

Creating anti-infective opportunities

Full-year results 2023

Webcast presentation February 13, 2024



David Veitch

Chief Executive Officer

Introduction

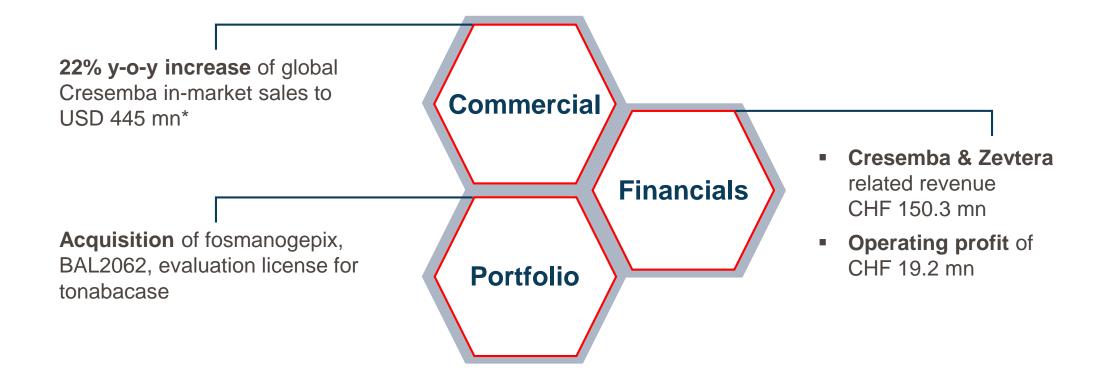


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FY 2023 – Key achievements



*MAT Q3/2023 vs. Q3/2022; MAT: Moving annual total; Source: IQVIA Analytics Link, September 2023

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Innovative anti-infective pipeline

	Products / Product candidates / Indication	Preclinical	Phase 1	Phase 2	Phase 3	Market	
Antifungals	Cresemba [®] (isavuconazole) Invasive aspergillosis and mucormycosis (US, EU, China and several other countries) ¹						
	Aspergillosis (including invasive aspergillosis and chronic pulmonary aspergillosis), mucormycosis and cryptococcosis (Japan)						
	Fosmanogepix Candidemia / invasive candidiasis (including <i>Candida auris</i>) Invasive mold infections (including invasive aspergillosis, fusariosis, <i>Scedosporium</i> and <i>Lomentospora</i> infections, mucormycosis and other rare mold infections)						Acquired in 2023
	BAL2062 ² Invasive aspergillosis						Acquired in 2023
Antibiotics	Zevtera [®] (ceftobiprole) Hospital- and community-acquired bacterial pneumonia (HABP, CABP) (major European and several other countries) <i>Staphylococcus aureus</i> bacteremia (SAB) ³ , acute bacterial skin and skin structure infections (ABSSSI) ³ and community-acquired bacterial pneumonia (CABP) (US)						
	Tonabacase ^₄ Severe staphylococcal infections						Evaluation license and option agreement in 2023
	Internal research Focus for in-licensing and acquisitions						

