Innovation in Women's Health & Prostate Cancer



J.P. Morgan Healthcare Conference January 2020



Forward-Looking Statements

This presentation contains forward-looking statements, including without limitation, statements related to: Myovant's focus on developing and commercializing innovative therapies for the treatment of women's health and endocrine diseases; Myovant's ability to advance the clinical development of relugolix through the LIBERTY, SPIRIT and HERO clinical trials and MVT-602 through its clinical trials; the timing and success of Myovant's regulatory filings and potential approvals; Myovant's business strategies, financial condition and trends, competitive position, potential growth opportunities, the effects of competition and expectations or probabilities for success. Forward-looking statements can be identified by "anticipate," "believe," "can," "continue," "could," "estimate," "expect," "intend," "likely," "may," "might," "objective," "ongoing," "plan," "potential," "predict," "project," "should," "to be," "will," "would," or the negative or plural of these words or other similar expressions or variations, although not all forward-looking statements contain these identifying words. Myovant cannot assure you that the events and circumstances reflected in the forward-looking statements will be achieved or occur and actual results could differ materially from those expressed or implied by these forward-looking statements. Forward-looking statements are subject to a number of risks, uncertainties, assumptions and other factors known and unknown that could cause actual results and the timing of certain events to differ materially from future results expressed or implied by the forward-looking statements. Factors that could cause or contribute to such differences include, but are not limited to, risks relating to those discussed in the section titled "Risk Factors" set forth in Part I, Item 1A of Myovant's Annual Report on Form 10-K filed with the United States Securities and Exchange Commission, or the SEC, on May 24, 2019, and other filings that Myovant makes with the SEC from time to time. These risks are not exhaustive. New risk factors emerge from time to time and it is not possible for its management to predict all risk factors, nor can Myovant assess the impact of all factors on its business or the extent to which any factor, or combination of factors, may cause actual results to differ materially from those contained in any forward-looking statements. These statements are inherently uncertain, and investors are cautioned not to unduly rely upon these statements. Except as required by law, Myovant undertakes no obligation to update any forward-looking statements to reflect events or circumstances after the date of such statements.



Improve the lives of millions of women and men, many impacted by diseases during their most productive years of life.



A Unique Investment Opportunity

2019

Positive Phase 3 Data:

- Uterine Fibroids
- Prostate Cancer

2020

Endometriosis:

Phase 3 Data

Uterine Fibroids:

- 1-Year Data
- NDA Submission
- MAA Submission

Prostate Cancer:

- NDA Submission
- Castration Resistance-Free Survival Data

~\$400M

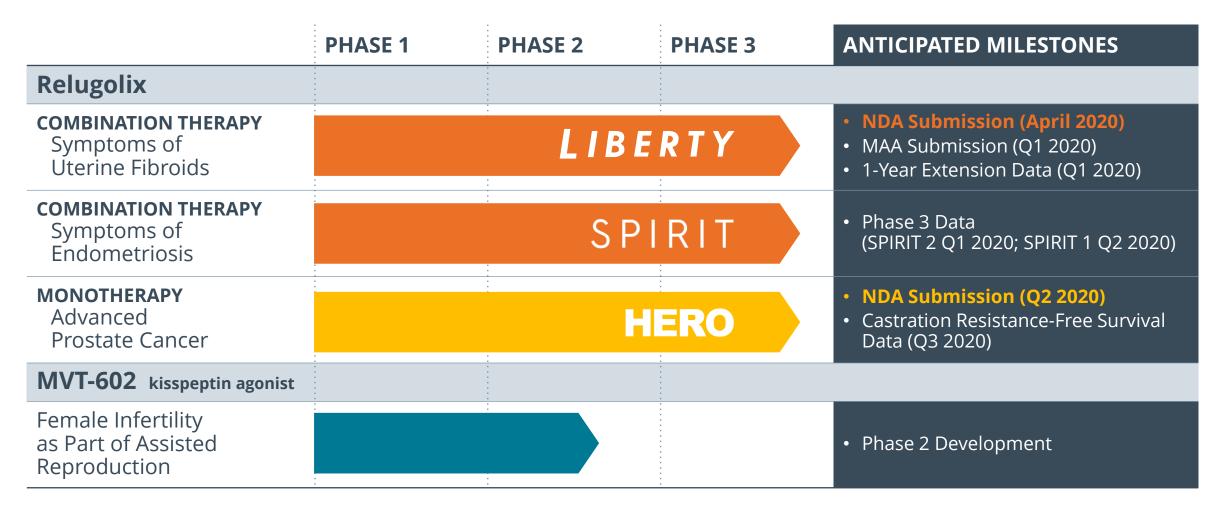
Cash and committed funding

RIGHTS

Wholly-owned U.S. and EU rights for all indications



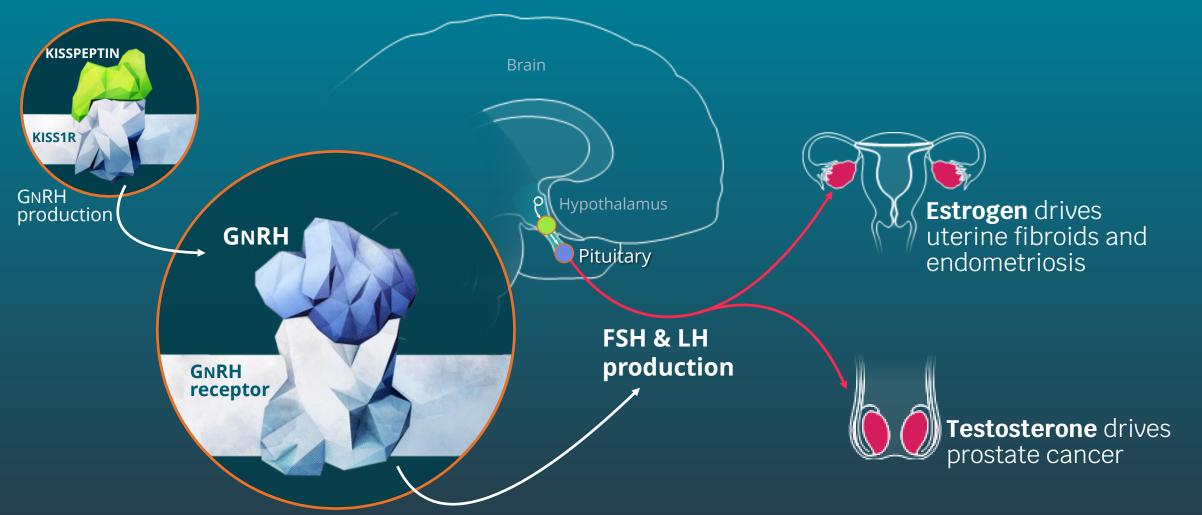
Myovant's Late-Stage Pipeline

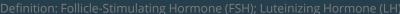


MAA = Marketing Authorisation Application for European Medicines Agency



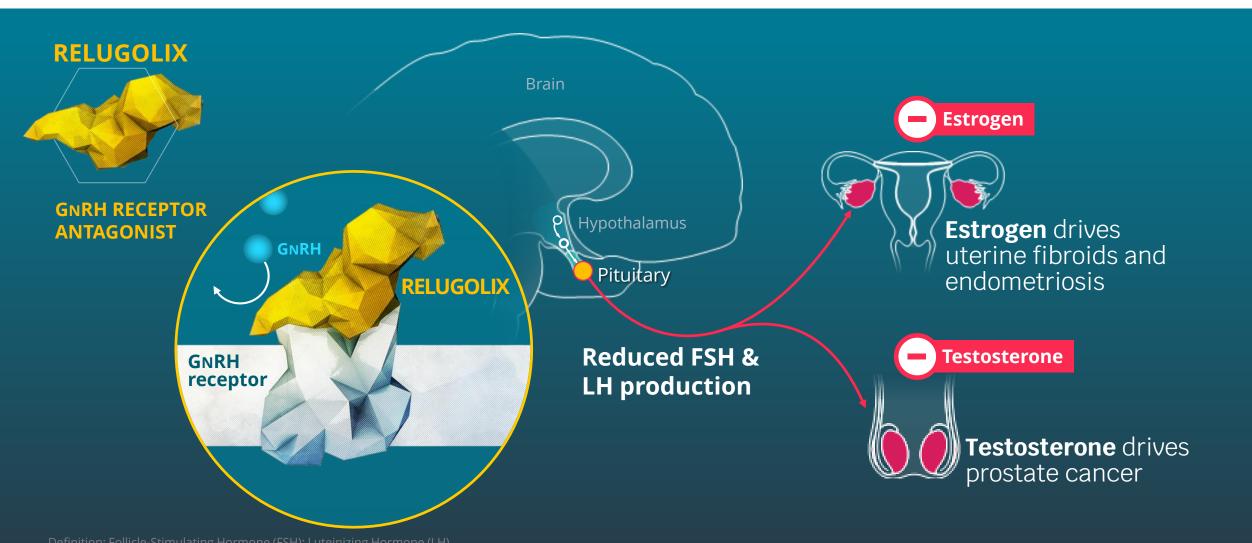
GnRH PathwayShared Across Women's Health and Prostate Cancer







Relugolix Mechanism of Action



One Pill, Once A Day

Two Distinct Therapeutic Candidates

WOMEN'S HEALTH



Relugolix 40 mg

- + estradiol 1.0 mg
- + norethindrone acetate 0.5 mg

RELUGOLIX COMBINATION TABLET

Designed for the treatment of women with symptomatic uterine fibroids or endometriosis as an alternative to surgery or other invasive procedures.

