

A YEAR IN BRIEF



2020

“Roche has faced and weathered many challenges in its nearly 125 years. The solidarity and community we experience now in the fight against COVID-19 will significantly increase our collaboration, and there is no doubt that we will come out of this even stronger.”

Severin Schwan, CEO Roche Group



See video about
Roche in 2020



Doing now what patients need next

We believe it's urgent to deliver medical solutions right now—even as we develop innovations for the future. We are passionate about transforming patients' lives. We are courageous in both decision and action. And we believe that good business means a better world.

That is why we come to work each day. We commit ourselves to scientific rigour, unassailable ethics, and access to medical innovations for all. We do this today to build a better tomorrow.

We are proud of who we are, what we do, and how we do it. We are many, working as one across functions, across companies, and across the world.

We are Roche.

#StrongerTogether



A RELIABLE PARTNER DURING THE CORONA PANDEMIC

Responding to the pandemic

The reports began to appear, somewhat quietly, in early 2020. But very soon, the alarm began to ring loudly. A virus called SARS-CoV-2 was suddenly dominating the headlines and threatening lives around the world. Roche quickly realised the company had a new mission and a substantial list of vital undertakings:

- Developing new diagnostics tools
- Determining if any existing medicines could combat the infection or ease its symptoms
- Developing entirely new medicines to treat the virus
- Joining forces with governments, competitors, and other organisations to accelerate progress
- Securing employee safety while maintaining business continuity to ensure supplies of tests and medicines reached patients in need.



Michaela Hart: “It doesn’t get any closer to home than this.”

Nearly three years ago, Roche employee Michaela Hart’s daughter Nikki was diagnosed with a significant illness. But in March 2020, after Nikki’s latest hospital visit for treatment, something seemed off in a new, and very different way.

“It was Friday the 13th,” explains Michaela, Vice President of Quality Systems and Compliance at Roche Diagnostics in Pleasanton, California. “Nikki started feeling sick. She had just been discharged from the hospital yet again, so it could have

been a result of her ongoing treatments. But at this point, we had to face a new possibility: Could it be COVID-19?”

When Nikki became too sick to continue her education at the University of California, Berkeley, the family toyed with the idea of moving her home. But, in hopes that Nikki would soon return to school, they kept Nikki’s off-campus apartment. Their goal was to keep everything as normal as possible, and hope for the best.

“But she started feeling really sick, and not in the usual ways,” Michaela explains. “As hard as it was, I said to her, ‘because this could be COVID-19, you’d better self-isolate in your apartment. If I get sick, I can’t take care of you.’”

After a few weeks of waiting and several phone calls, she received a positive COVID-19 test result. Nikki consulted with her doctors using telemedicine, and travelling healthcare workers came to check her vitals and administer treatments (including intravenous fluids) through her partially opened apartment door. Nikki’s main concern, Michaela says, was to not infect others.

After recovering from COVID-19 she is enjoying life again and spending time on her favourite outdoor activities.

Urgent search for new treatment options

The complete genome sequence of SARS-CoV-2 was determined and made public in January 2020, almost immediately after the initial outbreak. Sequence availability provides a vital blueprint to develop new tests to diagnose the virus, and drugs to fight it.

Early on in the pandemic, Roche initiated internal research programmes to develop SARS-CoV-2 tests and to discover potential drugs that combat the virus. Roche also established an internal review team to rapidly evaluate a large number of potential partnering opportunities.

One of our efforts is a global partnership with Regeneron to collaborate on the development, manufacturing and distribution of their investigational COVID-19 antibody combination of casirivimab and imdevimab.

This antibody combination, currently in adaptive studies, targets specifically against SARS-CoV-2. It consists of two non-competing, virus-neutralising antibodies, casirivimab and imdevimab. In November 2020, the US Food and Drug Administration (FDA) granted an

Emergency Use Authorization (EUA) for casirivimab and imdevimab.