1 The registration status and approved indications may vary from country to country.

2 Formerly GR-2397

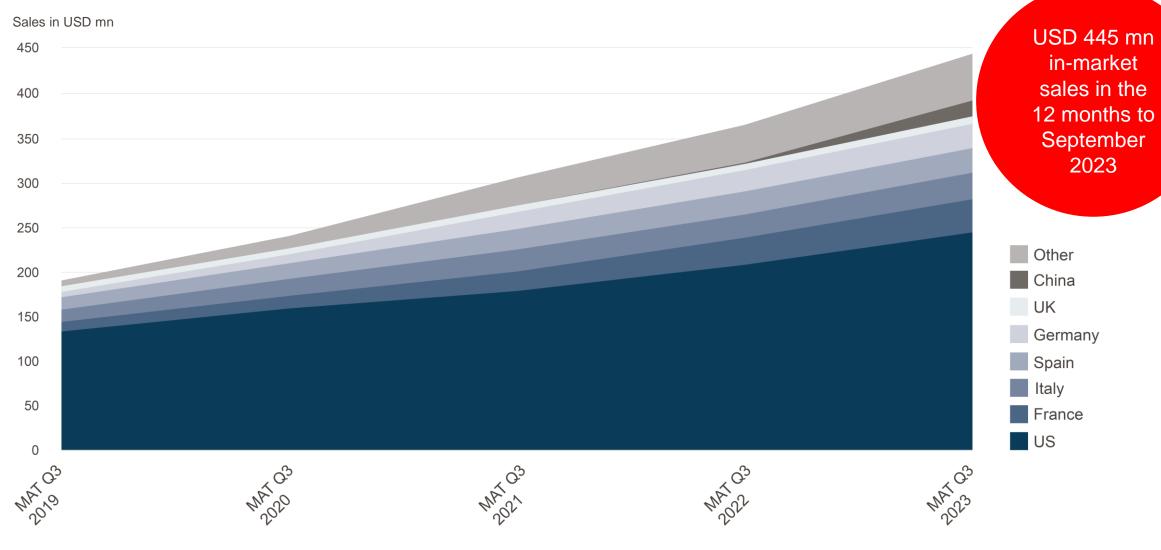
3 Phase 3 program was funded in part with federal funds from the US Department of Health and Human Services (HHS); Administration for Strategic Preparedness and Response (ASPR); Biomedical Advanced Research and Development Authority (BARDA). 4 Exclusive option to in-license upon completion of preclinical profiling

Adesh Kaul Chief Financial Officer

Commercial & financial update



Cresemba continues strong in-market sales uptake



MAT: Moving annual total; Source: IQVIA Analytics Link, September 2023

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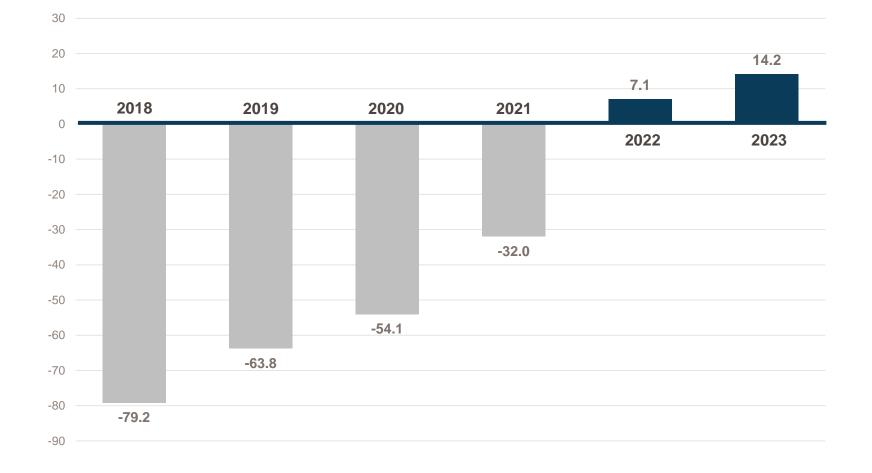
Strong FY23 results with revenue at the upper end of guidance and operating and net profit above guidance

In CHF mn	FY 2023	FY 2023 (guidance)	FY 2022
Cresemba and Zevtera related revenue of which royalty income	150.3 78.9	147 – 150 ~76	122.3 65.0
Total revenue	157.6	154 – 157	147.8
Cost of products sold Operating expenses	26.8 111.6	~27 ~115	24.6 104.6
Operating profit	19.2	11 – 15	18.5
Net profit	10.5	2 – 6	12.1

Note: Consistent rounding was applied.

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Cash flows from operating activities (in CHF mn)