PROSTATE CANCER



Relugolix 120 mg (following single 360 mg loading dose)

RELUGOLIX MONOTHERAPY TABLET

Designed with the potential to be the first and only oral androgen deprivation therapy for men with advanced prostate cancer.





Millions of Control of

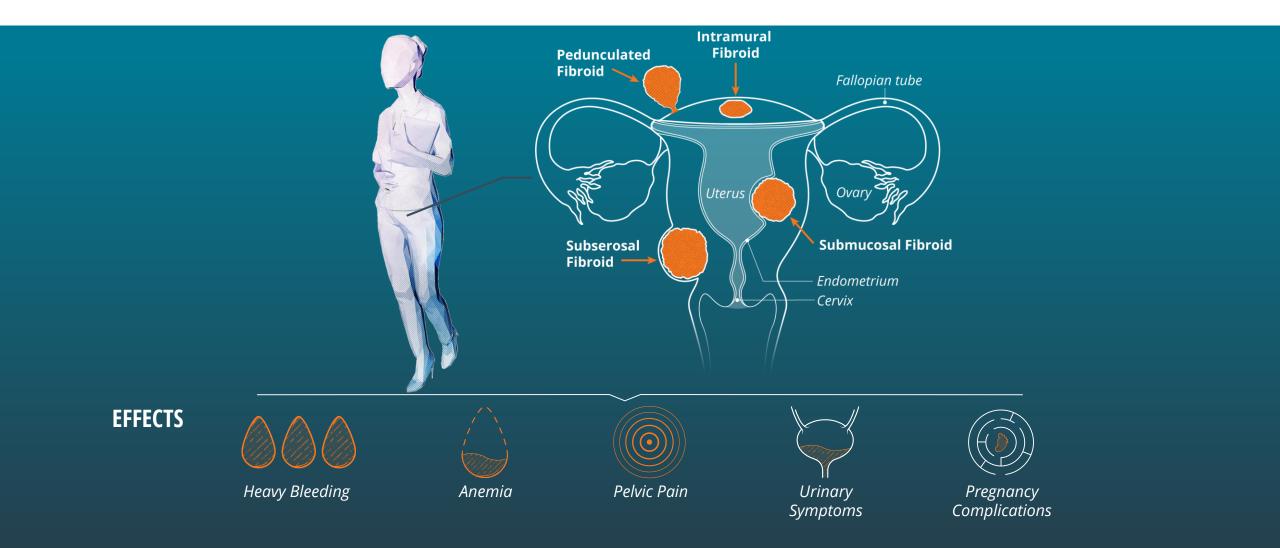
Women
In Need of Better
Medicines for
Uterine Fibroids

~250,000
hysterectomies
each year
in U.S.

>\$34B
per year
annual societal
cost

Stewart. NEJM. 2015; Stewart. Lancet. 2001 Majoribanks et al. Cochrane Database Syst. Rev. 2006. Cardozo et al. Am J Obstet Gynecol. 2012; Wright et al. Obstet Gynecol. 2013; Cohen et al. Obstet Gynecol. 2017.

