

The background features a complex network diagram with white and blue nodes connected by thin lines, set against a dark blue gradient. A white circle is visible in the top right corner, and a white horizontal line with a small gap is in the top left.

argenx

The Next Chapter

JP MORGAN HEALTHCARE CONFERENCE
JANUARY 8, 2024

The argenx logo is centered within a white rounded rectangle. It consists of the word "argenx" in a lowercase, sans-serif font, followed by a green icon of a heart with a white checkmark inside.

argenx 

Forward Looking Statements

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The financial results presented in this presentation are preliminary, estimated, and unaudited. They are subject to the completion and finalization of argenx’s financial and accounting closing procedures. They reflect management’s estimates based solely upon information available to management as of the date of this presentation. Further information learned during that completion and finalization may alter the final results. In addition, the preliminary estimates should not be viewed as a substitute for full quarterly and annual financial statements prepared in accordance with IFRS. There is a possibility that argenx’s financial results for the quarter ended December 31, 2023, and full year financial results for 2023 could vary materially from these preliminary estimates. In addition to the completion of the financial closing procedures, factors that could cause actual results to differ from those described above are set forth below. Accordingly, you should not place undue reliance upon this preliminary information.

Additional information regarding the Company’s fourth quarter 2023 financial results and full year financial results for 2023 will be available in the Company’s annual report and Form 20-F, which will be filed with the Netherlands Authority for the Financial Markets and U.S. Securities and Exchange Commission (the “SEC”), respectively.

These forward-looking statements can be identified by the use of forward-looking terminology, including the terms “plans,” “aims,” “believes,” “continues,” “hope,” “estimates,” “preliminary,” “anticipates,” “expects,” “intends,” “may,” “will,” “should,” or “commitment” and include statements argenx makes concerning its preliminary financial results for the full year 2023; its expansion efforts, including reaching more patients with VYVGART within the MG treatment paradigm, through geographic expansion and into new autoimmune indications, expanding into CIDP, and the anticipated development of empasiprubarb and ARGX-119; the anticipated timing of its launch of SC efgartigimod for CIDP in the U.S.; the initiation, timing, progress and results of its anticipated clinical development, data readouts and regulatory milestones and plans; its strategic priorities, including the timing and outcome of regulatory filings and regulatory approvals; its expectations of future profitability; the potential for innovation of its clinical programs; its pipeline; and the nomination of new development candidates. By their nature, forward-looking statements involve risks and uncertainties and readers are cautioned that any such forward-looking statements are not guarantees of future performance. argenx’s actual results may differ materially from those predicted by the forward-looking statements as a result of various important factors, including but not limited to argenx’s ability to successfully execute its business and growth strategies, the inherent uncertainties associated with development of novel drug therapies, preclinical and clinical trial and product development activities and regulatory approval requirements, the ability of our clinical trials to reach their endpoints, the ability to maintain, expand, and deliver on our pipeline; the acceptance of our products and product candidates by our patients as safe, effective and cost-effective, volatile market conditions, and the impact of governmental laws and regulations on our business. A further list and description of these risks, uncertainties and other risks can be found in argenx’s U.S. Securities and Exchange Commission (SEC) filings and reports, including in argenx’s most recent annual report on Form 20-F filed with the SEC as well as subsequent filings and reports filed by argenx with the SEC. Given these uncertainties, the reader is advised not to place any undue reliance on such forward-looking statements. These forward-looking statements speak only as of the date of publication of this document. argenx undertakes no obligation to publicly update or revise the information in this presentation, including any forward-looking statements, except as may be required by law.

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On a Journey to Transform Autoimmunity

CD70 + IL22R + GARP + FcRn + C2 + MuSK...

Pioneering
novel target
biology

Leading
antibody
engineering
capabilities

Pipeline-in-
a-product
opportunities

Creating optionality across and within molecules



**We are Hearing
Transformational
Stories with VYVGART**

Mike, VYVGART Patient

Our Innovation Horizons

Immunology Innovation Program

ARGX-109
(Anti-IL-6)

ARGX-213
(Anti-FcRn)

ARGX-121

ARGX-220

Pipeline

Empasiprubart

POC established in MMN
Trials in DGF and DM

ARGX-119

Phase 1b/2a trials in
CMS and ALS

VYVGART Opportunity

VYVGART[®]
(efgartigimod alfa-fcab)
Injection for Intravenous Use
400 mg/20 mL vial

VYVGART[®] Hytrulo

(efgartigimod alfa and
hyaluronidase-qvfc)
Subcutaneous Injection
180 mg/mL and 2000 U/mL vial

