

The background of the advertisement features a dramatic landscape of colorful, eroded hills in shades of red, orange, and brown. A large, bright sun or moon is partially visible on the right side, casting a warm glow over the scene. The sky is filled with soft, orange-hued clouds.

Phathom.  
PHARMACEUTICALS

# **CHANGING THE LANDSCAPE IN GI**

*Going beyond to advance treatments for patients with acid-related disorders*

## **US APPROVAL OF VOQUEZNA® IN EROSIVE GERD & *H. pylori***

November 2023

NASDAQ: PHAT

# Safe harbor

This presentation contains forward-looking statements. All statements other than statements of historical facts contained in this presentation, including statements regarding our future results of operations and financial position, anticipated milestones, anticipated cash runway, expectations of generating stability data necessary to support the proposed shelf life of vonoprazan, business strategy, prospective products, product approvals, research and development costs, timing and likelihood of success, plans and objectives of management for future operations, and future results of current and anticipated products, are forward-looking statements.

In some cases, you can identify forward-looking statements by terms such as “may,” “will,” “should,” “expect,” “plan,” “anticipate,” “could,” “intend,” “target,” “project,” “contemplates,” “believes,” “estimates,” “predicts,” “potential” or “continue” or the negative of these terms or other similar expressions. These statements involve known and unknown risks, uncertainties and other important factors that may cause our actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements. These risks, uncertainties and other factors include, without limitation: our ability to launch and successfully commercialize approved products containing vonoprazan; our new drug application for non-erosive GERD may not be filed or approved by the FDA; our Phase 3 trial for as need dosing of vonoprazan for non-erosive GERD may not successfully be completed; the inherent risks of clinical development of vonoprazan; our dependence on third parties in connection with product manufacturing, research and preclinical and clinical testing; regulatory developments in the United States and foreign countries; unexpected adverse side effects or inadequate efficacy of vonoprazan that may limit its development, regulatory approval and/or commercialization, or may result in recalls or product liability claims; our ability to obtain and maintain intellectual property protection for vonoprazan; our ability to comply with our license agreement with Takeda; our ability to achieve and maintain adequate levels of coverage and reimbursement for vonoprazan; the availability of additional funds under our revenue interest financing agreement and term loan agreement; the sufficiency of our capital to fund our operations; and other risks described in our filings with the Securities and Exchange Commission (SEC), including our Annual Report on Form 10-K and any subsequent filings with the SEC. You are cautioned to place undue reliance on these forward-looking statements, which speak only as of the date hereof, and we undertake no obligation to revise or update this presentation to reflect events or circumstances after the date hereof. All forward-looking statements are qualified in their entirety by this cautionary statement, which is made under the safe harbor provisions of the Private Securities Litigation Reform Act of 1995.

This presentation also contains estimates and other statistical data made by independent parties and by us relating to market size and other data about our industry. This data involves a number of assumptions and limitations, and you are cautioned not to give undue weight to such estimates. In addition, projections, assumptions, and estimates of our future performance and the future performance of the markets in which we operate are necessarily subject to a high degree of uncertainty and risk.

## Today's Agenda

### » Introduction

- Terrie Curran, Chief Executive Officer

### » Erosive GERD & *H. pylori* Disease State & Label

- Terrie Curran, Chief Executive Officer

### » Commercial Strategy

- Martin Gilligan, Chief Commercial Officer

### » Question & Answer

- Terrie Curran, Chief Executive Officer
- Martin Gilligan, Chief Commercial Officer
- Azmi Nabulsi, Chief Operating Officer
- Molly Henderson, Chief Financial Officer



# VOQUEZNA® is the first ever innovative acid suppressant to demonstrate superiority compared to a PPI across multiple indications

## 1<sup>st</sup> PCAB entrant in US

Belonging to a novel class of therapies called Potassium Competitive Acid Blockers

## 3 successful Ph 3 programs

Registrational trials across three indications: *H. pylori* (HP), Erosive GERD, & Non-Erosive GERD

**Phathom is excited to introduce VOQUEZNA to the US market**

### Building upon demonstrated success:

- ✓ Approved in 10+ countries worldwide
- ✓ Tens of millions of patients treated
- ✓ Blockbuster in Japan: #1 prescribed acid suppressant<sup>1</sup>

**>20 million people treated annually for acid related disorders<sup>2</sup>**

+



**VOQUEZNA®**  
(vonoprazan) tablets 10 mg  
20 mg

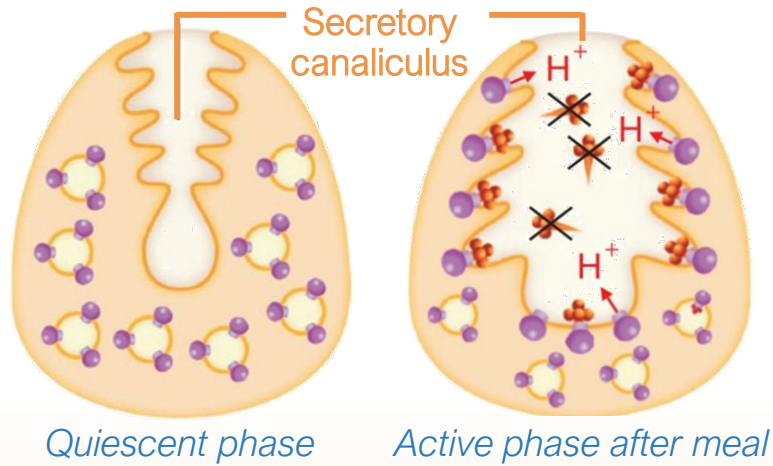
<sup>1</sup> IQVIA MIDAS as of June 30, 2023, amongst all PPI and PCAB molecules

<sup>2</sup> Published epidemiology studies in combination with company estimates based on its market research

# PCABs demonstrate mechanistic differences compared to PPIs



## PPI: COVALENTLY BINDING PRODRUG



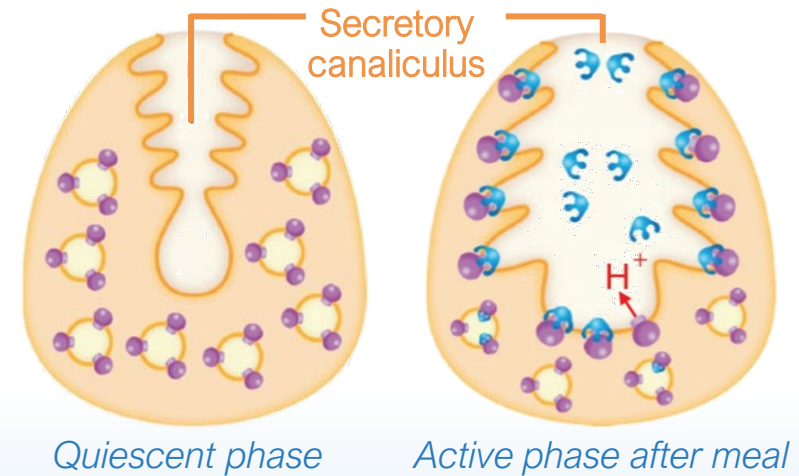
Tubulovesicle    Proton pump ( $H^+$ ,  $K^+$ -ATPase)

