camurus®

Company presentation

April 2025

Forward looking statements

This presentation contains forward-looking statements that provide our expectations or forecasts of future events such as new product developments and regulatory approvals and financial performance.

Camurus is providing the following cautionary statement. Such forward-looking statements are subject to risks, uncertainties and inaccurate assumptions. This may cause actual results to differ materially from expectations and it may cause any or all of our forward-looking statements here or in other publications to be wrong. Factors that may affect future results include currency exchange rate fluctuations, delay or failure of development projects, loss or expiry of patents, production problems, unexpected contract, patent, breaches or terminations, government-mandated or market-driven price decreases, introduction of competing products, Camurus' ability to successfully market products, exposure to product liability claims and other lawsuits, changes in reimbursement rules and governmental laws and interpretation thereof, and unexpected cost increases.

Camurus undertakes no obligation to update forward-looking statements.

Camurus snapshot

Rapidly growing commercial stage company

Leader in opioid dependence treatment with Buvidal® and Brixadi® weekly and monthly depots

Unique FluidCrystal® technology platform

Commercially validated with a broad range of applications

Advancing late-stage pipeline with blockbuster potential

Prospect for multiple new approvals in CNS and rare disease indications

Strong operational and financial performance

Sustainable profitability since 2022

Listed on Nasdaq Stockholm
Ticker **CAMX;**
Employees: **250+**

Strategy for continued value creation

1. Grow Buvidal/Brixadi sales and expand to new markets
2. Advance R&D pipeline to new approvals and launches
3. Diversify and grow through business development
4. Drive operational excellence and sustainable profitability

Camurus' vision 2027

Sustainable value creation for all stakeholders:

5x

Five-fold revenue growth (to SEK 4.5 billion)

Establish-ment of US commercial infrastructure

4

Approvals for four R&D pipeline programs

~50%

Operating margin around 50 percent

Significant recent progress

- Leadership in long-acting treatment of opioid dependence
- Double-digit Buvidal sales growth in Europe, MENA and Australia
- Best-in-class launch of Brixadi® in the US
- Own US organization established for Oclaiz™ launch

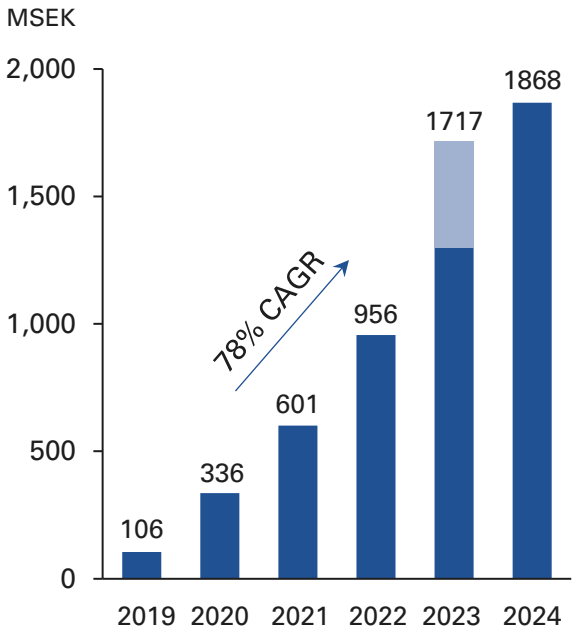
- Positive final results from 52-week ACROINNOVA 2 study in acromegaly
- CAM2029 US NDA and EU MAA regulatory reviews advanced
- CRL resolution ongoing in the US
- SORENTO and POSITANO studies advancing in GEP-NET and PLD
- Clinical study initiated for once-monthly semaglutide, CAM2056

- Solid financial performance
- FY result exceeded earlier raised estimates
- Meaningful investment in R&D and US infrastructure
- Cash position strengthened to ~ SEK 2.9 billion
- New HQ and laboratories established

NDA – New Drug Application; MAA – Market Authorization Application; CRL – complete response letter; GEP-NET – gastroenteropancreatic neuroendocrine tumors; PLD – polycystic liver disease

Strong financial development

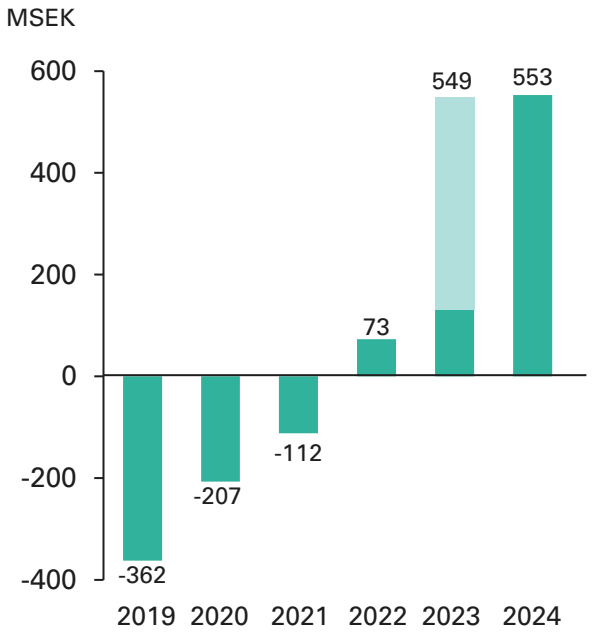
Revenues



One-time revenue related to Brixadi US approval

Revenues excl. one-times for Brixadi US approval

Profit before tax



One-time revenue related to Brixadi US approval

Profit before tax excl. Brixadi US approval revenue

Full year 2025 guidance

Revenue

SEK 2.7 – 3.0 billion

+ 45 – 61% vs. 2024

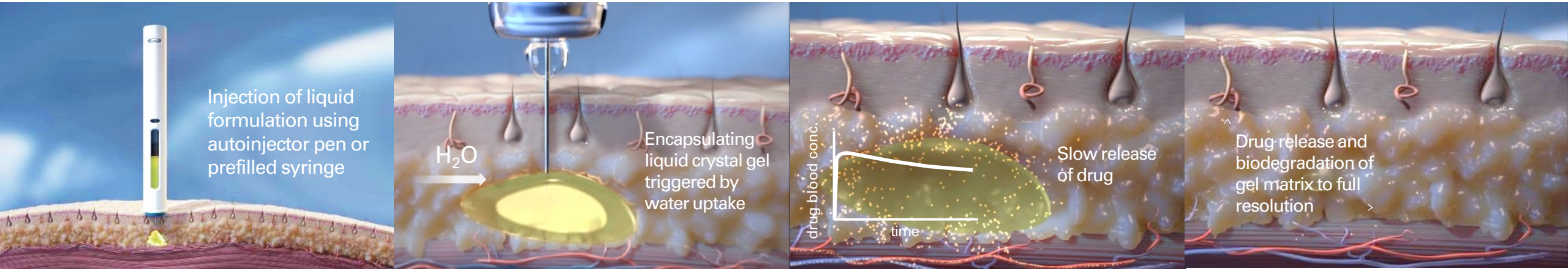
Profit before tax

SEK 0.9 – 1.2 billion

+ 63 – 117% vs. 2024

FluidCrystal® extended-release technology

- Easy and convenient administration
- Rapid onset & long-acting release
- Controlled by composition, liquid crystal phase structure and biodegradation
- Applicable across substance classes
- Compatible with prefilled syringes, auto-injector pens, and other advanced devices
- Manufacturing by standard processes



Sources: Tiberg F, et al. Chapter in Long Acting Injections and Implants, Advances in Delivery Science and Technology 2012; Tiberg F, et al. OnDrugDelivery 2010; Tiberg F, et al. Drug Del. Sci. Tech., 21 (1) 101-109 2011.

