

Conference Call Highlight from ASCO 2017

DAIICHI SANKYO CO., LTD

Antoine Yver
Global Head of Daiichi Sankyo Cancer Enterprise

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Today's Agenda



- 1. Opening remark
- 2. Cancer Enterprise
- 3. Key highlight from ASCO 2017
- 4. Q&A

R&D Day Dec 2016



Past

- Daiichi Sankyo has a history of strong science and innovation
- In April 2016, we shared our 2025 vision – to become a Global Pharma Innovator with a Competitive Advantage in Oncology

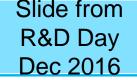
Present

- In process of launching Cancer Enterprise and accelerating our most promising assets
- Today, we are excited to share our vision and progress to date

Future

- Cancer Enterprise is on track to support Daiichi Sankyo 5-Year Business Plan
 - FY2020: 40+ Bn JPY
 - FY2025: ~300 Bn JPY
- We will deliver our portfolio for patients and our 2025 vision

Cancer Enterprise key messages (1/2)





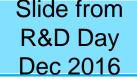


 DS-8201: Flagship asset, HER2 ADC, key to Daiichi Sankyo strength in oncology

- Broad opportunity
- Partnership implications
- Emerging franchises
 - Acute Myeloid Leukemia (AML)
 - Antibody Drug Conjugate (ADC) technology

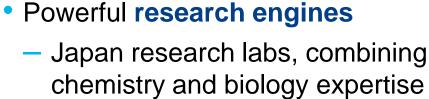


Cancer Enterprise key messages (2/2)









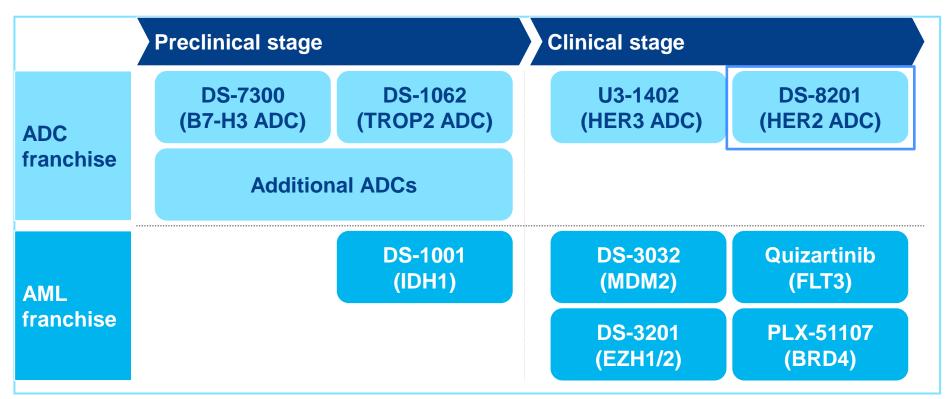
- Plexxikon discovery platform, enabling efficient candidate identification
- Strategic investments in enhanced capabilities
 - Align capabilities to aspirations
 - Strategic BD&L



Cancer Enterprise two emerging franchises

Slide from R&D Day Dec 2016





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Single agent activity of DS-8201a, a HER2-targeting antibody-drug conjugate, in heavily pretreated HER2 expressing solid tumors (Abstract No: 108)

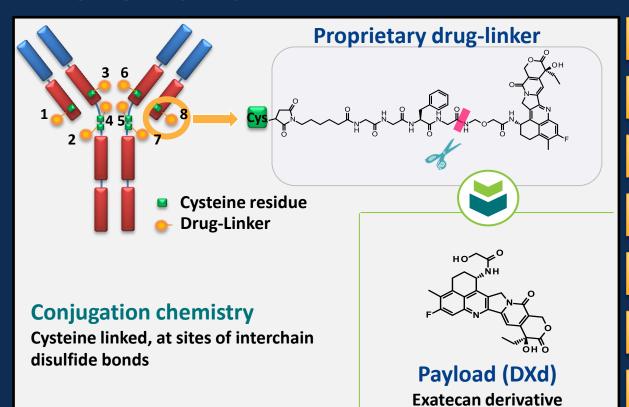
Toshihiko Doi¹, Hiroji Iwata², Junji Tsurutani³, Shunji Takahashi⁴, Haeseong Park⁵, Charles H. Redfern⁶, Kohei Shitara¹, Chikako Shimizu⁷, Hiroya Taniguchi², Tsutomu Iwasa³, Shinichiro Taira⁴, Albert C. Lockhart⁵, Jennifer M. Fisher⁶, Takahiro Jikoh⁸, Yoshihiko Fujisaki⁸, Caleb Lee⁹, Antoine Yver⁹, Kenji Tamura⁷

