



Strengthen the API production industry in France and Europe

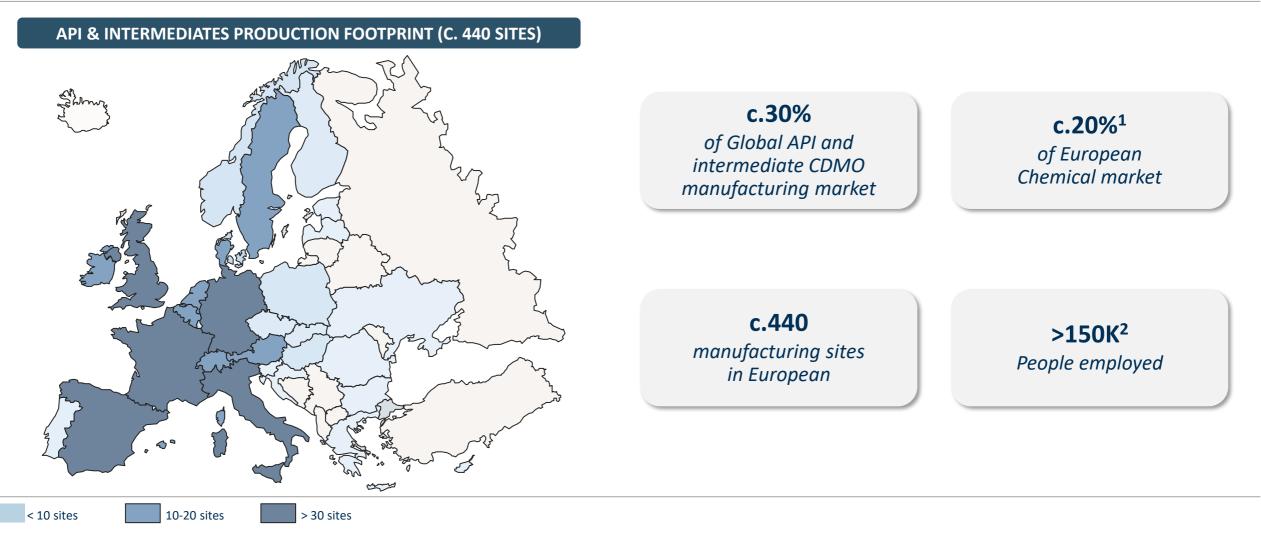
Final report | September 5th 2024

Agenda

▶ OVERVIEW

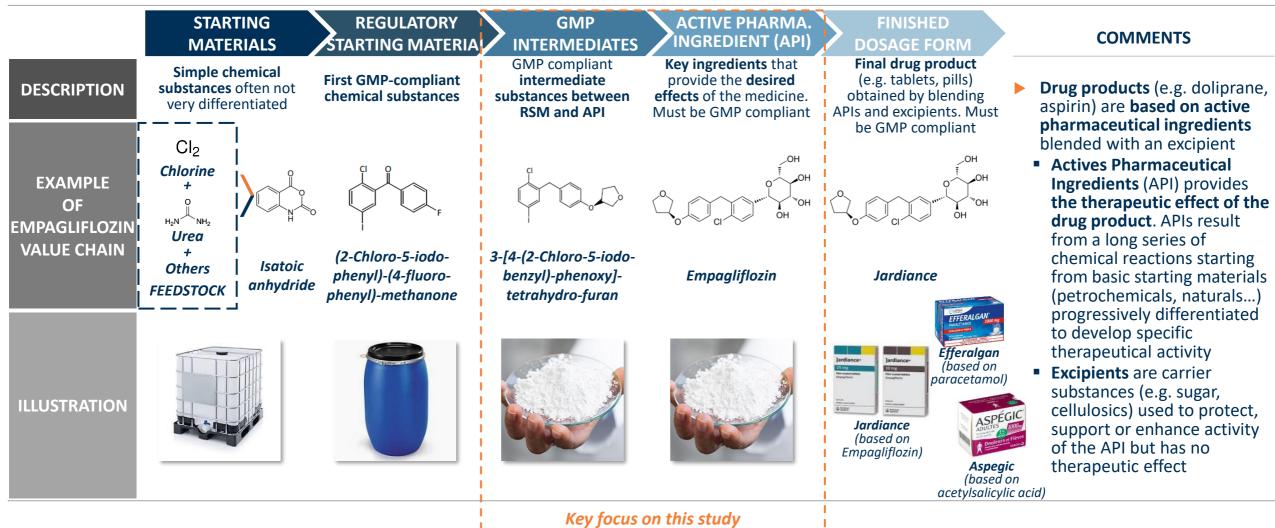
Active Pharmaceutical Ingredients manufacturing generates €160bn (o/w €70bn for the merchant market) per year and employes 150.000+ people throughout Europe

European CDMO facilities 2024, # production sites per country, Europe



Finished Dosage Form (FDF) are drug products used to treat patients which are based on Active Pharmaceutical Ingredients (API), the chemical substances providing the desired efficacy