Broad and diversified product portfolio and pipeline

Products on the market

Buvidal® Opioid dependence

Brixadi® Opioid use disorder[1]

Key pipeline programs

CAM2029 Acromegaly

CAM2029 Gastroenteropancreatic neuroendocrine tumors

CAM2029 Polycystic liver disease

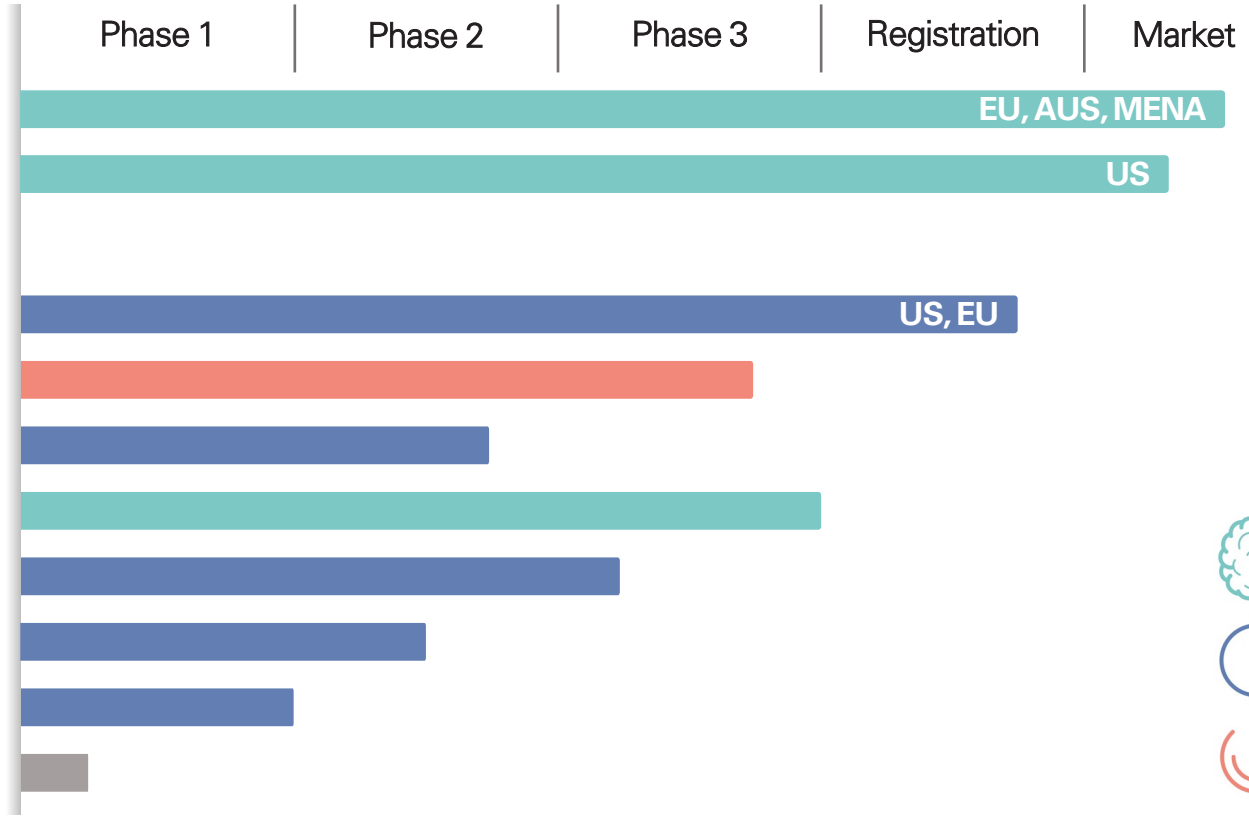
CAM2038 Chronic pain

CAM4072 Genetic obesity diseases[2]

CAM2043 Raynaud's phenomenon

CAM4071 Endocrine disorders

CAM2056 Metabolic diseases (q4w semaglutide)



Other clinical stage programs include CAM2032 (prostate cancer), CAM2043 (PAH[3]), and CAM2047 (CINV[4])

[1]Licensed to Braeburn Pharmaceuticals in North America; [2]Licensed to Rhythm Pharmaceuticals worldwide; [3]PAH – Pulmonary arterial hypertension; [4]CINV – Chemotherapy-induced nausea and vomiting

Opioid dependence

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“Buvidal became my way out”

Justin, Buvidal patient in Australia

Buvidal – game changing opioid dependence treatment

Weekly and monthly, subcutaneous buprenorphine for individualized treatment of opioid dependence within a framework of medical, social and psychological treatment in adults and adolescents 16 years or over[1]

[1] *SmPC Buvidal*

Buvidal has demonstrated significant benefits to patients and society

- Superior treatment outcome and patient satisfaction[1-4]
- Blocks subjective opioid effects from first dose[2]
- Reduces treatment burden and improve quality of life[4,5]
- Decrease risk of diversion, misuse and pediatric exposure[6,7]
- Provides cost savings[8]

[1]Lofwall et al. JAMA Int. Med. 2018;178(6); 764-773; [2]Walsh et al, JAMA Psychiatry 2017;74(9):894-902; [3]Frost , M., et al. Addiction. 2019;114(8):1416-1426. doi: 10.1111/add.14636; [4]Lintzeris, N., et al. JAMA Network Open. 2021;4(5):e219041. doi:10.1001/jamanetworkopen.2021.9041, [5]Barnett et al Drug and Alcohol Dependence 2021; https://doi.org/10.1016/j.drugalcdep.2021.108959 ; [6]EPAR for Buvidal; [7]Dunlop, A. J., et al. Addiction. 2021. https://doi.org/10.1111/add.15627; [8]Dunlop, A. Oral presentation at CPDD June 2020.

Towards global leadership in long-acting opioid dependence treatment

Wide and growing access to Buvidal and Brixadi

– Available across four continents
– More than 60,000 in treatment with Buvidal in Europe and Australia end-2024

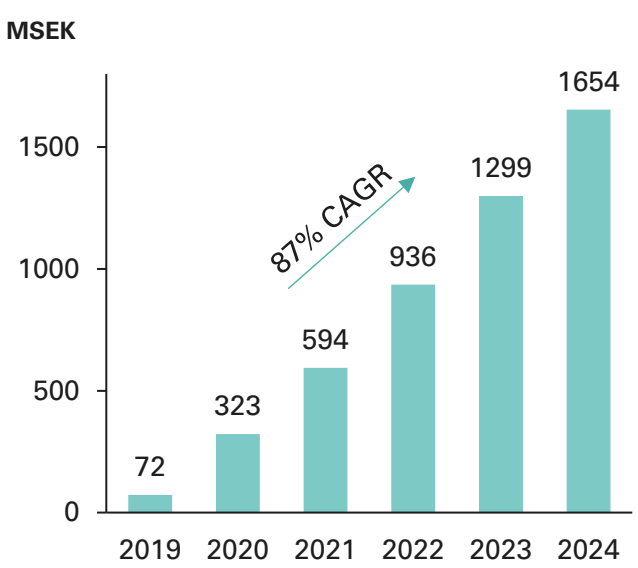
Robust Buvidal sales growth

– 87% CAGR since first launch in 2019
– Target more than 100,000 patients on Buvidal in 2027

Market expansion continues

– Four market authorizations and several pricing and reimbursement applications under review

