



# Corporate Presentation

June 2025 | Nxera Pharma Co., Ltd. (TSE: 4565)

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## Agenda

- 01 Business Overview
- 02 Strategic Roadmap
- 03 Our Pipeline
- 04 Japan/APAC Business
- 05 Our NxWave™ Platform
- 06 Financial Results
- 07 Appendix

# Business Overview

01





# We are Nxera Pharma

A technology-powered biopharma in pursuit of new specialty medicines to improve the lives of patients

## OVERVIEW

**\$200m**

Annual Revenues

**\$240m**

Cash on Hand to Invest

**400+**

Employees in 5 locations

**4565** (Ticker)

Tokyo Stock Exchange PRIME listed

**6%+**

Japan Govt. top long-term holder

## PRODUCTS AND PROGRAMS

**Sales**

**3**

In Japan

**1**

In Global  
(with Partner)

**Clinical (Global)**

**13**

With Partners

**3**

In-House

**Discovery**

**20+**

In House and  
With Partners

## PRODUCT FOCUS & SCIENCE

**Market Size Of Product Focus**

**\$120bn+**

Neurology

**\$150bn+**

Metabolic

**\$300bn+**

Immunology/  
GI

**100+**

GPCR Structures  
Solved with  
NxWave™  
Platform

**1,500**

Patents Granted



# Not a traditional Japanese pharma. We think and innovate globally, and specialize locally

## Global Drug Discovery Center



CEO   Research   Finance   Chief of Staff

### Research & Early Clinical



- Cryo-EM Nobel Prize winning founder
- Proprietary StaR™ and NxWave™
- Structure-based drug design platform

### Technical Operations



- Global CMC Operations
- Supply Chain
- Quality Management

**~200 team members**



## Japan Operations Team



Finance   Development / Medical   Operation



Compliance   Commercial

**~200 team members**



### Development & Commercial



- Bilingual management with global experience
- Agile, technology-enabled teams
- Novel go-to-market approaches

Our team is committed to addressing some of the biggest healthcare challenges globally

# Strategic Roadmap

02





# Our History

Strategic steps taken to build Nxera over the last two decades

## 2000s

Launched a public company dedicated to **bringing innovation to Japan**

- ✓ IPO on TSE (MOTHERS) in 2004

Made strategic acquisitions to bring **steady revenue** through groundbreaking medicines

- ✓ \$186m acquisition of Arakis Limited in 2005
- ✓ Royalty revenues from Breezhaler® medicines from 2012 to present

ARAKIS

## 2015

Out-licensed several programs to global pharma to **generate profit, a cash reserve and a larger market valuation**

- ✓ 15+ partnered programs that generate upfront and milestone revenue (plus future royalties)

Invested in research-focused companies that could **generate a continuous pipeline of new medicines**

- ✓ \$400m acquisition of Heptares Therapeutics Limited in 2015

HEPTARES  
therapeutics

## 2023

Elevated our status in the **Tokyo Stock Exchange**, improving access to institutional investors

- ✓ Promotion to TSE (PRIME) segment in 2023
- ✓ First public healthcare investment by the Japan Investment Corporation in 2023

Acquired a commercial-stage pharmaceutical company which provided an **integrated platform** for even greater sustainable revenue growth

- ✓ \$466m acquisition of Idorsia Pharmaceuticals Japan and Korea
- ✓ Rapidly growing revenues from sales of PIVLAZ®

Idorsia JAPAN  
KOREA

## 2024

**NXera**

Launched new corporate branding:

**Nxera Pharma Co**

*With a vision to lead the next era of medicine.*

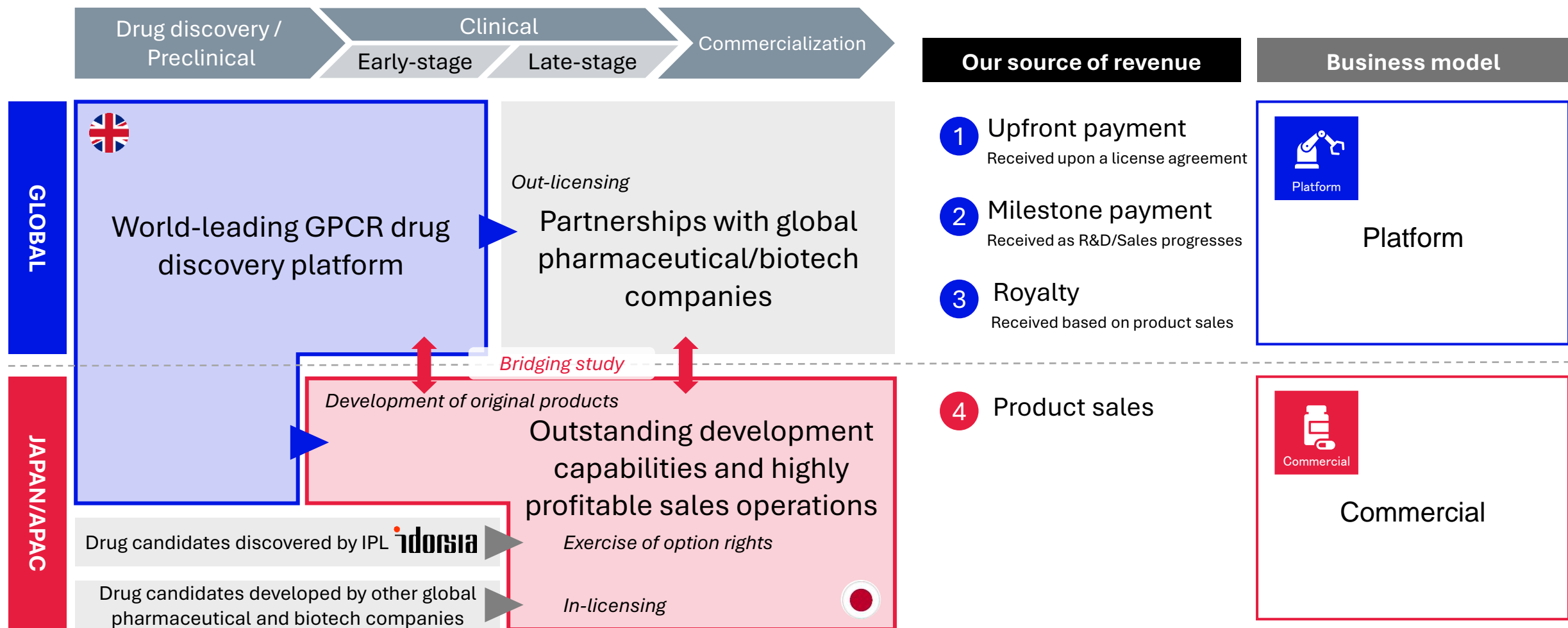
*From Japan, for Japan, and the world.*





# Building a fully integrated biopharma from Japan

Accelerating growth to achieve our mission by leveraging business platform in Japan and UK





## Priority objectives for FY2025

01

JPY 17 billion+ Net product sales (PIVLAZ<sup>®</sup> plus QUVIVIQ<sup>®</sup>)



02

Acquire/in-license at least one late-stage medicine for Japan/APAC (ex-China)



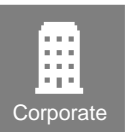
03

Execute at least one new major partnership, and initiate at least one new in-house Ph.2 study



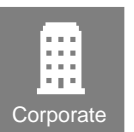
04

Investment in systems and applications for efficiency and scalability



05

Positive operating profit under IFRS (if GPR52 option is exercised)





Partner's Wave 1 and Wave 2 programs are positioned across fast growing disease areas of healthcare

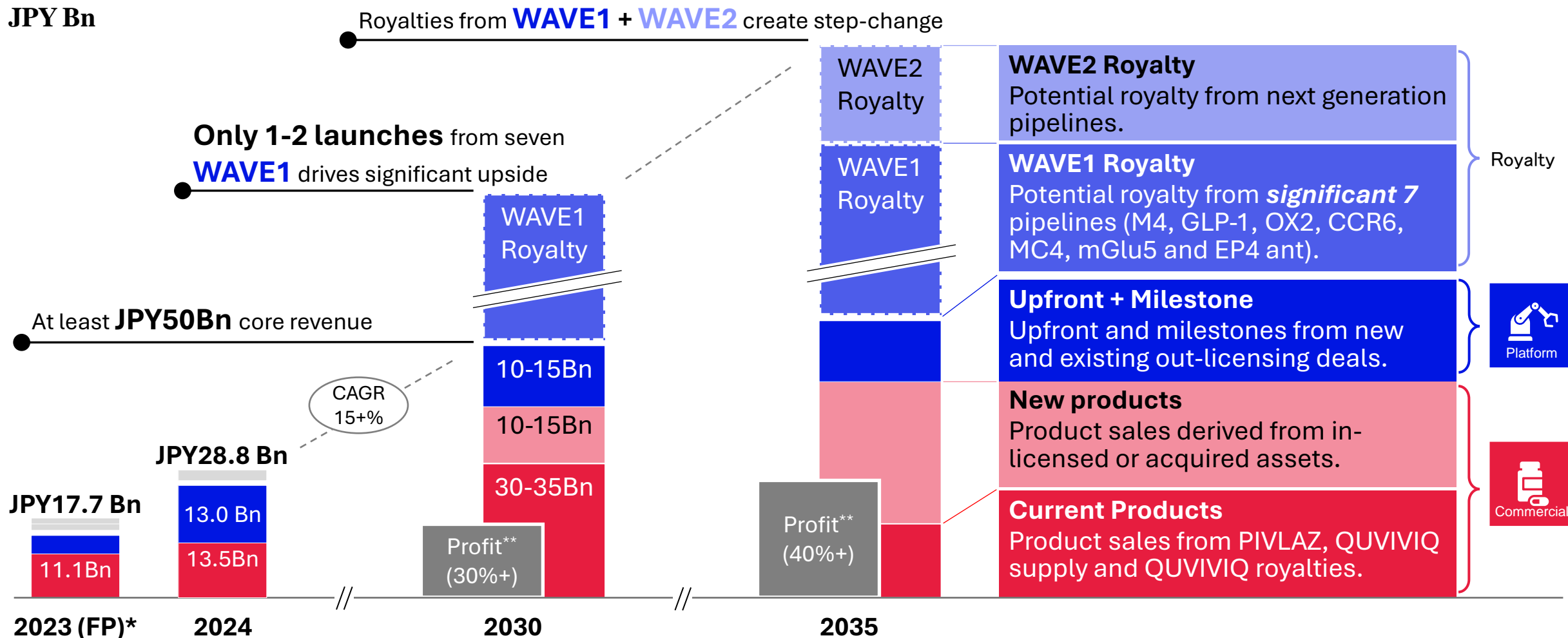
	MARKET SIZE (2030)	WAVE1 (Potential Launch by 2030)	WAVE2 (Potential Launch by 2035)
Neurology	\$120bn+	<div> <b>TEMPERO BIO™</b>  P2 mGlu5 NAM  <i>Substance Use Disorders</i> </div> <div> <b>CENTESSA</b>  P2 Ox2 agonist  <i>Narcolepsy</i> </div> <div> <b>NEUROCRINE™</b>  P3 M4 agonist  <i>Schizophrenia</i>  P2 M4 agonist  <i>Bipolar Mania</i>  P1 M1/M4 agonist  <i>Schizophrenia</i> </div>	<div> <b>CENTESSA</b>  PreC Ox2 agonists  <i>Neuropsych-related sleep disorders</i> </div> <div> <b>NEUROCRINE™</b>  P1 M4 pref. agonist  P1 M1 pref. agonist  <i>Cognitive &amp; psychosis-related disorders</i> </div> <div> <b>NXER</b>  P1 GPR52 agonist  <i>Schizophrenia</i>  <b>abbvie</b>  Disc Multiple targets  <i>Neurology</i> </div>
Metabolic	\$150bn+	<b>Pfizer</b> P1 GLP-1 agonist <i>T2D / Obesity</i> P1 MC4 antagonist <i>Malnutrition</i>	<b>Lilly</b> Disc Multiple targets <i>T2D/Obesity and Others</i>
Immunology / GI	\$300bn+	<b>Pfizer</b> P1 CCR6 antagonist <i>IBD</i> <b>NXER</b> <b>CANCER RESEARCH UK</b> P1 EP4 antagonist + PD-L1 <i>Immune-oncology for Advanced Solid Tumors</i>	<b>NXER</b> P1 EP4 agonist <i>IBD</i>
		JPY250bn (max total royalty potential at peak)	Multi billion USD milestones and royalties





# Our 2030 vision is to build a high growth, highly profitable Japanese biopharma

JPY Bn



Note: \* Revenue values are proforma the acquisition of Idorsia Pharmaceuticals Japan and Korea and reflect annual product sales of PIVLAZ in 2023.

\*\* WAVE1 and WAVE2 royalty is not included.



