## Meet Novartis Management Investor Event

London, November 21, 2024

**UNOVARTIS** | Reimagining Medicine



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This presentation contains forward-looking statements within the meaning of the United States Private Securities Litigation Reform Act of 1995, that can generally be identified by words such as "potential," "expected," "will," "planned," "pipeline," "outlook," "confident," or similar expressions, or by express or implied discussions regarding potential new products, potential new indications for existing products, potential product launches, or regarding potential future revenues from any such products; or regarding results of ongoing clinical trials; or regarding potential future, pending or announced transactions; regarding potential future sales or earnings; or by discussions of strategy, plans, expectations or intentions, including discussions regarding our continued investment into new R&D capabilities and manufacturing; or regarding our capital structure; or regarding the consequences of the spin-off of Sandoz and our transformation into a "pure-play" innovative medicines company. Such forward-looking statements are based on the current beliefs and expectations of management regarding future events and are subject to significant known and unknown risks and uncertainties. Should one or more of these risks or uncertainties materialize, or should underlying assumptions prove incorrect, actual results may vary materially from those set forth in the forward-looking statements. You should not place undue reliance on these statements. There can be no guarantee that the investigational or approved products described in this presentation will be submitted or approved for sale or for any additional indications or labeling in any market, or at any particular time. Nor can there be any guarantee that such products will be commercially successful in the future. Neither can there be any guarantee expected benefits or synergies from the transactions described in this presentation will be achieved in the expected timeframe, or at all. In particular, our expectations could be affected by, among other things: uncertainties regarding the success of key products, commercial priorities and strategy; uncertainties in the research and development of new products, including clinical trial results and additional analysis of existing clinical data; uncertainties regarding the use of new and disruptive technologies, including artificial intelligence; global trends toward healthcare cost containment, including ongoing government, payer and general public pricing and reimbursement pressures and requirements for increased pricing transparency; uncertainties regarding our ability to realize the strategic benefits, operational efficiencies or opportunities expected from our external business opportunities; our ability to realize the intended benefits of our separation of Sandoz into a new publicly traded standalone company; our ability to obtain or maintain proprietary intellectual property protection, including the ultimate extent of the impact on Novartis of the loss of patent protection and exclusivity on key products; uncertainties in the development or adoption of potentially transformational digital technologies and business models; uncertainties surrounding the implementation of our new IT projects and systems; uncertainties regarding potential significant breaches of information security or disruptions of our information technology systems; uncertainties regarding actual or potential legal proceedings, including regulatory actions or delays or government regulation related to the products and pipeline products described in this presentation; safety, guality, data integrity, or manufacturing issues; our performance on and ability to comply with environmental, social and governance measures and requirements; major political, macroeconomic and business developments, including impact of the war in certain parts of the world; uncertainties regarding future global exchange rates; uncertainties regarding future demand for our products; and other risks and factors referred to in Novartis AG's most recently filed Form 20-F and in subsequent reports filed with, or furnished to, the US Securities and Exchange Commission. Novartis is providing the information in this presentation as of this date and does not undertake any obligation to update any forward-looking statements as a result of new information, future events or otherwise.

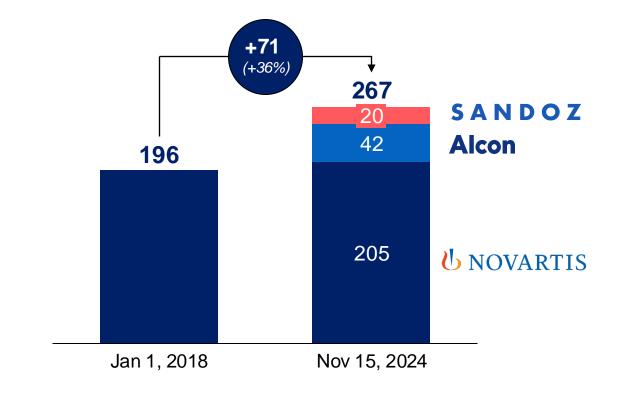
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This presentation includes non-IFRS financial measures, including constant currencies (cc), core results and free cash flow. An explanation of non-IFRS measures can be found on page 46 of the 3Q24 Interim Financial Report.

## We have transformed into a pure-play innovative medicines company, creating significant shareholder value...



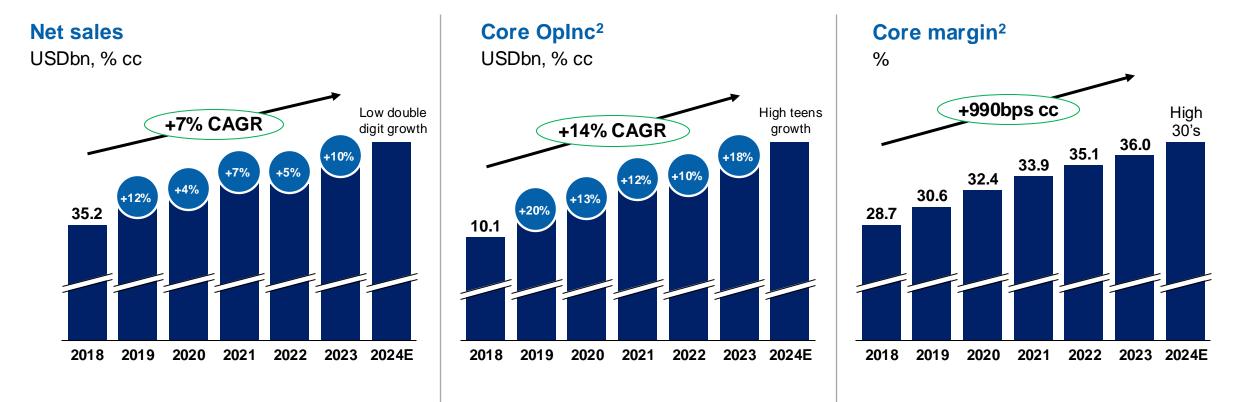
#### Market capitalization (in USDbn)<sup>1,2</sup>



1. Source: Bloomberg for market capitalizations of Alcon and Sandoz, own calculations for market capitalization of Novartis. 2. In addition, Novartis paid out USD 50bn in dividends over the period of 2018 – 2024.

