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Q3 2022 Results

Play to Win

October 28, 2022

Forward-looking statements

This document contains forward-looking statements as defined in the Private Securities Litigation Reform Act of 1995, as amended. Forward-looking statements are statements that are not historical facts. These statements include projections and estimates and their underlying assumptions, statements regarding plans, objectives, intentions and expectations with respect to future financial results, events, operations, services, product development and potential, and statements regarding future performance. Forward-looking statements are generally identified by the words "expects", "anticipates", "believes", "intends", "estimates", "plans" and similar expressions. Although Sanofi's management believes that the expectations reflected in such forward-looking statements are reasonable, investors are cautioned that forward-looking information and statements are subject to various risks and uncertainties, many of which are difficult to predict and generally beyond the control of Sanofi, that could cause actual results and developments to differ materially from those expressed in, or implied or projected by, the forward-looking information and statements. These risks and uncertainties include among other things, the uncertainties inherent in research and development, future clinical data and analysis, including post marketing, decisions by regulatory authorities, such as the FDA or the EMA, regarding whether and when to approve any drug, device or biological application that may be filed for any such product candidates as well as their decisions regarding labelling and other matters that could affect the availability or commercial potential of such product candidates, the fact that product candidates if approved may not be commercially successful, the future approval and commercial success of therapeutic alternatives, Sanofi's ability to benefit from external growth opportunities, to complete related transactions and/or obtain regulatory clearances, risks associated with intellectual property and any related pending or future litigation and the ultimate outcome of such litigation, trends in exchange rates and prevailing interest rates, volatile economic and market conditions, cost containment initiatives and subsequent changes thereto, and the impact that COVID-19 will have on us, our customers, suppliers, vendors, and other business partners, and the financial condition of any one of them, as well as on our employees and on the global economy as a whole. The risks and uncertainties also include the uncertainties discussed or identified in the public filings with the SEC and the AMF made by Sanofi, including those listed under "Risk Factors" and "Cautionary Statement Regarding Forward-Looking Statements" in Sanofi's annual report on Form 20-F for the year ended December 31, 2021. Other than as required by applicable law, Sanofi does not undertake any obligation to update or revise any forward-looking information or statements.

Agenda

01 **Performance through transformation**
Paul Hudson

02 **Business update**
Bill Sibold, Thomas Triomphe, Olivier Charmeil & Julie Van Ongevalle

03 **Financial performance and outlook**
Jean-Baptiste de Chatillon

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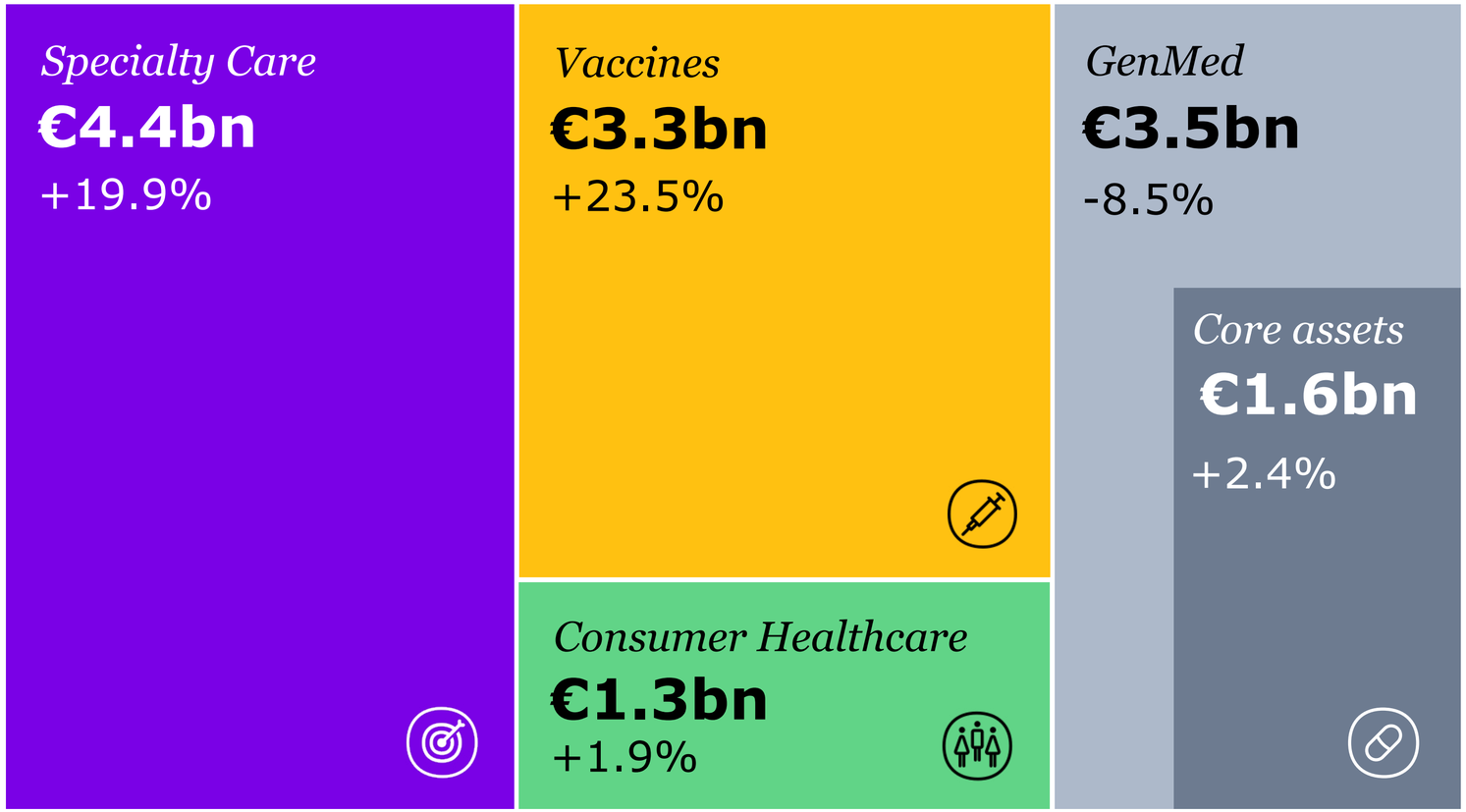
Performance through transformation

Specialty Care and Vaccines drive 9.0% sales growth in Q3



Specialty Care

Dupixent® Q3 growth driven by new launches

Vaccines

Excellent execution in flu

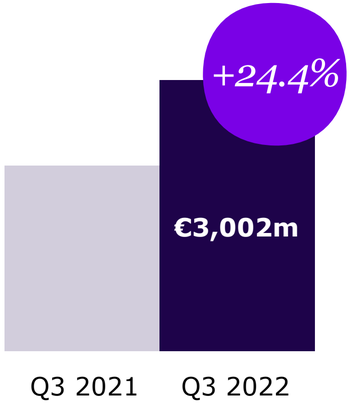
GenMed and CHC

Core brands continue to perform

All growth at CER unless footnoted.

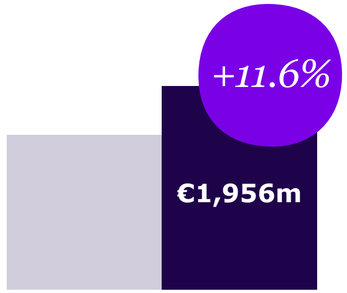
Higher sales in the *largest healthcare market*

Specialty Care



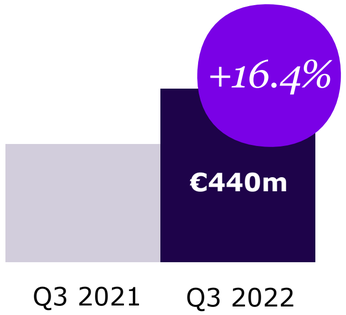
Dupixent® launches in new indications, Nexviazyme® launch, Sarclisa® growth

Vaccines



Fluzone® HD and MenQuadfi® growth/phasing, Travel vaccine recovery

GenMed Core assets



Rezurock® launch and overall transplant franchise growth

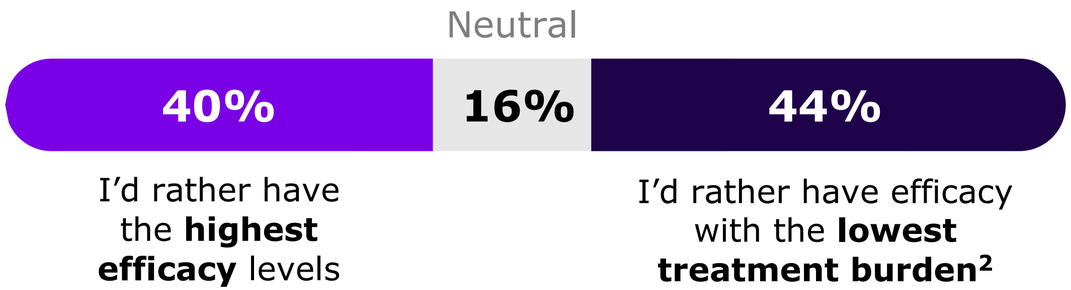
Inflation Reduction Act (IRA)	*Expected Sanofi business impact*
Inflation penalties	Industry leadership in responsible pricing since 2017. No impact
Direct Medicare negotiation	Provision not affecting growth drivers in the near to mid-term. Future system and scientific impact highly uncertain; likely impact on R&D investments and decisions
Medicare Part D redesign	Improved adherence to therapy expected but critical for all stakeholders to pay their share

All growth at CER unless footnoted.

On track for *key launches* in 2023

ALTUVIIIO™
Antihemophilic Factor (Recombinant), Fc-Von Willebrand Factor-XTEN Fusion Protein

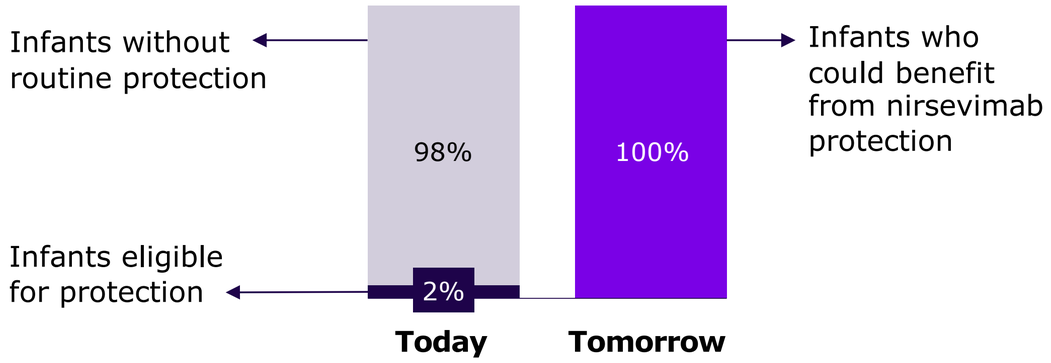
- Efanesoctcog alfa, a once-weekly prophylaxis, provided *superior* bleed protection with *clinically meaningful improvements* in patient outcomes
- Poised to enter *€5bn worldwide market* that today is highly fragmented and relatively undifferentiated
- PDUFA: February 28, 2023
- Treatment attitudes[1]:



Beyfortus (nirsevimab)

- CHMP *positive opinion* of Beyfortus®C (nirsevimab) for prevention of RSV disease in infants
- All infant protection accessible for the first time in 2023
- Total market estimated at €2.5bn[4] in 2030

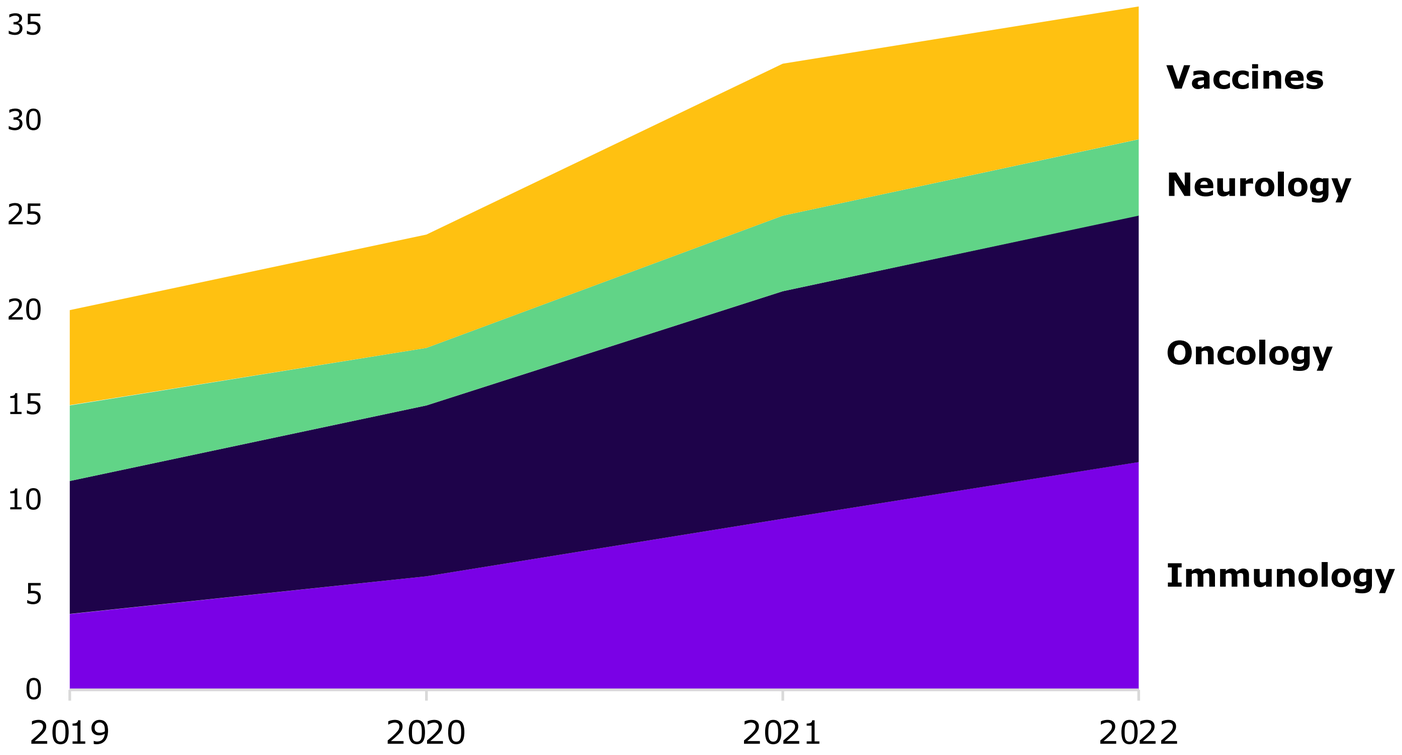
Total infant population



Source: VOP Hem A Perceptions Micro-Survey. For collaborations see slide 56.
1. Among Total Respondents, % Rating on 7-Point Scale, n=85. 2. Efficacy that lasts 1 to 2 months. 3. Sanofi estimate. 4. Sanofi internal estimate for 2030, based on affordability, coverage rate and population in G8 (U.S., UK, Germany, France, Italy, Spain, China and Japan)

