

**ROYALTY PHARMA**

**Royalty Pharma plc**

# **Q1 2024 Financial Results**

**May 9, 2024**

# Forward Looking Statements & Non-GAAP Measures

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Also, the discussions during this conference call will include certain financial measures that were not prepared in accordance with U.S. generally accepted accounting principles (“GAAP”). Additional information regarding non-GAAP liquidity measures can be found on slide 27 and in the Company’s earnings release furnished with its Current Report on Form 8-K dated May 9, 2024, which are available on the Company’s website. Any non-GAAP liquidity measures presented are not, and should not be viewed as, substitutes for measures required by GAAP, have no standardized meaning prescribed by GAAP and may not be comparable to the calculation of similar measures of other companies.

# Agenda

<b>Key Highlights</b>	Pablo Legorreta	Founder & Chief Executive Officer
<b>Portfolio Update</b>	Marshall Urist	EVP, Head of Research & Investments
<b>Development-stage Pipeline</b>	Chris Hite	EVP, Vice Chairman
<b>Financial Results</b>	Terrance Coyne	EVP, Chief Financial Officer
<b>Conclusion</b>	Pablo Legorreta	Founder & Chief Executive Officer
<b>Q&amp;A</b>	Pablo Legorreta Terrance Coyne Chris Hite Marshall Urist	Founder & Chief Executive Officer EVP, Chief Financial Officer EVP, Vice Chairman EVP, Head of Research & Investments

## Key Highlights

### **Pablo Legorreta**

Founder & Chief Executive Officer

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# Business momentum continues in Q1 2024

1

## Financial

Royalty Receipts grew +14% with Portfolio Receipts declining to \$717m due to non-recurring milestone in Q1 2023

- Royalty Receipts are recurring cash inflows while milestones and other contractual receipts are more variable

2

## Capital allocation

Announced transaction to acquire royalties on Sanofi's frexalimab in Phase 3 for MS for approximately \$525m<sup>(1)</sup>

Capital Deployment of approximately \$670m, including cash expected to be paid for frexalimab

Increased quarterly dividend by 5% with commitment to mid-single digit annual growth

3

## Portfolio

Exciting development-stage portfolio with potential to generate significantly >\$1bn in peak royalties<sup>(2)</sup>

Vast majority has blockbuster potential and in development by premier global marketers

Multiple key upcoming events for late-stage pipeline

4

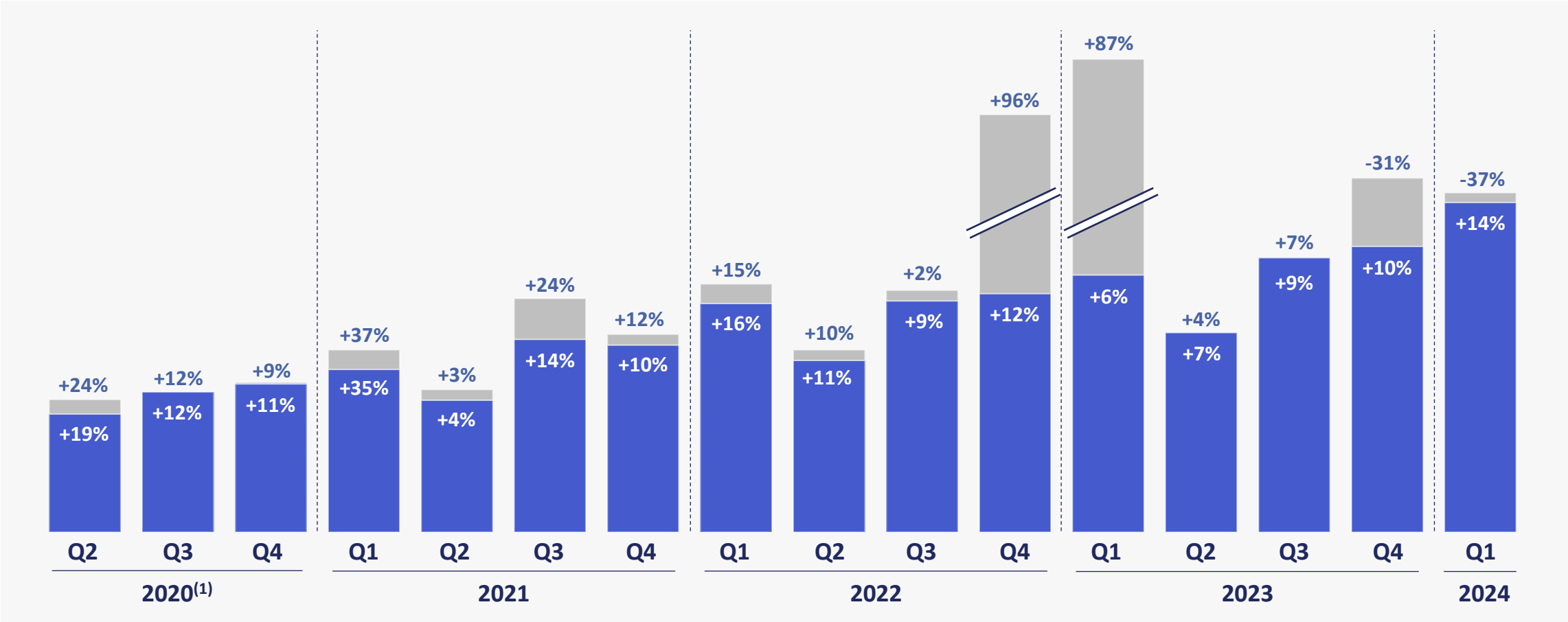
## Full year guidance

Portfolio Receipts expected to be \$2,600m to \$2,700m excluding future investments<sup>(3)</sup>

Royalty Receipts growth expected to be ~+5% to +9% excluding future investments<sup>(3)</sup>

# Impressive track record of strong growth since IPO

Portfolio Receipts  
(year/year growth)



Royalty Receipts Milestones and other contractual receipts

## Portfolio Update

### Marshall Urist, MD, PhD

Executive Vice President  
Head of Research & Investments

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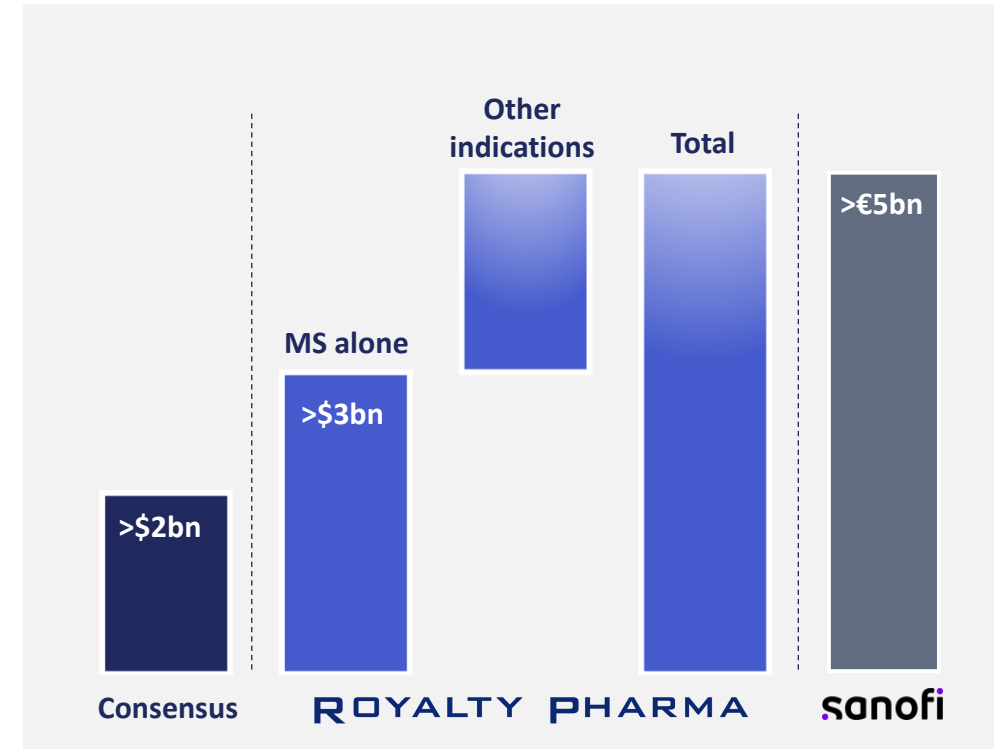