Uterine Fibroids: A Common, Debilitating Disease





Millions of Women In Need of Better Medicines for Indometriosis

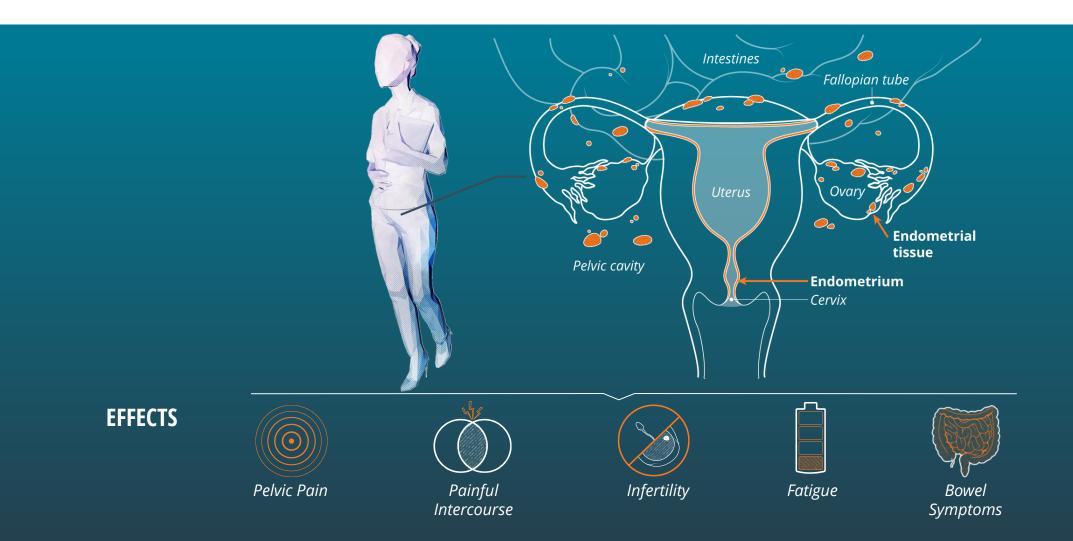
~6M women with symptoms in U.S.

~100,000
hysterectomies
each year
in U.S.

>\$70B
per year
annual societal
cost

Bulletti et al. J Assist Reprod Genet. 2010; Quaas et al. Fertil Steril. 2015; Simoens et al. Human Reproduction. 2012; Wright et al. Obstet Gynecol. 2013; Cohen et al. Obstet Gynecol. 2017.

Endometriosis: A Common, Debilitating Disease

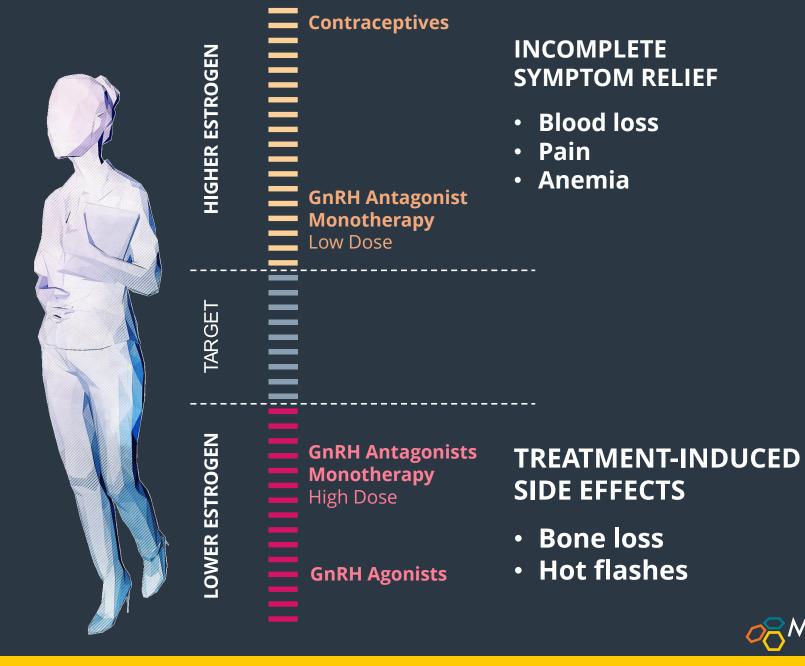




Despite the significant burden of uterine fibroids and endometriosis, women do not have the options they deserve and need.



A Clearly Defined Gap in Treatment in Uterine Fibroids and Endometriosis





Relugolix Combination Vision

Intentionally Designed to Fill Treatment Gap



HIGHER ESTROGEN

LOWER ESTROGEN

RELUGOLIX COMBINATION TABLET VISION

- Reduction in blood loss & pain
- · Well-tolerated with bone health maintained
- One pill, once a day



*Relugolix is an investigational drug that has not been FDA approved for use; these are aspirational statements

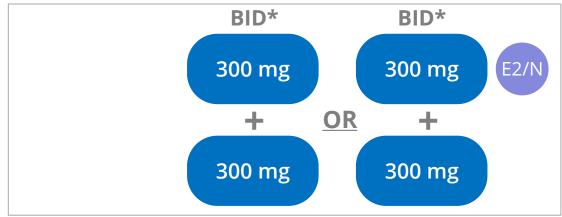
Relugolix Combination Tablet Vision: One Dose, Two Diseases

