



# Committed to Long-term Growth & Shareholder Returns

**41<sup>st</sup> Annual J.P. Morgan Healthcare Conference**

Christophe Weber

President & CEO

January 9<sup>th</sup>, 2023



Better Health, Brighter Future

# Important Notice



For the purposes of this notice, “presentation” means this document, any oral presentation, any question and answer session and any written or oral material discussed or distributed by Takeda Pharmaceutical Company Limited (“**Takeda**”) regarding this presentation. This presentation (including any oral briefing and any question-and-answer in connection with it) is not intended to, and does not constitute, represent or form part of any offer, invitation or solicitation of any offer to purchase, otherwise acquire, subscribe for, exchange, sell or otherwise dispose of, any securities or the solicitation of any vote or approval in any jurisdiction. No shares or other securities are being offered to the public by means of this presentation. No offering of securities shall be made in the United States except pursuant to registration under the U.S. Securities Act of 1933, as amended, or an exemption therefrom. This presentation is being given (together with any further information which may be provided to the recipient) on the condition that it is for use by the recipient for information purposes only (and not for the evaluation of any investment, acquisition, disposal or any other transaction). Any failure to comply with these restrictions may constitute a violation of applicable securities laws.

The companies in which Takeda directly and indirectly owns investments are separate entities. In this presentation, “Takeda” is sometimes used for convenience where references are made to Takeda and its subsidiaries in general. Likewise, the words “we”, “us” and “our” are also used to refer to subsidiaries in general or to those who work for them. These expressions are also used where no useful purpose is served by identifying the particular company or companies.

The product names appearing in this document are trademarks or registered trademarks owned by Takeda, or their respective owners.

## Forward-Looking Statements

This presentation and any materials distributed in connection with this presentation may contain forward-looking statements, beliefs or opinions regarding Takeda’s future business, future position and results of operations, including estimates, forecasts, targets and plans for Takeda. Without limitation, forward-looking statements often include words such as “targets”, “plans”, “believes”, “hopes”, “continues”, “expects”, “aims”, “intends”, “ensures”, “will”, “may”, “should”, “would”, “could”, “anticipates”, “estimates”, “projects” or similar expressions or the negative thereof. These forward-looking statements are based on assumptions about many important factors, including the following, which could cause actual results to differ materially from those expressed or implied by the forward-looking statements: the economic circumstances surrounding Takeda’s global business, including general economic conditions in Japan and the United States; competitive pressures and developments; changes to applicable laws and regulations, including global health care reforms; challenges inherent in new product development, including uncertainty of clinical success and decisions of regulatory authorities and the timing thereof; uncertainty of commercial success for new and existing products; manufacturing difficulties or delays; fluctuations in interest and currency exchange rates; claims or concerns regarding the safety or efficacy of marketed products or product candidates; the impact of health crises, like the novel coronavirus pandemic, on Takeda and its customers and suppliers, including foreign governments in countries in which Takeda operates, or on other facets of its business; the timing and impact of post-merger integration efforts with acquired companies; the ability to divest assets that are not core to Takeda’s operations and the timing of any such divestment(s); the extent to which our internal energy conservation measures and future advancements in renewable energy or low carbon energy technology will enable us to reduce our greenhouse gas emissions; and other factors identified in Takeda’s most recent Annual Report on Form 20-F and Takeda’s other reports filed with the U.S. Securities and Exchange Commission, available on Takeda’s website at: <https://www.takeda.com/investors/sec-filings/> or at [www.sec.gov](http://www.sec.gov). Takeda does not undertake to update any of the forward-looking statements contained in this presentation or any other forward-looking statements it may make, except as required by law or stock exchange rule. Past performance is not an indicator of future results and the results or statements of Takeda in this presentation may not be indicative of, and are not an estimate, forecast, guarantee or projection of Takeda’s future results.

## Financial Information and Certain Non-IFRS Financial Measures

Takeda’s financial statements are prepared in accordance with International Financial Reporting Standards (“IFRS”).

This presentation and materials distributed in connection with this presentation include certain financial measures not presented in accordance with IFRS, such as Core Revenue, Core Operating Profit, Core Net Profit, Core EPS, and Constant Exchange Rate (“CER”) change. Takeda’s management evaluates results and makes operating and investment decisions using both IFRS and non-IFRS measures included in this presentation. These non-IFRS measures exclude certain income, cost and cash flow items which are included in, or are calculated differently from, the most closely comparable measures presented in accordance with IFRS. By including these non-IFRS measures, management intends to provide investors with additional information to further analyze Takeda’s performance and core results, including when controlling for the effect of fluctuations in exchange rates. Takeda’s non-IFRS measures are not prepared in accordance with IFRS and such non-IFRS measures should be considered a supplement to, and not a substitute for, measures prepared in accordance with IFRS (which we sometimes refer to as “reported” measures). Investors are encouraged to review the definitions and reconciliations of non-IFRS financial measures to their most directly comparable IFRS measures, which are in the financial appendix appearing at the end of this presentation.

## Exchange Rates

In this presentation, certain amounts presented in Japanese yen have been translated to US dollars solely for the convenience of the reader. The rate and methodologies used for these convenience translations differ from the currency exchange rates and translation methodologies under IFRS used for the preparation of Takeda’s consolidated financial statements. These translations should not be construed as a representation that the relevant Japanese yen amounts could be converted into U.S. dollars at this or any other rate.

## Medical information

This presentation contains information about products that may not be available in all countries, or may be available under different trademarks, for different indications, in different dosages, or in different strengths. Nothing contained herein should be considered a solicitation, promotion or advertisement for any prescription drugs including the ones under development.



