
Roche

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2 legislative and regulatory developments and economic conditions;
3 delay or inability in obtaining regulatory approvals or bringing products to market;
4 fluctuations in currency exchange rates and general financial market conditions;
5 uncertainties in the discovery, development or marketing of new products or new uses of existing products, including without limitation negative results of clinical trials or research projects, unexpected side-effects of pipeline or marketed products;
6 increased government pricing pressures;
7 interruptions in production;
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11 adverse publicity and news coverage.

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Roche

HY 2022 results

Basel, 21 July 2022

Group

Severin Schwan
Chief Executive Officer

HY 2022 performance

Outlook

HY 2022: Good Group performance

Group sales +5% driven by both divisions

- Pharma portfolio performing well (+3%) outgrowing biosimilar erosion
- Diagnostics with strong growth momentum (+11%) including good base business growth (+6%)

Key products growing strongly; new launches with significant sales potential

- Pharma growth drivers Hemlibra, Ocrevus, Evrysdi, Phesgo and Tecentriq with strong momentum
- Promising new launches with Vabysmo in ophthalmology and Polivy & Lunsumio in hematology
- Diagnostics receives EUA for SARS-CoV-2 DUO test and BDD for Alzheimer's disease amyloid plasma panel tests*; new launches of Elecsys® HCV DUO Immunoassay and Monkeypox assays; Benchmark Ultra PLUS and Digital Pathology slide scanner

Upcoming late-stage newsflow in 2022

- Pharma: Tecentriq in adjuvant HCC and neoadjuvant NSCLC; tiragolumab + Tecentriq in esophageal cancer; Venclexta in MM; Vabysmo in RVO; Susvimo in DME & DR and gantenerumab in Alzheimer's disease
- Diagnostics: Elecsys® IGRA SARS-CoV-2, Elecsys® pTau/AB42 ratio Gen2 CSF (FDA), Digital LightCycler, cobas® 5800 (FDA), cobas® pure (FDA), cobas® pulse (FDA)

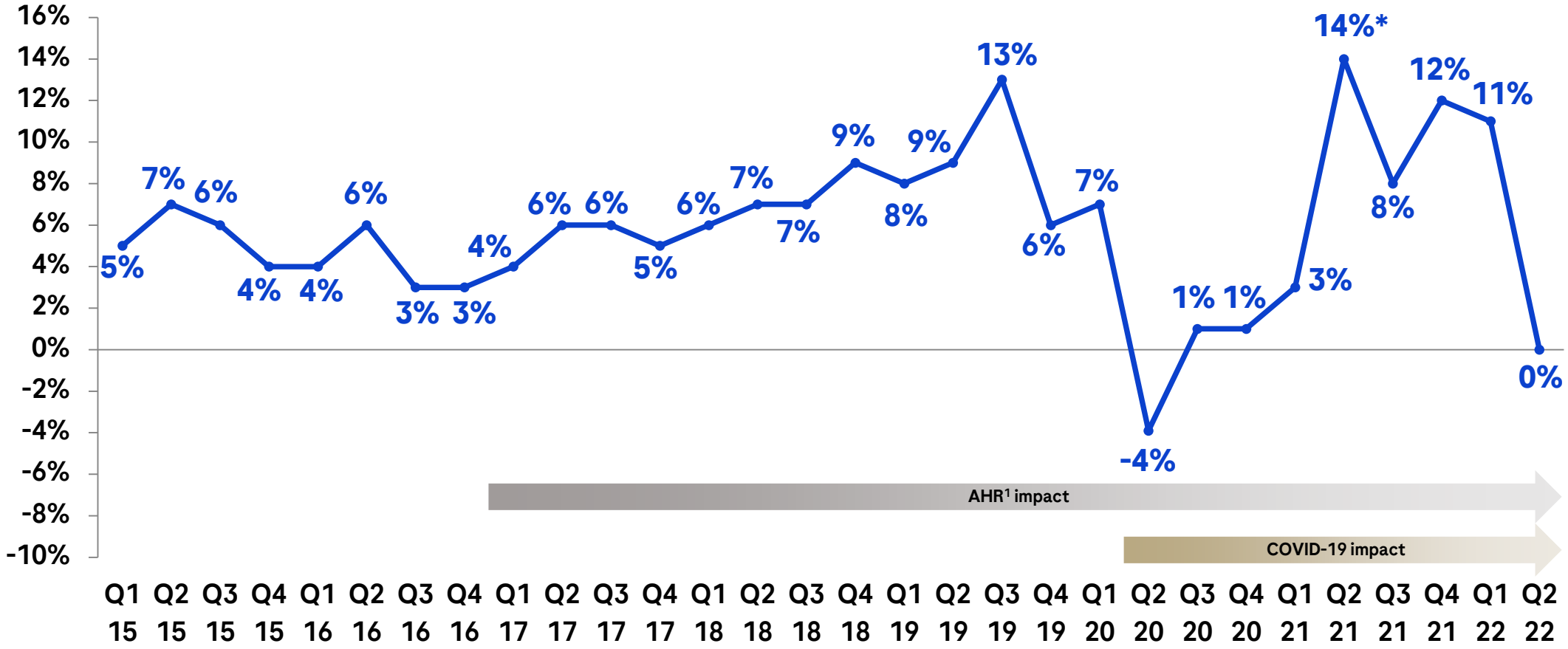
Growth rates at CER (Constant exchange Rates); * Data will be published at AAIC in August 22

HY 2022: Group sales driven by both divisions

	2022 CHFbn	2021 CHFbn	Change in % CHF	Change in % CER
Pharmaceuticals Division	**22.3**	21.7	3	3
Diagnostics Division	**9.9**	9.0	10	11
Roche Group	**32.3**	30.7	5	5

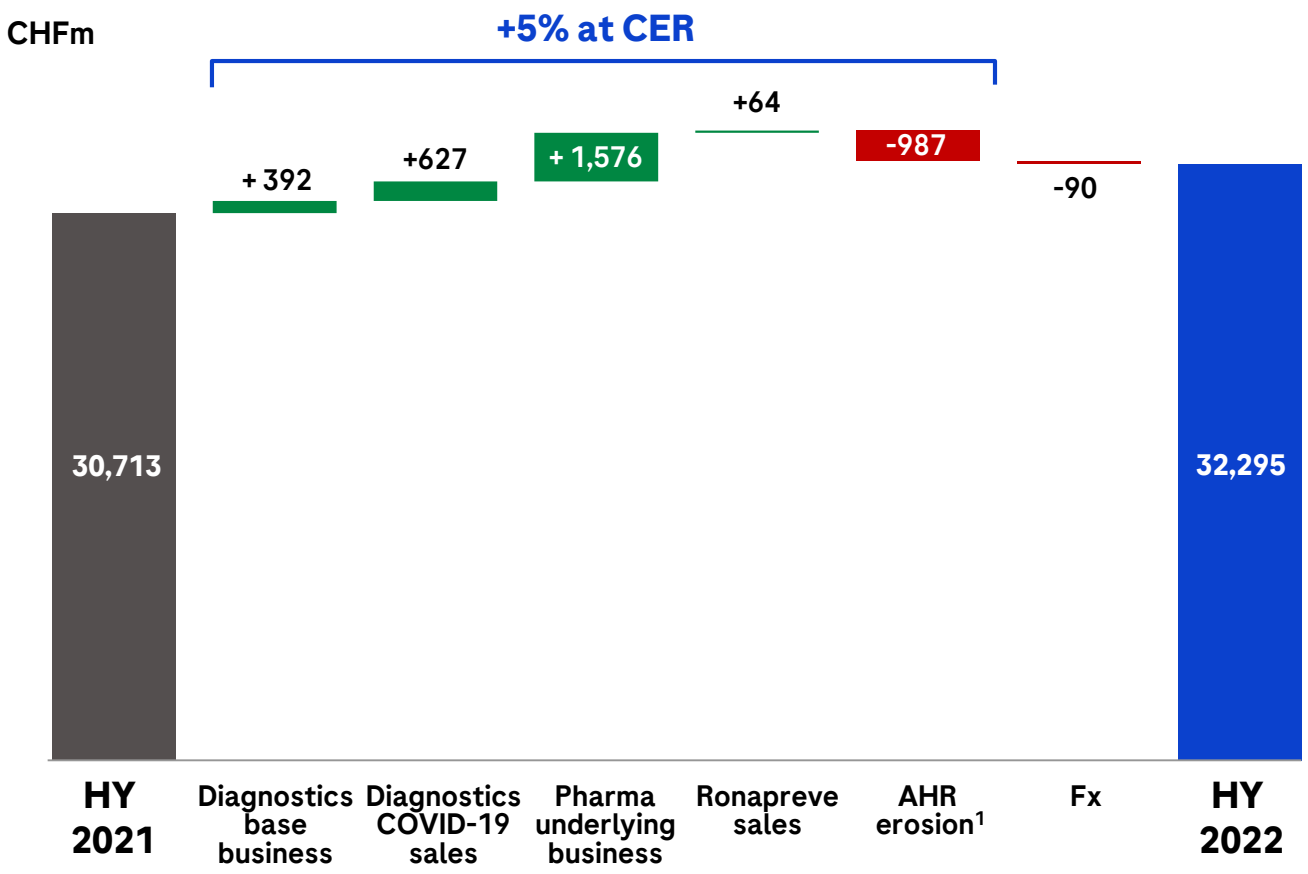
CER=Constant Exchange Rates; totals may include differences due to rounding

Quarterly sales performance: As guided COVID-19 sales coming down in Q2

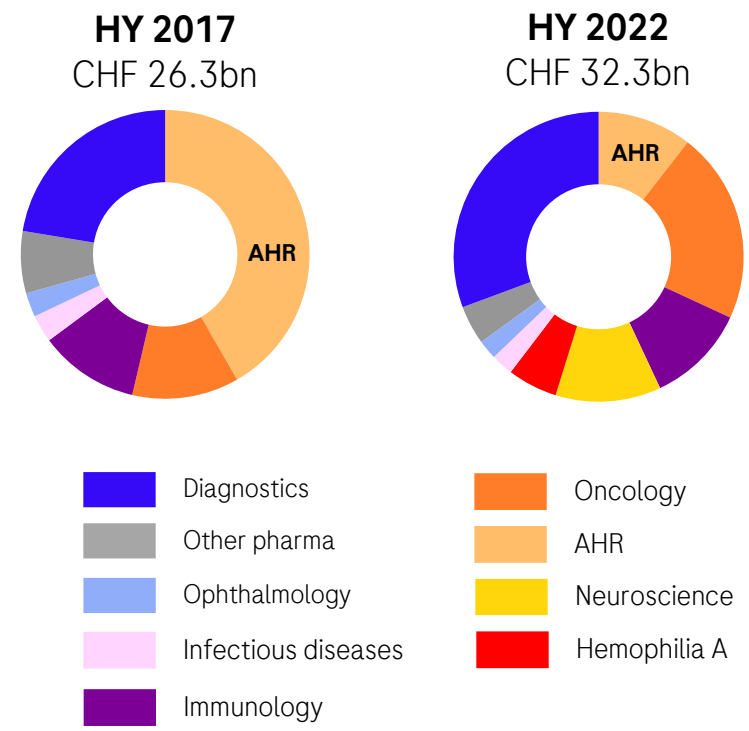


Growth rates at CER (Constant Exchange Rates); * Q2 2020 sales severely impacted by COVID-19 pandemic onset; [1] AHR: Avastin, Herceptin, Rituxan/MabThera

HY 2022: Portfolio diversification progressing



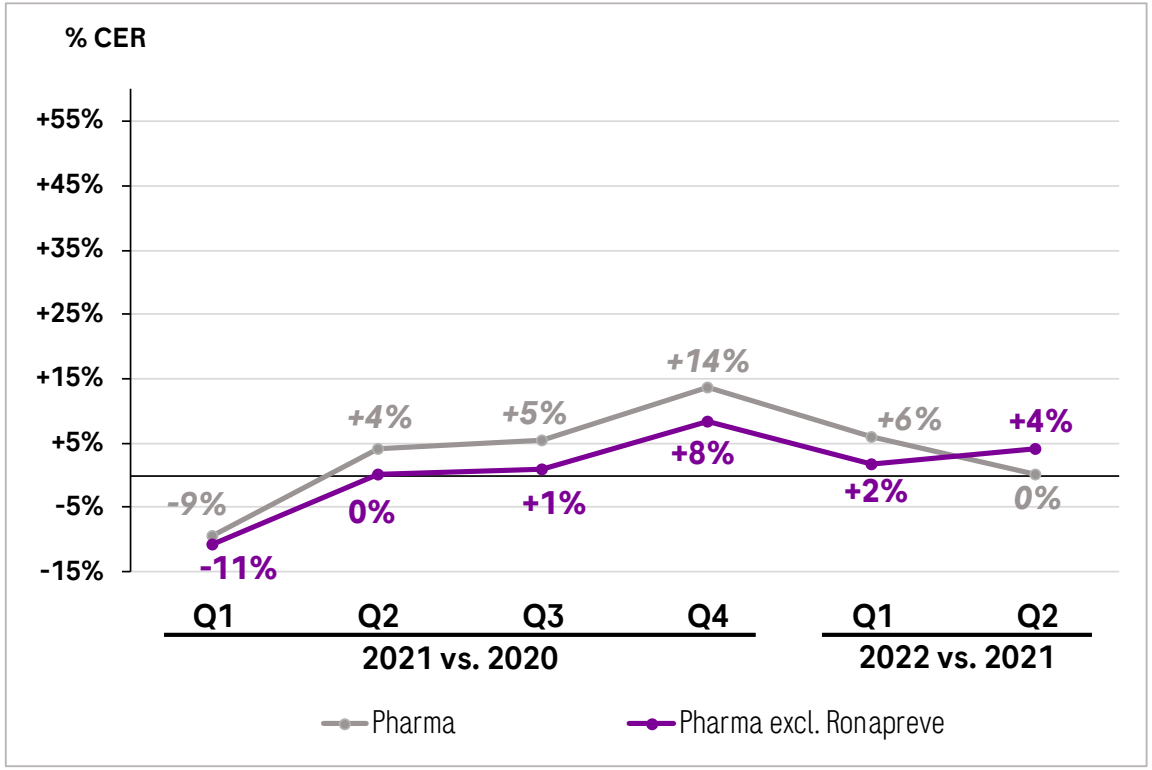
Diversification of Roche business



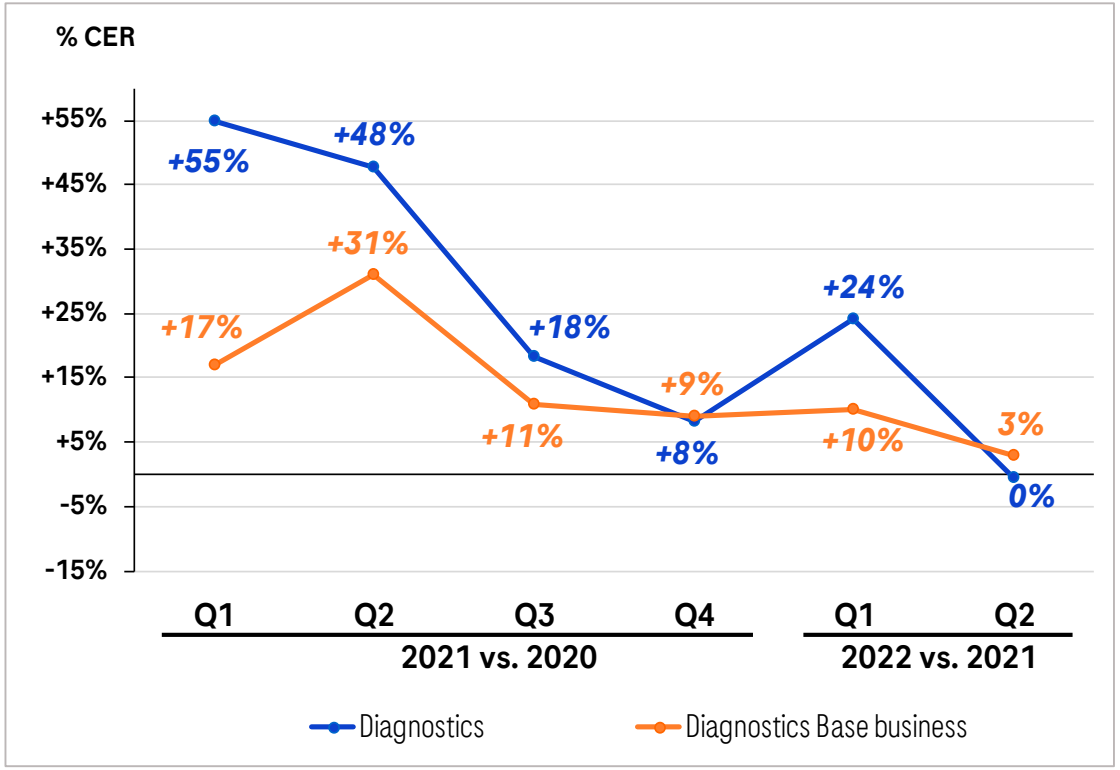
HY 2022 values in reported CHFm, variances in CERm; [1] AHR: Avastin, Herceptin, Rituxan/MabThera sales erosion (2.5bn for FY 2022)

HY 2022: Good underlying business momentum for both divisions

Pharma
Quarterly sales evolution 2021-2022



Diagnostics
Quarterly sales evolution 2021-2022

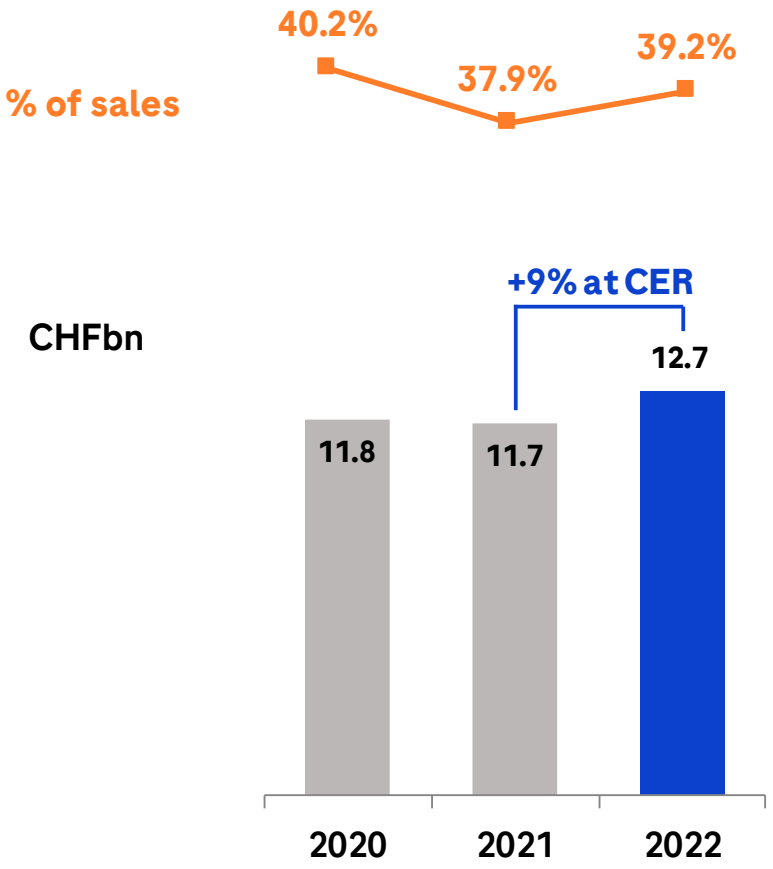


Growth rates at CER (Constant Exchange Rates)

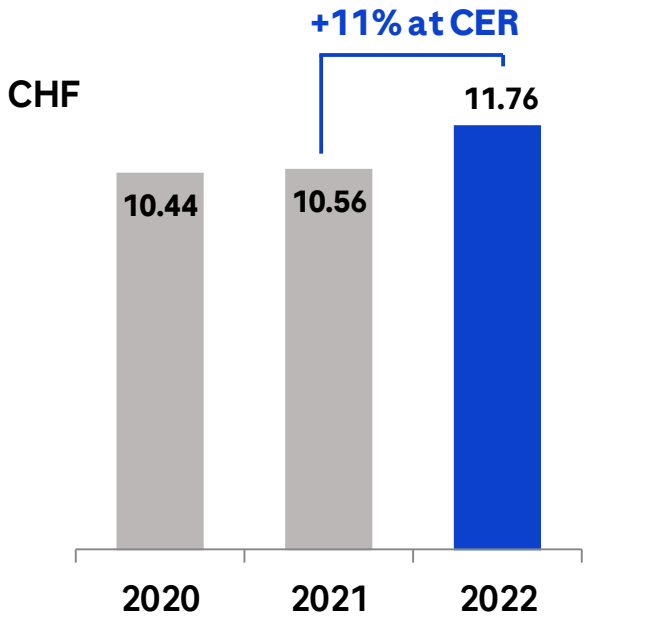
HY 2022: Growth of profitability and Core EPS

Benefit from Ultomiris patent settlement and share repurchase

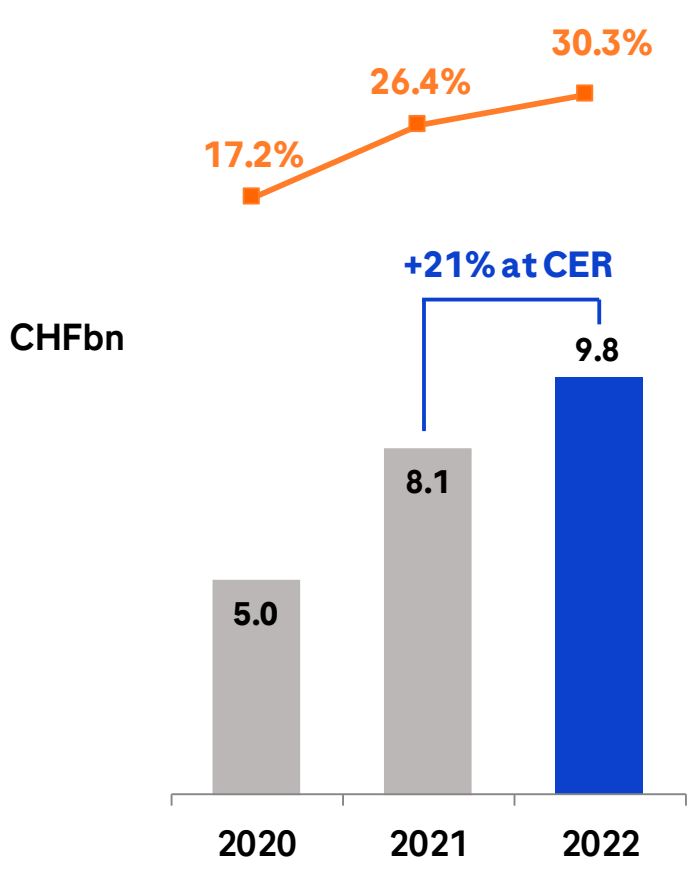
Core operating profit



Core EPS



Operating free cash flow



CER=Constant Exchange Rates

2 NMEs launched in 2022: Vabysmo and Lunsumio

First-in-class bispecifics launched in ophthalmology and malignant hematology

Roche: Leading in bispecific antibodies

2017

- First bispecific mAb that bridges activated factor IX (FIXa) and FX to restore function of missing FVIII
- Approved for severe, moderate and mild hemophilia A and for patients with inhibitors