# Frexalimab - potential blockbuster in immune-mediated diseases

- Announced transaction to acquire royalty interest in Sanofi's frexalimab from ImmuNext (private biotech)
  - ~\$525m in cash including estimated transaction costs
  - Entitled to high-single to low-double digit royalty on worldwide sales<sup>(1)</sup>
  - Royalty duration expected through 2041
  - Substantial potential milestone payments from Sanofi, including more than half related to the lead MS indication<sup>(2)</sup>
- Sanofi stated potential non-risk adjusted peak sales of >€5bn<sup>(3)</sup>
- Potential peak annual royalties of >\$400m with attractive returns

Frexalimab peak sales projections  
(non-risk adjusted)



MS: multiple sclerosis

1. Royalty Pharma will receive 100% of net royalties on annual worldwide net sales of frexalimab of up to \$2.0 billion and share a minority of the royalties above this threshold with ImmuNext's former shareholders.




2. Potential milestone payments consist of regulatory and commercial milestones.

3. Sanofi R&D day, December 7, 2023.

# Frexalimab - potential next generation I&I therapy with clear PoC

- Frexalimab – novel MoA (anti-CD40L) in Phase 3 development with broad potential in immune-mediated diseases
- Compelling proof of concept – Phase 2 results in NEJM showed potential high-efficacy, non-lymphocyte depleting MS therapy<sup>(1)</sup>
  - Significant reductions in new GdE+ T1 lesions at week 12
  - 96% of frexalimab high-dose participants were free of GdE+ T1 lesions at week 48 and experienced a low ARR of 0.04
  - Safe and generally well-tolerated
- Phase 3 results in MS and FDA filing expected in H2 2027
- Additional indications could significantly expand opportunity

Sanofi's frexalimab: potential pipeline-in-a-product<sup>(2)</sup>

Indication	Status				Eligible population	Next milestone
	Ph.1	Ph.2	Ph.3	Filed		
MS					1.1m	Phase 3 data and submission in H2 2027
T1D					2.8m	Phase 2b data in 2027
SLE					0.3m	Phase 2a data in H2 2025

I&I: inflammation and immunology; PoC: proof of concept; MoA: mechanism of action; NEJM: New England Journal of Medicine; GdE+: gadolinium-enhanced; ARR: annualized relapse rate; MS: multiple sclerosis; T1D: type 1 diabetes; SLE: systemic lupus erythematosus; FDA: Food & Drug Administration

1. Sanofi press releases, February 15, 2024 and April 17, 2024.

2. Sanofi R&D day, December 7, 2023.

# Frexalimab - deep analysis supports our confidence



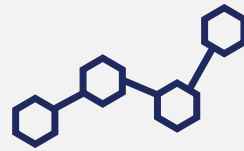
## Strong efficacy

Phase 2 data demonstrate **significant reduction** of active brain lesions by MRI images and low clinical relapse rate over 48 weeks



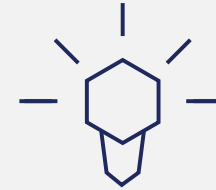
## Novel mechanism

Differentiated mechanism of immune inhibition beyond B cells - **a potential key safety differentiator** versus current high efficacy MS therapies



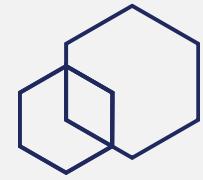
## Data translatability

Positive Phase 2 in MS **highly predictive of Phase 3 outcome** - proprietary statistical analyses confirm Phase 3 **designed for success**



## World Class Marketer

Sanofi has a deep history in MS and a strong **commitment to I&I** - will maximize the potential of frexalimab globally












## Unmet need

**RP claims analysis** projects nearly 100,000 MS patients in the U.S. will have discontinued CD20 therapy by the time frexalimab launches

Frexalimab is a potential novel, high efficacy agent with a differentiated safety profile supported by a strong marketer

# Frexalimab – clearly aligned with product selection framework

Royalty Pharma product selection framework	frexalimab	
 <b>Strong scientific rationale</b>	Evidence suggests key role of CD40/CD40L in MS	<input checked="" type="checkbox"/>
 <b>Significant impact on patients/caregivers</b>	Potential high-efficacy, non-lymphocyte depleting MS therapy	<input checked="" type="checkbox"/>
 <b>Conviction in probability of success</b>	Phase 2 results showed sustained reduction of disease activity	<input checked="" type="checkbox"/>
 <b>Mission and execution-oriented management</b>	Sanofi ambition to become an immunology powerhouse	<input checked="" type="checkbox"/>
 <b>Strong marketer, global commercial footprint</b>	Sanofi is a premier marketer in immunology and neurology	<input checked="" type="checkbox"/>
 <b>Clear commercial positioning</b>	Potential high-efficacy, non-lymphocyte depleting MS therapy	<input checked="" type="checkbox"/>
 <b>Potential for multiple indications</b>	Clinical trials in multiple immune-mediated diseases	<input checked="" type="checkbox"/>
 <b>First-in-class or best-in-class</b>	First-in-class CD40-ligand approach in MS	<input checked="" type="checkbox"/>
 <b>Long duration of exclusivity</b>	Duration of royalty expected through 2041	<input checked="" type="checkbox"/>

## Development-stage Pipeline

### **Chris Hite**

Executive Vice President  
Vice Chairman

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# Exciting development-stage pipeline to drive long-term growth

1

## High potential

15 development-stage therapies<sup>(1)</sup> with potential to generate peak annual royalties **significantly >\$1bn**

Pipeline has grown from **3 to 15 therapies** since IPO, despite capital deployed weighted towards approved products

Vast majority has **blockbuster potential**, and in development by premier global biopharma companies

2

## Lower risk

Development-stage pipeline supported by **lower-risk profile** as majority are in Phase 3 development or undergoing regulatory review