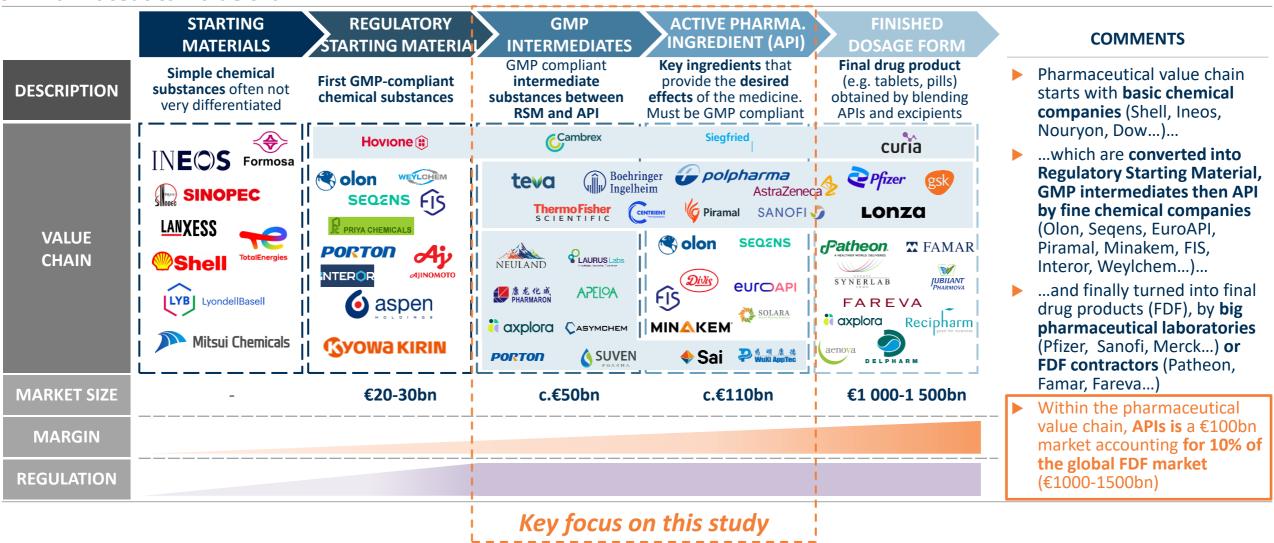
Pharmaceutical value chain



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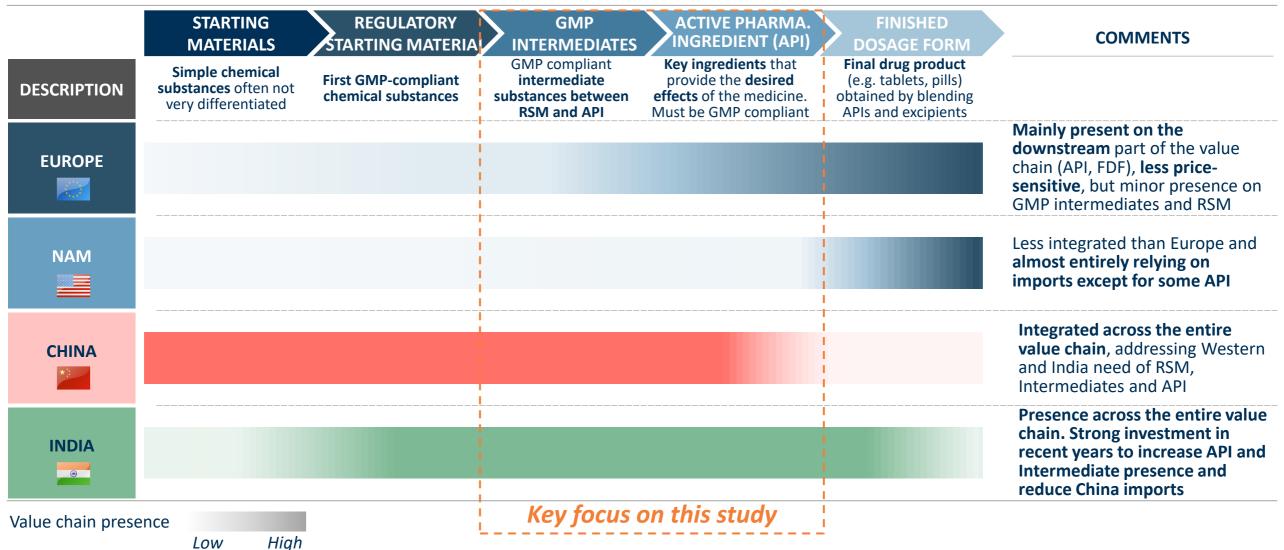
Pharmaceutical value chain is global, fragmented and served by large number of suppliers with most of them only focused on one or few steps of the value chain

Pharmaceutical value chain



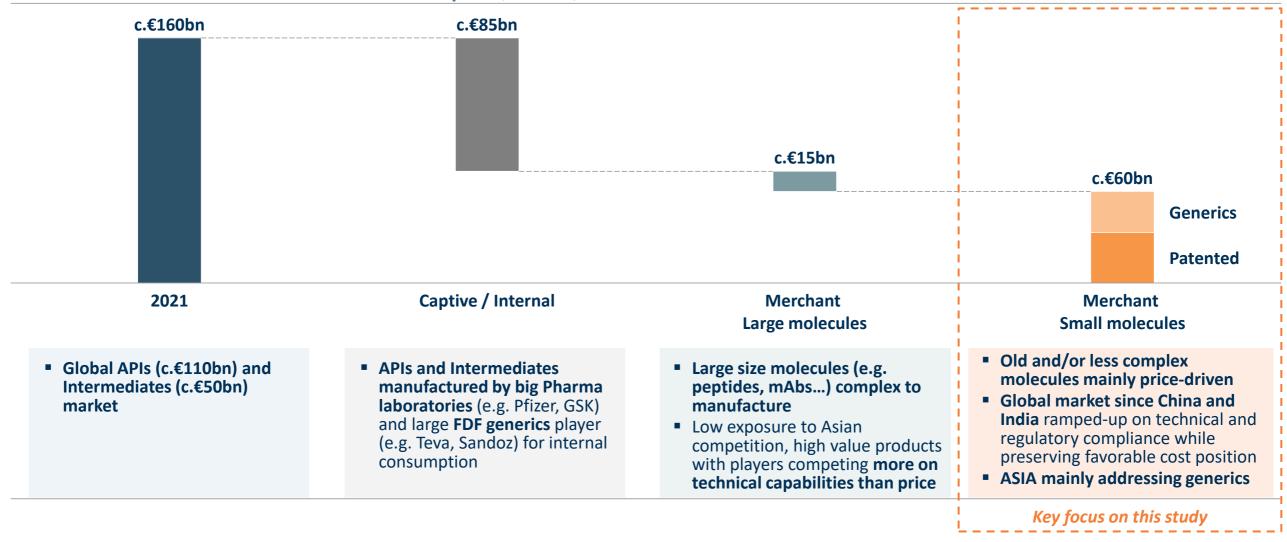
Europe is still present on API and FDF manufacturing which are less price-sensitive and still more driven by innovation while most of the upstream part of the value chain is done in Asia