HEMLIBRA emicizumab-kxwh

2022

- First bispecific mAb to simultaneously target VEGF-A and Ang2 to reduce neovascularization and inflammation to stabilise vessels
- Approved by FDA in nAMD and DME; RVO trials ongoing

VABYSMO

- T cell engaging bispecific mAb that binds simultaneously to CD20 on the surface of malignant B cells and to CD3 on the surface of T cells, thereby activating T cell induced cancer cell killing
- Approved by EMA in FL, DLBCL trials ongoing

Lunsumio mosunetuzumab

NME=new molecular entity; mAb=monoclonal antibody; VEGF=Vascular endothelial growth factor; Ang-2=Angiopoietin-2; DME=diabetic macular edema; nAMD=neovascular age-related macular degeneration; DLBCL=diffuse large B-cell lymphoma; FL=follicular lymphoma; RVO=retinal vein occlusion

HY 2022 performance

Outlook

2022: Upcoming newsflow

Pharma

Ongoing and upcoming launches

- **Vabysmo** in DME/nAMD
- **Susvimo** in nAMD
- **Polivy** in 1L DLBCL
- **Lunsumio** in 3L+ FL

Late stage pipeline read outs

- **tiragolumab + Tecentriq studies** NSCLC, Cervical, Esophageal cancer
- **Tecentriq adjuvant studies** HCC, neoadjuvant NSCLC
- **Venclexta** in MM (t11;14)
- **Vabysmo** in RVO
- **Susvimo** in DMR/DR
- **gantenerumab** in Alzheimer's disease

Diagnostics

Upcoming launches

cobas® 5800 (FDA)	Real-time PCR molecular testing for low volume labs
cobas® pure (FDA)	Serum work area analyzer for low-to-medium sized labs
cobas® pulse (FDA)	Device combining glucose meter and digital platform
Elecsys® IGRA SARS-CoV-2	Measure T-cell release of IFN-γ following simulation by SARS-COV-2 specific antigens
Digital LightCycler	Novel digital PCR platform
Elecsys® pTau/AB42 ratio Gen2 CSF (FDA)	Detect amyloid disease & enable a broader availability of testing for Alzheimer's Disease

Neuroscience
Oncology
Ophthalmology
Diagnostics

DME=diabetic macular edema; nAMD=neovascular age-related macular degeneration; DLBCL=diffuse large B-cell lymphoma; FL=follicular lymphoma; NSCLC=non-small cell lung cancer; HCC=hepatocellular carcinoma; MM=multiple myeloma; RVO=retinal vein occlusion; CSF=cerebrospinal fluid; PCR=polymerase chain reaction

2022 sales outlook confirmed

Sales drivers[1]

Pharma: New products with accelerating growth

Diagnostics: Base business with strong growth

AHR[2] biosimilars: Roughly CHF -2.5 bn sales erosion

COVID-19 sales for Diagnostics and Pharma around CHF 5 bn

- **Guidance stable to low-single digit group sales growth**
- **Group sales to grow high-single digit if COVID-19 sales and AHR get excluded**
- **Guidance based on a scenario with significantly reduced COVID-19 impact in H2**

[1] At Constant Exchange Rates (CER); [2] AHR=Avastin, Herceptin, Rituxan/MabThera

2022 outlook confirmed

Group sales growth[1]	• Stable to low-single digit
Core EPS growth[1]	• Low- to mid-single digit
Dividend outlook	• Further increase dividend in Swiss francs

[1] At Constant Exchange Rates (CER)

Pharmaceuticals Division

Bill Anderson
CEO Roche Pharmaceuticals

HY 2022: Pharmaceuticals Division sales

New products compensate for biosimilar erosion

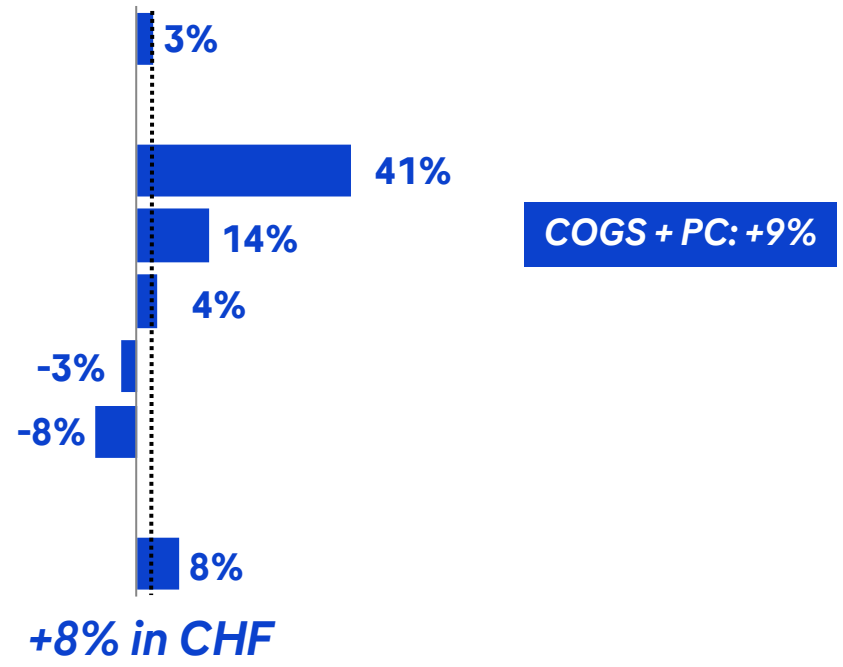
	2022 CHFm	2021 CHFm	Change in % CHF	Change in % CER
Pharmaceuticals Division	**22,347**	**21,671**	**3**	**3**
United States	11,363	10,802	5	1
Europe	4,104	4,485	-8	-4
Japan	2,202	1,808	22	34
International	4,678	4,576	2	2

CER=Constant Exchange Rates

HY 2022: Pharmaceuticals Division

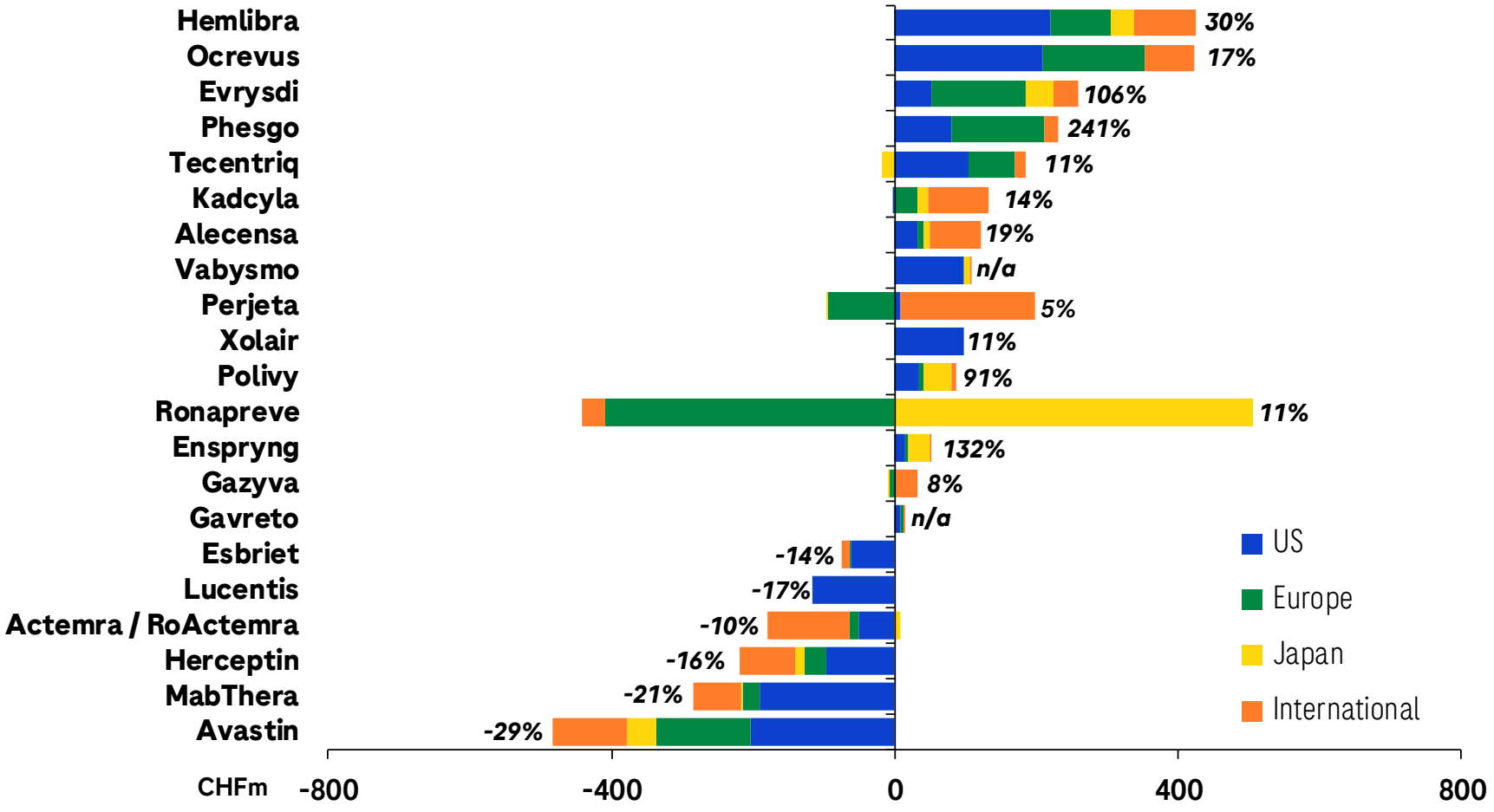
Core operating profit growth driven by patent settlement

	2022 CHFm	2022 % sales
Sales	**22,347**	**100**
Royalties & other op. inc.	1,918	8.6
Cost of sales	-4,430	-19.8
M & D	-3,096	-13.9
R & D	-5,729	-25.6
G & A	-692	-3.1
Core operating profit	**10,318**	**46.2**



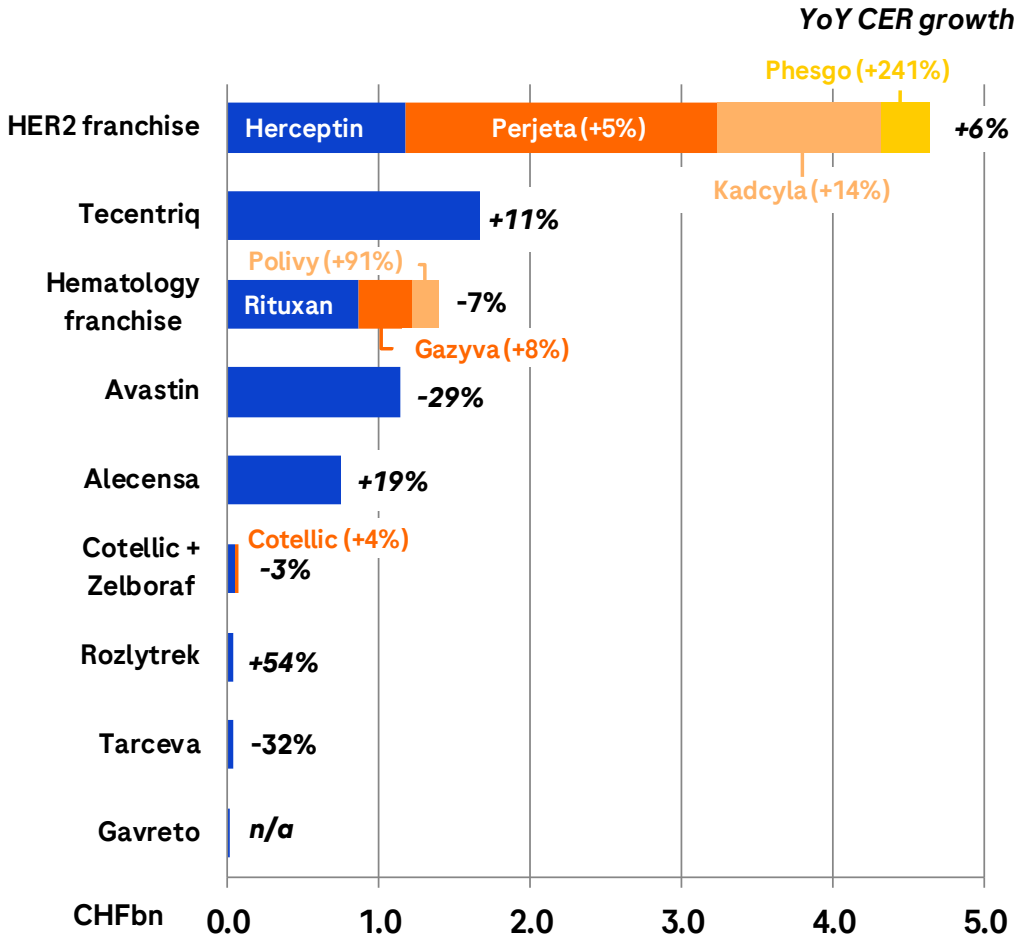
CER=Constant Exchange Rates; COGS=costs of goods sold; PC=period costs

HY 2022: Portfolio diversification progressing



Absolute values and growth rates at Constant Exchange Rates (CER)

HY 2022: Oncology portfolio rejuvenation on-going



HER2 franchise

- Kadcyla (+14%) with growth ex-US due to adjuvant BC
- Perjeta (+5%) driven by International
- Phesgo (CHF 325m): Conversion and geographic expansion ongoing

Tecentriq

- Growth (+11%) driven by adjuvant NSCLC, 1L HCC and 1L SCLC

Hematology franchise

- Venclexta*: Growth driven by 1L AML and 1L & R/R CLL
- Gazyva (+8%): Growth due to 1L FL and in 1L CLL
- Polivy (+91%): Growth acceleration in the US due to R/R DLBCL; EU approval in 1L DLBCL (POLARIX) achieved
- Lunsumio: EU approval in 3L+ FL achieved

Alecensa

- Strong growth (+19%) driven by all regions

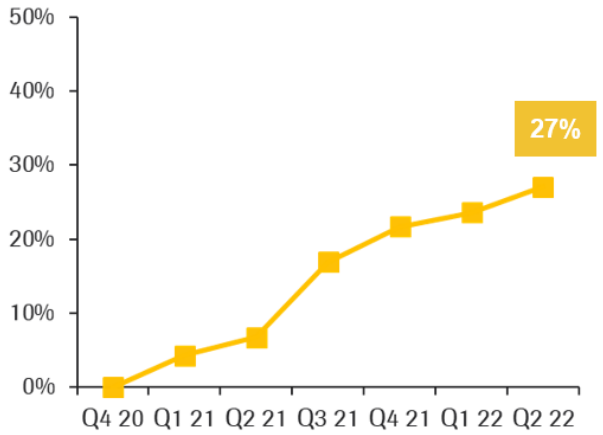
CER=Constant Exchange Rates; HY 2022 Oncology sales: CHF 10.1bn; CER growth -1%; * Venclexta sales booked by AbbVie and therefore not included; Polivy in collaboration with Seagen; BC=breast cancer; HCC=hepatocellular carcinoma; SCLC=small cell lung cancer; NSCLC=non-small cell lung cancer; AML=acute myeloid leukemia; R/R CLL=relapsed/refractory chronic lymphocytic leukemia; FL=follicular lymphoma; DLBCL=diffuse large B cell lymphoma

HER2+ franchise: High efficacy and safety bar established in eBC

Perjeta conversion rate at 27% in early launch countries

Phesgo with strong global launch

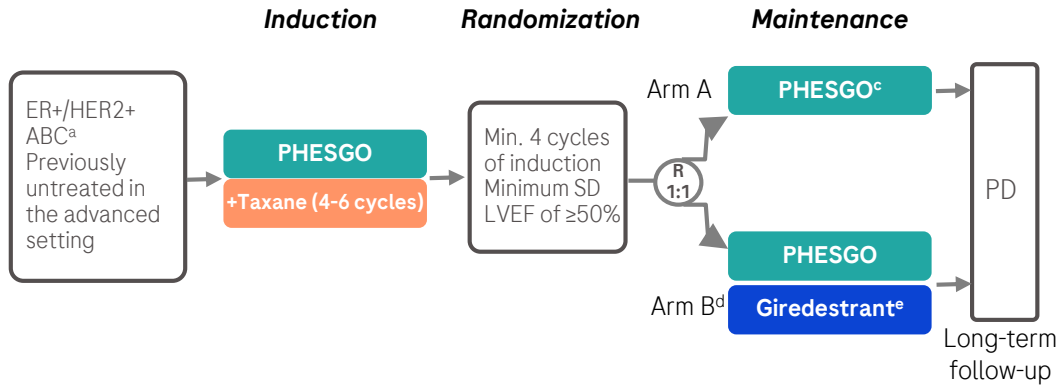
Global Perjeta conversion rate*



- Phesgo SC significantly cuts healthcare costs and resource use
- Perjeta conversion rate reaches 27% in early launch countries
- P+H in eBC (APHINITY): 8-year follow up data presented at ESMO Virtual Plenary showing a 28% reduction in the risk of recurrence or death for high risk, lymph-node positive patients

Continuing to build on existing standard of care

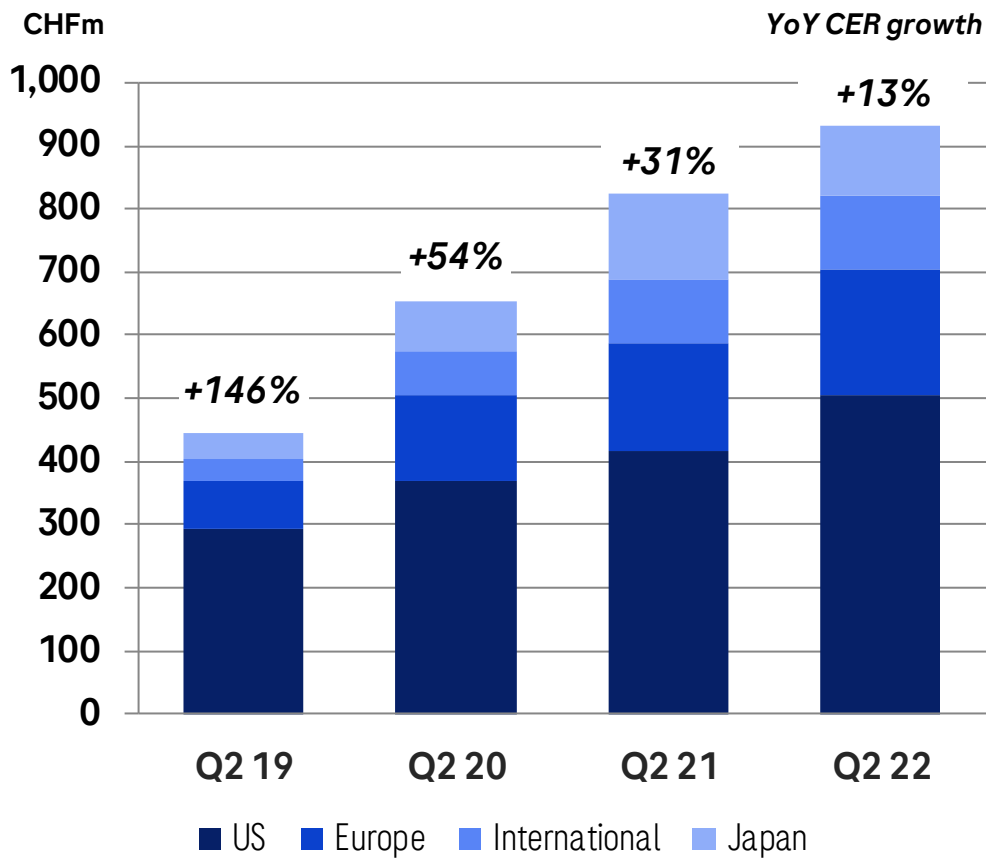
Ph III (heredERA) in 1L HER2+/ER+ mBC



- HER2+/HR+ BC with distinctive disease biology
- Ph III (heredERA) of Phesgo + giredestrant in 1L HER2+/ER+ mBC started enrollment in Q2 2022, and aims to improve:
  - efficacy by comprehensive blockade of both HER2 and ER pathways
  - treatment related QOL, with a patient centric regimen

P=Perjeta; H=Herceptin; HR=Hormone receptor; HER2=Human epidermal growth factor receptor 2; BC=Breast cancer; eBC=Early breast cancer; mBC=Metastatic breast cancer; ER=Estrogen receptor; IV=Intravenous; SC=Subcutaneous; QoL=Quality of life; SD=Stable disease; LVEF=Left ventricular ejection fraction; PD=Progressive disease; *Perjeta conversion rate is based on volumes (vials) and includes all launch countries after the 2nd quarter after the launch (17 countries); Phesgo in collaboration with Halozyme; ESMO=European Society for Medical Oncology

Tecentriq overview: Adjuvant program to read out in 2022/23



Tecentriq Q2 update

- Ph III (IMvoke010) in adjuvant SCCHN continues to final analysis
- Japan: Sales impacted by mandatory price cut

Lung franchise (NSCLC, SCLC)

- EU: Approval in adjuvant PDL1+ NSCLC achieved; Growth driven by 1L SCLC
- US: Strong launch in adjuvant PDL1+ NSCLC

GI franchise (HCC)

