



Worldwide Healthcare Trust PLC

Annual General Meeting

9 July 2025



**WORLDWIDE
HEALTHCARE
TRUST**

| Agenda

- ① Celebrating 30 Years
- ② Performance
- ③ Investment Themes
- ④ Looking Ahead
- ⑤ Playbook for 2025 and Beyond

Worldwide Healthcare Trust PLC

Celebrating 30 years (1995 to 2025)



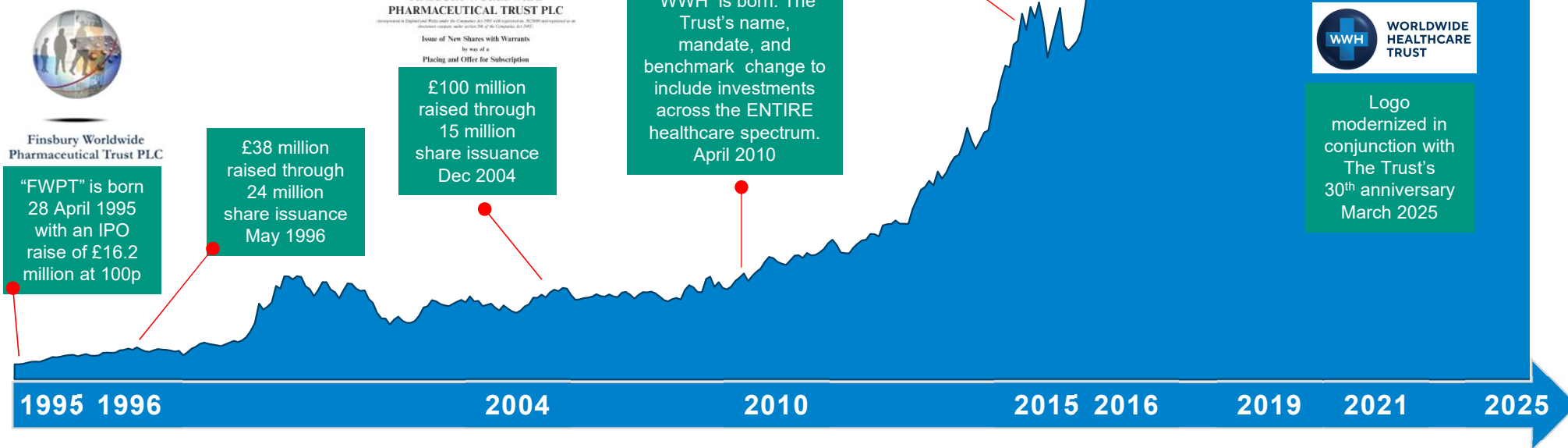
WORLDWIDE
HEALTHCARE
TRUST



Celebrating 30 Years of Success, and A Future of Opportunities

Worldwide Healthcare Trust PLC

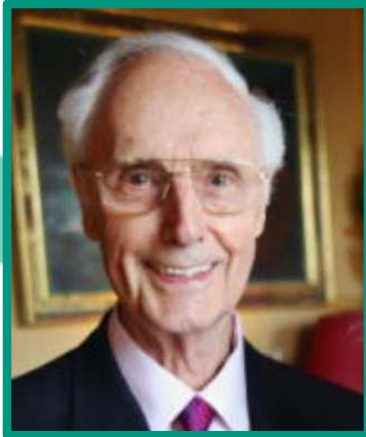
30 years of major landmarks and growth



Source: Frostrow, Bloomberg Note: NAV as of 31 March 2025

Historical Board Chairs and Directors

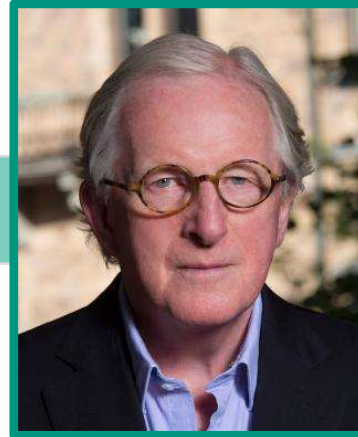
Powerful stewardship over the past 30 years



Sir Stuart Burgess
1995-2003



Ian Ivory
2003-2008



Sir Martin Smith
2008-2022



Doug McCutcheon
2022 - current

ORIGINAL DIRECTORS

Sir Stuart Burgess
Paul Gaunt
Duncan Geddes
Samuel Isaly
Ian Ivory
Anthony Townsend

1995

Josephine Dixon
James Noble

2004

Sir Martin Smith
Dr. David Holbrook

2007

Doug McCutcheon

2012

Sarah Bates

2013

Humphrey van der Klugt

2016

Sven Borho

Bina Rawal

2018

2019

Tim Livett
Jo Parfrey

Sian Hansen
William Hemmings

2022

2024

Previous Directors

Current Directors

30 Years of Landmark Achievements

Notable “firsts” in healthcare (1995 to 2025)

1996



First “high potency” statin (Lipitor)

1997



First monoclonal antibody (Rituxan)

1998



First biologic for autoimmune disease (Remicade)

2000



First anti-drug conjugate (ADC) (Mylotarg)

2000



Human Genome Sequenced

2001



First targeted cancer agent (Gleevec)

2003



First drug eluting stent (Cypher)

2004



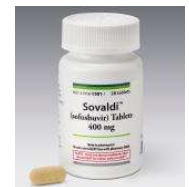
First drug to eclipse \$10 billion in global sales (Lipitor)

2005



First GLP-1 (Byetta)

2013



First cure for Hepatitis C (Sovaldi)

2014



First “immuno-oncology” agent (Opdivo)

2017



First cell therapy for cancer (Kymriah)

2020



COVID vaccines are discovered, developed, and approved

2021



First drug to eclipse \$20 billion in global sales (Humira)

2023



First disease-modifying Alzheimer's drug (Leqembi)

The first 30 years

Comparative Performance

NAV Performance over the past 30 years (ending 31 March 2025)

	Total Return	Annualised Return
1 HgCapital Trust	7326.3%	15.5%
2 Worldwide Healthcare Trust*	4258.1%	13.4%
3 ICG Enterprise	3879.1%	13.1%
4 Fidelity European Trust *	3498.2%	12.7%
5 3i Group	3494.3%	12.7%
6 JPMorgan European Discovery	3238.9%	12.4%
7 Fidelity Special Values*	2951.4%	12.1%
8 Scottish Mortgage	2879.3%	12.0%
9 Herald	2560.9%	11.6%
10 European Smaller Companies Tr	2463.7%	11.5%
11 Scottish Oriental Smaller Compa	2289.8%	11.2%
12 Henderson European Trust	2280.9%	11.2%
13 TR Property Investment Trust	2191.9%	11.0%
14 JPMorgan American	2109.2%	10.9%
15 Pantheon International	2030.3%	10.8%

