

CHANGING THE LANDSCAPE IN GI

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

Corporate Overview

July 2024

Safe harbor statement

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 VOQUEZNA, which will depend on a number of factors including coverage and reimbursement levels from governmental authorities and health insurers as well as market acceptance by healthcare providers; estimates of the number of patients with H. pylori and erosive and non-erosive GERD and our estimates on potential market size for VOQUEZNA; our Phase 3 trial for as need dosing of vonoprazan for non-erosive GERD may not successfully be completed and the FDA must approve our planned NDA for as needed dosing for non-erosive GERD prior to any commercial launch; 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.

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Phathom is focused on building VOQUEZNA® into a blockbuster

NEW

**NOW APPROVED for
a NEW Indication:
Non-Erosive GERD**



**Only FDA-approved treatment of
its kind** from a new class of acid
suppressants called Potassium
Competitive Acid Blockers (PCAB)

1st novel treatment in over 30 years

- Approved for the treatment of Erosive GERD, Non-Erosive GERD, and *H. pylori* infection
- VOQUEZNA is the first-ever acid suppressant to demonstrate superiority vs. a PPI across multiple indications¹

High unmet need & attractive commercial dynamics

- ~22M+ patients with GERD are diagnosed and treated annually, many of which are unsatisfied with their therapy and seeking innovative treatment options
- No branded competition in the space

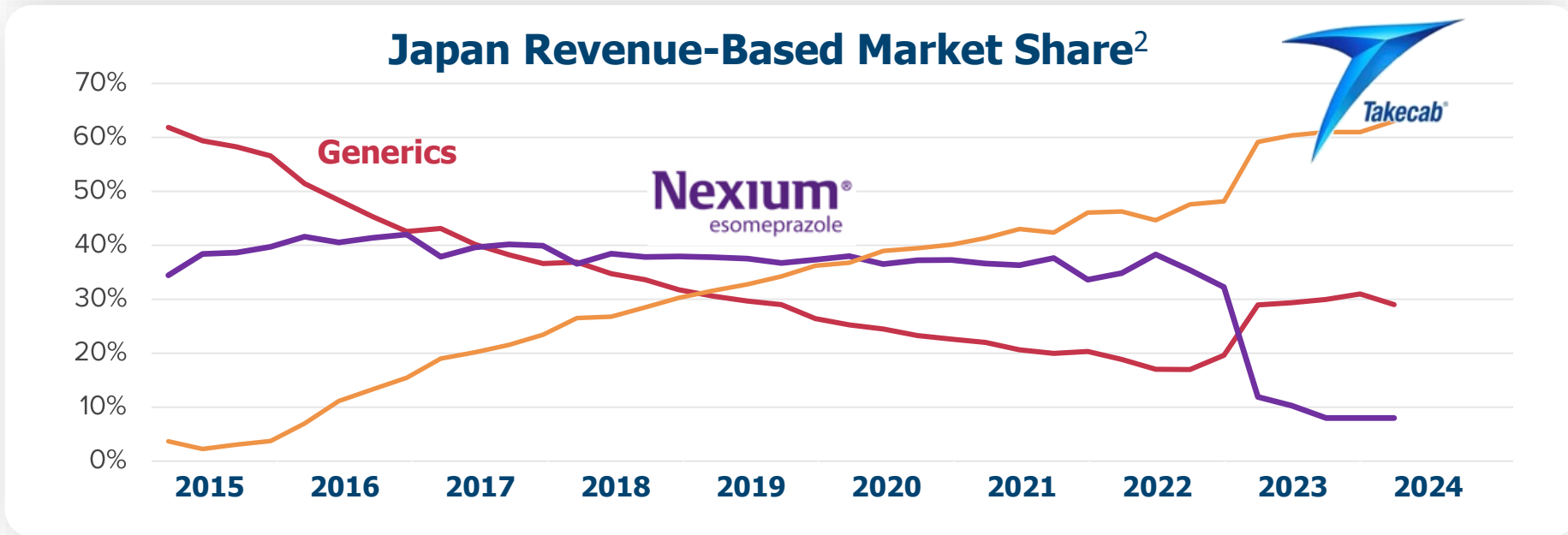
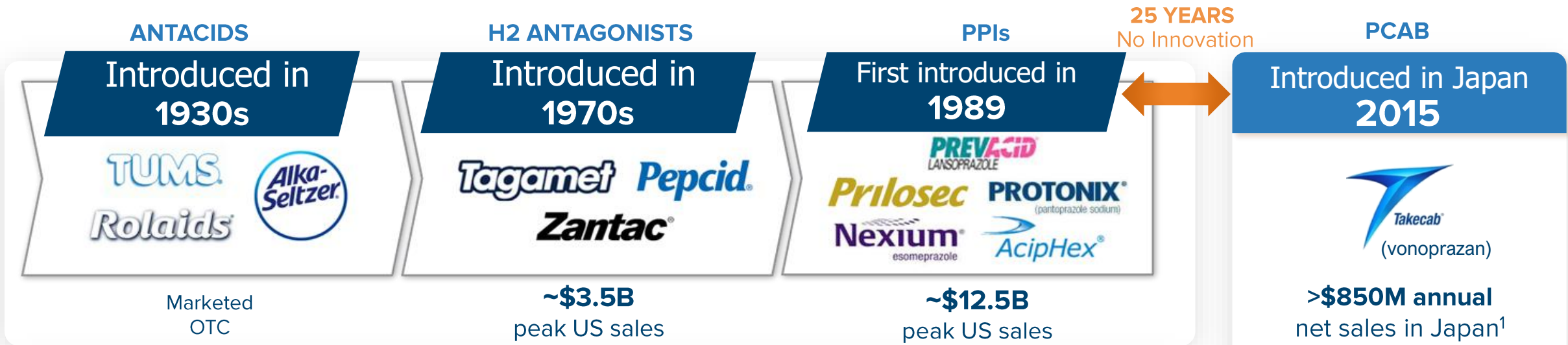
Building upon demonstrated success

- Approved in 10+ countries worldwide with >60 million patients treated
- Blockbuster in Japan: #1 prescribed acid suppressant²

¹ Superiority of vonoprazan demonstrated versus lansoprazole in studies of Erosive GERD and *H. pylori* infection

² IQVIA MIDAS as of March 31, 2024, amongst all PPI and PCAB molecules

Commercial success of acid suppression treatments



Vonoprazan has been highly successful in Japan

Driven predominantly by volumetric gains from generic competitors

Branded premium price

Majority of vonoprazan sales are in GERD

¹ US dollars based on conversion rate of 0.0090 dollars to one yen. Annual net sales figure reflects the twelve-months ended Dec. 31, 2021.

² IQVIA MIDAS as of March 31, 2024, amongst all PPI and PCAB molecules

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

Rapid

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

Durable

Maintains continuous acid suppression over 24 hours

Potent

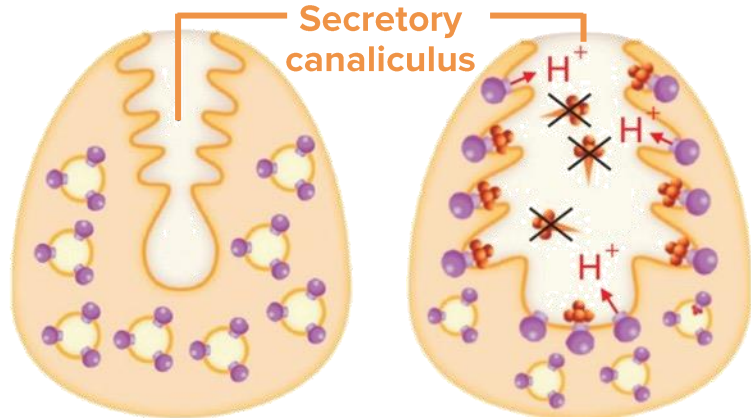
Achieved strong acid suppression on Day 1, with a mean pH of 4.6



Mechanistic differences between PPIs and PCABs



PPI: COVALENTLY BINDING PRODRUG



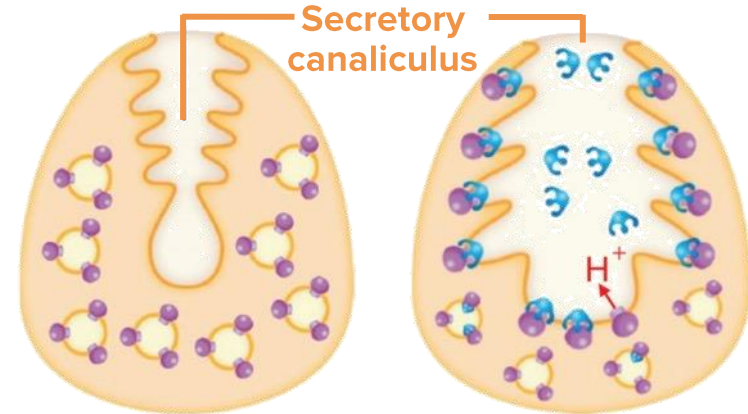
Quiescent phase *Active phase after meal*



- **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










Quiescent phase *Active phase after meal*



- **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

Three approved products across three indications, with more anticipated

	Target indications	Phase 1 ¹	Phase 2 ¹	Phase 3	Milestones	
Erosive GERD	Healing of Erosive GERD & relief of related heartburn in adults					
	Maintenance of healing of Erosive GERD & relief of related heartburn in adults					
H. pylori Infection	Treatment of <i>H. pylori</i> infection in adults				 	
						
Non-Erosive GERD	Daily dosing treatment of heartburn associated with Non-Erosive GERD					
	As Needed 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					Planning to initiate Phase 2 trial in 2024

¹Phase 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

GERD represents a large US market with high unmet need

~65M people in the US with GERD^{1,2}

~45M
people with Non-Erosive GERD^{1,2}

~15M adults
diagnosed & treated
with **Non-Erosive GERD**



\$3 Billion*
VOQUEZNA US
potential peak revenue
opportunity

~20M
people with
Erosive GERD^{1,2}

~7M adults
diagnosed & treated
with **Erosive GERD***



Prescription Based

~85% of the total PPI volume-based market is driven by Rx vs. OTC³

~110M PPI TRx are written and filled annually (all indications)⁴



High Dissatisfaction

Less than 50% of patients are satisfied with their current treatment⁵

¹ El-Serag HB, Sweet S, Winchester CC, Dent J. Update on the epidemiology of gastro-oesophageal reflux disease: a systematic review. Gut. 2014;63(6):871-880. doi:10.1136/gutjnl-2012-304269

² Machicado J.D., Greer J.B., Yadav D. (2020) Epidemiology of Gastrointestinal Diseases. In: Pitchumoni C., Dharmarajan T. (eds) Geriatric Gastroenterology. Springer, Cham. https://doi.org/10.1007/978-3-319-90761-1_7-1

³ IQVIA NPA & Consumer Health Care Data Q1-3 2022;

⁴ IQVIA Xponent retail & mail-order Rx data (2022)

⁵ 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


* Company estimates based on its market research.