As part of the global Regeneron partnership, we are committing a significant amount of manufacturing capacity, and are working to expand supply of this antibody combination beyond the US to as many people as possible.

In October 2020, a partnership with Atea Pharmaceuticals, Inc. was announced to develop, manufacture and distribute AT-527, Atea’s investigational oral direct-acting antiviral, to people around the globe.



See more about
Nikki’s story

Swift development of SARS-CoV-2 test solutions

Across all Roche Diagnostics manufacturing and distribution sites, rapid response teams worked around the clock to produce and deliver commercial tests to detect the novel coronavirus. In March, our PCR-based cobas SARS-CoV-2 test received FDA EUA, the first in what would become a comprehensive portfolio of 15 diagnostics solutions to help combat the pandemic.

Tremendous personal commitment, effort and cross-functional collaboration made it possible to develop, produce and

distribute this first test within weeks. Since approval, millions of tests have been delivered globally, in accordance with our allocation strategy of providing tests where they are most needed and where they can be most effective.

To provide millions of tests per month for our high-throughput cobas 6800/8800 systems, Roche Molecular Systems teams in Branchburg worked around the clock. Multiple task forces were created to maximise production capacity while maintaining the health and safety of manufacturing personnel. In addition, we continued to supply reagents and consumables for SARS-CoV-2 testing to laboratories for use on our MagNA Pure and LightCycler systems. Over the course of the year, production output for PCR tests was increased four-fold.

The PCR test was soon followed by the launch of our Elecsys Anti-SARS-CoV-2 antibody test, which received an FDA EUA in May. This serology test is designed to help accurately assess prior infection with SARS-CoV-2 and determine if a patient has developed antibodies against the virus. This information is essential for epidemiologic studies, ongoing surveillance and vaccine studies. We quickly ramped up production capacity to high double-digit millions per month to serve healthcare systems in the US and in countries accepting the CE mark.



Scaling up production of medicines

Producing biologics is complicated and time-consuming under the best circumstances. Most biologics are based on very large, complex proteins produced by cells. Because the cells are living, each one needs careful tending, a sterile environment, and constant monitoring, all with strict documentation under government regulatory rules.

In March, Roche expert teams around the world were ramping up, with the goal of supplying needed medicines for those who rely on them, and making as much medicine as possible for those who might need it later on.

In the same month, a request came in to the team at the Genentech 'fill and finish' facility in Hillsboro, Oregon, where liquid biologic medicines are transferred from large batches into smaller vials, then labelled, packed and prepared for shipping across the globe.

They were asked to conduct an inter-company technology transfer—the precise process of transferring skill, knowledge, technologies and methods for producing specific products and processes from one Roche manufacturing site to another. A transfer takes an



incredible amount of planning, attention to detail and close coordination to ensure that the production can be transferred from one site to another in alignment with rigorous parameters, controls and quality systems, all with regulatory approval. But the move was vital to making sure enough medicines would be available for patients.

A technology transfer normally takes 12 to 18 months. The Hillsboro team completed the process in just four weeks, without compromising on quality or safety. The secret to being quick and nimble was giving teams a clear focus, defined goals and the power to make decisions.



See more about
technology transfer

New treatment options

For COVID-19 and other severe diseases: We are developing a broad portfolio of diagnostics solutions and new medicines—within Roche and jointly with a number of partners across the industry.

Diagnostic solutions—backbone of treatment decisions

Reliable testing to contain the spread of the COVID-19 pandemic and to develop effective and safe medicines and vaccines.

In response to this ongoing public health crisis, Roche Diagnostics has drawn on the strength of our global network across multiple sites in an ongoing effort to increase production of our SARS-CoV-2 portfolio. We have made substantial investments in building the additional manufacturing capacity that will enable us to increase production of tests, as well as the instruments on which those tests are performed.

