

Saving Lives
55
years

WOCKHARDT | **LIFE
WINS**

Investor Presentation

October 2024



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Global *Research-Driven* multinational



77%
Revenues from
International Business¹



18.5%
Revenues from Biotechnology &
Novel Antibiotics¹

Novel Antibiotics

Biotechnology

Pharmaceuticals

Vaccines

Stronger business performance



76%

Y-o-Y EBITDA growth¹



0.13

Net Debt : Equity ratio²



30% growth

for biosimilars in emerging markets³



INR 499 Cr.

Reduction in debt⁴

1. Growth in FY24 over FY23
2. As on 31st March 2024, excluding promoter debt & net of cash & cash equivalents and other bank balances (Net Debt: INR 476 Cr ; Equity: INR 3,662 Cr.)
3. Growth in FY24 over FY23
4. As at 31st March 2024 vs 31st March 2023, excluding promoter debt & net of cash & cash equivalents and other bank balances

Wockhardt's *portfolio of 6 novel antibiotics* is well placed to tackle **global Antimicrobial Resistance threat** that could potentially lead to **8 million deaths annually by 2050**



ZAYNICH[®] (WCK 5222)

Global Phase III **>90%** recruitment completed

100% success*
in compassionate usage



MIQNAF[®] (Nafithromycin)

Filed for **approval**
in India

3-day ultra short
oral therapy



EMROK[®] / EMROK O[®]

Commercialized
in India

Filed in
Emerging Markets

[®] Registered trademarks in India

*- 38 patients administered WCK 5222 under compassionate use

**Wockhardt
is well
poised for
*growth***



ZAYNICH + MIQNAF

launches in India followed by global markets



Biosimilars

Insulin Analogs in Global markets



Wockhardt Snapshot

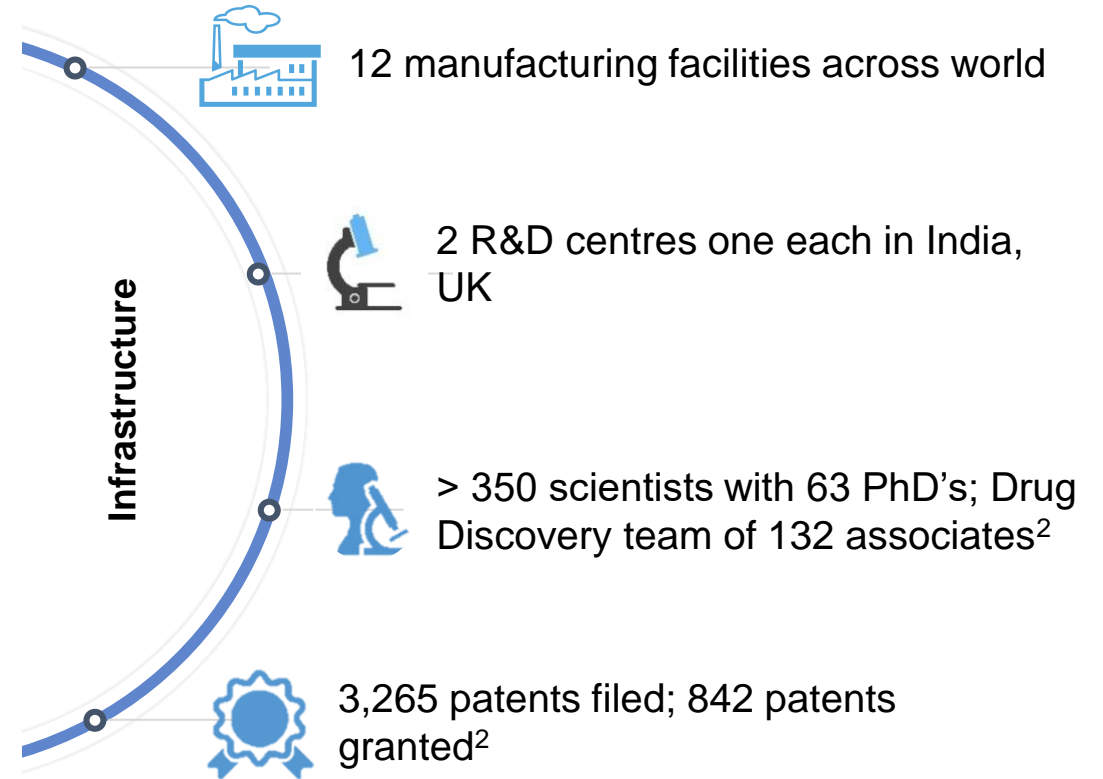
Snapshot of Wockhardt

Total Income¹
(FY24)

INR 2,879 Cr.

EBITDA¹
(FY24)

INR 251 Cr.