VOQUEZNA vision builds on each targeted indication with the potential to transform the landscape of acid-related disorders and displace PPIs

Planned Launch Sequence

GERD Market Opportunity

Combined First Launch
4Q 2024



H. pylori infection
(or HP)

Increased eradication


GERD



Erosive GERD
(Erosive Esophagitis / EE)

Improved healing and maintenance

Second Launch
3Q 2024



Non-Erosive GERD
Daily dosing

Lasting symptom control

Potential Third Launch²

Non-Erosive GERD
As Needed dosing

Rapid symptom relief

~22M¹
total treated patients

~7M
treated
Erosive GERD patients

~15M
treated
Non-Erosive GERD patients

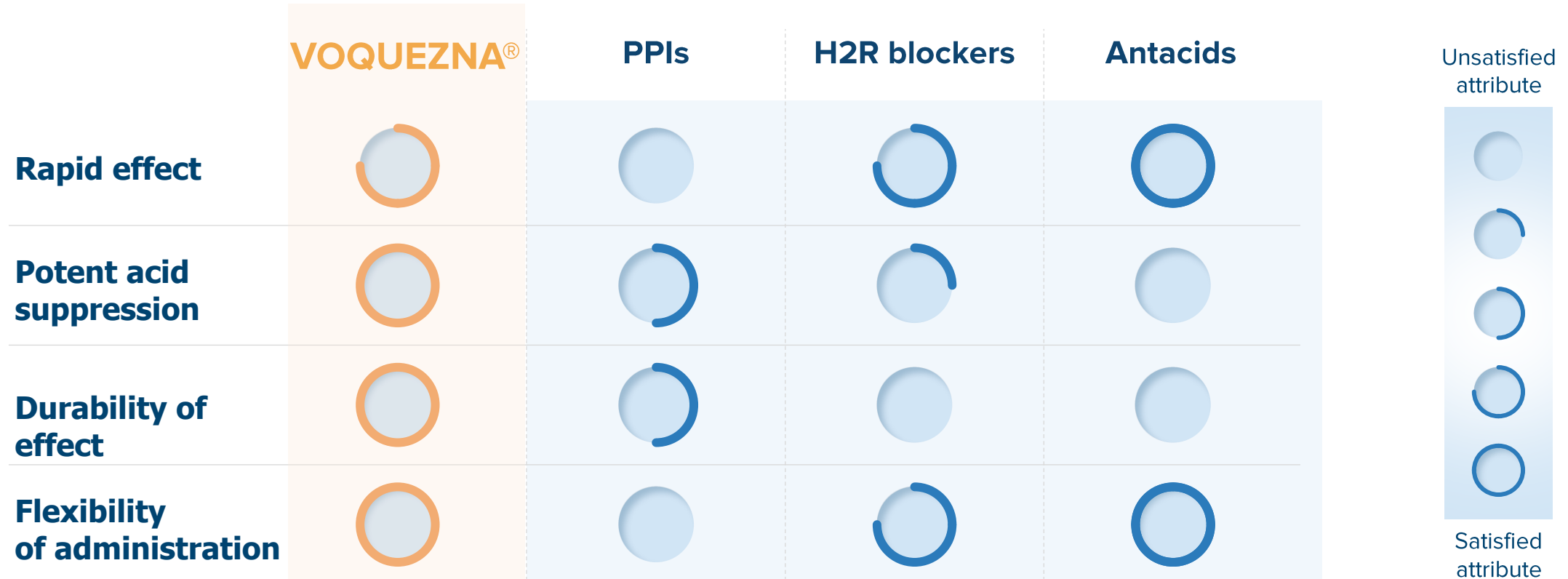
Goal to Displace PPIs

¹Company estimates based on its market research.

² Phase 3 As Needed trial initiation anticipated in 2024

. Vonoprazan has not been determined by the FDA to be safe or effective for the As Needed treatment of Non-Erosive GERD patients

VOQUEZNA's pharmacologic profile is well suited for the treatment of Non-Erosive GERD including a novel 'As Needed' dosing regimen

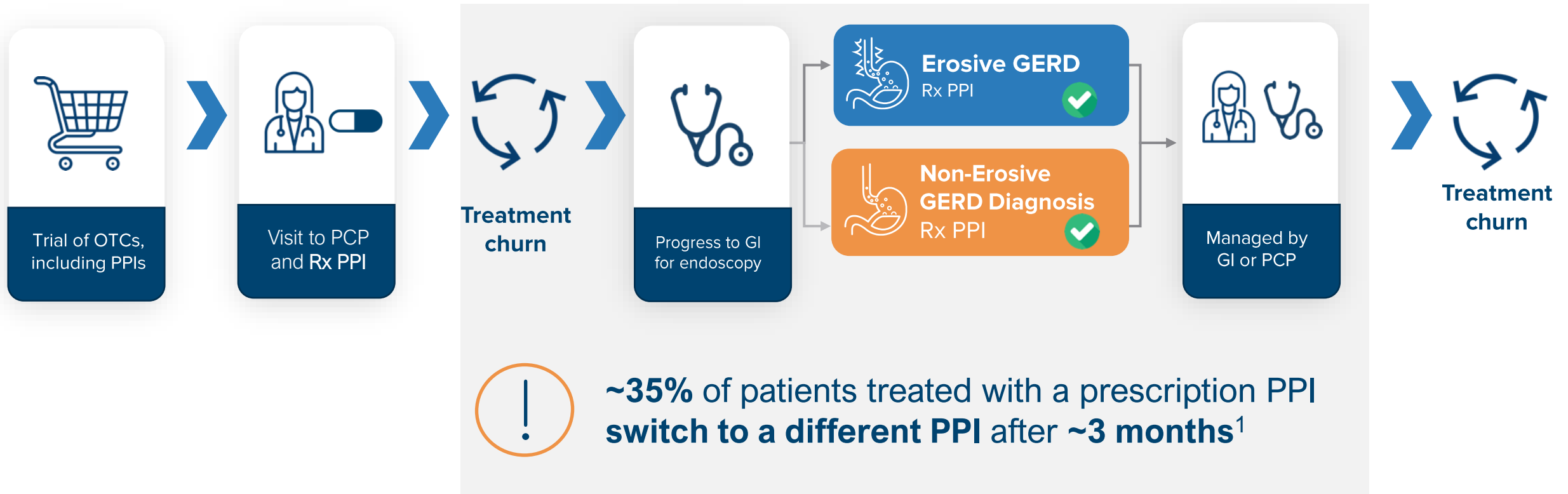


- ✓ FDA-approved as a daily treatment for adults with heartburn associated with Non-Erosive GERD
- ✓ Positive results reported in Ph 2 NERD-201 As Needed dosing trial with Ph 3 trial planned for 2024

FOR ILLUSTRATIVE PURPOSES ONLY – vonoprazan has not been determined by the FDA to be safe or effective for the As Needed treatment of Non-Erosive GERD patients, and no head-to-head studies have been conducted comparing vonoprazan to these agents in the Non-Erosive GERD patient population. Caution should be exercised when comparing data across unrelated studies due to differences in subject characteristics, trial designs, and other factors.

Typical GERD patient journey highlights current dissatisfaction

Erosive & Non-Erosive GERD patient journeys are similar; both include multiple lines of PPI therapy



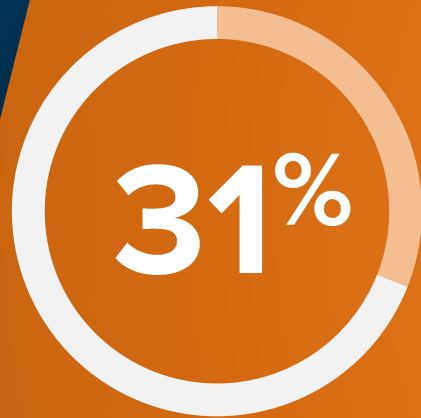
¹ Phathom data on file, diagnosed Erosive GERD patients between Jan. 2016 - Feb. 2022 (n=265,717)
Source: Visual represents a summary of patient journey qualitative market research, May 2020

Physician research indicates high intention to prescribe VOQUEZNA



Erosive GERD

HCPs expect to prescribe VOQUEZNA to 42% of their Erosive GERD patients¹



Non-Erosive GERD

HCPs expect to prescribe VOQUEZNA to 31% of their Non-Erosive GERD patients²

¹ Erosive GERD Demand Study / Jan 2022 / n=301 (151 GI; 100 PCP; 50 APP)

² Non-Erosive Demand Study / July 2023 / n=252 (101 GIs, 100 PCPs and 51 APPs)

Executing on three core goals during the early stages of launch

Unique and differentiated profile resonates across all customer segments

Consumer

Driving brand awareness and increasing demand



Physician

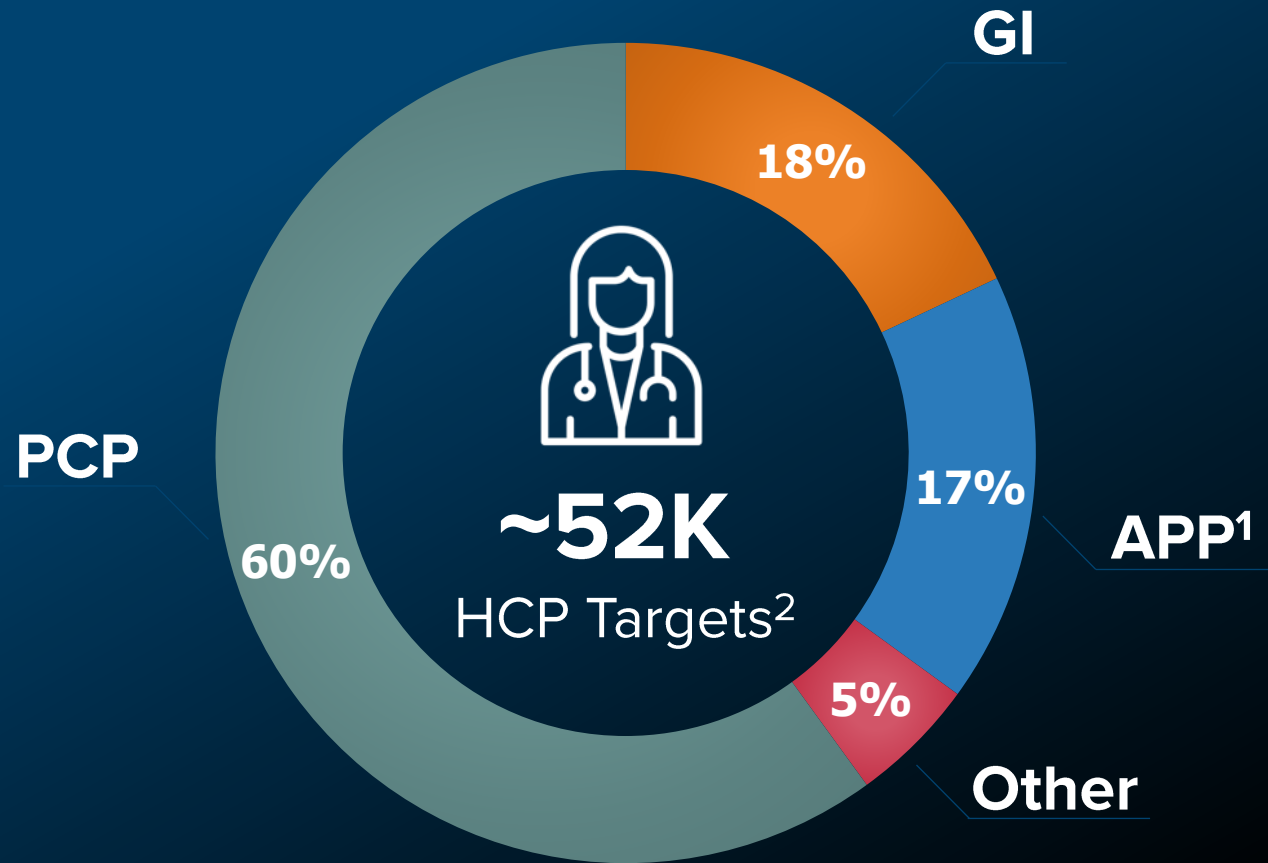
Communicating clinical superiority vs. a PPI¹ and establishing VOQUEZNA as a treatment of choice

Payer

Building widespread access for patients

¹ Superiority of vonoprazan demonstrated versus lansoprazole in studies of Erosive GERD and *H. pylori* infection