- US/EU/Japan: Growth driven by 1L HCC

Outlook 2022

- Further growth due to first-to-market indications
- Ph III Tecentriq adjuvant studies in HCC and neoadjuvant NSCLC reading out
- Ph III tiragolumab + Tecentriq in 1L EC reading out

CER=Constant Exchange Rates; SCCHN=squamous cell carcinoma of the head and neck; NSCLC=non small cell lung cancer; SCLC=small cell lung cancer; HCC=hepatocellular cancer; EC=esophageal cancer

Hematology franchise: Setting new standards of care

First-in-class EU approvals in 1L DLBCL and 3L+ FL

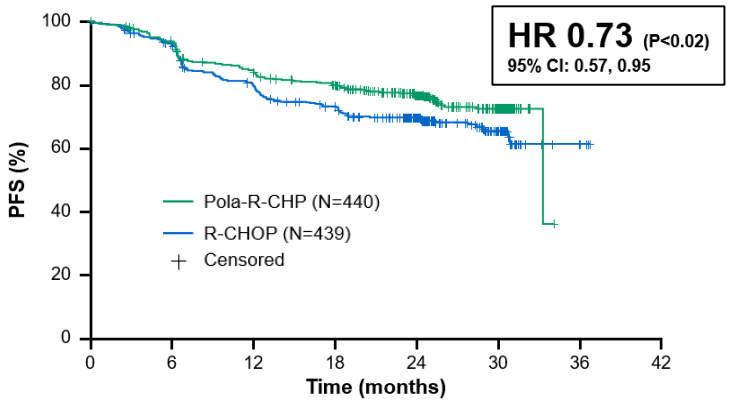
POLIVY® polatuzumab vedotin

Lunsumio™ mosunetuzumab

Roche

Ph III (POLARIX) Polivy + R-CHP in 1L DLBCL

Progression free survival (PFS)

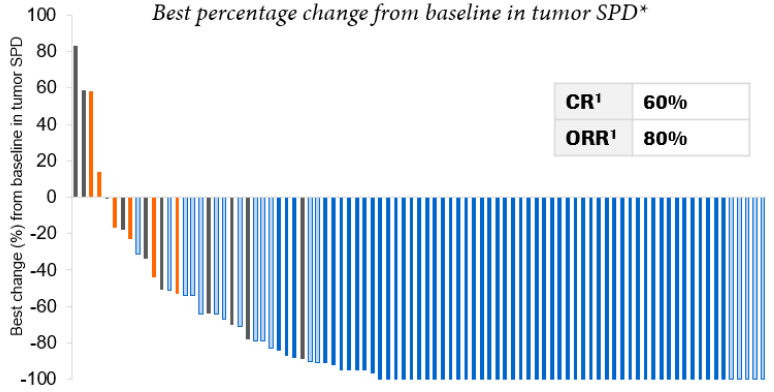


- Polivy + R-CHP significantly prolongs PFS with a HR of 0.73 in patients with intermediate and high risk 1L DLBCL
- Safety of Polivy + R-CHP and R-CHOP comparable
- EU approval in 1L DLBCL achieved; Filed in US, Japan and China
- Ph III (SUNMO) Polivy + Lunsumio in 2L+ SCT ineligible DLBCL FPI in Q2 2022

Ph I/II step up dosing (GO29781) Lunsumio in 3L+ FL

FDA BTD

Best percentage change from baseline in tumor SPD



- 60% CR rate (greater than 14% historical control) with the majority of responses lasting for at least 18 months
- Fixed duration treatment; Favorable tolerability profile suitable for outpatient setting (CRS low grade and cycle 1)
- EU approval in 3L+ FL achieved; Filed in US with priority review granted
- Ph III (CELESTIMO) Lunsumio + lenalidomide in 2L+ FL started in Q4 2021

Tilly H. et al, ASH 2021; Budde et al. ASH 2021 (GO29781), 1. ORR by IRF; DLBCL=diffuse large B cell lymphoma; FL=follicular lymphoma; R=Rituxan; CHOP=cyclophosphamide, doxorubicin, vincristine, prednisone; CHP=cyclophosphamide, doxorubicin, prednisone; CRS=cytokine release syndrome; Polivy in collaboration with Seagen; SCT=stem cell transplant; HR=Hormon receptor; CR=complete response; ORR=overall response rate

Hematology franchise development program

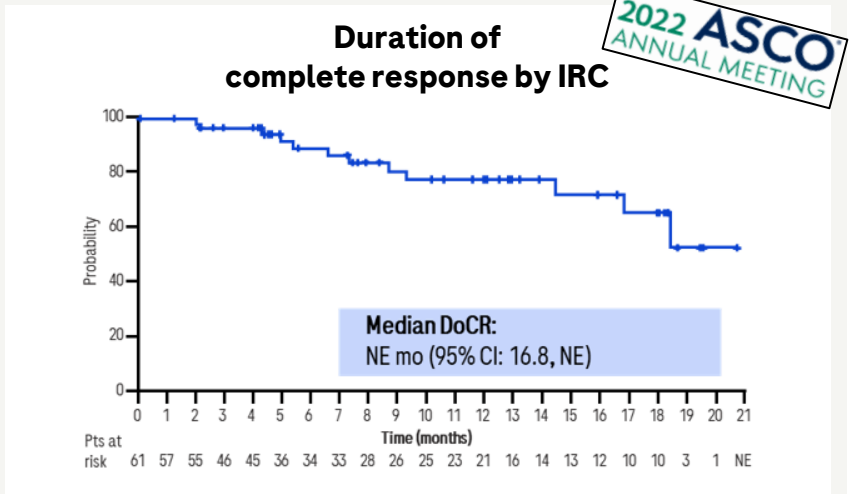
Potential first-in-class & best-in-class combinations

POLIVY polatuzumab vedotin

Lunsumio mosunetuzumab

Roche

Ph II (NP30179) glofitamab in 3L+ DLBCL



- Primary endpoint met; CR: 39.4% in heavily pre-treated, highly refractory patients
- CRs achieved were early and durable even after fixed-duration treatment (max. 12 cycles)
- Glofitamab was well tolerated with low rate of treatment discontinuations; CRS was mostly low grade
- EU: Filed in 3L+ DLBCL in Q2 2022

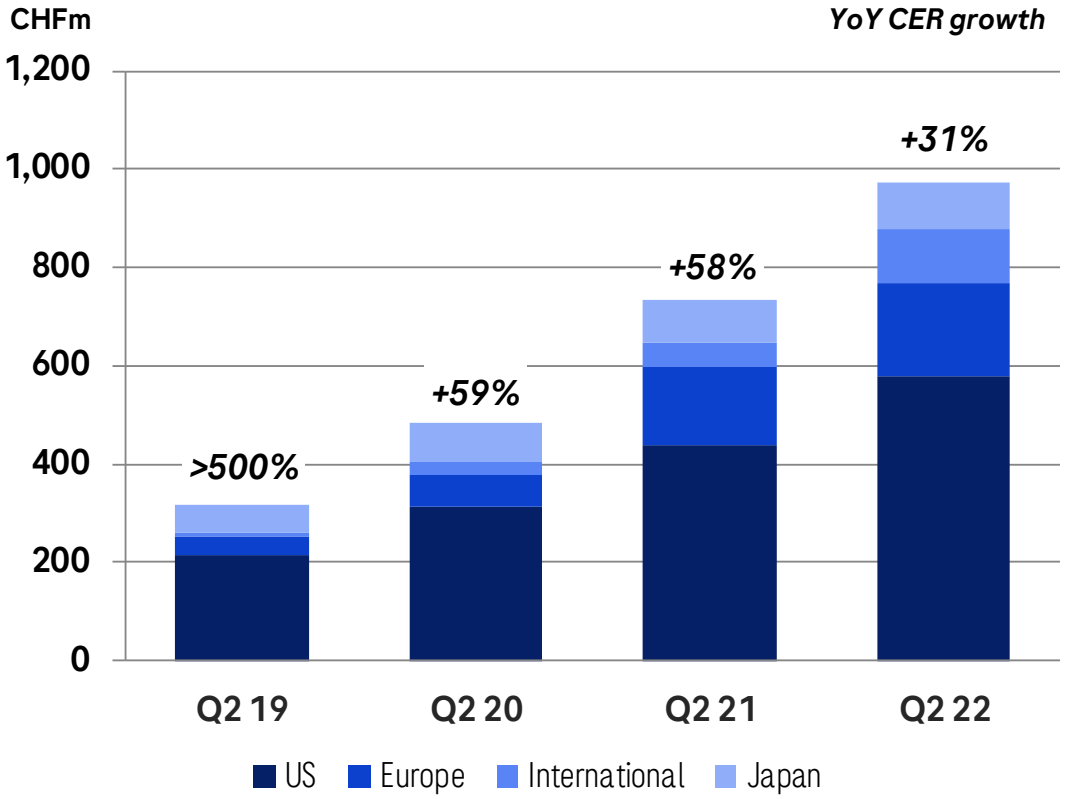
Most advanced clinical development program

- Lunsumio: Attractive profile for the outpatient setting and across a broad range of indications and settings; no hospitalization required
- Glofitamab: Best-in-class efficacy potential with high CR rates, durable responses and manageable CRS with fixed treatment duration
- Ph III development program in NHL with pivotal read-outs starting in 2023/24: Glofit+ GemOx (STARGLO) in 2L+ DLBCL; Polivy + Lunsumio (SUNMO) in 2L+ DLBCL; Lunsumio + lenalidomide (CELESTIMO) in 2L+ FL
- Update on novel combinations in 1L DLBCL to be presented at ASH 2022

Dickinson M. et al., ASCO 2022; DLBCL=diffuse large B-cell lymphoma; FL=follicular lymphoma; CR=complete response; CR=*2L+ SCT ineligible DLBCL; R/R=relapsed/refractory; len=lenalidomide; gemOx=gemcitabine + oxaliplatin; CRS=cytokine release syndrome; glofit=glofitamab; NHL=non-Hodgkin's lymphoma; SCT=stem cell transplant; IRC=independent review committee ; CI=confidence interval ; R-CHP=Rituxan, cyclophosphamide, hydroxydoxorubicin, prednisone; CHOP=cyclophosphamide, doxorubicin, vincristine, and prednisone; ASH=American Society of Hematology

Hemophilia A franchise: Hemlibra new global standard of care

35% US/EU-5 patient share reached



Hemophilia Q2 update

- Nearly 18,000 patients treated globally
- Hemlibra continues to penetrate across all approved patient segments
- Ph III (HAVEN 6) strong data in mild/moderate patients presented at ISTH 2022

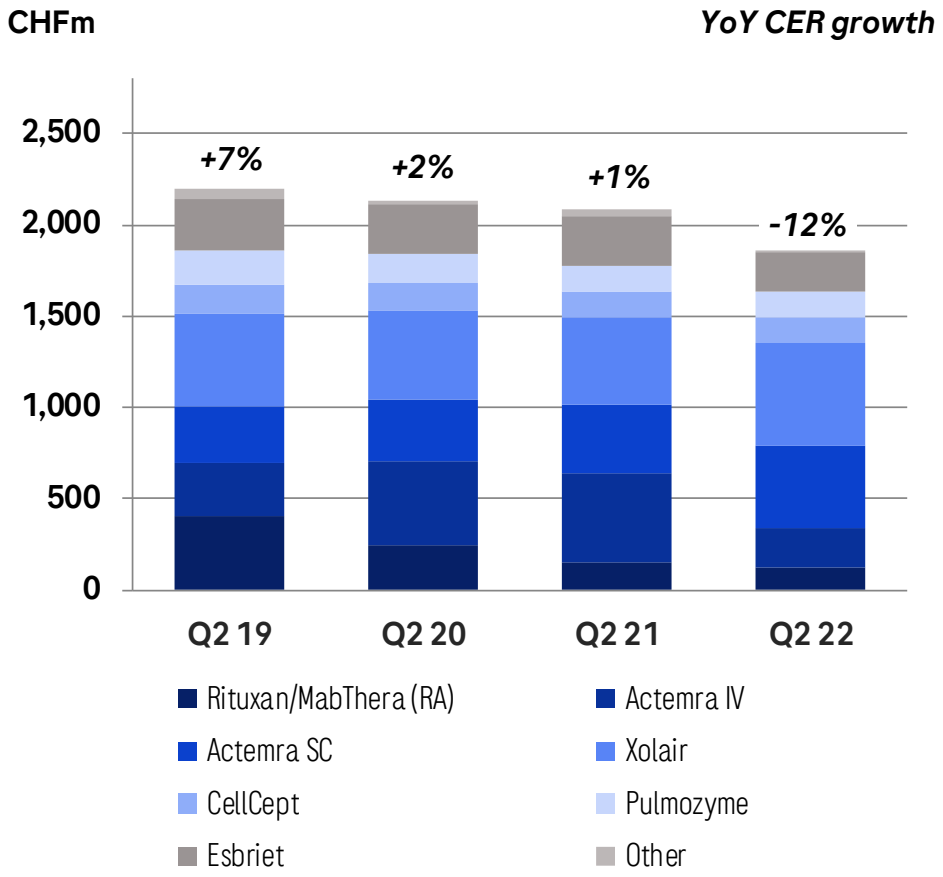
Outlook 2022

- US/EU: Further patient share gains in non-inhibitors
- EU: Label expansion to include mild/moderate patients (HAVEN 6) expected
- Ph III (HAVEN 7) in infants (0-1 year) interim results expected

CER=Constant Exchange Rates

Immunology franchise

Actemra COVID-19 sales declining and first Esbriet generic competition



Immunology Q2 update

- Gazyva: Ph III (INShore) in PNS initiated

Actemra (-23%)

- Strong decline of COVID-19 driven sales
- Remains leading RA monotherapy in EU-5
- Shift from IV to SC; SC sales accounting for >65%

Xolair (+13%)

- Remains the leader in biologics asthma market
- Continued growth in CSU

Esbriet (-21%)

- US: Generic competition

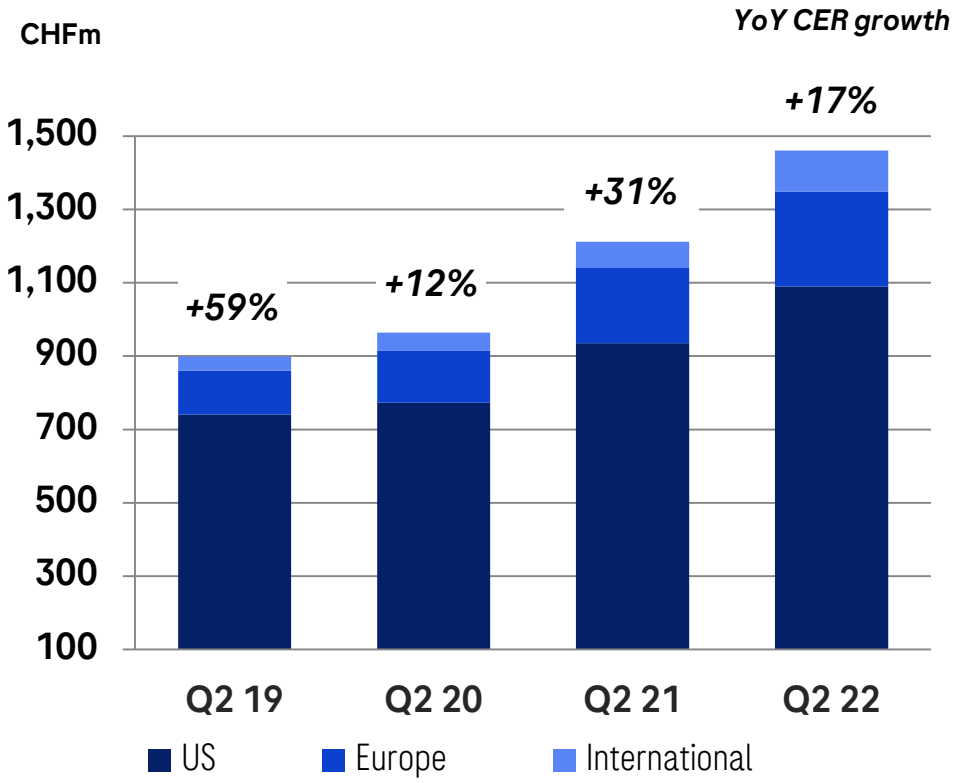
Outlook 2022

- Actemra: Limited COVID-19 sales due to fewer hospitalizations

CER=Constant Exchange Rates; PNS=Pediatric Nephrotic Syndrome; RA=rheumatoid arthritis; IV=intravenous; SC=subcutaneous; CSU=chronic spontaneous urticaria

MS franchise: Ocrevus global market share reaches 21%

Fenebrutinib development programs in RMS and PPMS well on track



Q2 update

- >250.000 patients treated globally
- No.1 treatment in US and EU-5
- Higher persistence compared with patients treated with other MS treatments
- Ph III (OCARINA II) for Ocrevus 6-month SC dosing started
- Ph III program (FENhance I/II, FENtrepid) for fenebrutinib in RMS and PPMS well on track

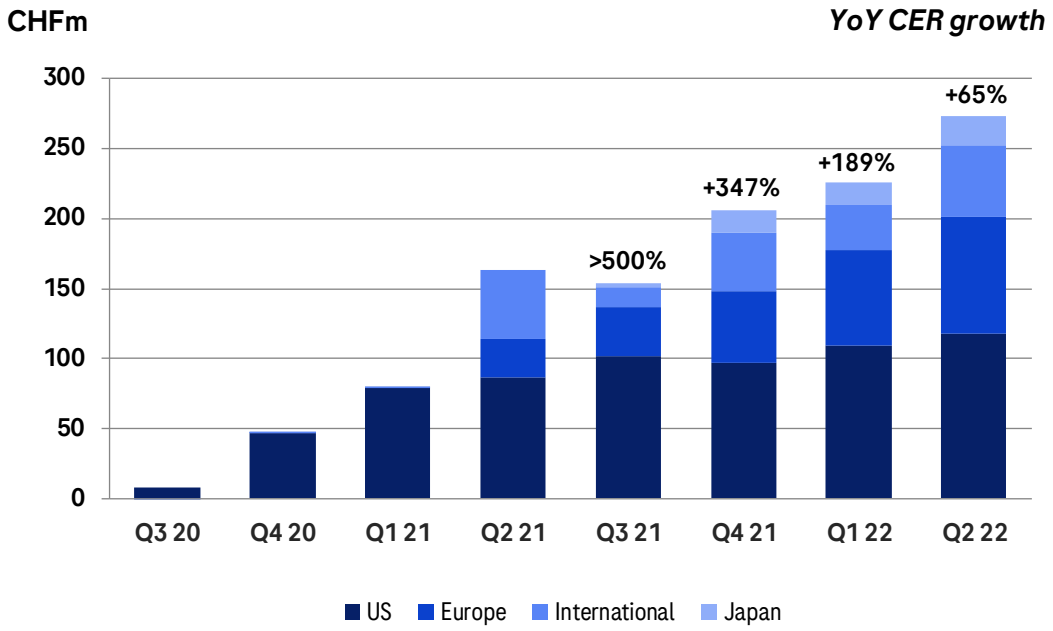
Outlook 2022

- US/EU: Further market share gains expected

References: 1. Pineda E, Sheinson D, Ng C, Bonine N, Pardo G. Adherence and persistence to disease-modifying therapies for multiple sclerosis and their impact on clinical and economic outcomes in a US claims database. Presented at AAN 2021 Virtual Annual Meeting; April 17-22, 2021; CER=Constant Exchange Rates; MS=multiple sclerosis; SC=subcutaneous; RMS=relapsing MS; PPMS=primary progressive MS

SMA franchise: Evrysdi with strong global momentum

US with >20% and Germany with >30% share



Q2 update

- >5,000 patients treated world wide (commercial, clinical trials, compassionate use)
- Retention rate of ~90% due to treatment satisfaction
- US: Growth driven by switch and naive patient starts; US approval for patients <2 months old achieved
- EU: Strong launches in early launch countries
- Ph II/III (MANATEE) Evrysdi + anti-myostatin combination study started

Outlook 2022

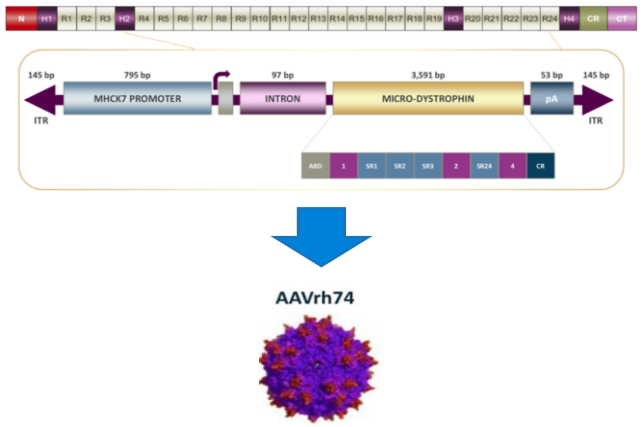
- Continued growth and market share gains over all market segments expected
- EU: Label extension (<2 months old) based on Ph II RAINBOWFISH expected

CER=Constant Exchange Rates; SMA=spinal muscular atrophy; Anti-myostatin (GYM329) in collaboration with Chugai

Duchenne muscular dystrophy franchise update

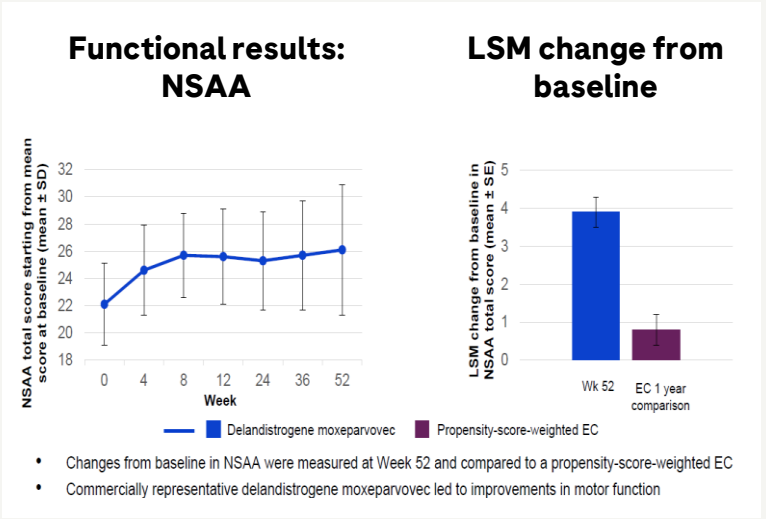
Pivotal Ph III development program expected to read out in 2023

Delandistrogene moxeparvovec

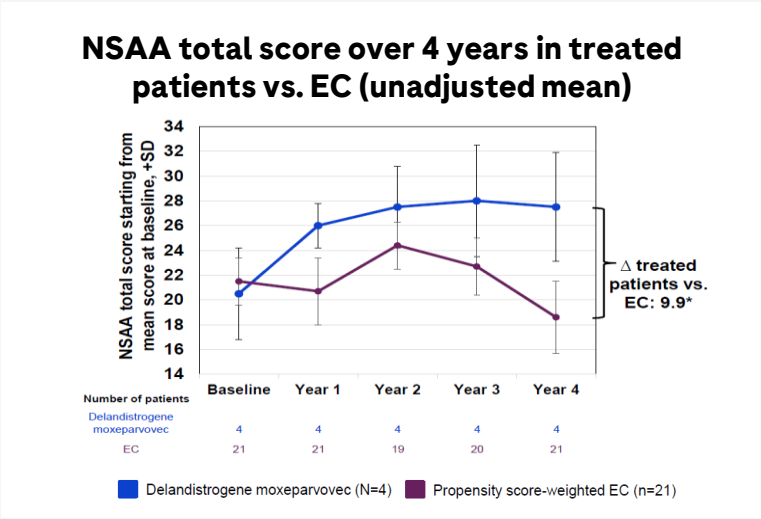


- Targeted delivery of micro-dystrophin transgene to key muscle tissue can enable meaningful and durable functional response
- AAVrh74 vector: low likelihood of pre-existing immunity and high tropism for skeletal & cardiac muscles
- Expression potentiated by the MHCK7 promoter in cardiac & skeletal muscles

Ph Ib ENDEAVOR (Study 103)



Ph I (Study 101)



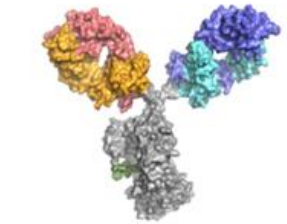
- In ENDEAVOR participants gained a mean 4.0 points in NSAA over 1 year vs baseline. The treatment difference vs an external control was 3.2 points which is clinically meaningful and highly statistically significant (p <0.0001)
- Consistent transduction, expression and safety demonstrated
- 4-year follow up for Study 101 (n=4): Patients maintained NSAA gain over 4 years at an age at which a decline would be expected (8-10 yrs)
- Ph III (EMBARK) on track to be fully enrolled by H2 2022; Ph III (ENVOL; study 302) in 0-3 year olds and Ph III (ENVISION, study 303) in older ambulatory / non ambulatory patients to be initiated in H2 2022

NSAA=North Star Ambulatory Assessment ; LSM=least square mean(s) ; Ph 1/2a Trial of Delandistrogene Moxeparvovec in Patients with DMD: 4-year Update. Mendell J.R. et al., Journal of Neuromuscular Diseases, 2022: 9; s1, p. S97, PS03.01; One-year ENDEAVOR Data (Ambulatory, ≥4 to <8-year-olds): Phase 1b Trial of Delandistrogene Moxeparvovec in DMD. Lehman K. et al, Journal of Neuromuscular Diseases, 2022: 9; s1, p. S201, eP02.05.01.

