna**, +10%, continued uptake of biologics
- **Breztri**, +69%, to \$171m, global share gains
- **Tezspire**, +19% QoQ, strong launches continue

V&I

9M 2023 \$944m



COVID-19 mAbs¹ Beyfortus FluMist Synagis Vaxzevria

Q3 dynamics

- **COVID-19 medicines** \$nil in Q3
- **FluMist** +23%, new orders and phasing
- **Beyfortus**, first commercial sales and milestone

All growth rates at CER.

1. COVID-19 mAbs = Evusheld and AZD3152, the antibody currently in development

CER = constant exchange rates; CVRM = Cardiovascular, Renal and Metabolism; SGLT2i = sodium-glucose cotransporter 2 inhibitors; R&I = Respiratory and Immunology; QoQ = quarter on quarter; V&I = Vaccine and Immune Therapies; mAbs = monoclonal antibodies.

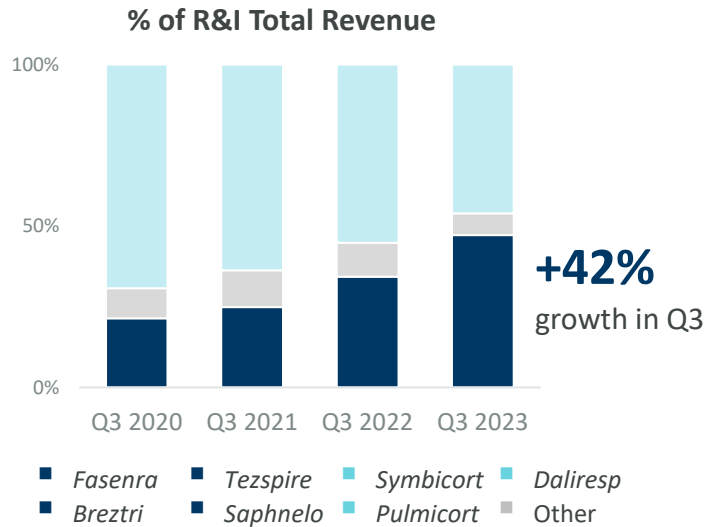
Collaboration partners: Amgen (Tezspire); Sanofi (Beyfortus).



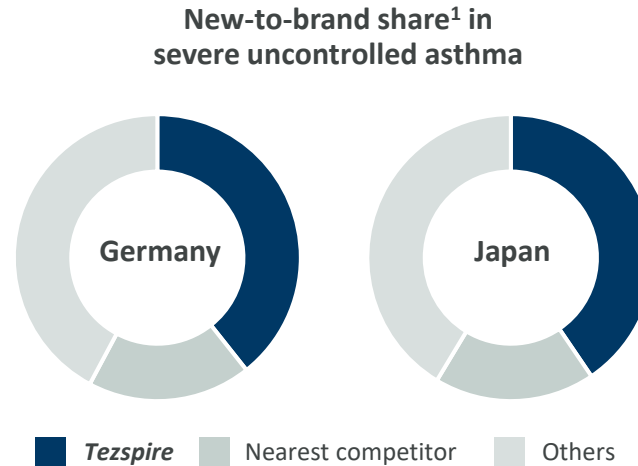
BioPharmaceuticals – 9M and Q3 2023

Portfolio evolution enables long-term sustainable growth

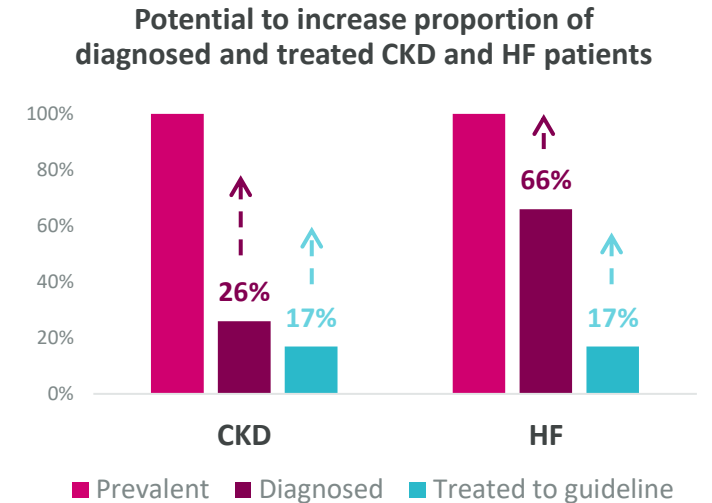
Key R&I medicines grew 42% in Q3 2023



Tezspire market leadership within first year of launch



Farxiga - substantial growth opportunity remains



Growth of newer brands more than offset generic impact on older medicines

Tezspire market share expansion globally within growing class

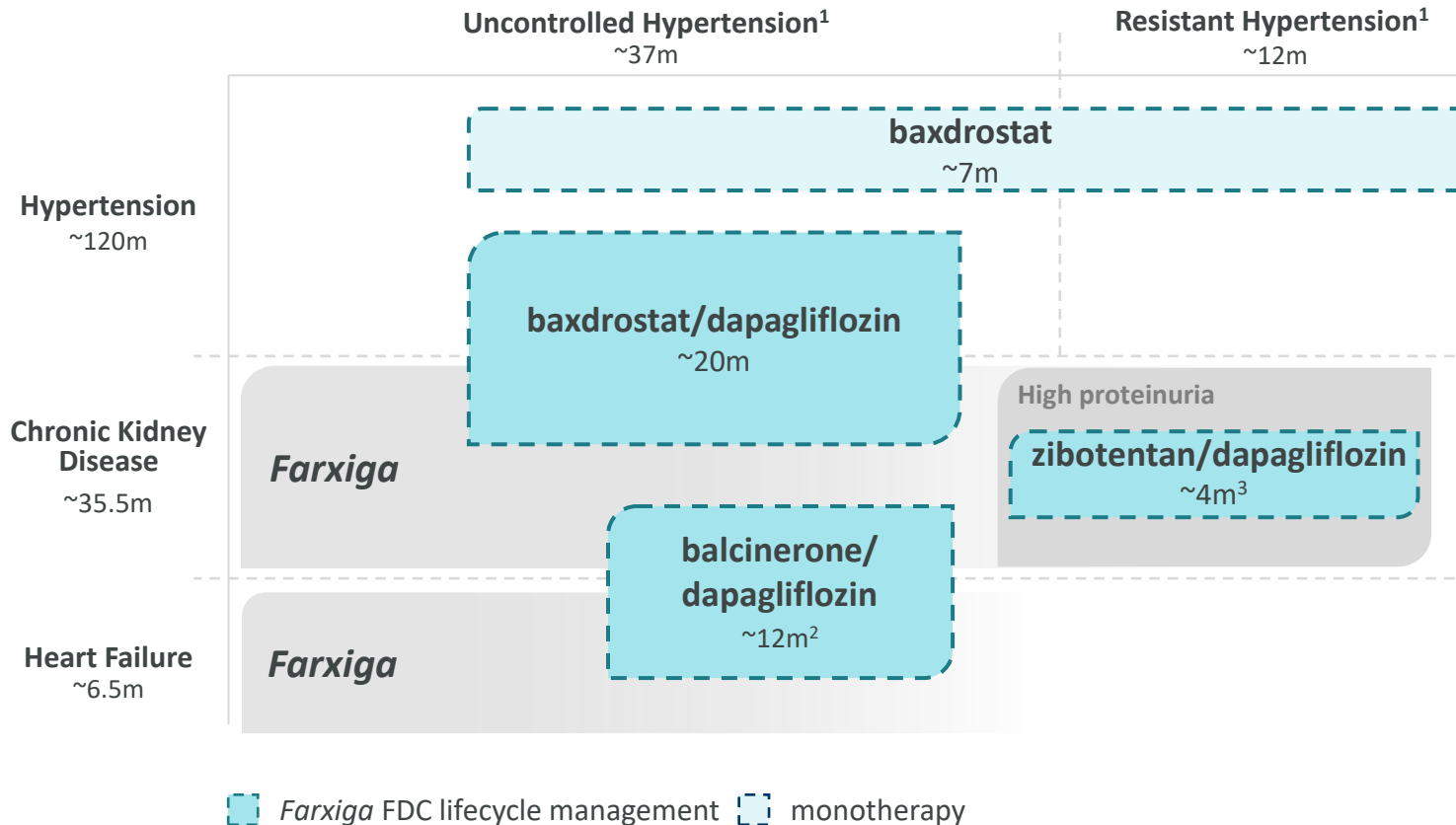
Farxiga growth strengthens foundation for next-gen CVRM

1. Based on internal new to brand prescription (NBRx) analysis by AstraZeneca UK Limited using data from the following sources: IQVIA Japan Rx, and IQVIA Germany LRx, IQVIA PharmaScope® National and IQVIA DKM® data for the period Aug 2023, reflecting estimates of real-world activity. Copyright IQVIA. All rights reserved. 2. Sources for CKD & HF prevalence: 1Jager KJ, et al; Nephrol Dial Transplant. 2019;34(11):1803-1805. 2Vos T et al. The Lancet. 2017; 390(10100):1211-59. Analysis prepared based on: Germany, France, Italy, Spain, UK and US using AZ internal projections provided by local marketing companies. CKD prevalence and diagnosis based on Stages 2b-4a; treated to guideline is based on total SGLT2i penetration July 2023 IQVIA EMR patient record data US, EU3 and UK; Telomera patient record data for Spain. R&I = respiratory and immunology; LoE = loss of exclusivity; CKD = chronic kidney disease; CVRM = Cardiovascular, Renal and Metabolism; LCM = lifecycle management. Collaboration partners: Amgen (Tezspire).



