



2023 RBC Capital Markets Global Healthcare Conference

Focus. Together. For patients & society

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- All medicine names listed in this document are either licensed to Ipsen or are registered trademarks of Ipsen or its partners.
- The implementation of the strategy has to be submitted to the relevant staff representation authorities in each country concerned, in compliance with the specific procedures, terms and conditions set forth by each national legislation.
- In those countries in which public or private-health cover is provided, Ipsen is dependent on prices set for medicines, pricing and reimbursement-regime reforms and is vulnerable to the potential withdrawal of certain medicines from the list of reimbursable medicines by governments, and the relevant regulatory authorities in its locations.
- Ipsen operates in certain geographical regions whose governmental finances, local currencies or inflation rates could erode the local competitiveness of Ipsen's medicines relative to competitors operating in local currency, and/or could be detrimental to Ipsen's margins in those regions where Ipsen's sales are billed in local currencies.
- In a number of countries, Ipsen markets its medicines via distributors or agents; some of these partners' financial strengths could be impacted by changing economic or market conditions, potentially subjecting Ipsen to difficulties in recovering its receivables. Furthermore, in certain countries whose financial equilibrium is threatened by changing economic or market conditions, and where Ipsen sells its medicines directly to hospitals, Ipsen could be forced to lengthen its payment terms or could experience difficulties in recovering its receivables in full.
- Ipsen also faces various risks and uncertainties inherent to its activities identified under the caption 'Risk Factors' in the Company's Universal Registration Document.
- All of the above risks could affect Ipsen's future ability to achieve its financial targets, which were set assuming reasonable macroeconomic conditions based on the information available today.



Q1 messages

Consistent strong delivery on the strategic roadmap

Total sales

- Q1 sales growth of 5.7%
- Growth platforms, up by 14.7%, led by Dysport & Cabometyx
- Contribution from newly acquired medicines

Albireo

- Albireo acquisition completed in March
- One month of Bylvay sales in Q1



Pipeline update

- Onivyde 1L PDAC
 - Full Phase III data presented
- Forthcoming PDUFA dates:
 - 15 June: Bylvay (Alagille syndrome)
 - 16 August: palovarotene (FOP)

2023 guidance confirmed

- Total-sales growth greater than 4.0%¹
- Core operating margin around 30%²



Excludes adverse impact of around 2% from currencies based on the average level of exchange rates in Q1 2023.
 Excludes any potential impact of incremental investments from external-innovation transactions.
 Growth platforms: Dysport, Decapeptyl, Cabometyx and Onivyde; 1L: first line; PDAC: pancreatic ductal adenocarcinoma;

PDUFA: Prescription Drug User Fee Act; FOP: fibrodysplasia ossificans progressiva.



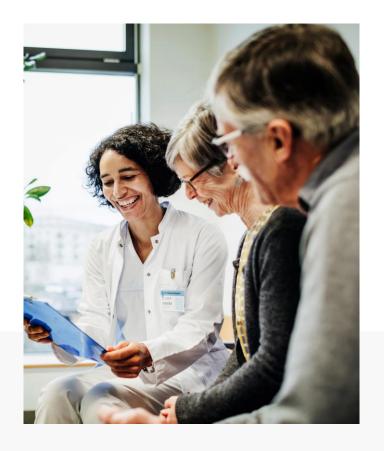
A future focused on Specialty Care

Consumer HealthCare divested last year

Our vision

To be a leading global, mid-sized biopharmaceutical company with a focus on transformative medicines in Oncology, Rare Disease & Neuroscience







A strong & expanded global footprint



















Environment

Emissions GHG emission-reduction trajectory: officially certified by the Science Based Targets initiative¹

- Renewables
 90% renewable electricity
 for all global operations
- Fleet
 Launched Fleet for Future programs

Patients

Access Partnership with Access Accelerated: continued to support communities that lack sufficient access to healthcare

Ukraine €1.5m donation to the Red Cross and Tulipe, plus medicine donations

People

Diversity Females: 48% of the Global Leadership Team

- Employer of choice in 23 countries
- Community
 44% of colleagues
 participated in Ipsen's
 Community Day

Governance

- Certification ISO 37001 certification for anti-corruption management systems
- Compliance
 Continued rigorous

Continued rigorous compliance with highest ethics and compliance standards



^{1.} A collaboration between the CDP, the United Nations Global Compact, the World Resources Institute and the World Wide Fund for Nature. **GHG**: greenhouse gas.

