

# **Building Strength and Expanding Portfolio in Vaccine Research**

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# Agenda

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of Manufacturing Issues ..... P. 7

**03** Actions towards Creating Future Vaccines ..... P. 15

# **SHIONOGI's Vaccine Research**



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# Infectious Disease Business Policy

## Establish a business model for each area to achieve continuous growth

Build a sustainable business model

### Acute infectious diseases (COVID-19, influenza, etc.)

#### Global growth of therapeutic drugs

- Continued research and development activities (Ensitrelvir, Xofluza)

#### Total care actions

- Achieve growth in the diagnosis, vaccine, and wastewater monitoring businesses

### Antimicrobial resistance (AMR)

#### Work with society to create sustainable markets

- Roll out cefiderocol globally
- Introduce push and pull incentives

Build a stable business base by contributing to large numbers of patients

### Infectious diseases requiring a long period of treatment

#### Cultivate new markets that address unmet needs

- Provide new solutions for HIV infection
- Develop a new drug (olorofim) against highly lethal fungal infections
- R&D of new treatments for infectious diseases with high unmet needs (tuberculosis, malaria, nontuberculous mycobacterial diseases)

### Total care, including vaccines

#### Grow vaccines into the next earnings driver as a core business

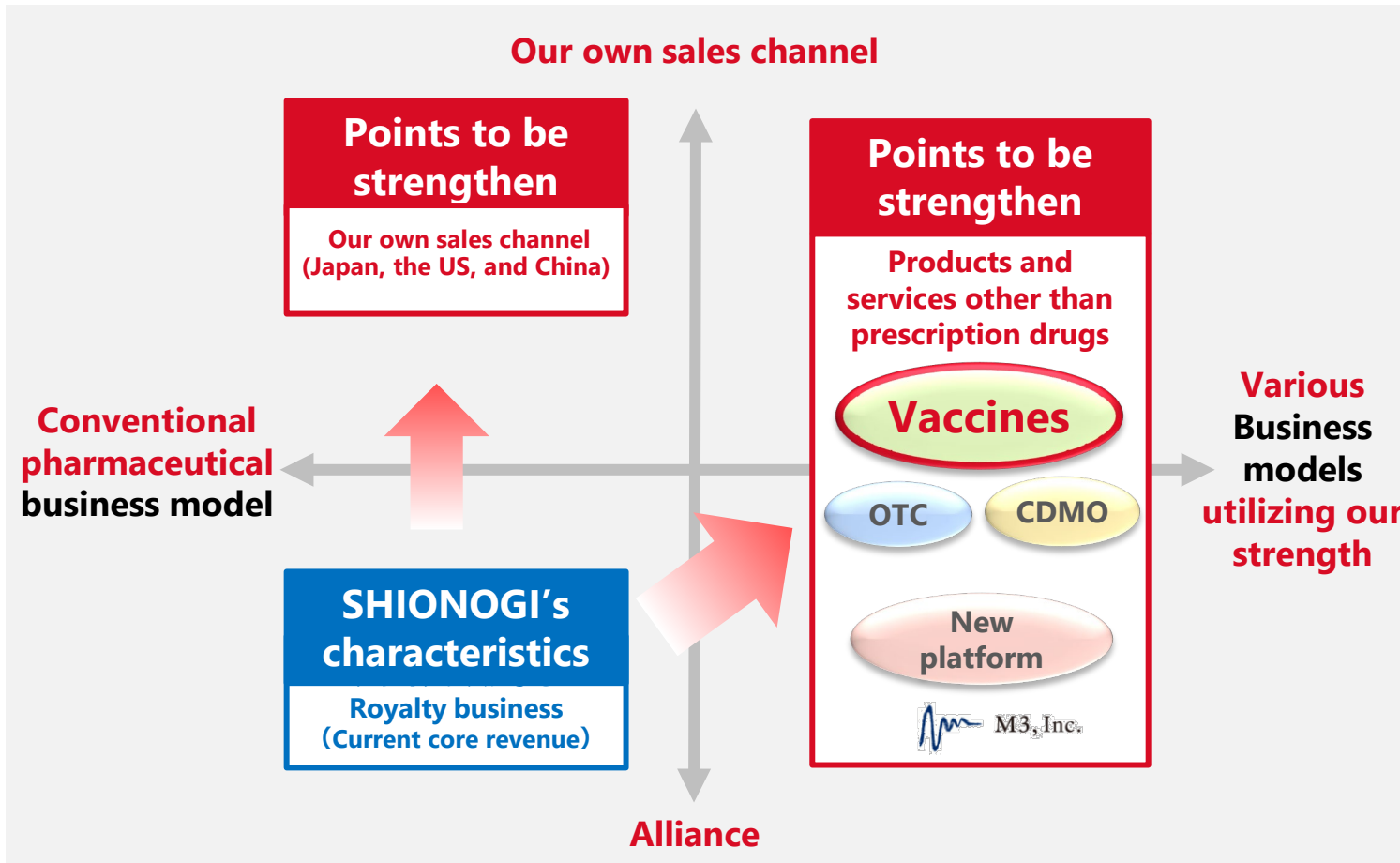
- Launch COVID-19 and influenza vaccines
- Expand the business to Asia and across the world
- Establishment of new technologies that will be our strength (nasal, universal vaccines)

#### Strengthen diagnostic capabilities

- Provide simple diagnostic solutions (home diagnosis kits, etc.)

# Positioning of Vaccines in the Medium-Term Business Plan STS2030

## Building stable business foundations that can contribute to the health of many patients



### Entry into the vaccine business

- Expand the infectious disease business portfolio
  - Aim for sales of 100 billion yen in 2030
- A business that does not rely on patents
  - No entry into the generics market
- Business that targets healthy individuals
  - Targets all of humanity, which differs from pharmaceuticals that target “patients”
- New entry into this area is high risk
  - Obtaining know-how by acquisition of UMN Pharma Inc.,

# SHIONOGI's Experience to Date in Vaccine Business

## Vaccine business is steadily progressing toward our 2030 vision

STEP 1: Entered the vaccine business  
(2017—2020)

STEP 2: Advanced R&D of S-268019  
(2020—2022)

**Advance research of vaccines further  
(2022—2023)**

### Building a vaccine research base

Research

- Started creation of influenza vaccine building on experience in drug discovery for the treatment of influenza

- By applying our drug discovery research capabilities in the areas of infectious diseases and immunity, created S-268019
- By merging in-house technology and external collaboration, develop vaccines able to broadly cover mutant strains

- Filing application for S-268019
- Clinical studies for vaccine of the XBB1.5 strain are in preparation
- The antigen for universal vaccine was identified
- The research for nasal vaccine was adopted by SCARDA

### Capital alliance with UMN Pharma

Manufacturing

- Acquisition of 'rhabdovirus-free' insect cell culture techniques
- Acquired manufacturing and research base of drug active ingredients

### Gaining know-how in vaccine production

- In-house process from antigenic search to GMP study drug manufacturing (UMN Akita Plant) completed
- Acquired experience and knowledge in manufacturing of biopharmaceuticals

### Large-scale manufacturing at UNIGEN

- At a 16,000L-scale manufacturing for S-268019, a conformity certification was obtained
- Facilities and process were optimized in accordance with characteristics of cells and antigens