¹National Cancer Center Hospital East, Japan, ²Aichi Cancer Center Hospital, ³Kindai University Hospital, ⁴The Cancer Institute Hospital of Japanese Foundation For Cancer Research, ⁵Washington University School of Medicine, ⁶Sharp Memorial Hospital, ⁷National Cancer Center Hospital, Japan, ⁸Daiichi Sankyo Co., Ltd., Japan, ⁹Daiichi Sankyo Inc., USA

Disclosure

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DS-8201a



Novel payload

High potency

Bystander effect

Short systemic half-life payload

Stable linker-payload

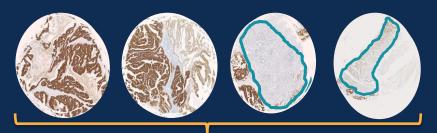
Tumor selective cleavable-linker

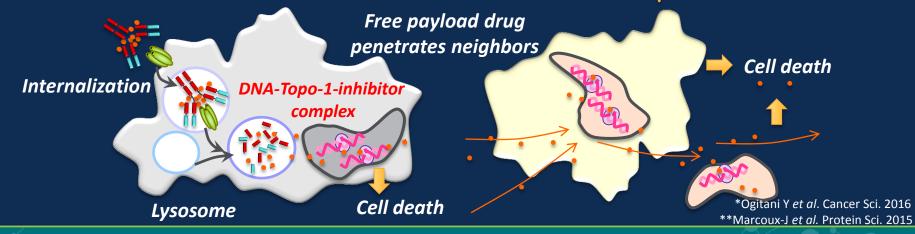
High drug-to-antibody ratio

MoA of DS-8201a

	DS-8201a	T-DM1
Antibody	Anti-HER2 Ab	Trastuzumab
МОА	Topoisomerase I Bystander effect*	Tubulin
Drug-to- antibody ratio	7-8	3.5**

Heterogeneity of IHC staining in gastric cancer
All cases classify into HER2 score 3+





Ph1 Evaluation & Key eligibility criteria

Endpoint

DLT, Safety and tolerability, Efficacy, PK

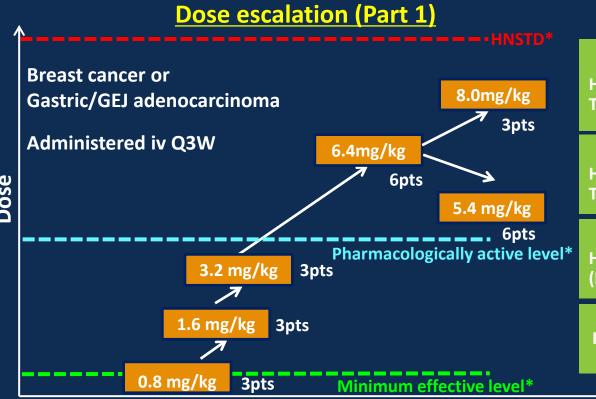
Key inclusion criteria

- ECOG PS 0-1 LVEF ≥ 50%
- Adequate organ function including platelet ≥ 100,000 /mm³, Hb ≥ 8.5 g/dL, ANC 1,500/mm³

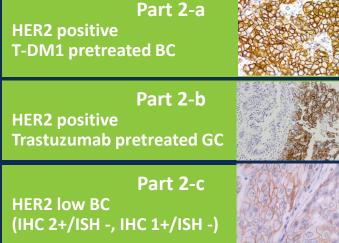
Definition of key DLT criteria

- Gr4 neutrophil count decreased lasting > 7days
- Gr4 anemia
- Gr4 platelet count decreased or Gr≥3 platelet count decreased lasting > 7days
- Gr4 AST or ALT increased
- Gr≥3 non-hematologic, non-hepatic major organ toxicities including symptomatic CHF, LVEF decline to < 40% or 20 % drop from baseline

Ph1 Dose escalation and expansion



Dose expansion (Part 2)



Part 2-d
HER2 expressing solid tumors except BC
or GC (IHC, FISH, NGS etc.)

