What companies say

About their relations with patient groups 2024–2025

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PATIENT VIEW

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Foreword

PatientView is once again grateful to those pharmaceutical companies that provide the annual 'Corporate Reputation of Pharma' series of publications with an overview of their own perspectives on patient-group relationships—based on their own experiences, and with their own case studies. The 2024/2025 publication has received contributions from:

- Boehringer Ingelheim.
- Gilead Sciences.
- Novartis.
- Servier.
- ViiV Healthcare.

These five companies bring valuable context to the main 'Corporate Reputation of Pharma 2024/25' report, providing, as they do, a strong indication of how pharma's relationships with patient groups are developing over time (and will likely adapt in the future).

As patient engagement continues to develop as a core component of pharma's business strategy, we are beginning to see a more systematic approach towards the implementation of that engagement across pharma—within R&D, and within market access, especially. All of the five companies that provided insights this year made a point of stressing the importance of patient input into virtually every aspect of R&D: from early stage, before in-human trials commence, through to maturity (and even in supply-chain initiatives).

The five companies work with thousands of patient groups worldwide, across dozens of therapy areas, and they all confirm that a high degree of patient-experience data (PED) are now integrated into most of their R&D efforts. While the trend has, to some degree, been mandated by regulation, all five companies note improved outcomes—in terms of efficient (and effectively-run) research and clinical studies that are aligned to both patient needs, and to regulatory requirements. For example, one of the five contributing companies highlighted a programme it was running to develop patient perceptions of biopsy; the programme revealed key barriers to trial participation. Insights like these are critical in refining the approach to future studies.

If the contributions of the five companies are any indicator of change, it may be assumed that, eventually, all research-based pharmaceutical companies will increase their level of engagement with patient groups in R&D over the coming months and years.

Given that the focus for pharma is slowly shifting towards creating products for smaller populations of patients who are frequently vulnerable (or who have specific access challenges), we now have

Foreword

examples from the companies' corporate contributions of how patient engagement is implemented in these situations. For example, the contributing companies hold multi-stakeholder working groups within multiple local communities around the world.

Patient groups have long stressed the importance of ensuring that diverse patient types are involved in clinical development; indeed, patient groups are well versed generally in calling for better access to clinical trials for the patients they represent. The solution provided by a number of the corporate contributors is a move towards companies working with local patient communities in decentralised clinical trials. In addition, the contributors emphasise that companies now try to ensure continued availability of unlicenced medicines beyond clinical trials, through their managed-access programmes.

Another concern for patient groups is that they are noticing a seemingly-increasing incidence of drug shortages. Pharma companies are responding by utilising voluntary, royalty-free licensing agreements that help small, local, pharma businesses in low- and middle-income countries build up their own capacity for the affordable manufacture of medicines.

As pharma companies adapt to domestic political uncertainties, it will remain of key importance that they do not allow their hard work in supporting patients to be undermined.

Mat Phillips,
Associate Director,
PatientView

Boehringer Ingelheim

What is the name of your company?
Boehringer Ingelheim.

Which views are you expressing in this questionnaire on your company's patient-group relations in 2024 and 2025?
Global.

Approximately how many patient groups (PAGs) did your company PARTNER with in 2024?
> 500.

What MAIN TYPES OF RELATIONSHIPS did your company have with your patient-group partners in 2024?

- ➔ Funding (for example, grants or donations).
- ➔ Speaker engagements.
- ➔ Consultancy activities.
- ➔ Provision of information to patient groups.
- ➔ Supporting patient-group campaigns.
- ➔ Co-creating projects.
- ➔ Creating support tools for patients and carers.
- ➔ Helping patient groups to network.
- ➔ Supporting patient-groups' publicity.
- ➔ Training and capacity building.
- ➔ Involving patient groups in R&D.
- ➔ Support in building web or e-health resources for patient groups (such as apps).

Could you specify which are the most common of these relationships?
Co-creating projects; consultancy activities; training and capacity building.

During which of the following corporate activities does your company seek PATIENT/PATIENT-GROUP INPUT or ADVICE?

- ➔ **Strategic input**: Regularly.
- ➔ **Finance**: Sometimes.
- ➔ **Human resources**: Sometimes.
- ➔ **Investor relations**: Boehringer Ingelheim has been a family-owned company since 1885; therefore, 'investor relations' is not applicable.
- ➔ **Early-stage research**: Sometimes.
- ➔ **Late-stage research**: Regularly.
- ➔ **Manufacturing (including packaging)**: Regularly.
- ➔ **Pharmacovigilance**: Regularly.
- ➔ **Supply chain and distribution**: Sometimes.
- ➔ **Marketing and sales**: Regularly.
- ➔ **Operations**: Sometimes.
- ➔ **Market access**: Regularly.
- ➔ **Regulatory affairs**: Sometimes.
- ➔ **Medical affairs**: Regularly.
- ➔ **Public affairs/corporate communications**: Sometimes.

Boehringer Ingelheim

Your company's PATIENT-RELATED ACTIVITIES in 2024 and 2025 (and beyond)

On PHARMA R&D

Responses to last year's company questionnaire made clear that pharma R&D now focuses closely on improving patient involvement in R&D.

Therefore:
(i.) What BENEFITS has your company gained from the work that it has done during 2024 in involving patients and patient groups WITHIN THE R&D FUNCTION?

Boehringer Ingelheim is committed to "Patient-Powered Progress" – our vision for patient engagement – based on the belief that patient partnerships drives the right sort of innovation, to transform lives for generations. To achieve Patient-Powered Progress, we:

- ➔ Create opportunities and platforms to **listen, learn and support** our patient community. This builds trust, which opens doors to partner with patients in more meaningful ways.
- ➔ **Systematically integrate patient insights** into everything we do – from early research to market entry and beyond.
- ➔ Collaborate with patient groups to co-create solutions that **empower and equip** them to more fully and effectively participate in and influence wider healthcare decision making.

The emphasis on systematically integrating patient insights guides Boehringer's R&D and strategic decision making. Boehringer believes that patients' views should be brought into strategic planning and development from inception.

As Dr Paola Casarosa, Global Head of Boehringer Ingelheim's Innovation Unit stated in Politico: *"We work with patients at every possible step of the R&D process, helping us to incorporate their feedback, and to focus on what the actual unmet patient need is."*

To develop therapies that address specific patient needs, preferences and expectations, first we engage with patients to understand what those needs, preferences and expectations are. Their insights inform our science, as well as later stages of the therapeutic lifecycle.

Here are some examples of how we integrate patients and their insights across our R&D:

Discovery phase:

- ➔ Boehringer Ingelheim regularly reviews where there are areas of high unmet medical need, which informs where we may focus our research efforts in the future. We also aim to include patient perspectives in this process and allow ourselves to be guided by their feedback. For instance, in 2024 we collaborated with IAPO (International Alliance of Patients' Organizations) and IAPO Patients for Patient Safety Observatory to survey patients and caregivers to help inform recommendations for future research.

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Sustaining patient engagement throughout the development lifecycle:

➔ **Guided by Patient Experience Data (PED)**
Embedding PED in the development of our medicines is top of mind at Boehringer Ingelheim. In addition to meeting regulatory expectations, PED ensures patient needs guide our R&D from day one. Patient communities are rich sources of data. However, according to our patient partners, patient groups lack confidence in collecting and using PED. They would appreciate educational resources to generate and submit PED in accordance with HTA guidelines and to support other healthcare decision-making processes. So, we collaborated with patient experts to develop and implement the PED Training Resource Finder. This tool collates existing PED training and helps patient organizations and patient advocates to easily find, access and select PED training resources according to their needs and experience. The PED Resource Finder also enabled Boehringer and its patient partners to identify gaps in existing PED materials. This gap analysis informs a **new comprehensive PED curriculum** for patient groups, which can be adapted to local PED requirements.

➔ **Patient-guided innovation in Oncology**
Our patient engagement in oncology is a good example of how we partner with patients to identify patient needs and priorities throughout the whole patient journey. We have established a **Global Oncology Patient Panel** with patient community partners, working in a pan-oncology capacity. Members help us identify and address patients' unmet needs and obstacles to access. In so doing, they drive a caliber of drug development and innovation that reflects real-world patient priorities, leading to more effective treatments and cancer care pathways.

➔ **Patient guided innovation in Pulmonary Fibrosis**
As a leader in Pulmonary Fibrosis, we have forged long-standing partnerships with patient groups and patient experts. They **inform our clinical study parameters and protocols**. For instance, they drew our attention to the high cough burden associated with PF. We have since implemented multiple cough PROs to assess the cough burden and develop a therapeutic solution. They suggested we **include caregivers in trial simulations**, which has been transformative, and exposed impracticalities that could have become obstacles to enrolling and staying in a clinical trial.

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➔ **Patient guided innovation in medical device development**
Boehringer Ingelheim also partners with patients to improve patients' user experiences on drug delivery devices. For instance, we asked ourselves: **How can medical devices be developed in a way that systematically integrates patient insights?** Together with patient-group representatives and individual patients with significant device experience we have co-created and implemented a **blueprint for early and systematic patient involvement** in the development of medical devices. The collaborative approach has delivered practical, step-by-step advice for integrating patient input in medical device development. We have published the blueprint externally, so others can draw on this resource as well, for their patients' benefit. The blueprint was awarded the **Best Overall Initiative** at PFMD's 2024 'Made with Patients' Awards.

(ii.) What are your company's plans for ACCELERATING ITS EFFORTS at patient involvement in R&D, during 2025 and beyond?

To further enable **Patient-Powered Progress**, we will advance our practice of integrating patient insights in our R&D and across the wider business, in recognition that patients provide insights that even the best scientists and clinicians don't have, and their insights drive a class of innovation that transforms lives.

In a recent communication, Dr Ioannis Sapountzis, Global Head, Therapeutic Areas, at Boehringer Ingelheim, captured the golden thread that connects our innovation with strategic decision-making across our therapeutic areas: *"More than ever, we are seeing how partnering with patients and patient organizations is advancing both our scientific innovation and our ability to positively impact the healthcare journey of patients. It's what we call patient-powered progress."*

We will continue to embed ways to propel Patient-Powered Progress across the therapeutic lifecycle. For instance:

- We'll ensure greater patient representation in the design of our clinical trials to identify varying patient needs that cut across demographics, and opportunities to address these needs with further research and development.
- We'll continue to roll-out internal training in generating, learning from and submitting patient experience data (PED).

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ON ACCESS TO TREATMENT

Responses to last year's company questionnaire showed that many pharma companies operate programs which aim to improve access to treatment and care for the patient communities of partner patient groups.

Therefore:
(i.) Can you describe your company's key programs during 2024-2025 that ASPIRE TO IMPROVE ACCESS to treatment and care for the patient communities of your partner patient groups?

A core aim of our collaborations with patient organizations is to support patient access to medicines and healthcare services.