WWH remains one of the best performing closed end trusts over the past 30 years

Source: Morningstar

*comparison of Trusts >£250m

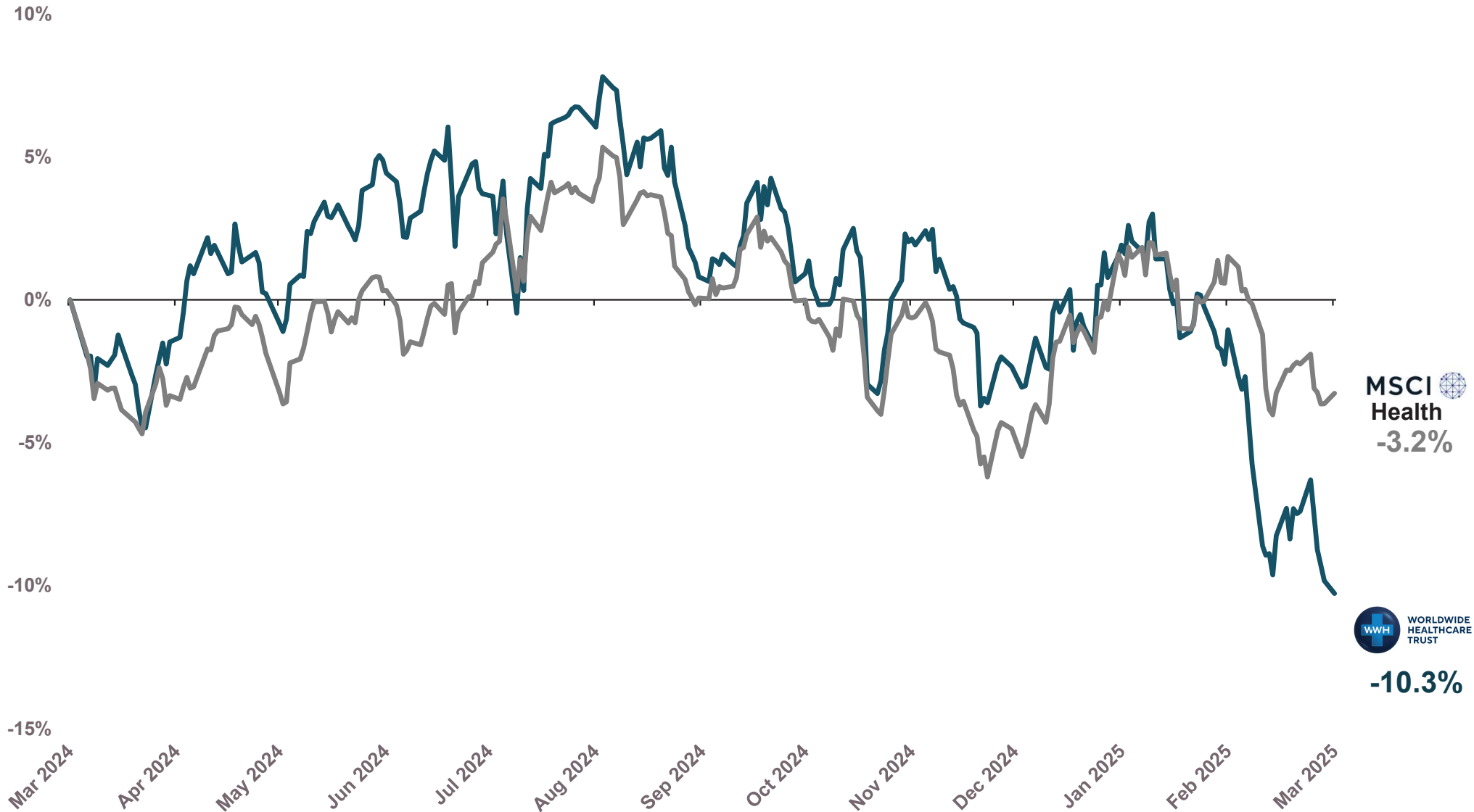


WORLDWIDE HEALTHCARE TRUST

Performance

Performance: FY2024

12 Months (ending 31 March 2025)

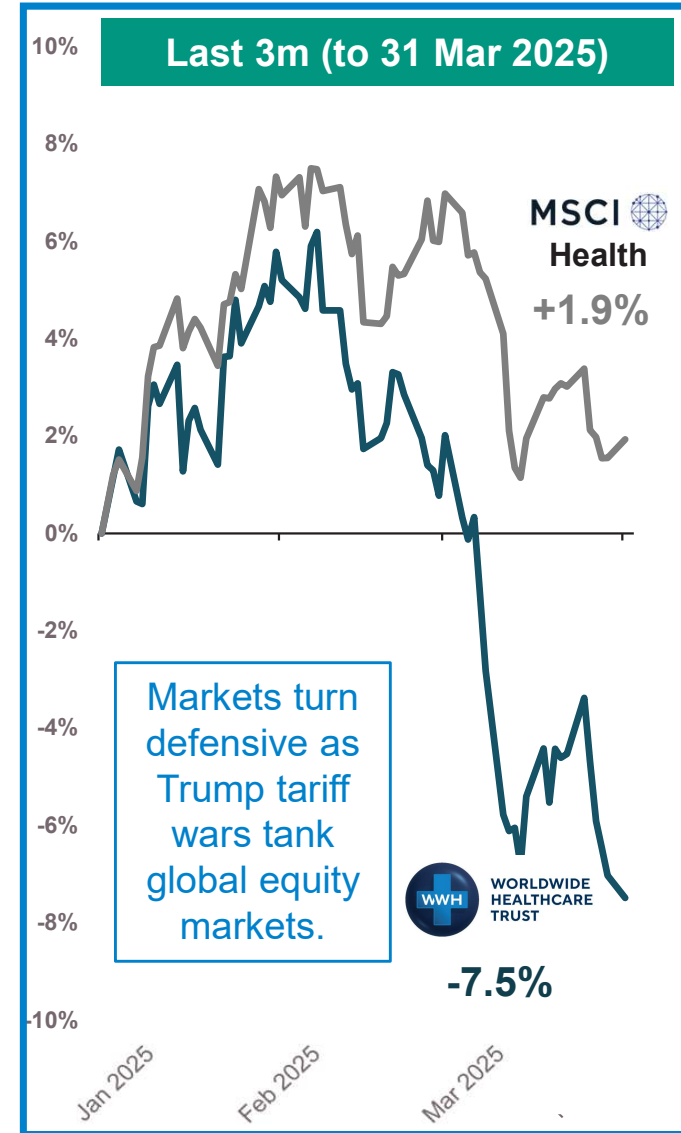
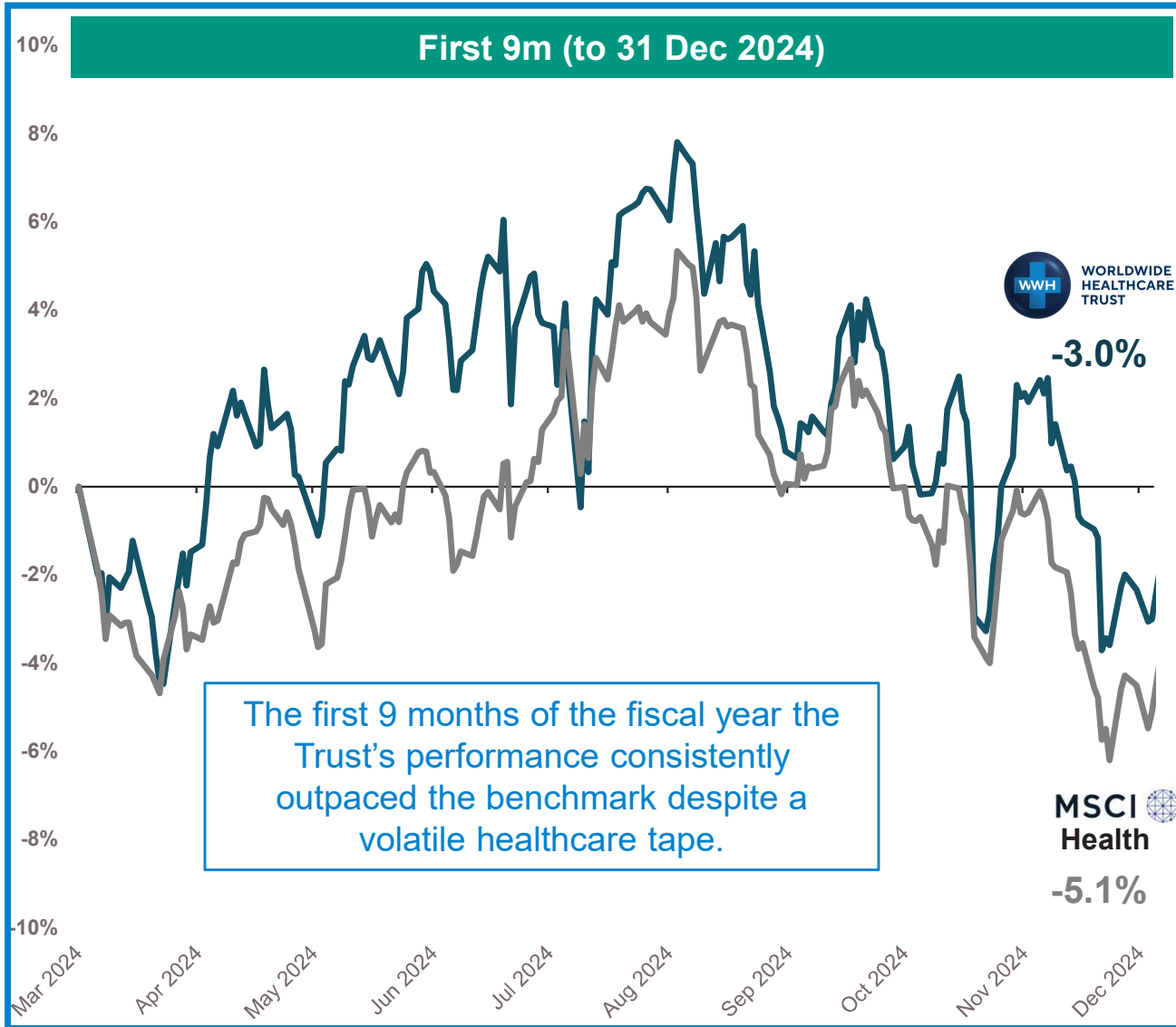


