Ref. No.: WOCK/SEC/SE/2024-25/063 21st October, 2024

BSE Limited Corporate Relations Department P J Towers Dalal Street Mumbai - 400 001 **Scrip Code: 532300**	**National Stock Exchange of India Limited** Exchange Plaza Bandra Kurla Complex Bandra (E) Mumbai - 400 051 **NSE Symbol: WOCKPHARMA**

Dear Sir/ Madam,

Subject: Disclosure under Regulation 30 of the Securities and Exchange Board of India (Listing Obligations and Disclosure Requirements) Regulations, 2015, as amended – Investor Presentation

Pursuant to Regulation 30 of the Securities and Exchange Board of India (Listing Obligations and Disclosure Requirements) Regulations, 2015, as amended, please find enclosed herewith a copy of the Investor Presentation for your records.

The said Investor Presentation has also been uploaded on the Company's website and can be accessed through the following link:

https://www.wockhardt.com/investors/analyst-investors/presentation/

Kindly take the same on record please.

Thanking you,

For Wockhardt Limited

Rashmi Dinesh Mamtura
Digitally signed by Rashmi Dinesh Mamtura
Date: 2024.10.21 08:32:47 +05'30'

Rashmi Mamtura
Company Secretary

Encls: A/a

Saving Lives 55 years

WOCKHARDT | LIFE WINS

Investor Presentation

October 2024

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Global *Research-Driven* multinational

77%
Revenues from International Business[1]

18.5%
Revenues from Biotechnology & Novel Antibiotics[1]

Novel Antibiotics | **Biotechnology** | **Pharmaceuticals** | **Vaccines**

1. FY24

Stronger business performance

76%
Y-o-Y EBITDA growth[1]

0.13
Net Debt : Equity ratio[2]

30% growth
for biosimilars in emerging markets[3]

INR 499 Cr.
Reduction in debt[4]

1. Growth in FY24 over FY23
2. As on 31st March 2024, excluding promoter debt & net of cash & cash equivalents and other bank balances (Net Debt: INR 476 Cr ; Equity: INR 3,662 Cr.)
3. Growth in FY24 over FY23
4. As at 31st March 2024 vs 31st March 2023, excluding promoter debt & net of cash & cash equivalents and other bank balances

Wockhardt's *portfolio of 6 novel antibiotics* is well placed to tackle **global Antimicrobial Resistance threat** that could potentially lead to **8 million deaths annually by 2050**

ZAYNICH®
(WCK 5222)

Global Phase III **>90%** recruitment completed

100% success*
in compassionate usage

MIQNAF®
(Nafithromycin)

Filed for **approval**
in India

3-day ultra short
oral therapy

EMROK® / EMROK O®

Commercialized
in India

Filed in
Emerging Markets

® Registered trademarks in India

**- 38 patients administered WCK 5222 under compassionate use*

Wockhardt is well poised for *growth*

ZAYNICH + MIQNAF

launches in India followed by global markets

Biosimilars

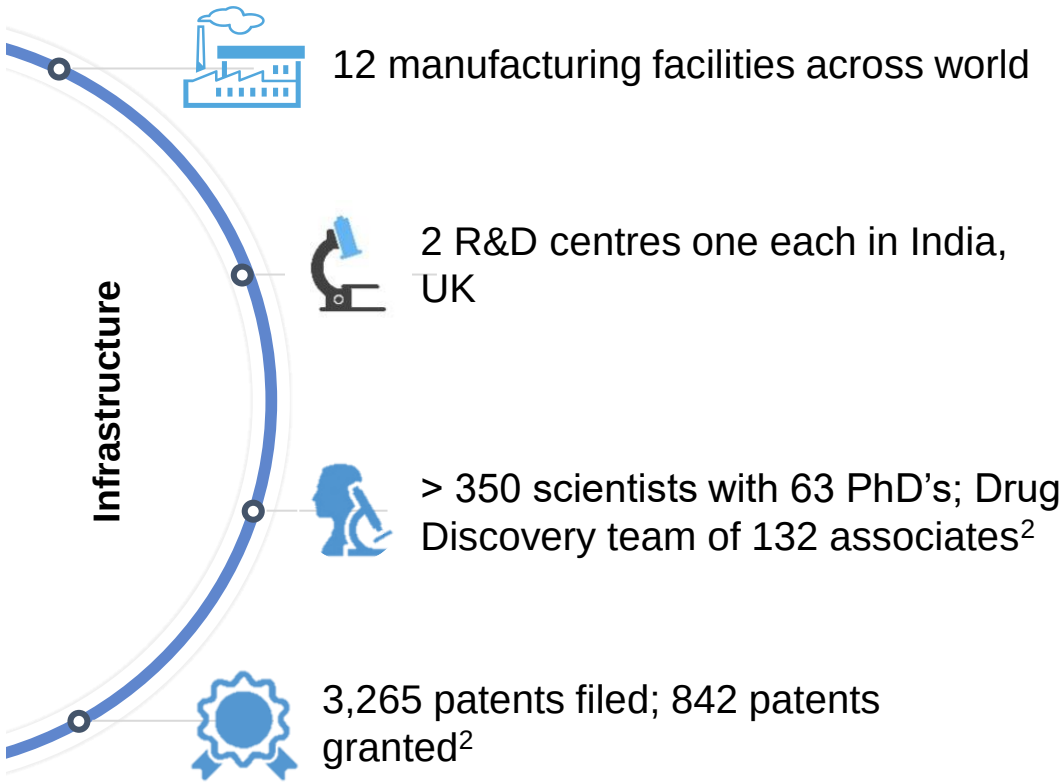
Insulin Analogs in Global markets

Wockhardt Snapshot

Snapshot of Wockhardt

Total Income[1] (FY24) **INR 2,879 Cr.**

EBITDA[1] (FY24) **INR 251 Cr.**



New Chemical Entity (focus on novel Antibiotics)

Biotechnology (focus on Diabetes)

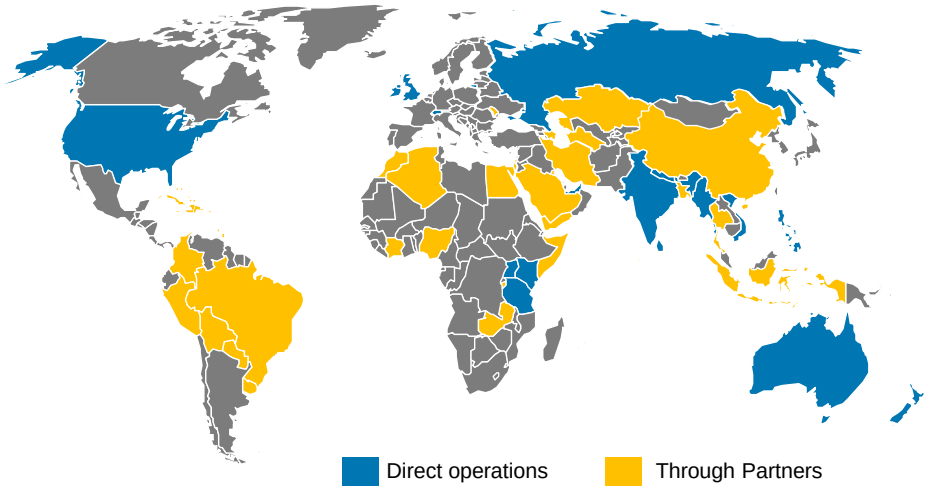
Vaccines

Pharma Generics

1. Excluding exchange rate fluctuations
2. As on 30th June 2024

Global footprint

Global operations



Capability across different segments

- Branded
- OTC
- Hospitals

- Novel Antibiotics
- Biotechnology
- Pharma Generics

12 manufacturing facilities across the globe

- Solids
- Injectables
- Biotechnology

- Liquids
- Nasal sprays
- Complex technologies

United Kingdom

- Retail & Hospital segments
- Vaccine CMO

37%

Ireland (& other EU)

- Branded Generic & OTC
- Retail pharmacies, wholesalers & hospitals.