Improving access in vulnerable communities

In 2024, we implemented several key programs aimed at improving access to healthcare. From establishing an end-to-end patient support program to improve access to healthcare treatments and solutions in hypertension and Type 2 Diabetes in vulnerable communities, to launching the '**CRM Patient Africa**' initiative to strengthen healthcare for chronic kidney disease (CKD) by collaborating with local stakeholders and governments to integrate healthcare solutions into existing trainings and programs.

Equipping patient groups to speak up for greater access

In accordance with our patient-equipping approach to Patient-Powered Progress, we co-created "**Access to Care**" – a policy-shaping platform for our Central and European markets, to equip patient groups to participate in healthcare decision making, so they campaign for better access to care.

"Access to Care" builds patient organizations' confidence in collaborating with decision-makers and government organizations and gives voice to their medical access requirements. It is directed by a multistakeholder Steering Committee of patient experts, healthcare professionals, healthcare affairs experts and Boehringer employees. Together, we've run workshops with lawyers and patent authorities and launched a legal toolkit for patient organizations with the Healthcare Education Institute in Poland (an NGO).
As a result of "Access to Care", we're seeing patient groups push for change on a local level. In Latvia, patient organizations helped to remove prescription limitations for heart disease patients. In Bulgaria, patient groups co-created a draft policy for the early screening of kidney disease. By equipping and emboldening patients to participate in policy frameworks, we can help them build relationships with key stakeholders, such as policy makers and payors, so they can overcome access inhibitors and improve patient pathways.

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(ii.) What are your company's FUTURE PLANS for improving access to treatment and care, beyond 2025?

As a family-owned business, **we pursue a long-term view** and commit to projects over time that deliver mutual value, including projects that deliver greater access to care.

We therefore plan to continue, and expand the initiatives explained above, focusing on innovative and sustainable, long-term models to improve access to healthcare treatments and solutions. In line with our resolution to enable Patient-Powered Progress, oftentimes we seek to educate patient groups and other key stakeholders in how to call for faster, more accurate diagnoses and better access to care.

Our **Angels initiative** is a good example of how and why we put this long-term view into practice and partner with multiple stakeholders to affect change. Since 2016, we have partnered with the European Stroke Organization (ESO), the World Stroke Organization (WSO), the Stroke Alliance for Europe (SAFE), and many other national stroke societies, companies and health institutions to work with doctors, nurses and ambulance crews to build acute stroke networks, optimize treatment and diagnosis and implement best practices. Thanks to the Angels Initiative, multidisciplinary stroke teams around the world can access education, standardization tools, consultancy, community and quality monitoring processes. This enables them to act faster to minimize the burden of stroke on patients' lives.

On COMPANY/PATIENT-GROUP RELATIONS

All of the companies responding to last year's company questionnaire affirmed seeking open, lasting relations with patient groups.

Therefore:
What does your company see as the main gains for both itself, and for partner patient groups, when establishing LONG-TERM RELATIONS with patient groups?

Boehringer Ingelheim's patient-engagement strategy is rooted in strengthening external partnerships. These partnerships are nurtured and deepened over time. We develop long-term partnerships that equip and empower patient organizations to effectively represent their patient community and shape healthcare decision-making.

By prioritizing longevity, we can develop relationships that drive change (i.e., resulting in co-created resources and initiatives to meet defined needs) and facilitate capability building by connecting patient partners with a network of partners that learn from each other and share best practices. These long-term patient partners are instrumental in realizing Patient-Powered Progress.

Sustaining long-term multistakeholder relationships

Many patients on our Pulmonary Fibrosis Steering Committee have been collaborating with us since 2013. Similarly, we have contracted patient experts to stay the course on our Global Patient Oncology Panel (GOPP) and Global Patient Partnership Initiative Steering Committee (to name a few). These relationships provide consistency and a route to impact.

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In most instances, we look to establish long-term relationships with different types of stakeholders: patient groups, patient experts, lay patients, caregivers, healthcare professionals, etc. Multistakeholder forums tend to be rich sources of insights. Their perspectives provide a 360-degree view of the patient ecosystem and expose us to new avenues to impact. They can also take learnings back to their environment, so all parties can advance patient causes in their home settings.

Building a Global Patient Partnership Initiative Community
Our Global Patient Partnership Initiative is comprised of a biennial Global Patient Partnership Summit (GPPS), year-round Community, Research and Projects.

The beating heart of each Summit is a joint (patient and Boehringer) Steering Committee, whose patient members help curate, host and drive the Summits. They co-lead the Summits to unearth innovative ways to overcome cross-disease healthcare challenges. Many have been involved in the 2021 and 2023 Summits and will play an instrumental role in the 2025 Summit. These deep, longstanding patient partnerships are fundamental to GPPS's success. It is a collective effort.

In addition to patient attendance at the Summit, we also have a thriving Patient Community that convenes all year round. Every year we look to expand our GPPS Community, by recruiting patients with different interests, areas of expertise, and from different regions. This heterogeneity enriches the GPPI community and opens our eyes to additional unmet needs.

The GPPI Community drives a lot of the work that is sparked at the Summit. The GPPI Community is made up of diverse patient experts from both large and small patient organizations and individuals living with disease. They stay in regular contact, share ideas and best practices.

In 2024 and 2025, patient partners (members of the Steering Committee and Community) co-led and co-presented research into training resources on patient experience data (a GPPI Project) at two respected medical conferences.

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Finally, on FUTURE COMPANY/PATIENT-GROUP RELATIONS

Looking to the future: What TRENDS ARE EMERGING in how your company and patient groups work together? And how will you measure progress?

At Boehringer Ingelheim specifically, our focus on patient unmet needs and the value we place on strategic patient partnerships, is driving an internal culture change. We have commissioned all employees in human pharma to propel Patient-Powered Progress, because we believe that when we empower patients, they power our progress.

The expression "Patient-Powered Progress" might be unique to Boehringer, but we are not alone in moving away from treating patients as mere recipients of therapies, and towards patient partnership building. This shift is driving the following trends, at Boehringer and beyond.

Trend: Driving change with multistakeholder coalitions
As cited above, we see huge mutual value in bringing different stakeholders together, across disease areas and healthcare ecosystems. One example is **our multistakeholder approach to raising awareness of Generalized Pustular Psoriasis (GPP)**. We convened a multistakeholder forum with dermatologists, clinicians, patients, patient advocates and rare disease policy experts to create a GPP charter: which calls for quicker diagnosis and access to treatment. The charter puts GPP on the radar for clinicians and gives strength and credibility to core "asks" of GPP patients.

Boehringer used the charter in Italy to work with local patient organizations and together, developed a strategy to bring sustained practical support to remote communities. They formed a coalition with members of the local patient community, scientific societies and national policy makers. The coalition connected with the inter-parliamentary group on rare diseases, to secure a formal commitment to help people living with GPP and facilitate a wider community discussion on the disease. In 2023, these efforts paved the way for the development of new therapeutic options with widespread population reach, and accurate diagnoses for patients with GPP symptoms who did not have a name or treatment plan for their illness. In 2024, we started working with patient organizations to upskill specialists and unlock medical access further. In Italy, few dermatologists knew how to identify GPP. Boehringer Ingelheim Italy and the Patient Association created an educational event to improve patient referrals by equipping more dermatologists to identify and treat GPP. The Italian coalition on GPP is still active in spreading awareness on the disease and the newly available treatment. In 2025 we will continue to work with the coalition to raise awareness of GPP and the need for chronic treatment. We will also partner with the GPP patient association to create a visual campaign that conveys the strain of living with GPP.

Trend: Increased integration of Patient Experience Data (PED)
Regulators have increasingly emphasized the inclusion of PED in pharmaceutical development and decision-making. The FDA has issued Patient-Focused Drug Development (PFDD) guidance, the European Medicines Agency (EMA) encourages patient-reported outcomes and real-world evidence in regulatory assessments.

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We're now seeing greater momentum – pharma companies see the benefits of drawing on PED to determine patient preferences and unmet needs, ensure clinical trial endpoints align with what matters to patients, identify treatment burdens, side effects and adherence challenges. At Boehringer Ingelheim, we have focused on developing internal training and supported awareness of the role of PED and education in how to generate and submit PED for Patient Organizations.

In 2024 we co-created and launched the PED Training Resource Finder for Patient Organizations and in 2025 we will be launching a PED curriculum (both cited above). We have also presented research to the medical community on the need to support and equip patient groups to submit quantitative and qualitative PED, using robust methods recognized by HTA and regulatory stakeholders.

Trend: Supporting patients with multiple diseases with an integrated approach
For at least five years, we have called for a greater focus on the whole patient. Based on our legacy of innovative treatments for a range of cardiovascular, renal, and metabolic (CRM) diseases, we have seen first-hand that CRM diseases are interconnected, co-exist, and can amplify one another, resulting in a significant burden on patients' lives.

In 2024, we convened multiple patient summits and ad boards to bring together patient leaders within cardiovascular, renal, and metabolic ecosystems to gain further insights on the unmet needs of people living with multiple diseases and co-create solutions that address the interconnectedness of disease.

We are modeling a shift from fragmented CRM care towards solutions that reward an integrated approach to treatment and early prevention by diagnosing and managing CRM diseases as connected conditions. Our goal is to reduce the burden and improve outcomes for people living with these diseases, their families and the healthcare system.

To this end, we're also supporting our patient community with a competitive global CRM grant. Patient organizations in the CRM health space are invited to submit a proposed initiative that improves information and care related to interconnected CRM diseases.

Integrated healthcare is both a trend and an imperative. It improves patient pathways and the risk factors of living with interconnected illnesses. This grant, along with other interventions, brings us closer to improving the lives of people living with interconnected CRM diseases through innovative, patient-centric solutions, instigated with our patient partners.

These trends advance Patient-Powered Progress, within Boehringer Ingelheim and across the wider healthcare ecosystem. Moving forward we will focus on how to measure the impact of Patient-Powered Progress, to demonstrate the value of patient partnerships internally and externally.

What is the name of your company?
Gilead Sciences, Inc.

Which views are you expressing in this questionnaire on your company's patient-group relations in 2024 and 2025?
Global.

Approximately how many patient groups (PAGs) did your company PARTNER with in 2024?
Approximately 175 organizations.

What MAIN TYPES OF RELATIONSHIPS did your company have with your patient-group partners in 2024?

- ➔ **Funding** (for example, grants or donations).
- ➔ **Co-creating projects**.
- ➔ **Involving patient groups in R&D**.

Could you specify which are the most common of these relationships?
Co-creating projects; funding; R&D involvement for HIV.

During which of the following corporate activities does your company seek PATIENT/PATIENT-GROUP INPUT or ADVICE?

- ➔ **Early-stage research**: Regularly.
- ➔ **Late-stage research**: Regularly.
- ➔ **Marketing and sales**: Regularly.
- ➔ **Operations**: Regularly.
- ➔ **Market access**: Regularly.
- ➔ **Medical affairs**: Regularly.
- ➔ **Public affairs/corporate communications**: Regularly.

Gilead Sciences, Inc.

Your company's PATIENT-RELATED ACTIVITIES in 2024 and 2025 (and beyond)

On PHARMA R&D

Responses to last year's company questionnaire made clear that pharma R&D now focuses closely on improving patient involvement in R&D.