Progress in R&D transformation with a *focus on key areas*

NME in Phase 1-3 by Q3



External innovation

scribe THERAPEUTICS

Oncology research collaboration to enable genetic modification of novel natural killer (NK) cell therapies

Innovent

Collaboration to accelerate the development and access of *oncology* treatment for patients in China

proventionbio
intercepting and preventing disease

U.S. co-promotion agreement for *teplizumab* (Type 1 diabetes)

Upcoming newsflow over the next 18 months

9 Phase 3/pivotal readouts

Dupixent®[A]
COPD

Dupixent®[A]
Chronic Inducible Cold Urticaria

Beyfortus®[C]
RSV infant (HARMONIE)

tolebrutinib
Relapsing Multiple Sclerosis

fitusiran
Hemophilia A and B

Sarclisa®
1L Newly Diag. MM Ti (IMROZ) (IA)

tusamitamab ravtansine
2/3L NSCLC – (IA)

rilzabrutinib
Immune Thrombocytopenia

MenQuadfi®
Meningitis 6w+

27 Phase 1-2 readouts

amlitelimab
Atopic Dermatitis

rilzabrutinib
Chronic Spontaneous Urticaria

rilzabrutinib
Atopic Dermatitis

rilzabrutinib
Warm Autoimmune Hemolytic Anemia

eclitasertib
Cutaneous Lupus Erythematosus

frexalimab
Sjogren's Syndrome

frexalimab
Multiple Sclerosis

atuzabrutinib
Atopic Dermatitis

tusamitamab ravtansine
NSCLC

tusamitamab ravtansine
Gastric cancer

tusamitamab ravtansine
Pancreatic cancer

SAR441566
Inflammatory Indications

SAR444656
Atopic Dermatitis

SAR444336
Inflammatory Indications

SAR442970
Inflammatory Indications

SAR443765
Inflammatory Indications

SAR441000
Solid tumors

SAR442720
2L NSCLC

SAR442257
MM / N-H Lymphoma

SAR443579
Acute Myeloid Leukemia

SAR446309
Solid tumors

SAR445088
CIDP

SAR443809
Rare renal disease

SP0202
Pneumococcal Vaccine

SP0125
RSV toddler Vaccine

SP0230
Meningitis B Vaccine

SP0273
mRNA QIV

For additional information, see R&D appendices.

Sanofi championing efforts in *decarbonizing the patient journey* to be showcased at COP27

Aim to deliver *net zero patient care* through healthcare stakeholder engagement and new way to deliver healthcare services:

- Sanofi sponsored study on telemedicine GHG emissions in Egypt[1]
- Study on Dupixent® patient care pathway decarbonization
- Product environment life cycle analysis performed on different products such as Dupixent®, Fluzone HD®, Praluent®, Allegra®
- Sanofi is driving the engagement with stakeholders such as authorities, payers, service providers, HCP and patients

5%
healthcare systems CO_2 contributions vs global emissions

45%
is the part of patient care pathway in healthcare systems CO_2 emissions

1. In collaboration with Ain Shams University

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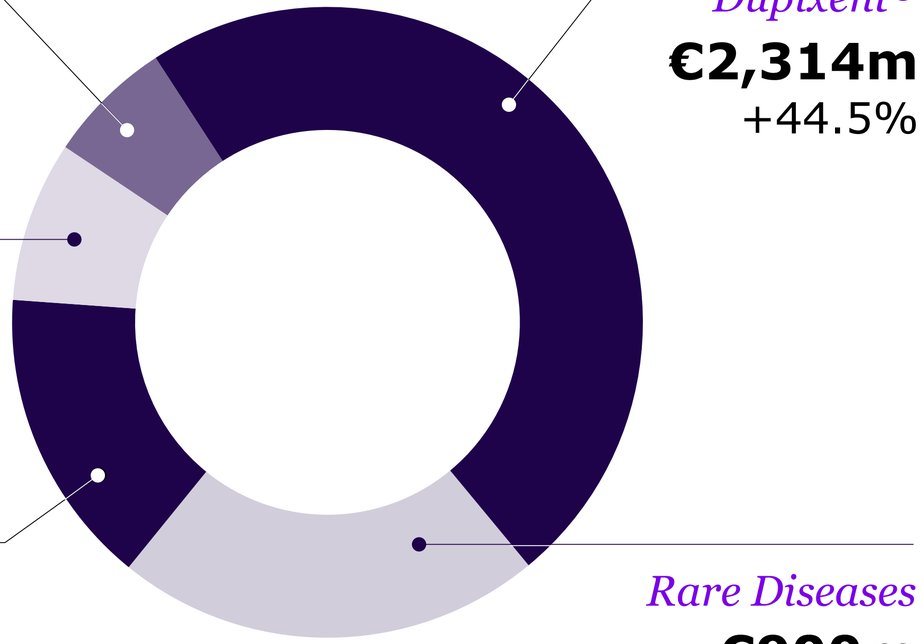
Business update

Q3 2022

Specialty Care *performance*

Q3 2022



All growth at CER unless footnoted.

€4.4bn sales +19.9%

Dupixent®

Strong performance driven by increase in demand and growth across indications compounded by U.S. launches in EoE and younger populations

Rare Diseases

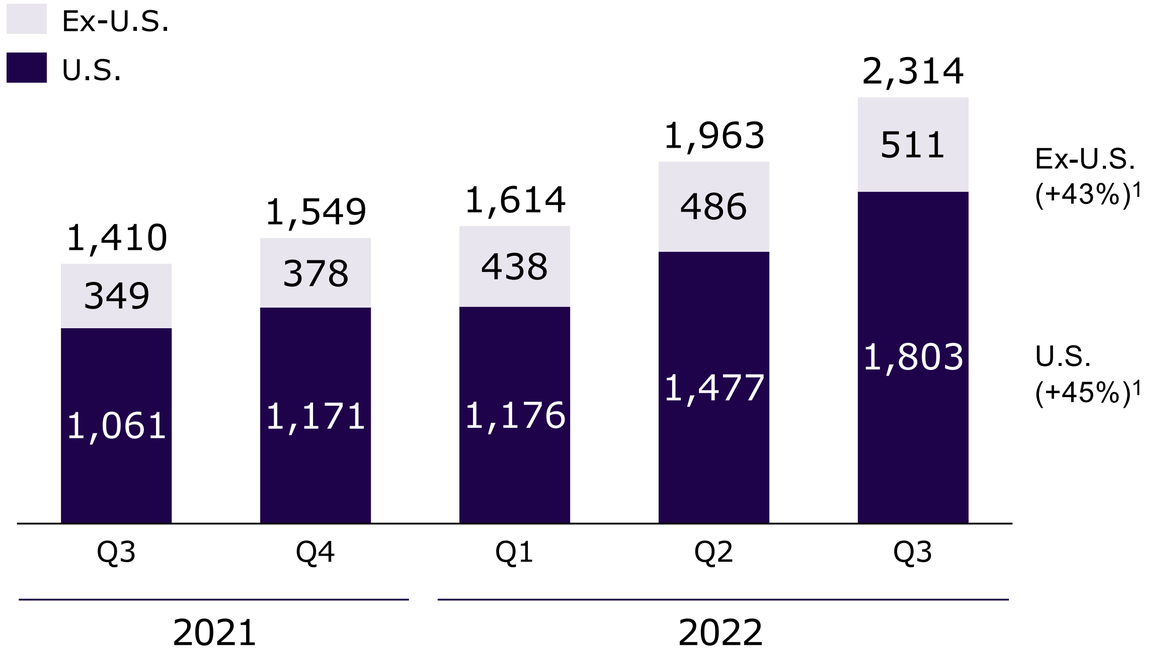
Launch momentum for Nexviazyme® and Xenpozyme®

Oncology

Strong growth of Sarclisa® continues; Libtayo® sales deconsolidated as a result of amended collaboration agreement

Dupixent® *growth trajectory* continues to impress in Q3

Global Dupixent® sales (€m)



Performance highlights in Q3

Worldwide growth of +45% vs Q3 2021

Ex-U.S. annualizing to ~€2B

Recent progress

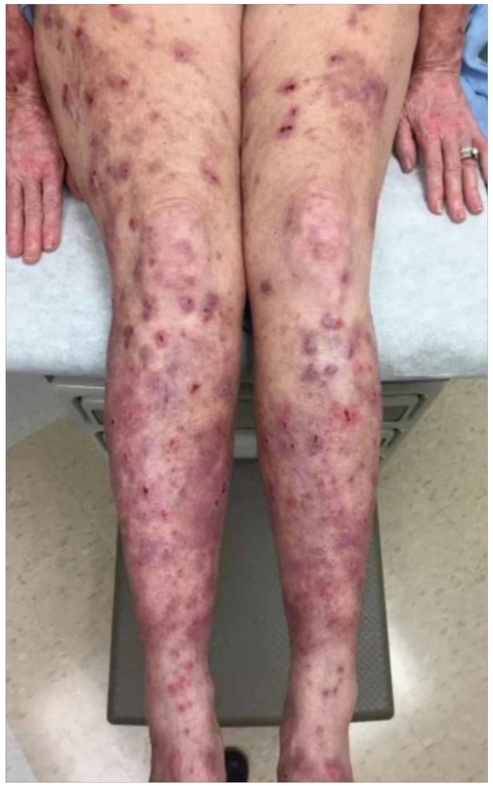
CELEBRATING 5 YEARS 500,000 PATIENTS

- U.S. accelerated growth driven by *AD 6 mo. +* and *EoE launches*
- New approvals *added 225k eligible patients* in the last two quarters

1. Represents growth Q3 2021 to Q3 2022. All growth at CER unless footnoted.

Leading in specialty dermatology

A pool of biologics eligible ~5m patients



Prurigo Nodularis

Chronic and debilitating skin disease with underlying *Type 2 inflammation*

Relentless *itch* and sensations of *burning* and *stinging skin* negatively impact quality of life

First and only treatment addressing *~75K* patients most in need

2nd dermatology indication and *5th* disease indication overall in the U.S.

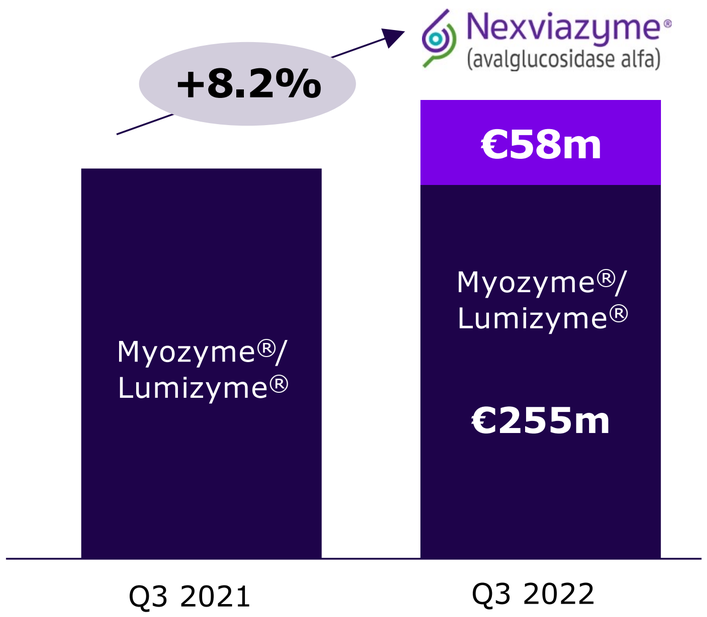
Expanding dermatology

	Eligible patients
✓ AD 6+ year	*~4.9 million globally*[1]
✓ AD 6 months - 5 years	*~75k*
✓ Prurigo Nodularis	*~75k*
CSU	*~308k*
CIndU	*~25k*
Bullous pemphigoid	*~27k*
CPUO	*~133k*

1. G8: US, Japan, Germany, France, Italy, Spain, United Kingdom and China.
Source: Sanofi Epidemiology Data primarily from Sanofi Real World Evidence platform. CSU, CIndU, Bullous pemphigoid and CPUO are currently under investigation.