Pharmaceutical value chain



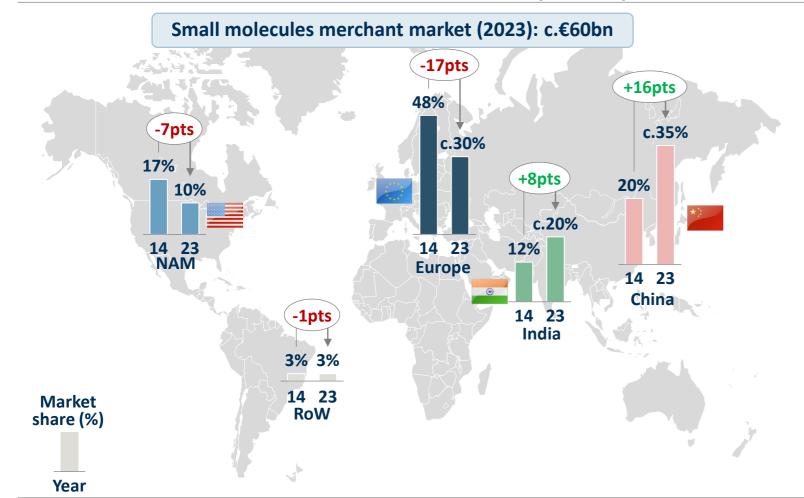
Out of c.€160bn APIs and Intermediates market, c.€60bn are exposed to global competition, mainly small molecules, less complex to produce and more price-driven

Global API and Intermediates market size | €bn, World, 2023



On the €60bn merchant small molecules APIs and intermediates market, Europe is #2 player after production moved towards Asia over the last decade to optimize manufacturing costs...

Small molecules APIs and Intermediates market dynamics | merchant market, small molecules, €bn, %, 2014-2023, World



COMMENTS

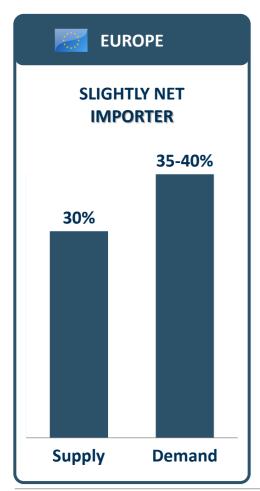
- Structural shift of small molecules API and related Intermediates production towards ASIA
 - Strong penetration of China and India owing to i) cost competitiveness, ii) improved quality and technical know-how
- Production delocalization enabled overall APIs cost reduction over the years but led to
- Longer delays and higher shortage frequency
- Risk of shutdown of production due to noncompliance with regulatory standards after arbitrary inspection (e.g. Sun Pharma, Natco Pharma)
- Strong supply disruption due to abrupt closure of Chinese intermediates / API players because of government decision (e.g. blue sky policy)

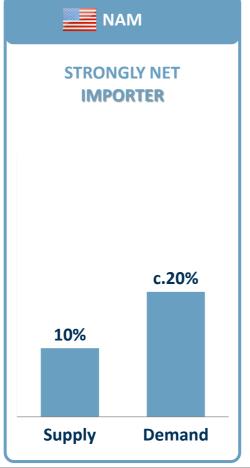
"After 18 months of inspection, we are not very happy than more than 36% of the 400 inspected manufacturing units had to be closed"

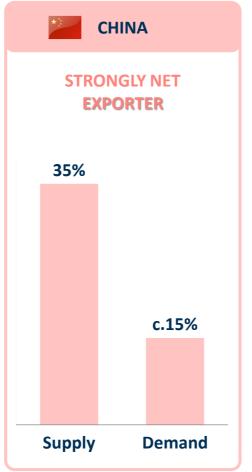
Director - Indian Pharmacopoeia Commission

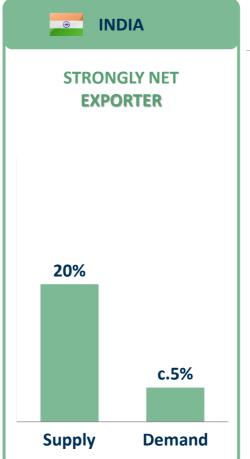
... Which resulted in a net importer position for Europe and NAM in a much larger extent while China and India have become strong net exporting geographies

Small molecules APIs and Intermediates supply and demand per region 1 merchant, small molecules, %value, 2023, World









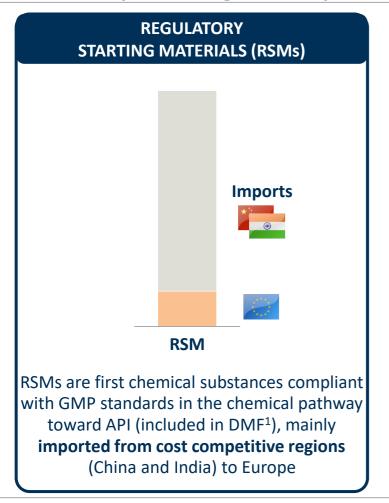
COMMENTS

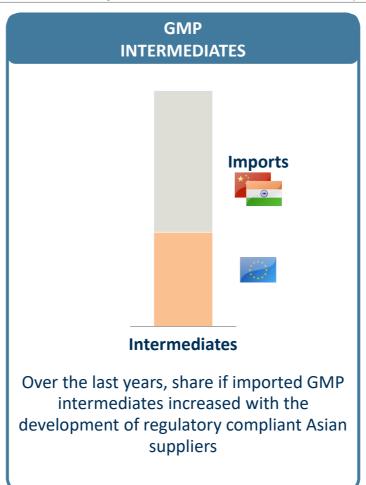
- ► Europe is the only region nearly balanced between its supply and its demand
- ► NAM strongly relies on imports, historically from **Europe and more and more** from Asia and more recently from India
- China and India have turned into the larger producing continent, largely exceeding their domestic needs