The VOQUEZNA sales force is targeting high volume PPI prescribers



320

Sales Reps



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

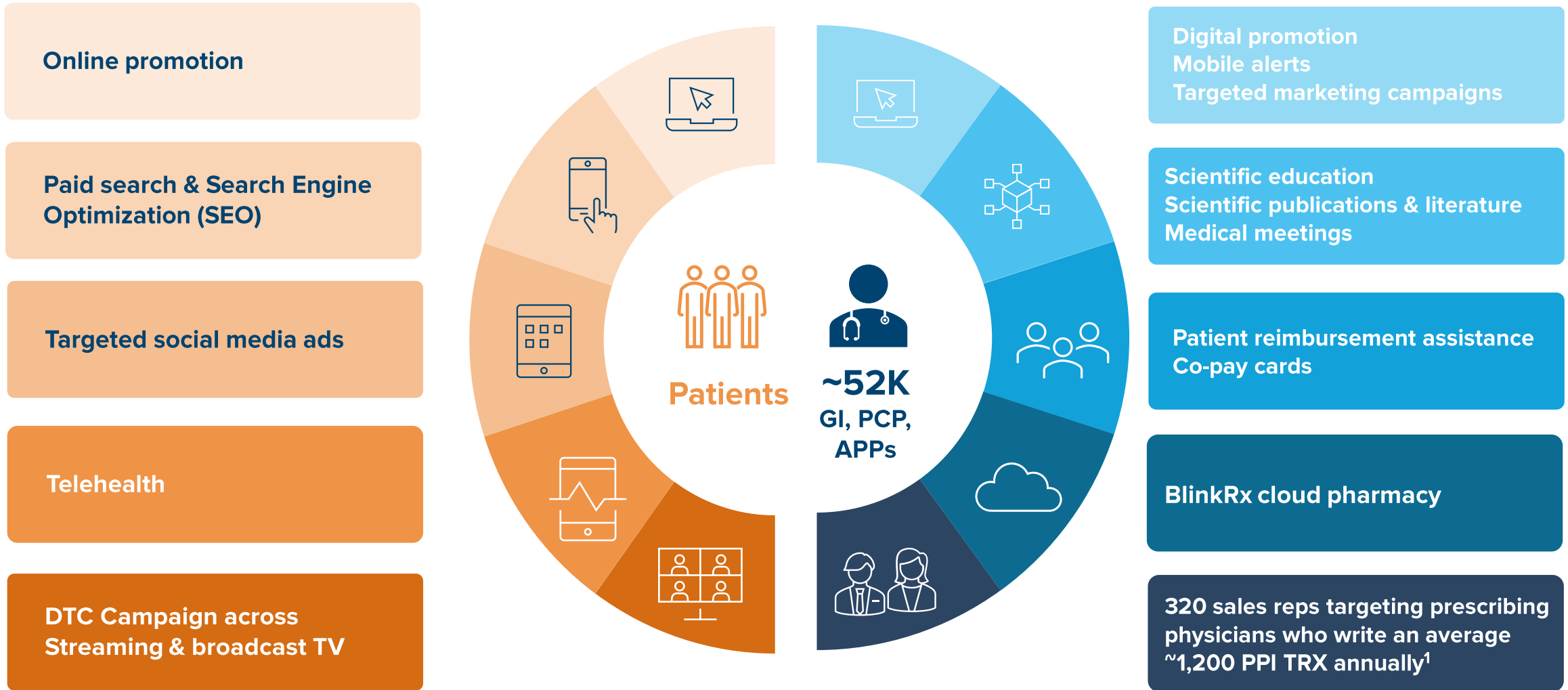
¹ APPs = advanced practice provider (i.e., nurse practitioners and physician assistants)

² IQVIA APLD (Nov 2020 – Oct 2022) and IQVIA Xponent (Dec 2020 – Nov2022); Annual PPI prescription metric is based on total prescribing across all indications

Promotional plans active across consumer and physician audiences

Consumers are responsive to comprehensive launch activation tactics resulting in high demand for VOQUEZNA

High volume HCPs are being reached by salesforce coupled with broad and aggressive communication campaign



Full-scale DTC Campaign aims to motivate patients to request VOQUEZNA

VOQUEZNA[®]
(vonoprazan) tablets 10 mg
20 mg

**VOQUEZNA CAN KICK
SOME ACID**

- **93% HEALED BY 2 MONTHS**
- **79% STAYED HEALED FOR 6 MONTHS**
- **24-HOUR HEARTBURN RELIEF ¹**

LIVE
ON BROADCAST
TELEVISION!

Building expanded commercial coverage with large payers and additional support in place for patients who face coverage or affordability challenges



48%

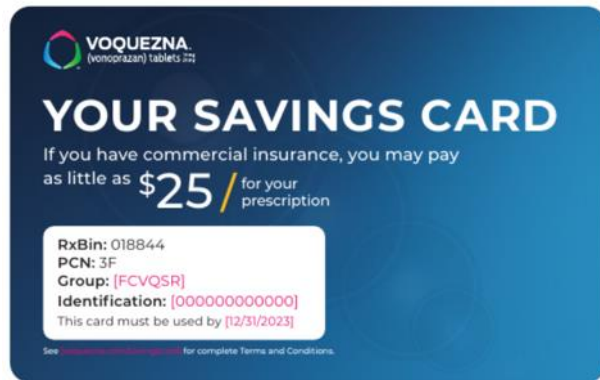
commercial coverage¹

~72M

commercial lives covered¹

Additional coverage anticipated throughout 2024

Patient Co-Pay Assistance²



Enhanced Patient Access



- Low out-of-pocket cost for eligible patients
- Simple patient experience
- Prior Authorization support
- Free at-home delivery
- Available nationwide
- Dedicated customer support

¹ Per MMIT formulary lookup tool as of 5/7/2024.

² 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

Commercial launch continues to build momentum and demonstrate strong patient and physician demand for VOQUEZNA



43,000+

Total
VOQUEZNA
Demand¹

Previously: 14,000+ (as of 3/3/24)



17,500+

Filled
VOQUEZNA
Prescriptions²



3,800+

Unique
VOQUEZNA
Writers³

Previously: 1,200+ (as of 2/16/24)

¹ Unique prescriptions written; IQVIA + BlinkRx as of 4/26/24.

² IQVIA + BlinkRx as of 4/26/24.

³ IQVIA + BlinkRx as of 4/19/24.

Significant opportunity and attractive commercial dynamics exist for blockbuster potential

High Unmet Needs



Large population & high level of dissatisfaction

Differentiated Profile



Novel MOA & clinical differentiation

Physician Attractiveness



Strong physician interest & concentrated high prescribers

No Branded Competition



No branded competition & share of voice ownership

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

Financial highlights

\$322.2M

cash and cash
equivalents

(as of March 31, 2024)

\$1.9M

in 1Q 2024
net revenues

(1st full quarter of launch)

**Debt Facility:
\$300M**

\$150M principal
outstanding

\$150M potentially
available¹

~59M shares
outstanding

~68M shares
fully diluted

(as of March 31, 2024)

Based on our current operating plan:

We believe our existing cash, cash equivalents, and other anticipated capital²
will be sufficient to **fund operations through the end of 2026**

¹ The remaining \$150M, of the \$300M term loan, is potentially available in four tranches: (1) \$25M through June 15, 2024 (2) \$25M through December 15, 2024 (3) \$50M subject to the achievement of a specified revenue milestone through June 30, 2025 (4) \$50M subject to the achievement of a specified revenue milestone through December 31, 2025.

² Assumes full drawdown of the remaining \$150M under the amended term loan and anticipated future product sales, pursuant to the operating plan.

Regulatory exclusivity expected through November 2032



Anticipated Regulatory Exclusivity

5 years NCE exclusivity +
5 years GAIN Act NCE* exclusivity +
6 months pediatric exclusivity =
November 2032



Key Considerations

- GAIN Act NCE exclusivity tied to the active moiety, vonoprazan, anticipated to apply to all Phathom products containing vonoprazan, regardless of indication
- First ANDA seeking approval of a generic vonoprazan cannot be filed until expiration of regulatory exclusivity
- Subsequent generic launch timing subject to FDA review and approval



Patent Exclusivity**



Vonoprazan Species

**Vonoprazan Species
US Patent 7,977,488**
expires
Aug. 11, 2028

Expiration date
with expected patent
term extension:
April 1, 2030



Vonoprazan Fumarate

**Vonoprazan Fumarate
Formulation US Patent**
9,186,411 expires
Aug. 11, 2030



VOQUEZNA[®]
(vonoprazan) tablets ^{10mg}
^{20mg}

RAPID

POTENT

DURABLE

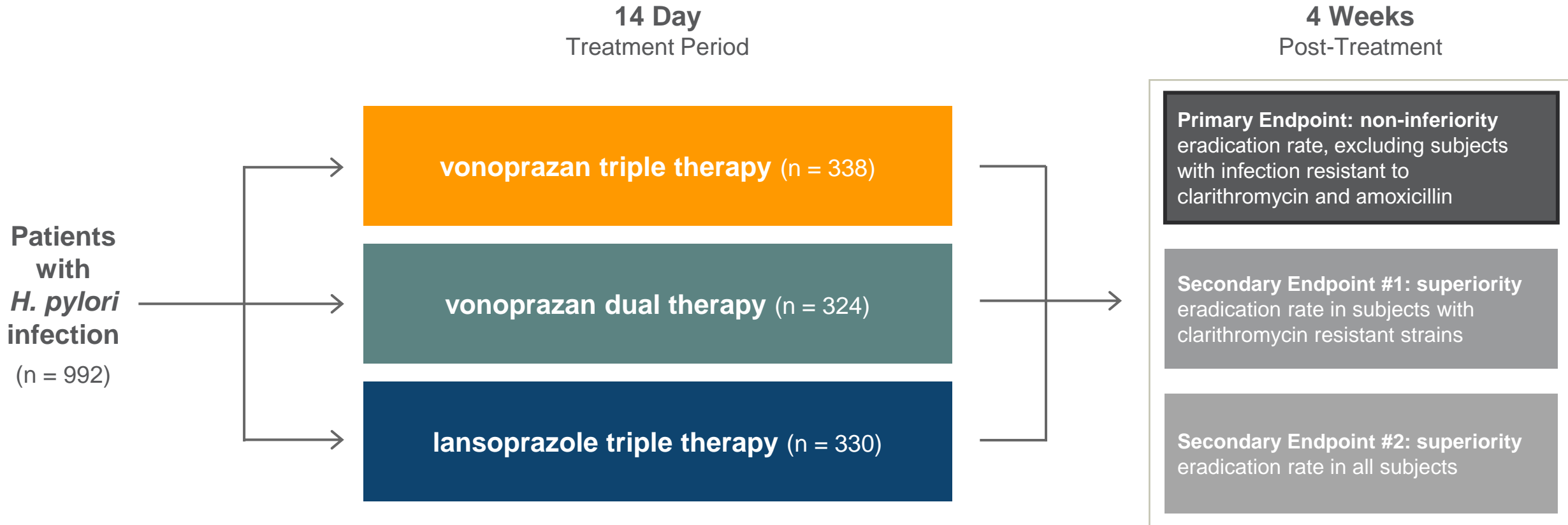
Appendix: Phathom's Clinical Trial Results