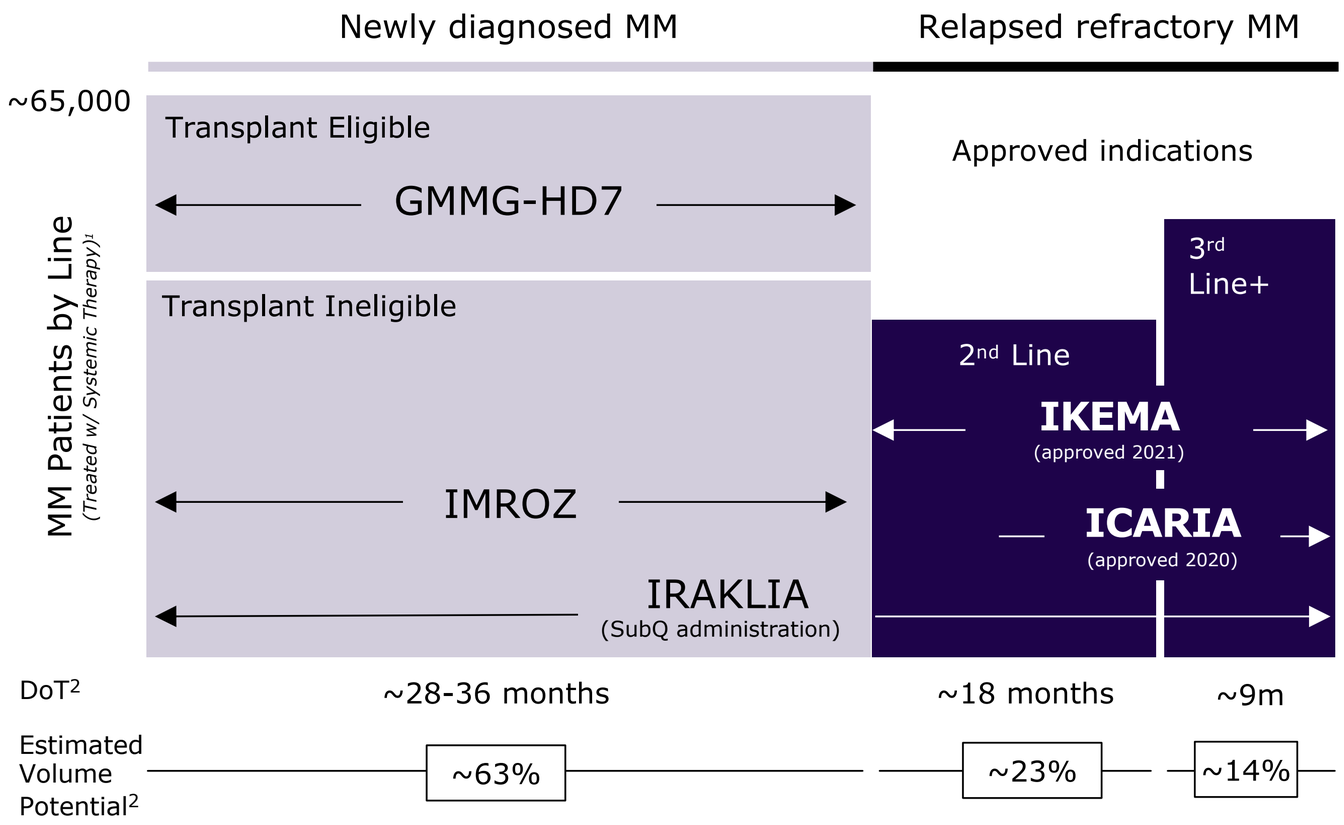
Nexviazyme®: Launch excellence in *Pompe*

Global Pompe disease sales (€m)



- Nexviazyme® launch progress across U.S., Japan and Australia ahead of expectations
  - First EU launches now underway
- Nexviazyme® U.S. conversion rate >60% in indicated LOPD population
  - Fast adoption among HCPs and patients
- Establishing a new SoC in Pompe disease by switching patients and accruing new patients

Sarclisa® *strong uptake* in approved indications



- *Sarclisa®*

YTD Sep sales €208m, +62%

Approved ICARIA/IKEMA indications cover majority of 2L+ MM patients

- *Over 10% market share in 2L* anti-CD38 market in countries with recent IKEMA launches[3]
- *Capturing >30% share* in the 3L+ anti-CD38 market in key countries[3]

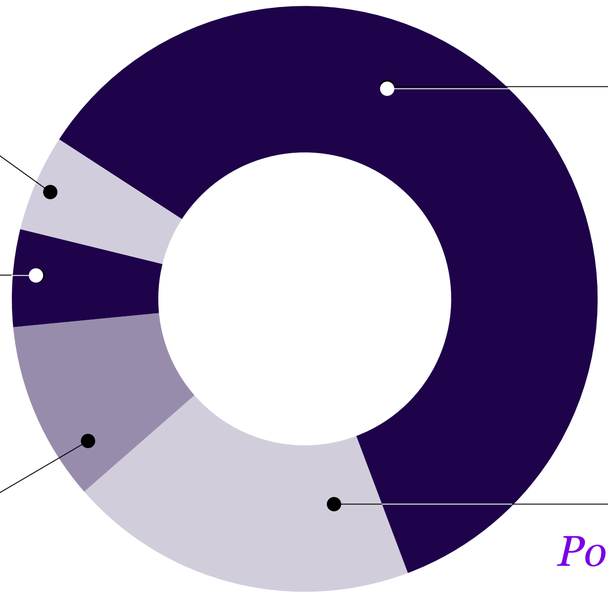
Unlocking full disease spectrum in MM

- IMROZ 1L data now expected H2 2023
- IRAKLIA SubQ Phase 3 initiated in Q3
- GMMG-HD7 trial in transplant eligible patients ongoing

1. Source: Sanofi internal analysis for 7 major markets in 2023 (US-Japan-France-Germany-UK-Italy-Spain). 2. Average duration of therapy. 3. IQVIA Multiple Myeloma Therapy Tracker – W30 (Jun/Jul '22).
Source: Sanofi internal analysis of real-word length of treatment by line.

Vaccines *performance*

Q3 2022



Travel & Endemic
€146m
+64.6%

Influenza
€1,994m
+32.4%

Boosters
€178m
+1.3%

Meningitis
€328m
+11.9%

Polio Pertussis Hib
€640m
+9.1%

€3.3bn sales +23.5%

Outstanding quarter with growth in all franchises and across all geographies

Record flu sales driven by manufacturing excellence and in-market execution

PPH and meningitis reflecting good performance and favorable public ordering pattern

Continued recovery of travel vaccines sales across all regions

All growth at CER unless footnoted.

Raising the bar in influenza standard of care

Continuing to support *Protection Beyond Flu*

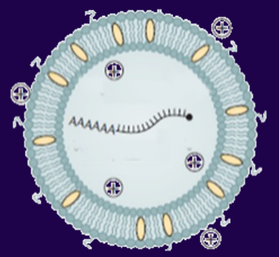
64.4%
DANFLU-1[1]

Associated reduction in flu and pneumonia hospitalizations vs standard dose

Fluzone® High-Dose Quadrivalent Influenza Vaccine

Efluelda INFLUENZA VACCINE

Continuing to *innovate*



Three Phase 1/2 studies with mRNA QIV, testing different LNPs, initiated by year-end

Focus on next generation flu vaccine with

- Optimal *safety/tolerability*
- *Thermostability* & pre-filled syringe
- *Protection Beyond Flu*, including hospitalization due to pneumonia and cardio-respiratory events

1. DANFLU-1: 12,000 people individually randomized in an innovative real-world trial.

Beyfortus® consistent strong efficacy and safety profile across all studies[c]

Positive opinion from CHMP, FDA submission acceptance expected in Q4

1 single dose
reduced relative risk of RSV LRTI, including hospitalization by

~80%[1]

New data

Pre-term **Term**

Age at birth w/GA

29 30 31 32 33 34 35 36 37 38 39 40 41 42

Pre-specified Pooled Ph 2b Commercial dose & MELODY Primary Cohort[1]
79.5% **77.3%**

MELODY All Subjects[2]
76.4% **76.8%**

~Across all studies, comparable safety and tolerability profile vs placebo

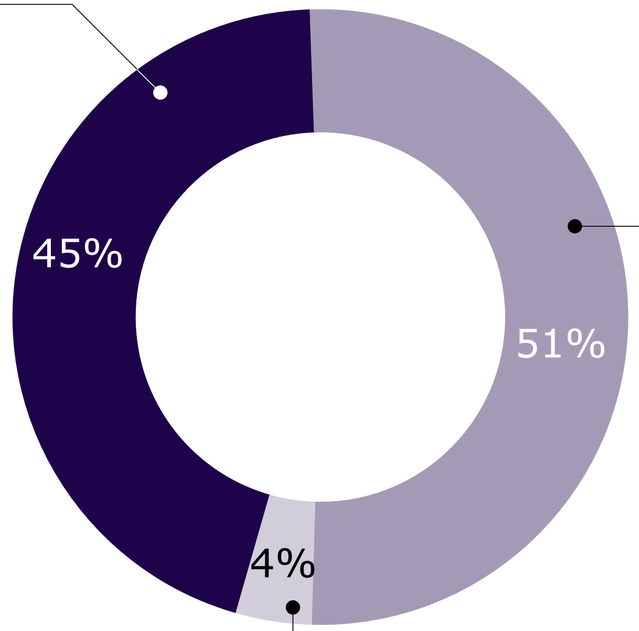
Primary endpoint RSV medically attended lower respiratory tract infection

Secondary endpoint RSV hospitalizations

For collaborations see slide 56.
1. Simões, E, et al. Pooled efficacy of nirsevimab against RSV lower respiratory tract infection in preterm and term infants. ESPID 2022 Congress; 2022 May 9-13. Hybrid Congress. 2. Data presented to ACIP Oct 20 2022.

GenMed *performance*

Q3 2022



Core assets

€1,586m
+2.4%

Non-core assets

€1,782m
-12.8%

Industrial sales

€127m
-43.3%

€3.5bn sales -8.5%

Core assets on track

Robust growth of Toujeo® and Praluent® in ex-U.S. geographies, mainly driven by performance in China

Lovenox® impacted by an accelerated decline of the market post COVID, as well as increased penetration of biosimilars

Non-core assets

U.S.: Basal insulin market softening and ongoing pricing pressure

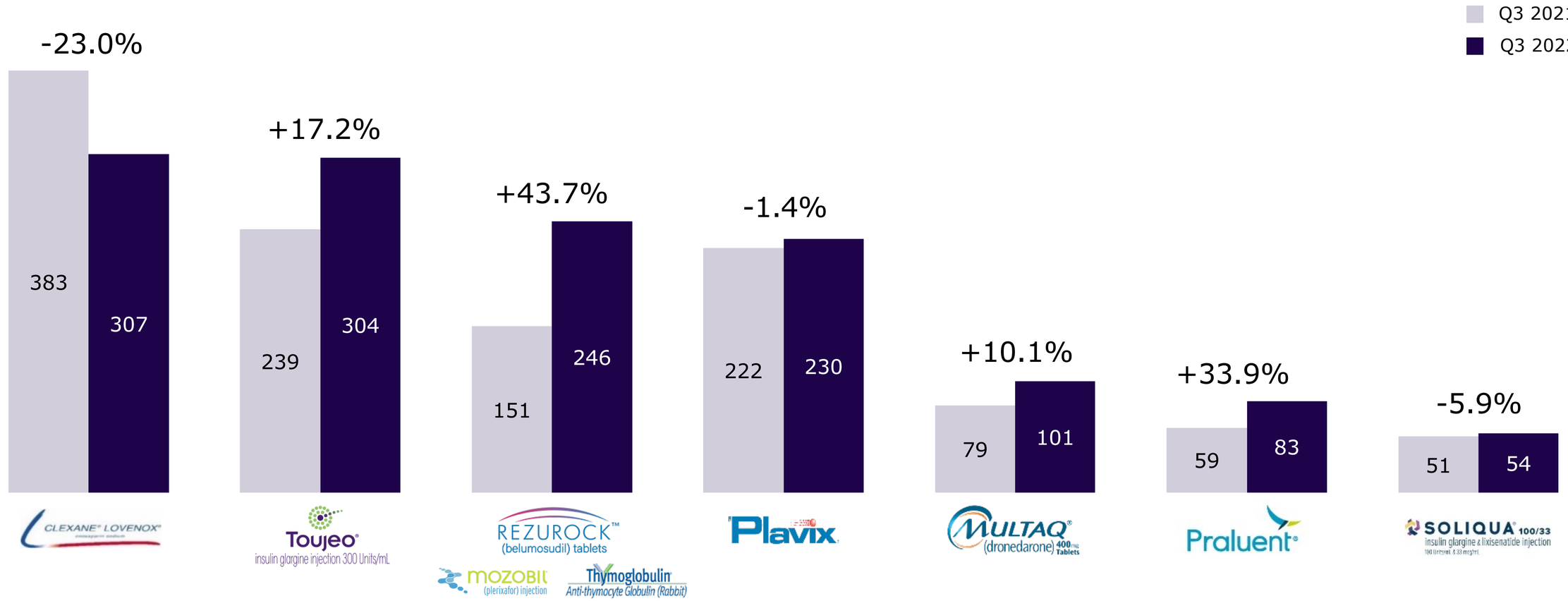
China: VBP impact on Lantus® and legacy oncology

Growth adjusted for EUROAPI spin-off and divestitures: -4.1%

All growth at CER unless footnoted.

