Media & Investor Release

Roche to present new data advancing its obesity portfolio at the American Diabetes Association's 2026 Scientific Sessions

- **Late-breaking Phase II data highlight enicepatide's (CT-388) efficacy and safety, reinforcing its potential to deliver best-in-class weight loss across a broad population of people living with overweight or obesity**
- **Late-breaking data from the Phase II ZUPREME-1 trial showcase petrelintide's efficacy, safety, and compelling tolerability profile, which has the potential to redefine the weight management experience for people living with overweight or obesity**
- **A Phase II multi-arm trial evaluating enicepatide and petrelintide fixed-dose combinations will be initiated towards mid-2026 to develop a differentiated treatment option**

Basel, 1 June 2026 - Roche (SIX: RO, ROP; OTCQX: RHHBY) announced today that new data from its obesity portfolio will be presented at the 2026 Scientific Sessions of the American Diabetes Association® (ADA). The insights demonstrate significant progress in addressing a range of unmet needs for people living with obesity or overweight such as long-term treatment adherence, which could be supported by a favorable safety and tolerability profile.

"The data we will present at ADA highlight the growing strength of our obesity portfolio, exemplified by the robust efficacy and distinct tolerability profiles of enicepatide and petrelintide," said Levi Garraway, MD, PhD, Roche's Chief Medical Officer and Head of Global Product Development. "The clinical insights from these studies demonstrate how our portfolio may offer more tailored, individualised treatment options for people living with obesity."

The data presented on Roche's obesity assets include:

- **Enicepatide (CT-388)**: Late-breaking data from the Phase II (CT388-103) study will highlight clinical weight loss outcomes from investigational enicepatide in people living with overweight/obesity. The dual GLP-1/GIP receptor agonist is also being investigated in an additional Phase II study (CT388-104) to evaluate its efficacy, safety and tolerability in participants who are living with obesity or are overweight and have type 2 diabetes (T2D). These data suggest that enicepatide could emerge as an important medicine in its own right and also a key backbone for potential combination therapies from Roche's cardiometabolic pipeline.
- **Petrelintide**: Late-breaking data from the Phase II ZUPREME-1 trial highlight the efficacy and safety of petrelintide, an investigational human amylin analog being evaluated for weight management in people living with overweight and obesity. The

ongoing Phase II petrelintide monotherapy trial, ZUPREME-2 is evaluating petrelintide versus placebo in people living with obesity or overweight and T2D. As monotherapy and in combination with enicepatide, petrelintide can become an important component of Roche's portfolio.

Roche continues to advance its weight management pipeline rapidly, moving both enicepatide and petrelintide into Phase III development while initiating a Phase II multi-arm combination trial in mid-2026.

Roche is pleased to invite investors and analysts to participate in its virtual event on Monday, 8 June 2026, that will highlight the new data from the Phase II CT388-103 study of enicepatide, as well as from the Phase II ZUPREME-1 study of petrelintide.

Additional details on presentations at the ADA's Scientific Sessions are included below and the full abstracts will be available in Diabetes.

Asset	Title / Lead author	Abstract / presentation details
Enicepatide (CT-388)	CT-388, a cAMP Signal-Biased GLP-1/GIP Receptor Agonist, Achieves Clinically Meaningful Weight Loss in People With Overweight/Obesity: A 48-Week Phase 2 Study. *Lingvay I, et al.*	Late Breaking Poster Session (2813-LB) Sunday, 07 June 12:30 pm - 1:30 pm CT
	As above	E-Theater presentation Monday, 08 June 12:30pm CT
Petrelintide	Amylin as a Novel Diabetes and Obesity Therapy. *Garvey T, et al.*	Scientific Symposium Friday, 05 June 3:45pm - 5:15pm CT
	Petrelintide, a human amylin analog for weight management: efficacy and safety from the Phase 2 trial, ZUPREME-1. *Garvey T, et al.*	Late Breaking Poster Session (3083-LB) Sunday, 07 June 12:30 pm - 1:30 pm CT (ePoster: Saturday, June 06 1:30pm - 1:40pm CT)
	Petrelintide elicits distinct effects on eating pattern and maintains locomotor activity compared to semaglutide in rats with diet-induced obesity *Gradel A, et al.*	Poster Presentation Monday, 08 June 12:30 pm - 1:30 pm CT

	Long-acting amylin analog petrelintide does not delay gastric emptying *Griffin J, et al.*	Poster Presentation Monday, 08 June 12:30 pm - 1:30 pm CT

About Enicepatide (CT-388)

Enicepatide is an investigational once-weekly subcutaneous injectable, dual GLP-1/GIP receptor agonist being developed for the treatment of people living with obesity and associated comorbidities including type 2 diabetes (T2D). Enicepatide was designed to have potent activity on both the GLP-1 and GIP receptors but with minimal to no beta-arrestin recruitment on either receptor. This biased signalling significantly minimises receptor internalisation and consequent desensitisation, which is expected to lead to prolonged pharmacological activity.

About Petrelintide

Petrelintide is an investigational long-acting amylin analog suitable for once-weekly subcutaneous administration that has been designed with chemical and physical stability with no fibrillation around neutral pH, allowing for co-formulation and co-administration with other peptides.[1] Amylin is produced in the pancreatic beta cells and co-secreted with insulin in response to ingested nutrients. Amylin receptor activation has been shown to reduce body weight by restoring sensitivity to the satiety hormone leptin[2,3] inducing a sense of feeling full faster.

About Obesity

Obesity is recognised as the greatest single risk factor for chronic disease globally. The condition is associated with many health challenges and more than 200 comorbidities, including type 2 diabetes, cardiovascular diseases, fatty liver, and chronic kidney disease. By 2035, over four billion people (more than half of the global population) are projected to be living with excess weight or obesity, a trend affecting nearly every country. This rise is driven by a complex mix of genetics and biology as well as behavioural, environmental and socioeconomic factors, placing an increased strain on healthcare systems due to the associated burden of comorbidities and reduced quality of life.

About Roche

Roche (SIX: RO, ROP; OTCQX: RHHBY) is a healthcare company uniquely placed to prevent, stop and cure diseases by uniting leading science and technology across diagnostics, medicines and digital solutions.

Roche was founded in Basel, Switzerland in 1896 and today is a leading provider of transformative medicines and diagnostics for millions of people in over 150 countries around the world. It is dedicated to tackling healthcare challenges that place the greatest strain on patients, families, communities and healthcare systems. Across its Diagnostics and Pharmaceutical divisions, Roche focuses on areas including oncology, neurology, cardiovascular and metabolic diseases, ophthalmology, infectious diseases and immunology with the aim of providing real and positive change for patients, the people they love and the professionals who care for them.

Genentech in the United States is a fully owned subsidiary in the Roche Group. Roche is the majority shareholder in Chugai Pharmaceutical, a major innovator in the Japanese therapeutic antibody market.

For more information, please visit www.roche.com.

References

[1] Eriksson et al. Presentation at ObesityWeek, November 1–4, 2022, San Diego, CA. Link: https://www.zealandpharma.com/media/0gnfxg4b/zp8396-sema-coformulation-obesityweek-2022.pdf.
[2] Mathiesen et al. Eur J Endocrinol 2022;186(6):R93–R111
[3] Roth et al. Proc Natl Acad Sci U S A 2008;105(20):7257–7262

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