# Better Health for People, Brighter Future for the World



Our vision is to discover and deliver life-transforming treatments, guided by our commitment to:

## PATIENT

- Responsibly translate science into highly innovative, life-changing medicines and vaccines
- Accelerate access to improve lives worldwide

## PEOPLE

- Create an exceptional people experience

## PLANET

- Protect our planet

... AND BY UNLEASHING THE POWER OF DATA AND DIGITAL

- We strive to transform Takeda into the most trusted, science-driven, digital biopharmaceutical company

We are guided by our values of Takeda-ism which incorporate **Integrity, Fairness, Honesty, and Perseverance**, with Integrity at the core. They are brought to life through actions based on **Patient-Trust-Reputation-Business**, in that order.

# Growth & Launch Products Driving Topline & Profit Growth



## Strong FY2022 H1 Performance

### Core Revenue

**+5.5%**

at CER<sup>1,2</sup>

### Core EPS

**+15.8%**

at CER<sup>1,2</sup>

### Growth & Launch Products

**+19%**

at CER<sup>1,2</sup>

represent 38%  
of total revenue

### Core Operating Profit Margin

**31.7%**

## On Track to Full-year FY2022 Guidance

### Revenue

**JPY 3,930B**

(USD \$29.7B)<sup>3</sup>

### Core EPS

**525 yen**

(USD \$3.97)<sup>3</sup>

### FY2022 MANAGEMENT GUIDANCE

#### GROWTH AT CER<sup>2</sup>

CORE REVENUE

Low-single-digit growth

CORE OPERATING PROFIT

High-single-digit growth

CORE EPS

High-single-digit growth

1. Please refer to appendix slide 15 for definition of core financial measures and slides 16-19 for reconciliation.

2. Constant Exchange Rate. Please refer to appendix slide 15 for definition.

3. Forecast in USD given for reference using full-year FX rate assumption of 132.4 JPY/USD. This reflects H1 at actual FX and applies the Apr-Oct 2022 average rate to H2 projections.

# Growth & Launch Products Revenue Grew +19% at CER in FY22 H1



	 GI	 RARE DISEASES	 PLASMA-DERIVED THERAPIES (PDT) IMMUNOLOGY	 ONCOLOGY	 NEUROSCIENCE	OTHER
GROWTH & LAUNCH PRODUCTS	 +17%	 +31%	 +17%	 +41%	 Suspension for Intramuscular Injection (JP)	 (JP)
	 +33%	 New Launch	 +8%	 New Launch		
Total FY2022 H1 Revenue 759.8B (USD 5.3B) <sup>1</sup> (+19% growth at CER)						
OTHER KEY PRODUCTS	Takecab/Vocinti® Gattex/Revestive®	Advate/Adynovi® Vonvendi® Elaprase® Vpriv® Replagal®(EU,JP)	Glassia® Aralast®	Ninlaro® Iclusig® Adcetris® (ex-N. America) Leuprorelin Zejula®(JP) Cabometyx®(JP)	Vyvanse® Trintellix®(US,JP)	Azilva® (JP)

All growth rates indicate FY2022 H1 revenue growth at CER

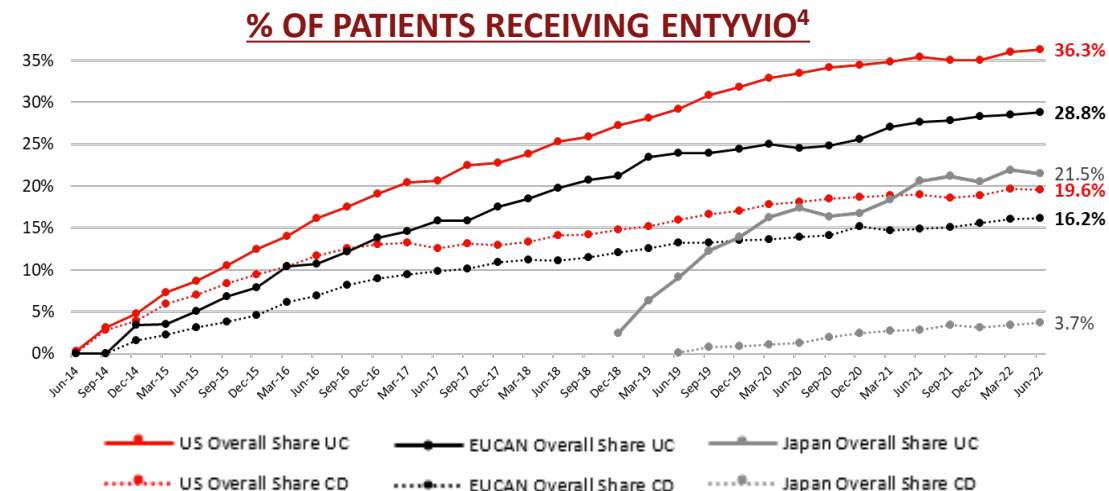
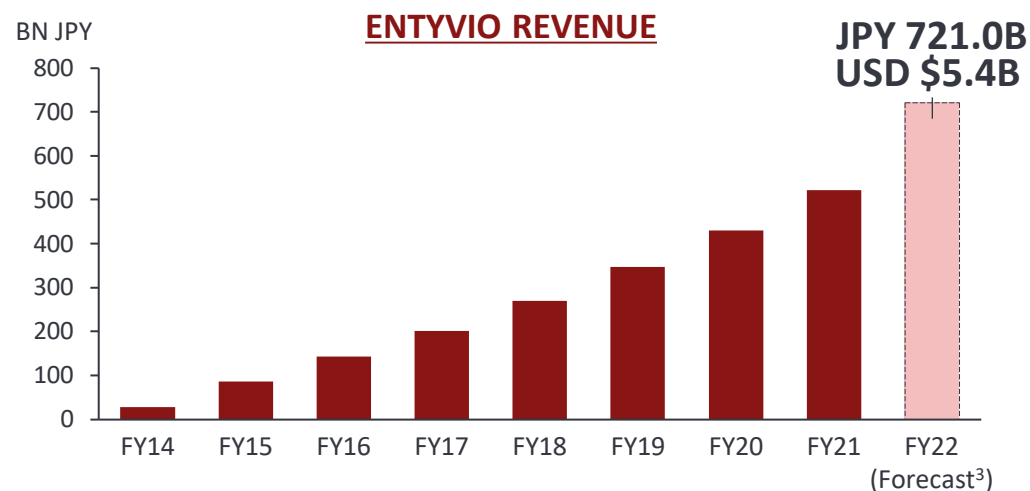
1. Convenience translation at an exchange rate of 1USD = 144.71 JPY, the Noon Buying Rate certified by the Federal Reserve Bank of New York on September 30, 2022.

