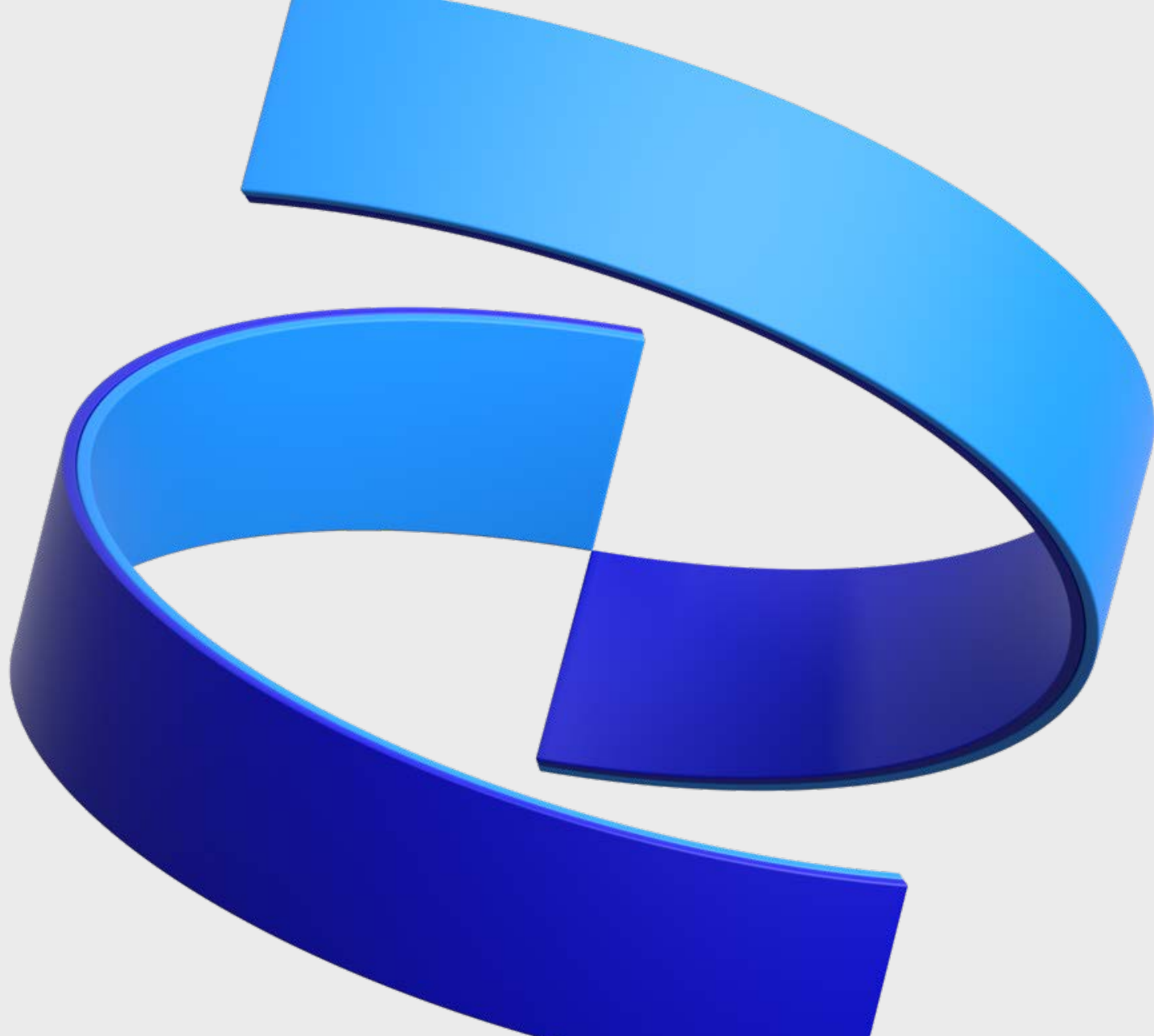




Third Quarter 2021 Earnings Teleconference

November 2, 2021



Breakthroughs that change patients' lives[®]

The background features a series of overlapping, curved, three-dimensional shapes in shades of blue and purple. These shapes create a sense of depth and movement, with some areas appearing to be cut or layered, giving the overall design a modern, architectural feel.

Introduction

Christopher Stevo

Senior Vice President,
Chief Investor Relations Officer

Forward-Looking Statements and Non-GAAP Financial Information

- Our discussions during this conference call will include forward-looking statements that are subject to substantial risks and uncertainties that could cause actual results to differ materially from those expressed or implied by such statements. We include forward-looking statements about, among other topics, our anticipated operating and financial performance, reorganizations, business plans and prospects, expectations for our product pipeline, in-line products and product candidates, including anticipated regulatory submissions, data read-outs, study starts, approvals, clinical trial results and other developing data, revenue contribution, growth, performance, timing of exclusivity and potential benefits, strategic reviews, capital allocation objectives, dividends and share repurchases, plans for and prospects of our acquisitions, dispositions and other business development activities, and our ability to successfully capitalize on these opportunities, manufacturing and product supply, our efforts to respond to COVID-19, including Comirnaty and our investigational protease inhibitors, and our expectations regarding the impact of COVID-19 on our business, operations and financial results. Among other things, statements regarding revenue and earnings per share growth; the development or commercial potential of our product pipeline, in-line products, product candidates and additional indications, including expected clinical trial protocols, the timing of the initiation and progress of clinical trials and data read-outs from trials; the timing for the submission of applications for and receipt of regulatory approvals; and expected breakthrough, best or first-in-class or blockbuster status of our medicines or vaccines are forward-looking and are estimates that are subject to change and clinical trial and regulatory success. These statements are subject to risks, uncertainties and other factors that may cause actual results to differ materially from past results, future plans and projected future results. Additional information regarding these and other factors can be found in Pfizer's Annual Report on Form 10-K for the fiscal year ended December 31, 2020 and its subsequent reports on Form 10-Q, including in the sections thereof captioned "Risk Factors" and "Forward-Looking Information and Factors That May Affect Future Results", as well as in our subsequent reports on Form 8-K, all of which are filed with the U.S. Securities and Exchange Commission and available at www.sec.gov and www.pfizer.com. Potential risks and uncertainties also include the impact of COVID-19 on our sales and operations, including impacts on employees, manufacturing, supply chain, marketing, research and development and clinical trials. The forward-looking statements in this presentation speak only as of the original date of this presentation and we undertake no obligation to update or revise any of these statements.
- Also, the discussions during this conference call will include certain financial measures that were not prepared in accordance with U.S. generally accepted accounting principles (GAAP). Additional information regarding non-U.S. GAAP financial measures can be found on slides 38-39 and in our earnings release furnished with Pfizer's Current Report on Form 8-K dated November 2, 2021. Any non-U.S. GAAP financial measures presented are not, and should not be viewed as, substitutes for financial measures required by U.S. GAAP, have no standardized meaning prescribed by U.S. GAAP and may not be comparable to the calculation of similar measures of other companies.

The background features a series of overlapping, curved, three-dimensional shapes in shades of blue and purple. These shapes create a sense of depth and movement, with some areas appearing to be in shadow and others brightly lit. The overall effect is a modern, abstract graphic design.


Opening Remarks


Albert Bourla

Chairman and Chief Executive Officer

Q3 2021 Key Highlights

Strong Financial Performance

 **+130%** Total Company
+7% ex-Comirnaty⁽¹⁾
Operational Revenue Growth

 **+125%**
Operational Adj. Diluted EPS⁽¹⁾ Growth

Raised FY 2021 Total Company Guidance⁽¹⁾

\$81.0B-\$82.0B
Revenue

\$4.13-\$4.18
Adj. Diluted EPS

Value for Patients



~1B

Patients
reached worldwide YTD
with our medicines and
vaccines⁽³⁾

Value for Shareholders



\$0.39

quarterly dividend

- +3% year over year
- +5% year over year for Pfizer shareholders still holding Viatrix shares
- 331st consecutive quarterly dividend paid

Pipeline Innovation

1st EUA from FDA for **COVID-19 vaccine in children** 5-11 years and submission to EU for variation to CMA for children 5-11 years



Positive Phase 2b/3 trial with oral JAK3/TEC **ritlecinib for alopecia areata**

Approved⁽²⁾

CIBINQO 

1st Patient dosed in large 30,000 Phase 3 RENOIR study with **RSV bivalent vaccine candidate**



Initiation of Phase 2/3 studies for **IV and oral protease inhibitors for COVID-19**

COMIRNATY®

TicoVac™



Third Quarter 2021 Earnings

⁽¹⁾ See Slides 38 and 39 for definitions and for additional information regarding Pfizer's 2021 financial guidance

⁽²⁾ Cibinqo approved in Great Britain and Japan; Comirnaty ages 16+ and TicoVac approved in U.S.

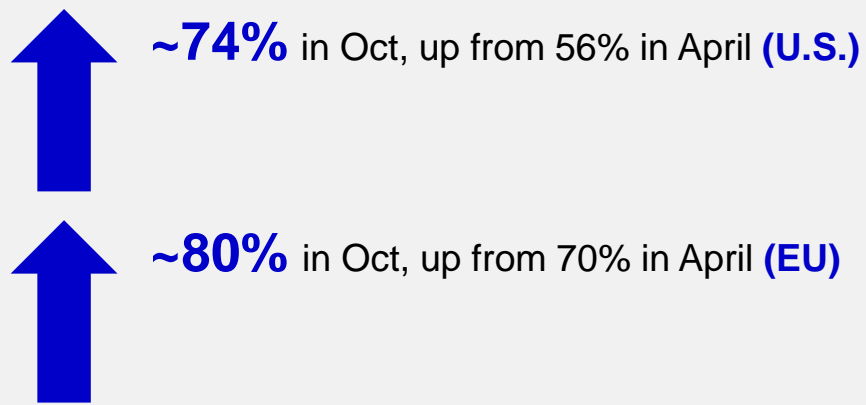
⁽³⁾ Patient counts are estimates derived from multiple data sources; ~300M patients ex-Comirnaty

Q3 2021 Revenues: Comirnaty⁽¹⁾

Strong Performance

\$13B	Global Revenue in 3rd Quarter
2.6B	Doses Manufactured ⁽²⁾
2B	Doses Shipped ⁽²⁾
152	Countries or Territories
75%	Ex-U.S. Revenues YTD

Increased Monthly Share⁽³⁾ as of October 31, 2021



Help Ensure We Quickly Respond to the Virus as it Evolves

- First, top-line results from our Phase 3 randomized, controlled trial demonstrated that a booster dose administered to individuals 16 years of age and older who previously received the Pfizer-BioNTech primary two-dose series restored vaccine protection against COVID-19 to the high levels achieved after the second dose
- FDA Emergency Use Authorization of our COVID-19 vaccine 5 through 11 years of age.

