

Lilly

1876 **150** 2026

YEARS OF MEDICINE



2026 Lilly EASD Analyst Call

Lilly



Agenda

Introduction

Kenneth Custer, Ph.D., President, Cardiometabolic Health

EASD 2026 Data Highlights

Thomas Seck, M.D., Sr. Vice President, Product Development, Cardiometabolic Health

Question & Answer Session

Dan Skovronsky, M.D., Ph.D., Chief Scientific and Product Officer

Kenneth Custer, Ph.D., President, Cardiometabolic Health

Thomas Seck, M.D., Sr. Vice President, Product Development, Cardiometabolic Health

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2026 Lilly EASD Highlights

Market-Leading Portfolio



#1 prescribed medicine for obesity



#1 prescribed incretin for type 2 diabetes



U.S. obesity launch ongoing, full global rollout and type 2 diabetes approval anticipated in 2026/2027

Raising the Bar with Foundayo, Retatrutide & EloraTZP



Foundayo demonstrated cardiovascular safety and sustained glycemic control and weight loss in ACHIEVE-4



Retatrutide delivered up to 20.8% weight loss in obesity + T2D at 80 weeks in TRIUMPH-2



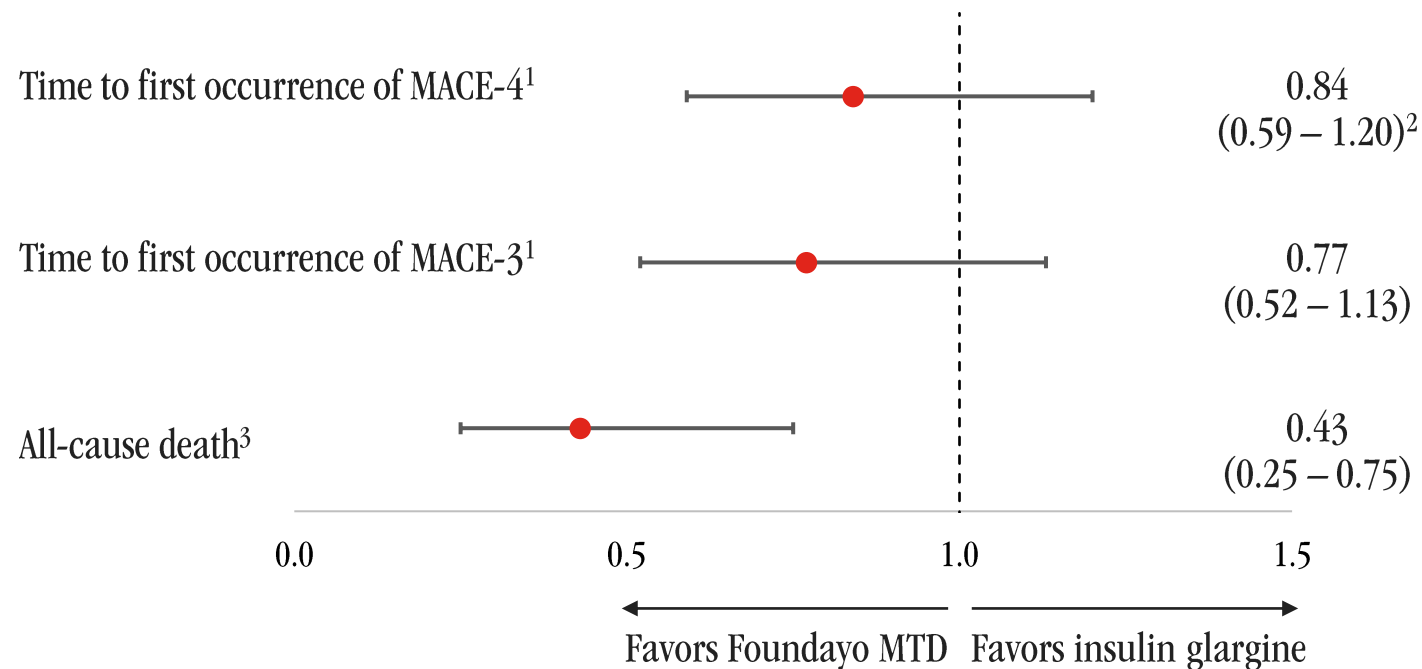
EloraTZP showed up to 23% weight loss in obesity + T2D at 48 weeks in a Phase 2 study