RELUGOLIX COMBINATION TABLET*

One pill, once a day

BID BID* 200 mg 200 mg E2/N QD OR OR 150 mg 200 mg 200 mg

OTHER



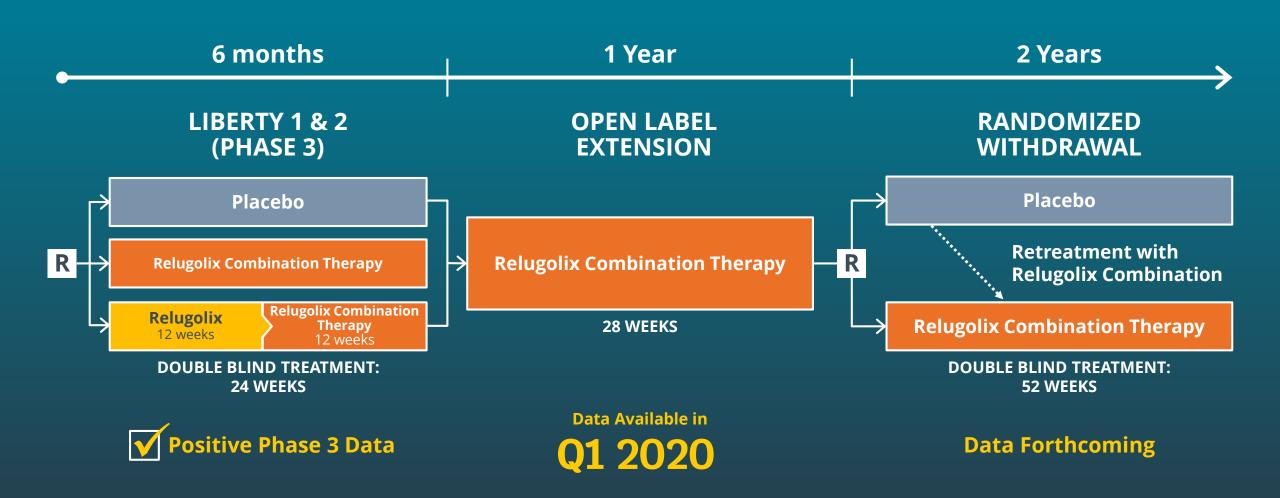
*In late-stage clinical development

ENDOMETRIOSIS

UTERINE FIBROIDS

Pills and tablets to scale (except 300 mg; size is unknown) E2/N = estradiol and norethindrone acetate

LIBERTY Development Program: Long-Term Data





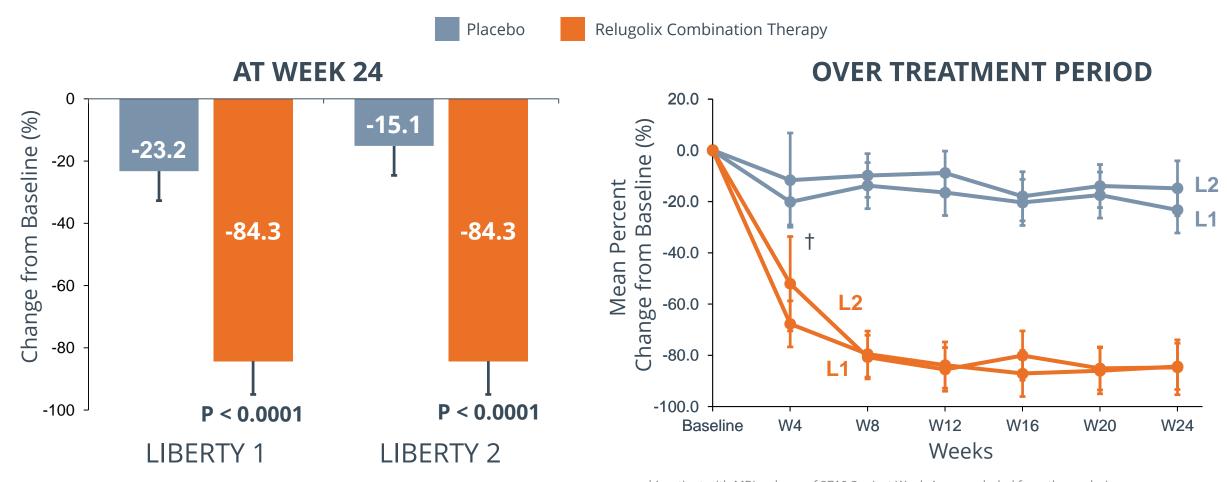
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Relugolix Combination: LIBERTY Clinical Data Insights

*Relugolix is an investigational drug that has not been FDA approved for use

- 84.3% Reduction in Menstrual Blood Loss
- **2** Reduction in Pain
- Bone Mineral Density
 Comparable to Placebo
- Well-Tolerated with Adverse Event Rates Comparable to Placebo
- 5 One Dose, Once a Day