115M

Pediatric doses to the U.S. Government



Third Quarter 2021 Earnings

⁽¹⁾ See Slides 38 and 39 for definition of Comirnaty, which is the name for the Pfizer-BioNTech COVID-19 Vaccine

⁽²⁾ As of October 31, 2021

⁽³⁾ Based on data available as of 10/31/21. Calculated from CDC Historic Vaccination Data and ECDC vaccinations data. Cumulative market share is 58.8% in the U.S. and 73.4% in the EU

Q3 2021 Revenues: Other Key Growth Drivers

Revenues Grew 130% Operationally; Grew 7% Op Excluding the Impact of Comirnaty⁽¹⁾



\$1,346M +19% op

U.S. \$629M, +13%
Int'l \$717M, +25% op



\$501M +42% op⁽²⁾

U.S. \$228M, +44%
Int'l \$273M, +40% op



\$1,381M +1% op

U.S. \$883M, -3%
Int'l \$498M, +9% op

Oncology Biosimilars

\$398M +51% op⁽³⁾

U.S. \$284M +65%
Dev Int'l \$98M, +29% op


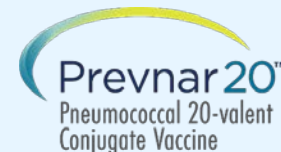


⁽¹⁾ See Slides 38 and 39 for definition of Comirnaty, which is the name for the Pfizer-BioNTech COVID-19 Vaccine

⁽²⁾ Presented figures include sales of both Vyndaqel and Vyndamax. In the U.S. >30,000 patients diagnosed; >22,000 received prescription; >13,500 received drug

⁽³⁾ Pfizer Oncology Biosimilars are Nivestym, Nyvepria, Retacrit, Ruxience, Trazimera and Zirabev

Q3 2021 Revenues: Managing through Challenges

Drivers & Next Generation of Innovation Help Offset Challenges

Challenge		Opportunity
	<ul style="list-style-type: none"> • Pprevnar Family (Pprevnar/Prevenar 13 & 20): 2% decline in U.S. revenue due to 36% decline in Pprevnar 13 adult indication • ACIP votes to recommend single dose of Pprevnar 20 for 65+ and high risk 19-64 <ul style="list-style-type: none"> ◦ Once endorsed by CDC director, only pneumococcal conjugate vaccine administered without the need to be followed by a dose of PPSV-23, helping ensure patients' compliance 	
	<ul style="list-style-type: none"> • Xeljanz: potential return to growth once final U.S. label is issued and physicians' prescribing habits adjust • Cibinqo (abrocitinib): <ul style="list-style-type: none"> ◦ Approved in Great Britain & Japan in both doses for treatment of mod. to severe AD for ages 12+⁽¹⁾ ◦ EMA's⁽²⁾ CHMP⁽²⁾ positive opinion recommending both doses to treat mod. to severe AD in adults⁽¹⁾ ◦ Applications pending with regulators around the world, including U.S. and Australia • Brepocitinib⁽³⁾ and TYK2⁽³⁾ out-licensed to partner experienced in Inflammation & Immunology space with Pfizer retaining 25% stake in NewCo and certain ex-U.S. rights 	 Brepocitinib⁽³⁾ and TYK2⁽³⁾
























⁽¹⁾ Approval in Great Britain for ages 12+ and CHMP positive opinion in adults who are candidates for systemic therapy; approval in Japan for ages 12+ with inadequate response to existing therapies

⁽²⁾ EMA=European Medicines Agency; CHMP=Committee for Medicinal Products for Human Use

⁽³⁾ Brepocitinib TYK2/JAK1 Inhibitor (PF-06700841); TYK2 Inhibitor (PF-06826647)

Bolstering the Pipeline with Recent Business Development Opportunities

Select Examples

Year	Therapeutic Area	Organization	Asset/Indication	Status Since Close
2019	 		BRAFTOVI & MEKTOVI – Cancer LMNA – Cardiomyopathy	Approvals: 1 Pivotal Starts: 2 FIH: 3 ⁽¹⁾
			GTx – Wilson Disease	Fast Track Designation (FDA) FIH: Q1 2022 ⁽²⁾
			Recifercept – Achondroplasia	Ph 2 start: 1
		 	Vupanorsen – CV risk & severe hypertriglyceridemia ⁽³⁾	Ph 2a readout: 1 Ph 2b start: 1
2020			Vaccine – Lyme Disease	Ph 2 readouts: 2
			Vaccine – COVID-19	Approvals: 1; EUAs: 4 ⁽⁴⁾ Ph 3 readouts: 4 / FIH: 1
			Vaccine – Flu	Ph 1 start: 1 / FIH: 1
	 		Relugolix – Prostate Cancer & Women's Health	Approvals: 1 Submissions: 2 Ph 3 Readouts: 2 ⁽⁵⁾
2021			ER PROTAC – Breast Cancer	POC Readout: Q4 2021 ⁽²⁾
			TTI-622/621 – Oncology ⁽⁶⁾	Transaction Pending

⁽¹⁾ Approvals, pivotal starts and FIH apply to multiple assets acquired in Array agreement

⁽²⁾ Expected timing; all dates are preliminary, subject to change, and subject to clinical trial and regulatory success

⁽³⁾ Ionis fully acquired Akcea in August 2020

⁽⁴⁾ 4 EUAs for COVID-19 vaccine for 16+, 12-15 yrs, booster 65+ and 18-64 high risk and 5-11 yrs

⁽⁵⁾ Approvals, submissions and Phase 3 readouts apply to Relugolix in Women's Health

⁽⁶⁾ Transaction expected to close in Q4 2021 or 1H 2022, subject to customary closing conditions

FIH=First in Human; POC=Proof of Concept

Welcome to Aamir Malik

Executive Vice President and Chief Business Innovation Officer



-
- In August, joined Executive Leadership Team as Chief Business Innovation Officer
 - 25 year career at McKinsey & Company where he developed growth strategies, guided mergers and acquisitions, and implemented large-scale programs to improve patients' lives and transform performance for life science companies
 - A partner in Pfizer's next era of innovation

Looking Ahead

Driving Operational Excellence

- Investing in areas where we can win
- Scaling emerging technology platforms
- Maintaining patient centricity and the highest quality standards
- Reducing approval development cycle times
- Fostering a culture of innovation

The New Pfizer

- Focused, Innovative Biopharma
- Striving to Pursue “First-in-Class” Science Opportunities
- Drive EPS Growth through Durable, Organic Topline Growth

Reaffirm projected revenue CAGR of at least 6% and double digit EPS growth from 2020-2025⁽¹⁾

⁽¹⁾ Excludes the impact of Comirnaty⁽²⁾, recent or subsequent BD activities or potential future mRNA programs

⁽²⁾ See Slides 38 and 39 for definitions



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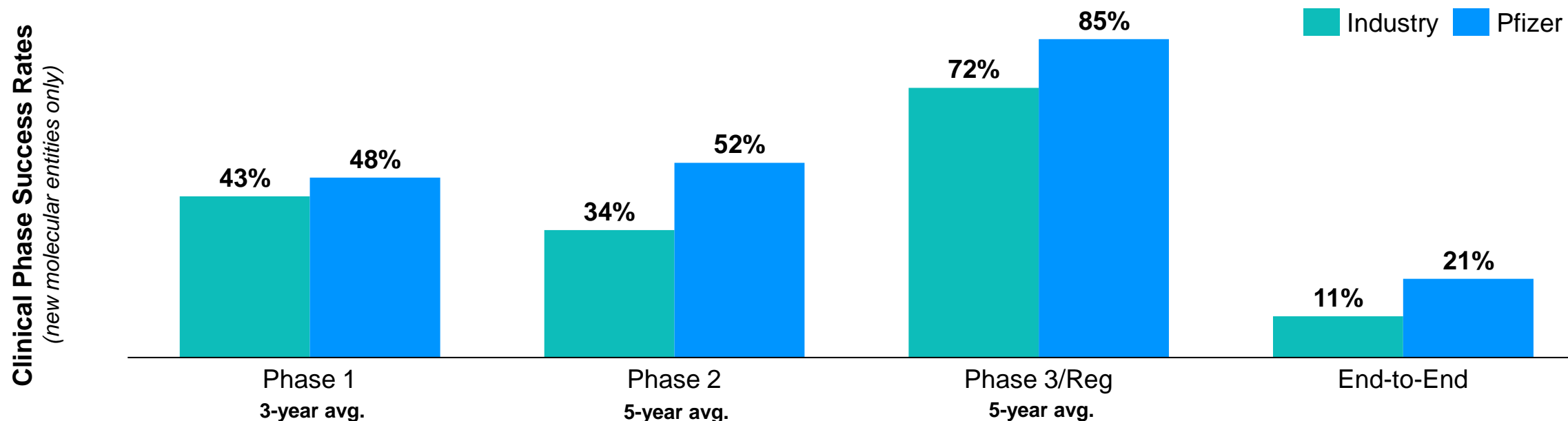
Scientific Updates

Mikael Dolsten

Chief Scientific Officer and President,
Worldwide Research, Development and
Medical

Pfizer Continues to Sustain High End-to-End Clinical Success Rates

Pfizer vs Industry Average Clinical Success Rates (2020)



Pfizer continues to sustain similarly high success rate in 2021

Success rates are based on a 5-year rolling average for Phase 2 and Phase 3 studies, and a 3-year rolling average for Phase 1 studies, with the cut-off for Pfizer and industry's analysis ending on fiscal year-end 2020, which is the most recent information available. The analysis includes only studies involving new molecular entities. The "industry" in this analysis was based on the Pharmaceutical Benchmarking Forum's participant companies: AbbVie, Inc.; Allergan PLC (which was acquired by AbbVie, Inc. in May 2020); Bayer AG; Bristol-Myers Squibb Company; Eli Lilly and Company; Gilead Sciences, Inc.; Johnson & Johnson Corporation; Merck & Co, Inc.; Novartis AG; Pfizer; Roche, Inc. and Sanofi S.A.