BioPharmaceuticals – R&D highlights

Advancing potential novel medicines to address unmet needs across CKD and HF



4 potential new medicines

tailored approach to address biological mechanisms driving disease progression

▶▶ Phase III initiated zibo/dapa in CKD with high proteinuria

▶▶ Phase III initiation planned before YE, baxdrostat in HTN

Broad disease epidemiology figures are based on US prevalent patients as per CDC. 1. Simone Romano et al. Internal and Emergency Medicine, 02 August 2023. Hypertension, uncontrolled hypertension and resistant hypertension: prevalence, comorbidities and prescribed medications in 228,406 adults resident in urban areas. 2. Jens van de Wouw et al. Front. Physiol., 04 September 2019 Sec. Clinical and Translational Physiology Volume 10 – 2019. 3. CKD in the General Population, NIDDK. 4. CKD Prevalence by hypertension status and year, NHANES, ~25-30% of adults diagnosed with hypertension have CKD.

dapagliflozin = Farxiga; m = millions; CKD = chronic kidney disease; HF = heart failure; HTN = hypertension



BioPharmaceuticals – R&D highlights

Data at ASN and ERS publication support Phase III trials

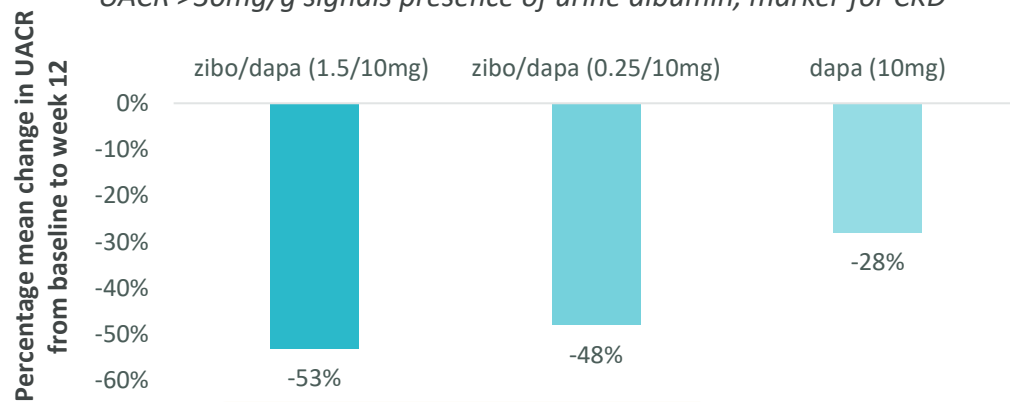
zibotentan / dapagliflozin

Chronic Kidney Disease with high proteinuria



Phase II ZENITH: UACR reduction

UACR >30mg/g signals presence of urine albumin, marker for CKD



zibo/dapa demonstrated clinically meaningful reduction in UACR across both doses

tozorakimab | IL-33 mAb

RAGE/EGFR pathway (IL-33^{ox})

preventing epithelial dysfunction



EGFR

ST2 pathway (IL-33^{red})

preventing airway inflammation



COPD

OBERON, TITANIA, MIRANDA

>2024

Severe viral LRTD

TILIA

>2024

Asthma, COPD

FRONTIER-3, FRONTIER-4 (Phase II)

UPCOMING

Phase III trial initiated, opportunity to increase patient benefit with synergistic combination treatment

Dual pathway inhibition could provide a unique opportunity in inflammatory diseases

1. Based on KDIGO guidelines; high proteinuria defined as UACR >300m/g. 2. Global Burden of Disease Study 2019, Lower Respiratory Infection collaborators. 3. ACCORD-2 is a University of Southampton trial that investigated potential treatments for patients hospitalised with COVID-19 during the pandemic. 4. Odds ratio adjusted for age and baseline COVID-19 severity. 5. IL-33/sST2 complex biomarker defined as patients with ≥ 30.15 U/mL.



BioPharmaceuticals

Accelerating presence in obesity with ECC5004, a novel once-daily oral GLP-1RA



ECC5004 (GLP-1RA)

global development
and commercialisation rights¹

Potential for no titration

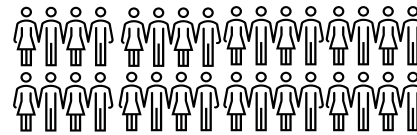
High bioavailability, favourable
tolerability profile

Novel once-daily oral small molecule

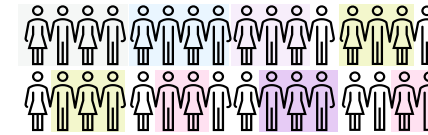
Efficacy at low doses – 10 to 30mg

Phase II planned 2024

Significant market opportunity in obesity



1bn people living with obesity



Obesity is driver for **>200 chronic diseases**

Diabetes, dyslipidemia,
hypertension, HF, renal
disease, NASH

Opportunity beyond obesity to address cardiometabolic disease

Farxiga

AZD6234

LA Amylin

baxdrostat

ASI

mitiperstat

MPO

AZD5462

oRXFP1

AZD0780

oPCSK9

on-market

Phase I

Phase III

Phase II

Phase I

Phase I

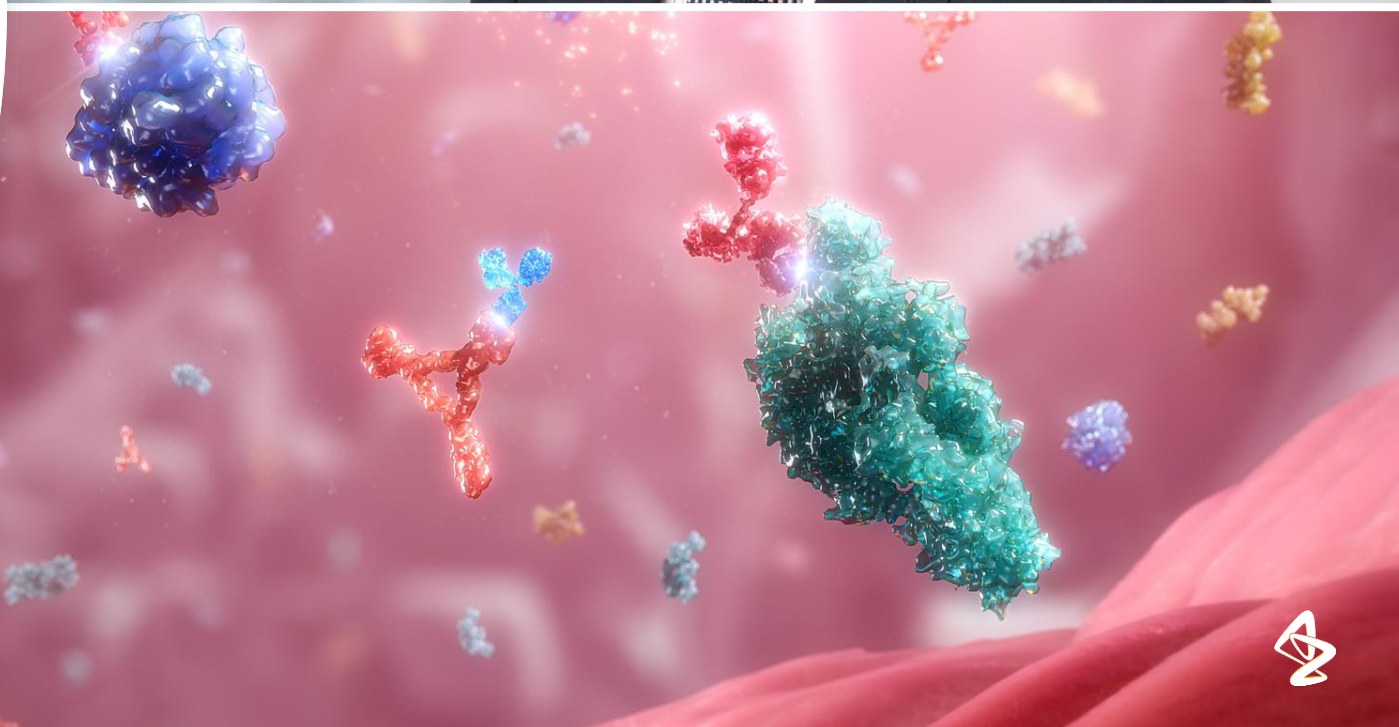
Strong track record in cardio renal metabolic diseases, opportunity for monotherapy and combinations to address broad range of co-morbid diseases



Rare Disease

Marc Dunoyer

CHIEF EXECUTIVE OFFICER,
ALEXION

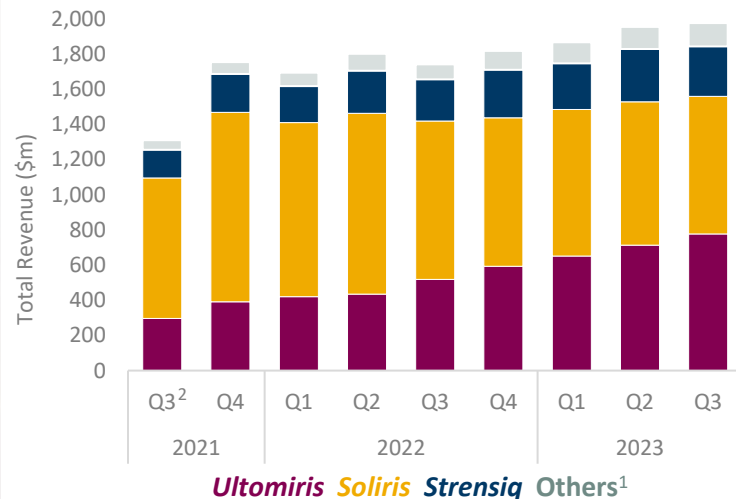


Rare Disease – 9M and Q3 2023

Strong double-digit growth in 9M 2023 with Total Revenue +12%, momentum into year-end

Total Revenue by medicine

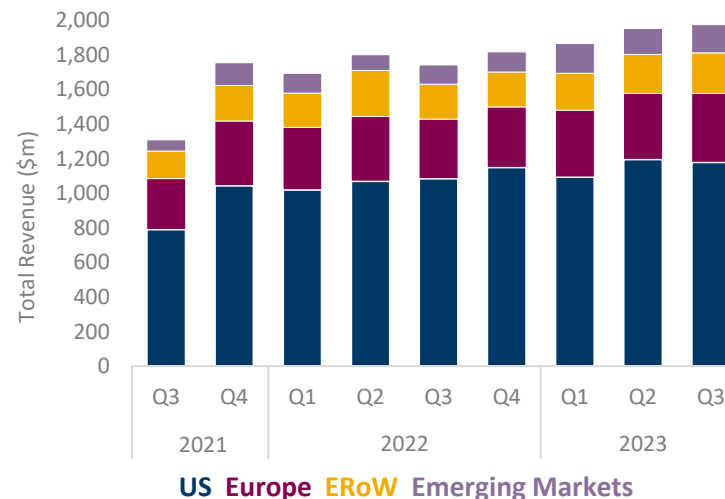
9M 2023 \$5.8bn, +12%



Q3 dynamics

- **Ultomiris** +49%, neurology demand, new market access; **Soliris** (12%), successful conversion
- **Strensiq** +21%, and **Koselugo** +81%, new patient demand