PHALCON-HP

Phase 3 trial for *H. pylori* infection

Phathom[®]
PHARMACEUTICALS

PHALCON-HP Phase 3 study design



Diagnosis of infection and test of cure confirmed by ¹³C-urea breath test

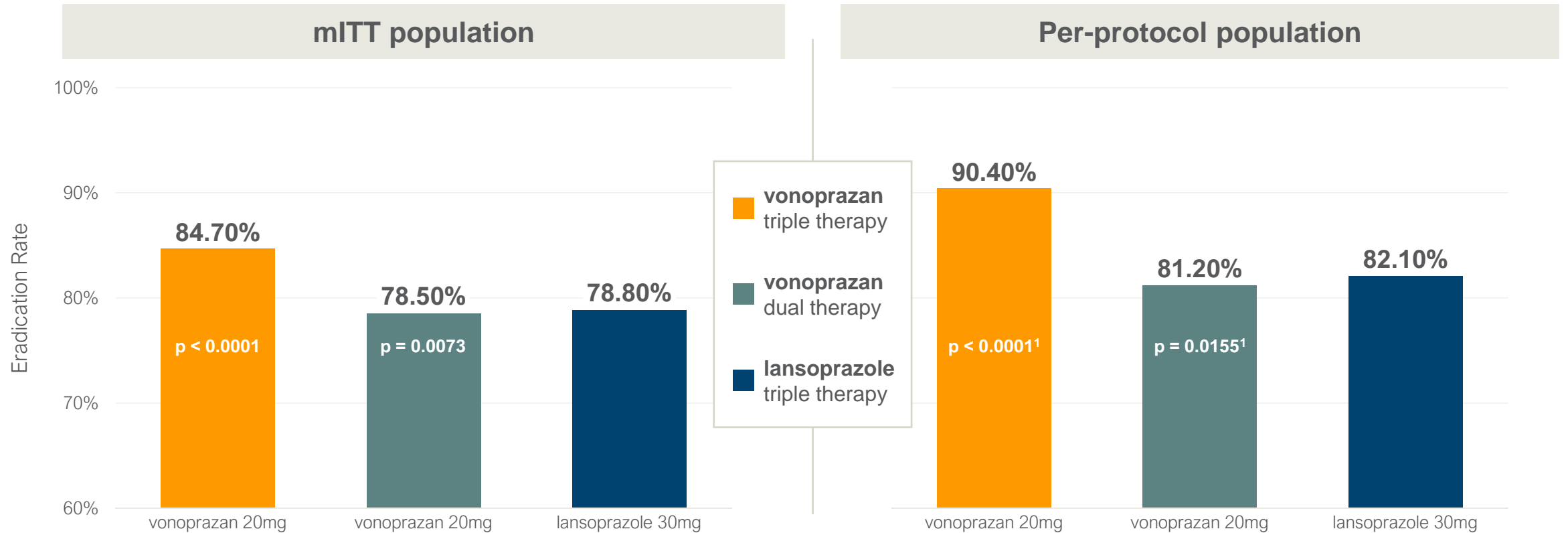
Vonoprazan dual therapy = vonoprazan 20 mg BID + amoxicillin 1 g TID

Vonoprazan triple therapy = vonoprazan 20 mg BID + amoxicillin 1 g BID + clarithromycin 500 mg BID

Lansoprazole triple therapy = lansoprazole 30 mg BID + amoxicillin 1 g BID + clarithromycin 500 mg BID

PHALCON-HP met primary endpoints

Eradication rates (%) among patients without clarithromycin- or amoxicillin-resistant strains

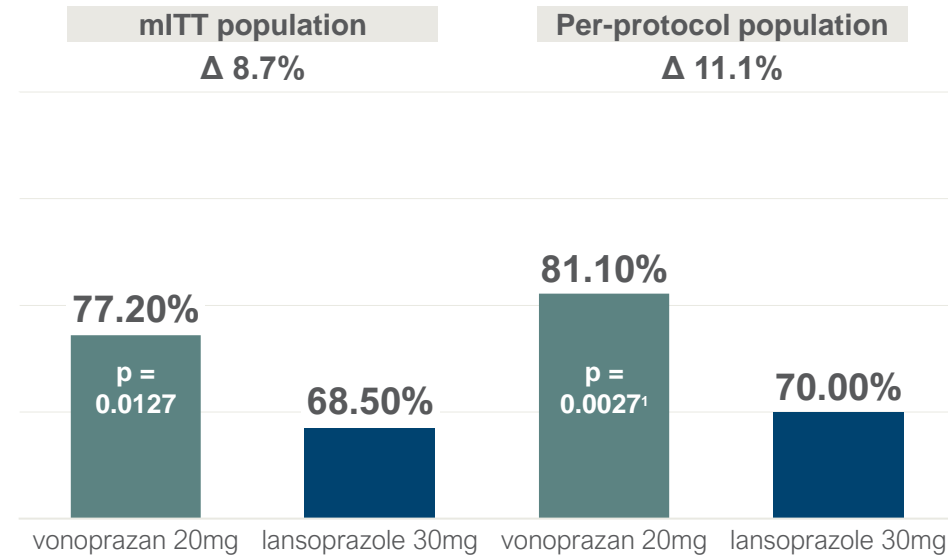
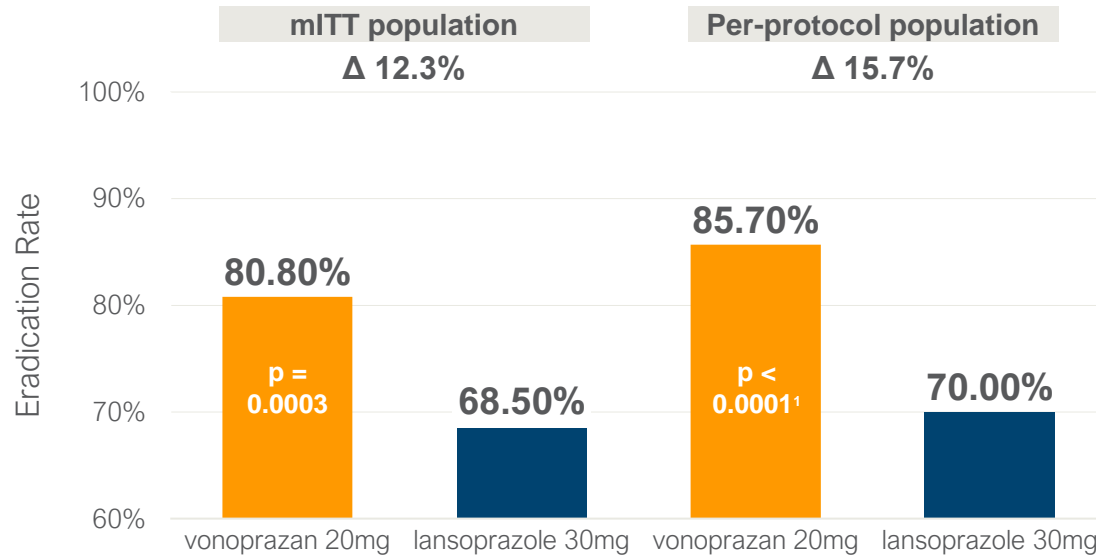


Both vonoprazan-based therapies met superiority for secondary endpoints

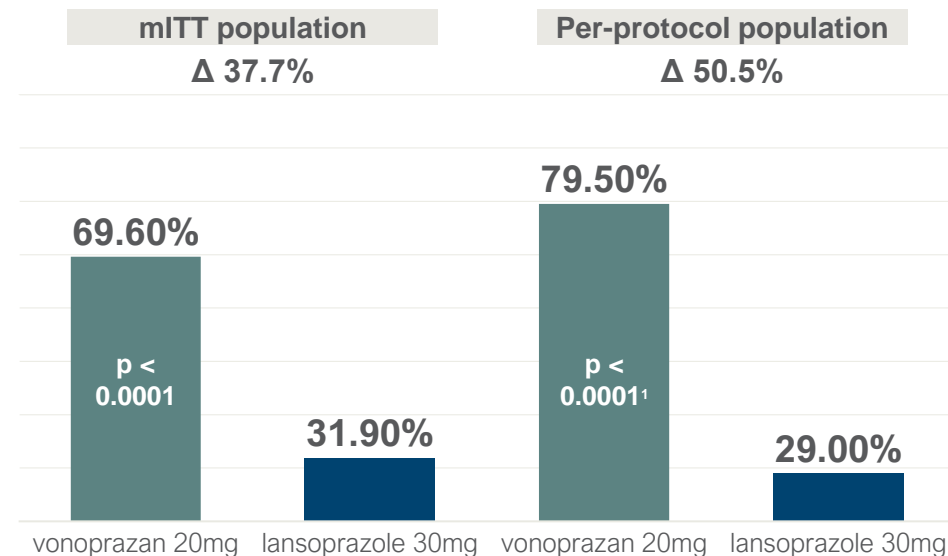
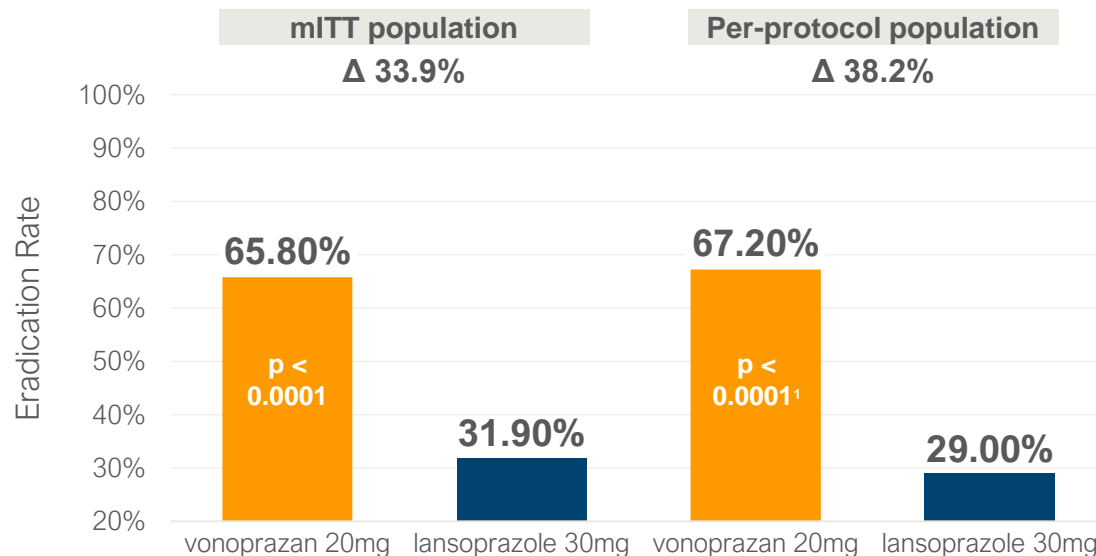
Vonoprazan triple therapy

Vonoprazan dual therapy

all subjects



subjects with clarithromycin resistant strains



Safety profile

Vonoprazan-based regimens generally well tolerated; comparable to lansoprazole triple therapy

Most frequent (>2.0%) adverse events in PHALCON-HP subjects

% (n) with adverse event	Vonoprazan triple therapy (n=346)	Vonoprazan dual therapy (n=348)	Lansoprazole triple therapy (n=345)
Diarrhea	4.0% (14)	5.2% (18)	9.6% (33)
Nausea	1.7% (6)	1.7% (6)	2.6% (9)
Dysgeusia	4.3% (15)	0.6% (2)	6.1% (21)
Headache	2.6% (9)	1.4% (5)	1.4% (5)
Vaginal infection	2.3% (8)	0.9% (3)	0.3% (1)