Key Portfolio Updates

Q3 2021 Earnings Call



**COMIRNATY
COVID-19 Vaccine**



**F8, F9 & Duchenne
Gene Therapy**



**High Potency PDE4+
Medical Dermatology**



**TL1A Inhibitor
Ulcerative Colitis**



**IFN- β Inhibitor
Dermatomyositis**



**Oral Protease Inhibitor
COVID-19**

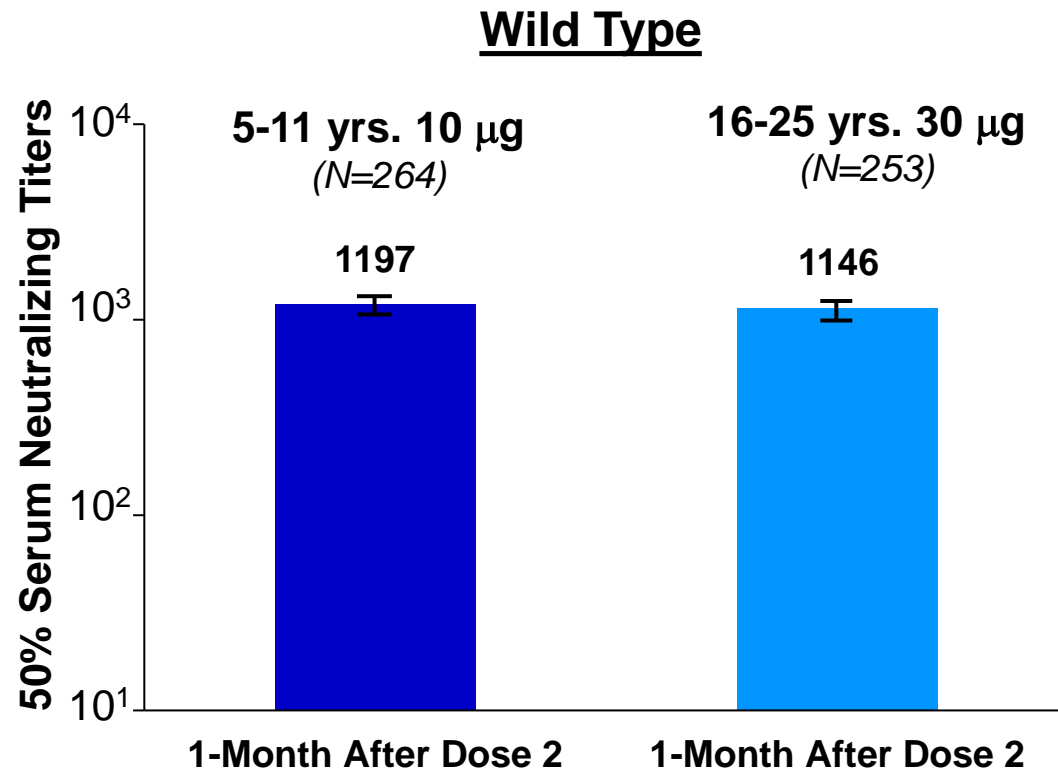
PDE4 = phosphodiesterase-4; TL1A = Tumor Necrosis Factor-Like Cytokine 1A; IFN- β = Interferon Beta; F8 = Factor 8; F9 = Factor 9;
COVID-19 = Coronavirus Disease 2019



COMIRNATY Induced Robust Efficacy in Children 5-11 yrs.

Phase 2/3 Study

Comparable Response Observed at 10µg



High Vaccine Efficacy Demonstrated at 10µg

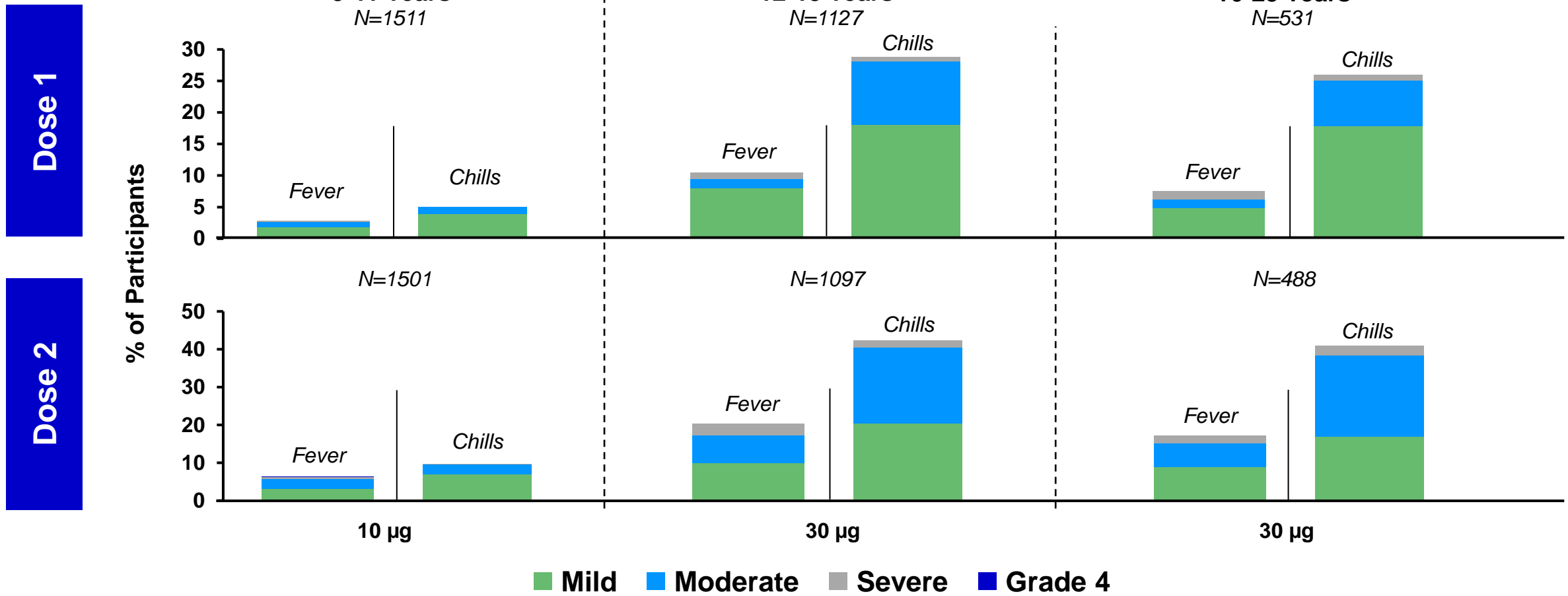
5-11 yrs. Phase 2/3 study

COMIRNATY (N=1305)	Placebo (N=663)	
Confirmed COVID-19	Confirmed COVID-19	Vaccine Efficacy* % (95% CI)
3	16	90.7% (67.7, 98.3)

*Vaccine Efficacy: first COVID-19 occurrence from 7 days after dose 2, participants without evidence of infection prior to 7 days after post dose 2



Fever & Chills Milder in 5-11yrs. (10µg) than Adolescent & Adults (30µg)



Note: The number above each bar denotes the number of participants (N) in each treatment group who provided at least 1 yes or no response for the specified event within 7 days of the specified dose. This is the denominator used to calculate the percentages shown. Age groups 12-15 Years and 16-25 Years are from Phase 2/3 study C4591001

Improved Handling Conditions for 5-11 yr. versus 12 + yr.



Vial Cap Color	Purple	Orange
Age (in years)	12+ yr.	5 y – 11 yr.
Dose	30 µg	10 µg
Pack Size	195 Pack	10 Pack Only
Doses per Vial	6 doses	10 doses (after dilution)
ULTRA Freezer (-90C to -60C)	✓ Up to 9 months	✓ Up to 6 months
Refrigerator (2C to 8C)	✓ Up to 1 month	✓ Up to 10 weeks
Freezer (-25C to -15C)	✓ Up to 2 weeks	—



3rd Booster Dose Restores High Levels of Vaccine Effectiveness

Phase 3 booster dose highly effective against symptomatic COVID-19¹

COMIRNATY (N=4695)	Placebo ² (N=4671)	
Confirmed COVID-19 ³	Confirmed COVID-19 ³	Vaccine Efficacy % (95% CI)
5	109	95.6% (89.3, 98.6)

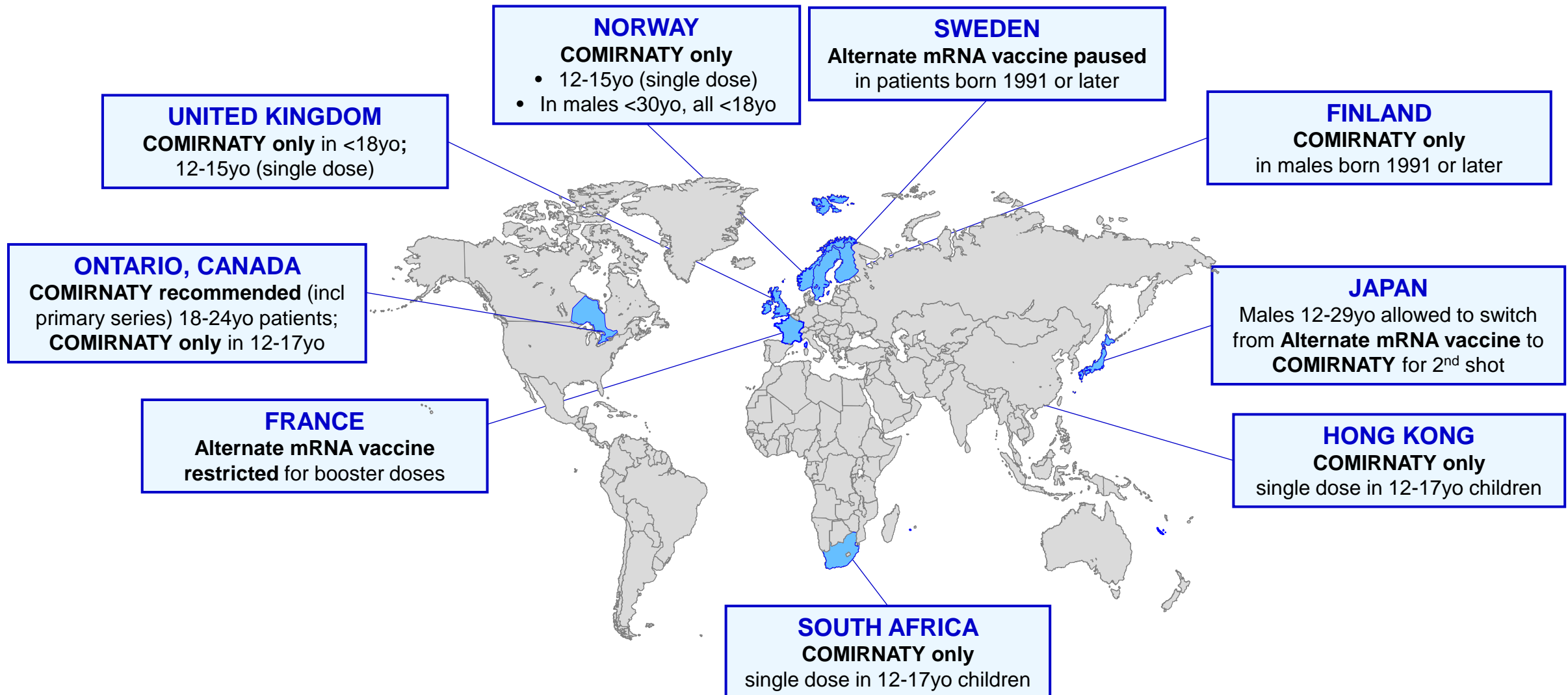
Real world evidence Israel booster dose: Effectiveness of 3rd dose vs. 2 doses⁴