\$1.2B in gMG revenue in 2023



CIDP sBLA submitted

ITP MAA filed

15 indications
in development by 2025

PFS in development

VYVGART Opportunity Horizon

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Leadership in FcRn

Pioneering
FcRn

Generating key
learnings

Unique
modulation
of FcRn

Fc fragment and proprietary
ABDEG™ mutations

15 indications
by 2025*

Transformational data
in gMG and CIDP

THE LANCET
Neurology

frontiers
in Immunology

JCI



cells

nature
COMMUNICATIONS

BJD

VYVGART is Setting New Expectations in gMG

45% MSE

QoL comparable
to healthy
population*

78%

MG-ADL ≤ 4 **

**Meaningful
steroid
tapering** by
at least
5mg/day
within first
6 months

My VYVGART® *Path*

Enables
significantly
faster
access to
treatment

**Superior
cost/benefit
over IVIg*****

VYVGART®

* Real world evidence

**Source: ADAPT and ADAPT+ clinical trial data

***Leading Health Technology Assessment agency

**Estimated 4,000 patient years of safety follow-up
between clinical trial and real-world experience**

Strong Commercial Execution

2023 Performance



GROWTH

\$1.2B*

Global Product Revenue

21% 2023 CAGR



EARLIER LINE PATIENTS

>6,000**

Global VYVGART Patients

55% patients from orals



PRESCRIBER EXPANSION

>2,300**

Prescribers in the US

25% YoY increase



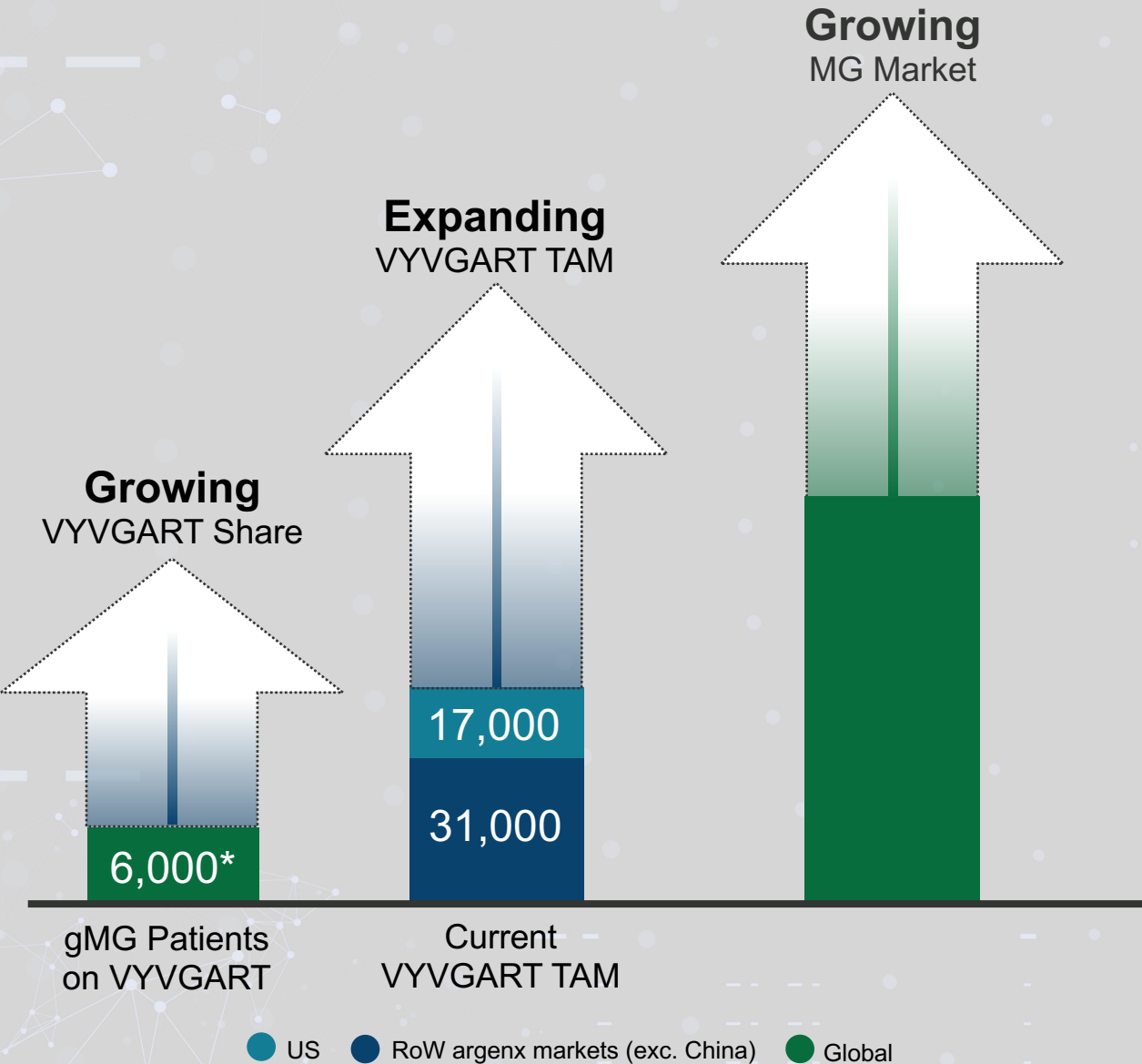
BROAD PATIENT ACCESS

~90%

Access VYVGART after ≤2 Orals

Favorable payor policies

Innovation Builds Autoimmune Market Opportunities



Growing VYVGART share