# Our Pipeline

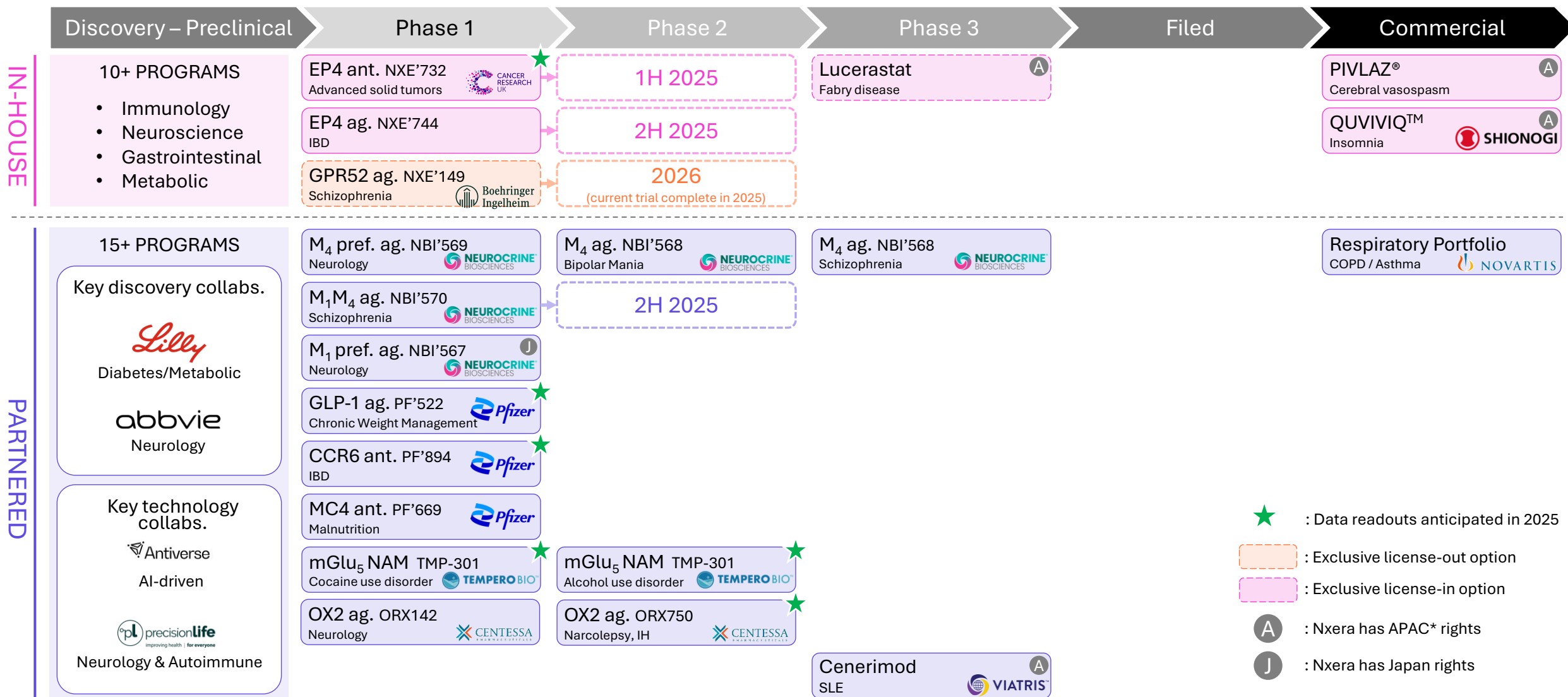
Programs by Design

03





# Major pipeline Overview (incl. projections)



Note: Pref. ag. : Preferring agonist

\*APAC (ex-China) territory includes Japan, South Korea, Australia, Brunei, Cambodia, Indonesia, Laos, Malaysia, Myanmar, New Zealand, Philippines, Singapore, Taiwan, Thailand and Vietnam

\*NXE0039732 (EP4 antagonist) is categorized as an in-house asset as we have not licensed out. Under the Clinical Trial and Licence Agreement (CTLA) in 2022, Cancer Research UK sponsors, designs and executes a Phase I/IIa clinical trial of NXE0039732, and Nxera holds a licence to the results generated under the trial to continue the clinical development and commercialization of NXE0039732.





OVERVIEW

STRATEGIC ROADMAP

PIPELINE

JP/APAC

PLATFORM

FINANCIALS

APPENDIX

# Major pipeline Overview (incl. key partner highlights)

IN-HOUSE

Discovery – Preclinical

Phase 1

Phase 2

Phase 3

Filed

Commercial

10+ PROGRAMS

- Immunology
- Neuroscience
- Gastrointestinal
- Metabolic

EP4 ant. NXE'732

Advanced solid tumors



EP4 ag. NXE'744

IBD

GPR52 ag. NXE'149

Schizophrenia



Lucerastat

Fabry disease

A

PIVLAZ®

Cerebral vasospasm

A

QUVIVIQ™

Insomnia



A

PARTNERED

15+ PROGRAMS

Key discovery collabs.



Diabetes/Metabolic



Neurology

Key technology collabs.



AI-driven



Neurology &amp; Autoimmune

M<sub>4</sub> pref. ag. NBI'569

Neurology

M<sub>1</sub>M<sub>4</sub> ag. NBI'570

Schizophrenia

M<sub>1</sub> pref. ag. NBI'567

Neurology

M<sub>4</sub> ag. NBI'568

Bipolar Mania

M<sub>4</sub> ag. NBI'568

Schizophrenia



Total Milestones: \$2.6bn

Royalties: high-single digit to mid-teens

GLP-1 ag. PF'522

Chronic Weight Management



CCR6 ant. PF'894

IBD



MC4 ant. PF'669

Malnutrition



Total milestones: \$570m

Royalties: Mid to high single digits

mGlu<sub>5</sub> NAM TMP-301

Cocaine use disorder

mGlu<sub>5</sub> NAM TMP-301

Alcohol use disorder



Royalties: Mid to high single digits

OX2 ag. ORX142

Neurology



OX2 ag. ORX750

Narcolepsy, IH



Cenerimod

SLE



A

Respiratory Portfolio

COPD / Asthma



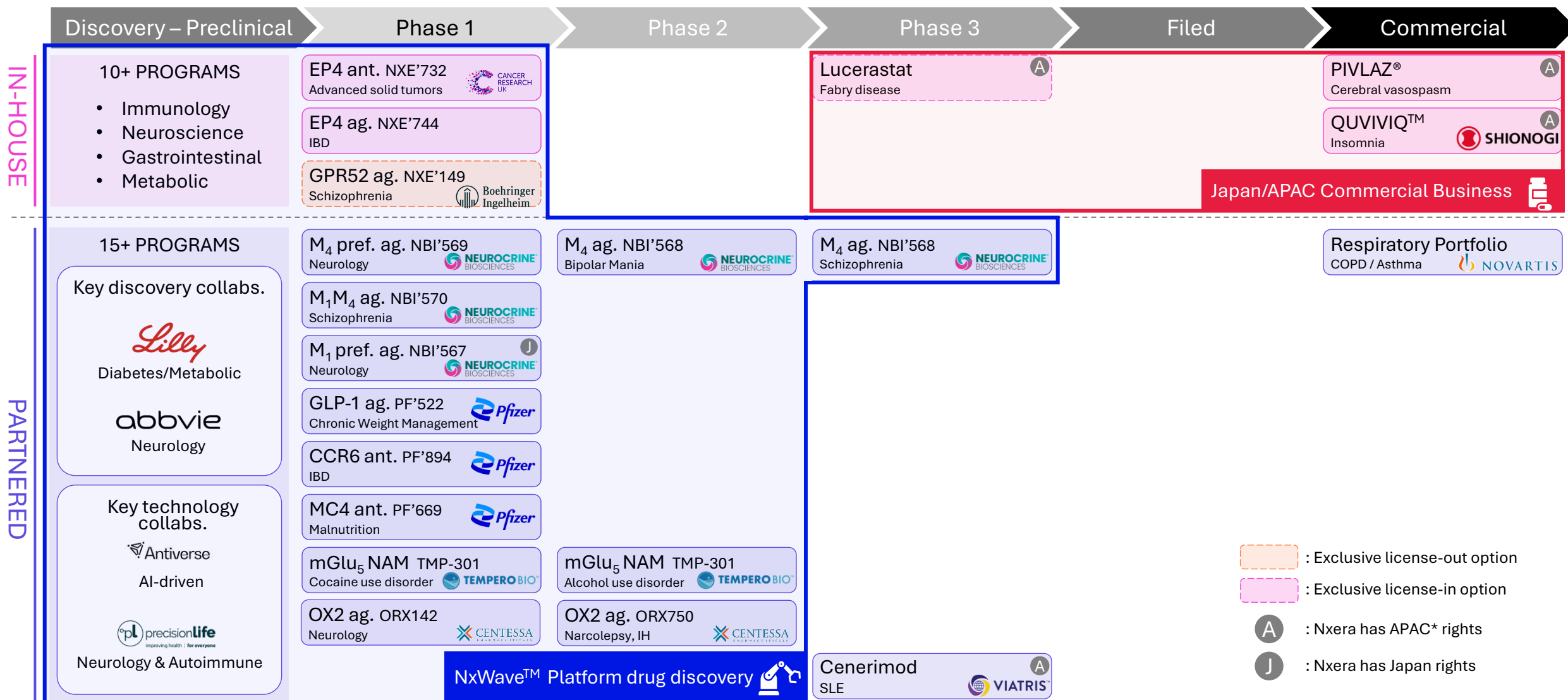
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# Major pipeline Overview (By business categories)



Note: Pref. ag.: Preferring agonist
















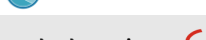




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# Looking ahead to potential catalysts in 2025\*

✓ : Progress in 2025

PROGRAM	PARTNER	TIMING	EVENT
✓ Cenerimod	 	Feb. 2025	Assignment of JAPAC rights
✓ TMP-301 (mGlu5 NAM)		Mar. 2025	Phase 2 study start in alcohol use disorder
✓ NBI'568 (M4 agonist)		Apr. 2025	Phase 3 study start in Schizophrenia
Lucerastat		H1 2025	Exclusive opt-in decision
NXE'732 (EP4 antagonist)	 	H1 2025	Phase 2a study start in Advancing Solid Tumours
NBI'568 (M4 agonist)		H2 2025	Phase 2 study start in Bipolar Mania
NBI'570 (M1/M4 agonist)		H2 2025	Phase 2 study start in Schizophrenia
NXE'744 (EP4 agonist)		H2 2025	Phase 2 study start in IBD
NXE'149 (GPR52 ag)	 	H2 2025	Phase 1b completion
NXE'732 (EP4 antagonist)	 	H2 2025	Phase 1b topline data
ORX750 (OX2 agonist)		H2 2025	Phase 2 data readout (NT1/NT2/IH)
TMP-301 (mGlu5 NAM)		End 2025	Phase 2 result in alcohol use disorder
Multiple discovery collaboration progress	 	2025	Progression through discovery stage
NBI'567 (M1 ago) / NBI'569 (M4 ago) / NBI'570 (M1/M4 ago)		2025	Phase 1 data readout
✓ QUVIVIQ™		Feb. 2025	Out licensing in Taiwan
New global out-licenses		Anytime	Out licensing and/or discovery collabs
New Japan / APAC in-licenses		Anytime	Acquire/in-license late-stage medicines
QUVIVIQ™		Anytime	APAC out-licensing deals

\* Partnered product progress is as already signaled or disclosed by partner





## Key strategy for each business category

Maximize the value of each business and demonstrate synergies by conducting integrated development in future



### Organic Growth

#### NxWave™ platform driven



- Collaborate with existing partners to help them to progress pipeline licensed from us
- Execute at least one new high value collaboration and/or co-investment per year

#### Acquire or in-license for Japan



- Maximize and optimize sales and profit for two major products (PIVLAZ®/QUVIVIQ™)



### Strategic Growth

- Collaborate/invest in new technologies with synergies

- In-license late-stage products for clinical development and commercialization in Japan and APAC



# Japan/APAC Business

Deliver innovation to patients in Japan/APAC

04

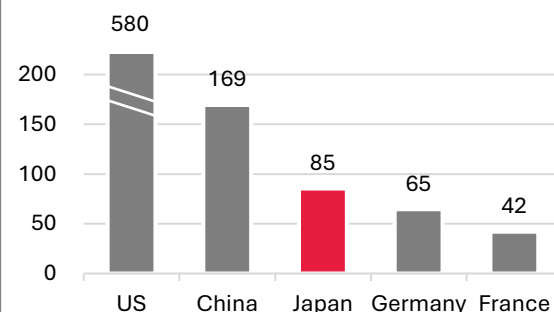


# Japan will serve as our base to expand across APAC markets

Japan is an attractive, established market with strong volumes

## Japan is the second largest pharma market (ex-China)

Market size (USD bn) (2021)



## Tailwinds from near-term regulatory changes

“ Japan Phase 1 Drug Clinical Trials No Longer Needed for Global Clinical Trials ”

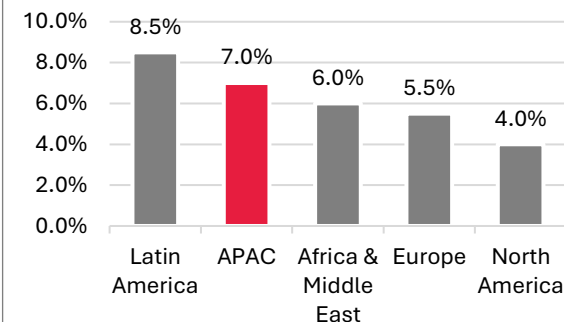


## High quality clinical and regulatory environment

- ✓ Excellent access to Doctors/HCPs who evaluate novel drugs
- ✓ Typically achieve strong patient uptake
- ✓ Reduces drug loss and drug lag for Japan patients

## APAC is the second highest growth pharma market

Market growth (CAGR %) (2019 - 2027)



Source: IQVIA Market Prognosis, Sep 2022; IQVIA Institute, Nov 2022.