New Chemical Entity
(focus on novel Antibiotics)



Biotechnology
(focus on Diabetes)



Vaccines

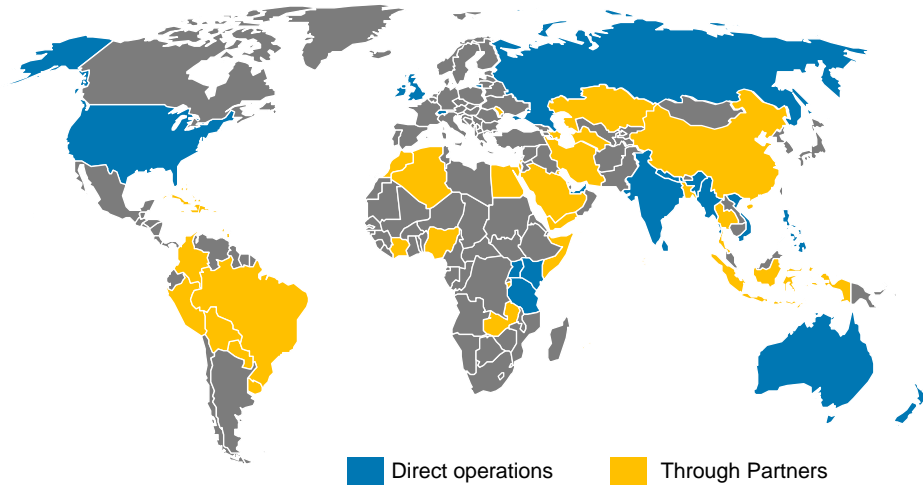


Pharma Generics

1. Excluding exchange rate fluctuations
2. As on 30th June 2024

Global footprint

Global operations



Capability across different segments



- ▶ Branded
- ▶ OTC
- ▶ Hospitals



- ▶ Novel Antibiotics
- ▶ Biotechnology
- ▶ Pharma Generics

12 manufacturing facilities across the globe



- ▶ Solids
- ▶ Injectables
- ▶ Biotechnology
- ▶ Liquids
- ▶ Nasal sprays
- ▶ Complex technologies



United Kingdom

- ▶ Retail & Hospital segments
- ▶ Vaccine CMO

37%



Ireland (& other EU)

- ▶ Branded Generic & OTC
- ▶ Retail pharmacies, wholesalers & hospitals.

13%



USA

- ▶ Restructuring - facility shutdown
- ▶ Shift to third party manufacturing
- ▶ Defocusing Pharma R&D

5%



Emerging Markets

- ▶ Presence in Southeast Asia, East Asia, Africa, the CIS region and Latin America countries

23%



India

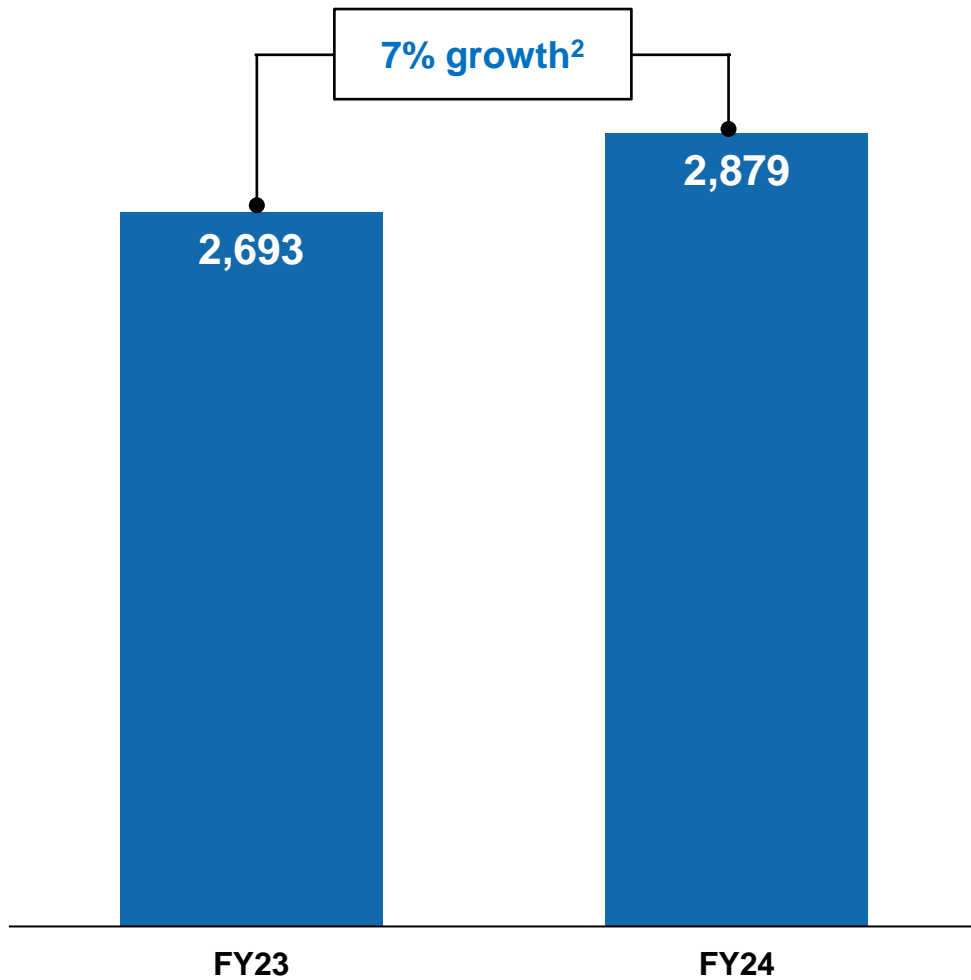
- ▶ Pain, Diabetes, Nephrology, CNS portfolio
- ▶ >650 field force