The Ipsen investment case

Entire focus on Specialty Care

Opportunities for further growth across the three therapy areas



Global footprint

A well-balanced & expanded presence around the world



A good mix of new molecules and lifecycle management



20 assets
in two years
across the three
therapy areas

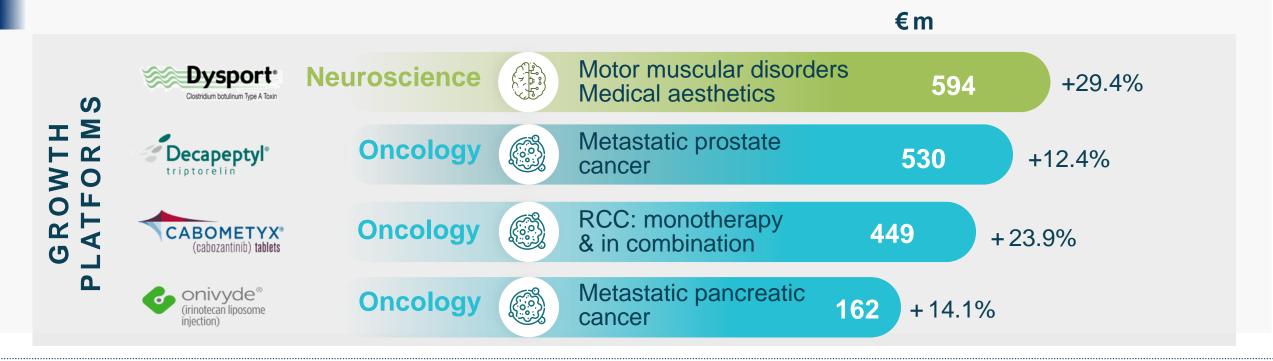
Strong balance sheet & cash generation

€1.5bn
firepower¹
Free cash flow
>€800m in 2022



FY 2022: sales increased by 8.5%

Growth platforms up by 20.9%









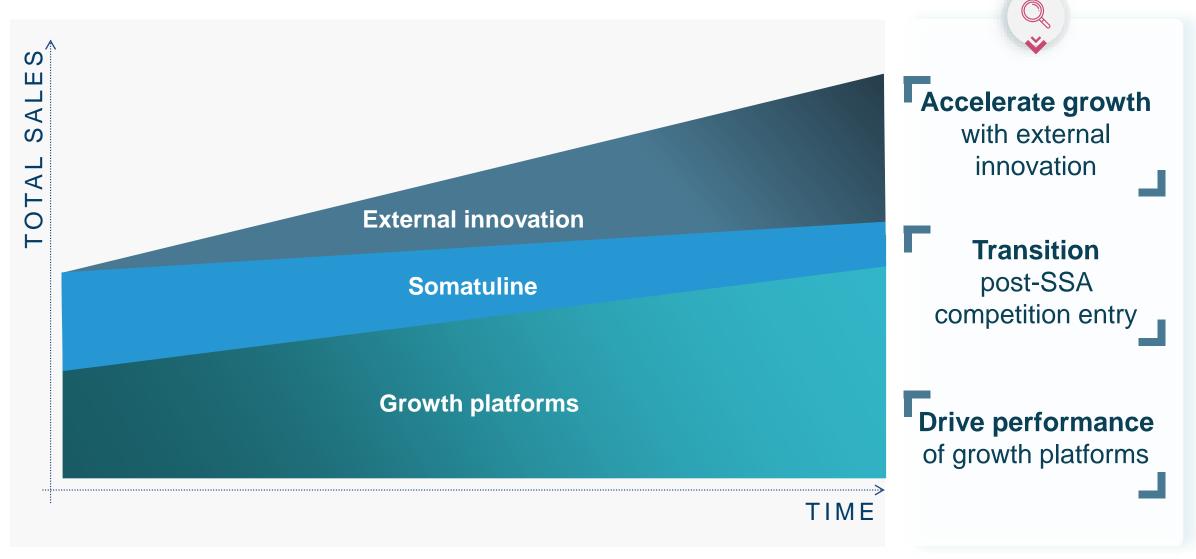
Neuroendocrine tumors

1,218

-5.6%



A strong platform for sustainable growth





Consistent execution of the external-innovation strategy

20 assets added in two years



ONCOLOGY: 12 assets

Tazverik Epizyme¹

Approved

ERK-inhibitor AGV Discovery

Preclinical

METTL3
Accent

Accent Therapeutics

Preclinical

BKX-001 BAKX Therapeutics

Preclinical

FLIP-i program Queen's University

Preclinical

IO Marengo

Preclinical



RARE DISEASE: 5 assets

Elafibranor GENFIT

Phase III

Bylvay ALBIREO²

Approved



NEUROSCIENCE: 3 assets

Mesdopetam IRLAB

Phase IIb

SNAs Exicure³

Preclinical

BoNT/X BCH/UOS

Preclinical



Albireo: expanding Ipsen's scope in Rare Disease

Perfectly aligned to the external-innovation strategy

Global rights¹

 Bylvay: a potentially best-in-class rare liver-disease medicine approved in the U.S. & E.U.



Strategic fit

Expanding the pipeline& portfolio in rare liver diseases



Multiple opportunities

- Bylvay: progressive familial intrahepatic cholestasis, Alagille syndrome, biliary atresia
- Early-stage pipeline: adult cholestatic liver diseases

Financial impact

- Peak sales ~\$800m
- Accretive to core operating income from 2025



Elafibranor

