



# Pharming Group

Sijmen de Vries Chief Executive Officer

**HC Wainwright Conference** 

New York City

09 September 2019



The information contained in this document and communicated verbally to you (together the "Presentation") is being supplied to you solely for your information and may not be copied, reproduced or further distributed to any person or published, in whole or in part, for any purpose.

The Presentation does not form any part of an offer of, or invitation to apply for, securities in Pharming Group N.V. (the "Company").

The Presentation speaks as of the date shown on the front cover. The Company assumes no obligation to notify or inform the recipient of any developments or changes occurring after the date of this document that might render the contents of the Presentation untrue or inaccurate in whole or in part. In addition, no representation or warranty, express or implied, is given as to the accuracy of the information or opinions contained in the Presentation and no liability is accepted for any use of any such information or opinions given by the Company or by any of its directors, members, officers, employees, agents or advisers.

The Presentation contains forward-looking statements, including statements about our beliefs and expectations. These statements are based on our current plans, estimates and projections, as well as our expectations of external conditions and events. Forward-looking statements involve inherent risks and uncertainties and speak only as of the date they are made. The Company undertakes no duty to update these and will not necessarily update any of them in light of new information or future events, except to the extent required by applicable law.

The Company's securities have not been and will not be registered under the U.S. Securities Act of 1933, as amended (the "Securities Act"), and may not be offered or sold in the United States absent registration under the Securities Act or an available exemption from, or transaction not subject to, the registration requirements of the Securities Act.

#### Company Overview



- Public Company: Euronext: PHARM: ~€750million (~\$820
  million)
- Domiciled: the Netherlands, ~220 employees globally
- Focus: Rare and Ultra-rare disease development and commercialization
  - Marketed product: RUCONEST®
  - Recombinant human C1-esterase inhibitor (enzyme replacement therapy)
  - For acute angioedema attacks in patients with hereditary angioedema (HAE)
  - Marketed in USA, EU, LatAm, Korea and Israel with other territories coming
- ✓ Profitable and cash flow positive with 1H2019 net sales of €78M and expecting continued growth in sales



### Pharming today and into the future





From this we can drive lasting additional growth by developing innovative solutions in select rare, ultra-rare and specialty diseases





### RUCONEST<sup>®</sup> : Strong Execution of Commercial Strategy



- HAE market which is a complex, serious disease with many idiosyncrasies. The current approved therapies all address certain segments/ phenotypes of HAE.
- RUCONEST<sup>®</sup>; as the only recombinant PRT, due to it's dosing and method of administration, serves a segment the other therapies are unable to serve in an adequate way.
- Pharming, as a result of the solid RUCONEST<sup>®</sup>; business, has a strong balance sheet with growing cash position

Pharming is in a very strong position to execute and grow



#### **RUCONEST®:** Patient Segmentation









#### High Potential Pipeline





#### Pre-eclampsia-1 of 3 Serious Conditions of Late Pregnancy





- 8% Spontaneous Preterm Birth
- 6% Foetal growth restriction
- 5% Pre Eclampsia



#### Pre-eclampsia

编辑



Table 1 Analytical data (mean ± 1 S	SD) in normal pregnancy, pre (A) Normal pregnancy (n = 20)	(B) Mild preeclampsia (n = 17)	(C) Moderate preeclampsia (n = 10)	(D) Non-pregnant women (n = 20)	
C1-INH activity (%)	$74.3 \pm 15.5$	64.4 ± 14.0	$55.5 \pm 15.8$	95.1 ± 10.8	
C1-INH antigen (%)	$68.2 \pm 10.4$	62.7 ± 13.3	$53.1 \pm 8.8$	86.5 ± 12.2	



Fig. 2 Scattergram of C1-INH activities. Uncomplicated pregnancies (A), mild preeclampsia (B), moderate preeclampsia (C) and non-pregnant controls (D)

- High unmet need with no current treatment
- Significant cost to healthcare system and families
- Challenging disease to study; demands thoughtful, ethical approach



#### First described in the 1950's

- Radiographic contrast medium are responsible for 11% of cases of hospital-acquired renal insufficiency, the third most common cause of renal failure after impaired renal perfusion and the use of nephrotoxic medications.
- AKI from CM is responsible for a third of all hospital-acquired acute kidney injury (AKI) and affects between 1% and 2% of the general population and up to 50% of high-risk subgroups following coronary angiography (CA) or percutaneous coronary intervention (PCI).<sup>1</sup>

#### Table 1 | Risk factors for the development of CIN

Fixed (non-modifiable) risk factors	Modifiable risk factors		
Older age	Volume of CM		
Diabetes mellitus	Hypotension		
Pre-existing renal failure	Anemia and blood loss		
Advanced CHF	Dehydration		
Low LVEF	Low serum albumin level (<35 g/l)		
Acute myocardial infarction	ACE inhibitors		
Cardiogenic shock	Diuretics		
Renal transplant	Non-steroidal anti-inflammatory drugs		
•	Nephrotoxic antibiotics		
	IABP		

Abbreviations: ACE, angiotensin-converting enzyme; CHF, congestive heart failure; CIN, contrast-induced nephropathy; CM, contrast media; IABP, intra-aortic balloon pump; LVEF, left ventricular ejection fraction.

## Acute Kidney Injury (AKI) Resulting from Contrast Medium (CM)

Pharming



Study completed M. Osthoff MD et al., University Hospital Basel, CH



Relative urine NGAL peak increase 48 h, (%)









- $\checkmark$  Leniolisib is a selective PI3Kinase  $\delta$  inhibitor
- Leniolisib is in a registration-enabling study for the treatment of APDS
- APDS is a recently discovered primary immune deficiency caused by a mutation in the PIK3CD gene that increases activity of PI3Kδ, a promoter of activity in the immune system, an ultra-rare, debilitating disease with no approved treatment
- Beginning in childhood, recurrent infections, particularly in the lungs, sinuses, and ears. Over time, recurrent respiratory tract infections can lead to a condition called bronchiectasis, cause breathing problems.



People with activated PI3K-delta syndrome may also have chronic active viral infections, commonly Epstein-Barr virus or cytomegalovirus infections. Sufferers also frequently develop lymphomas and other cancers.

APDS is treated by immunologists; the main physicians treating HAE and therefore already addressed by Pharming commercialization teams

♦ Upfront payment of \$20 million (€17.9 million)

♦ If approved, the drug is expected to reach the market in 2H 2021 or 1H 2022



Continued Investment in HAE

Investment in new indications PE and AKI for C1INH

Licensing/acquisition of additional rare/ultra-rare asset near-to-market

> Active Business Development aimed at capital efficient and smart investments that leverage commercial infrastructure ahead of maturation of new indications/ new internal pipeline projects



## Financial Performance & 2019 Outlook



Amounts in €m except per share data	2019 1 <sup>st</sup> Half	2018 1 <sup>st</sup> Half *restated	% Change
Income Statement			
Revenues	77.9	59.5	31%
Gross profit	67.0	50.0	34%
Operating result	24.6	16.3	51%
Net result	13.6	8.5*	60%
Balance Sheet			
Cash & marketable securities	65.3	66.9	(2%)
Share Information			
Earnings per share (€): Undiluted	0.022	0.014*	57%
Fully diluted	0.020	0.013*	54%

\* After restatement on the basis set out above and in Note 4 to the Financial Statements in the Annual Report 2018.

#### Summary and Outlook 2019 and beyond





Re- evaluation of most advantageous route of administration for RUCONEST<sup>®</sup>



www.pharming.com

ENXTAM: PHARM

Bloomberg: PHAR.AS