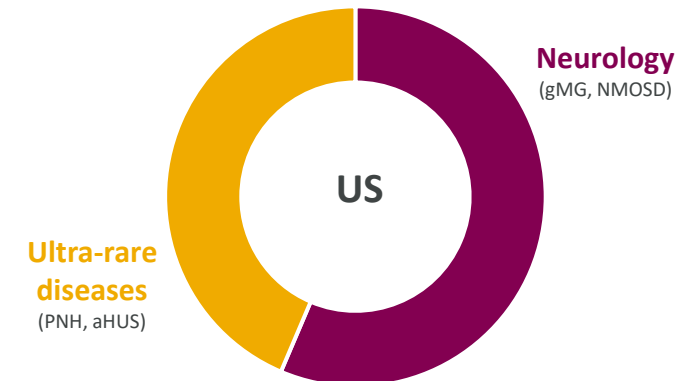
Total Revenue by region



Q3 dynamics

- **US** +9% and **EU** +8%, neurology demand
- **ERoW** +22%, neurology demand, expanded access
- **Emerging Markets** +70%, demand growth, expanded access

C5 franchise indications



Key dynamics

- Neurology growing proportion of C5 franchise
- Smaller proportion from ultra rare disease, PNH and aHUS

All growth rates at CER.

1. Includes *Kanuma* and *Koselugo*. 2. Q3 2021 Total Revenue reported only comprise of those booked by AstraZeneca following completion of the acquisition of Alexion on 21 July 2021.

EU = Europe; ERoW = Established Rest of World; C5 = C5 inhibitors *Ultomiris* and *Soliris*; NMOSD = neuromyelitis optica spectrum disorder; gMG = generalised myasthenia gravis; PNH = paroxysmal nocturnal hemoglobinuria; aHUS = atypical hemolytic uremic syndrome; CER = constant exchange rates.

Collaboration partners: Merck & Co., Inc. (*Koselugo*).



Rare Disease – R&D highlights

Advancing expansion of *Ultomiris* in nephrology

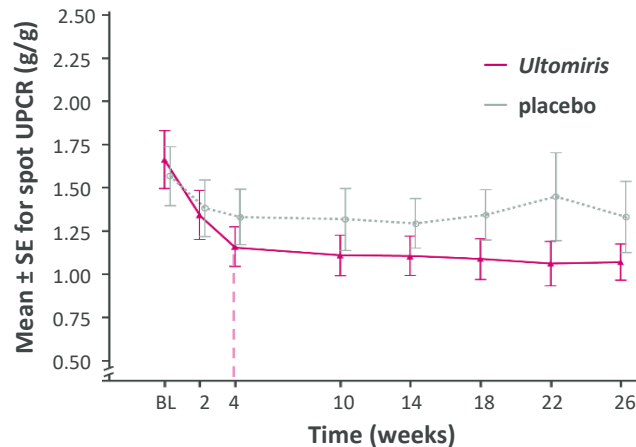
Ultomiris

Phase II SANCTUARY trial in IgAN



Mean spot UPCR
24-hr (g/g)

over
26 WEEKS



rapid, complete and sustained complement inhibition at week 4

with key endpoints met:

- ✓ >40% reduction in proteinuria
- ✓ stable eGFR

Potential disease-modifying reduction in proteinuria

Data supports initiation of potential Phase III trial

IgAN | Abnormal IgA protein accumulates in kidneys, activating complement cascade



Complement system plays a clear role in the pathogenesis of IgAN

IgAN (diagnosed):

US
>100k

EU5
>100k

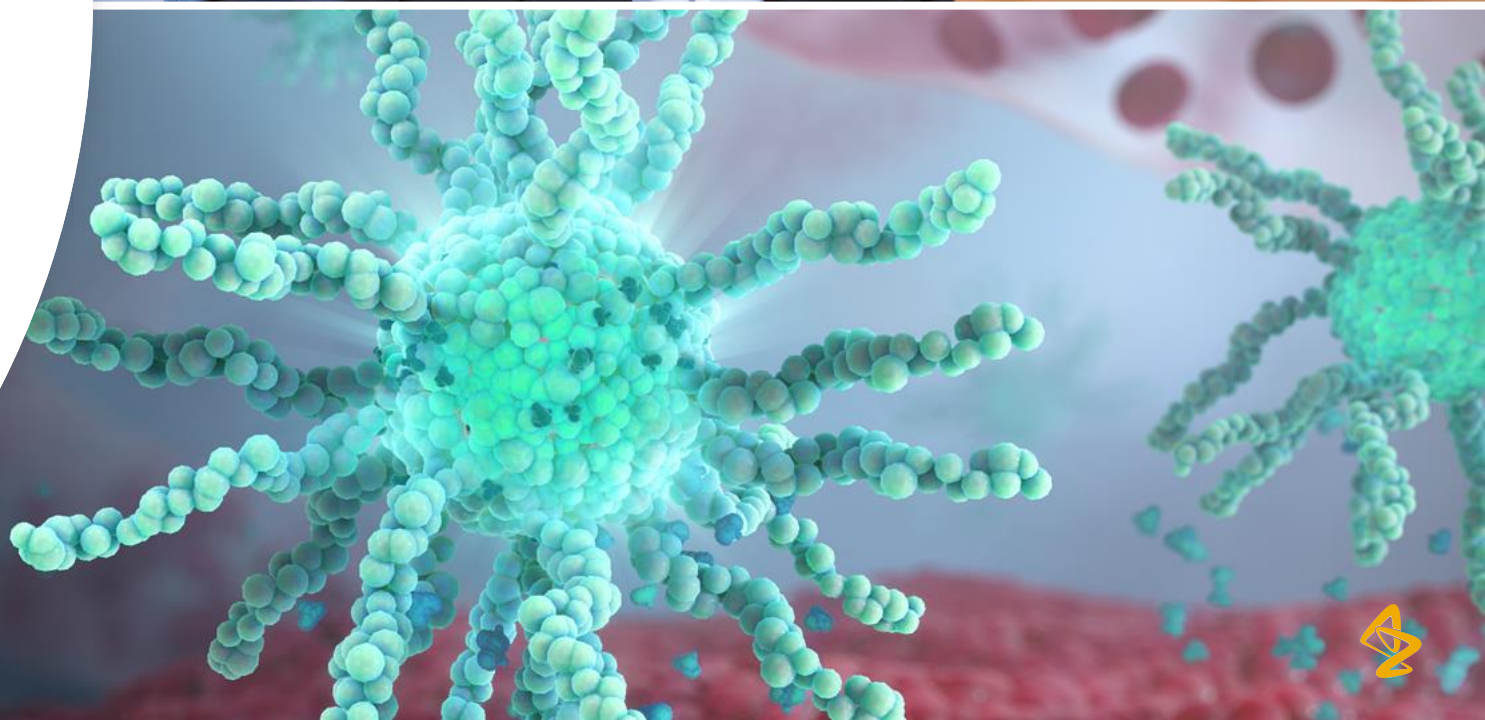
CN
>300k

▶ **significant unmet need for patients optimised on RAASi**



CEO Closing Remarks

Pascal Soriot
CHIEF EXECUTIVE OFFICER



AstraZeneca

Focused investment in pipeline of the future, rich near-term Phase III catalyst flow



Near-term rich catalyst flow through 2024

LAURA

*EGFR*m NSCLC
(unresectable Stg. III)

H1 2024

DESTINY-Breast06

HER2-low
breast cancer (2L)

H1 2024

anselamimab
(CAEL-101)

AL amyloidosis

H2 2024

TROPION-Breast02

TNBC
(locally rec. inop./met.)