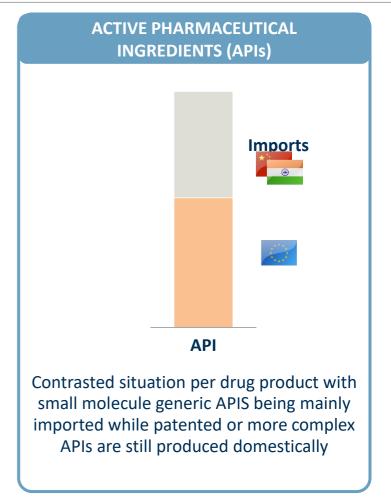
Zooming on Europe, exposure to Asian imports is very high for RSMs but more balanced for GMP intermediates and APIs, yet >74% of the European medicine value chain depends on imports



Share of imports along the European API value chain | Base 100, in value, Europe, 2023



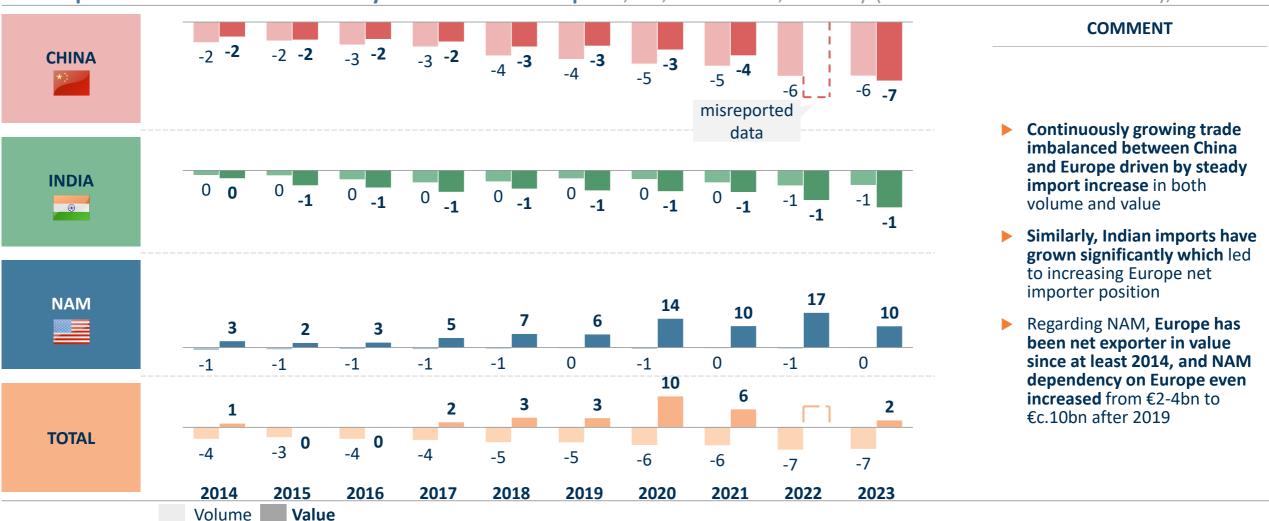




>74% of the European medicine value chain depends on imports, could it be at the API, GMP intermediate or Regulatory starting Material step

On API (excl. Intermediates and RSM): Europe have been increasingly relying on China and India to supply the API and intermediate demand and thus depending more and more on Asia

Europe API¹ net trade² evolution by volume and value | €bn, mt, 2014-2023, API only (excl. Intermediates and RSM), World³



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Since 2016, 80% of the top 10 best-selling, all generics, have experienced shortages and more generally >300 molecules were concerned in recent years, mainly due to supply issues from China

Shortages dynamics | 2016-2024, Europe

	CLASS	MOLECULE	EU SHARE OF PRODUCTION	
		Paracetamol		YES
	NSAID ³	Aspirin	•	YES
		Diclofenac		YES
TOP 10 API IN EU5 ^{1,2}	CARDIO- VASCULARY ⁴	Atorvastatin		YES
		Ramipril		YES
		Bisoprolol		NONE REPORTED
	DIABETES	Metformin		NONE REPORTED
	RESPIRATORY	Salbutamol		YES
	GASTRO- INTESTINAL	Omeprazole		YES
	HORMONES	Levothyro- xine sodium	•	YES



Commission steps up actions to address critical shortages of medicines and strengthen security of supply in the EU

The Commission has adopted today a set of actions to better prevent and mitigate critical medicine shortages in the EU, this winter, next winter and beyond. Recent critical shortages, including of certain antibiotics last winter, show that continued coordinated action is needed to address supply challenges and to make Europe's medicine supply chains more resilient in the long run. The key goals of today's Communication are to prevent and mitigate **critical shortages** at EU level. It puts a particular focus on the most **critical medicines**, for which security of supply in the EU must be ensured at all times.

This Communication builds on the work under the European Health Union, notably the reinforced mandate of the European Medicines Agency and the recently published <u>pharmaceutical reform</u>. It follows a strong call by Member States at the <u>2023 June European Council</u>, confirmed in <u>Granada</u> in October 2023, and from the European Parliament.

Mitigating critical shortages this winter and beyond

To better prepare for this winter, a lot of measures have already been taken. For instance, the European Health Emergency Preparedness and Response Authority (HERA) and the European Medicines Agency (EMA) have identified key antibiotics (including specific paediatric formulations) for which they anticipate the risk of critical shortages ahead of the winter. Measures have been put in place to assure the availability of these antibiotics.