22%

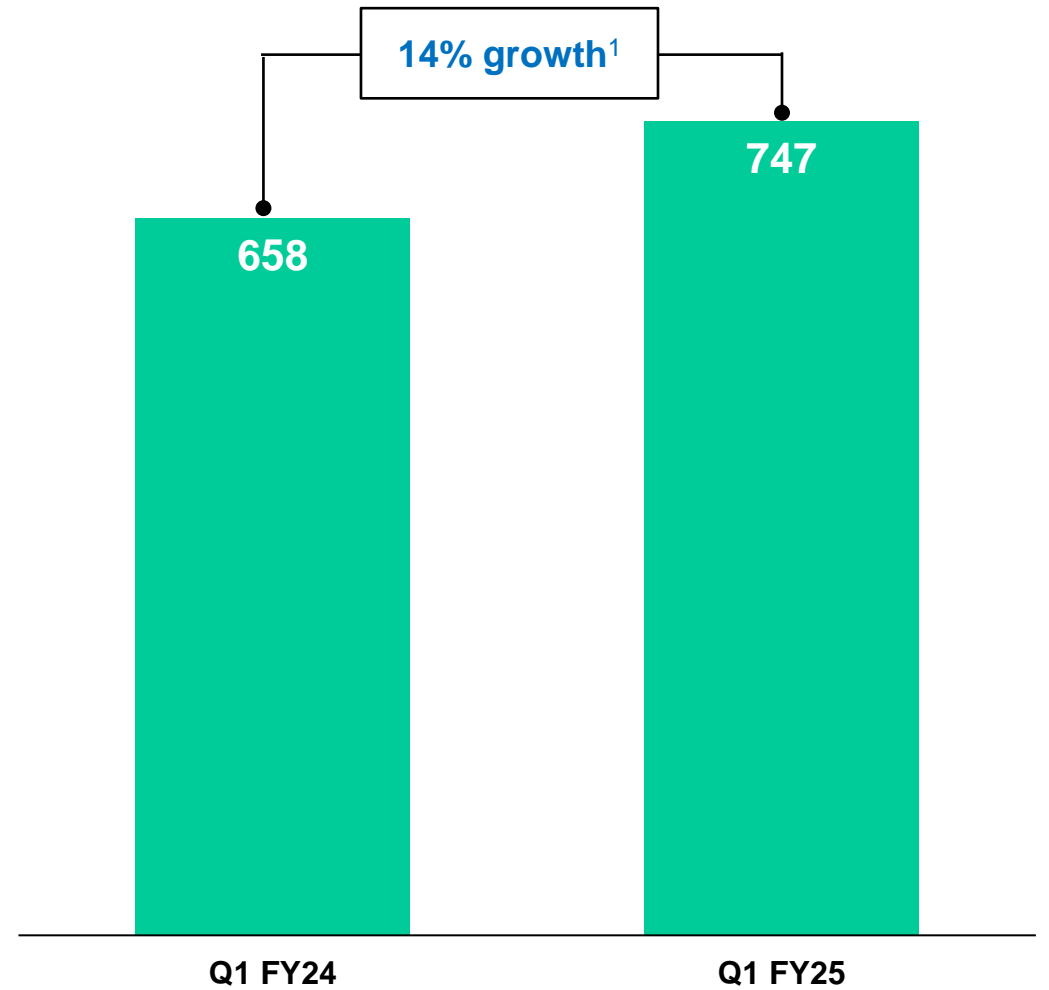
% sales revenue contribution for FY23 -24

Financial Highlight: 14% income growth¹

Total Income² in INR Cr.



Total Income (Quarterly)¹ in INR Cr.