# **Creation of S-268019 and Resolution of Manufacturing Issues**

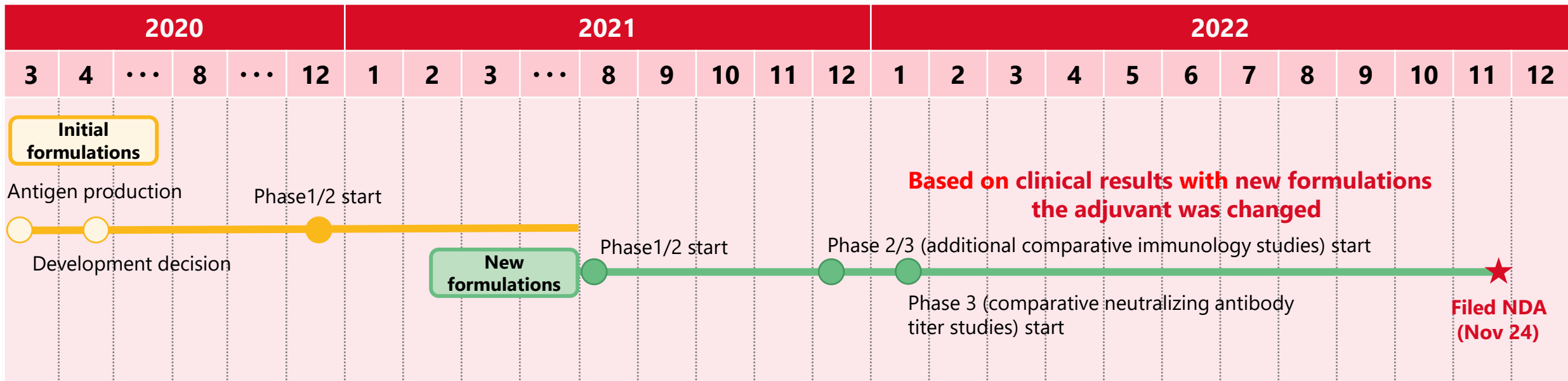


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# S-268019: The First Vaccine Development in SHIONOGI's History

## Less than 3 years from program initiation to filing

Collaborative research with National Institute of Infectious Diseases (NIID) and Kyusyu University (Kyoto University at present)



- **Approximately 4-months from the decision to change adjuvant to the start of the second Phase 1**
  - Explored the combination of various adjuvants and antigens concurrently with Phase 1
- **Construct a seamless and rapidly assessment system for mutant viruses**
  - Systematized monitoring, evaluation, and sample analysis for arising variant strains of the virus



# S-268019: Features identified from R&D efforts

## Accumulation of knowledge related to the recombinant protein vaccine

### Versatility

- This combination of recombinant protein and adjuvant demonstrates increased antibody titer for variant strains
- Freely customize to customize glycan modifications and amino acid sequence design
  - Application to universal vaccine

### Durability

- This combination of recombinant protein and adjuvant shows durability of neutralizing antibody titer
- Induce durable memory B cells
  - Immediate antibody production after reinfection with virus

### Adjuvants

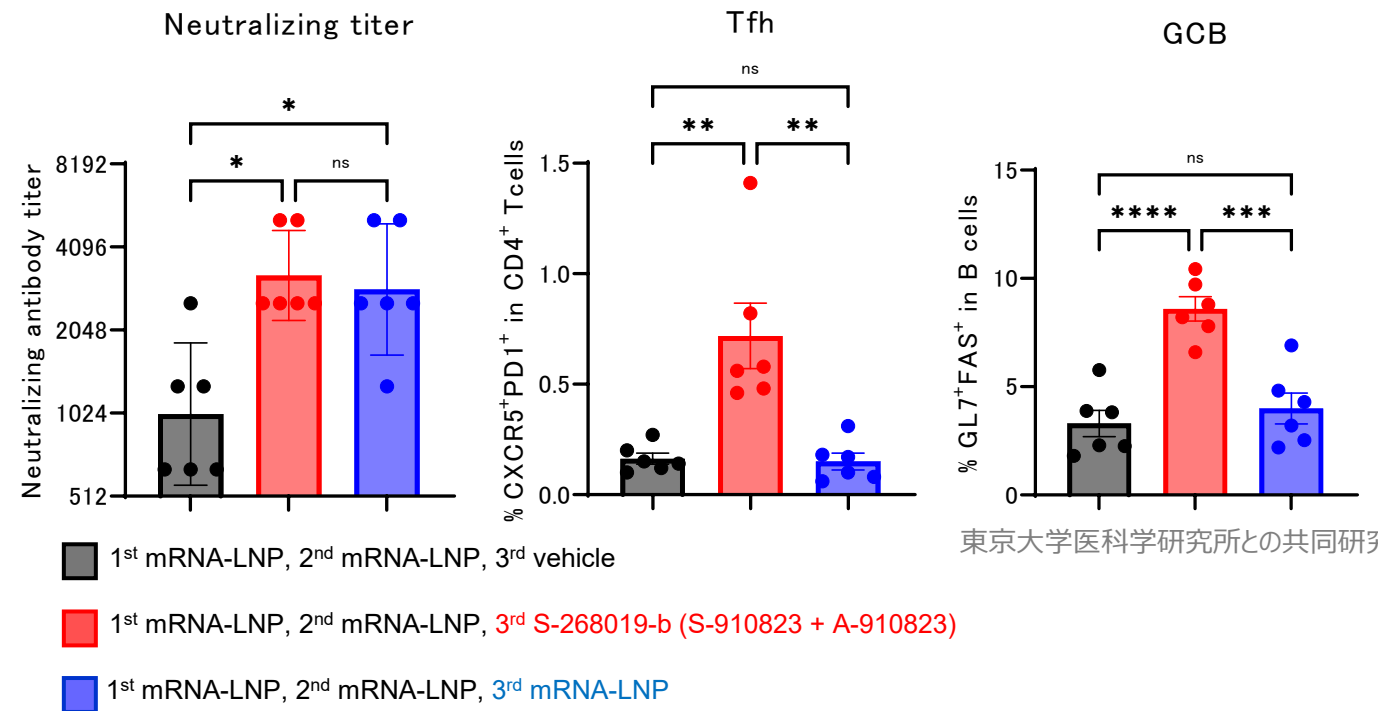
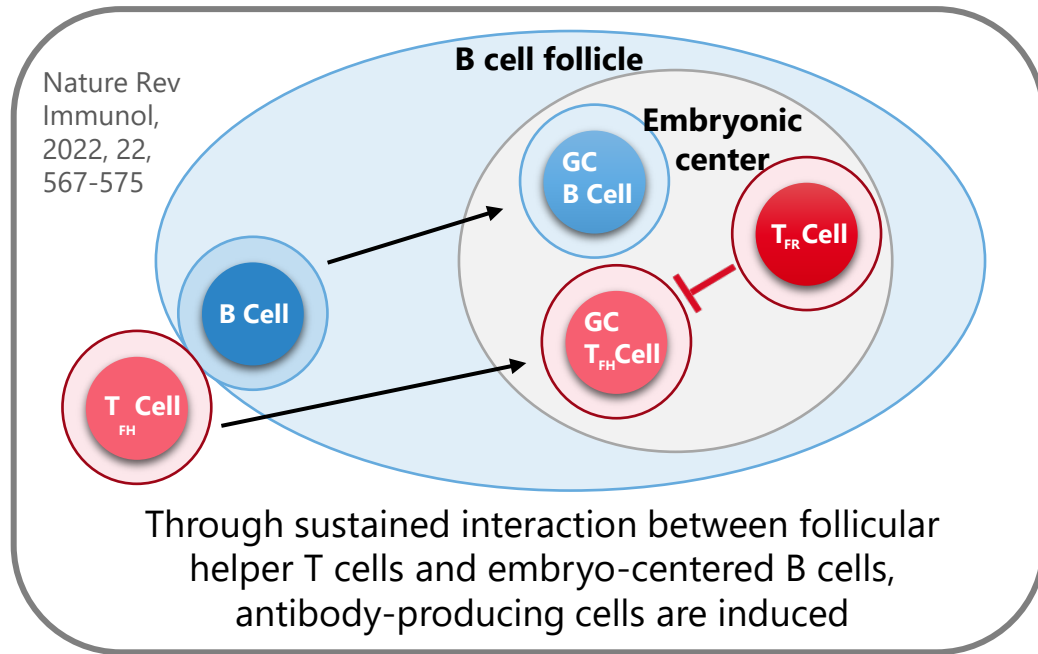
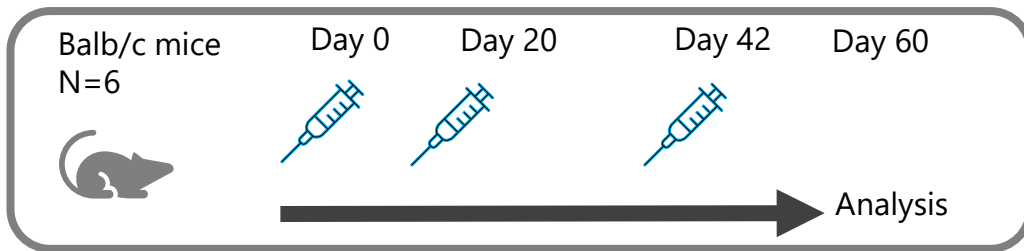
- Built skills for adjuvant design, selection, and production
- Continue to optimize and develop next generation adjuvants