Reduction in Menstrual Blood Loss Volume with Relugolix Combination Therapy

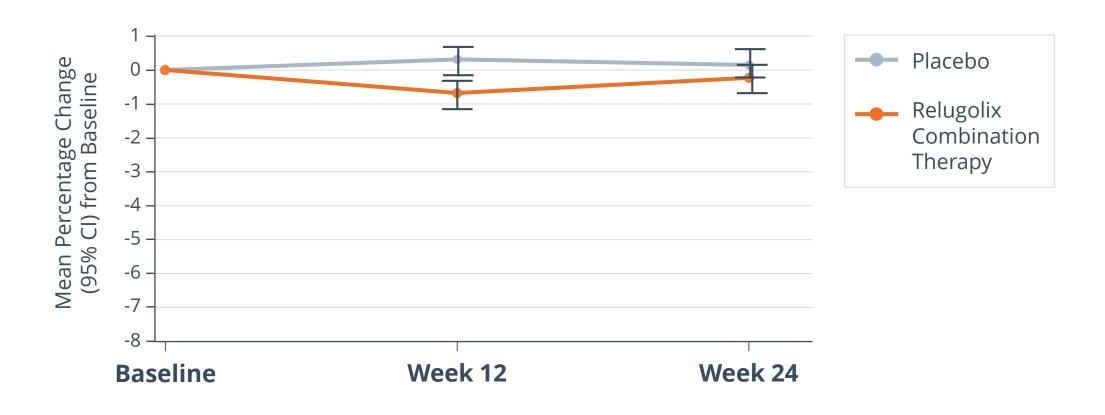


Data Presented at American Society for Reproductive Medicine (ASRM), October, 2019.

 \dagger A patient with MBL volume of 2710.3 mL at Week 4 was excluded from the analysis. L1 = LIBERTY 1; L2 = LIBERTY 2



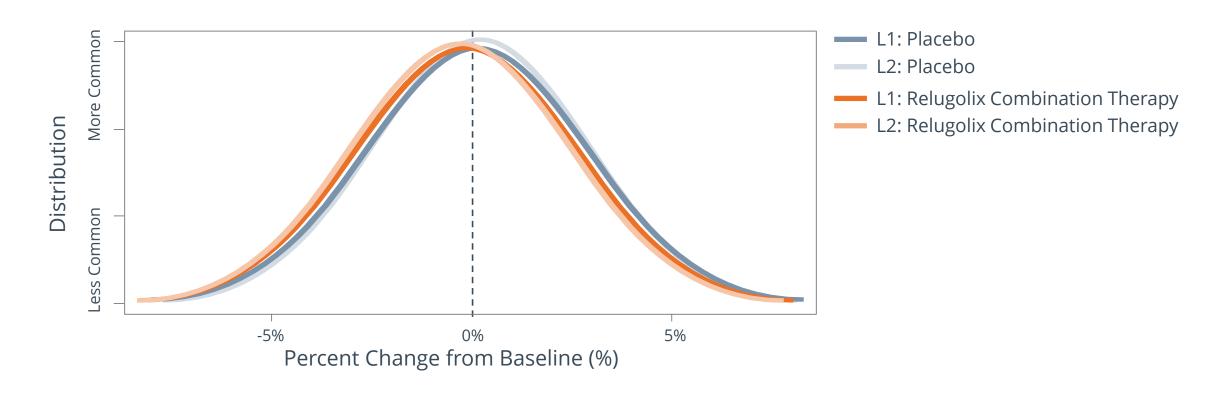
Bone Health Maintained Across LIBERTY Studies (Lumbar Spine)





Bone Mineral Density Distribution Comparable to Placebo in LIBERTY

Distribution of Change in Bone Mineral Density at Week 24 (Lumbar Spine)

