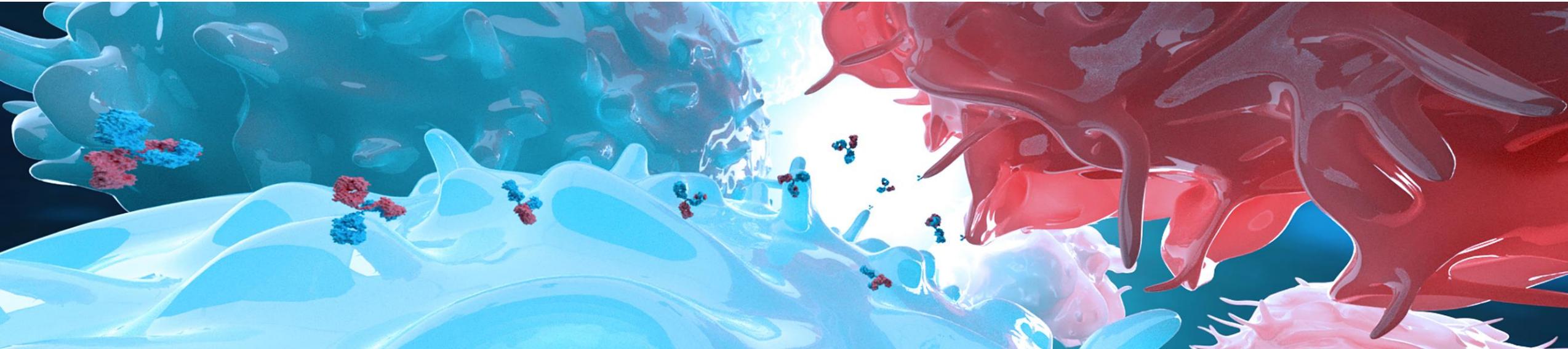


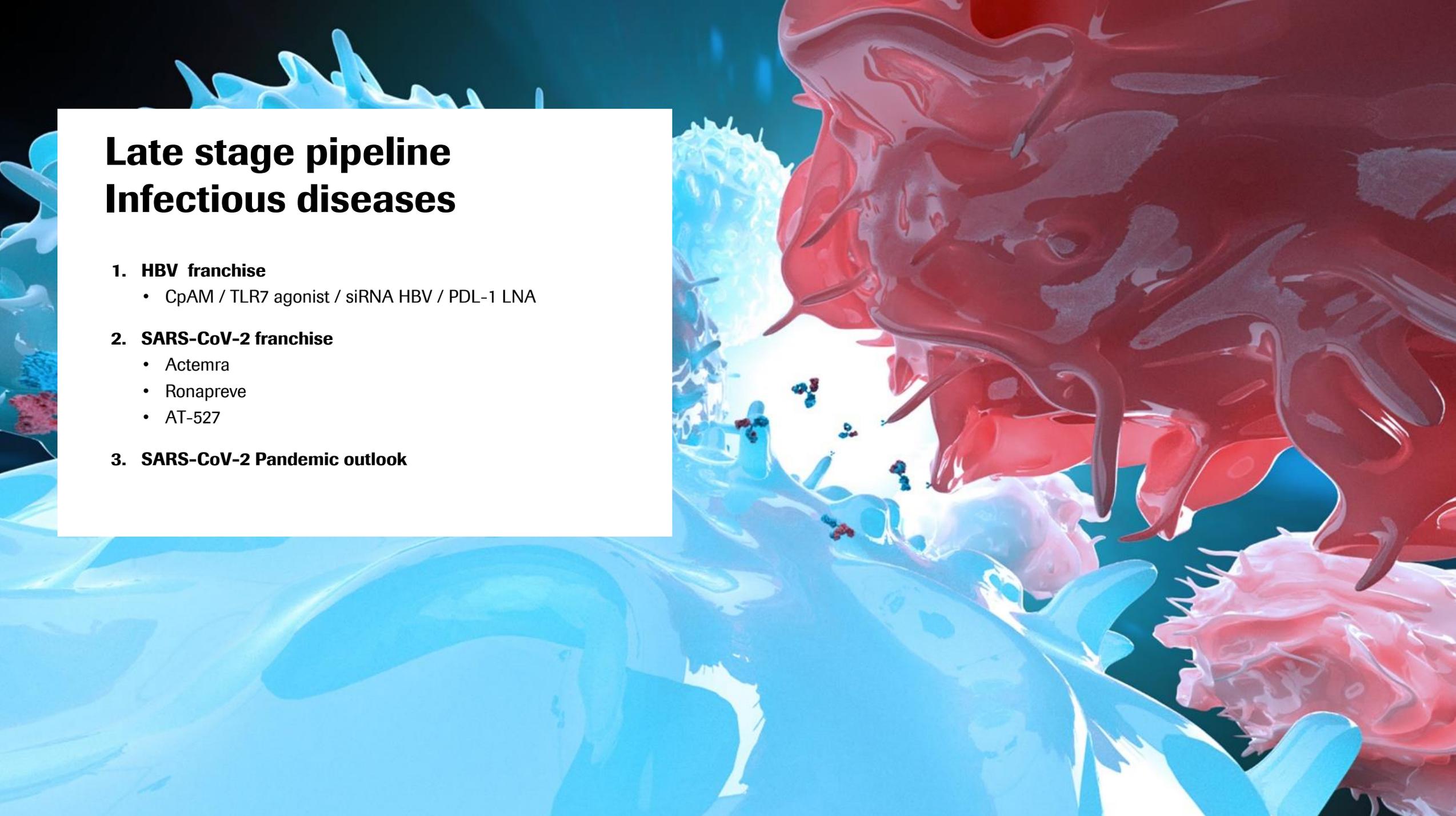
Roche Pharma Day 2021

Late Stage Pipeline Infectious Diseases

Barry Clinch

Global Head of Infectious Diseases, Clinical development





Late stage pipeline Infectious diseases

1. HBV franchise

- CpAM / TLR7 agonist / siRNA HBV / PDL-1 LNA

2. SARS-CoV-2 franchise

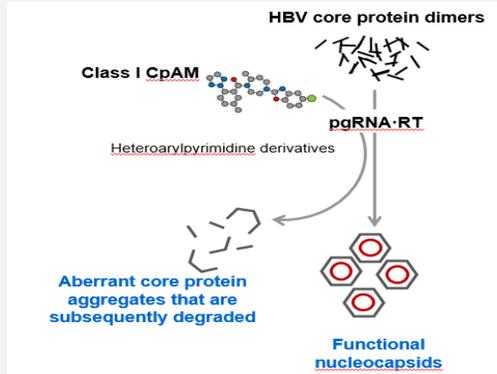