13%

USA

- Restructuring - facility shutdown
- Shift to third party manufacturing
- Defocusing Pharma R&D

5%

Emerging Markets

- Presence in Southeast Asia, East Asia, Africa, the CIS region and Latin America countries

23%

India

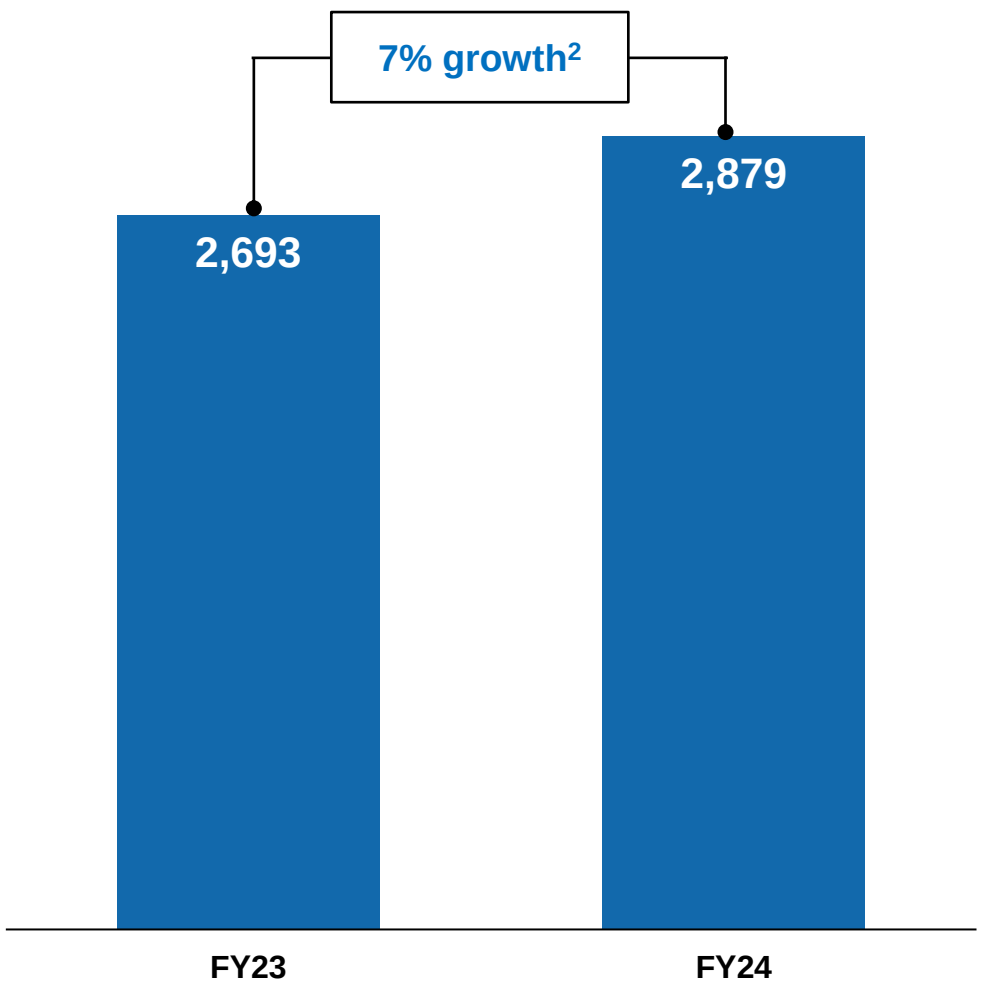
- Pain, Diabetes, Nephrology, CNS portfolio
- >650 field force

22%

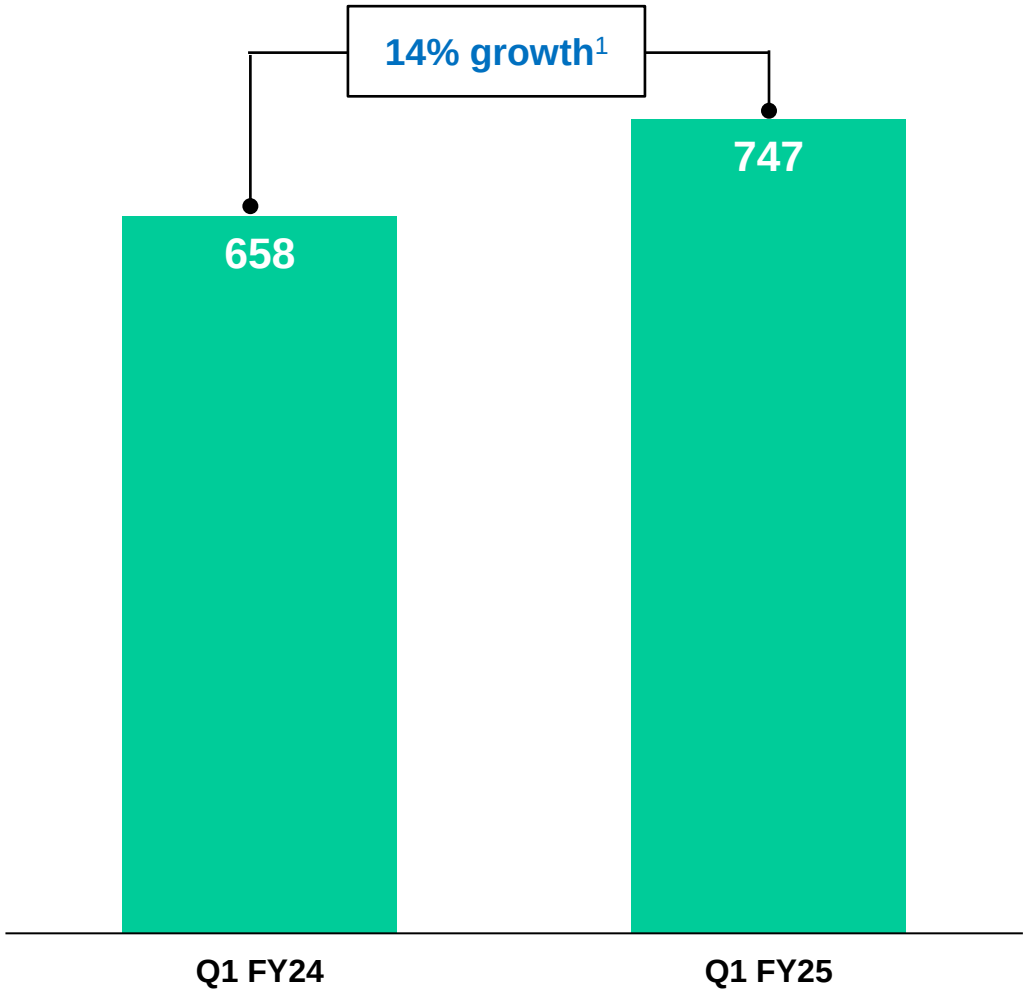
% sales revenue contribution for FY23 -24

Financial Highlight: 14% income growth[1]

Total Income[2] in INR Cr.



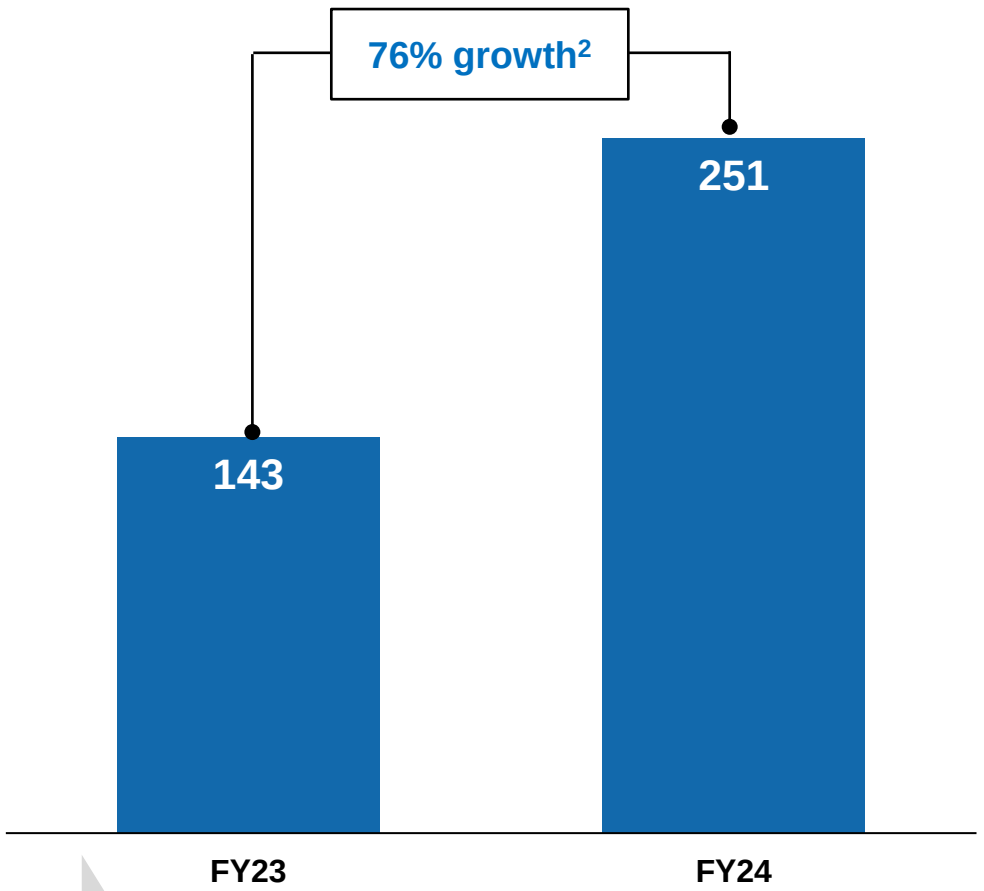
Total Income (Quarterly)[1] in INR Cr.