* Estimated based on preclinical models

Demographics (Part 1+Part 2, 5.4 + 6.4 mg/kg, N=134)

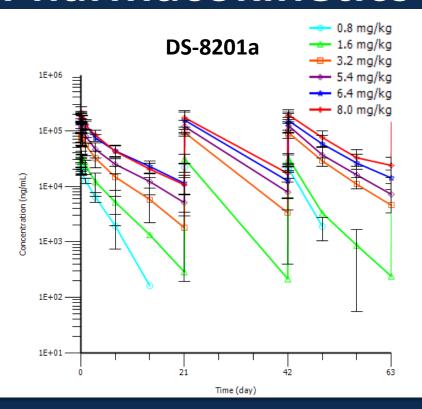
Breast cancer (N=64)			
HER2 status			
HER2 Positive	83%		
HER2 Low	17%		
# of prior regimen			
Median: 5.0			
Tumor size (Median: 5.1 cm)			
≤ 5cm	49%		
5 – 10 cm	32%		
≥ 10 cm	19%		

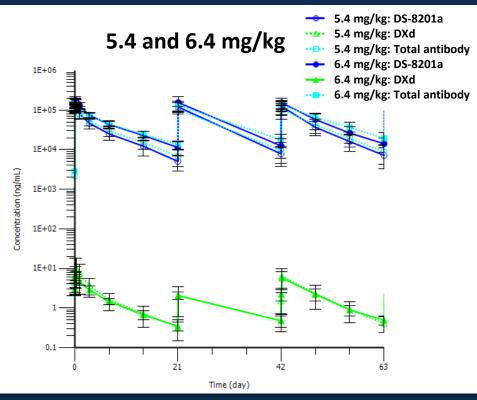
Gastric cancer (N=44)			
HER2 status			
HER2 Positive	98%		
HER2 Low	2%		
# of prior regimen			
Median: 3.0			
Tumor size (Median: 4.7 cm)			
≤ 5cm	54%		
5 – 10 cm	17%		
≥ 10 cm	29%		

26)				
# of prior regimen				
Median: 3.0				
Tumor size (Median: 7.2 cm)				
35%				
30%				
35%				

Analysis set: Enrolled patients at 5.4 and 6.4 mg/kg Data cutoff on 11-May-2017

Pharmacokinetics





Analysis set: PK evaluable patients in Part1 Data cutoff on 11-May-2017

TEAE, any grade, >20% (No DLT observed)

Preferred Term (N=133)	Grade 1 (%)	Grade 2 (%)	Grade 3 (%)	Grade 4 (%)	All (%)
Hematologic					
Platelet count decreased	13.5	9.0	8.3	3.8	34.6
Anaemia	3.0	12.0	14.3	1.5	30.8
Neutrophil count decreased	0.8	9.8	12.0	3.0	25.6
White blood cell count decreased	0.8	12.8	9.0	1.5	24.1
Gastrointestinal disorders					
Nausea	51.9	13.5	1.5	0.0	66.9
Decreased appetite	33.8	20.3	3.8	0.0	57.9
Vomiting	31.6	3.8	1.5	0.0	36.8
Diarrhoea	19.5	5.3	0.8	0.0	25.6
Constipation	18.8	3.0	0.0	0.0	21.8
Others					
Alopecia	21.1	6.0	0.0	0.0	27.1
Malaise	18.0	4.5	0.8	0.0	24.1