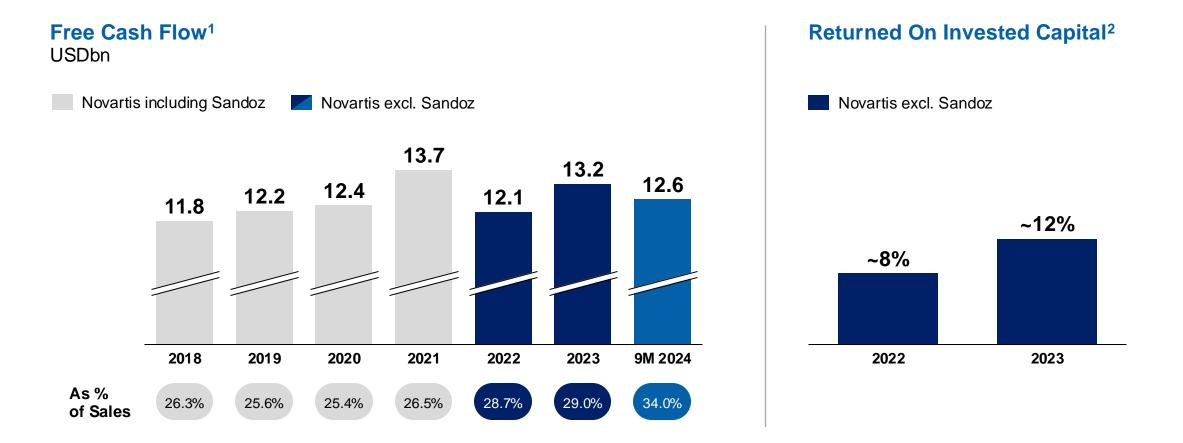
## ... while delivering strong operational performance

Continuing operations<sup>1</sup> performance, numbers restated post-Sandoz spin-off



1. As defined on page 35 of the Interim Financial Report, Continuing operations include the retained business activities of Novartis, comprising the Innovative Medicines Division and the continuing Corporate activities. 2. Core results and constant currencies are non-IFRS measures. Details regarding non-IFRS measures can be found starting on page 46 of the Interim Financial Report. Unless otherwise noted, all growth rates refer to same period in PY.

## Our sales growth, market expansion and balance sheet discipline have led to robust free cash flow and improved ROIC



1. 2018 to 2022 figures reflecting revised free cash flow definition. Free cash flow is a non-IFRS measure. An explanation of non-IFRS measures can be found on page 46 of the Interim Financial Report. 2. ROIC calculated as per Bloomberg definition using reported (non-core) financials, adjusted to reflect Novartis post Sandoz spin-off.

## We remain committed to executing our focused strategy...

Deliver high-value medicines that alleviate society's greatest disease burdens through technology leadership in R&D and novel access approaches

### **Focus**

#### 4 core therapeutic areas

Cardiovascular-Renal-Metabolic, Immunology, Neuroscience, Oncology

#### 2 + 3 technology platforms

Chemistry, Biotherapeutics xRNA, Radioligand, Gene & Cell Therapy

### 4 priority geographies

US, China, Germany, Japan

### **Priorities**

Accelerate growth and deliver returns



Deliver **high-value medicines** (including launch excellence)

## Strengthen foundations



Unleash the power of **our people** 

Scale data science and technology

Build trust with society

### Execution

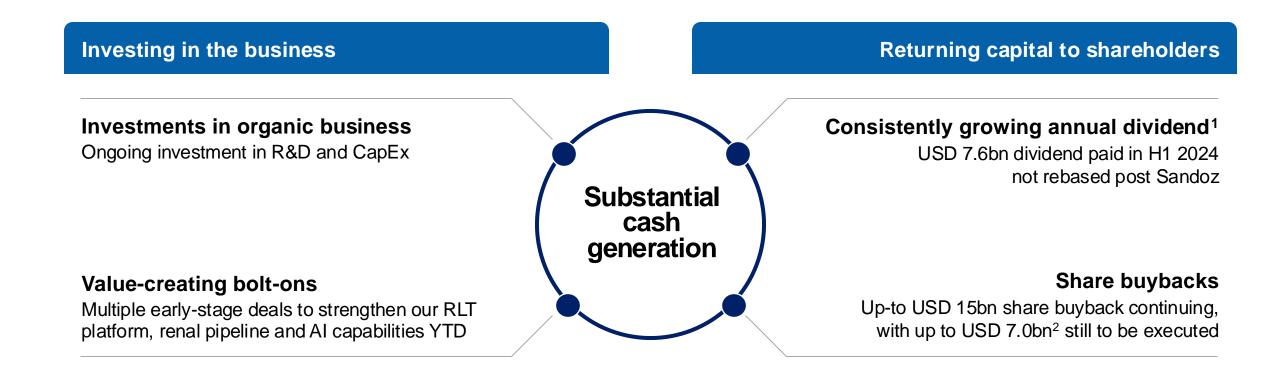
Delivering through operational excellence