Product selection and unique deal structuring further mitigates risk

3

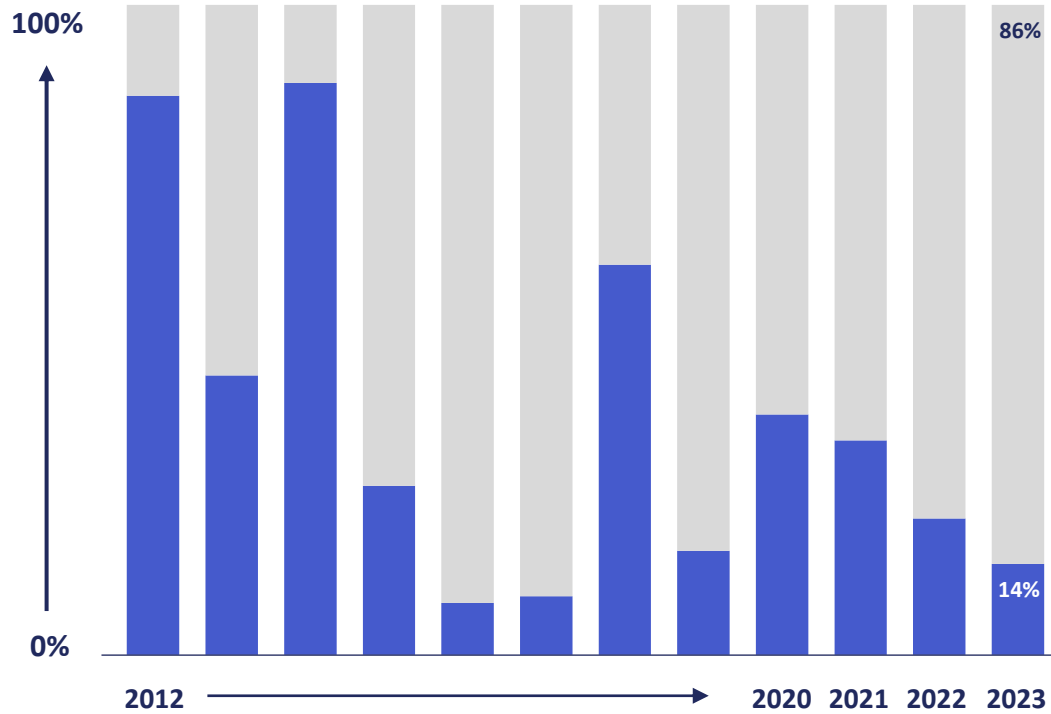
## Unlocking value

Multiple potential **upcoming events** over the next 12-18 months

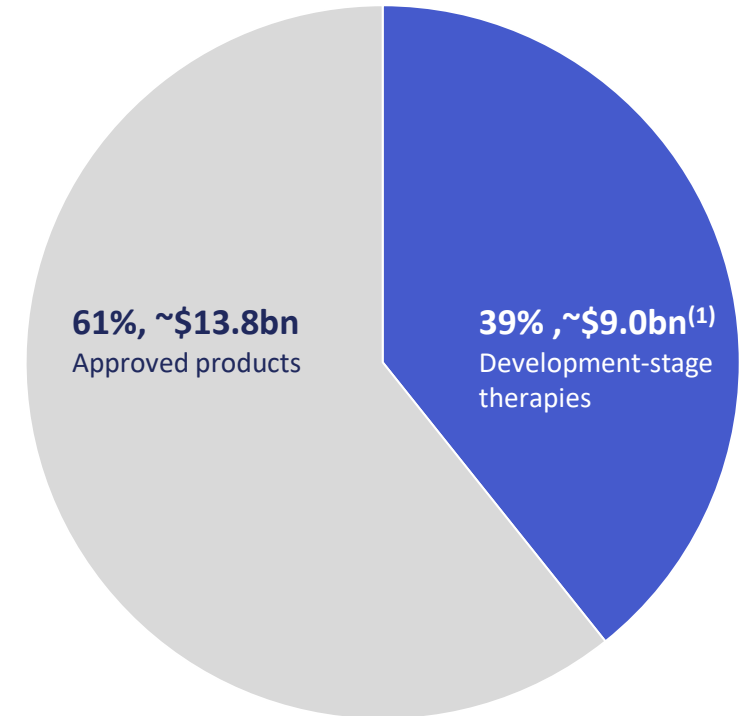
- **2024:** Phase 3 results expected for seltorexant, TEV-'749 (topline safety data), Tremfya<sup>(2)</sup>; potential FDA filings for aficamten and pelabresib and approval for KarXT
- **2025:** pivotal study results expected for Novartis' pelacarsen, a potentially practice-changing medicine for CV disease

# Healthy mix of approved and development-stage investments

Annual Capital Deployment



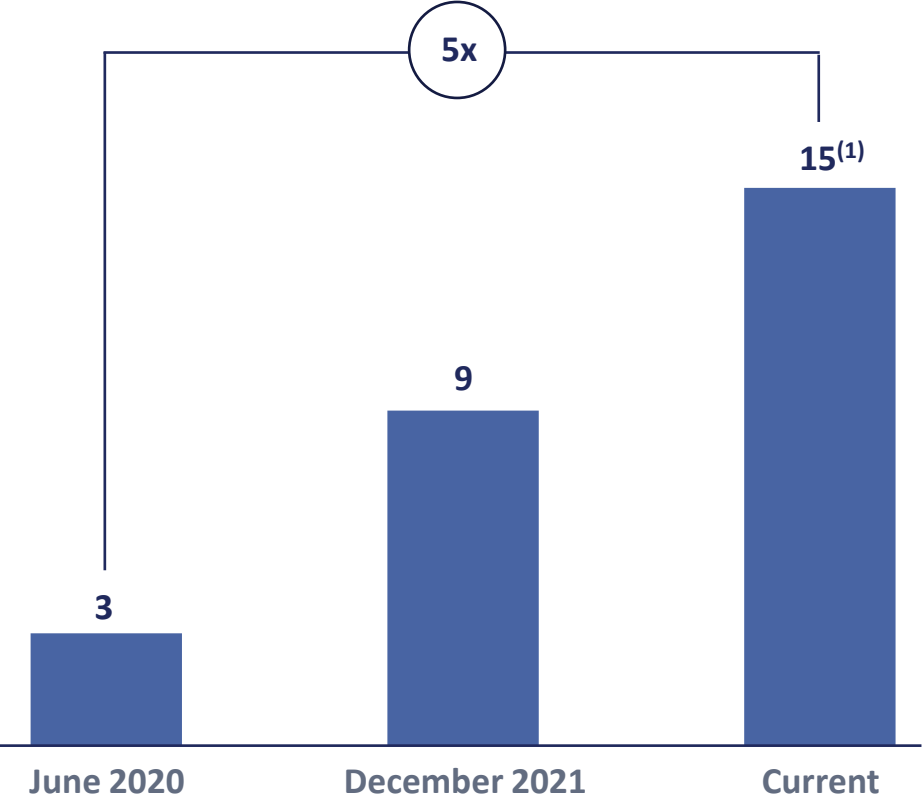
~\$22.8 billion in cumulative Capital Deployment  
(since 2012 – 2024 YTD)



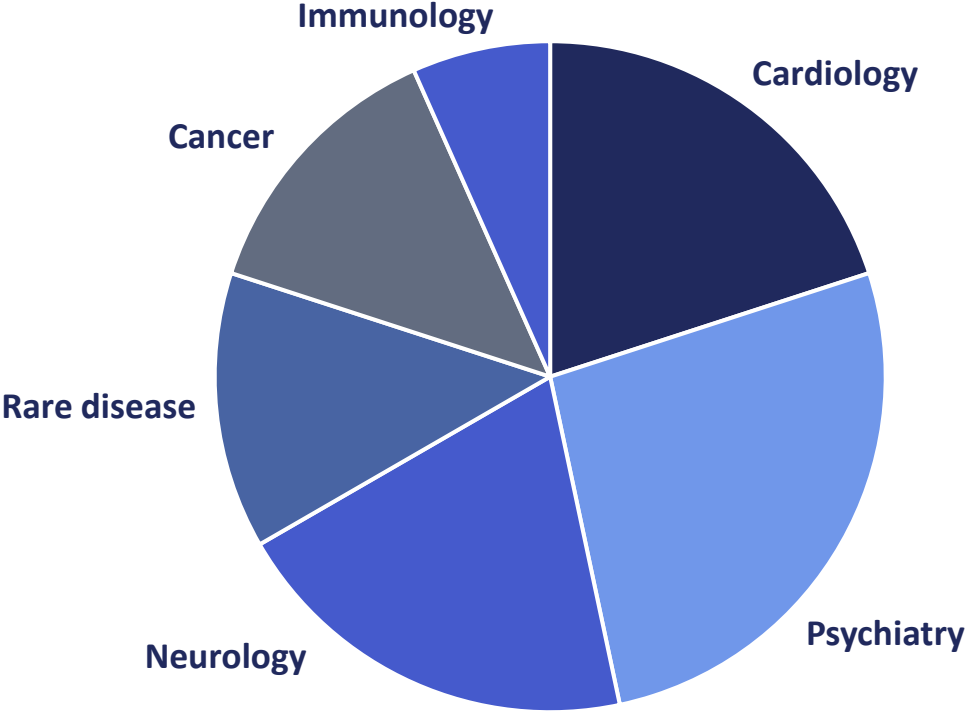
Approved Development-stage

# Significant growth and diversity of development-stage pipeline

Pipeline evolution since IPO  
(by number of therapies)