	Vaccinated with 2 doses (Risk per 100K)	Vaccinated with 3 doses (Risk per 100K)	Vaccine Effectiveness ⁵ (95% CI)
Hospital Admission	220.8	14.4	93% (88-97)
Severe Disease	158.9	12.9	92% (82-97)
Death	31.9	6.1	81% (59-97)

1. Oct 21st, 2021 Press Release; 2. Placebo group all had primary 2 dose series; 3. First COVID-19 occurrence from ≥ 7 days after booster vaccination to < 2 months after booster vaccination; 4. Barda et al. 2021, The Lancet; 5. Vaccine Effectiveness = (Risk among 2 dose vaccinated group – risk among 3 dose vaccinated group)/(risk among 2 dose vaccinated group), CDC



Guidelines Favoring COMIRNATY in Certain Populations¹





Pfizer Gene Therapy: Program Updates

Clinical Programs

Hemophilia B

- Ph1b: F9 expression of 22% out to yr 4 (n=7)
 - ABR of <1
 - Longer follow-up to be presented at ASH
- Pivotal study **enrolled** sufficient population for primary endpoint assessment
- Projected **pivotal readout Q1 2023**

Hemophilia A

- Ph1b: F8 activity >50% at 78 wks
 - ABR<1 throughout¹
 - Data to 104 wks to be presented at ASH
- Pivotal study **>50% enrolled**
 - *Observational lead-in study fully enrolled*
- Pivotal trial **voluntarily paused** for protocol change

Duchenne Muscular Dystrophy

- Ph1b: Robust & durable dystrophin expression at 1 yr
 - Along with functional improvements (NSAA)
 - Ph1b data to 52 wks to be presented in 1Q22
- Pivotal Study >30% enrolled
 - *Full enrollment projected Q1 2022*
- Projected **pivotal readout Q1 2023**

Pre-Clinical Programs & Manufacturing Capabilities

- **12 pre-clinical gene therapy** programs
 - Anticipating **~1-2 First in Human** study starts/year (E.g., FIH - Wilson Disease Q1 2022; IND Gaucher's Q4 2022)
- **Industry-leading investment** in manufacturing of AAV vectors (~\$800M for 3 manufacturing sites; 11 x 2000 L scale bioreactors)

1. At 3e13 dose used in Ph3; ABR = Annual Bleed Rate; Wks = Weeks; ASH = American Society of Hematology (2021); North Star Ambulatory Assessment = NSAA; AAV = Adeno-Associated Virus; FIH = First in Human; IND = Investigational New Drug; Hemophilia B = PF-06838435; Hemophilia A = PF-07055480; Duchenne Muscular Dystrophy = PF-06939926



High Potency PDE4+ (PF-07038124) Atopic Dermatitis & Psoriasis

PATIENT



- Atopic dermatitis & psoriasis are **chronic skin disorders** driven by inflammation & skin barrier defects
- **32M** people living with **atopic dermatitis (AD)** in the **US**; **8M** people living with **psoriasis (PsO)** in the **US**

SCIENCE



- **AD & PsO** disease **pathogenesis driven by** multiple cytokines (E.g., **IL-13, IL-4, IL-23**) generated by immune cells^{1,2}
 - Select **cytokines** can be **down regulated by agents that elevate** cyclic adenosine monophosphate (**cAMP**)³
- **Inhibition of** the intracellular enzyme **PDE4 increases cAMP** and may **resolve** inflammation associated with **AD & PsO**
- **PDE4 inhibition** reduces inflammatory response in a **dose dependent** manner⁴

REASONS TO BELIEVE



- **Phase 2a study met the primary endpoint** for both AD and PsO with **significant reduction in disease activity**
- High Potency PDE4+ demonstrated **greater inhibition of IL-4, IL-13, & IL-23** vs other topicals in AD & PsO (*not head-to-head*)⁵
- Even at significantly lower dose, promising clinical efficacy compared to other PDE4 topicals observed

EXPECTED TIMING



- Expected to initiate Phase 2b study Q3 2022 – AD & PsO

1. Chiricozzi et al. 2020 Immunotargets Ther.; 2. Han and Ghoreschi 2017 Ex. Rev. Clin Immunology; 3. Eskandari et al., 2004. Br J Pharmacol.; 4. Wittmann and Helliwell 2013. Derm. & Therapy; 5. Increased inhibition potency vs roflumilast (AD), ruxolitinib (AD) and crisaborole (PsO), for illustrative purposes only not head-to-head trials; PDE4 = phosphodiesterase-4; cAMP = Cyclic Adenosine Monophosphate; Th17 = T-helper 17 cell; Th1 = T-helper type 1 cell; IL-13 = Interleukin 13; IL-4 = Interleukin 4; IL-23 = Interleukin 23



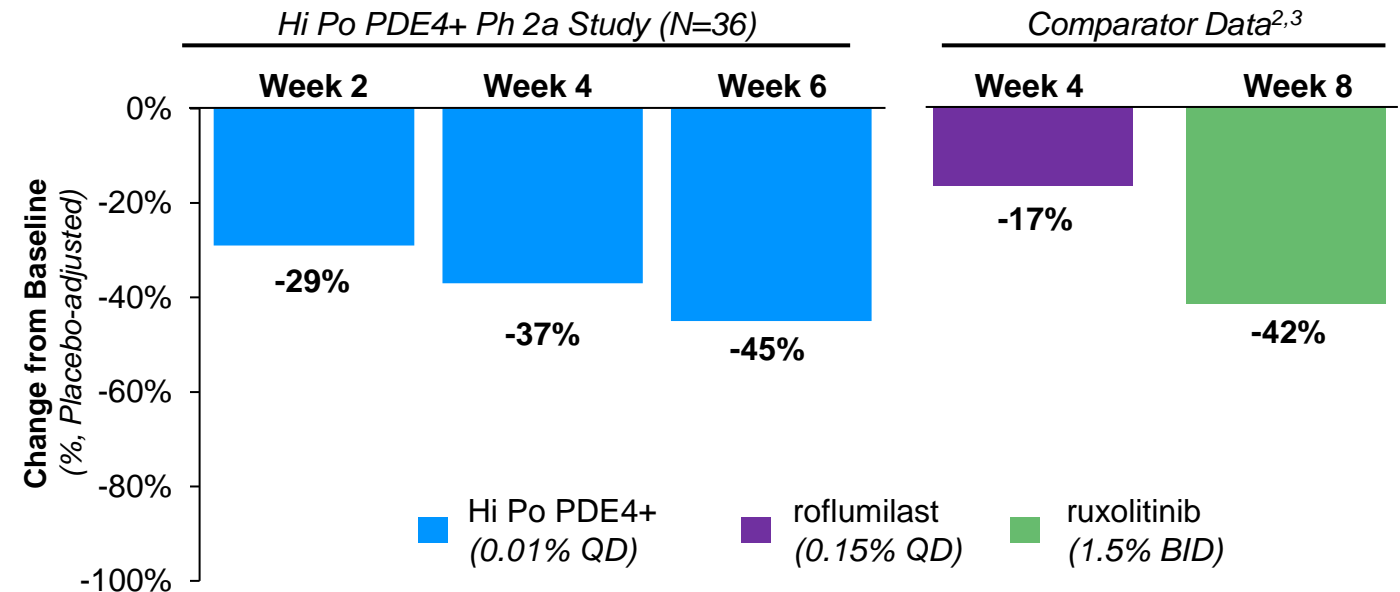
High Potency (Hi Po) PDE4+ Atopic Dermatitis Phase 2a Study

Significant Reduction in Eczema Area Severity at Low Dose

Potency Against IL-4 & IL-13 – *in vitro*

PDE4 Inhibitors	IL-4 (IC ₅₀ , nM)	IL-13 (IC ₅₀ , nM)
Hi Po PDE4+	20	383
roflumilast	4770	>10,000
crisaborole	682	>20,000

Clinical Improvement (EASI) – Hi Po PDE4+ vs Comparators¹



- ~240-fold increase in IL-4 inhibition & ~25-fold increase in IL-13 inhibition vs roflumilast¹ (*in vitro*)
- Met primary efficacy endpoint, **significantly different from vehicle** in change from baseline in EASI
- **Well tolerated** and **favorable** benefit/risk profile; 83% of subjects had no measurable exposure; **no stinging at application site observed**

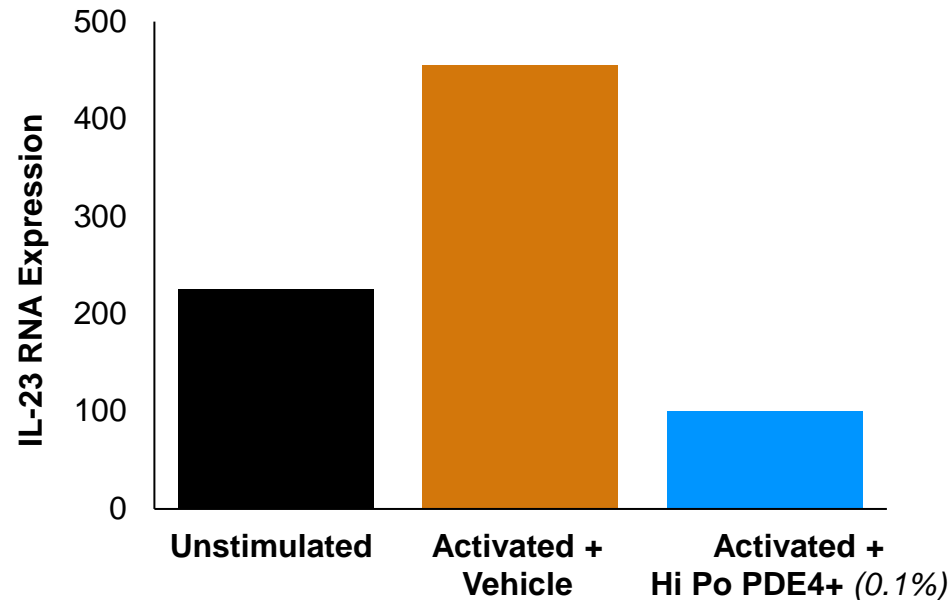
1. roflumilast Ph 2, ruxolitinib Ph 3, for illustrative purposes only, not a head-to-head study, no direct comparisons can be made; 2. Lebwohl et al., 2022, NEJM; 3. Papp et. Al., 2021, J. Amer. Acad. Derm; PDE4 = phosphodiesterase-4; IL-4 = Interleukin 4; IL-13 = Interleukin 13; EASI = Eczema Area and Severity Index; QD = Once daily; BID = Twice daily