APAC (ex-China) territory includes South Korea, Australia, Brunei, Cambodia, Indonesia, Laos, Malaysia, Myanmar, New Zealand, Philippines, Singapore, Taiwan, Thailand and Vietnam



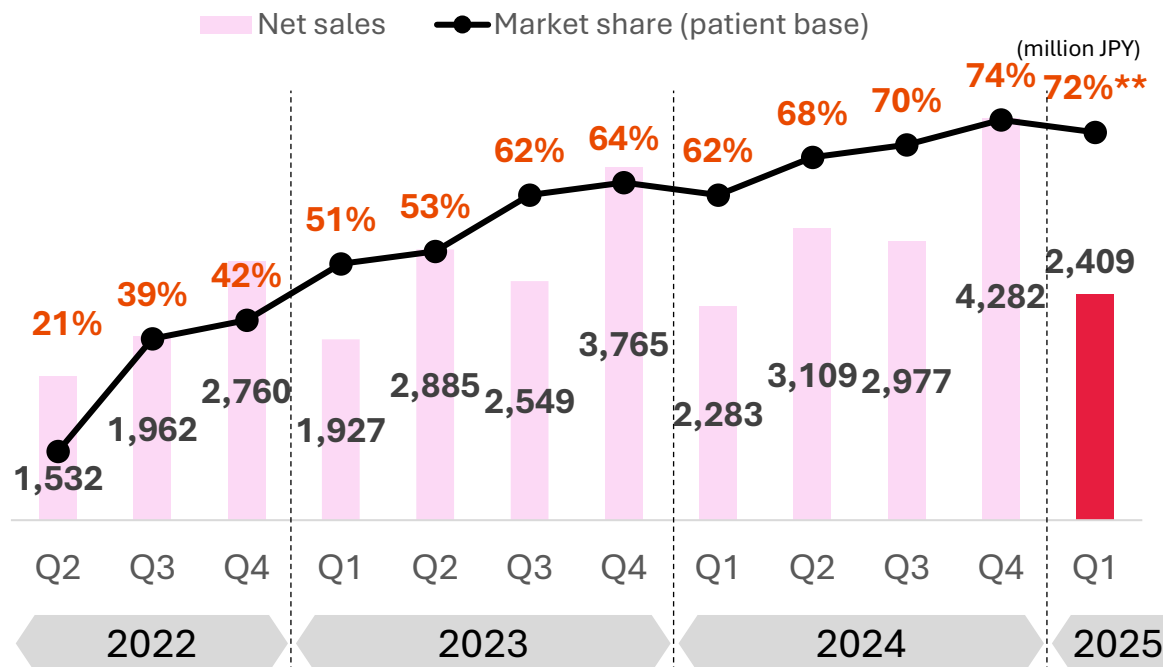


# PIVLAZ® (clazosentan, an endothelin A antagonist)

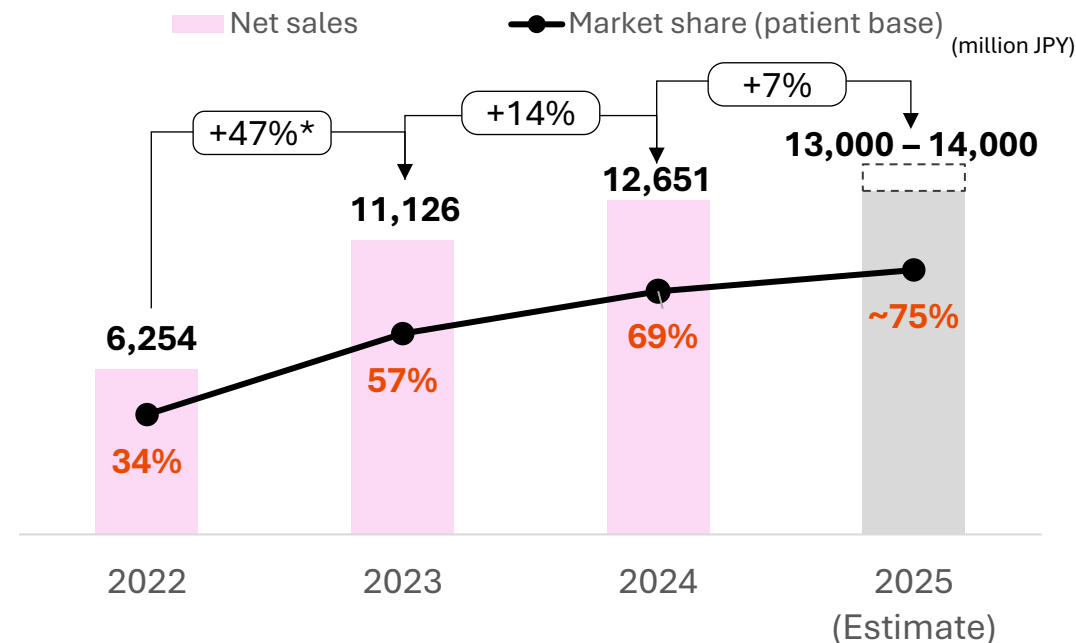
Our first commercially available product for the prevention of cerebral vasospasm in patients with Aneurysmal Subarachnoid Haemorrhage (aSAH)



## Quarterly PIVLAZ® Net Sales



## Annual PIVLAZ® sales and its growth



PIVLAZ® has rapidly built awareness and is becoming the standard of care with neurosurgeons

Source: MDV DPC hospital data

\*: Comparison of 2-4Q of 2022 and 2023,

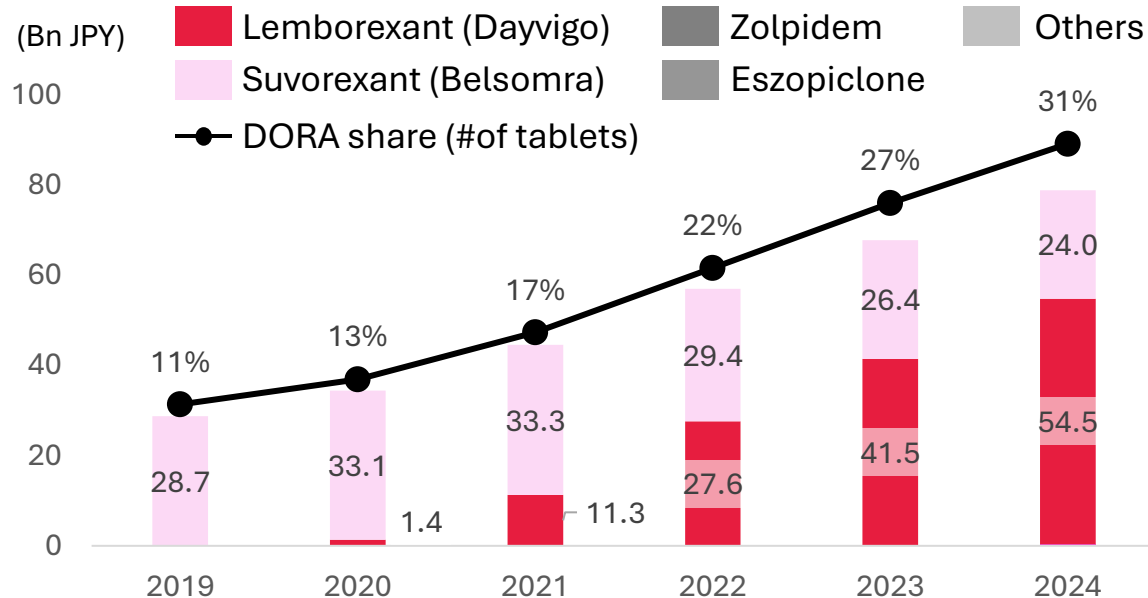


# QUVIVIQ™ (daridorexant, dual orexin antagonist “DORA”)

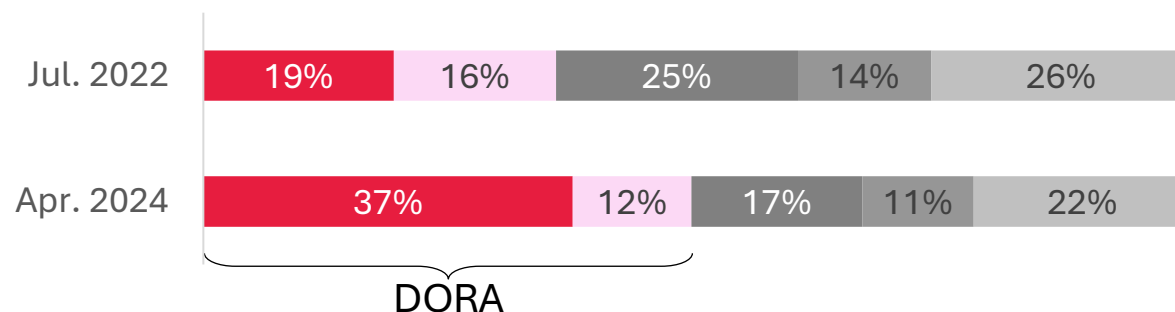
DORA is rapidly establishing its position in the treatment paradigm for insomnia



## Sales and market share (NHI-base)



## Prescription share (Most frequently prescribed sleeping pills)



- ✓ DORAs are rapidly penetrating the insomnia treatment market in Japan, where traditional anti-anxiety and z-class drugs are not preferred by physicians
- ✓ Japan is one of the largest DORA markets globally – estimated at up to US\$1bn
- ✓ Together with partner Shionogi, we aim to provide a best-in-class product