However, more needs to be done. This is why we are stepping up our actions with

- The launch of a European Voluntary Solidarity Mechanism for medicines (October 2023): the
 mechanism flags a Member State' needs for a given medicine to other Member States, that can
 respond by redistributing medicines from their available stock.
- A Union list of critical medicines (available by the end of 2023): Once established, this list will
 be the first step to analyse the supply chain of selected medicines by April 2024. This analysis will
 then show where additional measures are needed.

The Guardian

The Guardian view on medicine shortages: a global issue for which Britain needs a plan

The UK is not alone in facing drug supply-chain challenges. This is a global issue, which has been rising up the agenda of EU states and the US as well. Rich western countries, along with much of the rest of the world, are heavily reliant on the pharmaceuticals manufacturing capacity of India and China for sufficient quantities of generic, off-patent drugs. During the pandemic the risks of this model became obvious when countries were forced to compete for vaccines, and India placed export restrictions on many items, including paracetamol.

Both the EU and US have responded with significant moves towards reshoring. France is building a paracetamol factory large enough to meet half of all European demand. Belgium has made the issue a theme of its EU presidency. Rules about state aid look set to be altered, and pharmaceuticals recategorised as a strategic industry like semiconductors. While European manufacturing will make supplies more secure, it is also expected to make drugs more expensive and reduce carbon emissions and other environmental damage associated with them.

"We need to be able to see what the crises are and respond to them effectively before they happen"

Health Commissioner - Stella Kyriakides

"We will then identify the best measures to address and avoid shortages, [...] to increase manufacturing in Europe"

Commission President - Ursula von der Leyen

SHORTAGES OBSERVED FOR MORE THAN 300 MOLECULES IN RECENT YEARS

European production share



Europe is the region which less supports domestic production and, has no clear plan to limit the access to its market to oversea competition or defend domestic production while other have €bn plan accounting for 10-20% of their domestic production value

		LEVER 1: SUPPORT DOMESTIC PRODUCTION	LEVER 2: BARRIER TO ENTRY ON API MARKET
EU	< €0.25bn (c.1%)	€1bn through the IPCEI Med4Cure to support 4 pharmaceutical R&D axis, only <25% is directed toward small molecules participating the open market Investments at national levels in most countries, e.g. €50m to reshore essential medicines (France 2030) In progress: "Critical Medicine Alliance" launched in April 2024 to pave the way to future "Critical Medicine Act" to support local API production (by EESC¹ in Dec 23)	 European market fully open to foreign competition c.7% import tariffs
US	>€1bn (c.15%)	Large investment (>€1bn) in manufacturing assets on domestic soil ■ €910m during COVID-19 crisis for APIs and FDF production in the US ■ €40m for essential medicines through Defense Production act In progress: "Pills act", promotes US generic medicine production via tax credits	 Restrict some federal market to Chinese players (Buy American act) May be expanded to a broader scope if Biosecure act is passed c.7%² import tariffs
CHINA	>€1.5bn (c.7%)	Large investment at national level (€1.5bn) and province level (e.g. Shanghai: c.€2.5m R&D investment) to support new drug development Boost local players' cost competitiveness via investments in infrastructure (SEZs³, R&D parks) and very advantageous loan from state-controlled banks	 No formal barriers, but disclosing proces details limits foreign players' participation in the Chinese market 5-10% import tariffs
NDIA	>c.€3bn (25%)	Large investment (€2.5bn) to stimulate domestic production and reduce exposure to imports from Chain (PLI ⁴) Boost local players' cost competitiveness via i) investment (€330m) in infrastructure, financing of 3 chemical parks, and ii) €55m in pharmaceutical infrastructure, incl. 35m for production facility upgrades (SPI ⁵)	 Indian market fully open to foreign competition 15-30%⁶ tax
mporta	ance —	(xx%): Support intensity defined as support measure High budget divided by the value of the domestic industry	Importance Low High

Europe competitiveness on API production has been assessed via the analysis of the production costs of 12 APIs among the most sold and/or most critical in Europe vs. oversea locations

CLASS	EXAMPLE OF KEY MOLECULES		DEEP-DIVE IN NEXT SECTION
NSAID	Paracetamol, Aspirin, Metamizole, Ketoprofen, Ibuprofen, Codeine, Morphine,	 Include some of the most prescribed drug products in Europe Very large volume (up to c.50kt), low-mid value (€5-100/kg) molecules 	3
CARDIOVASCULARY ANTITHROMBOTICS DIURETICS	Atorvastatin, Rivaroxaban, Ramipril, Clopidogrel, Dronaderone, Candesartan, Irbesartan, Losartan, Furosemide,	Large volume, mid value molecules with strong capacity increase in Asia for some products in recent years leading to pressure on price	1
RESPIRATORY	Budesonide, Fluticasone, Ephedrine,	Notably include several products on WHO list of essential medicines, limited shortage in recent years	- -
ANTI HISTAMINIC	Cetirizine, Bilastine, Desloratadine, Fexofenadine,	Large volume, mid value molecules with strong price pressure from Asia	1
DIABETES	SGLT2i (e.g. Empagliflozine), Insulin, Metformin, DPP4 inhibitors (Sitagliptine), GLP1 (Semaglutide),	 Include several patented products with large share of production remaining in Europe (for both API and precursor) 	1
STEROIDS	Methylpredinosolone, prednisolone, hydrocortisone, dexamethasone,	 Numerous shortages in Europe for various corticoids Europe sustainability at risk owing to historical under-investments 	1
ANTIBIOTICS	Amoxicillin, Spiramycin, Cefixime, Meropenem, Ceftriaxone, Rifampicine,	 On the list of essential medicines but many recent shortage events Large volume molecule. Most of the Europe demand no longer addressed by local producer. Remaining production at risk 	1
ONCOLOGY (OEB>3)	Capecitabine, Florouacil, Paclitaxel,	 Product requiring specific safety requirements to protect workers (OEB 3/4) given their toxicity 	- -
NEUROLOGY	Midazolam, Amisulpride, Ketamine, Methylphenydate,	Low volume medicine (high value) with small batches production cycle where Europe is still a key supplier	2
GASTRO-INTESTINAL	Mesalamine, Ondansetron, Loperamide PPI: Omeprazole, Esomeprazole, Lantoprazole,	Include products with high risk of delocalization which experienced recurring shortages in recent years for some products	1
HORMONES (>OEB3)	Fulvestrant, Tamoxifen, Estradiol, Trenbolone,	 Europe and US as leading producers for several products Some Indian authorization removed due to quality issue 	1
TOTAL			12