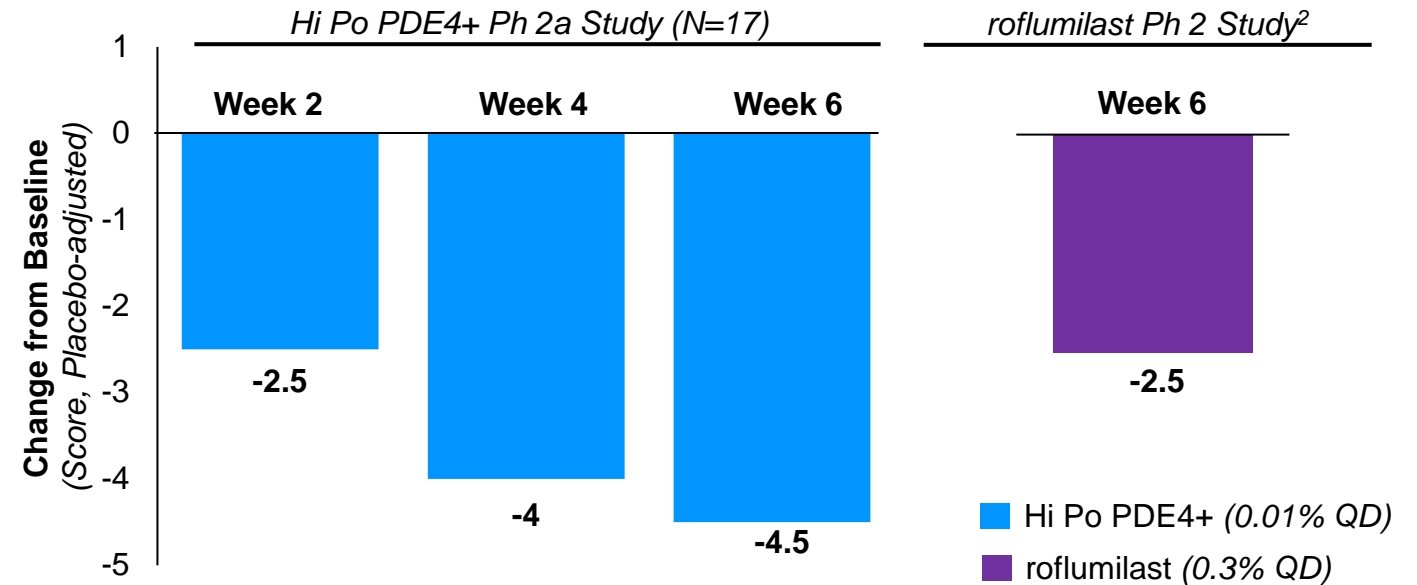
High Potency (Hi Po) PDE4+ Psoriasis Phase 2a Study

Significant Reduction in Psoriasis Area Severity at Low Dose

Potency Against IL-23 – Skin Model



Clinical Improvement (PASI) – Hi Po PDE4+ vs Comparators¹



- ~80% reduction in IL-23 vs activated skin plus vehicle in *in vitro* models
- Met primary efficacy endpoint, **significantly different from vehicle** in change from baseline in Psoriasis Area & Severity Index (PASI) score
- **Well tolerated** and **favorable** benefit/risk **profile**; 93% of subjects had no measurable exposure



TL1A Inhibitor (PF-06480605) Ulcerative Colitis

PATIENT



- **Ulcerative Colitis** is a **chronic, inflammatory bowel disease** that causes inflammation in the digestive tract
- **~3M people** living with ulcerative colitis in **US**

SCIENCE



- **TL1A amplifies cytokine production** in multiple immune cells where it **drives intestinal inflammation and fibrosis**
- **Blocking of TL1A** inhibits Th1 responses potentially **improving UC disease pathology**¹
- Exploratory **Biomarkers** may **enhance patient selection & improve outcomes**; **60-65%** of UC patients **biomarker positive**

REASONS TO BELIEVE



- Promising Phase 2a **endoscopic improvement** in ulcerative colitis patients (TUSCANY-1)
- Based on **benefit/risk profile** (Phase 2a), **potential for TL1Ai** to be **used earlier in treatment paradigm**
- **Precision medicine** approach utilizing **key biomarkers** for patient selection may **enhance clinical outcomes**

EXPECTED TIMING



- Phase 2b (TUSCANY-2) ongoing, estimated primary completion Q4 2022

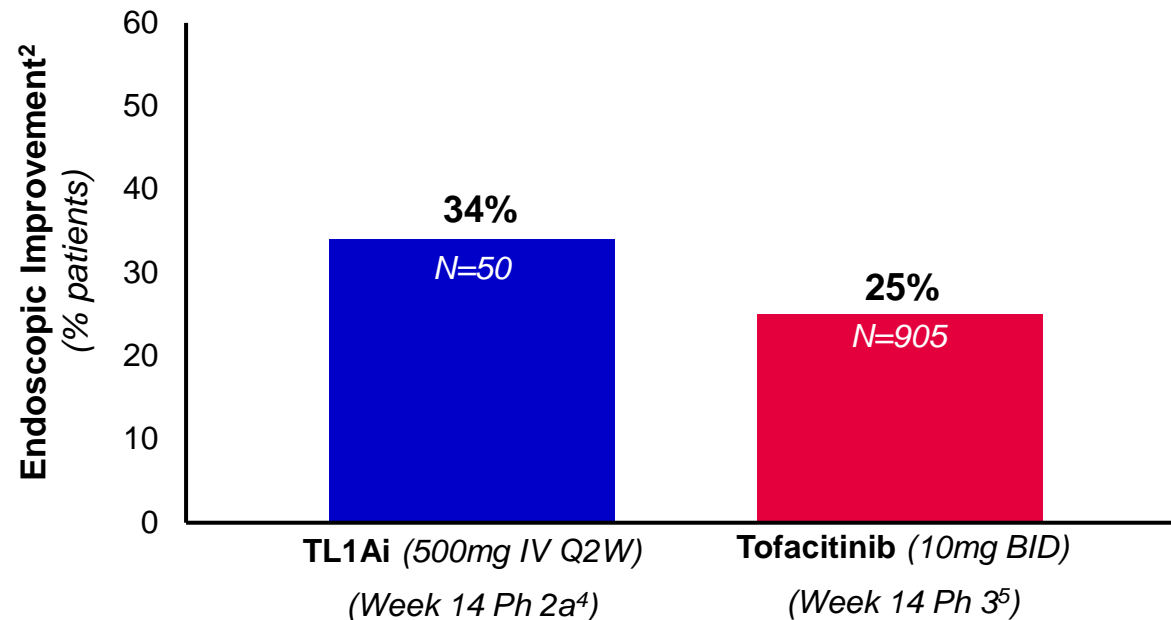
1. Clarke et al., 2018 mAbs; TL1Ai = Tumor Necrosis Factor-Like Cytokine 1A Inhibitor3; UC = Ulcerative Colitis



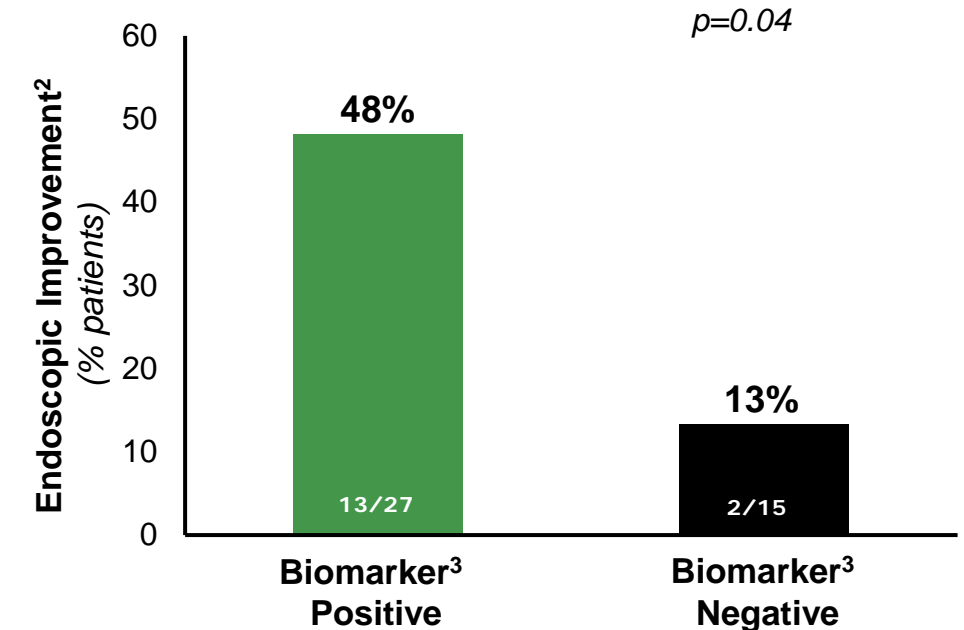
TL1A Inhibitor Ulcerative Colitis Phase 2a Study

Improvement in Mayo Score & Potential for Biomarker-Driven Patient Selection to Improve Efficacy

Endoscopic Improvement: TL1A Inhibitor (TL1Ai) & tofacitinib



Potential Biomarker-Based Patient Selection – Ph 2a



- **Efficacy:** Demonstrated a **greater reduction in Endoscopic sub-score** vs. tofacitinib⁴; **Exploratory biomarkers** may enhance clinical outcomes
- **Safety:** Treatment was generally **well-tolerated** and demonstrated an **acceptable short-term safety profile**

1. For illustrative purposes, not a head-to-head study, no direct comparisons can be made, propensity score weighted analysis; 2. Endoscopic Improvement = Mayo Score ≤ 1 ; 3. Biomarker undisclosed; 4. Single arm study, comparison to historical tofacitinib data for illustrative purposes only; 5. Data on file, interpolated remission at week 14, data longitudinally modeled from week 8 to week 14 based on month 2 and month 12 extension data;

