Jazz Pharmaceuticals

ZIIHERA®

(zanidatamab-hrii)

Launch Webcast

Innovating to Transform the Lives of Patients and Their Families

Intended for U.S. investor audiences only.

August 25, 2026

Transforming Lives. Redefining Possibilities.

Caution Concerning Forward-Looking Statements

This presentation contains forward-looking statements, including, but not limited to, statements related to: the company's advancement of pipeline programs and the timing of development activities, regulatory activities, approvals, and submissions related thereto; the potential for a near-term commercial launch of Ziihera in 1L HER2+ GEA in the U.S.; planned or anticipated clinical trial events, including with respect to initiations, enrollment and data read-outs, and the anticipated timing thereof; the company's development, regulatory and commercialization strategy; the company's expectations with respect to its regulatory submissions; the company's expectations with respect to its products and product candidates and the potential of the company's products and product candidates and the potential regulatory path related thereto, including Ziihera's potential to become the HER2-targeted therapy of choice in 1L HER2+ GEA, regardless of PD-L1 status and the potential of establishing Ziihera as the new standard of care in treating HER2+ GEA, regardless of PD-L1 status; the potential successful future development, manufacturing, regulatory and commercialization activities; the company's expectations with respect to its collaborations with third parties; the company's ability to realize the commercial potential of its products; the company's net product sales and goals for net product sales from new and acquired products; the company's views and expectations relating to its patent portfolio, including with respect to expected patent protection, as well as expectations with respect to exclusivity; the company's clinical trials confirming clinical benefit or enabling regulatory submissions; and other statements that are not historical facts. These forward-looking statements are based on the company's current plans, objectives, estimates, expectations and intentions and inherently involve significant risks and uncertainties.

Actual results and the timing of events could differ materially from those anticipated in such forward-looking statements as a result of these risks and uncertainties, which include, without limitation, risks and uncertainties associated with: effectively launching and commercializing the company's other products and product candidates, including Ziihera in 1L HER2+ GEA; the successful completion of development and regulatory activities with respect to the company's product candidates; obtaining and maintaining adequate coverage and reimbursement for the company's products; the time-consuming and uncertain regulatory approval process, including the risk that the company's current and/or planned regulatory submissions may not be submitted, accepted or approved by applicable regulatory authorities in a timely manner or at all; the costly and time-consuming pharmaceutical product development process and the uncertainty of clinical success, including risks related to failure or delays in successfully initiating or completing clinical trials and assessing patients; global economic, financial, and healthcare system disruptions and the current and potential future negative impacts to the company's business operations and financial results; protecting and enhancing the company's intellectual property rights and the company's commercial success being dependent upon the company obtaining, maintaining and defending intellectual property protection and exclusivity for its products and product candidates; delays or problems in the supply or manufacture of the company's products and product candidates, including due to geopolitical tensions and military conflicts; complying with applicable U.S. and non-U.S. regulatory requirements, including those governing the research, development, manufacturing and distribution of controlled substances; government investigations, legal proceedings and other actions; identifying and consummating corporate development transactions, financing these transactions and successfully integrating acquired products, product candidates and businesses; the company's ability to realize the anticipated benefits of its collaborations and license agreements with third parties; the sufficiency of the company's cash flows and capital resources; and other risks and uncertainties affecting the company, including those described from time to time under the caption "Risk Factors" and elsewhere in the company's Securities and Exchange Commission filings and reports, including the company's Annual Report on Form 10-K for the year ended December 31, 2025 and future filings and reports by the company. Other risks and uncertainties of which the company is not currently aware may also affect the company's forward-looking statements and may cause actual results and the timing of events to differ materially from those anticipated.

Agenda

Introduction and Overview
John Bluth
Head of Investor Relations

Ziihera: Clinical Overview
Robert Iannone, M.D., M.S.C.E.
Chief Medical Officer and Global Head of Research and Development