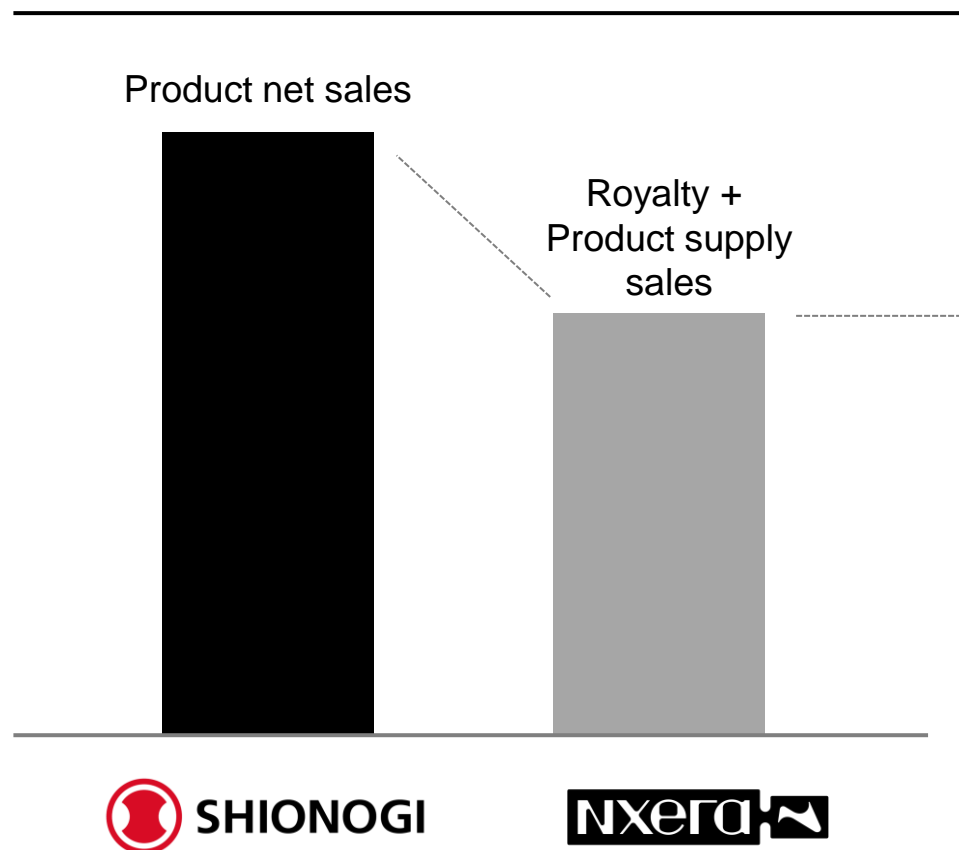


# Quviviq Business structure Image for Nxera

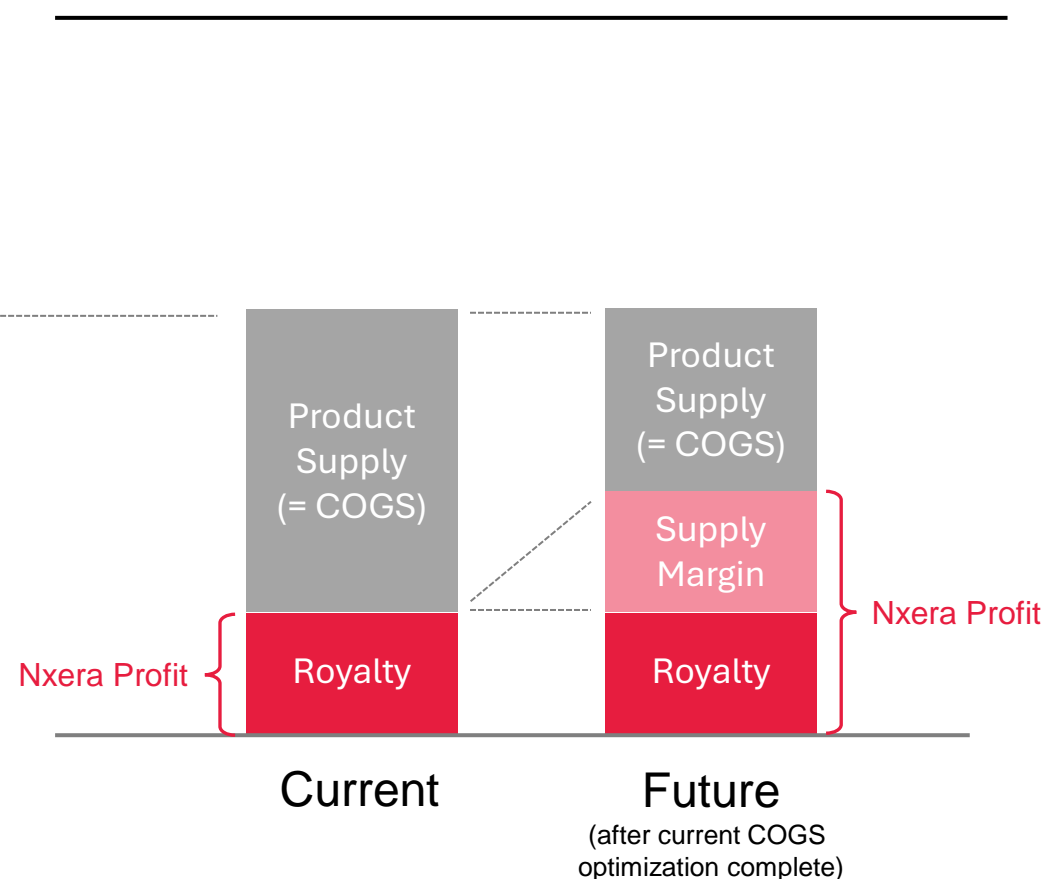
Profit starts from royalty and supply margin will be adding on in a few years



## Sales structure



## Profit structure for Nxera





# Full year product sales guidance

Target 13.0 - 14.0 Bn JPY (PIVLAZ) as net sales, and 4.0 - 5.0 Bn JPY (QUVIVIQ) as royalty and supply



Target sales  
in FY2025



**13.0 – 14.0 Bn JPY**

(NHI Sales: 15.7 – 16.9 Bn JPY)

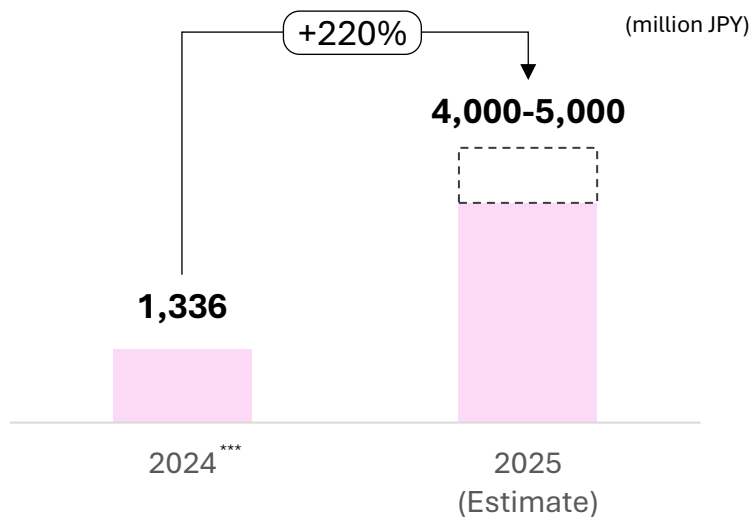
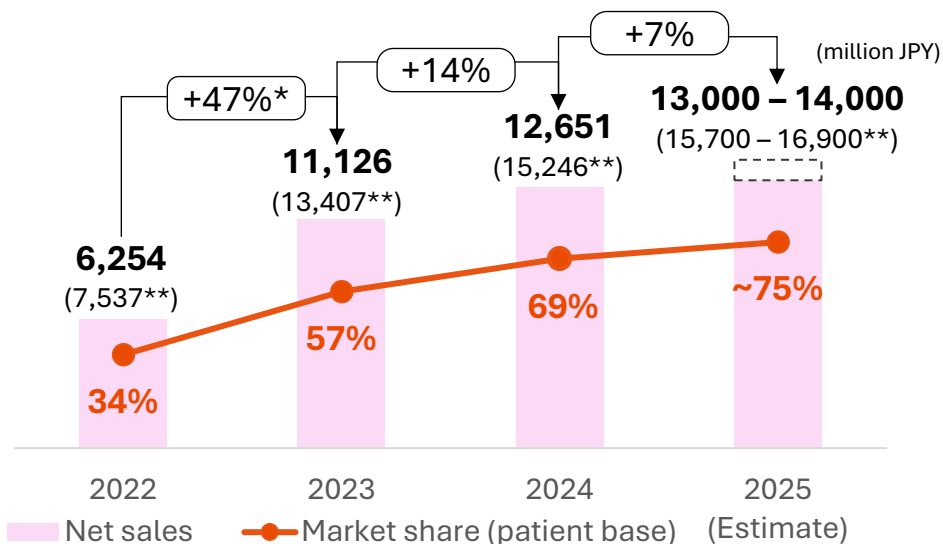
+7%

**4.0 – 5.0 Bn JPY**

(Shionogi: FY26/3E = 9.3 Bn JPY)

+220%

Sales trend



Source: MDV DPC hospital data

\*: Comparison of 2-4Q of 2022 and 2023, \*\* NHI sales, \*\*\* 2024 sales includes upfront, milestone, royalty and product supply while 2025 sales includes royalty and product supply



A high-speed photograph of a green liquid splash, possibly paint or ink, against a dark background with out-of-focus bokeh lights in shades of orange, red, and blue. The liquid forms a complex, flowing shape that dominates the left and center of the frame.

# Our NxWave™ Platform

Cutting-edge Science

05



# NxWave™ platform enables faster, cheaper and more precise drug discovery

World-leading science and platform enables efficient drug discovery against difficult targets

	Conventional drug discovery	Our drug discovery
Approach	Empirical design	Rational design (computer-based)
Method	High Throughput Screening (HTS <sup>1</sup> )	Proprietary NxWave™ Platform
Period <sup>2</sup>	4.5 years on average	3.0 years on average
Costs <sup>2</sup>	\$15 million	\$5 million
Features <sup>3</sup>	Difficult to design drugs precisely – high development attrition rate	Execute more precise drug design – lower development attrition rate
Target <sup>3</sup>	Difficult for GPCRs with unstable structures	Best for GPCRs with unstable structures

<sup>1</sup> HTS/High Throughput Screening is a method to find drug candidates by reacting tens of thousands to millions of compounds with drug targets using large machines and human hands.

<sup>2</sup> The period from target selection to preclinical testing. For conventional drug discovery, figures are taken from NATURE REVIEWS Drug Discovery (MARCH 2010).

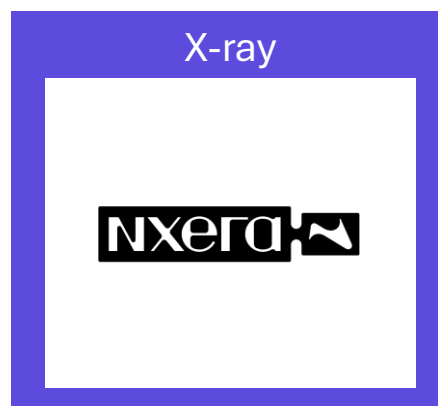
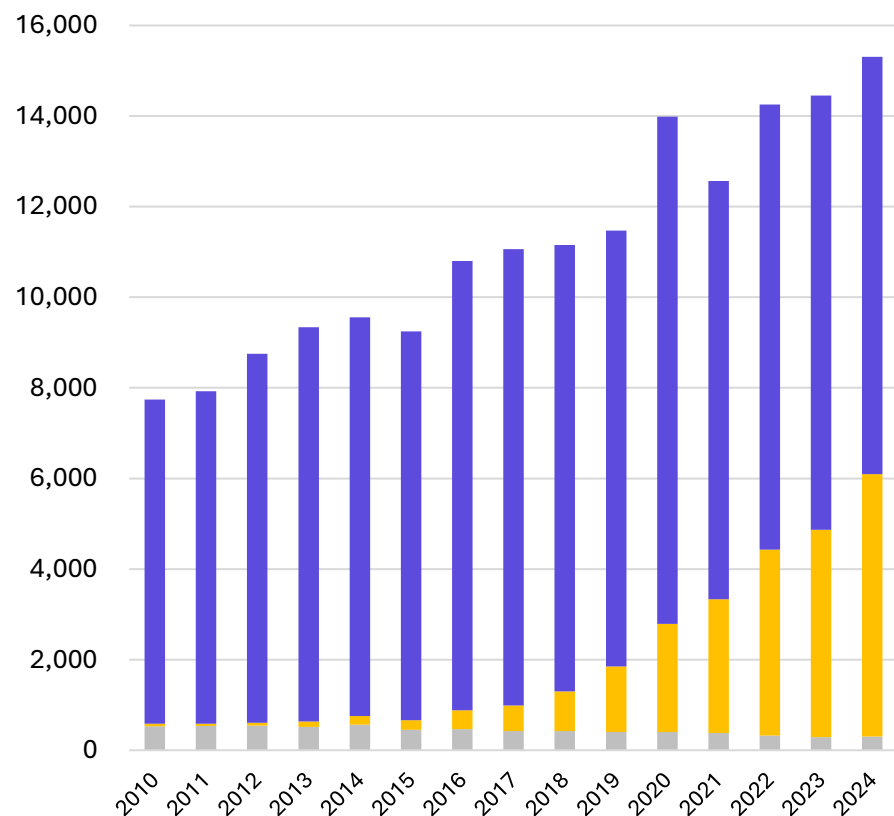
<sup>3</sup> Precise drug design make clear the binding site of target, make easier to improve compound, create backups and redo – potentially increase the success rate. GPCR is most popular drug target which account for 30% of current drug target.