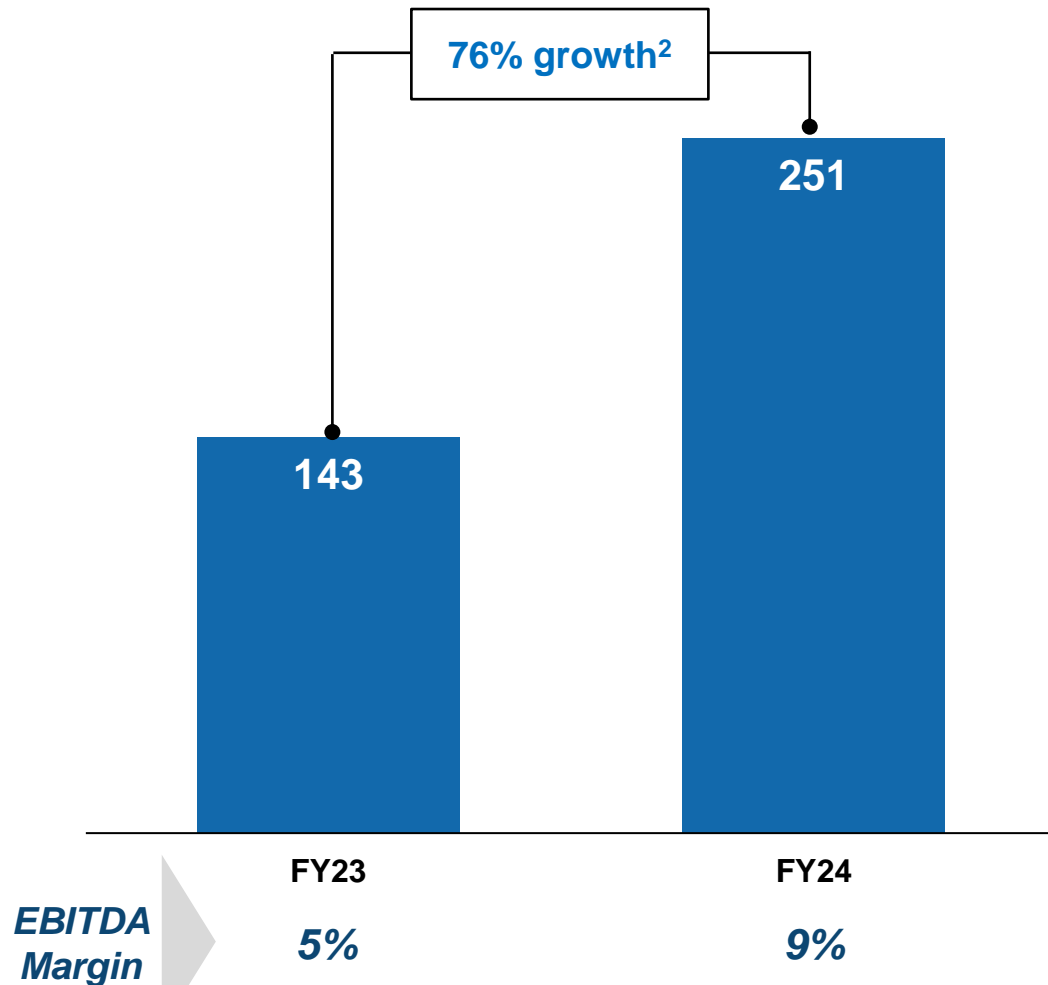


1. Q1 FY25 vs Q1 FY24, excluding exchange rate fluctuations

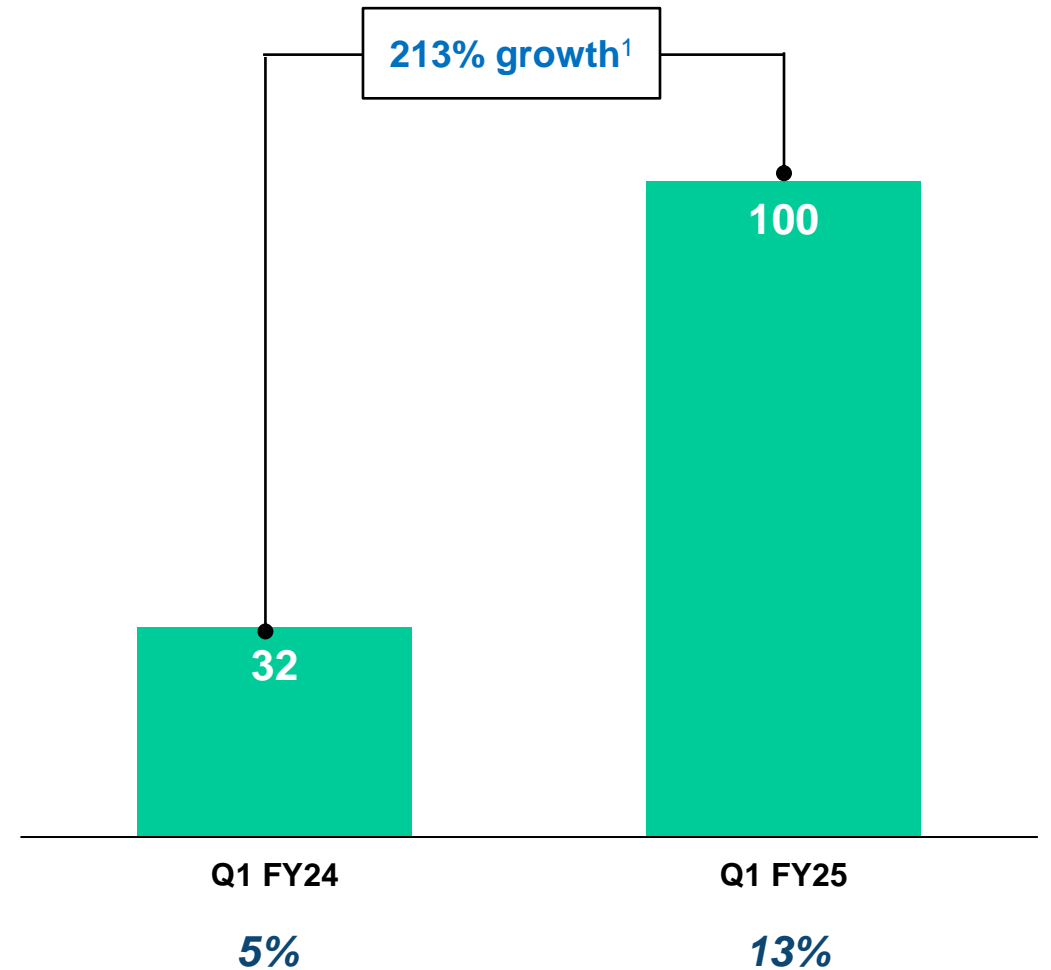
2. FY24 vs FY23, excluding exchange rate fluctuations

Financial Highlight: Improvement in EBITDA margins

EBITDA² in INR Cr.