Therefore:
(i.) What BENEFITS has your company gained from the work that it has done during 2024 in involving patients and patient groups WITHIN THE R&D FUNCTION?

Gilead Sciences has been a leader in involving patients and community groups in the expansion of R&D and clinical trials. Our R&D is geared toward therapy areas that disproportionately impact underserved communities, and Gilead has a legacy of ensuring we involve these same communities in our clinical trials.

Gilead is committed to designing and supporting clinical trials that focus on the diverse patient populations we serve. Increased access to clinical trials and representation in patient population groups creates downstream benefits that lead to a wide array of benefits for both Gilead and the people who may ultimately benefit from the research/intended therapies. We know that building strong relationships with groups at the start of the R&D process fosters trust and offers a crucial perspective when developing clinical trials that reflect the patient population and developing appropriate access plans.

The PURPOSE Program for Gilead's investigational HIV PrEP medication demonstrated a significant milestone for clinical trial diversity and Gilead's industry leadership. These trials were groundbreaking across several dimensions:

- ➔ In two of the PURPOSE program's clinical trials, PURPOSE 1 and PURPOSE 2, more than 8,000 participants were selected in some of the countries with the highest HIV burdens, which helped ensure that the people who would ultimately benefit from this therapy (if approved) were present in these pivotal trials.
- ➔ Our PURPOSE 2 trials involved a diverse set of participants, including gender nonbinary individuals, and transgender men and women.

Gilead also established trial-specific Global Community Accountability Groups (CAG), composed of more than 40 representatives from the countries and communities reflected in the PURPOSE trials. CAG members advised on communications, recruitment and retention strategies and specific trial site strategies. Gilead continues to work with CAG members to seek advice and feedback that helps contribute to Gilead's HIV prevention initiatives and projects.

By prioritizing inclusive practices in research, we are not only fostering trust with communities but also collaborating with them to co-create solutions that directly address health inequities in clinical research. As innovation in HIV prevention and treatment evolves, Gilead's model of early and meaningful community engagement will serve as a blueprint, ensuring that the next generation of medical breakthroughs are accessible and beneficial to all.

Gilead Sciences, Inc.

(ii.) What are your company's plans for ACCELERATING ITS EFFORTS at patient involvement in R&D, during 2025 and beyond?

To accelerate involvement in clinical trials in 2025 and beyond, Gilead will continue to focus on strengthening community engagement, improving access, supporting investigators of all experiences and backgrounds, leveraging technology, advocating for policy changes and embedding inclusivity in trial design. Specifically, Gilead is reducing financial and logistical burdens and ensuring language accessibility to help increase access to participation. We are expanding our partnerships with principal investigators through recruitment, training and mentorship to enhance representation of unique patient populations in trials. Inclusive trial design is essential, requiring flexible eligibility criteria, adaptive study protocols and disease-specific strategies to address disparities. By advancing these initiatives, Gilead can drive greater diversity of patient populations in clinical trials, promote health access and ensure new therapies benefit all populations.

Gilead also established Community Advisory Boards (CABs) for its HIV treatment and cure portfolios, which mirrors the successful PURPOSE Global Community Accountability Group model. These CABs, composed of geographically diverse advisors, provide strategic insights into early pipeline development and collaborative projects. The CAB members serve as ongoing advisors to Gilead. A deep understanding of Gilead's research and development enables them to offer thoughtful, timely feedback.

ON ACCESS TO TREATMENT

Responses to last year's company questionnaire showed that many pharma companies operate programs which aim to improve access to treatment and care for the patient communities of partner patient groups.

Therefore:
(i.) Can you describe your company's key programs during 2024-2025 that ASPIRE TO IMPROVE ACCESS to treatment and care for the patient communities of your partner patient groups?

Gilead recognizes the need to make accessible and affordable treatments for all. Voluntary licensing (VL) is a key aspect of Gilead's access strategy in resource-limited countries. VLs enable high-quality, low-cost versions of therapies to be distributed in countries with significant barriers to healthcare access. Not only does this process allow underserved populations to live healthier lives, it also helps create more resilient supply chains and a wider distribution of manufacturing capabilities.

Gilead initiated its VL program in 2006 to enable generic drug companies to sell high-quality, high-volume, low-cost versions of Gilead's HIV and HBV treatments. Over the next several years, Gilead continued to enable VLs, including for HCV treatments in 2014, COVID-19 treatment in 2020 and HIV treatment and prevention (in advance of regulatory approval, if approved) in 2024. To ensure that people in high-incidence, resource-limited countries have access to Gilead's investigational HIV Prevention medication, if approved, Gilead will supply the drug at no profit to the company until our VL partners are able to fully support demand.

Gilead Sciences, Inc.

In 2023, Gilead's VL program made more than 30 million generic treatments available for people living with HIV/AIDS, HBV, HCV and COVID-19 in primarily low- and lower-middle-income countries (LLMICs).

Sherry Glied, Dean of New York University's Robert F. Wagner Graduate School of Public Service, has been a strong advocate for Gilead's VL strategy. "Voluntary licensing involves building capacity in low-income countries, rather than leaving them dependent on high-income manufacturers," explains Glied. "The social benefit is increased if those countries learn how to manufacture drugs more generally, because they are then able to take over more drug production locally."

By working on a partnership basis, Gilead is helping create a local knowledge base for producing medicines while also encouraging companies that invest billions of dollars in research and development to discover the formulations for new therapies to preserve their intellectual property.

Gilead's VL leadership enables it to be poised for the next frontier of Access: Access to its Investigational HIV medication, if approved.

(ii.) What are your company's FUTURE PLANS for improving access to treatment and care, beyond 2025?

Gilead is committed to improving health equity for all populations and believes that everyone should be able to access our innovative medicines that prevent and treat life-threatening diseases.

In a first for a biopharmaceutical company, Gilead signed non-exclusive, royalty-free voluntary licensing agreements with six pharmaceutical manufacturers to make and sell generic versions of its investigational HIV Prevention medication, subject to required regulatory approvals, in advance of any of those regulatory approvals. Grounded in our commitment to facilitate access to as many people as we can, these agreements cover 120 high-incidence, resource-limited countries. Additionally, Gilead is prioritizing registration in 18 countries that represent about 70% of the HIV burden in the countries named in the licenses.

As part of these licensing agreements, Gilead will supply its investigational HIV prevention medication at no profit to the company until generic manufacturers can fully support demand.

Gilead is also exploring different ways to support better access globally, including by evaluating suitable innovative pricing strategies to help address differences in economic and disease burden across geographies.

San Francisco State University (SFSU) plays a crucial role in building a more robust and representative STEM workforce in the Bay Area and beyond. Recognizing this, the Gilead Foundation awarded SFSU a $5 million grant in 2024 to purchase advanced equipment for its new Science and Engineering Innovation Center. By expanding access to state-of-the-art equipment and tools, Gilead and SFSU are providing valuable education opportunities to a greater number of underserved students, and solidifying the STEM workforce pipeline.

Gilead Sciences, Inc.

	On COMPANY/PATIENT-GROUP RELATIONS All of the companies responding to last year's company questionnaire affirmed seeking open, lasting relations with patient groups.
Therefore: **What does your company see as the main gains for both itself, and for partner patient groups, when establishing LONG-TERM RELATIONS with patient groups?**	Gilead prioritizes early and frequent community engagement for all HIV trials, initiatives and programs. This fosters mutual trust and understanding and helps align our R&D with the needs and preferences of people living with HIV and those using PrEP. We are committed to advancing equitable and sustained access to innovative therapies that improve quality of life and partnering with community leaders helps ensure our products reach those who would benefit most.
	Finally, on FUTURE COMPANY/PATIENT-GROUP RELATIONS
Looking to the future: **What TRENDS ARE EMERGING in how your company and patient groups work together? And how will you measure progress?**	A key part of Gilead's corporate giving and advocacy efforts is our commitment to advancing community-driven solutions for underrepresented and disproportionately impacted communities. In practice, Gilead is regularly collaborating with community organizations and groups to foster health and wellbeing, address barriers and inequities, promote resilience and end stigma. In 2024, we held multiple global convenings in HIV and Oncology that brought the community together to learn from experts, advance knowledge and foster multi-stakeholder collaboration to address critical unmet needs. Advocacy and community-based organizations have confirmed these summits provide a unique opportunity to build their capacity and ability to elevate their advocacy work with the communities they serve, as well as allow them to develop new partnerships with organizations that share the same goals. Facilitating space for organizations to convene is critical to our work. We will continue these efforts in 2025 and measure our progress through internal and external surveys.

Gilead Sciences, Inc.

We have also established Community Advisory Boards (CAB) across our HIV treatment, cure and prevention portfolios. These CABs, composed of over 50 advocates representing over 20 countries, from high-resource to LLMICs, have aided not just our research and development, but have offered valuable community insights across a variety of projects and Gilead initiatives. They help shape how we talk about our therapies, provide strategies for policy advocacy and offer feedback on the areas of shared interest and priority between industry and the global HIV community. Through CAB engagement, we're ensuring that no decisions are made, or programs advanced, without incorporating community insights and expertise.

Some of the best ideas to end the HIV epidemic come from the creativity and resilience of people on the front line. It's this ethos that drives our corporate giving forward. By supporting community-driven solutions and organization we are improving health equity and access for patients.

What is the name of your company?

Novartis AG.

Which views are you expressing in this questionnaire on your company's patient-group relations in 2024 and 2025?

Global

Country

Argentina
Australia
Austria
Belgium
Brazil
Canada
China
Columbia
Czech Republic
Denmark
Egypt
Finland
France
Germany
Greece
Hungary
India
Ireland
Israel
Italy
Japan
Malaysia
Mexico
Netherlands
Norway
Philippines
Poland
Portugal
Romania
Russia
Saudi Arabia
Singapore
Slovenia
South Africa
South Korea
Spain
Sweden
Switzerland
Taiwan
Thailand
Turkey
UAE (GULF)
UK
United States
Vietnam

Therapy area/s:

Cardiovascular; Immunology; Metabolic; Neuroscience; Oncology; Renal, plus additional disease areas through our global health programs.

Approximately how many patient groups (PAGs) did your company PARTNER with in 2024?

Over 1,200.

What MAIN TYPES OF RELATIONSHIPS did your company have with your patient-group partners in 2024?

- ➔ **Funding** (for example, grants or donations).
- ➔ **Speaker engagements**.
- ➔ **Consultancy activities**.
- ➔ **Provision of information to patient groups**.
- ➔ **Supporting patient-group campaigns**.
- ➔ **Co-creating projects**.
- ➔ **Helping organise events**.
- ➔ **Creating support tools for patients and carers**.
- ➔ **Helping patient groups to network**.
- ➔ **Supporting patient-groups' publicity**.
- ➔ **Training and capacity building**.
- ➔ **Involving patient groups in R&D**.
- ➔ **Support in building web or e-health resources for patient groups** (such as apps).

Could you specify which are the most common of these relationships?