In February of 2020, we began working with the FDA to produce a coronavirus test under EUA guidance. In March, we launched the groundbreaking cobas SARS-CoV-2 test, which is run on the widely available, high-volume cobas 6800/8800 systems. This molecular test received FDA EUA, and is also available in countries accepting the CE mark. Less than two months later, we received FDA EUA for the high-volume Elecsys Anti-SARS-CoV-2 antibody test. This serology (blood) test has a specificity greater than 99.8%, and 100% sensitivity 14 days post-PCR confirmation. The test can help assess a patient's immune response to the virus. We also launched Viewics LabOPS COVID-19 for efficiency improvements in laboratories in May.

In 2020, a total of 15 solutions for SARS-CoV-2 diagnosis were developed in record time, including both molecular and immunodiagnostic solutions for clinical laboratory and point-of-care settings—along with an unparalleled ramp-up of our production capacities.

Changing the standard of care to benefit patients

Apart from SARS-CoV-2 tests, Roche introduced several other important diagnostic advancements for customers and patients in 2020. These include a broader test menu for the cobas 6800/8800 systems. Currently, more than 1,000 of these instruments are in place, and almost twice the number projected for the year were installed in 2020. For use on these systems, several tests were launched in the US, including:

- The cobas Epstein-Barr virus (EBV) and BK virus (BKV) tests, both aimed at transplant patients
- The first test for the qualitative detection of HIV-1 and HIV-2 infections
- The CIntec PLUS Cytology test

"To support the high demand for SARS-CoV-2 testing, we increased production capacity to unparalleled levels. Our allocation strategy ensures that these tests, consumables and systems are made available where they are needed most and can be most effective."

Thomas Schinecker,
CEO Roche Diagnostics



Drug development during the pandemic

Despite the massive disruption of a global pandemic, our commitment to developing new medicines remained unbroken in 2020.

Thanks to a range of innovative approaches, our development efforts became even more effective in 2020 and resulted in seven new molecules moving to pivotal clinical studies in 2020, compared to approximately three per year over the last four years. Our partnering efforts provided access to four late-stage medicines, about four times the average of recent years. In 2020, we were granted authorisations for four new medicines, and we have record number of 19 new medicines in registrational studies or filed for approval.

New medicines for rare diseases of the CNS

Two FDA approvals offer meaningful benefits for patients living with rare disorders of the central nervous system (CNS) which previously had limited treatment options.

Enspryng is the first and only subcutaneous treatment for adults living with neuromyelitis optica spectrum disorder. This condition primarily damages the optic nerve(s) and spinal cord, causing blindness, muscle weakness, and paralysis. It often is misdiagnosed as multiple sclerosis.

Evrysdi was approved for the treatment of spinal muscular atrophy (SMA) in adults and children two months of age and older. Throughout their lives, many people with SMA may lose their ability to perform critical physical movements, such as sitting upright.

Expanding the portfolio of cancer medicines

Gavreto (pralsetinib) received FDA approval for the treatment of adults with metastatic RET-altered non-small cell lung cancer, as detected by an FDA-approved test. This is a once-daily, oral precision therapy.



Phesgo received approvals in the US and the EU for the treatment of early and metastatic HER2-positive breast cancer. This fixed-dose combination of Perjeta and Herceptin with hyaluronidase is administered by subcutaneous injection, and is used in combination with intravenous chemotherapy.

"The ongoing complexities of COVID-19 require multiple lines of defence. By joining forces with other companies we hope to offer additional treatment options for hospitalised and non-hospitalised COVID-19 patients, and to ease the burden on hospitals during a global pandemic."