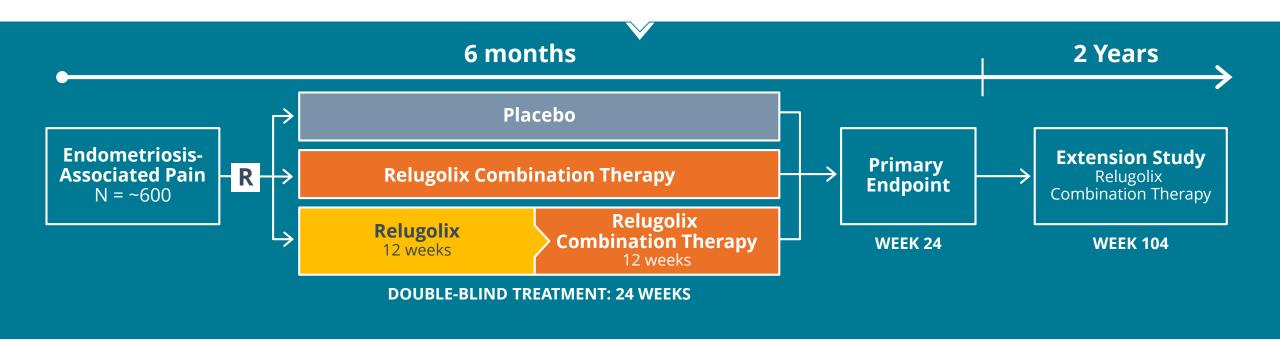




Endometriosis Phase 3 Results in Q1 and Q2 2020

CO-PRIMARY ENDPOINTS

Reduction in dysmenorrhea (painful periods) and non-menstrual pelvic pain as assessed using the Symptoms of Endometriosis Scale (a daily questionnaire for the assessment of endometriosisassociated pain) scored using the Numerical Rating Scale





23



The First and Only Oral GnRH Receptor Antagonist in Development for Prostate Cancer



Prostate
Cancer
the 2nd Most
Common Cancer
Affecting Men
Androgen Deprivation

Therapy (ADT) is the

Foundational Treatment

30% men with prostate cancer have cardiovascular disease

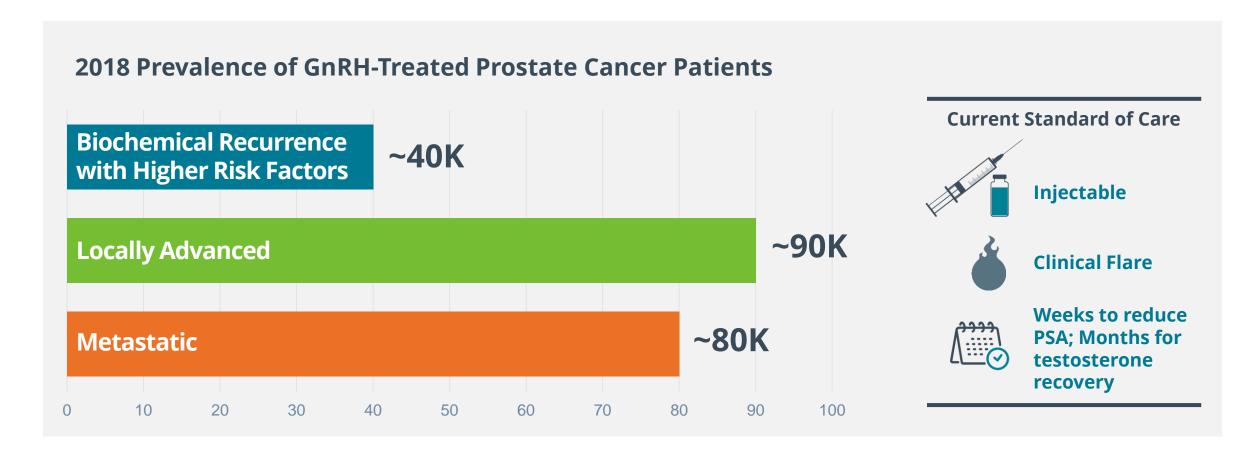
>200,000
men
treated
with ADT
each year

~3M men

diagnosed with prostate cancer alive in the U.S.

National Cancer Institute: PharmaPoint Prostate Cancer 2017; Litwin et al. *JAMA*, 2017; Sartor et al. NEJM, 2018. Datamonitor Prostate Cancer Forecast 2018. SEER 21 Database; American College of Surgeons National Cancer Database; Albertsen et al. *Eur Urol*. 2014.

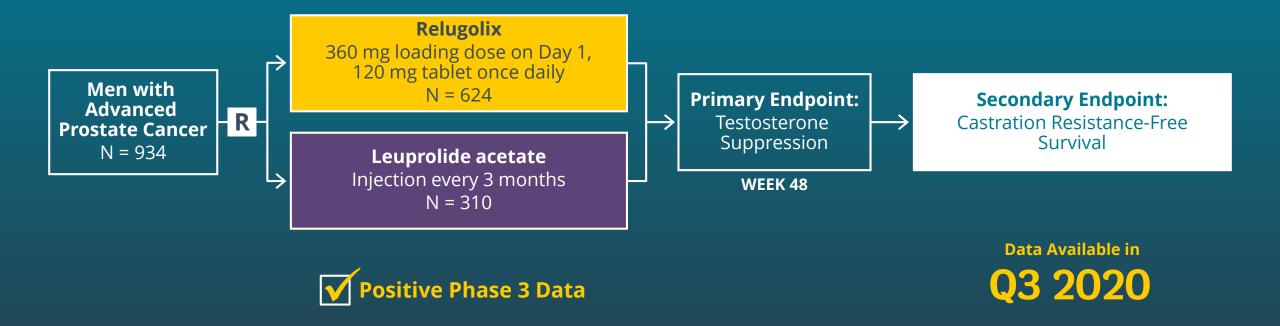
Relugolix Has Potential to Benefit Broad Spectrum of Men with Advanced Prostate Cancer