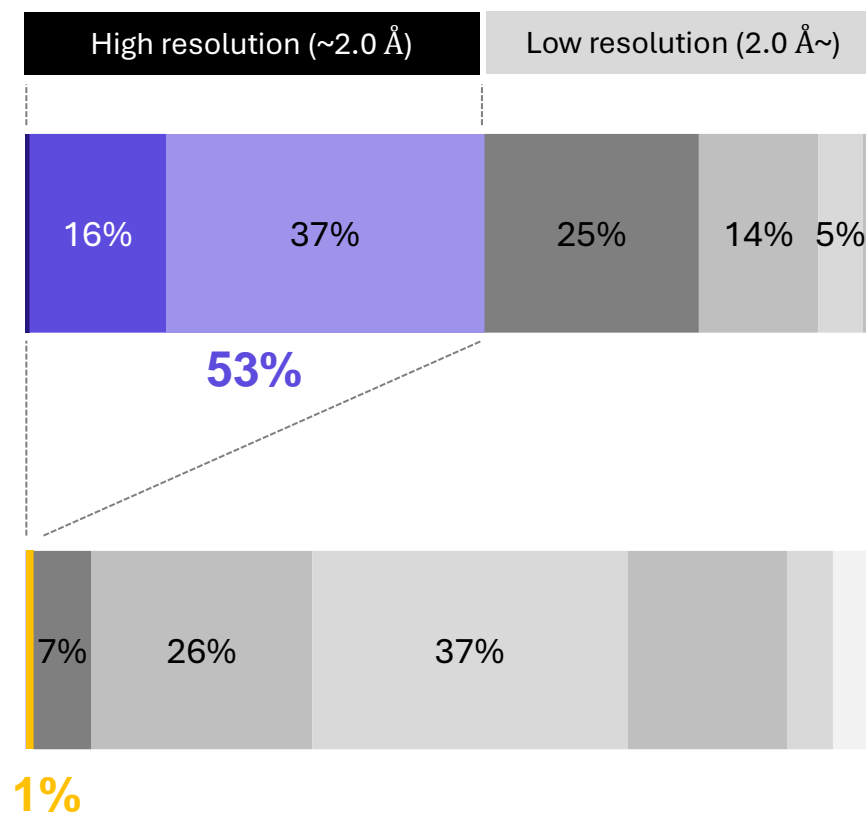
# Number of Structures Solved and Deposited in PDB, Resolution by technology

The number of structures solved using Cryo-EM is increasing, X-ray crystallography has extremely high resolution

## Number of structure solved by technology



## Resolution by technology





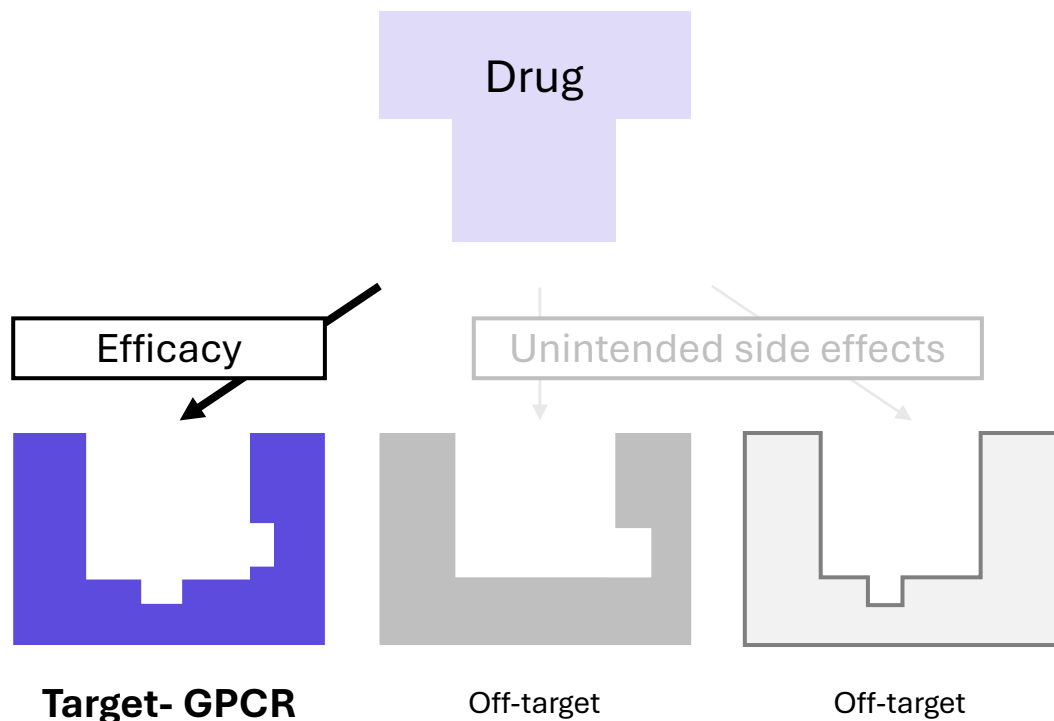


# Our platform enables precise design of GPCR models

Only by performing detailed structural analysis can we design great drugs.

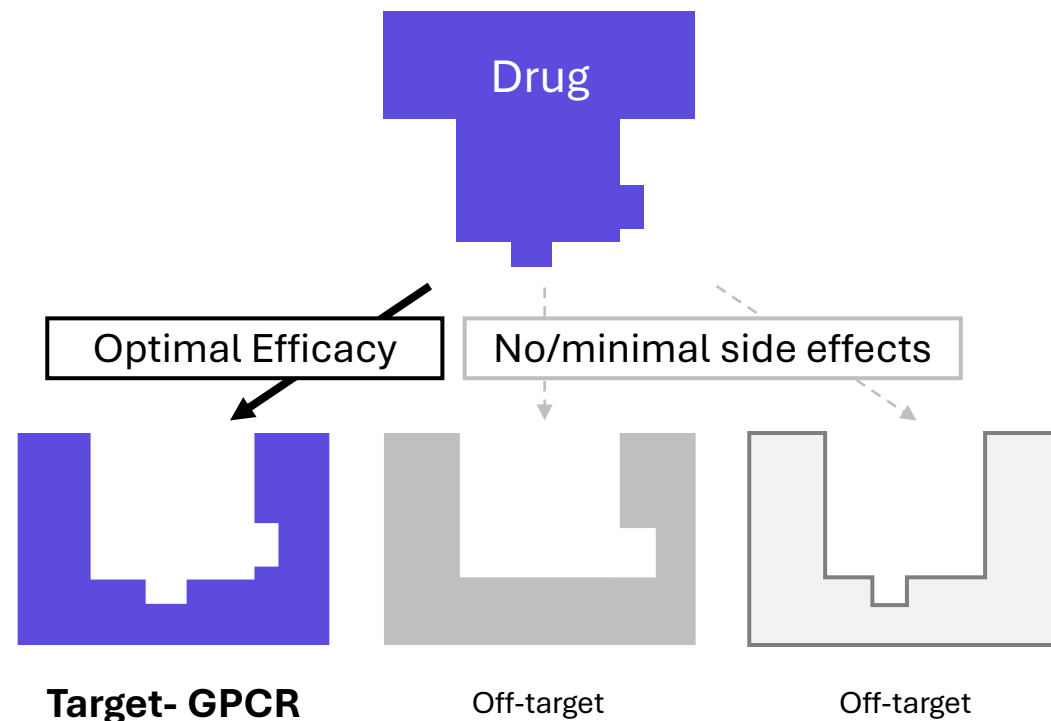
## Imprecise GPCR model: **Standard Medicine**

Poorly understood GPCRs (locks) led to suboptimal drugs (keys) being designed



## Precise GPCR model: **Optimized Medicine**

High selectivity enables to **optimize efficacy and minimize side effects**



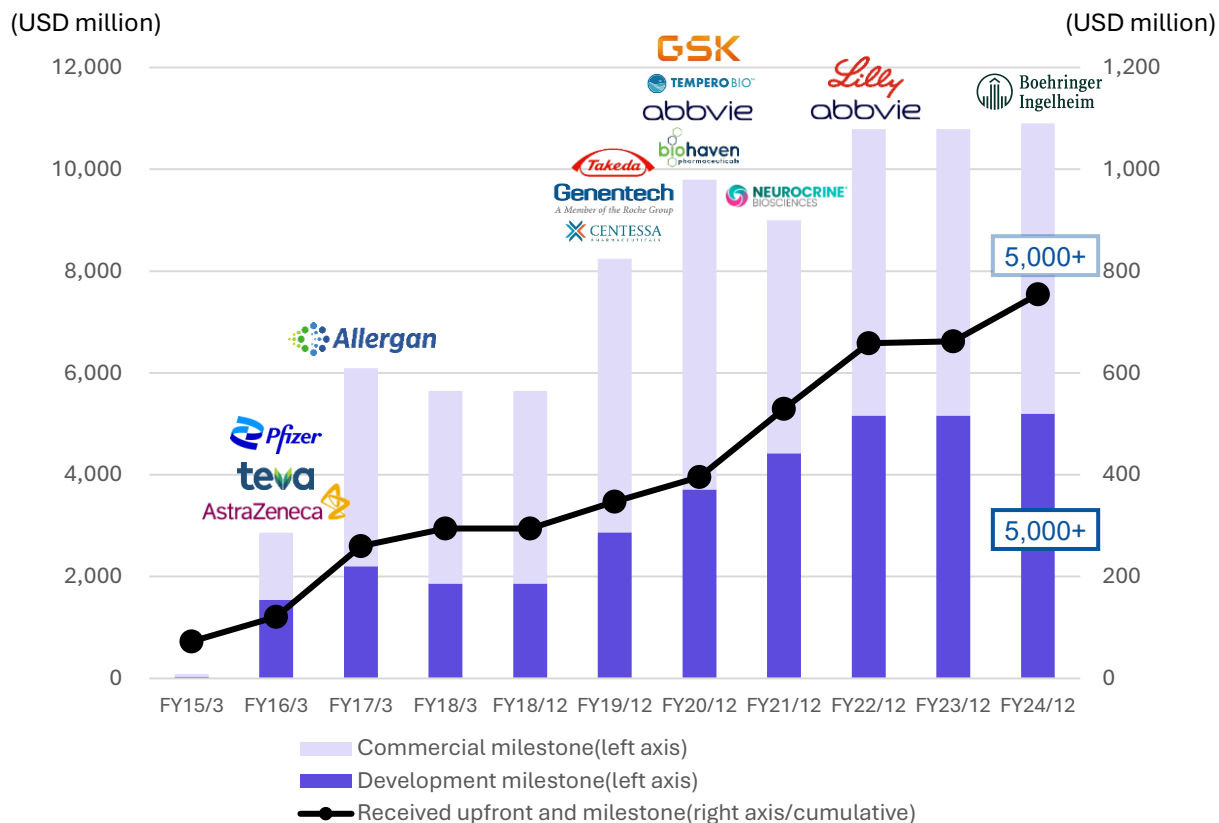




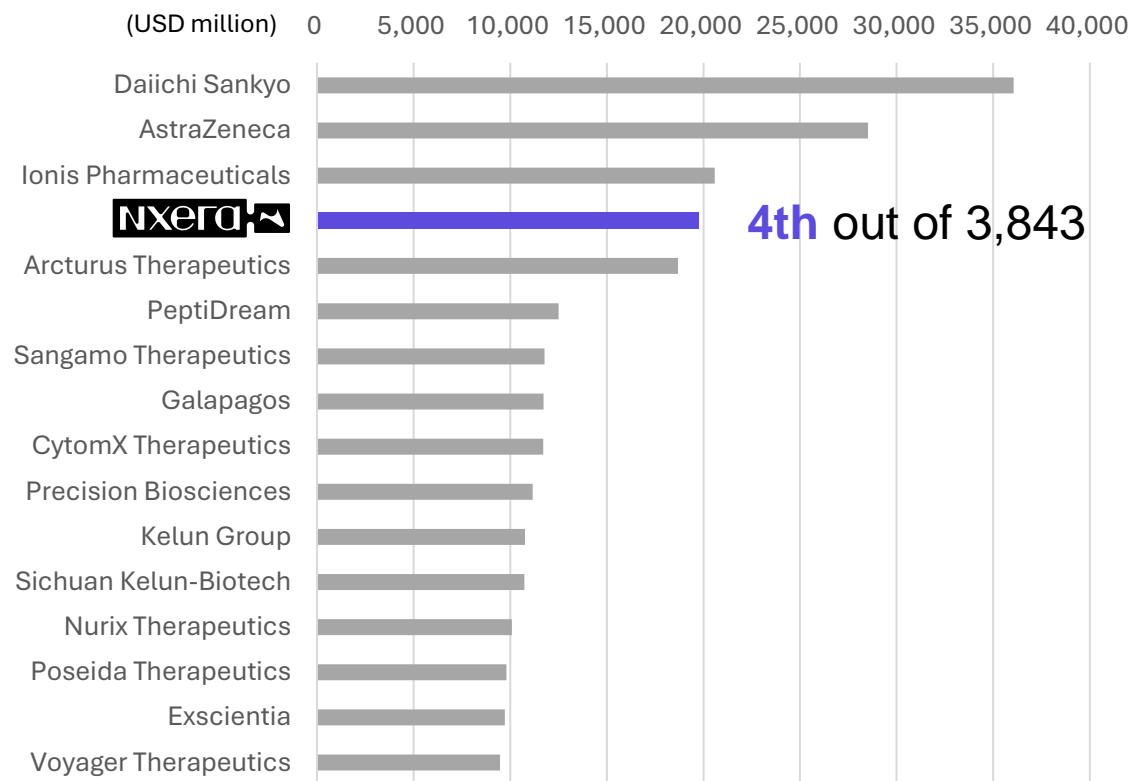
# Our track record of major licensing transactions speaks for itself...

Income from licensing provides a great source of non-dilutive financing to support our growth

## Balance of potential milestone income from existing license agreements<sup>1</sup>



## Top 15 pharmaceutical/biotech companies by license value<sup>2</sup> (cumulative total since 2015)



<sup>1</sup> Balance as of the end of the fiscal year of only those currently under contract. TEVA and AbbVie (formerly Allergan), for which compounds were returned, are excluded from the balances from FY2018 and FY2021, respectively.











<sup>2</sup> The figures are based on 'Licensing' category on third party's (EvaluatePharma's) proprietary database and therefore do not completely match the amounts shown in the LHS chart.