H2 2024

WAYPOINT

CRSwNP

H2 2024

Confident in delivering on our ambition for industry-leading growth



Question & Answer Session



Pascal Soriot
EXECUTIVE DIRECTOR &
CHIEF EXECUTIVE OFFICER



Aradhana Sarin
EXECUTIVE DIRECTOR &
CHIEF FINANCIAL OFFICER



Marc Dunoyer
CHIEF EXECUTIVE OFFICER,
ALEXION



Susan Galbraith
EXECUTIVE VICE PRESIDENT,
ONCOLOGY R&D



Dave Fredrickson
EXECUTIVE VICE PRESIDENT,
ONCOLOGY BUSINESS



Sharon Barr
EXECUTIVE VICE PRESIDENT,
BIOPHARMACEUTICALS R&D



Ruud Dobber
EXECUTIVE VICE PRESIDENT,
BIOPHARMACEUTICALS
BUSINESS



Iskra Reic
EXECUTIVE VICE PRESIDENT,
VACCINES AND IMMUNE
THERAPIES

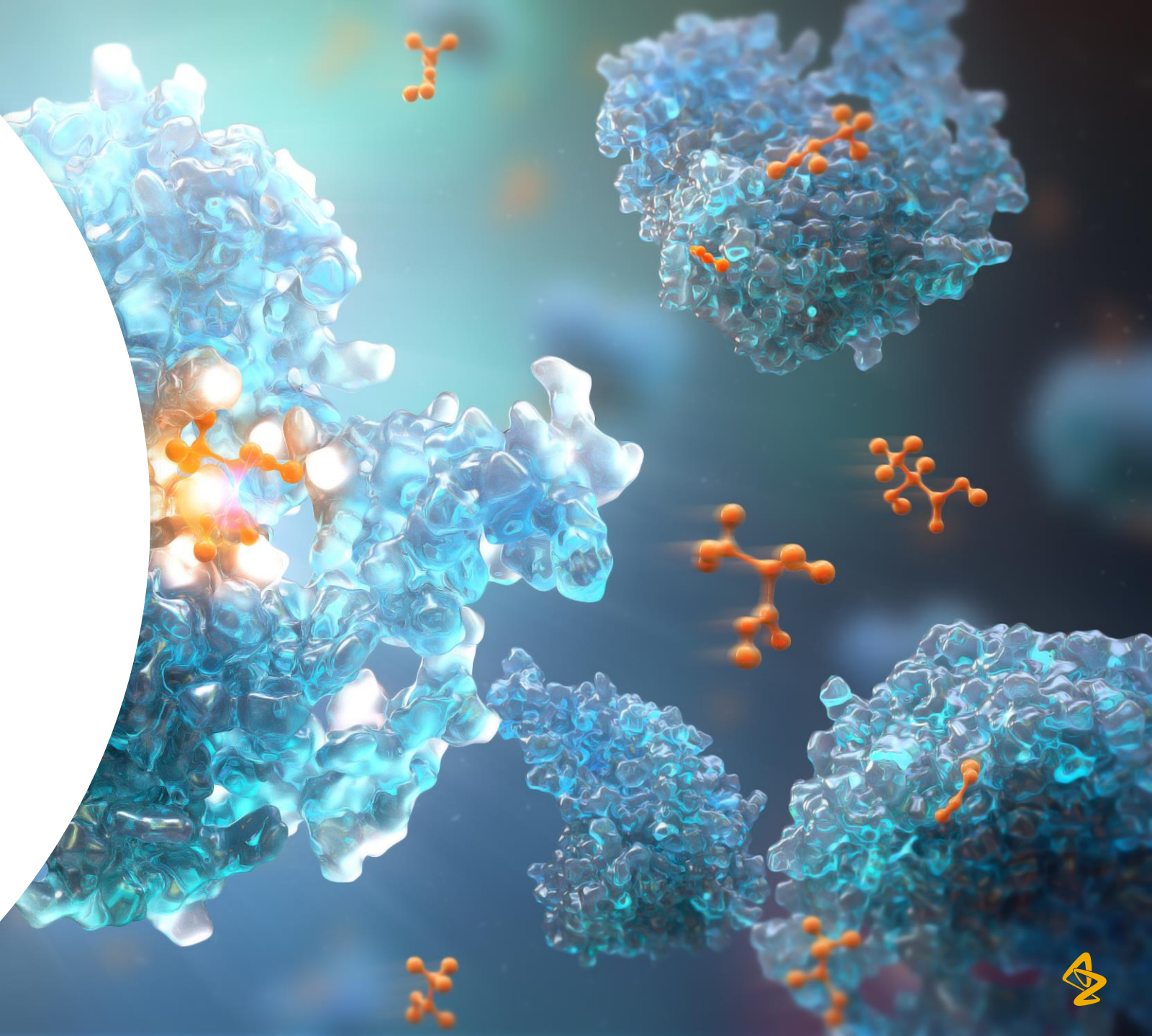


Leon Wang
EXECUTIVE VICE PRESIDENT,
INTERNATIONAL



Appendix

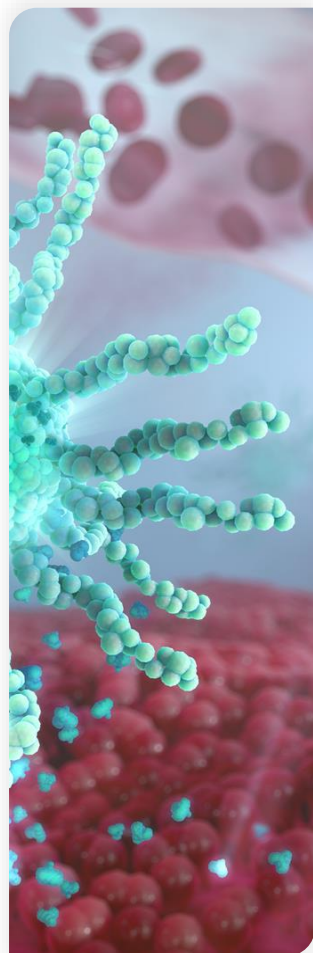
- Pipeline Highlights
- Oncology tumour maps
- Emerging Markets performance
- Key medicines performance by therapy area



Delivering on science-led innovation

Selected key pipeline highlights since Q2 2023 Results

Oncology BioPharmaceuticals Rare Disease



3 Breakthrough Designations (US):

Tagrisso

*EGFR*m NSCLC (1st-line) (FLAURA2)

Enhertu

HER2-overexpressing advanced or metastatic colorectal cancer (DESTINY-CRC02)

Enhertu

HER2-expressing tumours (DESTINY-PanTumour02)

6 regulatory approvals in major markets, including:

Lynparza (JP)

prostate cancer (1st-line) (PROpel)

Enhertu (EU, JP)

*HER2*m NSCLC (2nd-line+) (DESTINY-Lung02)

Calquence (CN)

CLL (ASCEND)

Forxiga (CN)

HFpEF (DELIVER)

Soliris (CN)


neuromyelitis optica spectrum disorder



AstraZeneca in Lung Cancer

Ambition for >50% of lung cancer patients to be eligible for AZN medicine by 2030

	resectable Stg. I-III	unresectable Stg. I-II	unresectable Stg. III	1L	metastatic 2L+	
Est. epi (G7)	~200K	~30K	~70K	~350K	~290K	
IO sensitive c.70%	<p><i>Imfinzi</i> AEGEAN</p> <p>volrustomig + CTx NEOCOAST-2</p>	<p><i>Imfinzi</i> w/ SBRT PACIFIC-4</p>	<p>CRT → <i>Imfinzi</i> PACIFIC</p> <p>CRT + <i>Imfinzi</i> PACIFIC-2</p> <p><i>Imfinzi</i> combos PACIFIC-8, -9 improvements across PD-L1 spectrum</p>	<p><i>Imfinzi</i> + <i>Imjudo</i> + CTx POSEIDON</p> <p>Dato-DXd + IO TROPION-Lung08/TROPION-Lung07/AVANZAR</p> <p><i>Enhertu</i> + IO + CTx DESTINY-Lung03</p> <p>volrustomig + CTx eVOLVE-Lung02</p> <p>rilvegostomig (PD1/TIGIT) ARTEMIDE-1</p>	<p><i>Imfinzi</i> + ceralasertib LATIFY</p> <p>Dato-DXd TROPION-Lung01</p> <p>AZD9592 (EGFR/cMET ADC) EGRET</p> <p>sabestomig (PD1/TIM3)</p>	
EGFRm c.16%	<p><i>Tagrisso</i> ADAURA</p> <p><i>Tagrisso</i> neoADAURA</p>		<p>CRT → <i>Tagrisso</i> LAURA</p>	<p><i>Tagrisso</i> FLAURA</p> <p><i>Tagrisso</i> + CTx FLAURA2</p>	<p>savolitinib + <i>Tagrisso</i> SAFFRON/SAVANNAH</p> <p>AZD9592 (EGFR/cMET ADC) EGRET</p>	
Other tumour drivers c.12%						<p>Dato-DXd TROPION-Lung01 TROPION-Lung05</p>
HER2m c.2%				<p>CRT → <i>Imfinzi</i> PACIFIC</p>	<p><i>Enhertu</i> DESTINY-Lung04</p>	<p><i>Enhertu</i> DESTINY-Lung02</p>

 established SoC


Leading the future of lung cancer treatment

- Establishing *Tagrisso* as backbone TKI in EGFRm
- *Imfinzi* leading IO in unresectable
- Advancing best-in-class ADCs to replace systemic chemotherapy
- Delivering next-wave bispecifics to improve on PD1/PD-L1
- Developing novel combinations, including IO + ADCs
- Investing behind new technologies and platforms, including cell therapy and testing/screening



AstraZeneca in Breast Cancer

Ambition to eliminate breast cancer as a cause of death

 established SoC	Early		1st line	Metastatic	3rd line	4th line +
	Neoadjuvant	Adjuvant		2nd line		
Est. epi (G7)	540k		125k	90k	65k	55k
HER2-positive 15-20%	<i>Enhertu</i> ± THP DESTINY-Breast11	NST → residual disease → <i>Enhertu</i> DESTINY-Breast05	<i>Enhertu</i> ± pertuzumab DESTINY-Breast09	<i>Enhertu</i> DESTINY-Breast03	<i>Enhertu</i> DESTINY-Breast02	
HR-positive 65-75% --- HER2-low 1+, 2+ 60%		Low risk Good outcomes with current SoC CTx → camizestrant (± CDK4/6i) CAMBRIA-2 CTx → AI (± CDK4/6i) 2-5 yrs → camizestrant CAMBRIA-1	RECURRENCE camizestrant + CDK4/6i SERENA-4 ESR1m AI + CDK4/6i → camizestrant + CDK4/6i SERENA-6 capiasertib + <i>Faslodex</i> + CDK4/6i CAPitello292	capiasertib + <i>Faslodex</i> CAPitello291 <i>Enhertu</i> DESTINY-Breast06 HER2-low IHC 0-1+, 1+, 2+	Dato-DXd TROPION-Breast01 <i>Enhertu</i> DESTINY-Breast04 HER2-low IHC 1+, 2+	
TNBC 10-15% --- HER2-low 1+, 2+ 35%	Dato-DXd + <i>Imfinzi</i> TROPION-Breast04	NST → residual disease → Dato-DXd ± <i>Imfinzi</i> TROPION-Breast03	capiasertib + paclitaxel CAPitello290 PD-L1+ 40% Dato-DXd + <i>Imfinzi</i> TROPION-Breast05 PD-L1- 60% Dato-DXd TROPION-Breast02	HER2-Low		
gBRCAm 5% of HR-positive 15% of TNBC		CTx → <i>Lynparza</i> OlympiA	<i>Lynparza</i> OlympiAD			

All numbers are approximate. Illustrative settings and populations, not to scale.