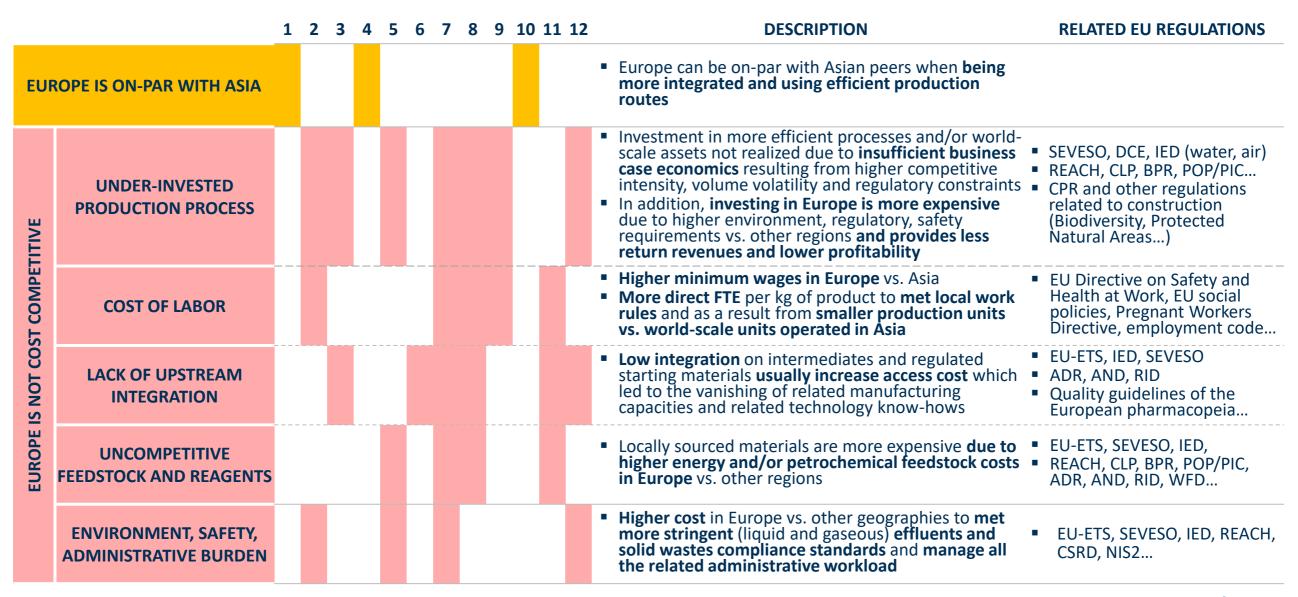
Europe is almost always more expensive than Asia and in the few cases where Europe is cost competitive, aggressive Asian players strategy jeopardizes long-term viability of European assets

	MOLECULE	MARKET PRICE	OPEX P	OSITION (BASE	100)		
CLASS	#	(BASE 100)	EUROPE	ASIA	US	COMMENTS	
	1 (intermediate)	100	90	85-100		Europe is well positioned on cost yet losing market share du aggressive pricing from Asian players	ue to
NSAID	2	100	200 (->85) ¹	85	-	Europe is not cost-competitive vs. China but cost gap can pobridged by investing in new route development	ossibly be
	3	100	55 (->15) ¹	15	-	Europe long term economic viability is not secured, but invenew process could enable to be on par with India competition.	
CARDIOVASCULARY	4	100	90	80	-	Europe is slightly less competitive than China, yet new capa addition in China can lead to price dumping in the short-ter	,
ANTI HISTAMINIC	5	100	90	45	-	 Europe heavily lagging behind India yet upstream integration more automation could be considered to bridge the gap 	on and
DIABETES	6 (intermediate)	100	70	25-45	-	Lower Europe cost-competitiveness results from lack of inte RSM and higher labor costs	egration on
STEROIDS	7	100	60 (->45) ¹	40	-	Europe economic viability is not secured, but investment in competitive route is possible if investment economics can be	
ANTIBIOTICS	8	100	155	90	-	 Europe is suffering from higher cost position which could be mitigated by upstream integration on intermediate 	e partly
NEUROLOGY	9	100	100 (->70) ¹	25	-	Europe is not competitive and investment is required to demone competitive production route and partly bridge the gas	
NEUROLOGY	10	100	100 (->50) ¹	45	40-50	New proprietary route could allow Europe to be cost compete the future if investment economics can be secured	etitive in
GASTRO-INTESTINAL	11	100	70	35	-	Europe is suffering higher cost position, mainly resulting fro labor costs and uncompetitive reagents	om a higher
HORMONES (>OEB3)	12	100	70 (->50) ¹	30		Europe is less competitive than China due to high fixed cost from less efficient production route	ts resulting