GenMed: Q3 2022 *core assets* performance

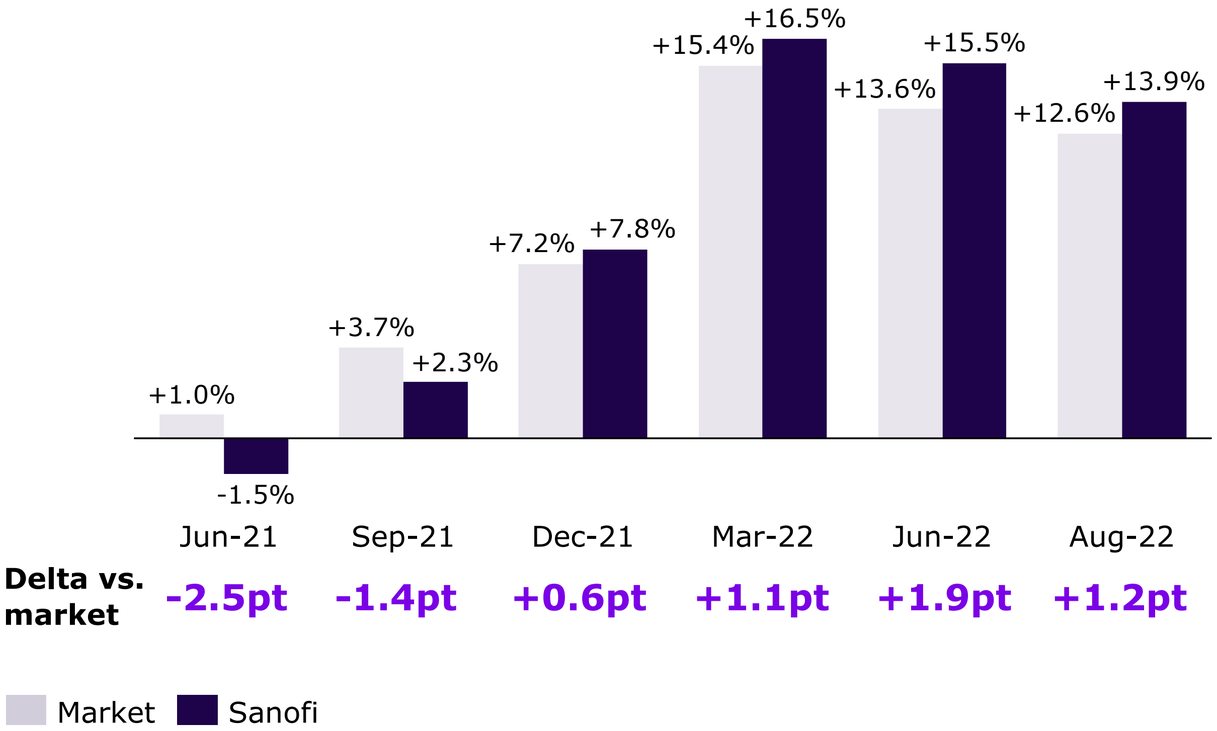
€ millions



All growth at CER unless footnoted.

CHC: *4 consecutive periods* above market growth

Growth (MAT, in %)



Exceptionally strong market growth since March 2021, has peaked

Current economic context resulting in price overtaking volume in contribution to growth

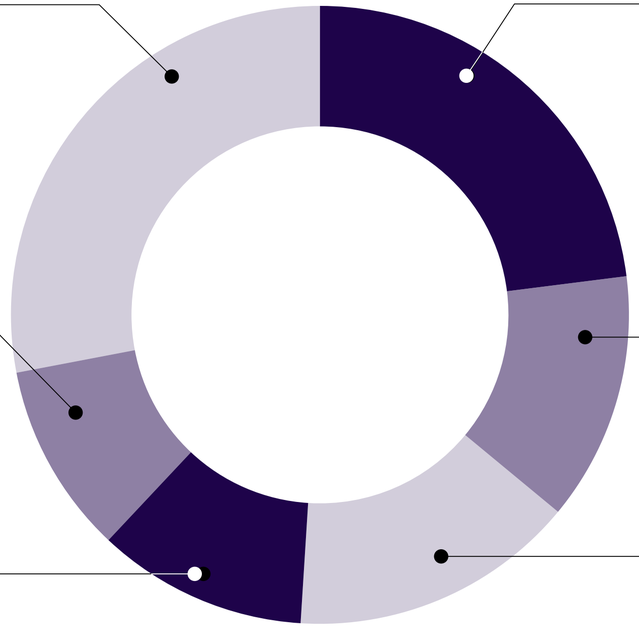
Sanofi MAT growth ahead of market for 4th consecutive quarter

Allergy	Consistently gaining market share for the past 2 years
Digestive Wellness	5 quarters of consecutive market share gain

Market: Total retail sales of the OTC market, excl. China, incl. ~50% of the eCom channel (data provided by various vendors, e.g. IQVIA, Nielsen, IRI, Intage, and compiled by Sanofi). For abbreviations see slide 57.

CHC *performance*

Q3 2022



Digestive Wellness
€351m
+14.5%

Pain Care
€292m
-3.8%

Cough & Cold
€127m
+30.9%

Others
€199m
-13.9%

Physical & Mental Wellness
€142m
-5.1%

Allergy
€160m
-0.7%

€1.3bn sales +1.9%

Q3 organic growth +3.5%

Solid performance despite overall Q3 high base effect and divestments

Cough & Cold continues strong growth, building on momentum from longer-lasting season

Digestive Wellness robust performance in all regions

All growth at CER. Organic growth: Excluding impacts of divestments.

Standout performance for Digestive Wellness

Enterogermina®

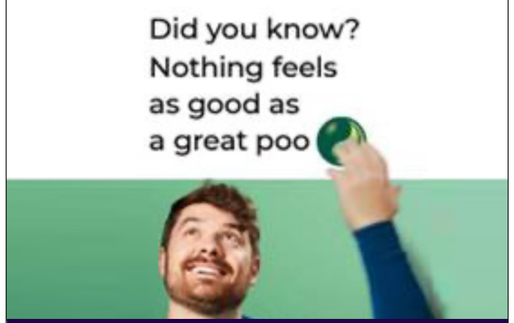
"Bellies ready"

#1*

has become #1 in probiotics

Dulcolax®

"Feel good. Inside & Out."



#1*

non-prescriptive laxative

Buscopan®

"Untie your belly. Untie your life"

#1*

non-prescription anti-spasmodic and Irritable Bowel Syndrome remedy

Essentiale®

"I liver Life"

#1*

non-prescription liver and bile remedies brand

Number 1 worldwide, source: Nicholas Hall MAT 4Q 2021.

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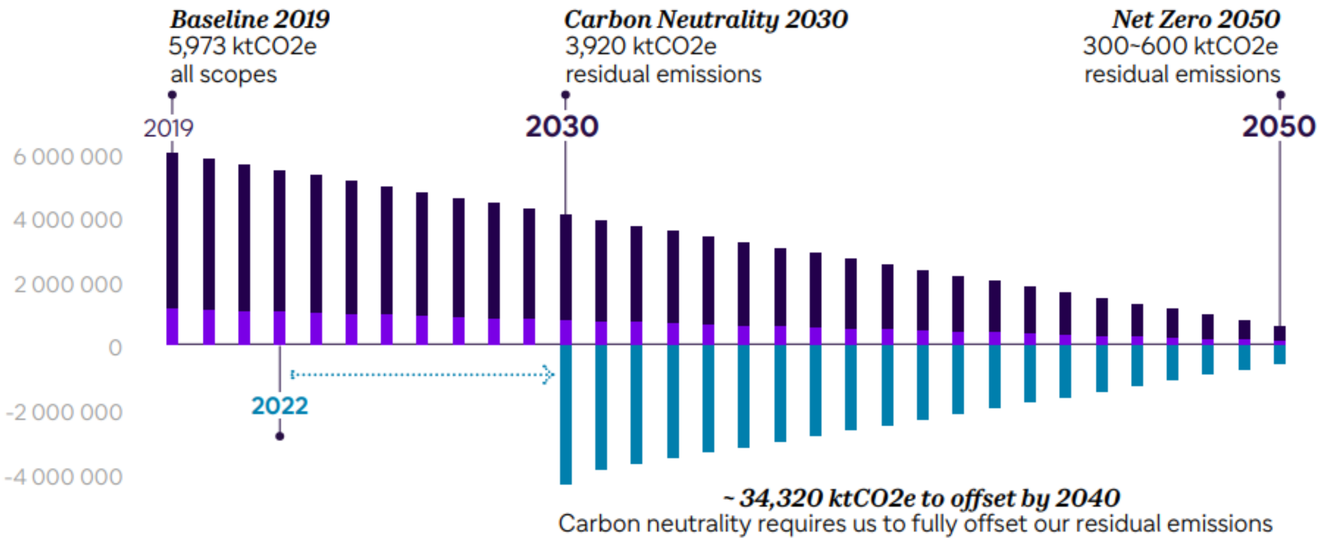
Financial performance

Q3 2022

Advancing toward *our net zero target*



Delivering positive impact on communities and the environment

Mangroves

19,500 tCO2e/year carbon removed over 20 years

- ✓ Improving biodiversity
- ✓ Additional income from mangrove timber

Optimized cookstoves

52,000 tCO2e/year emissions reduction over 15 years

- ✓ Reducing disease related to smoke inhalation
- ✓ Reducing time spent collecting wood

Q3 P&L

€m	*Q3 2022*	*Q3 2021*	*% Change (CER)*
Net Sales	**12,482**	**10,432**	**+9.0%**
Other revenues	656	397	+41.1%
Gross profit	9,307	7,591	+10.3%
Gross margin %	74.6%[1]	72.8%[1]	
R&D	(1,736)	(1,444)	+12.7%
SG&A	(2,644)	(2,266)	+6.8%
Operating Expenses	**(4,380)**	**(3,710)**	**+9.1%**
Other current operating income & expenses	(450)	(291)	+13.1%
Business Operating Income	**4,498**	**3,556**	**+13.0%**
Business operating margin	36.0%[1]	34.1%[1]	
Effective tax rate	19.0%	21.0%	
Total Business Net Income	**3,606**	**2,736**	**+17.7%**
Average number of shares	1,253.5	1,254.5	
Business EPS	**2.88**	**2.18**	**+17.9%**

All growth at CER unless footnoted. 1. At PUB.

Transformation driving *strong 9M financial performance indicators*

	9M 2022	*9M 2021*	*Change[1]*
Sales	**€32.3bn**	€27.8bn	**+8.6%**
Gross margin	**74.3%**	72.0%	**+1.6ppt**
R&D spend	**€4.9bn**	€4.1bn	**+13.1%**
BOI margin	**32.0%**	30.5%	**+1.1ppt**
Business EPS	**€6.55**	€5.18	**+17.0%**

1. All growth at CER.

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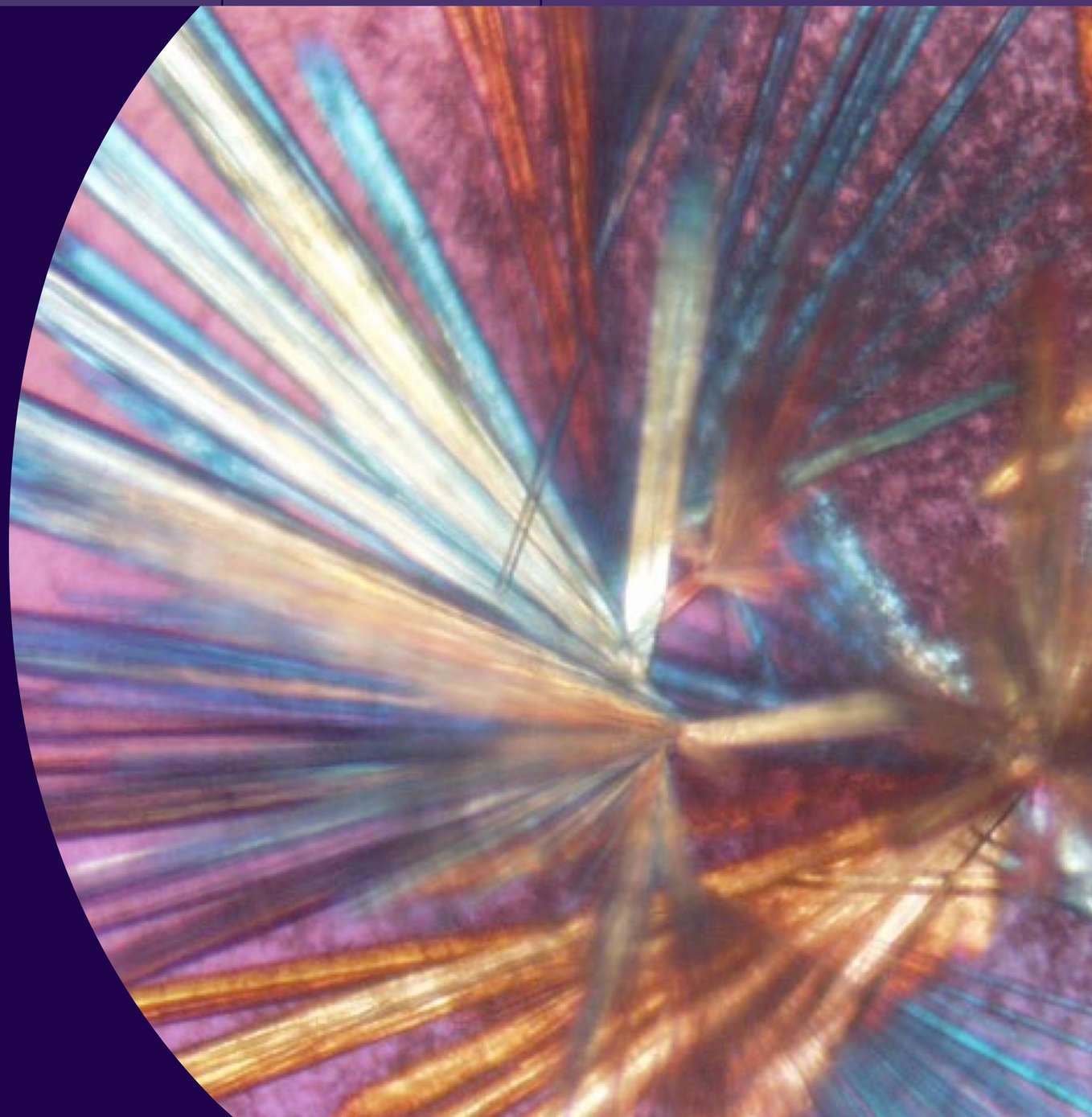
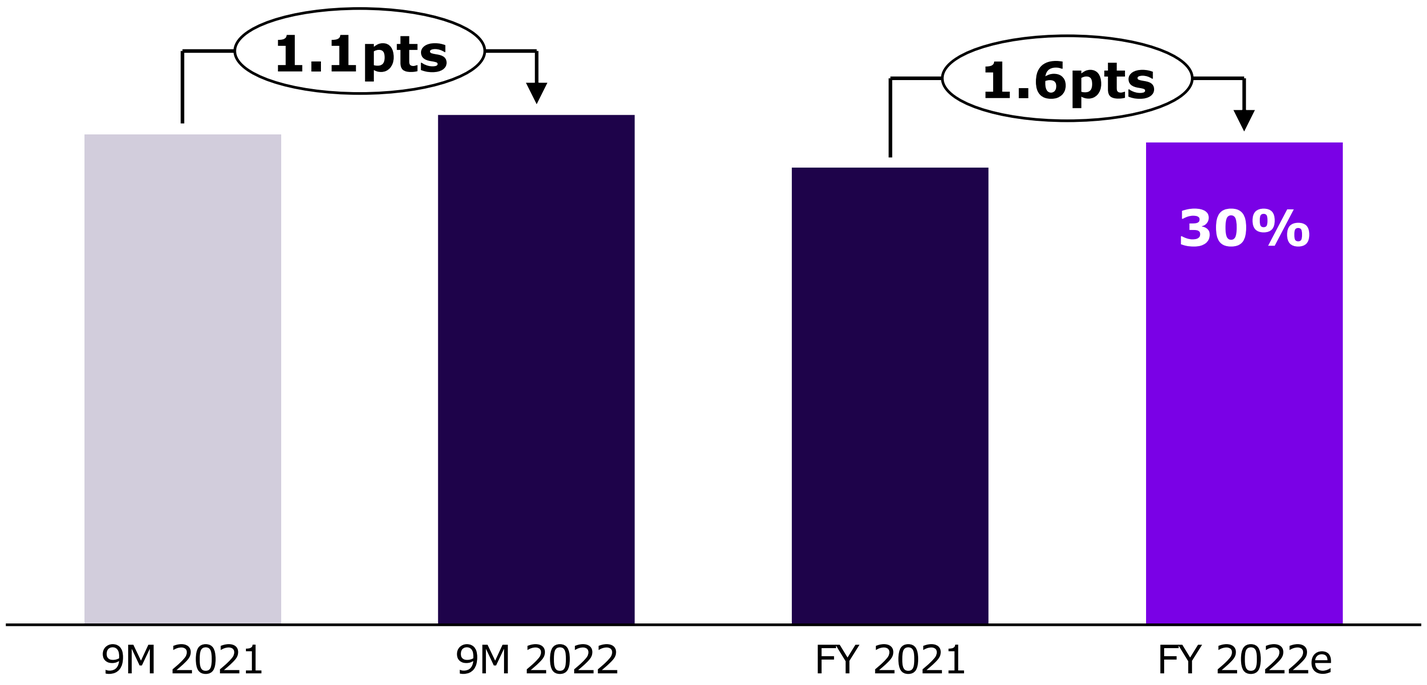
Outlook