Strong diversity of pipeline  
(by number of therapies)

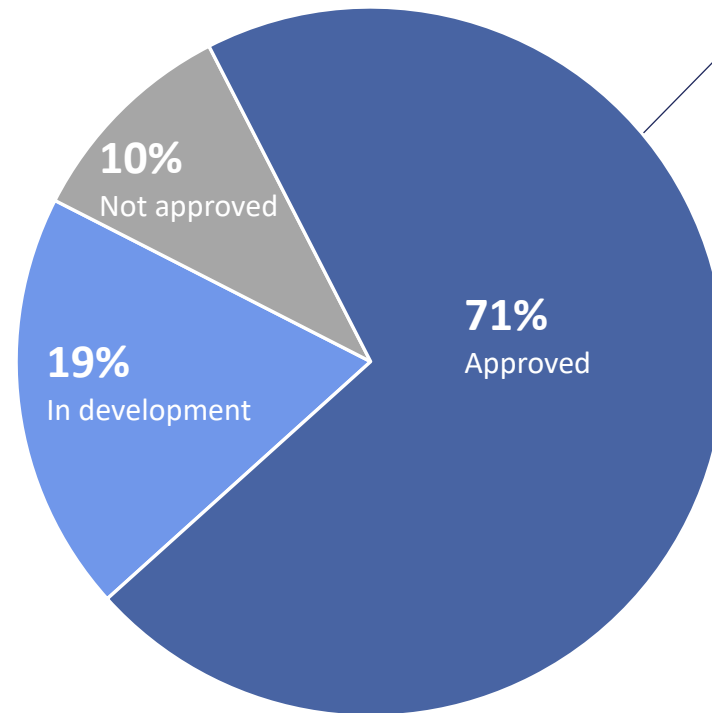




# Strong track record of investing in development-stage therapies

- Invested ~\$9bn in development-stage therapies since 2012
  - Require strong proof of concept data
  - Broad landscape of opportunities
  - Not constrained by therapeutic area
  - Target returns in the teens
- 15 development-stage therapies in portfolio<sup>(1)</sup>
- History of identifying therapies with unmet and underserved patient needs

Capital Deployment on development-stage therapies<sup>(2, 3)</sup>  
(since 2012)



## Approved since acquisition



1. Including frexalimab

2. Reflects Capital Deployment for development-stage therapies from 2012 through 2024 year-to-date (including cash to be paid for frexalimab).

3. Not approved includes investments in omecamtiv, gantenerumab, otilimab, BCX9930, vosaroxin, palbociclib, Apiject and Merck KGaA's anti-IL17 nanobody M1095.

# Unique and powerful approach to development-stage investing

	Product selection		Deal structure	
Approach	<p>Post proof of concept with strong evidence of clinical efficacy and safety</p> <p>Partnering directly with innovators provides unique insights into clinical program and sales potential</p>		<p>Risk mitigation strategies through clinical &amp; regulatory milestones, royalty tiering, option periods, etc.</p> <p>Strong alignment with partner through co-funding on top R&amp;D programs</p>	
Examples	<p><b>KarXT</b></p> <p>Investment after third positive registrational trial minimizes regulatory risk</p>	<p><b>aficamten</b></p> <p>Unique insights into clinical program through direct partnership with Cytokinetics</p>	<p><b>frexalimab</b></p> <p>Nearly half of purchase price potentially returned in higher probability milestones mitigates risk</p>	<p><b>MK-8189</b></p> <p>Modest initial investment with option to significantly scale funding after Phase 2b data</p>

Unique approach to development-stage investing drives attractive returns while mitigating risk

# Big products with world class marketers and large royalties

Therapy	Lead indication	Marketer	Potential first- or best-in-class	Potential peak sales (non risk adjusted) <sup>(3)</sup>	Potential peak royalties
Frexalimab <sup>(1)</sup>	multiple sclerosis	Sanofi	✓	>\$5bn	>\$400m
olpasiran	cardiovascular disease	Amgen	✓	>\$3bn	>\$250m
pelacarsen	cardiovascular disease	Novartis	✓	>\$3bn	>\$150m
seltorexant	depression	Johnson & Johnson	✓	\$1-5bn	>\$150m
aficamten	hypertrophic cardiomyopathy	Cytokinetics	✓	>\$4bn	>\$150m
KarXT	schizophrenia	Bristol Myers Squibb	✓	>\$5bn	~\$100m
TEV-'749	schizophrenia	Teva	✓	~\$1bn	~\$35m
pelabresib	myelofibrosis	Novartis <sup>(2)</sup>	✓	>\$1bn	>\$30m

**Total (late-stage development):**

**>\$25bn**

**>\$1.25bn**

Excludes high potential early-stage pipeline – trontinemab (Alzheimer's), MK-8189 (schizophrenia), etc.

## Financial Results

### **Terrance Coyne**

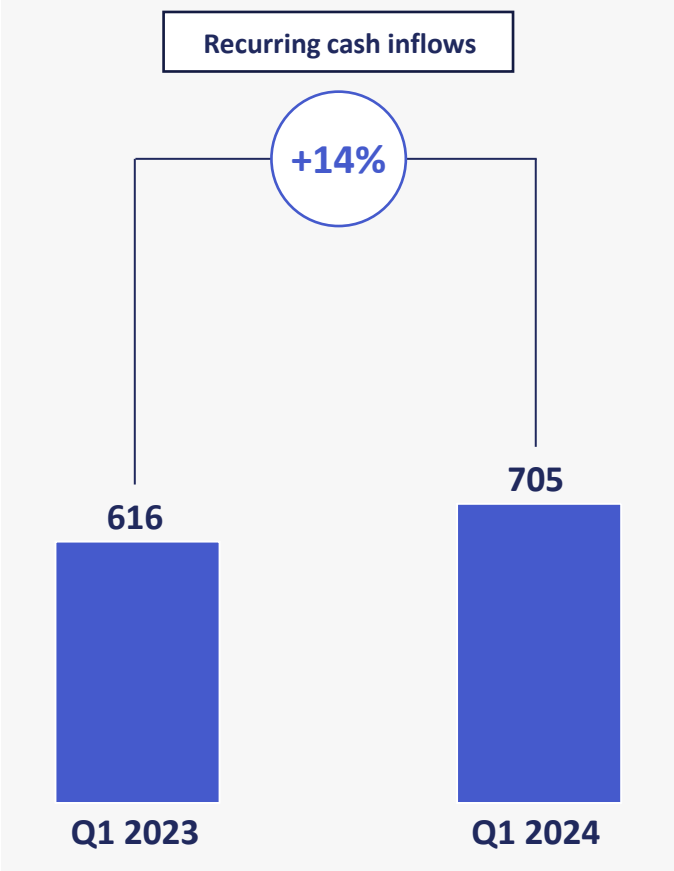
Executive Vice President  
Chief Financial Officer

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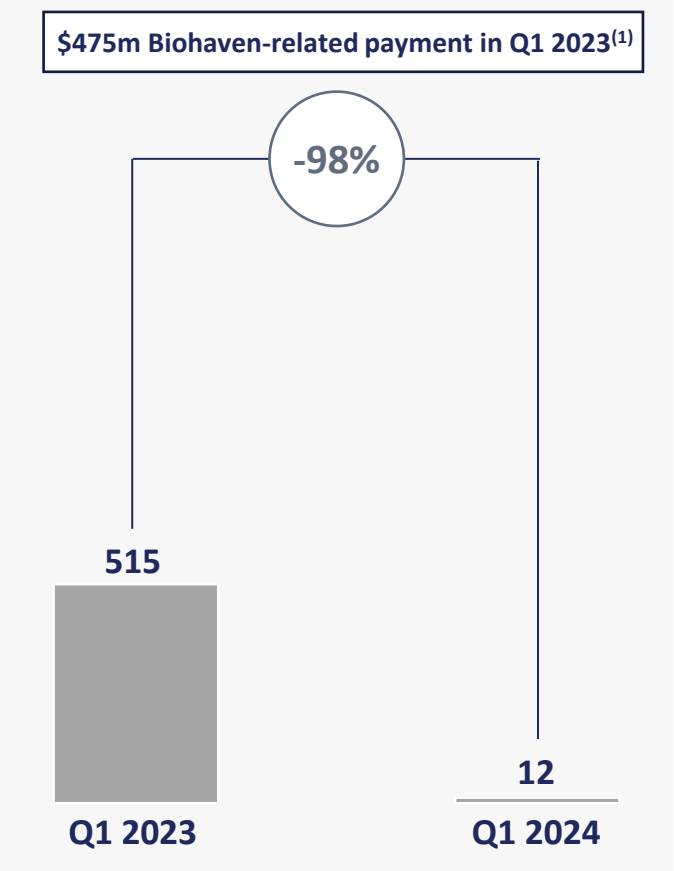