### Stability and Safety

- technology with established safety
- Can be stored at 4°C with a long shelf life
- Rhabdovirus-free baculovirus antigen production technology using BEVS system of UMN Pharma

# S-268019: Increased Efficacy of Vaccine in the Presence of Adjuvant

## Superior adjuvant improves the vaccine's efficacy

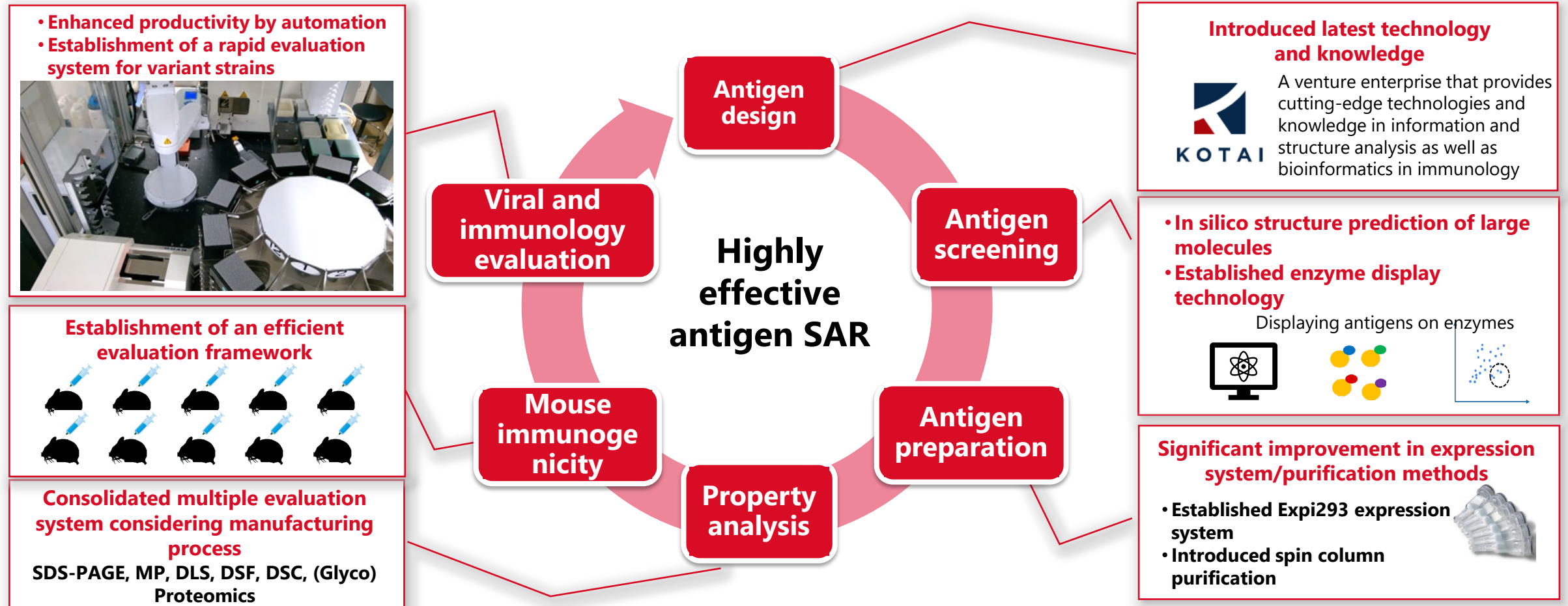


Higher induction of germinal center B cells (GCB) mediated by follicular helper T cells (Tfh) compared to mRNA

2023 Feb 20:14:1116238. doi: 10.3389/fimmu.2023.1116238. eCollection 2023.

# SHIONOGI's Strength: Creation of Antigen SAR\* Platform

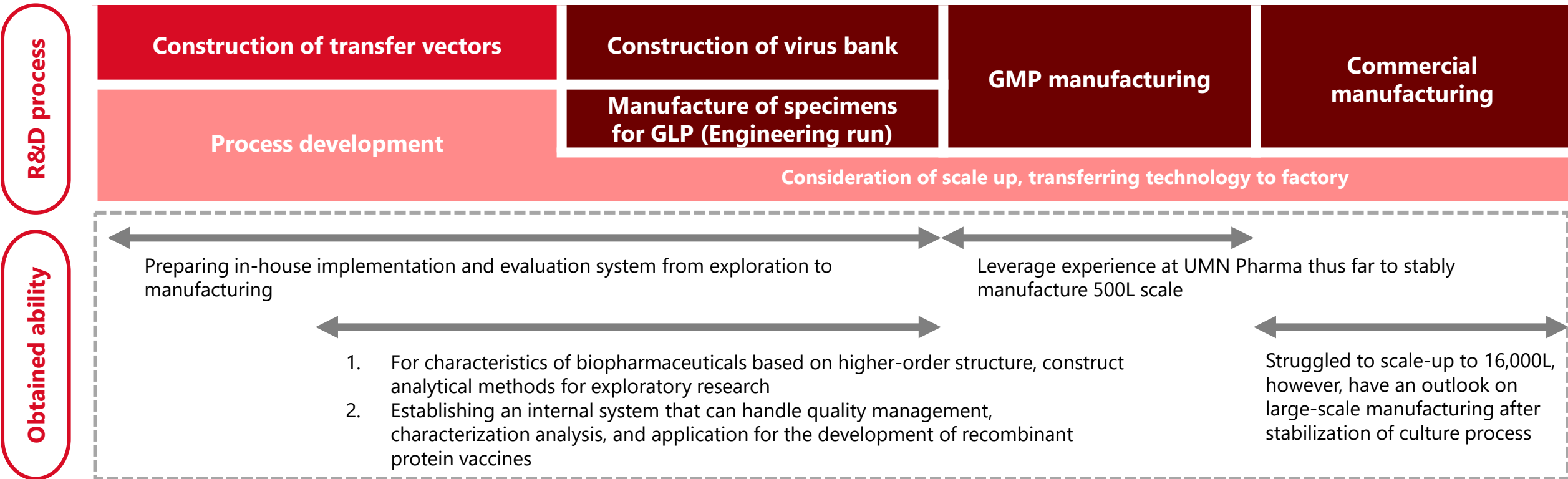
## Antigen SAR platform construction similar to small molecule drug creation