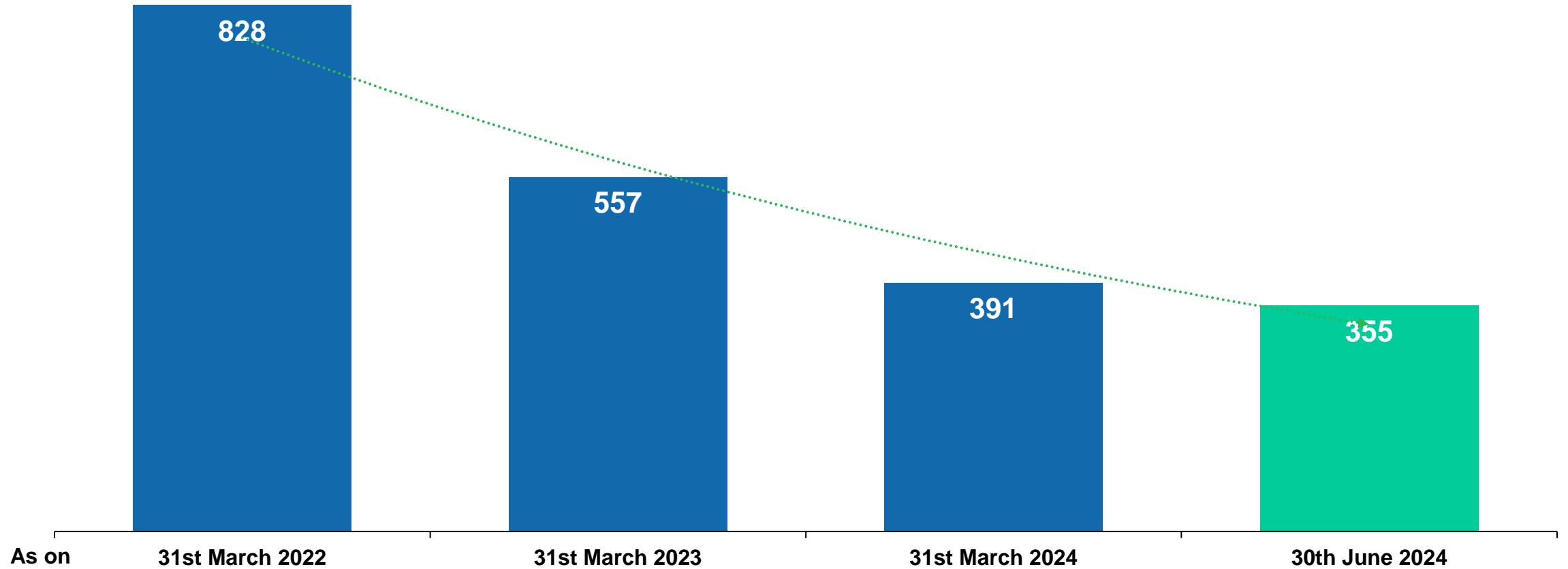
EBITDA (Quarterly)¹ in INR Cr.



1. Q1 FY25 vs Q1 FY24, excluding exchange rate fluctuations
2. FY24 vs FY23, excluding exchange rate fluctuations

Reduction in External Long-term Loans

Reduction in external long-term loan¹ (INR Cr.)

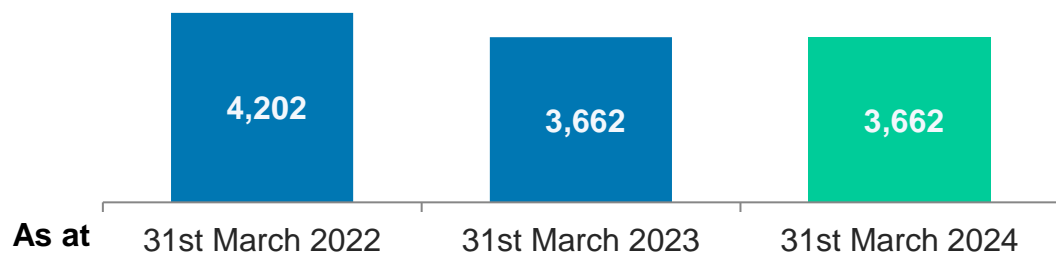


1. Excluding promoter debt & working capital loans

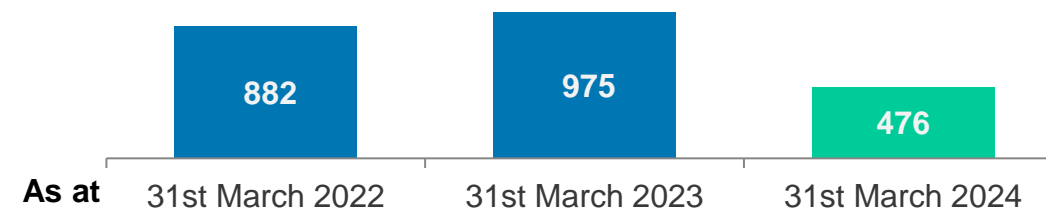
Net Debt : Equity @ 0.13¹

Debt Reduction by INR 499 Cr.²

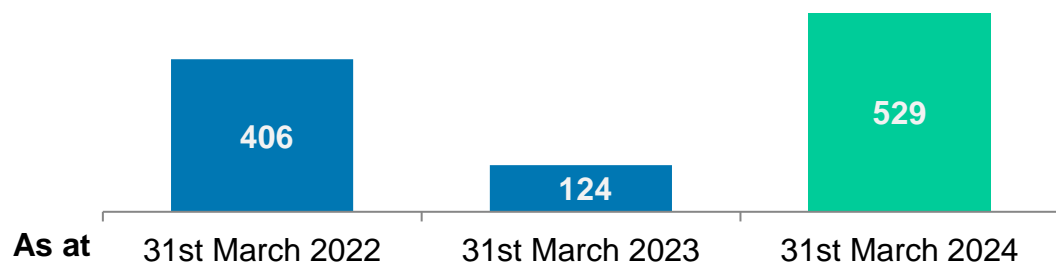
Equity INR Cr.