# Strong Royalty Receipts performance in Q1 2024

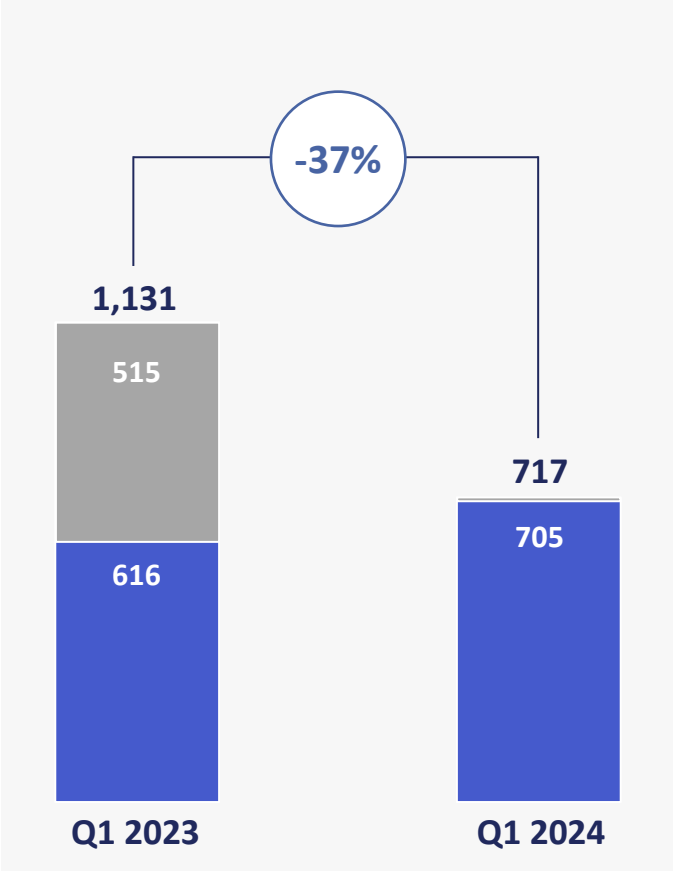
**Royalty Receipts**  
(\$ in millions)



**Milestones and other contractual receipts**  
(\$ in millions)



**Portfolio Receipts**  
(\$ in millions)



# Efficient model generates substantial cash flow to reinvest

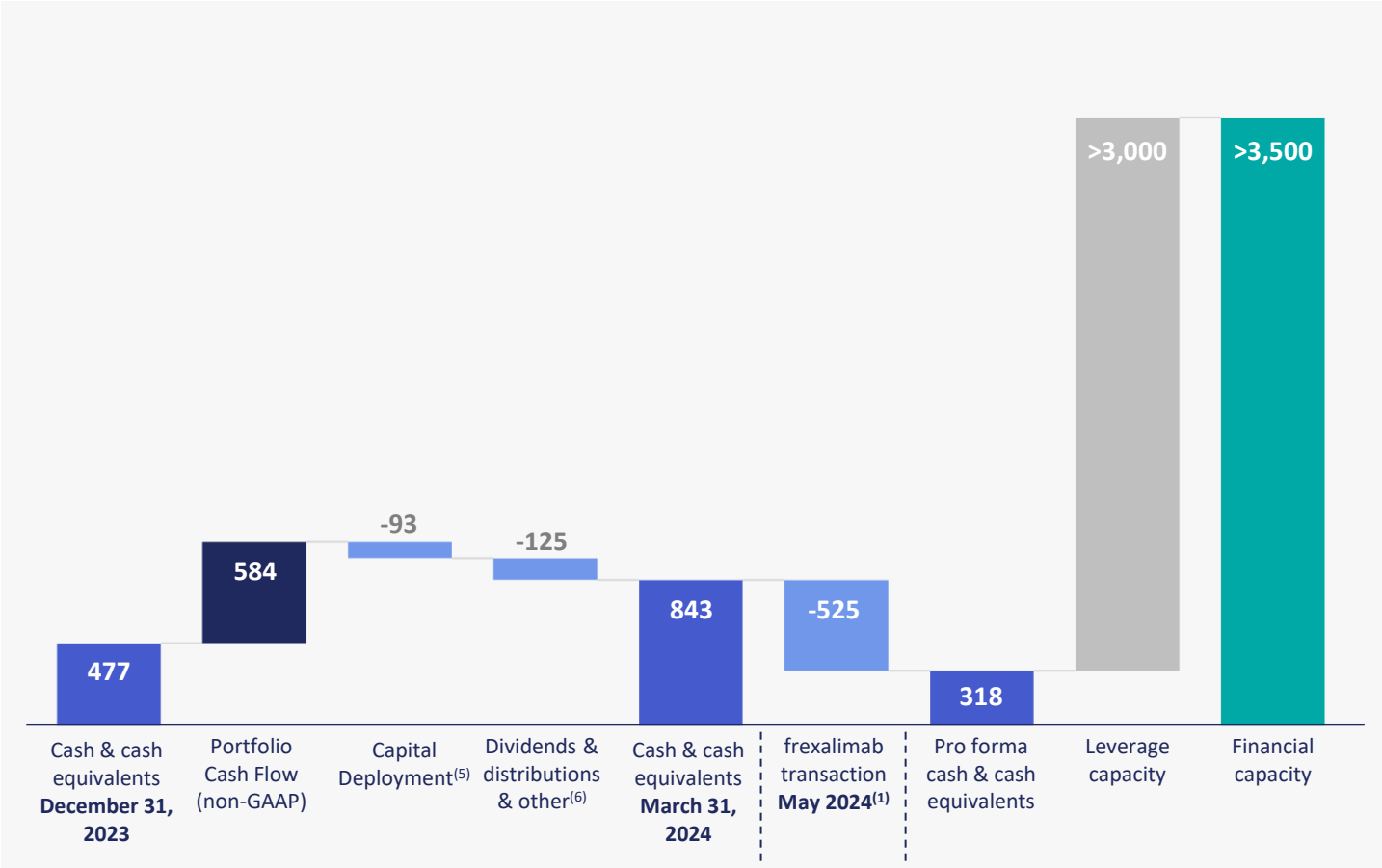
\$ in millions	Q1 2024		% Portfolio Receipts	Comments
<b>Royalty Receipts<sup>(1)</sup></b>	705	+14% YoY		Recurring cash inflows of our royalty portfolio
Milestones & other contractual receipts <sup>(1)</sup>	12	-98% YoY		More variable cash receipts
<b>Portfolio Receipts</b>	717	-37% YoY		Substantially all cash inflows of the business
Payments for operating and professional costs	-61		8.4%	
<b>Adjusted EBITDA (non-GAAP)</b>	656		91.6%	
Interest paid, net	-73			
<b>Portfolio Cash Flow (non-GAAP)</b>	584		81.4%	Measure of cash that can be redeployed into new royalties, pay down debt, or returned to shareholders
Capital Deployment	-93			Reflects cash payments during the period for new and previously announced transactions
Share count <sup>(2)</sup>	597.5			

Amounts may not add due to rounding.