H2 2022



Significant step up in FY 2022 *profitability* expected

BOI margin evolution at CER



Q4 profitability levers:

- Dupixent®
- Capital gains from divestitures
- Lower marketing & selling expenses[1]

- Flu phasing
- Macroeconomic headwinds

Barring unforeseen events. 1. as part of the 2019 €2.5bn savings plan.

Upgraded 2022 FY guidance

BOI margin

30%

EPS growth

around **16%** growth at CER

Approximately +9.5% to +10.5% currency impact[1]

Barring unforeseen events. 1. Based on October 2022 average rates.

Q&A session

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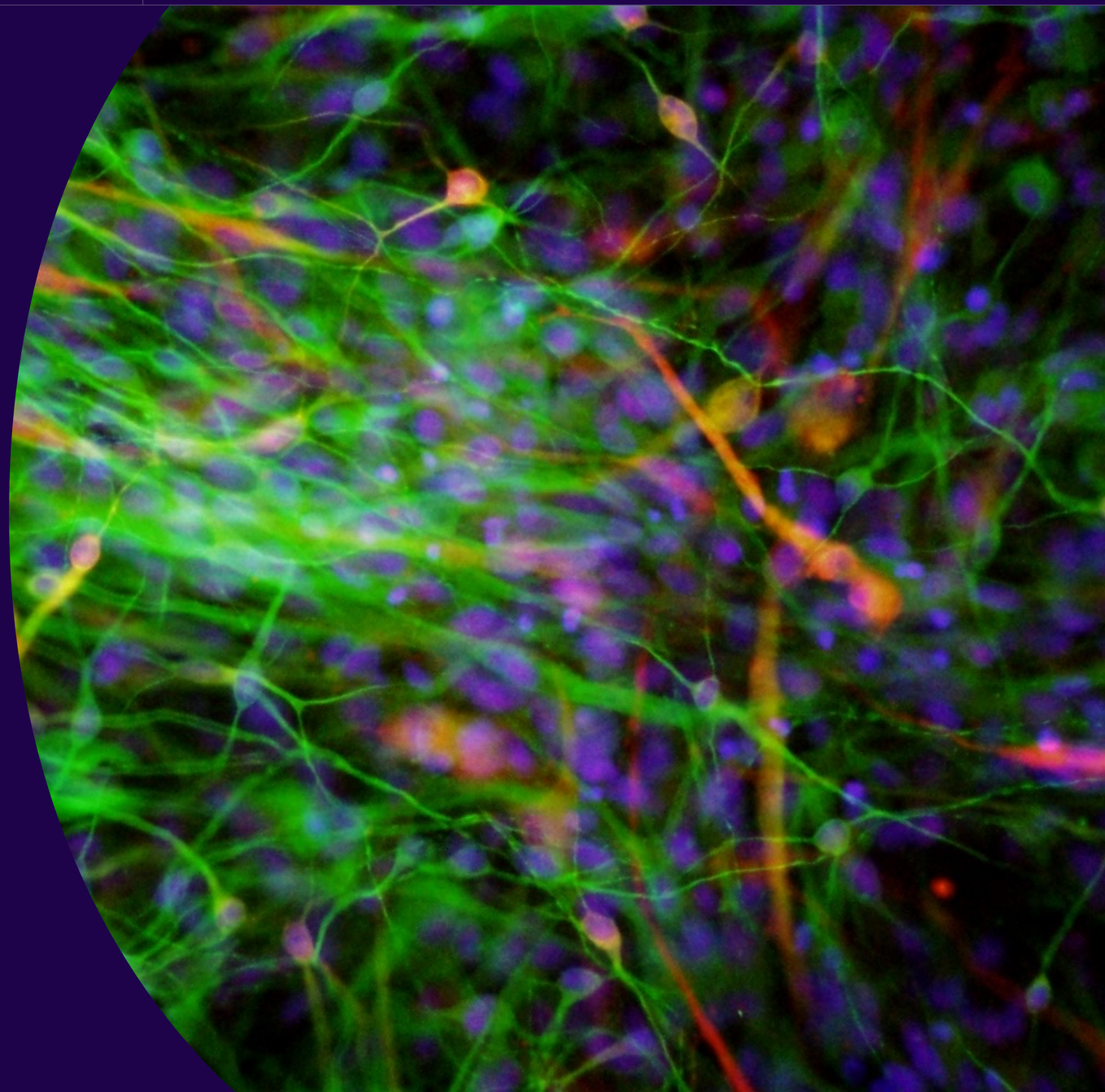
R&D appendices



Expected R&D *milestones* in 2022

		H1 2022	*H2 2022*	*Status as of Q3*
Dupixent®	EoE	U.S./EU regulatory submissions		Approved **U.S./**Submitted **EU**
	PN	U.S./EU regulatory submissions		Approved **U.S./**Submitted **EU**
	CSU	Pivotal trial readout (Study B)		Negative readout, program continues
	CInDU		Pivotal trial readout	Expected in H1 2023
Oncology	amcenestrant 2/3L mBC	Pivotal trial readout		Program discontinued
	SAR'245		Phase 3 decision	Dose optimization planned
	Sarclisa® (1L MM)		Pivotal trial readout (IMROZ)	Now expected in H2 2023
	Libtayo® (1L NSCLC CT combo)		U.S. regulatory decision	
Rare Blood Disorders	Altuviiio™ (HemA)	Pivotal trial readout	U.S. submission (mid-year)	Submitted **U.S.**, priority review
	Enjaymo™ (CAD)	U.S. regulatory decision		Approved **U.S.**
Rare Diseases	Xenpozyme™ (ASMD)	JP regulatory decision (SAKIGAKE)	U.S. regulatory decision	Approved **JP/EU/U.S.**
Vaccines	Beyfortus® (RSV)	EU submission	U.S. submission	Positive opinion **EU**
	RSV Toddler		Pivotal trial decision	
	Vidprevtyn® (COVID-19 recombinant)	U.S./EU regulatory submissions		Submitted **EU**

As of September 30, 2022, barring unforeseen events. For abbreviations see slide 57.

R&D Pipeline Phase III & Registration

Phase III

Name	Description	Indication
Dupixent®[A]	Anti-IL-4/IL-13 mAb	Bullous Pemphigoid
Dupixent®[A]	Anti-IL-4/IL-13 mAb	Chronic Spontaneous Urticaria
Dupixent®[A]	Anti-IL-4/IL-13 mAb	Chronic Obstructive Pulmonary Disease
Dupixent®[A]	Anti-IL-4/IL-13 mAb	Chronic Inducible Cold Urticaria
Dupixent®[A]	Anti-IL-4/IL-13 mAb	Chronic Rhinosinusitis without Nasal Polyps
Dupixent®[A]	Anti-IL-4/IL-13 mAb	Allergic Fungal Rhinosinusitis
Dupixent®[A]	Anti-IL-4/IL-13 mAb	Chronic Pruritus of Unknown Origin
itepekimab[A]	Anti-IL-33 mAb	Chronic Obstructive Pulmonary Disease
Sarclisa®	Anti-CD38 mAb + combinations	1L Newly Diag. MM Ti (IMROZ)
Sarclisa®	Anti-CD38 mAb + combinations	1L Newly Diag. MM Te (GMMG)
Sarclisa®	Anti-CD38 mAb + combinations	Smoldering MM (ITHACA)
Sarclisa®	Anti-CD38 mAb SubQ. + combinations	2/3L Relapsed, Refractory MM (IRAKLIA)
tusamitamab ravtansine	Anti-CEACAM5 ADC	2/3L NSCLC
tolebrutinib	BTK inhibitor	Relapsing Multiple Sclerosis
tolebrutinib	BTK inhibitor	Primary Progressive MS
tolebrutinib	BTK inhibitor	Secondary Progressive MS
tolebrutinib	BTK inhibitor	Myasthenia Gravis
Nexviazyme®	Enzyme Replacement Therapy (GAA)	Pompe Disease - Infantile Onset
venglustat	Oral GCS inhibitor	GM2 Gangliosidosis
venglustat	Oral GCS inhibitor	Gaucher Disease Type 3
venglustat	Oral GCS inhibitor	Fabry Disease
fitusiran	RNAi targeting anti-thrombin	Hemophilia A and B
fitusiran	RNAi targeting anti-thrombin	Hemophilia A and B pediatric
rilzabrutinib	BTK inhibitor	Immune Thrombocytopenia
MenQuadfi®	Meningococcal (A,C,Y,W) conjugate vaccine	Meningitis 6w+ (U.S. / EU)
VRVg	Purified vero rabies Vaccine	Rabies
Beyfortus®[2,C]	Anti-RSV mAb (HARMONIE)	Respiratory Syncytial Virus (RSV)

Registration

Name	Description	Indication
Libtayo®[A]	Anti-PD-1 mAb + chemotherapy	1L NSCLC
Altuviiio™[1,B]	rFVIIIFc – vWF – XTEN	Hemophilia A
Vidprevtyn®[D]	Recombinant baculovirus Vaccine	COVID-19
Beyfortus®[2,C]	Anti-RSV mAb	Respiratory Syncytial Virus (RSV)

- Immuno-inflammation
- Oncology
- Neurology
- Rare Diseases
- Rare Blood Disorders
- Vaccines

As of September 30, 2022. For collaborations see slide 56. For abbreviations see slide 57.
1. Also known as efanesoctocog alfa. 2. Also known as nirsevimab.

R&D Pipeline – Phase II

Phase II

	Name	Description	Indication
R	**Kevzara®**[A]	Anti-IL-6 mAb	Polyarticular Juvenile Idiopathic Arthritis
R	**Kevzara®**[A]	Anti-IL-6 mAb	Systemic Juvenile Arthritis
	amlitelimab[1]	Anti-OX40L mAb	Atopic Dermatitis
	amlitelimab[1]	Anti-OX40L mAb	Asthma
	rilzabrutinib	BTK inhibitor	IgG4-related disease
	rilzabrutinib	BTK inhibitor	Atopic Dermatitis
	rilzabrutinib	BTK inhibitor	Asthma
	rilzabrutinib	BTK inhibitor	Chronic Spontaneous Urticaria
	eclitasertib[E,2]	RIPK1 inhibitor	Cutaneous Lupus Erythematosus
	frexalimab[F,3]	Anti-CD40L mAb	Sjogren's Syndrome
	frexalimab[F,3]	Anti-CD40L mAb	Systemic Lupus Erythematosus
	atuzabrutinib[4]	BTK inhibitor (topical)	Atopic Dermatitis
	SAR445088[5]	Complement C1s inhibitor	Antibody-Mediated Rejection
	Sarclisa®	Anti-CD38 mAb	1/2L AML / ALL pediatrics
	Sarclisa®	Anti-CD38 mAb + combinations	Relapsed, Refractory Multiple Myeloma
	alomfilimab[6]	Anti-ICOS mAb	Solid tumors
	tusamitamab ravtansine	Anti-CEACAM5 ADC + ramucirumab	2/3L NSCLC
	tusamitamab ravtansine	Anti-CEACAM5 ADC	Exploratory Solid tumors
	tusamitamab ravtansine	Anti-CEACAM5 ADC + pembrolizumab	1L NSCLC
	tusamitamab ravtansine	Anti-CEACAM5 ADC + ramucirumab	Gastric cancer
	SAR442720[G]	SHP2 inhibitor + KRAS inhibitor	2L NSCLC

Name	Description	Indication
SAR445088[5]	Complement C1s inhibitor	CIDP
frexalimab[F,3]	Anti-CD40L mAb	Multiple Sclerosis
SAR443820[E,7]	RIPK1 inhibitor	Amyotrophic Lateral Sclerosis
Sarclisa®	Anti-CD38 mAb	Warm Autoimmune Hemolytic Anemia
rilzabrutinib	BTK inhibitor	Warm Autoimmune Hemolytic Anemia
SAR445088[5]	Complement C1s inhibitor	Cold Agglutinin Disease
Fluzone® HD[8]	Inactivated Influenza Vaccine (IIV)	Pediatric Influenza
SP0218	Vero cell Vaccine	Yellow fever
SP0202[H]	Next Generation Conjugate Vaccine	Pneumococcal
SP0125	Live Attenuated Virus Vaccine	Respiratory Syncytial Virus (RSV) toddler
SP0230	Multicomponent Vaccine	Meningitis B

Immuno-inflammation
Oncology
Neurology
Rare Diseases
Rare Blood Disorders
Vaccines
R Registrational Study (other than Phase 3)

As of September 30, 2022. For collaborations see slide 56. For abbreviations see slide 57.
1. Formerly known as SAR445229/KY1005. 2. Also known as SAR443122/DNL758. 3. Also known as SAR441344. 4. Also known as SAR444727. 5. Formerly known as BIVV020. 6. Formerly known as KY1044/SAR445256.
7. Also known as DNL788. Planned to enter phase 2 in MS. 8. Also known as SP0178.