US: VYVGART Hytrulo J-Code in effect; field force expansion

PFS development

Addition to China NRDL

Expanding VYVGART TAM

Label-enabling trials in broader gMG populations

Phase 3b studies and externally sponsored research

Geographic expansion, including South Korea and Australia

Growing MG market

Targeted biologics are expanding gMG market by providing patients more treatment options

VYVGART Has Potential to Transform CIDP

Stage A

ESTABLISHED CIDP AS IgG MEDIATED

67%

Response rate demonstrates IgG autoantibodies play significant role in underlying CIDP biology

SIGNIFICANT IMPACT ON CIDP PATIENTS

99%

Study Compliance

99%

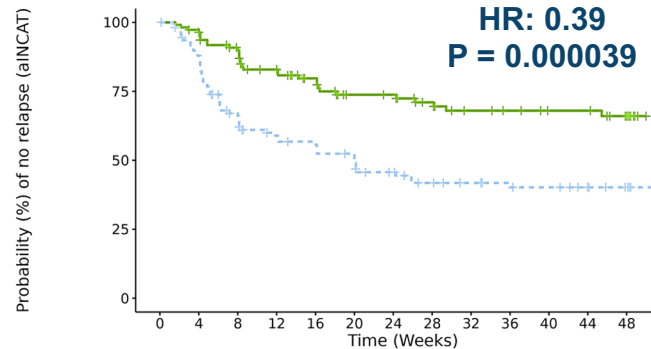
Rollover of eligible patients to open-label extension

Favorable safety and tolerability profile consistent with previous clinical trials

Stage B

SET NEW STANDARD FOR HOW CIDP TRIALS ARE RUN

61%
reduced risk of relapse



	# patients at risk												
	0	4	8	12	16	20	24	28	32	36	40	44	48
Vyvgart Hytrulo	111	107	93	80	68	56	55	48	42	40	36	36	28
Placebo	110	94	67	55	51	47	38	31	28	26	24	21	16

sBLA submitted with priority review voucher

We Aim to Address the Unseen Suffering in CIDP

A man with grey hair, wearing a dark quilted vest over a light-colored long-sleeved shirt and blue trousers, sits on a wooden bench in a park. He is leaning on a cane with both hands and looking off to the side with a thoughtful expression. The background shows a path, some greenery, and a warm, reddish-brown sky.