# Significant financial capacity for future royalty acquisitions

- Pro forma<sup>(1)</sup> cash and cash equivalents of \$318m
  - \$525m of cash to acquire frexalimab royalties
- \$6.3bn investment grade debt outstanding
  - Total pro forma leverage of 2.6x<sup>(2)</sup>
  - Net pro forma leverage of 2.4x<sup>(3)</sup>
  - Undrawn \$1.8bn revolving credit facility
- Moody’s improved outlook from stable to positive
- Financial capacity of >\$3.5 billion with cash on hand and additional leverage<sup>(4)</sup>

Cash and cash equivalents  
(\$ in millions)



1. Pro forma cash reflects Royalty Pharma’s approximately \$525 million payment including estimated transaction costs to acquire royalties on frexalimab. 2. Total pro forma leverage is calculated as Total debt divided by Adjusted EBITDA. 3. Net pro forma leverage is calculated as Total debt less pro forma cash and equivalents divided by Adjusted EBITDA. 4. Calculated based on total leverage ratio of ~4.0x. Total leverage is calculated as Total debt divided by Adjusted EBITDA (as defined in credit agreement filed with the SEC). 5. Primarily relates to the acquisition of ecopipam and funding of TEV-749. 6. Primarily reflects dividends on Class A ordinary shares and Class B ordinary shares.

# Full year 2024 guidance<sup>(1,2)</sup>

	February 15, 2024	May 9, 2024	Comments
<b>Portfolio Receipts</b> excluding transactions announced subsequent to May 9, 2024 <sup>(1,2)</sup>	\$2,600m - \$2,700m	<b>\$2,600m - \$2,700m</b> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 5px auto;">           Royalty Receipts expected growth of 5% to 9% in 2024         </div>	<ul style="list-style-type: none"> <li>• Strong portfolio performance and full year of incremental Evrysdi royalties, partially offset by Imbruvica and Tysabri</li> <li>• Milestones and other contractual receipts expected to decline from \$599m in 2023 to ~\$30m in 2024</li> <li>• Reflects range of timing outcomes for launch of Promacta generics and biosimilar Tysabri</li> <li>• Assumes negligible foreign exchange impact<sup>(3)</sup></li> </ul>
<b>Operating &amp; professional costs</b>	~8.0% - 9.0% of Portfolio Receipts	~8.0% - 9.0% of Portfolio Receipts	<ul style="list-style-type: none"> <li>• Unique business model provides margin protection despite inflationary environment</li> </ul>
<b>Interest paid</b>	~\$160m	~\$160m	<ul style="list-style-type: none"> <li>• Assumes no issuance of additional debt</li> <li>• <i>De minimis</i> interest paid expected in Q2 and Q4 2024</li> <li>• Excludes interest received, which was \$6m in Q1 2024</li> </ul>

1. See slide 27 for definitions and for additional information regarding Royalty Pharma's 2024 full-year financial guidance. 2. This guidance is as of May 9, 2024 and assumes no major unforeseen adverse events and excludes any potential contribution from transactions announced subsequent to that date. Furthermore, Royalty Pharma may amend its guidance in the event it engages in new royalty transactions which have a material near-term financial impact on the Company. See the information on slide 3, "Forward Looking Statements & Non-GAAP Measures," for factors that may impact the achievement of this guidance. 3. See slide 27 for additional discussion regarding the assumptions for estimated foreign exchange impacts.



## Conclusion

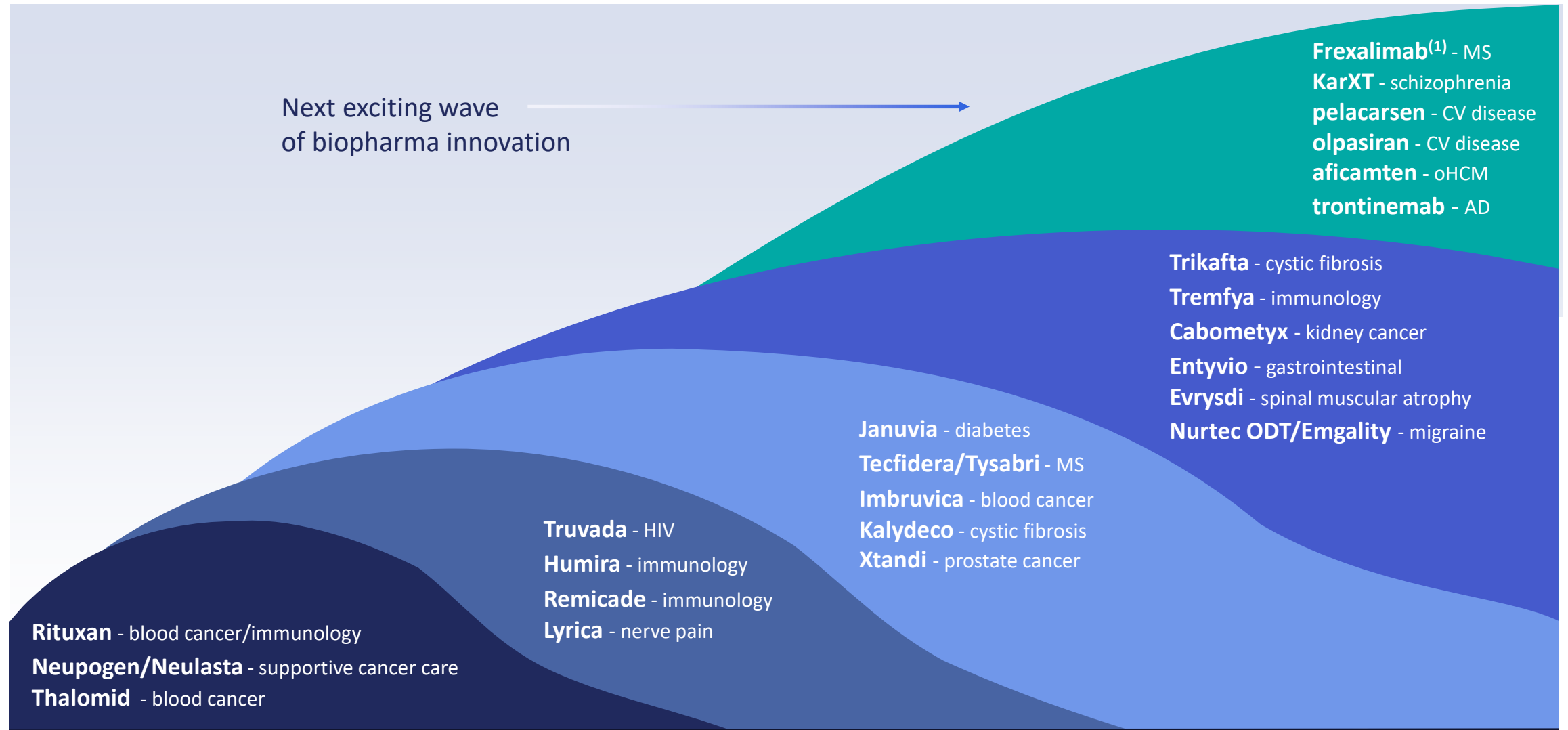
### **Pablo Legorreta**

Founder & Chief Executive Officer

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# Participating in most important waves of biopharma innovation



# Footnotes

- 1) To aid in comparability, quarter-over-quarter growth in 2020 is calculated based on pro forma 2019 results, which adjusts certain cash flow line items as if Royalty Pharma's Reorganization Transactions (as described in the Company's final prospectus filed with the SEC on June 17, 2020 ("Prospectus")) and its initial public offering ("IPO") had taken place on January 1, 2019. The most significant difference between the pro forma and reported figures is the non-controlling interest attributable to legacy investors that resulted from the Reorganization Transactions.
- 2) Portfolio Receipts is a key performance metric that represents our ability to generate cash from our portfolio investments, the primary source of capital that we can deploy to make new portfolio investments. Portfolio Receipts is defined as the sum of royalty receipts and milestones and other contractual receipts. Royalty receipts include variable payments based on sales of products, net of contractual payments to the legacy non-controlling interests, that is attributed to Royalty Pharma ("Royalty Receipts"). Milestones and other contractual receipts include sales-based or regulatory milestone payments and other fixed contractual receipts, net of contractual payments to the legacy non-controlling interests, that is attributed to Royalty Pharma. Portfolio Receipts does not include proceeds from equity securities or marketable securities, both of which are not central to our fundamental business strategy.