- Actemra
- Ronapreve
- AT-527

3. SARS-CoV-2 Pandemic outlook

Hepatitis B virus: CpAM / TLR7 agonist / HBV siRNA / PDL-1 LNA

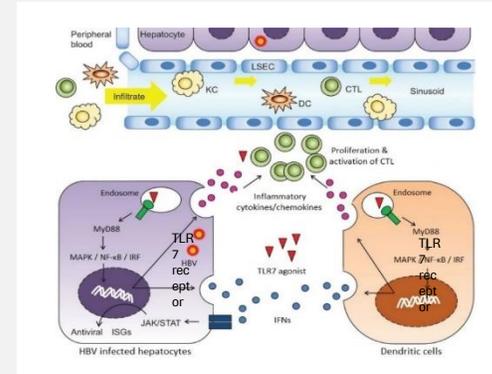
4 new MOAs in clinical development

Core protein allosteric modulator (CpAM)



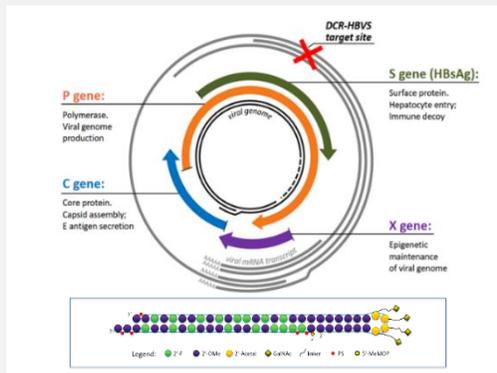
- Effective against all major HBV genotypes
- Showing successful HBsAg reduction in mouse model