- **Short** plasma half-life
- Acid needed for activation but **unstable** in presence of acid
- **Meal required** to stimulate pumps

- ✗ **Slow** onset of action
- ✗ **Limited** potency
- ✗ **Limited** duration of activity



## VOQUEZNA: COMPETITIVE ENZYME INHIBITOR



Tubulovesicle    Proton pump ( $H^+$ ,  $K^+$ -ATPase)

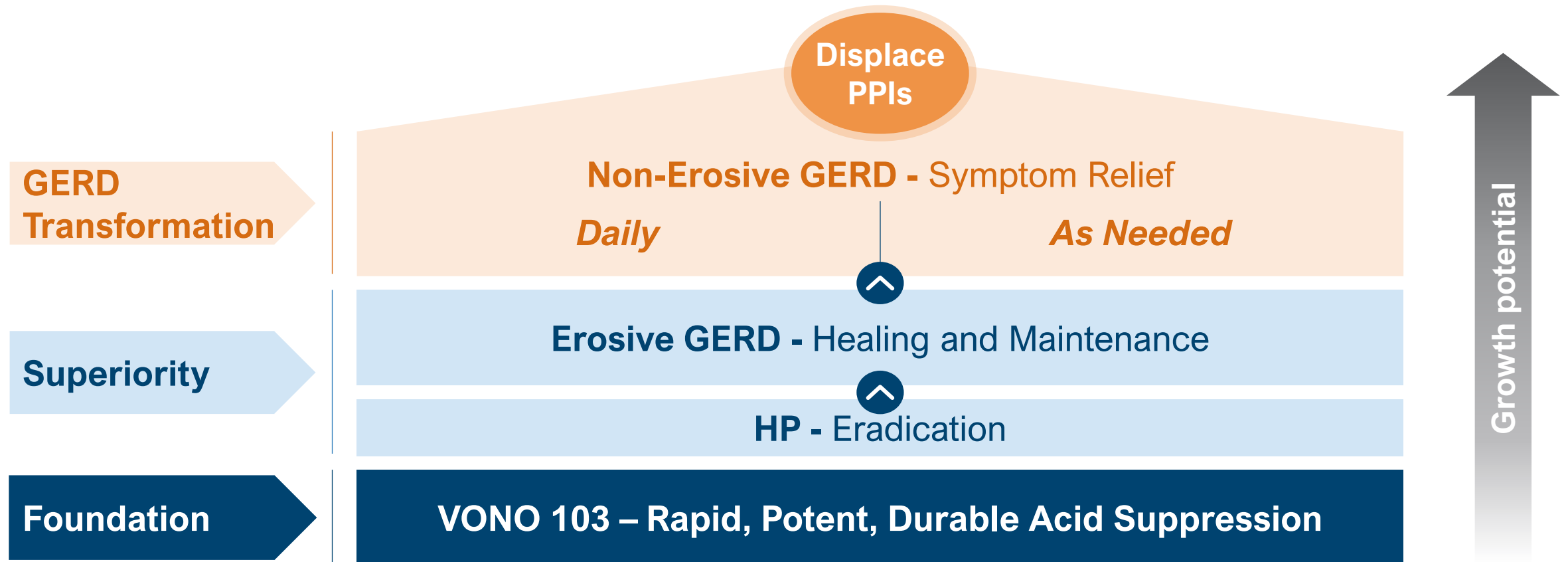
- **Long** plasma half-life
- **Stable** in acid
- **High** accumulation in canaliculus
- **Very slow** dissociation rate

- ✓ **Rapid** onset of action
- ✓ **Potent** acid control
- ✓ **Durable** 24-hr activity

# VOQUEZNA foundation is built on superior acid suppression to transform GERD management

VOQUEZNA US potential peak revenue opportunity >\$3B\*

Strategy to become the #1 prescribed acid suppressant



# VOQUEZNA® Triple Pak® & VOQUEZNA® Dual Pak® are indicated for the treatment of *Helicobacter pylori* (*H. pylori*) infection in adults

Product expected to be available in December



## *H. pylori* (HP) Disease State

- **Eradication rates** have fallen to **<80%** in the US<sup>1</sup>
- **Increasing antibiotic resistance & complex regimens** driving treatment failure
- Antibiotic potency increases at higher pH

With superiority claims versus a PPI-based triple therapy in the label, VOQUEZNA Triple Pak and Dual Pak offer a new approach to possible first line eradication

<sup>1</sup> Based on several retrospective queries of electronic records: Alsamman MA et al. Dig Dis Sci. 2019;64:2893-2898, Tariq H et al. Clin Exp Gastroenterol. 2020;13:25-33, and Argueta EA et al. Gastroenterology. 2021;160:2181-2183

# VOQUEZNA is now the FIRST AND ONLY FDA APPROVED PCAB in the US

Product expected to be available in December



VOQUEZNA is indicated for the healing and maintenance of healing of all grades of erosive esophagitis and relief of heartburn in adults.

VOQUEZNA is a novel, first-in-class, potassium-competitive acid blocker (PCAB) and the first innovative acid suppressant from a new drug class approved in the US in over 30 years.



# The US Erosive GERD market is primed for a new treatment option



## Prescription Based

~**85%** of the total PPI volume-based market is driven by Rx vs. OTC<sup>1</sup>

~**110M** PPI TRx are written and filled annually (all indications)<sup>2</sup>



## Large Population

~**7M** adults in the US are diagnosed with Erosive GERD and treated with a prescription annually<sup>3</sup>



## High Dissatisfaction

**Less than 50%** of patients are satisfied with current treatment<sup>4</sup>

~**60%** of patients believe better symptom control can be achieved<sup>4</sup>



## Frequent Switching

~**35%** of patients treated with a prescription PPI switch to a different PPI after ~**3 months**<sup>5</sup>

<sup>1</sup> IQVIA NPA & Consumer Health Care Data Q1-3 2022; <sup>2</sup> IQVIA Xponent retail & mail-order Rx data (2022); <sup>3</sup> Published epidemiology studies in combination with company estimates based on its market research

<sup>4</sup> Vaezi MF, Brunton S, Mark Fendrick A, et al. Patient journey in erosive esophagitis: real-world perspectives from US physicians and patients. BMJ Open Gastroenterology 2022;9:e000941. doi: 10.1136/bmjgast-2022-000941

<sup>5</sup> Phathom data on file, diagnosed Erosive GERD patients between Jan. 2016 - Feb. 2022 (n=265,717)