Ziihera: GEA Commercial Overview
Chumi Khurana
Oncology Franchise Head

Ziihera: Beyond GEA
Samantha Pearce
Chief Commercial Officer

Introduction and Overview

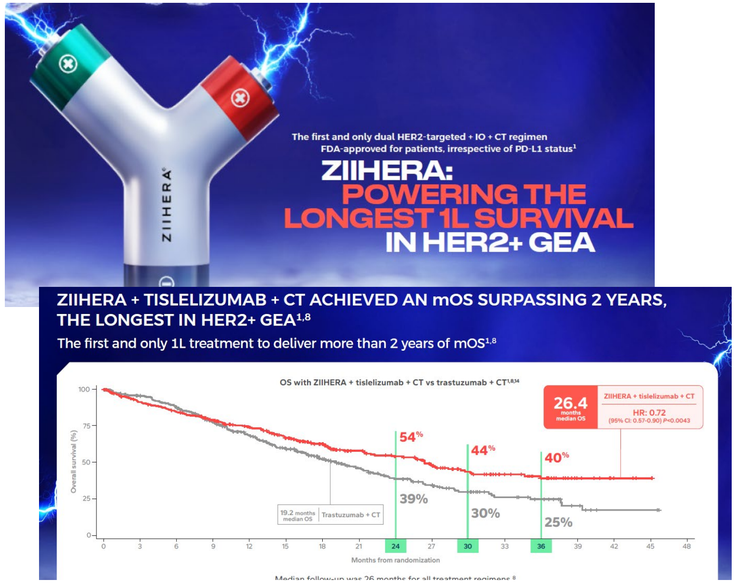
John Bluth
Head of Investor Relations

Jazz Pharmaceuticals

Now Commercially Available

ZIIHERA®
(zanidatamab-hrii)
50mg/ml Injection for IV

- First and only bispecific HER2-targeted antibody combined with a PD-1 inhibitor and chemotherapy approved for all HER2+ advanced GEA patients, regardless of PD-L1 status, establishing a new standard of care in first-line treatment
- Ziihera combinations exceeded two years of median OS, representing the longest survival outcomes ever reported in this setting
- PFS and OS benefits were consistent in patients with PD-L1-positive and PD-L1-negative disease



Ziihera full prescribing information contains a Boxed Warning for diarrhea and embryo-fetal toxicity. Additional safety information is provided later in this presentation and full prescribing information is available at https://ziihera.com/.

Clinical Overview

Robert Iannone, M.D., M.S.C.E.

Executive Vice President,
Global Head of Research and Development
and Chief Medical Officer

Jazz Pharmaceuticals

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Ziihera U.S. Label

Highlights of prescribing information

Indications and Usage	**Indicated for GEA:** • In combination with fluoropyrimidine- and platinum-containing chemotherapy, and tislelizumab-jsgr, as first-line treatment of adult patients with HER2-positive (IHC 3+ and IHC 2+/ISH+) unresectable locally advanced or metastatic gastric, gastroesophageal junction, or esophageal adenocarcinoma, as detected by an FDA-authorized test • In combination with fluoropyrimidine- and platinum-containing chemotherapy, as first-line treatment of adult patients with HER2-positive (IHC 3+) unresectable locally advanced or metastatic gastric, gastroesophageal junction, or esophageal adenocarcinoma, as detected by an FDA-authorized test
Dosage and Administration	• <70 kg: ZIIHERA 1,800 mg intravenously every 3 weeks or 1,200 mg every 2 weeks infusion in combination with fluoropyrimidine- and platinum-containing chemotherapy, with or without tislelizumab-jsgr • ≥70 kg: ZIIHERA 2,400 mg intravenously every 3 weeks or 1,600 mg every 2 weeks in combination with fluoropyrimidine- and platinum-containing chemotherapy, with or without tislelizumab-jsgr
Dosage Forms and Strengths	• For injection: 300 mg lyophilized powder in a single-dose vial
Contraindications	• None

Ziihera plus Tislelizumab and Chemo Show Superior Overall Survival

Data summary from USPI comparing Arm C and Arm A in patients with HER2 IHC 3+ and IHC 2+/ISH+

Efficacy Parameter	Arm C Ziihera with chemotherapy and tislelizumab N=302	Arm A Trastuzumab with chemotherapy N=308
Overall Survival		
Median, months (95% CI)	26.4 (21.5, 30.3)	19.2 (16.8, 21.8)
P-Value	0.0043	
Progression-free survival		
Median, months (95% CI)	12.4 (9.8, 18.5)	8.1 (7.0, 8.9)
P-Value	< 0.0001	
Objective Response Rate		
ORR (95% CI)	67% (61, 72)	63% (57, 68)
Complete Response Rate	20%	12%
Partial Response Rate	47%	50%
Duration of Response	N=202	N=193
Median in months (95% CI)	18.9 (12.1, 37.7)	8.3 (6.8, 10.1)