## Outstanding Growth Momentum

- Gut-selective alpha4beta7 integrin antagonist
- #1 prescribed biologic in IBD bio-naïve patients in the U.S.<sup>1</sup>
- Head-to-head superiority versus adalimumab in UC<sup>2</sup>
- >9 yrs of patient experience supports favorable safety profile
- Strong uptake of SC formulation in Europe & Canada

## Raised Peak Sales Reflect Growth Opportunity

- Revised assumption on biosimilar entry timing
- High unmet patient need remains in IBD
- Biologics market continues to expand globally
- ENTYVIO total patient share still increasing
- SC formulation regulatory filing in U.S. expected in FY2023
- Continuing to invest in further evidence generation



1. Source: US: SHA Medical and Pharmacy Claims data, June 2022

2. Sands BE, Peyrin-Biroulet L, Loftus EV, et al. Vedolizumab versus adalimumab for moderate to severe ulcerative colitis. N Engl J Med. 2019;381(13):1215–1226.

3. Forecast in USD given for reference using full-year FY2022 FX rate assumption of 132.4 JPY/USD

4. Source: US: SHA Medical and Pharmacy Claims data, June 2022; EUCAN: Internal estimate; Japan: Japan Medical Data Center, June 2022

# PDT Portfolio Revenue Growth of +10-20% at CER Expected in FY22 Driven by Strong Demand and Stable Supply



## CAPACITY EXPANSION

- Fastest and strongest post-pandemic recovery of donation volumes in the industry
- On track to increase plasma supply and manufacturing capacity >65% by end FY2023<sup>1</sup>

## R&D INVESTMENT

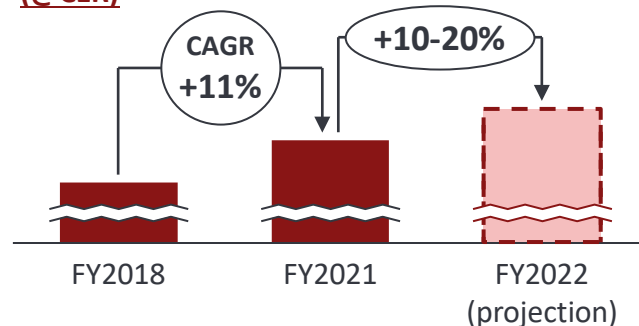
- Dedicated R&D organization focused on maximizing potential of PDT
- Positive Phase 3 data for HyQvia in CIDP

## MARGIN IMPROVEMENT

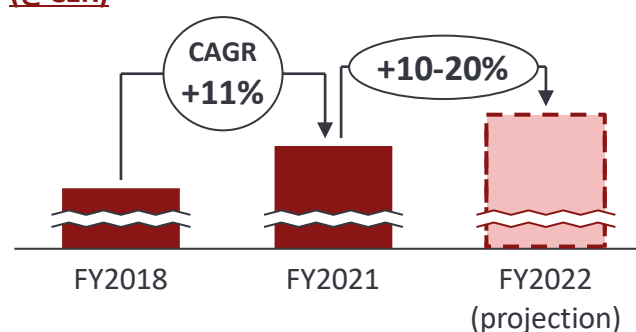
- Improving efficiencies across the entire value chain to improve profitability
- Reduced donor compensation by >15% in H1 FY2022 versus same period in prior year

Enhancement of PDT operations is driving double-digit annual revenue growth for key PDT products

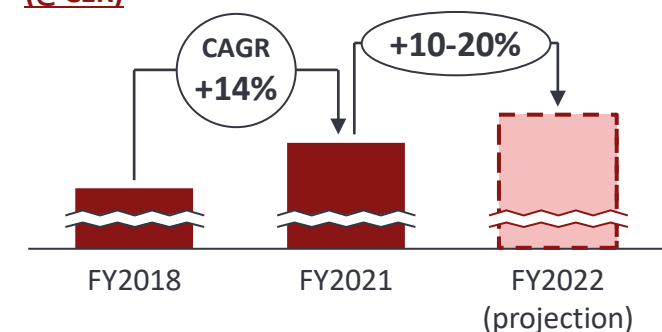
### PDT IMMUNOLOGY REVENUE GROWTH (@CER)