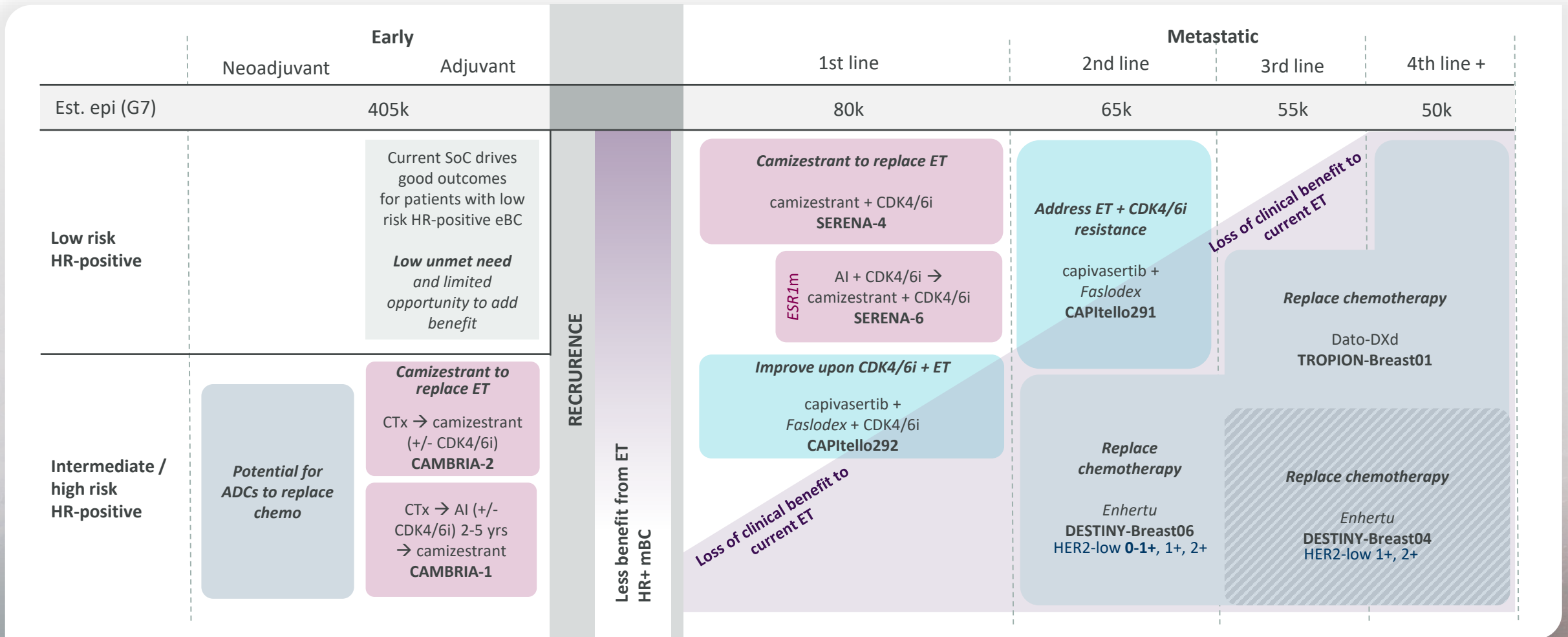
1/2/3/4L = 1st/2nd/3rd/ 4th-line; est epi (G7) = estimated epidemiology across G7 (US, EU5, JP for drug treated patients). HER2 = human epidermal growth factor receptor 2; THP = docetaxel, trastuzumab, and pertuzumab; NST = neoadjuvant systemic treatment; HR = hormone receptor; SoC = standard of care; CTx = chemotherapy; AI = aromatase inhibitor; CDK4/6i = cyclin-dependent kinase 4 and 6 inhibitor; yrs = years; ESR1m = estrogen receptor 1 gene mutation; Dato-DXd = datopotamab deruxtecan; TNBC = triple negative breast cancer; PD-L1 = programmed cell death ligand 1; gBRCAm = germline BRCA-mutated.

Collaboration partners: Daiichi Sankyo (*Enhertu*, Dato-DXd), Merck & Co., Inc. (*Lynparza*).



AstraZeneca in Breast Cancer

Ambition to eliminate breast cancer as a cause of death



All numbers are approximate. Illustrative settings and populations, not to scale.

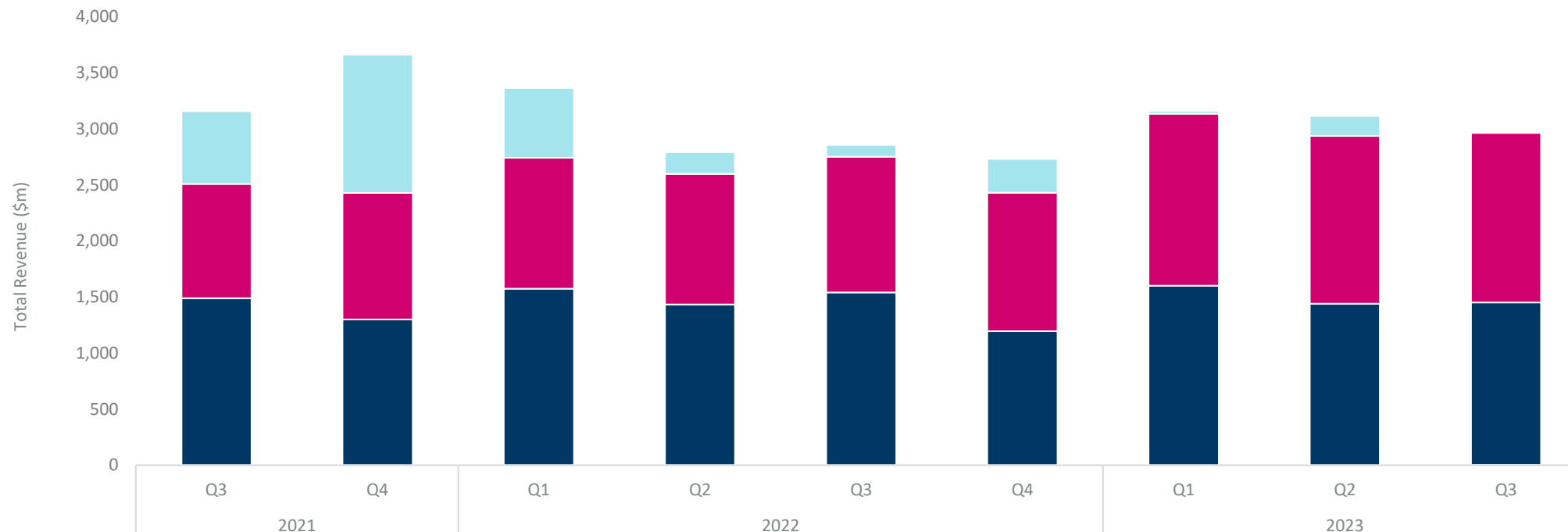
HR = hormone receptor; est epi (G7) = estimated epidemiology across G7 (US, EU5, JP for drug treated patients); SoC = standard of care; ADC = antibody drug conjugate; ET = endocrine therapy; CTx = chemotherapy; AI = aromatase inhibitor; CDK4/6i = cyclin-dependent kinase 4 and 6 inhibitor; yrs = years; ESR1m = estrogen receptor 1 gene mutation; ER = estrogen receptor; Dato-DXd = datopotamab deruxtecan.

Collaboration partners: Daiichi Sankyo (Enhertu, Dato-DXd).



Emerging Markets – 9M 2023

Total Revenue +10% at CER to \$9.2bn, +20% at CER ex-COVID-19 medicines



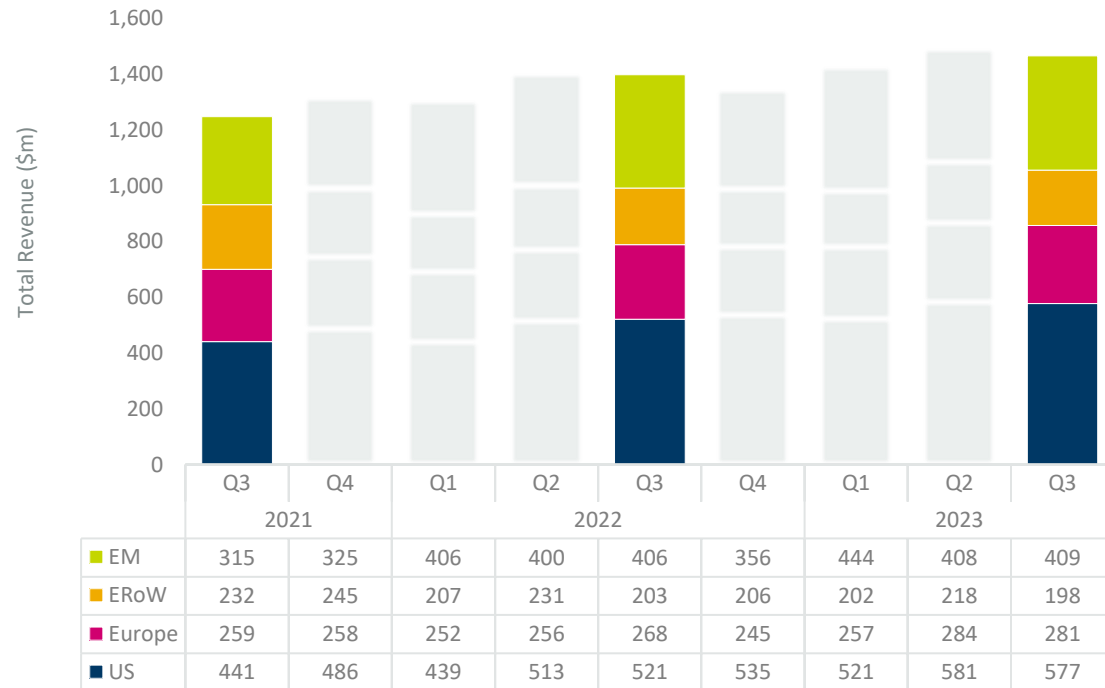
China Emerging Markets ex-China COVID-19 medicines