Driving efficiencies and agile resource allocation

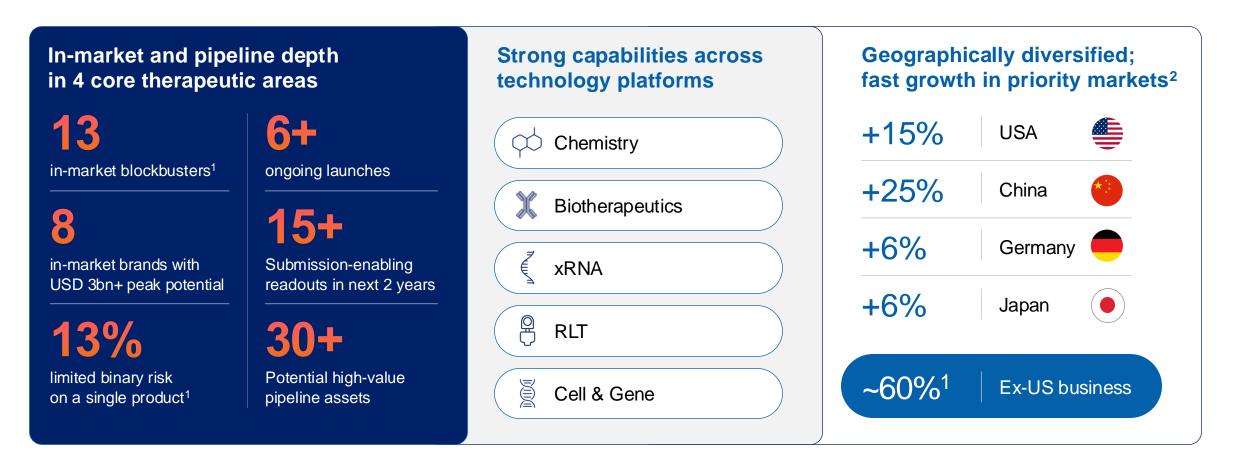
Improving R&D productivity

## ... and continuing our shareholder-friendly capital allocation approach



1. In CHF. 2. As of Oct 31, 2024.

## We have deep expertise and capabilities in our core therapeutic areas and technology platforms, with a balanced global footprint

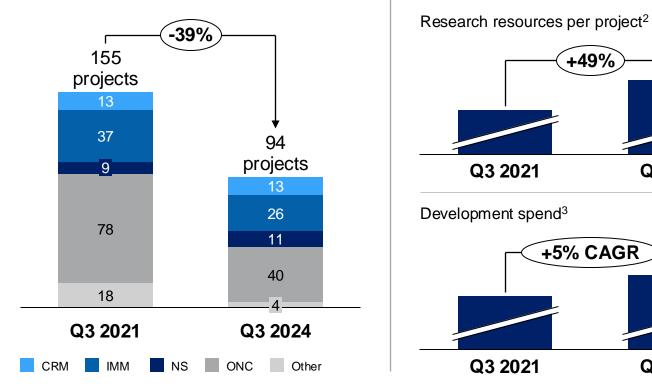


1. Based on 2023 sales actuals. 2. 9M 2024 sales growth vs PY in constant currencies. Constant currencies is a nonIFRS measure. Details regarding non-IFRS measures can be found starting on page 46 of the 3Q24 Interim Financial Report.

## Over the last few years, we have streamlined our pipeline and focused our R&D spend...

and capabilities

### Streamlined portfolio and increased TA focus<sup>1</sup>



#### With increased resources Driving focus and enhanced competencies



Enhancing our technical R&D capabilities (incl. biotherapeutics, RLT, and siRNA), with USD 400m+ in investments through 2028



Significant investments in data science, technology and Al to increase probability of success and accelerate timelines

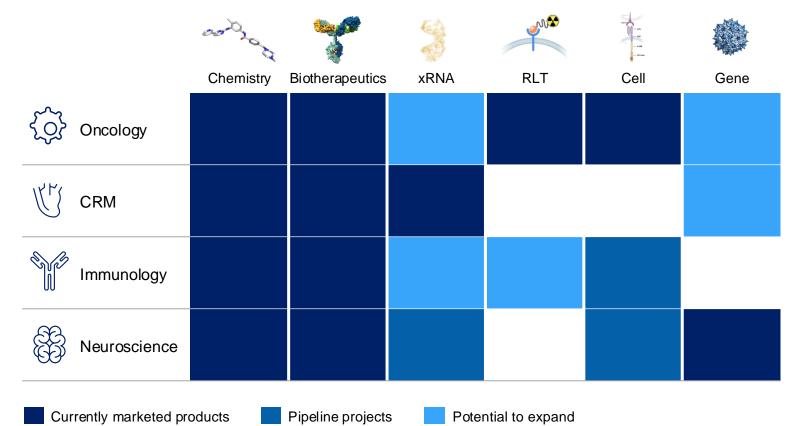
**Optimized global footprint** for clinical trials to accelerate recruitment times

1. PhI to approval, excl. Global Health. 2. Monthly average Biomedical Research FTEs per project. 3. Core Development spend, growth in constant currencies, comparing Q1-Q3 2021 vs. Q1-Q3 2024. Core results and constant currencies are non-IFRS measures. Details regarding non-IFRS measures can be found starting on page 46 of the Interim Financial Report

Q3 2024

Q3 2024

## ... and we continue to leverage our technology platforms across our core therapeutic areas

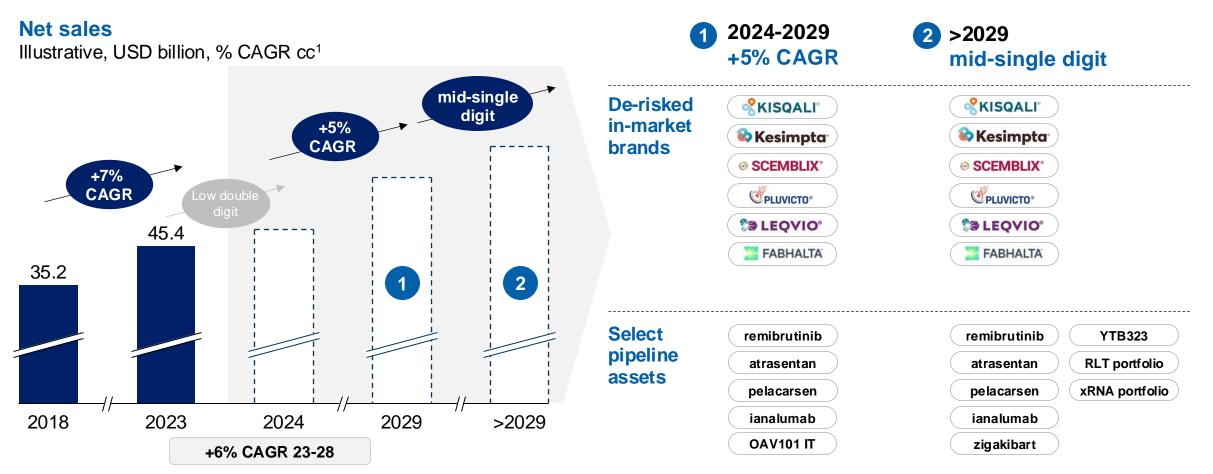


### **Current applications across our core TAs**

### Our approach:

- Broad applicability
- Sustained competitive advantage
- · Scalability to build pipeline
- Advancement of disease area strategy
- Integration of diverse expertise

## We expect to drive consistent growth in the near-, mid- and long-term; upgrading 2023-2028 sales CAGR from +5% to +6%



All figures reflecting Continuing Operations. 1. Constant currencies is a non-IFRS measure. Details regarding non-IFRS measures can be found starting on page 46 of the 3Q24 Interim Financial Report.