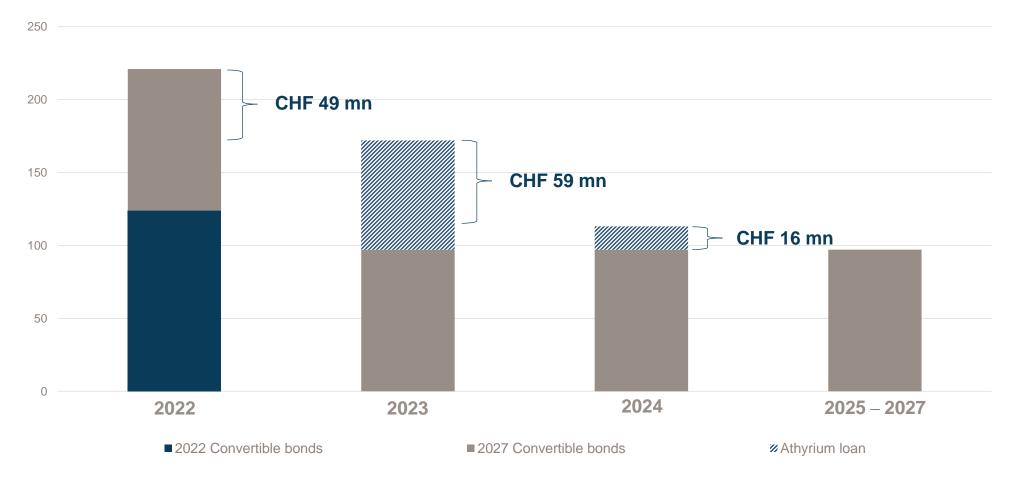


Note: Consolidated figures in conformity with US GAAP; rounding applied consistently

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CHF 124 mn non-dilutive debt level reduction 2022-2024



Note: Figures (in CHF mn) as of the beginning of the fiscal year; rounding applied consistently

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2024 Guidance – 20% increase in Cresemba and Zevterarelated revenue and more than doubling of net profit

In CHF mn	FY 2024 guidance*	FY 2023
Cresemba and Zevtera related revenue	~180	150.3
of which royalty income	~89	78.9
Total revenue	~183	157.6
Cost of products sold Operating expenses	~33 ~120	26.8 111.6
Operating profit	~30	19.2
Net profit	~25	10.5

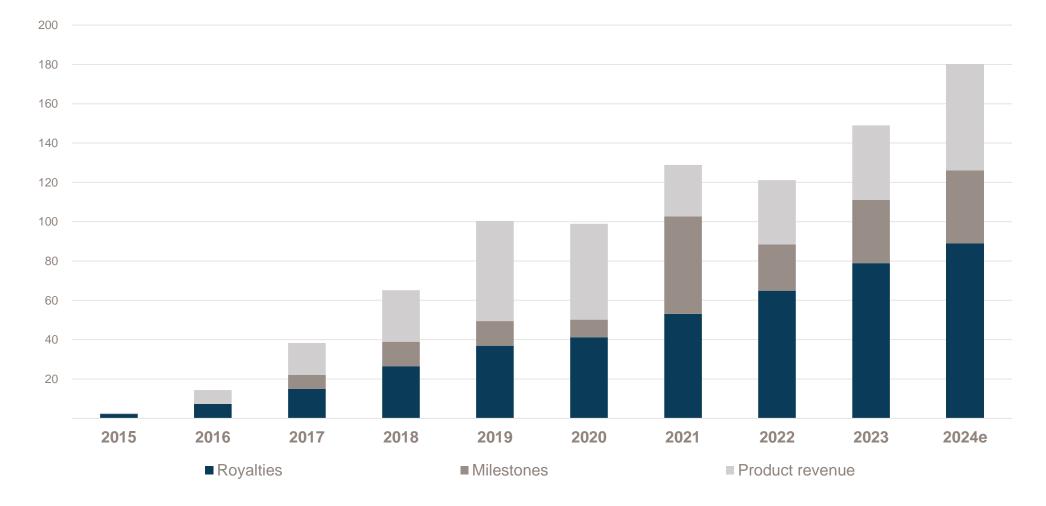
* Excluding the impact of in-licensing and acquisitions

Note: Consistent rounding was applied.

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Cresemba and Zevtera-related revenue breakdown (in CHF mn)



Marc Engelhardt Chief Medical Officer

Portfolio update



Antibacterial Zevtera® (ceftobiprole)

Severe bacterial infections



Zevtera[®] 500 mg powder for concentrate for solution for infusion. Ceftobiprole (as ceftobiprole medocaril sodium).

Each vial contains 500 mg of ceftobiprole, equivalent to 666.6 mg of ceftobiprole medocaril sodium.

For intravenous use after reconstitution and dilution. Read the package leaflet before use.

