Q2 FY2017
(Fiscal Year Ending March 31, 2018)
Financial Results Presentation

Eisai Co., Ltd.

November 1, 2017

human health care

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1

1H FY2017 Consolidated Statement of Income (IFRS)

Achieved 1H target of revenue, operating profit and profit for the period

(billions of yen, %)

	April-September 2016		April-September 2017		
	Results	%	Results	%	YoY
Revenue	269.9	100.0	285.1	100.0	106
Cost of sales	98.2	36.4	102.2	35.8	104
Gross profit	171.7	63.6	182.9	64.2	107
R&D expenses	57.1	21.2	66.1	23.2	116
SG&A expenses	84.8	31.4	89.5	31.4	105
Other income & expenses	8.8	3.3	0.4	0.1	4
Operating profit	38.6	14.3	27.7	9.7	72
Profit for the period	29.6	11.0	20.4	7.1	69
Profit for the period (Attributable to owners of the parent)	27.9	10.3	18.8	6.6	67

FY2017 average exchange rates:
USD 1: 111.06 yen (+5.5% YoY), EUR 1: 126.28 yen (+6.9% YoY), GBP 1: 143.61 yen (-0.9% YoY), RMB 1: 16.42 yen (+3.1% YoY)
*From this period, Eisai has clarified the definition of research and development expenses in order to more accurately reflect the condition of the business, and this has resulted in a portion of expenses relating to medical affairs activities, such as creation and provision of scientific evidence for health care providers, being apportioned to research and development expenses. Accordingly, 2.2 billion yen which was included in selling, general and administrative expenses during the last period has been reclassified as research and development expenses.

Growth in Main Business
Achieved increase in revenue in all regions

Japan Revenue 150.9 B yen (101% YoY)
Achieved growth of branded drugs[*1] and ratio of branded drugs to revenue[*2] reached over 56%
Acceleration of development at EA Pharma: obtained marketing approval in Japan for ulcerative colitis treatment, RECTABUL[*3] in September 2017

Americas Revenue 58.0 B yen (102% YoY)
Achieved growth of global brands
LENVIMA (146% YoY), Halaven (101% YoY), Fycompa (139% YoY), BELVIQ (120% YoY)

China Revenue 28.0 B yen (120% YoY)
Achieved growth of major products
Methycobal (116% YoY), Aricept (120% YoY), Stronger Neo-Minophagen C/Glycyron tablets (119%YoY), Pariet (130% YoY)
Acceleration of expansion in Low Tier Market (small- and medium-sized cities and hospitals)

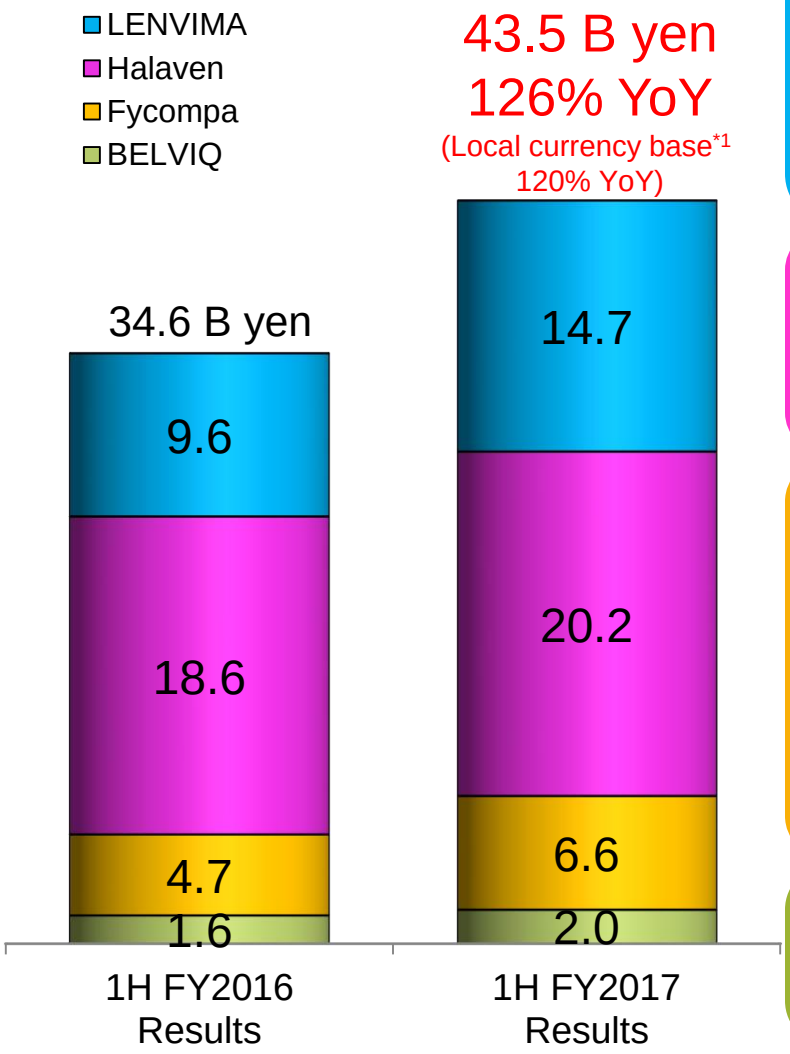
EMEA Revenue 21.2 B yen (116% YoY)
Achieved growth of global brands
LENVIMA (218% YoY), Halaven (110% YoY), Fycompa (116% YoY)
Accelerated growth of Zebinix (154% YoY) since approval of monotherapy use for the treatment of partial-onset seizure in May 2017

Asia Revenue 21.2 B yen (124% YoY)
Achieved growth of major products: Aricept (122% YoY) and Humira (127% YoY)
Achieved growth of global brands: LENVIMA (609% YoY), Halaven (128% YoY), Fycompa (182% YoY)
Enhancement of access to medicine through Patient Assistance Program (PAP)

*1: 13 branded drugs including the products designated by MHLW as Premium to promote the development of new drugs and eliminate off-label use: Halaven, Lenvima, Fycompa, Humira, Lunesta, Maxalt, Fostoin, Careram, Inovelon, NerBloc, Gliadel, Treakisym and Lyrica (alliance revenue) *2: Revenue of 13 branded drugs/revenue of prescription medicines excluding EA Pharma products *3: Licensed in from Dr. Falk Pharma GmbH. Co-development with Kissei Pharmaceutical Co., Ltd

Growth in Main Business
Expansion of global brands

Revenue of 4 Global Brands (billions of yen)



LENVIMA (lenvatinib) capsules

- ✓ Steady expansion of contribution to patients with thyroid cancer in all regions
- ✓ Indication for renal cell carcinoma (RCC)*2 has been approved in approx. 40 countries

Halaven (eribulin mesylate) Injection

- ✓ Stable growth of 108% YoY in approved treatment line*3 for patients with refractory breast cancer

Fycompa perampanel

- ✓ Expansion of patient contribution in the U.S. since the approval of monotherapy use for the treatment of partial-onset seizure in U.S. in July 2017
- ✓ In Japan, top share*4 obtained as an add-on agent for patients being treated with existing antiepilepsy treatment, since the lift of administration restriction in June 2017