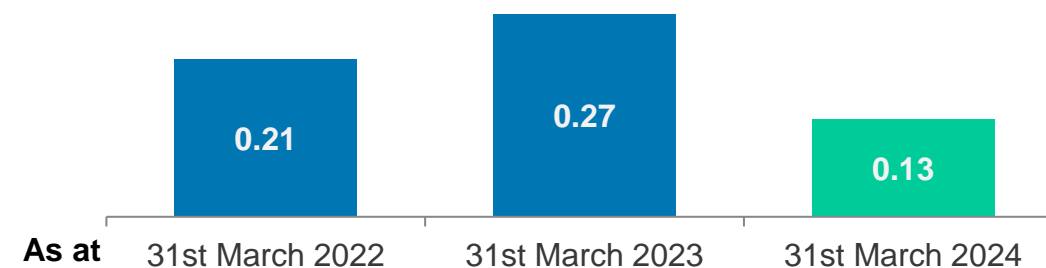
Debt³ INR Cr.



Cash & Cash Equivalents and other Bank Balances INR Cr.



Net Debt-Equity Ratio³



1. As at 31st March 2024, excluding promoter debt & net of cash & cash equivalents and other bank balances (Net Debt: INR 476 Cr. ; Equity: INR 3,662 Cr.)

2. Reduction of debt as at 31st March 2024 vs 31st March 2023, excluding promoter debt & net of cash & cash equivalents and other bank balances

3. Excluding promoter debt & net of cash & cash equivalents and other bank balances

Additional Short-term and Mid-term growth drivers

3 years growth drivers

1

Diabetes Biosimilars for India + Emerging markets – Glargine, new Insulin Analogs, Human Insulin

2

Novel drug discovery - Zaynich[®] (WCK 5222), Miqnaf[®] (Nafithromycin), Emrok[®] & Emrok O[®]