Source: Bloomberg, OrbiMed; Data updated through 31 March 2025

Note: WWH performance figures are net of fees

Performance: FY2024

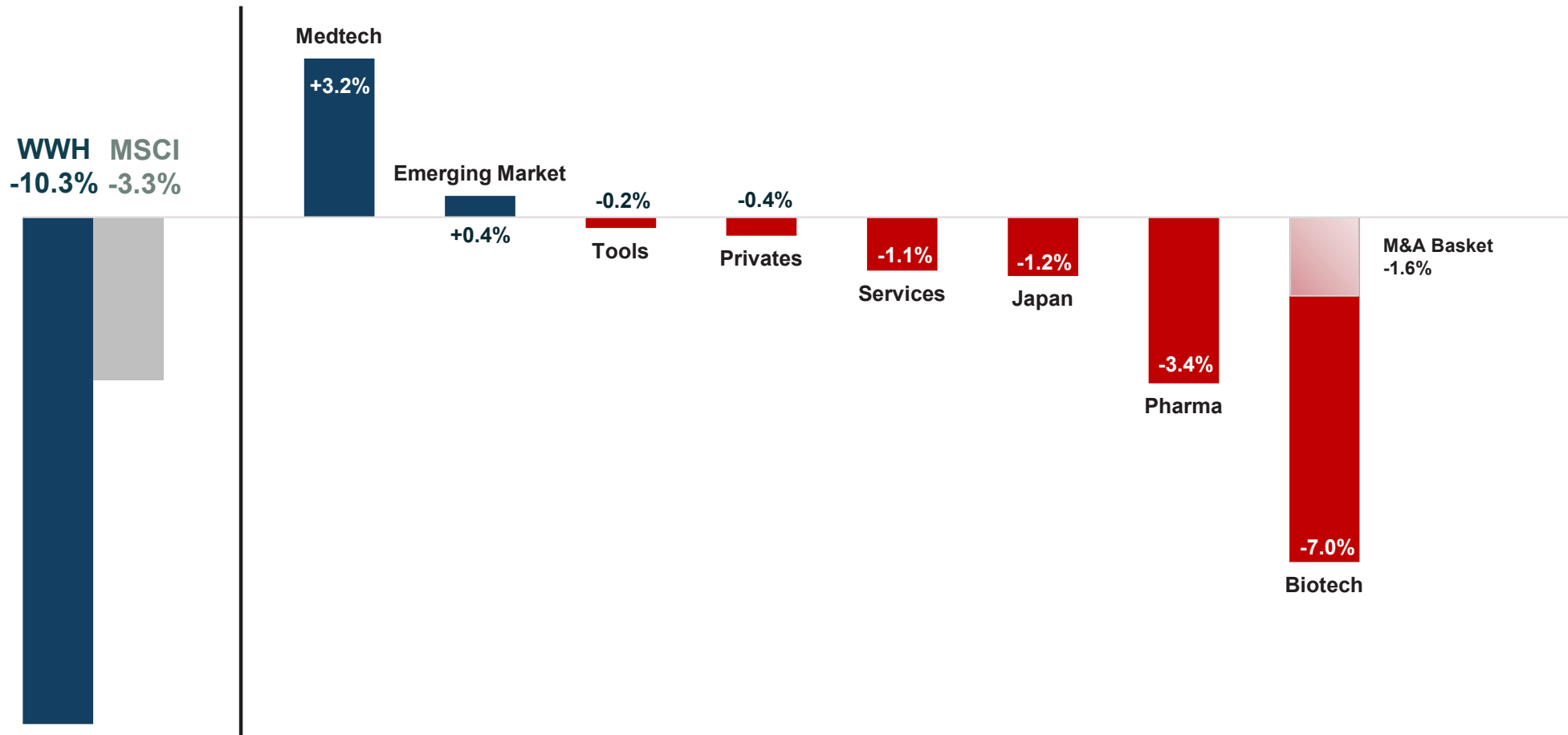
“A Tale of Two Halves”



Source: Bloomberg, OrbiMed; Data updated through 31 March 2025
Note: WWH performance figures are net of fees

Attribution

12 months (ending 31 March 2025)



Note: Figures are on an absolute basis. Sub-sector FYTD contribution figures are not provided as they are unaudited. Estimate values are provided for informational purposes only. WWH performance figures are net of fees

Source: Bloomberg, OrbiMed

Contribution

Principal contributors to and detractors from NAV (ending 31 March 2025)

Top five contributors		Sector	Country	Contribution £'000	Contribution per share p
	Boston Scientific	Healthcare Equipment & Supplies	United States	60,625	11.7
	Intuitive Surgical	Healthcare Equipment & Supplies	United States	33,089	6.4
	Tenet Healthcare	Healthcare Providers & Services	United States	20,869	4.0
	Natera	Life Sciences Tools & Services	United States	17,799	3.4
	Argenx	Biotechnology	Netherlands	16,505	3.2

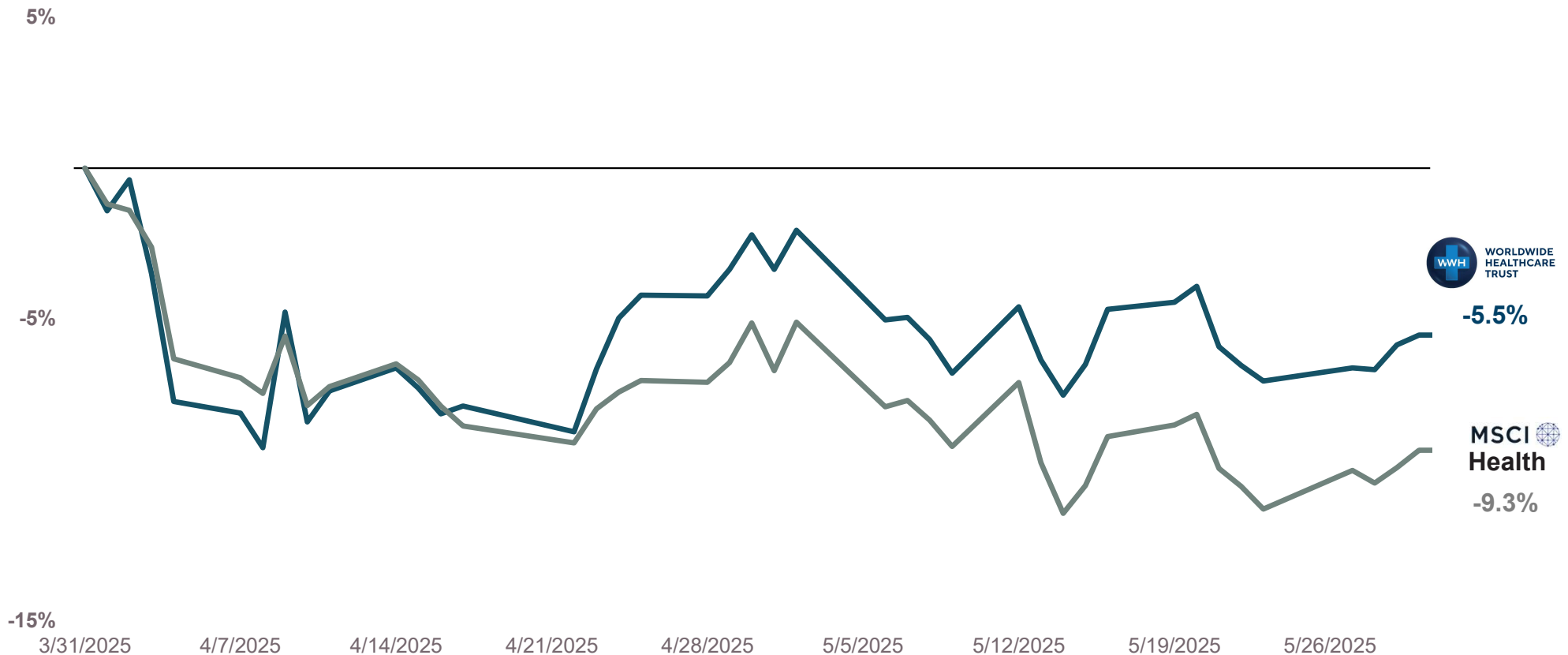
Top five detractors		Sector	Country	Contribution £'000	Contribution per share p
	Apellis Pharmaceuticals	Biotechnology	United States	(23,988)	-4.6
	Merck*	Pharmaceuticals	United States	(25,861)	-5.0
	Evolent Health*	Healthcare Providers & Services	United States	(27,970)	-5.4
	Biogen*	Biotechnology	United States	(32,352)	-6.2
	Novo Nordisk*	Pharmaceuticals	Denmark	(50,692)	-9.8

* Not held at 31 March 2025

Source: WWH Annual Report 2025

Performance: Current FYTD

2 months (ending 30 May 2025)