# Novartis growth story through 2029

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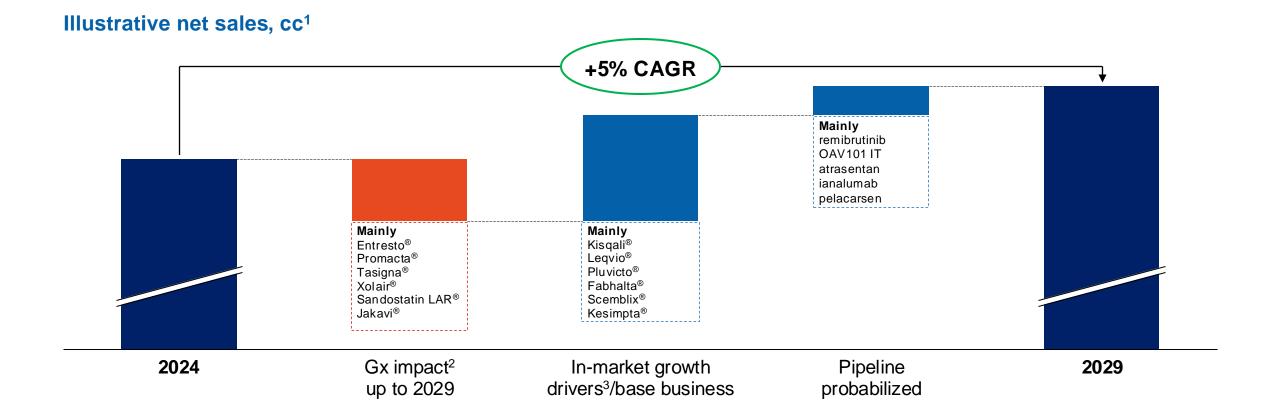
We expect net sales to grow +5% cc CAGR 2024-2029, and maintain our core operating income margin guidance of 40%+ by 2027...

**Barring unforeseen events** 

Net sales	Core margin
2024-2029 sales expected to grow	Core margin expected to reach
+5% CC	40%+
CAGR	by 2027

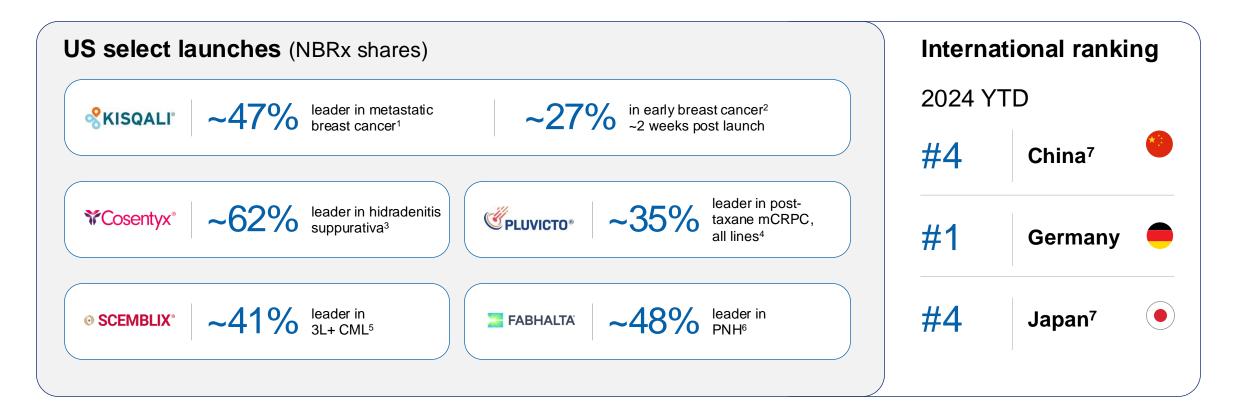
Core results and constant currencies are non-IFRS measures. Details regarding non-IFRS measures can be found starting on page 46 of the Interim Financial Report.

## ... with de-risked in-market assets driving most of our growth



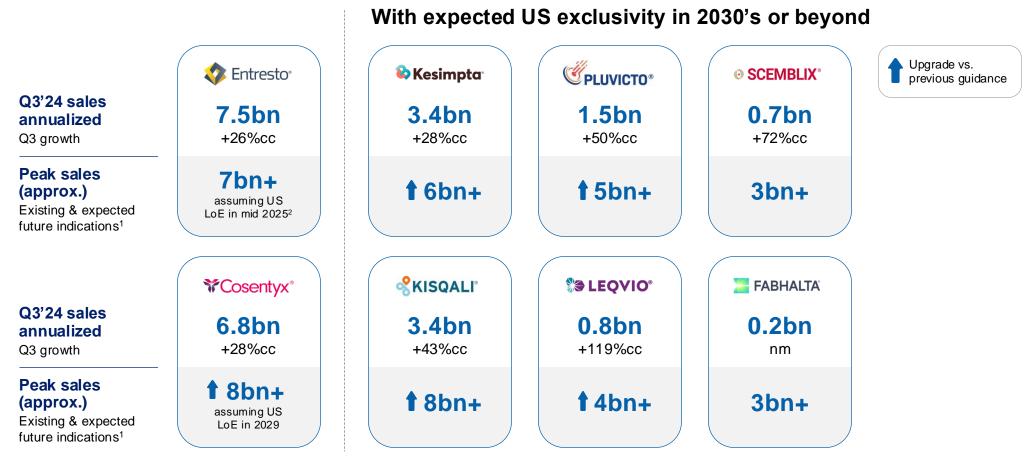
All figures reflecting Continuing Operations. 1. Constant currencies is a non-IFRS measure. Details regarding non-IFRS measures can be found starting on page 46 of the 3Q24 Interim Financial Report. 2. For forecasting purposes, we assume Entresto US LoE in 2025. Timing of Entresto US generic entry is subject to ongoing patent and regulatory litigation. 3. Including indication expansion.