Source: Company's data (LHS) and EvaluatePharma (as of 2024/10/17) (RHS)



... hundreds of millions of dollars received, billions of dollars in potential to come

New collaboration and exclusive option to license agreement executed with Boehringer Ingelheim

Partner	Execution	Program	Therapeutic Area(s)	Upfront and Initial Milestones	Potential Total Milestone <sup>1</sup>
 <b>Boehringer Ingelheim</b>	March 2024	Collaboration and exclusive option-to-license agreement for GPR52 agonist	Schizophrenia	€25m	€670m
	December 2022	Multi-target Collaboration	Diabetes and Metabolic	\$37m	\$800m
	August 2022	Multi-target Collaboration	Neurological disorders	\$80m	\$1.2bn
	December 2021	Collaboration and license agreement for M <sub>4</sub> , M <sub>1</sub> and M <sub>1</sub> /M <sub>4</sub> dual agonist	Neurological disorders	\$100m	\$2.6bn
	December 2020	Collaboration and license agreement for GPR 35	Gastrointestinal, immunology	\$44m	\$480m
	December 2020	Collaboration and license agreement for CGRP portfolio	Neurology	\$10m	\$380m
	June 2020	Discovery Collaboration and Option to License <sup>2</sup>	Inflammatory and Autoimmune	\$32m	\$400m
	August 2019	Multi-target Collaboration	Multiple; Initial focus on Gastrointestinal	\$26m	\$1.2bn
 <small>A Member of the Roche Group</small>	July 2019	Multi-target Collaboration	Multiple	\$26m	\$1.0bn
	November 2015	Multi-target Collaboration	Multiple	-	\$1.8bn

<sup>1</sup>Potential option fees, development, regulatory and commercial milestone payments agreed at the time of transaction. Nxera is also eligible to receive tiered royalties ranging from high single digit to mid-teen percentage on future net sales of any products developed under the partnership. <sup>2</sup> AbbVie has the option to expand the collaboration by an additional three targets



# Topline Results for Phase 2 Trial of M4 Agonist

20mg dose demonstrated statistically significant efficacy at Week 3, 4, 5 and 6 vs. placebo

## Once-Daily 20mg Dose Met Primary Endpoint

PANSS Total Score vs Placebo

Week 6	Placebo N=68	20mg QD N=35	40mg QD N=38	60mg QD N=34	30mg BID N=26
PANSS Total Score					
LS Mean Change from Baseline*	-10.8	-18.2	-12.6	-13.7	-15.8
LS Mean Difference vs. Placebo, p-value*		-7.5 p = 0.011	-1.9 p = 0.282	-2.9 p = 0.189	-5.0 p = 0.090
Effect Size**		0.61	0.27	0.39	0.23



\*Least-squares (LS) means are from a MMRM which includes treatment group, visit, and study period as fixed effects; treatment group-by-visit interaction; baseline PANSS total score as a covariate; and subject as a random effect.  
\*\*Effect size (Cohen's D) is based on observed data.

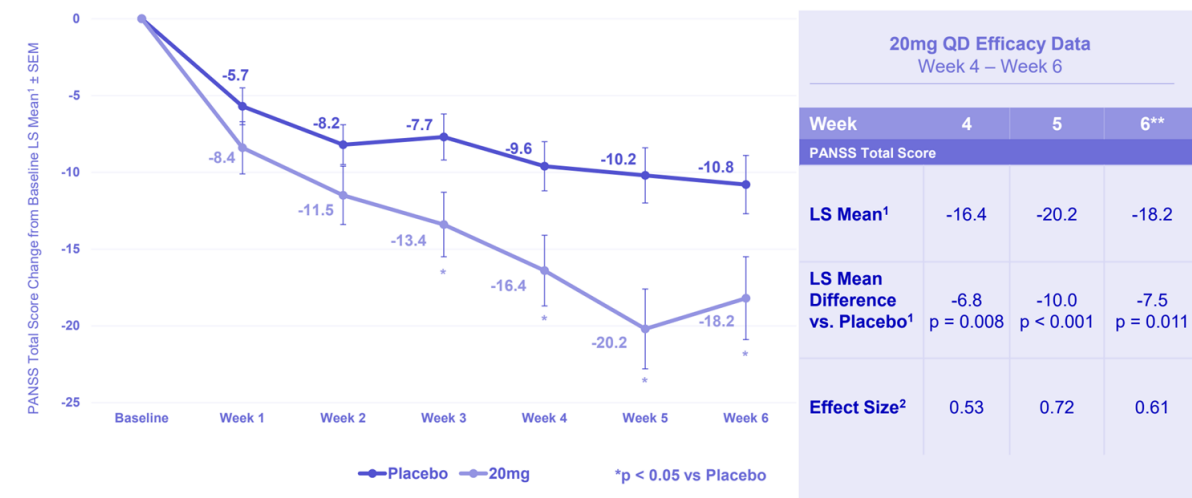
8



\*Least-squares (LS) means are from a MMRM which includes treatment group, visit, and study period as fixed effects; treatment group-by-visit interaction; baseline PANSS total score as a covariate; and subject as a random effect.  
\*p < 0.05 vs Placebo  
2 Effect size (Cohen's D) is based on observed data.

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## Once-Daily 20mg Dose Demonstrated Clinically Meaningful and Statistically Significant Efficacy at Week 3, 4, 5, and 6



\*\* Primary Endpoint = Week 6

“The effects with the 20-milligram dose, you see statistical significance between Week 3, 4, 5, and six, meaning that you are seeing a reproducible response here.”



# Comparison of Study Sites and Duration with Known Muscarinic Programs

Mentioned in a presentation Phase 3 of NBI-568 will be one to one randomization and around 20 sites per study

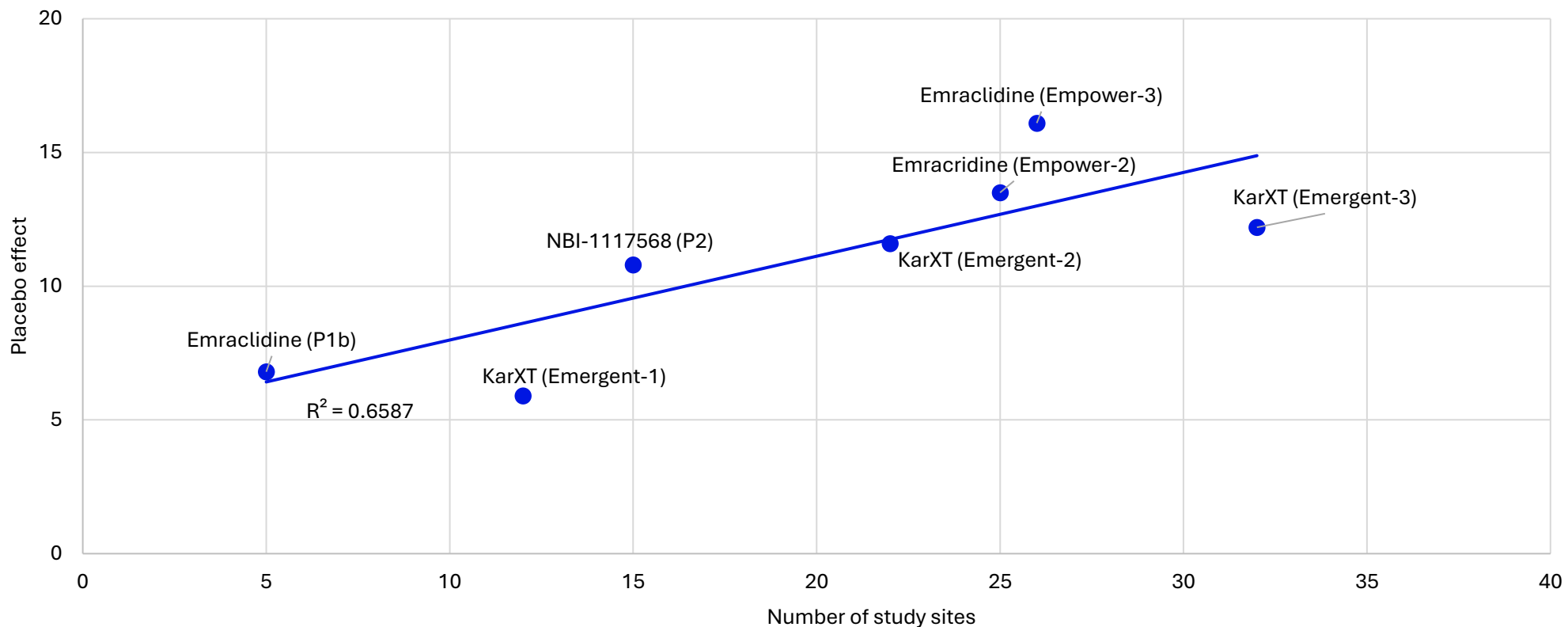
	Neurocrine/Nxera	Neurocrine/Nxera	BMS/Karuna	AbbVie/Cerevel
Compound	NBI-1117568	NBI-1117568	Cobenfy/Kar-XT	CVL-231/Emraclidine
Study name	NCT05545111	NCT06963034	EMERGENT-2/3	EMPOWER-2/3
Route of Administration	oral (once daily)	oral (once daily)	oral (twice daily)	oral (once daily)
Size	213	280+	Total 518	Total 752
Randomization	drug: placebo = 2:1	drug: placebo = 1:1	drug: placebo = 1:1	drug: placebo = 2:1
Number of study sites	15 sites	20 sites (estimate)	22 sites (EMERGENT-2) 32 sites (EMERGENT-3)	26 sites (EMPOWER-2) 25 sites (EMPOWER-3)
Duration	1.8years	2025/5-2027/10(2.2years)	1.6years	2.2years
Phase	Ph2 (completed)	Ph3 (on trial)	Ph3 (completed)	Ph2 (unsuccessful)
Primary endpoint	PANSS Total Score Change (Week 6)	PANSS Total Score Change (Week 5)	PANSS Total Score Change (Week 5)	PANSS Total Score Change (Week 5)





## Data comparison of placebo effects (Total PANSS)

Large number of study sites in a clinical trial of muscarinic program may be linked to a higher placebo response.



“Number of facilities is another important factor in managing the placebo effect”



# Safety: Adverse Events Risk

The gastrointestinal and cardiovascular adverse events were higher than placebo in KarXT, but not on NBI-568

## NBI-568

	Placebo N=70	20mg QD N=40	40mg QD N=39	60mg QD N=34	30mg BID N=27	All Treated N=140
Somnolence	2 (2.9)	5 (12.5)	2 (5.1)	7 (20.6)	1 (3.7)	15 (10.7)
Dizziness	1 (1.4)	5 (12.5)	3 (7.7)	4 (11.8)	1 (3.7)	13 (9.3)
Headache	14 (20.0)	1 (2.5)	5 (12.8)	1 (2.9)	5 (18.5)	12 (8.6)
★ Nausea	2 (2.9)	2 (5.0)	3 (7.7)	3 (8.8)	0	8 (5.7)
★ Constipation	2 (2.9)	2 (5.0)	3 (7.7)	1 (2.9)	1 (3.7)	7 (5.0)

### Gastrointestinal (M2)



Similar to  
placebo

### Cardiovascular (M3)

Similar to  
placebo

### Others

Somnolence  
Dizziness

## Cobenfy

Table 3.6. Pooled Treatment-Related Adverse Events in EMERGENT trials<sup>20</sup>

Adverse Event, %	KarXT (n= 340)	Placebo (n= 343)
★ Nausea	17.1%	3.2%
★ Constipation	15.0%	5.2%
★ Dyspepsia	12.1%	2.3%
★ Vomiting	10.9%	0.9%
★ Hypertension	5.9%	1.2%
Dry Mouth	5.0%	1.5%
Tachycardia	4.7%	2.0%



x3-5 vs. placebo  
(Four items with  
10% or more)



x4 vs. placebo  
(Occurred in  
5.9%)

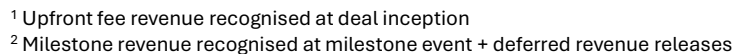
Dry mouth



# Financial Results

06

NPJ/NPK product sales and cost base fully included in FY2024. Milestones increased due to progress of partnered programs










# Breakdown of Q1 results

Business is progressing smoothly. Significant improvement in revenue from commercial

(JPY million)	 Platform* <sup>1</sup>	 Commercial* <sup>2</sup>	=	Consolidated P&L (Core)	 Non-core costs	=	Consolidated P&L (IFRS)
	(YoY)	(YoY)		(YoY)			(YoY)
Revenue	2,046 -12%	4,598 +101%		6,644 +44%	Total : 1,568		6,644 +44%
Cost of Sales	631 +332%	968 +191%		1,599 +234%			1,615 +36%
SG&A	1,189 +17%	1,296 -13%		2,485 -1%	<b>A</b> Amortization (447) <b>B</b> Other (785)		3,701 +1%
R&D	3,178 +27%	294 -21%		3,472 +21%	<b>B</b> Other (336)		3,808 +20%
Other income	293 -24	(6) -6		287 -30			287 -30
OP/Core OP	(2,659) -1,637	2,034 +1,943		Core OP (625) +306			OP (2,193) +883

**A** Amortization of intangible assets (currently relates to PIVLAZ® and QUVIVIQ™).

**B** Amortization of other intangible assets (e.g. IP), depreciation (e.g. laboratory equipment), share-based payments and other restructuring costs.