# SHIONOGI's Strength: Vaccine Antigen and Formulation Production System

## Building stable manufacturing and supply capabilities of investigational vaccines

### R&D process for recombinant protein by BEVS\*



# Issues and Solution in Vaccine Antigen Manufacturing

## Constructing stable vaccine manufacturing facilities at a commercial manufacturing scale

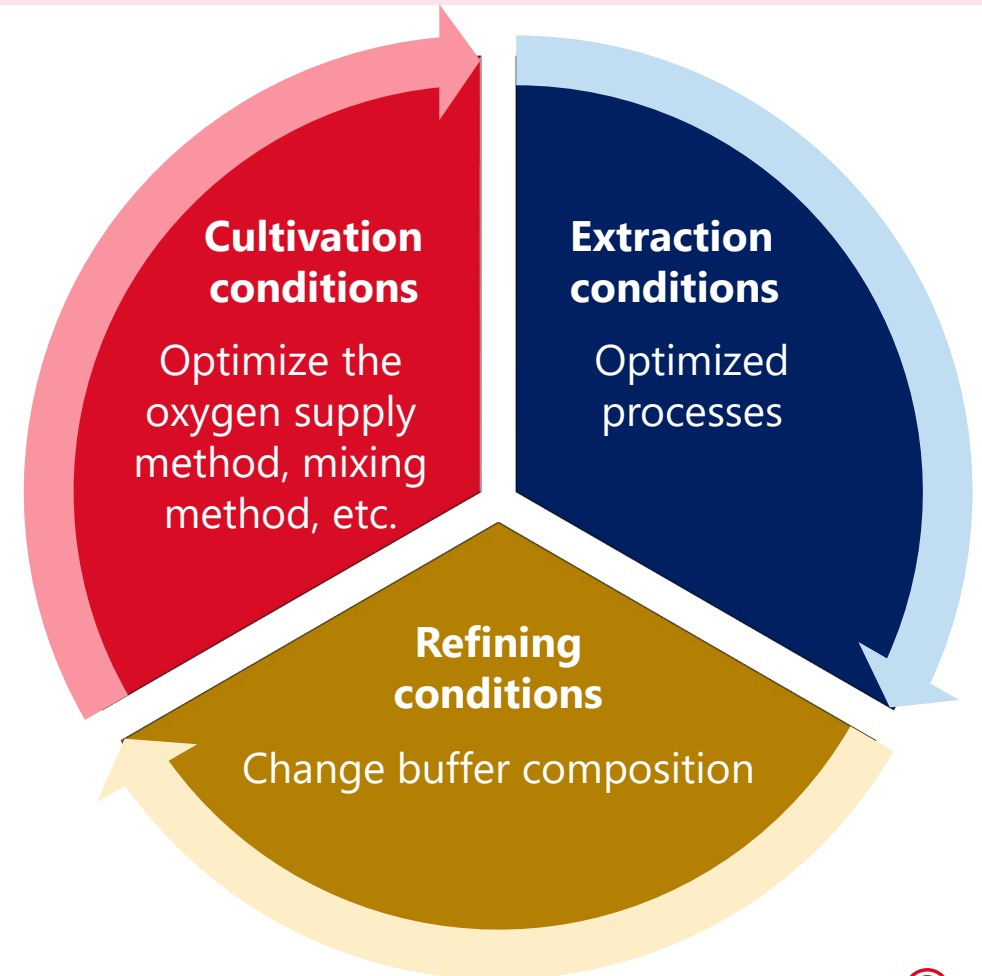
### Issues in commercial manufacturing

- Stable manufacturing when scaled up to 16,000L
- Stable manufacturing when changing the antigen

### Solutions

As shown in the diagram on the right, optimize the manufacturing process in line with attributes of cells and antigens and manufacture S-268019

- **Achieved antigen production that met quality standards multiple times in 16,000L scale**
- **Implementing production system for variant strain vaccines**



# Progress of Vaccine Development

## Efforts toward building a sustainable business model are progressing

### COVID-19 Vaccine

- Establish a recombinant protein vaccine platform and aim for full-scale supply of vaccines against mutant strains in the fall/winter season of 2024
- Actions towards establishing a platform
  - Obtaining approval for S-268019
    - > Continuing discussion: Additional evaluation based on onset prevention trial\* data
  - Application for changes based on clinical trial data for XBB1.5 strain vaccine
    - > Developing a monovalent vaccine for the XBB1.5 strain
    - > Scheduled to start case registration in 3Q of 2023

### Development of new technology

- Universal vaccine
  - Creation of antigen for universal sarbecovirus vaccine completed
- Nasal vaccine
  - “Research and development of influenza/new coronavirus nasal vaccines” was selected as a vaccine/new modality research and development project solicited by AMED’s\*2 SCARDA\*3

#### ※ Platform

For vaccines that have been established as a platform, if there is a commitment to obtain data on quality, efficacy, safety, and immunogenicity after marketing, it is possible to apply for a complete change to the current recommended strain with the latest quality and preclinical test results

\*1 Global Phase 3 [NCT05212948](https://clinicaltrials.gov/ct2/show/study/NCT05212948)

\*2 Strategic Center of Biomedical Advanced Vaccine Research and Development for Preparedness and Response