BELVIQ (lorcaserin HCl) IV

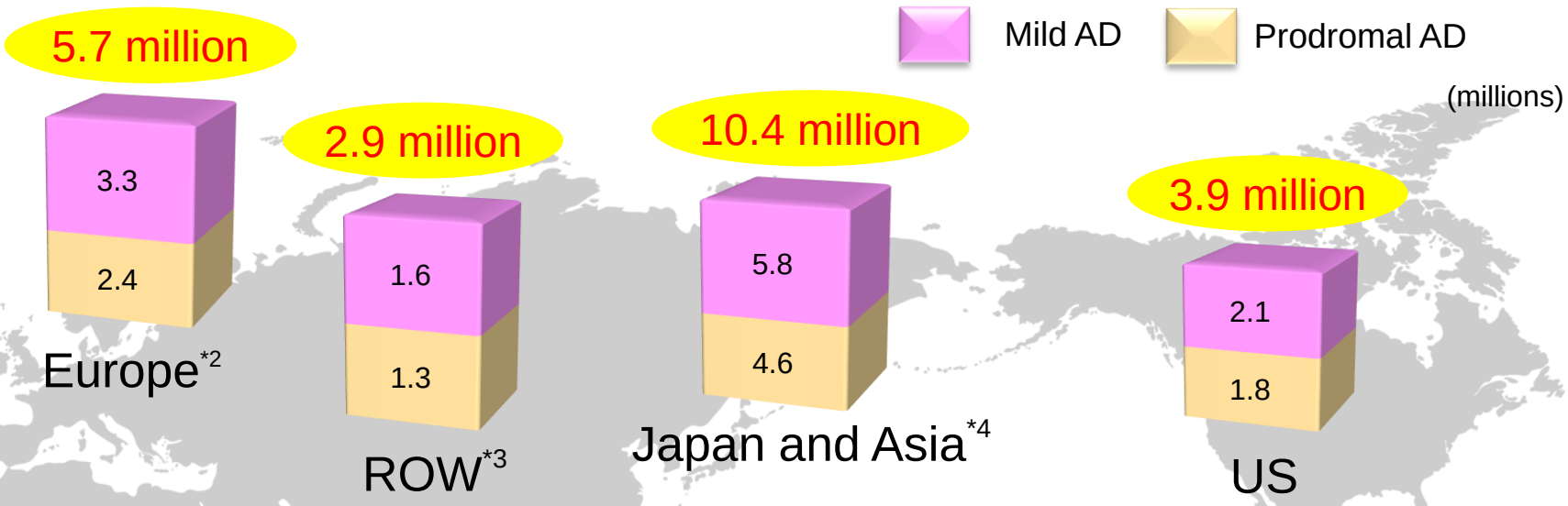
- ✓ Launched in Taiwan and Israel. Now launched in a total of 4 countries*5

*1: The impact of foreign exchange fluctuations are excluded *2: 2nd line, combination therapy with everolimus *3: Indications vary in each country or territory: unresectable or recurrent breast cancer in Japan, 3rd line+ therapy for locally advanced or metastatic breast cancer in the US, and 2nd line+ therapy for locally advanced or metastatic breast cancer in EU
*4: Source: Japan Medical Information Research Institute *5: U.S., South Korea, Taiwan and Israel. Marketed by partners in South Korea, Taiwan and Israel.

Dementia Field

Potential Patient Contribution of Next Generation AD Treatments

Number of patients with A-beta positive early Alzheimer's disease (AD) worldwide[*1]



Medicine

Next generation AD treatments

Aim to deliver next generation AD treatments to

22.9 million patients

(in 2028)

Solutions

Improve medical/social environment

*1: Source: Internal estimates of year 2028 based on Decision Resources. Figures are approximate.
*2: UK, France, Germany, Italy, Spain, Austria, Greece, Netherlands, Norway, Poland, Portugal, Sweden, Switzerland, Belgium, Czech Republic, Denmark, Finland, Turkey
*3: Rest of the world: Brazil, Mexico, Australia
*4: Japan, China, South Korea, India, Taiwan, Hong Kong, Singapore, Malaysia, Indonesia, the Philippines, Thailand, Vietnam, Myanmar

Decision was Made to Expand Collaboration Agreement on AD Projects upon Three Assessments

Aim to increase probability of success in development of three candidates of next generation AD treatments* through cutting-edge knowledge and experience

Aim to create evidence which supports A-beta hypothesis as the number of supportive information is increasing

Seek to address issues in infrastructure for medical/social environment associated with dementia through full-commitment

* Investigational aducanumab, elenbecestat (Generic name of E2609. The generic name is not fixed at this time) and BAN2401 (licensed-in from BioArctic). All projects are under co-development with Biogen.

Development of Three Candidates of Next Generation AD Treatment

Leverage cutting-edge knowledge and experience

Aducanumab[*1]
Anti-A-beta antibody

Phase III studies (ENGAGE and EMERGE) ongoing
Completion of patient enrollment anticipated in mid 2018
New data on long-term extension of Phase Ib study will be presented at CTAD[*2] 2017

Elenbecestat[*1,3]
BACE inhibitor

Phase III studies of
MISSION AD1 and MISSION AD2[*4] ongoing

MISSION AD

Enrollment commenced at 284 sites in North America, Japan, Europe, Asia and Oceania[*5]
Plan to open 480 sites in FY2017
Topline results for primary endpoint is anticipated in FY2020

BAN2401[*1,6]
Anti-A-beta protofibrils antibody

Phase II study ongoing

Topline results[*7] anticipated by the end of January 2018
and results of full data analysis[*8] anticipated in FY2018

Patients with targeted disease stage enrolled as planned
Prodromal AD: 64% and mild AD: 36%

Outcome of the study with Bayesian analysis will be valuable to develop Phase III study design