Consultancy activities; involving patient groups in R&D; speaker engagements; funding (for example, grants or donations).

During which of the following corporate activities does your company seek PATIENT/PATIENT-GROUP INPUT or ADVICE?

- ➔ **Strategic input**: Regularly.
- ➔ **Early-stage research**: Regularly.
- ➔ **Late-stage research**: Regularly.
- ➔ **Manufacturing (including packaging)**: Regularly.
- ➔ **Supply chain and distribution**: Regularly.
- ➔ **Marketing and sales**: Regularly.
- ➔ **Operations**: Regularly.
- ➔ **Market access**: Regularly.
- ➔ **Regulatory affairs**: Regularly.
- ➔ **Medical affairs**: Regularly.
- ➔ **Public affairs/corporate communications**: Regularly.

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Your company's PATIENT-RELATED ACTIVITIES in 2024 and 2025 (and beyond)

On PHARMA R&D

Responses to last year's company questionnaire made clear that pharma R&D now focuses closely on improving patient involvement in R&D.

Therefore:
(i.) What BENEFITS has your company gained from the work that it has done during 2024 in involving patients and patient groups WITHIN THE R&D FUNCTION?

Benefits from increased patient and patient group involvement within the R&D function include:

- ➔ Enhanced Decision-Making: Engaging 199 patient organizations in 21 disease areas from 29 countries has provided valuable insights, informing decision-making on the development of our medicines.
- ➔ Improved Satisfaction and Trust: Patient organizations reported high satisfaction with their interactions, with an average engagement score of 9 out of 10.
- ➔ Enhanced Transparency and Reporting: Engagement with patient communities has led to increased transparency including reporting of 3,216 clinical trials posted online and extensive sharing of patient insights (23 manuscripts, 47 posters, 37 oral presentations).
- ➔ Strong Corporate Reputation: The emphasis on patient perspectives contributed to reputation rankings overall and across multiple disease areas, such as multiple sclerosis, neurological conditions, cancer, and cardiovascular conditions.
- ➔ Partnering with the patient community has brought insights that shape and guide patient advocacy strategies across the four therapeutic areas we work in, and across multiple diseases.

Further information can be found in our patient commitment: https://www.novartis.com/patients-and-caregivers/novartis-commitment-patients-and-caregivers

(ii.) What are your company's plans for ACCELERATING ITS EFFORTS at patient involvement in R&D, during 2025 and beyond?

We continue to accelerate our already strong efforts across the Research-Development-Commercial continuum. Demonstrating our commitment with the bold move to embed Patient Engagement (PE) teams within the R&D function, PE will continue to drive systematic and consistent collaboration with the patient community and other stakeholders, in support of our Research & Development programs. We are working across the full spectrum of research, development, and medical affairs. We are moving into earlier research stages and providing continued input (product profiles, clinical plans, trial design and execution, and evidence plans fit for purpose for regulatory and payor review), ensuring decisions across the medicine lifecycle are rooted in patient's experiences, perspectives, and priorities to meet regulatory and HTA bodies' expectations.

- ➔ 90% of early research programs in general medicines obtained patient insights before first-in-human trials (healthy volunteers).

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➔ 31 Clinical development programs with 32 diseases comprising 52 clinical trials, had a patient engagement component to obtain the patient perspective on the design and/or conduct of clinical trials.

➔ 320 Simplified summaries from Phase 1-4 clinical trials sent to investigators to share with over 59,000 trial participants and posted on novartis.com/clinicaltrials.

ON ACCESS TO TREATMENT

Responses to last year's company questionnaire showed that many pharma companies operate programs which aim to improve access to treatment and care for the patient communities of partner patient groups.

Therefore:
(i.) Can you describe your company's key programs during 2024-2025 that ASPIRE TO IMPROVE ACCESS to treatment and care for the patient communities of your partner patient groups?

Improving access to treatment and care for patient communities is a key priority at Novartis and we are committed to expanding access to our medicines globally, working with our partners to employ a variety of strategies such as value-based pricing, patient support programs, and initiatives to strengthen healthcare systems. In 2024, we reached nearly 300 million patients with our innovative therapies, and we were honored to rank number one in the Access to Medicines Index (ATMI). Novartis ranks first in 2024 Access to Medicine Index | Novartis.

Our access policies are designed to ensure we do our part to address affordability, availability, and equity in healthcare, while recognizing that meaningful progress requires collaboration across the entire healthcare ecosystem. Our commitment is guided by the belief that innovative medicines and healthcare solutions should be available to all who need them, regardless of geographic or economic barriers. To achieve this, we integrate access considerations into the various stages of our work, from research and development to distribution and pricing strategies. This includes ensuring our R&D programs are informed by and include representative patient populations that we aim to treat with new medicines.

Our medicines are sold in approximately 120 countries worldwide. Across our portfolio, in 2024, our medicines reached 296 million patients around the world. In 2024, we received 20 approvals in the US, EU, Japan, and China, including US approval for Fabhalta (iptacopan) to treat adults with immunoglobulin A nephropathy (IgAN), a progressive, rare kidney disease in which the immune system attacks the kidneys. We received approval in the US and Europe for Kisqali (ribociclib) for use with an aromatase inhibitor to treat people with HR+/HER2- stage II and III early breast cancer who are at high risk of recurrence, as well as approval in the US for Scemblix (asciminib) to treat adult patients with newly diagnosed Philadelphia chromosome-positive chronic myeloid leukemia in chronic phase (Ph+ CML-CP). We made 29 submissions for regulatory approval in our key markets, including in the US for atrasentan, which has a different mechanism of action to Fabhalta, to treat IgAN, and in the EU, China, and Japan for Fabhalta to treat adult patients with C3 glomerulopathy, another rare kidney disease. We implement global access strategies for all new medicines launched. For example, our global access strategy for Fabhalta explores ways to partner with healthcare systems to expand access to this novel treatment for patients with paroxysmal nocturnal hemoglobinuria.

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Our Patient Advocacy (PA) teams collaborate systematically and consistently with patient communities to gather insights and drive impactful programs across 4 Therapeutic Areas (Oncology, Cardiovascular Renal Metabolic, Immunology and Neuroscience). Our initiatives focus on educating and mobilizing patients to pursue the best available treatment and care options. Additionally, we engage in above-brand policy and healthcare system shaping activities to reduce systemic barriers to care.

In 2024, 5,998 new patients were reached through our managed access programs (MAPs) with 95% of requests approved for 43 compounds in 74 countries. MAPs provide access to locally unlicensed Novartis medicines when treatment options have been exhausted and enrollment into a clinical trial is not possible. At the end of 2024, more than 9,000 patients were receiving treatment through MAPs.

30.2 m patients were reached through access programs, predominantly in low- and middle-income countries (LMICs).

Further information can be found in our patient commitment: https://www.novartis.com/patients-and-caregivers/novartis-commitment-patients-and-caregivers; and also in our Novartis in Society report, Novartis in Society Integrated Report 2024.

Please also see below some examples of patient-advocacy initiatives led by our US organization.

Announced in 2023, and launched in 2024:

➔ Novartis US partnered with global Coalition on Aging and other stakeholders for the engAGE with Heart community care and access initiative designed with and for underserved communities to drive sustainable risk reduction, detection, and management of cardiovascular disease: Baltimore Becomes Host to the Nation's First "engAGE With Heart" Program – engAGE with Heart.

Announced in 2025:

➔ Novartis US was announced as the lead founding partner of the ZERO Prostate Cancer Blitz The Barriers project to close gaps in prostate cancer survival in highest-risk communities: ZERO Prostate Cancer Launches Bold $20 Million 'Blitz The Barriers' Initiative to Close Gaps in Prostate Cancer Survival in Highest-Risk Communities.

➔ Together with Susan G. Komen, Novartis US created and launched the Alliance for Breast Cancer Policy. The coalition comprises more than 20 partner organizations and is the only group focused on advancing patient-centered policy solutions to help improve outcomes for breast cancer patients: Novartis joins Susan G. Komen in first-of-its-kind breast cancer policy coalition | Novartis United States of America.

➔ Novartis US announced an exclusive partnership with the NFL to empower football fans everywhere to make proactive decisions about their health, better understand screening guidelines and create a playbook for a healthier future: Novartis named first-ever corporate pharmaceutical partner of the National Football League | Novartis United States of America.

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(ii.) What are your company's FUTURE PLANS for improving access to treatment and care, beyond 2025?	In 2025 and beyond, our company is committed to enhancing access to treatment and care through a robust patient advocacy model, collaborating with patient communities to gather insights and drive impactful programs. We will ensure that patient advocacy is embedded in all our launches so that in addition to ensuring patient insights into the development of our medicines, we are collaborating systematically and consistently with patient communities, gathering insights, and driving programs that mobilize patients to seek optimal care and improve health outcomes for all. Our plans emphasize improving patient access and services, including programs that help patients navigate the healthcare system, reduce barriers, and provide educational resources. Additionally, we will partner with the patient community on healthcare system shaping activities, advocating for policy changes to address systemic barriers. Through these efforts, we aim to significantly improve access to treatment and care for patient communities beyond 2025.
	On COMPANY/PATIENT-GROUP RELATIONS All of the companies responding to last year's company questionnaire affirmed seeking open, lasting relations with patient groups.
Therefore: **What does your company see as the main gains for both itself, and for partner patient groups, when establishing LONG-TERM RELATIONS with patient groups?**	Establishing long-term relationships with patient groups provides significant benefits for both our company and partner patient groups. For our company, these relationships enable the development of more impactful innovative medicines that closely align with patient needs. By incorporating patient insights in development decisions, we can ensure innovations meet real life patient needs. Patient input into clinical-trial design, ensures trial designs that are more accessible and appropriate for patients, enhancing recruitment and adherence to trials and ensuring the trial population reflects the population intended to be treated with the innovation. As we launch our innovative medicines in countries around the world, we will continue to partner to gather insights and support programs that encourage patients to seek optimal care and improve health outcomes. Our aim is for patients, regardless of socioeconomic status, geography, or background, to have access to medicines and support services. For patient groups, these long-term partnerships lead to medicines that better meet their needs, better advocacy for patient-centric solutions, and medicines are available to patients when they need them, leading to improved uptake and adherence to these treatments resulting in better health outcomes. Overall, these collaborative efforts foster a deeper understanding of patient priorities, driving advancements that benefit all stakeholders involved. In addition, we measure the impact of our approach to improve the quality of our engagement over time and ensure we generate effective outcomes that create value for patients, health systems, and Novartis.

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Finally, on FUTURE COMPANY/PATIENT-GROUP RELATIONS

Looking to the future: What TRENDS ARE EMERGING in how your company and patient groups work together?

Emerging trends driving how our company and patient groups work together include:

- ➔ Rising Patient Expectations: Patients are empowered and expect involvement in medicine development and demand fast access to innovative treatments. PAGs are becoming more sophisticated and influential requiring closer collaboration.
- ➔ Healthcare Systems: Industry guidelines (EFPIA/PhRMA) emphasize patient engagement. HTA bodies actively involve patients in decisions, and new legislation accelerates the need for differentiated products on the market.
- ➔ Regulatory bodies: FDA and EMA as just two examples require patient-focused drug development. UK MHRA and NL HA mandate proof of patient co-design before approval, while FDA calls for improved PFDD submissions.
- ➔ Reputational: Building trust with society is crucial, and addressing issues like product shortages requires strong, long-term partnerships with Patient Advocacy Groups (PAGs).