Peak-sales outlook: around €500m

In Phase III clinical development for 2L PBC - data anticipated in H1 2023

Expanding Ipsen's position in Rare Disease

High unmet medical need

A first-in-class, innovative potential treatment option

U.S. prevalence: 23.9-39.2 per 100,000^{1, 2}

Compelling Phase II data

Breakthrough
Therapy &
Orphan Drug
Designations

Exclusive worldwide licence³

to develop, manufacture & commercialize elafibranor Beyond PBC: ELMWOOD Phase II trial initiated in PSC



¹ Lu et al Clinical Gastro & Hepatol 2018; 16:1342-1350 ² Galoosian et al. Journal of Clinical & Transplantation Hepatology 2020; 8:49-60.

³ Rights exclude China, Taiwan, Hong Kong & Macau. **2L**: second line; **PBC**: primary biliary cholangitis; **PSC**: primary sclerosing cholangitis.

Building a high-value, sustainable pipeline





Onivyde



Potential in 1L PDAC

1L data presented at ASCO GI, San Francisco

Potential to expand
Onivyde's peak-sales potential

Current label: post gemcitabine-based therapy Onivyde regimen

Statistically significant & clinically meaningful improvement in overall survival

Trial met key secondary endpoint of progression-free survival

A safety profile consistent with the previous trial

A potential advance in an aggressive and difficult-to-treat cancer

Regulatory submission in the U.S.: H1 2023

Leveraging
Ipsen's existing
in-market
presence &
building on the
commitment to
Oncology



Pipeline: near-term major milestones

Bylvay: Alagille syndrome

PDUFA date: 15 June 2023 (U.S.) Regulatory decision: H2 2023 (E.U.)

Onivyde: 1L PDAC

Regulatory submission (U.S.): H1 2023

Elafibranor: 2L PBC

Phase III data readout: end of H1 2023

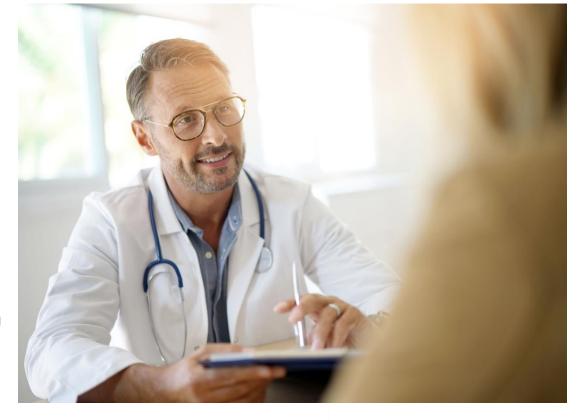
Palovarotene: FOP

PDUFA date: 16 August 2023 (U.S.)