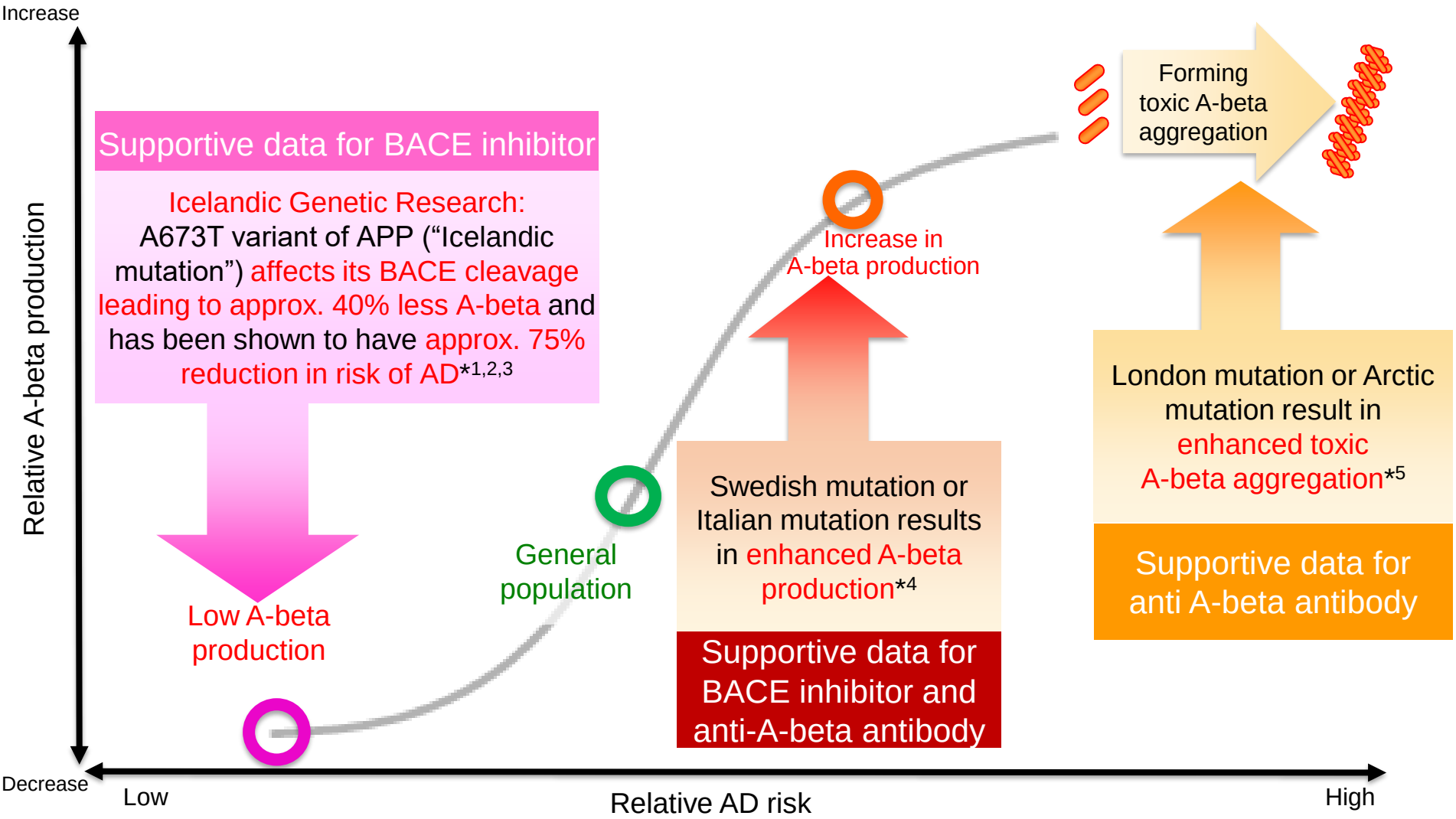
- Valuable information on optimal dose arm in which more patients are randomized will be obtained from 16 interim analyses results
- The study is ongoing and it has not been stopped for success or futility. Given its progress through multiple interim analyses, the study effect size is likely to be at least 10% or more
- An outcome whether probability of achieving CSD[*9] (25% reduction in decline of cognitive function compared to placebo) is 80% or more, will be obtained at 12 months analysis[*10]
- Longer-term and comprehensive data, such as clinical evaluation indices, including ADCOMS, MMSE, CDR-SB and ADAS-cog and so on, and biomarker data like A-beta level in brain utilizing amyloid PET imaging, A-beta and tau level in cerebrospinal fluid, total hippocampal volume utilizing vMRI and so on, will be obtained and evaluated at 18 months final analysis[*11]

Pursue regulatory feedback concerning potential utilization of a single Phase III study for submission and seek potential combination therapy

All projects are investigational *1: Co-developed with Biogen. *2: 10th Annual Meeting of Clinical Trials on Alzheimer's Disease *3: Generic name of E2609. The generic name is not yet fixed at this time. *4: Names of E2609 Phase III studies (AD1 is Study 301, AD2 is Study 302) *5: As of October 27, 2017 *6: Licensed-in from BioArctic. *7: Primary endpoint: Alzheimer's Disease Composite Score (ADCOMS) Bayesian Analysis at 12 months *8: Secondary endpoints (3 items), namely, ADCOMS at month 18; total hippocampal volume utilizing vMRI at months 6, 12, and 18; and amyloid level in brain utilizing amyloid PET imaging at months 12 and 18 *9: Clinically significant difference *10: 12 months after 856 patients randomized *11: 18 month after 856 patients randomized

Aim to create evidence which supports A-beta hypothesis as the number of supportive information is increasing

Association between production and aggregation of A-beta and AD risk shown by human biology



*1: Jonsson, T. et al. (2012) A mutation in APP protects against Alzheimer's disease and age-related cognitive decline. Nature 488; 96-99 *2: Maloney, J. A. et al (2014) Molecular mechanisms of Alzheimer disease protection by the A673T allele of amyloid precursor protein. J Biol Chem 289; 30990-31000 *3: Martinskainen H, et al (2017) Jul; 82 (1): 128-132. doi: 10.1002/ana 24969. Decreased plasma β-amyloid in Alzheimer's disease APP A673T variant carriers.
*4: Di Fede et al. (2009) A Recessive Mutation in the APP Gene with Dominant-Negative Effect on Amyloidogenesis. Science 323:1473–1477
*5: Nilsberth, C et al. (2001) The 'Arctic' APP mutation (E693G) causes Alzheimer's disease by enhanced Abeta protofibril formation. Nat. Neurosci. 4 887-893

Seek to Address Issues in Infrastructure for Medical/Social Environment Associated with Dementia through Full-Commitment

- Initiatives for qualitatively different disease awareness campaign
  - Disease awareness campaign focused on increasing awareness of Alzheimer's disease itself when Aricept was launched in 1990's
  - Shifting the focus of disease awareness campaign to increase awareness for the potential of modern medical science that enables early diagnosis and early initiation of treatment for dementia since the studies showed the fact that accumulation of A-beta, sleep disorder and behavioral disorder can occur before cognitive impairment appears
- Paradigm shift in diagnosis of dementia (toward objective evaluation from subjective evaluation)
  - Improve diagnostic scales and develop objective diagnosis methods for early diagnosis
  - More opportunities for diagnosis based on A-beta measurement, by securing insurance coverage for PET imaging and cerebrospinal fluid examination
  - Develop blood-based biomarkers
- Improve access to medicine in developing countries
  - Dementia patients in developing countries will increase by 1.7 times in 2030 and 3.3 times in 2050*
  - Seek strategy to enhance access to medicine in low to middle income class
- Valuation method for next generation medicines
  - Seek fair valuation model in terms of value and accessibility to measure social cost reduction effect

* Source: World Alzheimer Report 2015. Number of patients with dementia in low to middle income countries: 27.28 million in 2015, 46.74 million in 2030, and 89.28 million in 2050

Lemborexant* Dual orexin receptor antagonist

Aim to make earlier contribution to patients with potential indication of insomnia disorder

Two Phase III studies (Study 303 and 304) ongoing with aim to achieve best-in-class insomnia treatment suitable for elderly patients