Portfolio Receipts is calculated as the sum of the following line items from our GAAP consolidated statements of cash flows: *Cash collections from financial royalty assets, Cash collections from intangible royalty assets, Other royalty cash collections, Proceeds from available for sale debt securities* and *Distributions from equity method investees* less *Distributions to legacy non-controlling interests - Portfolio Receipts*, which represent contractual distributions of Royalty Receipts and milestones and other contractual receipts to the Legacy Investors Partnerships and RPSFT.

- 3) Biohaven related payments include \$475m in Portfolio Receipts from the Zavzpret milestone payment in Q1 2023.
- 4) Adjusted EBITDA is defined under the revolving credit agreement as Portfolio Receipts minus payments for operating and professional costs. Operating and professional costs reflect *Payments for operating and professional costs* from the statements of cash flows. See GAAP to Non-GAAP reconciliation in the Company's Current Report on Form 8-K dated May 9, 2024. See the Company's Annual Report on Form 10-K filed with SEC on February 15, 2024 for additional discussion on defined term.
- 5) Portfolio Cash Flow is defined under the revolving credit agreement as Adjusted EBITDA minus interest paid or received, net. See GAAP to Non-GAAP reconciliation in the Company's Current Report on Form 8-K dated May 9, 2024. See the Company's Annual Report on Form 10-K filed with SEC on February 15, 2024 for additional discussion on defined term.

- 6) Capital Deployment represents the total outflows that will drive future Portfolio Receipts and reflects cash paid at the acquisition date and any subsequent associated contractual payments reflected in the period in which cash was paid.

Capital Deployment is calculated as the summation of the following line items from our GAAP consolidated statements of cash flows: *Investments in equity method investees, Purchases of available for sale debt securities, Acquisitions of financial royalty assets, Acquisitions of other financial assets, Milestone payments, Development-stage funding payments - ongoing, Development-stage funding payments - upfront and milestone* less *Contributions from legacy non-controlling interests - R&D*.

- 7) Foreign exchange impact represents an estimate of the difference in results that are attributable to fluctuations in currency exchange rates based on certain assumptions of prevailing exchange rates for the related period, contractual terms, geographies from which our royalties are derived, timing of payments and other factors. The marketers paying us royalties may not provide or may not be required to provide the breakdown of product sales by geography. Actual foreign exchange impact may be different than our estimates.

## Financial Guidance footnote

- 8) Royalty Pharma has not reconciled its non-GAAP 2024 guidance to the most directly comparable GAAP measure, net cash provided by operating activities, at this time due to the inherent difficulty in accurately forecasting and quantifying certain amounts that are necessary for such reconciliation, including, primarily, payments for operating and professional costs, distributions from equity method investees, and interest received. The Company is not able to forecast on a GAAP basis with reasonable certainty all adjustments needed in order to project net cash provided by operating activities on a GAAP basis at this time.

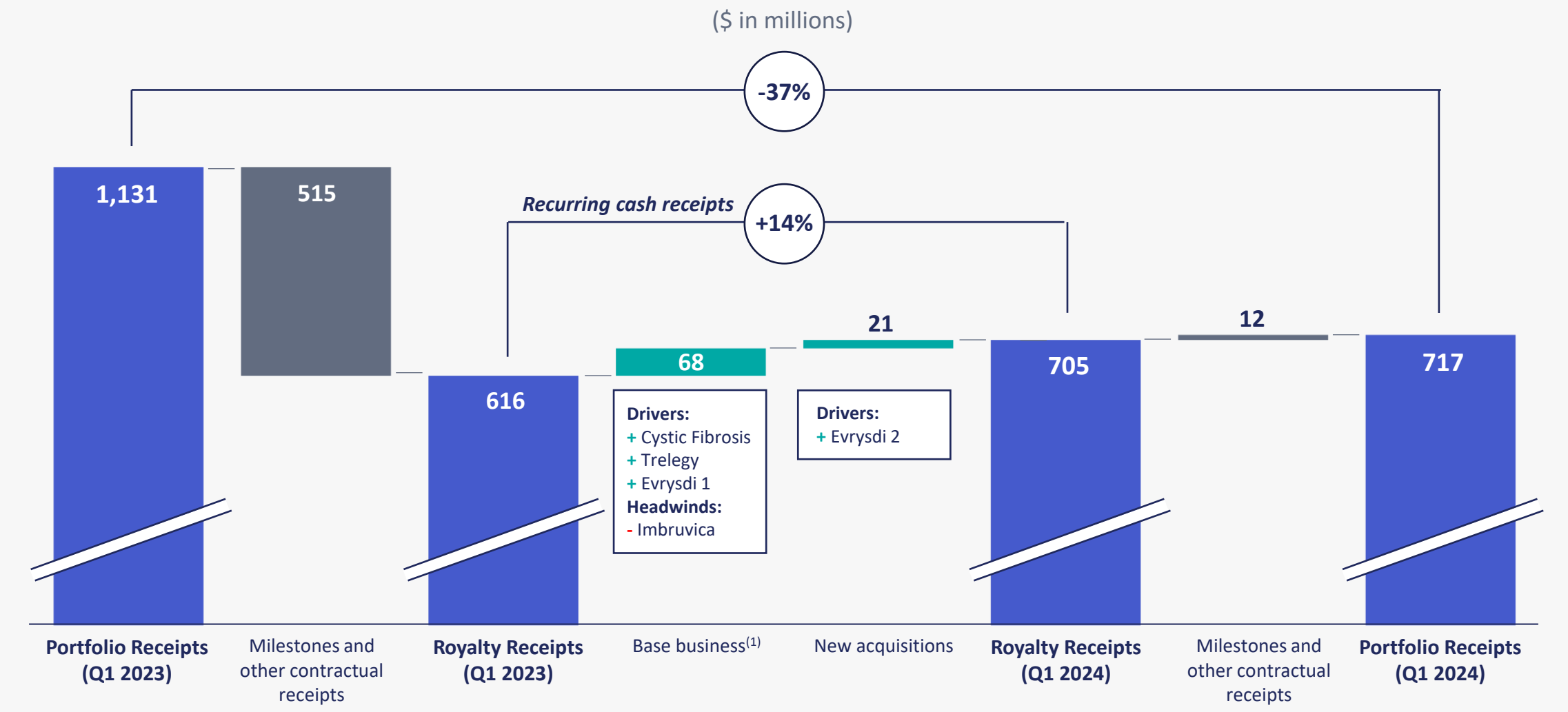
# Appendix

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# Strong Royalty Receipts growth and base business performance