Strong growth of Buvidal sales



LAIB – Long-Acting Injection of Buprenorphine

Accelerated growth of Brixadi in the US

US opioid crisis continues

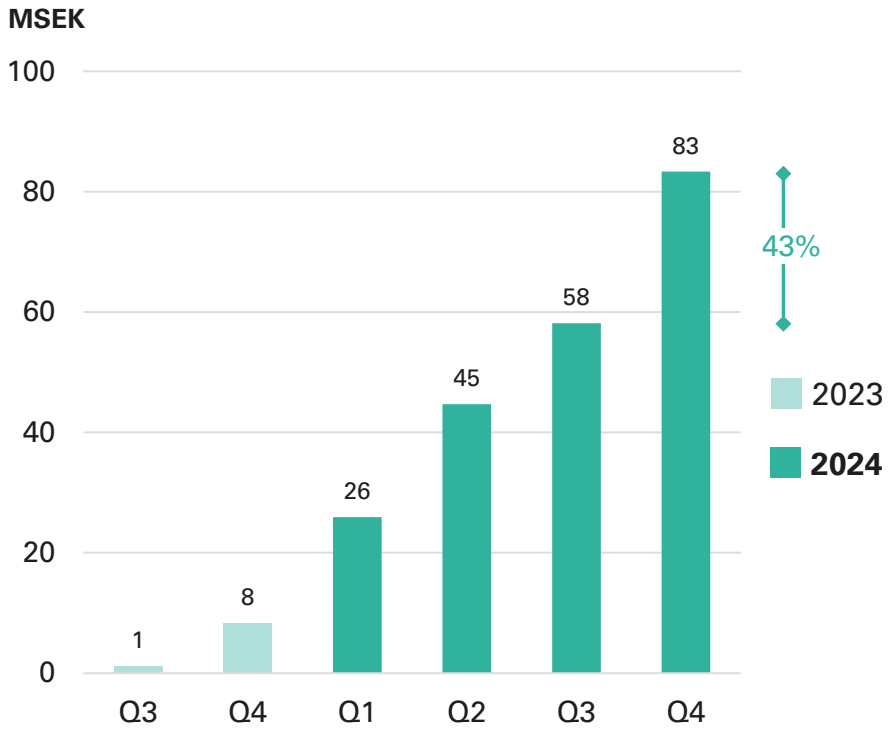
– Overall, 6-7 million people with OUD in the US [1-3]
– Total number of ~2.3 million patients in treatment in 2023 of which ~1.8 million on buprenorphine[4]

Continued strong growth of Brixadi

– High QoQ growth (43% in Q4 2025)
– A majority of new patients transferring from sublingual buprenorphine products[1]
– Other patients coming from LAI product or being direct initiations[1]
– Brixadi LAIB est. share in the US approaching ~25%

Brixadi peak market potential est. > USD 1 bn[6]

Brixadi royalty by quarter



OUD – Opioid Use Disorder; LAIB – Long-Acting Injectable Buprenorphine
[1]Keyes KM, et al. Drug Alc. Dep. Reports 2022; [2]CDC, Opioid Use Disorder: https://www.cdc.gov/dotw/opioid-use-disorder; [3]Symphony Health Data ; [4]SAHMSA 2025; [5]Veeva Compass Claims data. [6]Company estimate

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Buvidal/Brixadi – well differentiated

Convenient and flexible administration

- Weekly and monthly dosing
- Multiple dose strengths (four weekly, three monthly)
- Choice of multiple injection sites
- Thin needle and small dose volumes
- Room temperature stability (no cold chain required)

Strong scientific evidence base

- Superior efficacy and patient reported treatment satisfaction vs daily standard of care

Competitive label[1]

- Switch from daily sublingual buprenorphine using conversion table for dose equivalency
- Direct initiation of treatment following a single dose of transmucosal buprenorphine

LAI features[2]	Sublocade	Vivitrol	Buvidal Brixadi
Weekly dosing	–	–	✓
Monthly dosing	✓	✓	✓
Multiple doses	–	–	✓
Choice of inj. sites	–	–	✓
Smallest needle	(19G)	(20G)	✓ (23G)
Lowest dose volume	0.5–1.5mL	3.4mL	✓ 0.16–0.64mL
Room temp. storage	–	–	✓
Day one initiation	–	–	✓
Clin. data vs active control	–	–	✓
Launched	US, CAN, DE, AUS, SE, FI, IL	US	US, EU, UK, AUS

LAI – long acting injectable
[1]*Brixadi US label*; [2]*See product information*

Growing scientific evidence base

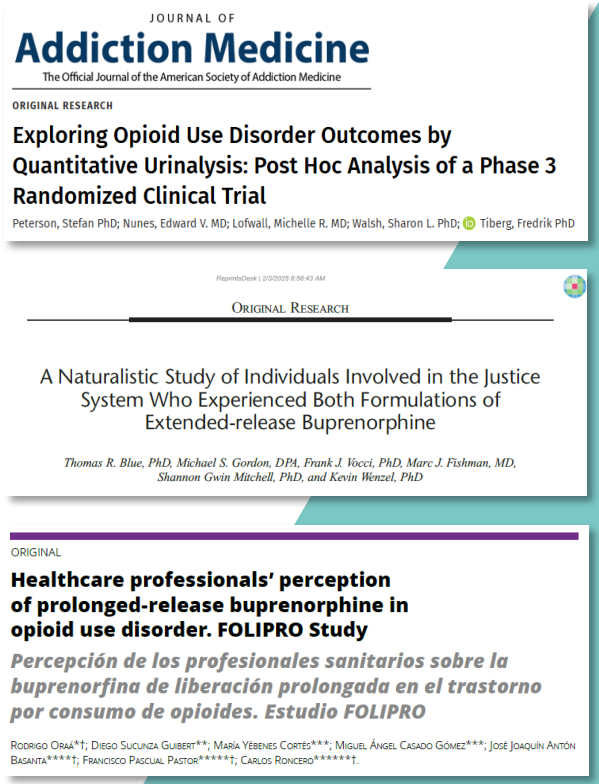
Strong scientific support for Buvidal/Brixadi

- Documenting effectiveness in different treatment settings
- Positive health economical outcomes
- More than 220 scientific publications
- Ongoing clinical studies exploring new applications

Selected planned scientific conference participation in 2025

	Q1/Q2 2025			Q3/Q4 2025			
International	ASAM 24-27 Apr Denver, US	ISAM 26-28 May Hamburg, DE	ALBATROS 10-12 Jun Paris, FR	CPDD 14-18 Jun New Orleans, US	IMiA 29-31 Aug Sydney, AUS	ATHS 21-24 Oct Biarritz, FR	
National (selected)	RCGP & AP 16 – 17 January Manchester, UK	APSEP 27-28 March Paris, FR	Addiction Z April – May Gold Coast, AUS	Fed. Addiction 22-23 May Angers, FR	Suchtmedizin 3 – 5 July Munich, DE	Suchtsymp. Oct Grundlsee, AT	APSAD 9-12 Nov Sydney, AUS
	APP Feb Gold Coast, AUS	Sigtunadagarna Apr SE	Subst. Forum. May Mondsee, AT	SEPD 4-7 Jun Madrid, ES	Prison congr. Oct Montpellier, FR	RCPsych Addict Oct London, UK	Addiktum Nov/Dec Helsinki, Fi

Recent key publications[1-3]



[1] Peterson et al. J of Addict Med 2024; [2] Blue et al. J Addict Med 2025; [3] Oráa et al. Adicciones 2024

Octreotide SC depot, CAM2029

CAM2029 is a long-acting octreotide in development for three serious rare disease indications

- Acromegaly
- Gastroenteropancreatic neuroendocrine tumors (GEP-NET)
- Polycystic liver disease (PLD)

Designed for enhanced efficacy and patient convenience vs. current somatostatin receptor ligands (SRLs)