Target submission in FY2018

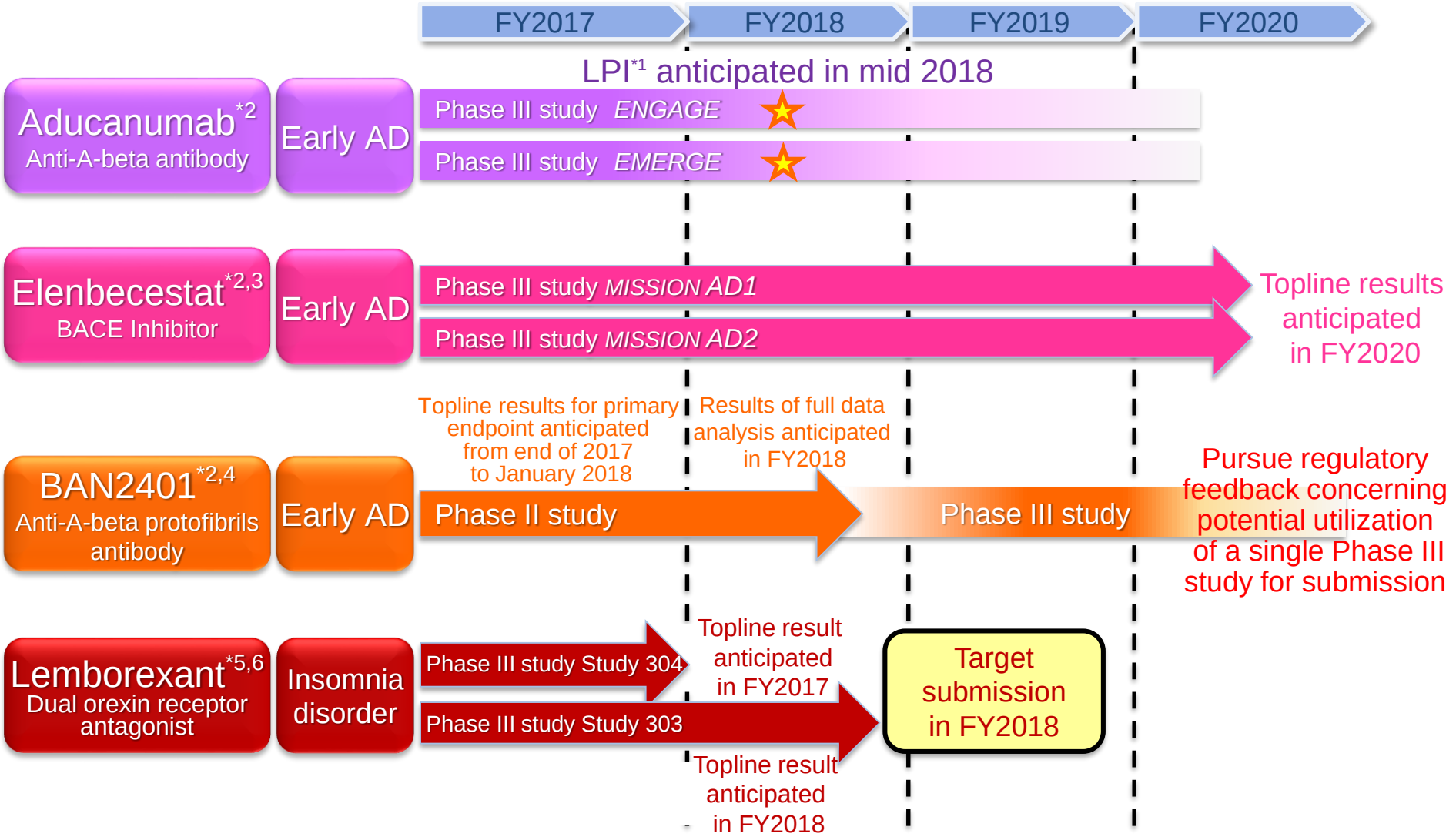
ahead of original schedule of FY2019

with results from two Phase III studies

* Investigational. Co-development with Purdue Pharma

Major Pipeline in Dementia Field

Seek to obtain approvals with the aim of continuous launch of new products beyond FY2020



* All projects are investigational

*1: Last Patient In *2: Co-development with Biogen *3: Generic name for E2609.The generic name is not yet fixed. *4: Licensed-in from BioArctic

*5: Co-development with Purdue Pharma *6: Phase II study ongoing for irregular sleep-wake rhythm disorder (ISWRD)

Oncology Area

LENVIMA (lenvatinib) capsules

Accelerated Global Submission for the Indication of Hepatocellular Carcinoma

EU

Submitted in July 2017

Japan

Submitted in June 2017

US

- Submitted in July 2017
- FDA accepted submission for review in September 2017
- PDUFA*1 action date May 24, 2018

China

China FDA accepted NDA*2 on October 30, 2017

Approx. 50% of incidence for hepatic cancer are confirmed in China*3

- Highest in Asia, including Japan and China, representing approx. 80%*3
- Number of new patients with hepatic cancer is 395,000 and number of deaths is 383,000 in China*3

* Indication for hepatocellular carcinoma is investigational and currently under review *1: Prescription Drug User Fee Act *2: New drug application
*3: Source: GLOBOCAN2012: Estimated Cancer Incidence, Mortality and Prevalence Worldwide in 2012. http://globocan.iarc.fr/

Hepatocellular carcinoma (HCC)

- New quality of life findings presented at ESMO[*1]

Clinically meaningful delays in deterioration in diarrhea, pain and role functioning in QLQ-C30 and body image and nutrition in QLQ HCC18 compared to sorafenib arm (Nominal *p* value<0.05)

- Results of subpopulation analysis of patients with hepatitis B virus (HBV) coinfection presented at ILCA[*2]

Lenvatinib demonstrated a therapeutic effect in patients with HBV and may be a potential treatment option for patients with HCC

Efficacy outcome Median (95% CI)	Total population		Patients with HBV	
	lenvatinib (n=478)	sorafenib (n=476)	lenvatinib (n=259)	sorafenib (n=244)
OS (months)	13.6(12.1-14.9)	12.3(10.4-13.9)	13.4(11.6-14.6)	10.2(8.6-12.4)
HR (95% CI)	0.92(0.79-1.06)		0.83(0.68-1.02)	

* Indication for hepatocellular carcinoma is investigational and currently under review

*1:European Society for Medical Oncology (ESMO) Congress 2017. Oral presentation Abstract No: 618O “Health-related quality of life (HRQOL) and disease symptoms in patients with unresectable hepatocellular carcinoma (HCC) treated with lenvatinib (LEN) or sorafenib (SOR)” *2: 11th Annual Conference of the International Liver Cancer Association ABSSUB-318 “Efficacy And Safety Of Lenvatinib For Unresectable Hepatocellular Carcinoma In Patients With Baseline Hepatitis B Virus (Hbv)”