Ophthalmology franchise: Excellent Vabysmo launch

Building a global ophthalmology franchise

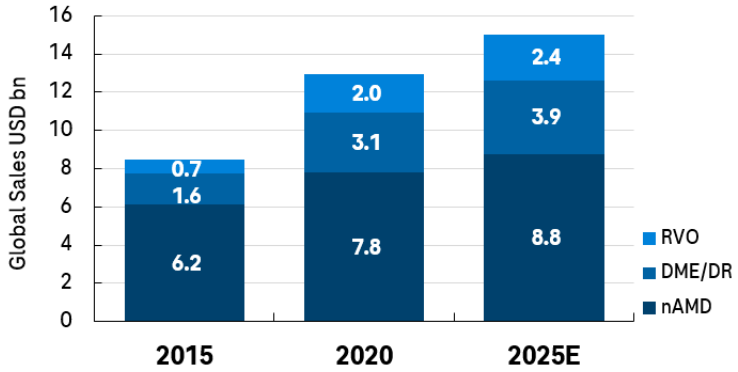
Vabysmo in nAMD and DME



- First IVT therapy inhibiting two distinct disease pathways by simultaneously binding to Ang-2 and VEGF-A
- Potentially improved vascular stability and reduced retinal inflammation
- Vision gains and anatomical improvements achieved with 80% of patients reaching Q3M dosing or longer and >60% Q4M dosing

- Over 70,000 vials distributed in first 5 months of US launch
- Strong customer uptake with switching coming primarily from aflibercept
- Broad coverage for ~80% of lives including policies at most national accounts
- Real world data (TRUCKEE study) presented at ASRS 2022; results consistent with efficacy and safety seen in development studies
- Ph III (COMINO / BALATON) in RVO reading out in H2 2022

Global retina market growing to USD 15 bn



- Market growth driven by aging population and diabetic epidemic
- Rapid market transition to next generation products expected
- Innovative meachanism of actions to improve standard of care
- Longer dosing intervals to improve compliance and treatment outcomes, as well as leading to cost savings

Khanani A.M. et al., ASRS conference 2022; nAMD=neovascular age-related macular degeneration; DME=diabetic macular edema; RVO=retinal vein occlusion; IVT=intravitreal; DR=diabetic retinopathy; VEGF=Vascular endothelial growth factor; ASRS=American Society of Retinal Specialists; Q3M=every 3 months; Q4M=every 4 months; Eylea (aflibercept) is a registered trademark/product of Regeneron

Ophthalmology franchise: Vabysmo in nAMD

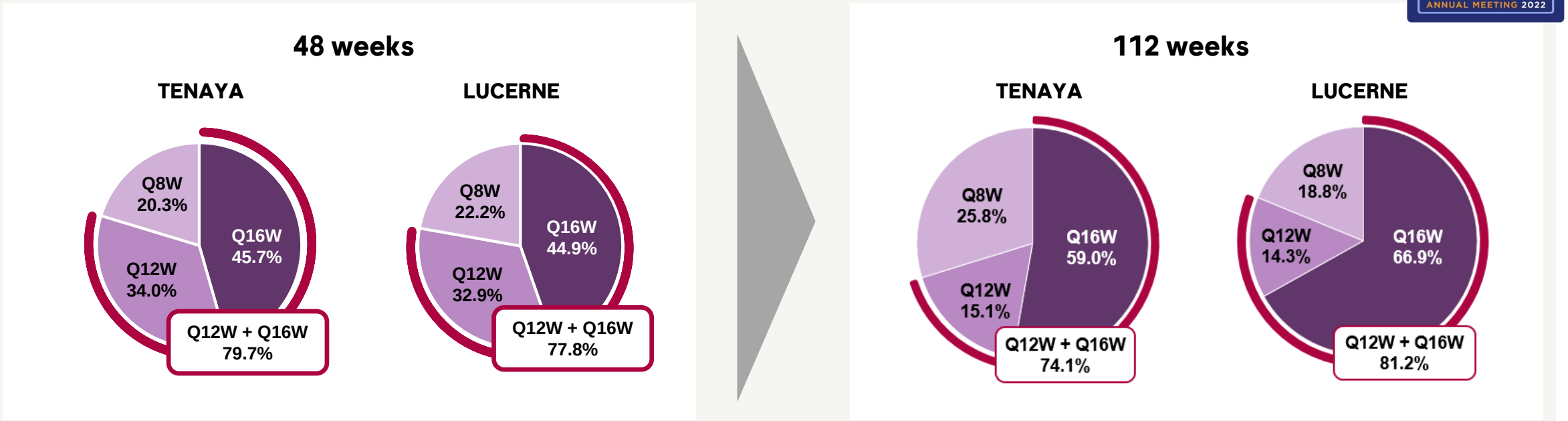
At 112 weeks Q16W dosing increases to ≥ 60%

VABYSMO

Roche

ASRS NYC ANNUAL MEETING 2022

Ph III (LUCERNE, TENAYA) in nAMD: Dosing intervals of patients at year 1 and 2



- New dual MoA to promote vascular stability, potentially leading to a more durable therapy with maintanance of long-term vision gains
- Proportion of patients achieving Q16W dosing increased from >45% at week 52 to ≥ 60% at week 112; Vabysmo given at interval of up to every 4 months achieved comparable vision gains and reductions in central subfield thickness (CST) versus aflibercept given every two months
- At two years of treatment Vabysmo was well tolerated. No cases of retinal vasculitis or occlusive retinal vasculitis were reported in the Ph III studies
- Ph III extension studies (AVONELLE-X in nAMD & Rhone-X in DME) for Vabysmo to generate long-term (up to 4 years) safety and tolerability data ongoing

Demetriades A.-M. et al., ASRS conference 2022; nAMD=neovascular age-related macular degeneration; BCVA=best-corrected visual acuity; CST=central subfield thickness; DME=diabetic macular edema; Q16W=every 16 weeks; MoA=mechanism of action; Eylea (aflibercept) is a registered trademark/product of Regeneron

2022: Key late-stage news flow* and upcoming IR events

	Compound	Indication	Milestone	
Regulatory	**Vabysmo**	nAMD/DME	US/EU approval	✓ US
	Susvimo	nAMD	EU approval	2023
	Lunsumio (mosunetuzumab)	3L+ FL	US/EU approval	✓ EU
	Tecentriq	Adjuvant NSCLC	EU approval	✓
	Hemlibra	Mild to moderate hemophilia A	EU approval	
	Polivy + R-CHP	1L DLBCL	EU/US approval	✓ EU
Phase III / pivotal readouts	**glofitamab**	3L+ DLBCL	Ph Ib NP30179	✓
	Tecentriq + tiragolumab + chemo	1L ES-SCLC	Ph III SKYSCRAPER-02	✗
	Tecentriq + chemo	Adjuvant SCCHN	Ph III IMvoke010	2023
	Tecentriq + tiragolumab	1L PDL1+ NSCLC	Ph III SKYSCRAPER-01	Continues to OS IA
	Tecentriq	Adjuvant RCC	Ph III IMmotion010	✗
	giredestrant	2/3L HR+ mBC	Ph II acelERA	✗
	Tecentriq + Avastin	Adjuvant HCC	Ph III IMbrave050	
	Venclexta + dexamethasone	t(11;14) R/R MM	Ph III CANOVA	
	Tecentriq + chemo	Neoadjuvant NSCLC	Ph III IMpower030	
	Tecentriq + tiragolumab + chemo	1L esophageal cancer	Ph III SKYSCRAPER-08	
	Alecensa	Adjuvant ALK+ NSCLC	Ph III ALINA	2023
	gantenerumab	Alzheimer's disease	Ph III GRADUATE 1/2	
	Susvimo	DME	Ph III PAGODA	
	Susvimo	DR	Ph III PAVILION	

Virtual event Angiogenesis ✓	*Virtual event MDA* ✓	*Roche ESG Day Access to Healthcare* ✓	*Virtual event ASCO* ✓	*Roche Pharma Day London*	*Virtual event ASH*
Monday, 14 February 16:30 to 17:45 CEST	***Wednesday, 16 March* 16:30 to 17:30 CEST**	***Monday, 16 May* *15:00 to 16:30 CEST***	***Monday, 6 June* *16:00 to 17:30 CEST***	***Monday, 12 September* *10:00 to 15:00 BST***	***TBA***

* Outcome studies are event-driven: timelines may change; OS=overall survival; IA=interim analysis

Diagnostics Division

Thomas Schinecker
CEO Roche Diagnostics

HY 2022: Diagnostics Division sales

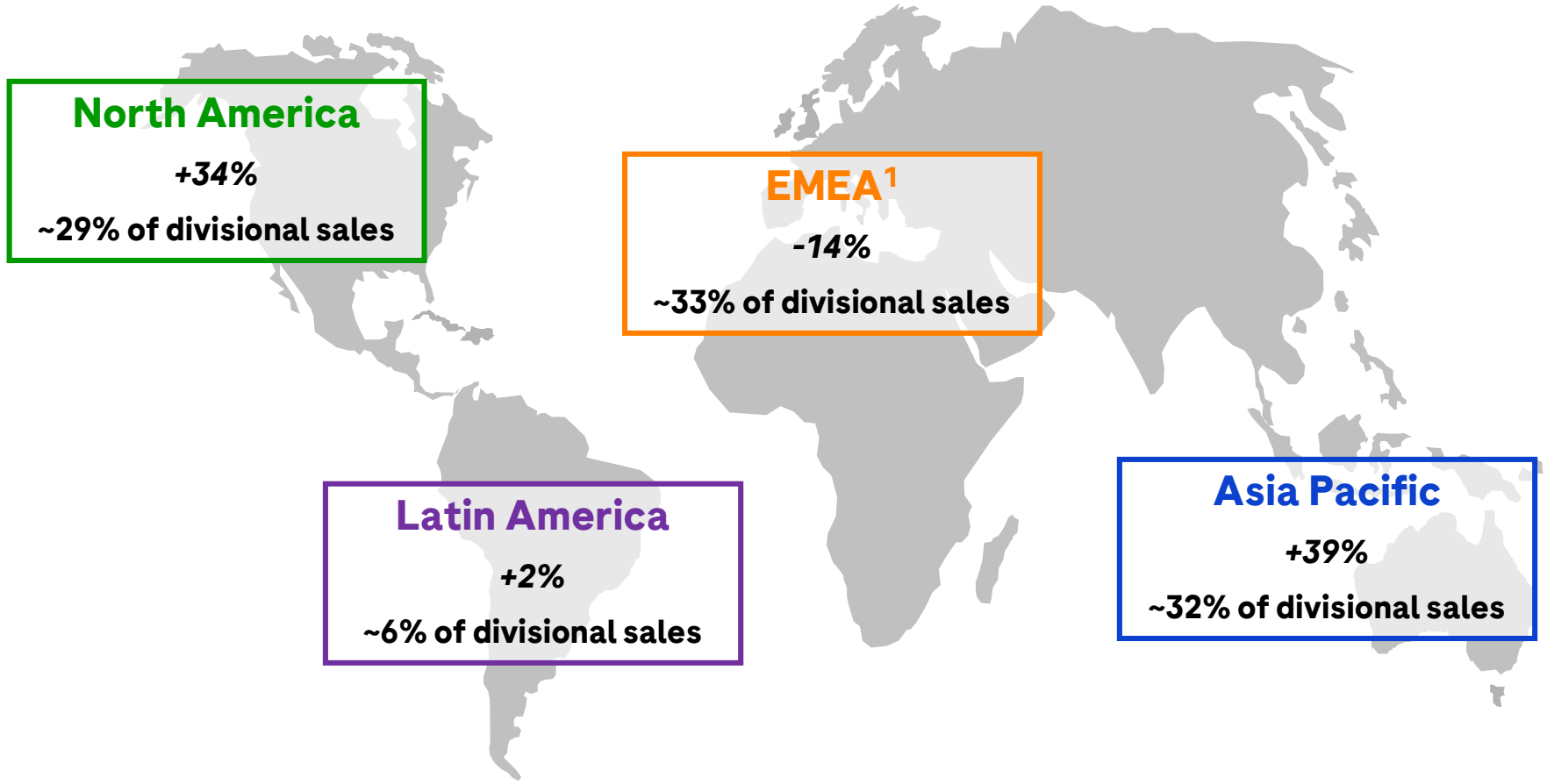
Sales increase of +11% driven by COVID-19 testing and base business

	2022 CHFm	2021 CHFm	Change in % CHF	Change in % CER
Diagnostics Division	**9,948**	**9,042**	**10**	**11**
Core Lab[1]	3,875	3,770	3	4
Point of Care[1]	2,609	1,798	45	46
Molecular Lab[1]	1,980	1,990	-1	1
Diabetes Care	832	894	-7	-5
Pathology Lab	652	590	11	10

CER=Constant Exchange Rates; underlying growth of Core Lab excluding Roche Information Solutions: +4%; [1]Sales in the Point of Care customer area include sales from the Liat business (POC molecular), and sales in the Core Lab customer area include sales from the Life Science Alliances, both previously shown as part of Molecular Lab customer area. The comparative information for 2021 has been updated accordingly. In Q1 21 POC molecular sales=90mCHF, Q2 21=92mCHF, Q3 21=175mCHF, Q4 21=194mCHF. In Q1 21 LS Alliances=21mCHF, Q2 21=23mCHF, Q3 21=23mCHF, Q4 21=20mCHF.

HY 2022: Diagnostics Division regional sales

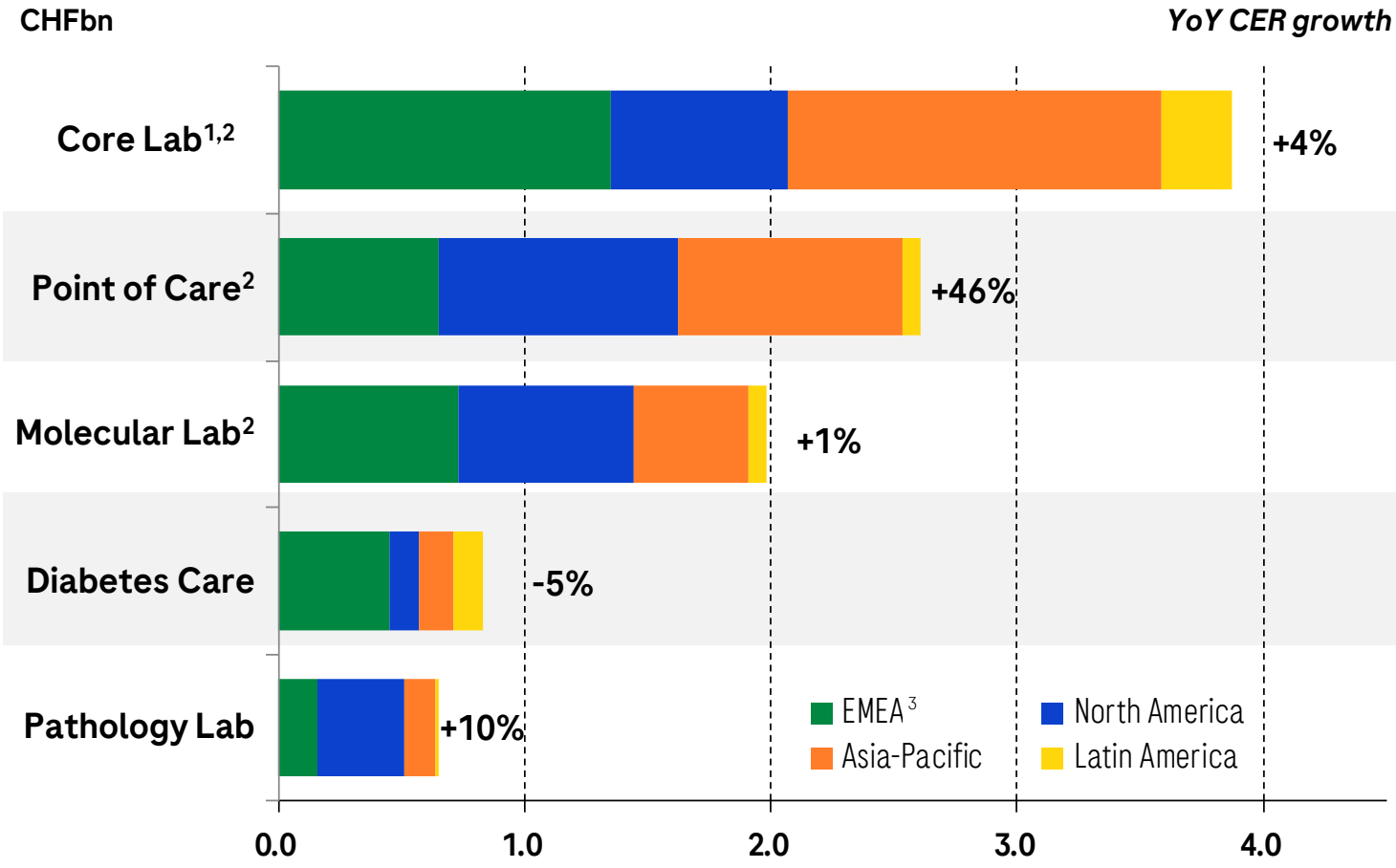
Very strong growth in Asia Pacific and North America



Growth rates at CER (Constant exchange Rates); [1] Europe, Middle East and Africa

HY 2022: Diagnostics Division highlights

Strong growth despite a high base in HY 2021



- Immunodiagnostics (+6%)
- Clinical Chemistry (+8%)
- Custom biotech (-12%)

- POC Immunodiagnostics (+54%)
- POC Molecular[3] (+75%)

- Virology (+4%)

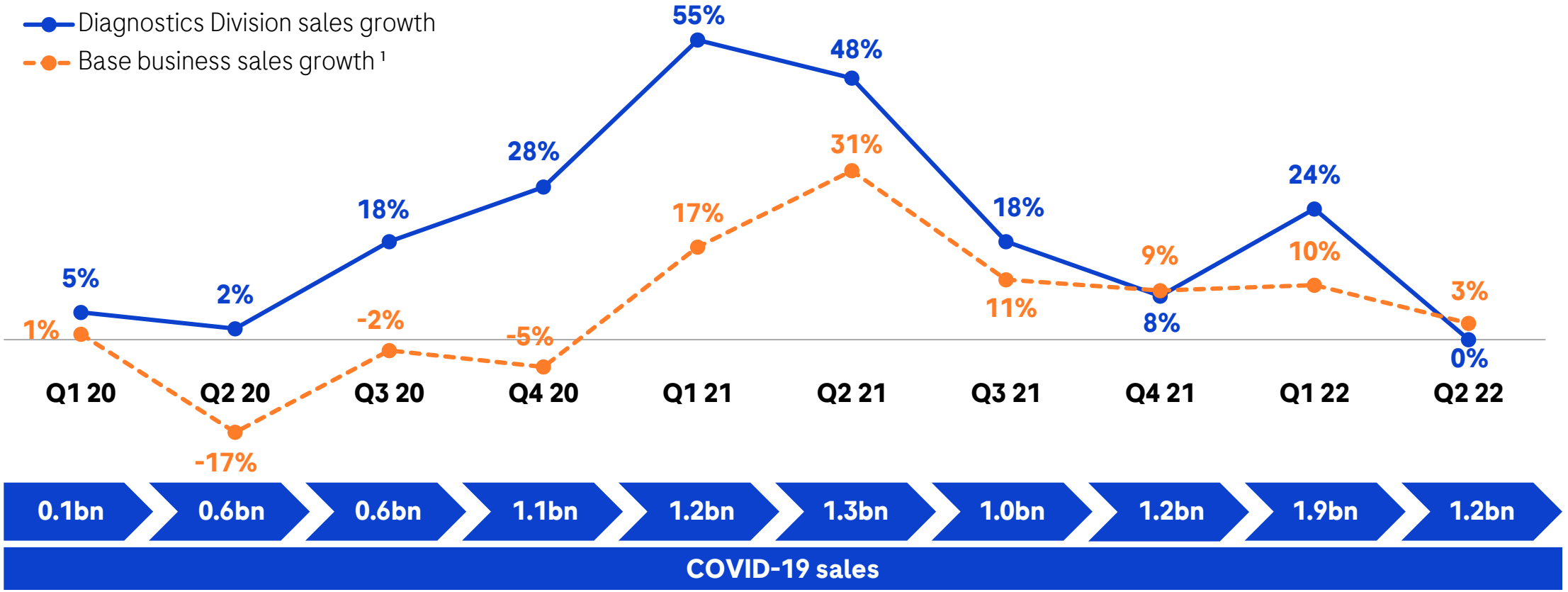
- Blood glucose monitoring (-7%)
- Insulin delivery systems (+17%)