10 vials

Ceftobiprole — Strategy for accessing the US market

- FDA accepted NDA submission for three indications:
 - 1. Staphylococcus aureus bacteremia (SAB)¹
 - Acute bacterial skin and skin structure infections (ABSSSI)²



 Previously completed phase 3 study in community-acquired bacterial pneumonia (CABP) as a third indication³

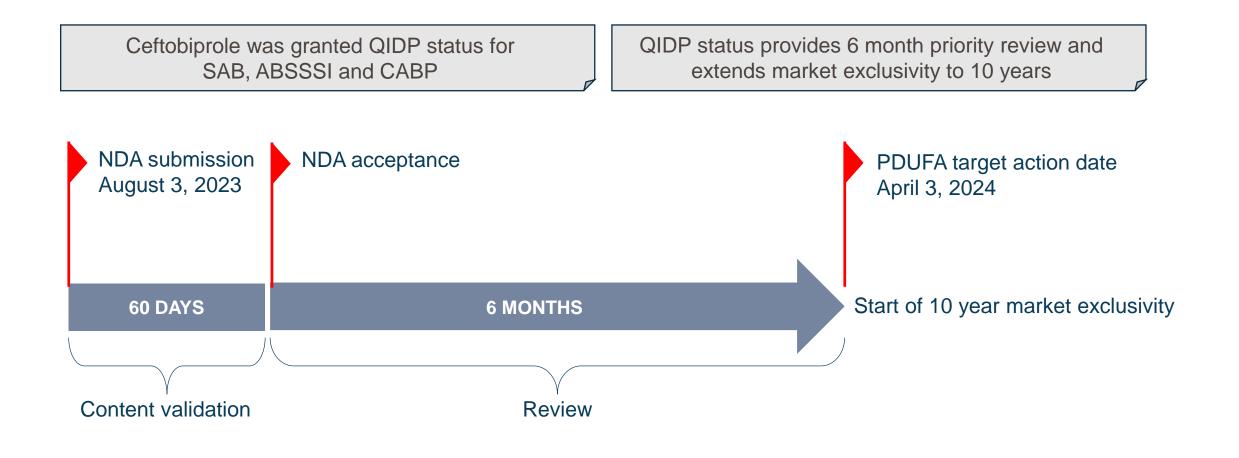
- PDUFA target action date April 3, 2024
- Phase 3 program largely funded by BARDA (~USD 112 million, or approximately 75 percent of the costs related to the SAB and ABSSSI phase 3 studies, regulatory activities and non-clinical work)
- Qualified Infectious Disease Product (QIDP) designation extends US market exclusivity to 10 years from approval
- Commercialization planned through partnership
 - Partnership expected prior to regulatory decision



¹ Holland TL et al. N Engl J Med 2023;389:1390-1401.
² Overcash JS et al. Clin Infect Dis. 2021;73:e1507-e1517.
³ Nicholson SC et al. International Journal of Antimicrobial Agents 2012 (39), 240-246.

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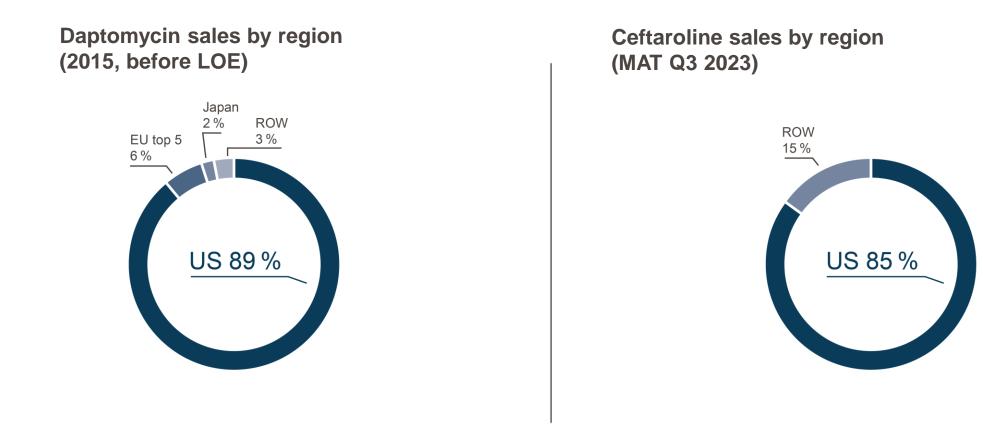
Ceftobiprole — FDA's NDA review process for a Qualified Infectious Disease Product