CAM2029 designed to address key limitations of current first-generation SRLs

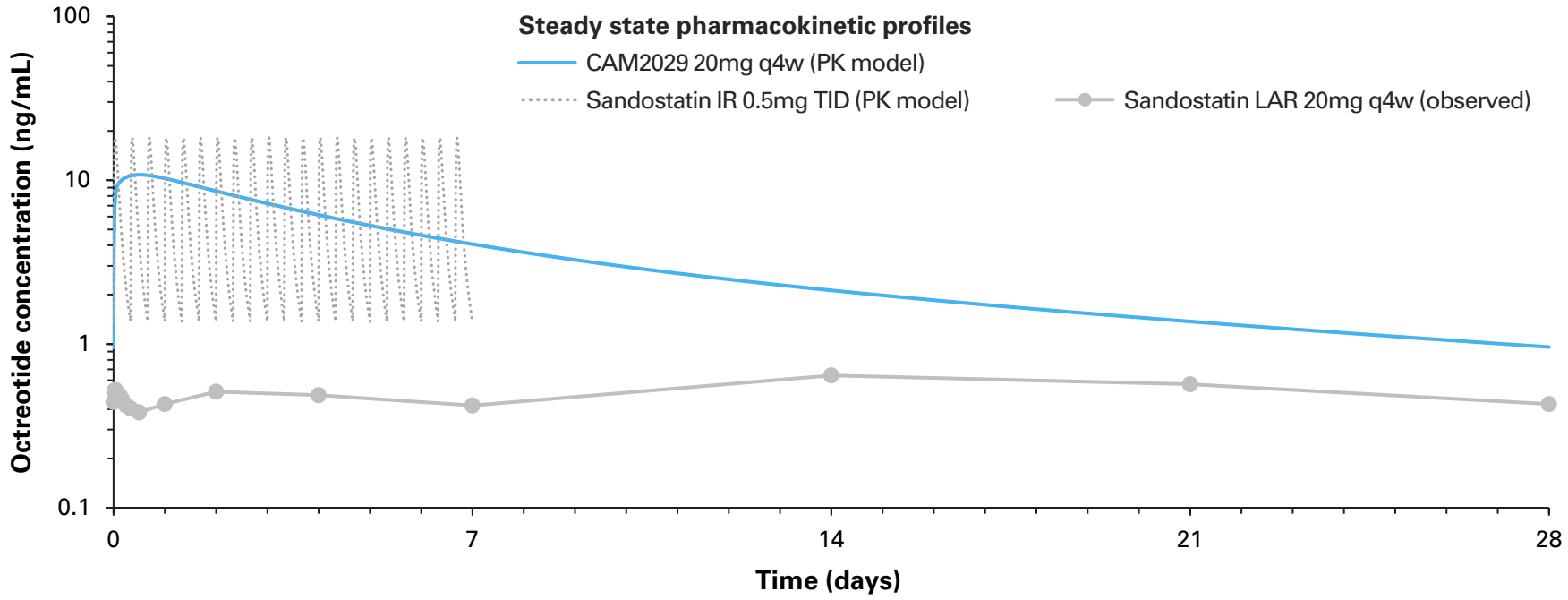
- Ready-to-use FluidCrystal® technology
- Rapid onset and long-acting octreotide release[1]
- 5-fold octreotide bioavailability vs Sandostatin LAR with potential for improved efficacy[1-3]
- State-of-the-art, pre-filled autoinjector pen enabling convenient patient self-administration
- Subcutaneous administration with thin needle (22-gauge, 12.5mm)
- Room temperature storage

1. Tiberg F, et al., Br J Clin Pharmacol. 2015; 80(3): 460-472; 2. Constant dose; 3. Pavel M , et al., Cancer Chemotherapy and Pharmacology 2019; 83: 375-383; 4. Adelman D et al. Adv Ther. 2020;37(4):1608-19.

CAM2029 provides high SRL exposure

~5x higher octreotide plasma exposure for CAM2029 vs. Sandostatin LAR

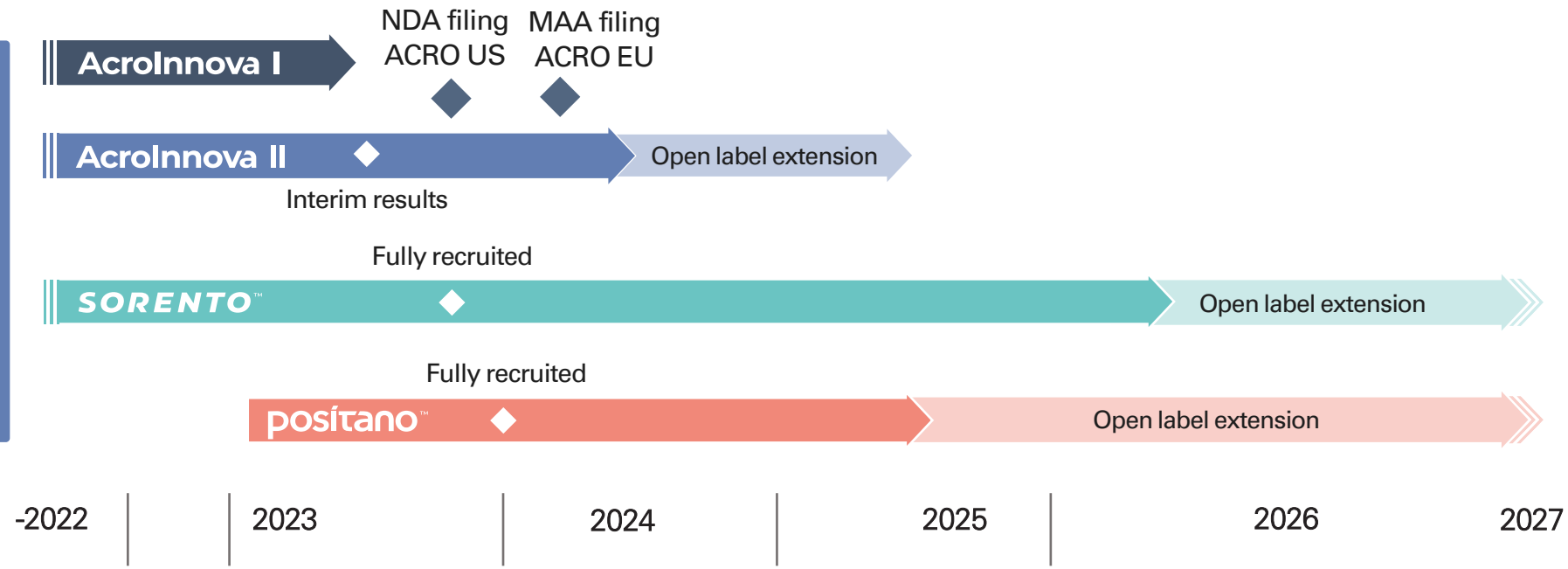
– CAM2029 octreotide plasma levels in the range of immediate release octreotide



SRL – somatostatin receptor ligand; PK – pharmacokinetic; IR – immediate release; LAR – long-acting release; TID – three times per day; q4w – every 4 weeks
Data on file

CAM2029 clinical program overview

5 completed Phase 1 and 2 clinical trials characterizing PK, PD and safety in healthy subjects and patients



ACROINNOVA 1 Phase 3 RCT
Randomized, double-blind, placebo-controlled trial in SRL responders

ACROINNOVA 2 Phase 3 LST
Open label, long-term safety and extension trial in partial and full SRL responders

SORENTO Phase 3 RCT
Active controlled Phase 3 trial in patients with metastatic/ unresectable GEP-NET

POSITANO Phase 2/3 RCT
Randomized, double-blind, placebo-controlled Phase 2/3 trial in patients with PLD

Timelines are indicative. PK – pharmacokinetic; PD – pharmacodynamic; RCT – randomized control trial; LST – long-term safety trial; ACRO – acromegaly, GEP-NET – gastroenteropancreatic neuroendocrine tumors; PLD – polycystic liver disease; SRL – Somatostatin receptor ligands

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Towards a patient-centric acromegaly treatment

Acromegaly is a rare, slowly progressive, chronic and serious condition typically caused by a tumor of the pituitary gland and overproduction of growth hormone. This results in excess growth of bones and tissue and a range of other symptoms and, if untreated, to premature death.