[a] Estimates per Kaplan-Meier method; CIs based on Brookmeyer and Crowley method with log-log transformation.
[b] Hazard ratio and 95% CIs were calculated in comparison with treatment arm Trastuzumab + Chemotherapy stratified by geographic region, HER2 status, and ECOG performance status.
[c] The p-values were calculated by stratified log-rank test.
[d] Two-sided 95% exact confidence interval using the Clopper-Pearson method.
CI=confidence interval

Ziihera and Chemo Show Superior Overall Survival

Data Summary from USPI comparing Arm B and Arm A in patients with HER2 IHC 3+

Efficacy Parameter	Arm B Ziihera with chemotherapy N=251	Arm A Trastuzumab with chemotherapy N=255
Overall Survival		
Median, months (95% CI)	25.5 (21.9, 30.3)	19.8 (16.2, 22.8)
Hazard Ratio (95% CI)	0.74 (0.58, 0.95)	
Progression-free survival		
Median, months (95% CI)	14.2 (11.7, 16.7)	7.6 (6.9, 8.5)
Hazard Ratio (95% CI)	0.55 (0.43, 0.69)	
Objective Response Rate		
ORR (95% CI)	71% (64, 76)	64% (57, 69)
Complete Response Rate	19%	12%
Partial Response Rate	51%	52%
Duration of Response	N=177	N=162
Median in months (95% CI)	16.9 (12.8, 25.3)	8.1 (6.5, 9.8)

[a] Estimates per Kaplan-Meier method; CIs based on Brookmeyer and Crowley method with log-log transformation.
[b] Hazard ratio and 95% CIs were calculated in comparison with treatment arm Trastuzumab + Chemotherapy stratified by geographic region, HER2 status, and ECOG performance status.
[c] Two-sided 95% exact confidence interval using the Clopper-Pearson method.
*Overall survival data was immature at the time of this analysis.

Ziihera U.S. Label

Highlights of prescribing information

Warnings and Precautions

Boxed Warning for Diarrhea and Embryo-Fetal Toxicity

- ZIIHERA, in combination with fluoropyrimidine- and platinum-containing chemotherapy with or without tislelizumab-jsgr, can cause severe diarrhea, including life threatening, and fatal cases. Use antidiarrheal prophylaxis during the first cycle when ZIIHERA is given in combination with these drugs. Manage with antidiarrheals and supportive measures as clinically indicated. Interrupt, reduce the dose or discontinue ZIIHERA based on severity. (2.4, 5.1, 8.5)
- Exposure to ZIIHERA during pregnancy can cause embryo-fetal harm. Advise patients of the risk and need for effective contraception. (5.2)

Warnings and Precautions

- Left Ventricular Dysfunction: Assess left ventricular ejection fraction (LVEF) prior to initiation of ZIIHERA and at regular intervals during treatment. Withhold or permanently discontinue ZIIHERA based on severity. (2.4, 5.3)
- Infusion-Related Reactions (IRRs): Premedicate before each infusion of ZIIHERA. Interrupt the infusion, decrease the infusion rate, and/or permanently discontinue ZIIHERA based on severity. (2.2, 2.4, 5.4)

Adverse Reactions

- Most common adverse reactions (≥ 20%) with ZIIHERA in combination with chemotherapy and tislelizumab-jsgr were diarrhea, nausea, decreased appetite, hypokalemia, vomiting, fatigue, peripheral neuropathy, rash and IRR. (6.1)
- Most common adverse reactions (≥ 20%) with ZIIHERA in combination with chemotherapy were diarrhea, nausea, vomiting, peripheral neuropathy, decreased appetite, fatigue, hypokalemia, IRR and rash. (6.1)