Ceftobiprole — **Place** in therapy

- Excellent treatment option in difficult-to-treat patients presenting to the hospital with severe infections, especially when the clinician suspects involvement of Gram-positive pathogens including *Staphylococcus aureus*
- Single agent first-line bactericidal broad-spectrum therapy with proven efficacy in SAB, ABSSSI and CABP, enabling to treat these vulnerable patients effectively early in their disease to achieve recovery
- Ceftobiprole is differentiated versus competitors in various clinically important aspects, including:
 - The strong, bactericidal activity against MSSA and MRSA
 - A robust Gram-negative coverage
 - Efficacy demonstrated in pulmonary infections in phase 3 studies
 - The safety profile reflecting the cephalosporin class
 - The low propensity for resistance development

The hospital anti-MRSA antibiotic market — A USD 2.4 bn market* with the US being the most important region

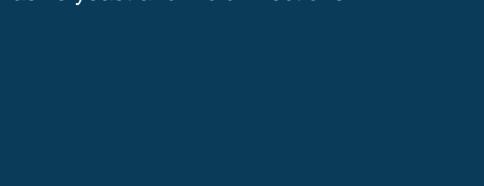


* Vancomycin, linezolid, teicoplanin, daptomycin, tigecycline, telavancin, ceftaroline, dalbavancin, ceftobiprole, oritavancin and tedizolid (daptomycin and tigecycline are partial sales in the US in IQVIA data)

MRSA: Methicillin-resistant Staphylococcus aureus; LOE: Loss of exclusivity; ROW: Rest Of World; MAT: Moving annual total; Source: IQVIA Analytics Link, September 2023

Antifungal Fosmanogepix

Invasive yeast and mold infections



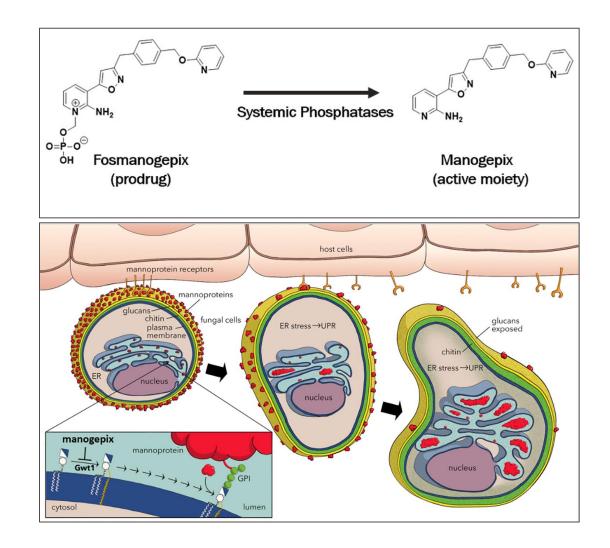


Fosmanogepix – A highly attractive antifungal asset

- First-in-class, intravenous and oral antifungal with a novel mechanism of action
- Broad spectrum antifungal activity against yeasts, molds and dimorphic fungi, including Candida auris, azole-resistant Aspergillus spp. and Fusarium spp.
- Three successfully completed phase 2 studies for the treatment of
 - Candidemia, including Candida auris
 - Mold infections
- Phase-3-ready for yeast and mold infections with first phase 3 study in candidemia / invasive candidiasis expected to start mid-2024
- Potential to become our next lead commercial product and mid-term value driver
- Asset acquired from Pfizer, which maintains the right of first negotiation for commercialization

Overview

- Fosmanogepix is the prodrug of manogepix
- Novel mechanism of action
- Inhibition of the protein Gwt1 impedes the production of cell wall mannoproteins, causing cell wall fragility, fungal cell death and decreased potential for biofilm formation
- Potent broad-spectrum activity against resistant yeasts, molds and dimorphic fungi, including azoleresistant phenotypes
- IV and oral availability enables treatment in both inpatient and outpatient settings
- US FDA fast track status, QIDP and orphan drug designations



Shaw KJ, Ibrahim AS. J Fungi (Basel). 2020; 6:239

Friedman DZP, Schwartz IS. Infect Dis Clin North Am. 2023;37:593-616.