Bill Anderson,
CEO Roche Pharmaceuticals

PHC—across the care continuum

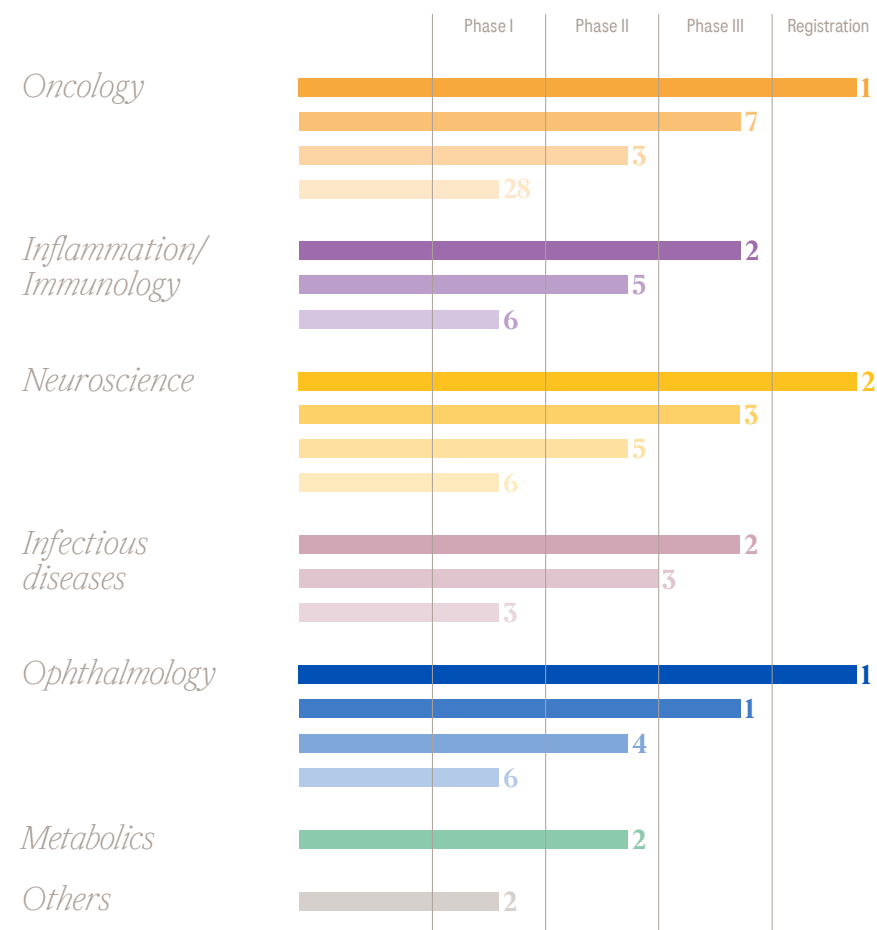
When the availability of personalised care increases, both individual patients and society benefit.

The Roche approach to personalised healthcare (PHC) is rooted in a combination of advanced diagnostics, medicine, data, analytics, and digital technology, all with the goal of serving both patients and society at large. This requires a holistic perspective of the entire healthcare system. Instead of viewing the individual components of the patient care continuum—prevention, diagnosis, treatment and monitoring—separately, Roche approaches them as a comprehensive system of integrated healthcare solutions. Our goal is to reduce complexity and costs while optimising patient and societal outcomes.

Putting the patient at the centre of the care continuum establishes a high bar for scientific research, which is driven by data and technology. When data become insights, systems learn, outcomes improve, and lives benefit.

The use of data and technology for scientific research relies on the trust of patients. We are committed to transparency and integrity in our data privacy practices. And, we work to advance inclusive research around the globe to ensure our scientific insights are truly representative and result in new solutions that address the needs of broad and diverse populations. Furthermore, Roche has invested in new clinical trial designs that generate insights from the real world. These insights improve patient outcomes, as well as the overall care experience.

Pharmaceuticals clinical pipeline



Our pipeline of 92 new molecular entities covers a broad range of diseases, and highly innovative technologies are applied to create and produce the active molecules.



See more about the
Navify Tumor Board

Protecting the environment

Over the years, society has come to expect more from corporations, particularly in the areas of social responsibility and transparency.

Today, stakeholder groups expect corporations to maximise their environmental responsibility throughout their entire supply chain. At Roche, corporate social responsibility, ethical conduct in business, respect for human rights, and a commitment to protecting the environment have been top priorities for many years. For decades, we have firmly believed that environmental responsibility is an integral element of good business behaviour.

