

PRESS RELEASE

Novartis data underscore pioneering scientific innovation in Hematology and Oncology at ASH and SABCS

- *Positive results from ionalumab pivotal Phase III trial in ITP patients previously treated with corticosteroids to be presented as late-breaker*
- *Scemblix data across clinical and real-world settings offer new evidence informing CML care amid evolving patient needs*
- *96-week pelabresib Phase III data represent longest follow-up of first-line myelofibrosis patients in randomized combination trial*
- *Kisqali NATALEE and MONALEESA data add to evidence of long-term benefits for early and metastatic breast cancer patients*

Basel, November 25, 2025 – Novartis will present data from over 70 abstracts, including investigator-initiated trials at the 67th American Society of Hematology (ASH) Annual Meeting & Exposition and 2025 San Antonio Breast Cancer Symposium® (SABCS). Featured among these latest advances in hematology and oncology are 11 oral presentations, with the Phase III VAYHIT2 trial for ionalumab in immune thrombocytopenia (ITP) accepted as a late-breaker abstract.

“For decades, Novartis has redefined the future of hematology and oncology, and we’re building on that foundation with compelling new data presented at ASH and SABCS,” said Mark Rutstein, M.D., Global Head, Oncology Development, Novartis. “These data underscore how we seek to set new standards for transformative care, with the aim of turning cutting-edge innovation into meaningful impact for patients.”

Key highlights of data accepted by ASH include:

Abstract Title	Abstract Number/ Presentation Details
ionalumab (VAY736)	
Primary results from VAYHIT2, a randomized, double-blind, Phase 3 trial of ionalumab plus eltrombopag versus placebo plus eltrombopag in patients with primary immune thrombocytopenia (ITP) who failed first-line corticosteroid treatment	Abstract #LBA-2 Oral Presentation December 9, 7:45 – 8:00 am ET

Secondary analysis results from VAYHIT3, a Phase 2 study of ivalumab in patients with primary immune thrombocytopenia previously treated with at least two lines of therapy	Abstract #844 Oral Presentation December 8, 3:30 – 3:45 pm ET
Scemblix® (asciminib)	
Asciminib (ASC) demonstrates continued improvement in patient-reported outcomes (PROs) vs investigator-selected tyrosine kinase inhibitors (IS-TKIs) in newly diagnosed chronic myeloid leukemia (CML): ASC4FIRST week 96 analysis	Abstract #1997 Poster Presentation December 6, 5:30 – 7:30 pm ET
Improved long-term tolerability with asciminib (ASC) vs investigator-selected (IS) tyrosine kinase inhibitors (TKIs) in patients (pts) with newly diagnosed chronic myeloid leukemia in chronic phase (CML-CP): Week 96 exploratory analysis of the phase 3 ASC4FIRST trial	Abstract #5549 Poster Presentation December 8, 6:00 – 8:00 pm ET
Asciminib (ASC) in chronic myeloid leukemia in chronic Phase (CML-CP): Efficacy and safety results of the Phase 2 ASC2ESCALATE trial in the cohort of patients (pts) with 1 prior tyrosine kinase inhibitor (TKI)	Abstract #906 Oral Presentation December 8, 4:00 – 4:15 pm ET
A comparison of real-world outcomes of asciminib versus ATP-competitive tyrosine kinase inhibitors as second-line treatment in patients with chronic myeloid leukemia in chronic phase	Abstract #724 Oral Presentation December 7, 5:15 – 5:30 pm ET
Pelabresib (DAK539)	
Durable efficacy and long-term safety with pelabresib plus ruxolitinib in JAK Inhibitor–Naive myelofibrosis: 96-week Results from the Phase III MANIFEST-2 study	Abstract #910 Oral Presentation December 8, 3:30 – 3:45pm ET
Rapcabtagene autoleucel (YTB323)	
Rapcabtagene autoleucel (YTB323) for patients with first line high-risk large B-cell lymphoma: phase II interim results	Abstract #670 Oral Presentation December 7, 5:15 – 5:30 pm ET
Fabhalta® (iptacopan)	
Oral iptacopan monotherapy demonstrates clinically meaningful hemoglobin increases in patients with paroxysmal nocturnal hemoglobinuria with baseline hemoglobin levels 10 to <12 g/dL on anti-C5 therapy: Subgroup analysis of the APPULSE-PNH Phase 3b trial	Abstract #4981 Poster Presentation December 8, 6:00 – 8:00 pm ET
Long-term safety and efficacy of iptacopan in patients with paroxysmal nocturnal hemoglobinuria: 4- and 5-year follow-up of patients from phase 2 studies who entered the roll-over extension program	Abstract #3198 Poster Presentation December 7, 6:00 – 8:00 pm ET
The 2-year efficacy and safety of iptacopan monotherapy in patients with paroxysmal nocturnal hemoglobinuria with a history of aplastic anemia on concomitant immunosuppressive therapy who entered the roll-over extension program	Abstract #4978 Poster Presentation December 8, 6:00 – 8:00 pm ET

Key highlights of data accepted by SABCS include:

Kisqali® (ribociclib)	
Pooled analysis of patients (pts) treated with 1st-line (1L) ribociclib (RIB) + endocrine therapy (ET) in the MONALEESA (ML) studies: long-term progression-free survival (PFS)	Abstract # PD5-10 Poster Spotlight Presentation December 11, 8:09 – 8:12 am CST
Five-year analysis of distant disease-free survival (DDFS) across key subgroups from the phase 3 NATALEE trial of ribociclib (RIB) plus a nonsteroidal aromatase inhibitor (NSAI) in patients with HR+/HER2- early breast cancer (EBC)	Abstract # PS3-09-08 Poster Presentation December 11, 12:30 – 2:00 pm CST
Progression-free survival (PFS) and overall survival (OS) results from the phase 3 MONALEESA-3 trial of postmenopausal patients with hormone receptor-positive (HR+)/HER2-negative (HER2-) advanced breast cancer (ABC) treated with ribociclib (RIB) + fulvestrant (FUL): A subgroup analysis of patients with invasive lobular carcinoma (ILC)	Abstract # PS1-10-27 Poster Presentation December 10, 12:30 – 2:00 pm CST
Ribociclib drug-drug interaction and concomitant medication management in early and advanced breast cancer patients	Abstract # PS3-09-15 Poster Presentation December 11, 12:30 – 2:00 pm CST
Real-world patient (pt) and caregiver experiences with breast cancer (BC) risk of recurrence (ROR) in the US: Results of an Online Survey and Social Media Analysis	Abstract # PS1-04-17 Poster Presentation December 10, 12:30 – 2:00 pm CST
Repower: a real-world noninterventional study of outcomes and experiences in patients with hormone receptor-positive (HR+)/human epidermal growth factor receptor 2-negative (HER2-) early breast cancer (EBC) treated with an adjuvant cyclin-dependent kinase 4 and 6 inhibitor (CDK4/6i) plus endocrine therapy (ET)	Abstract # PS3-08-27 Poster Presentation December 11, 12:30 – 2:00 pm CST

Product Information

For full prescribing information, including approved indications and important safety information about marketed products, please visit <https://www.novartis.com/about/products>.

Novartis in hematology

Our legacy in hematology runs deep, shaped by over 25 years of progress, partnerships and a commitment to keep asking questions, challenging norms and striving for better answers in a uniquely complex field. In the past two decades, we have delivered more than 10 medicines across more than 15 blood cancers and serious blood disorders including leading the era of targeted therapies in cancer and bringing the first CAR-T therapy to patients.

Innovation in hematology has brought significant progress, yet patients and clinicians continue to face persistent challenges. We're forging the future of hematology, powered by our foundation in scientific discovery to deliver meaningful change for patients with unmet needs.

Novartis in breast cancer

For over 30 years, Novartis has been at the forefront of driving scientific advancements for individuals affected by breast cancer and enhancing clinical practice in collaboration with the global community. With one of the most comprehensive breast cancer portfolios and pipeline, Novartis leads the industry in discovery of new therapies and combinations in HR+/HER2- breast cancer, the most common form of the disease.

Disclaimer

This press release contains forward-looking statements within the meaning of the United States Private Securities Litigation Reform Act of 1995. Forward-looking statements can generally be identified by words such as “potential,” “can,” “will,” “plan,” “may,” “could,” “would,” “expect,” “anticipate,” “look forward,” “believe,” “committed,” “investigational,” “pipeline,” “launch,” or similar terms, or by express or implied discussions regarding potential marketing approvals, new indications or labeling for the investigational or approved products described in this press release, or regarding potential future revenues from such products. You should not place undue reliance on these statements. Such forward-looking statements are based on our current beliefs and expectations regarding future events, and are subject to significant known and unknown risks and uncertainties. Should one or more of these risks or uncertainties materialize, or should underlying assumptions prove incorrect, actual results may vary materially from those set forth in the forward-looking statements. There can be no guarantee that the investigational or approved products described in this press release will be submitted or approved for sale or for any additional indications or labeling in any market, or at any particular time. Nor can there be any guarantee that such products will be commercially successful in the future. In particular, our expectations regarding such products could be affected by, among other things, the uncertainties inherent in research and development, including clinical trial results and additional analysis of existing clinical data; regulatory actions or delays or government regulation generally; global trends toward health care cost containment, including government, payor and general public pricing and reimbursement pressures and requirements for increased pricing transparency; our ability to obtain or maintain proprietary intellectual property protection; the particular prescribing preferences of physicians and patients; general political, economic and business conditions, including the effects of and efforts to mitigate pandemic diseases; safety, quality, data integrity or manufacturing issues; potential or actual data security and data privacy breaches, or disruptions of our information technology systems, and other risks and factors referred to in Novartis AG’s current Form 20-F on file with the US Securities and Exchange Commission. Novartis is providing the information in this press release as of this date and does not undertake any obligation to update any forward-looking statements contained in this press release as a result of new information, future events or otherwise.

About Novartis

Novartis is an innovative medicines company. Every day, we work to reimagine medicine to improve and extend people’s lives so that patients, healthcare professionals and societies are empowered in the face of serious disease. Our medicines reach nearly 300 million people worldwide.

Reimagine medicine with us: Visit us at <https://www.novartis.com> and connect with us on [LinkedIn](#), [Facebook](#), [X/Twitter](#) and [Instagram](#).

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