## Q3/FY2017 FINANCIAL RESULTS ENDED DECEMBER 31, 2017

## $\#$ astellas

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Astellas Pharma Inc.
January 31, 2018

## CAUTIONARY STATEMENT REGARDING FORWARD-LOOKING INFORMATION

In this material, statements made with respect to current plans, estimates, strategies and beliefs and other statements that are not historical facts are forward-looking statements about the future performance of Astellas Pharma. These statements are based on management's current assumptions and beliefs in light of the information currently available to it and involve known and unknown risks and uncertainties. A number of factors could cause actual results to differ materially from those discussed in the forward-looking statements. Such factors include, but are not limited to: (i) changes in general economic conditions and in laws and regulations, relating to pharmaceutical markets, (ii) currency exchange rate fluctuations, (iii) delays in new product launches, (iv) the inability of Astellas to market existing and new products effectively, (v) the inability of Astellas to continue to effectively research and develop products accepted by customers in highly competitive markets, and (vi) infringements of Astellas' intellectual property rights by third parties.

Information about pharmaceutical products (including products currently in development) which is included in this material is not intended to constitute an advertisement or medical advice.

AGENDA

Q3/FY2017 Financial Results

Initiatives to Build Resilience for Sustainable Growth

III Profit Distribution Policy

## Q3/FY2017 FINANCIAL RESULTS (CORE BASIS)

On-track toward FY2017 FCST

| (billion yen) | Q3/FY16 | Q3/FY17 | Change | $\begin{aligned} & \text { FY17 } \\ & \text { FCST* }^{*} \end{aligned}$ | Achievement | Excl impacts from Fx and business transfer |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Net sales | 1,005.6 | 999.4 | -0.6\% | 1,297.0 | 77.1\% | -1.3\% |
| Cost of sales \% of sales | $\begin{aligned} & 250.8 \\ & 24.9 \% \end{aligned}$ | $\begin{aligned} & 238.9 \\ & 23.9 \% \end{aligned}$ | -4.7\% |  |  |  |
| SG\&A expenses <br> \% of sales | $\begin{aligned} & 336.7 \\ & 33.5 \% \end{aligned}$ | $\begin{aligned} & 350.0 \\ & 35.0 \% \end{aligned}$ | +4.0\% |  |  |  |
| R\&D expenses <br> $\%$ of sales | $\begin{aligned} & 148.3 \\ & 14.7 \% \end{aligned}$ | $\begin{aligned} & 161.6 \\ & 16.2 \% \end{aligned}$ | +9.0\% | $\begin{gathered} 218.0 \\ 16.8 \% \end{gathered}$ | 74.1\% |  |
| Amortisation of intangible | 26.7 | 27.0 | +0.9\% |  |  |  |
| Share of associates/JVs losses | -1.3 | -1.4 | - |  |  |  |
| Core operating profit | 241.8 | 220.5 | -8.8\% | 258.0 | 85.4\% | -2.6\% |
| Core profit for the period | 177.2 | 167.9 | -5.3\% | 201.0 | 83.5\% |  |

## SALES ANALYSIS (YEAR ON YEAR)

Growth drivers in good shape, slight decrease in net sales due to GEs impacts in Japan


## CORE OP ANALYSIS (YEAR ON YEAR)

Development costs for late-stage projects, etc. increased


[^0]
## Q3/FY2017 FINANCIAL RESULTS (FULL BASIS)

On-track toward FY2017 FCST

| (billion yen) | Q3/FY16 | Q3/FY17 | Change | FY17FCST* | Achievement |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Core operating profit | 241.8 | 220.5 | -8.8\% | 258.0 | 85.4\% |
| Other income | 6.6 | 10.4 | +58.8\% |  |  |
| Other expenses | 17.1 | 51.2 | +198.7\% |  |  |
| Operating profit | 231.3 | 179.8 | -22.3\% | 222.0 | 81.0\% |
| Financial income | 14.0 | 6.1 | -56.9\% |  |  |
| Financial loss | 1.4 | 1.2 | -16.0\% |  |  |
| Profit before tax | 243.9 | 184.6 | -24.3\% | 228.0 | 81.0\% |
| Profit for the period | 178.8 | 142.6 | -20.2\% | 180.0 | 79.2\% |
| EPS (yen) | 84.38 | 69.84 | -17.2\% | 88.44 | 79.0\% |
|  |  |  |  |  | Kastellas |