Safety Set: All subjects who received at least one dose of study medication

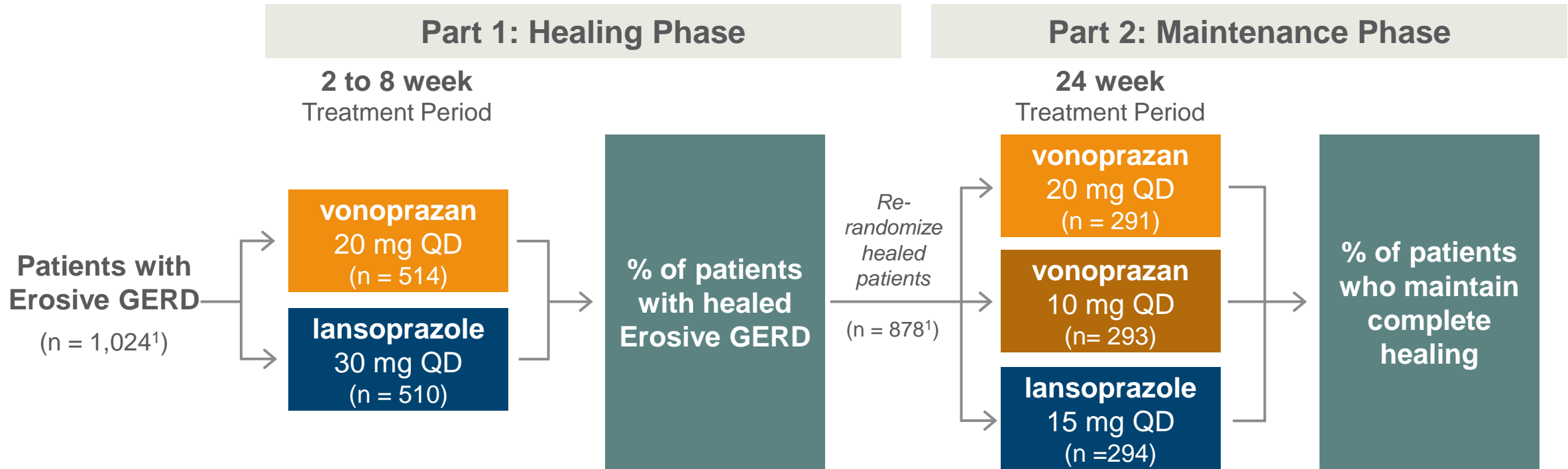
PHALCON-EE

Phase 3 trial for Erosive GERD

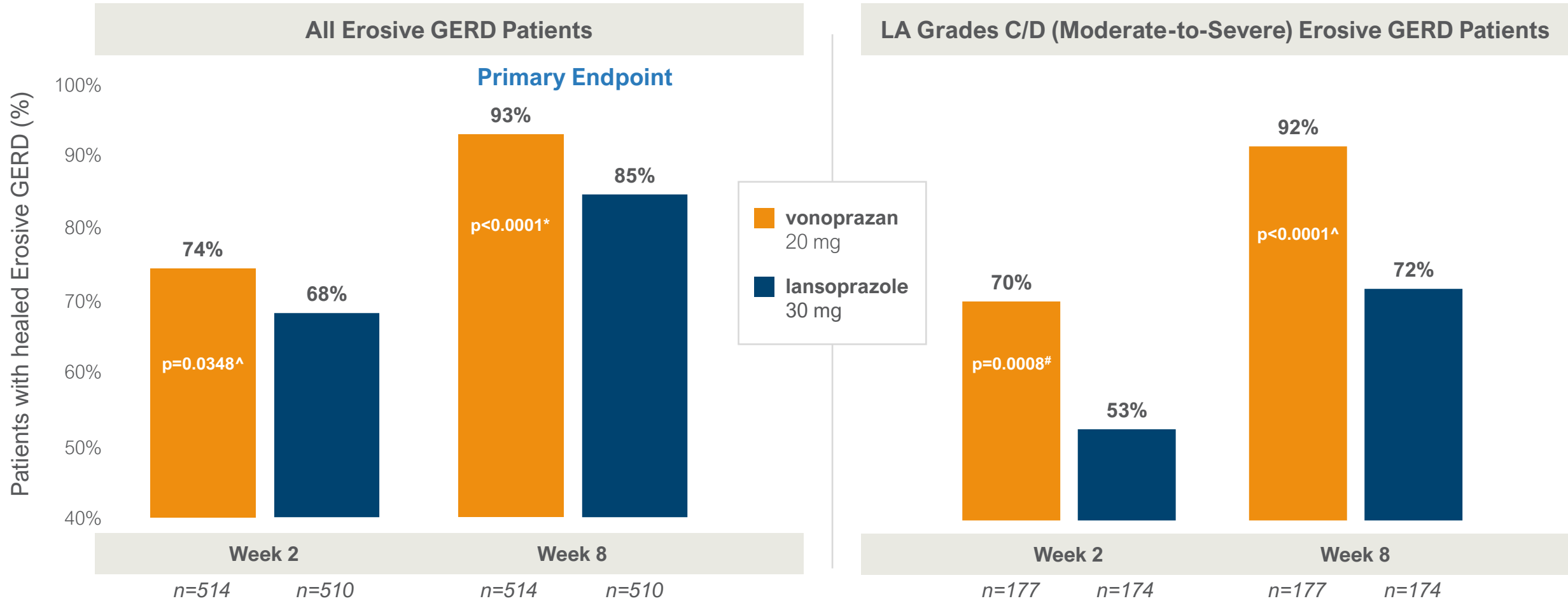
Phathom[®]
PHARMACEUTICALS

PHALCON-EE Phase 3 study design

US/Europe study in Erosive GERD



PHALCON-EE Phase 3 met primary and key secondary healing endpoints

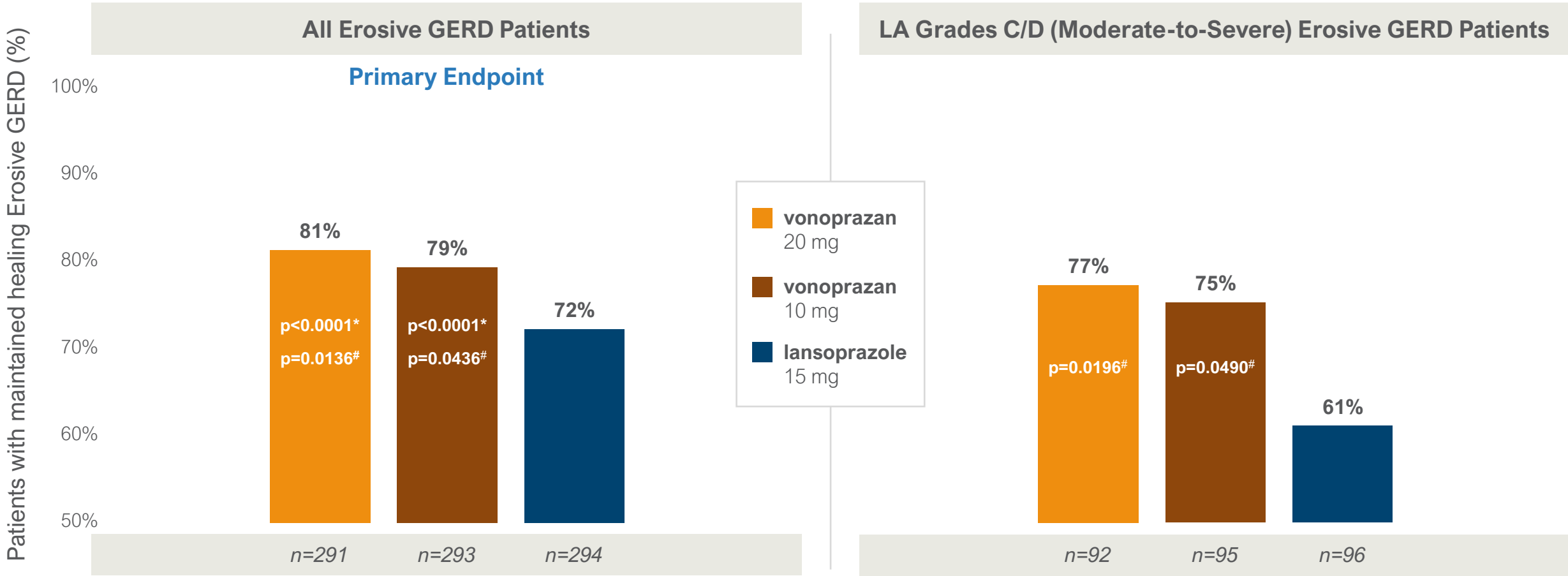


^ nominal p-value presented, superiority comparison, not formally tested based on pre-specified testing hierarchy

* p-value for both primary non-inferiority endpoint and unadjusted p-value for exploratory superiority comparison

p-value for pre-specified secondary endpoint superiority comparison

PHALCON-EE Phase 3 met all maintenance of healing endpoints



* p-value for primary endpoint non-inferiority comparison
 # p-value for pre-specified secondary endpoint superiority comparison

Summary of PHALCON-EE Phase 3 safety data

Overall, the safety results observed in PHALCON-EE were consistent with those observed in prior clinical studies of vonoprazan

Healing Phase

Most Common Adverse Events

% (n)	Vonoprazan 20 mg	Lansoprazole 30 mg
Diarrhea	2.1% (11)	2.5% (13)

Maintenance Phase

Most Common Adverse Events (≥ 5%)

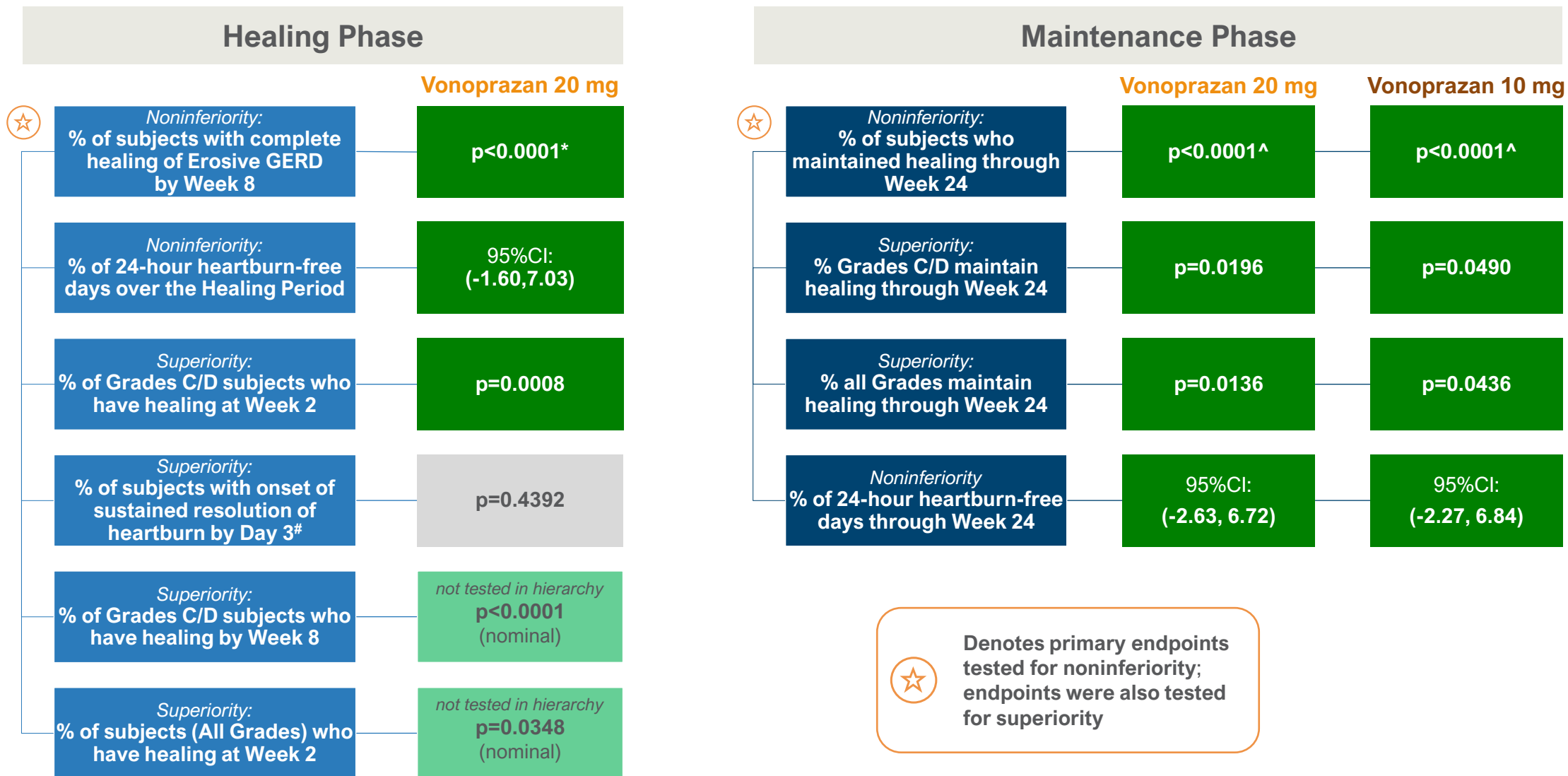
% (n)	Vonoprazan 20 mg	Vonoprazan 10 mg	Lansoprazole 15 mg
Abdominal Pain	5.4% (16)	4.1% (12)	2.4% (7)
Gastritis	2.7% (8)	6.4% (19)	2.7% (8)
COVID-19	10.1% (30)	6.1% (18)	6.7% (20)