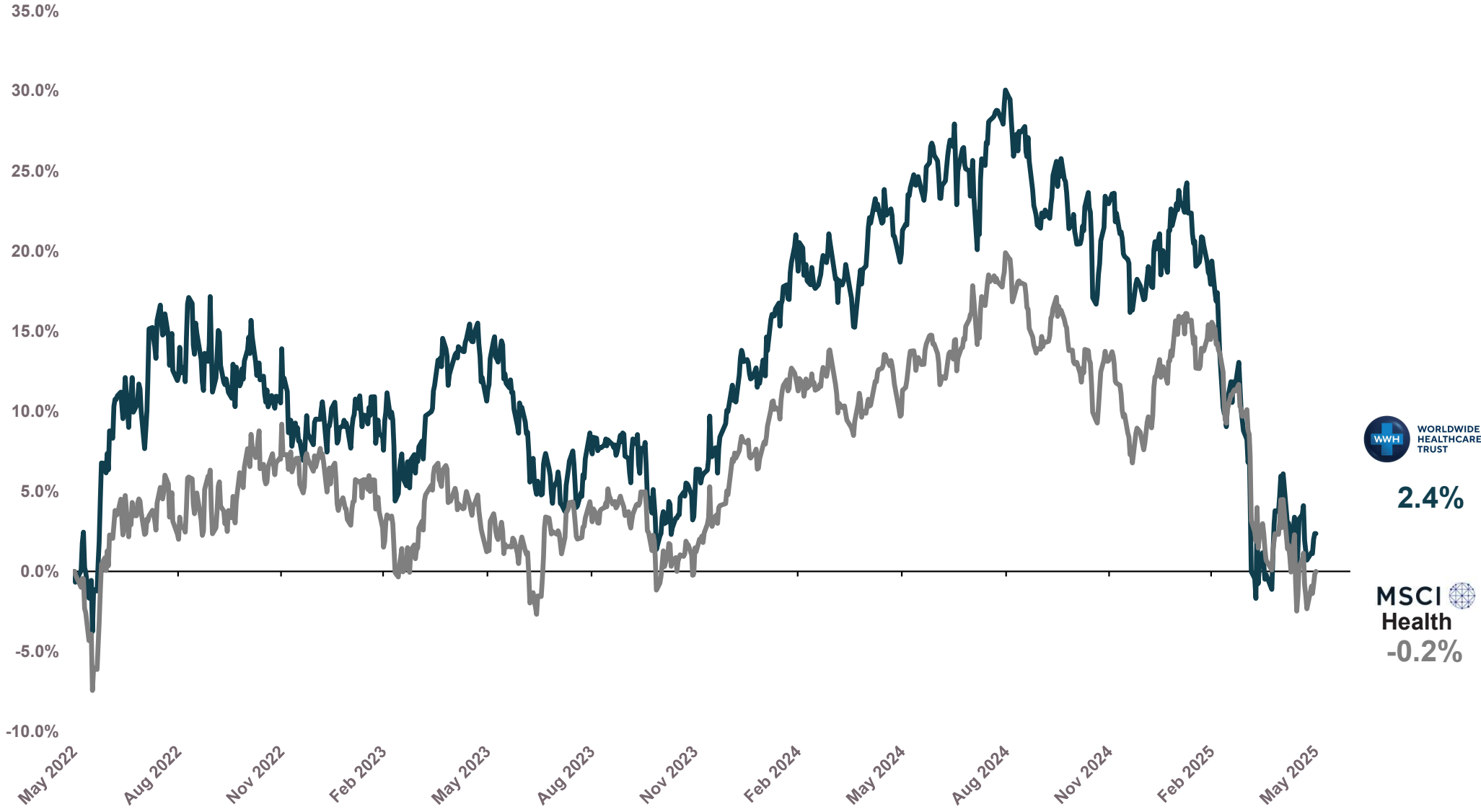


Solid outperformance to start the new FY despite continued Trump-induced volatility

Source: Bloomberg, OrbiMed; Data updated through 31 May 2025
Note: WWH performance figures are estimates

Performance: 3 Year

3 Years (ending 30 May 2025)

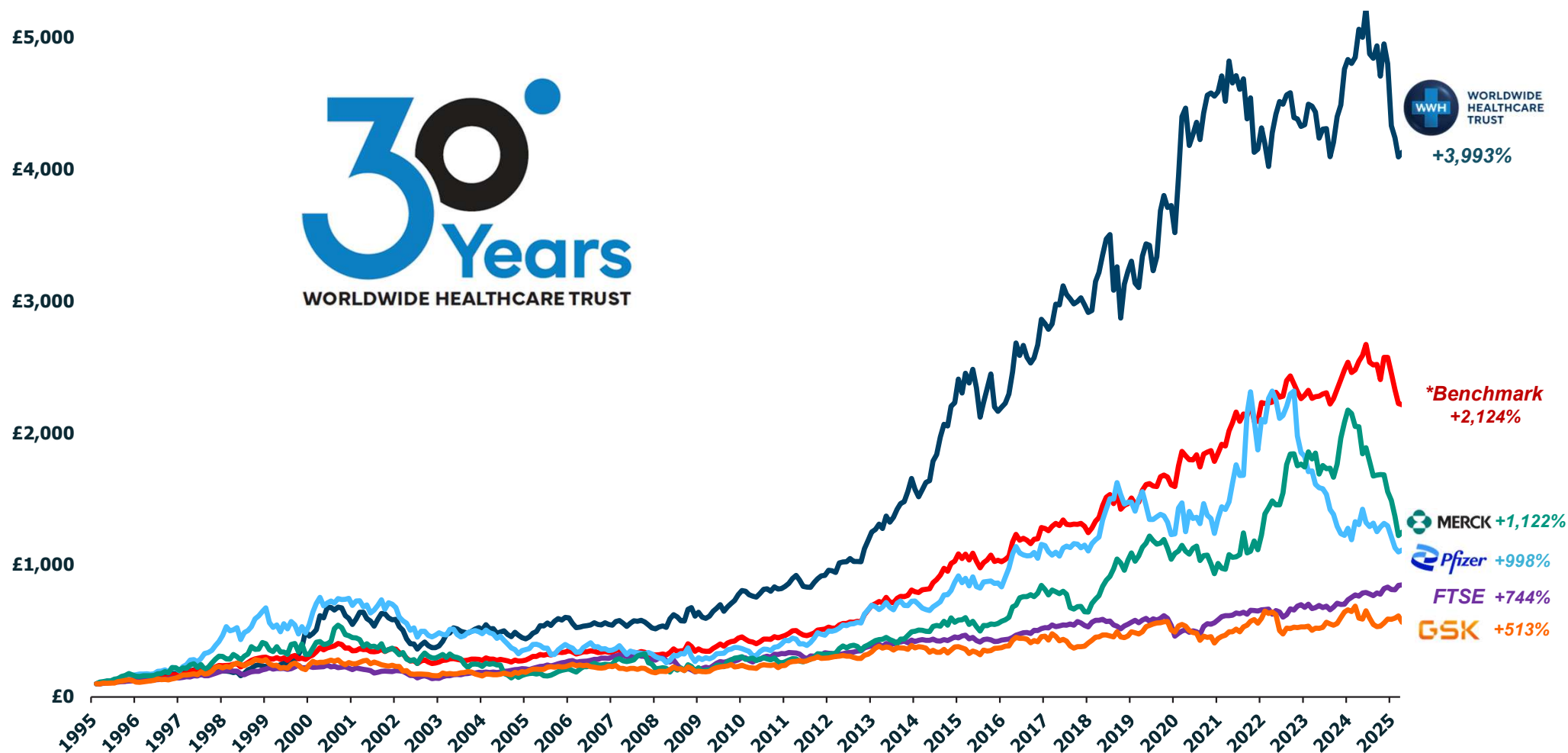


Source: Bloomberg, OrbiMed; Data updated through 31 May 2025

Note: WWH performance figures are estimates and net of fees

Performance: Since Inception

30 Years (ending 30 May 2025)



30 years of exceptional performance

*The "Blended DS/MSCI Benchmark" uses the Datastream World Pharma/Biotech TR Index from inception to September 30, 2010, the MSCI World Health Care Gross Index from September 30, 2010 to December 31, 2011, and the MSCI World Health Care Net Index from December 31, 2011. Past performance is no guarantee of future results. See Endnotes for additional information regarding the performance presented in this slide and those that follow. Updated through 30 May 2025 with Morningstar data as of 30 May 2025

Source: Frostrow, Bloomberg Note: WWT performance figures are net of fees

WORLDWIDE HEALTHCARE TRUST

Investment Themes

2024 U.S. Presidential Election

How have recent administrations impacted the drug industry?

Year	Legislation	Federal Control	Industry Impact	Commentary
2003			Positive	The creation of Medicare “Part D” – prescription drug coverage for seniors in the US – is perhaps the most successful federal healthcare program of the new millennium, in terms of patient access, lowering the cost of medicines, whilst protecting innovation
2010			Neutral to Negative	With Obamacare , more patients were eligible for Medicaid but a large part of the cost was absorbed by drug manufacturers and taxpayers whilst volumes increased only modestly
2018			Positive	Lower corporate tax rates led to record YoY earnings and record share buy backs, leading to outsized total shareholder returns; for large cap pharma, in particular. FDA productivity also accelerated to record highs
2022			Neutral to Negative	Drug price setting in Medicare via the Inflation Reduction Act has been industry altering, lowering revenue outlook, penalizing small molecule development, and increasing industry costs whilst increased volumes remain to be seen
2025+			?	Admittedly, the start of Trump’s second tenure has been more volatile and controversial than we foresaw with tariffs and drug pricing rhetoric . But we are already seeing signs of him pivoting to more productive “ends” to his controversial “means”

Historically, Republican administrations have been regarded as “industry friendly”

Political and Regulatory Developments

Trump Administration seeks less regulation, more innovation, and balanced trade



Presidential Authority Over Trade/Tariffs



Donald. J. Trump
U.S. President



- Potential tariff impact¹ varies by manufacturer and consumer location, but generally modest for life sciences and biotechnology companies.
- MFN pricing executive order² lacks realistic enforcement mechanisms without Congressional action.



Food & Drug Administration



Dr. Martin Makary
Commissioner



- Pro-innovation Johns Hopkins-trained surgeon, and public policy researcher.
- Positive for FDA drug approval efficiency, e.g., the FDA recently eliminated animal trial requirements for new antibody therapies.



Federal Trade Commission



Andrew Ferguson
Chairman



- Experienced, conservative background likely to reduce FTC interventions in M&A compared to more interventionist approach of prior administration.
- Pressuring PBMs through FTC legal action to prevent anticompetitive behavior; favorable for pharma industry.



Center for Medicare & Medicaid Services



Dr. Mehmet Oz
Administrator



- UPenn-trained surgeon, previous director of the Cardiovascular Institute at NY Presbyterian.
- Supports efficiency, reducing fraud/waste, and possibly removing the "pill penalty" from the IRA drug pricing legislation, which would defer drug price cuts.



Department of Health & Human Services



Robert F. Kennedy, Jr.
Chairman



- Public health advocate, with prior controversial positions on vaccines. Likely to prioritize food safety and nutritional health issues.
- Agreed to uphold existing vaccine framework, among other concessions, during his nomination hearings.