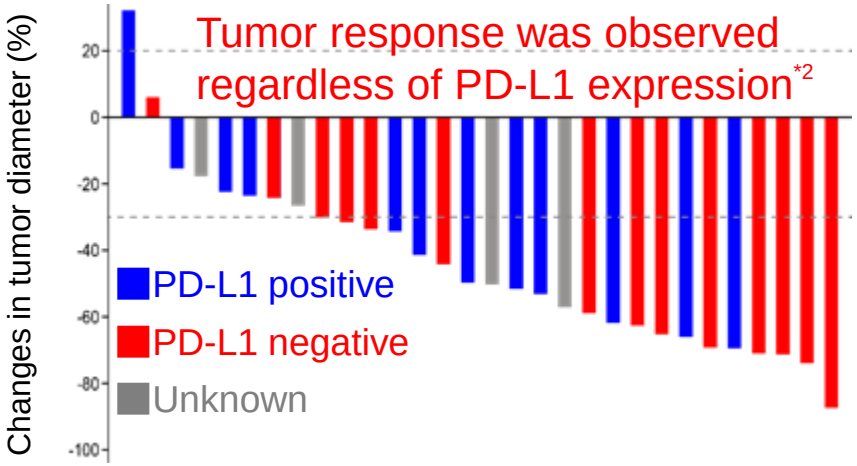
Progress of Three Projects of Combination Therapy with pembrolizumab

Lenvima

30 patients with metastatic RCC

ORR[*1]: 63%

Tumor response was observed regardless of PD-L1 expression[*2]

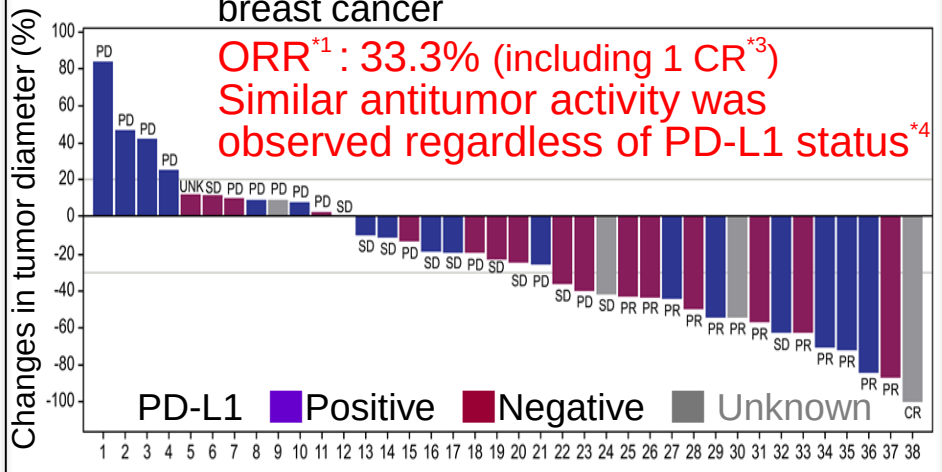


Halaven

39 patients with metastatic triple negative breast cancer

ORR[*1] : 33.3% (including 1 CR[*3])

Similar antitumor activity was observed regardless of PD-L1 status[*4]

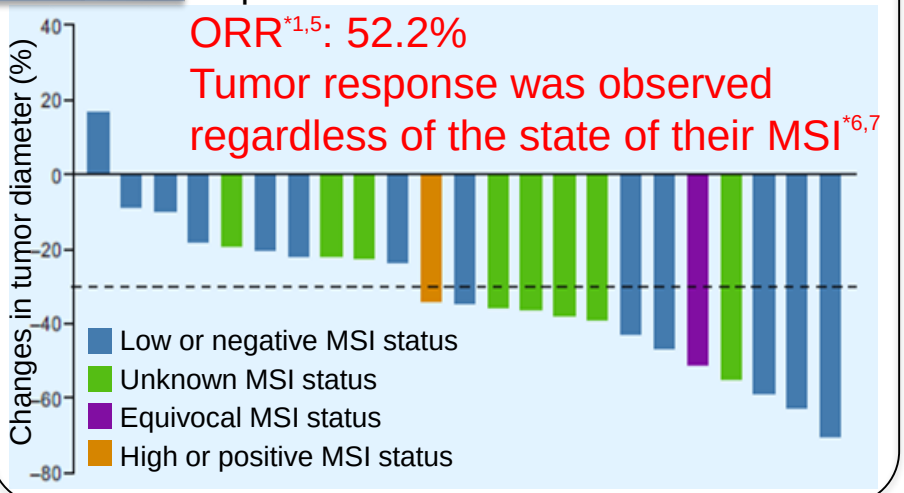


Lenvima

23 patients with endometrial carcinoma

ORR[*1,5]: 52.2%

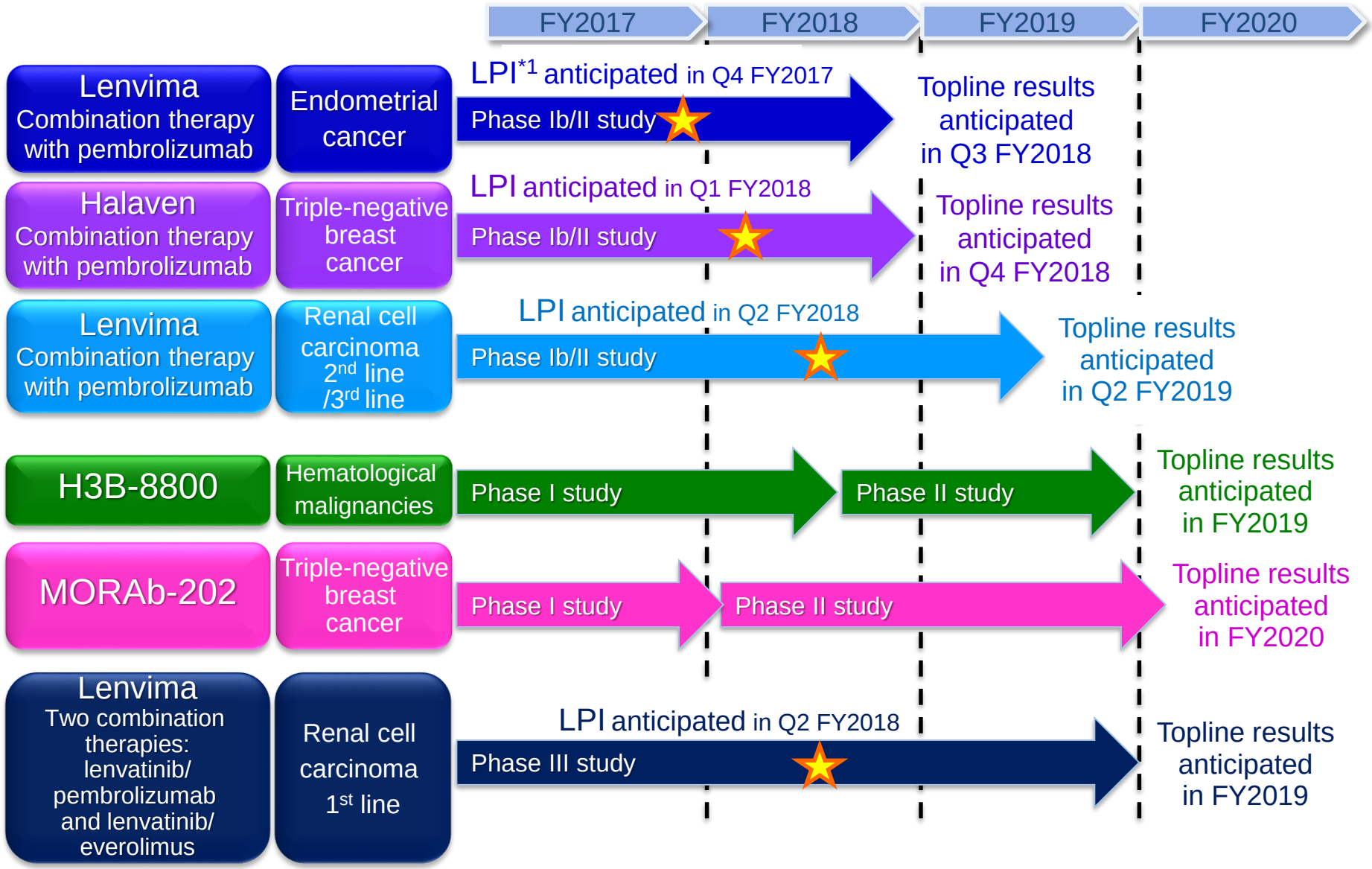
Tumor response was observed regardless of the state of their MSI[*6,7]