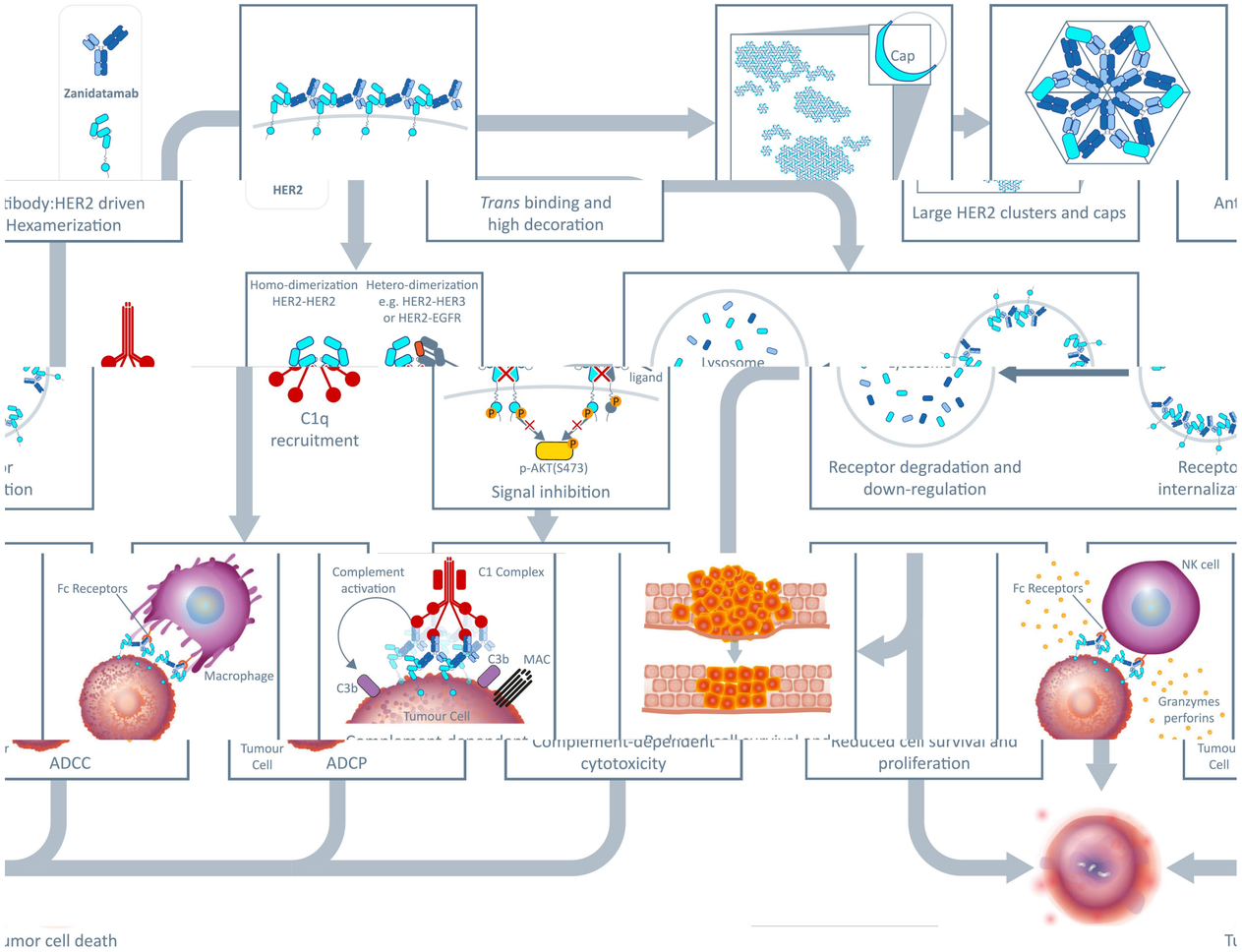
Use in Specific Populations

- Females and Males of Reproductive Potential: Verify the pregnancy status of females prior to initiation of ZIIHERA. (8.3)

Zanidatamab's Biparatopic Binding Drives Unique MOA and Clinical Activity

Zanidatamab simultaneously binds two non-overlapping extracellular domains of HER2 (biparatopic binding)

Unique geometry and binding properties result in multiple mechanisms of action



ADCC / ADCP = antibody-dependent cellular cytotoxicity / phagocytosis; C1q: complement component 1q protein complex; EGFR = epidermal growth factor receptor; Fc receptor = fragment crystallizable receptor; HER2 / 3 = human epidermal growth facto receptor 2 / 3; MOA = mechanism of action; NK cell = natural killer cell. Source: Weisser et al. Nat Commun. 2023;14(1):1394.