\*3 Japan Agency for Medical Research and Development

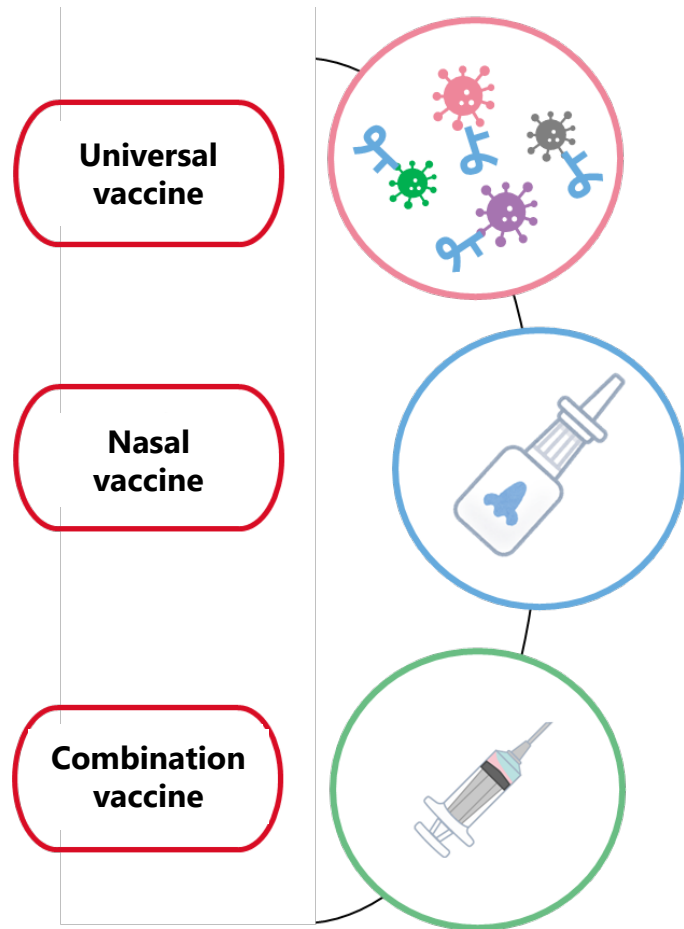
# **Actions towards Creating Future Vaccines**



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# SHIONOGI's Vaccine Research

## Advancing new vaccine research utilizing novel modalities at full throttle



### Designing truly safe and effective universal antigens to cope with mutant strains to come

- Accepted to the program on R&D of new generation vaccine including new modality application publicly sought by SCARDA\* in AMED\*\*
  - Development of universal sarbecovirus\* vaccine
- Accelerating collaborative research with KOTAI Biotechnologies, Inc. and National Institute of Infectious Diseases (NIID)



### Nasal vaccine to be created by constructing mucosal immunity platform

- Accepted in the program for R&D of new generation vaccine including new modality application publicly requested by SCARDA in AMED
  - Synergy Institute with Chiba University (cSIMVa)
  - R&D of influenza and novel coronavirus nasal vaccine centered on cCHP
- Ongoing collaborative research with Hanavax, Human Mucosal Vaccinology Department at Chiba University, and NIID



### Facilitating research for vaccines for respiratory infections other than COVID-19

- Developing preventive vaccines for high-risk patients such as infants, toddlers, and elderly
- Developing combination vaccines to increase consumers' convenience and inoculation rates

\* Strategic Center of Biomedical Advanced Vaccine Research and Development for Preparedness and Response  
\*\* Japan Agency for Medical Research and Development



# Creation of Universal Vaccine Antigens

Aiming to create vaccine antigens that are effective for novel variant strains and even the next pandemic

## Design of universal antigens

### Concepts

- Design a novel antigen using back-calculation from immune factors shown to be induced in humans
- Create vaccines that cover both the then-prevailing SARS-CoV-2 and the next (and next, and next) strain

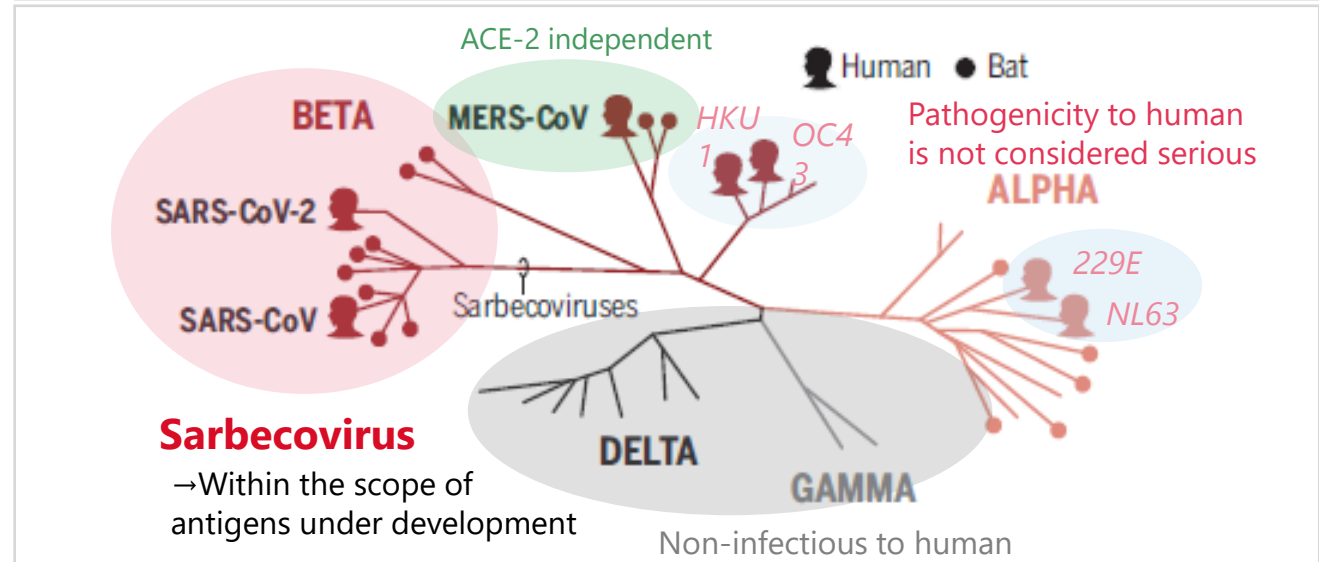
### Current status

- Identification of universal sarbecovirus vaccine antigens under development has completed
- On track towards the start of clinical trials in 2024

### Effects

- Neutralizing antibody titer increase has been confirmed not only in the original strain of SARS-CoV-2 but also in various mutant strains and even in the strain of SARS-CoV-1 that caused pandemic in 2003
- Data to be published at next R&D Day

## Evolutional tree of coronavirus



## Points to consider in the design universal antigens

Stabilization of protein structure	Change of dynamic characteristics of proteins
Optimization of versatility	Regulation of epitope

# Nasal Vaccines: Difference from Conventional Muscularly Injected Vaccines

**Protect against infections by inducing IgA in the nasal mucosa, and prevent systemic spread of viruses**

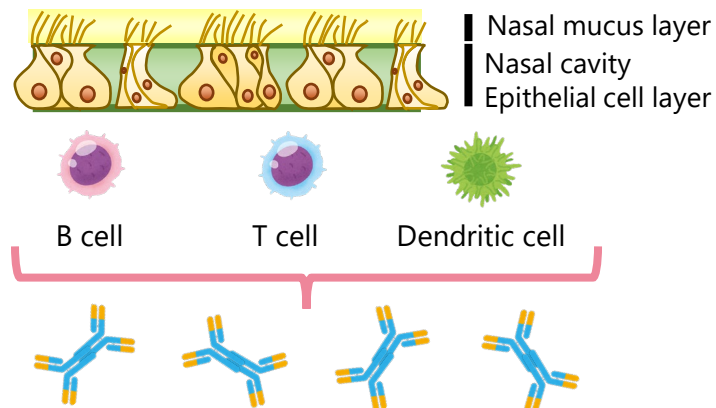
## Conventional vaccine

IgG induction  $\Rightarrow$  Being able to prevent worsening or onset of symptoms in systemic immunity, but unable to prevent infection itself