≤20% of patients achieve remission on current SOC
(CDAS=2)*

>50% of patients are dissatisfied with their symptom
burden**

>42K treated CIDP patients in US & ROW argenx markets
(ex-China)***

* Gorson KC, et al. 2010

** Mendoza M, et al. 2023

*** argenx market research

Transforming the Patient Treatment Experience

VYVGART® Hytrulo
Approved June 2023

Pre-filled Syringe
Ongoing in clinical trials

Autoinjector
Industrialization phase



**Exclusive
FcRn license
to ENHANZE®**

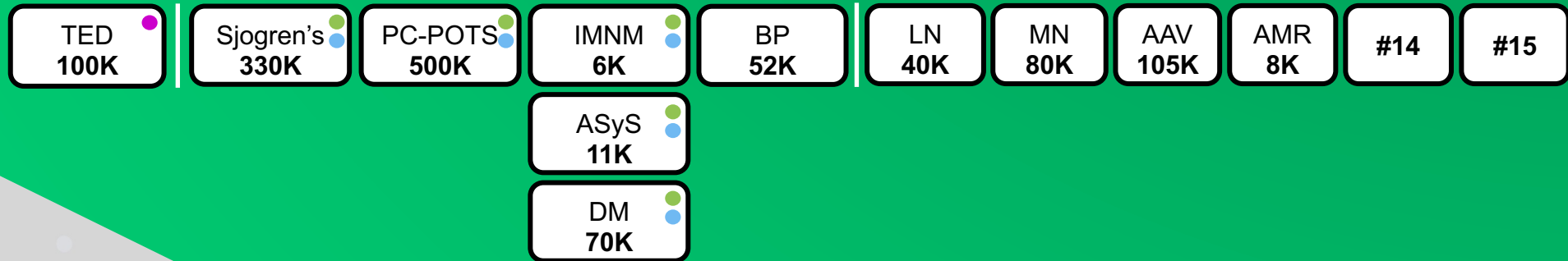
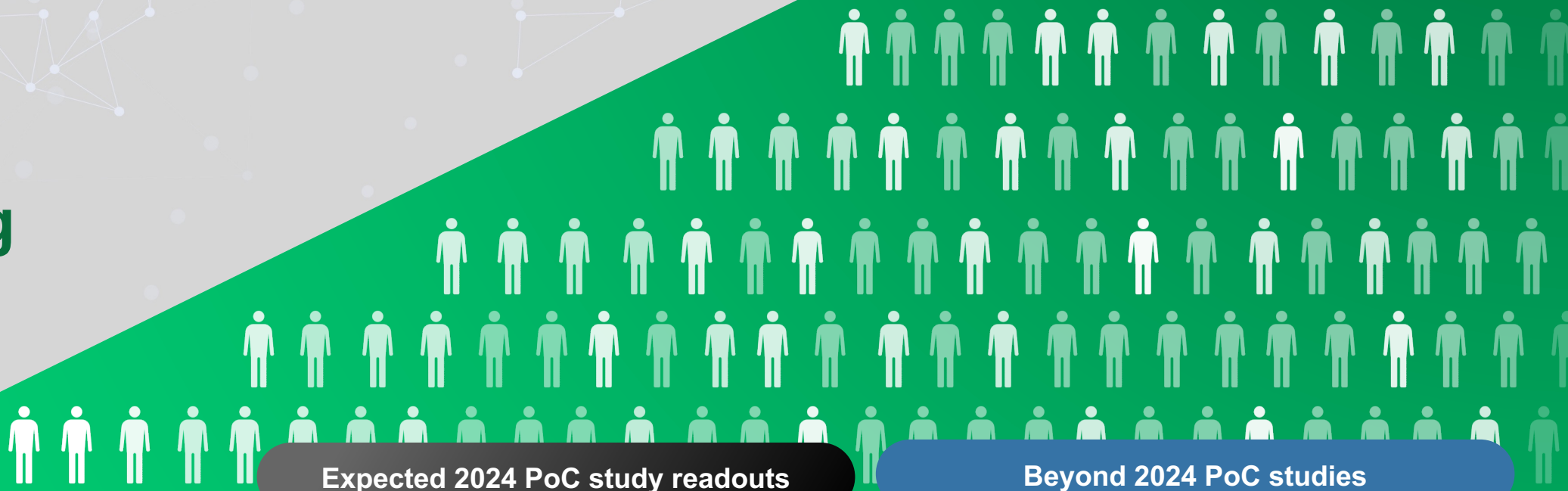
**Single 30-90s injection
HCP administered**

**Increasingly convenient delivery
Preparing for self-administration**

**High concentration formulation with low viscosity, no
back pressure**



This is Just the Beginning



Generalized Myasthenia Gravis

Chronic Inflammatory Demyelinating Polyneuropathy

ITP

Launched 2022

Anticipated approval 2024

Japan submission in review

65K

24K

17K

- Phase 2 Proof of Concept
- Potential 2024 Phase 3 Start
- 2024 Phase 3 Start

*** argenx market research; US prevalence numbers (except Japan ITP)

Phase 2 Readouts Present Significant Commercial Opportunities

Sjogren's Syndrome

BIOLOGIC RATIONALE

- Anti-Ro/Anti-La AutoAbs
- Passive transfer model evidence
- IgG reduction associated with improvement

CLINICAL FEASIBILITY

RCT - Phase 2
CRESS/ESSDAI

U.S. COMMERCIAL OPPORTUNITY



- Steroids/NSiSTs
- Cholinergic agonists
- Artificial tears

330K



PC-POTS

- Anti-adrenergic receptor AutoAbs
- IVIG/PLEX effective

RCT - Phase 2
MaPS/COMPASS



- No approved therapies

500K



Myositis (IMNM, ASyS, DM)