# Overview of VOQUEZNA prescribing information



Products		VOQUEZNA 10mg (30-ct) & VOQUEZNA 20mg (30-ct)
Indications & Usage		VOQUEZNA is a potassium-competitive acid blocker indicated for the: <ul style="list-style-type: none"><li>• Healing of all grades of erosive esophagitis and relief of heartburn associated with erosive esophagitis in adults.</li><li>• Maintenance of healing of all grades of erosive esophagitis and relief of heartburn associated with erosive esophagitis in adults.</li><li>• In combination with amoxicillin and clarithromycin for the treatment of <i>Helicobacter pylori</i> (<i>H. pylori</i>) infection in adults.</li><li>• In combination with amoxicillin for the treatment of <i>H. pylori</i> infection in adults.</li></ul>
Dosage and Administration		<u>Recommended Dosage:</u> <ul style="list-style-type: none"><li>• <i>Healing of Erosive Esophagitis:</i> 20 mg once daily for 8 weeks.</li><li>• <i>Maintenance of Healed Erosive Esophagitis:</i> 10 mg once daily for up to 6 months.</li><li>• <i>Treatment of H. pylori Infection:</i> see full prescribing information.</li><li>• See also full prescribing information for the recommended dosage by indication for patients with renal or hepatic impairment.</li></ul>
		<u>Administration Instructions:</u> <ul style="list-style-type: none"><li>• Take with or without food.</li><li>• Swallow whole; do not chew or crush.</li></ul>
Adverse Reactions		Most common adverse reactions in VOQUEZNA-treated patients are:
		<ul style="list-style-type: none"><li>• <u>Healing of Erosive Esophagitis</u> (≥2%): gastritis, diarrhea, abdominal distension, abdominal pain, and nausea.</li><li>• <u>Maintenance of Healed Erosive Esophagitis</u> (≥3%): gastritis, abdominal pain, dyspepsia, hypertension, and urinary tract infection.</li><li>• <u>Treatment of H. pylori Infection</u> (≥2%): diarrhea, dysgeusia, vulvovaginal candidiasis, abdominal pain, headache, hypertension, and nasopharyngitis.</li></ul>

For full prescribing and safety information, please visit [VOQUEZNA.com](https://www.voquezna.com)

# Erosive GERD label includes multiple superiority claims

## Healing

### Healing of All Grades of Erosive Esophagitis

The primary endpoint, was endoscopically confirmed complete healing of all grades of erosive esophagitis at Week 2 or Week 8, as shown in Table 12.

**Table 12: Rates of Healing of All LA Grades of Erosive Esophagitis at Week 2 or Week 8**

Timepoint	Treatment Group		Treatment Difference (95% Confidence Interval)
	VOQUEZNA 20 mg Once Daily N=514 %	Lansoprazole 30 mg Once Daily N=510 %	
Week 2 or 8	93	85	8 <sup>a</sup> (4.5, 12.2)
Week 2	74	68	

<sup>a</sup> Demonstrated noninferiority to lansoprazole.

### Healing of Erosive Esophagitis in Subgroups with LA Grade C or D Esophagitis

For the secondary endpoint of complete healing of erosive esophagitis at Week 2, superiority was demonstrated in the subgroup of patients with LA Grade C or D disease, 70% of 177 VOQUEZNA treated patients and 53% of 174 lansoprazole treated patients achieved healing (18% treatment difference; 95% CI 7.4, 27.4).

Complete healing of erosive esophagitis at either Week 2 or Week 8 in the subgroup of patients with LA Grade C or D disease was 92% in patients treated with VOQUEZNA and 72% in patients treated with lansoprazole. This endpoint was not statistically significant under the prespecified multiple testing procedure.

### Relief of Heartburn in Patients with Erosive Esophagitis During the Healing Phase

The percentage of 24-hour heartburn-free days through Week 8 was evaluated as a secondary endpoint and results are shown in Table 13.

**Table 13: Percentage of 24-Hour Heartburn-Free Days in Patients with Erosive Esophagitis through Week 8**

Parameter	Treatment Group		Treatment Difference (95% Confidence Interval)
	VOQUEZNA 20 mg Once Daily N=514 %	Lansoprazole 30 mg Once Daily N=510 %	
Mean ± SD	67 ± 35	64 ± 35	3 <sup>a</sup> (-1.6, 7.0)
Median	81	78	

<sup>a</sup> Demonstrated noninferiority to lansoprazole.

## Maintenance of Healing

### Maintenance of Healed Erosive Esophagitis

The primary endpoint was maintenance of healed erosive esophagitis (all grades) through Week 24. A secondary endpoint was maintenance of healed erosive esophagitis in the subgroup of patients with LA Grade C or D disease prior to randomization in the healing phase of the study.

The maintenance rates of healed erosive esophagitis are shown in Table 14.

**Table 14: Maintenance Rates of Healed Erosive Esophagitis in Adults through Week 24**

Baseline Severity	Treatment Group		Treatment Difference (95% Confidence Interval)
	VOQUEZNA 10 mg Once Daily N=293 %	Lansoprazole 15 mg Once Daily N=294 %	
All LA Grades:	N=293	N=294	
Week 24	79%	72%	7 <sup>a</sup> (0.2, 14.1)
LA Grade C or D:	N=95	N=96	
Week 24	75%	61%	13 <sup>b</sup> (0.02, 26.1)

<sup>a</sup> Demonstrated non-inferiority and superiority to lansoprazole.

<sup>b</sup> Demonstrated superiority to lansoprazole.

### Relief of Heartburn During Maintenance of Healed Erosive Esophagitis

The percentage of 24-hour heartburn-free days through Week 24 was evaluated for non-inferiority as a secondary endpoint as shown in Table 15.

**Table 15: Percentage of 24-Hour Heartburn-Free Days through Week 24**

Parameter	Treatment Group		Treatment Difference (95% Confidence Interval)
	VOQUEZNA 10 mg Once Daily N=293 %	Lansoprazole 15 mg Once Daily N=294 %	
Mean ± SD	81 ± 29	79 ± 27	2 <sup>a</sup> (-2.3, 6.8)
Median	95	89	

<sup>a</sup> Demonstrated non-inferiority to lansoprazole.

# Erosive GERD label includes multiple superiority claims

## Healing

Healing of All Grades of Erosive Esophagitis

The primary endpoint was endoscopically confirmed complete healing of all grades of erosive esophagitis at Week 2 or Week 8, as shown in Table 12.

Table 12: Rates of Healing of All LA Grades of Erosive Esophagitis at Week 2 or Week 8

Parameter	Treatment Group		Treatment Difference (95% Confidence Interval)
	VIVIDAZOLE 30 mg Once Daily Tablet	Lansoprazole 30 mg Once Daily Tablet	
Week 2 or 8	55	55	P
Week 2	24	26	(-3.3, 12.2)

† Referenced to lansoprazole.

Healing of Erosive Esophagitis in Subgroup with LA Grade C or D Esophagitis

For the secondary endpoint of complete healing of erosive esophagitis at Week 2 or Week 8, the percentage of patients with complete healing was 50% in patients treated with VIVIDAZOLE and 42% in patients treated with lansoprazole. This endpoint was not statistically significant under the prospectively defined multiple testing procedure.

Complete healing of erosive esophagitis at either Week 2 or Week 8 in the subgroup of patients with LA Grade C or D disease was 50% in patients treated with VIVIDAZOLE and 42% in patients treated with lansoprazole. This endpoint was not statistically significant under the prospectively defined multiple testing procedure.