- Advanced staining (+9%)
- Companion diagnostics (+26%)

CER=Constant Exchange Rates; POC=point of care; [1] Underlying growth of Core Lab excluding Roche Information Solutions: +4%; [2] Sales in Point of Care customer area include sales from the Liat business (POC molecular), and sales in the Core Lab customer area include sales from the Life Science Alliances, both previously shown as part of Molecular Lab customer area. The comparative information for 2021 has been updated accordingly. In Q1 21 POC molecular sales=90mCHF, Q2 21=92mCHF, Q3 21=175mCHF, Q4 21=194mCHF. In Q1 21 LS Alliances=21mCHF, Q2 21=23mCHF, Q3 21=23mCHF, Q4 21=20mCHF; [3] EMEA=Europe, Middle East and Africa

Diagnostics Division sales growth by quarter

Strong COVID-19 sales and base business growth



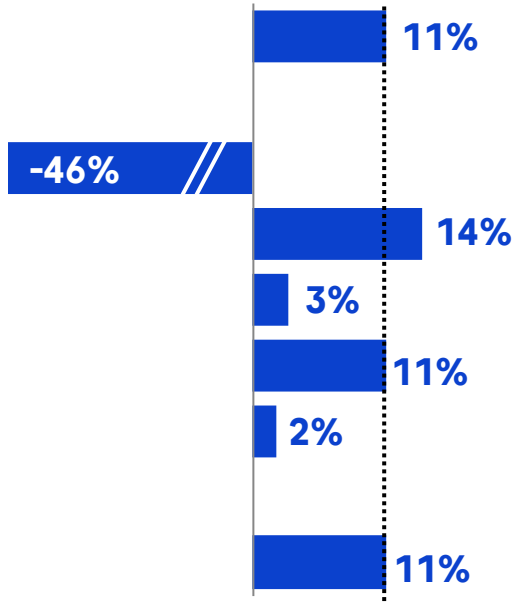
Growth rates at CER (Constant exchange Rates); [1] Quarterly sales growth excluding COVID-19 sales

HY 2022: Diagnostics Division

Strong core operating profit growth of +11%

	2022 CHFm	2022 % sales
Sales	**9,948**	**100**
Royalties & other op. inc.	25	0.3
Cost of sales	-4,875	-49.1
M & D	-1,363	-13.7
R & D	-899	-9.0
G & A	-276	-2.8
Core operating profit	**2,560**	**25.7**

2022 vs. 2021
CER growth



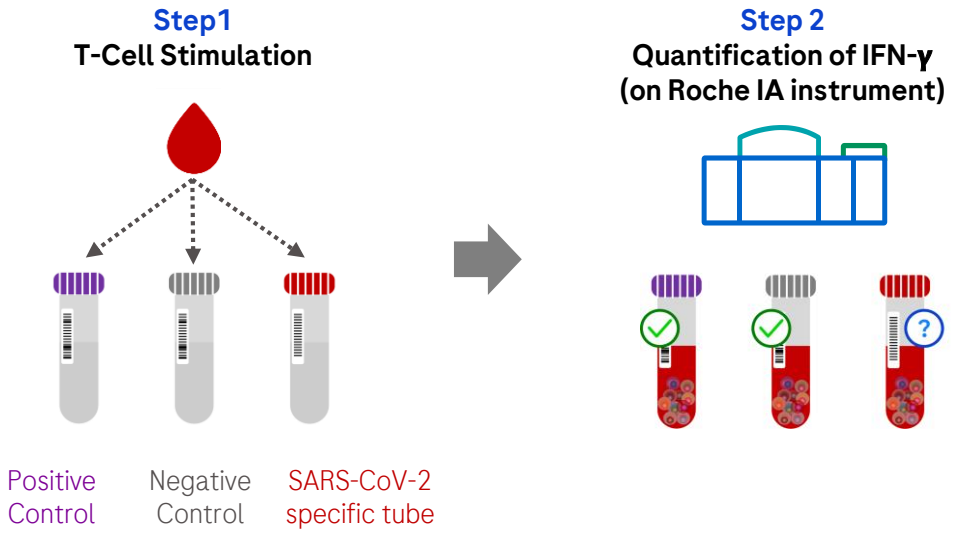
+10% in CHF

CER=Constant Exchange Rates

Upcoming launch of Elecsys® IGRA SARS-CoV-2

Improving the understanding of immunity against SARS-CoV-2

Testing workflow



Positive control: Mitogen stimulus, controls for sample quality and T-cell fitness

Negative control: no stimulus, controls for baseline IFN-γ level

SARS-CoV-2 specific tube: contains SARS-CoV-2 specific antigens in coating, stimulates Anti-SARS-CoV-2 T-Cell response

✓ Quality control passed ? SARS-CoV-2 specific IFN-γ response, determines reactivity

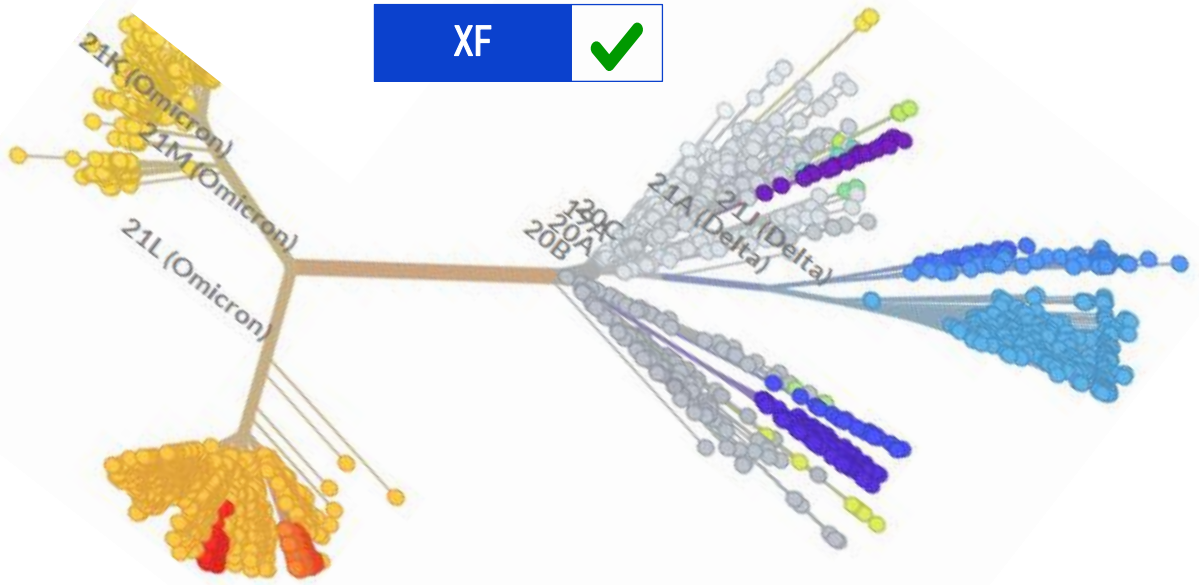
- Detects T-cell mediated immune response by measuring IFN-γ release upon stimulation with 189 SARS-CoV-2 specific antigens, indicative of past exposure or vaccination
- Complements SARS-CoV-2 antibody tests to better understand host response and protective immunity
- May support risk stratification for progression to severe disease and/or protection

IA=Immunoassay; IFN-γ=Interferon gamma; IGRA=Interferon gamma release assay

TIB-Molbiol SARS-CoV-2 menu for monitoring new variants

Detecting major variants in hours vs a week for sequencing

- BA.1 & BA.1.1 ✓
- BA.3 ✓
- XE ✓
- BA.2 & BA.2.2 ✓
- BA.2.12.1 ✓
- BA.2.75 ✓



- XF ✓
- Delta ✓
- BA.5 ✓
- BA.4 ✓

BA.5 is becoming the dominant SARS-CoV-2 variant

Monkeypox assays supplied to WHO

Three assays developed in record time to monitor epidemiologic spread of the virus

LightMix® Modular Orthopox Viruses — **New**

Detects all orthopox viruses (e.g. monkeypox, cowpox, camelpox)

LightMix® Modular Monkeypox Viruses — **New**

Detects all variants of monkeypox viruses only

LightMix® Modular Orthopox Subtyping — **New**

Detects all orthopox viruses. If positive, simultaneously indicate if monkeypox and differentiate West African from Central African monkeypox type

Pox virus illustration. ROGER HARRIS/SCIENCE PHOTO LIBRARY/GettyImages; WHO=World Health Organisation

cobas® HPV self-sampling solution

Increasing screening adherence to potentially reach 1.7bn women globally

342,000 women
die per year of cervical cancer, ~90% in LMIC with majority **unscreened** [2]

cobas® HPV self-sampling solution[1]	cobas® HPV test	CINtec® Plus Cytology	CINtec® Histology	iThemba Life®
				
Self sampling	**Screen**	**Triage**	**Diagnose**	**Disease management**
New	✓	✓	✓	✓

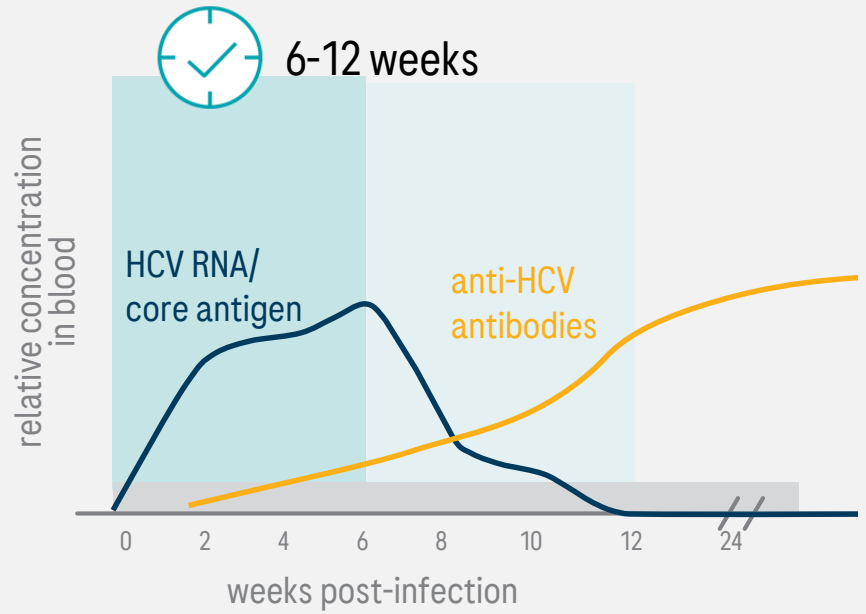
90% correlation between clinician collected endocervical and self-collected vaginal specimens[1]

LMICs=Low- and middle-income countries; HPV=Human papillomavirus; [1] Available in CE market; [2] www.unaids.org/en/cervical_cancer

Elecsys® HCV DUO Immunoassay[1]

Early diagnosis of hepatitis C virus (HCV) enables optimal treatment

Diagnostic window period[2]



Testing strategies relying on first-line HCV antibody testing may lead to underdiagnoses in populations with ongoing transmission

- 58m people being chronically infected globally (80% unaware[3]) and about 1.5m new infections per year
- Hepatitis C leading cause for liver cancer and curative treatments are available[4]
- Shortening diagnostics window by up to 3 weeks compared to HCV antibody test
- Dual detection of antigen and antibody simplifies the HCV testing/screening algorithm while complementing RNA testing
- WHO elimination strategy aims to significantly reduce new infections and deaths by 2030

RNA: ribonucleic acid WHO: World Health Organisation; [1] Available in CE market; [2] Glynn S.A. et al. (2005). Dynamics of viremia in early hepatitis C virus infection. Transfusion 45, 994–1002. https://doi.org/10.1111/j.1537-2995.2005.04390.x; [3] Global progress report on HIV, viral hepatitis and sexually transmitted infections, 2021. Accountability for the global health sector strategies 2016–2021: actions for impact. Geneva: World Health Organization; 2021. Licence: CC BY-NC-SA 3.0 IGO. https://www.who.int/publications/i/item/9789240027077; [4] Fact Sheet. Viral Hepatitis and Liver Cancer. CDC; 2016. https://www.cdc.gov/nchhstp/newsroom/docs/factsheets/viral-hep-liver-cancer.pdf

BenchMark ULTRA PLUS system[1]

Next instrument generation for tissue advanced staining

Optimized workflow

- Shortened reagent validation
- Reduced turnaround time
- Fewer manual interventions

Quality

- Proven, industry leading stain quality
- Robust detection kits

Flexible solutions

- View, manage, complete and print system data remotely
- Optimized protocols and slide staining based on individual staining drawers

Broadest menu[2]

- 200 + ready to use or pre-dilute assays
- Most complete companion diagnostics assay menu

CHF 2.3bn accessible market[3]

CDx=Companion Diagnostics; [1] Available in CE market; [2] Not all available at launch, ramping up to full menu by the end of 2022; [3] Market book 2021

VENTANA DP 600 slide scanner

Enhancing digital pathology with high volume slide scanner

High volume scanning

240 slide capacity (40x more than DP200)

Flexible workflows

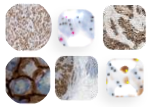
improve efficiency

Leverages optical system of DP 200

consistent image quality

Continuous loading

walk-away automation

DP 600[1] | Slide scanner *New* →  Navify | Workflow software ✓ →  App[2] | AI image analysis ✓

[1] Available in CE market; [2] Internal and third parties

Roche analyst virtual event on diagnostics division

AACC 2022 in Chicago

July 26, 6-7:15pm CDT

Speakers:

- **Thomas Schinecker,** CEO Roche Diagnostics
- **Ann Costello,** Global Head Roche Diagnostics Solutions
- **Cindy Perettie,** Head of Roche Molecular Labs
- **Palani Kumaresan,** Head of Research & Development Roche Diagnostics
- **Matt Sause,** President & CEO Roche Diagnostics North America

AACC=Annual Scientific Meeting and Clinical Lab exposition

Key launches 2022

	Area	Product	Description	Market	Status
Instruments	Pathology Lab	BenchMark ULTRA PLUS	Automated immunohistochemistry/in situ hybridization (ISH) advanced staining platform with enhanced software capabilities, workflow and testing efficiency	US & CE	✓
		DP600	High capacity pathology slide scanner for high volume digitization applications	WW	✓
	Core Lab	cobas® pure integrated solutions	Serum work area analyzer for low-to-medium sized labs	US	
	Molecular Lab	cobas® 5800	Real-time PCR molecular testing for low volume labs	US	
		Digital LightCycler	Novel digital PCR platform for lab developed tests (LDTs) and in-vitro diagnostics labs	WW	
	POC	cobas® pulse	Handheld device combining professional Glucose Meter and a digital platform to host Roche owned and 3rd party digital clinical decision support applications	US	
Tests	Pathology Lab	HER2 Low Breast	Assay for diagnosis of HER2 low expression breast cancer	US	
		PRAME	First immunohistochemistry assay for differential diagnosis of benign from malignant melanocytic lesions in skin cancer	US & CE	
		HPV Self Sampling	Self sample collection device for patients at home to collect sample for cervical cancer testing	CE	✓
	Core Lab	cobas® HCV Duo	Antigen/antibody combined assay for faster diagnosis of hepatitis C	CE	✓
		Elecsys pTau/AB42 ratio Gen2 (CSF)	Detect amyloid disease and enable a broader availability of testing for patients suspected of Alzheimer's Disease	US	
	Molecular Lab	cobas® SARS-CoV-2 DUO	Automated RT-PCR assay for use on the cobas® 6800/8800 systems	US[2] & OUS[1]	✓
		cobas® 5800 Menu Expansion	Assays to test for SARS-CoV-2, chlamydia trachomatis (CT)/neisseria gonorrhoeae (NG) and cytomegalovirus (CMV)	US & CE	
Digital Solutions	Lab Insights	Chronic Kidney Disease InSight	Digital solution (mobile app and dashboard) providing insights for chronic kidney disease patient management	CE	
		Cervical Cancer Screening	Digital solution (mobile app and workflow) improving the management of screening programs for cervical cancer	CE	
		cobas® infinity edge suite	Portfolio of digital products to support decentralization of testing and data, to launch commercially with an open ecosystem	CE	
		Lab Insights Platform	Data integration platform for laboratory customers across disciplines	CE	
	Diabetes Care	Payer Dashboard	Population-level insights via dashboard for HCPs, Admins and Payers	OUS[3]	✓
		mySugar Pump V2.0	Extended functionalities (e.g. temporary basal rate import from a connected insulin pump), expanded smartphone compatibility	OUS[3]	

CE: European Conformity, US: FDA approval, WW: Worldwide including CE, US and China, OUS: Outside the US; PCR: Polymerase Chain Reaction; RT: Real Time; [1] Research Use Only; [2] EUA: Emergency Use Authorization; [3] Only selected countries

Finance

Alan Hippe
Chief Financial Officer

HY 2022 results

Focus on cash and balance sheet

Outlook

HY 2022: Highlights

Business

- Group sales growth of +5% driven by good performance of Pharmaceuticals and Diagnostics division
- Pharma established products and new launches performing well; Diagnostics continuing with strong double-digit sales
- Core operating profit up +9% and Core EPS growth +11% (including +6.1%p net accretion Novartis share repurchase and 3.5%p from Ultomiris patent settlement)

Cash flow

- Operating Free Cash Flow of CHF 9.8bn, +21% growth driven by strong operating results and movements in net working capital
- Net debt higher by CHF 2.7bn vs. Dec 31st 2021

Net financial result

- Core net financial expense increased by CHF -370m driven by loss on equity securities

IFRS

- Net income +12% driven by the operating results and lower intangible assets amortization

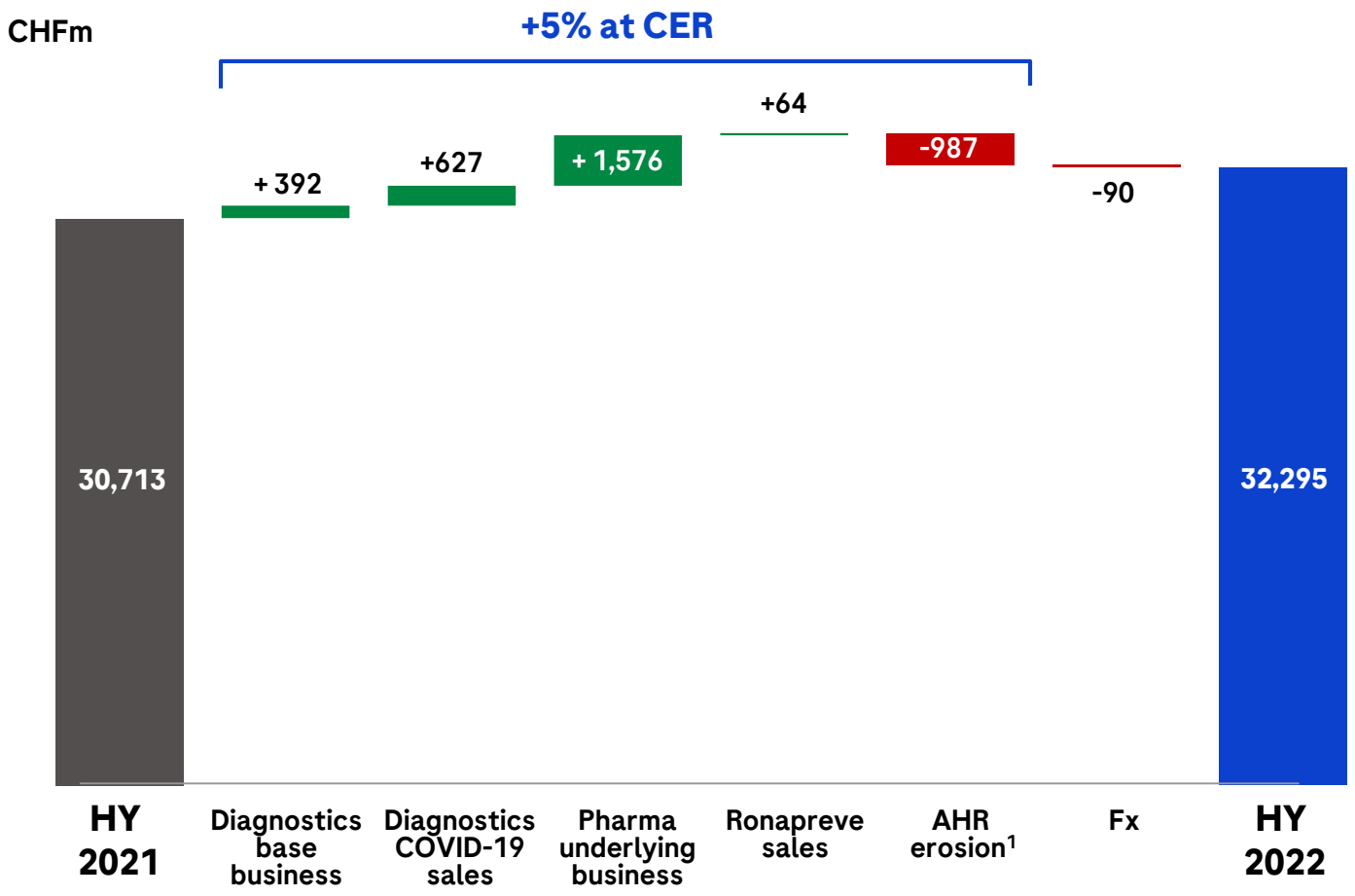
Growth rates at CER (Constant exchange Rates)