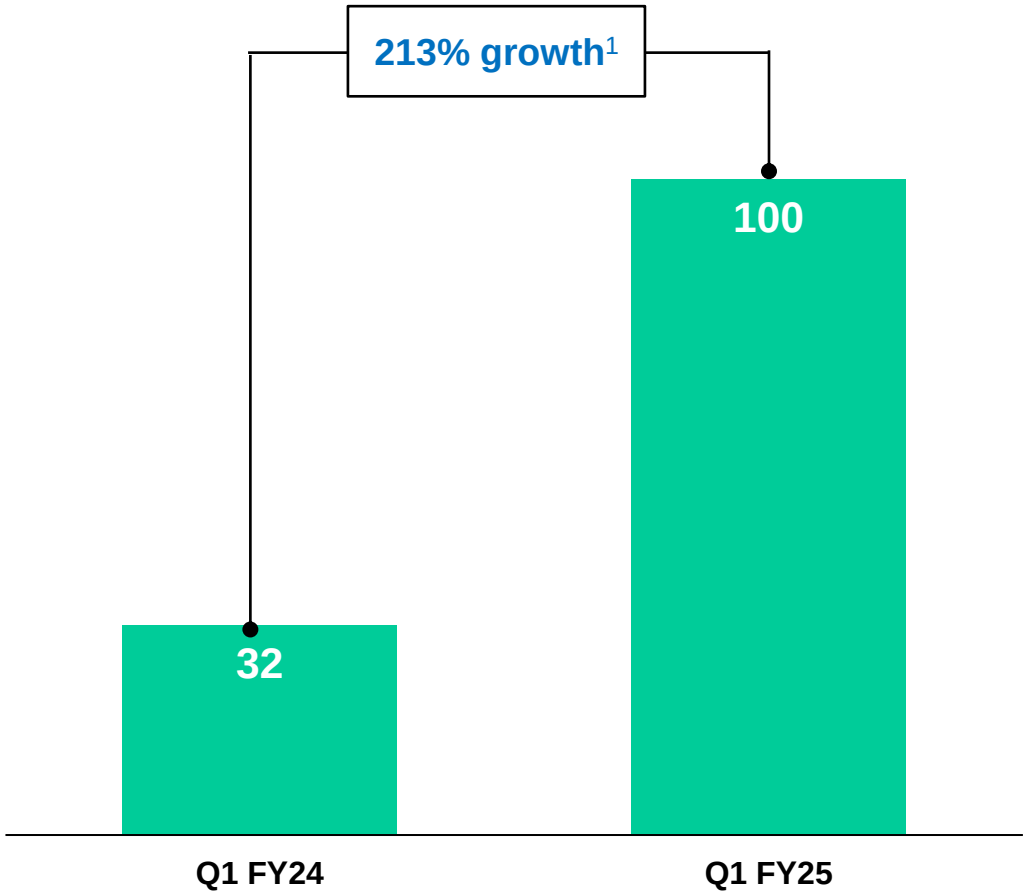
1. Q1 FY25 vs Q1 FY24, excluding exchange rate fluctuations
2. FY24 vs FY23, excluding exchange rate fluctuations

Financial Highlight: Improvement in EBITDA margins

EBITDA[2] in INR Cr.



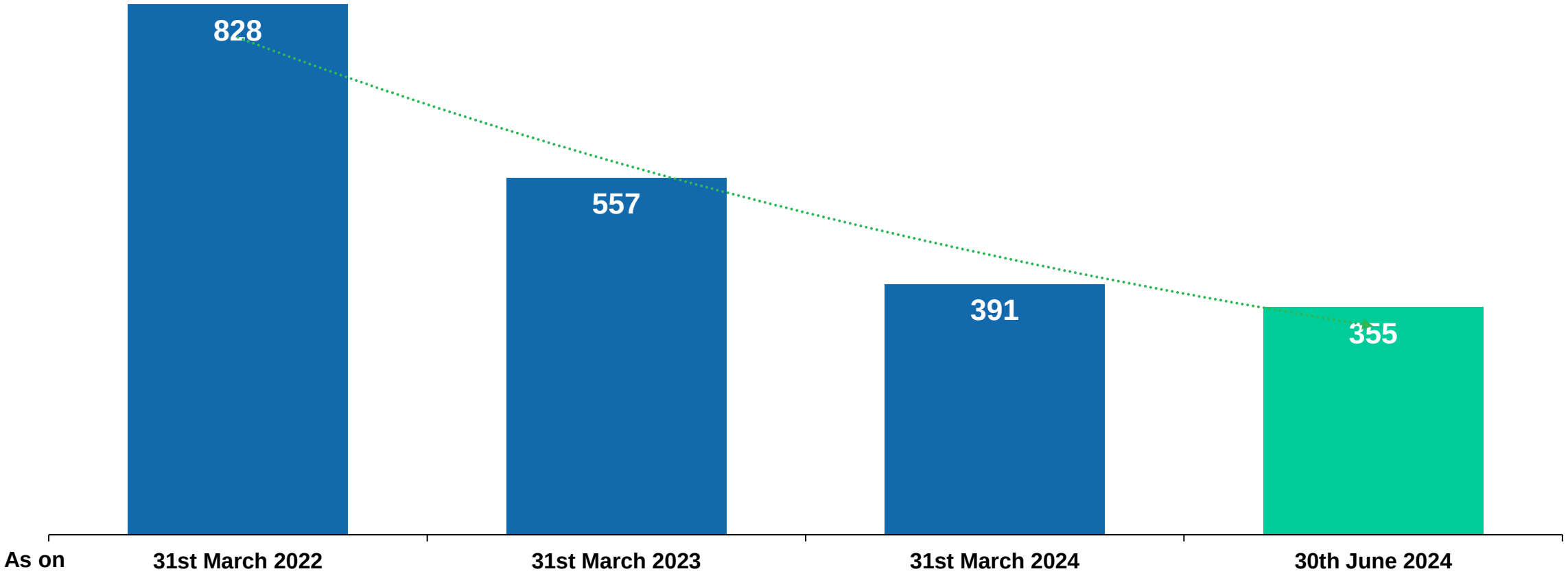
EBITDA (Quarterly)[1] in INR Cr.



1. Q1 FY25 vs Q1 FY24, excluding exchange rate fluctuations
2. FY24 vs FY23, excluding exchange rate fluctuations

Reduction in External Long-term Loans

Reduction in external long-term loan[1] (INR Cr.)

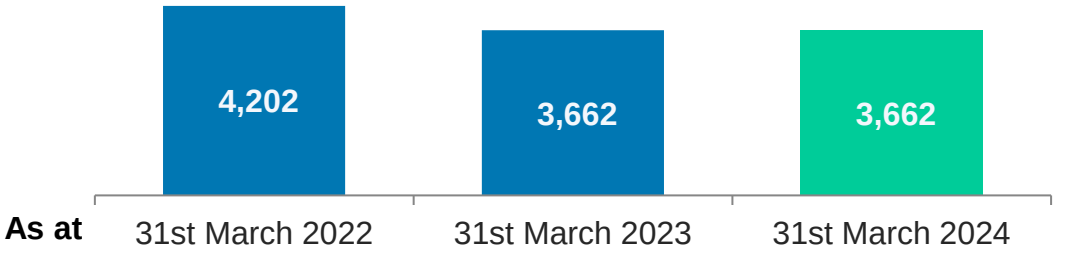


1. Excluding promoter debt & working capital loans

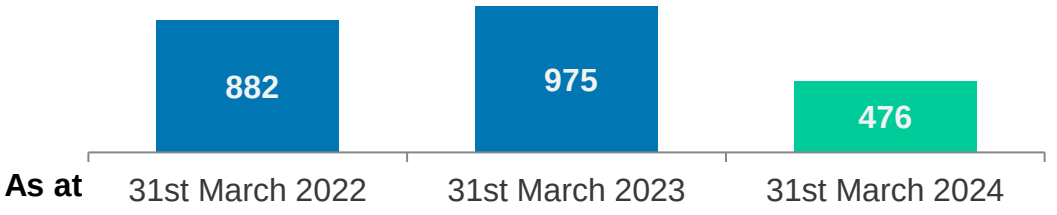
Net Debt : Equity @ 0.13[1]

Debt Reduction by INR 499 Cr.[2]

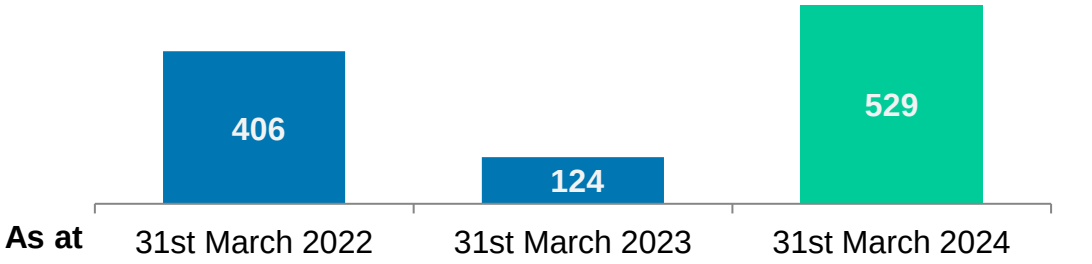
Equity INR Cr.