HERO: Phase 3 Study Design in Advanced Prostate Cancer





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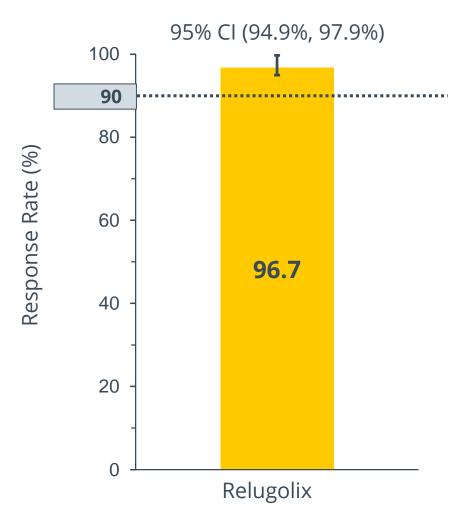
The Relugolix Difference:
HERO Clinical Data Insights

*Relugolix is an investigational drug that has not been FDA approved for use

- Testosterone Suppression Without Clinical Flare
- Testosterone Recovery Within 90 Days
- 50% Fewer Major Adverse Cardiovascular Events as Compared to Leuprolide
- 4 One Pill, Once A Day



Achieved U.S. Primary Endpoint



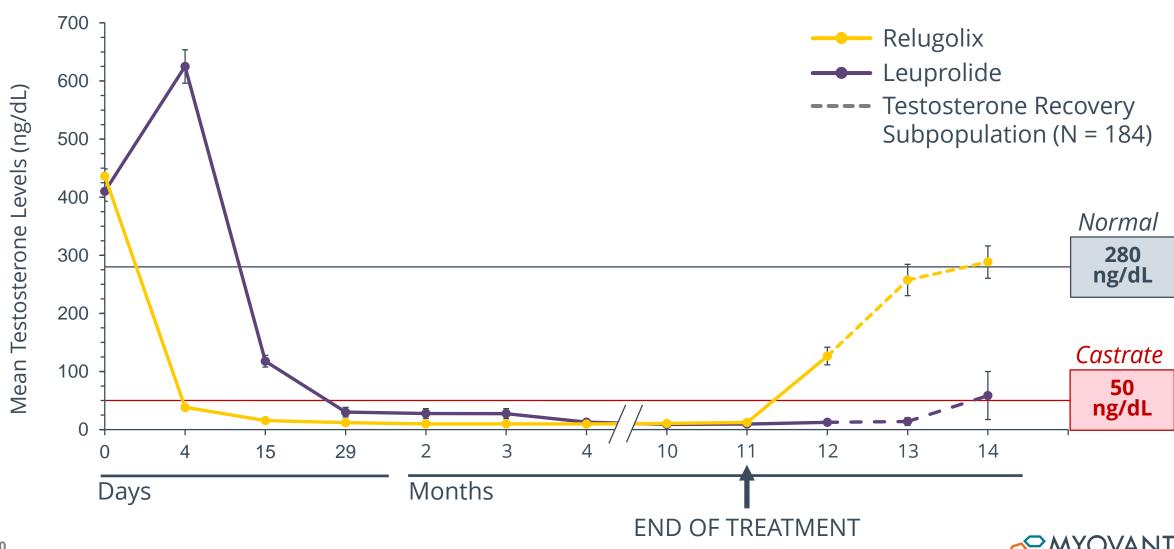
96.7% of men responded to treatment

Sustained testosterone suppression to castrate levels (< 50 ng/dl) with lower bound of 95% CI > 90%





Relugolix Achieved Faster Onset & Recovery than Leuprolide



Launch Readiness

- Hiring of Commercial and Medical Affairs Teams
- Advisory Boards and KOL Engagement
- Presentations and Publications
- Brand Strategies and Tactics
 - Building Commercial Operations and Medical Affairs Infrastructure



Focused and Efficient Field Team





Millions of women with uterine fibroids and endometriosis are treated primarily by ~36K OB/GYNs in the U.S.

Men with prostate cancer are primarily treated by ~18K Urologists and Oncologists in the U.S.



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