HY 2022: Overall strong Group performance

	2022 CHFm	2021 CHFm	Change in % CHF	Change in % CER
Sales	**32,295**	**30,713**	**5**	**5**
Core operating profit	**12,668**	**11,652**	**9**	**9**
as % of sales	*39.2*	*37.9*		
Core net income	**10,160**	**9,527**	**7**	**7**
as % of sales	*31.5*	*31.0*		
Core EPS (CHF)	**11.76**	**10.56**	**11**	**11**
IFRS net income	**9,161**	**8,216**	**12**	**12**
as % of sales	*28.4*	*26.8*		
Operating free cash flow	**9,782**	**8,117**	**21**	**21**
as % of sales	*30.3*	*26.4*		
Free cash flow	**7,097**	**6,038**	**18**	**18**
as % of sales	*22.0*	*19.7*		

CER=Constant Exchange Rates

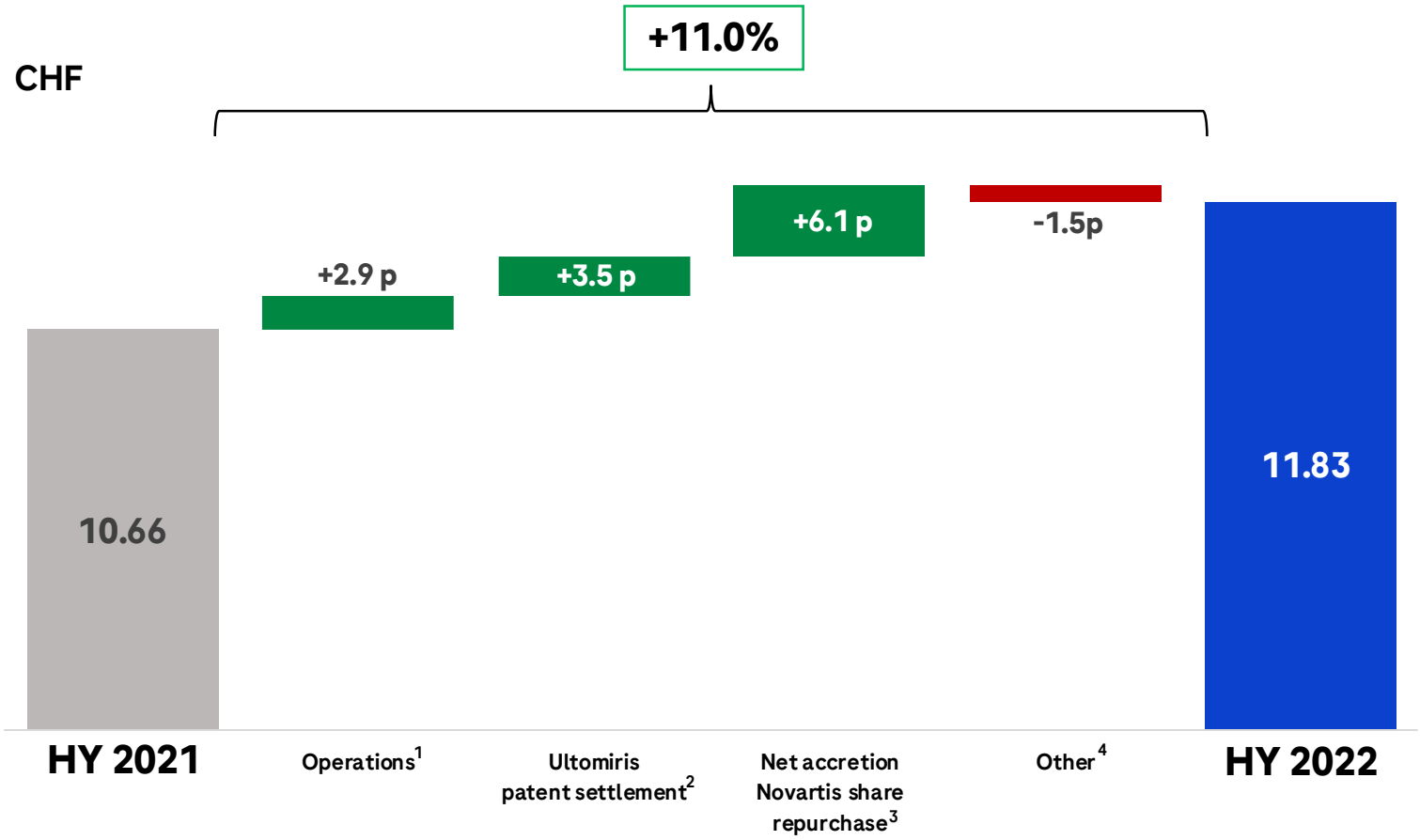
HY 2022: Growing topline compensating biosimilar erosion



HY 2021 and HY 2022 values in reported CHFm, variances in CERm; [1] AHR: Avastin, Herceptin, Rituxan/MabThera sales erosion (2.5bn for FY 2022)

HY 2022: Core EPS development

Strong EPS development driven by growth in operations and accretion effect

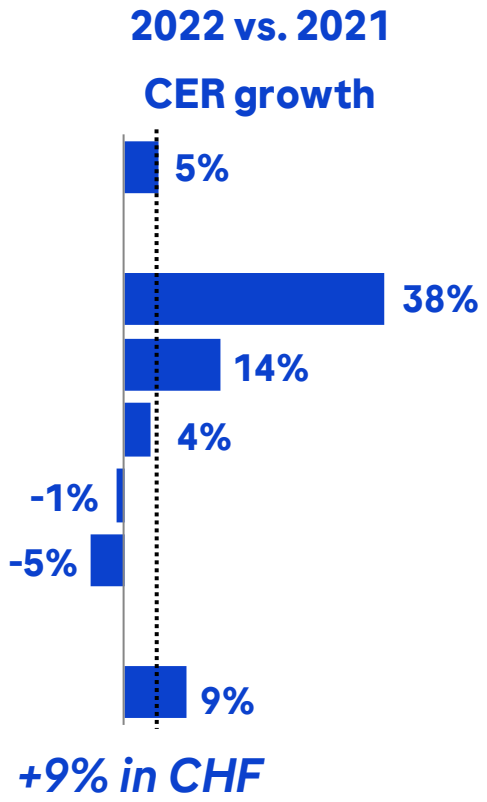


At Constant Exchange Rates (CER); [1] Core operating profit excluding impacts from Ultomiris patent settlement, [2] Net impact from the Ultomiris patent settlement: gross income net of income tax and non-controlling interests, [3] Impact of lower number of shares partially offset by increase in interest expense, [4] Other (net) include effects from changes in financial income/expenses (incl. gains/losses on equity securities), changes in effective tax rate and changes in non controlling interests

HY 2022: Group operating performance

Core OP up +9% driven by higher gross profit and ROOI, OPEX stable

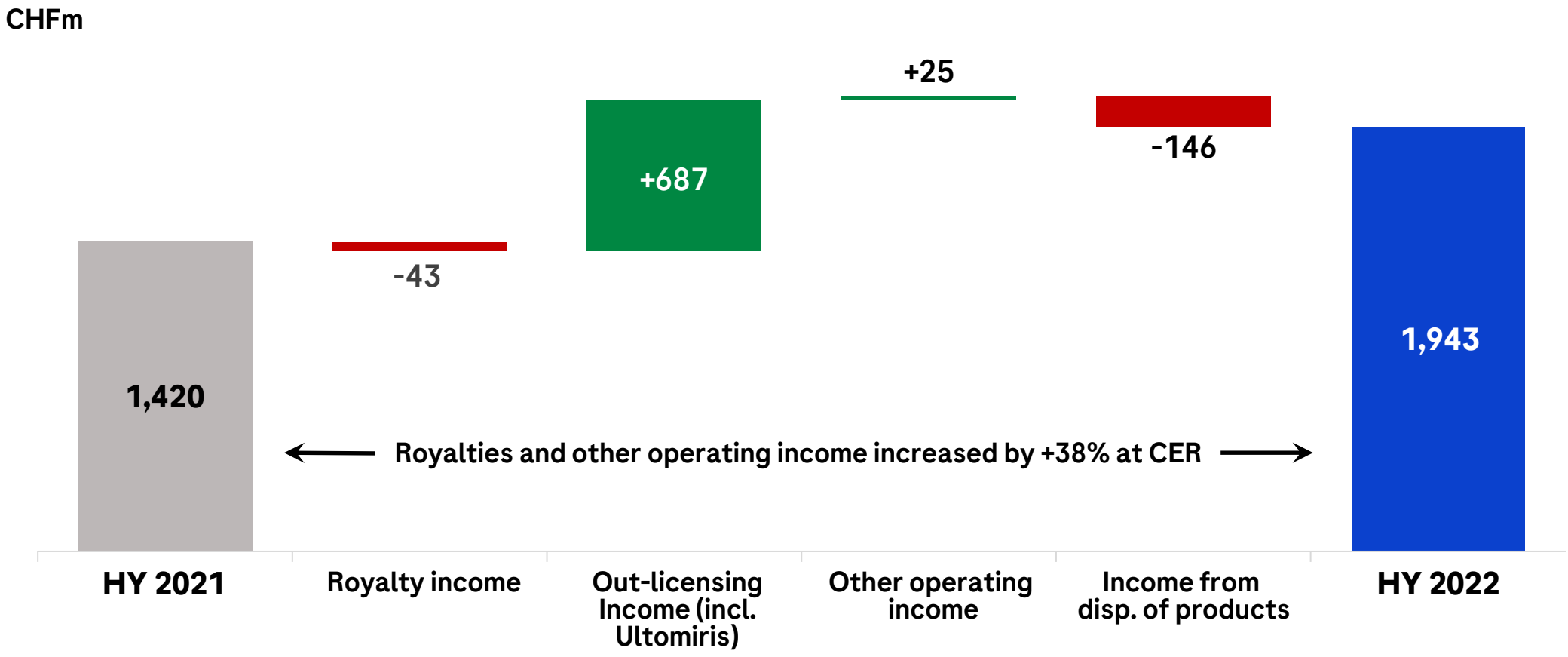
	2022	
	CHFm	abs. CER
Sales	**32,295**	**+1,672**
Royalties & other op. inc.	1,943	+536
Cost of sales	-9,305	-1,119
M & D	-4,459	-159
R & D	-6,628	+85
G & A	-1,178	+63
Core operating profit	**12,668**	**+1,078**



CER=Constant Exchange Rates

HY 2022: Royalties and other operating income

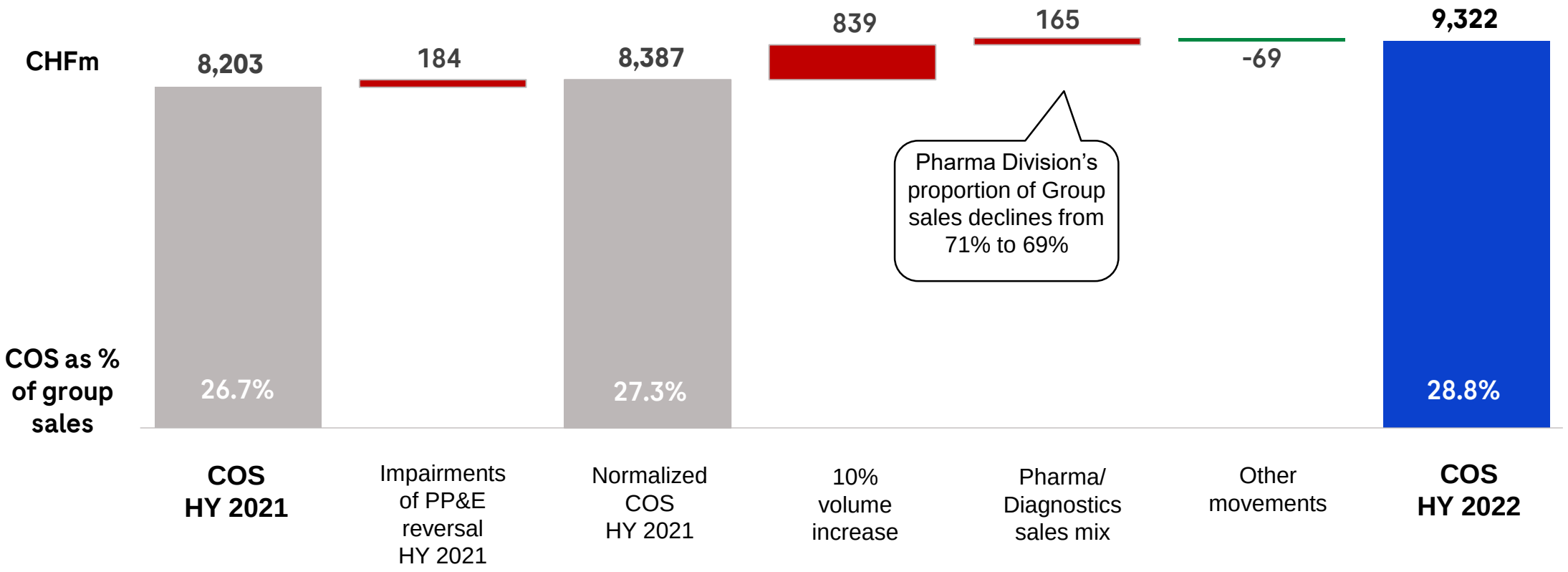
Higher income mainly driven by Ultomiris patent settlement



CER = Constant Exchange Rates

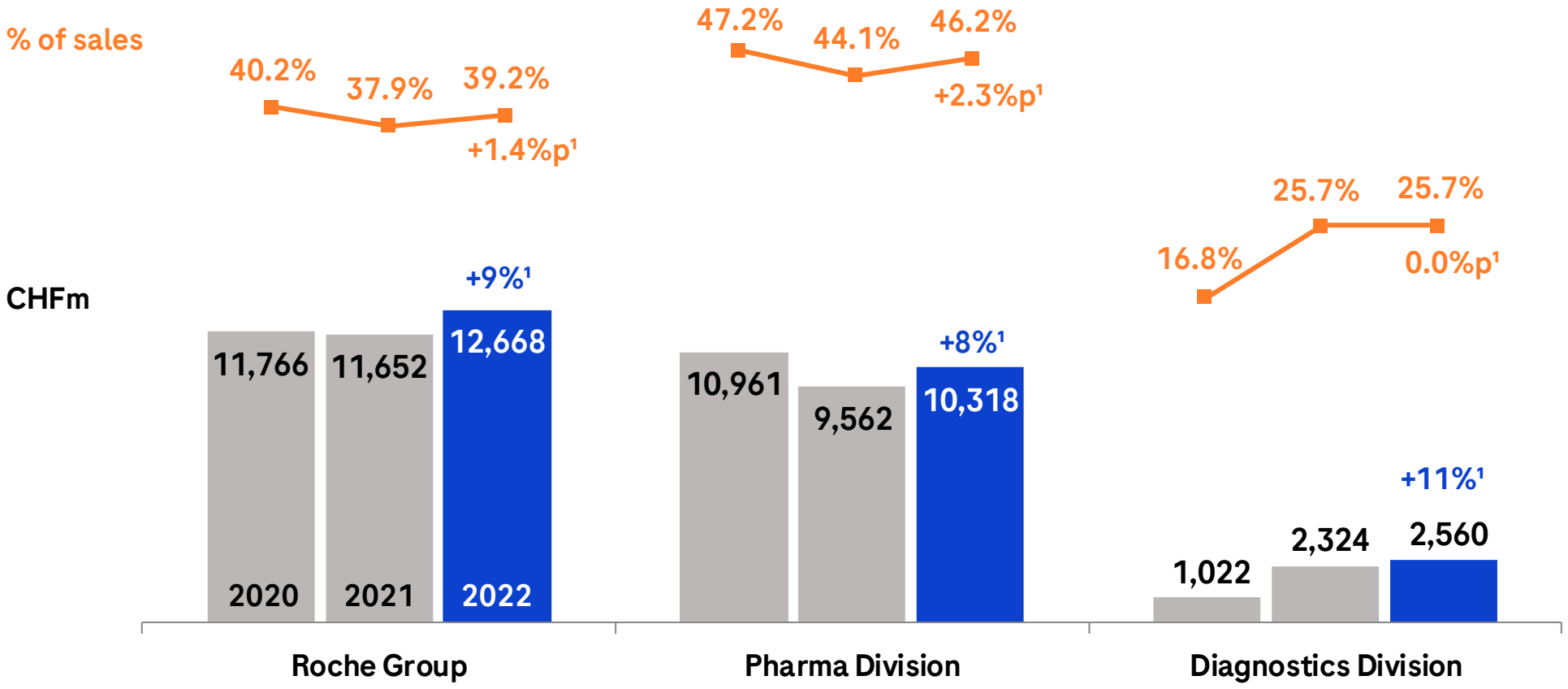
HY 2022: Group Core cost of sales (COS)

Increase due to PP&E reversal in 2021, volume growth and change in the Pharma/Diagnostics sales mix



All at CER=Constant Exchange Rates; COS=Cost of Sales; PP&E = Property, plant and equipment

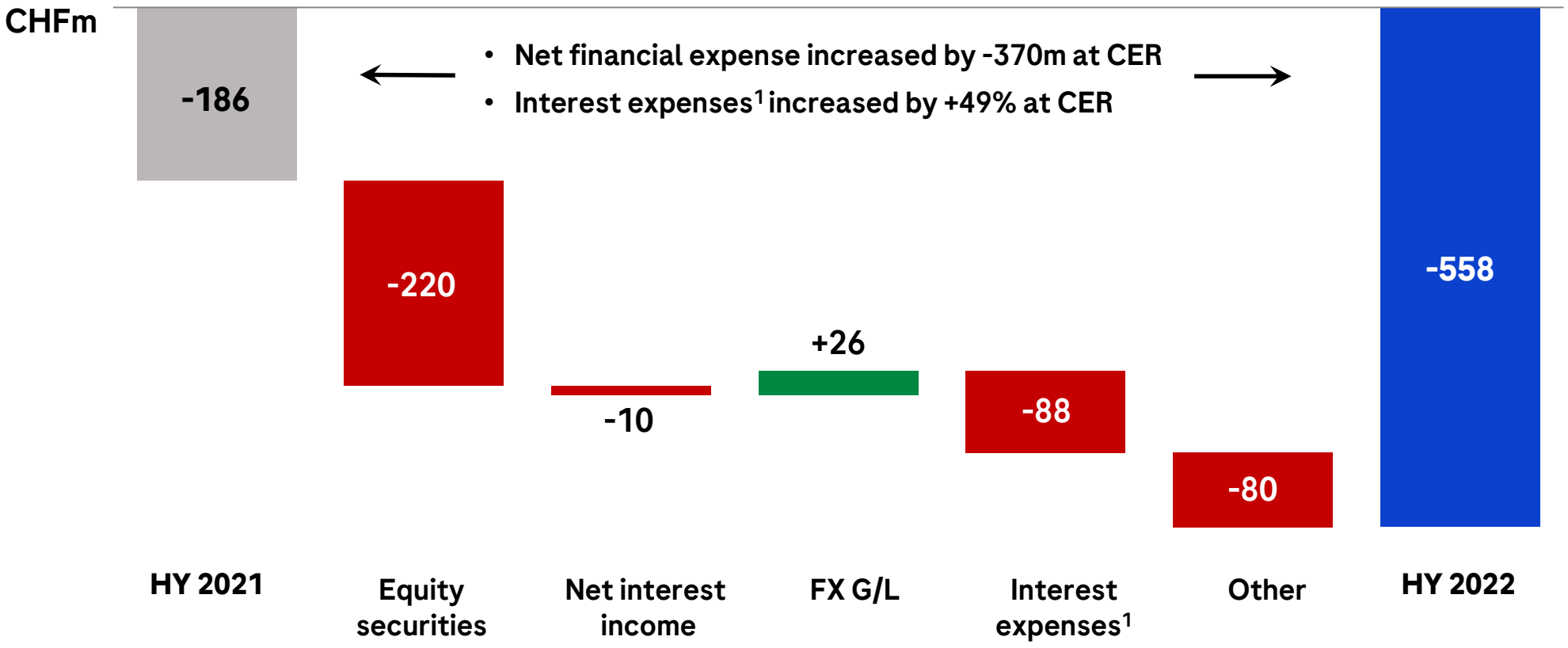
HY 2022: Core operating profit and margin



[1] At CER=Constant Exchange Rates

HY 2022: Core net financial result

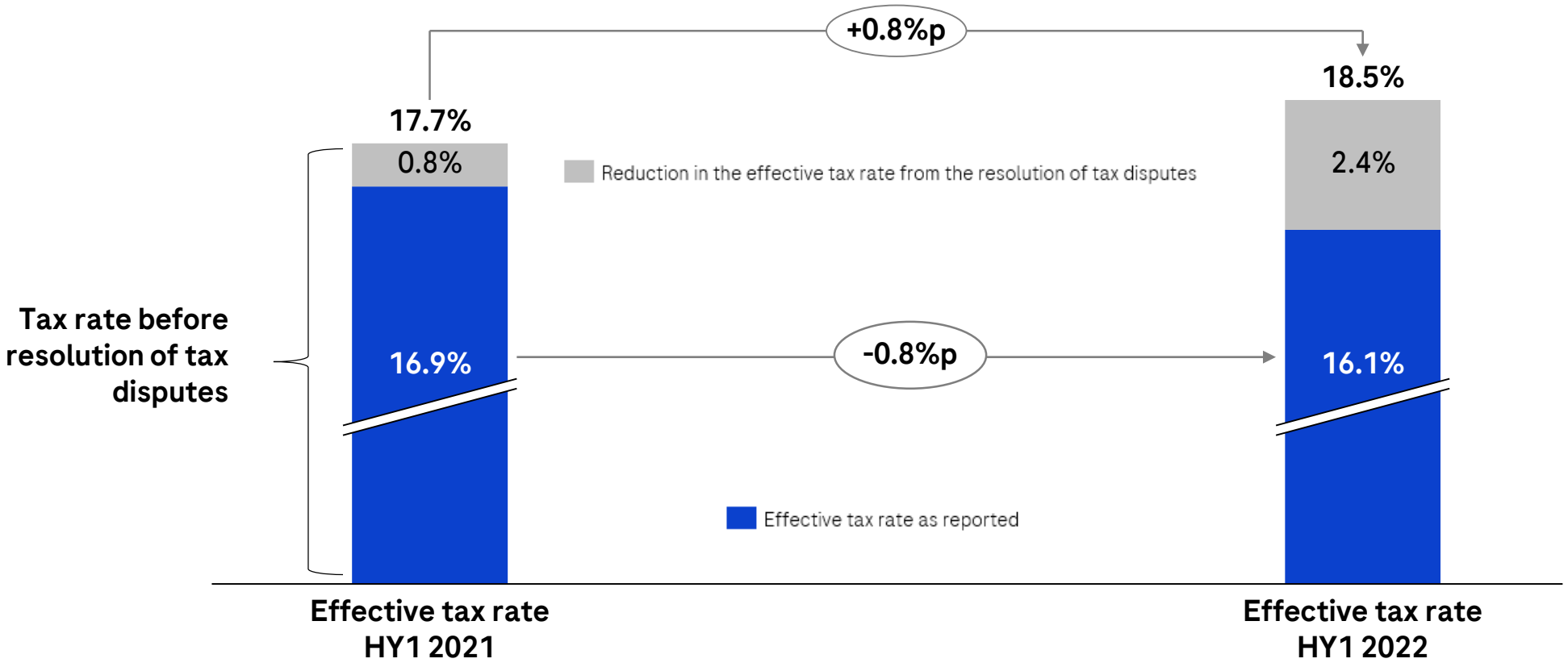
Higher net financial expenses driven by loss on Equity securities and higher interest expenses