XX: Europe on par with Asia

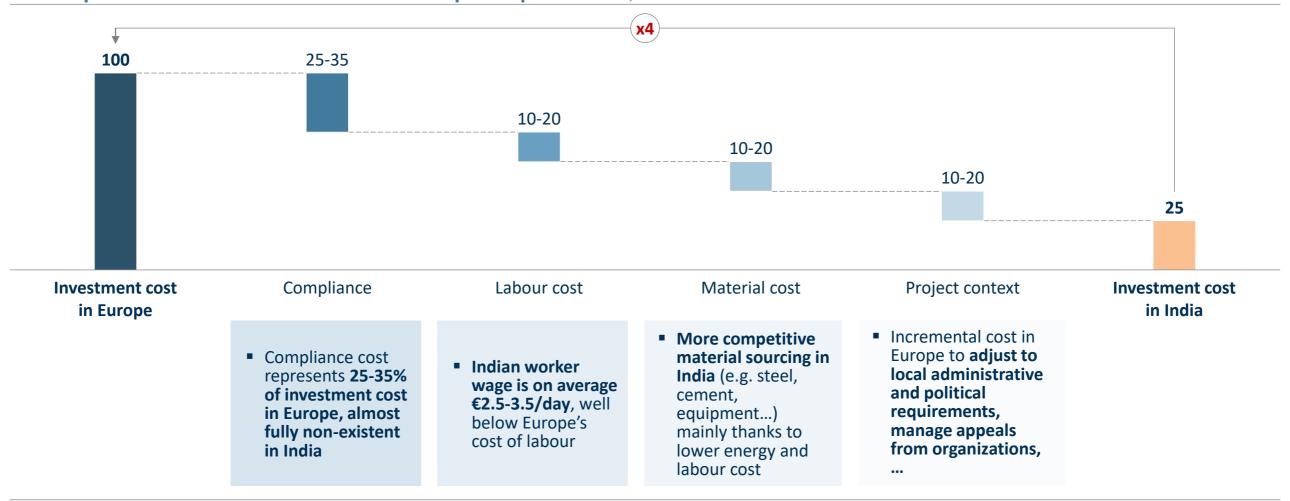
XX: Europe not cost competitive vs. Asia

For most of APIs highlighted in this report, economic viability seems challenging and at the mercy of oversea competition, especially Asian one, not playing with the same rules



On average, investment in Europe is c.4x higher compared to India due to a multiple cumulative drivers

European and Indian investment cost compared | index 100, 2023



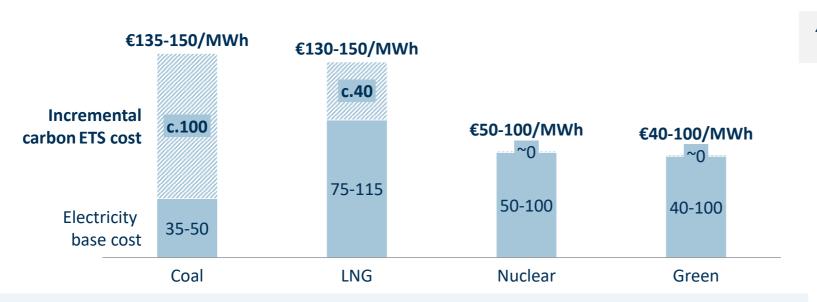
European regulations are numerous and have strong impacts on cost competitiveness in Europe

		IMPACT			
THEME	MAIN SOURCES OF BURDEN	OPEX	CAPEX		
WATER & AIR PROTECTION	■ IED, WFD				
WASTE MANAGEMENT	 Waste burning regulations, waste recycling regulations, overall industry structure 				
ENERGY & CO2 EMISSIONS CONTROL	Carbon credit mechanism (EU-ETS)				
WORKFORCE SAFETY AND WELLBEING	 European Directive on Safety and Health at Work, CMR directive, CAD, Machine directive, European social policies, Pregnant Workers Directive, employment code, Work-life balance and gender equality, administrative (CSRD, NIS2) 				
PROCESS SAFETY	 Operational risks: SEVESO Transport of hazardous substances: ADR, AND, RID Other hazardous substances regulations: REACH, CLP, BPR, POP/PIC 				
OOO OTHER REGULATIONS & FRAMEWORKS	 Construction: CPR, Biodiversity regulation, Protected Natural Areas regulation, Flora and Fauna Protection, Environmental Assessment Regulations, Impact Study assessment, RED, Preventive archeology, water consumption Other: DCE, Quality guidelines of the European pharmacopeia, Nagoya protocol, GMM, DSI, taxations and customs 				

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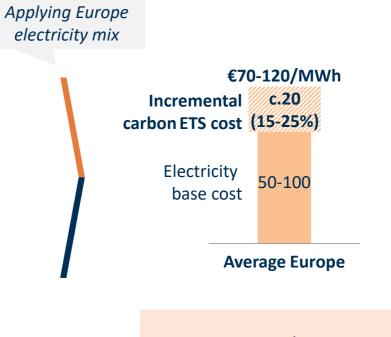
On average in most European countries, electricity includes environment compliance cost, due to carbon cost, accounting for 15-25% of electricity price

Case of environment compliance cost in electricity price | €/MWh, Europe, 2023





- Carbon ETS mechanism is making fossil-based power uncompetitive and as per electricity market design, electricity price is set by the marginal power plant which is mainly fossil-based in Europe
- And, green power will generate additional costs for electricity consumers (network costs, storage costs, capacity costs, supports costs, etc.) which will impact the overall electricity bill of EU industrials
- This is why, despite increasing decarbonized power production capacity, electricity market prices in EU will continue to bear an important carbon ETS cost and electricity bill in EU will remain uncompetitive



 On average, carbon cost represents 15-25% of total electricity cost

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Europe must provide a common answer to defend the domestic production of small molecule API, critical for its model of society

Lessons learnt

- Rules of the game are not the same in Europe compared to the large Asian competitors, namely China and India for both manufacturing of RSMs and APIs
- Competitivity deficit mainly results from:
 - European model of society guaranteeing higher standards of living, healthcare systems, protection of workers and environment...
 - And in a lesser extend higher energy and feedstock costs in Europe than in China or India...
- Resulting in structural under-investment in worldscale unit and efficient processes as well as closure of key RSM production capacities and loss of some related know-how (e.g. nitration)