## CASH FLOW ANALYSIS

Cash flows from operating activities increased by 16\% (YoY) Implemented active business investment and flexible shareholder return


XTANDI, OAB franchise increase on a global basis

| (billion yen) | Q3/FY16 | Q3/FY17 | Change | CER growth |
| :---: | :---: | :---: | :---: | :---: |
| Oncology | 232.3 | 260.8 | +12.3\% | +6.2\% |
| XTANDI | 189.2 | 219.9 | +16.2\% | +9.9\% |
| OAB in Urology | 160.9 | 171.6 | +6.6\% | +2.1\% |
| Vesicare | 89.3 | 78.5 | -12.1\% | -16.0\% |
| Betanis/Myrbetriq/BETMIGA | 71.6 | 93.1 | +30.0\% | +24.7\% |
| Transplantation | 142.2 | 150.2 | +5.6\% | +0.2\% |

## Q3/FY2017 Financial Results

Initiatives to Build Resilience for Sustainable Growth

III Profit Distribution Policy

New products will drive mid-term growth;
Sustainable growth will be reinforced by continuous selective investment in innovation and strengthening of the business foundation

> Maximizing the Product Value

Creating Innovation
Enhancing Capabilities to Deliver Innovative Medicines

Advancing into New Opportunities

Explore and capture external business opportunities through acquisition, collaboration and in-licensing


# MAXIMIZE THE PRODUCT VALUE 

Record-high quarterly sales in each region

## Sales by region

219.9 (+16\%)


## Quarterly sales (local currency)



- Further penetration in earlier treatment within current indications
- Expansion to new markets: launched in >70 countries


## OAB FRANCHISE IN UROLOGY

Betanis/Myrbetriq/BETMIGA growth enhances OAB Franchise

Sales by product
(billion yen)


Sales composition ratio by product (yen basis)


- The market share of Betanis/Myrbetriq/BETMIGA continuously increased


# CREATE INNOVATION 

pipeline

## Evaluating ~30 new molecular/biological entities as potential drivers of future growth

Phase 1
AGS67E
AGS62P1
ASP8374/PTZ-201
ASP7713
MA-0217
ASP0892
ASP1807/CC8464
ASP6981
MA-0211

| Phase 2 |
| :--- |
| enfortumab vedotin (ASG- |
| 22ME) (Urothelial cancer) |
| AGS-16C3F (Renal cell carcinoma) |
| YM311/FG-2216 <br> (Renal anemia) | | ASP8232 (Diabetic kidney disease) |
| :--- |
| ASP6294 (BPS/IC) |



BPS/IC: Bladder pain syndrome/Interstitial cystitis, rFSGS: Recurrence of focal segmental glomerulosclerosis, MR-VMS: Menopause-related vasomotor symptoms, CIAS: Cognitive impairment associated with schizophrenia, SMA: Spinal muscular atrophy, COPD: Chronic obstructive pulmonary disease, ALS: Amyotrophic lateral sclerosis, AMD: Age-related macular degeneration, MO CRPC: Non-metastatic castration-resistant prostate cancer, M0 BCR: Non-metastatic biochemical recurrence, M1 HSPC: Metastatic hormone sensitive prostate cancer, AML: Acute myeloid leukemia, NDO: Neurogenic detrusor overactivity, CKD: Chronic kidney disease CMV: Cytomegalovirus,HCT: Hematopoietic cell transplant

## STEADY PROGRESS IN DEVELOPMENT

## Steady progression of pipeline



```
Discontinuation
    (in a part of
indications) etc.
enzalutamide: Hepatocellular carcinoma (P2)
ASP7962: Osteoarthristis (P2)
ASP7398: Nocturia (P1)
ASP6282: Underactive bladder (P1)
```

Note: Phase 1 entry is defined as confirmation of IND open. Phase transition is defined by approval of company decision body for entering to next clinical phase. Filing is defined as submission of application to health authorities. Discontinuation is defined by the decision of company decision body.