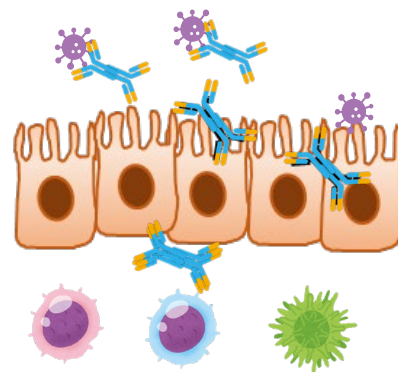
## Nasal vaccine

IgA induction  $\Rightarrow$  By inducing mucosal immunity in addition to systemic immunity, being able not only to reduce the severity of infections and prevent viral transmission but also to prevent the pathogenic infection itself

Induce antigen-specific secretory IgA in respiratory mucosa



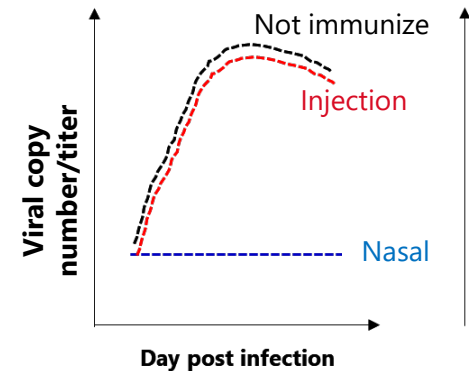
Reduce viral load entering to body from respiratory mucosa



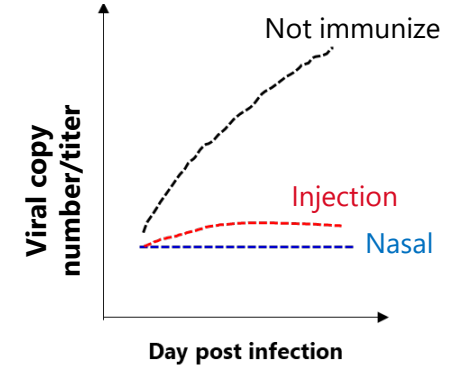
Decreased viral load in lung due to the reduction of viral load entering to body

**Graphical image after vaccination**

Turbinate viral copy number/titer



Lung viral copy number/titer



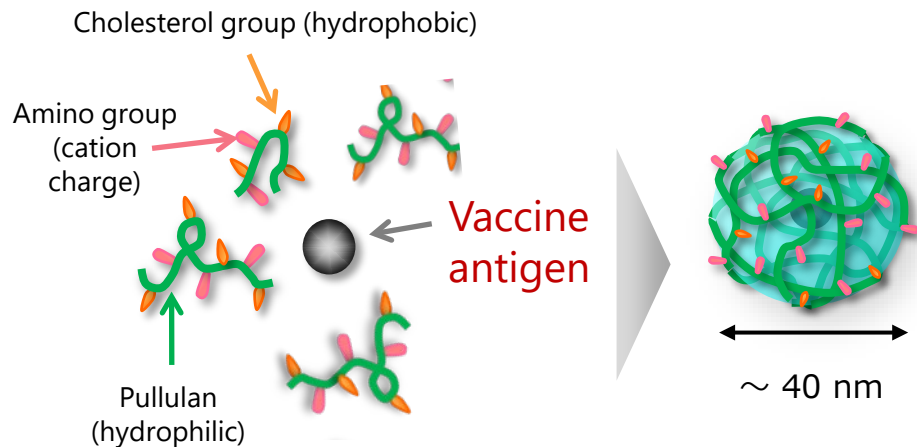
# Nasal Vaccine: Usefulness of cCHP\* Carrier Adopted from HanaVax Inc.

**Being able to induce effective mucosal immunity due to prolonged the nasal residence time of the antigen**

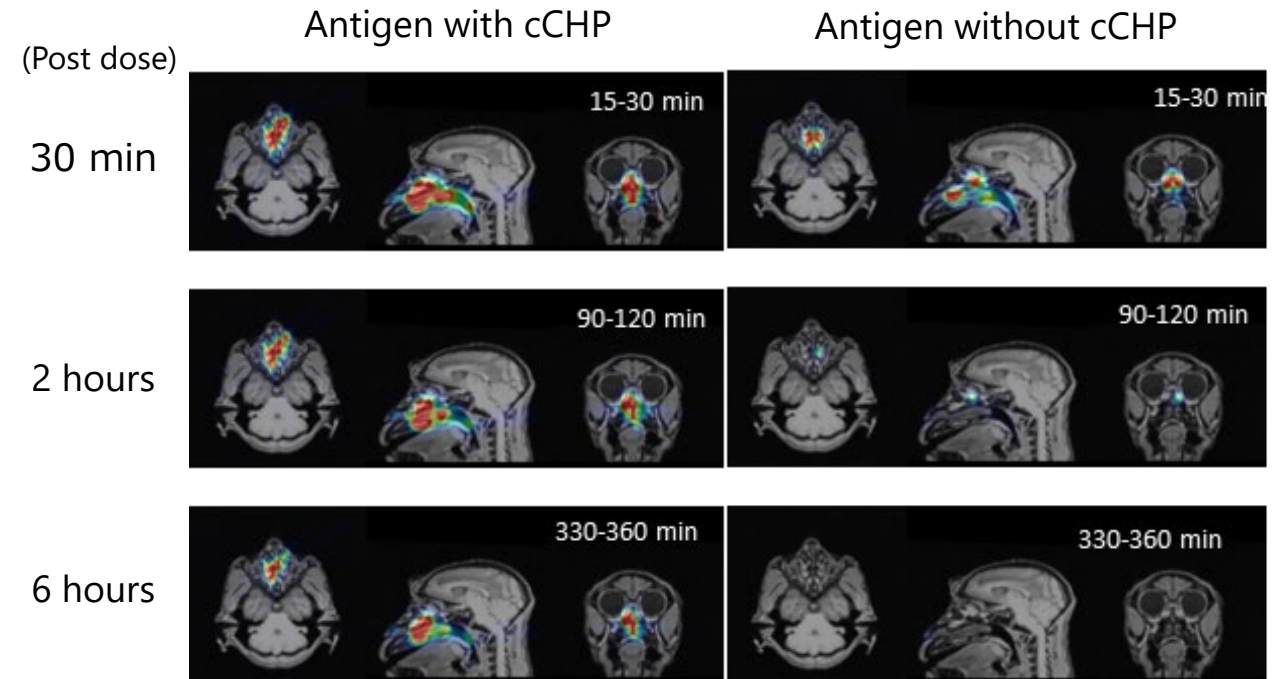
## What is cCHP\* ?