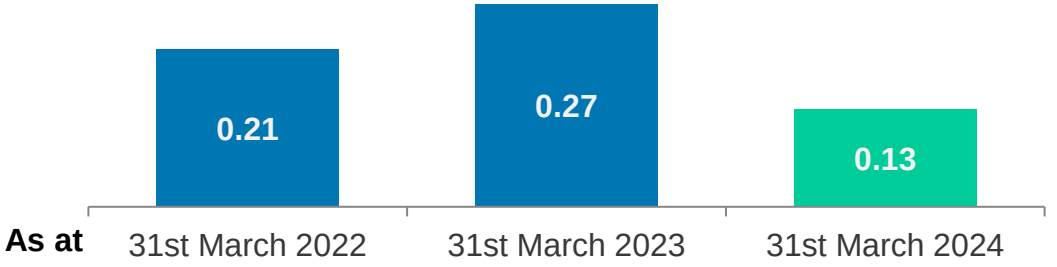
Debt[3] INR Cr.



Cash & Cash Equivalents and other Bank Balances INR Cr.



Net Debt-Equity Ratio[3]



1. As at 31st March 2024, excluding promoter debt & net of cash & cash equivalents and other bank balances (Net Debt: INR 476 Cr. ; Equity: INR 3,662 Cr.)
2. Reduction of debt as at 31st March 2024 vs 31st March 2023, excluding promoter debt & net of cash & cash equivalents and other bank balances
3. Excluding promoter debt & net of cash & cash equivalents and other bank balances

Additional Short-term and Mid-term growth drivers

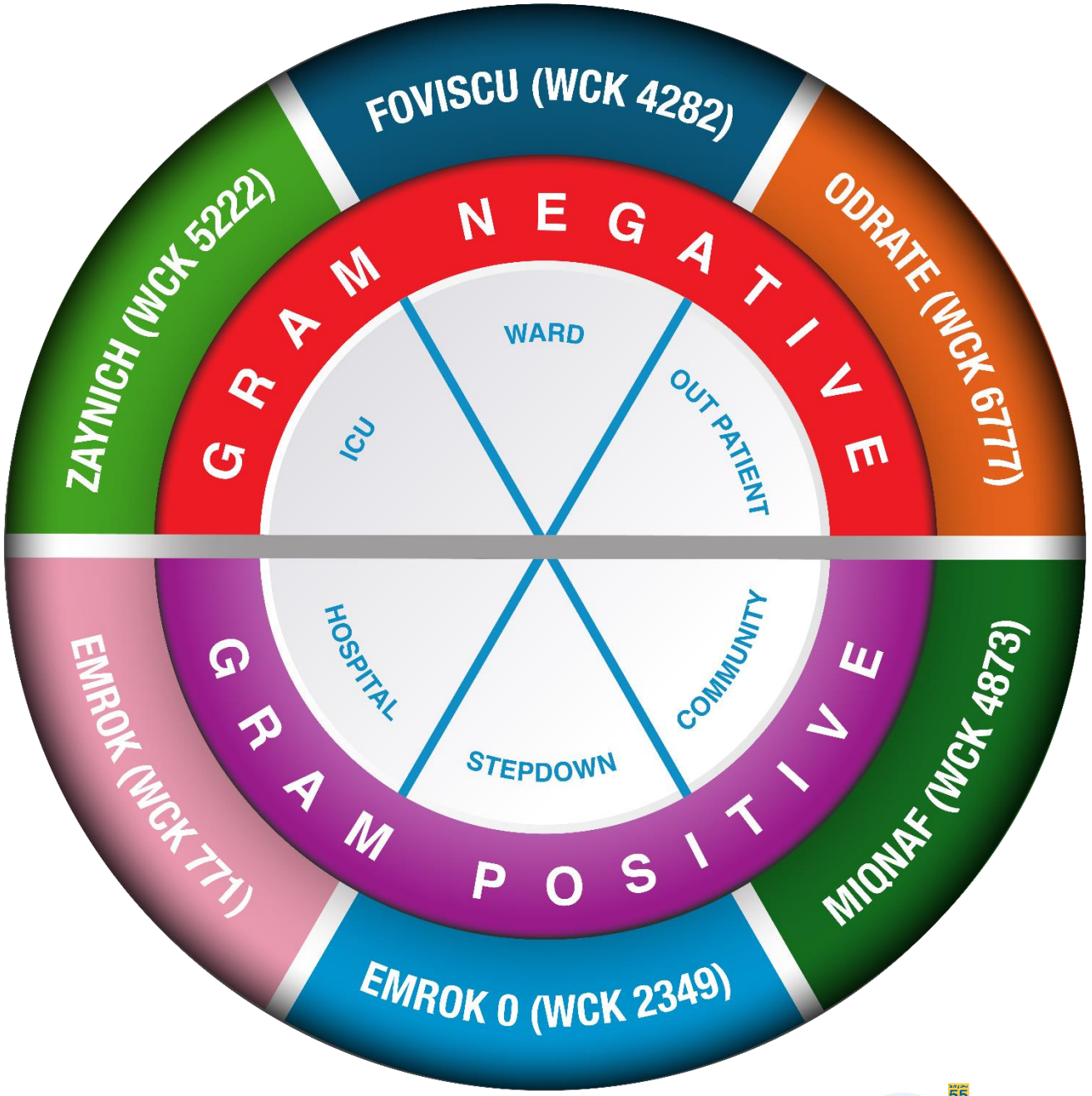
3 years growth drivers

1. Diabetes Biosimilars for India + Emerging markets – Glargine, new Insulin Analogs, Human Insulin
2. Novel drug discovery - Zaynich® (WCK 5222), Miqnaf® (Nafithromycin), Emrok® & Emrok O®
3. Vaccines

5 years growth drivers

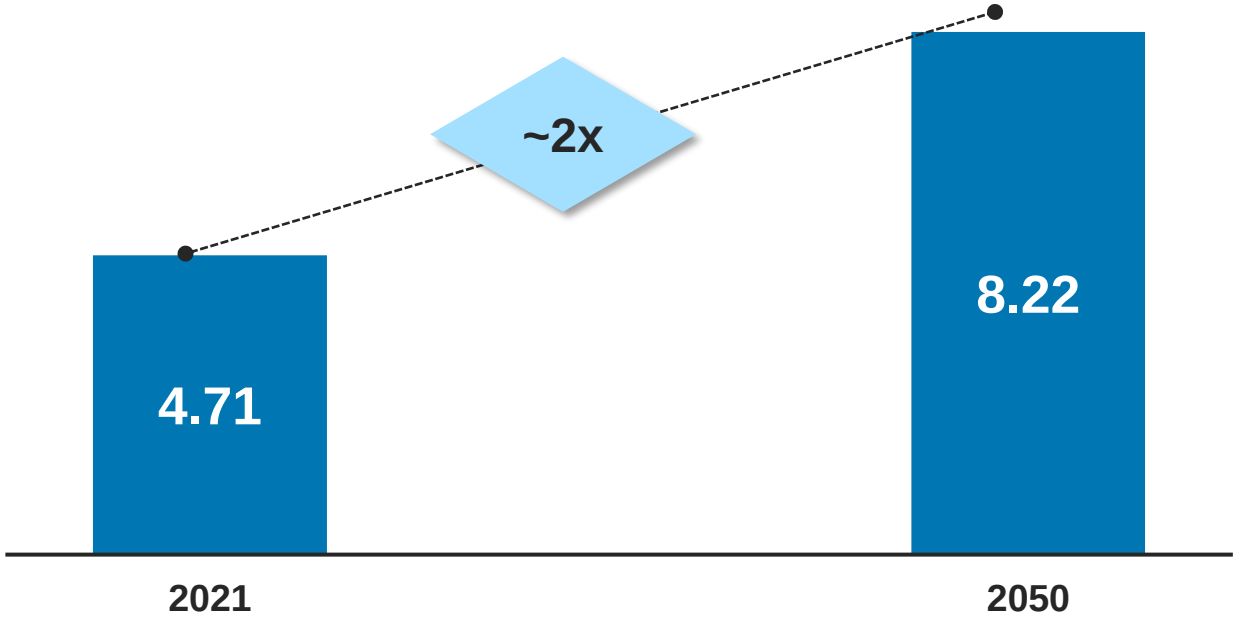
1. Novel drug discovery – Zaynich® (WCK 5222), Miqnaf® (Nafithromycin), Odrate® (WCK 6777)
2. Diabetes Biosimilars for global markets - Insulin Analogs

New Chemical Entity
(Novel Antibiotics)