Rate of Heartburn in Patients with Erosive Esophagitis During the Healing Phase

The percentage of 24-hour heartburn-free days through Week 8 was evaluated as a secondary endpoint and results are shown in Table 13.

Table 13: Percentage of 24-Hour Heartburn-Free Days in Patients with Erosive Esophagitis Through Week 8

Parameter	Treatment Group		Treatment Difference (95% Confidence Interval)
	VIVIDAZOLE 30 mg Once Daily Tablet	Lansoprazole 30 mg Once Daily Tablet	
Week 2 or 8	57.1	54.3	P
Week 2	25	26	(-1.8, 7.6)

† Referenced to lansoprazole.

superiority was demonstrated

## Maintenance of Healing

Maintenance of Healed Erosive Esophagitis

The primary endpoint was maintenance of healed erosive esophagitis all grades through Week 28. A secondary endpoint was maintenance of healed erosive esophagitis in the subgroup of patients with LA Grade C or D disease prior to randomization in the healing phase of the study.

The maintenance rates of healed erosive esophagitis are shown in Table 14.

Table 14: Maintenance Rates of Healed Erosive Esophagitis in Adults Through Week 28

Parameter	Treatment Group		Treatment Difference (95% Confidence Interval)
	VIVIDAZOLE 30 mg Once Daily Tablet	Lansoprazole 30 mg Once Daily Tablet	
Healed Erosive Esophagitis All LA Grades Week 28	75	75	P
LA Grade C or D Week 28	75	75	(-3.3, 12.2)

† Referenced to lansoprazole.

superiority to lansoprazole.

Demonstrated superiority

Percentage of 24-Hour Heartburn-Free Days Through Week 28

The percentage of 24-hour heartburn-free days through Week 28 was evaluated as a secondary endpoint and results are shown in Table 15.

Table 15: Percentage of 24-Hour Heartburn-Free Days Through Week 28

Parameter	Treatment Group		Treatment Difference (95% Confidence Interval)
	VIVIDAZOLE 30 mg Once Daily Tablet	Lansoprazole 30 mg Once Daily Tablet	
Week 2 or 8	57.1	54.3	P
Week 28	25	26	(-1.8, 7.6)

† Referenced to lansoprazole.



# VOQUEZNA's US safety profile is supported by expansive global clinical and post-marketing data

VOQUEZNA has demonstrated a well tolerated safety profile



## Global Safety Database

- » Thousands of patients with experience via clinical trials
- » No dose-related increase in adverse events was observed
- » Tens of millions of patients with experience via commercial usage

For full prescribing and safety information, please visit [VOQUEZNA.com](https://www.voquezna.com)

# Significant market opportunity and attractive commercial dynamics signal blockbuster potential



Large market  
with highly  
dissatisfied  
patients

First US approved  
acid suppressant  
with a new MOA  
in over 30 years

Differentiated  
profile with  
superiority claims  
versus a PPI

Strong physician  
interest with  
no branded  
competition

# Commercial Strategy

- Martin Gilligan, Chief Commercial Officer

# VOQUEZNA has a differentiated mechanism of action as the first and only approved PCAB in the United States



## Rapid

**Increased pH within 2-3 hours,**  
reaching pH >4 within 4 hours



## Potent

**Achieved strong acid  
suppression on Day 1,**  
with a mean pH of 4.6



## Durable

**Maintains continuous acid  
suppression over 24 hours**



# Strong healing rates vs. standard of care resonates with physicians<sup>1</sup>

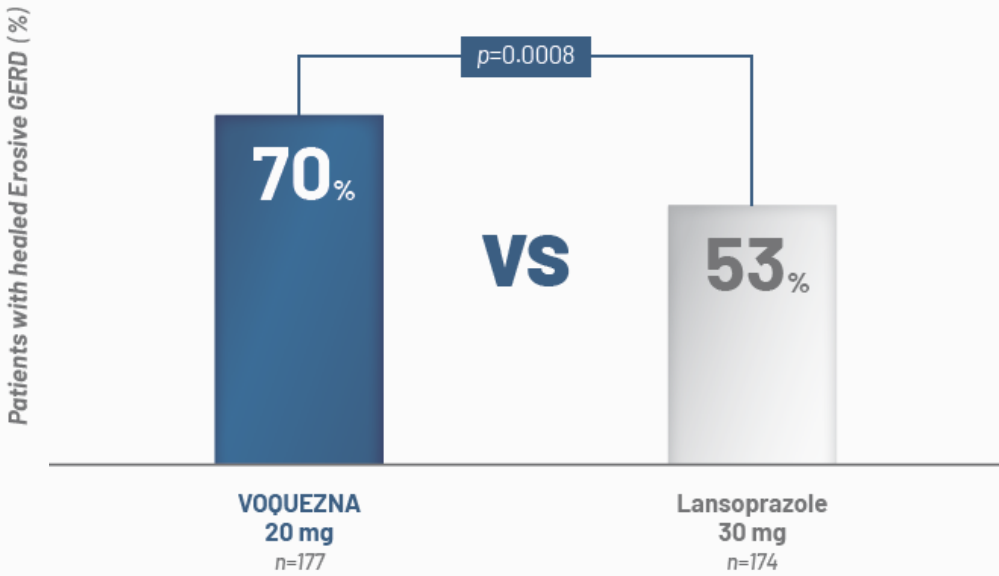
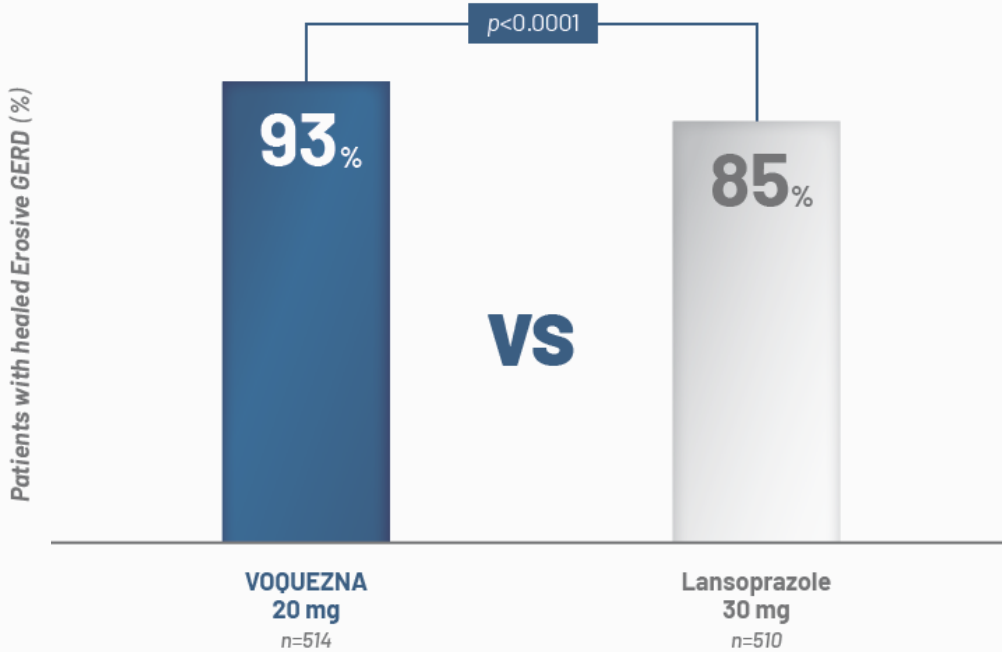
## VOQUEZNA for the Healing of Erosive GERD in Adults