## We continue to deliver strong commercial execution across our portfolio, both in the US and International



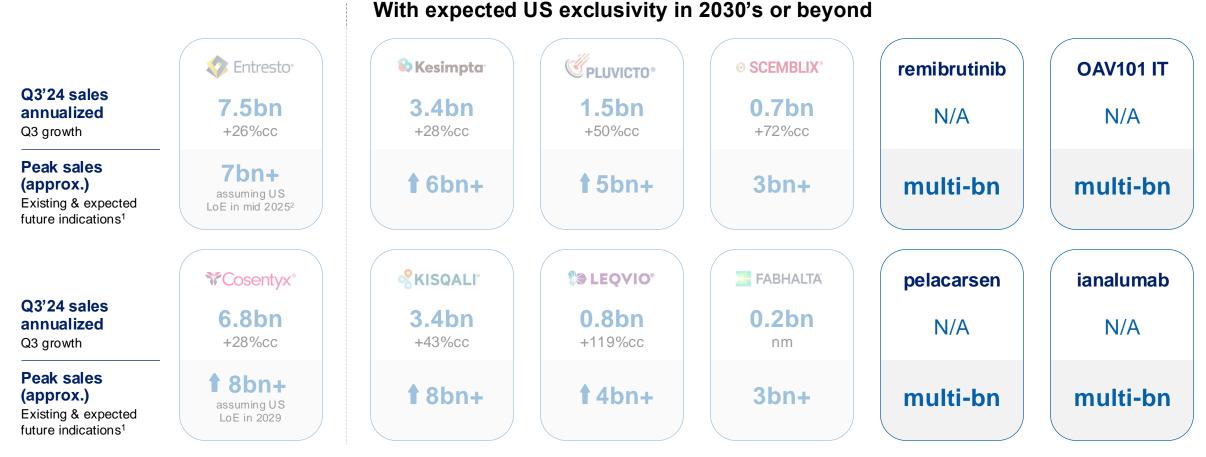
1. Of CDK4/6 mBC market, US rolling 3 months ending September 2024, IQVIA Breast Cancer Market Sizing report. 2. Of CDK46 eBC market, US September 2024, IQVIA Breast Cancer Market Sizing report. 3. IQVIA National Source of Business (NSOB) September 2024. 4. Claims Data Stack, September 2024. Data adjusted for United cyber attack impact. 5 US: July US IQVIA CML market sizing report. 6. VEEVA claims data, July 2024. 7. Rank among pharmaceutical multinational companies.

## We have eight in-market brands with USD 3bn to 8bn+ potential, including multiple recent and upcoming indication expansions...



Constant currencies are non-IFRS measures. Details regarding non-IFRS measures can be found starting on page 46 of the Interim Financial Report. 1. Existing marketed indications and expected future Indications currently in development and/or registration. 2. Timing of Entresto US generic entry is subject to ongoing patent and regulatory litigation.

## ... with four potential multi-bn dollar assets expected to launch near-term



Constant currencies are non-IFRS measures. Details regarding non-IFRS measures can be found starting on page 46 of the Interim Financial Report. 1. Existing marketed indications and expected future Indications currently in development and/or registration. 2. Timing of Entresto US generic entry is subject to ongoing patent and regulatory litigation.

## We expect 15+ submission-enabling readouts in the next two years

#### Key assets with submission-enabling readouts through 2026 (expected)

**OAV101 IT** 

SMA readout in 2024

#### IgAN portfolio

• Atrasentan IgAN approval in 2025

Zigakibart IgAN readout in 2026

### **Fabhalta**®

• C3G approval in 2025

IC-MPGN readout in 2026

aHUS readout in 2026

#### Remibrutinib

• **CSU** submission in **2025** 

CINDU readout in 2026

MS readout in 2026

#### lanalumab

SjS readouts in 2025

2L ITP readout in 2025

1L ITP and wAIHA readouts in 2026

### Pelacarsen CVRR-Lp(a) readout in 2025<sup>1</sup>

### Cosentyx®

GCA readout in 2025

PMR readout in 2025

#### **Pluvicto**<sup>®</sup>

• mCRPC pre-taxane approval in 2025

Post readout

mHSPC readout in 2025<sup>1</sup>

Leqvio®

CVRR-LDLC readout in 2026<sup>2</sup>

1. Event-driven trial readout. 2. ORION-4 expected readout in 2026 and VICTORION-2-PREVENT in 2027.

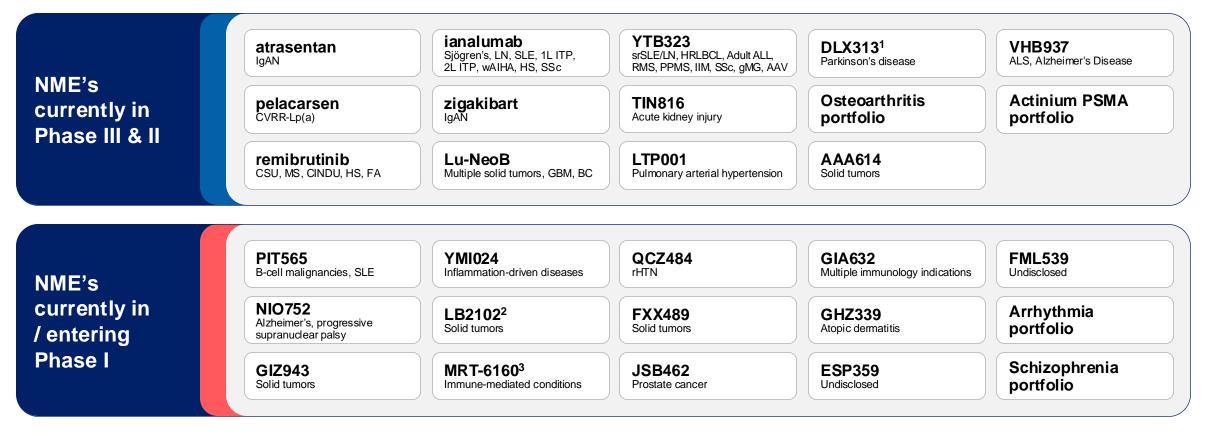


# Novartis growth story beyond 2029

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## We have 30+ potential high-value NME assets in our pipeline

#### **Select assets**



Assets are shown in the phase of the most advanced indication (listed first). Highvalue potential based on unprobabilized estimated peak sales of all indications currently in development. 1. Novartis is developingminzasolmin jointly in collaboration with UCB; DLX313 is the Novartis compound code for UCB0599. 2. Novartis has an exclusive, global license agreement with Legend Biotech for LB2102. 3. Novartis has signed an exclusive global license agreement with Monte Rosa Therapeutics. This transaction is subject to customary closing conditions, including regulatory clearance.