¹ Presidential announcement on use of tariffs

² MFN Drug Pricing Executive Order

U.S. Food and Drug Administration

What is happening at the FDA? Views from the new Commissioner

“Retain strengths, cut red tape, innovate faster”

- Believes RFK Jr. has keen interest in tackling chronic disease
- Wants to change FDA culture from silos to teamwork
- Reiterated RFK Jr.’s interest on putting the ‘F’ back in FDA
- Wants to “protect innovation” through accelerating development
- Replace Pharma Co. representation at FDA Advisory Committees (review panels) with patient advocacy groups instead
- Replace the current “AERS” database (self-reported adverse events) with health information exchanges to calculate adverse event RATES
- Wants to make things faster by reducing red tape
- “Yes” to reducing budgets to “do more with less”; but give context
- Restore trust and public confidence in the Agency
- Take the lead back on speed of innovation from China, UK, etc.
- Continue to allow Pharma companies to do DTC advertising
- Vaccines will continue to have a place in the U.S. Rx armamentarium



Dr. Martin Makary
Acting Commissioner



Key Example

Reduce the number of pivotal trials by half and replace with real world data post-approval

Key Example

Reduce animal testing (with computational models and organoids) and use AI to make reviews more efficient

Key Example

FDA headcount has grown >100% over the past 20 years (too much/too fast). No cuts to reviewers and re-allocate resources to them

Key Example

FDA PR of 20 May 2025 declaring the MMR vaccination has “been largely established as safe and highly effective”

New leadership at FDA has been refreshingly progressive despite concerns to the contrary

Pharmaceutical Tariffs

Lots of rhetoric and moving parts but plenty “TBD”

Pharmaceutical Tariffs

- Trump has threatened an industry specific tariff against the pharmaceutical industry on numerous occasions
- Still nothing officially announced
- A formal announcement is expected imminently
- Speculation on magnitude ranges from 10% to 30%

“Quid Pro Quo”*

- Over half of the global multi-national pharmaceutical giants have pledged over **\$280b** in U.S. investments:
 - (1) Expanding U.S. manufacturing
 - (2) New U.S. manufacturing sites
 - (3) R&D facilities and employment
- Clearly at the behest of Trump himself to avoid tariffs

“Good Guy”
List

J&J

Roche

U

Lilly

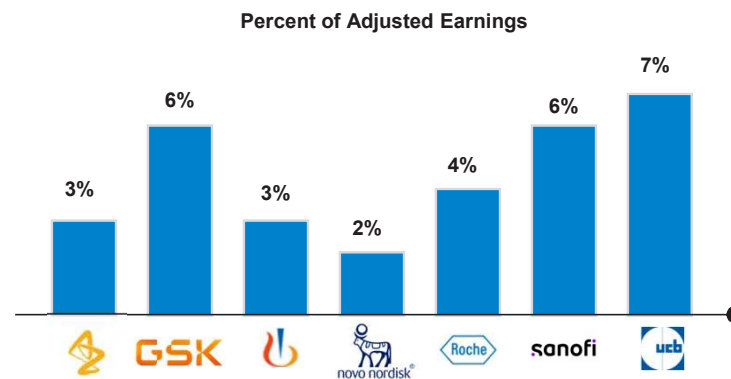
Bristol Myers Squibb

Takeda

Tariff or Tactic?

- Will a tariff even happen?
- May be Trump negotiation tactic to:
 - (1) Reshore drug manufacturing to US
 - (2) Ensure proper U.S. taxes being paid
 - (3) Address national security concerns
 - (4) Lower U.S. drug prices

Estimated Financial Impact**



Still no specifics, but a formal announcement could be a clearing event

*Source: Company press releases; Leerink Partners

**Source: Bernstein (assumes 20% tariffs applied to U.S. COGS offset by 50% natural hedge)

US Drug Pricing

Executive Order for drug pricing delivered 12 May 2025



Jay
Bhattacharya
NIH

Dr. Mehmet
Oz
CMS

Robert F.
Kennedy, Jr.
HHS

Dr. Martin
Makary
FDA

FOR IMMEDIATE RELEASE
May 20, 2025

Contact: CMS Press Office
202-690-6343
[Submit a Request for Comment](#)

HHS, CMS Set Most-Favored-Nation Pricing Targets to End Global Freeloading on American Patients

Most-Favored-Nation policy builds on President Trump's broader reforms to eliminate global freeloading and ensure every American has access to affordable, life-saving treatments.

Washington, DC—MAY 20, 2025— The U.S. Department of Health and Human Services announced today that it is taking immediate steps to implement President Trump's [Executive Order](#) "Delivering Most-Favored-Nation Prescription Drug Pricing to American Patients," a central component of the Administration's strategy to lower health care costs in the United States.

Under the leadership of President Donald J. Trump, HHS Secretary Robert F. Kennedy Jr., and CMS Administrator Dr. Mehmet Oz, the Department has identified specific targets pharmaceutical manufacturers are expected to meet to satisfy the requirements of the Executive Order. President Trump and Secretary Kennedy look forward to highlighting commitments in the coming weeks. These commitments will ensure Americans no longer pay more for medications than patients in other economically comparable countries, relieving the unfair burden placed on hard-working Americans.



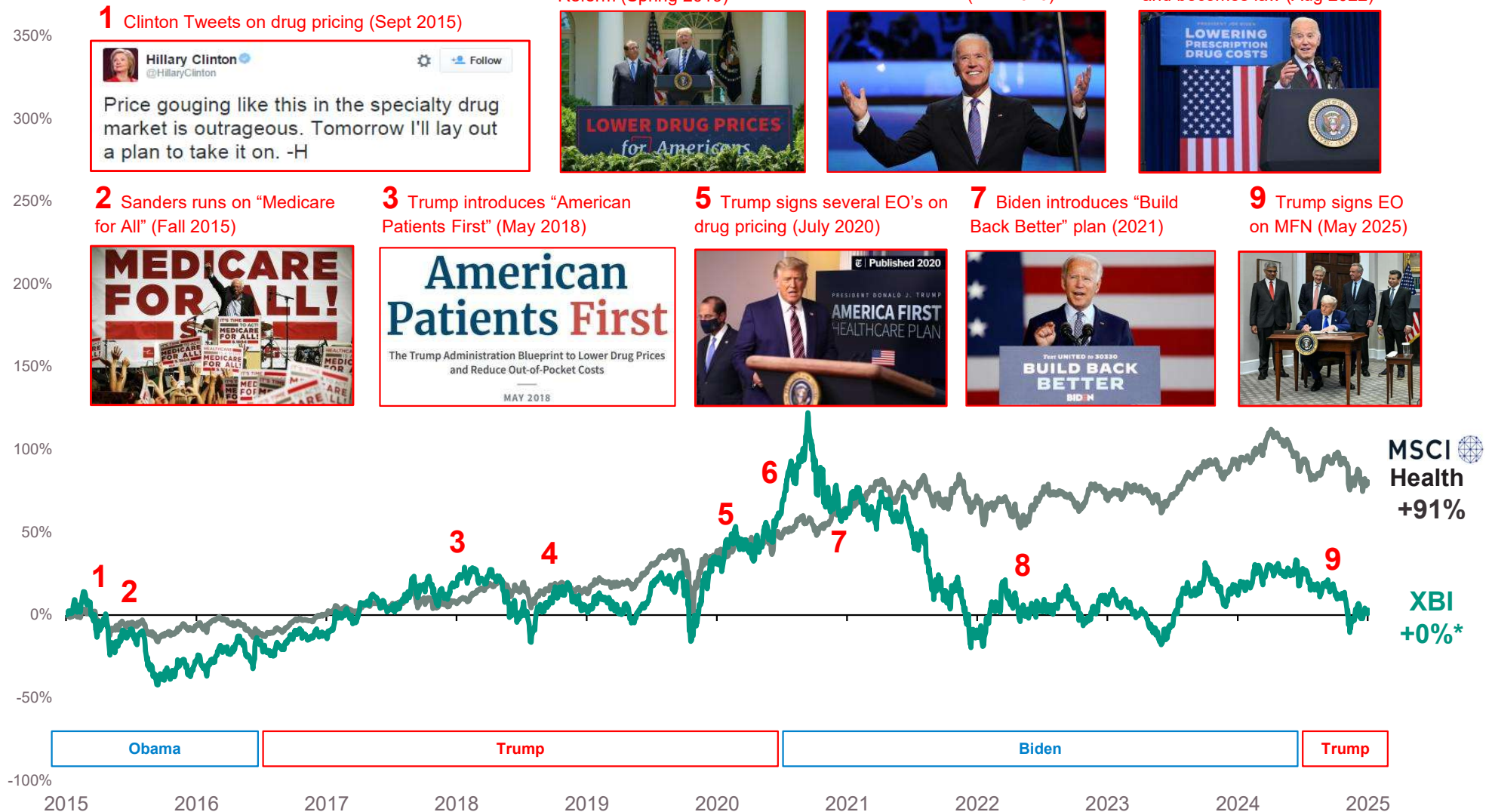
By the authority vested in me as President by the Constitution and the laws of the United States of America, it is hereby ordered:

Initial reaction: bio-pharma shares prices spiked as EO was “better than feared”

Source: Presidential Executive Order of 12 May 2025; CMS Press Release 20 May 2025; OrbiMed opinion

US Drug Pricing

10 Years of “Wall of Worry”



Healthcare underperformance – particularly Biotech – has been dramatic over the past 10y