Standards for the entire supply chain

As a company with global production operations, Roche is exposed to risks that could possibly damage people, goods, the environment, and its reputation. Our local sites and business areas serve as the first line of control. They are responsible for implementing standards and setting up inspections and corrective and preventive actions. In alignment with our internal standards, we have established performance expectations for our third-party suppliers. To ensure compliance, Roche, or external auditors managed by us, examine the operations of all relevant suppliers and, where necessary, recommend improvements.

Continually minimising our ecological footprint

Roche has been monitoring and actively minimising its environmental impact for many years. We use the concept of 'eco-balance' to measure the ecological footprint resulting from our business activities.¹ Our aim for 2020 was to improve our eco-balance by 6%, as compared to 2019. Both the Covid-19 pandemic as well as our improvements in decreasing energy consumption, air emissions, as well as in reducing the weight of both general and chemical waste, led to a further improvement of approximately 25% in our eco-balance.

For a complete breakdown of our new goals for 2020–2025, please visit our website.²

¹ Developed by the Swiss Federal Office for the Environment; we are compliant with their latest guidelines.

² <https://go.roche.com/r2opd>



At Roche, we aim to maximise efficient energy usage, cut energy consumption, and increase the use of sustainable energy sources, all while continuing to expand its global business. We therefore implement innovative technologies and continuously upgrade our infrastructure to improve energy efficiency.

Access—for everybody—worldwide

The pandemic has proven that it has never been more important, or more urgent, to work closely with external partners to improve access to innovations.

Life-changing innovation in medicine is only meaningful if it reaches those who need it. Our goal is to work in partnership to develop tailored access solutions that create rapid, broad and sustainable access. But there are many reasons why innovations do not reach those who need them. Because our portfolio consists primarily of hospital-administered treatments which often require specialist skills and infrastructure, we truly understand the multidimensional nature of the access challenge. When translating our global strategy to a country level, we make sure we understand the key barriers that may keep patients from benefiting from our innovations. Our access strategy is focused on four key pillars: affordability, capacity, outcomes certainty and value.

We work across the healthcare spectrum—from governments and payers to NGOs, multilaterals, and insurance companies—and we are making significant progress at both local and international levels. Another significant priority for Roche is measuring our impact. In 2020, we joined forces with Boston University to create a Roche Monitoring and Evaluation Framework. This framework provides us with a consistent methodology to evaluate the social and patient impact of our access programmes.

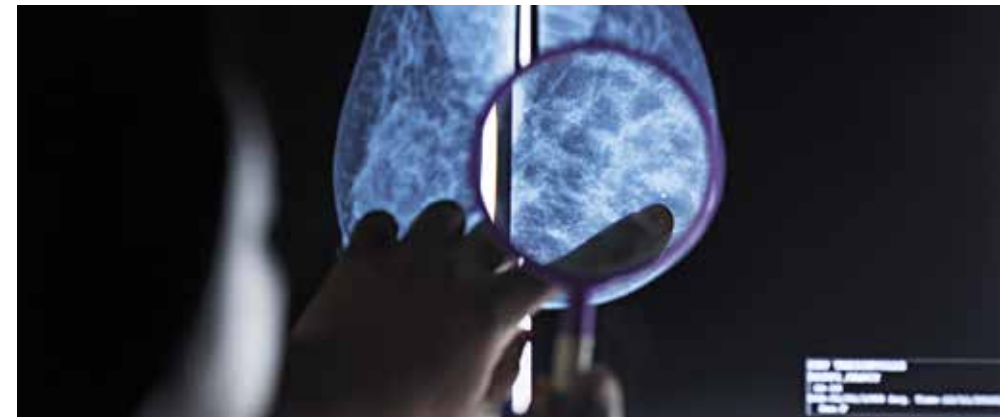
Supporting Universal Health Coverage

Roche is committed to supporting Universal Health Coverage, which means that any patient anywhere can access essential quality health services without facing financial hardship. Our focus includes ensuring access to essential medicines and diagnostics—32 Roche medicines are on the WHO Essential Medicines List and Roche provides more than 90 tests that are on the WHO Essential Diagnostics List.