Toll like receptor 7 (TLR7) agonist



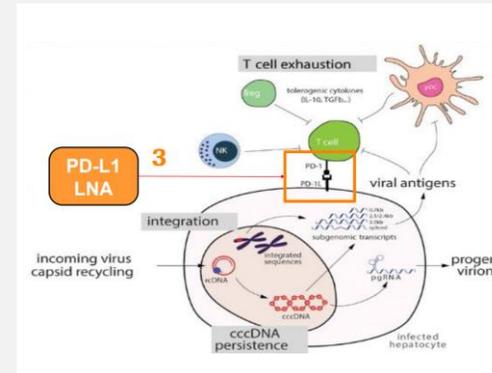
- TLR7 detects single-stranded viral RNA and mediates anti-viral cytokine production and dendritic cell activation
- Unique double pro-drug selectively activated in the liver

siRNA inhibiting multiple HBV genes



- Dicerna proprietary liver-targeted RNAi technology (GalXC™) with unique 'tetraloop' folded design
- Designed to inhibit HBV gene expression by targeting of HBV genome S open reading frame

PDL-1 LNA

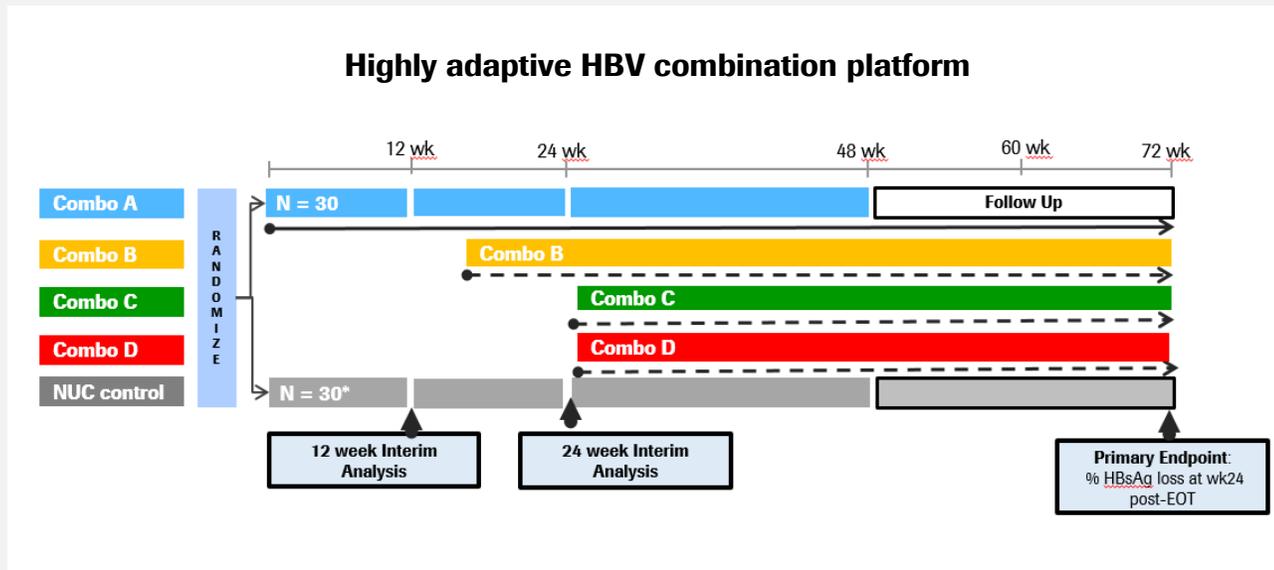


- Inhibition of the PD-L1/PD-1 interaction removes a T cell inhibitory signal
- Liver-directed locked nucleic acid oligonucleotide (RNA) targeting PD-L1 expression on hepatocytes to minimize systemic toxicity