Both Phases

Serious Adverse Events (>1 patient)

	Vonoprazan 20 mg	Vonoprazan 10 mg	Lansoprazole 15 mg
COVID-19 ¹ (n)	5	2	0

PHALCON-EE Phase 3 met primary and key secondary endpoints



* Healing phase primary endpoint, exploratory superiority comparison, nominal p<0.0001

^ Maintenance phase primary endpoint, prespecified secondary superiority comparison: vonoprazan 20 mg: p=0.0136; vonoprazan 10 mg: p=0.0436

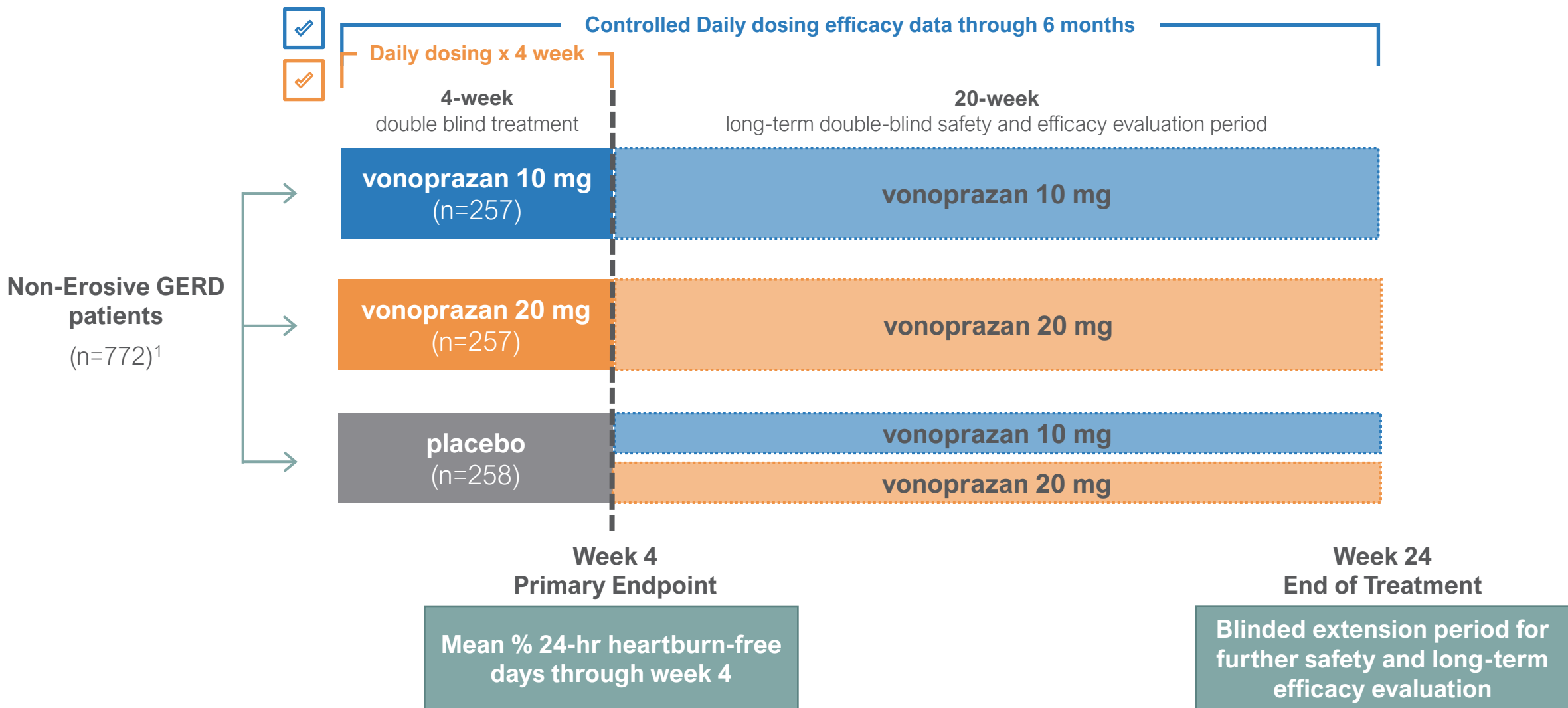
[#] Sustained resolution of heartburn is defined as seven (7) consecutive days without heartburn symptoms. For this test to be satisfied a patient must commence the seven consecutive day period on either day 1, 2 or 3 and last, respectively, up to day 7, day 8 or day 9.

PHALCON-NERD-301

Phase 3 trial for Non-Erosive GERD

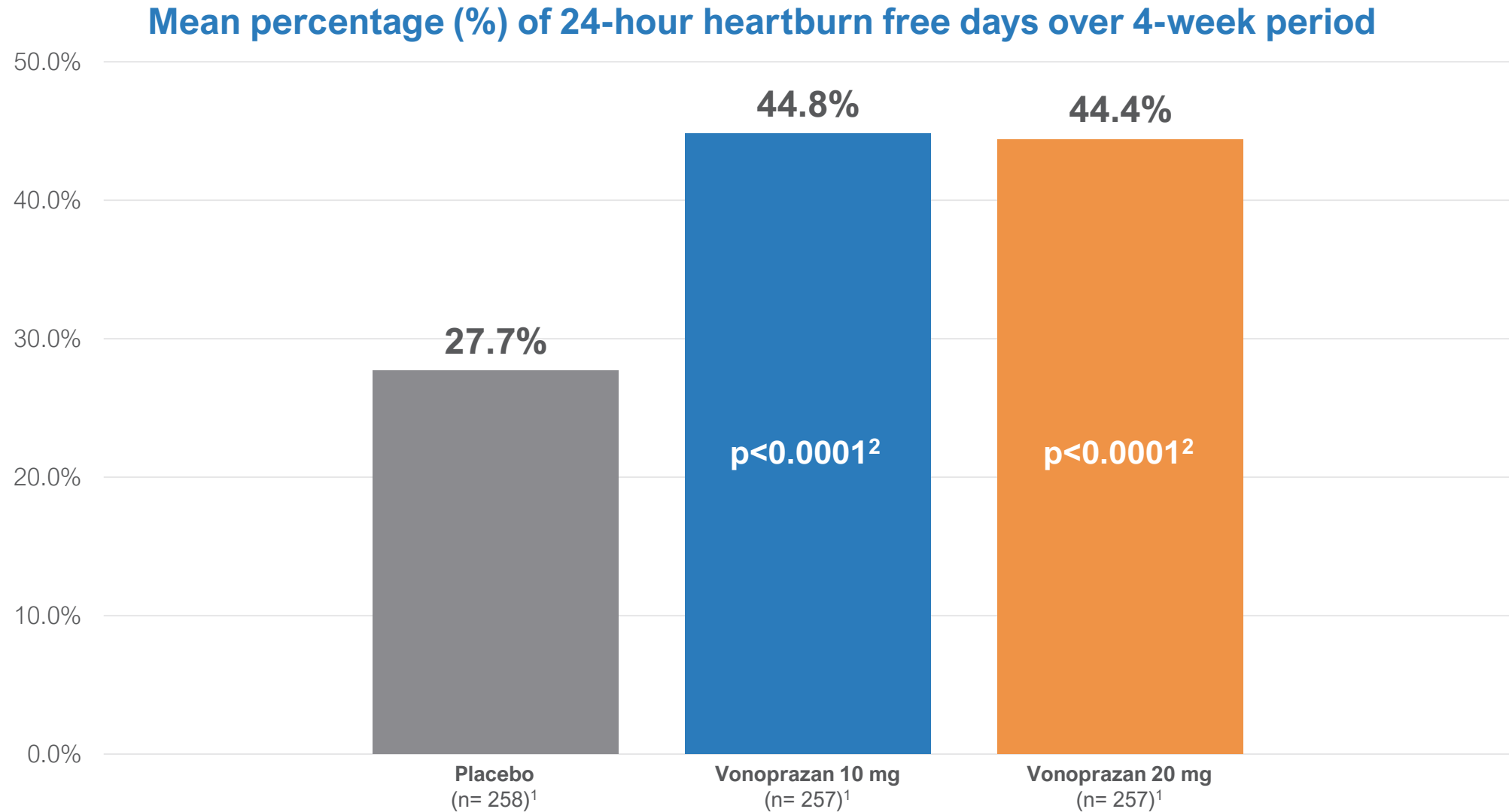
PHALCON-NERD-301 Phase 3 Daily dosing trial design

Vonoprazan 10 mg dose was submitted in sNDA for treatment of Non-Erosive GERD



¹ A total of 772 patients with Non-Erosive GERD were randomized and dosed

PHALCON-NERD-301 met the primary endpoint for both doses



¹ Intent-to-Treat Set: All subjects who received at least one dose of study medication, randomized treatment

² p-values from general linear model with treatment group as a factor and severity and frequency of heartburn at baseline as covariates

Summary of 4-week placebo-controlled period of PHALCON-NERD-301

Primary endpoint: mean percentage of 24-hour heartburn free days

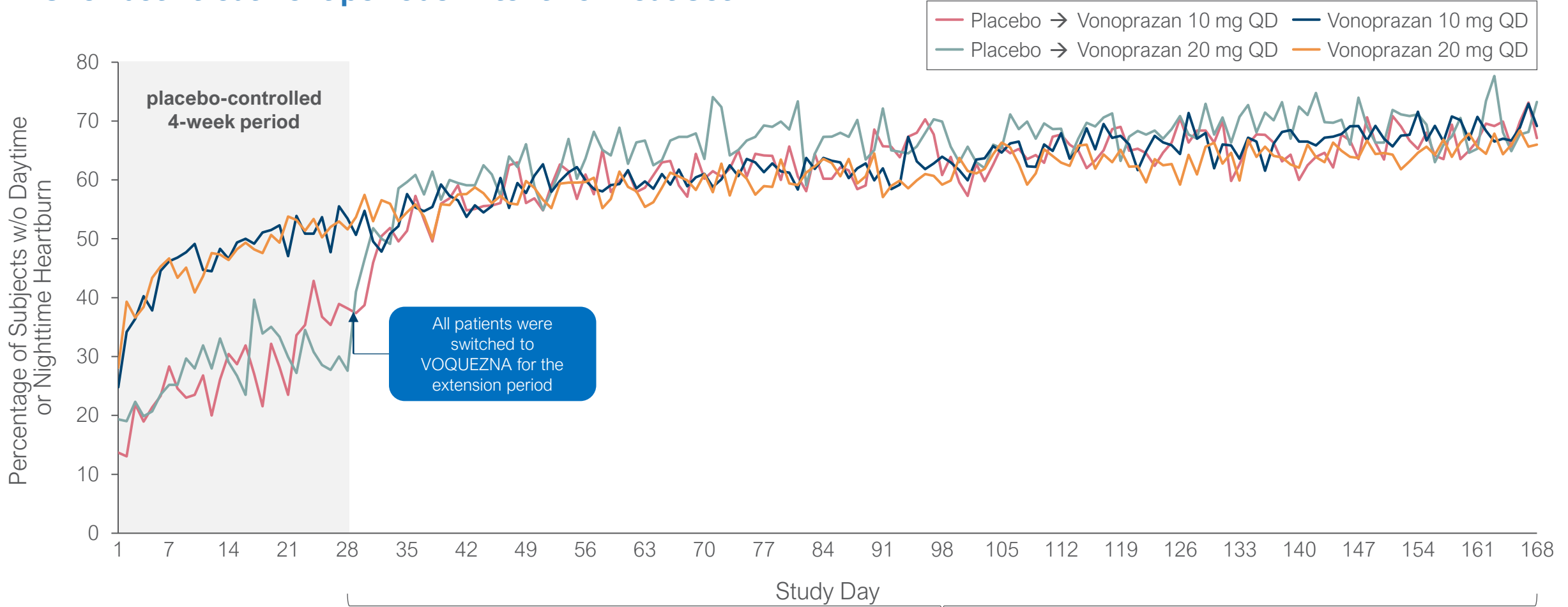
% of 24-hr heartburn free days	Placebo (n=258)¹	Vonoprazan 10 mg (n=257)¹	Vonoprazan 20 mg (n=257)¹
Mean	27.7%	44.8%	44.4%
P-value vs. Placebo²	--	p<0.0001	p<0.0001
Median	16.7%	48.1%	46.4%