In 2020, through partnerships with global funders we continued our support of a range of programmes to fight infectious diseases, including:

- HIV/AIDS
- Cervical cancer
- Hepatitis C

We provided innovative laboratory solutions, and worked with donors towards more effective use of resources in order to reach more patients in more places.



Working in collaboration with global partners across the healthcare spectrum has enabled us to increase access to screening, diagnosis, and treatment, while also improving the capacity of local healthcare systems.



See more about cervical cancer

Supporting communities during the pandemic

Roche philanthropy helped communities where we live and work—and beyond—face the COVID-19 crisis.

Prevention first

Roche has been the main external sponsor of South Africa's Phelophepa healthcare trains for over 25 years. We were proud to continue to support this programme, which served as an important element of South Africa's response to the COVID-19 crisis. The trains operate through a partnership between the South African Ministry of Health and Transnet, the country's main freight and logistics company. In addition to our annual sponsorship, Roche made a donation through the Friends of Phelophepa, an employee foundation, to provide personal protective equipment and sanitising equipment to keep the trains' healthcare workers as safe as possible. We also donated masks and hygiene campaign material for the staff to use in their community outreach efforts. As a result, 203,870 people were screened for SARS-CoV-2. In addition, the Phelophepa healthcare staff ran 3,000 mental health workshops to help the communities cope with the mental stress, fear and anxiety stemming from the pandemic.

Emergency appeals

According to the United Nations High Commissioner for Refugees (UNHCR), Kenya is host to the fifth highest number of refugees in Africa, with a refugee population of almost half a million people. When COVID-19 arrived in the region, concern for the safety of these individuals increased considerably. The UNHCR issued a global emergency appeal for funds to protect the refugees. Roche responded with a donation which went to both refugee camps and to urban areas hosting refugees.

Digital and hardship relief for students

For young people studying in developing countries, poor internet bandwidth and limited access to computers make online learning even more challenging. Roche helps meet the needs of hundreds of students around the world through our emerging market scholarship programme. One of our education partners, Fundación Educación, supports



university students in Colombia, El Salvador, Guatemala and Peru. The organisation took on the challenge through a 'digital relief fund' designed to build a technical infrastructure to digitise their education programmes. Roche contributed to this fund, which lends laptops and prepaid mobile cards to ensure students can access their online courses. In addition, we supported a 'hardship relief fund' to support students struggling to cover their basic needs during these difficult times.

Prior to the pandemic, the primary services offered on the trains were optical, dental, wellness and psychology. These services were halted in 2020 in order to focus on stopping the spread of the virus in underserved and rural areas.



See more about the Phelophepa healthcare trains

Key highlights



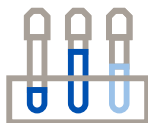
New medicines with strong growth

With CHF 4.7 billion incremental sales, medicines launched since 2012 support business and drive rejuvenation of our product portfolio.



Treating rare diseases

US approvals for Enspryng and Evrysdi to treat two rare diseases of the central nervous system.



New SARS-CoV-2 tests

Broad portfolio of 15 diagnostic solutions for SARS-CoV-2 developed, launched and provided to millions of people across the globe.



Our impact on society

Roche ranked as most sustainable healthcare company in the Dow Jones Sustainability Indices.