93% of VOQUEZNA patients achieved healing

Achieved superior healing rates in patients with moderate-to-severe disease

PRIMARY NONINFERIORITY ENDPOINT:  
COMPLETE HEALING RATES BY WEEK 8

SECONDARY SUPERIORITY ENDPOINT:  
COMPLETE HEALING RATES AT WEEK 2 FOR GRADES C/D



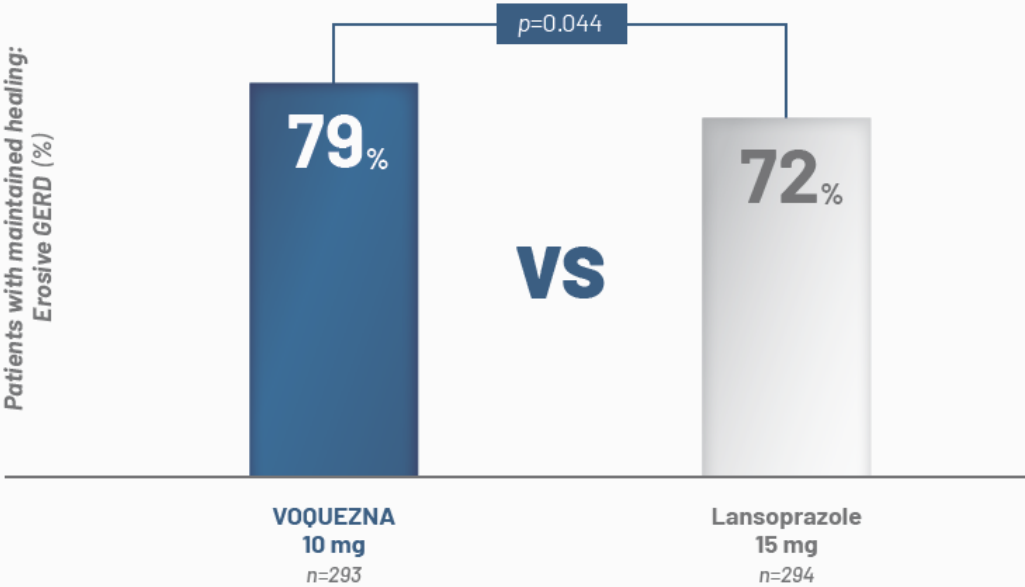
# Superior maintenance of healing data differentiates VOQUEZNA

## VOQUEZNA for the Maintenance of Healing of Erosive GERD in Adults

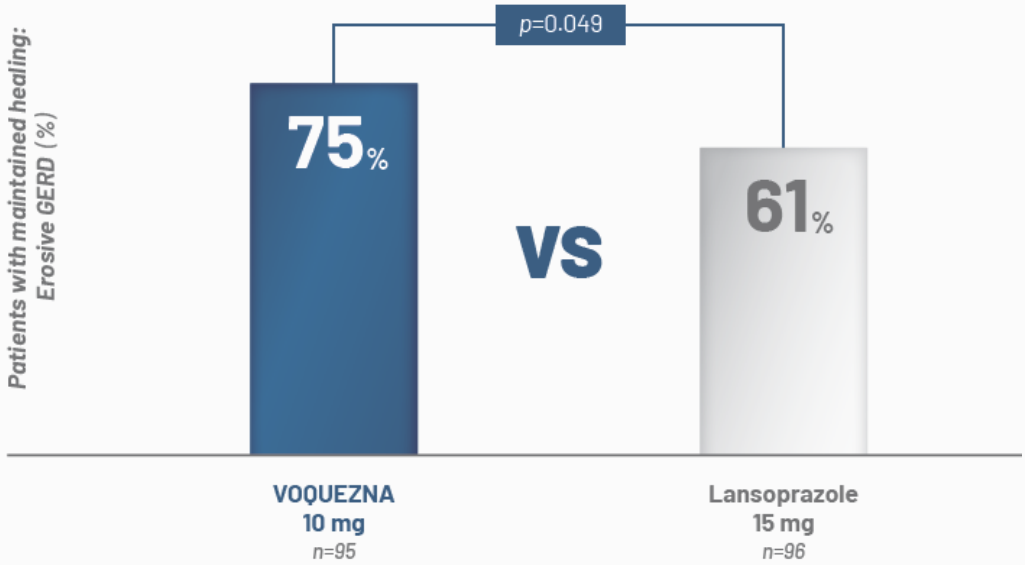
Superior rates of sustained healing in all grades with VOQUEZNA vs a PPI

Superior sustained healing rates with VOQUEZNA vs a PPI in patients with moderate-to-severe disease

SECONDARY SUPERIORITY ENDPOINT: SUPERIOR MAINTENANCE OF HEALING RATES THROUGH WEEK 24 IN ALL GRADES



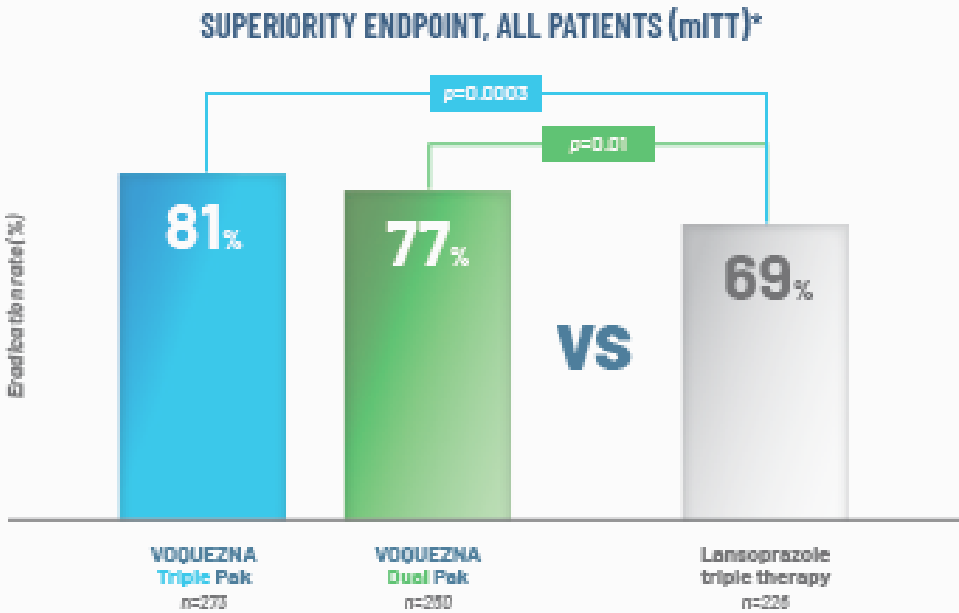
SECONDARY SUPERIORITY ENDPOINT: MAINTENANCE OF HEALING RATES THROUGH WEEK 24 FOR GRADES C/D