Oncology

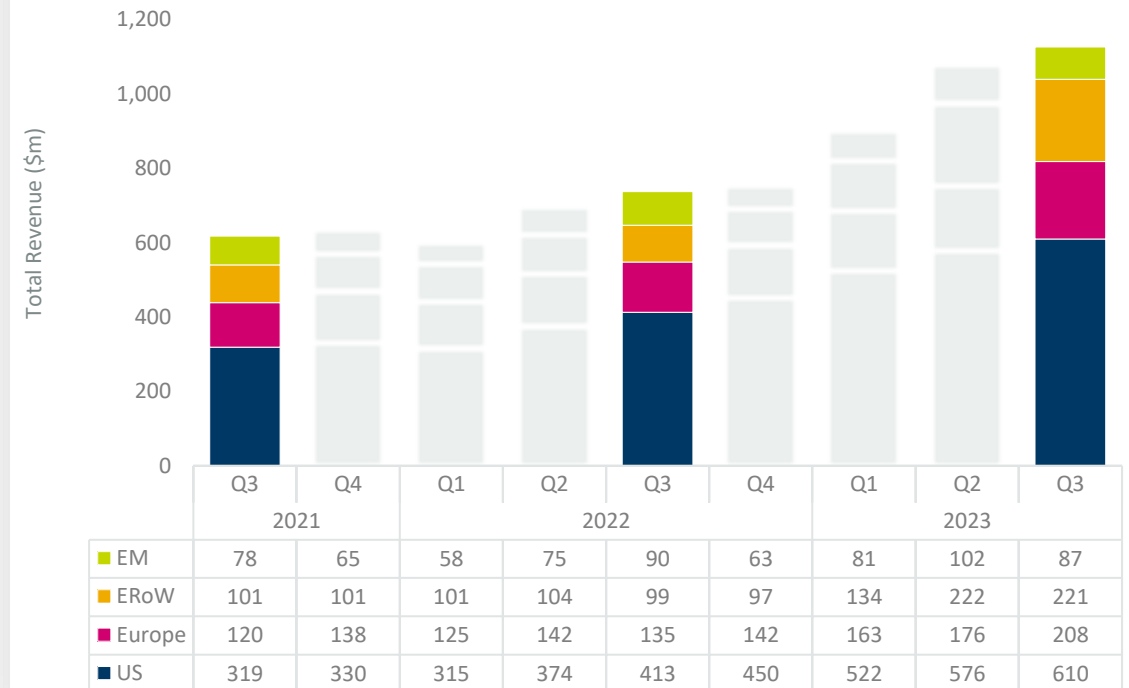
Tagrisso

10% growth at CER to \$4,380m in 9M 2023



Imfinzi and Imjudo

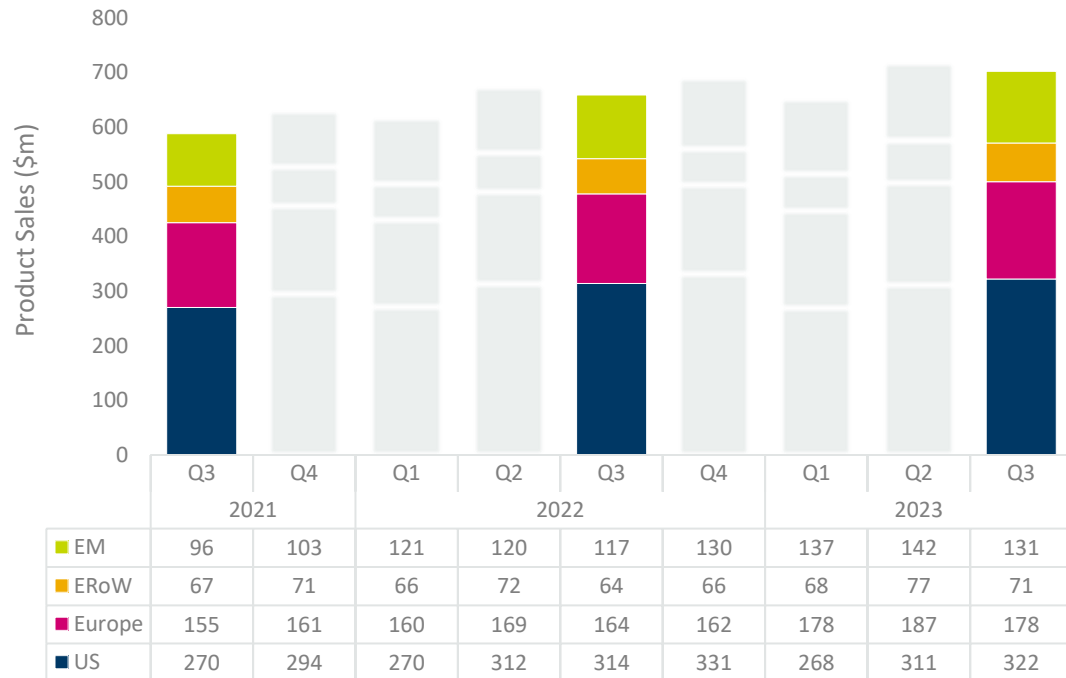
56% growth at CER to \$3,102m in 9M 2023



Oncology

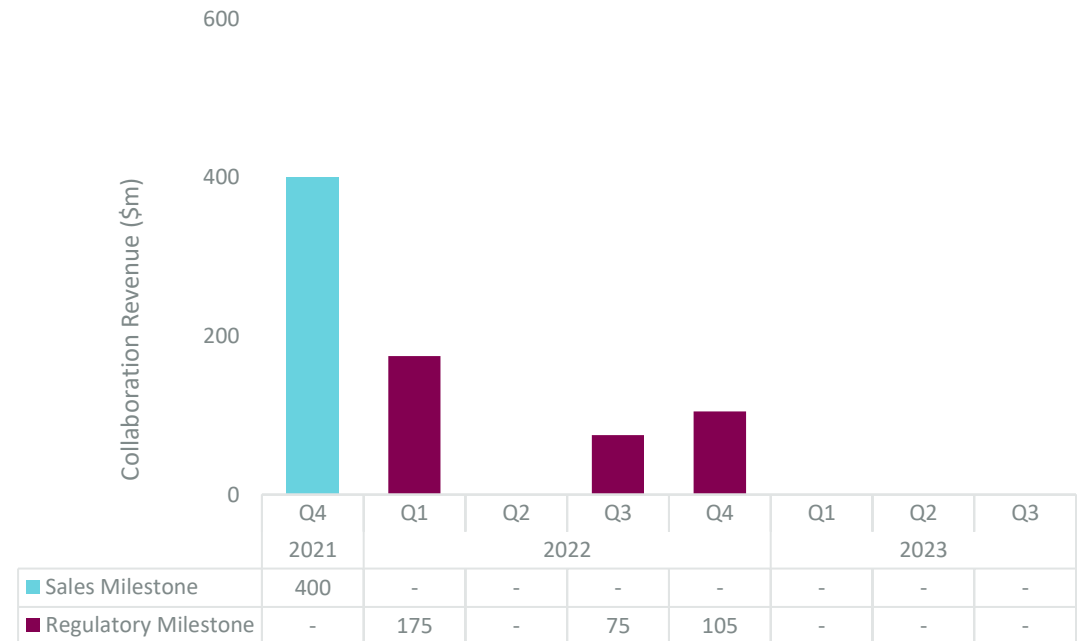
Lynparza

3% decrease at CER to \$2,070m in 9M 2023



Lynparza

Collaboration Revenue: \$3.8bn recorded cumulative, \$3.9bn future potential



Due to rounding, the sum of a number of dollar values and percentages may not agree to totals.

CER = constant exchange rates; EM = Emerging Markets; ERoW = Established Rest of World.

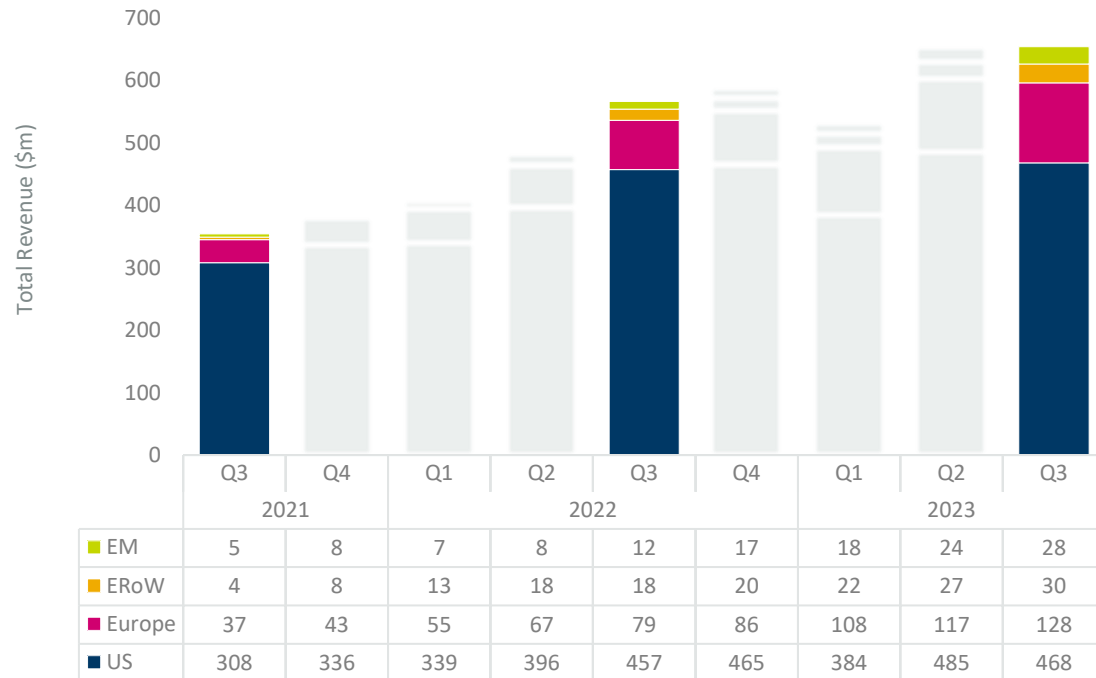
Collaboration partners: Merck & Co., Inc. (Lynparza).