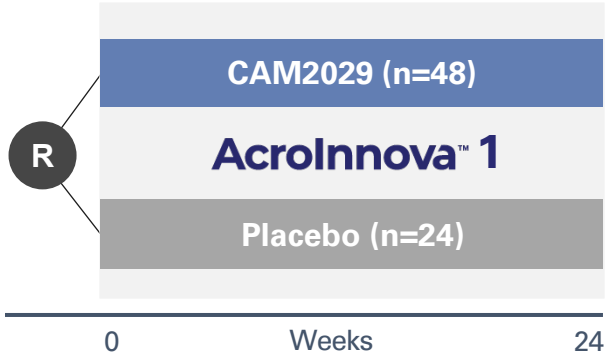
Positive results from ACROINNOVA 1 – CAM2029 provided robust biochemical control

ACROINNOVA 1 study design

– 24-week, randomized, double blind, placebo-controlled Phase 3 study

Patient population

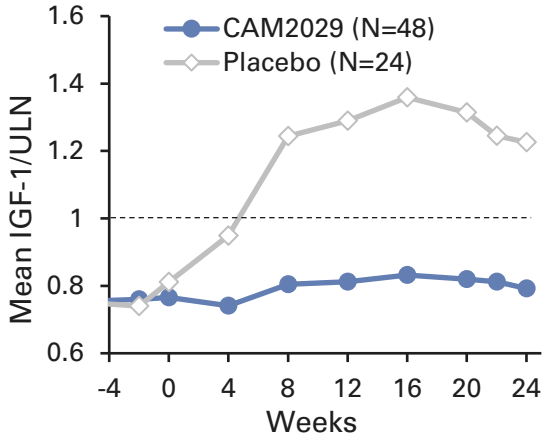
– Biochemically controlled on first-generation SRL*



Superiority achieved

– 77.2% vs. 37.5% patients with IGF-1 ≤1 ULN with CAM2029 versus placebo, p=0,00018

IGF-1 levels well controlled



CAM2029 improved

– Treatment convenience
– Acromegaly quality of life
– Patient satisfaction

CAM2029 was well tolerated

– Safety profile comparable to well established profile for first generation SRLs
– Most AEs were mild or moderate and transient injection site reactions and gastrointestinal side-effects
– No serious reactions related to CAM2029

**IGF-1 ≤ ULN and mean GH <2.5 µg/L at screening, on stable octreotide LAR or lanreotide ATG for ≥ 3 months*

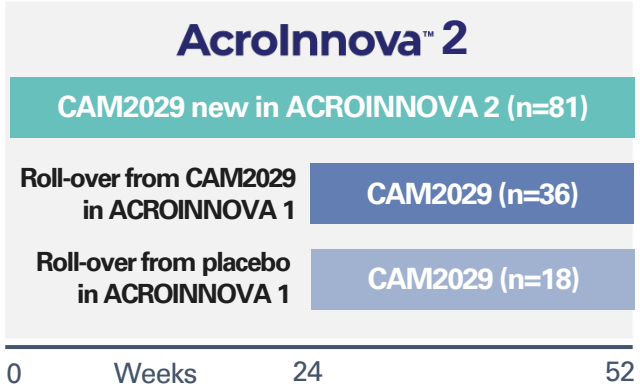
Positive topline results from ACROINNOVA 2

ACROINNOVA 2 study design

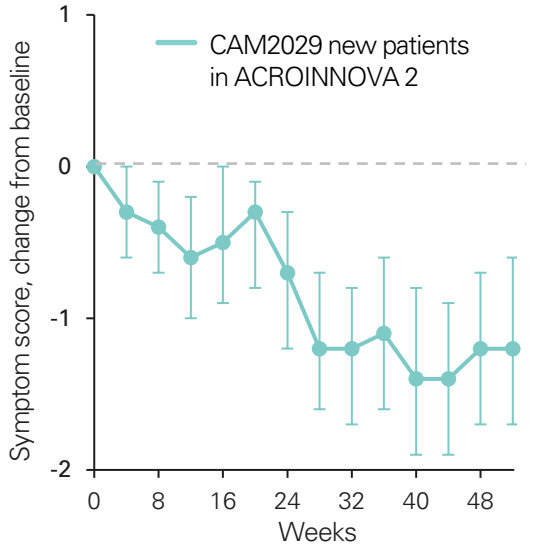
– 52-week, open-label safety study with further extension

Patient population

– New patients; uncontrolled or controlled with IGF-1<2xULN
– Patients who completed ACROINNOVA 1



Improved acromegaly symptoms with CAM2029



ACROINNOVA 2 results

– Reinforcing long-term safety and effectiveness in ACROINNOVA 1
– Increased response rate from SoC baseline in new recruited patients
– Roll-over placebo patients from ACROINNOVA 1 regained IGF-1 control with CAM2029

Improved patient reported outcomes for CAM2029 vs standard-of-care baseline

– Treatment satisfaction
– Quality of life
– Injection experience

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Potential to become new standard of care for GEP-NET

Neuroendocrine tumors are cancerous tumors originating from cells in the endocrine and nervous system. The tumors can occur throughout the body, most common they occur in the gastrointestinal tract and lungs. The disease can be chronic with serious symptoms and complications.

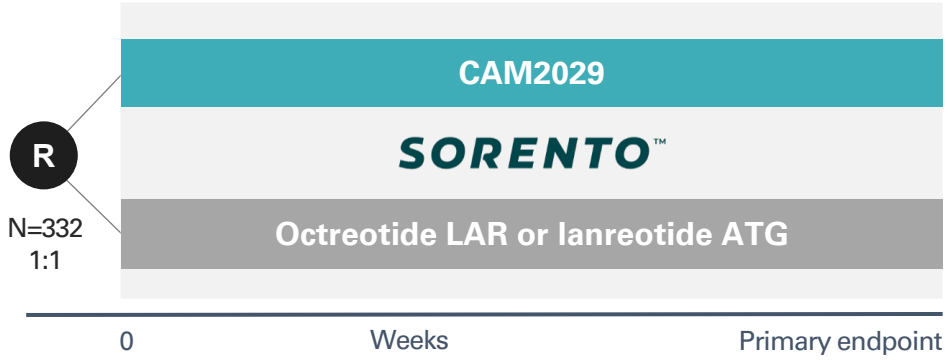
SORENTO assessing CAM2029 superiority in PFS vs SoC in patients with GEP-NET

Randomized, active-controlled Phase 3 study

- Randomized, multi-center, open-label, active-controlled Phase 3 study of CAM2029 vs. long-acting octreotide or lanreotide in patients with GEP-NET
- Single trial fulfilling regulatory requirements for safety and efficacy

Patient population

- Patients with confirmed, advanced and well-differentiated GEP-NET (grade 1 to grade 3)