Each of combination therapies demonstrated ORR[*2] exceeding monotherapy use

All projects are investigational *1: Objective Response Rate (ORR). Ratio of total of patients whose tumor had disappeared (complete response) and patients with tumor in which more than 30% shrinkage to the total size was observed (partial response). *2: Presented at European Society for Medical Oncology (ESMO) 2017 Congress. Lee CH, et al. "A Phase 1b/2 Trial of Lenvatinib + Pembrolizumab in Patients With Renal Cell Carcinoma". Abstract No. 847O *3: Complete response *4: Presented at 39th Annual San Antonio Breast Cancer Symposium 2016 Abstract number P5-15-02 Tolaney SM, et al. "Phase 1b/2 study to evaluate eribulin mesylate in combination with pembrolizumab in patients with metastatic triple-negative breast cancer" *5: Based on an independent radiologic review (IRR) *6: Presented at 2017 American Society of Clinical Oncology Annual Meeting Makker V, et al. "A Phase 1b/2 trial of lenvatinib plus pembrolizumab in patients with endometrial carcinoma" *7: Microsatellite instability (MSI). Anti-PD-1 antibodies are associated with high response rates in patients with MSI-H or dMMR tumors.

Major Pipeline in Oncology Area



* All projects are investigational *1: Last Patient In

Forecast for FY2017 (IFRS)

Implement proactive investment in growth and target revenue and profit increase

(billions of yen, %)

	FY2016		FY2017		
	Results	%	Forecast	%	YoY
Revenue	539.1	100.0	575.5	100.0	107
Cost of sales	195.9	36.3	206.0	35.8	105
Gross profit	343.2	63.7	369.5	64.2	108
R&D expenses	117.2	21.7	134.0	23.3	114
SG&A expenses	174.9	32.5	177.5	30.8	101
Other income & expenses	8.0	1.5	2.0	0.3	25
Operating profit	59.1	11.0	60.0	10.4	102
Profit for the year	42.2	7.8	41.3	7.2	98
Profit for the year (attributable to owners of the parent)	39.4	7.3	39.8	6.9	101
EPS (yen)	137.6		139.2		101
ROE (%)	6.8		6.8		
DOE (%)	7.4		7.4		
Dividends (yen)	150		150		

FY2016 average exchange rates: USD 1: 108.38 yen, EUR 1: 118.78 yen, GBP 1: 141.59 yen, RMB 1: 16.10 yen
FY2017 average exchange rates (forecast): USD 1: 113 yen, EUR 1: 120 yen, GBP 1: 141 yen, RMB 1: 16.30 yen
* The influence of risks relating to the patent infringement litigation for antiemetic agent Aloxi in the United States announced on May 3, 2017 has not been included.
** From this period, Eisai has clarified the definition of research and development expenses in order to more accurately reflect the condition of the business, and this has resulted in a portion of expenses relating to medical affairs activities, such as creation and provision of scientific evidence for health care providers, being apportioned to research and development expenses. Accordingly, 4.7 billion yen which was included in selling, general and administrative expenses during the last period has been reclassified as research and development expenses.