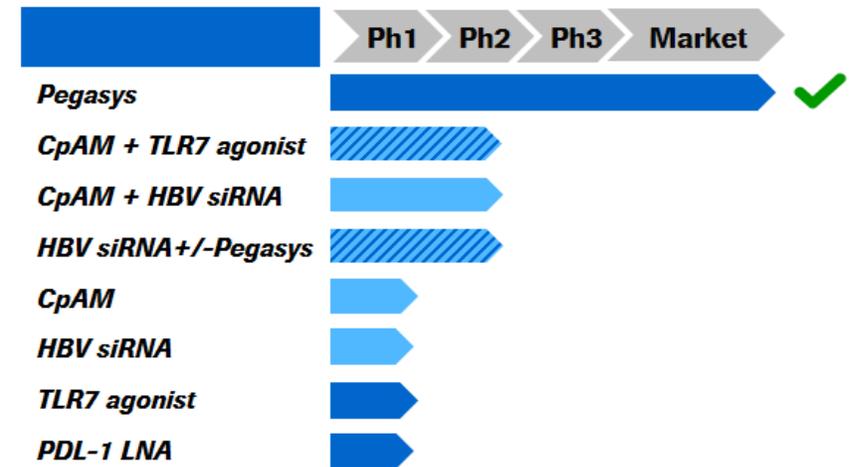
Hepatitis B virus: Combination platform initiated

Multiple combinations now in Ph II testing

Screening drug combinations efficiently



HBV development program progresses

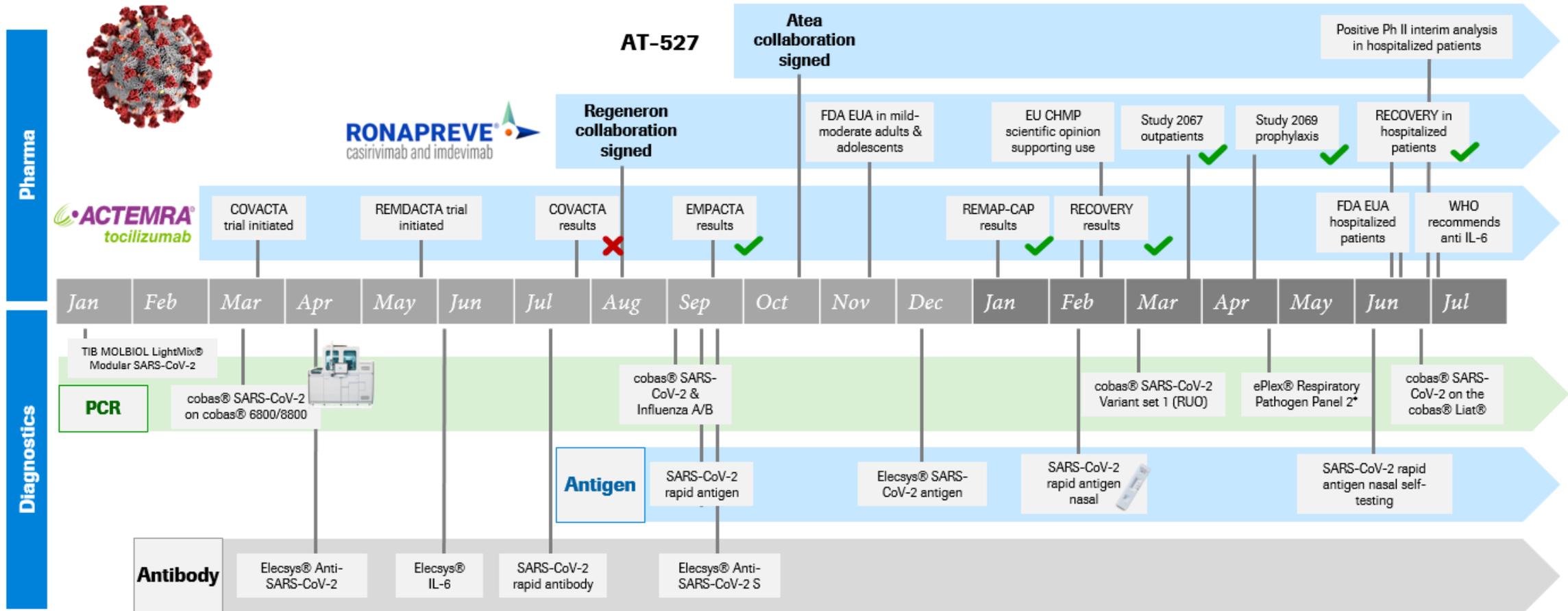


- = anti-viral agent
- = immunomodulator
- = anti-viral+immunomodulator
- = approved

- Adaptive platform for Ph II study with shared control arm
- Designed to find the best combination therapy for HBV cure
- Opportunity to seamlessly add and terminate drug combinations