## ENZALUTAMIDE: MAXIMIZE THE VALUE FOR PROSTATE CANCER PATIENTS

Application for marketing approval submitted to FDA and EMA for M0 CRPC. PROSPER study data will be presented at ASCO-GU 2018


[^1]
## GILTERITINIB: TREATMENT LANDSCAPE IN AML

European Commission granted orphan designation to gilteritinib for the treatment of acute myeloid leukemia (AML)


AML: Acute myeloid leukemia, HSCT: Hematopioetic Stem Cell Transplant, BMT-CTN: Blood and Marrow Transplant - Clinical Trial Network ITD: Internal tandem duplication, ASH: American Society of Hematology

## GILTERITINIB: PHASE 1 STUDY IN NEWLY DIAGNOSED AML

Encouraging data from on-going Phase 1 study in the FLT3 mutation positive, newly diagnosed AML patients was presented at ASH2017

## Study design:

- Multicenter, open-label, 3+3 design
- Dose-escalation cohorts: 40, 80,120 mg/day

*Gilteritinib was initially administered on Days 1-14, but the schedule was later changed to administration on Days 4-17 due to DLTs in the $40 \mathrm{mg} /$ day dose cohort.


## Conclusion:

- Preliminary results suggest that gilteritinib can be safely combined with intensive induction chemotherapy
- All evaluable FLT3Mut+ patients achieved CRc with gilteritinib in combination with intensive frontline chemotherapy

| Response Parameter*, n (\%) | $\begin{aligned} & \text { FLT3Mut+ }{ }^{\text {Mut }} \\ & (\mathrm{n}=21)^{\dagger} \end{aligned}$ | FLT3 $^{\text {WT }}(\mathrm{n}=23)^{\dagger}$ |
| :---: | :---: | :---: |
| CR | 19 (90.5) | 9 (39.1) |
| CRp | 1 (4.8) | 0 |
| CRi | 1 (4.8) | 5 (21.7) |
| PR | 0 | 3 (13.0) |
| CRc ${ }^{\ddagger}$ | 21 (100) | 14 (60.9) |

*Response parameters were defined according to the International Working Group Criteria for AML (Cheson B, et al. J Clin Oncol. 2003;12(24):4642-4649).
${ }^{\dagger}$ Two patients were excluded from the response analysis population: one patient was excluded due to favorable cytogenetic status and one patient was excluded due to refusal to undergo a bone marrow biopsy and withdrawal of consent.
${ }^{\ddagger} \mathrm{CRc}$ included patients who achieved CR, CRp, and CRi.

ASH: American Society of Hematology, q12h: every 12 hours, DLT: Dose limiting toxicity, CR: complete remission, CRp: complete remission with incomplete platelet recovery, CRi: complete remission with incomplete hematologic recovery, CRc: composite complete remission, PR: partial remission, FLT3: fms-like tyrosine kinase 3, Mut+: mutation-positive, WT: wild-type.

Global Phase 3 studies to support global registration for first-line gastric and gastroesophageal junction adenocarcinoma indication

## Phase 3:Combination with mFOLFOX6

## Study design:

- multicenter, double-blind, randomized
- vs placebo, combination with mFOLFOX6


## Patient population:

- CLDN18.2-positive, HER2-negative, metastatic adenocarcinomas of the stomach or the gastroesophageal junction

Planned enrollment: approx. 550 patients
Primary endpoint: Progression free survival
Secondary endpoint (key): Overall survival
Study region: global (US, EU, JP, Asia, etc)

Phase 3: Combination with CAPOX

## Study design:

- multicenter, double-blind, randomized
- vs placebo, combination with CAPOX


## Patient population:

- CLDN18.2-positive, HER2-negative, metastatic adenocarcinomas of the stomach or the gastroesophageal junction

Planned enrollment: approx. 420 patients
Primary endpoint: Progression free survival
Secondary endpoint (key): Overall survival
Study region: global (US, EU, JP, Asia, etc)

Steady progress of Phase 3 program in dialysis and non-dialysis patients

|  | Dialysis | Non-dialysis |  |
| :---: | :---: | :---: | :---: |
| Global | HIMALAYAS: FibroGen Incident dialysis, vs epoetin alfa | DOLOMITES, vs darbepoetin Enrollment completed | \# astellas |
|  | SIERRAS: FIBROGEN <br> Stable dialysis, vs epoetin alfa  | ALPS, vs placebo <br> Study completed <br> Data readout planned in 1Q/2018 | \# astellas |
|  | PYRENEES: <br> Stable dialysis, vs epoetin alfa or darbepoetin Enrollment completed | ANDES, vs placebo Enrollment completed | FibroGen |
| Japan <br> astellas | HD: Conversion, vs darbepoetin Enrollment completed | Conversion, vs darbepoetin |  |
|  | HD: Conversion, long-term Study completed <br> Data readout planned in 1Q/2018 |  |  |
|  | HD: Correction (ESA-naïve) <br> Study completed <br> Data readout planned in 1Q/2018 | Correction |  |
|  | PD: <br> Study completed <br> TLR obtained in Oct/2017 |  |  |