## We have a strong foundation in Immunology, and expect 6 Phase III readouts and >10 Phase II readouts<sup>1</sup> in next 5 years

#### Immunology

#### **Disease areas** (selected)

- · Psoriasis, Psoriatic Arthritis
- · Spondylitis/Spondyloarthritis
- HS, CSU, CINDU, AtD
- Sjögren's, SLE, LN

### Anchor assets Cosentyx<sup>®</sup> Colair I L A R I S<sup>®</sup>

## Advanced platform capabilities

- Immune reset
- Bi-/tri-specific antibodies

Selected projects (indication)	Pre-clinical	Phase I	Phase II	Phase III	Registration	Next milestone/status
Cosentyx (GCA)						Readout H1 2025
Cosentyx (PMR)						Readout H2 2025
Remibrutinib (CSU)						Submission in H1 2025
Remibrutinib (CINDU)						Readout 2026
Remibrutinib (HS)						Advancing into PhIII in 2025
Remibrutinib (FA)						Readout H2 2025
Ianalumab (SjD)						Readout H2 2025
Ianalumab (LN)						Readout 2027
lanalumab (SLE)						Readout 2027
ianalumab (HS)						Readout 2025
Ianalumab (SSc)						Readout 2027
YTB323 (srSLE/LN)						Readouts from 2026
YTB323 (SSc)						Trial recruiting
YTB323 (IIM)					Disease area	Trial recruiting
YTB323 (AAV)					Rheumatology	Starting PhII in 2025 <sup>2</sup>
GIA632 (IL-15 mAb) (multiple)	///////////////////////////////////////	///////////////////////////////////////	Z		Dermatology -	PhII initiation H2 2025
T-cell engagers (SLE)					Other -	Readouts from 2027
Bi-specific antibodies (AtD)						Readouts from 2027

1. Includes OA portfolio. 2. Direct to Phase II.

## In CRM, we focus on areas of high unmet need and continue to build on our strong mid- and late-stage pipeline

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#### **Disease areas** (selected)

- Heart Failure and Hypertension
- Atherosclerosis
- Arrhythmia
- Rare Renal, Acute Kidney Injury

#### Anchor assets

🛷 Entresto° 🔚 FABHALTA

Se LEQVIO®

## Advanced platform capabilities

• xRNA (siRNA, ASO)

Selected projects (indication)	Pre-clinical	Phase I	Phase II	Phase III	Registration	Next milestone/status
Leqvio <sup>®</sup> (CVRR-LDLC, secondary and primary prevention)						Readouts 2026-2027
Pelacarsen (CVRR-Lp(a))						Readout 2025 (event-driven)
LTP001 (SMURF1 inhibitor) (PAH) <sup>1</sup>						Trial recruiting
QCZ484 (rHTN)						Advancing into PhII in 2025
Arrhythmia (multiple assets)						Multiple assets in clinic 2025
Inflammation (multiple modalities)						First asset in clinic 2025
Multiple siRNA assets						Several entering clinic in 2025-2026
Atrasentan (IgAN)						Approval expected 2025
Iptacopan (C3G)						Approval expected 2025
Iptacopan (IC-MPGN, aHUS)						Readout 2026
Zigakibart (IgAN)						Readout 2026
Iptacopan (LN, AAV)					Disease area	Readouts 2026-2027
TIN816 (ATP modulator) (sAKI)					Cardiology	Readout 2026
Early renal (OJR520, UFJ776, etc.)					Renal	Expected to enter the clinic in 2026

1. Phase I / II.

## Neuroscience pipeline focuses on multiple sclerosis, neuromuscular and neurodegenerative diseases

Neuroscience	Selected projects (indication)	Pre-clinical	Phase I	Phase II	Phase III	Registration	Next milestone/status
	Remibrutinib (MS)						Readout 2026
Disease areas (selected)	lptacopan (gMG)						Readout 2027
<ul><li>Multiple Sclerosis</li><li>Neuromuscular (Spinal</li></ul>	YTB323 (RMS) <sup>1</sup>						Trial recruiting
<ul><li>Muscular Atrophy, others)</li><li>Neurodegeneration</li></ul>	YTB323 (PPMS) <sup>1</sup>						Trial recruiting
(Alzheimer's, Parkinson's, Huntington's)	YTB323 (gMG) <sup>1</sup>						Trial in preparation
	OAV101 (SMA IT)						Readout H2 2024
Anchor assets	<b>KATE</b> (FSHD, DM1)						Lead optimization/Discovery
🈂 Kesimpta <sup>,</sup> 🖉 zolgensma®	EDK060 (CMT1A)						IND in preparation
Advanced platform	DLX313 (PD) <sup>2</sup>						Readout H2 2024
capabilities	NIO752 (tau ASO) (AD, PSP)					se area euroimmunology	First readout 2025
<ul><li>Gene therapy</li><li>xRNA</li></ul>	VHB937 (TREM2) (ALS)					muscular	Trial recruiting
Immune reset	VHB937 (AD)				Neuro	degenerative	Starting PhII in 2025 <sup>3</sup>

1. Phase I / II. 2. Novartis is developing minzasolmin jointly in collaboration with UCB; DLX313 is the Novartis compound code for UCB0599. 3. Direct to Phase II.