R&D Pipeline – Phase I

Phase I

Name	Description	Indication
SAR441566	Oral TNF inhibitor	Inflammatory indications
SAR444656[I,1]	IRAK4 degrader	Atopic Dermatitis
SAR444336	Non-beta IL-2 Synthorin™	Inflammatory Indication
SAR442970	Anti-TNFa/OX40L Nanobody® VHH	Inflammatory Indication
SAR443765	Anti-IL-13/TSLP Nanobody® VHH	Inflammatory Indication
SAR441000[J]	Cytokine mRNA	Solid tumors
SAR442257	Anti-CD38/CD28/CD3 trispecific mAb	MM / N-H Lymphoma
SAR442720[G]	SHP2 inhibitor + combinations	Solid tumors
SAR444881[K]	Anti-ILT2 mAb	Solid tumors
SAR445419[2]	NK-cell-based immunotherapy	Acute Myeloid Leukemia
SAR443216	Anti-CD3/CD28/HER2 trispecific mAb	Gastric cancer
SAR445710[3]	Anti-PD-L1/IL-15 fusion protein	Solid tumors
SAR443579[L]	Anti-NKp46/CD123 bispecific mAb	Acute Myeloid Leukemia
SAR446309[4]	HER2 T-Cell engager	Solid tumors
SAR444200	Anti-GPC3/TCR Nanobody® VHH	Solid tumors
SAR444245[5]	Non-alpha IL-2 Synthorin™ (dose optimization)	Solid tumors
SAR442501	Anti-FGFR3 Ab	Achondroplasia
SAR443809	Anti-Factor Bb mAb	Rare renal diseases
SP0273	mRNA QIV	Influenza

- Immuno-inflammation
- Oncology
- Neurology
- Rare Diseases
- Rare Blood Disorders
- Vaccines

As of September 30, 2022. For collaborations see slide 56. For abbreviations see slide 57.
1. Also known as KT474. 2. Formerly known as KDS1001. 3. Formerly known as KD033. 4. Formerly know as AMX-818. 5. Formerly known as THOR707.

Expected submission timelines

2022

- **Dupixent®**[A] Chronic spontaneous urticaria

2023

- **Dupixent®**[A] Chronic Inducible Cold Urticaria
- **tusamitamab ravtansine** 2/3L NSCLC
- **Kevzara®**[A] Polyarticular juvenile idiopathic arthritis

2024

- **Dupixent®**[A] COPD
- **Nexviazyme®** Pompe Disease - Infantile Onset
- **Dupixent®**[A] Allergic Fungal Rhinosinusitis
- **venglustat** GM2 gangliosidosis
- **Sarclisa®** 1L Newly Diag. MM Ti (IMROZ)
- **rilzabrutinib** ITP
- **Sarclisa®** 1L Newly Diag. MM Te (GMMG)
- **fitusiran** Hemophilia A/B
- **tolebrutinib** RMS
- **MenQuadfi®** 6w+

2025 and beyond

- **Dupixent®**[A] CPUO
- **tolebrutinib** MG
- **Dupixent®**[A] Bullous pemphigoid
- **tolebrutinib** PPMS
- **Dupixent®**[A] Chronic Sinusitis without Nasal Polyps
- **tolebrutinib** SPMS
- **Kevzara®**[A] Systemic Juvenile Arthritis
- **venglustat** Gaucher Type 3
- **amlitelimab** Atopic Dermatitis
- **venglustat** Fabry Disease
- **itepekimab**[A] COPD
- **fitusiran** Hemophilia A/B ped
- **Sarclisa®** Smoldering MM
- **VRVg** Purified vero rabies vaccine
- **Sarclisa® SubQ** 3L RR MM (IRAKLIA)

- Immuno-inflammation
- Oncology
- Neurology
- Rare Diseases
- Rare Blood Disorders
- Vaccines

As of September 30, 2022. For collaborations see slide 56. For abbreviations see slide 57.
Excluding Phase 1 and 2 (without Proof of Commercial Concept); Projects within a specified year are not arranged by submission timing.

Reinforcing *Protection Beyond Flu* with data from innovative study design

DANFLU-1

Fluzone® High-Dose Quadrivalent Influenza Vaccine

Efluelda INFLUENZA VACCINE

Study design

- Individually-randomized pragmatic study of **Efluelda** vs SD in adults 65-79 years
- Conducted in Denmark in 2021/22 season, enrolling 12K+ subjects from Danish National Registry

Study objectives

- Assess feasibility of pragmatic individually-randomized study design
- Descriptively assess rVE for flu/pneumonia hospitalization and cardio-respiratory hospitalization, as well as all-cause hospitalization and mortality endpoints

Results

- Efluelda associated with **reduced rates of flu/pneumonia hospitalizations** compared to SD, with rVE=64.4% (95% CI 24.4,84.6)
- Also associated with reduced risk of death from all causes, with rVE=48.9% (95% CI 11.5,71.3)
- Demonstrated feasibility of this innovative study design, integrating individual randomization into RWE generation
- Builds the infrastructure for DANFLU-2, a large-scale study designed to assess rVE of QIV-HD vs SD against flu/ pneumonia and cardio-respiratory hospitalizations, plus additional clinical endpoints, in a powered, individually randomized pragmatic setting

VAP03

Flublok® Quadrivalent Influenza Vaccine

Study design

- High-quality of evidence with a modified-cluster randomized pragmatic trial comparing **Flublok** to SD
- Largest randomized influenza vaccine effectiveness study ever conducted, with 2.4m randomized in the US from 2018 to 2021
- Study sponsor: Kaiser Permanente

Study objectives

- Use RWE to demonstrate RIV4 performance over SoC in adults 50-64 years to prevent lab-confirmed influenza & hospitalizations (primary & secondary endpoints)

Results

- Primary endpoint met, confirming **improved performance of Flublok over SD to prevent PCR-confirmed flu cases** in adults 50-64 with a rVE=15.4% (95% CI 6.0,23.9)
- Secondary endpoint for PCR-confirmed influenza A cases in 50-64 year olds was met and statistically significant (rVE 15.9%; 95% CI 6.1, 24.6)
- All hospitalization secondary endpoints in 50-64 & 18-64 trending in favor of Flublok vs SD, although not statistically significant (the study lacks power to conclude)
- In a post-hoc analysis of 50-64 at-risk population, a statistically significant rVE of 14.6% (95% CI 2.7,25.0) for PCR+ influenza cases was observed, consistent with the primary endpoint rVE point estimate

For abbreviations see slide 57.

Beyfortus®[C] the *first and only* broadly protective option against RSV for all infants

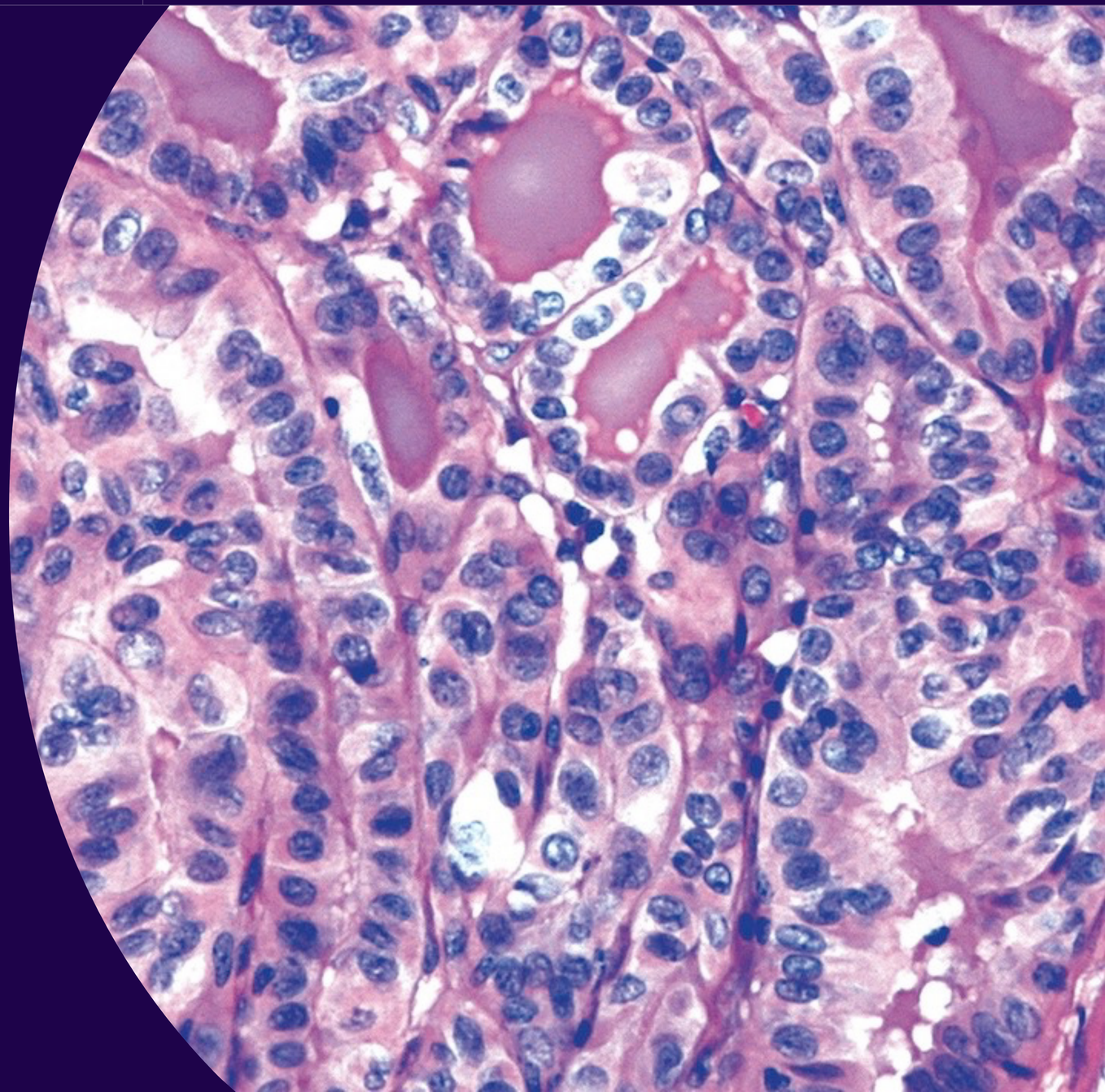
Supported by strong efficacy and safety data

Study	Population	RSV MA LRTI	RSV Hospitalizations
Phase 2b	29 -<35 WGA	**70.1%** (52.3-81.2)	**78.4%** (51.9-90.3)
Phase 2b (Commercial dose)	29 -<35 WGA	**86.2%** (68.0-94.0)	**86.5%** (53.5-96.1)
Phase 3 (MELODY Primary cohort)	≥35 WGA	**74.5%** (49.6-87.1)	**62.1%** (-8.6-86.8)
Pre-specified Pooled (Phase 2b Commercial dose & MELODY Primary cohort)	29 WGA – full term	**79.5%** (65.9-87.7)	**77.3%** (50.3-89.7)
MELODY all subjects (Primary + Safety Cohorts)	≥35 WGA	**76.4%** (62.3-85.2)	**76.8%** (49.4-89.4)

Safety: All MELODY safety cohort provided data with over 3,000 infants. No safety signals were identified with a profile like placebo, and no concerns related to enhanced RSV disease in the 2nd season were seen upon follow-up.
Note: Pooling Ph2b Commercial dose + Melody All Subjects data showed 80.6% reduction against hospitalization due to RSV MA LRTI presented at ACIP meeting in October 2022. For abbreviations see slide 57.

sanofi

Financial appendices



2022 business *outlook*

Sales

Specialty Care
Growth driven by Dupixent®, N&I slightly down, all other franchises growing

Vaccines
Record flu season sales

Consumer Healthcare
Growth of priority brands above market in key geographies

GenMed
Core assets expected to continue to grow; overall GBU sales slightly down

EUROAPI
Deconsolidation of sales from May

P&L

Gross margin improvement due to product mix and efficiencies, weighted toward the first half of 2022

Increase in *R&D investment* to further strengthen the pipeline

Capital gains from product disposals expected to reach approximately €600m, the majority in the second half of 2022

Tax rate of around 19%

Barring unforeseen events.