# H. pylori superiority data addresses high unmet need

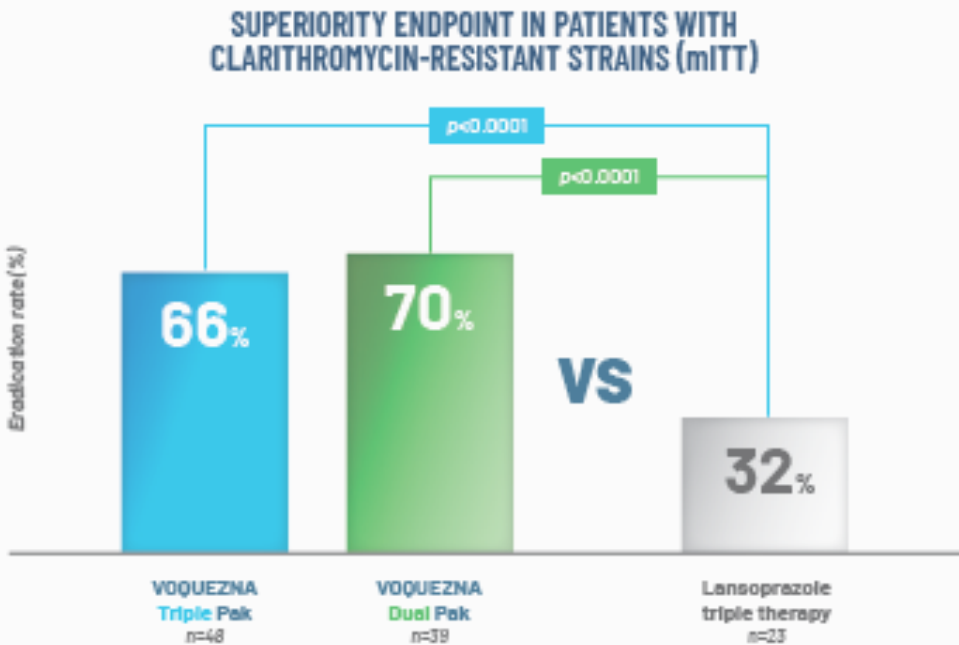
## VOQUEZNA Triple & Dual PAK for the Treatment of H. pylori in Adults

Superior eradication rates in the all-patients cohort



\*The all-patients cohort included patients with amoxicillin and clarithromycin resistance.

More than 2x the eradication rate in clarithromycin-resistant strains



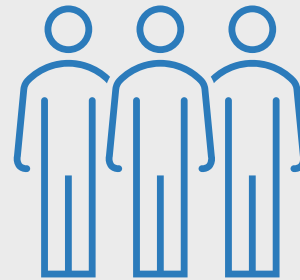
# Unique and differentiated profile resonates across all customer segments

## RAPID, POTENT, & DURABLE ACID SUPPRESSION



### Physician

Establish VOQUEZNA  
as a treatment of choice  
in Erosive GERD and HP



### Consumer

Drive patient  
demand

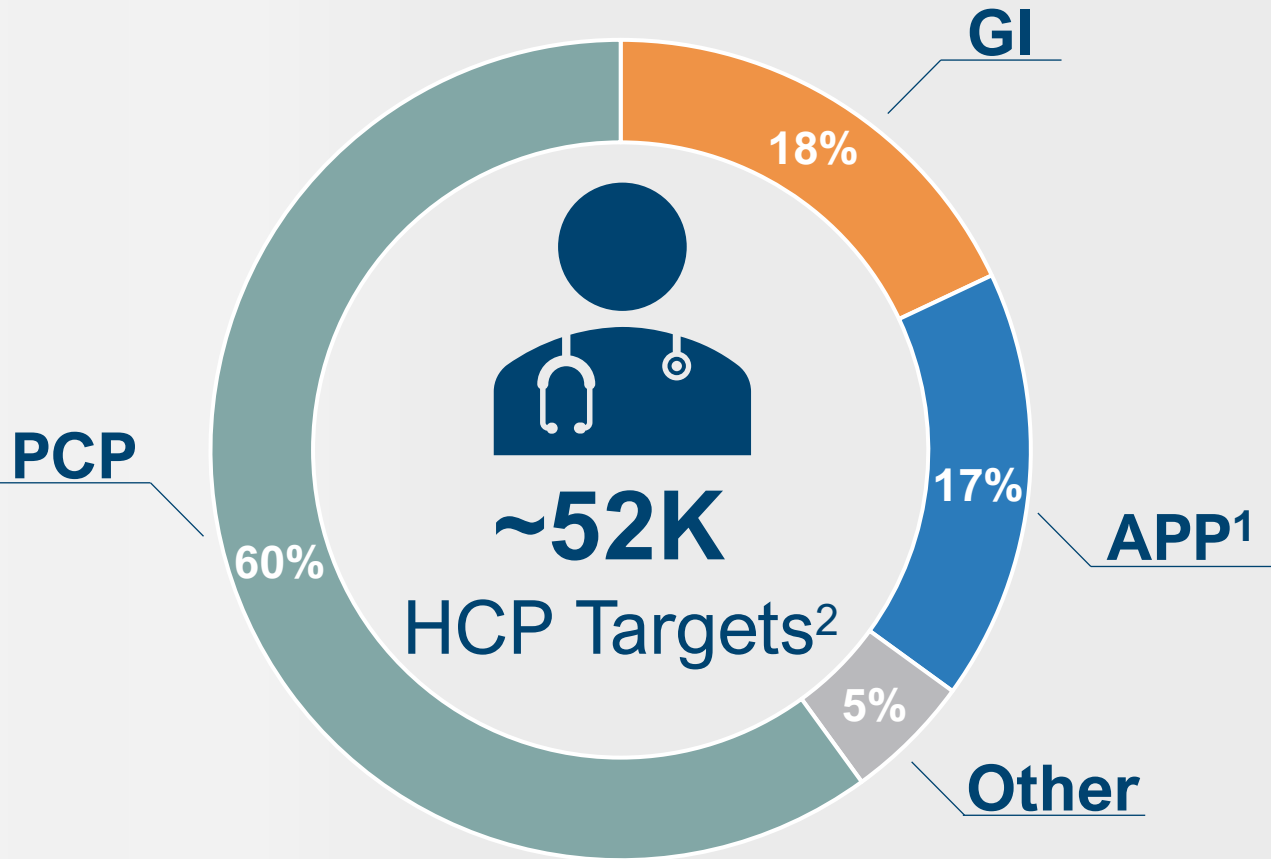


### Payer

Secure formulary  
access for PPI  
experienced patients



# VOQUEZNA sales force to target high volume PPI prescribers



**320**  
Sales Reps

Targeting high prescribing physicians who write an average **~1,200 PPI TRx annually²**