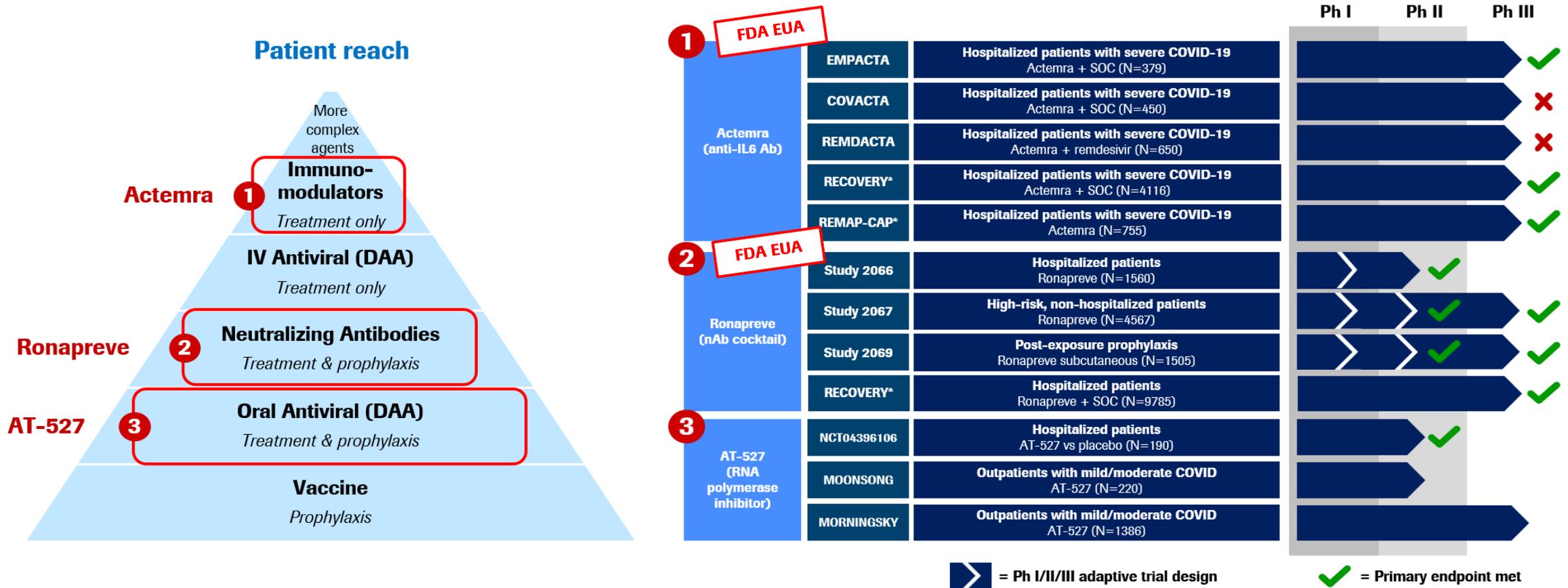
SARS-CoV-2: Our outstanding contribution battling the pandemic

> 1 million hospitalized patients received Roche's treatments



SARS-CoV-2: Broad development program ongoing

Different scientific approaches serving different pandemic needs

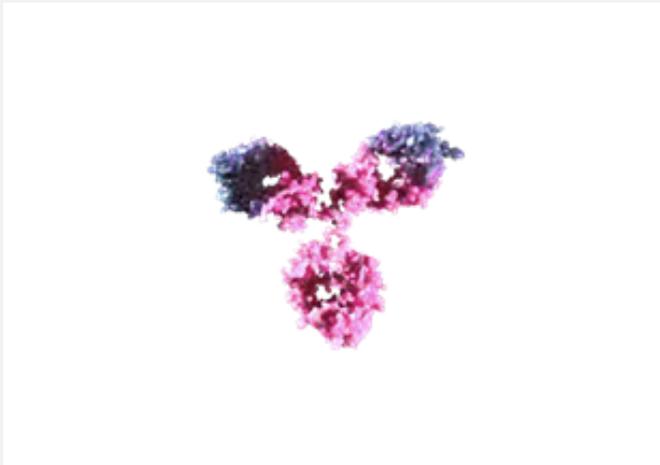


EUA=emergency use authorization; nAb=neutralizing antibodies; DAA=direct acting antiviral; * RECOVERY trial conducted by the University of Oxford; REMAP-CAP trial conducted by the Imperial College London; AT-527 Ph II study in hospitalized patients run by ATEA Pharmaceuticals