Working to change the course of cardiometabolic health by expanding treatment choices and raising the future standard of care

Foundayo ACHIEVE-4

Foundayo ACHIEVE-4 Results

ACHIEVE-4 Select Hazard Ratios (95% CI)



Key Highlights:

Demonstrated cardiovascular safety and sustained A1C reduction and weight loss

16% lower risk of MACE-4 events⁴

23% lower risk of MACE-3 events⁴

¹ Time to first event analysis using Cox proportional hazard model

² Non-inferiority (upper limit of 95% CI of the hazard ratio < 1.8)

³ Pre-planned analysis not multiplicity controlled for family-wise type-1 error

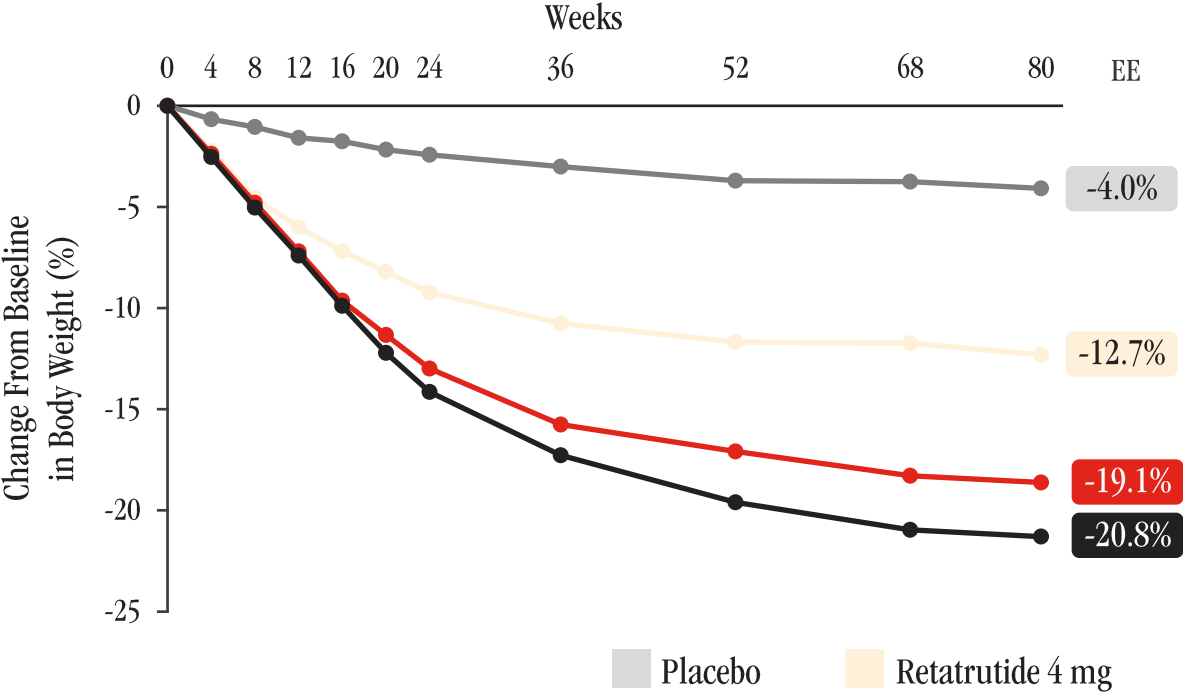
⁴ vs. insulin glargine

Retatrutide TRIUMPH-2

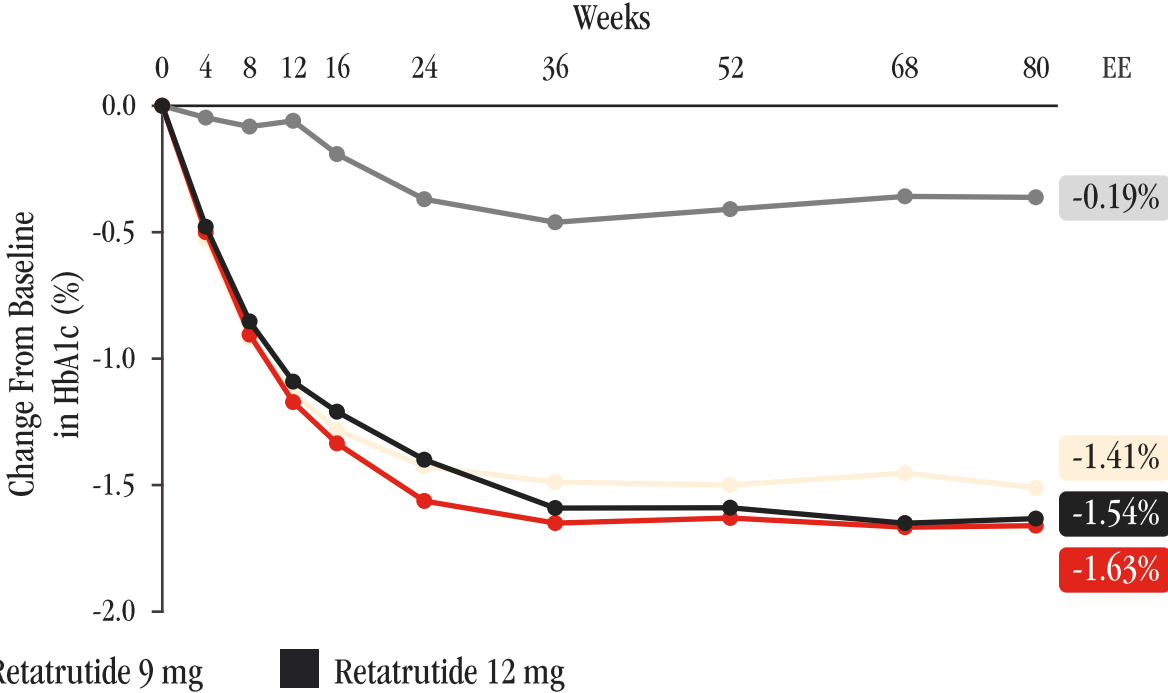
TRIUMPH-2 Weight Change and HbA1c Results

Participants with Overweight or Obesity and T2D

Percent Change from Baseline Body Weight¹ (106.4 kg)



Percent Change from Baseline HbA1c¹ (7.7%)



Retatrutide delivered powerful weight loss in patients with diabetes and obesity, a population which often struggles to lose weight

TRIUMPH-2 Safety & Tolerability

Treatment Emergent Adverse Events (%)	Placebo	Retatrutide 4 mg	Retatrutide 9 mg	Retatrutide 12 mg
Diarrhea	13%	27%	33%	34%
Nausea	8%	14%	21%	28%
Constipation	9%	14%	16%	17%
Decreased appetite	5%	6%	12%	17%
Vomiting	4%	5%	10%	16%
Dysesthesia	1%	4%	6%	7%
Urinary tract infection	7%	4%	6%	8%
Discontinuation due to Adverse Events	5%	4%	12%	8%

Key Highlights:

GI AEs were the most common reason for discontinuation

Dysesthesia and urinary tract infections generally mild-to-moderate, majority resolved during treatment