Sources: Bloomberg; OrbiMed

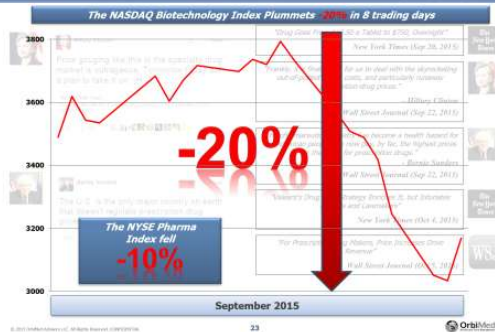
Note: Percentage return are in local currency and includes price return and dividend return whereas * denotes share price return only

WWH & US Drug Pricing

10 Years of Debunking the Risks

2015

Drug Pricing – A September to Remember



2018

Trump Policy Statements on Drug Pricing Benign for Healthcare

Direct government negotiation of drug prices not being considered

U.S. Federal Budget	FDA Commissioner
- Released on 12 February 2018 - Contained NO explicit drug pricing control proposals - Proposed "twists" to current federal programs, including: - Reducing out-of-pocket costs to seniors from PBM's - Moving some drugs from Part B (not rebated) to Part D (rebated)	- Overall, his efforts have mainly centered on increasing competition to reduce drug prices through increased drug approvals - Wants to close the REMS loophole that sometimes blocks generic drug approvals - Wants to stop branded drug cos. from paying generic drug cos. to not launch - Proposed removing all drug rebates
HHS Secretary	President of the United States
- Warned "bold action" was on the way - Discussed wanting to reduce the price of Part D drugs - Hinted at a change for the pricing "mechanism" for Part D drugs - Discussed passing some rebate savings to the consumer by "netting" it with the government payer	- Released official blueprint for lowering drug prices - The plan emphasized increasing competition, lowering out-of-pocket costs for patients, shifting drugs from Medicare Part B to Part D, and increasing price transparency - Plan largely viewed as benign to the biopharmaceutical industry

Unclear whether drug price rhetoric will escalate prior to Nov. midterm elections

2019

Drug Pricing – Headwind to Tailwind?

Many Proposals in 2018 and 2019	Current Rebate Model	Proposed DISCOUNT Model
- Medicare Part B to Part D Switching - Move from Rebate to Discount Model - International Pricing Index (IPI)	- Complex - Lacks transparency - Favors PBM's / Insurance Co.s - Disfavors patients - Pushes list prices optically higher - Allows payers to establish NET price	- Simple - Total transparency - Disfavors PBM's / Insurance Co.s - Favors patients - Pushes list prices optically significantly lower - Allows manufacturers to establish price
Net Impact: "Win – Win – Win" Trump Wins → drug list prices are, in fact, reduced Patients Win → out of pocket expenses are lowered Industry Wins → realized prices stay the same		

2021

Blue Wave Mistakenly Sets Off New "Wall of Worry"

Perception: Democratic Sweep is "bad" for Healthcare
Increased drug pricing risk!
Overhaul of the ACA (Obamacare)!
Passage of a "Public Option"!
"Medicare for All" to re-emerge as a possibility!
More stringent FDA!

2023

U.S. Drug Price Reform: Overhang Lifted

Three Main Components to the IRA 2022 re: Drug Price Reform	
Drug Price Inflation Cap → Requires drug cos. to pay rebates to Medicare if they increase drug prices faster than inflation	NEUTRAL → Price is no longer a revenue driver for pharma LIST prices do rise today, but ~ levels of inflation NET prices are cut even further due to rebating Cuts had action = positive for industry margin
Medicare Part D Redesign → Removes the "donut hole" and reduces it with an "out-of-pocket cap" of \$2,000 per patient	POSITIVE → Lowers out of pocket expenses for patients Increases affordability of medicines Increases adherence / treatment duration of times Increases patient access Should result in increased volumes
Medicare Price Negotiations → Enables Health & Human Services to set the price of certain costly drugs within the Medicare program	NEGATIVE but MANAGEABLE → Not in effect until 2026 Only 10 drugs per year are negotiated Targets medicines that are near the end of their life cycles but do not yet have generic competition (5 yrs – small molecule / 13 yrs – biologics) Only a potential \$40 billion incremental hit to U.S. Rx revenues to 2032 (out of \$600 billion)

The IRA will have an impact but the net of it is manageable. Perhaps the biggest benefit is that the headline risk is now behind us.

2025

U.S. Drug Pricing

A closer look at the "Most Favored Nation"

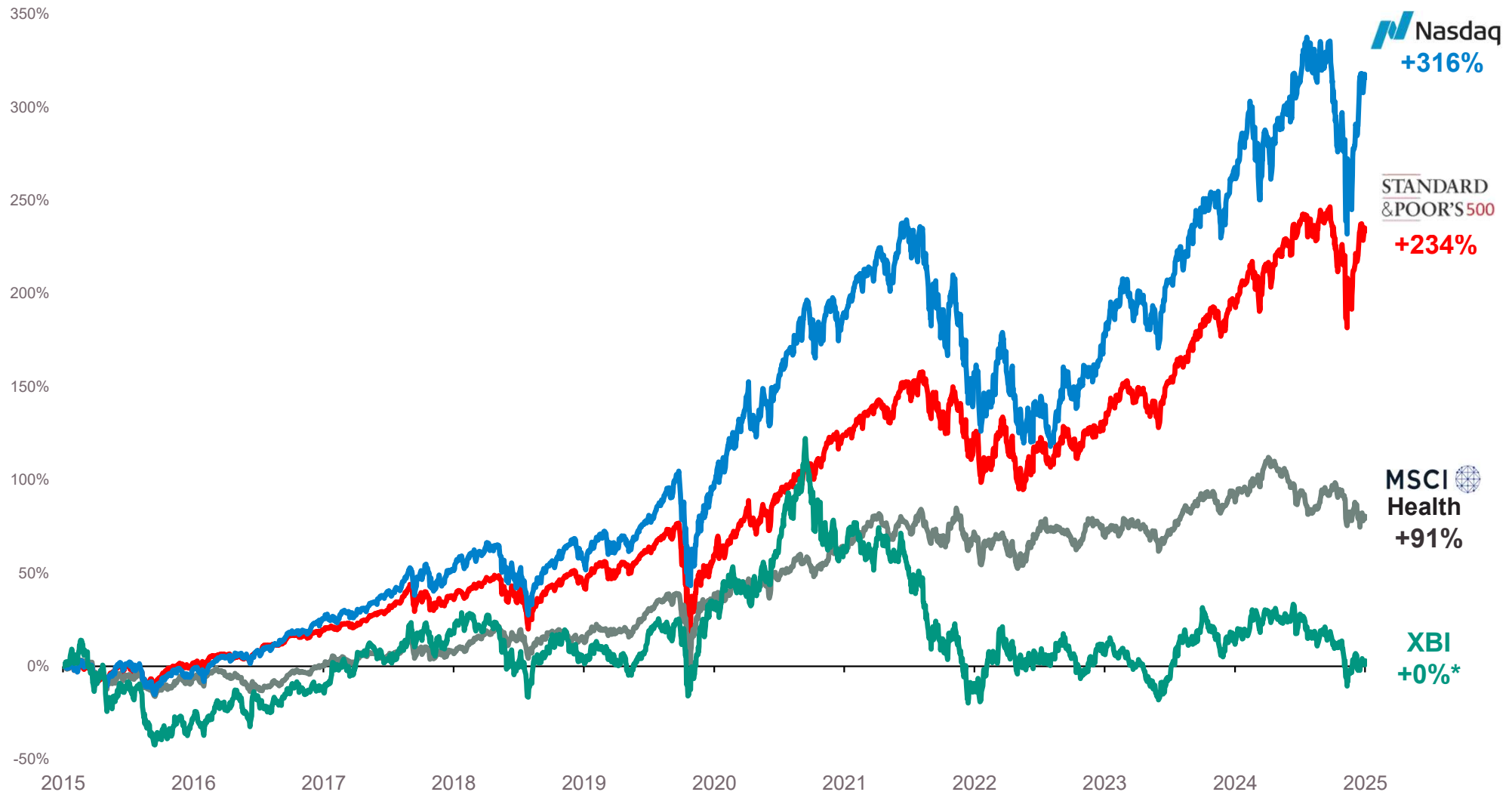
Knowns	Fiction
- Trump has been surprisingly vocal on drug pricing - Trump – as he did in his first administration – has been VERY outspoken on PBM's ("the middlemen") - Trump made favorable comments about the pharma industry and innovation - Passage of MFN will require Congressional action - Follow-up PR (20 May 25) included pricing criteria	- Trump wants to destroy the pharmaceutical industry - Trump can single handedly lower drug prices - The EO was calamitous for the pharma industry - Drug prices will be lowered "30-40%, almost immediately" - The government can mandate drug prices for ALL market segments (i.e. federal + commercial channels)
Unknowns - Thus far, we have only partial transparency on the specifics and implementation of any "MFN" plan - Is the threat of MFN another negotiating tactic by Trump? - Can Trump and/or the industry force developed countries ex-US to raise their drug prices? - What will be the industry response to MFN? (nothing so far)	Now that the EO is out, one overhang has been partially removed. Investors will await next steps from this administration and the industry. It is becoming more apparent that getting MFN across the legislative goal line will be very difficult. Will Trump pivot or push MFN?