3

Vaccines

5 years growth drivers

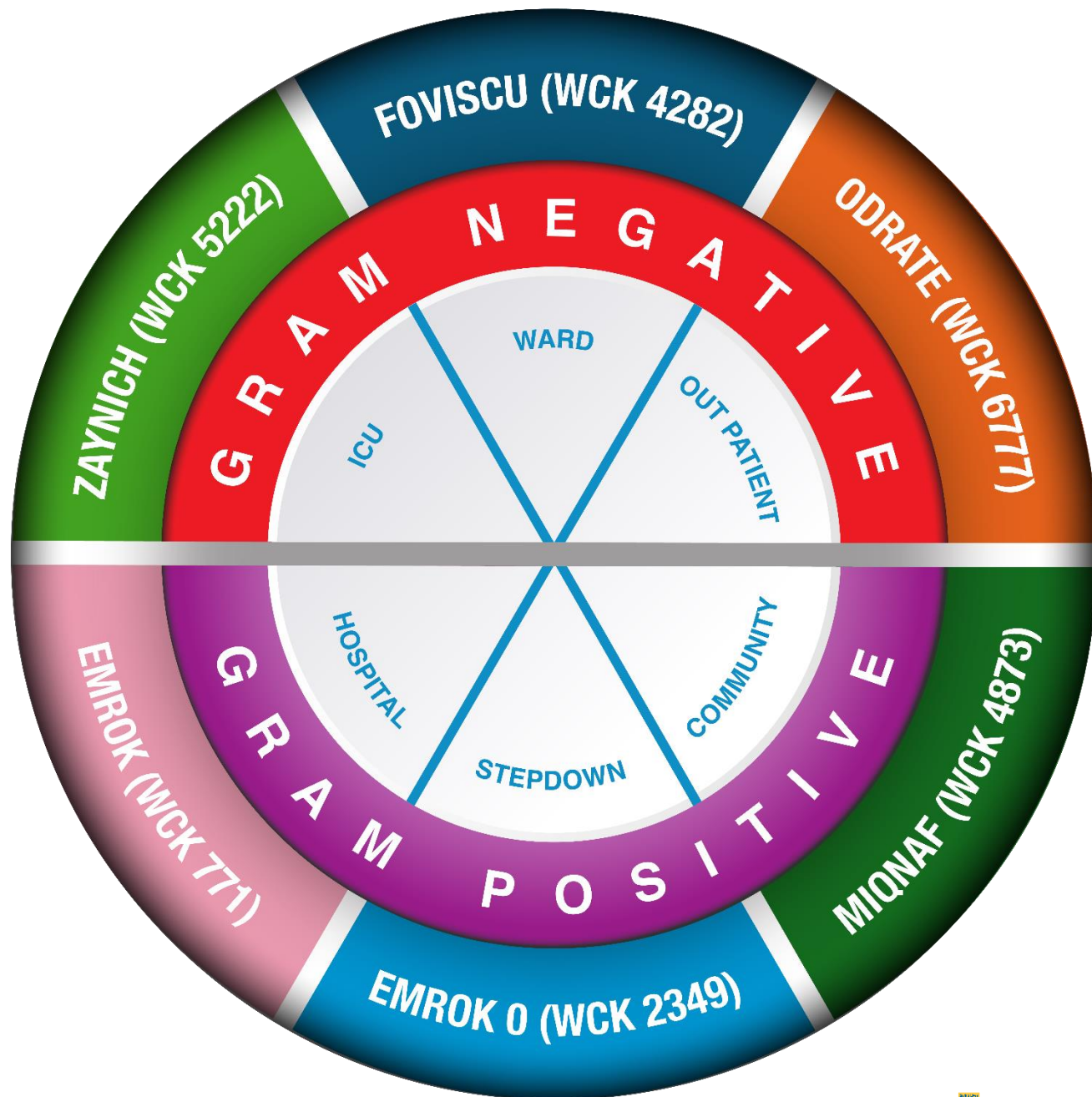
1

Novel drug discovery – Zaynich[®] (WCK 5222), Miqnaf[®] (Nafithromycin), Odrate[®] (WCK 6777)

2

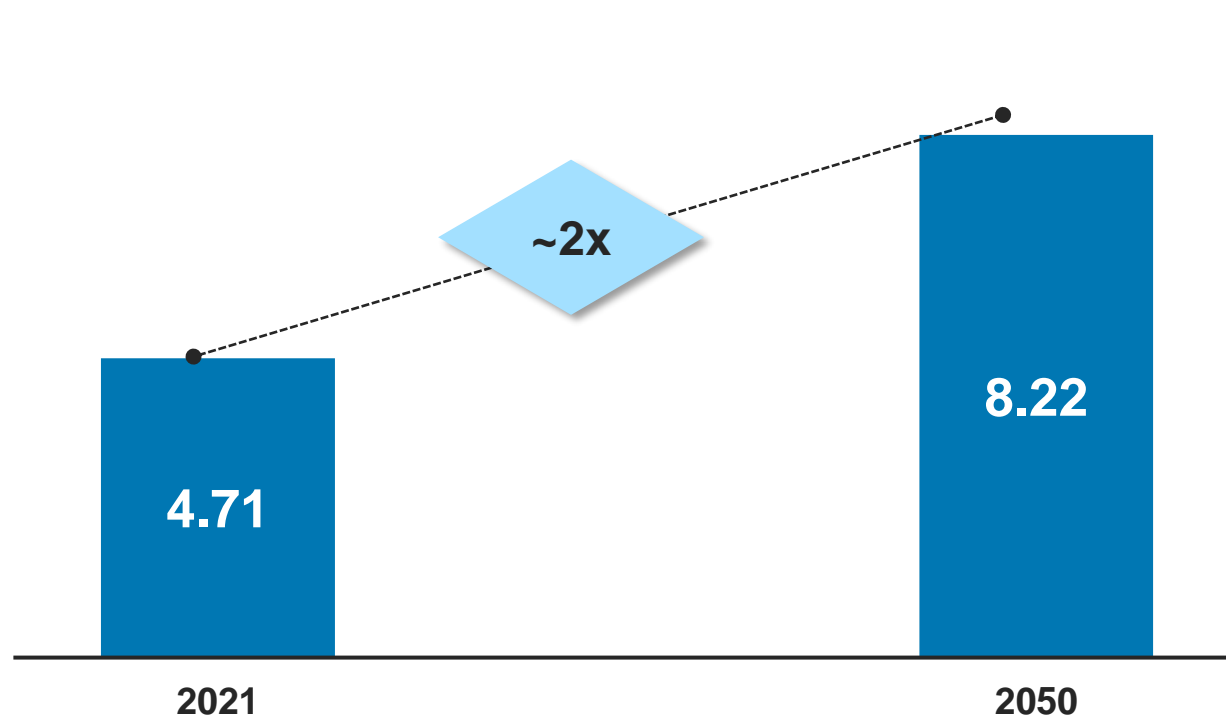
Diabetes Biosimilars for global markets - Insulin Analogs

New Chemical Entity (Novel Antibiotics)