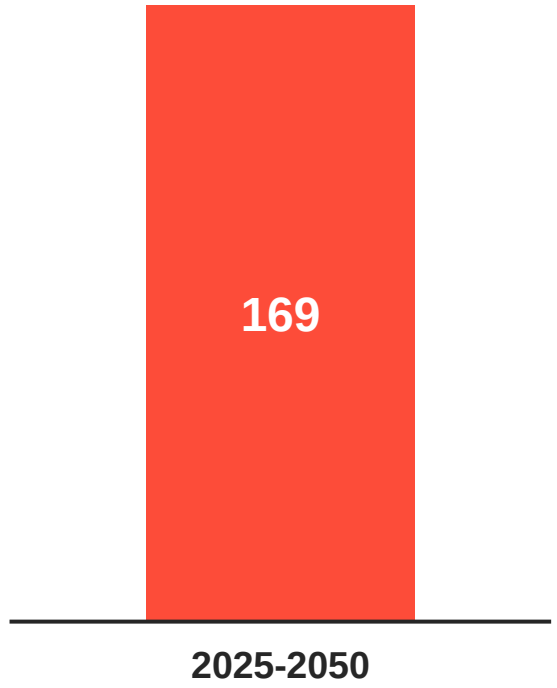


Annual deaths due to Anti Microbial Resistant (AMR) estimated to be > 8 million annually by 2050

Annual deaths associated with AMR in millions



Cumulative deaths associated with AMR in millions



The global economy faces a potential $100 trillion economic catastrophe due to AMR unless urgent action is taken

Wockhardt's Novel Antibiotics

~25
years

Focused commitment to Novel Antibiotics research leading to end-to-end Discovery & Development capabilities

6

Programs granted QIDP* status by US FDA denoting unmet needs; abridged trials, faster review and approvals by US FDA

*** Qualified Infectious Disease Product (QIDP)** status granted by US FDA eligible for fast track development process and priority review. QIDP status also grants five year extension to the market exclusivity in the United States

Novel Antibiotics pipeline encompassing all the Resistant Organisms

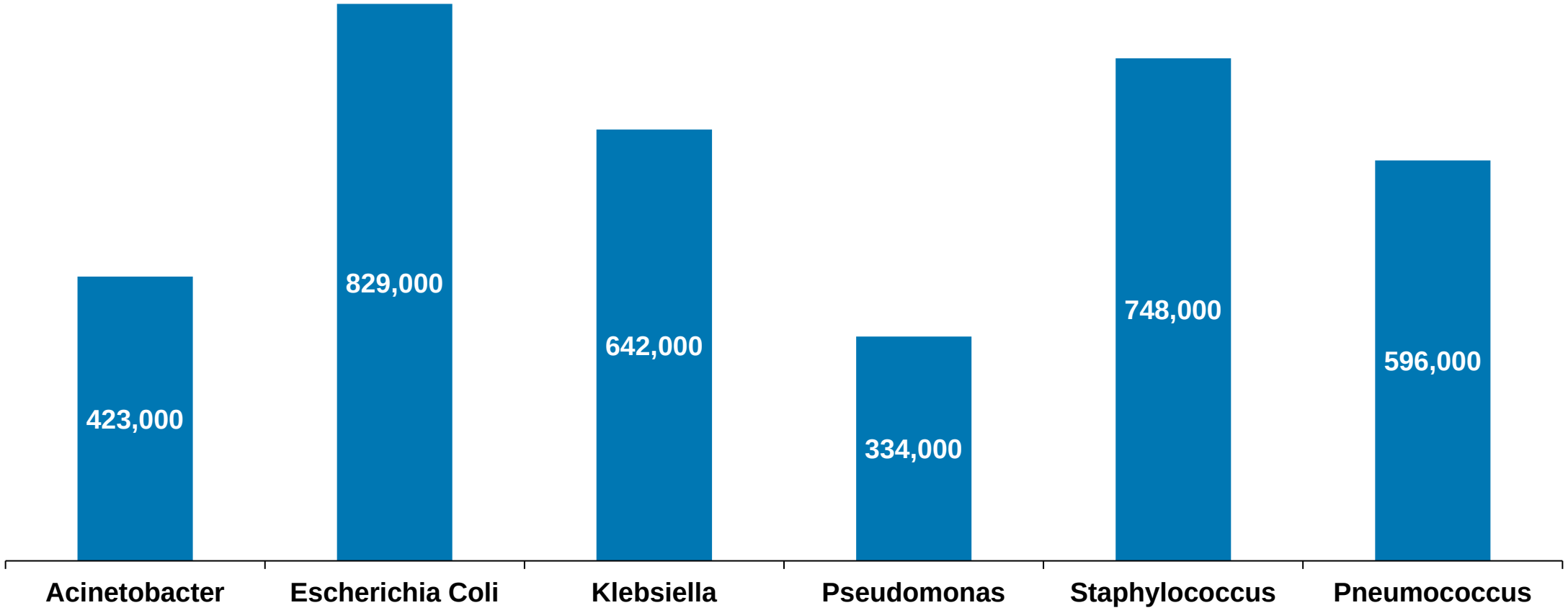
	Gram Negative Portfolio			Gram Positive Portfolio	
	ZAYNICH® ***(WCK 5222)***		**FOVISCU®** ***(WCK 4282)***	**ODRATE®** ***(WCK 6777)***	**EMROK® / EMROK O®**	**MIQNAF®** **(Nafithromycin)**
						
Status	Global ***Phase III*** ongoing	Carbapenem resistant pathogen study (India) ongoing	***Phase III ongoing***	***Phase I In collaboration with NIH (US)***	**Launched in India**; Filed in Emerging Markets	***Phase III*** completed NDA filed in India
Potential Indication	cUTI, HABP / VABP (Global) + Carbapenem Resistant infections (India)		cUTI HABP / VABP	cUTI	ABSSSI	CABP / RTI
Target Market	Global		Global	Global	Emerging Market	Emerging Market
Positioning	Destination therapy for difficult-to-treat Gram-ve Klebsiella, Acinetobacter and Pseudomonas		Empiric-use; Carbapenem-sparing Gram-ve	Out-patient therapy for MDR Gram -ve	MDR Gram+ve Anti-MRSA	Macrolide-resistant Respiratory Pathogens, Quinolone-Sparing

HABP: Hospital Acquired Bacterial Pneumonia; VABP: Ventilator Acquired Bacterial Pneumonia cUTI : Complicated urinary tract infections; CABP: Community-acquired bacterial pneumonia ; RTI: Respiratory Tract Infection; ABSSSI: Acute bacterial skin and skin structure infections; MDR: Multidrug resistance , MRSA: Methicillin-resistant Staphylococcus aureus; Gram –ve: Gram negative; Gram +ve: Gram positive

® Trademark registered in India

Top 6 Super bugs inflicting global mortality

Number of deaths associated with Anti-Microbial Resistance



ZAYNICH® (WCK 5222)

Establishing β-lactam enhancer - a new class of antibiotic to treat MDR/ XDR Gram-negative infections

WCK 5222 : Cefepime + Zidebactam [ZAYNICH®]

Late-stage novel mechanism-based, first-in-class life-saving destination therapy for MDR/XDR Gram-negative infections in ICU setting

Unmet Need

High Carbapenem resistance globally

Acinetobacter B. : 22%; Pseudomonas A. : 60% ;
E.coli+ Klebsiella P. : 17% - in US

On-therapy resistance reported for newer therapies

like Ceftazidime+ Avibactam

30- 60% mortality

in HABP/VABP & BSI with existing therapies

Solution: WCK 5222 : Cefepime + Zidebactam

Life Saving Safer therapy

for serious **Gram-negative infections** caused by ESBL[1], Class C, KPC[2], Enterobacterales, MBL[3]-producing **MDR/XDR[4] pathogens (incl. Pseudomonas & Acinetobacter)**

Novel mechanism of action

β lactam enhancer action, first in class drug
Novel MOA[5] ensures broadest coverage of pathogens

Demonstrated Potential for Clinical Efficacy in infections caused by diverse Gram-negative resistant mechanisms

XDR-Pseudomonas, Acinetobacter and Enterobacterales infections, basis global coverage

PK/PD[6] adequacy

Scientifically selected dosing regimen for critically-ill patients to offer consistent efficacy thus simplify the management of such patients

1: Extended spectrum beta-lactamase 2: Klebsiella pneumoniae carbapenemase 3: Metallo-beta-lactamase 4: Multi Drug Resistant/ Extremely drug resistant
5: Mechanism of Action 6: Pharmacokinetics/ Pharmacodynamics

WCK 5222 : Cefepime + Zidebactam [ZAYNICH®]

Late-stage novel mechanism-based, first in class life-saving destination therapy for MDR/XDR Gram-negative infections in ICU setting

Indication potential

- **Complicated Urinary tract Infection**
- **Hospital acquired bacterial pneumonia / Ventilator associated bacterial pneumonia**
- **Complicated Intra-abdominal Infections**
- **Blood Stream infections**