And how will you measure progress?

We will measure progress through several key methods:

- ➔ External Benchmarking: Comparing our performance and outcomes to industry standards and best practices through PatientView and other surveys. This helps us assess how effectively we are advancing in our commitments.
- ➔ External surveys with our patient group partners: Evaluating the quality, quantity, and cadence of interactions across Novartis and assessing areas of success and opportunities for improvement.
- ➔ Internal Surveys: Conducting regular internal surveys with our cross-functional business partners will allow us to gather insights and feedback on the effectiveness of our strategies and initiatives for the launch of our medicines.
- ➔ Internal Progress Trackers: Using tools that systematically measure progress by tracking which development programs have received patient input at what stages helps us address gaps.
- ➔ Key Development Deliverables: Monitoring key development milestones and evaluating if they have been achieved will help us determine the impact on decision-making processes.
- ➔ Engagement Quality Feedback: Collecting feedback on the quality of our engagement with patient groups through targeted questions to guide improvements.
- ➔ Investor Reporting: Providing transparent updates to investors will ensure accountability and highlight our progress in enhancing patient access and outcomes.
- ➔ KPI Factsheet: Our annual KPI factsheet, showing how we perform annually towards our Commitment to Patients and Caregivers.

What is the name of your company?
Servier.

Which views are you expressing in this questionnaire on your company's patient-group relations in 2024 and 2025?
Global (Global Patients Affairs, R&D).

Approximately how many patient groups (PAGs) did your company PARTNER with in 2024?
317.

What MAIN TYPES OF RELATIONSHIPS did your company have with your patient-group partners in 2024?

- ➔ **Funding** (for example, grants or donations).
- ➔ **Speaker engagements.**
- ➔ **Consultancy activities.**
- ➔ **Provision of information to patient groups.**
- ➔ **Supporting patient-group campaigns.**
- ➔ **Co-creating projects.**
- ➔ **Helping organise events.**
- ➔ **Involving patient groups in R&D.**
- ➔ **Creating support tools for patients and carers.**
- ➔ **Helping patient groups to network.**

Could you specify which are the most common of these relationships?
Co-creating projects; consultancy; funding; involving in R&D; speaker engagement.

During which of the following corporate activities does your company seek PATIENT/PATIENT-GROUP INPUT or ADVICE?

- ➔ **Strategic input**: Sometimes.
- ➔ **Finance**: Usually not.
- ➔ **Human resources**: Usually not.
- ➔ **Investor relations**: Usually not.
- ➔ **Early-stage research**: Sometimes.
- ➔ **Late-stage research**: Regularly.
- ➔ **Manufacturing** (including packaging): Regularly.
- ➔ **Pharmacovigilance**: Sometimes.
- ➔ **Supply chain and distribution**: Usually not.
- ➔ **Marketing and sales**: Usually not.
- ➔ **Operations**: Usually not.
- ➔ **Market access**: Sometimes.
- ➔ **Regulatory affairs**: Sometimes.
- ➔ **Medical affairs**: Regularly.
- ➔ **Public affairs/corporate communications**: Regularly.

Servier

Your company's PATIENT-RELATED ACTIVITIES in 2024 and 2025 (and beyond)

On PHARMA R&D

Responses to last year's company questionnaire made clear that pharma R&D now focuses closely on improving patient involvement in R&D.

Therefore:
(i.) What BENEFITS has your company gained from the work that it has done during 2024 in involving patients and patient groups WITHIN THE R&D FUNCTION?

Integrating Patient and Patient Group Feedback into R&D

Throughout 2024, as a global pharmaceutical group governed by a non-profit foundation committed to advancing research in CMVD (cardio-metabolic and veinous diseases), oncology, and neurology, we have made significant strides in integrating patients and patient groups into our research and development (R&D) processes. By fostering deeper collaboration between patients, healthcare professionals, and researchers, we've been able to enhance the design and execution of clinical trials, resulting in improved transparency, feasibility, and patient trust.

One of the key challenges we faced was ensuring that our clinical trial designs accurately reflected the needs, concerns, and real-world experiences of the patients we aim to serve. Additionally, we sought to improve the informed consent process, study retention, and overall trial engagement.

To address these challenges, we launched several initiatives throughout 2024 aimed at fostering deeper and more meaningful engagement with patients and patient groups. Our approach included the following key strategies:

- ➔ Patient feedback on study designs: We actively sought feedback from patient communities on trial designs, to ensure that studies were feasible, and protocols were aligned with patients' needs. Their input helped us identify barriers to participation, and adjust our protocols accordingly. Feedback from patients led to a 60% improvement in the feasibility of our trials.
- ➔ Review of informed consent forms: We worked with patients to review all informed consent forms, ensuring that they were clear, understandable, and transparent. This initiative was pivotal in improving patient trust, ensuring full comprehension of trial details, and increased participation in our trials.
- ➔ Insights into biopsy perceptions: We conducted a survey among 120 oncology patients to assess their perceptions of biopsies, which revealed key barriers to participation. These insights were critical in refining our approach.

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- ➔ Early collaboration in neurology trials: In neurology, especially with patients suffering from refractory epilepsy and Ataxia, early collaboration with patient communities significantly influenced trial designs, resulting in more patient-centered studies that addressed specific concerns and challenges faced by these groups.
- ➔ Lay summary reviews: We engaged patient communities in reviewing lay summaries of our research to ensure that the language and content were accessible, clear, and transparent for a broad patient audience.
- ➔ Improved study feasibility and protocol adherence.

The initiatives we implemented in 2024 have proven to be successful in integrating patient feedback into our R&D process. Not only have these initiatives led to improved trial designs and higher patient engagement, but they have also strengthened our relationship with the patient community, making our research more collaborative and transparent. Moving forward, we are committed to continuing and expanding these efforts, ensuring that patient voices remain at the heart of our research and development activities.

(ii.) What are your company's plans for ACCELERATING ITS EFFORTS at patient involvement in R&D, during 2025 and beyond?

Servier's Commitment to Accelerating Patient Involvement in R&D

Servier is dedicated to patient-centered research, focusing on integrating patient engagement into our R&D processes. In 2025 and beyond, we aim to enhance patient involvement across all stages of R&D by streamlining practices and incorporating the best engagement methods.

Key Actions and Impact:

1) Strategic Optimization, Collaboration, and Transparency:

a. Optimizing Patient Engagement: Benchmarking best practices and designing strategic plans to improve patient engagement across all projects. Expanding collaboration with patient organizations and embedding patient feedback into clinical trials. This alignment has enhanced clinical trials to better meet patient needs.

b. Centre of Excellence for Patient Preference Studies: Establishing a Centre of Excellence to advance our understanding of patient preferences and integrate them into clinical trial designs.

c. Engaging Patients in Clinical Trials: Ensuring 100% of informed consents, lay summaries, and new clinical trials are discussed with patients to ensure transparency and informed decision-making.

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2) Scaling and Integrating Patient Feedback:

a. Scaling Patient Involvement: Currently, 70% of our clinical protocols integrate patient feedback, aiming to reach 100% by 2030. Initiatives like the Saclay Board foster an inclusive mindset to drive innovation and accelerate trial design. This was described in a peer-reviewed publication co-authored by one of our patient advocates (Jobson E, et al. Res Involv Engagem. 2024 Nov 6;10(1):116. doi: 10.1186/s40900-024-00631-w. PMID: 39506875; PMCID: PMC11539748). We will continue to do so with our Patient Boards overall.

b. Improving Traceability of Patient Input: Enhancing the consolidation of patient feedback from clinical teams ensures seamless integration into the R&D process. This strengthens our ability to adapt clinical protocols in real-time, improving decentralized trial design and increasing patient participation. Today, we are able to implement around 75% of patient feedback into most of our protocols.

3) Enhancing Inclusivity and Accessibility:

a. Global Diversity Plan: Extending the successful USA diversity plan globally to ensure inclusivity and compliance with local regulations. The Cross-border Patients Initiative will help identify and engage patients globally, expanding access to clinical trials and reaching patients from diverse backgrounds and underrepresented regions.

b. Decentralized Trials: Increasing decentralized elements in clinical trials, working closely with the patient community to validate these elements and meet diverse patient needs. This approach has improved the design of decentralized trials and increased patient participation.

Servier remains committed to making patient engagement a foundational part of our R&D strategy, driving innovation, enhancing trial design, and ensuring the patient voice is always represented in our research.

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ON ACCESS TO TREATMENT

Responses to last year's company questionnaire showed that many pharma companies operate programs which aim to improve access to treatment and care for the patient communities of partner patient groups.

Therefore:
(i.) Can you describe your company's key programs during 2024-2025 that ASPIRE TO IMPROVE ACCESS to treatment and care for the patient communities of your partner patient groups?

Advancing equitable access to cancer treatment: our global commitment

At Servier, we are committed to improving access to treatment and care for underserved patient communities. With a particular focus on childhood cancers and rare conditions, we have developed a multi-pronged approach to address critical gaps in equity, access, and education across low- and middle-income countries (LMICs) and beyond.

We will explore three major initiatives: Access Cancer Treatment (ACT) for Children, POLARIS, and the Managed Access Program (MAP) that exemplify Servier's mission to reduce disparities and empower families and healthcare providers.

Across LMICs, children diagnosed with cancer face a harsh reality. Indeed, survival rates as low as 30%, compared to around 80% in high-income countries. These disparities stem from:

➔ Limited access to essential, high-quality medications.

➔ Counterfeit or substandard treatments.

➔ Inadequate medical education and diagnostics.

➔ Lack of holistic support for patients and families.

➔ Geographic and regulatory barriers to innovation.

We identified these barriers as key contributors to the inequities faced by vulnerable populations, and crafted programs to directly target these systemic issues.

1) Tackling Inequities in Childhood Cancer Through Unique Global Collaboration:

Every year, thousands of children in LMICs experience cancer alongside significant inequalities that impact their chances of survival. Counterfeit and substandard medicines, insufficient medical education, and lack of access to proper diagnostics and multi-disciplinary treatment are among the factors driving alarmingly low survival rates—which can be as low as 30%, compared to approximately 80% in most high-income countries.

Access Cancer Treatment (ACT) for Children's objective is to improve outcomes for children with cancer in LMICs through sustainable and collaborative interventions. This initiative is aligned with the WHO CureAll framework to address disparities in pediatric cancer care in LMICs. This partnership seeks to transform the landscape of childhood cancer care in LMICs by ensuring that children receive quality medical care and support, including life-saving medications essential to the treatment of pediatric acute lymphoblastic leukemia (ALL), the most common type of childhood cancer.