SARS-CoV-2: Actemra for severe COVID-19 associated pneumonia

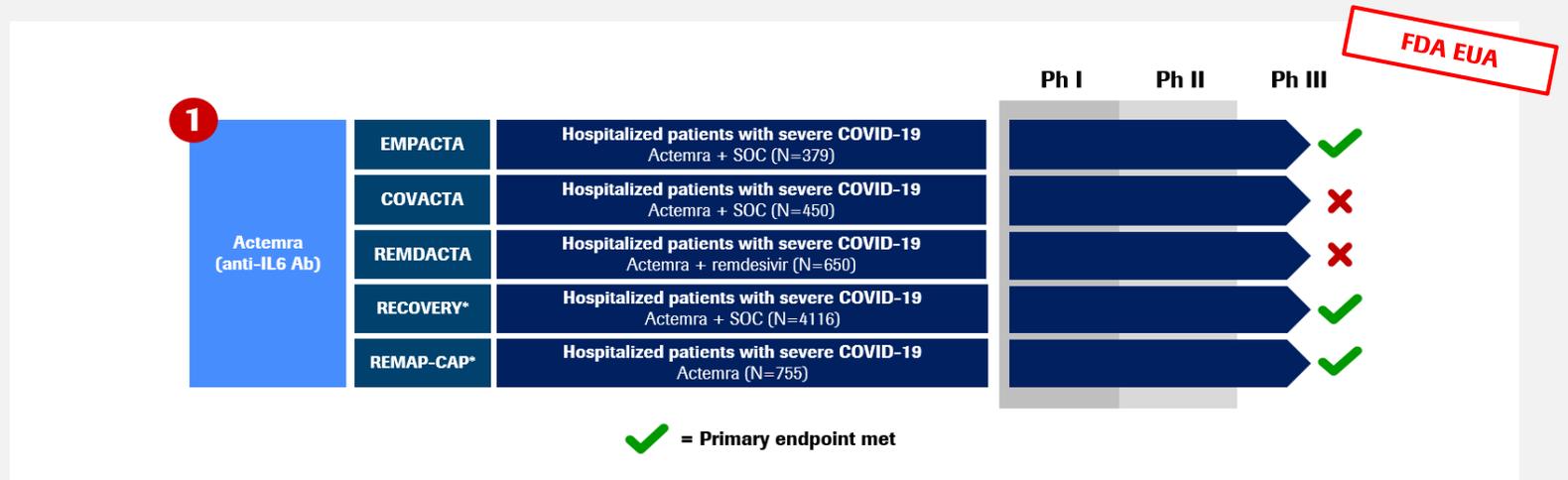
WHO recommends IL-6 inhibitors for hospitalized patients

Anti-IL6 receptor mAb



- Approved in RA, JIA, GCA and for CAR T-cell induced CRS
- As IL-6 plays an important role in SARS-CoV-2 infections and is considered a prognostic marker for disease severity, Roche initiated a Ph III program in hospitalized patients

Totality of randomized Ph IIIs demonstrates efficacy in hospitalized patients

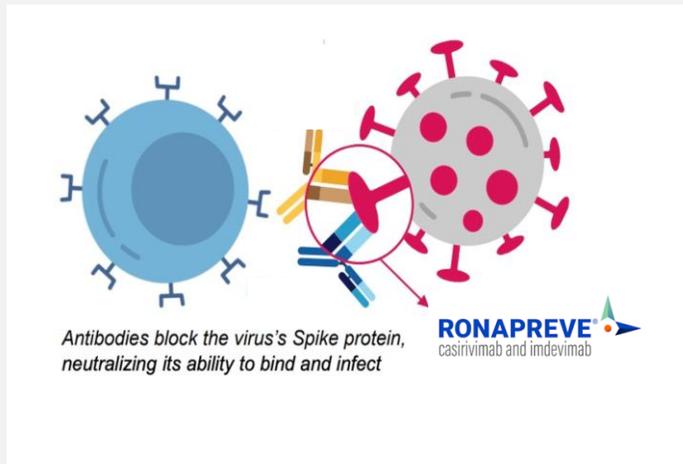


- Ph III (RECOVERY)* results showed that when Actemra is administered to hospitalized COVID-19 patients who received corticosteroids and require supplemental oxygen or breathing support the risk of death is reduced by 14% and enables faster recovery
- Based on a meta-analysis including Actemra in >8,000 hospitalized patients the WHO issued new treatment guidelines, recommending IL-6 inhibitors for severe COVID-19; the analysis showed Actemra to reduce mortality in hospitalized patients receiving corticosteroids