TL1A = Tumor Necrosis Factor-Like Cytokine 1A



Interferon Beta (IFN- β) Inhibitor (PF-06823859) Dermatomyositis¹

PATIENT



- **Dermatomyositis (DM)** is a **rare, severely debilitating & life-threatening autoimmune disease** affecting skin and muscle
- High disease burden, **debilitating muscle weakness & rash, cardiac involvement, increased cancer risk & high mortality**
- **20K** cases in the **US**²; despite recent approval of Octagam IVIG, **high unmet medical need exists**

SCIENCE



- IFN- β protein levels are elevated in patient blood³ and mRNA levels are increased in patient skin
- Type 1 **IFN- β signature** in blood⁴ and skin **correlates** with **disease activity in skin**
- **Monoclonal antibody** targets and **inhibits IFN- β**

REASONS TO BELIEVE



- Significant **reduction in clinical disease activity** (CDASI) in skin observed in Phase 2 study (Part 1)
- **Reduction in IFN gene scores** vs placebo observed in Phase 2 study (Part 1)
- **ORPHAN** (US/UK) & **PRIME** (EU) **designations** granted

EXPECTED TIMING



- Phase 2 study readout (Part 2 & 3) anticipated Q1 2022

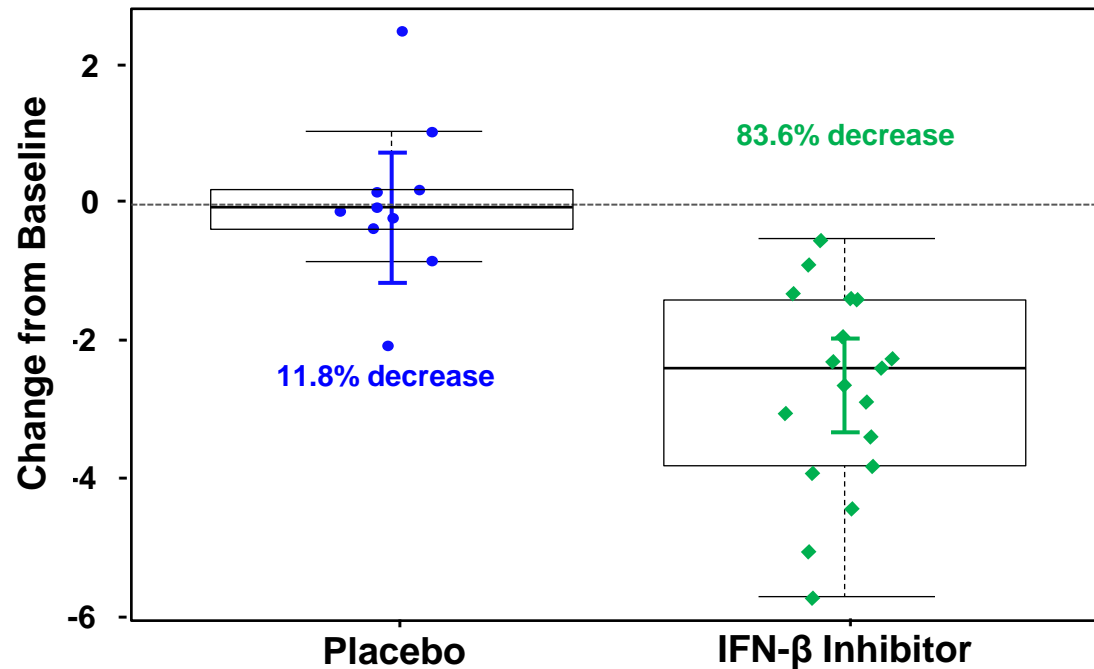
1. Program in collaboration with Mass General Brigham; 2. Clearview Analysis; 3. Liao et al, Ann Rheum Dis 70:831,2011; 4. Huard et al.Br J Derm 176: 1224, 2017; CDASI = Cutaneous Disease Area and Severity Index



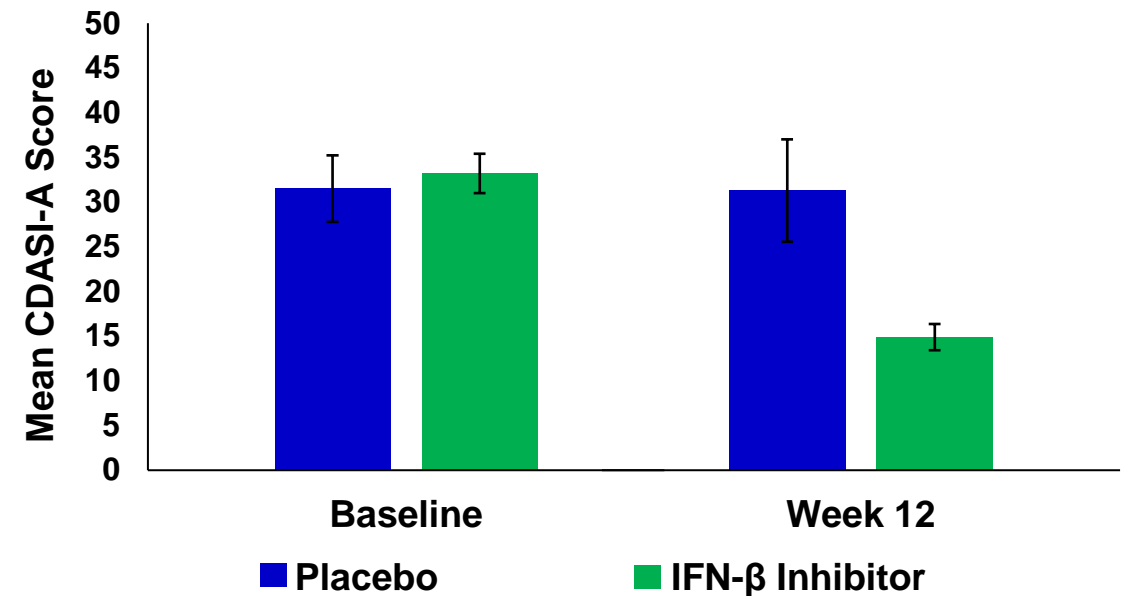
Interferon Beta (IFN- β) Inhibitor: Phase 2 (Part 1)

A Potential Breakthrough Therapy for Dermatomyositis Patients

13 Gene IFN- β Signature (12 wk)



Clinical Disease Activity (CDASI-A)

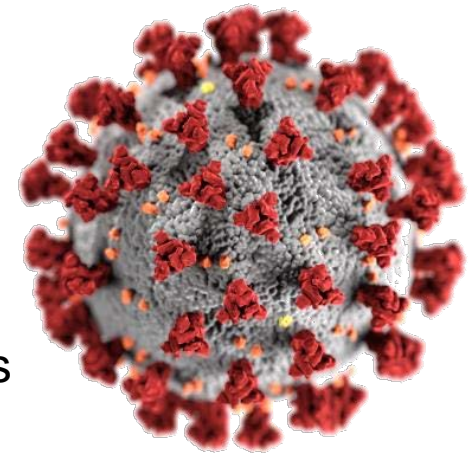


- **Efficacy:** Significantly different scores observed (treatment vs placebo) in **IFN- β gene scores** and **clinical disease activity** scores in Phase 2 (part 1) study
- **Safety:** Adverse events were mild-moderate



Oral Protease Inhibitor Candidate Targets 3 Patient Populations

- Oral protease inhibitor binds to SARS-CoV-2 3CL protein and prevents viral replication
 - **Potential for broad coronavirus treatment**
- Demonstrated **strong pre-clinical anti-viral activity** against **variants of concern**
- **Favorable** pre-clinical and clinical **safety profile** to date
- **Robust clinical program** with recruitment target of ~7000 participants across 3 studies
 - Designed to study breadth of **treatment & prevention** in **outpatient** setting



	HIGH RISK	STANDARD RISK	HOUSEHOLD CONTACT
Pivotal Study	EPIC-HR	EPIC-SR	EPIC-PEP
Recruitment Target	3,000	1,140	2,660
Projected Pivotal Readout	4Q 2021 – 1Q 2022	1Q 2022	1Q 2022 – 2Q 2022

3CL = 3C-Like Protease; SARS-CoV-2 = Severe Acute Respiratory Syndrome Coronavirus 2; EPIC-HR = Evaluation of Protease Inhibition for COVID-19 – High Risk; EPIC-SR = Evaluation of Protease Inhibition for COVID-19 – Standard Risk; EPIC-PEP = Evaluation of Protease Inhibition for COVID-19 – Post-Exposure Prophylaxis

Recent and Potential Upcoming Milestones

Select Examples

	2021	2022
Key Approvals	<ul style="list-style-type: none"> ● Myfembree uterine fibroids (<i>May-US</i>) ● Prevnar 20 Adult (<i>Jun-US</i>) ● COMIRNATY BLA 16+ (<i>Aug-US</i>); EUA 12-15 (<i>May-US</i>); EUA 5-11 (<i>Oct-US</i>) ● COMIRNATY booster EUA 65+ & 18-64 high risk (<i>Sept-US</i>) / CMA 18+ (<i>Oct-EU</i>) ● Cibinqo (abrocitinib) atopic dermatitis (<i>Sept-Great Britain/Japan</i>) ● Ngenla (somatrogen) growth hormone deficiency (<i>Oct-Canada</i>) ○ Xeljanz ankylosing spondylitis (<i>Q4-EU</i>) ○ Cibinqo (abrocitinib) atopic dermatitis (<i>Q4-EU</i>) 	<ul style="list-style-type: none"> ○ COVID-19 oral PI (<i>1H-US/EU</i>) ○ Cibinqo (abrocitinib) atopic dermatitis (<i>1H-US</i>) ○ Somatrogen growth hormone deficiency (<i>1H-US/EU</i>) ○ Myfembree endometriosis (<i>1H-US</i>) ○ COMIRNATY EUA 2-<5 (<i>1H-US</i>) ○ COMIRNATY EUA 0.5-<2 (<i>2H-US</i>)
Key Pivotal Readouts	<ul style="list-style-type: none"> ● Ritlecitinib ALLEGRO alopecia (<i>Aug</i>) ● Abrocitinib JADE DARE atopic dermatitis (<i>Aug</i>) ● Xtandi ARCHES mCSPC (<i>Sept</i>) ● Prevnar 20+flu CoAdmin +65 (<i>Sept</i>) ● Abrilada (adalimumab biosimilar) (<i>Sept</i>) ○ C. difficile (<i>Q4</i>) ○ COVID-19 oral PI (<i>Q4</i>)¹ ○ COMIRNATY 2-<5 (<i>Q4</i>)² 	<ul style="list-style-type: none"> ○ COMIRNATY 0.5-<2 (<i>1H</i>) ○ RSV Adult and Maternal vaccine (<i>1H</i>) ○ Talzena+Xtandi 1L mCRPC (TALAPRO-2) (<i>1H</i>) ○ Elranatamab (BCMA) TCR MM (<i>1H</i>) ○ Prevnar 20 / PCV20 Infants (<i>2H</i>) ○ Braftovi + Mektovi BRAF+ NSCLC (<i>2H</i>) ○ Xtandi EMBARK nmCSPC (<i>2H</i>)
Key POC Readouts	<ul style="list-style-type: none"> ● Elranatamab (BCMA) TCR MM (<i>Jun</i>) ● RSV Adult vaccine (<i>Jul</i>) ○ Vupanorsen SHTG & CV Risk (<i>Q4</i>) ○ Group B Strep vaccine (<i>Q4</i>) ○ Danuglipron T2D (<i>Q4</i>) 	<ul style="list-style-type: none"> ○ mRNA flu vaccine (<i>1H</i>) ○ VLA15 Lyme (<i>1H</i>) ○ IRAK4+ritlecitinib RA (<i>1H</i>) ○ ROBO2-Fc FSGS (<i>1H</i>) ○ Danuglipron obesity (<i>1H</i>) ○ IFN-β inhibitor dermatomyositis (<i>1H</i>) ○ COVID-19 IV PI (<i>2H</i>) ○ TL1A inhibitor UC (<i>2H</i>)