- Cationic nanogel consists of cholesteryl pullulan
- Compound formation with protein in solution was confirmed

**The vaccine antigen was enveloped in cationic nanogel**




## Prolongation of the nasal residence time of the antigen



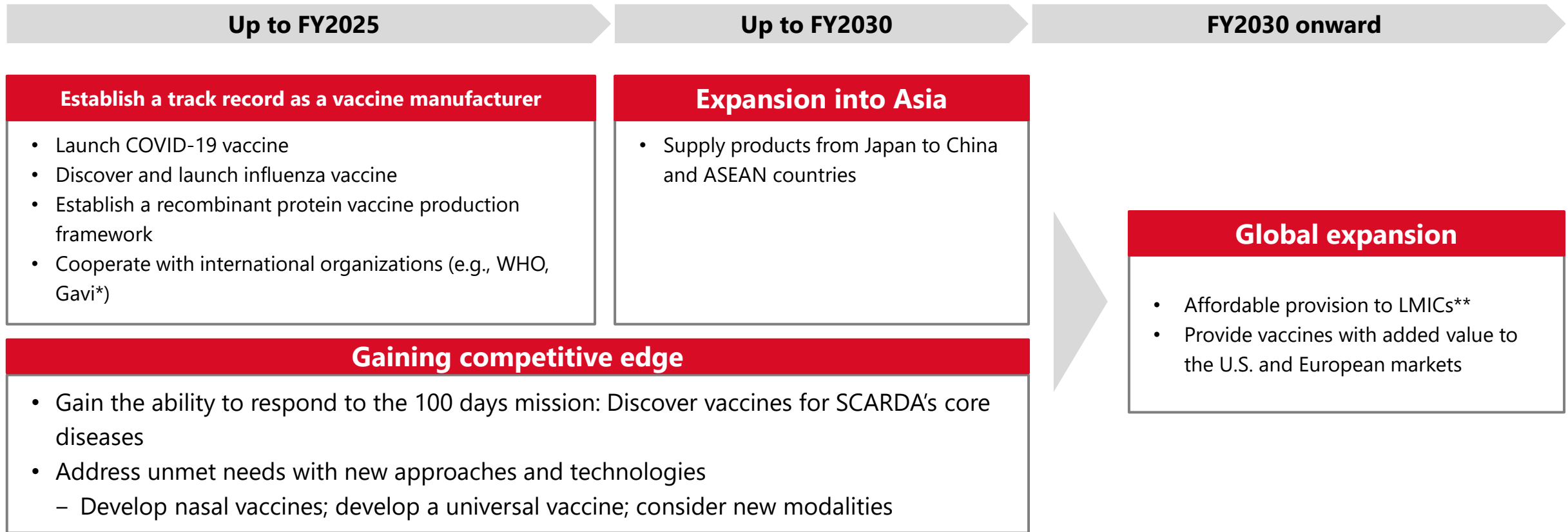
**The nasal residence time of the vaccine antigen is prolonged**

Mucosal Immunology | VOLUME 8 NUMBER 5 | SEPTEMBER 2015 p.1144-

\* Cationic nanogel delivery system  SHIONOGI

# Actions and Outlook for the Vaccine Business

**Strengthen global supply capabilities while introducing ever more advanced products**



# Appendix

# Pipeline: Infectious Disease

as of October 30, 2023



Preclinical	Phase 1	Phase 2	Phase 3	Submission
<b>S-872600</b> Influenza nasal vaccine	<b>S-337395</b> RSV infections		<b>Olorofim [F901318]</b> Invasive Aspergillosis	<b>Ensitreivir*2</b> COVID-19 treatment
<b>S-875670</b> COVID-19 nasal vaccine	<b>S-892216</b> COVID-19 treatment		<b>Cefiderocol</b> Aerobic Gram-negative bacterial infection (Pediatric)	<b>Ensitreivir</b> COVID-19 prevention
<b>S-540956</b> Nucleic acid adjuvant	<b>S-743229</b> AMR (Urinary tract infection)		<b>S-268019</b> COVID-19 Prophylactic vaccine	<b>Ensitreivir</b> COVID-19 treatment (Ages 5-11)
<b>S-554110</b> Nontuberculous mycobacterial infection				<b>S-268019</b> COVID-19 (Ages 5-19)
<b>S-268023</b> COVID-19 Prophylactic vaccine (XBB 1.5)				<b>Baloxavir</b> Influenza virus infection (Granules, < 20kg)
<b>S-649228</b> AMR (Various infectious diseases)				<b>Baloxavir *5</b> Influenza virus infection (5-11 years old, treatment and prevention)

Change from July 10 to October 30, 2023  
 S-266023 : Add Code No.  
 S-649228 : Add Code No.  
 S-743229 : Conducting Phase 1

### Out license

<b>S-365598</b> HIV infection	<b>S -555739 [Asapiprant]</b> Treatment by suppressing aggravation of COVID-19	<b>Baloxavir</b> Influenza virus infection (Pediatric, < 1 year old)	<b>Baloxavir</b> Influenza virus infection (Transmission)	<b>Baloxavir (US)</b> Influenza virus infection (Pediatric, < 1year old)
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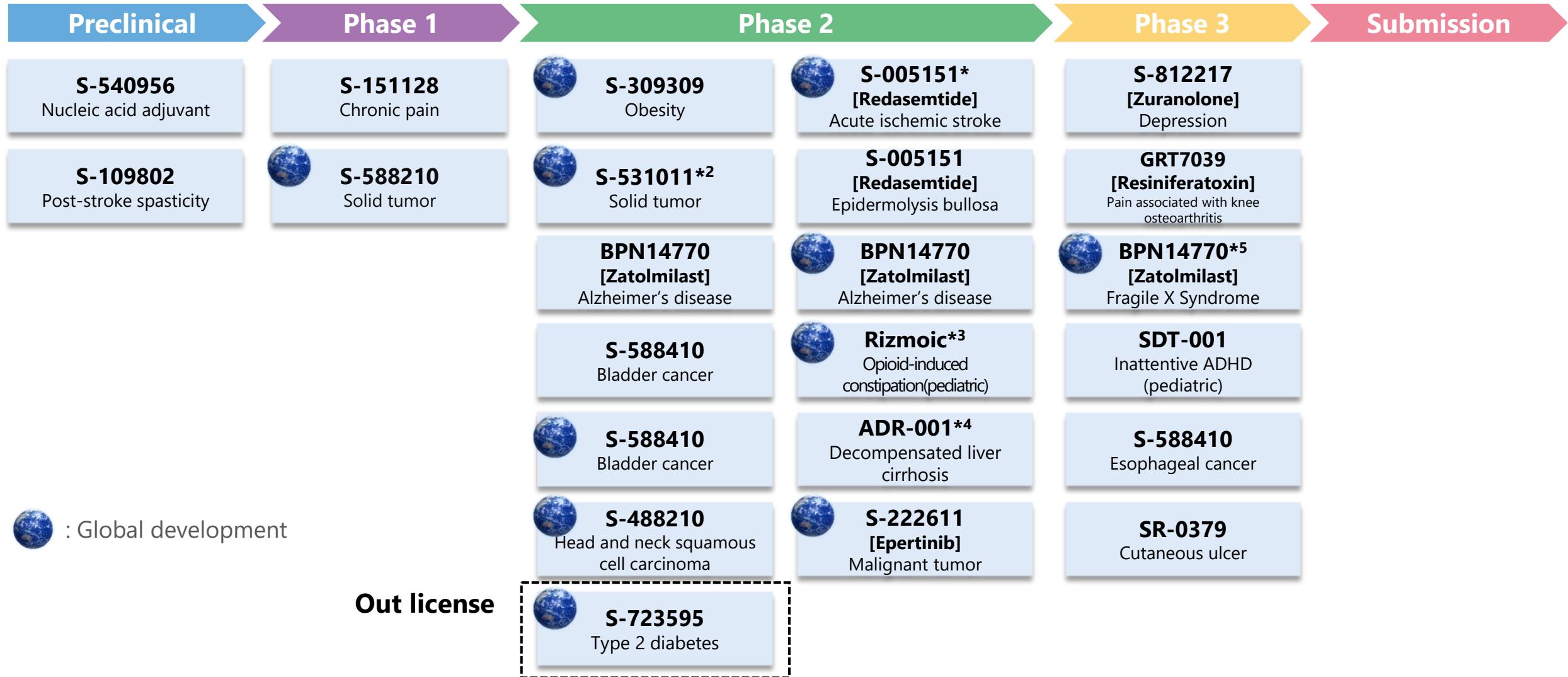
: Global development