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Addressing high unmet medical needs

	Fosmanogepix	lbrexafungerp	Olorofim	Rezafungin
	IV and Oral	Oral	Oral	IV
Fungal pathogens				
Candida spp.*				
Aspergillus spp.†				
Mucorales [‡]				
Fusarium spp.				
Scedosporium spp.				
Lomentospora spp.				
Cryptococcus spp.				
Endemic molds [§]				
Other rare molds [®]				
Other rare yeasts ¹				

* including C. albicans, C. auris, C. dubliniensis, C. glabrata, C. krusei, C. lusitaniae, C.parapsilosis, C. tropicalis. Fosmanogepix not active against C. krusei.

† including A. calidoustus, A. fumigatus (including azole-resistant), A. flavus, A. lentulus, A. nidulans, A. niger, A. terreus, A. tubingensis.

[‡] including Cunninghamella spp., Lichtheimia spp., Mucor spp., Rhizopus spp.

[§] including Blastomyces dermatitidis, Coccidioides immitis, Histoplasma capsulatum.

^I including Alternaria alternata, Cladosporium spp. Paecilomyces variotii, Purpureocillium lilacinum, Scopulariosis spp., Rasamsonia spp.

[¶] including *Trichosporon asahii, Exophiala dermatitidis, Malassezia furfur.*

Adapted from Hoenigl M, Sprute R, Egger M, et al. Drugs. 2021;81:1703-1729.

Planned global phase 3 program

Candidemia / Invasive candidiasis

- Randomized, double-blind, non-inferiority study
 - Approximately 450 patients
- Fosmanogepix IV (oral step-down fosmanogepix)
 vs caspofungin IV (oral step-down to fluconazole)
- Primary endpoints
 - FDA: Survival at 30 days
 - EMA: Overall response at end-of-study treatment
- Protocol and initial Health Authority approvals obtained
- Expected study start mid-2024

Invasive mold infections (IMI)

- Randomized, open-label study including non-controlled salvage treatment arm
 - Approximately 200 patients
- Cohorts of invasive mold disease including IMI caused by:
 - Aspergillus spp.
 - Fusarium spp.
 - Scedosporium spp.
 - Lomentospora prolificans
 - Mucorales fungi, or
 - Other multi-drug resistant molds
- Fosmanogepix IV or oral vs best available therapy
- Endpoints include survival and overall response
- Expected study start end-2024

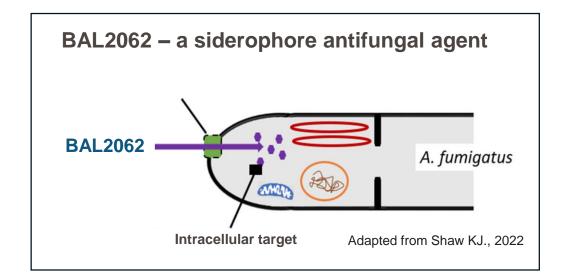
Antifungal BAL2062

Invasive Aspergillus infections



BAL2062 – A first-in-class rapidly fungicidal antifungal

- First-in class antifungal with novel mechanism of action for intravenous administration
- Clinical safety and tolerability demonstrated in phase 1 study¹
- Potential for enhanced clinical efficacy addressing unmet medical needs in invasive aspergillosis and other invasive fungal infections²
- QIDP, Orphan Drug and Fast Track designations granted from the FDA for invasive aspergillosis
- Phase 2 start planned in 2025 based on results from additional preclinical profiling studies
- Positioning as first-line treatment for invasive aspergillosis (IA)