Key figures



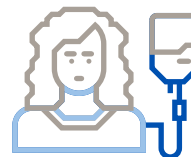
CHF 58.3
billion Group sales (+1%*)

CHF 21.5
billion core operating profit (+4%)

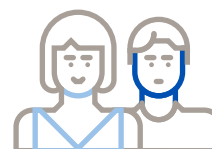
CHF 9.10
dividend



CHF 12.2
billion R&D core investments (+8%)



28,868,306
people worldwide were treated with our medicines



101,465
employees worldwide**

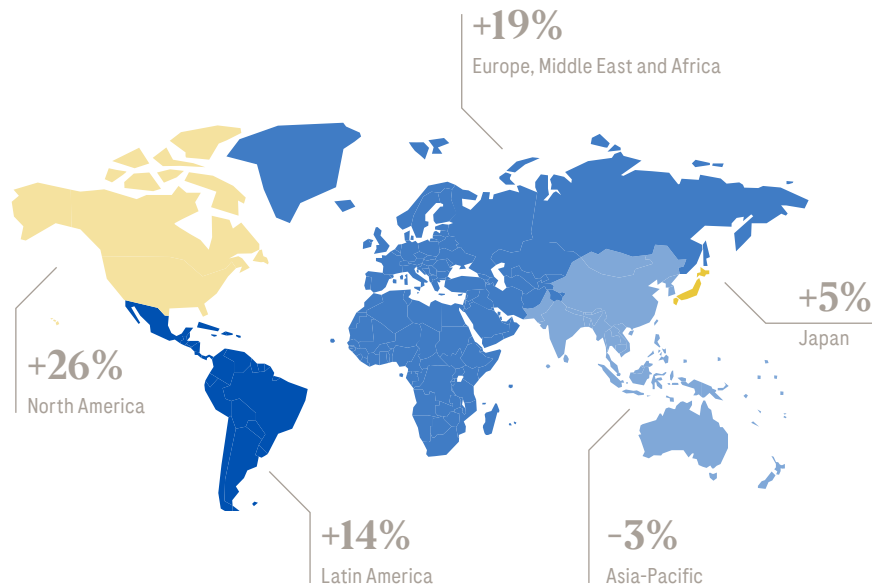
* All growth rates in this report are at constant exchange rates (CER; average 2019).

** Number of employees expressed in full-time equivalents on 31.12.2020

Diagnostics performance

CHF 13,791 million

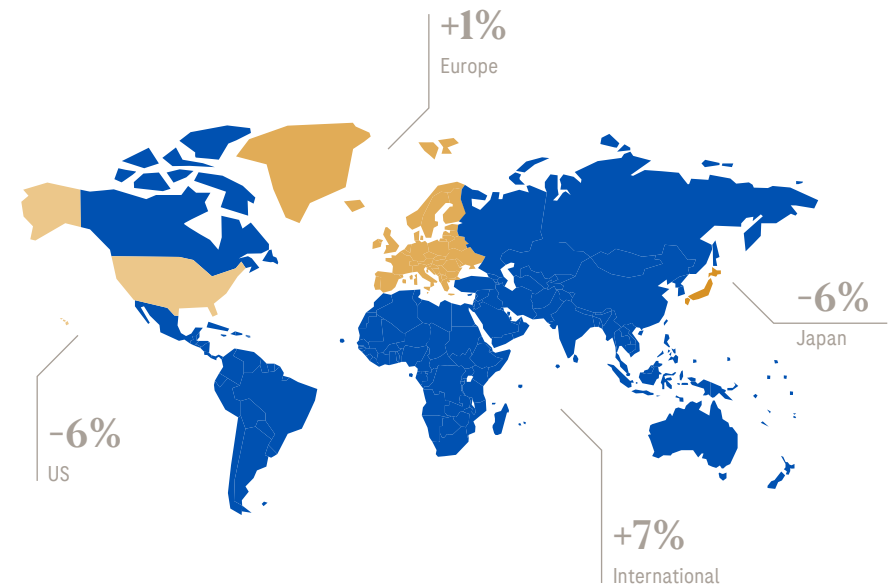
Diagnostics sales +14%*



Pharmaceuticals performance

CHF 44,532 million

Pharmaceuticals sales -2%



Top-selling product portfolios in 2020 (CHF millions)



Key growth drivers in 2020 (CHF millions)



* All growth rates in this report are at constant exchange rates (CER; average 2019).