Investor de-risking of drug price reform has historically been greater than actual \$ impact

Sources: OrbiMed Research

Healthcare Underperformance – 10 year

10 Years (ending 30 May 2025)



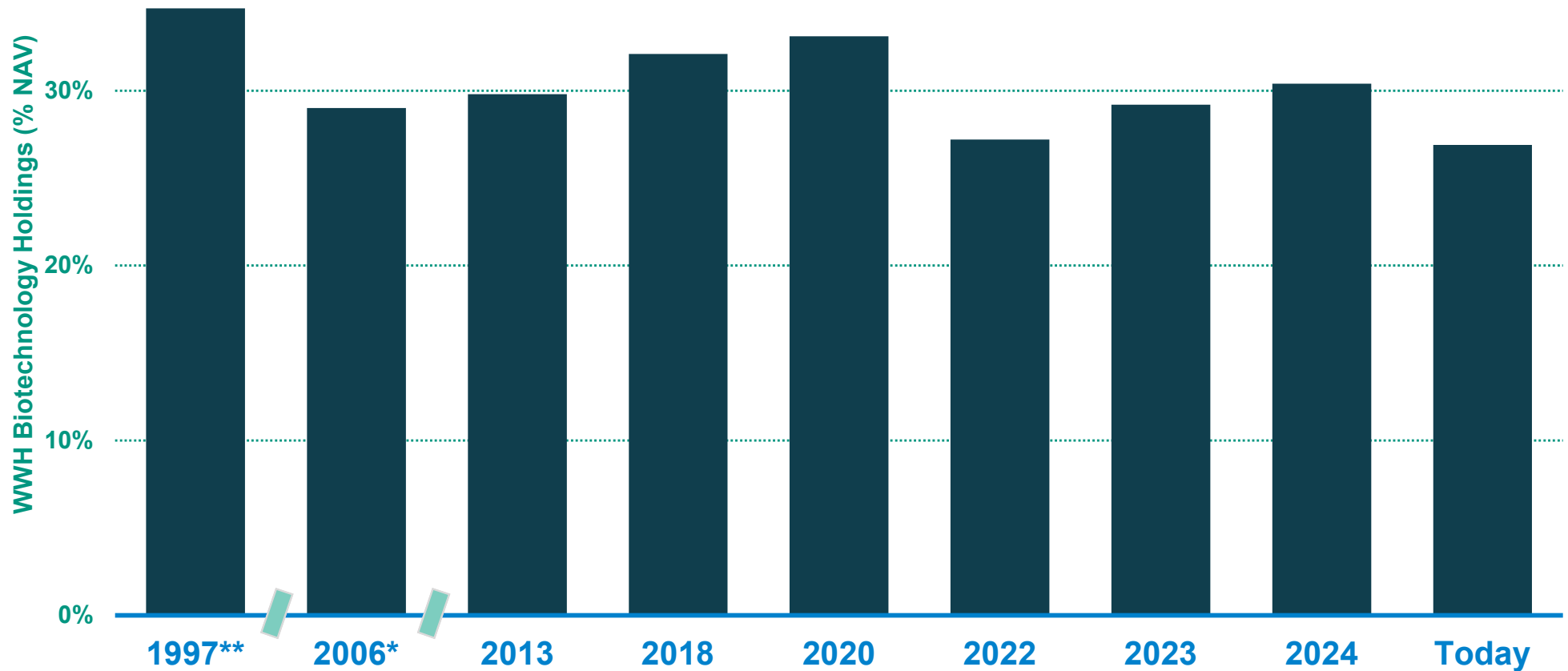
Healthcare underperformance – particularly Biotech – has been dramatic over the past 10y

Sources: Bloomberg.

Note: Percentage return are in local currency and includes price return and dividend return whereas * denotes share price return only

Allocation

Historic Absolute Allocation: Biotechnology



Recipe for Success: Significant exposure to innovative biotech companies

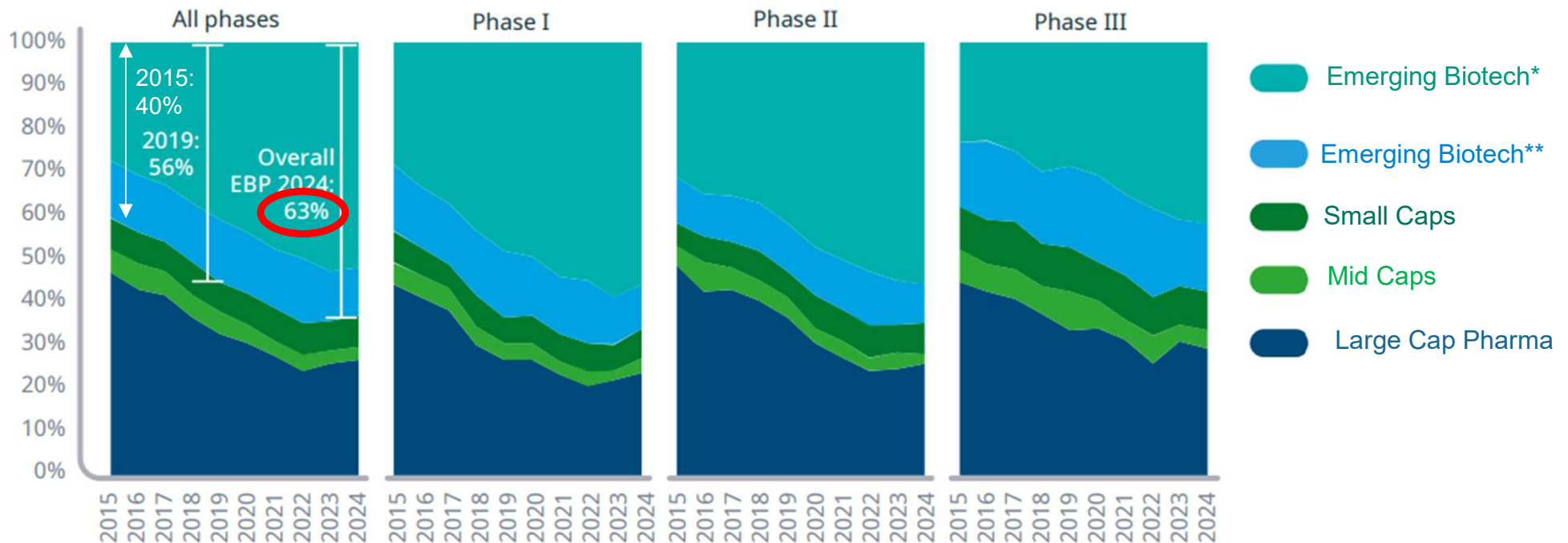
Note: Excludes Options. Basket positions have their constituents allocated to their respective subsectors. Future weightings may differ.

*Data as of 30 June 2025, *Data as of 31 December 2006 versus the Datastream World Pharma/Biotech TR Index; **Data as of 31 December 1997 per Finsbury Worldwide Pharmaceutical Annual Report*

Biotechnology R&D

Clinical Trial Starts

Emerging Biotechnology Companies:
Accounted for **63%** of total trial starts in 2024
(an increase from **40%** of total trial starts in 2015)



R&D productivity of Emerging Biotechnology companies continues to accelerate

Source: IQVIA; *pre-clinical; **up to \$500m in revenues; all others with revenues >\$500m

Biotechnology R&D

Novel Product Approvals

Emerging Biotechnology Companies:
Accounted for **85%** of novel product approvals in 2024
(an increase from **43%** of total trial starts in 2015)



Biotechnology is the #1 source of novel drug approvals

Source: IQVIA

M&A Activity in 2024 and 2025

Robust start; company executives still positive; election-related slowdown expected



CEO Rob Davis

"We remain well-positioned to pursue additional science-driven, value-creating business development...0 to \$15 billion range is our sweet spot, but obviously open to looking at deals."

FEBRUARY 2025



CEO Robert Michael

"AbbVie's robust business performance continues to support our capital allocation priorities. Our strong cash flow also provides capacity for continued business development to further augment our portfolio."

JANUARY 2025



CFO Alan Hippe

"The free cash flow also on a high level as you can see. So really money available to do further M&A"

JANUARY 2025



CEO Joaquin Duato

"External innovation has always been a very important part of our capital allocation strategy for JNJ. In fact, we are one of the top investors not only in M&A, but also in R&D (and) we are always looking for opportunities to be able to enhance our portfolio and our pipeline."

JANUARY 2025



CEO Chris Boerner

"Business development is a top priority as we navigate the back part of this decade. Financial strength and flexibility gives us strategic flexibility which includes doing business development"

FEBRUARY 2025



CEO Albert Bourla

"As we enter 2025, we'll be in a position from a cash and a de-levering perspective to have a more balanced capital allocation strategy, allowing us to do BD programs in 2025"

FEBRUARY 2025

M&A acceleration continued in 2024...

First 9 months of 2024

1.0 deal/week

Avg. Size **\$1.25 billion**

Largest Deal: **\$4.9 billion**



...slowed into/out of the election...