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In this initiative, Childhood Cancer International (CCI), the IDA Foundation, the International Society of Paediatric Oncology (SIOP), Resonance, Servier, and World Child Cancer have joined forces to launch the Access Cancer Treatment (ACT) for Children initiative. This unique collaboration, working closely with the Union for International Cancer Control (UICC)-led Access to Oncology Medicines (ATOM) Coalition, combines access to innovative, curative childhood cancer medicines with high-quality clinical care and patient support, laying the foundation for long-term, sustainable impact.

This initiative has implemented key care improvement strategies and delivered $2.3 million worth of high-quality, innovative pediatric oncology medicines to childhood cancer centers in Asia and Central America, helping to reduce financial barriers and ensure access to children in LMICs.

ACT for Children has already achieved these milestones:

- ➔ With the help of the UICC-led ATOM Coalition, IDA Foundation, CCI and local patient organizations, Servier has provided $2.3 million worth of high-quality, essential medicines at no cost to childhood cancer centers in Asia and Central America.
- ➔ IDA Foundation ensured the safe delivery of these medicines by leveraging its 50 years of supply chain expertise, managing logistics, and supporting import processes for smooth distribution.
- ➔ Resonance, a global contract research organization (CRO) specializing in pediatric oncology, is sponsoring and implementing registries and quality improvement initiatives, including providing data management systems to monitor and track improvements in child cancer outcomes.
- ➔ SIOP and World Child Cancer launched specialized hands-on education and patient support programs aimed at improving diagnosis and treatment outcomes, and empowering families.
- ➔ World Child Cancer launched a global awareness and fundraising campaign, #CancelChildCancer.
- ➔ CCI and its members provide essential support and care services—such as accommodation, nutrition, psychosocial counselling, and transport—to ensure that patients and their families are able to access and adhere to treatment. CCI also advocates globally for awareness and better resources, policies, and practices for the betterment of childhood cancer treatment and care.
- ➔ With the help of Resonance, Servier is strengthening local healthcare capacity by employing data managers, patient navigators, and other essential care providers.

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2) POLARIS aims to simplify the ALL treatment journey for families while enhancing patient engagement and understanding every step of the way.

POLARIS is a family-centered digital platform that breaks down the complex, multi-year ALL treatment process into a clear, interactive roadmap. Developed with input from healthcare professionals and families, it combines step-by-step instructions with emotional, nutritional, and procedural guidance.

POLARIS plays a vital role in advancing patient equity by addressing one of the most overlooked barriers in healthcare: health literacy. By using clear, visually engaging materials, it transforms complex medical language into information that families can easily understand and act on. This empowerment enables parents and caregivers to become active, informed participants in their child's treatment journey.

Designed with families at its heart, POLARIS goes beyond education, it offers emotional and practical support tailored to their needs. By fostering confidence and clarity, it ensures that families are not just recipients of care, but true partners in the process.

In many regions, especially where patient education resources are scarce, POLARIS fills a critical gap. It brings essential, accessible tools to families who might otherwise navigate the challenges of pediatric cancer without adequate guidance helping to level the playing field and bring equitable care within reach.

3) The Managed Access Program (MAP) for glioma patients brings early access to innovative therapies for those facing limited treatment options, bridging urgent needs with emerging solutions.

The Managed Access Program (MAP) enables eligible patients with mIDH1 and mIDH2 Grade 2 glioma to access vorasidenib, a treatment not yet commercially available in all countries. Currently active in 19 countries, MAP creates a legal and ethical framework for early use.

This program is a powerful step toward advancing patient equity, particularly for those with rare and hard-to-treat conditions like glioma. By bridging the innovation gap, MAP allows patients in some countries still awaiting regulatory approval to access new therapies.

Through ACT for Children, POLARIS, and MAP, we are actively pushing the barriers towards more equity in global healthcare. These programs are not only vehicles for delivering care, they are catalysts for change. By focusing on collaboration, education, and early access to innovation, we continue to pioneer equitable solutions that place patients and families at the heart of healthcare transformation.

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(ii.) What are your company's FUTURE PLANS for improving access to treatment and care, beyond 2025?

We are planning to expend ACT for children to additional childhood cancer centers in the coming year to build momentum for long-term, sustainable improvements in treating childhood cancer on a global scale. Looking ahead, the partners will:

- ➔ Advocate for stricter regulation of counterfeit and substandard medicines, ensuring secure supply chains.
- ➔ Leverage IDA Foundation's expertise and advanced tools to ensure sustainable and efficient access to innovative treatments.
- ➔ Expand education programs for healthcare providers in alignment with WHO-endorsed best practices.
- ➔ Scale up data management systems to enhance clinical care across multiple regions.
- ➔ In collaboration, CCI and World Child Cancer will advance family support programs. A special focus for CCI will be developing nutrition programs in focus countries where such nutritional support programs need development or are lacking.
- ➔ Drive awareness and action to ensure equitable access to life-saving cancer treatments for all children.

On COMPANY/PATIENT-GROUP RELATIONS

All of the companies responding to last year's company questionnaire affirmed seeking open, lasting relations with patient groups.

Therefore:
What does your company see as the main gains for both itself, and for partner patient groups, when establishing LONG-TERM RELATIONS with patient groups?

From R&D to Beyond the Pill: Co-Creating the Future of Healthcare with Patients

At Servier, we believe that the most meaningful progress in healthcare happens together with patients, not just for them. Long-term partnerships with patient groups bring significant gains for both our company and the communities we serve.

- ➔ Deep Understanding and Authentic Insights: Building lasting relationships with patient organizations provides us with a deeper, more authentic understanding of patients' experiences. Beyond data and clinical trials, these conversations reveal the reality of living with illness, the impact on families, gaps in care, the emotional toll, and what truly matters to people. These insights shape our thinking, program development, and treatment design.
- ➔ Enhanced Collaboration and Practical Solutions: Involving patient groups early and consistently in the research and development process allows us to gather real-world feedback that influences clinical trial design, improves usability, and ensures our solutions are practical and patient-centered. This collaboration makes our therapies more effective and better aligned with the lives they aim to improve.

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- ➔ Building Trust and Credibility: Sustained partnerships build trust and credibility. Patient communities begin to see us as a partner who listens, engages, and acts with integrity. This trust opens the door to greater collaboration in joint advocacy efforts, co-hosted awareness campaigns, and shared goals around education and early diagnosis.
- ➔ Innovation and Collaborative Research: Long-term relationships pave the way for collaborative research opportunities, including the development of patient registries, innovative care models, and new technologies addressing everyday challenges patients face. For example, the development of a digital "beyond the pill" solution for patients with glioma involved patient input to create a mobile application supporting their disease journey. Patients and advocates provided input on tools such as daily medication reminders, brain games for cognitive recovery, and educational resources. The glioma mobile app has been active for over six months, and we continue to work with patients to ensure it remains a valuable tool.

Similarly, the Servier SHAPE program for digestive cancers showcases what's possible through co-creation. Started in 2017, this initiative brought together physicians and patient advocates to develop supportive resources for digestive cancer patients, including those with colon cancer. The resources focus on mental health, depression, the importance of a healthy lifestyle, and making the right nutrition choices. These materials are now used by healthcare professionals and advocacy groups alike, amplifying their impact across the patient journey.

Ultimately, these long-term relationships are at the heart of our philosophy. At Servier, we're committed to growing with the patient community, listening with purpose, acting with transparency, and working side by side to improve outcomes. When patients lead the conversation, everyone moves forward.

Finally, on FUTURE COMPANY/PATIENT-GROUP RELATIONS

Looking to the future: What TRENDS ARE EMERGING in how your company and patient groups work together? And how will you measure progress?

Evolving Patient Collaboration Through the Servier Patient Advisory Council Ecosystem (SPACE)

At Servier, we've long believed that meaningful progress in healthcare starts with patients not just as beneficiaries, but as true partners. In 2024, we set out to take this belief further by evolving how we collaborate with patients and patient organizations.

Our goal was clear: to move beyond episodic engagement, and establish long-term, structured partnerships with patients—ones that would allow their voices to help shape our research, our strategies, and, ultimately, the solutions we bring to life. We knew this was essential if we wanted to increase trust, transparency, and relevance in our R&D processes, especially in critical areas like oncology, neurology, and cardiometabolism.

Servier

We also wanted to support the growth and global visibility of patient organizations, not just as participants in our initiatives, but as leaders.

To meet this ambition, we launched the Servier Patient Advisory Council Ecosystem (SPACE), a bold, new framework designed to bring patients to the table in a consistent, strategic, and impactful way.

Each SPACE council is organized around a specific therapeutic area, bringing together expert patients to work closely with our teams on key topics such as:

➔ Digital health innovation.

➔ Treatment adherence.

➔ Health literacy.

➔ Policy advocacy.

➔ Representation at international medical congresses.

This ecosystem approach allows for much deeper, ongoing collaboration, ensuring that patient input isn't just a final check, but a foundational part of how decisions are made. Through SPACE, we're also helping patient organizations strengthen their international networks, expanding their reach and amplifying their advocacy.

The cultural shift this represents was strongly felt during our first internal Servier Patient Week in 2024, which brought together employees and patients in a shared space of learning, listening, and building together. It's now set to become a permanent part of Servier's annual calendar.

The results of this new way of working are already tangible.

In April 2025, expert patients from our Cardiometabolic Advisory Council co-developed and led a dedicated session on treatment adherence for patients at the International Diabetes Federation (IDF) Congress in Bangkok. This was more than a speaking slot—it was patient-led education at one of the most significant global forums in the field.

At the same time, the Glioma Patient Committee worked alongside our teams to build a robust road map aimed at optimizing glioma care. Their input shaped everything from early diagnosis pathways to post-treatment support, demonstrating how co-creation leads to more grounded, patient-centered outcomes.

But perhaps the most profound impact has been internal. SPACE is helping reshape our company culture—breaking silos, elevating empathy, and reminding us every day that the people we serve are also the people who can help guide us forward.

Servier

To measure our progress, we're tracking:

➔ The number and quality of projects initiated through SPACE.

➔ The satisfaction and engagement of our Patient Advisory Council members.

➔ How deeply patient collaboration becomes integrated into all aspects of our work.

Our long-term vision is clear: with SPACE, we want the patient voice to be embedded in everything we do. Because when patients are true partners, the solutions we create together don't just work better, they mean more.

It is our mission to continue to champion patient engagement globally, with a commitment to participative medicine and democracy in health. We will continue to collaborate with patient communities to improve global health issues, such as improving adherence to therapies, facilitate R&D for rare indications and hard-to-treat cancers, and champion pro-patient policies.

What is the name of your company?
ViiV Healthcare.

Which views are you expressing in this questionnaire on your company's patient-group relations in 2024 and 2025?
Global.

Approximately how many patient groups (PAGs) did your company PARTNER with in 2024?
200+.

What MAIN TYPES OF RELATIONSHIPS did your company have with your patient-group partners in 2024?