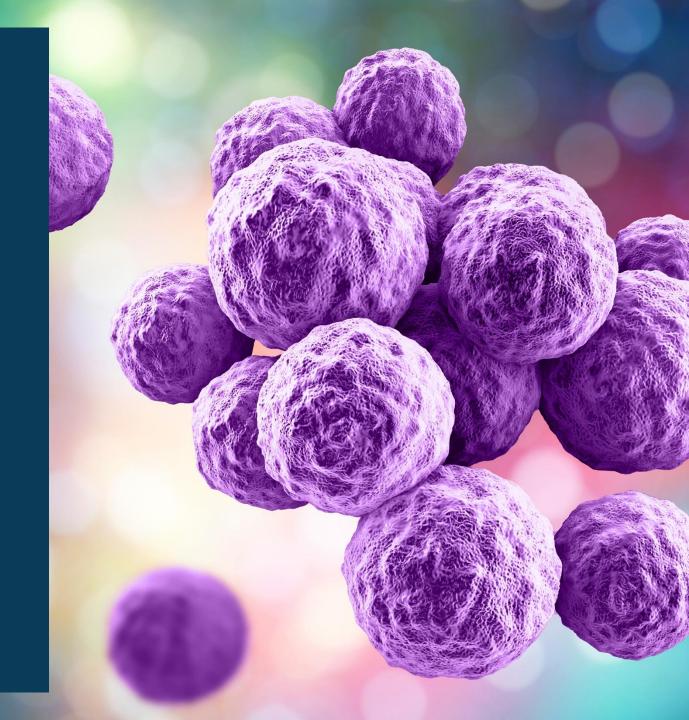


¹ Mammen MP, Armas D, Hughes FH, et al. Antimicrob Agents Chemother. 2019;63:e00969-19. ² Shaw KJ. J Fungi (Basel). 2022; 8:909.

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Antibacterial Tonabacase

Severe staphylococcal infections



Tonabacase – A potent bactericidal endolysin for severe staphylococcal infections

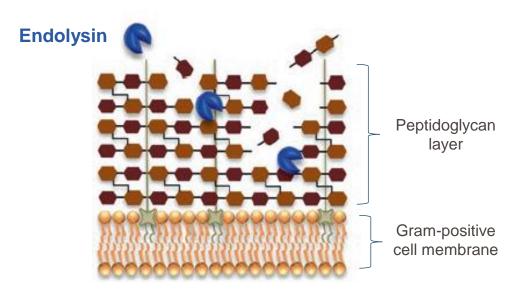
Profile

- Potent in-vitro activity: rapid bactericidal activity, biofilm degradation, superior biofilm activity to exebacase¹
- Tonabacase can be dosed multiple times which may significantly increase exposure

Development plan

- Conducting preclinical profiling, including PK/PD, which is anticipated to complete by end-2024
- If the preclinical profiling is positive, Basilea can exercise its option to in-license tonabacase
- After in-licensing, phase 2 could start in H2 2025
 - Clinical program: Focus on the high unmet medical need in staphylococcal infections

Schematic representation of endolysin effects on Gram-positive bacteria



Reference: Dams D and Briers Y, 2019²

² Dams D, Briers Y Adv Exp Med Biol. 2019:1148:233-253

¹ Data on file



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David Veitch

Chief Executive Officer

Outlook



Key milestones

	Product	H1 2024	H2 2024	2025
	Isavuconazole (Cresemba)	Decision on EU pediatric extension		
Antifungals	Fosmanogepix	Initiate phase 3 study in candidemia / invasive candidiasis (mid-2024)	Initiate phase 3 study in mold infections (around year-end)	
	BAL2062			Initiate phase 2 program
	Ceftobiprole (Zevtera)	Regulatory decision in the US (PDUFA target action date April 3)		
Antibacterials		Executing US partnership (prior to PDUFA target action date)		
	Tonabacase		Decide on definitive licensing option	Initiate phase 2 program

Increasing Cresemba & Zevtera revenue

In-licensing and acquisition of anti-infectives

Advancement of preclinical anti-infective assets





Glossary

_	ABSSSI:	Acute bacterial skin and skin structure infections
_	BARDA:	Biomedical Advanced Research and Development Authority
_	CABP:	Community-acquired bacterial pneumonia
—	EMA:	European Medicines Agency
—	FDA:	US Food and Drug Administration
—	HABP:	Hospital-acquired bacterial pneumonia
—	IMI:	Invasive mold infections
—	MSSA:	Methicillin-susceptible Staphylococcus aureus
—	MRSA:	Methicillin-resistant Staphylococcus aureus
—	NDA:	New Drug Application
—	PK:	Pharmacokinetics
—	PD:	Pharmacodynamics
—	QIDP:	Qualified Infectious Disease Product
_	SAB:	Staphylococcus aureus bacteremia
_	US GAAP:	United States Generally Accepted Accounting Principles



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