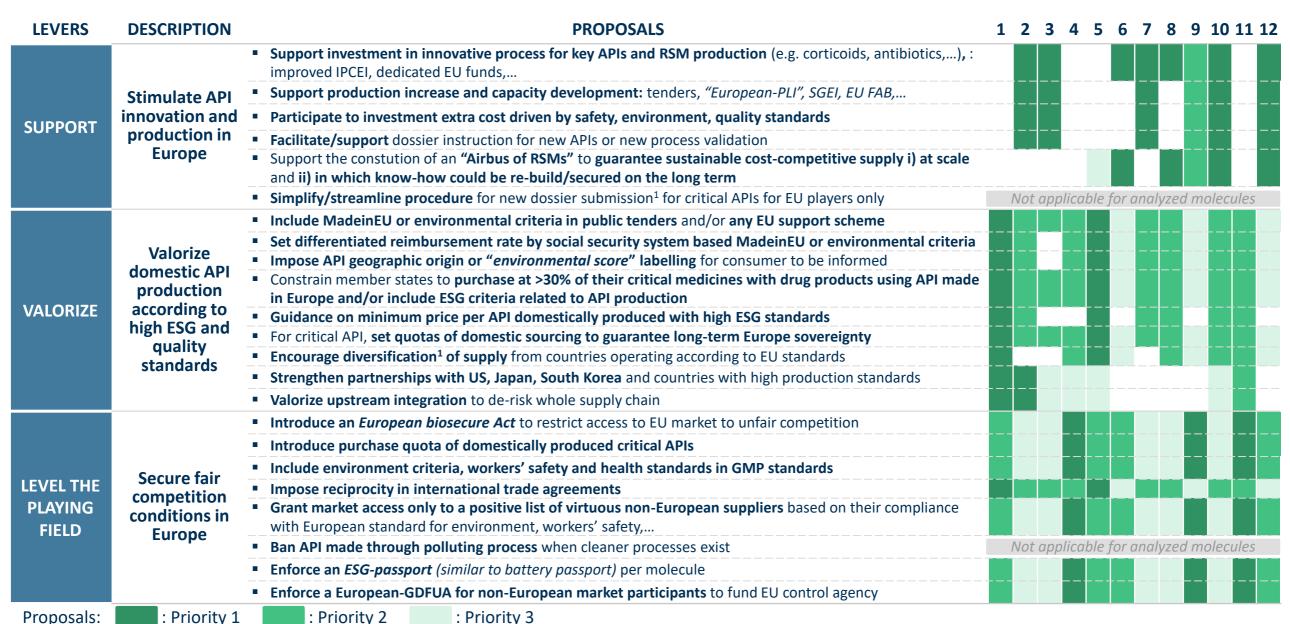
Pre-requisite to domestic API production defense measures

- In order to defend European model of society, and make sustainable and safe the medicine value chain for the common good, member states have to join forces and provide a common answer at the European level:
 - API manufacturing needs a critical market size with common rules of the game to foster the emergence of cost-competitive European champions vs. Asian unfair competition
 - API manufacturers need to secure minimum/critical volumes to cover higher fixed costs and labor costs
- Securing sustainable domestic production of critical APIs is the cornerstone of European citizens protection system shared across all member states and recent shortage events tend to further reinforce this need... while APIs value only accounts for 10% FDF value

Advancy view on possible measures to defend domestic API and intermediates manufacturing which could be considered

UNCOMPETITUE UNDER: INVESTED PROCESS ENVRO SAFET COSTOFLABOR Europe suffers from a lack of cost competitiveness and situation is expected to deteriorate further with the European regulations currently LACKOFRATION in preparation (CSRD, NIS2, PFAS,...) **LEVERS PROPOSALS DESCRIPTION** Support investment in innovative process for key APIs and RSM production (e.g. corticoids, antibiotics,...),: improved IPCEI, dedicated EU funds,... Stimulate API • Support production increase and capacity development: tenders, "European-PLI", SGEI, EU FAB,... innovation Participate to investment extra cost driven by safety, environment, quality standards **SUPPORT** and Facilitate/support dossier instruction for new APIs or new process validation production in Support the constitution of an "Airbus of RSMs" to guarantee sustainable cost-competitive supply i) at scale and ii) **Europe** in which know-how could be re-build/secured on the long term • Simplify/streamline procedure for new dossier submission¹ for critical APIs for EU players only Include MadeinEU or environmental criteria in public tenders and/or any EU support scheme Set differentiated reimbursement rate by social security system based MadeinEU or environmental criteria ■ Impose API geographic origin or "environmental score" labelling for consumer to be informed Valorize Constrain member states to purchase at >30% of their critical medicines with drug products using API made in domestic API Europe and/or include ESG criteria related to API production production Guidance on minimum price per API domestically produced with high ESG standards according to **VALORIZE** high ESG and For critical API, set quotas of domestic sourcing to guarantee long-term Europe sovereignty quality Impose reciprocity in international trade agreements standards • Encourage diversification of supply from (or to) countries operating according to EU standards • Strengthen partnerships with US, Japan, South Korea and countries with high production standards Valorize upstream integration to de-risk whole supply chain Introduce an European biosecure Act to restrict access to EU market to unfair competition Introduce purchase quota of domestically produced critical APIs Include environment criteria, workers' safety and health standards in GMP standards Secure fair **LEVEL THE** Impose reciprocity in international trade agreements competition **PLAYING** • Grant market access only to a positive list of virtuous non-European suppliers based on their compliance with conditions in European standard for environment, workers' safety,... **FIELD** Europe Ban API made through polluting process when cleaner processes exist • Enforce an ESG-passport (similar to battery passport) per molecule Enforce a European-GDFUA for non-European market participants to fund EU control agency Note. 1) when there is no European supplied

Possible measures suggested by Advancy should have direct positive impacts on economic viability of investigated molecules sample



Note: 1) when there is no European supplier Source: External interviews, Advancy analysis

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