- ➔ **Co-creating projects**.
- ➔ **Consultancy activities**.
- ➔ **Creating support tools for patients and carers**.
- ➔ **Funding** (for example, grants or donations).
- ➔ **Helping organise events**.
- ➔ **Helping patient groups to network**.
- ➔ **Involving patient groups in R&D**.
- ➔ **Provision of information to patient groups**.
- ➔ **Speaker engagements**.
- ➔ **Supporting patient-group campaigns**.
- ➔ **Supporting patient-groups' publicity**.
- ➔ **Training and capacity building**.

During which of the following corporate activities does your company seek PATIENT/PATIENT-GROUP INPUT OR ADVICE?

- ➔ **Strategic input**: Regularly.
- ➔ **Finance**: Usually not.
- ➔ **Human resources**: Usually not.
- ➔ **Investor relations**: Usually not.
- ➔ **Early-stage research**: Regularly.
- ➔ **Late-stage research**: Regularly.
- ➔ **Manufacturing** (including packaging): Sometimes.
- ➔ **Pharmacovigilance**: Sometimes.
- ➔ **Supply chain and distribution**: Sometimes.
- ➔ **Marketing and sales**: Sometimes.
- ➔ **Operations**: Sometimes.
- ➔ **Market access**: Sometimes.
- ➔ **Regulatory affairs**: Sometimes.
- ➔ **Medical affairs**: Regularly.
- ➔ **Public affairs/corporate communications**: Regularly.

ViiV Healthcare

Your company's PATIENT-RELATED ACTIVITIES in 2024 and 2025 (and beyond)

On PHARMA R&D

Responses to last year's company questionnaire made clear that pharma R&D now focuses closely on improving patient involvement in R&D.

Therefore:
(i.) What BENEFITS has your company gained from the work that it has done during 2024 in involving patients and patient groups WITHIN THE R&D FUNCTION?

In 2024, the ViiV Patient Engagement team embarked on an extensive training programme across ViiV to increase understanding of how patient engagement could support different functions across the organisation, and could enhance their roles.

In R&D, this has resulted in improvements to clinical trial protocols and patient-facing materials, such as informed consent forms, as well as a renewed focus on ensuring that participants in our clinical trials are representative of the populations impacted by HIV.

Throughout 2024, ViiV R&D teams have engaged patients and patient groups in several ways that have shaped our strategic direction and operational decisions.

By seeking patient input early in the medicine development lifecycle, we have gained a better understanding of unmet health needs, aspirations, and preferences for future treatments. This has been invaluable in aligning our innovation priorities with patient needs.

Patients have also provided crucial input on key biomedical studies. In July 2024, patient advice on a Phase 3 registrational trial enhanced our understanding of the value of long-acting injectable medication, and identified relevant patient-reported outcomes tools. In September 2024, patient feedback to our HIV Cure and Remission team provided important insights into how people living with HIV view cure initiatives, and resulted in amendments to our cure strategy. This, as well as the insights we have gathered from advisory boards and other interactions between patient groups and our pipeline teams, has been invaluable to the fulfilment of our commitment to people-centered research. Subsequent interactions with patient and community groups have provided guidance on study design, including considerations regarding inclusion/exclusion criteria, informed consent, participant wellbeing, and HIV transmission to sexual partners.

By incorporating patient insights into our R&D process, we are more appropriately equipped to develop innovative prevention and treatment options that truly address the needs and concerns of the patients we serve.

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(ii.) What are your company's plans for ACCELERATING ITS EFFORTS at patient involvement in R&D, during 2025 and beyond?

As we move through 2025 and beyond, our aim is to build upon our previous strategic partnerships with patients and patient groups that enable us to further embed patient engagement across the whole of the medicines development lifecycle, from understanding existing unmet needs to ensuring that these needs have been met once a medicine has been developed. We have identified Patient Engagement champions across R&D teams who have completed training delivered by our ViiV Patient Engagement team and external expert organisations (e.g. European Patients' Academy on Therapeutic Innovation - EUPATI). This process will empower our teams with the necessary skills and knowledge to effectively engage with patients throughout the R&D process.

Beyond R&D, we have established a Global Patient Panel made up of patients and patient advocates from around the world, with the intention of ensuring that we hear the voices of individuals impacted by HIV of different ages, and from diverse backgrounds around the world, to understand their experiences of living with HIV, and their HIV prevention needs in the different contexts in which they live, to ultimately enable us to develop prevention and treatment options that better meet the diverse needs of people around the world.

ON ACCESS TO TREATMENT

Responses to last year's company questionnaire showed that many pharma companies operate programs which aim to improve access to treatment and care for the patient communities of partner patient groups.

Therefore:
(i.) Can you describe your company's key programs during 2024-2025 that ASPIRE TO IMPROVE ACCESS to treatment and care for the patient communities of your partner patient groups?

ViiV Healthcare recognises the importance of prioritising access to our innovative HIV prevention and treatment, to ensure that no person living with HIV is left behind.

1. Access to Medicines & Voluntary Licensing

Alongside our majority shareholder GSK, ViiV Healthcare is proud to continue to be ranked as one of the leading companies in the 2024 Access to Medicines Index. This reflects our ongoing commitment to ensuring equitable access to our innovative HIV prevention and treatments to people and communities in LMICs.

To improve access to innovative HIV prevention options in low- and middle-income countries (LMICs), ViiV Healthcare works with global health agencies (Global Fund to Fight AIDS, TB and Malaria), non-governmental organisations (International Planned Parenthood Foundation, and Médecins Sans Frontières), governments (the US bilateral agency focused on ending the AIDS epidemic, PEPFAR) and community partners to support the introduction of our long-acting HIV pre-exposure prophylaxis medicine (LA PrEP) into national health programmes. To date (as of March 2025), CAB LA for PrEP has been supplied, at a non-profit price, to 16 LMICs—of which African countries were some of the first recipients (following product introduction in the US). This approach was based on ViiV prioritising LA PrEP country registration based on high HIV burden and PrEP readiness. Currently, almost half of the 26 regulatory approvals for LA PrEP are in sub-Saharan Africa, with 77% in LMICs.

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In parallel, we are also supporting the development of generic versions of this prevention innovation through a voluntary licence with the Medicines Patent Pool (signed July 2022). Sharing our intellectual property to improve access to medicines by increasing manufacturing capacity and enabling lower prices in eligible countries. Further to the MPP-led rigorous selection process and signing of sub-licensees in March 2023 with three generic manufacturers, ViiV has been actively engaged with these companies to provide technical support and know-how to expedite generic development, registration and access.

In addition, ViiV continues to improve access to its innovative treatment options through its voluntary licensing agreements for dolutegravir, both with the MPP and directly with generic manufacturers. 2024 marked the 10th anniversary since these agreements were first established. By the end of 2024, more than 23 million people across 129 LMICs had access to a product containing generic dolutegravir. This represents at least 90% of people living with HIV on antiretrovirals in generic-accessible countries.

Furthermore, generic paediatric formulations of dolutegravir are now available in more than 100 countries, increasing access to age-appropriate treatment options for children living with HIV where the burden of need is highest. Access scale-up was accelerated by a public-private partnership between ViiV and global health agencies—the Clinton Health Access Initiative, Unitaid—and generic manufacturers with sub-licences from the MPP, through the provision of technical support and know-how, in addition to strategic regulatory support.

2025 has been characterised by significant and rapid changes in public policy and grant funding for global public health. This has had an unprecedented impact on our access approach and ambitions to work with global health partners to introduce and scale-up LA for PrEP across more countries. The rapidly changing policy and funding environment means we are focused on working with governments and community organisation to better understand and evaluate how to best to sustainably support access to our medicines. As the implications of this rapidly changing environment continue to unfold.

2. Positive Action Funding Community Programmes

The Positive Action programme plays a crucial role in ViiV Healthcare's mission to ensure that no person living with HIV is left behind. As the longest-running corporate initiative dedicated to supporting diverse communities most affected by HIV worldwide, Positive Action exemplifies our commitment to creating a future free from the challenges posed by the epidemic.

Through the Positive Action Community Strategic Initiatives (CSI), we provide essential grants to community-led organisations that focus on enhancing the quality of life for people living with HIV and those vulnerable to HIV transmission. Our CSI Innovator grants facilitate first-time investments in innovative ideas or new contexts, allowing for the emergence of creative solutions. Our CSI Momentum grants aim to scale up or replicate successful interventions, ensuring that effective strategies can be scaled up for impact.

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In 2024, we launched three CSI funding rounds to support access to HIV services, and address gaps identified in specific geographies. The Innovator funding rounds concentrated on key priorities, such as HIV prevention in Latin America. This initiative provided bridge funding to partners implementing projects focused on combination HIV prevention approaches among diverse adolescents and young people aged from 15 to 24 years. Initiatives focused on biomedical interventions (such as pre-exposure prophylaxis (PrEP) to prevent HIV transmission), behavioural interventions (HIV counselling and testing), and structural Interventions (which aim to address the societal factors, including stigma and discrimination) driving the epidemic.

The Innovator Paediatrics 2024 initiative focused on community-based approaches to support the transition of HIV care from adult caregivers to adolescents aged between 10-14 years old in Côte d'Ivoire, the Democratic Republic of Congo, Kenya, Malawi, Nigeria, South Africa, and Uganda. This initiative aimed to fund innovative interventions that empower adolescents living with HIV to manage their care effectively, addressing key issues, such as retaining adolescents living with HIV in care, building resilience, supporting caregivers, and creating a supportive community environment.

Interventions targeted increasing knowledge of HIV, promoting adherence to treatment, providing age-appropriate comprehensive sexuality education, and engaging both adolescents living with HIV and their caregivers. The goal is to ensure a supportive environment that fosters the independence and well-being of adolescents living with HIV as they transition to self-care. The Innovator 2024 Stigma initiative sought to address the multiple layers of stigma faced by people living with HIV. Funding was open to community-based and community-led innovative approaches targeting key populations, including people living with disabilities and HIV, sex workers living with HIV, migrants, displaced people, and the LGBTQ+ community. Intervention focused on tackling stigma in healthcare settings, and informing laws and policies to eliminate HIV-related stigma and discrimination. Eligible geographicals included countries in Africa, Asia, Latin America, the Middle East, and the Caribbean.

We also dedicated a Momentum funding round of £3.1 million to community-based harm reduction projects in selected African and Asian countries initiatives focused on enhancing community-based harm reduction services for people who use drugs across countries, including Kenya, Mauritius, Mozambique, Nepal, South Africa, Tanzania, Thailand, and Vietnam.

This initiative sought to scale up evidence-based approaches to provide comprehensive HIV prevention, care, and treatment programmes tailored to the needs of people using drugs. We encouraged proposals that foster collaboration between people using drugs and the broader community, including healthcare providers and government stakeholders. Recognising the unique barriers to accessing healthcare services faced by marginalised groups, including women and other people who use drugs, grant awards to organisations which placed significant emphasis on addressing these specific needs were prioritised.

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This included a focus on awareness-raising campaigns, the delivery of comprehensive harm reduction services encompassing HIV care, Hepatitis C, TB, and sexual and reproductive health services, and initiatives aimed at creating a supportive environment to reduce stigma and discrimination against people who use drugs. Additionally, we sought interventions that provided holistic care beyond health services, such as income generation opportunities and legal advice support, while advocating to inform public policy environments to improve access to harm reduction services.