- Myositis AutoAbs
- Passive transfer model evidence (IMNM)
- AutoAb titer correlates with disease activity

RCT - P2/P3
TIS



- Steroids
- IVIg

6K IMNM

11K ASyS

70K DM



Pipeline Horizon

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Rewriting Immunology Textbook with Empasiprubar

Pioneering
complement
factor C2

Defining MMN as
auto-IgM mediated
disease

Unique
sweeping
antibody

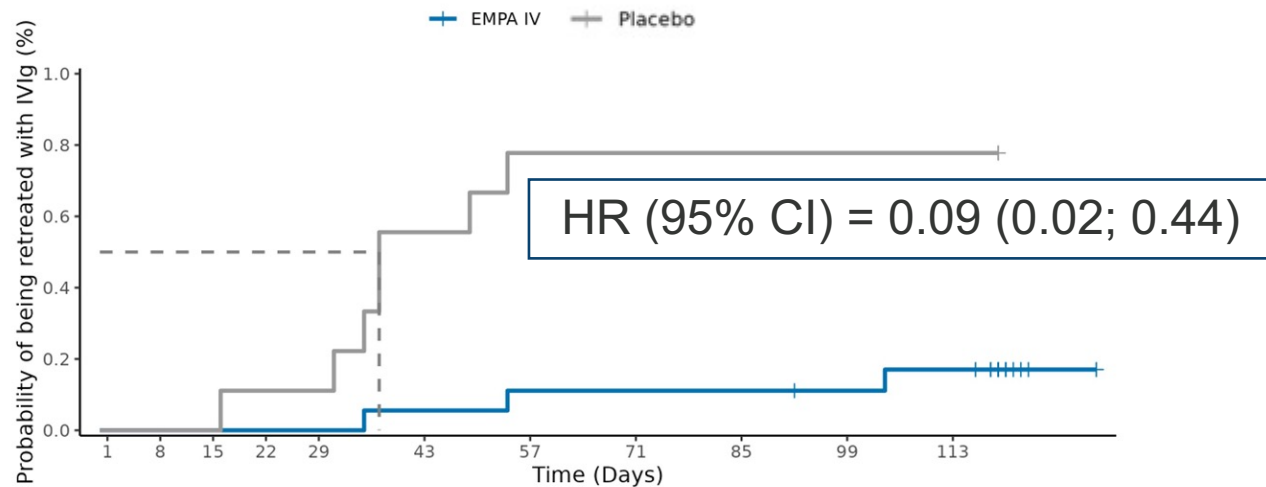
~80-day half-life supports
favorable dosing

Ongoing
development in
3 indications

POC established in MMN



Empasiprubarb has Potential to Transform MMN



At Risk		1	8	15	22	29	43	57	71	85	99	113
EMPA IV	18	18	18	18	18	17	16	16	16	15	14	
Placebo	9	9	9	8	8	4	2	2	2	2	2	2
Events		1	8	15	22	29	43	57	71	85	99	113
EMPA IV	0	0	0	0	0	1	2	2	2	2	2	3
Placebo	0	0	0	1	1	5	7	7	7	7	7	7

91%
reduction in need
for IVIg rescue with
empasiprubarb

- 94% of treated patients rated their condition improved since starting therapy, including 55% who were much/very much improved
- 8/9 placebo patients had no change or worsened (Patient Global Impression of Change scale)
- Empasiprubarb demonstrated improvement compared to baseline on 6/6 efficacy measurements
- Safety profile consistent with Phase 1 data

Cohort 2 is ongoing; results to inform dose for Phase 3 study initiation

MMN Patients are Waiting

Patient journey characterized by deep frustration and anxiety



Clear opportunity for empasiprubarb...



...I'm not asking to be able to run and jump like I used to. I just want to be able to stand like I used to.