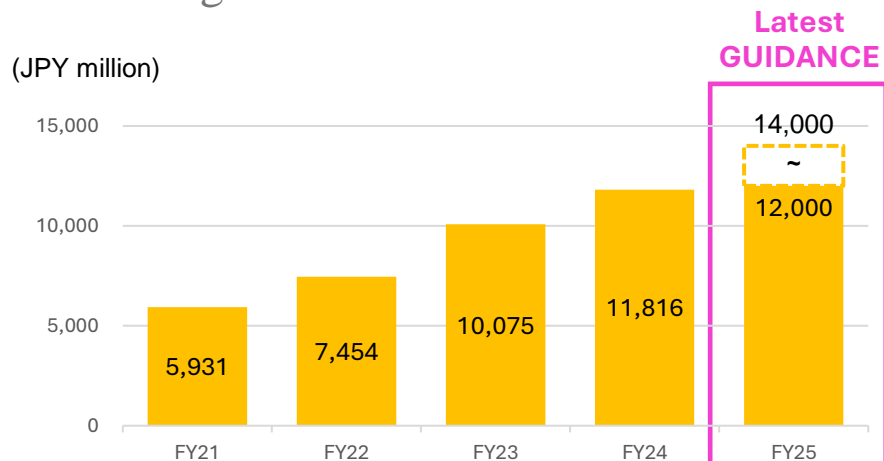
\*1 = Nxera Pharma Co. Ltd. (formerly Sosei Group Corporation) + Nxera Pharma UK Ltd (formerly Heptares Therapeutics Ltd.) + Sosei K.K. (ex -Nxera Pharma Basel branch)

\*2 = Nxera Pharma Japan (formerly Idorsia Pharmaceuticals Japan) + Nxera Pharma Korea (formerly Idorsia Pharmaceuticals Korea) + Nxera Pharma Basel branch



## Full year cost guidance for FY2025

Slight increase in R&D expenses with progression of programs into later stages of development and in-licensing of one or more late-stage candidates. Lower to flat SG&A expenses through streamlining costs

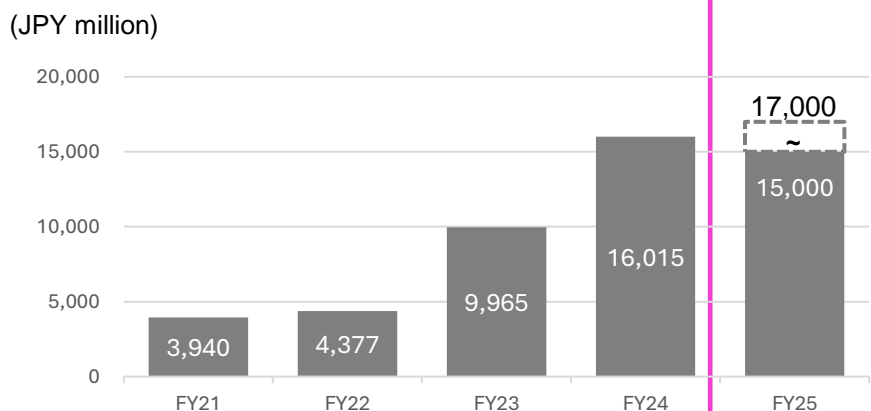


### R&D expenses (IFRS basis)

JPY12,000 to JPY14,000m

#### Key points in FY2025

- Incremental investment in platform technology.
- In-house programs (EP4 ant., EP4 ago., GPR52 ago.) moving into Ph1b - Ph2.
- Clinical development of one or more in-licensed late-stage assets in Japan.

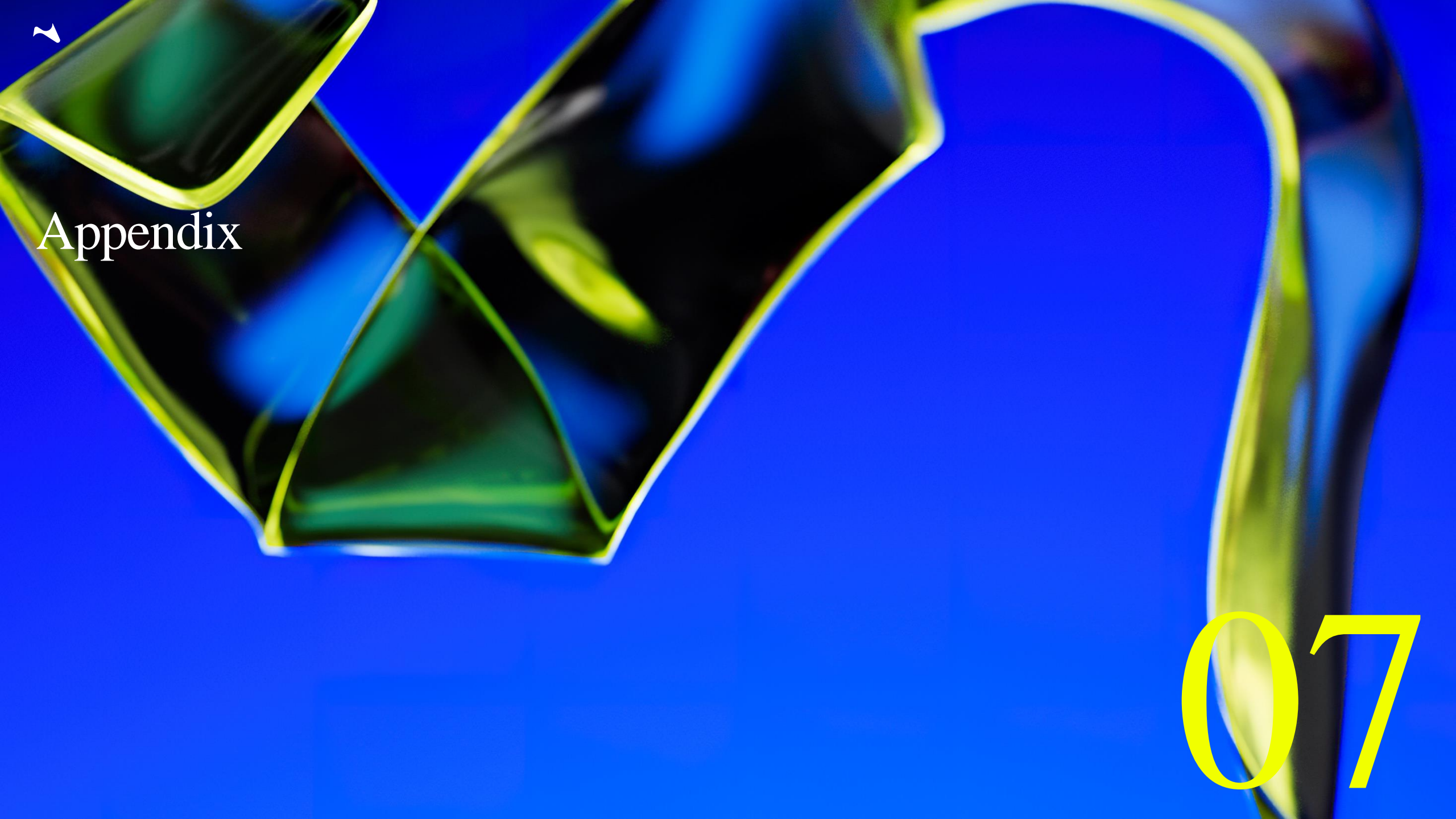


### S&M + G&A expenses (IFRS basis)

JPY15,000 to JPY17,000m

#### Key points in FY2025

- Investment in technology to increase efficiency and deliver future growth.
- Increase in amortization as QUVIVIQ™ has launched.
- Lower or flat SG&A expenses vs. FY2024 through cost savings.















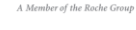




Appendix

07



## Partnered pipeline (1/2)












Compound	Target / Mechanism of Action	Modality	Indication	Partner	Disc.	PCC	Ph1	Ph2	Ph3	App	Mkt
Partnered											
Seebri® Breezhaler®	LAMA	SME	COPD	 NOVARTIS							
Ultibro® Breezhaler®	LAMA+LABA	SME	COPD	 NOVARTIS							
Energair® Breezhaler®	LAMA+LABA+ICS	SME	Asthma	 NOVARTIS							
ORAVI®	Antifungal agent miconazole	SME	Oropharyngeal candidiasis	 HISAMITSU							
Cenerimod	S1P <sub>1</sub> receptor modulator	SME	SLE	 VIATRIS™							
NBI-1117568	Muscarinic M4 agonist	SME	Schizophrenia	 NEUROCRINE BIOSCIENCES							
NBI-1117568	Muscarinic M4 agonist	SME	Bipolar Mania	 NEUROCRINE BIOSCIENCES							
NBI-1117569	Muscarinic M4 preferring agonist	SME	Neurology diseases	 NEUROCRINE BIOSCIENCES							
NBI-1117570	Muscarinic M1/M4 agonist	SME	Neurology diseases	 NEUROCRINE BIOSCIENCES							
NBI-1117567	Muscarinic M1 preferring agonist	SME	Neurology diseases	 NEUROCRINE BIOSCIENCES							
PF-07054894	CCR6 antagonist	SME	Inflammatory bowel disease	 Pfizer							
PF-07258669	MC4 antagonist	SME	Malnutrition	 Pfizer							
PF-06954522	GLP-1 agonist	SME	Chronic Weight Management	 Pfizer							
(Not disclosed)	CGRP antagonist	SME	Neurology diseases	 Pfizer							
(Not disclosed)	Multi target	SME/LME	Multiple indications	 Genentech <small>A Member of the Roche Group</small>							
(Not disclosed)	Multi target	SME	Neurology	 abbvie							
(Not disclosed)	Multi target	SME	Diabetes/Metabolic	 Lilly							

Note: SME = small molecule. LME = large molecule. Seebri®, Ultibro®, Energair® and Breezhaler® are registered trademarks of Novartis AG.





## Partnered pipeline (2/2)

Compound	Target / Mechanism of Action	Modality	Indication	Partner	Disc.	PCC	Ph1	Ph2	Ph3	App	Mkt
Co-development											
KY1051	CXCR4 mAb	mAb	Immuno-oncology		<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
(Not disclosed)	AI-Augmented Drug Discovery	SME	Neurology diseases		<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
(Not disclosed)	Multi target	SME/LME	Immune / Neurology diseases		<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
Co-owned companies											
TMP-301	mGlu5 NAM	SME	Alcohol use disorder		<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
TMP-301	mGlu5 NAM	SME	Cocaine use disorder		<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
ORX750	OX2 agonist (Oral)	SME	Narcolepsy Type 1/2, IH	 	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
ORX142	OX2 agonist (Oral)	SME	EDS in neurology	 	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
ORX489	OX2 agonist (Oral)	SME	Neurology	 	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>

Note: SME = small molecule. LME = large molecule



# In-house pipeline

Compound	Target / Mechanism	Modality	Indication	Partner	Disc.	PCC	Ph1	Ph2	Ph3	App	Mkt
In-house Programs											
PIVLAZ®	ETA antagonist	SME	Cerebral vasospasm								
QUVIVIQ™	Dual Orexin antagonist	SME	Insomnia								
NXE0048149 <sup>1</sup>	GPR52 agonist	SME	Neurology diseases								
NXE0039732 <sup>2</sup>	EP4 antagonist	SME	Immuno-oncology								
NXE0033744	EP4 agonist	SME	Inflammatory bowel disease								
NXE0027477	GPR35 agonist	SME	Inflammatory bowel disease								
(Not disclosed)	Muscarinic M1 agonist (JP)	SME	Neurology diseases								
(Not disclosed)	SARS CoV-2 Mpro	SME	Coronaviruses								
Multiple programs	Not disclosed	SME/LME	Neurology diseases								
Multiple programs	Not disclosed	SME/LME	GI and Inflammatory diseases								
Multiple programs	Not disclosed	SME/LME	Immunology diseases								
In-house Programs (No longer internally funded. Targeting academic / industrial partnership)											
NXE'310	SSTR5 agonist	Peptide	Hypoglycaemic disorders								
NXE'097	GLP-1 antagonist	Peptide	Hypoglycaemic disorders								
NXE'023	Dual GLP-2/GLP-1 agonist	Peptide	Intestinal failure/NASH								
(Not disclosed)	Apelin agonist	Peptide	Pulmonary Arterial Hypertension								
NXE'641	Dual orexin antagonist	SME	Insomnia and sleep disorders								
(Not disclosed)	PAR-2 mAb	mAb	Atopic Dermatitis/Pain								

Note: SME = small molecule. LME = large molecule.

1: Exclusive license-out option

2: NXE0039732 (EP4 antagonist) is categorized as an in-house asset as we have not licensed out. Under the Clinical Trial and Licence Agreement (CTLA) in 2022, Cancer Research UK sponsors, designs and executes a Phase I/IIa clinical trial of NXE0039732, and Nxera holds a licence to the results generated under the trial to continue the clinical development and commercialization of NXE0039732.