GEA Commercial Overview

Chumi Khurana
Senior Vice President, Oncology Franchise Head

Jazz Pharmaceuticals

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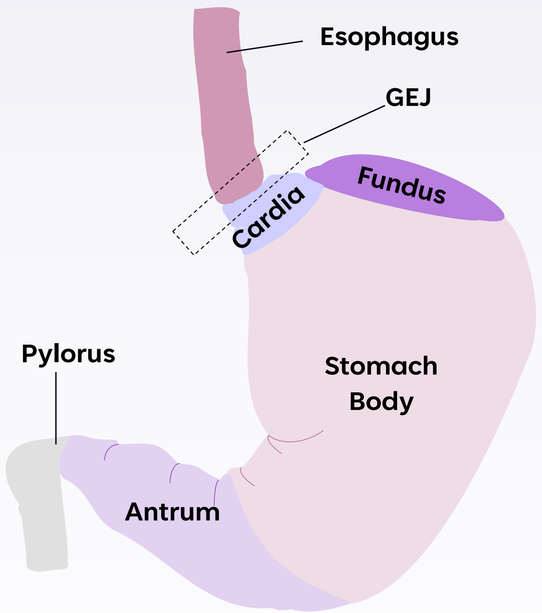
Unmet Need Remains In Gastroesophageal Adenocarcinoma (GEA)

ANATOMIC LOCATION OF GEA[1–2]



DISEASE OVERVIEW[1-8]

~8K
HER2+ GEA patient population

~3-4K
Ziihera treatable patient population

<10%
Five-year survival rate in mGEA

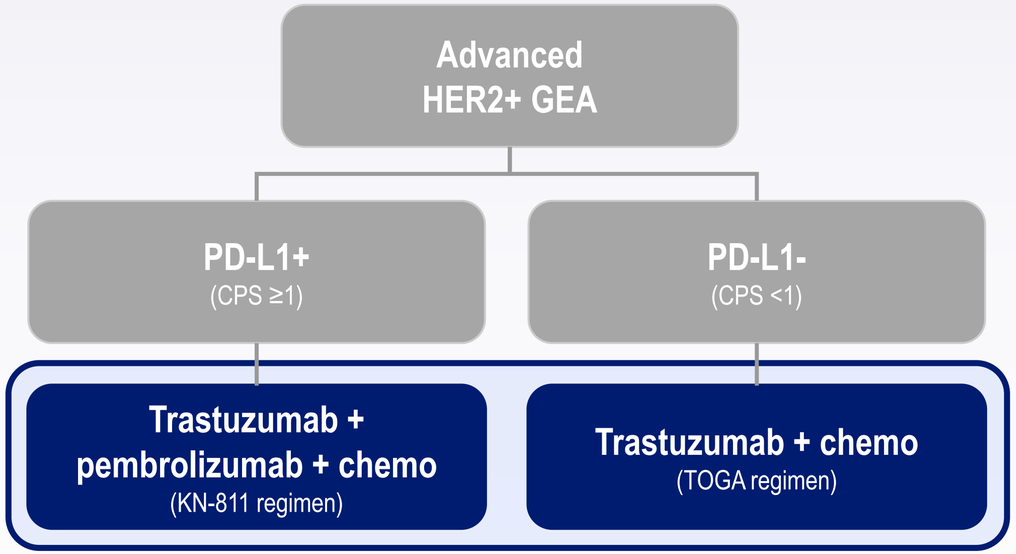
14-20 months
Median overall survival

1.American Cancer Society. About Stomach Cancer. https://www.cancer.org/content/dam/CRC/PDF/Public/8838.00.pdf (accessed Feb 5, 2026); 2. American Cancer Society. Esophageal Cancer. https://www.cancer.org/content/dam/CRC/PDF/Public/9751.00.pdf (accessed Feb 5, 2026); 3. National Cancer Institute. Cancer Stat Facts: Esophageal Cancer. https://seer.cancer.gov/statfacts/html/esoph.html (accessed Feb 5, 2026); 4. National Cancer Institute. Cancer Stat Facts: Stomach Cancer. https://seer.cancer.gov/statfacts/html/stomach.html (accessed Feb 5, 2026); 5. Van Cutsem E, et al. *Gastric Cancer.* 2015;18:476–484; 6. Abrahao-Machado LF, Scapulatempo-Neto C. *World J Gastroenterol.* 2016;22:4619–4625; 7. Bartley AN, et al. *Arch Pathol Lab Med.* 2016;140:1345–1363. 8. American Cancer Society. Stomach Cancer Early Detection, Diagnosis, and Staging. https://www.cancer.org/cancer/types/stomach-cancer/detection-diagnosis-staging.html (accessed Aug 20, 2026).