ADDRESSABLE MARKET

~10k patients

US + argenx ROW markets (ex China)*

...to transform MMN outcomes

IVIg only treatment option



ARGX-119: Enhancing Neuromuscular Junction

Pioneering
MuSK biology
at NMJ

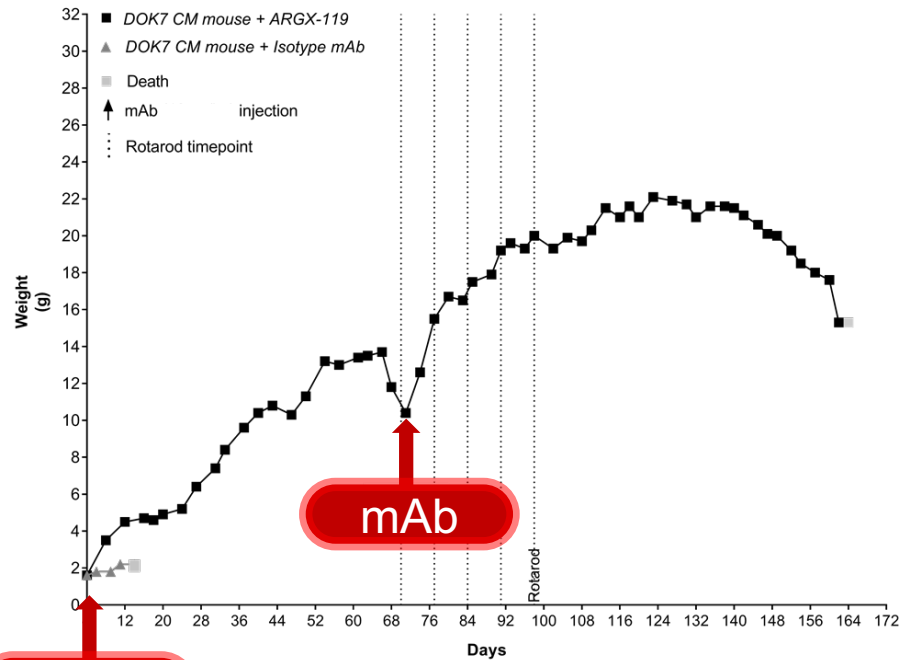
Agonistic
SIMPLE
Antibody™

Initial
development in
CMS and ALS

Safety and tolerability data from extensive Phase 1 study support advancement into PoC studies

CMS and ALS Trials to Start in 2024

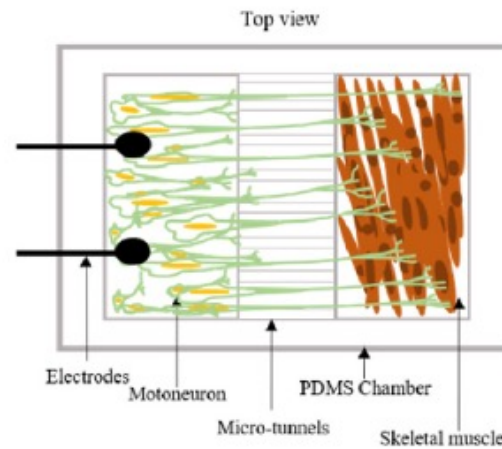
ARGX-119 rescues early neonatal lethality and disease relapse in adult DOK7 CMS mice



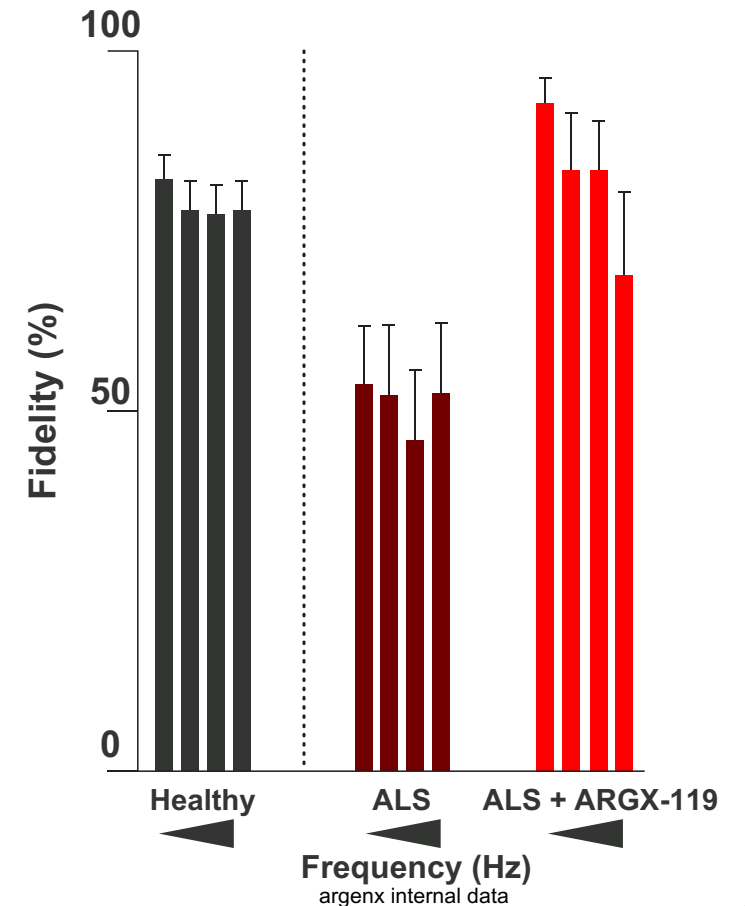
Article
nature Mechanism of disease and therapeutic rescue of *Dok7* congenital myasthenia