Oct/Nov/Dec '24 + Jan/Feb '25

0.6 deals/week

Avg. Size **\$0.8 billion***

Largest Deal: **\$14.6 billion**



...but started to re-accelerate

Mar/Apr/May/June '25

1.0 deal/week

Avg. Size **\$1.35 billion**

Largest Deal: **\$9.1 billion**



We expect M&A to continue to inflect meaningfully in 2025

Source: Bloomberg Transcripts, quotes from 1Q24 Earnings Calls; biopharmadive.com

Note: Acquired companies shown here are not necessarily representative of portfolio holdings at the time of acquisition

*excludes Intra-Cellular



WORLDWIDE HEALTHCARE TRUST

Portfolio & Positioning

Positioning

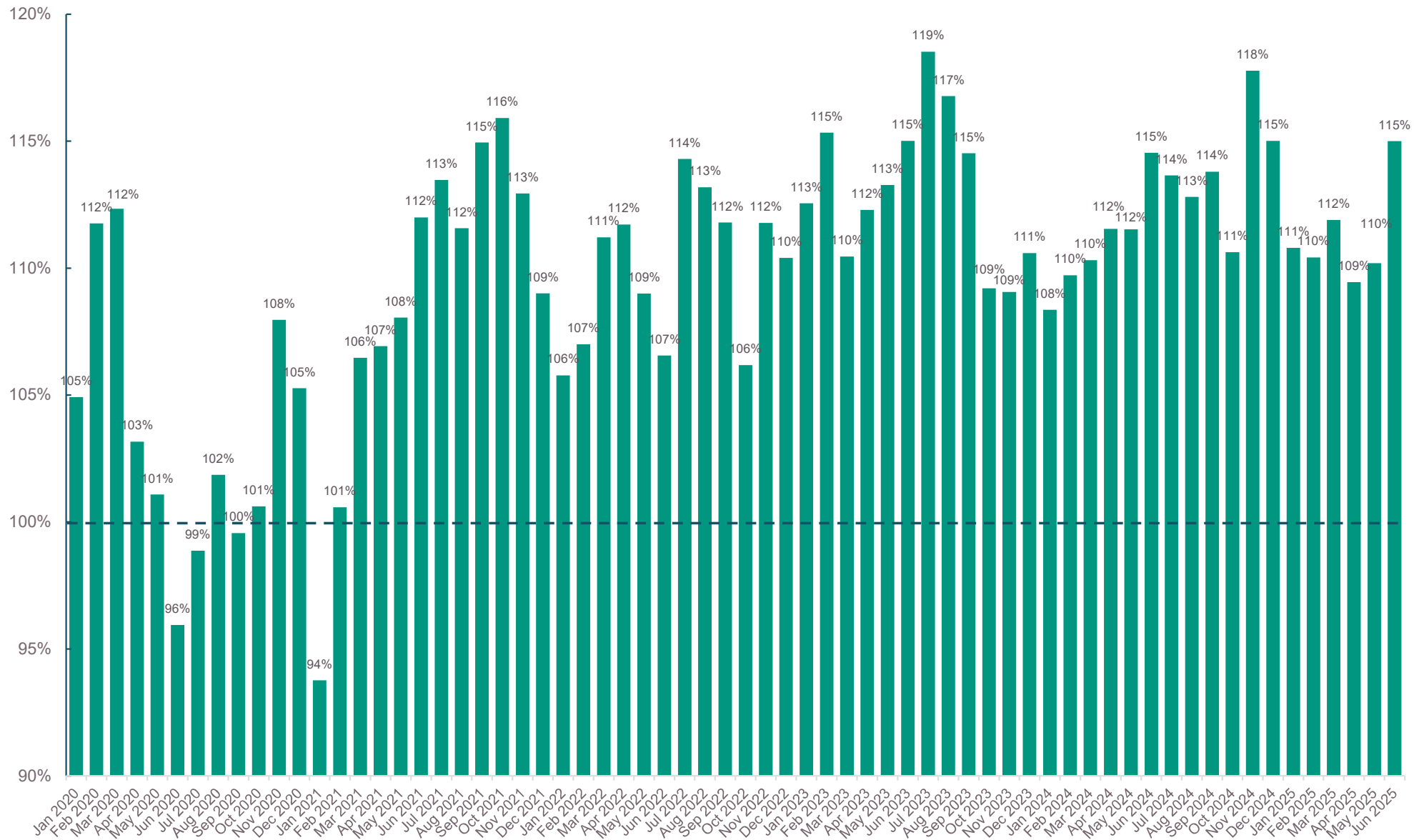
Focused on innovation and growth on a global basis

Subsector	WWH %NAV	MSCI World HC	Delta
Pharmaceuticals	20.4	45.2	(24.7)
Big Pharma	18.2	40.1	(21.9)
Spec Pharma/Generics	2.2	5.0	(2.8)
Biotechnology	26.9	8.9	18.0
Big Biotech	2.7	6.6	(4.0)
Emerging Biotech	24.2	2.2	22.0
Life Science Tools	7.8	8.6	(0.9)
Medtech/Devices	32.6	19.6	12.9
Healthcare Services	7.7	13.9	(6.2)
Japan	3.1	3.8	(0.7)
Emerging Markets	12.2	0.0	12.2
Privates	4.3	0.0	4.3
Total	115.0	100.0	15.0

*Excludes Options. Basket positions have their constituents allocated to their respective subsectors. Future weightings may differ.

WWH Leverage over Time

30 June 2025



Source: OrbiMed, Bloomberg PORT



WORLDWIDE HEALTHCARE TRUST

Looking Ahead

The Next 30 Years: Therapeutics

New technologies, targets, and modalities all with curative intent



Neurology

Neurodegenerative diseases will be treatable, curable, and even prevented



Immunology

Today's therapies will be replaced by disease eradicating technologies



GLP-1 Medications

Combinations of new and existing targets to create SUPER MEDICINES for the treatment of CV and Metabolic diseases



Genetic Diseases

An explosion of new gene therapy medicines – safer and easier – all with curative applications



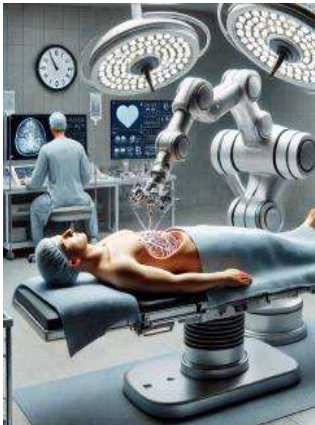
Oncology

Moving cancer to the “chronic disease” category and advancing more cures

Continued acceleration of drug discovery, development, and cures through expansion of druggable targets and personalized medicine

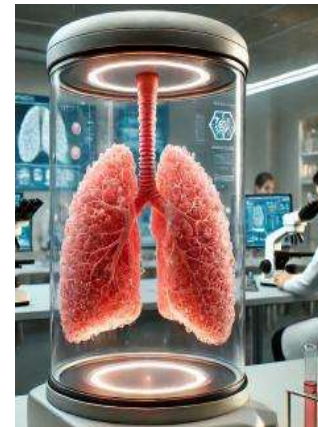
The Next 30 Years: Non-Therapeutics

These overarching themes will drive healthcare over the next three decades



Robotic Surgery

Fully autonomous surgical robots



Organ Replacement

Advances in stem cell, digital, and robotic technologies will impact all parts of the body



Diagnostics

A revolution in diagnostics along with personalized treatment regimens will create earlier interventions for cures and disease prevention



Artificial Intelligence

AI to replace primary care providers for diagnosis and deriving treatment regimens

A material shift in how patients are diagnosed and treated will improve convenience, throughput, and outcomes

Dramatic Healthcare Cost Deflation?

Radical changes to the overall healthcare system driven by AI



Radical Changes:

- 1 Drug Discovery
- 2 Drug Development
- 3 Diagnosis
- 4 Treatment
- 5 Personalized Medicine
- 6 Medical Technology
- 7 Healthcare Services
- 8 More Cures



<10% of US Healthcare spend is on Prescription Medicine*

The confluence of changes throughout healthcare could dramatically lower overall costs

*Source: [https://www.cms.gov/newsroom/fact-sheets/national-health-expenditures-2022-highlights#:~:text=Retail%20Prescription%20Drugs%20\(9%25%20share,home%20and%20community%2Dbased%20waivers.](https://www.cms.gov/newsroom/fact-sheets/national-health-expenditures-2022-highlights#:~:text=Retail%20Prescription%20Drugs%20(9%25%20share,home%20and%20community%2Dbased%20waivers.)

Playbook for 2025 and Beyond

- 1 Committed to our Long-Term '*Recipe for Success*' 
- 2 Continue to Invest in Innovation 
- 3 Continue to Allocate to Growth 
- 4 New Products & Catalysts to Drive Value Creation 
- 5 High Expectations for M&A to Continue 
- 6 We Expect Political Headwinds to Subside 
- 7 Healthcare at Attractive Entry Point 
- 8 Overall Bullish Outlook for 2025 and Beyond 

Endnotes

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| Endnotes

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The MSCI World Health Care Index is a market-value weighted index of health care sector equities within the MSCI World Index, a free float-adjusted market capitalization weighted index that is designed to measure the equity market performance of developed markets. Index data for the MSCI World Health Care Index has been available since December 30, 1994. For the period from the fund's inception through December 30, 1994, returns of the MSCI World Health and Personal Care Index are used as a proxy for the MSCI World Health Care Index. The SPDR S&P Biotech ETF (the "XBI") is an exchange-traded fund that seeks to replicate the performance of the S&P Biotechnology Select Industry Index, an equal-weighted index. The NASDAQ Biotechnology Index (the "NBI") includes securities of NASDAQ-listed companies classified according to the Industry Classification Benchmark as either Biotechnology or Pharmaceuticals, which also meet other eligibility criteria, and is calculated under a modified capitalization-weighted methodology. Health Care Select Sector SPDR Fund (the "XLV") is an exchange-traded fund incorporated in the USA. The objective of XLV is to provide investment results that correspond to the performance of The Health Care Select Sector Index.

Where stated as "Net" or "TR" (or total return), the index return numbers include reinvestment of dividends net of withholding taxes, as calculated by the index provider.