Oncology

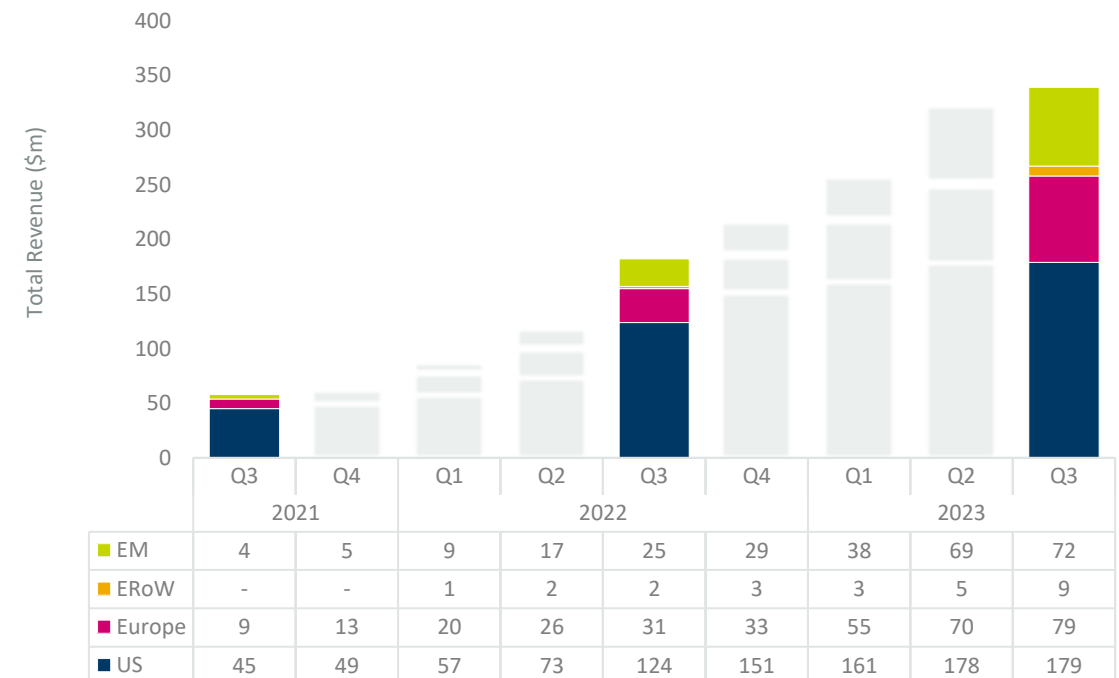
Calquence

26% growth at CER to \$1,839m in 9M 2023



Enhertu

>2x growth at CER to \$919m in 9M 2023



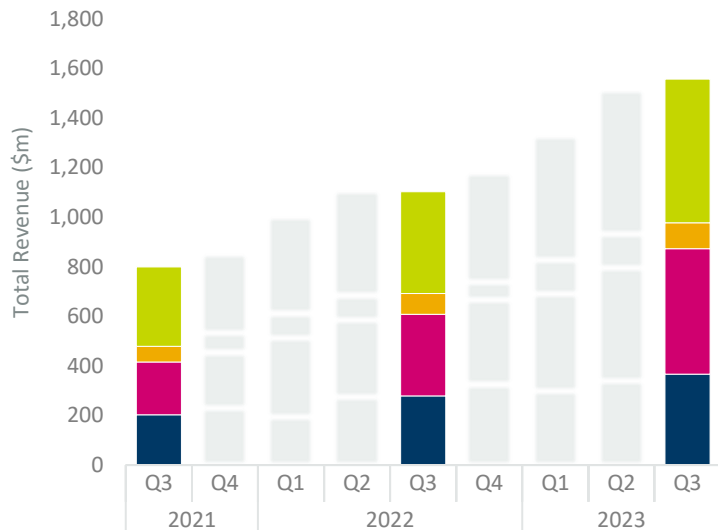
Due to rounding, the sum of a number of dollar values and percentages may not agree to totals.



BioPharmaceuticals: Cardiovascular, Renal & Metabolism

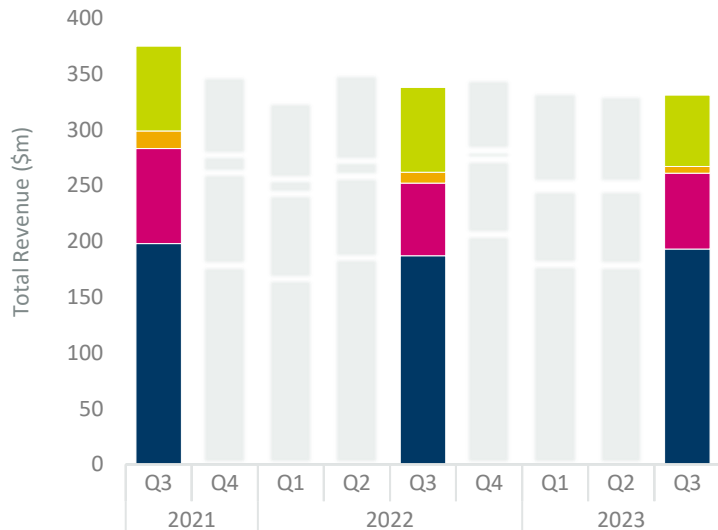
Farxiga

41% growth at CER to \$4,389m in 9M 2023



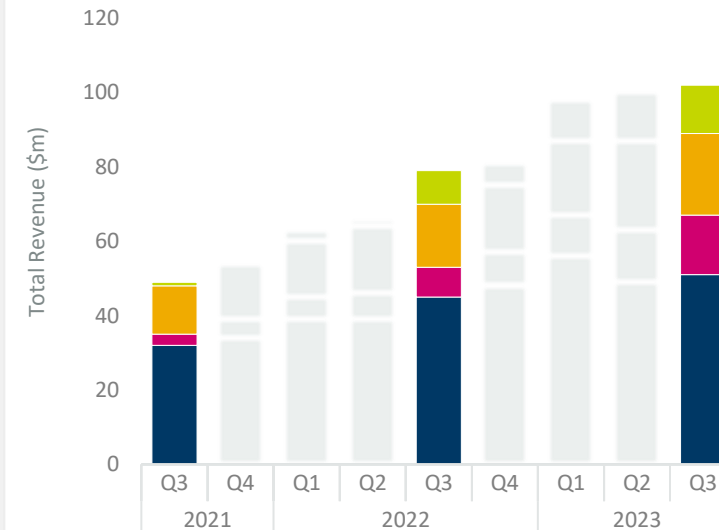
Brilinta

Stable at CER at \$996m in 9M 2023



Lokelma

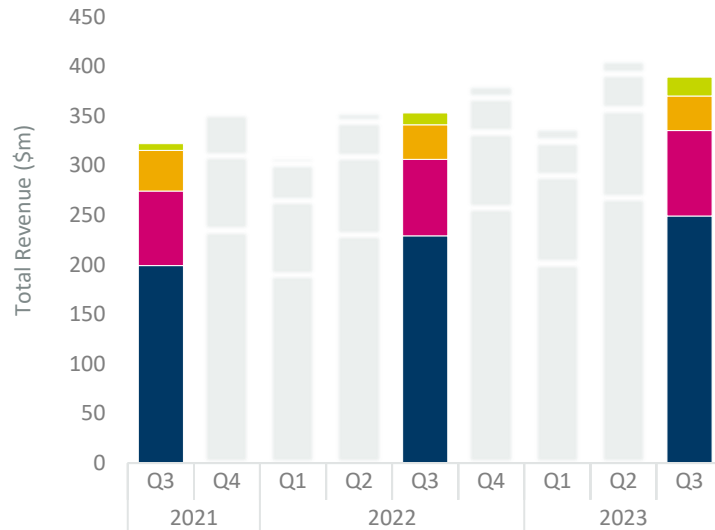
49% growth at CER to \$300m in 9M 2023



BioPharmaceuticals: Respiratory & Immunology

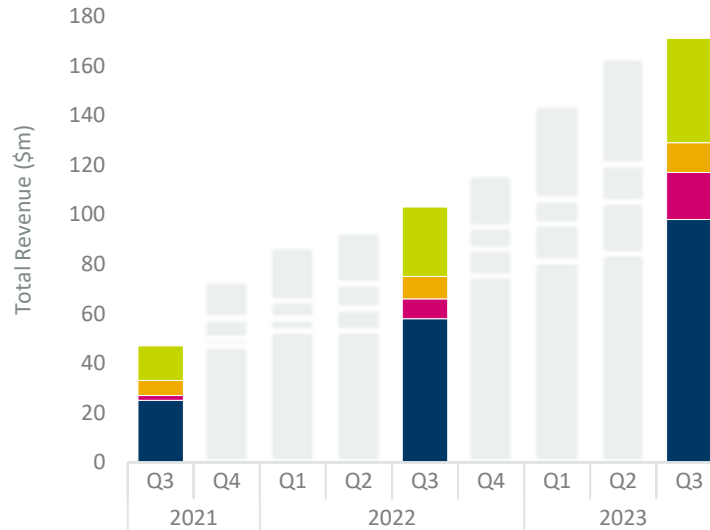
Fasenra

13% growth at CER to \$1,134m in 9M 2023



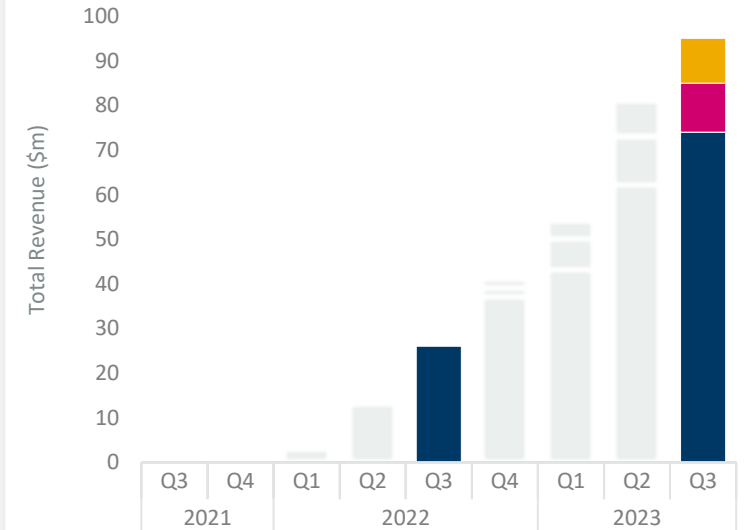
Breztri

73% growth at CER to \$478m in 9M 2023



Tezspire

>5x growth at CER to \$230m in 9M 2023



43 Due to rounding, the sum of a number of dollar values and percentages may not agree to totals.

CER = constant exchange rates; EM = Emerging Markets; ERoW = Established Rest of World.