Nature, Oury et al. 2021

ARGX-119 preserves NMJ numbers and restores muscle contraction in ALS patient derived NMJs on-a-chip



Biomaterials, Badu-Mensah et al. 2022;
Advanced Therapeutics, Guo et al. 2020



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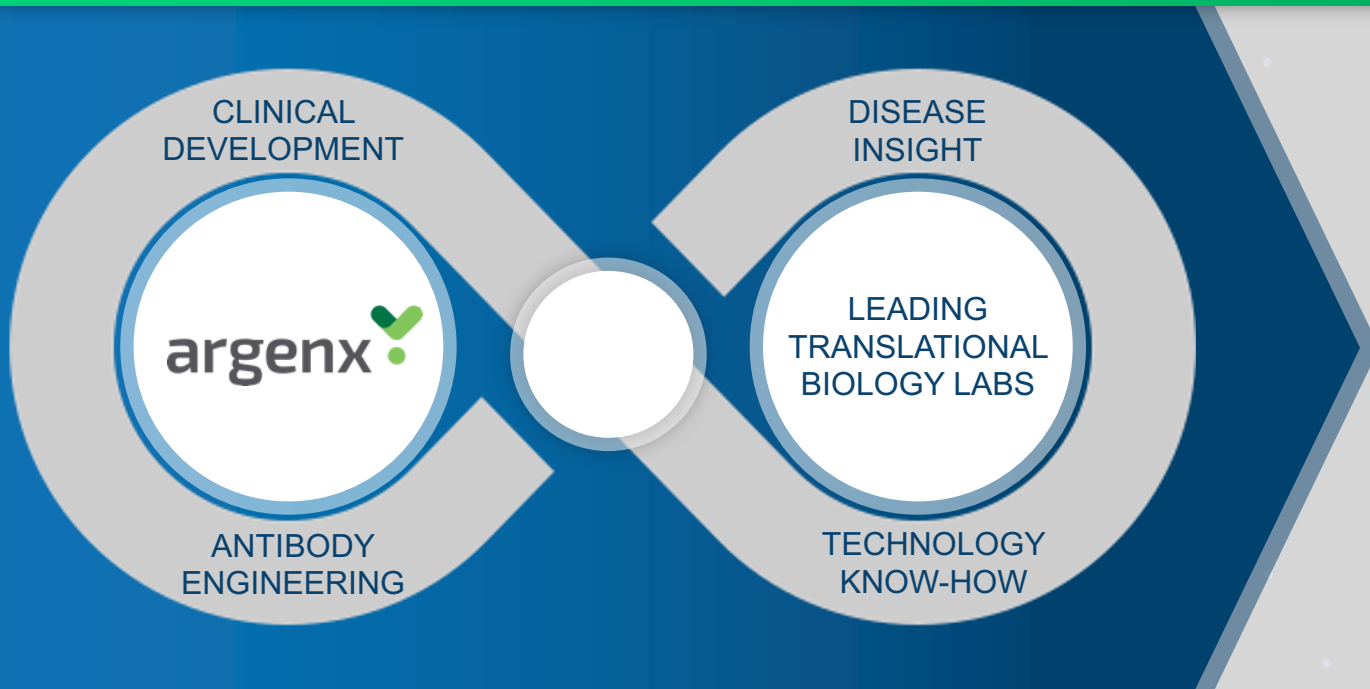
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Pipeline Growth Driven By Immunology Innovation Program

4 IND FILINGS BY END OF 2025



Continued Leadership in FcRn

ARGX-213

Broad Immune System Targets

ARGX-109
(Anti-IL-6)