### IMMUNOGLOBULIN REVENUE GROWTH (@CER)








### ALBUMIN REVENUE GROWTH (@CER)



# Strong Pipeline Progression Since FY22 Q2



	ASSET	MILESTONE		NEXT STEPS
 <b>VACCINES</b>	<b>QDENGATAK-003</b>	Approved in EU and Indonesia, and positive CHMP opinion for dengue-endemic countries that participated in EMA EU-M4all procedure	✓	Launch in Indonesia, Europe Seek additional approvals: US and endemic countries
 <b>ONCOLOGY</b>	<b>ICLUSIGponatinib</b>	1L Ph+ ALL positive phase 3 PhALLCON trial	✓	Data from this trial will be discussed with regulatory agencies and shared with the scientific community
 <b>RARE GENETICS &amp; HEMATOLOGY</b>	<b>TAK-755</b>	Phase 3 trial interim analysis in cTTP: Favorable efficacy and safety profile versus standard of care	✓	U.S. filing expected in FY22 cTTP: 2 case reports published in <a href="#">NEJM</a> <sup>1</sup>
	<b>LIVTENCITYmaribavir</b>	1L CMV infection in HSCT <sup>2</sup> phase 3 AURORA trial confirmed favorable safety and showed evidence of durable anti-viral efficacy	✓	Engaging regulatory agencies about filing strategy <ul style="list-style-type: none"> <li>• 12wk./16wk./20wk. data favorable for LIVTENCITY</li> <li>• Favorable safety profile with lower incidence of neutropenia</li> <li>• Did not achieve non-inferiority at 8 wk. 1' endpoint</li> </ul>
 <b>GASTRO-ENTEROLOGY</b>	<b>fazirsiranTAK-999</b>	AATD-LD positive phase 2b SEQUOIA trial	✓	Phase 3 start expected in FY22
 <b>NEURO-SCIENCE</b>	<b>TAK-861</b>	Met prespecified criteria to advance to Phase 2	✓	Phase 2b on-track to start in January 2023

1. N Engl J Med 2022; 387:2356-2361, N Engl J Med 2022; 387:2391-2392

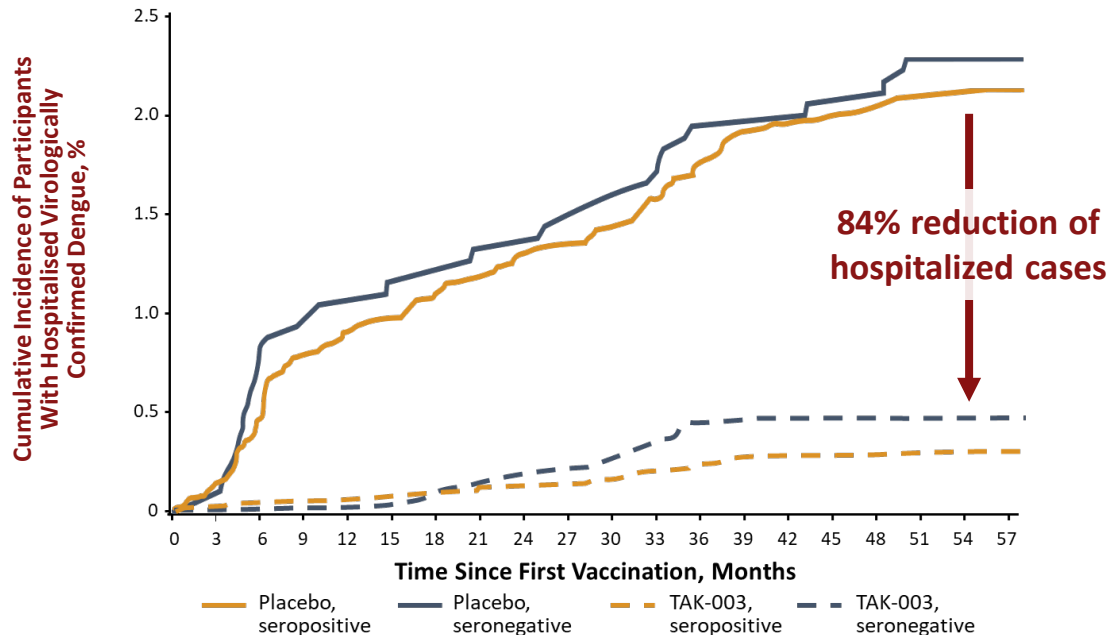
2. HSCT: hematopoietic stem cell transplantation; [Press release: www.takeda.com/newsroom/newsreleases](https://www.takeda.com/newsroom/newsreleases)



# Approved in Indonesia & EU for Prevention of Dengue Disease Against All Serotypes, Regardless of Prior Dengue Exposure

## Significant prevention of hospitalizations, an important factor for dengue fever management<sup>1</sup>

- Pivotal study in >20,000 children and adolescents in Latin America & Asia
- 80.2% reduction in symptomatic dengue @12 months (primary endpoint); 90.4% reduction in hospitalizations @18 months (key secondary endpoint)
- Continued protection through 4.5 years (exploratory analyses): 61% reduction in symptomatic dengue and 84% reduction in hospitalizations
- No important safety risks identified<sup>2</sup>



## Two approvals in 2022 and continuing regulatory progress around the world

- First approval in Indonesia in Aug 2022 for individuals 6-45 years of age
- Approved in EU in Dec 2022 for individuals 4 years of age and older, and positive CHMP opinion recommending use in dengue-endemic countries that participated in the EMA EU-M4all procedure
- Regulatory reviews progressing in dengue-endemic countries in Latin America & Asia
- Granted priority review by U.S. FDA in November 2022

1. Tricou, V. Efficacy and Safety of Takeda's Tetravalent Dengue Vaccine Candidate (TAK-003) After 4.5 Years of Follow-Up. Presented at the 8th Northern European Conference of Travel Medicine; June 2022.