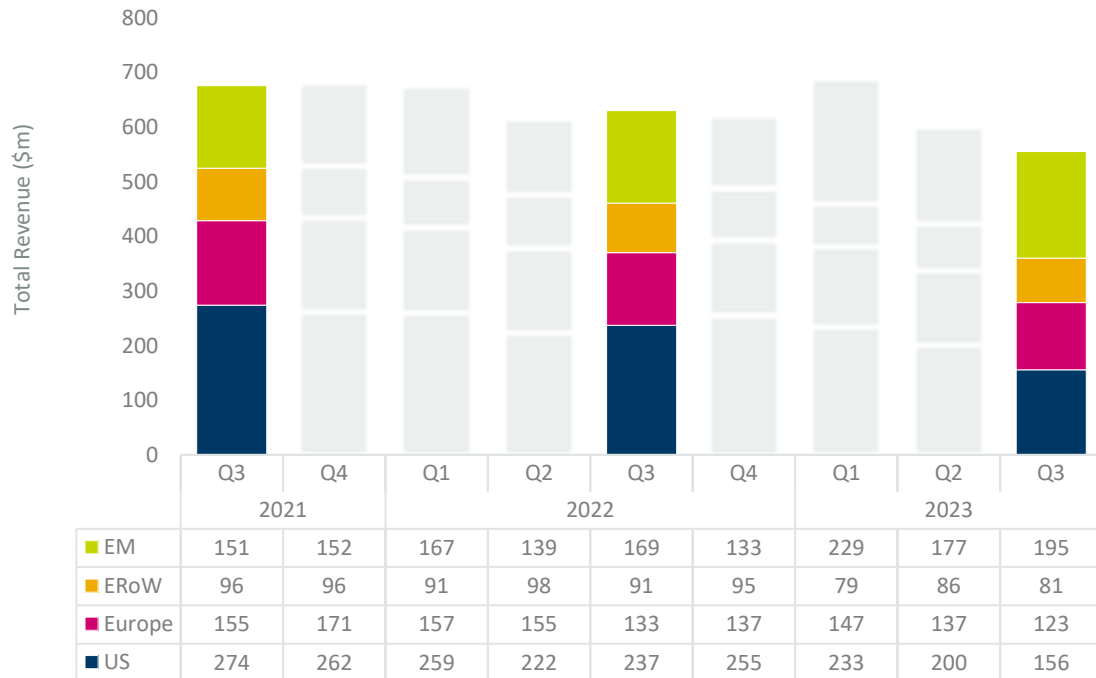
Collaboration partners: Amgen (*Tezspire*).



BioPharmaceuticals: Respiratory & Immunology

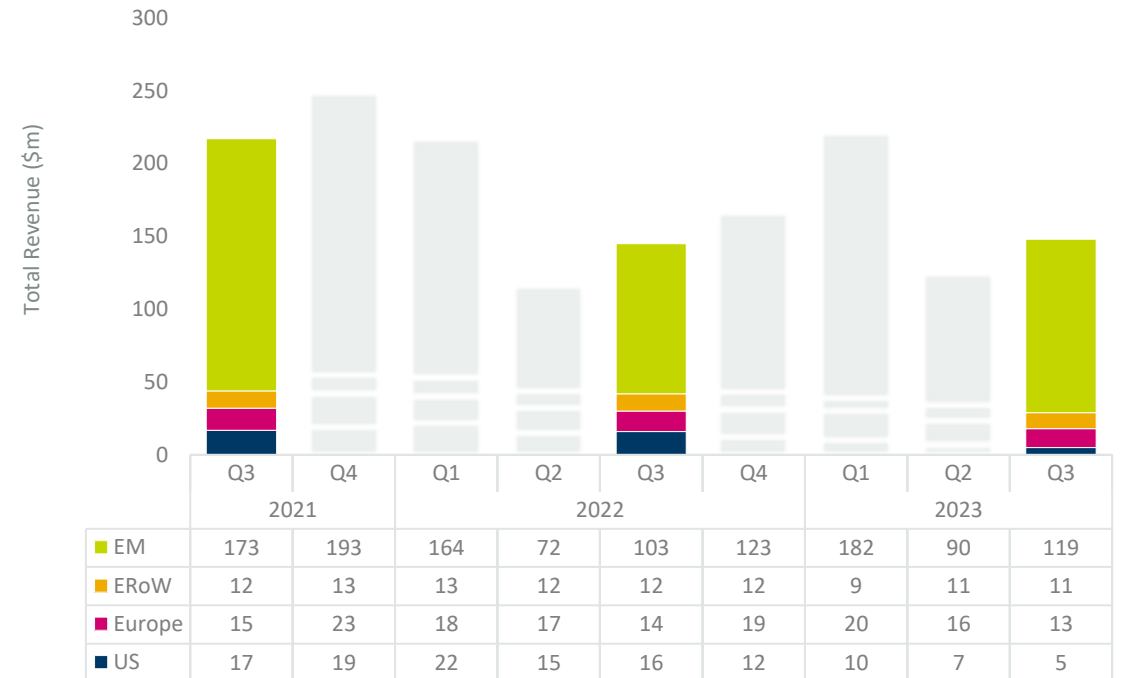
Symbicort

1% decrease at CER to \$1,842m in 9M 2023



Pulmicort

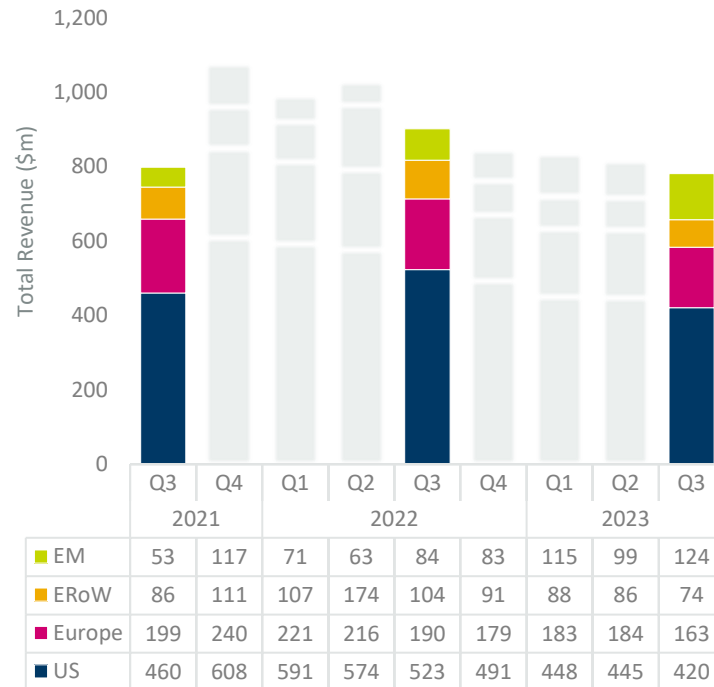
10% growth at CER to \$493m in 9M 2023



Rare Disease

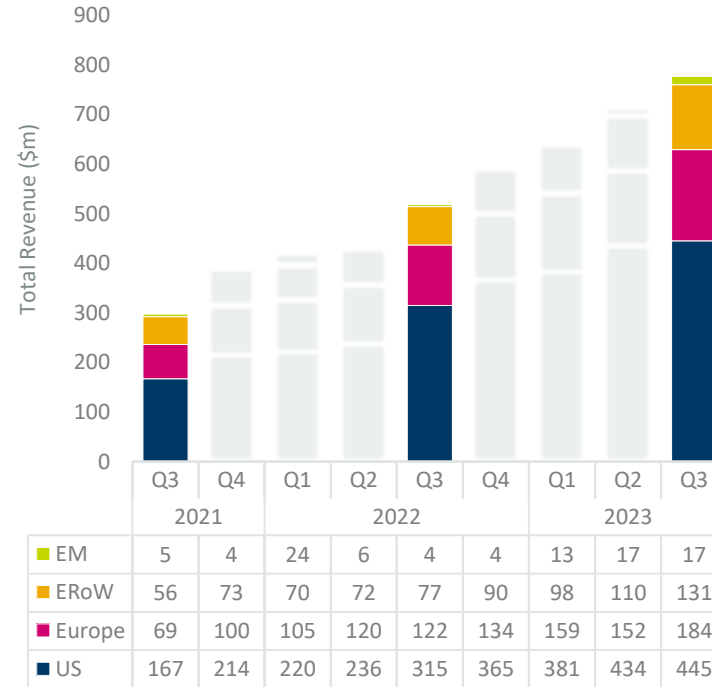
Soliris

15% decrease at CER to \$2,429m in 9M 2023



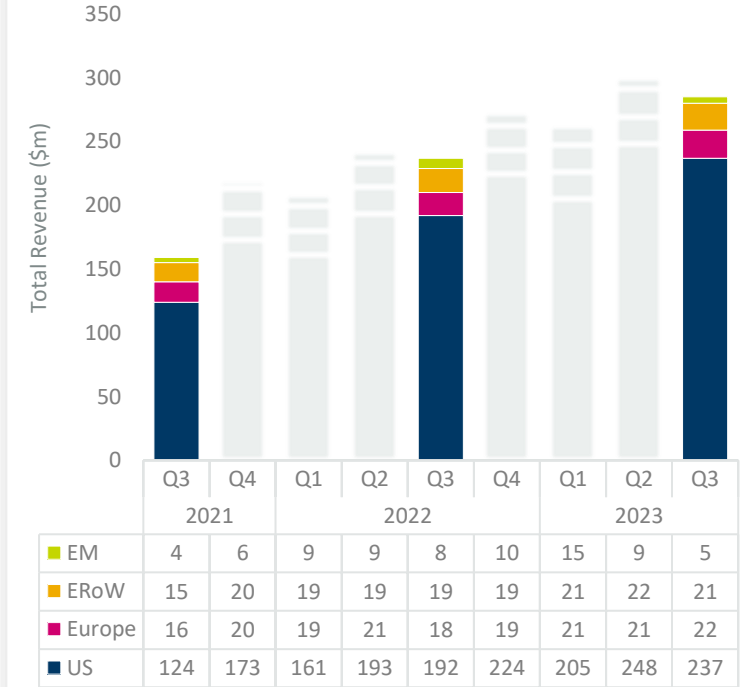
Ultomiris

58% growth at CER to \$2,141m in 9M 2023



Strensiq

24% growth at CER to \$847m in 9M 2023



Due to rounding, the sum of a number of dollar values and percentages may not agree to totals.