Primary endpoint

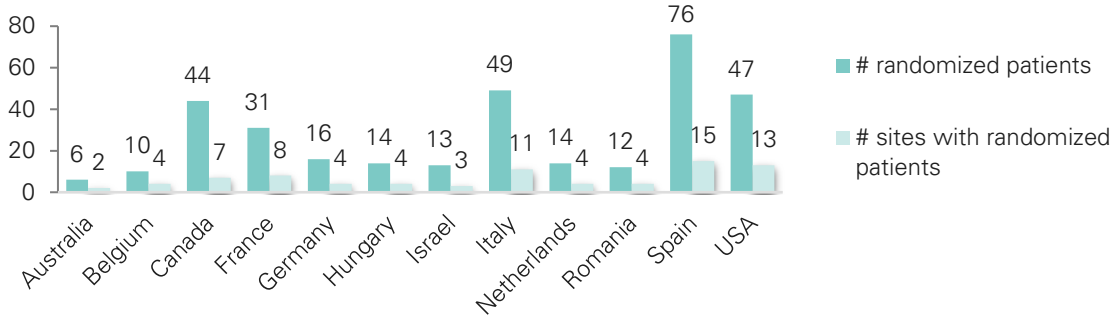
- Superiority in progression free survival, PFS, vs. standard of care (first-line medical treatment)
- Assessed after 194 documented PFS events

Secondary endpoints include

- Overall survival
- PROs (e.g., treatment satisfaction, quality of life)
- Safety

Recruitment completed Dec 2023

- Enrollment of 332 patients across 12 countries exceeding randomization target (302)



PFS – progression free survival; SOC – Standard of Care; GEP-NET – gastroenteropancreatic neuroendocrine tumors; PRO - patient reported outcome; LAR – long-acting release; ATG - autogel

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Addressing unmet medical needs in polycystic liver disease

Polycystic liver disease is a rare, genetic, and chronic disorder characterized by progressive growth of cysts in the liver, which can cause severe symptoms and result in impaired quality of life for patients.

Clinical Phase 2/3 study in PLD fully recruited

POSITANO trial to assess efficacy and safety of CAM2029

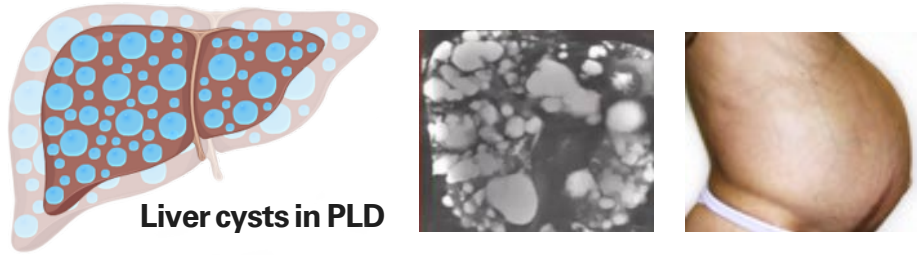
– 53-week randomized, placebo-controlled, three-arm study
  - Randomization of 71 patients completed in Q1 2024
  - Primary endpoint is liver volume change
  - Key secondary endpoint is Camurus' developed PRO, PLD-S
  - Multiple secondary endpoints, incl. quality of life, safety, etc.

– Open label extension extended to 120 weeks
  - Offer continued treatment in patients with expected benefits

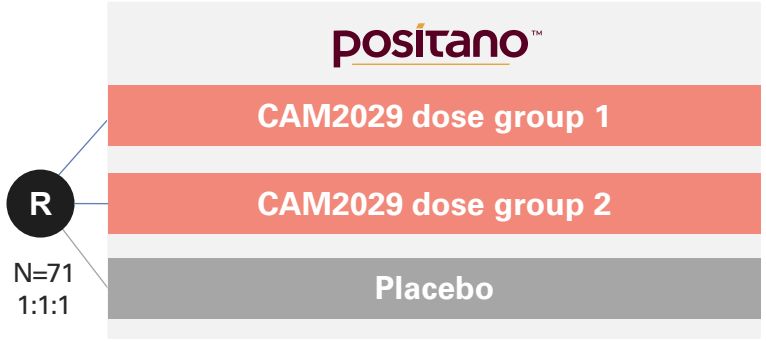
Large unmet medical need in PLD

– Severe quality-of-life implications for patients with symptomatic PLD

– No labelled option available



Liver cysts in PLD



PLD – polycystic liver disease, SSAs – somatostatin analogues ; PRO – patient reported outcome ; PLD-S – PLD symptoms

CAM2029 progressing towards market with expected milestones 2025

AcroInnova™

Pivotal randomized placebo controlled and long-term safety trials in acromegaly

- ✓ Positive results from ACROINNOVA 1 and 2
- ✓ NDA acceptance in the US – CRL for manufacturer
- ✓ MAA validation in EU
- ○ **NDA resubmission est. H1 2025**
- ○ **MAA CHMP opinion est. mid 2025**

SORENTO™

Subcutaneous Octreotide Randomized Efficacy in Neuroendocrine TumOrs

- ✓ SORENTO Phase 3 start Q4 2021
- ✓ SORENTO fully enrolled Q4 2023
- ○ **Target number of events for primary endpoint est. late 2025 or early 2026**

positano™

Polycystic liver Safety and efficacy TriAl with subcutaneous Octreotide

- ✓ POSITANO fully enrolled Q1 2024
- ✓ Orphan drug designation in EU and US
- ○ **Clinical study results Q2 2025**

Medical information and dissemination of ACROINNOVA results

Medical affairs activities

- Presentation of ACROINNOVA results at scientific meetings and conferences
- MSL teams meeting with acromegaly stakeholders
- National and regional advisory board meetings

Planned scientific conferences in 2025

ACROINNOVA 1 data recently published[1]

JCEM THE JOURNAL OF CLINICAL ENDOCRINOLOGY & METABOLISM

Octreotide Subcutaneous Depot for Acromegaly: A Randomized, Double-blind, Placebo-controlled Phase 3 Trial, ACROINNOVA 1

Diego Ferone, Pamela Freda, Laurence Katznelson, Federico Gatto, Pinar Kadioğlu, Pietro Maffei, Jochen Seufert, Julie M Silverstein, Joanna L Spencer-Segal, Elena Isaeva, Alexander Dreval, Maria Harrie, Agneta Svedberg, Fredrik Tiberg