9M P&L

€m	*9M 2022*	*9M 2021*	*% Change (CER)*
Net Sales	**32,272**	**27,767**	**+8.6%**
Other revenues	1,661	993	+49.2%
Gross profit	23,975	19,980	+11.1%
Gross margin %	74.3%[1]	72.0%[1]	
R&D	(4,883)	(4,107)	+13.1%
SG&A	(7,597)	(6,797)	+4.6%
Operating Expenses	**(12,480)**	**(10,904)**	**+7.8%**
Other current operating income & expenses	(1,238)	(590)	+64.2%
Business Operating Income	**10,316**	**8,458**	**+12.8%**
Business operating margin	32.0%[1]	30.5%[1]	
Effective tax rate	19.0%	21.0%	
Total Business Net Income	**8,200**	**6,483**	**+16.9%**
Average number of shares	1,251.2	1,251.7	
Business EPS	**6.55**	**5.18**	**+17.0%**

All growth at CER unless footnoted. 1. At PUB.

Main product *sales*

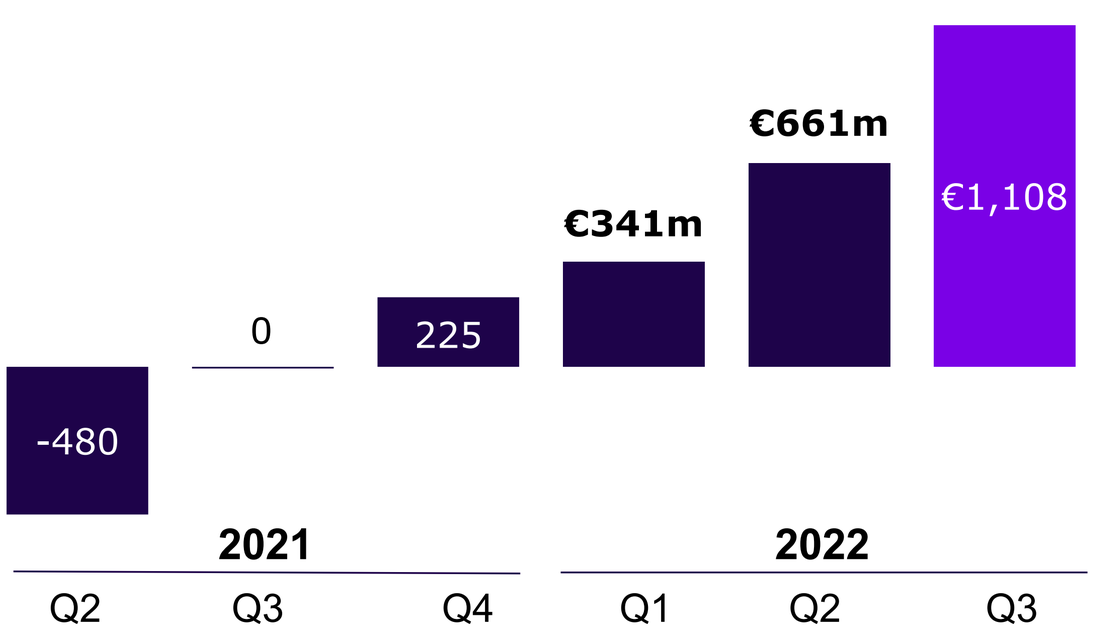
	Q3 2022 sales (€m)	*Growth*
Dupixent	2,314	44.5%
Influenza Vaccines (Fluzone HD, Flubok, Fluzone, Vaxigrip)	1,994	32.4%
Lantus	559	-17.7%
Aubagio	521	-3.7%
Meningitis Vaccines (MenQuadfi, Menactra)	328	11.9%
Lovenox	307	-23.0%
Toujeo	304	17.2%
Myozyme	255	-10.2%
Fabrazyme	240	5.7%
Plavix	230	-1.4%
Pentaxim	205	-2.4%
Cerezyme	181	8.8%
Hexaxim	178	64.7%
Eloctate	151	-7.6%
Depakine	129	2.5%
Aprovel	129	11.2%
Alprolix	126	8.9%
Adacel	124	-0.9%
Thymoglobulin	118	15.4%
Allegra[1]	116	3.0%
Multaq	101	10.1%
Jevtana	101	-13.3%

All growth at CER unless footnoted. 1. Figure only reflects over the counter sales reported from CHC.

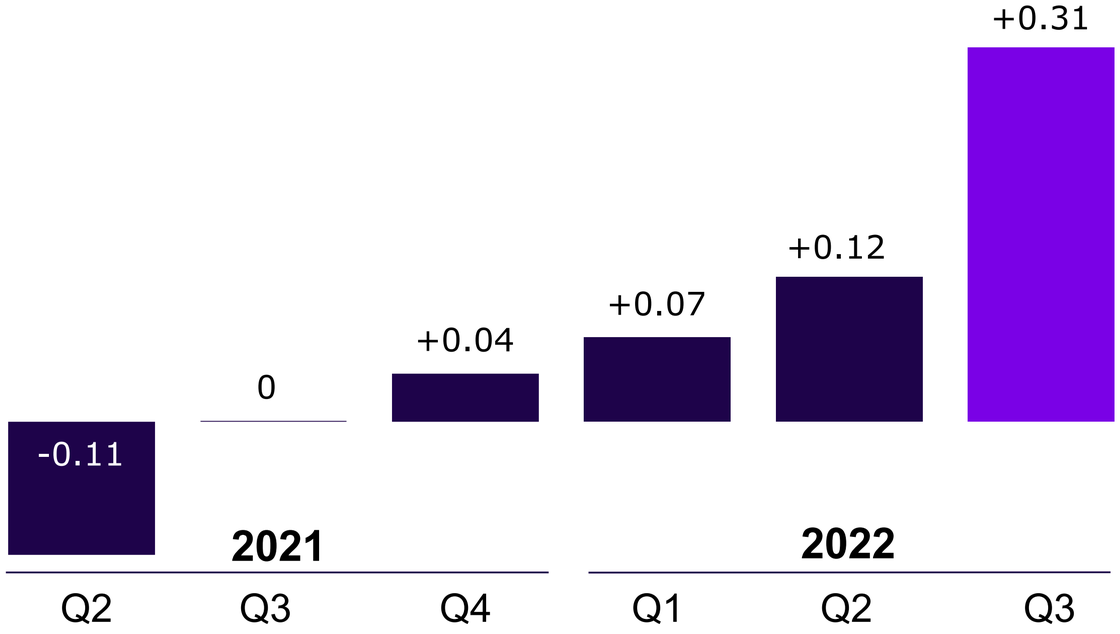
Q3 sales and EPS

Currency impact

Company sales

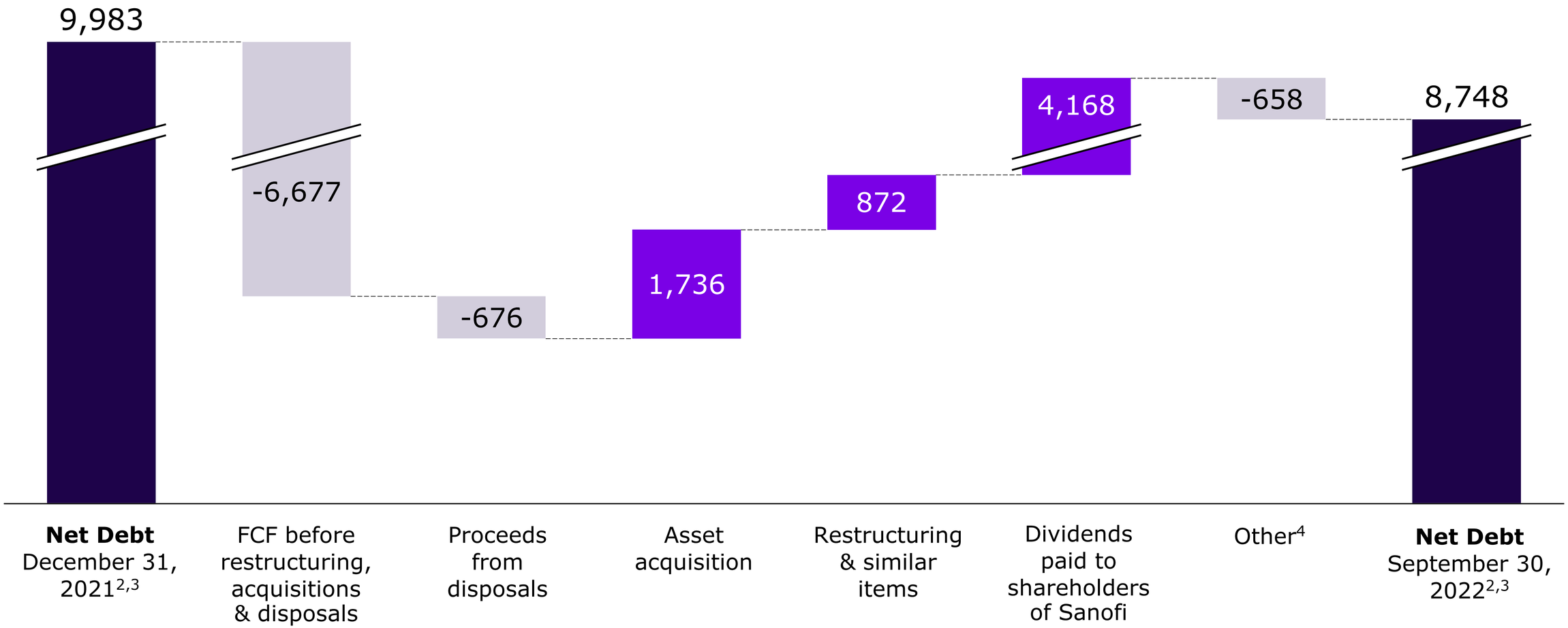


Business EPS



Net debt evolution in 9M 20221

€ millions



1. Credit ratings reaffirmed: Moody's A1/stable, S&P AA/stable, Scope AA/stable as of September 30, 2022. 2. Including derivatives used to manage net debt: -€226m at December 31, 2021 and €71m at September 30, 2022. 3. Effective January 1, 2019, net debt does not include lease liabilities following the first-time application of IFRS16. 4. Including €856m upfronts and milestones payments relating to the Libtayo deal with Regeneron €360m use of funds from acquisition of treasury shares and €176m of proceeds from issuance of Sanofi shares.

2022 currency sensitivity and Q3 2022 currency exposure

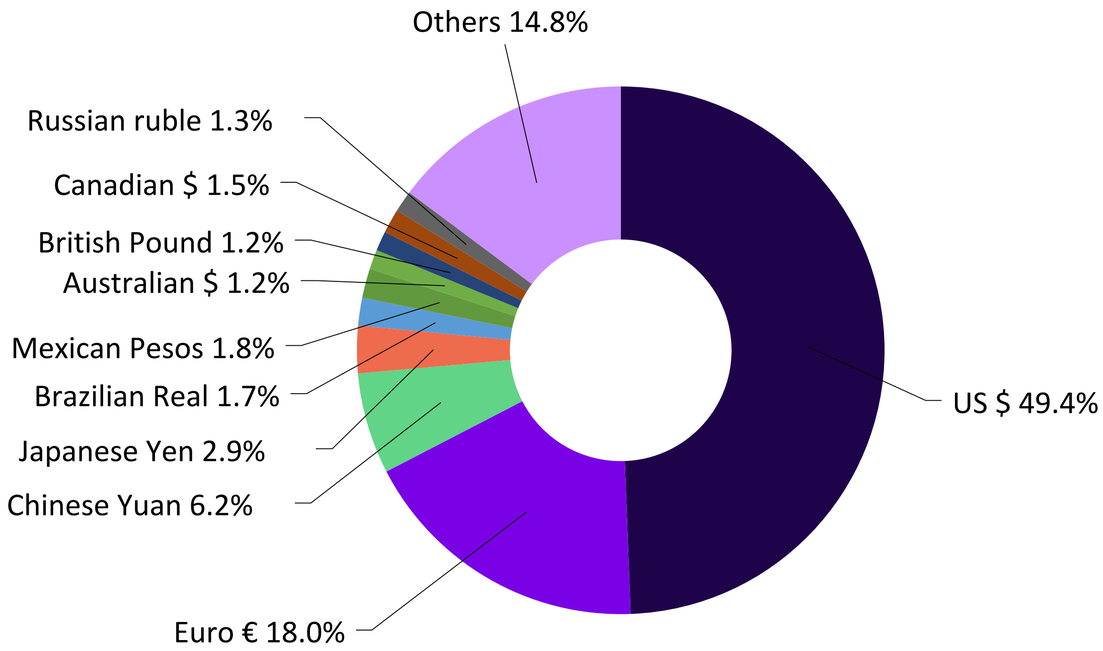
2022 Business EPS currency sensitivity

Currency	Variation	Business EPS sensitivity
U.S. Dollar	+ 0.05 USD/EUR	- EUR 0.15
Japanese Yen	+ 5 JPY/EUR	- EUR 0.02
Chinese Yuan	+ 0.2 CNY/EUR	- EUR 0.02
Brazilian Real	+ 0.4 BRL/EUR	- EUR 0.01
Russian Ruble	+ 10 RUB/EUR	- EUR 0.02

Currency average rates

	Q3 2021	Q3 2022	% change
EUR/USD	1.179	1.007	-14.6%
EUR/JPY	129.79	139.33	+7.4%
EUR/CNY	7.63	6.91	-9.4%
EUR/BRL	6.16	5.29	-14.2%
EUR/RUB	86.60	60.01	-30.7%

Currency exposure on Q3 2022 sales



Sanofi accounting of Antibody License and Collaboration Agreement with Regeneron[1]

Last updated July 2022

		U.S.	*Ex-U.S.*
Net sales		Sanofi consolidates worldwide net sales	
Cost of sales		Sanofi consolidates worldwide cost of sales	
R&D expense		Development costs funded upfront by Sanofi until first positive Phase 3; subsequent costs funded 80% Sanofi / 20% Regeneron *Regeneron 20% reimbursement recorded as a reduction of Sanofi R&D expense*	
SG&A expense		Sanofi expenses 100% of its commercial expenses	
Other operating income and expenses	1. Regeneron SG&A spend	Sanofi reimburses Regeneron for 100% of Regeneron's commercial expenditures	
	2. Development balance compensation[2]	Additional portion of Regeneron's profit-share *(capped at **20%** of Regeneron's share of quarterly profits on all Antibody products combined[3])* until Regeneron reaches 50% of the cumulative development costs incurred by the parties ***Cap increased from 10 to 20%** as per the Fifth Amendment to the Antibody License and Collaboration Agreement dated June 1, 2022. 20 % cap will be retroactive as of April 1, 2022 and accounted for as of Q3 2022.*	
	3. Collaboration profitable	Outflow: Sanofi expenses 50% of profit; paid to Regeneron	Outflow: Sanofi expenses 35% to 45% of profit; paid to Regeneron
	4. Collaboration in a loss	Inflow: Sanofi recognizes reimbursement of 50% loss from Regeneron	Inflow: Sanofi recognizes reimbursement of 45% loss from Regeneron
Amortization of intangibles (IFRS)	Sales milestones		Regeneron entitled to receive up to $250m in milestones starting from $1bn ex-US sales[4]

1. Following expiry of the Antibody Discovery Agreement in December 2017, Dupixent®, Kevzara® and itepekimab (SAR440340) continue to be developed and commercialized with Regeneron under the Antibody License and Collaboration Agreement (LCA) signed in November 2007, Amended and Restated November 2009, further amended May 2013 and July 2015, restructured in April 2020 and further amended in October 2021 and June 2022. 2. As of December 31, 2021, such commitments received were $3.2bn, relative to cumulative development costs of $8.5bn, of which $7.7bn were incurred by Sanofi; balance includes costs for Dupixent®, Kevzara® and itepekimab as well as Praluent® through March 31, 2020. 3. Including Dupixent®, Kevzara® and itepekimab. 4. Praluent® removed from LCA at April 2020 restructuring, but ex-US sales of Praluent® remain included in calculation of sales milestones.