# Clinical Trials

Compound	MoA	Condition	Phase	Size	Patient	Start	Completion*	Last Update	Link (main/latest)	Link (others)
NBI-1117568	M4 agonist	Schizophrenia	Ph2	210	Yes	2022-10-04	2024-07-10	2024-09-27	<a href="#">NCT05545111</a>	-
NBI-1117569	M4 preferring agonist	Neurology diseases	Ph1	-	-	-	-	-	-	-
NBI-1117570	M1/M4 agonist	Neurology diseases	Ph1	-	No	2024-03-11	2025-09-04	2025-03-14	<a href="#">2023-508814-40-00</a>	-
NBI-1117567	M1 preferring agonist	Neurology diseases	Ph1	-	-	-	-	-	-	-
PF-07054894	CCR6 antagonist	Inflammatory bowel diseases	Ph1	27	Yes	2022-11-07	2026-01-14	2025-03-25	<a href="#">NCT05549323</a>	<a href="#">NCT06327880</a> <a href="#">NCT04388878</a> <a href="#">NCT07009353</a>
PF-07258669	MC4 antagonist	Malnutrition	Ph1	26	No	2024-12-11	2025-02-20	2025-03-07	<a href="#">NCT06706869</a>	<a href="#">NCT04628793</a> <a href="#">NCT05113940</a>
PF-06954522	GLP-1 agonist	T2DM/Obesity	Ph1	45	Yes	2024-02-20	2025-04-07	2025-02-13	<a href="#">NCT06279234</a>	<a href="#">NCT06393517</a> <a href="#">NCT06003777</a>
TMP-301	mGlu5 NAM	Alcohol use disorder	Ph2	100	Yes	2024-11-14	2025-11-15	2025-02-21	<a href="#">NCT06648655</a>	-
TMP-301	mGlu5 NAM	Cocaine use disorder	Ph1	18	Yes	2025-01-04	2025-08-15	2025-03-25	<a href="#">NCT06648668</a>	-
ORX750	OX2 agonist	Narcolepsy Type 1/2, IH	Ph2	78	Yes	2024-12-23	2025-12	2024-04-25	<a href="#">NCT06752668</a>	-
Cenerimod	SIP1 modulator	Lupus Erythematosus, Systemic	Ph3	420	Yes	2022-12-13	2026-10-31	2025-05-25	<a href="#">NCT05648500</a>	<a href="#">NCT06475742</a>
			Ph3	420	Yes	2023-06-26	2026-10-31	2025-05-29	<a href="#">NCT05672576</a>	
NXE0048149	GPR52 agonist	Neurology diseases	Ph1	24	No	2024-06-07	2025-11-15	2024-11-05	<a href="#">ISRCTN44913564</a>	<a href="#">ISRCTN17231793</a>
NXE0039732	EP4 antagonist	Immuno-oncology	Ph1/2	150	Yes	2023-07-13	2026-09	2024-12-02	<a href="#">NCT05944237</a>	-
NXE0033744	EP4 agonist	Inflammatory bowel diseases	Ph1	Up to 220	-	2023-11-24	2026-06-30	2024-05-02	<a href="#">ISRCTN70080074</a>	-

\*Primary Completion (Estimated)



# Estimation of potential market size

Multi-billion USD annual peak sales potential for our post-pre-clinical pipeline

Category	Indication <sup>2</sup>	Number of Patients	Peak Sales		Candidates
			Market Size	Individual Products	
Neuroscience	Dementia	~55 million	\$7.3 billion (2010)	\$3.9 billion (2009/Aricept)	M1 ag, M1/M4 ag
	Schizophrenia	~20 million	\$20.7 billion (2011)	\$5.7 billion (2013/Abilify)	M4 ag, M1/M4 ag, GPR52 ag
	Substance use disorders	~10.4 million <sup>1</sup>	-	-	mGlu5 NAM
	Narcolepsy	~3 million	\$2.5 billion (2024)	\$1.4 billion (2024/Xywav)	OX2 ag
Immunology	Cancer	~42 million	\$210.5 billion (2024)	\$28.7 billion (2024/Keytruda)	EP4 ant
	IBD	~10 million	\$23.8 billion (2024)	\$6.2 billion (2022/Humira)	CCR6 ant, GPR35 ag, EP4 ag
	Systemic Lupus Erythematosus	~5 million	\$2.7 billion (2024)	\$1.9 billion (2024/Benlysta)	Cenerimod
Metabolism	T2DM/Obesity	~420 million	\$76.8 billion (2024)	\$18.2 billion (2024/Ozempic)	GLP1 ag
	Anorexia	~10 million	-	-	MC4 ant
Total			~\$344 billion/year	~\$66 billion/year	

Source (Number of patients): World Health Organization, Evaluate Pharma, The European Federation of Crohn's & Ulcerative Colitis Associations (EFCCA), Narcolepsy Network, Inc., The Lupus Foundation of America, GBD 2015 Disease and Injury Incidence and Prevalence Collaborators (October 2016). "Global, regional, and national incidence, prevalence, and years lived with disability for 310 diseases and injuries, 1990-2015: a systematic analysis for the Global Burden of Disease Study 2015". Lancet. 388 (10053): 1545–1602 <sup>1</sup> The number of patients with drug addiction

Source (Peak Sales): Sales of each indications are extracted from Evaluate Pharma's data of sales by disease and sales by individual products (as of 25 December 2024). <sup>2</sup> Nxera may target one segment in the market for specific diseases





# Exclusive Opt-in Rights And ROFN/ROFR<sup>1</sup>

Option to develop up to five clinical programs for Japan and APAC (ex-China) from Idorsia

	Program	Mechanism of Action	Indication	Stage	Region
Exclusive Opt-in Right	Lucerastat	Glucosylceramide synthase inhibitor	Fabry disease	Phase 3	APAC (ex-China) <sup>2</sup>
ROFR /ROFN <sup>1</sup>	ACT-1004-1239	ACKR3 / CXCR7 antagonist	Multiple sclerosis and other demyelinating diseases	Phase 2*	
	ACT-1014-6470	C5aR1 antagonist	Immune-mediated disorders	Phase 1*	
	IDOR-1117-2520	Undisclosed	Immune-mediated disorders	Phase 1*	
	ACT-777991	CXCR3 antagonist	Recent-onset Type 1 diabetes	Phase 1*	

<sup>1</sup> ROFN/ROFR - Right of first negotiation / Right of first refusal

<sup>2</sup> Territories include Japan, South Korea, Australia, Brunei, Cambodia, Indonesia, Laos, Malaysia, Myanmar, New Zealand, Philippines, Singapore, Taiwan, Thailand and Vietnam

\* Global Phase



# Core Operating Profit - Definition

Core Operating Profit/Loss – a financial indicator closer to the reality of our business

## Operating Profit “Core”

- Core Operating Profit/ Loss is a key financial indicator that highlights the underlying recurring cash generating capability of our business.
- Core Operating Profit/Loss is defined as IFRS Operating Profit + material Non-cash costs + material non-recurring costs
- Material Non-cash Costs include depreciation, amortization, share based payments and impairment.
- Material Non-recurring Costs include restructuring costs, M&A related professional fees and other material one-off items.

### + Material Non-cash Costs

(Depreciation, Amortization, Share based payments, Impairment...etc.)

### + Material Non-recurring Costs

(Restructuring costs and Other material one-off items...etc.)

	Cash	Non-cash (Material)
Recurring	Costs under “Core”	
Non-recurring (Material)		Costs under “IFRS”

## Operating Profit “IFRS”

- Financial results recorded and prepared in accordance with International Financial Reporting Standards (IFRS)



## Exchange Rate, Intangible Assets and Non-core Costs

### Average exchange rate during period

		FY2025	FY2024	FY2023	FY2022
USD:JPY	Actual	-	151.43	140.53	131.30
	Estimate	152	140	143	
GRP:JPY	Actual	-	193.49	174.81	161.76
	Estimate	193	172	166	

### Intangible assets

(JPY mn)

	Dec 31, 2024	Dec 31, 2023	Dec 31, 2022
PIVLAZ®	36,164	37,527	-
Core technology	8,365	8,466	8,217
QUVIVIQ™	6,825	5,825	-
Customer-related assets	227	227	219
Oravi®	78	89	101
Other	252	157	40
Total	51,911	52,291	8,577

### Non-core costs (full year)

(JPY mn)

	FY 2024	FY 2023	FY 2022
Cost of sales adjustment	2,401	1,812	-
Amortization	2,371	1,495	782
M&A related costs	1,220	1,263	-
Depreciation	1,613	983	563
Share-based Payments	1,396	844	542
Restructuring costs	28	53	533
Impairment	-	-	-
Total	9,029	6,450	2,420

### Shareholdings

(%)

	FY 2024
TemperoBio, Inc	8.863
Centessa	0.70
Biohaven	0.03



# Glossary

Basic Terminology/Technology		
GPCR	G Protein-Coupled Receptor	There are about 800 types of GPCRs in the human body. While 400 of them are known to be potential drug targets, about 300 of them are not yet drugged
NxStaR™	Stabilized Receptor	Nxera’ proprietary technology to stabilize a GPCR by engineering a small number of single point mutations outside of the ligand-binding site. It enables to identify the structure of GPCRs to be used for SBDD drug discovery as well as antibody drug discovery as antigens
SBDD	Structure-Based Drug Design	A method to design drugs on a computer base based on the analysis of the three-dimensional structure of the drug target (e.g., protein receptor)
TPD	Targeted Protein Degradation	Drugs that promote the degradation of target proteins (e.g., receptors) in cells and aim for therapeutic effects by reducing disease-causing proteins
PAM	Positive Allosteric Modulator	A regulator that binds to unusual active sites (allosteric sites) on the receptor to increase the affinity and effect of the agonist
NAM	Negative Allosteric Modulator	A regulator that binds to an unusual active site on the receptor (allosteric site) and reduces the affinity and effectiveness of the agonist
Ag	Agonist	A therapeutic drug that binds to a receptor and activates an intracellular signaling system similar to biological substances
Ant	Antagonist	A therapeutic drug that suppresses biological reactions by binding to receptors and preventing them from binding to biological substances
PK	Pharmacokinetics	Research and testing on the relationship between drug dosage and blood concentration. Mainly describes the rate process of ADME
PD	Pharmacodynamics	Research and testing on the relationship between drug concentration and pharmacological effects
ADME	Absorption, Distribution, Metabolism and Excretion	A series of process in the absorption of drugs into the body, distribution within the body, metabolism in the liver and other organs, and excretion in the kidneys and other organs
POM	Proof of Mechanism	Proof of mechanism of action, mainly through biomarkers. It can suggest the possibility of efficacy in fewer cases than POC
POC	Proof of Concept	Proof of a therapeutic concept, primarily through clinical efficacy and safety
Ach	Acetylcholine	A neurotransmitter released from the peripheral parasympathetic and motor nerves to transmit nerve stimuli
IND	Investigational New Drug	Information packages for development candidates to be submitted to the U.S. Food and Drug Administration (FDA) at the time of initiation of clinical trials
Ph1	Phase1	A study in humans. The main purpose is to confirm the safety of the drug candidate mainly by healthy volunteers.
Ph2	Phase2	A study in humans. The main purpose is to confirm the efficacy of the drug candidates on a small scale (however, the number of patients varies greatly depending on the disease)
Ph3	Phase3	A study in humans. The main purpose is to determine the efficacy of the drug candidates on a large scale (however, the number of patients varies greatly depending on the disease)
NDA	New Drug Application	An application to the U.S. Food and Drug Administration (FDA) for approval to market a new drug

Disease/Drug		
LAMA	Long Acting Muscarinic Antagonist	An inhalant that dilates bronchial tubes and improves respiratory function by inhibiting the action of acetylcholine receptors (M3), which increase parasympathetic nerves.
LABA	Long Acting Beta2-Agonist	An inhalant that improves respiratory function by stimulating sympathetic beta2 receptors to dilate the bronchi.
ICS	Inhaled Corticosteroid	An inhalant that suppresses airway inflammation to prevent coughing attacks and other symptoms caused by asthma, also promotes the action of beta 2 stimulants and improve airway hyperresponsiveness.
mCRPC	Metastatic Castration–Resistant Prostate Cancer	Cancer that has spread (metastasized) beyond your prostate gland and for which hormone therapy is no longer effective in stopping or slowing the disease.
COPD	Chronic Obstructive Pulmonary Disease	A group of diseases that causes damage to the bronchi and lung due to smoking or inhalation of toxic substances, resulting in breathing problems.
AD	Alzheimer’s Disease	Alzheimer’s disease is a progressive neurologic disorder that causes the brain to shrink (atrophy) and brain cells to die, the most common cause of dementia .
DLB	Dementia with Lewy Bodies	Protein deposits, called Lewy bodies, develop in nerve cells in the brain regions involved in thinking, memory and movement (motor control), the second most common type of dementia.





## Locations



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# Thank you

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