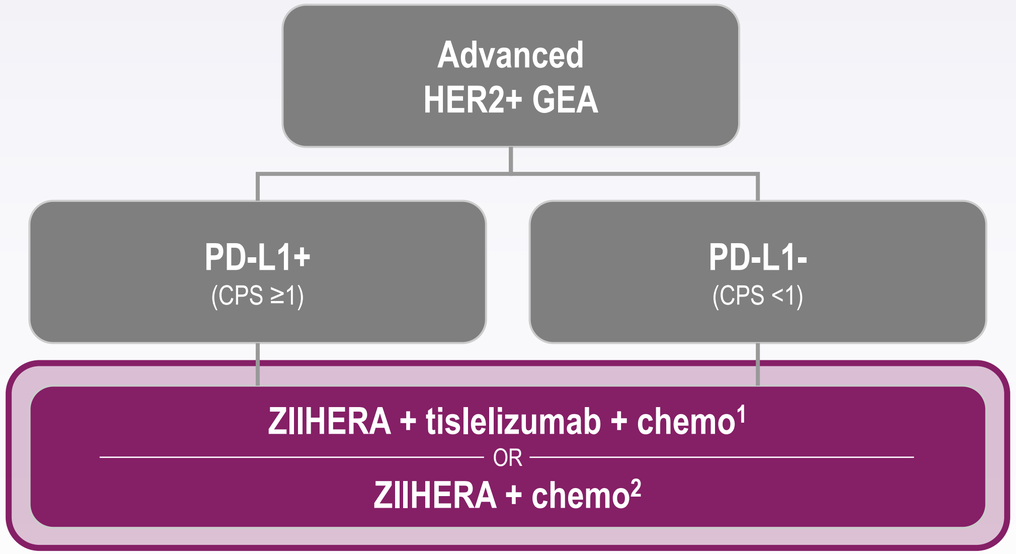
New Standard[1] of Care in 1L HER2+ GEA

Ziihera = New Standard of Care for 1L HER2+ mGEA Regardless of PD-L1 Status

PRIOR STANDARD OF CARE



NEW STANDARD OF CARE



GOAL:

Establish Ziihera as the **HER2-targeted agent of choice** for 1L HER2+ mGEA patients, regardless of PD-L1 status

[1]In combination with fluoropyrimidine- and platinum-containing chemotherapy, and **tislelizumab**, as first-line treatment of adult patients with HER2-positive (IHC 3+ and IHC 2+/ISH+) unresectable locally advanced or metastatic gastric, gastroesophageal junction, or esophageal adenocarcinoma; [2]In combination with fluoropyrimidine- and platinum-containing chemotherapy, as first-line treatment of adult patients with HER2-positive (IHC 3+) unresectable locally advanced or metastatic gastric, gastroesophageal junction, or esophageal adenocarcinoma

Ready for GEA Launch

Goal: Establish Ziihera as HER2-Targeted Agent of Choice in 1L HER2+ GEA

1. Clinical Education & Differentiation

Establishing the new Standard of Care: Ziihera + tislelizumab as foundational backbone for 1L HER2+ mGEA, **independent of PD-L1 status**

2. Accelerated Market Access

Leveraging immediate reimbursement: Utilize established, permanent J-code eliminating barriers to launch and driving rapid formulary adoption

3. Commercial & Field Execution

Day-one mobilization: cross-functional teams **prepared to launch immediately upon FDA approval**; capitalize on significant account overlap with Ziihera in BTC and Zepzelca in SCLC

4. Seamless Patient Experience

Frictionless onboarding: Activating comprehensive **JazzCares support services**; ensure zero barriers to patient access

Strategic Investment in Educating Nurses & Patients Will Accelerate GEA Adoption and Adherence, Helping Patients Start and Stay on Ziihera