WCK 5222

Patents: Compound & Composition patent granted in key markets

Qualified Infectious Disease Product (QIDP) status granted by USFDA

Key opinion leaders from US, EU and China

Treatment Regimen

7-14

Hospital injectable

TID for 7-14 days

Scientific Publications

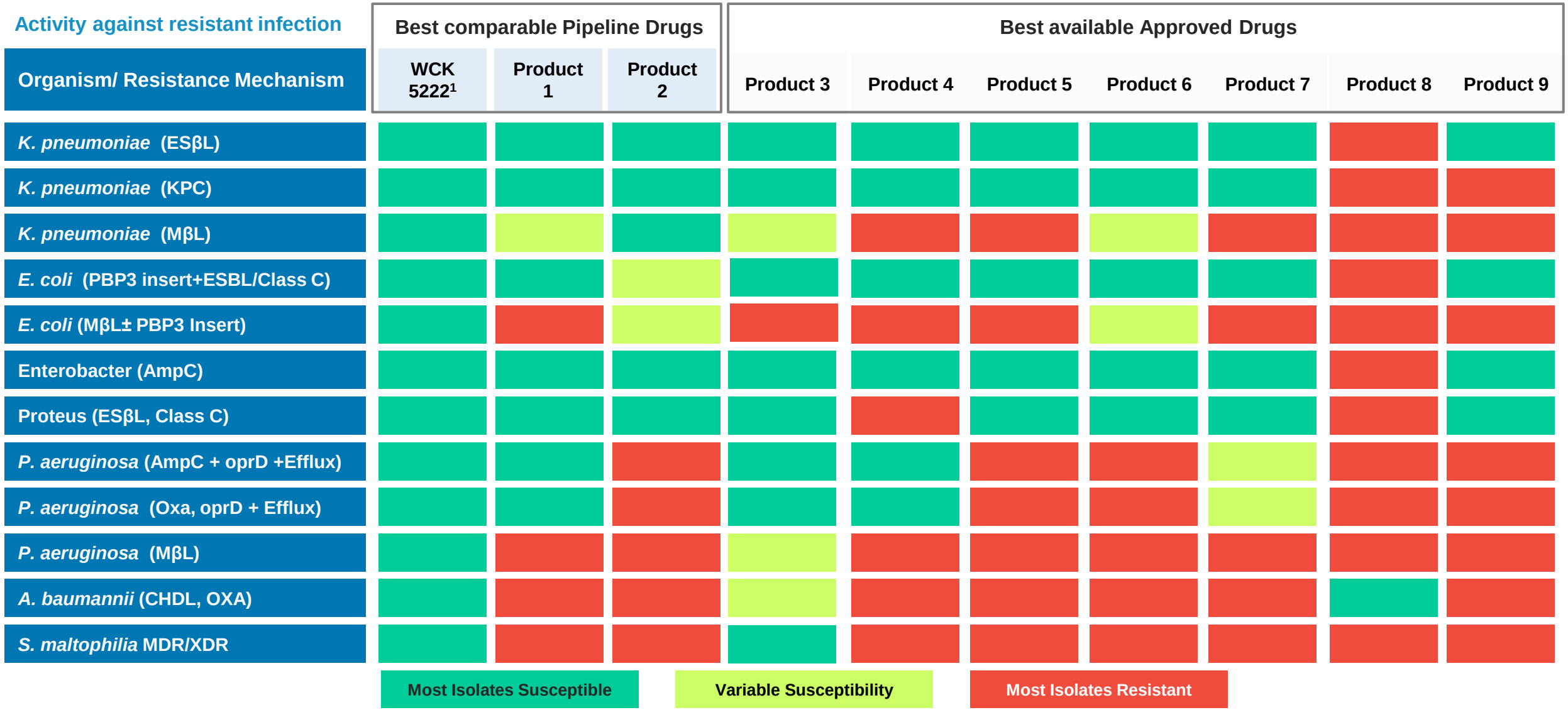
- 52 full length peer reviewed publications in top international journals by independent KOLs
- 50 posters presentations + oral talks in prestigious conferences

TID: Thrice-a –day

® Trademark registered in India

WCK 5222 displays broadest coverage of MDR/XDR Gram negative pathogens

Differentiation endorsed by leading global KOL based on published literature



1. WCK 5222: Wockhardt's combination of Cefepime (Cephalosporin) with Zidebactam (β-lactam enhancer); Product 1.Cefepime/taniborbactam ; Product 2.Aztreonam/avibactam ; Product 3. Cefiderocol ; Product 4.Imipenem/relebactam ;Product 5.Meropenem/vaborbactam ; Product 6.Plazomicin ; Product 7.Ceftazidime/avibactam ; Product 8.Sulbactam/durlobactam ;Product 9.Imipenem or meropenem

WCK 5222 Development status

WCK 5222 (Cefepime + Zidebactam) –
Destination therapy for XDR Gram Negative Acinetobacter & Pseudomonas

- Phase I studies completed
- Clinical Pulmonary PK, renal impairment and cardiovascular safety studies completed
- Single Phase III clinical study based on US FDA approved abridged development path
- **Global Phase III cUTI study ongoing:** ~90% patient recruitment completed
- **India Carbapenem-resistant clinical study ongoing:** ~60% patient recruitment completed

Unmet Need

- Carbapenem resistant Pseudomonas and Acinetobacter (20-95%) infections are desperately treated with efficacy and safety-compromised colistin/polymyxin/tigecycline.
- WCK 5222 would provide a safer and consistently efficacious therapy for such life-threatening infections.

Compassionate Use

100% clinical and microbiological success thus far in 38 patients with extremely difficult to treat infections, where all the available therapies failed

*-Phase II waiver

WCK 5222 : Key updates

1

Continued success under compassionate use program

38 patients treated with WCK 5222 resulting in complete clinical as well as microbiological cure

2

US FDA granted Expanded Access IND (compassionate use) for use of WCK 5222 in a young patient

Post treatment with WCK 5222, patient was cured of infection

3

CLSI, USA assignment of investigational susceptibility breakpoint of 64 µg/mL to WCK 5222 for major group of Gram-negative pathogens even before US FDA approval

Breakpoint has been granted for all three major Gram-negative pathogen families

4

Status of on-going clinical studies

- Global registration (Phase III) study: ~90% patient recruitment completed
- India Carbapenem-resistant clinical study ongoing: ~60% patient recruitment completed

Secured Global Supply Chain

- Manufacturing of WCK 5222 from US FDA approved European site
- Sourcing of sterile Cefepime from US FDA approved European site

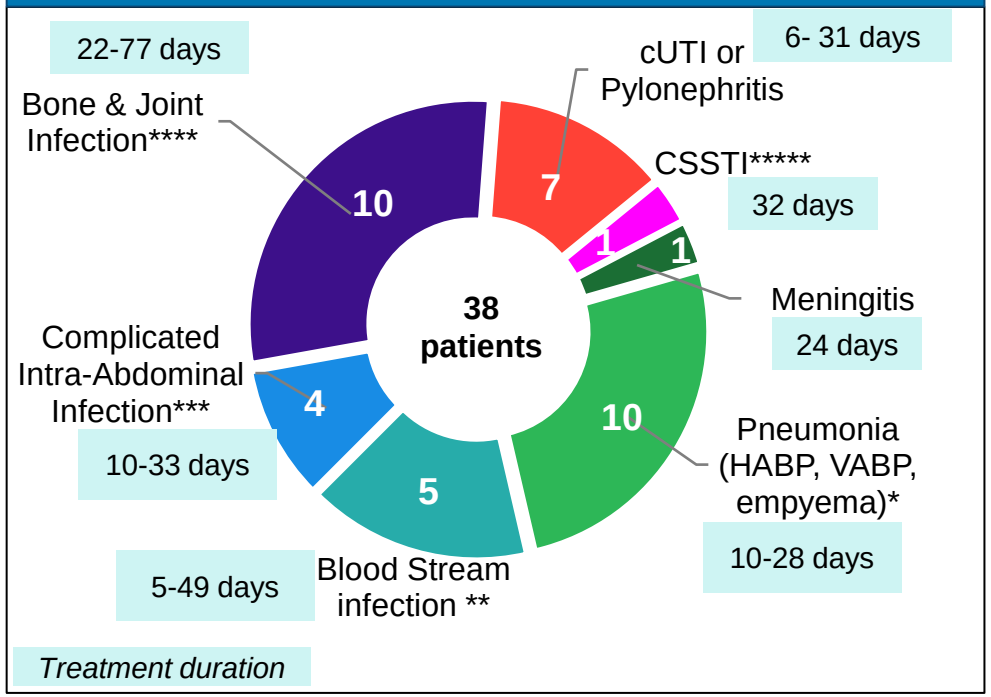
CLSI: Clinical & Laboratory Standards Institute, USA
GMP: Good Manufacturing Practices

1 ZAYNICH® (WCK 5222) has treated 38 patients under compassionate use program so far in India

Pathogens inflicting infections and associated indications of 38 patients

Complete clinical as well as microbiological cure attained in all patients

Indication wise split for patients treated under compassionate use



*--1/10 patients also had cIAI ; 3/10 patients had septic shock, 1/10 has cIAI and 1/10 had BSI; **- 3/5 patients also had Pneumonia; ***- 1/5 also had BSI & 1/5 had Osteomylitis; ****- 1/10 also has HABP & renal dysfunction and 1/10 had renal dysfunction; *****- Also had BSI & Pneumonia (HAP)