Sanofi Libtayo® accounting pursuant to Immuno-Oncology License and Collaboration Agreement with Regeneron[1]

Applicable before Amended and Restated IO License and Collaboration Agreement effective July 1, 2022

		U.S.	*Ex-U.S.*
Net sales		Consolidated by Regeneron	Consolidated by Sanofi
Cost of sales		Consolidated by Regeneron	Consolidated by Sanofi
R&D expenses		Sanofi reimburses 50% of development expenses incurred during quarter	
SG&A expenses		Sanofi expenses 100% of its commercial expenses	
Other operating income and expenses	1. SG&A reimbursement	Inflow: Regeneron reimburses 100% of Sanofi's US commercial expenses	Outflow: No Regeneron commercial expenses ex-US
	2. Development balance compensation	Regeneron reimburses 50% of pre-POC development costs[2] quarterly[3]	
	3. Collaboration profitable	Inflow: Sanofi recognizes 50% of collaboration's profits	Outflow: Sanofi expenses 50% of profits; to be paid to Regeneron
	4. Collaboration in a loss	Outflow: Sanofi expenses 50% of losses; to be paid to Regeneron	Inflow: Sanofi recognizes reimbursement of 50% of collaboration's losses
Amortization of intangibles (IFRS)	Sales milestones	Regeneron to receive $375m milestone when sales of Libtayo® exceed $2bn over any consecutive 12-month period	

1. On July 1, 2015, Sanofi and Regeneron entered into an Immuno-Oncology (IO) Discovery and Development Agreement (amended and restated as of December 31, 2018 and terminated as of March 16, 2021) and an IO License and Collaboration Agreement (IO LCA). On June 1, 2022, Sanofi and Regeneron signed an Amended and Restated IO LCA, effective July 1, 2022. 2. As of December 31, 2021, amounts to $103m primarily for bi-specifics LAG3 and CTLA-4 development programs conducted in the frame of the IO Discovery Agreement terminated in Q1 2021. 3. Capped at 10% of Regeneron profit share per quarter.

Sanofi Libtayo® accounting pursuant to *Amended and Restated* Immuno-Oncology License and Collaboration Agreement with Regeneron effective July 1, 2022[1]

		U.S.	*Ex-U.S.*
Net sales		Consolidated by Regeneron	
Other revenues		Manufacturing Services Fees paid by Regeneron to Sanofi during transition period[2]	
Cost of sales		Consolidated by Regeneron	
R&D expenses		Regeneron supports 100% of development expenses	
SG&A expenses		Expensed by Regeneron	Expensed by Sanofi Transition Service Fees paid by Regeneron[3]
Other operating income and expenses (in BOI)	1. TDA fees[4]	n/a	Agent fee (% sales) paid by Regeneron
	2. Royalties (retroactive April 1, 2022)	11% royalties on worldwide net sales paid by Regeneron	
	3. Development balance compensation	Development Balance reduced to $35m and reimbursed by Regeneron based on 0.5% of worldwide net sales	
	4. Sales Milestones	Sanofi to receive up to $100m sales milestones over 2022 and 2023	
Other operating income (excluded from BOI)	1. Upfront	Sanofi to receive $900m (paid in July 2022)	
	2. Development milestone	Sanofi to receive $100m upon FDA or EMA approval of combo Libtayo® / chemotherapy in NSCLC	

1. On June 1, 2022, Sanofi and Regeneron signed an Amended and Restated IO LCA, effective July 1, 2022. 2. As per Manufacturing Services Agreement (until Dec. 31, 2024, extendable to Dec. 31, 2025).
3. As per Transition Services Agreement (US until Dec.31, 2022 & ex-US until June 30, 2024). 4. As per Transitional Distribution Agreement (ex-US until July 1, 2026).

sanofi

ESG appendices

Sanofi ESG Q3 *achievements*

Affordable access

Global Health Unit #Patients treated

Q2 2022	Q3 2022
Malaria **1,693,770** **10** countries	**Malaria** **2,000,995** **13** countries
Tuberculosis **76,634** **13** countries	**Tuberculosis** **98,542** **13** countries
NCD **85,956** **21** countries	**NCD** **109,934** **24** countries

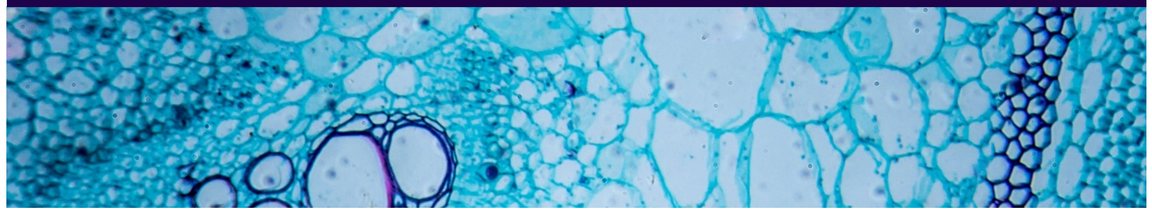
Rare disease vials donation

Q2 2022	Q3 2022
1,015 patients treated	**1,064** patients treated
51,370 vials donated	**76,494** vials donated

Global access plan

Q2 2022	Q3 2022
Pilot completed Blueprint completed	Governance in place and roll-out across all GBUs

R&D for unmet needs



Polio eradication

Q2 2022	Q3 2022
27 million IPV doses supplied to UNICEF	**38 million IPV doses** supplied to UNICEF

Sleeping sickness elimination

FY 2021[1]	FY 2022
2 million patients tested for HAT	Data updated annually
805 patients treated	

Pediatric cancer treatment development

Q2 2022	Q3 2022
1 asset in **pre-clinical assessments**	**1** asset in **pre-clinical assessments**
1 asset in **protocol preparation for clinical study**	**1** asset in **protocol preparation for clinical study**

Data in YTD unless stated otherwise. 1. Data provided by WHO.

Sanofi ESG Q3 *achievements*

Planet care

Blister-free syringe vaccines

Q4 2021	Q3 2022
29% of blister free syringe vaccines produced	Data updated annually

Eco-design

Q2 2022	Q3 2022
5 LCAs completed & **3** in progress	**7** LCAs completed & **1** in progress
Eco-design digital solutions project in progress	**Eco-design digital solutions** project in progress

Scope 1 & 2 GHG emissions reduction

Q2 2022	Q3 2022
-27% vs 2019	**-28.3%** vs 2019

Renewable electricity & eco-car fleet

Q2 2022	Q3 2022
60% renewable electricity	**61.4%** renewable electricity
30.4% eco-fleet	**32.7%** eco-fleet

In and beyond the workplace

Diverse Senior Leadership

Q2 2022	Q3 2022
35.9% of our executives and **41.1%** of our senior leaders were women	**36.2%** of our executives and **41.4%** of our senior leaders were women

Engagement with communities

Q2 2022	Q3 2022
1,998 volunteers	**3,498** volunteers
12,687 hours	**25,265** hours

From Leaders to Citizens

Q2 2022	Q3 2022
Rollout planned in 2022	Program launched

Data in YTD unless stated otherwise.

Sanofi ESG ratings

Rating agencies

S&P Global Ratings	SUSTAINALYTICS	Dow Jones Sustainability Indexes	MSCI	CDP	ISS-oekom	FTSE4Good	access to medicine index	WDi Workforce Disclosure Initiative	vigeo eiris
SCORE									
86/100	**21.6 Medium risk**	**69/100**	**A**	**Climate Change: A Water: A**	**B**	**4.3/5**	**3.47/5**	**92%**	**64/100**
New rating	▲ 22	▼ 74/100	= A	▲ A-	= B	▲ 4.2/5	▲ 2.49/5	▲ 90%	▲ 62/100
One of the highest scores across all sectors globally 80 points for its solid fundamentals & strong preparedness opinion of 6 points	12th among 455 pharmaceutical companies	Percentile of 92 within 143 scored companies in the industry	Within the top 6 highest rated pharmaceutical companies	Leading position	1st decile of the 476 companies in the industry	With very high rating across the 3 pillars ESG	Top 5 company	Sanofi's disclosure score well above sector disclosure score (74%)	1st pharmaceutical company out of 57 Score in progress since 2018

▲ = Vs previous rating

Scores assigned by the rating agencies are not equivalent.

Collaborations

Ref	Name	Developed in collaboration with…
A	**Dupixent®** **itepekimab** **Libtayo®** **Kevzara®**	Regeneron
B	**Altuviiio®**	Sobi
C	**Beyfortus®**	AstraZeneca
D	**Vidprevtyn®**	GSK and with funding from Biomedical Advanced Research and Development Authority (BARDA)
E	**eclitasertib** **SAR443820**	Denali
F	**frexalimab**	Immunext
G	**SAR442720**	Revolution Medicines
H	**SP0202**	SK
I	**SAR444656**	Kymera
J	**SAR441000**	BioNTech
K	**SAR444881**	Biond
L	**SAR443579**	Innate Pharma

Abbreviations

Ab	Antibody
AD	Atopic Dermatitis
ADC	Antibody Drug Conjugate
ALL	Acute Lymphoblastic Leukemia
AML	Acute Myeloid Leukemia
ASMD	Acid Sphingomyelinase Deficiency
BTK	Bruton's Tyrosine Kinase
CAD	Cold Agglutin Disease
CD	Cluster of Differentiation
CEACAM5	Carcinoembryonic Antigen Cell Adhesion Molecule 5
CI	Confidence Interval
CIDP	Chronic Inflammatory Demyelinating Polyneuropathy
CInDU	Chronic Inducible Cold Urticaria
COPD	Chronic Obstructive Pulmonary Disease
CPUO	Chronic Pruritus of Unknown Origin
CSU	Chronic Spontaneous Urticaria
EoE	Eosinophilic Esophagitis
FGFR3	Fibroblast Growth Factor Receptor 3
GAA	Acid Alpha-Glucosidase
GCS	Glucosylceramide Synthase
GPC3	Glypican-3
HER2	Human Epidermal growth factor Receptor 2
IA	Interim analysis

ICOS	Inducible COStimulatory molecule
IL	Interleukin
ILT2	Ig-like transcript 2
IRAK4	Interleukin 1 Receptor Associated Kinase 4
ITP	Immune Thrombocytopenia
KRAS	Kirsten Rat Sarcoma virus
LNP	Lipid Nanoparticles
LOPD	Late-onset Pompe Disease
LRTI	Lower Respiratory Track Infection
mAb	monoclonal Antibody
MA LRTI	Medically Attended Lower Respiratory Tract Infections (inclusive of hospitalization)
MAT	Moving Annual Total
mBC	metastatic Breast Cancer
MG	Myasthenia Gravis
MM	Multiple Myeloma
mRNA	messenger RNA
MS	Multiple Sclerosis
N-H	Non-Hodgkin
NKp46	Natural Killer 46-kDa protein
NSCLC	Non-Small Cell Lung Cancer
PD-1	Programmed cell Death protein 1
PD-L1	Programmed Death-ligand 1
PN	Prurigo Nodularis
PPMS	Primary Progressive Multiple Sclerosis

QIV	Quadrivalent Influenza vaccine
QIV-HD	Quadrivalent Influenza High-Dose Vaccine
rFVIIIFc-vWF-XTEN	recombinant coagulation Factor VIII Fc – von Willebrand Factor – XTEN Fusion protein
RIPK1	Receptor-Interacting serine/threonine-Protein Kinase 1
RIV4	Quadrivalent Recombinant Influenza Vaccine
RMS	Relapsing Multiple Sclerosis
RNAi	RNA interference
RSV	Respiratory Syncytial Virus
rVE	Relative Vaccine Effectiveness
RWE	Real World Evidence
SD	Standard Dose
SHP2	Src Homology-2 domain-containing protein tyrosine Phosphatase-2
SPMS	Secondary-Progressive Multiple Sclerosis
tCO_2e	Tonnes of carbon dioxide equivalent
TCR	T cell receptor
Te	Transplant eligible
Ti	Transplant ineligible
TNF	Tumor Necrosis Factor
TSLP	Thymic Stromal Lymphopoietin
VBP	Volume-based Procurement
WGA	Week gestational age