¹ Intent-to-Treat Set: All subjects who received at least one dose of study medication, randomized treatment

² p-values from general linear model with treatment group as a factor and severity and frequency of heartburn at baseline as covariates

PHALCON-NERD-301 percentage of subjects without heartburn

Over both treatment periods: Intent-To-Treat Set¹



Exploratory 20-Week Extension Period (Not Placebo-Controlled): Mean % of 24-hr Heartburn Free Days ²			
Placebo → Vonoprazan 10 mg	Placebo → Vonoprazan 20 mg	Vonoprazan 10 mg	Vonoprazan 20 mg
61.9%	62.9%	62.6%	60.7%

¹ Intent-to-Treat Set: All subjects who received at least one dose of study medication, randomized treatment

² The 20-week extension period was not placebo-controlled; descriptive analysis only; no statistical comparisons were conducted

Summary of PHALCON-NERD-301 safety data

Most Common Adverse Events¹ (≥ 2%), Safety Set²

Overall, the safety results observed in PHALCON-NERD-301 were consistent with those observed in prior clinical studies of vonoprazan

4-week placebo-controlled period

% (n)	Placebo (n=256)	Vonoprazan 10 mg (n=259)	Vonoprazan 20 mg (n=257)
Abdominal Pain	0.8% (2)	1.5% (4)	2.3% (6)
Constipation	0.8% (2)	2.3% (6)	0.8% (2)
Diarrhea	1.2% (3)	2.3% (6)	0.4% (1)
Nausea	0.4% (1)	2.3% (6)	3.1% (8)

Serious Adverse Events¹ from the Safety Set² (n):

- Placebo: n/a (--)
- Vonoprazan 10 mg: viral pericarditis (1)
- Vonoprazan 20 mg: salivary gland calculus (1), fibula/tibia fracture (1)

20-week extension period

% (n)	Placebo → Vonoprazan 10 mg (n = 118)	Placebo → Vonoprazan 20 mg (n = 121)	Vonoprazan 10 mg (n = 248)	Vonoprazan 20 mg (n = 236)
Upper Respiratory Tract Infection	1.7% (2)	0.8% (1)	4.8% (12)	2.1% (5)
Sinusitis	1.7% (2)	1.7% (2)	3.2% (8)	1.3% (3)
Influenza	3.4% (4)	1.7% (2)	2.0% (5)	1.3% (3)
Urinary Tract Infection	1.7% (2)	--	2.0% (5)	2.5% (6)
Nasopharyngitis	1.7% (2)	--	--	2.1% (5)
Gastroenteritis	1.7% (2)	0.8% (1)	0.4% (1)	2.1% (5)
Nausea	0.8% (1)	0.8% (1)	1.2% (3)	2.1% (5)

¹ Summary results only include adverse events that are treatment emergent (i.e., started after treatment)

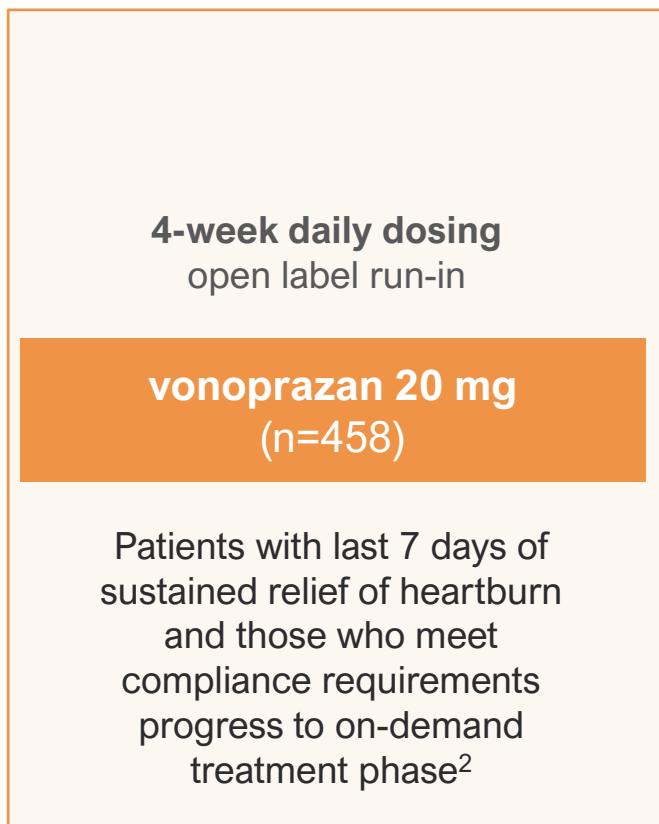
² Among all subjects who received at least one dose of study medication, actual treatment received

PHALCON-NERD-201

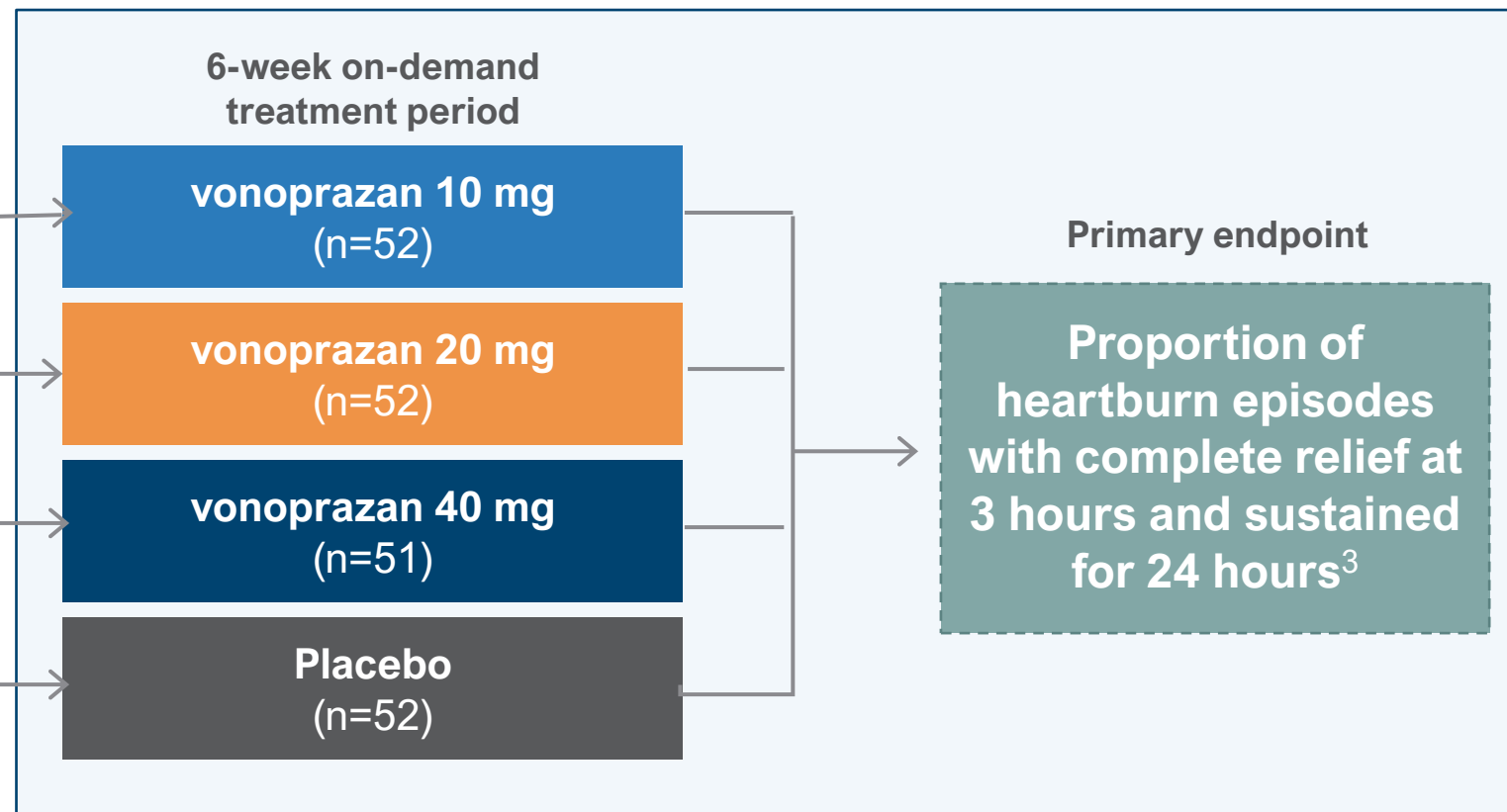
Phase 2 trial for Non-Erosive GERD

PHALCON-NERD-201 phase 2 trial design *(completed)*

Daily dosing treatment phase



On-demand treatment phase¹



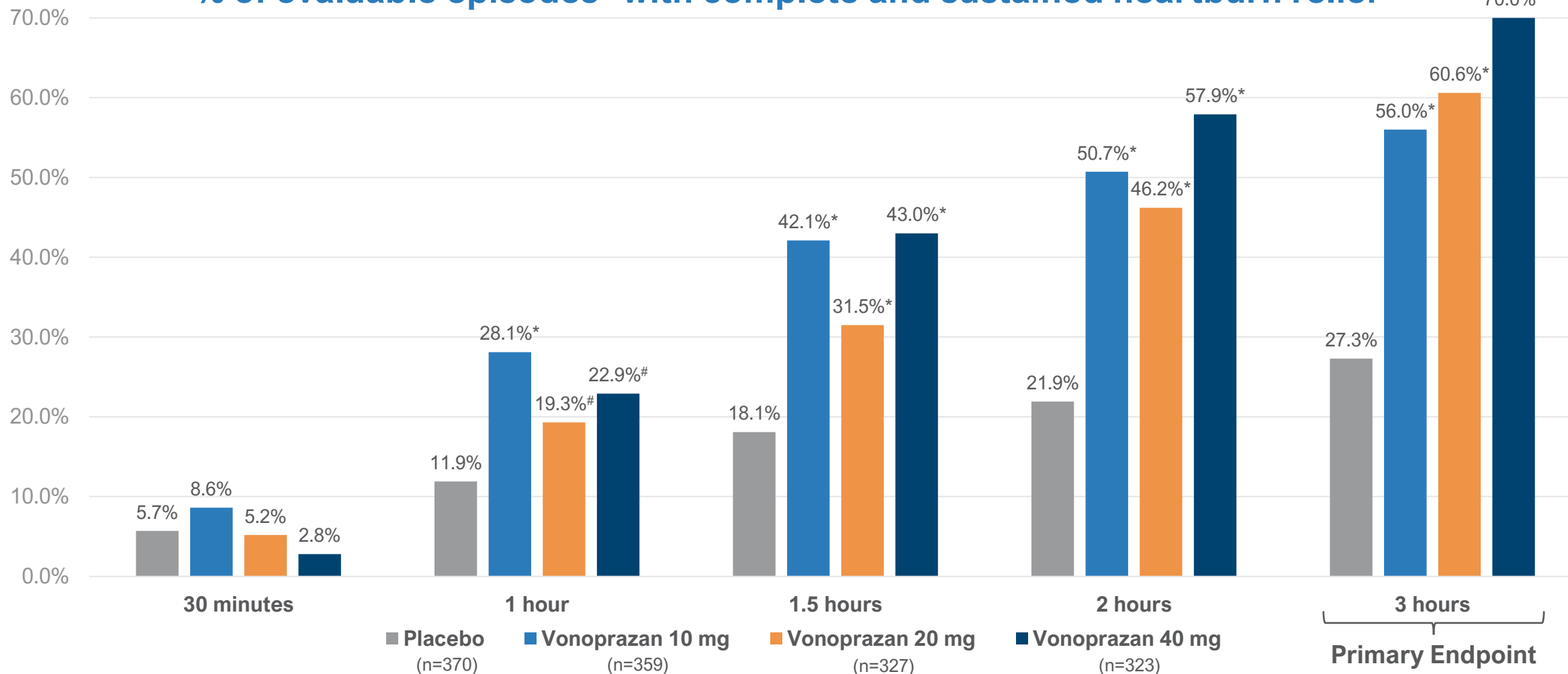
¹ Dosing initiated at onset of a heartburn episode; rescue antacid medication allowed after 3 hours of taking test medication