2. Most common adverse events were injection-site pruritus, bruising, and pyrexia

# Takeda to Acquire Late-Stage, Potential Best-in-Class, Oral Allosteric TYK2 Inhibitor NDI-034858 from Nimbus Therapeutics<sup>1</sup>



## High Selectivity Allows for Greater Inhibition of TYK2

- NDI-034858 is a novel, investigational, oral, allosteric inhibitor of tyrosine kinase 2 (TYK2) with high specificity for TYK2 over JAK1, JAK2, JAK3 kinases

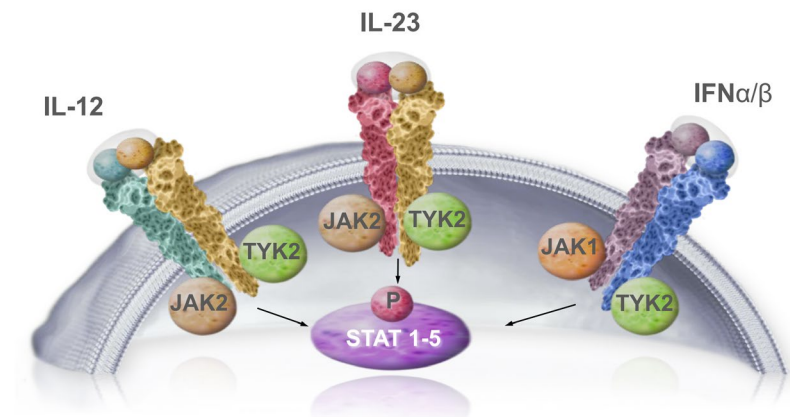
	NDI-034858	Deucravacitinib
TYK-2 –JH2 binding $K_D$	0.0034 nM	0.0045 nM
JAK1 –JH2 binding $K_D$	5000 nM	0.49 nM
Biochemical Selectivity (Fold)	$1.5 \times 10^6$	109
Fold Selectivity (vs. deucravacitinib)	$1.3 \times 10^4$	

Source: Nimbus proprietary structure based computational modeling; side-by-side evaluation of biochemical potency of NDI-034858 and deucravacitinib (synthesized by Nimbus for nonclinical research purposes only).

**Potential for enhanced efficacy without introducing JAK-related toxicities**

## Potential for Best-in-Class Profile

- Potential to demonstrate best-in-class efficacy, safety and convenience in multiple immune-mediated diseases, including psoriasis, Inflammatory Bowel Disease, psoriatic arthritis and lupus
- Phase 3 psoriasis study expected to start in 2023; potential for regulatory filing in FY25-27



# Committed to Long-term Growth & Shareholder Returns



## Near-term (FY2022-2023)

- Growth & Launch Products expected to mitigate near-term Loss of Exclusivities (e.g. VELCADE & VYVANSE)

## Medium-term (FY2024 - early 2030s)

- Continued expansion of Growth & Launch Products
- Late-stage pipeline launches
- Limited LOE exposure until Entyvio biosimilars launch

## Long-term (FY2030s and beyond)

- Additional contribution from clinical pipeline of ~40 NMEs
- Robust research engine

**Continued Pipeline Enhancement Supported by a Solid Financial Foundation**

# Q&A



**CHRISTOPHE WEBER**  
Representative Director;  
President & CEO



**ANDY PLUMP**  
Director; President,  
Research & Development



**COSTA SAROUKOS**  
Director;  
Chief Financial Officer



**JULIE KIM**  
President,  
US Business Unit



**TERESA BITETTI**  
President, Global  
Oncology Business Unit



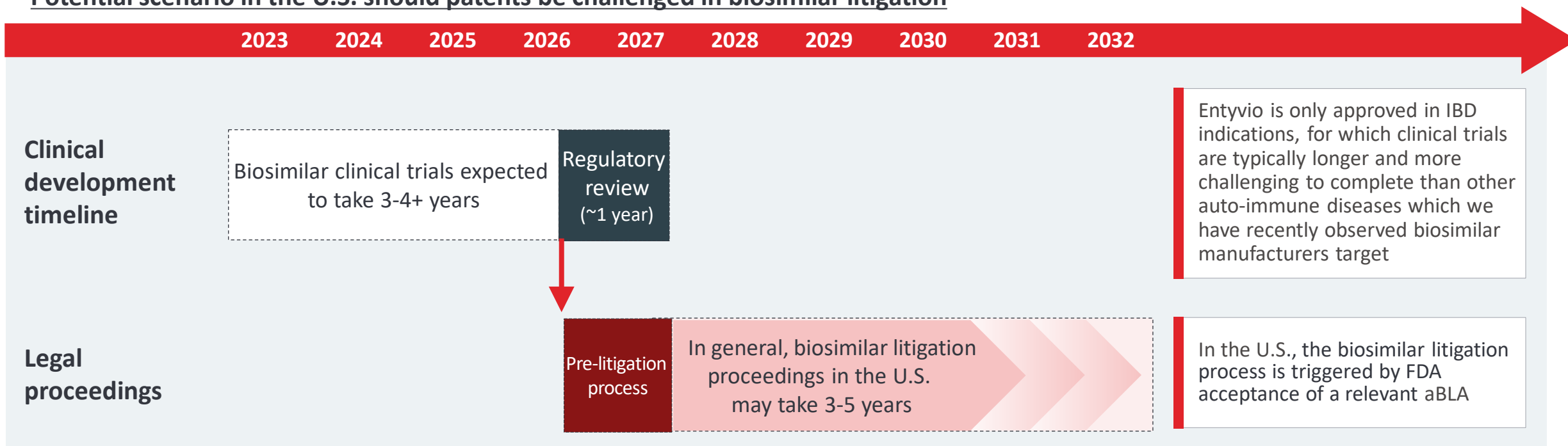
# APPENDIX



# Any biosimilar that seeks to launch prior to 2032 would need to address potential infringement and/or the validity of all relevant patents

- Takeda has granted patents that cover various aspects of Entyvio, including formulation, dosing regimens and process for manufacturing. These patents are expected to expire in 2032 in the U.S.