SARS-CoV-2: Ronapreve maintains activity against key variants

Positive data in prophylaxis, non-hospitalized & hospitalized patients

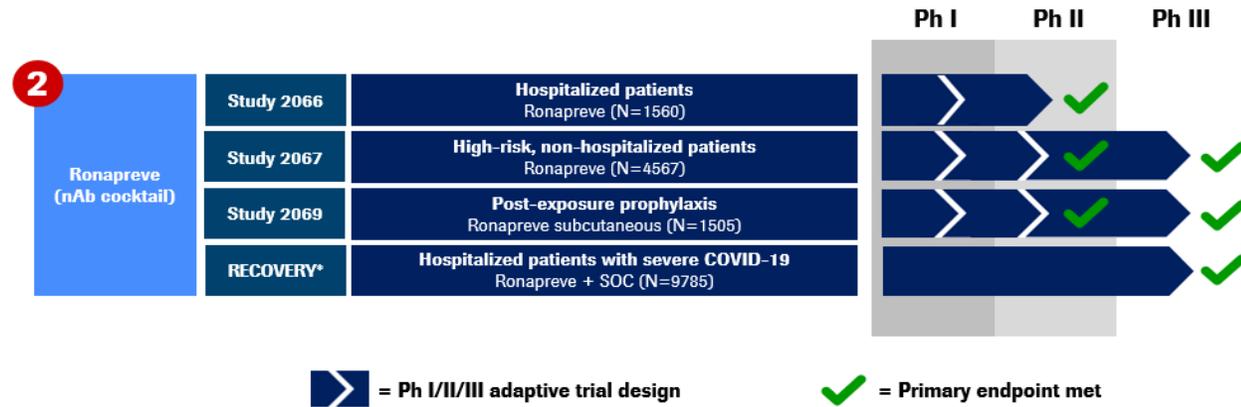
Neutralizing Ab cocktail



- Two potent, virus neutralizing Abs binding non-competitively to the critical receptor binding domain of the virus's spike protein¹
- Multiple simultaneous virus mutations needed to escape the nAb cocktail, which is an unlikely scenario^{2,3}

Extensive trial program with >25.000 patients

FDA EUA
Approval Japan

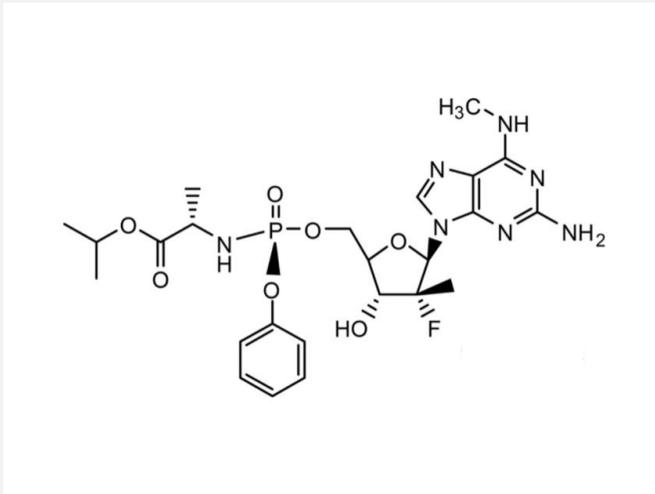


- Ph I-III (Study 2067) results show that Ronapreve reduces the risk of hospitalization or death by 70% for the low dose and by 71% for the high dose
- Ph I-III (Study 2069) results show that a low dose of 1,200 mg SC Ronapreve reduces the risk of symptomatic infections by 81% in those who were not infected when they entered the trial
- Ph III (RECOVERY)* results for Ronapreve show a 20% reduction in the risk of death for patients who do not mount their own antibody response against SARS-CoV-2