² Patients must meet study drug and diary completion compliance requirements

³ Primary endpoint for NERD phase 2 trial is complete heartburn relief at 3 hours that is sustained for 24 hours. Primary endpoint for phase 3 trial will be based on NERD phase 2 results and subsequent FDA discussions

PHALCON-NERD-201 met the primary endpoint for all doses and demonstrated significance over placebo for all doses as early as 1-hour

% of evaluable episodes[^] with complete and sustained heartburn relief^{^^}



* Denotes p < 0.0001 statistically significant difference from placebo

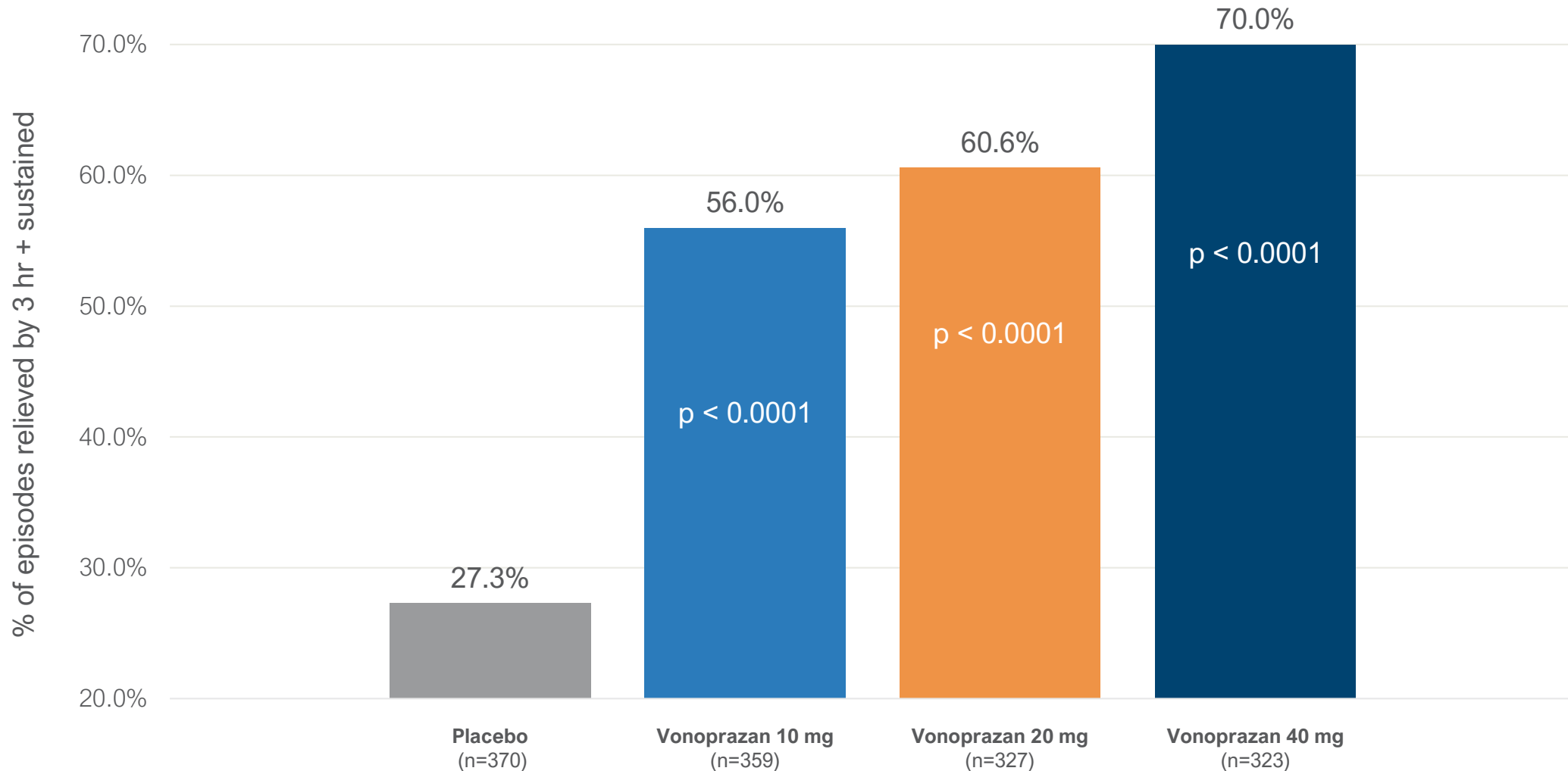
Denotes p < 0.01 statistically significant difference from placebo

[^] Evaluable episode: heartburn episode for which subject completes a minimum of one timed assessment

^{^^} Complete relief: Full symptom relief with no rescue antacid taken (must be achieved within 3 hours of study drug); Sustained relief: No further episodes recorded within following 24 hours

PHALCON-NERD-201 met the primary endpoint for all doses

% of evaluable episodes* with complete and sustained heartburn relief within 3 hours^

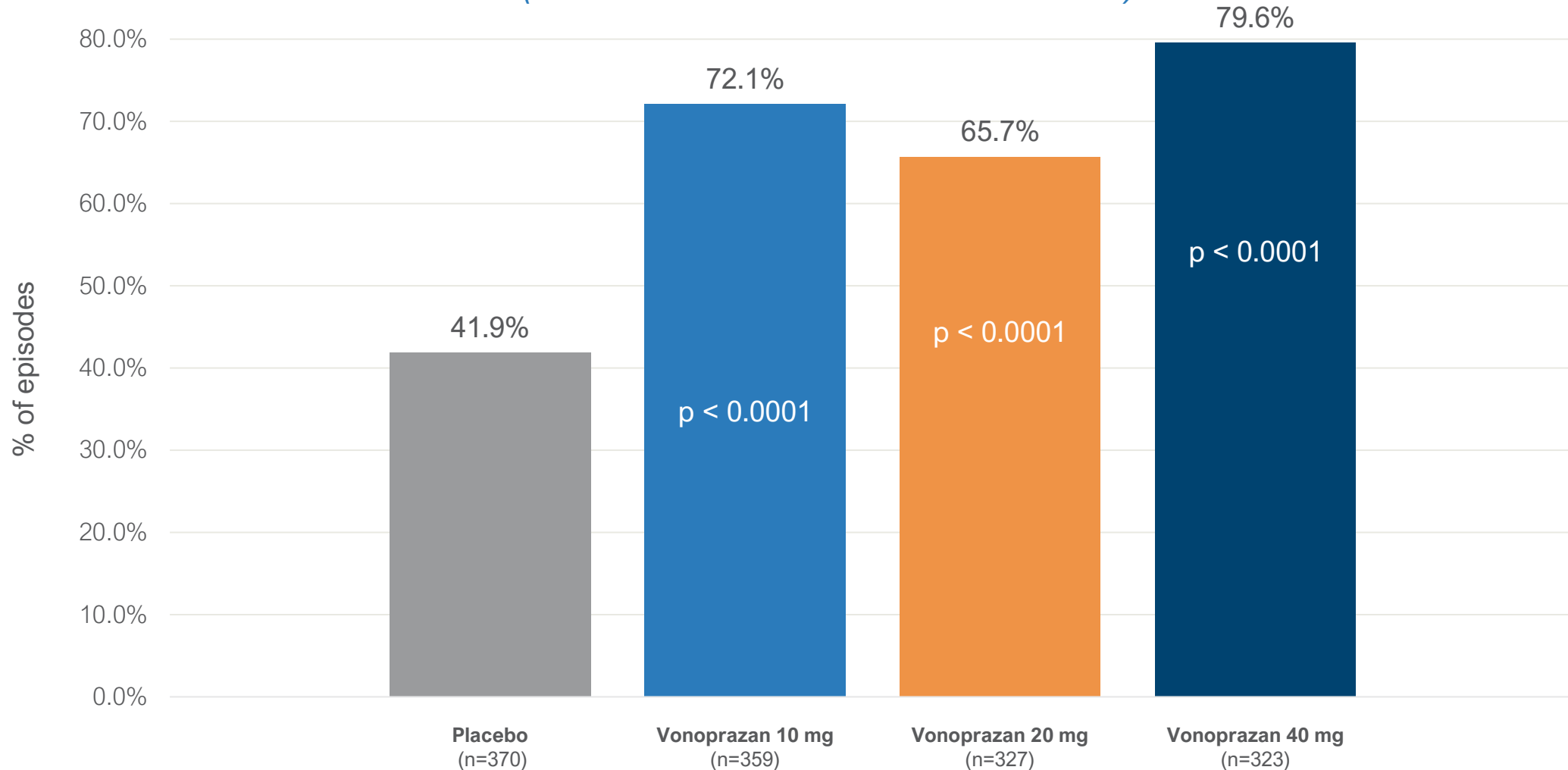


* Evaluable episode: heartburn episode for which subject completes a minimum of one timed assessment

^ Complete relief: Full symptom relief with no rescue antacid taken (must be achieved within 3 hours of study drug); Sustained relief: No further episodes recorded within following 24 hours

PHALCON-NERD-201 met the key secondary endpoint with all doses resulting in more complete relief of heartburn episodes vs. placebo

% of evaluable episodes* with complete heartburn relief within 3 hours^
(with or without 24-hour sustained relief)



* Evaluable episode: heartburn episode for which subject completes a minimum of one timed assessment

^ Complete relief: Full symptom relief with no rescue antacid taken (must be achieved within 3 hours of study drug)

PHALCON-NERD-201 safety data

The safety data for all vonoprazan arms were comparable to placebo and consistent with what was reported in previous studies

Daily dosing treatment phase Vonoprazan 20 mg QD

- Most commonly reported events (> 1% of subjects)
 - Abdominal distension 1.3%
 - Diarrhea 1.5%
 - Nausea 1.3%
- 4 SAEs
 - 1 study drug related SAE (anaphylactic reaction)

As Needed treatment phase

	Placebo (n=52)	Vonoprazan 10 mg (n=52)	Vonoprazan 20 mg (n=52)	Vonoprazan 40 mg (n=51)
% (n) of subjects with at least 1 AE	21.3% (10)	16.3% (8)	18.4% (9)	16.7% (8)

- No individual AE was reported by more than one subject in a treatment group
- No SAEs