Pathogen	38 Patients treated	Treatment duration
Pseudomonas aeruginosa	29[a]	5 to 77 days
Acinetobacter baumannii + Pseudomonas aeruginosa	1[b]	10 days
Escherichia coli	1[c]	20 days
Serratia marcescens	1[d]	22 days
Klebsiella pneumoniae	5[e]	7 to 33 days
Acinetobacter baumannii	1[f]	7 days

a. 22/29 patients had Colistin / Polymyxin failure; 8/29 patients had CAZ/AVI & Aztreonam failure; 8/29 patients had Fosfomycin IV failure
b. Patient had Polymyxin & CAZ/AVI failure
c. Patient had CAZ/AVI + Aztreonam & Colistin failure
d. Patient had CAZ/AVI & Tigecycline failure
e. 4/5 Patients had CAZ/AVI + Aztreonam & Colistin failure; 1/5 had Polymixin/ Meropenem + Sulbactam failure
f. Patient had Cefiderocol, CAZ/AVI + Aztreonam , Polymixin B & Meropenem failure

WCK 5222 was effective even in patients that failed Colistin / Polymyxin-B treatment

2 US FDA under Expanded Access IND provision granted permission for use of WCK 5222 in a young patient

Patient with multiple sites of infection in large wounds

Patient was not responding to available antibiotic treatment

WCK 5222 was initiated on patient

post US FDA approval under Expanded Access IND provision

In 37 days after treatment with WCK 5222, patient was free of infection

3 CLSI (USA) assignment of susceptibility breakpoint of 64 µg/mL to WCK 5222 for major group of Gram-negative pathogens even before US FDA approval

MIC breakpoint has been granted for all three major Gram-negative pathogen

1 **CLSI (USA) recently granted a susceptibility breakpoint of 64 µg/mL**

For all the three major group of Gram-negative pathogens -Enterobacterales, Pseudomonas aeruginosa and Acinetobacter baumannii

2 **Supports much wider therapeutic scope of WCK 5222**

For coverage of carbapenem-resistant Acinetobacter baumannii (CRAB), carbapenem-resistant Enterobacterales and carbapenem-resistant Pseudomonas aeruginosa.

- **Generally, CLSI breakpoints are granted to products approved by US FDA.**
- **As an investigational drug, WCK 5222 received breakpoint during clinical developmental phase.**

4 Status of on-going clinical studies for WCK 5222

Global
cUTI study status

More than 90% patient recruitment completed

- Total Patients: 528
- Patients recruited: > 90%
- Sites: 57
- Countries
  - **Europe** : Poland, Bulgaria, Estonia, Slovakia, Lithuania
  - **North America:** USA
  - **Latin America** : Mexico
  - **Asia:** India,China

India
Carbapenem resistant organism (CRO) study status

India study status

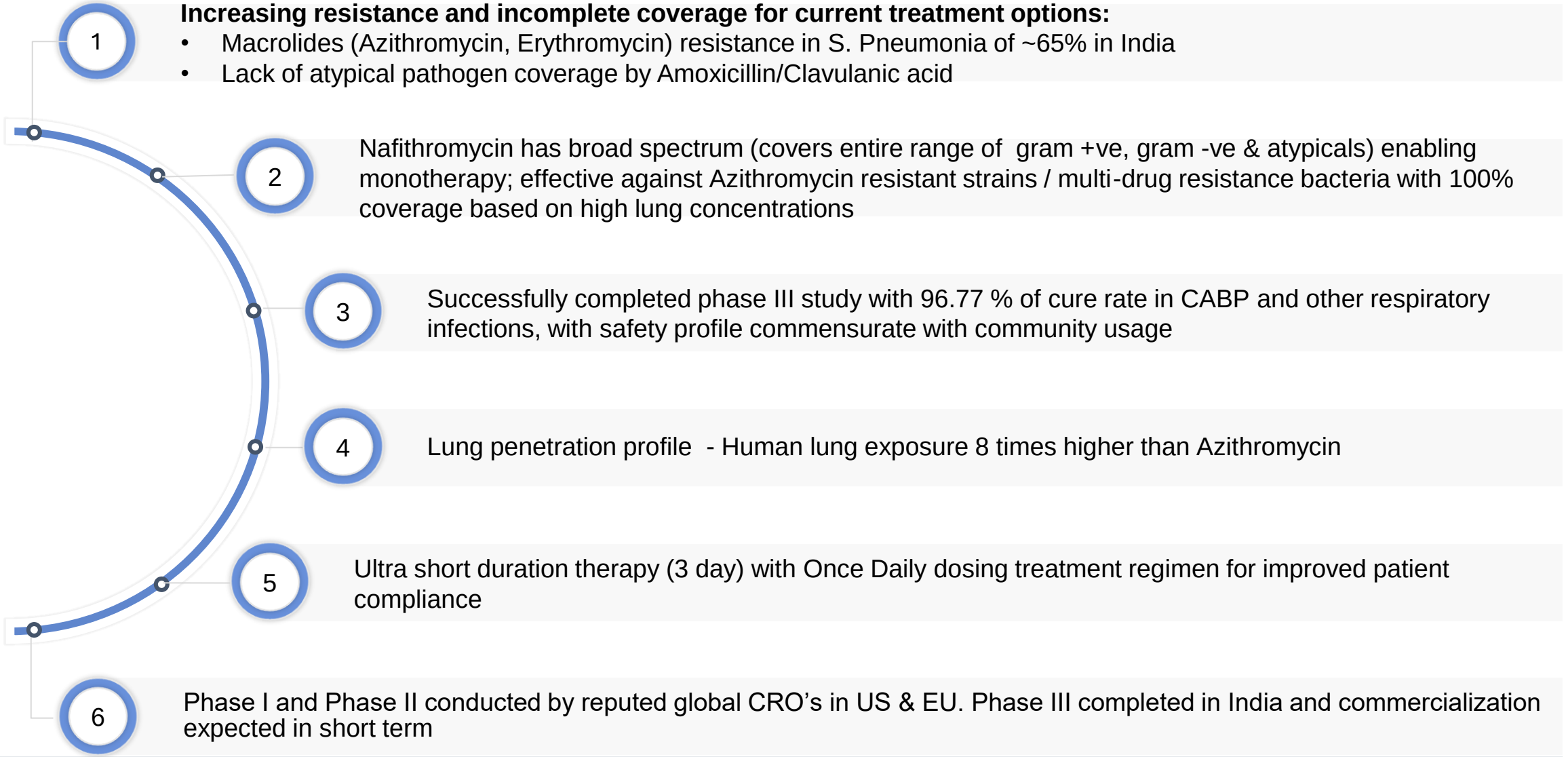
- Total Patients: 60
- Patients recruited: ~ 60%
- Sites : 19

Multi-indication study for carbapenem-resistant gram-negative infections

MIQNAF® (Nafithromycin)

Next generation respiratory tract infection antibiotic

Nafithromycin (Miqnaf®): Broad spectrum novel lactone ketolide for Community Acquired Bacterial Pneumonia (CABP) & Upper Respiratory tract infections(RTI)



1. **Increasing resistance and incomplete coverage for current treatment options:**
   - Macrolides (Azithromycin, Erythromycin) resistance in S. Pneumonia of ~65% in India
   - Lack of atypical pathogen coverage by Amoxicillin/Clavulanic acid
2. Nafithromycin has broad spectrum (covers entire range of gram +ve, gram -ve & atypicals) enabling monotherapy; effective against Azithromycin resistant strains / multi-drug resistance bacteria with 100% coverage based on high lung concentrations
3. Successfully completed phase III study with 96.77 % of cure rate in CABP and other respiratory infections, with safety profile commensurate with community usage
4. Lung penetration profile - Human lung exposure 8 times higher than Azithromycin
5. Ultra short duration therapy (3 day) with Once Daily dosing treatment regimen for improved patient compliance
6. Phase I and Phase II conducted by reputed global CRO's in US & EU. Phase III completed in India and commercialization expected in short term

Biotechnology

Wockhardt - Well positioned to capture value in diabetes biosimilars market

1. **Focused on the antidiabetic biologics market characterized by high entry barriers and limited competition**

2. **Wockhardt advantage of vertically integrated, competitive business model in Diabetes Biosimilars**

3. R&D infrastructure with ~100 scientists, Patented Insulin Pen, manufacturing encompassing major expression systems with **in-house US-FDA approved clinical facility**

4. **Flexibility** of drug product manufacturing at **India facility (2 sites) & UK facility** for **improved market access** and **competitive dynamics** in addition to drug substance facilities with 4 blocks (in India).