[1] *Ferone et al. J. Clin Endocrinology & Metabolism 2024*

Commercial readiness for launch of CAM2029 (Oclaiz™) in acromegaly

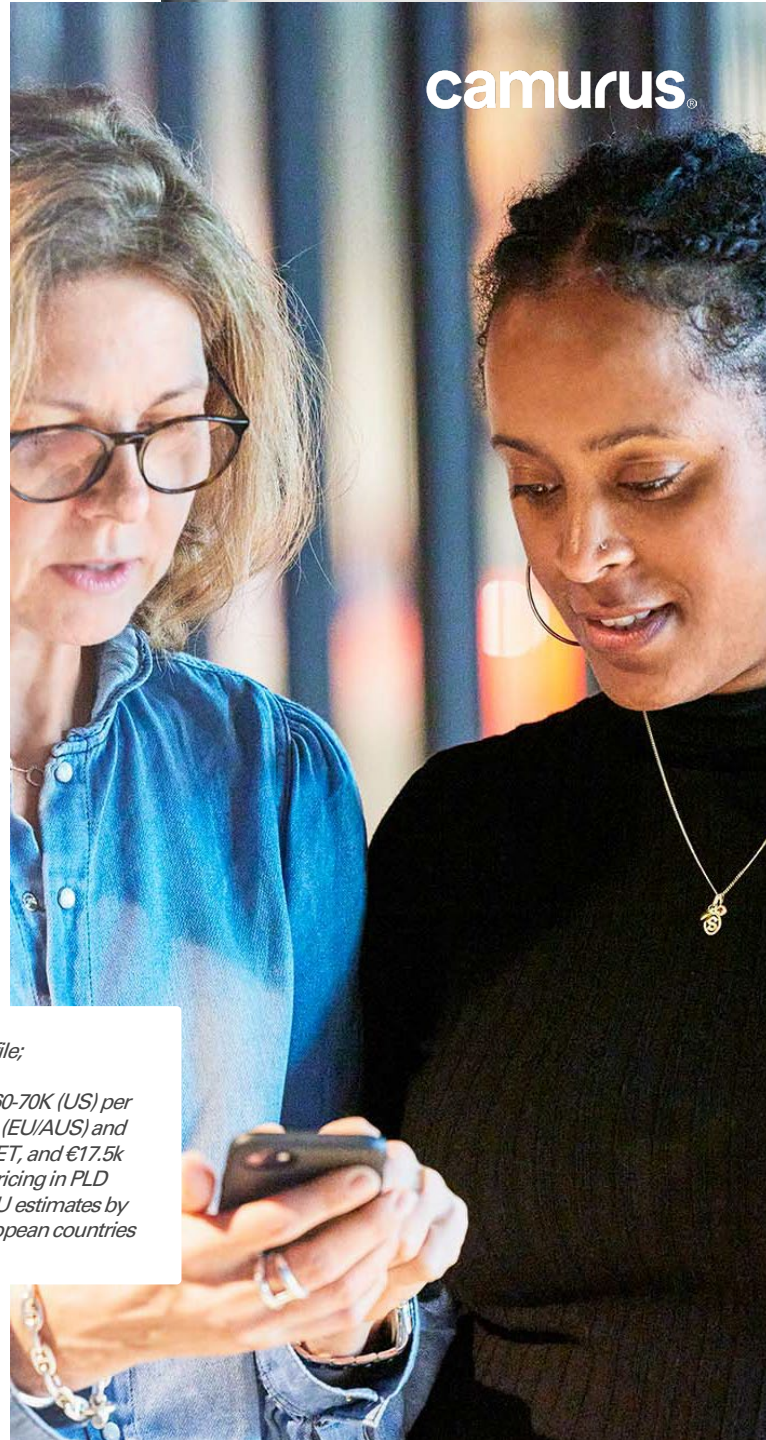
Pre-launch activities in US and EU

- In-depth market research
- Optimizing the distribution and supply chain model
- Payor interactions and advisory meetings
- Increasing awareness of Camurus among stakeholders

CAM2029 peak sales estimates >2 billion USD across indications[1-4]

	TERRITORY	PATIENT POPULATION	EST. PEAK PATIENT SHARE	EST. PEAK SALES
ACRO[1]	EU/AUS	16,500[4]	20 – 35%	€30 – 65 million
	US	10,000	25 – 40%	$150 – 280 million
NET[1]	EU/AUS	68,000[4]	30%	€300 – 400 million
	US	37,000	40%	$1,200 – 1,500 million
PLD[1]	EU/AUS	15-18,000[4]	30 – 40%	€80 – 100 million
	US	12-13,000	30 – 40%	$200 – 300 million

[1]Globe Life Science Aug 2022, data on file;
[2]Globe Life Science 2020, data on file
[3]Assuming €10-12.5ks (EU/AUS) and $60-70K (US) per year net pricing in acromegaly, €15-20k (EU/AUS) and $80-100K (US) per year net pricing in NET, and €17.5k (EU/AUS) and $60K (US) per year net pricing in PLD
[4]Patient numbers extrapolated from 5EU estimates by assuming same prevalence across European countries and Australia



New early-stage programs

Several early-stage programs advancing

- CAM2056 recently entered clinical development
- Positive data and assessments of multiple preclinical drug candidates, including long-acting incretins

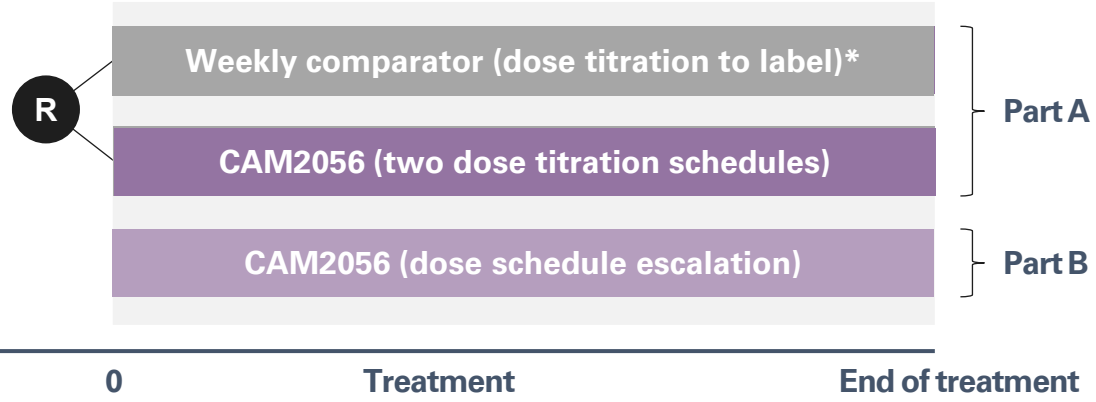
CAM2056 entered clinical development

CAM2056 – once monthly FluidCrystal semaglutide

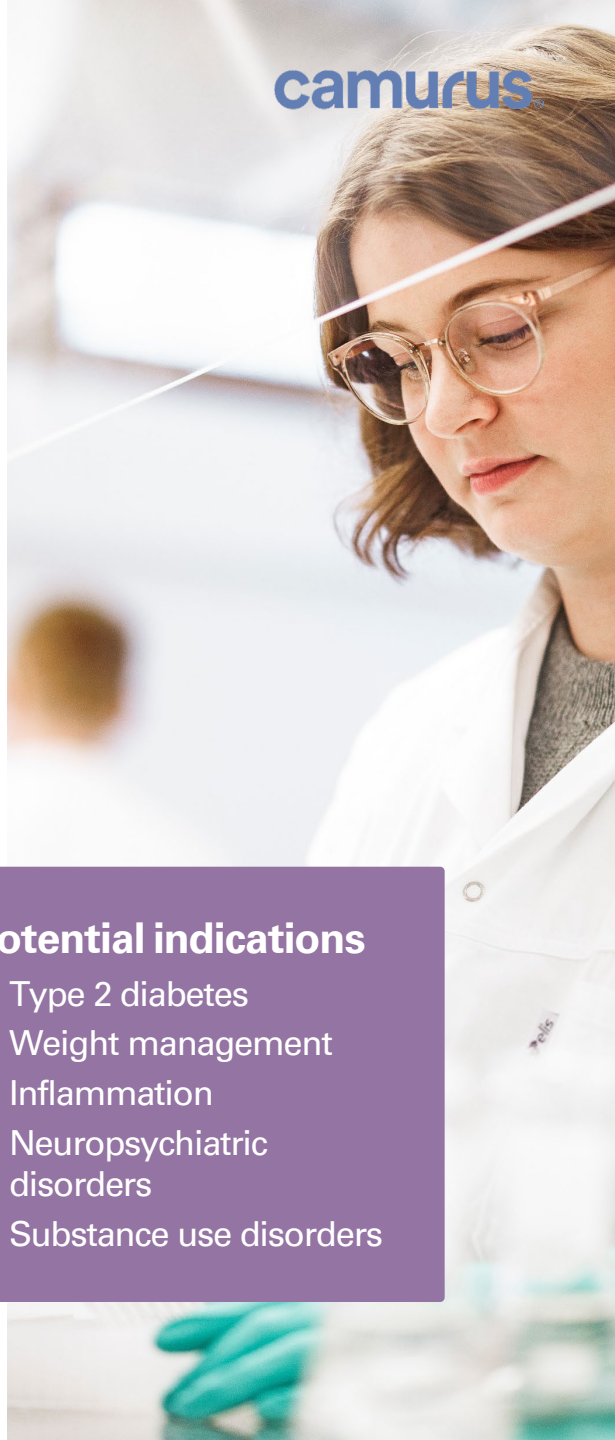
- ✓ Completed preclinical program met target profile for pharmacokinetics, pharmacodynamics (incl. weight management) and tolerability