Reference Data

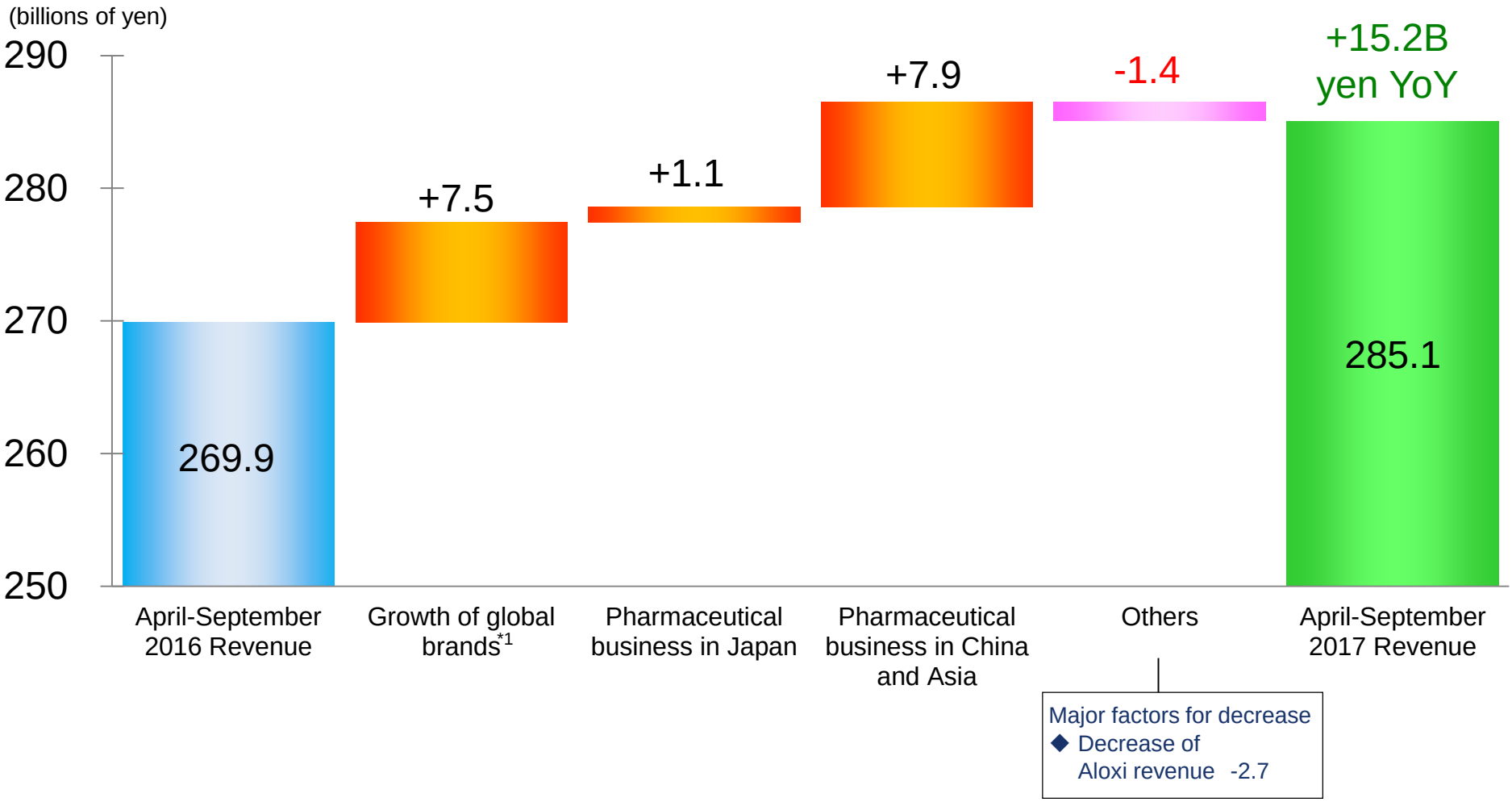
Revenue by Reporting Segment

(billions of yen, %)

	April-September FY2016		April-September FY2017		
	Results	%	Results	%	YoY
Japan*1	149.7	55.5	150.9	52.9	101
Americas*2	56.9	21.1	58.0	20.3	102
China	23.4	8.7	28.0	9.8	120
EMEA*3	18.2	6.7	21.2	7.4	116
ASIA*4	17.1	6.3	21.2	7.4	124
Pharmaceutical business total	265.2	98.3	279.2	97.9	105
Others	4.7	1.7	5.9	2.1	127
Consolidated revenue	269.9	100.0	285.1	100.0	106

*1: Prescription medicines, Generics and Consumer Healthcare Products *2: North, Central and South America
*3: Europe, Middle East, Africa, Russia and Oceania *4: Mainly South Korea, Taiwan, Hong Kong, India and ASEAN

Breakdown of Revenue Migration



* Figures shown in breakdown are approximate.
*1:Revenue from LENVIMA, Halaven, Fycompa and BELVIQ, excluding revenue Japan pharmaceutical business

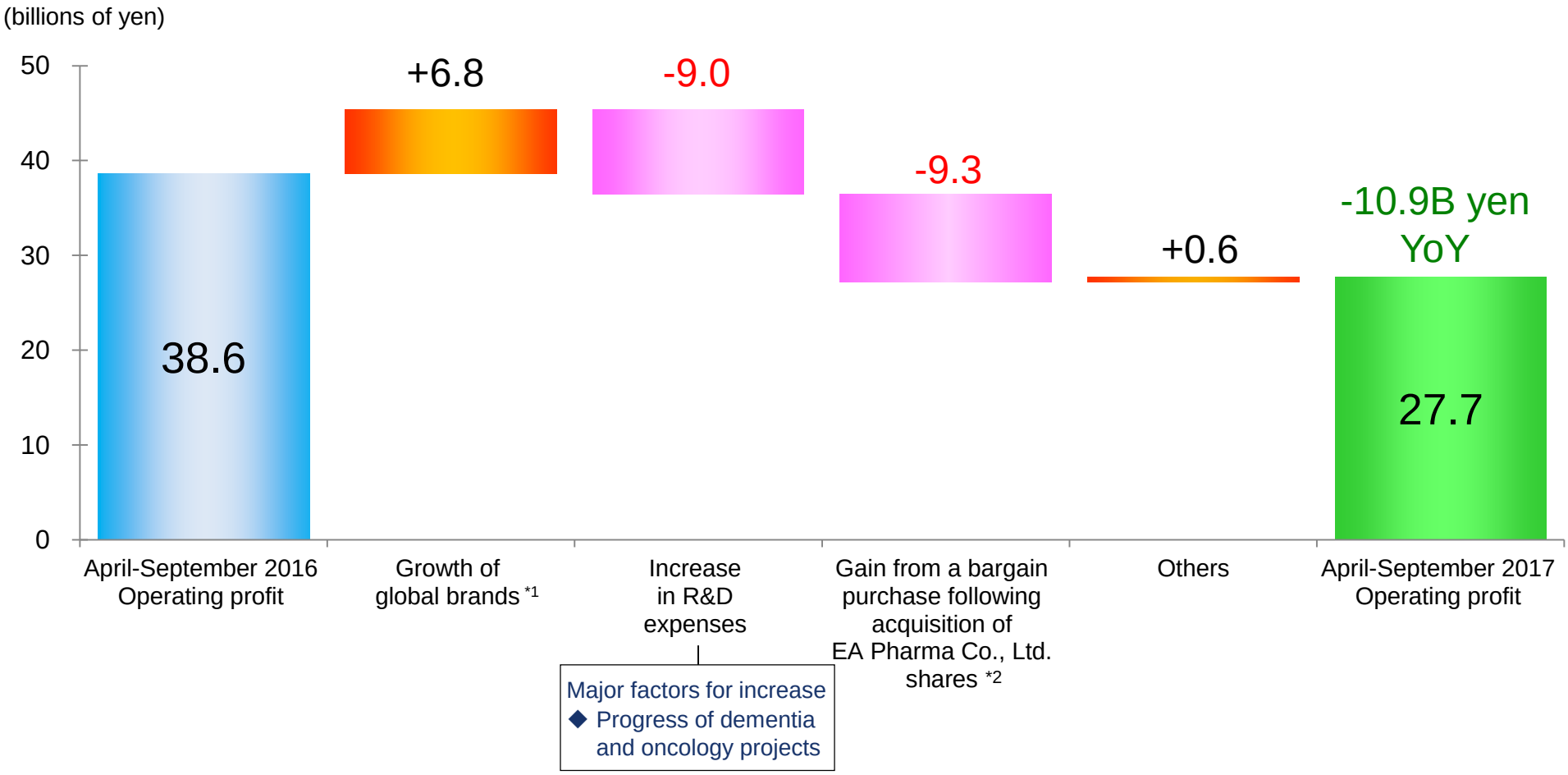
Profit by Reporting Segment

(billions of yen, %)

	April-September FY2016			April-September FY2017			
	Results	%	% of revenue	Results	%	% of revenue	YoY
Japan*1	55.3	59.2	37.0	55.6	55.8	36.9	101
Americas*2	17.3	18.5	30.5	19.7	19.8	34.0	114
China	7.4	7.9	31.6	8.4	8.4	30.1	114
EMEA*3	7.6	8.1	41.7	7.3	7.3	34.5	96
ASIA*4	4.7	5.1	27.8	6.6	6.6	31.1	139
Pharmaceutical business total	92.4	98.8	34.8	97.7	97.9	35.0	106
Other business	1.1	1.2	24.4	2.1	2.1	36.0	187
Reporting segment total	93.5	100.0	34.6	99.8	100.0	35.0	107
R&D expenses and group headquarters' management costs and other expenses	(64.3)			(72.1)			
Gain from a bargain purchase*5	9.3						
Gain on sale of subsidiaries*6	0.1						
Consolidated operating profit	38.6		14.3	27.7		9.7	72