Re-examination of CHMP opinion requested (E.U.)¹

Cabometyx + atezolizumab:2L mCRPC

Phase III data readout (PFS): H2 2023





Conclusion

Successfully executing on our strategy

DELIVERING STRONG RESULTS





Strong progress on the four strategic pillars

Growth platforms performing well

Potential launches to drive further strong results

FOCUSING ON EXTERNAL INNOVATION





Significant firepower

Adding pipeline assets; expanding the scope in Rare Disease

Momentum for further external-innovation transactions

ADVANCING THE PIPELINE





Number of assets & trials

Opportunities across the three therapy areas

Several near-term milestones



APPENDIX



Q1 sales highlights

Growth platforms outweighing the gradual decline of Somatuline

| | Q1 2023 | | | |
|--------------------------|---------|--------|------------------|--|
| | €m | change | % of total sales | |
| | | | | |
| Dysport | 155 | 25.2% | 21% | |
| Cabometyx | 130 | 31.0% | 18% | |
| Decapeptyl | 130 | 0.8% | 17% | |
| Onivyde | 37 | -12.3% | 5% | |
| Growth platforms | 452 | 14.7% | 61% | |
| Tazverik | 9 | n/a | 1% | |
| Bylvay | 5 | n/a | 1% | |
| Newly acquired medicines | 14 | n/a | 2% | |
| Somatuline | 263 | -9.8% | 35% | |
| Others | 13 | -20.8% | 2% | |
| | | | | |
| Total Sales | 742 | 5.7% | 100% | |



Strong performance from growth platforms in Q1: +14.7%



+25.2%

Further strong performance in aesthetics in Ipsen & partner markets

Continued therapeutics growth across the regions



+31.0%

Further launches of the combo in first-line renal cell carcinoma

Momentum in second-line renal cell carcinoma monotherapy



+0.8%

Continued market-share uptakes in a number of geographies

Reduced sales in China reflected COVID-related stocking in Q1 2022



-12.3%

Performance reflected shipment phasing to ex-U.S. partner

Solid underlying growth in the U.S.





Somatuline sales continuing to decline gradually

Q1 2023: -9.8%

NORTH AMERICA

58% of Somatuline sales

-2.7%

Favorable wholesalerinventory comparison to Q1 2022

Solid volume-demand growth

Ongoing adverse pricing

EUROPE

30% of Somatuline sales

-25.7%

Generic competition across more geographies (France, Spain & Italy)