Any Grade 3/4 – 43.6%

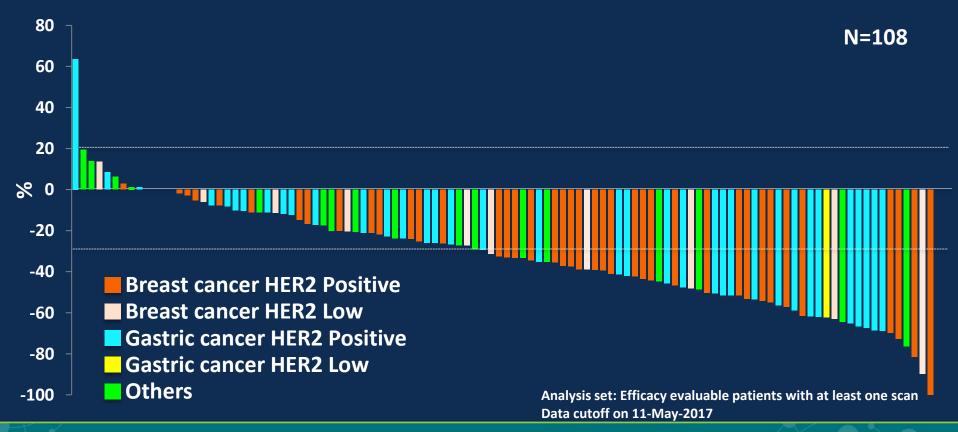
Analysis set: Safety evaluable patients who received at least one dose of DS-8201a Data cutoff on 11-May-2017

Confirmed overall response rate (5.4+6.4 mg/kg)

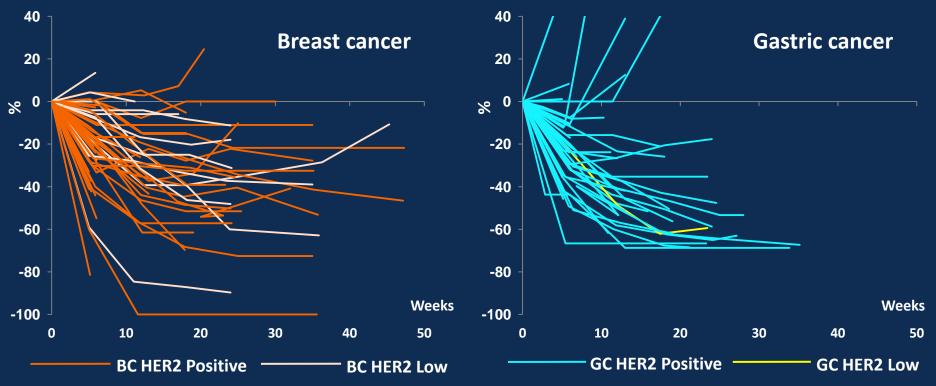
	ORR n (%)	DCR n (%)
Total	39/97 (40.2)	89/97 (91.8)
Breast Cancer	19/45 (42.2)	44/45 (97.8)
BC Prior T-DM1	16/35 (45.7)	35/35 (100.0)
BC Prior T-DM1+Pertuzumab	14/30 (46.7)	30/30 (100.0)
Gastric Cancer	16/36 (44.4)	32/36 (88.9)
GC Prior CPT-11	8/18 (44.4)	17/18 (94.4)

Analysis set: Efficacy evaluable patients for confirmed overall response Data cutoff on 11-May-2017

Tumor size: best % change from baseline (5.4+6.4 mg/kg)

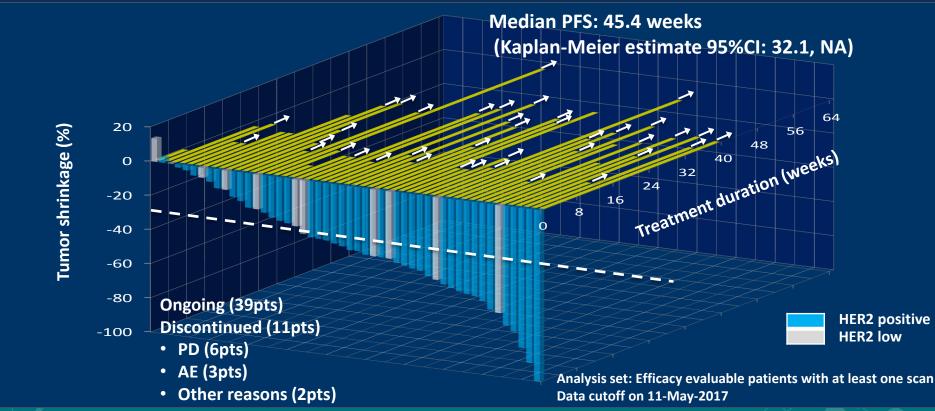


Tumor size: % Change from baseline (5.4 + 6.4 mg/kg)