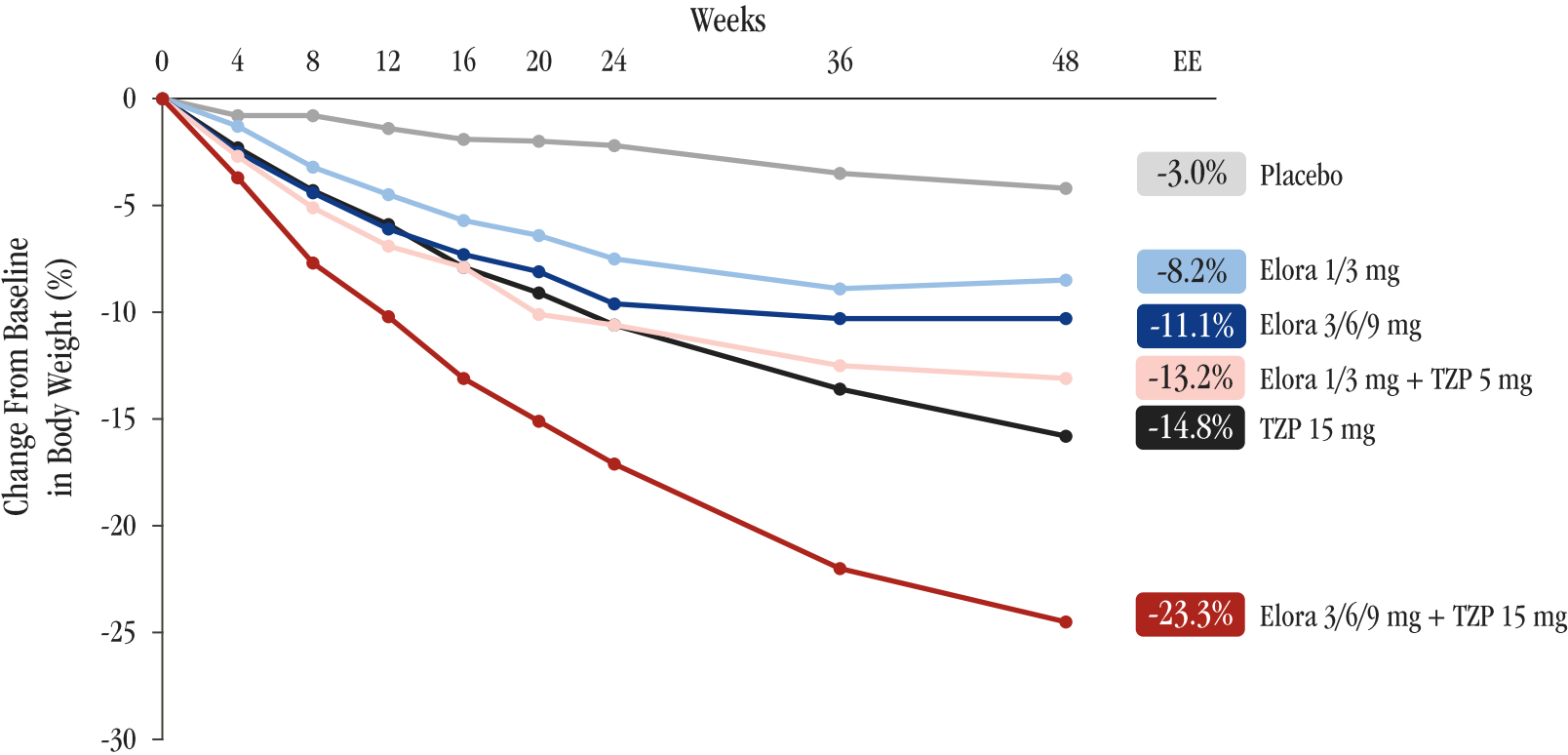
EloraTZP

Phase 2 Results

EloraTZP Phase 2 Weight Loss

Participants with Overweight or Obesity and T2D

Percent Change from Baseline Body Weight¹ (105.4 kg)



Key Highlights:

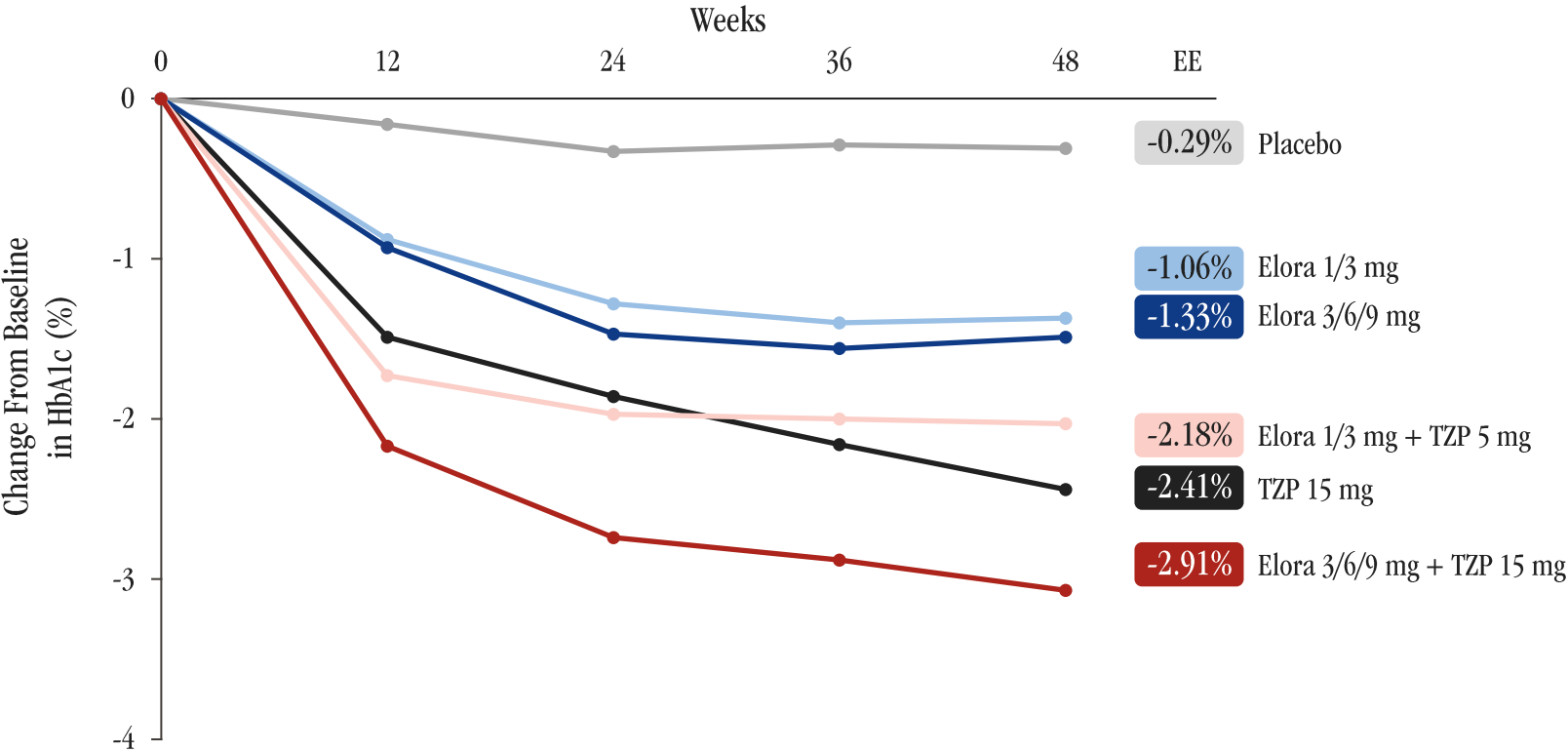
- EloraTZP combination activates three complementary nutrient-stimulating hormones
- EloraTZP associated with greater weight reduction vs. either therapy alone
- Delivered 23% weight loss at the high-dose combination

1. Select primary endpoint data. Data in line plot are the mean observed data while all other data are model based estimates using efficacy estimand data set.
EE = efficacy estimand; Elora=eloralintide; TZP=tirzepatide; T2D=type 2 diabetes

EloraTZP Phase 2 HbA1c

Participants with Overweight or Obesity and T2D

Change from Baseline HbA1c¹ (8.1%)



Key Highlights:

Eloralintide and EloraTZP delivered clinically meaningful A1C control

EloraTZP improved A1C by 2.9% at the high-dose combination

77% of participants achieved A1C <5.7% with high-dose combination

1. Select secondary endpoint data. Data in line plot are the mean observed data while all other data are model based estimates using efficacy estimand data set.
EE = efficacy estimand; Elora=eloralintide; TZP=tirzepatide; T2D=type 2 diabetes