<sup>1</sup> APPs = advanced practice provider (i.e., nurse practitioners and physician assistants)  
<sup>2</sup> IQVIA APLD (Nov 2020 – Oct 2022) and IQVIA Xponent (Dec 2020 – Nov2022); Annual PPI prescription metric is based on total prescribing across all indications

# Ready to begin physician promotion today

Field Force  
Onboarding



Expansive Live / In-Person  
Education



Comprehensive Educational  
Speaker Program



High Reach and Frequency

Targeted HCPs will see VOQUEZNA



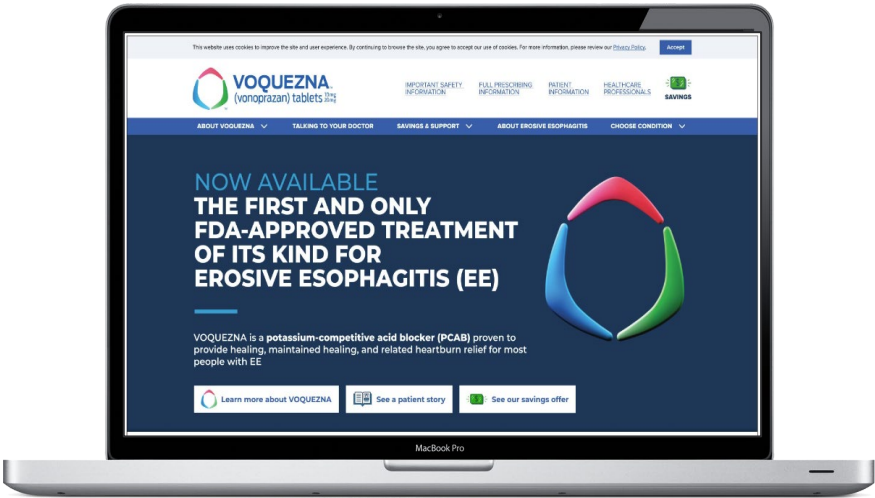
will receive digital messaging  
**>50x** per month

Broad Presence at Physician Conferences in 2024

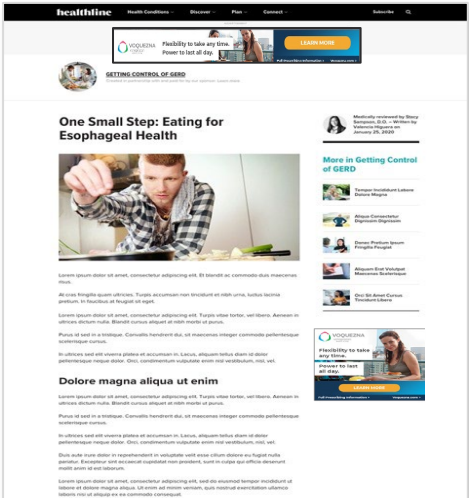


# Consumer activity coincides with availability of VOQUEZNA in pharmacies

## Targeted Online Promotion



## Promotion on Education Searches



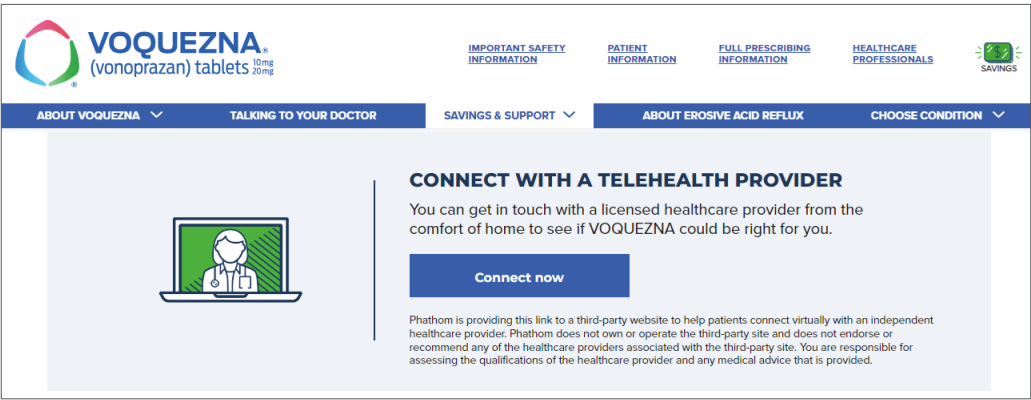
WebMD

EVERYDAY HEALTH

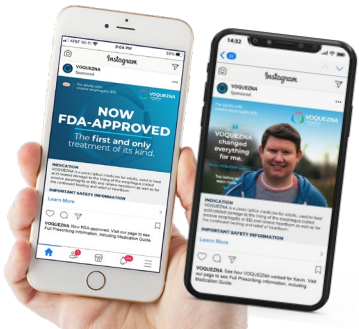
Remedy HEALTH

healthline

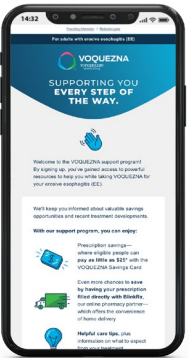
## Connect with a Telehealth Provider



## Social Ads



## Ongoing Engagement



Phathom  
PHARMACEUTICALS

# Payer strategy leverages strong HP Pak foundation

Superiority Data

+

Branded Price

+

Discount for Placement

=

ACCESS

## HP Paks established a strong base

 **VOQUEZNA TriplePak<sup>®</sup>**  
vonoprazan tablets 20 mg  
amoxicillin capsules 500 mg  
clarithromycin tablets 500 mg

 **VOQUEZNA DualPak<sup>®</sup>**  
vonoprazan tablets 20 mg  
amoxicillin capsules 500 mg

**65%**  
commercial  
coverage<sup>1</sup>



## Extending the strategy to GERD

 **VOQUEZNA<sup>®</sup>**  
(vonoprazan) tablets 10 mg  
20 mg

**Price:** \$650 WAC (30-ct bottle)

**Value:** Superiority vs. standard of care

**Access:** Assuming 1-step through PPI

**Goal:** Secure coverage for bottle  
NDCs

<sup>1</sup> Per MMIT formulary lookup tool as of September 29, 2023

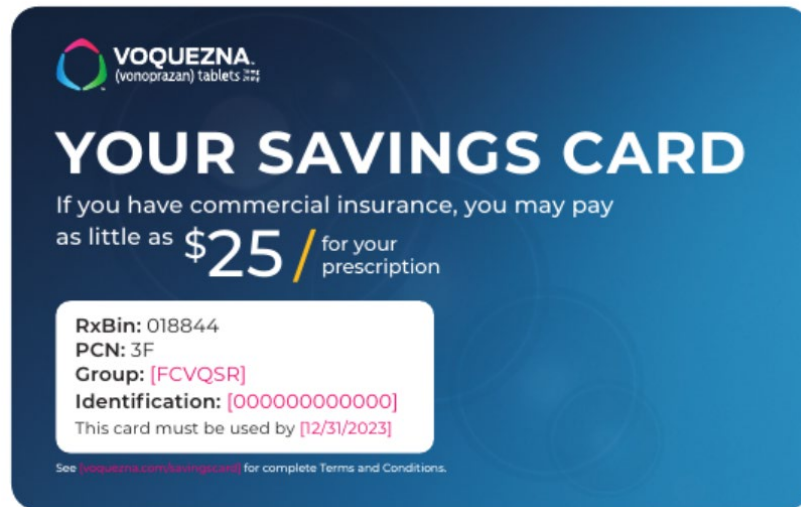
Note: VOQUEZNA Triple Pak and VOQUEZNA Dual Pak wholesale acquisition cost is \$812 per treatment course; VOQUEZNA component is taken BID during the 14-day regimen (i.e., 28 VOQUEZNA pills per therapy)