## Important milestones from POC through registration


*Light gray items indicate completed events.
MTX-IR:Methotrexate inadequate response, RA: Rheumatoid arthritis, DMARD-IR: Disease-modifying antirheumatic drugs inadequate response, BP-D: Depressive symptoms associated with bipolar disorder, NDO: Neurogenic detrusor overactivity

Future growth driven by compounds that already have achieved POC

| enzalutamide <br> (MO CRPC) |
| :--- |
| solifenacin/ |
| mirabegron |
| (Combination therapy) |


| gilteritinib |
| :--- |
| enzalutamide <br> (label expansion) |
| enfortumab <br> vedotin |
| IMAB362 |
| roxadustat |
| ASP0113 |
| peficitinib |
| fezolinetant |
| Mid-term <br> growth drivers <br> (FY2018-) |

# \| CREATE INNOVATION <br> NEW INITIATIVES 

## BIOLOGY: ACQUISITION OF MITOBRIDGE

Reinforce the discovery and development of novel drugs that target Mitochondrial functions

## Programs:

MA-0211

- Phase 1 ongoing for duchenne muscular dystrophy

MA-0217

- Phase 1 ongoing for acute kidney injury

Several other INDs expected in the next few years

## Transaction Summary:

Up-front payment
USD 225 million*
Earn-outs
Up to USD 225 million*, depending on the progress of various programs in clinical development

Approaches to mitochondrial function

*As Astellas is a shareholder in Mitobridge, the followings are actual payment to Mitobridge shareholders; Up-front payment: \$161.7 million, Earn-outs: $\$ 165.5$ million

## CREATE SOCIAL VALUE： INITIATIVES FOR ACCESS TO HEALTH

Resolve social issues and enhance our enterprise value over the long－term


Moving NCD Care Forward
Participation in Access Accelerated

## GHIT Fund

Global Health Innovative Technology Fund
GHIT Fund replenishment

東京大学
矢科学研究所
3／a，the instirte of medical science
OM THE NNIIERSITYO F TOKKO
Collaborative development agreement for rice－based oral vaccine

## Action on Fistula

Support of Action on Fistula

## 〇 tb AlLIANCE

Collaborative research agreement to discover anti－tuberculosis drugs

## ммV ООО：

Medicines for Malaria Venture
Screening collaboration agreement to discover antimalarial drugs

## Recent activities

－Collaborative research agreement aiming at the practical application of the rice－based oral vaccine＂MucoRice＂

Designated as a project under CiCLE and supported by AMED
CHIBA
UNIVERSITY
发朝日工業社

[^2]
## | PURSUE OPERATIONAL EXCELLENCE

## INITIATIVES TO CONTINUOUS STRENGTHENING OF MANAGEMENT FOUNDATION

Resource allocation from scratch responding to environment changes

## Investment priority

- Investment in growth areas and withdrawal from nongrowth areas
- Sufficient investment to deal with new risks


## Capability, organization / structure

- Optimization of organization / structure
- Identify core capabilities and form strategic partnerships


## Cost structure

- Cost reduction through strategic procurement activities
- Further focus on appropriate expenses use


## Initiatives in FY2017

$\checkmark$ Transfer of long-listed products
$\checkmark$ Enhancement of global management structure
$\checkmark$ Pursuing strategic outsourcing
$\checkmark$ Wind-down of Agensys research operations

[^3]AGENDA

Q3/FY2017 Financial Results

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III Profit Distribution Policy

## PROFIT DISTRIBUTION POLICY

Top priority on investment for growth business
Dividends to be increased continuously based on mid-and long-term growth
Share buybacks to be implemented in a flexible manner


[^4]
## REALIZE SUSTAINABLE GROWTH

Turn innovative science into value for patients on the forefront of healthcare change


April 26, 2018:

May 22, 2018: New Strategic Plan

## APPENDIX

## Q3/FY2017: SALES BY REGION

|  | Q3/FY16 | Q3/FY17 | Change |
| :--- | ---: | ---: | ---: |
| Japan (billion yen) | $\mathbf{3 8 0 . 1}$ | 337.3 | $-11.3 \%$ |
| of sales in Japanese market | 358.2 | 309.0 | $-13.7 \%$ |
| Americas (million USD) | $\mathbf{2 , 8 8 9}$ | $\mathbf{2 , 9 2 6}$ | $+1.3 \%$ |
| EMEA (million EUR) | $\mathbf{2 , 1 4 3}$ | $\mathbf{2 , 0 2 3}$ | $-5.6 \%$ |
| Asia/Oceania (billion yen) | $\mathbf{6 4 . 5}$ | $\mathbf{7 5 . 3}$ | $+16.8 \%$ |