## In Oncology, we have multiple anchor brands in solid tumors and hematology, with a robust pipeline in prostate, breast and RLT

Oncology
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Disease areas (selected)	Disease	areas	(selected)
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- Breast Cancer
- Prostate Cancer
- Lung Cancer
- CML, NHL, MM, AML, MDS
- PNH, ITP, wAIHA

Anchor assets				
KISQALI° 🛛 SC	<b>EMBLIX</b> °			
<sup>©</sup> PLUVICTO <sup>™</sup> <mark>&gt;</mark> F	FABHALTA			

## Advanced platform capabilities

- RLT
   Bi-/tri-specific
- ADC antibodies
- CAR-T

Selected projects (MoA/indication) <sup>1</sup>	Pre-clinical	Phase I	Phase II	Phase III	Registration	Next milestone/status
Kisqali + oral SERD <sup>2,4</sup>						Advancing into PhIII
Kisqali + mutant-selective PI3Ka inhibitor <sup>3,4</sup>						Advancing into PhII
Next-gen CDK assets (e.g., CDK2 inhibitors)						Advancing into PhI in 2025
Lu-NeoB (GRPR RLT)⁵						Readout expected 2026
FXX489 (RLT) <sup>7</sup>						Trial ongoing
Emerging RLTs (including next-gen FAP, HER2)						Studies ongoing
Pluvicto (pre-taxane mCRPC – PSMAfore)						Approval expected H1 2025
Pluvicto (mHSPC – PSMAddition)						Readout expected H2 2025 <sup>12</sup>
Pluvicto (oligometastatic PC – PSMA-DC)						Readout expected 2027
Ac-PSMA-617 (1 <sup>st</sup> gen $\alpha$ -emitting PSMA RLT) <sup>8</sup>						Advancing into PhIII in H1 202
Ac-PSMA-R2 (2 <sup>nd</sup> gen $\alpha$ -emitting PSMA RLT) <sup>4,9</sup>						Readout expected 2026
JSB462 (AR degrader) <sup>4</sup>						Advancing into PhII in 2025
Tulmimetostat (EZH1/2 inhibitor) <sup>4,10</sup>						Trial ongoing
Lutathera (ES-SCLC) <sup>4</sup>				Disease a	rea	Advancing into PhIII in 2027
AAA614 (multiple including NSCLC, PDAC) <sup>6</sup>				Breast can	icer	Readout expected in 2026
FXX489 (multiple including NSCLC, PDAC, CRC)				Prostate c	ancer	Trial ongoing
GIZ943 (FOLR1R) <sup>11</sup> (NSCLC, ovarian cancer)				Other RLT	programs	Trial ongoing
Emerging (next-gen FAP, HER2, DLL3, B7H3) (multiple)						Studies ongoing

1. Bars show most advanced phase per project row. 2. Ongoing combination study shown is sponsored byOlema Pharmaceuticals. 3. Ongoing combination study shown is sponsored by Scorpion Therapeutics. 4. Phase I / II. 5. Code: AAA603. 6. Name: Lu-FAP-2286. 7. Name: Lu-NNS-309. 8. Code: AAA817. 9: Code: AAA802. 10. Code: DZR123. 11. Name: Lu-EVS-459. 12. Event-driven trial readout.

## We continue to improve R&D productivity, with several initiatives expected to accelerate composite cycle times...

#### **Select initiatives**



### Fast-to-IND Strategy (pre-clinical)

Competitive standards defined with the ambition to accelerate IND submissions up to 12 months across modalities

Phase appropriate development Manufacturing capacities secured

Predictive models



#### **Enhanced Operations** (clinical)

Improved ways of working potentially leading to 1-2 years acceleration in select assets

Ambitious whitespace and trial standards Targeted acceleration

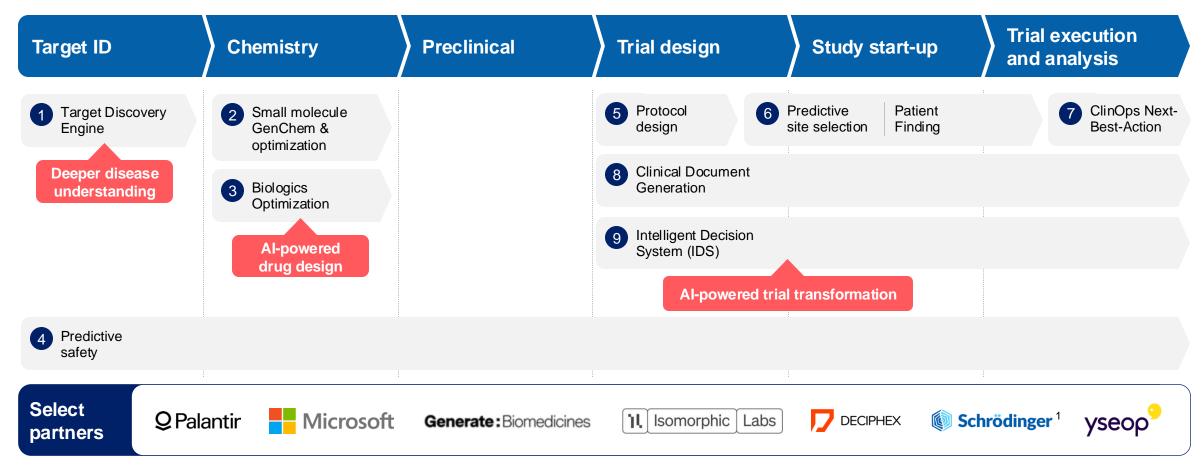
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#### Al Enabled (composite)

Al to contribute to cycle time acceleration by 6+ months

Utilizing the power of data science and AI across R&D

### ... and we continue to scale the power of data science and AI across R&D



1. Novartis has signed a research collaboration and license agreement with Schrödinger. This transaction is subject to customary closing conditions, including regulatory clearance.