## Potential scenario in the U.S. should patents be challenged in biosimilar litigation



- Competitive Intelligence suggests Ph1 activity starting with biosimilar companies in China and Iran. However, no vedolizumab biosimilar Phase 1 clinical trial starts targeting the U.S., EU, or Japan markets has been publicly disclosed so far.

# Definition of Core Financial Measures and Constant Exchange Rate change



**Core Revenue** represents revenue adjusted to exclude significant items unrelated to Takeda's core operations.

**Core Operating Profit** represents net profit adjusted to exclude income tax expenses, the share of profit or loss of investments accounted for using the equity method, finance expenses and income, other operating expenses and income, amortization and impairment losses on acquired intangible assets and other items unrelated to Takeda's core operations, such as non-recurring items, purchase accounting effects and transaction related costs.

**Core EPS** represents net profit adjusted to exclude the impact of items excluded in the calculation of Core Operating Profit, and other non-operating items (e.g. amongst other items, fair value adjustments and the imputed financial charge related to contingent consideration) that are unusual, non-recurring in nature or unrelated to Takeda's ongoing operations and the tax effect of each of the adjustments, divided by the average outstanding shares (excluding treasury shares) of the reporting periods presented.

**CER (Constant Exchange Rate) change** eliminates the effect of foreign exchange rates from year-over-year comparisons by translating Reported or Core results for the current period using corresponding exchange rates in the same period of the previous fiscal year.

# FY2022 H1 Reported Results with Actual and CER % Change



(Billion JPY)	FY2021 H1	FY2022 H1		vs. PY	
				ACTUAL % CHANGE	CER % CHANGE <sup>*1</sup>
Revenue	1,794.4	1,974.8	180.3	10.1%	(2.3)%
Cost of sales	(517.1)	(598.3)	(81.3)	(15.7)%	(3.9)%
Gross profit	1,277.4	1,376.4	99.1	7.8%	(4.8)%
Margin	71.2 %	69.7 %		(1.5) pp	(1.8) pp
SG&A expenses	(431.9)	(480.2)	(48.4)	(11.2)%	1.4%
R&D expenses	(254.1)	(297.8)	(43.7)	(17.2)%	(1.4)%
Amortization of intangible assets associated with products	(204.1)	(240.8)	(36.7)	(18.0)%	(1.1)%
Impairment losses on intangible assets associated with products	(1.5)	(32.8)	(31.4)	(2,137.8)%	(1,695.6)%
Other operating income	19.5	13.5	(6.1)	(31.0)%	(36.9)%
Other operating expenses	(59.4)	(83.4)	(23.9)	(40.2)%	(22.0)%
Operating profit	346.0	255.0	(91.0)	(26.3)%	(30.7)%
Margin	19.3 %	12.9 %		(6.4) pp	(5.6) pp
Finance income	46.9	75.7	28.8	61.4%	55.6%
Finance expenses	(104.9)	(109.3)	(4.3)	(4.1)%	(5.4)%
Share of profit (loss) of investments accounted for using the equity method	(3.5)	(1.4)	2.2	61.3%	76.7%
Profit before tax	284.4	220.0	(64.4)	(22.6)%	(29.2)%
Income tax expenses	(100.7)	(53.3)	47.4	47.1%	44.1%
Net profit for the period	183.7	166.8	(17.0)	(9.2)%	(21.1)%
Non-controlling interests	(0.1)	0.0	0.1	—	—
Net profit attributable to owners of the Company	183.6	166.8	(16.9)	(9.2)%	(21.0)%
Basic EPS (yen)	117.08	107.62	(9.46)	(8.1)%	(20.1)%

\*1 Please refer to page 15 definition of Core Financial Measures and Constant Exchange Rate change for the definition.

Note: % change versus prior year is presented as positive when favorable to profits, and negative when unfavorable to profits.



# FY2022 H1 Core Results with Actual and CER % Change



(Billion JPY)	FY2021 H1	FY2022 H1		vs. PY	
				ACTUAL % CHANGE	CER % CHANGE <sup>*1</sup>
Revenue	1,661.4	1,974.8	313.4	18.9%	5.5%
Cost of sales	(494.1)	(571.6)	(77.4)	(15.7)%	(4.0)%
Gross profit	1,167.2	1,403.2	236.0	20.2%	6.2%
Margin	70.3 %	71.1 %		0.8 pp	0.4 pp
SG&A expenses	(428.7)	(480.5)	(51.8)	(12.1)%	0.6%
R&D expenses	(252.8)	(297.5)	(44.7)	(17.7)%	(1.8)%
Operating profit	485.7	625.2	139.4	28.7%	14.5%
Margin	29.2 %	31.7 %		2.4 pp	2.5 pp
Finance income	31.7	32.6	0.9	2.9%	2.5%
Finance expenses	(90.1)	(100.8)	(10.7)	(11.9)%	(14.6)%
Share of profit (loss) of investments accounted for using the equity method	2.8	2.7	(0.2)	(6.1)%	(5.6)%
Profit before tax	430.1	559.6	129.5	30.1%	13.4%
Income tax expenses	(94.2)	(112.9)	(18.7)	(19.9)%	(10.0)%
Net profit for the period	335.9	446.7	110.7	33.0%	14.4%
Non-controlling interests	(0.1)	0.0	0.1	—	—
Net profit attributable to owners of the Company	335.9	446.7	110.8	33.0%	14.4%
Basic EPS (yen)	214	288	74	34.6%	15.8%

\*1 Please refer to page 15 definition of Core Financial Measures and Constant Exchange Rate change for the definition.