FX RATE (ACTUAL)

Average rate for the period
(yen)

| Currency | Q3/FY16 | Q3/FY17 | Change |
| :--- | :--- | :--- | :--- |
| USD | 107 | 112 | +5 |
| EUR | 118 | 129 | +11 |

Change in closing rate from PY end

| Currency | Q3/FY16 | Q3/FY17 |
| :--- | ---: | ---: |
| USD | +4 | +1 |
| EUR | -5 | +15 |
|  |  |  |

## FY2017 FCST:FX SENSITIVITY

Forecast rates from October 2017 onwards:
110 USD/yen, 130EUR/yen
Estimated Fx sensitivity (October 2017 and onward) of FY2017 forecasts by 1 yen appreciation*

| appre |  |  |  |
| :---: | :---: | :---: | :---: |
| Currency | Average rate <br> 1 yen higher than assumption |  | Year-end rate 1 yen higher than assumption |
|  | Net sales | Core OP | Core OP |
| USD | Approx. -2.4 bil yen | Approx. -0.6 bil yen | Approx. +0.6 bil yen |
| EUR | Approx. -1.3 bil yen | Approx. -0.5 bil yen | Approx. +0.3 bil yen |

[^5]| (billion yen) | FY2016 end | Dec. 2017 |
| :--- | ---: | ---: |
| Total assets | $1,814.1$ | $1,933.8$ |
| Cash and cash equivalents | 340.9 | 331.7 |
| Total net assets | $1,271.8$ | $1,366.9$ |
| Equity ratio (\%) | $70.1 \%$ | $70.7 \%$ |


| (billion yen) | Q3/FY16 | Q3/FY17 | FY2016 |
| :--- | ---: | ---: | ---: |
| Cash flows from operating activities | 186.4 | 215.3 | 235.6 |
| Cash flows from investing activities | $(70.8)$ | $(93.8)$ | $(73.4)$ |
| Free cash flows | 115.6 | 121.5 | 162.2 |
| Cash flows from financing activities | $(120.2)$ | $(143.1)$ | $(166.2)$ |
| Acquisition of treasury shares | $(46.7)$ | $(70.7)$ | $(92.2)$ |
| Dividends paid | $(70.1)$ | $(71.6)$ | $(70.1)$ |


|  | FY2015 | FY2016 | FY2017 <br> (forecast) |
| :---: | :---: | :---: | :---: |
| EPS (yen) | 89.75 | 103.69 | 88.44 |
| Divided per share (yen) | 32 | 34 | 36 (forecast) |
| ROE | 15.0\% | 17.3\% | - |
| DOE | 5.4\% | 5.6\% | - |
| Share buyback | 68 million shares 119.3 billion yen | 60 million shares 91.4 billion yen | Implemented in a flexible manner 49 million shares 70.0 billion yen (in Jul. - Oct.) |
| Treasury stock cancellation | 38 million shares | 68 million shares | 85 million shares |

# ON THE FOREFRONT OF HEALTHCARE CHANGE 


[^0]:    *Fx impacts excluded from each item

[^1]:    P. Mulders et al. EAU2012, modified by Astellas * Radiotherapy, prostatectomy, ** Metastatic at the time of diagnosis

    PSA: Prostate-specific antigen, ASCO-GU: American Society of Clinical Oncology, Genitourinary

[^2]:    CiCLE：Cyclic Innovation for Clinical Empowerment）
    AMED：Japan Agency for Medical Research and Development

[^3]:    $\qquad$

[^4]:    *The Company conducted a stock split of common stock at a ratio of 5 for 1 with an effective date of April 1, 2014, Figures are calculated based on the number
    of shares issued after the stock split (excluding treasury shares) on the assumption that the stock split was conducted at the beginning of fiscal 2005.
    **From fiscal 2013, figures are in accordance with International Financial Reporting Standards (IFRS).

[^5]:    *Sensitivity to fluctuation of Fx rates used for consolidation of overseas affiliates' results compared to forecasted rates from October 2017 and onwards