ViiV Healthcare's Positive Action programme also works to address structural issues through our Strategic Partnerships. In 2024, we continued to enhance our previous investments by providing ongoing support to several significant initiatives. The Breakthrough Paediatric Partnership focuses on locating, linking, and retaining mothers and children in care, ensuring that families affected by HIV receive comprehensive support. Our HER Voice partnership with the multilateral Global Fund (to end AIDS, TB and Malaria) enables adolescent girls and young women to drive their people-centred public health advocacy, and creates platforms (with decision makers) to express what matters most to improve their health outcomes. For example, the 'Unfinished Business' initiative in South Africa aims to scale-up effective paediatric and adolescent services, ensuring that young people receive essential care. We also collaborate with 'mothers2mothers', to strengthen primary HIV prevention, and improve paediatric case finding. In addition, the 'stigma (r)evolution programme' promotes community-led advocacy and action to combat stigma, discrimination, and violence against people living with HIV.

In 2024, ViiV Healthcare's Positive Action programme in the US invested more than $36 million into 290 organisations committed to connecting people to care, expanding networks, and changing the culture around HIV stigma. With significant multi-year grants, more than 250 projects in communities are funded to expand linkage to care, and improve access for US communities disproportionately impacted by the national epidemic. These programs are building infrastructure, networks and advocacy plans on the hyper local, regional, and national level, and fuelling the movement to end HIV in the US.

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3. Community Engagement and Outreach

Through actively engaging patient communities and partnering with local organisations, we can address barriers to care, reduce health inequities, and ensure that our initiatives are culturally relevant and impactful, especially those to people underserved and disproportionately affected by the epidemic.

In 2024, the 'Risk to Reasons' Initiative aimed to increase HIV prevention awareness among Black women in the United States, expanded its toolkit to include medical providers. Partnering with the Black Women's Working Group to Reframe Risk and five Black women HCPs, we developed a ViiV Medical Education program. This program has been designed to address the sexual health and wellness needs of Black women, providing training to a broad range of healthcare providers. Risk to Reasons is in the process of being introduced to the UK.

ViiV Healthcare also launched the 'Know-la campaign' at the Essence Festival (the largest annual African American cultural and music event) in New Orleans, reaching over 17,000 attendees and garnering 1.7 million media impressions. Through interactive sessions and educational panels we connected 573 people to resources and information on sexual health and HIV prevention.

At Beautycon 2024, ViiV Healthcare was the only pharmaceutical company featured, mainstreaming 'Risk to Reasons' and HIV prevention messaging to the beauty and wellness spaces. This initiative engaged beauty influencers to advocate for comprehensive self-care, including sexual wellness, and garnered 254,000 impressions across social platforms with 7,500 influencer engagements.

Recognizing the growing concern of HIV rates across Historically Black College and University (HBCU) campuses in the US, ViiV Healthcare partnered with Alabama State University for their Homecoming football game. This initiative focused on HIV prevention, education, and stigma reduction, resulting in 13,000 engagements, and over 750 connections to service providers.

Furthermore, ViiV Healthcare partnered with Twitch influencers to pilot the LevelUpWithPrEP! campaign, targeting LGBTQ+, Black, and Latinx communities. This campaign educated and raised awareness about HIV prevention and PrEP options, achieving 4.6K live stream views, 1.3K live stream engagements, 3.5M social media impressions, 1.5M social media engagements, and 4.8K clicks to ViiV Healthcare's HIV prevention website, exceeding all benchmarks. This innovative approach demonstrated our commitment to educating key audiences about HIV prevention through unconventional channels.

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(ii.) What are your company's FUTURE PLANS for improving access to treatment and care, beyond 2025?

In October 2024, ViiV committed to tripling the annual supply of long-acting PrEP available for procurement and use in lower income countries at a not-for-profit price. We remain committed to working with global health partners, governments, and implementing partners to support introduction and access to LA PrEP where HIV burden and unmet need are greatest. In addition, we continue to actively engage and partner with the three generic sublicensees of the MPP licence to develop high quality generic versions of our LA PrEP medicine throughout 2025 and beyond. This includes providing further technical support, reference product for bioequivalence studies, as well as expertise to accelerate generic product development and availability.

For assets currently in our pipeline, considerations about access begin in early product development, typically from phase II when we start to evaluate key challenges and opportunities for a health technology's emerging clinical profile. This approach helps us to evaluate the potential impact—of new treatment and/or prevention options in LMICs—considering healthcare system needs and infrastructure in these settings, and tailor our access strategies accordingly.

We will continue to collaborate and advocate to inform national, regional and global public policies which promote equitable access to HIV prevention, treatment and care.

On COMPANY/PATIENT-GROUP RELATIONS

All of the companies responding to last year's company questionnaire affirmed seeking open, lasting relations with patient groups.

Therefore:
What does your company see as the main gains for both itself, and for partner patient groups, when establishing LONG-TERM RELATIONS with patient groups?

ViiV Healthcare continues to enable progress in the global HIV prevention response through long-term partnerships with people and communities disproportionately impacted by the epidemic who require greater choice in HIV prevention options to improve health outcomes. We are a founding supporter of the African Women's Prevention Community Accountability Board (AWPCAB), a coalition of Eastern and Southern African women advocates. AWPCAB aims to strengthen HIV prevention commitments across Africa by prioritising the needs, choices, and voices of African women in the HIV prevention response. In 2024, we supported AWPCAB to form part of a wider network of HIV prevention advocates which curated a learning exchange at the 2024 HIV4Prevention conference in Lima, Peru. The learning exchange convened HIV prevention advocates from Africa, Asia, and Latin America, to share insights and experiences about HIV prevention advocacy, demand creation and education across their respective regions. The organising network included APCOM, which works to advocate for the health and rights of gay and transgender people in Asia and the Pacific. APCOM is a longstanding ViiV Healthcare strategic partner. We have worked with APCOM to address HIV-related stigma, advance the HIV prevention response, and develop a steering committee report with decision makers recommendations to improve care and enhance quality of life for people living with HIV across the Asia-Pacific region.

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We have established a Global Community Panel consisting of 21 patients representing communities around the world. The Panel will be convened periodically over 12 months to provide advice and open input informed by their lived experiences, or perspectives of communities they represent to support teams across ViiV. Through continuous engagement with the Panel, we hope to foster a partnership where members gain a deeper understanding of our business and context, enabling them to provide more meaningful and strategic advice. Additionally, we hope for Panel members, especially those with little to no prior experience working with the pharmaceutical industry, to gain valuable insights into the sector, to enable them to engage in future interactions.

The Positive Perspectives studies are a series of three global, cross-sectional surveys of people living with HIV. Results from the first and second wave of research have been published broadly and shared with, and by, patient communities, healthcare providers, and policymakers to amplify patient voice and unmet needs. ViiV are now conducting the third wave of the Positive Perspectives study which has been co-created with 15 community representatives from around the world to ensure the research is relevant, accessible, and useful to communities and key stakeholders in healthcare. The Positive Perspectives Community Steering Committee have been partners in defining the study objectives, crafting survey questions, refining the study protocol, and supporting with recruitment. Data will read out through 2025, and our Steering Committee will provide support with interpreting the results, to ensure we communicate and disseminate the results with communities in a way that resonates with them.

Another critical advantage of long-term relationships with patient groups is the ability to have open and constructive communication during crisis. These strong, trust-based relationships are invaluable during times of emergency and uncertainty, as they facilitate swift and effective collective responses, ensuring that needs are met promptly and appropriately.

Furthermore, these partnerships contribute to cultivating a purpose-led culture across our organisation. Our employees are inspired by our mission to leave no one behind and our ambition for the patients we serve. Engaging with patient groups on a long-term basis reinforces our commitment to patient-centricity, and fuels our collective drive to make a meaningful difference in the lives of patients.

Long-term relationships with patient groups enhance our ability to partner on shared advocacy priorities at both local and national levels.

ViiV Healthcare

Finally, on FUTURE COMPANY/PATIENT-GROUP RELATIONS

Looking to the future: What TRENDS ARE EMERGING in how your company and patient groups work together?

And how will you measure progress?

Emerging trends impacting how ViiV Healthcare collaborates with patient groups continue to evolve, and include factors such as the decline in political prioritisation and donor funding to end infectious disease, as well as the contraction in public investment in HIV research. As we navigate these shifts, we are adapting how we collaborate, and with whom, to ensure we continue to make meaningful progress in ending the epidemic as a public health threat.

Action to understanding the rapidly changing funding landscape

The 2025 rapidly evolving public policy and funding environment has a direct impact on programming and advocacy led by patients and patient groups. ViiV Healthcare's response has included:

- ➔ Working with community-led organisations to conduct ongoing needs assessments.
- ➔ Introducing flexibility in grant use, enabling organisations we support to address unanticipated changes and reprioritise.
- ➔ Hosting townhall and listening sessions, to more directly engage with organisations we support.

Despite the changing political landscape and its implications for the global HIV response, ViiV remains committed to developing and delivering health technologies which make HIV a smaller part of people's lives. Reflecting the environment that is impacting the HIV response globally, we recognise the need to adapt our approach and our partnerships to sustain the gains, and to secure rapid progress in the HIV response. Therefore, we are actively gathering insights to improve our understanding of evolving innovation health financing, and other public-private partnership approaches which may become key tools in the next phase to end the epidemic.

We will continue to adopt mechanisms and partnerships that enable community experts and external leaders to 'co-create' programmes, rather than merely provide advice. At ViiV, we strive to embed structures (e.g. Patient Panels, Steering Committees, and Working Groups) that foster deeper, more collaborative engagements. This approach ensures that the voices of those directly impacted by HIV are integral to the development and implementation of our programmes.

ViiV Healthcare

There is an increasing need to convene patient groups within countries and across nations to share learnings, collaborate, and collectively mobilise. ViiV, through initiatives like our annual Youth and Community Summit in the USA, have convened and amplified community voices to tackle big challenges together. Our role as conveners continues to grow as we host additional 'hyper-local' convenings and regular 'learning community' gatherings. These events provide unique opportunities for partners to build relationships, and form alliances that can accelerate our collective efforts to address the epidemic. Many participants have expressed the opinion that our gatherings provide rare occasions where they can connect, highlighting the importance of these engagements.

We are also redefining the traditional boundaries of "community" in the context of HIV by extending our outreach to broader US audiences. This includes engaging with faith groups, youth-focused organisations, and institutions of culture, art, and education. These US organisations serve the populations we seek to reach, who are outside the typical HIV spaces where we might normally engage, such as clinics, health departments, AIDS Service Organizations, and other settings which provide direct HIV services to the community. By fostering conversations about HIV in these new spaces, we aim to enhance our messaging and broaden our impact.

To measure progress, we will assess the extent of our outreach and engagement with our current network and new audiences, the development of new partnerships and alliances and the impact of our partnerships on people and communities.

PATIENT VIEW