Impacts through a combination of volume & pricing

REST OF WORLD

12% of Somatuline sales

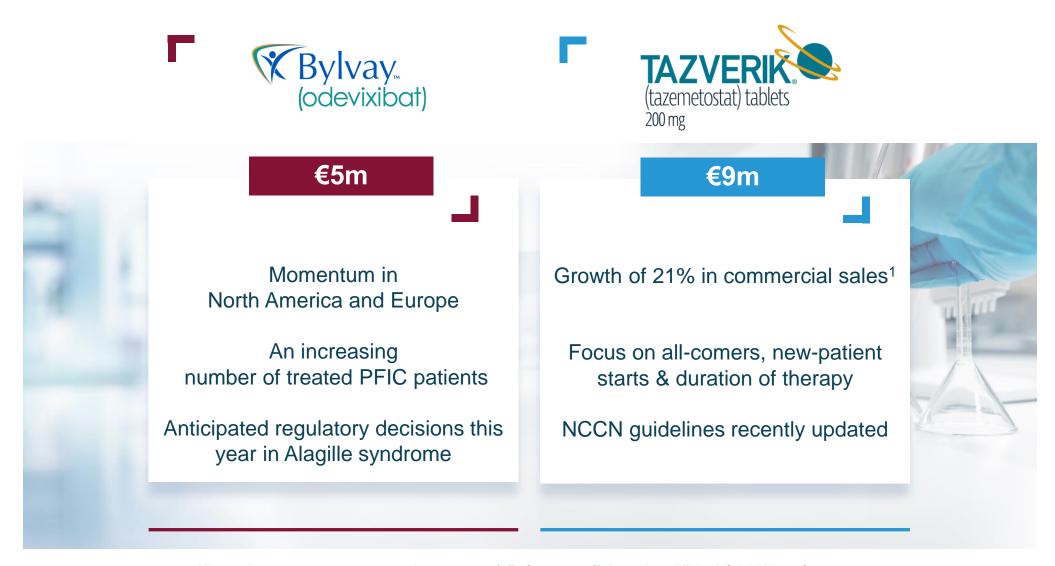
+7.3%

Solid underlying growth

Several geographies performing well, including Latin America

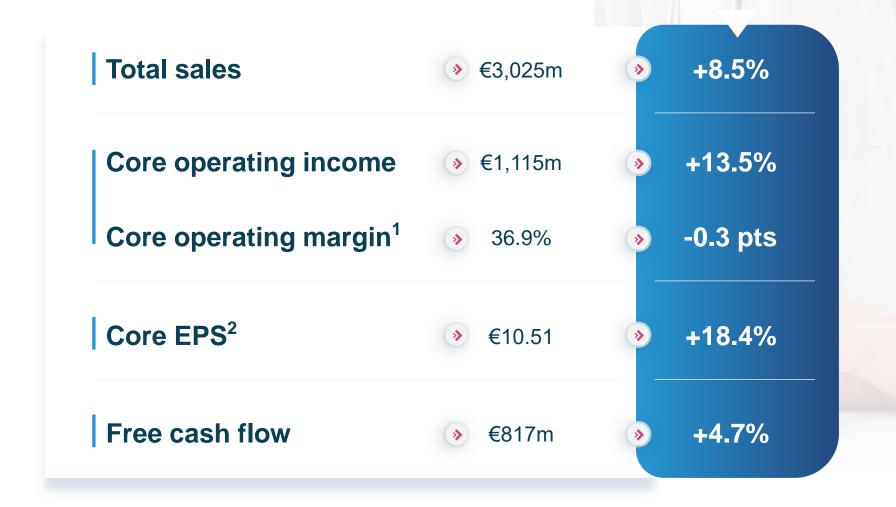


Recently acquired medicines: Q1 2023





FY 2022 financial highlights





Oncology

| TRIAL | POPULATION | PATIENTS | DESIGN | PRIMARY ENDPOINT(S) | STATUS |
|---|--|----------|--|---------------------|--|
| Cabometyx CONTACT-02 Phase III NCT04446117 | 2L mCRPC | 580 | Second novel hormonal therapy (abiraterone & prednisone or enzalutamide) or Cabometyx + atezolizumab | OS, PFS | Recruiting ¹ PFS data anticipated H2 2023 |
| Onivyde NAPOLI-3 Phase III NCT04083235 | 1L PDAC | 770 | Nab-paclitaxel + gemcitabine or Onivyde + 5-FU/LV + oxaliplatin | OS | Primary endpoint met |
| Tazverik SYMPHONY-1 Phase III NCT04224493 | R/R FL: following at least one prior systemic chemotherapy, immunotherapy, or chemo- immunotherapy | 540 | Placebo + R ² or Tazverik + R ² | PFS | Recruiting |



^{1.} Recruitment is anticipated to complete in H2 2023. **2L**: second line; **mCRPC**: metastatic castration-resistant prostate cancer; **OS**: overall survival; **PFS**: progression-free survival; **1L**: first line; **PDAC**: pancreatic ductal adenocarcinoma; **R/R**: relapsed/refractory; **FL**: follicular lymphoma; **R**²: lenalidomide + rituximab.

Oncology

Key ongoing clinical-trial highlights

| TRIAL | POPULATION | PATIENTS | DESIGN | PRIMARY ENDPOINT(S) | STATUS |
|---|---|----------|---|---|------------|
| Tazverik ARIA Phase Ib/II NCT05205252 | R/R hematologic malignancies | 156 | Tazverik in various combinations: multi-cohort | Phase Ib: dosing, safety Phase II: ORR | Recruiting |
| IPN60210 Phase I/Ib NCT05121103 | R/R multiple myeloma & R/R DLBCL | 96 | IPN60210 | Treatment-emergent adverse events, dosing & ORR | Recruiting |
| Tazverik CELLO-1 Phase lb/II NCT04179864 | mCRPC: patients who have not received chemotherapy | 104 | Enzalutamide + Tazverik or abiraterone/prednisone + Tazverik | Phase Ib: dosing, safety Phase II: rPFS Tazverik + enzalutamide | Recruiting |



R/R: relapsed/refractory; ORR: objective response rate; DLBCL: diffuse large B-cell lymphoma; mCRPC: metastatic castration-resistant prostate cancer; rPFS: radiographic progression-free survival.