Analysis set: Efficacy evaluable patients with at least one scan Data cutoff on 11-May-2017

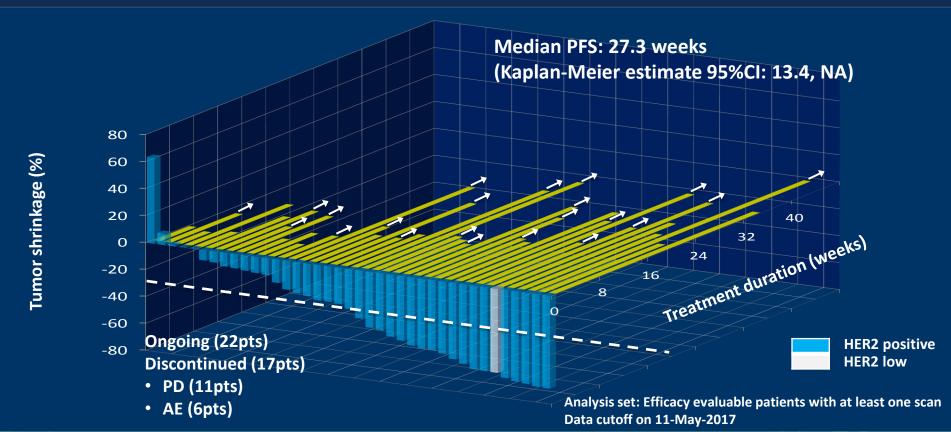
Response and treatment duration (Breast cancer, 5.4 + 6.4 mg/kg)



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Presented by: Toshihiko Doi

Response and treatment duration (Gastric cancer, 5.4 + 6.4 mg/kg)



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Presented by: Toshihiko Doi

Conclusions

- Preliminary results in first in human Phase 1 trial, DS-8201a demonstrated promising antitumor activity and favorable safety profile
 - For HER2 + Breast cancer pts pretreated with T-DM1 and pertuzumab, ORR was 46.7 %
 - For HER2 + Gastric cancer pts pretreated with trastuzumab, ORR was 44.4%.
 - No DLT was observed and MTD was not reached
 - DS-8201a had few Gr 3 or more AEs or unexpected events, with low risk of cardiac toxicities
- Based on these preliminary results, Phase 2 trials are planned in pts with HER2 + GC and BC

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Memorial Sloan-Kettering Cancer Center, US

Sharp Memorial Hospital, US

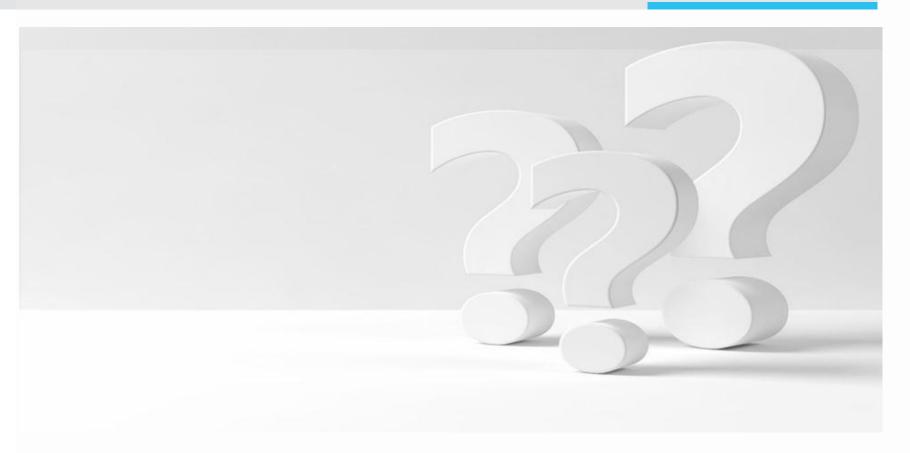
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Contact address regarding this material

Daiichi Sankyo Co., Ltd.

Corporate Communications Department

TEL: +81-3-6225-1126

Email: DaiichiSankyolR@daiichisankyo.co.jp