Clinical Phase 1 study initiated

- ✓ Phase 1 study initiated assessing pharmacokinetics, pharmacodynamics (incl. weight loss), tolerability and safety of CAM2056 in overweight or obese participants who are otherwise healthy
- ○ Top-line results expected H2 2025



* *Wegovy®*



Potential indications

- Type 2 diabetes
- Weight management
- Inflammation
- Neuropsychiatric disorders
- Substance use disorders

Camurus expanding

New headquarter in Science Village, Lund

– Opened in January 2025
– ~3,700m^2 on the top floors of the “The Loop”
– Offices and state-of-the-art laboratories
– Capacity to grow to ~250 people
– Sustainability profile with LEED Gold certification

US office opened

– Carnegie Center, Princeton, New Jersey

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Significant near-term opportunities

- Increasing Buvidal penetration in Europe and RoW
- Accelerating sales of Brixadi in the US
- Market approvals of CAM2029 in acromegaly
- Clinical results for CAM2029 and CAM2056
- Diversification through business development
- Positive financial outlook with expected high growth revenues (+45-61%) and profitability (+63-117%)

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Shareholders and analyst coverage

Shareholders as of 31 March 2025	Number of shares	% of capital	% of votes
Sandberg Development AB	20,530,692	34.9	35.0
State Street Bank and Trust	3,063,735	5.2	5.2
Fjärde AP-fonden	2,808,776	4.8	4.8
Swedbank Robur Fonder	2,376,421	4.0	4.1
JP Morgan Chase Bank	2,297,156	3.9	3.9
Fredrik Tiberg, CEO	1,615,000	2.7	2.8
Handelsbankens fonder	1,216,641	2.1	2.1
Avanza Pension	1,083,456	1.8	1.9
SEB Investment Management	994,624	1.7	1.7
The Bank of New York Mellon	825,063	1.4	1.4
Afa Försäkring	776,403	1.3	1.3
Norges bank	684,492	1.2	1.2
CS Client Omnibus	630,763	1.1	1.1
JP Morgan SE	522,253	0.9	0.9
Länsförsäkringar Fondförvaltning	485,830	0.8	0.8
Other shareholders	18,967,713	32.2	31.9
In total	**58,879,018**	**100.0**	**100.0**

Analysts

Carnegie
Erik Hultgård

DNB
Patrik Ling

Handelsbanken
Mattias Häggblom

Jefferies
Brian Balchin

Nordea
Viktor Sundberg

Pareto
Dan Akschuti

Bryan Garnier
Oscar Haffen Lamm

SEB
Christopher Uhde

Experienced and committed management team

Fredrik Tiberg, PhD
President & CEO, CSO
In Company since *2002*
Holdings*: 1,615,000 shares, 42,000 employee options and 4,000 PSP units*

Education: M.Sc. in Chem. Eng., Lund Institute of Technology, PhD and Assoc. Prof. Physical Chemistry, Lund University.
Previous experience: More than 20 years executive leadership experience from the pharmaceutical industry. Prof Physical Chemistry, Lund University; Visiting Prof at Oxford University; Section Head, Inst. for Surface Chemistry.

Richard Jameson
Chief Commercial Officer
In Company since: *2016*
Holdings*: 29,193 shares, 24,000 employee options and 2,300 PSP units*

Education: B.Sc. in Applied Biological Sciences from University West of England
Previous experience: General Manager, UK & Nordics for Reckitt Benckiser (2010 – 2013) and Area Director Europe, Middle East and Africa for Indivior (2013 – 2016).

Markus Johnsson
Senior VP R&D
In Company since: *2003-2017, 2021-*
Holdings*: 21,000 shares, 9,500 employee options and 1,500 PSP units*

Education: Ph.D. in physical chemistry and M.Sc. in chemistry from Uppsala University.
Previous experience: More than 20 years of experience from pharmaceutical development and project management

Torsten Malmström, PhD
Chief Technical Officer
In Company since *2013*
Holdings*: 35,363 shares, 16,000 employee options and 1,500 PSP units*

Education: M.Sc. in Chemistry, PhD in Inorganic Chemistry, Lund University
Previous experience: More than 20 years of experience from pharmaceutical R&D including Director Pharmaceutical Development at Zealand Pharma, Director of Development at Polypeptide, Team Manager at AstraZeneca.

Alberto M. Pedroncelli
Chief Medical Officer
In Company since *2023*
Holdings*: 1,000 shares, 20,000 employee options and 1,500 PSP units*

Education: MD University of Milan. Ph. D. endocrinology post-graduate school University of London
Previous experience: Head of Clinical Development and Medical Affairs Recordati, Senior Leadership positions Novartis, clinician and research fellow Dept. Endocrinology, University Hospital Bergamo, Italy

Agneta Svedberg
VP Clinical Dev.
In Company since: *2015*
Holdings*: 22,987 shares, 16,000 employee options and 1,500 PSP units*

Education: M.Sc. In Radiophysics and B.Sc. In Medicine from Lund University, Executive MBA from Executive Foundation Lund
Previous experience: More than 25 years of experience in drug development, incl. as COO at Zealand Pharma, CEO of Cantargia, Senior VP Clinical Development at Genmab.

Jon Garay Alonso
Chief Financial Officer
In Company since: *2022*
Holdings*: 1,450 shares, 24,000 employee options and 2,300 PSP units*

Education: Bachelor in Business Administration by Universidad Comercial de Deusto. Executive MBA by IESE Business School.
Previous experience: More than 20 years experience from Finance within pharmaceutical and medtech companies, incl. Baxter, Gambro, Convatec, Bristol Myers Squibb.

Fredrik Joabsson, PhD
Chief Business Dev. Officer
In Company since *2001*
Holdings*: 40,170 shares, 16,000 employee options and 1,500 PSP units*

Education: M.Sc. in Chemistry, PhD in Physical Chemistry, Lund University
Previous experience: More than 20 years of experience in pharmaceutical R&D, business development, alliance management and investor relations.

Maria Lundqvist
Head of Global HR
In Company since *2021*
Holdings*: 16,000 employee options and 1,500 PSP units*

Education: B.Sc: in Business and Economics, Uppsala University.
Previous experience: More than 20 years of experience of leadership roles within Human Resources, including HR Director Nordics at Teva Pharmaceuticals and HR positions at Tetra Pak, Vestas and AstraZeneca.

Annette Mattsson
VP Regulatory Affairs
In Company since: *2017*
Holdings*: 2,004 shares, 16,000 employee options and 1,500 PSP units*

Education: Bachelor of Pharmacy, Uppsala University and Business Economics, Lund University
Previous experience: More than 25 years of experience within regulatory affairs, including European RA Director/Global RA Lead at AstraZeneca and Global RA Lead at LEO Pharma.

Behshad Sheldon
President Camurus Inc.
In Company since *2024*
Holdings*: 1,000 shares, 2,000 employee options and 1,500 PSP units*

Education: B.Sc. in Neuroscience from University of Rochester
Previous experience: More than 25 years of experience from the international pharma industry, including President & CEO of Braeburn Pharmaceuticals and senior positions within Smithkline Beecham, Bristol-Myers Squibb and Otsuka Pharmaceuticals.

Bo A. C. Tarras-Wahlberg
VP Legal & Group General Councel
In Company since *2024*
Holdings: *1,500 PSP units*

Education: LLM from Lund University and studies at Queen Mary College
Previous experience: More than 20 years of experience as lawyer and from international senior legal positions, incl. as Assoc. General Counsel at Baxter, Gambro, legal private practice and as law clerk at District Court.

PSP units – Performance Share Plan units