# Support in place for commercial patients who face coverage or affordability challenges

## Patient Co-Pay Assistance

Eligible patients with commercial insurance can pay as little as \$25 for their VOQUEZNA prescription<sup>1</sup>



## Enhanced Patient Access

BlinkRx is a digital fulfillment channel that ensures the lowest out of pocket cost for patients and free home delivery



<sup>1</sup> Eligible, commercially insured patients may pay as little as \$25 per prescription fill of VOQUEZNA; Offer not valid for patients enrolled in Medicare, Medicaid, or other federal or state healthcare programs; See VOQUEZNA.com for full program eligibility terms and conditions

**Goal to displace PPIs and become the #1 selling acid suppressant**



**VOQUEZNA<sup>®</sup>**  
**(vonoprazan) tablets** 10mg  
20mg

**RAPID**

**POTENT**

**DURABLE**

# Expected build towards a potential blockbuster opportunity

## 4Q '23

- + Product in market
- + Sales force onboarding
- + Limited access/coverage
- + HCP & consumer digital campaign launch

## 1Q '24

- + Full sales force in field
- + Erosive GERD formulary reviews begin
- + Ramp up of educational speaker programs

## 2Q '24

- + Growth in commercial access/coverage
- + Increasing script volume as access is secured
- + Initiate broader DTC campaign


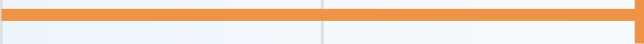

## 2H '24

- + Anticipated Non-Erosive Daily PDUFA target date
- + Accelerating script volume due to broader addressable population

# Three approved products across two indications, with more anticipated

## NOW APPROVED – Product expected in December



	Target indications	Phase 1 <sup>1</sup>	Phase 2 <sup>1</sup>	Phase 3	Milestones
Non-Erosive GERD	<b>Daily dosing</b> treatment of heartburn associated with Non-Erosive GERD				<b>NDA submitted</b> September 20, 2023  Targeting US <b>Launch in 3Q 2024<sup>2</sup></b>
	<b>As Needed</b> treatment of heartburn associated with Non-Erosive GERD				Positive Phase 2 results Planning to initiate Phase 3 trial in 2024
EoE	Treatment of eosinophilic esophagitis (EoE) for adult & pediatric use				Phase 2 trial design underway

<sup>1</sup> Phase 1 and 2 studies supporting applications for Erosive GERD and *H. pylori* were conducted by Takeda; Phathom has development & commercialization rights to vonoprazan in the US, Europe, & Canada

<sup>2</sup> Pending FDA acceptance of filing and approval

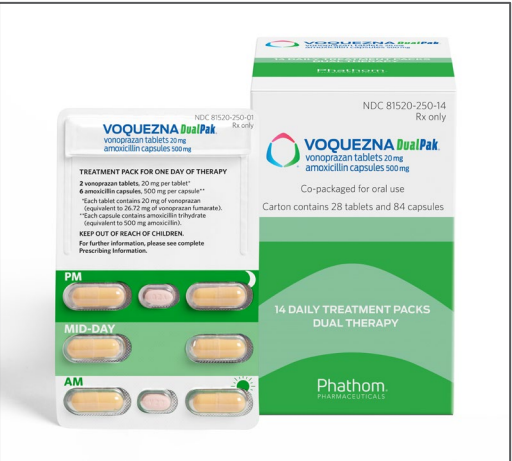
# Question & Answer

- Terrie Curran, Chief Executive Officer
- Martin Gilligan, Chief Commercial Officer
- Azmi Nabulsi, Chief Operating Officer
- Molly Henderson, Chief Financial Officer

# Appendix



# Overview of VOQUEZNA Triple Pak & Dual Pak prescribing information



Products	VOQUEZNA Triple Pak	VOQUEZNA Dual Pak
Indications & Usage	<p>Co-packaged product containing vonoprazan, a potassium-competitive acid blocker (PCAB), amoxicillin, a penicillin class antibacterial, and clarithromycin, a macrolide antimicrobial, indicated for the treatment of <i>Helicobacter pylori</i> (<i>H. pylori</i>) infection in adults.</p> <p>To reduce the development of drug-resistant bacteria and maintain the effectiveness of VOQUEZNA TRIPLE PAK, VOQUEZNA DUAL PAK and other antibacterial drugs, VOQUEZNA TRIPLE PAK and VOQUEZNA DUAL PAK should be used only to treat or prevent infections that are proven or strongly suspected to be caused by bacteria.</p>	<p>Co-packaged product containing vonoprazan, a PCAB, and amoxicillin, a penicillin class antibacterial, indicated for the treatment of <i>H. pylori</i> infection in adults.</p>
Dosage and Administration	<p>The recommended dosage regimen is vonoprazan 20 mg plus amoxicillin 1,000 mg plus clarithromycin 500 mg, each given twice daily (morning and evening, 12 hours apart), with or without food, for 14 days.</p>	<p>The recommended dosage regimen is vonoprazan 20 mg twice daily (morning and evening) plus amoxicillin 1,000 mg, three times a day (morning, mid-day, and evening), with or without food, for 14 days.</p>
Dosage Forms & Strengths	<p>Carton of 14 daily administration packs for morning and evening dosing, each containing the following three drug products:</p> <ul style="list-style-type: none"><li>• Tablets: Vonoprazan 20 mg</li><li>• Tablets: Clarithromycin 500 mg</li><li>• Capsules: Amoxicillin 500 mg</li></ul>	<p>Carton of 14 daily administration packs for morning, mid-day and evening dosing, each containing the following two drug products:</p> <ul style="list-style-type: none"><li>• Tablets: Vonoprazan 20 mg</li><li>• Capsules: Amoxicillin 500 mg</li></ul>
Adverse Reactions	<p>Most common adverse reactions (<math>\geq 2\%</math>) were dysgeusia, diarrhea, vulvovaginal candidiasis, headache, abdominal pain, and hypertension.</p>	<p>Most common adverse reactions (<math>\geq 2\%</math>) were diarrhea, abdominal pain, vulvovaginal candidiasis and nasopharyngitis.</p>

For full prescribing and safety information, please visit [VOQUEZNA.com](https://www.voquezna.com)