SARS-CoV-2: AT-527 for the outpatient setting

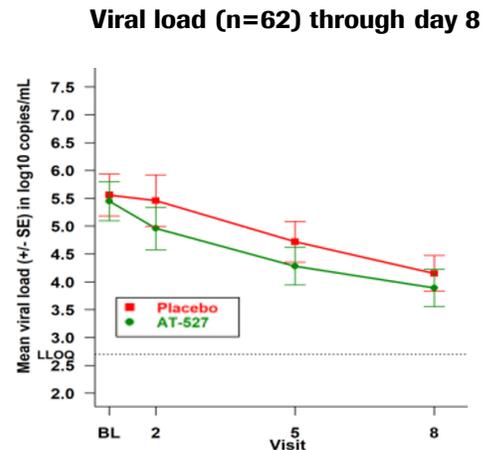
Ph II interim viral load results in hospitalized patients

Purine nucleotide prodrug



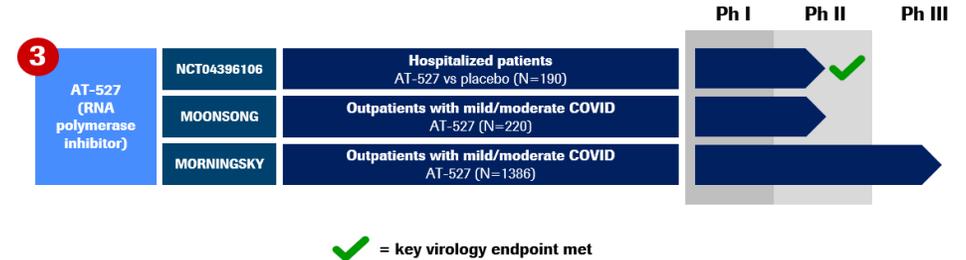
- Oral, direct acting antiviral (DAA)
- Inhibits SARS-CoV-2 viral replication via a unique dual mechanism of action: Inhibits both NiRAN and RdRp, potentially creating a high barrier to resistance
- Generally safe and well tolerated

Ph II interim results*



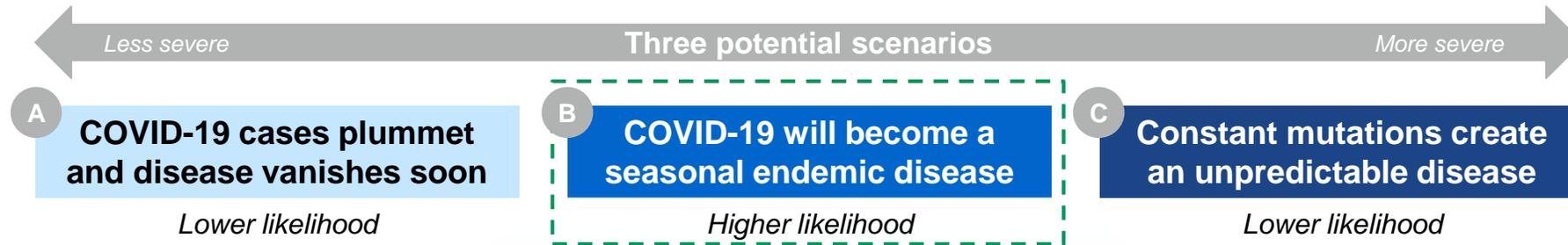
- Ph II in mild/moderate hospitalized patients ongoing; interim results indicate antiviral activity: 0.7log₁₀ reduction in viral titres at day 2; sustained viral reduction through day 8
- Ph II (MOONSONG) in outpatients evaluates alternative doses
- Ph III (MORNINGSKY) in outpatients achieved first-patient-in; results expected later in 2021

Ph III results expected end of 2021



SARS-CoV-2: Pandemic outlook

Three scenarios how the pandemic might evolve in coming years



Core beliefs

- 1 COVID-19 will become **endemic** and **seasonal**, with 200-500m new infections per year
- 2 **Severity** of disease will **decrease** over time, but **unlikely to become** another “**common cold**”
- 3 **Mutations will continue to arise** as virus further adapts to humans, but **we expect to be able to evolve** Vx/Tx/Dx accordingly

COVID-19 is here to stay, and there will still be a need for new treatments and diagnostics

Roche medicines against SARS-CoV-2 expected to be used by millions of patients in coming years

Doing now what patients need next