  : Progress from July 31 to October 30, 2023    \*,\*3 Phase 2/3、Phase 3 ongoing    \*2 Korea    \*4 Japan, Taiwan    \*5 Taiwan



# Pipeline: QOL Diseases with High Social Impact

as of October 30, 2023

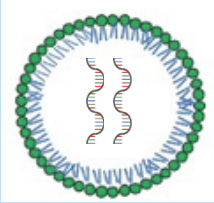


: Global development

# Vaccine Antigen Production Technology

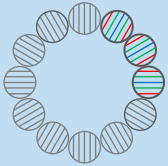
From Top-Line Results of the Phase 2/3 booster Trial for COVID-19 Recombinant-based Vaccine, S-268019 on March 4, 2022 (partially revised)

**mRNA vaccine**  
(\*COMIRNATY)  
(\*Spikevax)



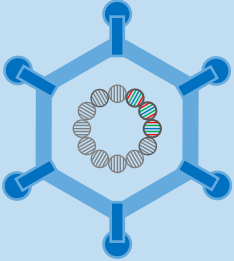
Stabilization by conversion from RNA to DNA

**DNA vaccine**  
(AG0302-COVID19)



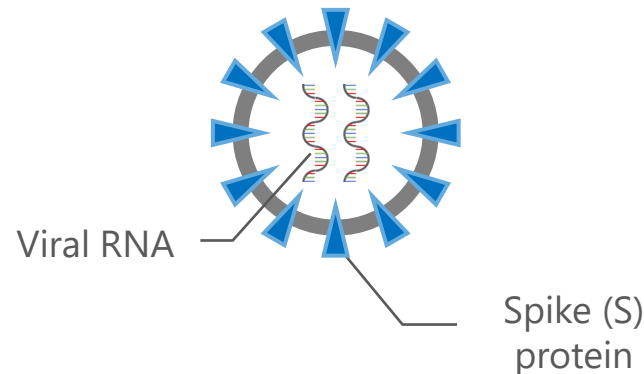
Protection of DNA by shells such as adenovirus

**Virus vector vaccine**  
(\*Vaxzevria)  
(\*JCOVDEN)

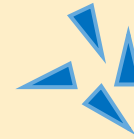


**New generation technology**

## SARS-CoV-2 virus particle (RNA virus)

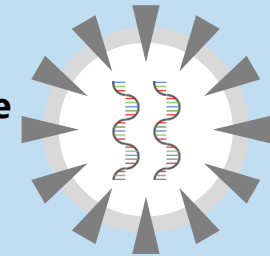


**Recombinant protein vaccine**  
(\*NUVAXOVID)  
**(SHIONOGI)**



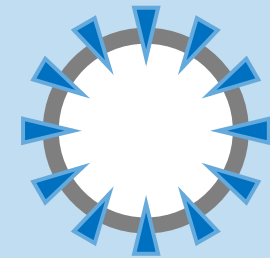
Inactivation of virus by heat/chemical treatment

**Inactivated vaccine**  
(KD-414)



Empty virus particles without genome

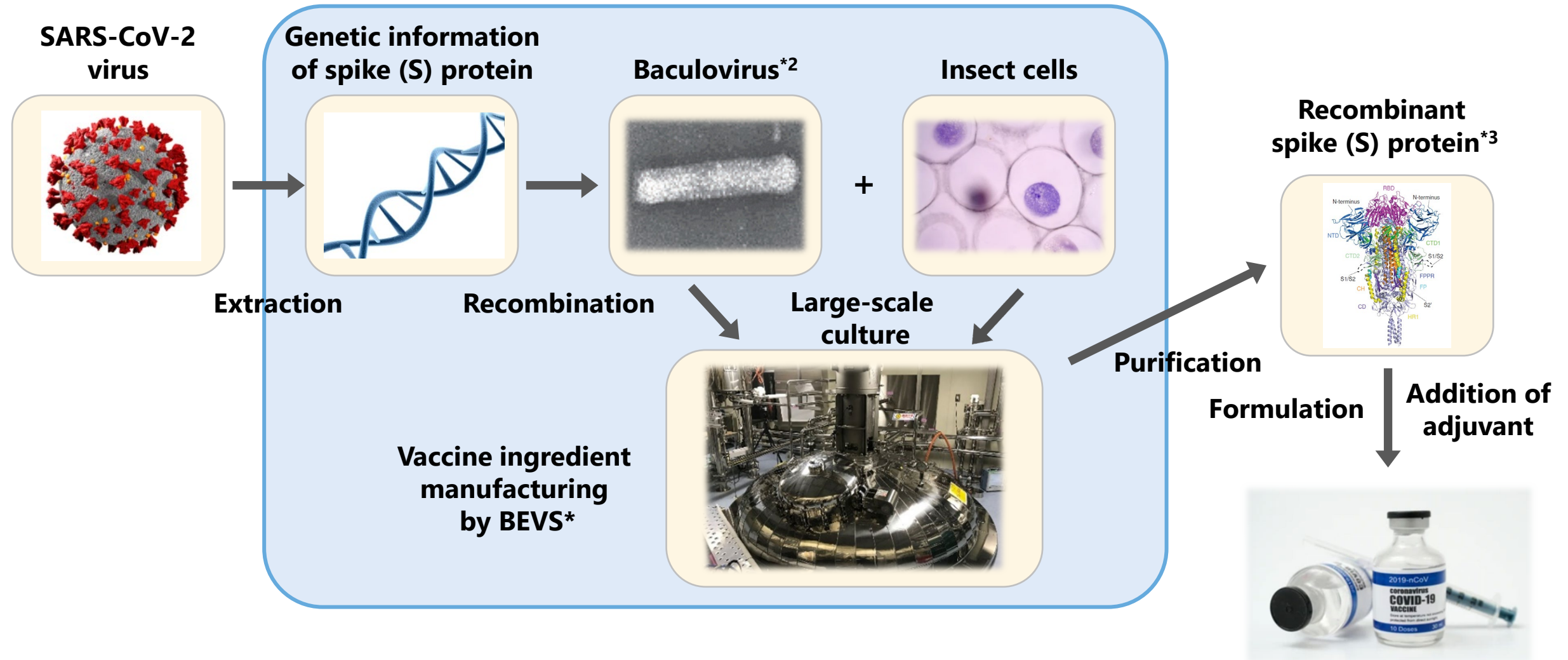
**\*\*VLP vaccine**  
(COVIFENZ)



**Traditional technology**



# Manufacturing process of recombinant protein vaccine by BEVS\*



# Forward-Looking Statements

- Forecast or target figures in this material are neither official forecasts of earnings and dividends nor guarantee of target, achievement and forecasts, but present the midterm strategies, goals and visions. Official earnings guidance should be referred to in the disclosure of the annual financial report (*kessan tanshin*) in accordance with the rules set by Tokyo Stock Exchange.
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