CER=Constant Exchange Rates; [1] incl. amortization of debt discount and net gains on interest rate derivatives

HY 2022: Group Core tax rate

Tax rate before resolution of tax disputes increased due to higher profits in higher tax jurisdictions



HY 2022: Non-core and IFRS income

Decrease in non-core operating expenses driven by lower amortisation of intangible assets due to Esbriet and lower costs for global restructuring plans

	2021	2022		Change in %	
	CHFm	CHFm	CHFm	CHF	CER
Core operating profit	**11,652**	**12,668**	**1,017**	**+9**	**+9**
Global restructuring plans	-511	-265	246		
Amortisation of intangible assets	-830	-468	362		
Impairment of intangible assets[1]	-165	-423	-258		
M&A and alliance transactions	-37	17	54		
Legal & Environmental[2]	-32	19	51		
Total non-core operating items	-1,575	-1,120	455		
IFRS Operating profit	**10,077**	**11,547**	**1,469**	**+15**	**+15**
Total financial result & taxes	-1,861	-2,386	-525		
IFRS net income	**8,216**	**9,161**	**944**	**+12**	**+12**

CER = Constant Exchange Rates; [1] incl. goodwill; [2] incl. pension plan settlements

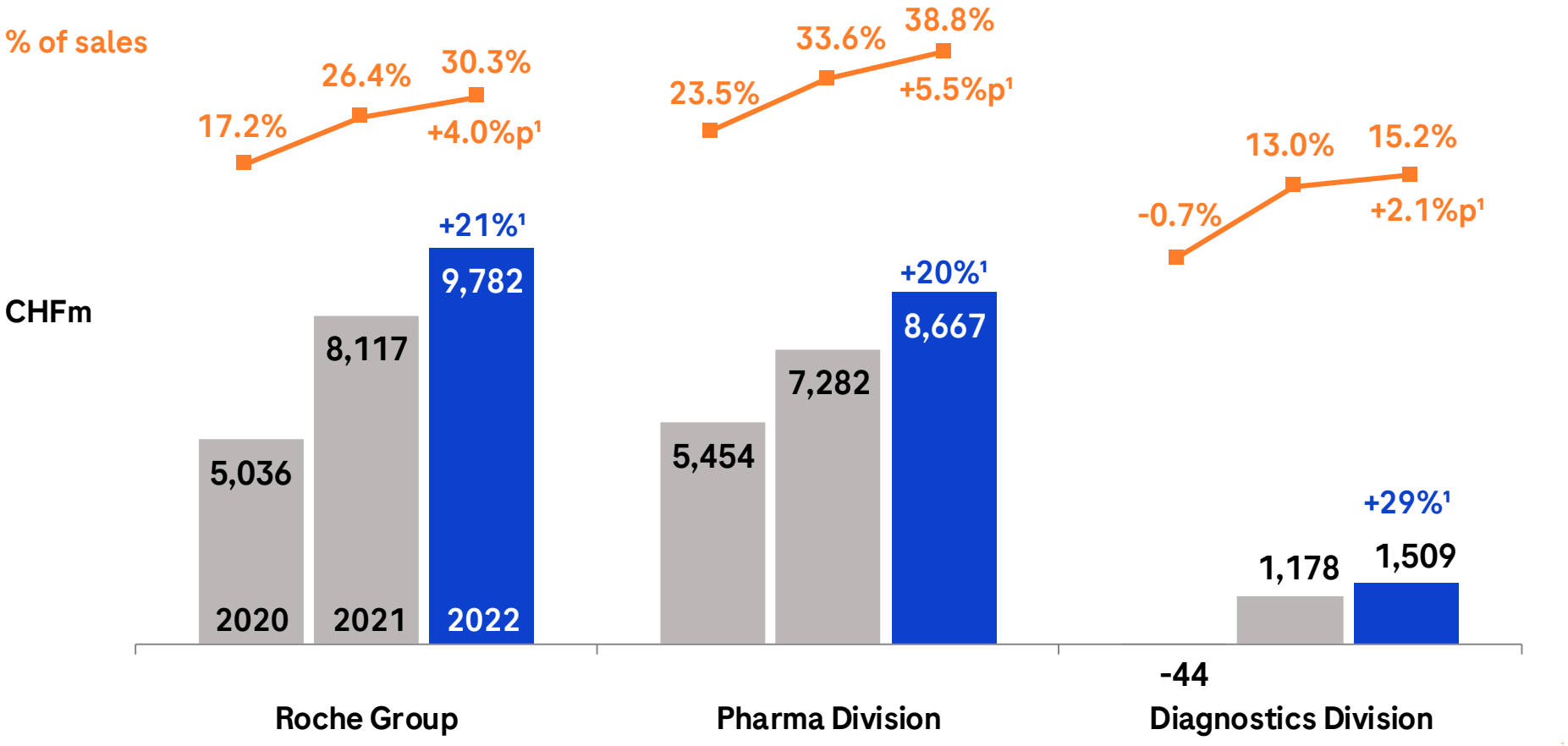
HY 2022 results

Focus on cash and balance sheet

Outlook

HY 2022: Operating free cash flow and margin

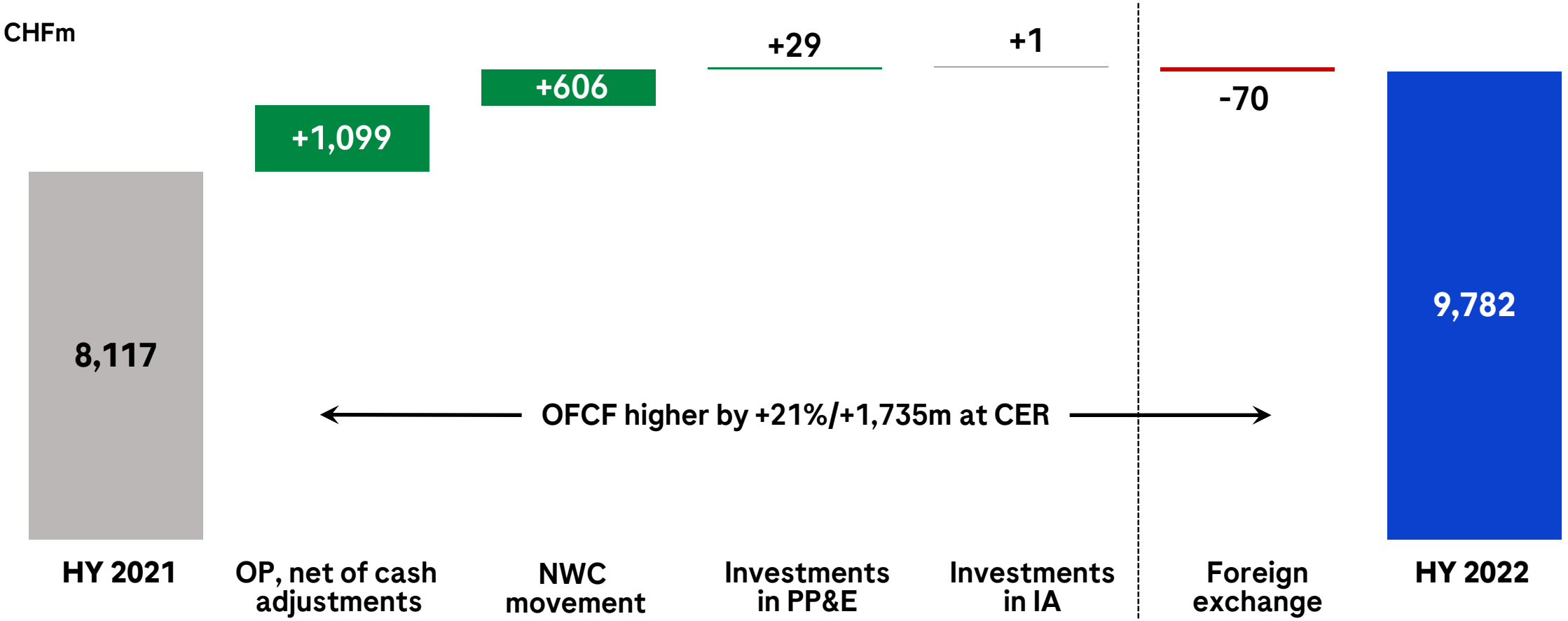
OFCF of +21% driven by higher OP, net of cash adjustments and NWC movements



[1] At CER=Constant Exchange Rates

HY 2022: Group operating free cash flow

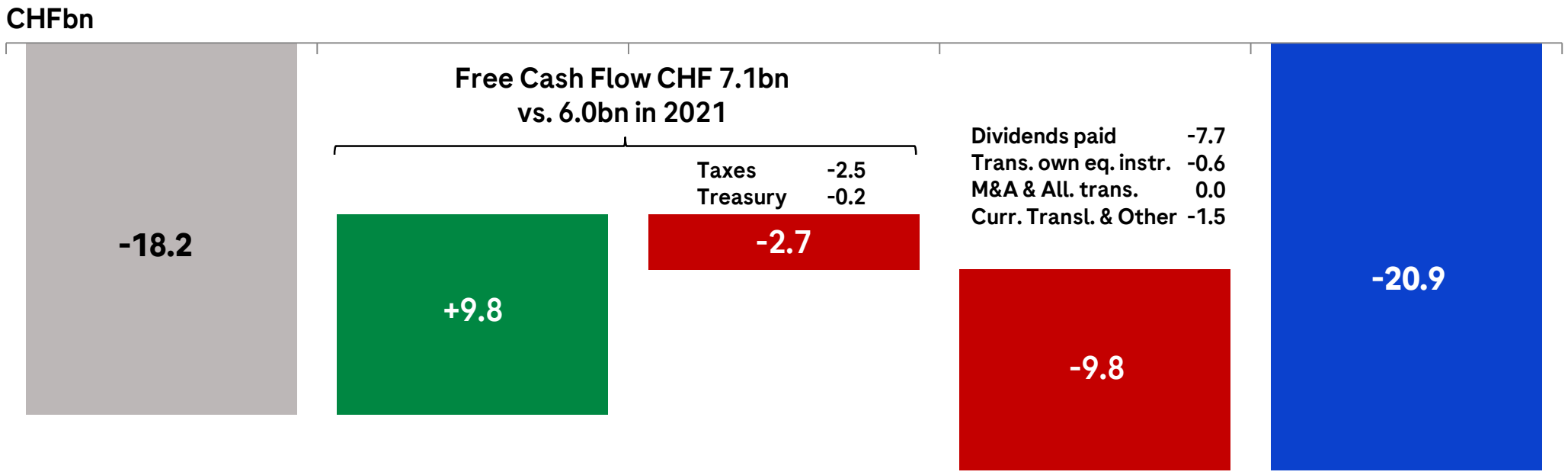
OFCF up by +21% driven by higher Operating Profit, net of cash adjustments



CER = Constant Exchange Rates; OP = Operating Profit; NWC: Net Working Capital; PP&E = Property, Plant & Equipment incl. increase of lease liability paid; IA = Intangible Assets

HY 2022: Group net debt development

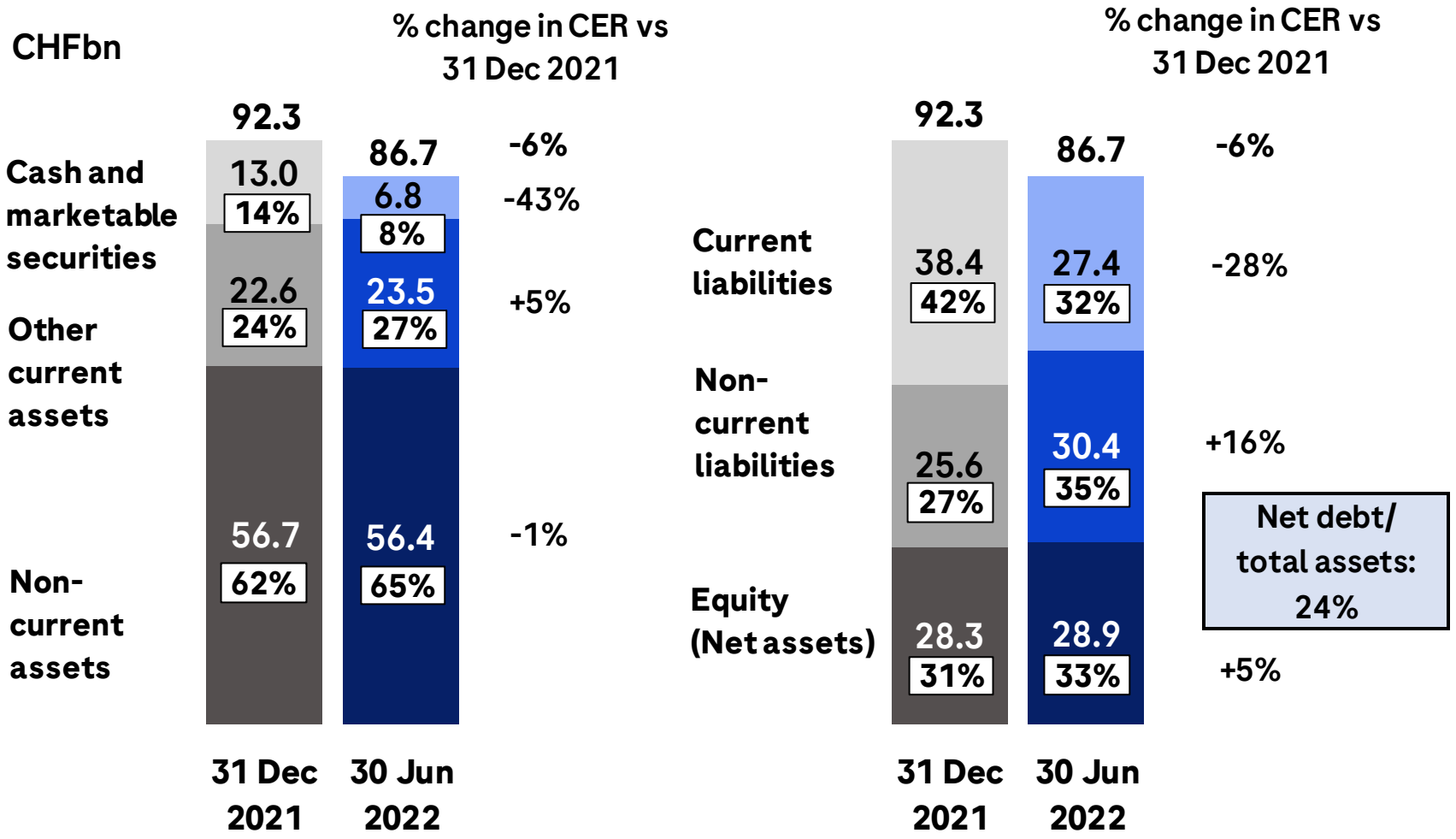
Net debt higher by CHF -2.7bn compared to previous YE 2021



Thereof investments in innovation:		Intangible Asset	Equity	M&A	Total
	2022	-0.3	0.0	0.0	-0.3
	2021	-0.3	0.0	-1.9	-2.2

Balance sheet 30 June 2022

Equity ratio at 33% (YE 2021: 31%) and net debt to assets at 24% (YE 2021: 20%)



CER = Constant Exchange Rates

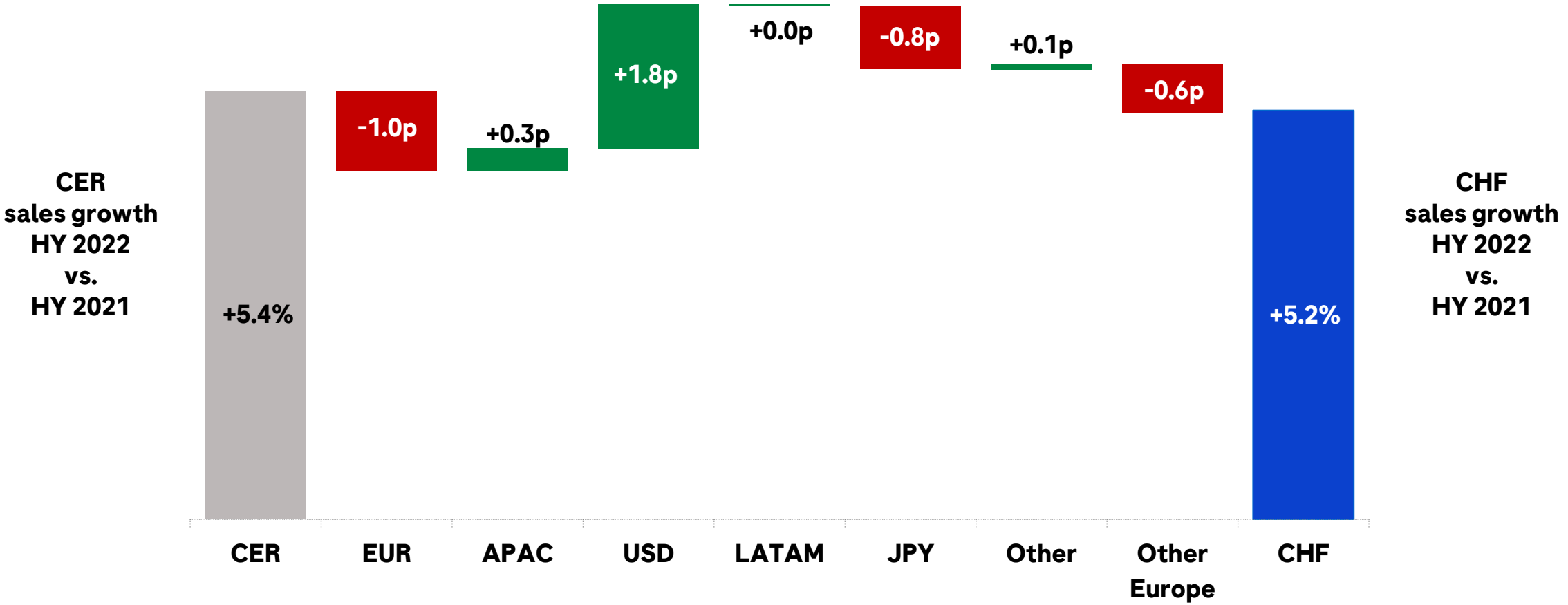
HY 2022 results

Focus on cash and balance sheet

Outlook

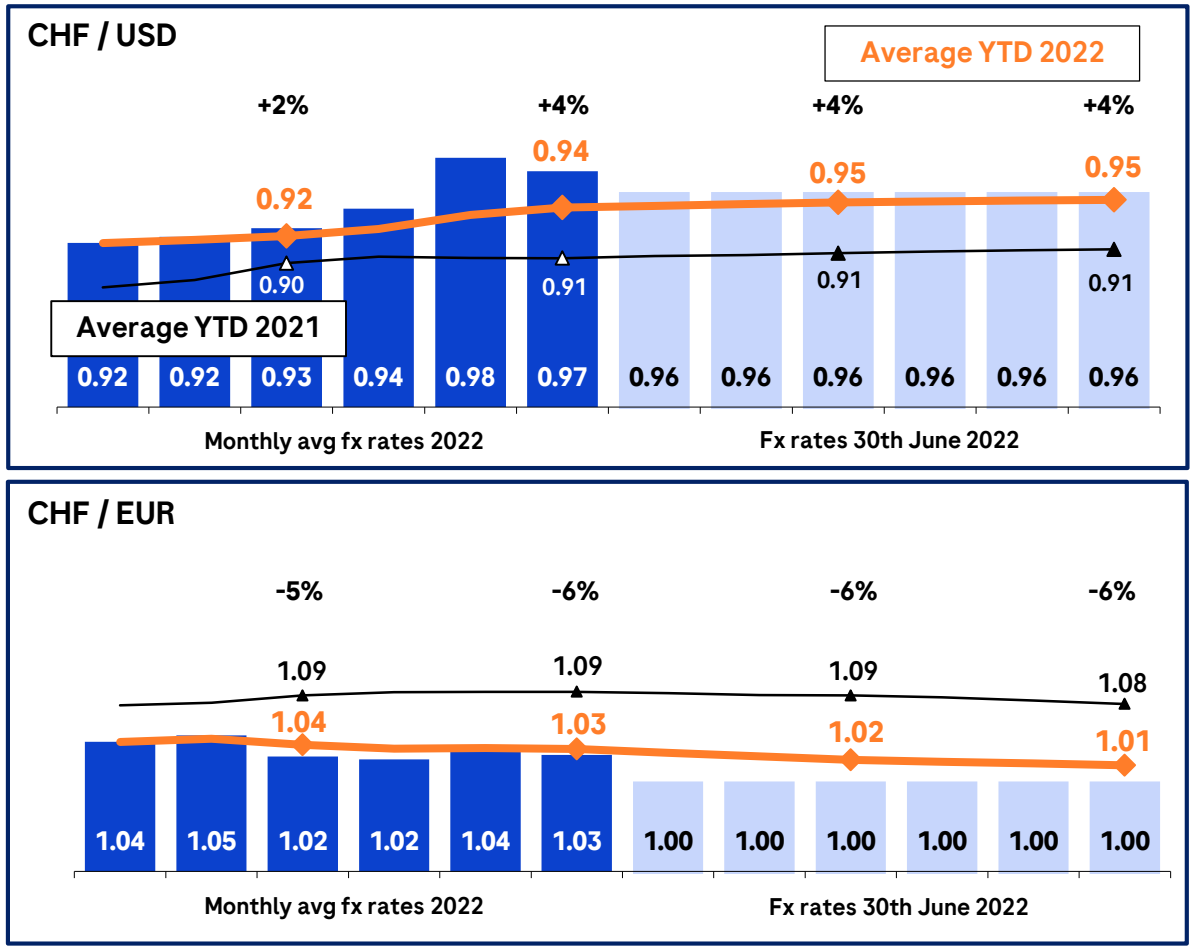
Exchange rate impact on sales growth

Negative impact driven by the EUR, JPY and "other Europe", partially offset by USD