Objectives

Build HCP Confidence to Prescribe and Persist

Improve Early Patient Experience

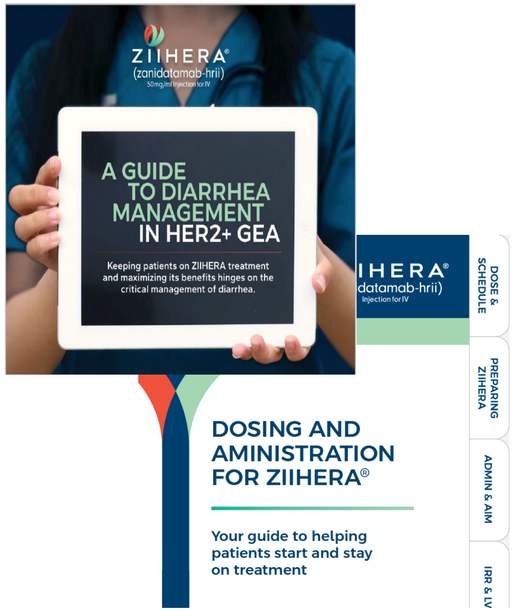
Support Long-Term Adherence

Patient Education Resources

- Patient Starter Kit – containing loperamide samples
- Patient Brochure
- Patient CRM Emails

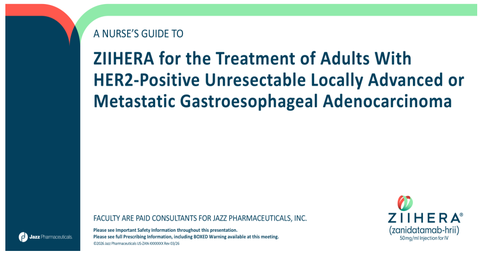
Nurse Education Resources

- Dosing & Administration Guide
- Diarrhea Management Guide
- Nurse Speakers Bureau



Clinical Educator Team

- ***NEW for GEA Launch:*** Oncology Certified Nurses providing peer to peer proactive education



CRM: customer relationship management; HCP: healthcare provider

Beyond GEA

Samantha Pearce

Executive Vice President,
Chief Commercial Officer

Jazz Pharmaceuticals

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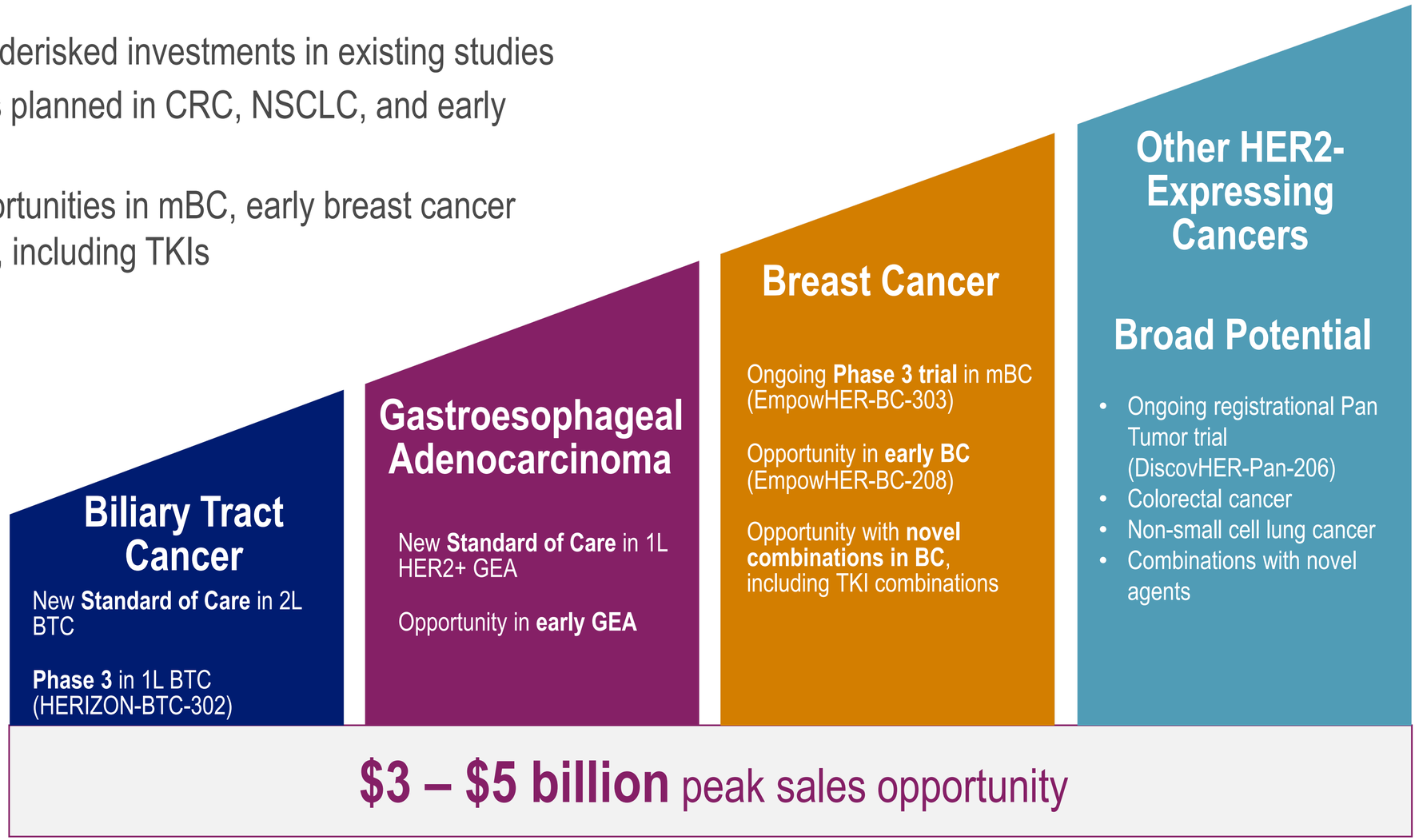
Robust Ongoing Zanidatamab Development Program