For more information

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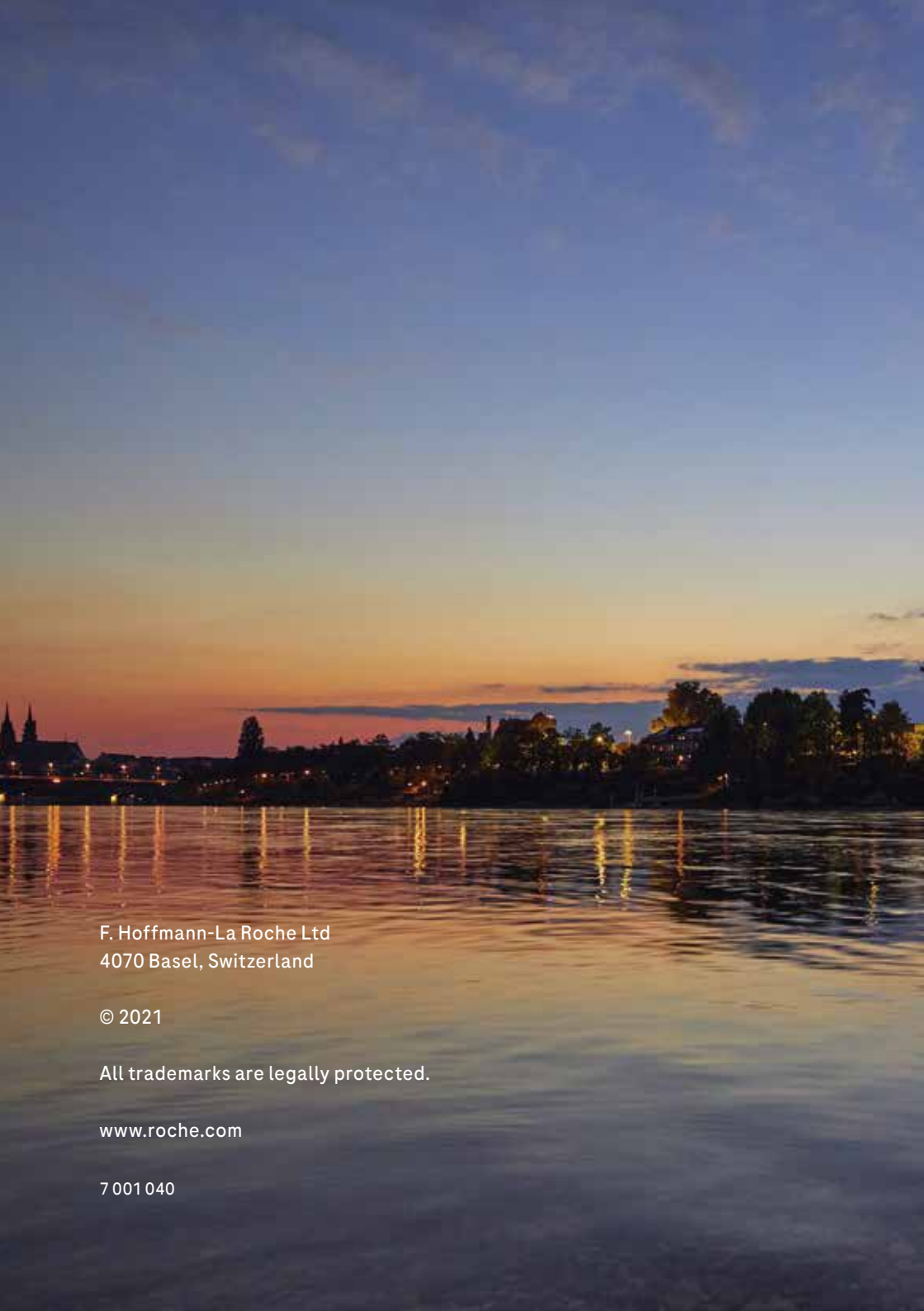
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