An abstract graphic composed of several overlapping, curved, blue geometric shapes that create a sense of depth and movement, resembling a stylized wave or a series of connected planes. The shapes are rendered with gradients and shadows, giving them a three-dimensional appearance.

Financial Review

Frank D'Amelio

Chief Financial Officer and Executive Vice
President, Global Supply

Quarterly Income Statement Highlights

Revenues

\$24.1B ↑ **+130% op**
\$11.1B⁽¹⁾ ↑ **+7% op⁽¹⁾**

Primarily driven by Comirnaty⁽²⁾, Eliquis, Vyndaqel, Inlyta, Xtandi in U.S., Ibrance outside of the U.S., Hospital and Biosimilars

Adjusted R&D Expenses⁽²⁾

\$2.7B ↑ **+19% op**

Primarily driven by increased investments across multiple therapeutic categories

Adjusted Cost of Sales⁽²⁾

\$9.9B ↑ *
41%⁽³⁾ ↑ **+21.8 ppts**

Primarily driven by sales of Comirnaty⁽²⁾

Diluted EPS

Reported⁽²⁾ \$1.42 ↑ *
Adjusted⁽²⁾ \$1.34 ↑ **+129%**

Increase in Reported and Adjusted Diluted EPS⁽²⁾ was primarily driven by higher revenues

Adjusted SI&A Expenses⁽²⁾

\$2.7B ↑ **+5% op**

Primarily driven by increased product-related spending across multiple therapeutic categories and other costs associated with activity that is closer to pre-pandemic levels

FX Impacts

Revenue \$421M ↑ **+4%**
Adj. Dil. EPS⁽²⁾ \$0.02 ↑ **+4%**

Primarily driven by USD weakening against the Euro, Canadian Dollar and U.K. Pound

⁽¹⁾ Excludes Comirnaty. See Slides 38 and 39 for definition of Comirnaty

⁽²⁾ See Slides 38 and 39 for definitions

⁽³⁾ Adjusted cost of sales as a percentage of revenues

*Indicates calculation not meaningful

2021 Financial Guidance⁽¹⁾

Revenues	\$81.0 to \$82.0 Billion <i>(previously \$78.0 to \$80.0 billion)</i>
Adjusted Cost of Sales ⁽¹⁾ as a Percentage of Revenues	39.1% to 39.6% <i>(previously 39.0% to 40.0%)</i>
Adjusted SI&A Expenses ⁽¹⁾	\$11.6 to \$12.1 Billion <i>(previously \$11.5 to \$12.5 billion)</i>
Adjusted R&D Expenses ⁽¹⁾	\$10.4 to \$10.9 Billion <i>(previously \$10.0 to \$10.5 billion)</i>
Adjusted Other (Income)/Deductions ⁽¹⁾	~\$2.3 Billion <i>(previously approximately \$2.2 billion of income)</i>
Effective Tax Rate on Adjusted Income ⁽¹⁾	Approximately 16.0%
Adjusted Diluted EPS ⁽¹⁾	\$4.13 to \$4.18 <i>(previously \$3.95 to \$4.05)</i>

**Midpoint of Revenue Range Reflects 91% Op Growth Compared to 2020 Revenues;
Midpoint of Adjusted Diluted EPS⁽¹⁾ Range Reflects 80% Op Growth Compared to 2020**

⁽¹⁾ See Slides 38 and 39 for definitions and for additional information regarding Pfizer's 2021 financial guidance

Assumptions Related To Comirnaty⁽¹⁾ within 2021 Financial Guidance⁽¹⁾

Revenues for Comirnaty ⁽¹⁾	Approximately \$36.0 billion <i>(previously approximately \$33.5 billion)</i>
Adjusted Income ⁽¹⁾ Before Tax (IBT) Margin For Comirnaty ⁽¹⁾	High-20's as a Percentage of Revenues

- Revenue estimate includes ~2.3B doses expected to be delivered in fiscal 2021 through the end of December for the U.S. and through the end of November for the rest of the world
- We continue to expect to manufacture 3B⁽²⁾ doses in total by the end of December 2021
- Adjusted Cost of Sales⁽¹⁾ for Comirnaty⁽¹⁾ includes manufacturing and distribution costs, applicable royalty expenses and a 50% gross profit split with BNTX

⁽¹⁾ See Slides 38 and 39 for definitions and for additional information regarding Pfizer's 2021 financial guidance

⁽²⁾ The difference between the number of doses expected to contribute to 2021 revenues versus the number of doses expected to be manufactured by year-end relates to anticipated international deliveries in December, which will be recorded as revenue in 2022 due to our international fiscal calendar, and, to a lesser extent, doses expected to be produced but not yet delivered as of December 31, 2021

Selected 2021 Financial Guidance⁽¹⁾ Ranges Excluding Comirnaty⁽¹⁾

Revenue	\$45.0 to \$46.0 billion <i>(previously \$45.0 to \$47.0 billion)</i>
Adjusted Cost of Sales ⁽¹⁾ as a Percentage of Revenues	21% to 22%
Adjusted Diluted EPS ⁽¹⁾	\$2.60 to \$2.65 <i>(previously \$2.55 to \$2.65)</i>

Midpoint of Revenue Range Reflects ~6% Op Growth Compared to 2020 Revenues Excluding Revenue Impacts of Comirnaty⁽¹⁾; Midpoint of Adjusted Diluted EPS⁽¹⁾ Range Reflects ~12% Op Growth Compared to Prior Year

⁽¹⁾ See Slides 38 and 39 for definitions and for additional information regarding Pfizer's 2021 financial guidance

2022 Outlook for Potential Comirnaty⁽¹⁾ Sales

4B

Expected doses to be produced in 2022

1.7B

Expected doses to be delivered in 2022 based on contracts signed as of mid-October 2021

~\$29B

Direct sales and alliance revenues anticipated in 2022 based on contracts signed as of mid-October 2021

We Continue to Engage with Governments Regarding Potential Additional Orders for 2022

(1) See Slides 38 and 39 for definition of Comirnaty, which is the name for the Pfizer-BioNTech COVID-19 Vaccine



Capital Allocation Framework

Achieve Medical Breakthroughs

R&D Investments

- Prioritize five core therapeutic areas, and emerging technology platforms
- Ensure resources to drive speed and efficiency in our discovery and development process

Bolt-on M&A & Strategic Partnerships

- Target acquisitions of late stage assets
- Develop partnerships that help deliver medical breakthroughs across all stages of development

Return Capital to Shareholders

Commitment to Dividend

- 331 consecutive quarters of dividend payments
- 12 consecutive years of dividend increases
- Paid \$6.5B in cash dividends to shareholders YTD 2021
- Paid \$78B in cash dividends to shareholders from 2010-2020
- Attractive dividend yield of 3.5%⁽¹⁾

Share Repurchase

- No share repurchases in 2020 and none planned in 2021
- \$5.3 billion remaining share repurchase authorization

⁽¹⁾ Annualized dividend based on Volume Weighted Average Price (VWAP) from July 6, 2021 to October 1, 2021, per Bloomberg

Key Takeaways

- ✓ Delivered a strong quarter: Revenues +130% op
 - +7% op excluding Comirnaty⁽¹⁾, reflecting 12% volume growth and -5% pricing
- ✓ Raised FY Guidance⁽¹⁾ for Total Company: Revenues \$81.0B-\$82.0B vs previous \$78.0B-\$80.0B and Adj. Diluted EPS⁽¹⁾ \$4.13-\$4.18 vs previous \$3.95-\$4.05
- ✓ Key product and pipeline milestones since Q2 results:
 - Comirnaty ages 16+ FDA approval and ages 5-11 EUA
 - Cibinqo approvals in Great Britain and Japan, plus positive opinion from EMA's CHMP
 - Oral and IV protease inhibitors for COVID-19 pivotal trials started
 - 30,000 Phase 3 trial for Adult RSV started
- ✓ Entered agreement to acquire Trillium Therapeutics; transaction expected to close in Q4 2021 or 1H 2022, subject to customary closing conditions
- ✓ Maintained Q3 2021 dividend at \$0.39/share and paid \$2.2B in cash dividends to shareholders in Q3 2021

We Remain Committed to Delivering Attractive Shareholder Returns in 2021 and Beyond

⁽¹⁾ See Slides 38 and 39 for definitions and for additional information regarding Pfizer's 2021 financial guidance



Footnotes (Page 1 of 2)