	PHASE 1	PHASE 2	PHASE 3	RECENT / UPCOMING MILESTONES
1L GEA (HERIZON-GEA-01)				**Now Approved**
1L BTC (HERIZON-BTC-302)				1L BTC confirmatory trial
Metastatic breast cancer (mBC) patients post T-DXd (EmpowHER-BC-303)				Anticipate **top-line data** late 2027 / early 2028
Pivotal trial for HER2+ solid tumors (DiscovHER-Pan-206)				Pivotal trial supporting potential pan-tumor indication
Neoadjuvant and adjuvant BC (EmpowHER-BC-208)				Early breast cancer trial
Neoadjuvant treatment of locally advanced BC (I-SPY2)				Collaborative I-SPY2 trial for early breast cancer
Open-label trial in early-stage, low-risk, HER2+ breast cancer				Collaborative trial with MD Anderson Cancer Center for early breast cancer
Paclitaxel and ramucirumab combination in HER2+ advanced GEA				Collaborative trial with Canadian Cancer Trials Group for GEA
Pembrolizumab and chemotherapy combination in HER2+ GEA				Collaborative ZANGEA trial for 1L GEA in combination with pembrolizumab
Neoadjuvant /adjuvant HER2+ GEA (AACR-ADOPT-GEA)				Platform trial assessing potential of organ sparing for zanidatamab combinations
Phase 1/1b I-SPY in breast cancer				Collaborative Pre I-SPY trial for breast cancer in combination with tucatinib
Zongertinib combination				Collaborative trial with Boehringer Ingelheim's novel HER2 TKI
IAM1363 combination				Collaborative trial with Iambic's brain-penetrant HER2 small-molecule TKI

Zanidatamab: Updated Peak Sales Opportunity of $3-$5B

Drivers of Peak Sales Increase:

- Approvals in BTC and GEA, derisked investments in existing studies
- Additional registrational trials planned in CRC, NSCLC, and early gastric cancer
- Additional registrational opportunities in mBC, early breast cancer and with novel combinations, including TKIs



Closing Remarks

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Ziihera Poised for Significant Growth

2026
Commercial Launch

- GEA launched on 25 August 2026
- Product available for supply to treatment centers/physicians
- Focus on establishing Ziihera as treatment of choice in HER2+ 1L GEA

2027 and Beyond
Robust Development Program

- **Initiate CRC and NSCLC Phase 3 trials**
- **Continue to broaden development program in Breast Cancer**
- **Expect EmpowHER-BC-303 trial top-line readout late 2027 / early 2028**
- **Continued investment in additional registrational opportunities**

$3 – $5 billion peak sales opportunity

Q&A

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Thank You

… to the numerous patients and their families who participated in our clinical development program.

… to the clinical investigators, physicians, nurses, site coordinators, and countless support staff.

… to the Jazz and BeOne teams continuously working to deliver this important medicine to patients.