EloraTZP Safety & Tolerability

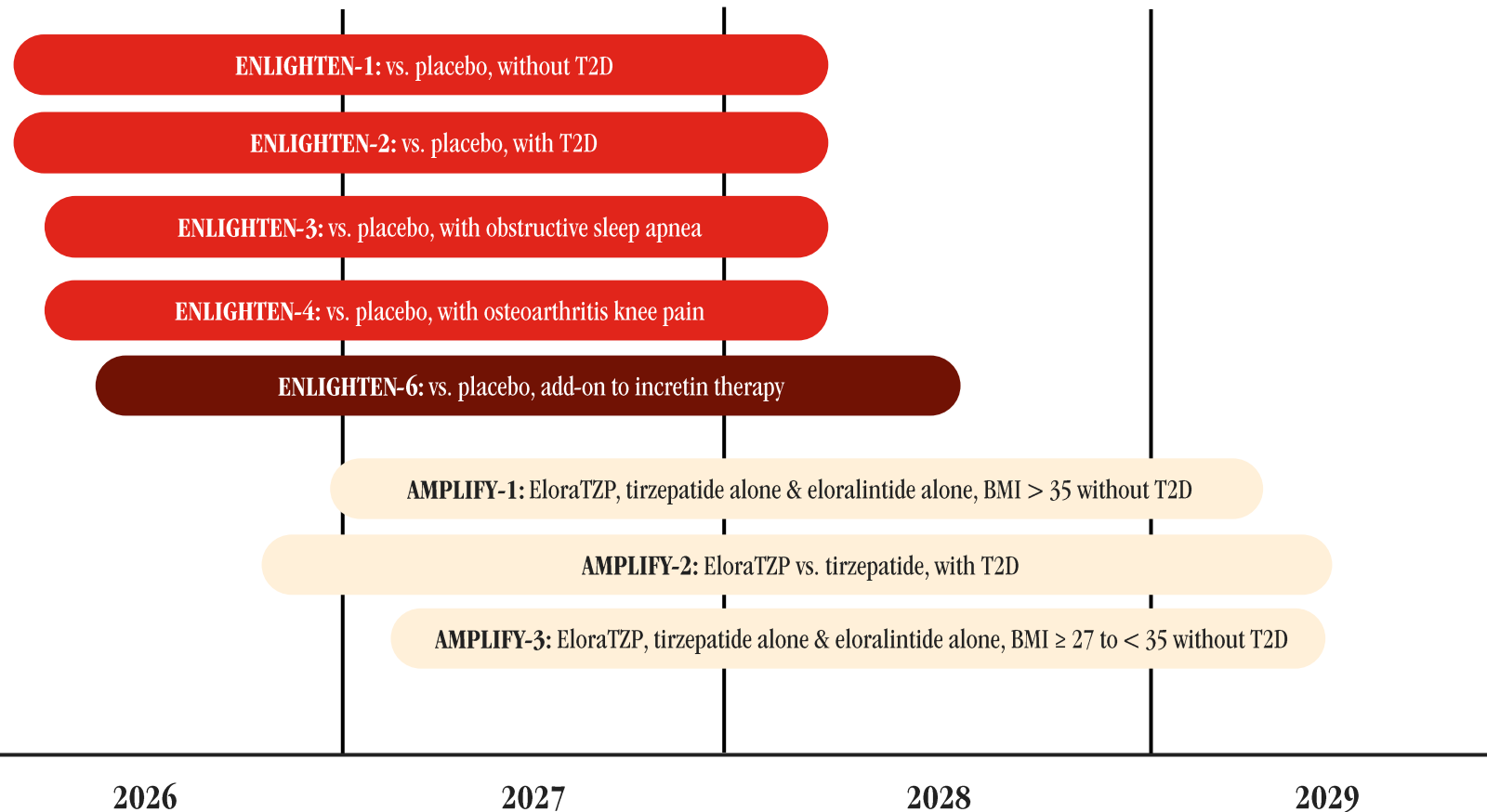
Treatment Emergent Adverse Events (%) ¹	Placebo	Eloralintide		EloraTZP		TZP
		1/3 mg	3/6/9 mg	1/3 mg +5 mg	3/6/9 mg +15 mg	15 mg
Nausea	11%	14%	16%	14%	49%	26%
Diarrhea	19%	24%	18%	19%	30%	23%
Constipation	8%	-	13%	22%	14%	20%
Fatigue	8%	5%	11%	17%	24%	14%
Decreased appetite	-	5%	8%	8%	24%	17%
Vomiting	6%	5%	-	3%	24%	11%
Discontinuation due to Adverse Events	17%	3%	-	11%	27%	3%

Eloralintide showed favorable GI tolerability

The types of AEs observed with EloraTZP are consistent with those in other incretin therapies

Eloralintide & EloraTZIP

Global Obesity Development Programs



Key Highlights:

Eloralintide is a unique non-incretin option with potential for favorable weight loss and tolerability

AMPLIFY Phase 3 program will initiate this year, evaluating EloraTZIP as a co-formulated product with an optimized dose escalation schedule

ENLIGHTEN and AMPLIFY trials are in a population with obesity or overweight with at least one obesity-related co-morbidity unless otherwise specified
Elora=eloralintide; TZIP=tirzepatide; T2D=type 2 diabetes;

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AND MOST PRESCRIBED
INCRETIN THERAPIES**



NOW

**AN EFFECTIVE ORAL
SMALL MOLECULE TO TREAT
OBESITY AT SCALE**



NEW FRONTIERS

**SELECTIVE AMYLIN,
TRIPLE AGONISM**

*Eloralintide, Retatrutide,
EloraTZP, & Next Generation Medicines*

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