- (1) Comirnaty includes direct sales and alliance revenues related to sales of the Pfizer-BioNTech SE (BioNTech) COVID-19 vaccine, which are recorded within Pfizer's Vaccines therapeutic area. It does not include revenues for certain Comirnaty-related manufacturing activities performed on behalf of BioNTech, which are included in the Pfizer CentreOne contract manufacturing operation within the Hospital area. Revenues related to these manufacturing activities totaled \$187 million and \$274 million for the third quarter and first nine months of 2021, respectively.
- (2) Revenues is defined as revenues in accordance with U.S. generally accepted accounting principles (GAAP). Reported net income and its components are defined as net income attributable to Pfizer Inc. and its components in accordance with U.S. GAAP. Reported diluted earnings per share (EPS) is defined as diluted EPS attributable to Pfizer Inc. common shareholders in accordance with U.S. GAAP.
- (3) Adjusted income and its components and Adjusted diluted EPS are defined as reported U.S. GAAP net income⁽²⁾ and its components and reported diluted EPS⁽²⁾ excluding purchase accounting adjustments, acquisition-related costs, discontinued operations and certain significant items (some of which may recur, such as actuarial gains and losses from pension and postretirement plan remeasurements, gains on the completion of joint venture transactions, restructuring charges, legal charges or gains and losses from equity securities, but which management does not believe are reflective of ongoing core operations). Adjusted cost of sales, Adjusted selling, informational and administrative (SI&A) expenses, Adjusted research and development (R&D) expenses and Adjusted other (income)/deductions are income statement line items prepared on the same basis as, and therefore components of, the overall Adjusted income measure.
- (4) Pfizer does not provide guidance for GAAP Reported financial measures (other than revenues) or a reconciliation of forward-looking non-GAAP financial measures to the most directly comparable GAAP Reported financial measures on a forward-looking basis because it is unable to predict with reasonable certainty the ultimate outcome of pending litigation, unusual gains and losses, acquisition-related expenses, gains and losses from equity securities, actuarial gains and losses from pension and postretirement plan remeasurements and potential future asset impairments without unreasonable effort. These items are uncertain, depend on various factors, and could have a material impact on GAAP Reported results for the guidance period. Financial guidance for full-year 2021 reflects the assumptions listed on Slides 32-34 and the following:
 - Does not assume the completion of any business development transactions not completed as of October 3, 2021, including any one-time upfront payments associated with such transactions.
 - Includes Pfizer's pro rata share of the Consumer Healthcare joint venture anticipated earnings, which is recorded in Adjusted other (income)/deductions⁽³⁾ on a one-quarter lag.
 - Reflects an anticipated negative revenue impact of \$0.6 billion due to recent and expected generic and biosimilar competition for certain products that have recently lost or are anticipated to soon lose patent protection.
 - Reflects no sales of Chantix in the fourth quarter of 2021 as a result of a pause in global shipments of the product due to the presence of N-nitroso-varenicline above an acceptable level of intake set by various global regulators.
 - Exchange rates assumed are a blend of actual rates in effect through third-quarter 2021 and mid-October 2021 rates for the remainder of the year. Financial guidance reflects the anticipated favorable impact of approximately \$1.3 billion on revenues and approximately \$0.09 on Adjusted diluted EPS⁽³⁾ as a result of changes in foreign exchange rates relative to the U.S. dollar compared to foreign exchange rates from 2020.
 - Guidance for Adjusted diluted EPS⁽³⁾ assumes diluted weighted-average shares outstanding of approximately 5.7 billion shares, which assumes no share repurchases in 2021.
 - Guidance for Adjusted other (income)/deductions⁽³⁾ includes an estimated benefit of approximately \$300 million resulting from a change in accounting principle to a more preferable policy under U.S. GAAP to immediately recognize actuarial gains and losses arising from the remeasurement of our pension and postretirement plans. This change went into effect in the first quarter of 2021 and prior period amounts have been recast to conform to the new accounting policy.

Footnotes (Page 2 of 2)

- (5) Pfizer's fiscal year-end for international subsidiaries is November 30 while Pfizer's fiscal year-end for U.S. subsidiaries is December 31. Therefore, Pfizer's third quarter and first nine months for U.S. subsidiaries reflects the three and nine months ended on October 3, 2021 and September 27, 2020 while Pfizer's third quarter and first nine months for subsidiaries operating outside the U.S. reflects the three and nine months ended on August 29, 2021 and August 23, 2020.
- (6) The following business development activity, among others, impacted financial results for the periods presented:
- On July 22, 2021, Arvinas Inc. (Arvinas) and Pfizer announced a global collaboration to develop and commercialize ARV-471, an investigational oral PROTAC® (PROteolysis TArgeting Chimera) estrogen receptor protein degrader. The estrogen receptor is a well-known disease driver in most breast cancers. Under the terms of the agreement, Pfizer paid Arvinas \$650 million upfront. Separately, Pfizer made a \$350 million equity investment in Arvinas. Arvinas is also eligible to receive up to \$400 million in approval milestones and up to \$1 billion in commercial milestones. The companies will equally share worldwide development costs, commercialization expenses and profits.
 - On November 16, 2020, Pfizer completed the transaction to spin off its Upjohn Business and combine it with Mylan N.V. (Mylan) to form Viatris Inc. (Viatris). On December 21, 2020, which fell in Pfizer's international first-quarter 2021, Pfizer and Viatris completed the termination of a pre-existing strategic collaboration between Pfizer and Mylan for generic drugs in Japan (Mylan-Japan collaboration) and Pfizer transferred related operations that were part of the Mylan-Japan collaboration to Viatris. As a result of the spin-off of the Upjohn Business and the termination of the Mylan-Japan collaboration, the results of operations of the Upjohn Business and the Mylan-Japan collaboration are presented as discontinued operations.
 - On April 9, 2020, Pfizer signed a global agreement with BioNTech to co-develop a first-in-class, mRNA-based coronavirus vaccine program, BNT162, aimed at preventing COVID-19 infection. In connection with the agreement, Pfizer paid BioNTech an upfront cash payment of \$72 million in second-quarter 2020. Pfizer also made an equity investment of \$113 million in BioNTech common stock. Pfizer made an additional investment of \$50 million in common stock of BioNTech as part of an underwritten equity offering by BioNTech, which closed in July 2020. On January 29, 2021, Pfizer and BioNTech signed an amended version of the April 2020 agreement. Under the January 2021 agreement, BioNTech paid Pfizer its 50 percent share of prior development costs in a lump sum payment during the first quarter of 2021. Further R&D costs are being shared equally.
- (7) References to operational variances in this presentation pertain to period-over-period growth rates that exclude the impact of foreign exchange rates. Although exchange rate changes are part of Pfizer's business, they are not within Pfizer's control and since they can mask positive or negative trends in the business, Pfizer believes presenting operational variances excluding these foreign exchange changes provides useful information to evaluate Pfizer's results.
- (8) As described in footnote (4) above, in the first quarter of 2021, Pfizer adopted a change in accounting principle to a more preferable approach under U.S. GAAP related to its pension and postretirement plans. Prior period financial results have been recast to reflect this change. The recast comparable full-year 2020 Adjusted diluted EPS⁽³⁾ is \$2.26, versus \$2.22 previously reported.
- (9) Emergency uses of the Pfizer-BioNTech COVID-19 Vaccine have not been approved or licensed by the FDA, but have been authorized by the FDA, under an Emergency Use Authorization (EUA) to prevent Coronavirus Disease 2019 (COVID-19) in individuals 5 years of age and older. COMIRNATY is licensed by the FDA for individuals 16 years of age and older. In addition, COMIRNATY is under EUA for individuals ages 12 through 15, a third dose for certain immunocompromised individuals 12 years of age and older, and a booster dose for certain individuals 18 years of age and older. The emergency uses are only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of the medical product under Section 564(b)(1) of the FD&C Act unless the declaration is terminated or authorization revoked sooner. Please see EUA Fact Sheet at www.cvdvaccine-us.com.
- The information contained on our website or any third-party website is not incorporated by reference into this presentation.

Appendix

An abstract graphic composed of several overlapping, curved, blue geometric shapes that resemble stylized pages or segments of a spiral. The shapes are rendered with a gradient from light blue to dark blue, creating a sense of depth and movement. They are set against a plain, light gray background.

Appendix 1 – References: Current Vaccine Restrictions

- Canada - Ontario
 - https://www.publichealthontario.ca/-/media/documents/ncov/factsheet/2021/01/vac/factsheet-covid-19-vaccines.pdf?sc_lang=en
 - <https://news.ontario.ca/en/statement/1000907/ontario-recommends-the-use-of-pfizer-biontech-covid-19-vaccine-for-individuals-aged-18-24-years-old>
- Finland
 - BMJ 2021;375:n2477 <http://dx.doi.org/10.1136/bmj.n2477>
 - <https://thl.fi/en/web/thlfi-en/-/thl-issues-instructions-that-men-under-30-years-of-age-should-only-be-offered-the-comirnaty-coronavirus-vaccine>
- France
 - https://www.has-sante.fr/jcms/p_3292786/en/covid-19-utiliser-le-vaccin-de-pfizer-pour-le-rappel-de-vaccination
 - <https://www.thelocal.fr/20211018/french-health-authority-advises-against-modernas-covid-vaccine-for-booster-shot/>
- Hong Kong
 - <https://www.chinadailyhk.com/article/223071#HK-to-vaccinate-teenagers-aged-12-to-15-starting-Monday>
 - <https://www.reuters.com/business/healthcare-pharmaceuticals/hong-kong-panel-recommends-single-dose-biontechs-covid-19-shot-teenagers-2021-0...> 1/18
- Japan
 - <https://mainichi.jp/english/articles/20211016/p2a/00m/0na/009000c>
- Norway
 - BMJ 2021;375:n2477 <http://dx.doi.org/10.1136/bmj.n2477>
 - <https://www.fhi.no/en/news/2021/12-15-year-olds-will-be-offered-coronavirus-vaccination/>
 - <https://www.reuters.com/world/europe/norway-offer-covid-vaccines-children-aged-12-years-older-2021-09-02/>
- South Africa
 - <https://twitter.com/HealthZA/status/1448896585736327168?s=20>
 - <https://www.reuters.com/world/africa/safrica-vaccinate-teenagers-with-single-dose-pfizer-health-minister-2021-10-15/>
- Sweden
 - BMJ 2021;375:n2477 <http://dx.doi.org/10.1136/bmj.n2477>
 - <https://www.folkhalsomyndigheten.se/the-public-health-agency-of-sweden/communicable-disease-control/covid-19/vaccination-against-covid-19/children-and-adolescents--information-about-vaccination-against-covid-19/>
 - <https://www.reuters.com/business/healthcare-pharmaceuticals/sweden-pauses-use-moderna-covid-vaccine-cites-rare-side-effects-2021-10-06/>
- United Kingdom
 - <https://www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/book-coronavirus-vaccination/book-or-manage-a-1st-or-2nd-dose-of-the-coronavirus-covid-19-vaccination/>
 - <https://www.reuters.com/world/uk/britains-top-medics-recommend-12-15-year-olds-get-covid-vaccine-2021-09-13/>