Rare Disease

| TRIAL | POPULATION | PATIENTS | DESIGN | PRIMARY ENDPOINT | STATUS |
|--|-------------------|----------|------------------------------|---|---|
| Elafibranor ELATIVE Phase III NCT04526665 | 2L PBC | 161 | Placebo or elafibranor | Response to treatment defined as ALP < 1.67 x ULN and total bilirubin ≤ ULN and ALP decrease ≥ 15 percent | Data anticipated H1 2023 |
| Bylvay ASSERT Phase III NCT04674761 | Alagille syndrome | 63 | Placebo or Bylvay | Change from baseline in scratching score | U.S. PDUFA date 15 June 2023 E.U. regulatory decision anticipated in H2 2023 |
| Bylvay BOLD Phase III | Biliary atresia | 205 | Placebo or Bylvay | Proportion of patients who are alive and have not undergone a liver transplant after 104 weeks of study treatment | Recruiting |



Rare Disease

| TRIAL | POPULATION | PATIENTS | DESIGN | PRIMARY ENDPOINT(S) | STATUS |
|--|------------------|----------|---|---|--|
| Palovarotene MOVE Phase III NCT03312634 | FOP (chronic) | 107 | Palovarotene - 5mg QD and upon flare-up, 20mg QD for 28 days, followed by 10mg for 56 days | Annualized change in new HO volume | U.S.: PDUFA date 16 August 2023 E.U. CHMP: negative opinion January 2023 - re-examination requested |
| Fidrisertib FALKON Phase II NCT05039515 | FOP (chronic) | 90 | Placebo or two dosing regimens of fidrisertib | Annualized change in new HO volume and safety | First patient commenced dosing Q1 2022 |



Rare Disease

| TRIAL | POPULATION | PATIENTS | DESIGN | PRIMARY ENDPOINT(S) | STATUS |
|---|--------------------------------|----------|---|---|------------|
| IPN60250 (A3907) Phase II NCT05642468 | Primary sclerosing cholangitis | 12 | 10mg IPN60250 tablet QD for 12 weeks 30mg (3x10 mg) IPN60250 tablets QD for 12 weeks | Treatment-related adverse events | Recruiting |
| Elafibranor ELMWOOD Phase II NCT05627362 | Primary sclerosing cholangitis | 60 | Placebo or elafibranor | Safety, significant changes in physical examination findings, laboratory parameters, vital signs, electrocardiogram readings | Recruiting |
| IPN60260 (A2342) Phase I ISRCTN13265717 | Viral cholestatic disease | 108 | Interventional | To be confirmed | Recruiting |
| Ó:IDEEN! | - | | QD: once a day. | | |



Neuroscience

| TRIAL | POPULATION | PATIENTS | DESIGN | PRIMARY ENDPOINT | STATUS |
|---|---|----------|--|---------------------|--|
| IPN10200 Ax LANTIC Phase II NCT04821089 | Moderate to severe upper facial lines | 424 | Dose escalation & dose finding versus Dysport or placebo | Safety | First patient commenced dosing Q1 2023 |
| IPN10200 Tx LANTIMA Phase I/II NCT04752774 | Adult patients with upper limb spasticity | 209 | Dose escalation & dose finding versus Dysport or placebo | Safety | Recruiting |



^{1.} Good 'ON-time' is the time that people living with Parkinson's disease experience improved Parkinsonian symptoms and no dyskinesia.



Investor Relations





Craig MARKS

Vice President, Investor Relations

© +44 7564 349 193

☑ craig.marks@ipsen.com





Nicolas BOGLER

Investor Relations Senior Manager

© +33 6 52 19 98 92

nicolas.bogler@ipsen.com



