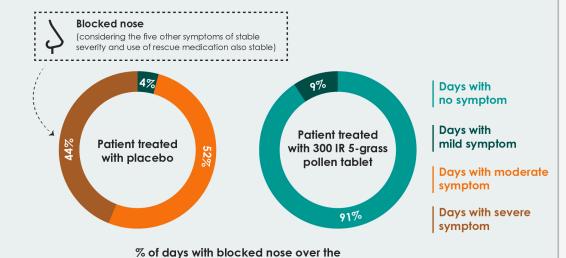
This work has been supported by an institutional grant from Stallergenes Greer.

Early Short-Term Benefits with AIT³⁻⁷

Significant reduction in ACSMS of at least -2.31 with the 300 IR 5-grass pollen tablet versus placebo during the pollen period in adults, adolescents, and children with grass pollen-induced ARC

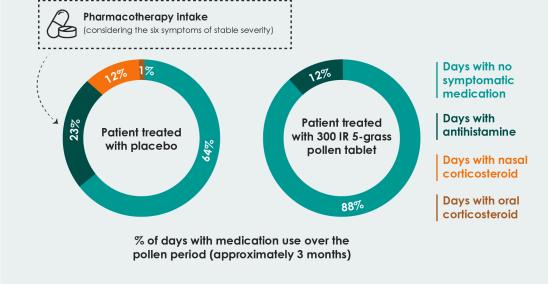
This difference can be translated into concrete patient outcomes, as illustrated by the patient cases below

Patients treated with the 5-grass tablet can expect to be free from moderate to severe blocked nose over the pollen period.



pollen period (approximately 3 months)

Patients treated with the 5-grass tablet can expect to be free from oral corticosteroid use over the pollen period.



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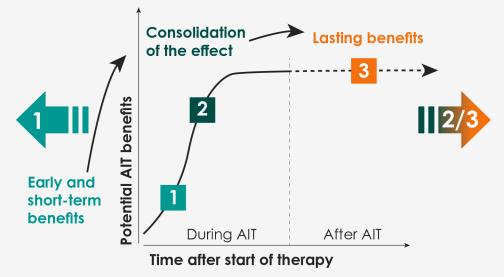
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AA: Allergic Asthma; AC:Allergic Conjunctivitis; ACSMS: average combined symptom and medication score; AIT: allergen immunotherapy; AH: antihistamines; AR: allergic rhinitis; ARC: allergic rhinoconjunctivitis; CI: confidence interval; HDM: house dust mite; INCS: intranasal corticosteroid; HP: historical pre-SLIT period; IR: index of reactivity; OCS oral corticosteroid; SDT: symptomatic drug treatment; SLIT: sublingual immunotherapy

*AIT is generally prescribed following or in

Three Key Milestones in Patient **Experience with AIT***



At least 3 years recommended to achieve full potential of AIT.²

Consolidation of the Effect

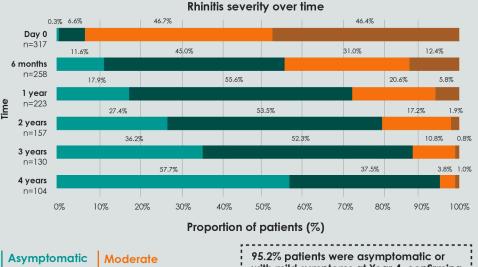
Japanese Long-Term Real-Life Study⁸

Prospective, observational study

538 patients evaluable for safety and 383 for effectiveness

300 IR HDM SLIT tablet administered for up to 4 years in daily practice

Objective: Long-term safety and effectiveness evaluation



Mild Severe or very severe

with mild symptoms at Year 4, confirming the sustained effectiveness of the 300 IR HDM SLIT tablet for up to 4 years of continuous use.

Conclusion

AIT is associated with concrete meaningful patients benefits as early as the first months of treatment with an effect consolidating over time.

In addition, AIT has the potential to halt the allergic march and therefore prevent disease worsening and asthma onset.

In current practice, shared decision making and patient education may improve their adherence and satisfaction with AIT.

Consolidation of the Effect and Lasting Benefits

EfficAPSI Study⁹⁻¹²

- Real-life, retrospective, pharmaco-epidemiological, longitudinal study using the French National Health data system
- 99,538 SLIT liquid patients and 333,082 non-AIT control patients (SDT only)
- 9 years of follow-up 2010-2018
- Objective: SLIT liquid impact on asthma onset and HCRU on the long term

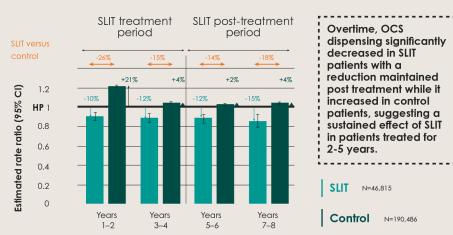


Reduction of the risk of asthma onset with SLIT liquid versus SDT¹⁰

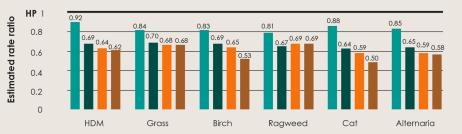
	Main definition: more sensitive First occurrence of asthma drug dispensing, hospitalisation, or long-term disease for asthma	Secondary definition: more specific First occurrence of hospitalisation or LTD for asthma	Tertiary definition: both sensitive and specific Omalizumab or 3 ICS +/- LABA dispensing or hospitalisation or LTD for asthma
Patients without pre-existing asthma n=69,166	-23%	-34%	-38%

SLIT liquid significantly reduced the risk of asthma onset consistently for all definitions, age groups, and allergens.

Reduction in OCS dispensing in SLIT liquid patients maintained over time versus SDT¹¹



Reduction in INCS dispensing in SLIT liquid patients over time during and after treatment cessation¹²



Consistently for all allergens:

- INCS dispensing significantly decreased by 8%-50% along the study, especially during post-treatment periods
- Similar impact observed for AH but greater decrease for INCS

In control patients with all types of allergens, dispensing over time of INCS and AH decreased by ~10% and increased by up to 50%, respectively

Years l Years