* From this period, Eisai has clarified the definition of research and development expenses in order to more appropriately reflect the economic realities, and this has resulted in a portion of expenses relating to medical affairs activities, such as provision of scientific evidence for health care providers, being apportioned to research and development expenses. Accordingly, the expenses included in selling, general and administrative expenses during the last period has been reclassified as research and development expenses. *1: Prescription medicines, Generics and Consumer Healthcare Business *2: North, Central and South America *3 : Europe, Middle East, Africa, Russia, and Oceania *4 : Mainly South Korea, Taiwan, Hong Kong, India and ASEAN *5: Recognition of bargain purchase gain in April 2016, following acquisition of EA Pharma Co., Ltd. shares *6: Transferred shares of Sannova Co., Ltd. in April 2016

Breakdown of Operating Profit Migration



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** Figures shown in breakdown are approximate.
*1: Operating profit from LENVIMA, Halaven, Fycompa and BELVIQ, excluding revenue from Japan pharmaceutical business *2: Booked in Q1 FY2016

Performance of Japan Pharmaceutical Business

(billions of yen, %)

	April-September FY2016		April-September FY2017		
	Results	%	Results	%	YoY
Revenue	149.7	100.0	150.9	100.0	101
Prescription medicines	126.7	84.6	126.3	83.7	100
Humira	19.0	12.7	21.8	14.5	115
Aricept	16.4	11.0	13.3	8.8	81
Lyrica*1	11.9	7.9	13.2	8.7	111
Pariet*2,3	11.5	7.7	9.2	6.1	80
Methycobal	9.6	6.4	9.0	5.9	93
Lunesta	3.8	2.5	5.0	3.3	132
Halaven	4.0	2.7	4.7	3.1	118
Treakisym	2.0	1.4	3.5	2.3	170
Elental*2	3.4	2.3	3.4	2.3	101
Warfarin	3.6	2.4	3.2	2.1	87
Livact*2	3.4	2.3	3.1	2.1	91
Lenvima	1.4	0.9	1.5	1.0	111
Fycompa	0.2	0.1	0.7	0.5	383
Generics	13.5	9.0	13.6	9.0	101
Consumer Healthcare Business	9.5	6.4	11.0	7.3	115
Segment profit	55.3	37.0	55.6	36.9	101

*1: Alliance revenue *2: EA Pharma products
*3: Includes sales of triple formulation *Helicobacter pylori* eradication packs, Rabecure Pack 400/800 and Rabefine Pack

Performance of Americas Pharmaceutical Business

(billions of yen, %)

	April-September FY2016		April-September FY2017			
	Results	%	Results	%	YoY	
Revenue	56.9	100.0	58.0	100.0	102	[97]
Aloxi	24.1	42.4	21.5	37.0	89	[84]
Lenvima	6.9	12.2	10.1	17.4	146	[138]
Halaven	8.3	14.6	8.4	14.5	101	[95]
Banzel	6.4	11.2	8.0	13.7	125	[119]
Fycompa	2.3	4.0	3.2	5.5	139	[132]
AcipHex	3.5	6.2	3.1	5.3	86	[82]
BELVIQ	1.6	2.9	2.0	3.4	120	[114]
Segment profit	17.3	30.5	19.7	34.0	114	[107]

[ ] based on local currency

* From this period, Eisai has clarified the definition of research and development expenses in order to more appropriately reflect the economic realities, and this has resulted in a portion of expenses relating to medical affairs activities, such as provision of scientific evidence for health care providers, being apportioned to research and development expenses. Accordingly, the expenses included in selling, general and administrative expenses during the last period has been reclassified as research and development expenses.

Performance of China Pharmaceutical Business

(billions of yen, %)

	April-September FY2016		April-September FY2017			
	Results	%	Results	%	YoY	
Revenue	23.4	100.0	28.0	100.0	120	[116]
Methycobal	8.8	37.5	10.2	36.5	116	[113]
Stronger Neo-Minophagen C and Glycyron Tablets	4.0	17.2	4.8	17.1	119	[115]
Aricept	2.9	12.5	3.5	12.6	120	[117]
Pariet	1.8	7.7	2.3	8.3	130	[126]
Segment profit	7.4	31.6	8.4	30.1	114	[109]

[ ] based on local currency

* From this period, Eisai has clarified the definition of research and development expenses in order to more appropriately reflect the economic realities, and this has resulted in a portion of expenses relating to medical affairs activities, such as provision of scientific evidence for health care providers, being apportioned to research and development expenses. Accordingly, the expenses included in selling, general and administrative expenses during the last period has been reclassified as research and development expenses.

Performance of EMEA* Pharmaceutical Business

(billions of yen, %)

	April-September FY2016		April-September FY2017			
	Results	%	Results	%	YoY	
Revenue	18.2	100.0	21.2	100.0	116	[110]
Halaven	5.3	29.3	5.8	27.6	110	[103]
Zebinix	1.7	9.4	2.6	12.4	154	[145]
Lenvima / Kisplyx	1.2	6.6	2.6	12.3	218	[205]
Fycompa	2.1	11.6	2.4	11.5	116	[110]
Zonegran	2.8	15.5	2.2	10.2	77	[73]
Inovelon	0.9	5.1	1.1	5.2	119	[113]
Segment profit	7.6	41.7	7.3	34.5	96	[85]

* Europe, Middle East, Africa, Russia, and Oceania

[ ] based on local currency

* From this period, Eisai has clarified the definition of research and development expenses in order to more appropriately reflect the economic realities, and this has resulted in a portion of expenses relating to medical affairs activities, such as provision of scientific evidence for health care providers, being apportioned to research and development expenses. Accordingly, the expenses included in selling, general and administrative expenses during the last period has been reclassified as research and development expenses.

Performance of Asia* Pharmaceutical Business

(billions of yen, %)

	April-September FY2016		April-September FY2017			
	Results	%	Results	%	YoY	
Revenue	17.1	100.0	21.2	100.0	124	[115]
Humira	4.7	27.8	6.0	28.3	127	[117]
Aricept	4.8	28.0	5.8	27.5	122	[113]
Pariet	1.7	10.1	2.1	10.1	125	[116]
Methycobal	1.4	8.1	1.7	8.0	123	[113]
Halaven	1.0	5.9	1.3	6.1	128	[117]
Lenvima	0.1	0.5	0.5	2.5	609	[580]
Fycompa	0.2	0.9	0.3	1.3	182	[168]
Segment profit	4.7	27.8	6.6	31.1	139	[127]

* Mainly South Korea, Taiwan, Hong Kong, India, and ASEAN

[ ] based on local currency