## Q1 2024 Portfolio Receipts

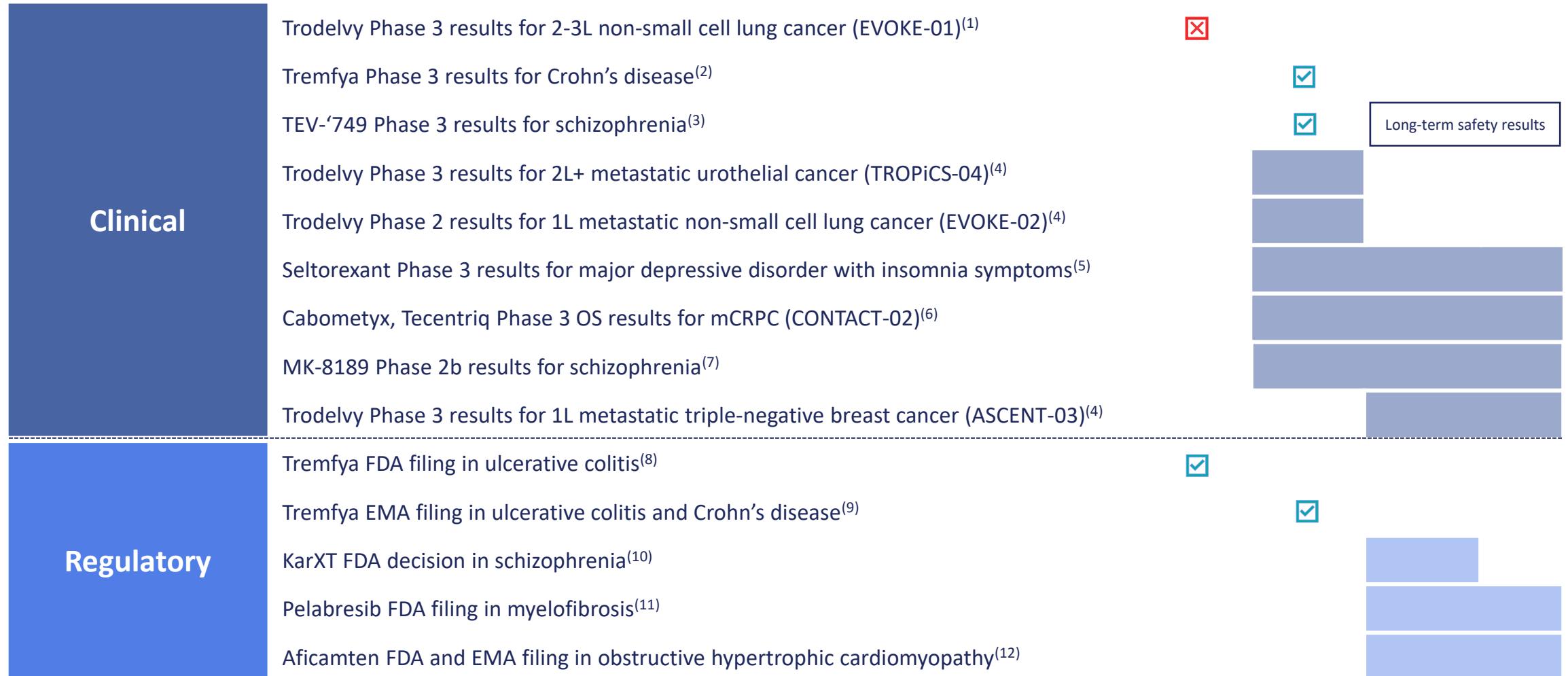
(\$ in millions)



1. Base business is defined as royalties in Royalty Pharma’s portfolio as of December 31, 2023. Base business excludes Evrysdi 2 contribution given first receipt was in Q1 2024. Base business includes negligible estimated foreign exchange impact. See slide 27 for additional discussion regarding the assumptions for estimated foreign exchange impacts.

# Important events expected in 2024

## Select year-to-date and expected upcoming events



Long-term safety results

OS: overall survival; RCC: renal cell carcinoma; mCRPC: metastatic castration-resistant prostate cancer; FDA: Food & Drug Administration; EMA: European Medicines Agency

1. Gilead press release, January 22, 2024. 2. Johnson & Johnson press release, May 1, 2024. 3. Teva press release, May 8, 2024. 4. Gilead Q1 earnings presentation, April 25, 2024. 5. Johnson & Johnson Q1 earnings presentation, April 16, 2024. 6. Exelixis Q1 earnings call, April 30, 2024. 7. www.clinicaltrials.gov. 8. Johnson & Johnson press release, March 11, 2024. 9. Johnson & Johnson press release, May 1, 2024. 10. Bristol Myers Squibb Q1 earnings press release, April 25, 2024. KarXT PDUFA date is September 26, 2024. 11. Novartis press release, February 5, 2024. 12. Cytokinetics Q1 earnings release, May 8, 2024.

# Potential royalties on ~40 projects in late-stage development

	Phase 2		Phase 3			Registration
Initial indication	MK-8189 Schizophrenia	trontinemab Alzheimer's disease	aficamten oHCM	pelacarsen Cardiovascular disease	olpasiran Cardiovascular disease	KarXT Schizophrenia
		tulumimetostat (CPI-0209) Blood cancer, solid tumors	pelabresib Myelofibrosis	ampreloxetine Symptomatic nOH in MSA	seltorexant MDD w/insomnia symptoms	Vanzacaftor/tezacaftor/deutivacaftor Cystic fibrosis
			frexalimab Multiple sclerosis	ecopipam Tourette Syndrome	TEV-'749 Schizophrenia	
Additional indication	Trodelvy Lung, HNSCC and endometrial	Trodelvy (+ combinations) 1L mUC	Trodelvy 1L TNBC (PD-L1-)	Trodelvy 2L+ mUC	KarXT Schizophrenia (adjunctive)	Tremfya Ulcerative colitis
	Tazverik (+ hormonotherapy) mCRPC	Trodelvy (+ pembrolizumab) <sup>(1)</sup> 1L mNSCLC	Trodelvy (+ pembrolizumab) Adjuvant TNBC	Trodelvy (+ pembrolizumab) 1L mTNBC (PD-L1+)	KarXT Psychosis in Alzheimer's disease	Tremfya <sup>(5)</sup> Crohn's disease
	seltorexant AD with agitation/aggression	Tremfya Giant cell arteritis	Trodelvy HR+/HER2- chemo-naïve mBC	Trodelvy (+ pembrolizumab) <sup>(4)</sup> 1L mNSCLC	Tremfya PsA Structural Damage	
	Skytrofa Turner syndrome	frexalimab Systemic lupus erythematosus	Trodelvy 2L+ mEC	Cabometyx (+ PD1) 1L metastatic RCC	Spinraza (higher dose) Spinal Muscular Atrophy	
		frexalimab Type 1 diabetes	Erleada High risk prostate cancer <sup>(2)</sup>	Cabometyx (+ Tecentriq) mCRPC	Skytrofa Adult GHD	
			Erleada Localized prostate cancer <sup>(3)</sup>	Cabometyx Advanced NET	aficamten nHCM	
		Imbruvica 1L Follicular lymphoma	Tazverik (+ Revlimid, Rituxan) 2L Follicular lymphoma			

<span style="display:inline-block; width:10px; height:10px; background-color:#008080;"></span> Rare disease	<span style="display:inline-block; width:10px; height:10px; background-color:#444;"></span> Neuroscience
<span style="display:inline-block; width:10px; height:10px; background-color:#4682B4;"></span> Immunology	<span style="display:inline-block; width:10px; height:10px; background-color:#000080;"></span> Cardio-Metabolic
<span style="display:inline-block; width:10px; height:10px; background-color:#000080;"></span> Cancer	

HNSCC: head and neck squamous cell carcinoma; mCRPC: metastatic castration-resistant prostate cancer; AD: Alzheimer's disease; mUC: metastatic urothelial carcinoma; mNSCLC: metastatic non-small-cell lung carcinoma; oHCM: obstructive hypertrophic cardiomyopathy; TNBC: triple negative breast cancer; mBC: metastatic breast cancer; mEC: metastatic endometrial cancer; nOH: neurogenic orthostatic hypotension; MSA: multiple system atrophy; mTNBC: metastatic triple negative breast cancer; RCC: renal cell carcinoma; NET: neuroendocrine tumors; nHCM: non-obstructive hypertrophic cardiomyopathy; MDD: major depressive disorder; PsA: psoriatic arthritis; GHD: growth hormone deficiency

1. EVOKE-02. 2. High risk localized advanced prostate cancer prior to radical prostatectomy. 3. High risk localized advanced prostate cancer receiving primary radiation therapy. 4. EVOKE-03. 5. Johnson & Johnson submitted applications to the European Medicines Agency seeking to expand Marketing Authorization Application for Tremfya in ulcerative colitis and Crohn's disease on May 1, 2024.