Note: % change versus prior year is presented as positive when favorable to profits, and negative when unfavorable to profits.

# FY2022 H1 Reconciliation from Reported to Core



(Billion JPY)	REPORTED	REPORTED TO CORE ADJUSTMENTS				CORE
		Amortization of intangible assets	Impairment of intangible assets	Other operating income/expenses	Others	
Revenue	1,974.8					1,974.8
Cost of sales	(598.3)				26.8	(571.6)
Gross profit	1,376.4				26.8	1,403.2
SG&A expenses	(480.2)				(0.3)	(480.5)
R&D expenses	(297.8)				0.3	(297.5)
Amortization of intangible assets associated with products	(240.8)	240.8				—
Impairment losses on intangible assets associated with products	(32.8)		32.8			—
Other operating income	13.5			(13.5)		—
Other operating expenses	(83.4)			83.4		—
Operating profit	255.0	240.8	32.8	69.9	26.7	625.2
Margin	12.9 %					31.7%
Finance income and (expenses), net	(33.6)				(34.7)	(68.3)
Share of profit (loss) of investments accounted for using the equity method	(1.4)				4.0	2.7
Profit before tax	220.0	240.8	32.8	69.9	(4.0)	559.6
Tax expenses	(53.3)	(51.5)	(7.0)	(13.1)	12.0	(112.9)
Non-controlling interests	0.0					0.0
Net profit attributable to owners of the Company	166.8	189.3	25.8	56.8	8.0	446.7
EPS (yen)	108					288
Number of shares (millions)	1,549					1,549

# FY2021 H1 Reconciliation from Reported to Core



(Billion JPY)	REPORTED	REPORTED TO CORE ADJUSTMENTS						CORE
		Amortization of intangible assets	Impairment of intangible assets	Other operating income/ expenses	Sale of Japan diabetes portfolio	Irish Tax Assessment *1	Others	
Revenue	1,794.4				(133.0)			1,661.4
Cost of sales	(517.1)				0.6		22.3	(494.1)
Gross profit	1,277.4				(132.4)		22.3	1,167.2
SG&A expenses	(431.9)				1.0		2.1	(428.7)
R&D expenses	(254.1)						1.3	(252.8)
Amortization of intangible assets associated with products	(204.1)	204.1						—
Impairment losses on intangible assets associated with products	(1.5)		1.5					—
Other operating income	19.5			(18.8)			(0.7)	—
Other operating expenses	(59.4)			59.4				—
Operating profit	346.0	204.1	1.5	40.6	(131.4)		25.0	485.7
Margin	19.3 %							29.2%
Finance income and (expenses), net	(58.0)						(0.4)	(58.5)
Share of profit (loss) of investments accounted for using the equity method	(3.5)						6.4	2.8
Profit before tax	284.4	204.1	1.5	40.6	(131.4)		31.0	430.1
Tax expenses	(100.7)	(45.5)	(0.5)	(11.5)	40.2	63.7	(39.9)	(94.2)
Non-controlling interests	(0.1)							(0.1)
Net profit attributable to owners of the Company	183.6	158.6	0.9	29.2	(91.2)	63.7	(9.0)	335.9
EPS (yen)	117							214
Number of shares (millions)	1,568							1,568

\*1 Tax charges of 63.7 billion JPY arising from the tax assessment involving Irish taxation of the break fee Shire received from AbbVie in connection with the terminated offer to acquire Shire made by AbbVie in 2014, net of 0.5 billion JPY of associated tax benefit.

# GLOSSARY OF ABBREVIATIONS



## Regional Abbreviations:

CN: China; EU: Europe; JP: Japan; US: United States of America

<b>AATD-LD</b>	α1-antitrypsin deficiency associated liver disease
<b>ADC</b>	antibody drug conjugate
<b>ADHD</b>	attention deficit hyperactivity disorder
<b>AHA</b>	acquired hemophilia A
<b>ALK</b>	anaplastic lymphoma kinase
<b>ALCL</b>	anaplastic large-cell lymphoma
<b>ALL</b>	acute lymphocytic leukemia
<b>AML</b>	acute myeloid leukemia
<b>ASCT</b>	autologous stem cell transplant
<b>ARD</b>	acid-related diseases
<b>AVA</b>	Advanced Vial Access
<b>BBB</b>	blood brain barrier
<b>BLA</b>	biologics license application
<b>BMA</b>	bradykinin mediated angioedema
<b>BTD</b>	breakthrough therapy designation
<b>CAR-T</b>	chimeric antigen receptor-T
<b>CD</b>	Crohn's disease
<b>CHMP</b>	Committee for Medicinal Products for Human Use
<b>CIDP</b>	chronic inflammatory demyelinating polyradiculoneuropathy
<b>CLL</b>	chronic lymphocytic leukemia
<b>CML</b>	chronic myeloid leukemia
<b>CMV</b>	cytomegalovirus
<b>CNS</b>	central nervous system
<b>CPF</b>	complex perianal fistulas
<b>CRL</b>	complete response letter
<b>CRPC</b>	Castrate-resistant prostate cancer
<b>CTCL</b>	cutaneous T-cell lymphoma
<b>cTTP</b>	congenital thrombotic thrombocytopenic purpura
<b>DEE</b>	developmental and epileptic encephalopathies
<b>DLBCL</b>	diffuse large B-cell lymphoma
<b>DOAC</b>	direct oral anti-coagulation