ARGX-121

ARGX-220

First in class, novel targets

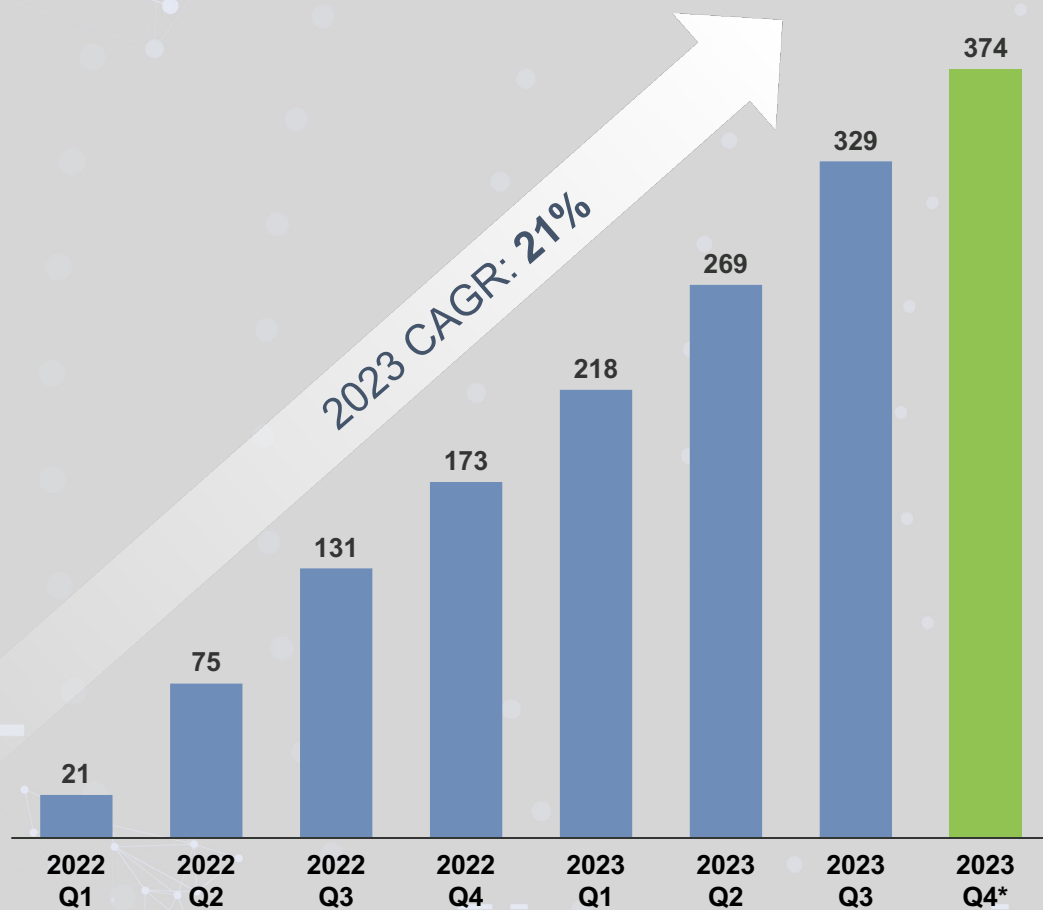
Strong Track Record with **Repeatable Innovation Playbook**

Strong Cadence of Milestones in 2024

	Indication	Milestone	Timing
VYVGART	gMG	Decision on approval: Switzerland, Australia, Saudi Arabia, South Korea	By Year End
		Seronegative trial initiation	By Year End
	ITP	Japan decision on approval	1Q 2024
VYVGART SC	gMG	Japan decision on approval	By 1Q 2024
		China decision on approval (Zai Lab)	By Year End
	CIDP	U.S. launch, if approved	Mid-2024
		Regulatory submissions Japan, Europe, China, Canada	By Year End
	MG, CIDP	Update on PFS development	1H 2024
Efgartigimod	Primary Sjogren's syndrome	Proof of concept data	1H 2024
	PC-POTS	Proof of concept data	1H 2024
	Myositis	Proof of concept data	2H 2024
Empasiprubart	MMN	Full Phase 2 data	2024
ARGX-119	CMS, ALS	Phase 1b/2a study initiations	2024
IIP	Not Disclosed	4 INDs filed	By End of 2025

On Track To Be Sustainable

Q4 2023 Product Net Sales of \$374 million



Preliminary 2023 Financial Results

(\$B)	2023
Product Net Sales ⁽¹⁾	1.2
Cash, cash equivalents and current financial assets ⁽¹⁾	3.2

(1) - Preliminary Financials. Unaudited and subject to change.

2024 Financial Guidance

(\$B)	2024
Cash burn ⁽²⁾	~ 0.5
Combined R&D and SG&A expenses	< 2.0

(2) - Cash burn is equal to the decrease in our cash, cash equivalents and current financial assets

2024 Strategic Priorities

Committed to Driving Continued Growth

**Broaden
leadership in
MG market**

Launch CIDP

Advance PFS

6

Phase 2 data
readouts

**Leading to multiple
Phase 3 initiations**

4

INDs by 2025

THANK YOU

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