## We continue to strategically invest in our advanced technology platforms across the value chain...

	Rese	earch & Develo	pment		Ma	nufacturing	Commercial	Market	
	Select clinical programs Pre				Novartis sites		In-market assets	Platform potential	
		Leqvio	CVRR, primary prevention; CVRR, secondary prevention			Kundl (AT)			
xRNA	7	Pelacarsen	CVRR-Lp(a)	19	2		Stepvio®	~30bn <sup>2</sup>	
	1	NIO752	Progressive supranuclear palsy; Alzheimer's disease		-	Schweizerhalle (CH)	•	00011	
		QCZ484	rHTN			, , , , , , , , , , , , , , , , , , ,			
		Pluvicto	victo pre-taxane mCRPC; mHSPC; oligometastatic PC			Milburn (US)			
		Lutathera	1L GEP-NET; Pediatrics + PPGL; GBM; ES-SCLC	-		Indianapolis (US)	LUTATHERA*		
DIT	4 -	AAA614	Solid tumors, including NSCLC, PDAC			Ivrea & Saluggia (IT)			
RLT	17	Ac-PSMA-617	Prostate cancer	18	6	Zaragoza (ES)	<b><sup>©</sup>PLUVICTO™</b>	~29bn <sup>3</sup>	
		Ac-PSMA-R2	Prostate cancer	_		Baarle-Nassau (NL)			
		Lu-Neo B	Solid tumors, breast cancer, Glioblastoma multiforme	_		4 expected new sites (US, CN, JP)			
		OAV101 IT	SMA IT			Stein (CH)			
Cell & Gene	11	YTB323	srSLE/LN, HRLBCL, Adult ALL, RMS, PPMS, IIM, SSc, gMG, AAV	16	3	Durham (US)	♦ KYMRIAH <sup>®</sup>	~55bn²	
		DFT383	Cystinosis			Morris Plains (US)	<b>∕″zolgen</b> sma®		

1. From Exploratory to Preclinical. 2. Source Evaluate Pharma estimate for the year 2030. 3. SourceMEDraysintell Nuclear Medicine Report & Directory Edition 2024, Radiotherapeutics market estimate for the year 2033.

## ... and over the last 2 years, we have signed more than 30 strategic deals to enhance our pipeline across therapeutic areas and technology platforms



Select C&BD transactions are shown in the phase of the most advanced indication for multiple asset deals. 1. Novartis hassigned an exclusive global license agreement with Monte Rosa Therapeutics. This transaction is subject to customary closing conditions, including regulatory clearance. 2. Novartis has signed an exclusive worldwide license and collaboration agreement with Ratio Therapeutics Inc. This transaction is subject to customary clearance. 3. Novartis has signed research collaboration and license agreement with Schrödinger. This transaction is subject to customary clearance.

### UNOVARTIS | Reimagining Medicine

## We continue to focus on key social, environmental and governance factors alongside our pursuit of sustainable shareholder value creation

### **Creating sustainable impact**

#### Value creation

Innovation and access to medicines

Future-proof pipeline addressing unmet need

Enabling access to innovative medicines

Dedicated Global Health unit

### **Risk mitigation**

Environmental Sustainability

Climate Water

Waste

 Standards

 Ethics

 Compliance

 Human rights

Ethical

Enablers Governance, transparency, non-financial reporting

### Consistent industry-leading performance across priority ESG ratings

Rank #1 in ATMI Industry leader in Sustainalytics<sup>1</sup> Leaders group in MSCI Industry leader group in ISS ESG Double A List in CDP climate and water



1. Pharmaceuticals subindustry group. Copyright Morningstar Sustainalytics. All rights reserved.

Human

Capital

& Inclusion

Culture

Talent

Diversity, Equity

## Novartis profile presents an opportunity for continued shareholder value creation in the short, medium, and long-term

## Our strategy is delivering results

4 core therapeutic areas and 2+3 technology platforms

Delivered **+7% cc sales CAGR**<sup>1</sup> from 2018-2023, **improved core margin** and generated substantial cashflows

## Attractive growth profile

2023-2028 sales guidance upgrade to +6% cc CAGR

2024-2029 sales guidance of +5% cc CAGR

Mid-single digit sales growth cc in the long-term



## Robust pipeline and capabilities

Streamlined and focused pipeline with increased R&D spend

Expanding our advanced technology platforms

30+ potential high-value pipeline assets



## We continue to be an ESG leader

Focus on key social, environmental and governance factors

Rank #1 in ATMI

Industry leader in **Sustainalytics**<sup>2</sup>

1 Continuing operations growth in constant currencies. Constant currencies is a non-IFRS measure. Details regarding non-IFRS measures can be found starting on page 46 of the 3Q24 Interim Financial Report. 2. Pharmaceuticals subindustry group. Copyright Morningstar Sustainalytics. All rights reserved.

## Appendix

**UNOVARTIS** Reimagining Medicine



### **Abbreviations**

Abbreviation	Full Form
AAV	ANCA-Associated Vasculitis
AD	Alzheimer's Disease
ADC	Antibody-Drug Conjugate
aHUS	Atypical Hemolytic Uremic Syndrome
ALS	Amyotrophic Lateral Sclerosis
ATMI	Access to Medicines Index
C3G	C3 Glomerulopathy
CAR-T	Chimeric Antigen Receptor T-cell
CINDU	Chronic Inducible Urticaria
CRC	Colorectal Cancer
CRM	Cardiovascular-Renal-Metabolic
CSU	Chronic Spontaneous Urticaria
CVRR	Cardiovascular Risk Reduction
FA	Food Allergy
FOLR1R	Folate Receptor 1
FTE	Full-Time Equivalent
GCA	Giant Cell Arteritis
gMG	Generalized Myasthenia Gravis
HS	Hidradenitis Suppurativa
IC-MPGN	Immune Complex-Mediated Membranoproliferative Glomerulonephritis

Abbreviation	Full Form
IgAN	Immunoglobulin A Nephropathy
IIM	Idiopathic Inflammatory Myopathies
IND	Investigational New Drug
LN	Lupus Nephritis
Lp(a)	Lipoprotein(a)
NSCLC	Non-Small Cell Lung Cancer
PDAC	Pancreatic Ductal Adenocarcinoma
PMR	Polymyalgia Rheumatica
PPMS	Primary Progressive Multiple Sclerosis
PSP	Progressive Supranuclear Palsy
rHTN	Resistant Hypertension
RLT	Radioligand Therapy
RMS	Relapsing Multiple Sclerosis
sAKI	Sepsis-Associated Acute Kidney Injury
SjD	Sjögren's Disease
SLE	Systemic Lupus Erythematosus
SMA	Spinal Muscular Atrophy
SSc	Systemic Sclerosis
TCE	T-Cell Engager
wAIHA	Warm Autoimmune Hemolytic Anemia