5. Foothold in **India** and **Emerging Markets (presence across >30 countries)** with planned foray in **Developed markets**

6. **Comprehensive antidiabetic biosimilars pipeline of Insulin analogs**

Note: Holds 23 products patent in Insulin pen

Competitive advantage by providing integrated solutions in Diabetes Biosimilars

Integrated capabilities

1. **R&D Capabilities:**
   - Yeast, Bacterial & Mammalian expression
   - Focused only on Insulin, Insulin Analogs
2. **Product development:**
   - In house process development, clone to vial.
   - In house analytical development & analytical bio-similarity studies (Structural and Functional)
3. **Drug Substance (DS) manufacturing**
   - DS facility with 4 blocks for different expression systems using E. coli, mammalian and yeast
4. **Drug Product (DP) manufacturing**
   - Flexibility of drug product manufacturing at India facility (2 sites) & UK facility for improved market access and competitive dynamics
5. **Regulatory**
   - Demonstrated experience of handling registration in India & Emerging markets
6. **Devices**
   - Patented delivery devices (Disposable & Re-usable)

Commercialization model

India

- Through own field force for promotion to Diabetologists/ Endocrinologists

Emerging Market

- Through partners/distributors in >30 countries
- End to end capabilities provides flexibility for leveraging local regulations.- e.g. flexibility to supply Drug Substance to partner where local manufacturing is given preference

Patented delivery devices (pen)

Vials

Cartridges

Enhanced competitive posture helps penetrate market

In-house R&D and clinical capabilities to develop antidiabetic biosimilars for global markets

Integrated R&D centers

In-house bioassay labs and clinical unit

~100 scientists including 14 PhDs[1]

46 product patents in biosimilar incl. **23** patents for pen device[1]

- Expertise across varied areas of biotechnology research - from **gene to drug product**
- Capability across 3 expression systems - **Yeast, Bacteria, Mammalian**
- Globally patented, in-house designed and developed **disposable and re-usable pens**
- Robust product pipeline at an advance stage of development

In-house bio-assay capability and…

- In-house lab for **structural characterization** to establish bio-similarity

…Clinical Pharmacokinetics & Biopharmaceutics (CPB) unit offers substantial cost advantage

- Includes **clinical facility with 76 beds** and Glucose clamp ward with **8 special beds**
- State-of-the-art infrastructure
- **Validated by major globally recognized regulatory authorities**

US FDA | **MHRA, UK** | **CDSCO, India** | **ANVISA, Brazil** | **ISO 15189, NABL** (pathology lab)

1. As on 30th June 2024

Integrated manufacturing infrastructure

Drug substance facilities

- Manufactures **all** recombinant biopharmaceutical **drug substances (DS)** at its **own facilities**
- Operates **DS facility with 4 blocks** for different expression systems using
  - **E. coli**
  - **Mammalian**
  - **Yeast**

Drug product facilities

- **3** fully equipped **drug product (DP) facilities**
- Facilities **handle various dosage forms**: cartridges, vials, pre-filled syringes, pen assembly
- Operations are supported by a **robust quality control and assurance infrastructure** and experienced staff

Facilities	Target markets	Dosage form
DP site 1 (India)	India & Emerging Markets	Cartridge
		Vial
DP site 2 (India)	India & Emerging Markets	Cartridge
		Vial
DP site 3 (UK)	Developed markets	Cartridge
		Vial

Consistent compliance track record for drug substance and drug product facilities from key regulatory bodies

WHO GMP issued by

CDSCO, India	ANVISA, Brazil	INVIMA, Colombia	FDA, Philippines	MOH, Thailand	NDA, Uganda	MOH, Nambia	TMMDA, Turkey

Diabetes Biosimilars for Emerging markets - Competitive scenario

Comprehensive antidiabetic biosimilars pipeline across Human Insulin & Insulin analogs

Commercialized products	
Product	**Target Market**
Recombinant Human Insulin	● ●
Glargine 100 IU	● ●

Pipeline : Insulin and Insulins analogs	
Product	**Target Market**
Glargine 100 IU	●
Aspart R	● ● ●
Lispro R	● ● ●
Aspart Mix	● ●
WCK 9406 (Fast-acting + Long-acting bio-better) *	● ●

**Wockhardt's innovative bio better*

● Developed markets ● India ● Emerging markets

Development status of Insulin analogues in Emerging Markets

	Aspart R	Aspart 30/70	Lispro R	WCK 9406
Process development	✓	✓	✓	✓
Process Scale Up	✓	✓	✓*	Planned
Drug substance validation batches	✓	✓	✓*	✓
Drug product validation batches	✓	Planned	Planned	Planned
PK/PD study	✓			
Analytical similarity	✓			

Filed in India

E.Coli host cell as platform technology for all above products
✓ Completed
* To be further scaled up

Status of Insulin analogues for Developed Markets

	Product	Insulin type	Development stage
1	Insulin Glargine	Long-acting Analogue	GMP batches for Clinical
2	Insulin Aspart	Rapid-acting Analogue	Product developed / Under optimization
3	Insulin Lispro	Rapid-acting Analogue	Product developed / Under optimization

Wockhardt differentiated business model: comprehensive range, cost competitiveness & market access

Wockhardt Cost advantages

A Product development stage

Advanced clinical pharmacokinetic unit

- **1-2** pharmacokinetic and pharmacodynamic **(PK/PD) studies** required per product

In-house Bio-assay labs

- Several companies outsource bio-similarity testing resulting in higher costs

In-house capabilities offer time advantage

B Product manufacturing stage

Indigenously designed and patented pen device

- **Amongst the few biosimilar cos.** with an indigenously designed, globally patented pen device

Vertically integrated manufacturing facilities

- Advancing to **E. coli platform for Human Insulin**, unlike most peers, helps **capacity** to be scaled up

Cost competitiveness shall be a key differentiator as Wockhardt gains market share globally

Abbreviations

®: Registered
~: Approximate
A.baumannii: Acinetobacter baumannii
ABSSSI: Acute bacterial skin and skin structure infections
AmpC: Ampicillin-resistance gene group C
AMR: Anti Microbial Resistance
ANVISA: Agency Nacional de Vigilance Sanitaria
β-lactam: Beta Lactam
Bn: Billion
BSI: Blood Stream infection
CABP: Community-acquired bacterial pneumonia
CAZ/AVI: Ceftazidime-avibactam
CDSCO: Central Drugs Standard Control Organization
cIAI: Complicated Intra-abdominal Infections
CIS: Commonwealth of independent state
CLSI: Clinical & Laboratory Standards Institute, USA
CHDL: High-density lipoprotein cholesterol
CMO: Contract manufacturing organization
CNS: Central nervous system
Cr.: Crore
CRAB: Carbapenem-Resistant Acinetobacter baumannii
CSSTI: Complicated skin and soft tissue infection
cUTI : Complicated urinary tract infections
DP: Drug Product
DS: Drug Substance
EBITDA : Earnings before interest, taxes, depreciation, and amortization
E.coli: Escherichia coli
ESBL-Extended spectrum beta-lactamase
EU: European Opinion
GMP: Good Manufacturing Practices
Gram –ve: Gram negative
Gram +ve: Gram positive
HABP: Hospital Acquired Bacterial Pneumonia
ICMR: Indian Council of Medical Research
ICU: Intensive care unit
IND: Investigational New Drug
INVIMA: National Institute of Drug and Food Surveillance
INR: Indian rupee
ISO: International Organization for Standardization
IU – International Unit
IV: Intravenous
KOLs: Key Opinion Leaders
K Pneumoniae :Klebsiella pneumoniae
KPC: Klebsiella pneumoniae carbapenemase
MAT: Moving Annual Total
MBL: Metallo-beta-lactamase
MDR: Multidrug resistance
MDR/XDR: Multi Drug Resistant/ Extremely drug resistant
MHRA: Medicines and Healthcare products Regulatory Agency
MIC: Minimum Inhibitory Concentration
Mn – Million
MOA: Mechanism of Action
MOH – Ministry of Health
MRSA: Methicillin-resistant Staphylococcus aureus
NABL: National Accreditation Board for Testing and Calibration Laboratories
NCE: New chemical entity
NDA: New Drug Application
NDA Uganda: National Drug Authority Uganda
NIH: National Institute of Health
NPRA – National Pharmaceutical Regulatory Agency
OPD: Outpatient Department
oprD: Outer membrane porin
OTC: Over the counter
Oxa: Oxacillinases
P. Aeruginosa: Pseudomonas Aeruginosa
PBP3: Penicillin binding protein 3
PhD: Doctor of Philosophy
PK: Pharmacokinetics
PK/PD – Pharmacokinetics/Pharmacodynamics
QIDP: Qualified Infectious Disease Product
R&D: Research and Development
RTI: Respiratory Tract Infection
S. maltophilia : Stenotrophomonas maltophilia
TID: Thrice a day
TMMDA – Tanzania Medicines and Medical Devices Authority
UK: United Kingdom
US: United States
US-FDA: United Stated Food and Drug Administration
VABP: Ventilator Acquired Bacterial Pneumonia
WHO: World Health Organization
Y-o-Y: Year-over-year


Thank You
WOCKHARDT
LIFE WINS
WOCKHARDT
TOWERS