<b>DS</b>	Dravet syndrome
<b>DU</b>	duodenal ulcer
<b>Dx</b>	Diagnosis
<b>EE H</b>	erosive esophagitis healing
<b>EE M</b>	erosive esophagitis maintenance
<b>EGFR</b>	epidermal growth factor receptor
<b>EMA</b>	European Medicines Agency
<b>FDA</b>	the U.S. Food & Drug Administration
<b>FL</b>	front line
<b>FSI</b>	first subject in
<b>FY</b>	fiscal year
<b>GERD</b>	gastroesophageal reflux disease
<b>GI</b>	gastrointestinal
<b>GU</b>	gastric ulcer
<b>GvHD</b>	graft versus host disease
<b>HAE</b>	hereditary angioedema
<b>H2H</b>	head-to-head
<b>HemA</b>	hemophilia A
<b>HL</b>	Hodgkin lymphoma
<b>HSCT</b>	hematopoietic stem cell transplant
<b>IBD</b>	inflammatory bowel disease
<b>IgAN</b>	immunoglobulin A nephropathy
<b>IH</b>	idiopathic hypersomnia
<b>INCAT</b>	Inflammatory Neuropathy Cause and Treatment disability score
<b>IND</b>	investigational new drug
<b>INHL</b>	indolent non-Hodgkin's lymphoma
<b>ITP</b>	Immune thrombocytopenic purpura
<b>iTTP</b>	immune thrombotic thrombocytopenic purpura
<b>IV</b>	intravenous
<b>iPSC</b>	induced pluripotent stem cells
<b>L-ASA</b>	low dose aspirin
<b>LSD</b>	lysosomal storage disorder

<b>LCM</b>	lifecycle management
<b>LGS</b>	Lennox-Gastaut syndrome
<b>mAb</b>	monoclonal antibody
<b>MAOB</b>	monoamine oxidase B
<b>MDD</b>	major depressive disorder
<b>MG</b>	myasthenia gravis
<b>MLD</b>	metachromatic leukodystrophy
<b>MM</b>	multiple myeloma
<b>MMN</b>	multifocal motor neuropathy
<b>NBE</b>	New Biological Entity
<b>NCE</b>	New Chemical Entity
<b>ND</b>	newly diagnosed
<b>NDA</b>	new drug application
<b>Neg</b>	Negative
<b>NERD</b>	non-erosive reflux disease
<b>NHL</b>	non-Hodgkin lymphoma
<b>NK</b>	natural killer
<b>NME</b>	new molecular entity
<b>NMPA</b>	National Medical Products Administration
<b>NSCLC</b>	non-small cell lung cancer
<b>NSCT</b>	non stem cell transplant
<b>NT1 or 2</b>	narcolepsy Type 1 or 2
<b>ORR</b>	overall response rate
<b>OSA</b>	obstructive sleep apnea
<b>PARP</b>	poly (ADP-ribose) polymerase
<b>PAS</b>	prior approval supplement
<b>PCAB</b>	potassium competitive acid blocker
<b>PCD</b>	protein C deficiency
<b>PEX</b>	plasma exchange
<b>Ph+ ALL</b>	Philadelphia chromosome-positive acute lymphoblastic leukemia
<b>PID</b>	primary immunodeficiency

<b>PK</b>	pharmacokinetics
<b>PMDA</b>	Japan's Pharmaceuticals and Medical Devices Agency
<b>POC</b>	proof of concept
<b>POGD</b>	post-operative gastrointestinal dysfunction
<b>PONV</b>	postoperative nausea and vomiting
<b>PRIME</b>	Priority medicines scheme by EMA
<b>PTCL</b>	peripheral T-cell lymphoma
<b>PTH</b>	parathyroid hormone
<b>R/R</b>	relapsed/refractory
<b>RCC</b>	renal cell cancer
<b>RTK</b>	receptor tyrosine kinase
<b>RTU</b>	ready to use
<b>sALCL</b>	systemic anaplastic large cell lymphoma
<b>SBS</b>	short bowel syndrome
<b>SC</b>	subcutaneous formulation
<b>SCD</b>	sickle cell disease
<b>SCT</b>	stem cell transplant
<b>SID</b>	secondary immunodeficiency
<b>SLE</b>	systemic lupus erythematosus
<b>sq</b>	squamous
<b>STING</b>	stimulator of interferon genes
<b>SUMO</b>	small ubiquitin-related modifier
<b>TCE</b>	T-cell engager
<b>TESD</b>	treatment emergent sexual dysfunction
<b>TKI</b>	tyrosine kinase inhibitor
<b>TREM2</b>	triggering receptor expressed on myeloid cells 2
<b>UC</b>	ulcerative colitis
<b>VCD</b>	virologically confirmed dengue
<b>vWD</b>	von Willebrand disease
<b>VWF</b>	von Willebrand factor





**Better Health, Brighter Future**

© 2023 Takeda Pharmaceutical Company Limited. All rights reserved.