CER = Constant Exchange Rates (avg full year 2021)

Low currency impact expected in 2022



Assuming the 30 June 2022 exchange rates remain stable until end of 2022, 2022 impact[1] is expected to be (%p):

	Q1	HY	Sep YTD	FY
Sales	-1	0	-1	-1
Core operating profit		0		-1
Core EPS		0		-1

[1] On group growth rates

2022 outlook

Group sales growth[1]	• Stable to low-single digit
Core EPS growth[1]	• Low- to mid-single digit
Dividend outlook	• Further increase dividend in Swiss francs

[1] At Constant Exchange Rates (CER)

Doing now what patients need next

Roche Group development pipeline

Marketed products development programmes

Roche Pharma global development programmes

Roche Pharma research and early development (pRED)

Genentech research and early development (gRED)

Spark

Pharma sales appendix

Diagnostics sales appendix

Foreign exchange rates information

Changes to the development pipeline

HY 2022 update

New to phase I

2 NMEs:
RG6351 NME – retinal disease
RG6526 camonsertib – solid tumors

1 AI:
RG6264 Phesgo OBI - HER2+ BC

New to phase II

1 NME:
RG6237 latent myostatin + Evrysdi – SMA

New to phase III

4 AIs:
RG1594 Ocrevus SC - PPMS & RMS
RG6171 giredestrant + Phesgo – 1L ER+/HER2+ BC
RG1450 gantenerumab – early Alzheimer's
RG7828 Lunsumio (mosunetuzumab) + Polivy - 2L+ SCT ineligible DLBCL

New to registration

Removed from phase I

1 NME:
RG6338 NME – metabolic diseases

2 AIs:
RG7440 ipatasertib + rucaparib - mCRPC, solid tumors
RG7440 ipatasertib - prostate cancer, pretreated

Removed from phase II

1 NME:
RG6173 anti-tryptase - asthma

1 AI:
RG6171 giredestrant – 2/3L ER+/HER2- mBC

Removed from phase III

Approvals

1 NME (EU):
RG7828 Lunsumio (mosunetuzumab) - 3L FL

1 AI (US):
RG7916 Evrysdi SMA presymptomatic pediatric <2mo

2 AIs (EU):
RG7596 Polivy – 1L DLBCL
RG7446 Tecentriq - NSCLC adj

Status as of July 21, 2022

Roche Group development pipeline

Phase I (49 NMEs + 11 AIs)

RG6007	HLA-A2-WT1 x CD3	AML
RG6026	glofitamab monotherapy + combos	heme tumors
RG6058	tiragolumab combos	heme & solid tumors
RG6076	CD19-4-1BBL combos	heme tumors
RG6129	HLA-A2-MAGE-A4 x CD3	solid tumors
RG6160	cevostamab (FcRH5 x CD3)	r/r multiple myeloma
RG6171	giredestrant (SERD)	solid tumors
RG6114	inavolisib (mPI3K alpha inh)	solid tumors
RG6156	EGFRvIII x CD3	glioblastoma
RG6180	autogene cevumeran ± T	solid tumors
RG6185	belvarafenib (pan-RAF inh) + Cotellic ± T	solid tumors
RG6189	FAP-CD40 ± T	solid tumors
RG6194	runimotamab (HER2 x CD3)	BC
RG6234	GPRC5D x CD3	multiple myeloma
RG6264	Phesgo OBI	HER2+ BC
RG6279	PD1-IL2v ± T	solid tumors
RG6286	-	colorectal cancer
RG6290	MAGE-A4 ImmTAC ± T	solid tumors
RG6292	CD25 MAb ± T	solid tumors
RG6323	IL15/IL15Ra-Fc ± T	solid tumors
RG6330	KRAS G12C	solid tumors
RG6333	CD19 x CD28 + glofitamab	r/r NHL
RG6344	BRAF inhibitor (3)	solid tumors
RG6392	-	oncology
RG6433	SHP2i	solid tumors
RG6440	TGFβ (SOF10)	solid tumors
RG6526**	camonsertib	solid tumors
RG7446	Morpheus platform	solid tumors
RG7601	Venclexta ± azacitidine	r/r MDS
RG7802	cibisatamab ± T	solid tumors
RG7827	FAP-4-1BBL monotherapy + combos	solid tumors
RG7828	Lunsumio (mosunetuzumab) monotheraphy + combos	heme tumors
CHU	FIXa x FX	hemophilia
CHU	glypican-3 x CD3	solid tumors
CHU	codrituzumab	HCC
CHU	CD137 switch antibody	solid tumors
CHU	LUNA18	solid tumors
CHU	SPYK04	solid tumors
SQZ	PBMC vaccine	solid tumors
RG6287	-	IBD
RG6341	-	asthma
RG6418	selnoflast (NLRP3 inh)	inflammation
RG6315	-	immunologic disorders
RG7828	Lunsumio (mosunetuzumab)	SLE
RG7880	efmarodocokin alfa	aGVHD
RG6006	Abx MCP	bacterial infections
RG6319	LepB inhibitor	complicated urinary tract infection
RG6035	BS-CD20 MAb	multiple sclerosis
RG6091	rugonersen (UBE3A LNA)	Angelman syndrome
RG6163	-	psychiatric disorders
RG6182	-	neurodegenerative diseases
RG6237	latent myostatin	neuromuscular disorders
RG6289	-	Alzheimer´s
RG7637	-	neurodevelopmental disorders
RG6120	VEGF-Ang2 DutaFab	nAMD
RG6312	-	geographic atrophy
RG6351	NME	retinal disease
RG6501*	OpRegen	geographic atrophy
RG7921	-	nAMD
CHU	AMY109	endometriosis

Phase II (22 NMEs + 11 AIs)

RG6026	glofitamab + chemo	1L ctDNA high risk DLBCL
RG6058	tiragolumab + T	NSCLC
	tiragolumab + T + chemo	1L non-squamous NSCLC
	tiragolumab + T + chemo	NSCLC neoadj-adj
	tiragolumab + T	cervical cancer
	tiragolumab + T	1L PD-L1+ mSCCHN
RG6107	crovalimab	sickle cell disease
RG6139	PD1 x LAG3	solid tumors
RG6180	autogene cevumeran + pembrolizumab	1L melanoma
RG6354	zinpentraxin alfa (PRM-151)	myelofibrosis
RG6357	SPK-8011	hemophilia A
RG6358	SPK-8016	hemophilia A with inhibitors to factor VIII
RG7601	Venclexta + carfilzomib	r/r MM t(11;14)
CHU	Oncolytic Type 5 adenovirus	esophageal cancer
RG6149	astegolimab (Anti-ST2)	COPD
RG6299†	ASO factor B	IgA nephropathy
RG7854/RG7907/RG6346/RG6084[1]	TLR7 ago(3)/CpAM (2)/ siRNA/PDL1 LNA	HBV
RG6359	SPK-3006	Pompe disease
RG6100	semorinemab	Alzheimer's
RG6102	BS-gantenerumab	Alzheimer's
RG6237	latent myostatin + Evrysdi	SMA
RG6416	bepranemab	Alzheimer's
RG7412	crenezumab	familial Alzheimer's healthy pts
RG7816	alogabat (GABA Aa5 PAM)	ASD
RG7906	ralmitaront	schizophrenia
RG7935	prasinezumab	Parkinson's
RG6147	galegenimab (HtrA1)	geographic atrophy
RG6179	-	DME
RG7774	-	retinal disease
RG6299†	ASO factor B	geographic atrophy

New Molecular Entity (NME)
Additional Indication (AI)
Oncology / Hematology
Immunology
Infectious Diseases

Metabolism
Neuroscience
Ophthalmology
Other

CHU - Chugai managed
†IONIS managed
SQZ - SQZ Biotechnology managed
*Lineage Cell Therapeutics managed
**Repare Therapeutics managed

[1]combination platform
RG-No - Roche/Genentech
T=Tecentriq
BS=Brain Shuttle
OBI=On-Body Delivery System

Status as of July 21, 2022

Roche Group development pipeline

Phase III (10 NMEs + 43 AIs)

RG3502	Kadcyla + T	2L+ HER-2+ PD-L1+ mBC
	Kadcyla + T	HER-2+ eBC high-risk
RG6026	glofitamab + chemo	2L+ DLBCL
RG6058	tiragolumab + T	1L esophageal cancer
	tiragolumab + T	1L PD-L1+ NSCLC
	tiragolumab + T	locally advanced esophageal cancer
	tiragolumab + T	stage III unresectable 1L NSCLC
RG6107	crovalimab	PNH
	crovalimab	aHUS
RG6114	inavolisib (mPI3K alpha inh)	1L HR+ mBC
RG6171	giredestrant (SERD)	1L ER+/HER2- mBC
	giredestrant (SERD)	ER+ BC adj
	giredestrant (SERD) + Phesgo	1L ER+/HER2+ BC
RG7440	ipatasertib + abiraterone	1L CRPC
RG7446	Tecentriq + platinum chemo	NSCLC neoadj
	Tecentriq	NMIBC, high risk
	Tecentriq	RCC adj
	Tecentriq + cabozantinib	RCC adv
	Tecentriq + cabozantinib	2L NSCLC
	T ± chemo	SCCHN adj
	T + capecitabine or carbo/gem	1L TNBC
	T + paclitaxel	TNBC adj
	T + Avastin	HCC adj
	T ± chemo	1L mUC
	Tecentriq SC	2L NSCLC
	Tecentriq	ctDNA+ high-risk MIBC
	T+ lurbinectedin	1L maintenance SCLC

RG7601	Venclexta	r/r MM t(11:14)
	Venclexta + azacitidine	1L MDS
RG7828	Lunsumio (mosunetuzumab) + lenalidomide	2L+ FL
	Lunsumio (mosunetuzumab) + Polivy	2L+ DLBCL
RG7853	Alecensa	ALK+ NSCLC adj
RG3648	Xolair	food allergy
RG6354	zinpentraxin alfa (PRM-151)	IPF
RG7159	Gazyva	lupus nephritis
	Gazyva	membranous nephropathy
	Gazyva	systemic lupus erythematosus
RG6152	Xofluza	influenza, pediatric (0-1 year)
	Xofluza	influenza direct transmission
RG1450	gantenerumab	prodromal to mild Alzheimer's
	gantenerumab	early Alzheimer's
RG1594	Ocrevus higher dose	RMS & PPMS
	Ocrevus SC	RMS & PPMS
RG6042	tominersen	Huntington's
RG6168	Enspryng	myasthenia gravis
RG6356	delandistrogene moxeparvovec (SRP-9001)	DMD
RG7845	fenebrutinib	RMS
RG7845	fenebrutinib	PPMS
RG6321	Susvimo (PDS)	DME
	Susvimo (PDS)	DR
	Susvimo (PDS)	wAMD, 36-week
RG7716	Vabysmo (faricimab)	BRVO
	Vabysmo (faricimab)	CRVO

Registration US & EU (4 NMEs + 8 AIs)

RG6013	Hemlibra[1]	mild to moderate hemophilia A
RG6026	glofitamab[2]	3L+ DLBCL
RG6396	Gavreto[1]	RET+ MTC, TC
RG7596	Polivy[3]	1L DLBCL
RG7828	Lunsumio (mosunetuzumab)[4]	3 L+ FL
RG6321	Susvimo (PDS) [1]	wAMD
RG7716	Vabysmo (faricimab) [1]	DME
	Vabysmo (faricimab) [1]	wAMD
RG6152	Xofluza	influenza, pediatric
RG56413+ RG6412	Ronapreve[2]	SARS-CoV-2 hospitalised
RG1569	Actemra[4]	COVID-19 pneumonia
RG7916	Evrysdi[1]	SMA pediatric <2months

[1] Approved in US, filed in EU
[2] Filed in the EU
[3] Approved in EU
[4] Approved in EU, filed in US

T=Tecentriq
PDS=Port Delivery System with ranibizumab

New Molecular Entity (NME)
Additional Indication (AI)
Oncology / Hematology
Immunology
Infectious Diseases
Metabolism
Neuroscience
Ophthalmology
Other

Status as of July 21, 2022

NME submissions and their additional indications

Projects in phase II and III

New Molecular Entity (NME)
Additional Indication (AI)
Oncology / Hematology
Immunology
Infectious Diseases
Metabolism
Neuroscience
Ophthalmology
Other

✓ Indicates submission to health authorities has occurred
Unless stated otherwise submissions are planned to occur in US and EU
PDS=Port Delivery System with ranibizumab
Mosun=mosunetuzumab
†IONIS managed

2022

RG6026	**glofitamab** 3L+ DLBCL ✓
RG6058	**tiragolumab + T** 1L esophageal cancer (CN)
RG6107	**crovalimab** PNH (CN)
RG1450	**gantenerumab** prodromal to mild Alzheimer‘s

2023

RG6058	**tiragolumab + T** 1L PD-L1+ NSCLC
RG6321	**Susvimo (PDS)** DME
RG6321	**Susvimo (PDS)** DR (US)
RG7716	**Vabysmo (faricimab)** BRVO/CRVO

2024

RG6058	**tiragolumab + T** Stage III unresectable 1L NSCLC
RG6107	**crovalimab** aHUS
RG6114	**inavolisib (mPI3K alpha inh)** 1L HR+ BC
RG6354	**zinpentraxin alfa (PRM-151)** IPF
RG6356	**delandistrogene moxeparvovec (SRP-9001)** DMD

2025 and beyond

RG6026	**glofitamab + chemo** 2L DLBCL
RG6026	**glofitamab + chemo** 1L ctDNA+ high risk DLBCL
RG6058	**tiragolumab + T** 1L PD-L1+ cervical cancer
RG6058	**tiragolumab + T** locally adv esophageal cancer
RG6058	**tiragolumab + T** 1L non-sq NSCLC
RG6058	**tiragolumab + T** 1L PD-L1+ mSCCHN
RG6058	**tiragolumab+T+/- chemo** NSCLC neoadj/adj
RG6107	**crovalimab** sickle cell disease
RG6139	**PD1xLAG3** solid tumors
RG6171	**giredestrant (SERD)** 1L ER+/HER2- mBC
RG6171	**giredestrant (SERD)** ER+ BC adj
RG6171	**giredestrant (SERD) + Phesgo** 1L ER+/HER2+ BC
RG6180	**autogene cevumeran** 1L melanoma
RG6354	**zinpentraxin alfa (PRM-151)** myelofibrosis
RG7828	**Lunsumio (mosun) + lenalidomide** 2L FL
RG7828	**Lunsumio (mosun) + Polivy** 2L+ DLBCL (US)
RG6149	**astegolimab (anti-ST2)** COPD
RG6299†	**ASO factor B** IgA nephropathy
RG7907/ RG7854/ RG6346/ RG6084	**TLR7 ago (3)/CpAM (2) /siRNA/ PDL1 LNA** HBV
RG1450	**gantenerumab** early Alzheimer‘s
RG6100	**semorinemab** Alzheimer’s
RG6102	**brain shuttle gantenerumab** Alzheimer’s
RG6237	**latent myostatin + Evrysdi** SMA
RG6416	**bepranemab** Alzheimer's
RG7816	**alogabat (GABA Aa5 PAM)** ASD
RG7845	**fenebrutinib** RMS
RG7845	**fenebrutinib** PPMS
RG7906	**ralmitaront** schizophrenia
RG7935	**prasinezumab** Parkinson’s
RG6321	**Susvimo (PDS)** wAMD, 36-week refill
RG6147	**galegenimab (HtrA1)** geographic atrophy
RG6179	**NME** DME
RG6299†	**ASO factor B** geographic atrophy
RG7774	**NME** retinal disease

Status as of July 21, 2022

AI submissions for existing products

Projects in phase II and III

New Molecular Entity (NME)
Additional Indication (AI)
Oncology / Hematology
Immunology
Infectious Diseases

Metabolism
Neuroscience
Ophthalmology
Other

2022		2023		2024		2025 and beyond	
RG6413+ RG6412	**Ronapreve**** SARS-CoV-2 hospitalized (EU) ✓	RG6264	**Phesgo OBI** HER2+ BC	RG1594	**Ocrevus SC** RMS & PPMS	RG7446	**Tecentriq** ctDNA+ high-risk MIBC	RG3502	**Kadcyla + Tecentriq** 2L+ HER-2+ PD-L1+ mBC
RG1569	**Actemra** COVID-19 pneumonia[1] ✓	RG6396	**Gavreto** Tumor agnostic	RG3648	**Xolair** food allergy	RG7601	**Venclexta + azacitidine** 1L MDS	RG3502	**Kadcyla + Tecentriq** HER-2+ eBC high-risk
RG7446	**Tecentriq ± chemo** 1L mUC	RG7446	**Tecentriq SC** 2L NSCLC	RG6152	**Xofluza** direct transmission	RG7159	**Gazyva** lupus nephritis	RG7446	**Tecentriq + paclitaxel** TNBC adj
RG7596	**Polivy** 1L DLBCL (US)	RG7446	**Tecentriq + cabozantinib** 2L NSCLC	RG6152	**Xofluza** influenza, pediatric (0-1 year)	RG6168	**Enspryng** myasthenia gravis	RG7446	**Tecentriq** High risk NMIBC
		RG7446	**Tecentriq + cabozantinib** RCC adv					RG7446	**Tecentriq+ lurbinectedin** 1l maintenance SCLC
		RG7446	**Tecentriq + Avastin** HCC adj					RG7159	**Gazyva** membranous nephropathy
		RG7446	**Tecentriq[2]** NSCLC neoadj					RG7159	**Gazyva** systemic lupus erythematosus
		RG7446	**Tecentriq** SCCHN adj					RG1594	**Ocrevus higher dose** RMS & PPMS
		RG7601	**Venclexta** r/r MM t(11:14)						
		RG7446	**Tecentriq + capecitabine or carbo/gem** TNBC						
		RG7853	**Alecensa** ALK+ NSCLC adj						

Status as of July 21, 2022

✓ Indicates submission to health authorities has occurred
Unless stated otherwise submissions are planned to occur in US and EU
[1]Approved in EU, filed in US
[2]filing timeline based on data from interim analysis

PDS=Port Delivery System with ranibizumab
OBI=On-Body Delivery System
**Ronapreve (casirivimab+imdevimab also known as REGEN-COV in the US) developed in collaboration with Regeneron Pharmaceuticals

Major pending approvals 2022

US	
RG6152	**Xofluza** influenza pediatric Filed March 2020
RG7828	**Lunsumio (mosunetuzumab)** 3L+ FL Filed Dec 2021
RG1569	**Actemra** COVID-19 pneumonia Filed Jan 2022

EU	
RG6321	**Susvimo (PDS)** wAMD Filed April 2021
RG7716	**Vabysmo (faricimab)** DME Filed May 2021
RG7716	**Vabysmo (faricimab)** wAMD Filed May 2021
RG6013	**Hemlibra** mild to moderate hemophilia A Filed Oct 2021
RG6396	**Gavreto** RET+ MTC, TC Filed Nov 2021
RG6152	**Xofluza** influenza pediatric Filed Nov 2021
RG7916	**Evrysdi** SMA presymptomatic pediatric <2mo Filed Nov 2021
RG6413+ RG6412	**Ronapreve**** SARS-CoV-2 hospitalized Filed Jan 2022
RG6026	**glofitamab** 3L+ DLBCL Filed April 2022

China	
RG6268	**Rozlytrek** ROS1+ NSCLC Filed Oct 2021
RG6268	**Rozlytrek** NTRK+ solid tumors Filed Nov 2021
RG7596	**Polivy** 1L DLBCL Filed Nov 2021
RG7596	**Polivy** r/r DLBCL Filed Dec 2021

Japan-Chugai	
RG7596	**Polivy** 1L DLBCL Filed Dec 2021
RG7159	**Gazyva** 1L CLL Filed March 2022

New Molecular Entity (NME)
Additional Indication (AI)
Oncology / Hematology
Immunology
Infectious Diseases

Metabolism
Neuroscience
Ophthalmology
Other

PDS=Port Delivery System with ranibizumab
**Ronapreve (casirivimab+imdevimab also known as REGEN-COV in the US) developed in collaboration with Regeneron Pharmaceuticals

Status as of July 21, 2022

Major granted approvals 2022

US		
RG7716	**Vabysmo (faricimab)** DME Jan 2022
RG7716	**Vabysmo (faricimab)** wAMD Jan 2022
RG1569	**Actemra** GCA IV Feb 2022
RG7916	**Evrysdi** SMA presymptomatic pediatric <2mo May 2022

EU	
RG7596	**Polivy** 1L DLBCL May 2022
RG7446	**Tecentriq** NSCLC adj June 2022
RG7828	**Lunsumio (mosunetuzumab)** 3L+ FL June 2022

China	
RG7446	**Tecentriq** NSCLC adj March 2022
RG1569	**Actemra** RA SC April 2022

Japan-Chugai	
RG1569	**Actemra** COVID-19 pneumonia Jan 2022
RG7716	**Vabysmo (faricimab)** DME March 2022
RG7716	**Vabysmo (faricimab)** wAMD March 2022
RG1273	**Perjeta + Herceptin** HER-2+ CRC March 2022
RG7446	**Tecentriq** NSCLC adj May 2022
RG6013	**Hemlibra** acquired Hemophilia A June 2022
RG105	**Rituxan** NMOSD June 2022

- New Molecular Entity (NME)
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- Other

Status as of July 21, 2022

Doing now what patients need next