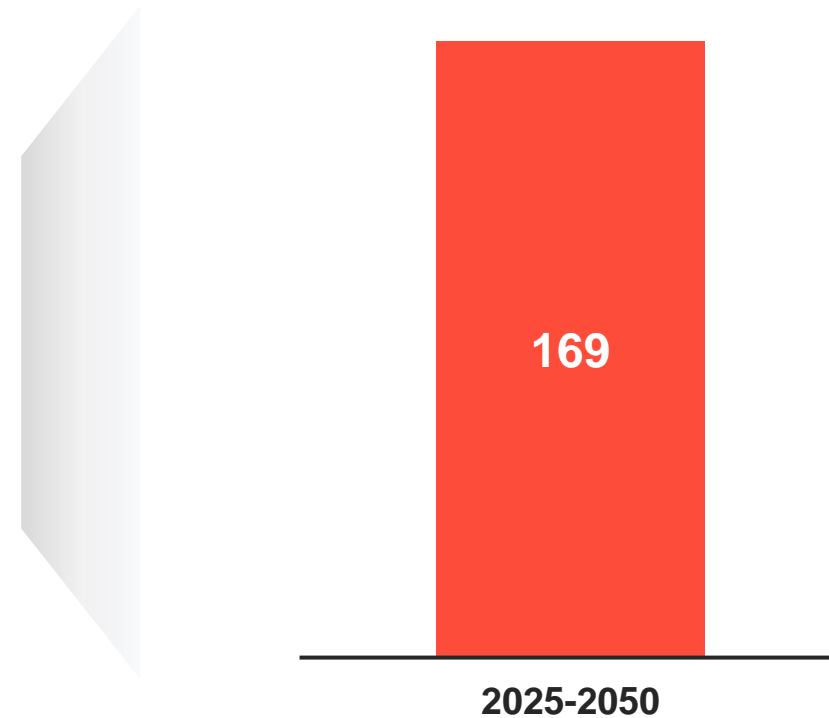


Annual deaths due to Anti Microbial Resistant (AMR) estimated to be > 8 million annually by 2050

Annual deaths associated with AMR in millions



Cumulative deaths associated with AMR in millions



The global economy faces a potential **\$100 trillion economic catastrophe due to AMR** unless urgent action is taken

Wockhardt's Novel Antibiotics

~25
years

Focused commitment to Novel Antibiotics research leading to end-to-end Discovery & Development capabilities








6

Programs granted QIDP* status by US FDA denoting unmet needs; abridged trials, faster review and approvals by US FDA

* **Qualified Infectious Disease Product (QIDP)** status granted by US FDA eligible for fast track development process and priority review. QIDP status also grants five year extension to the market exclusivity in the United States

Novel Antibiotics pipeline encompassing all the Resistant Organisms

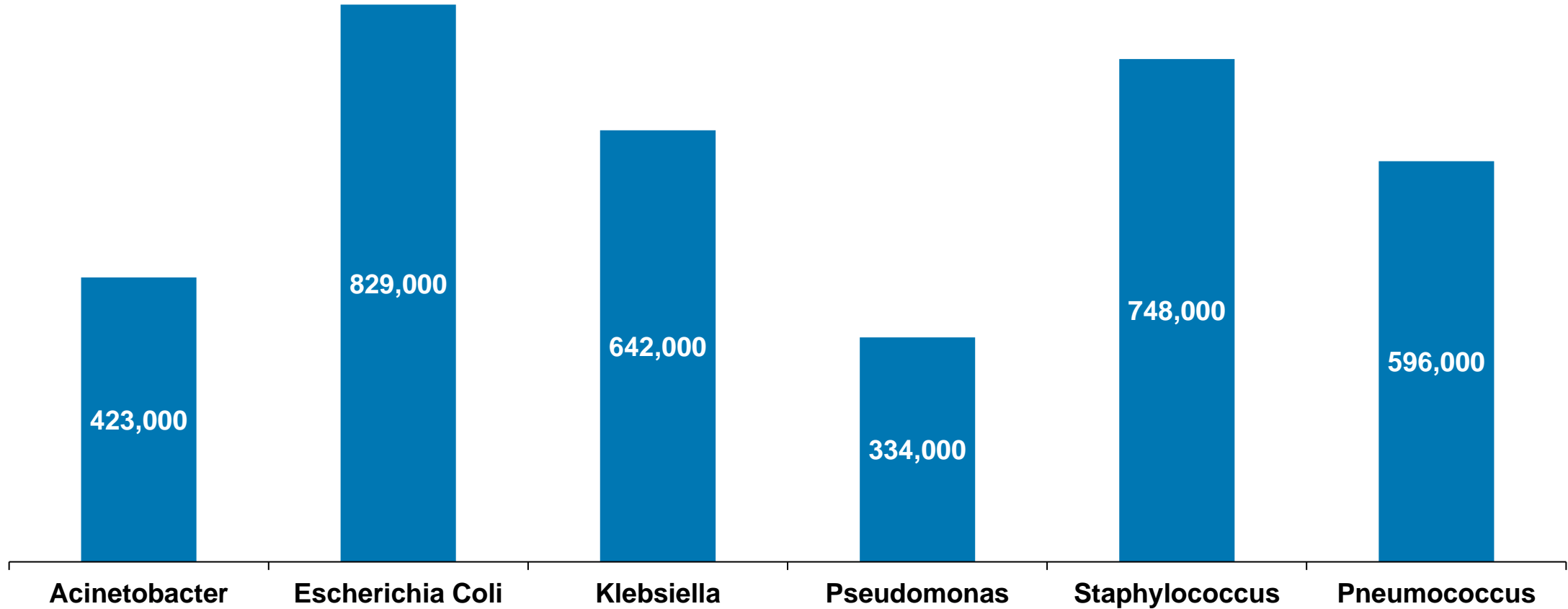
	Gram Negative Portfolio			Gram Positive Portfolio	
	ZAYNICH® (WCK 5222)	FOVISCU® (WCK 4282)	ODRATE® (WCK 6777)	EMROK® / EMROK O®	MIQNAF® (Nafithromycin)
					
Status	Global <i>Phase III</i> ongoing Carbapenem resistant pathogen study (India) ongoing	<i>Phase III ongoing</i>	<i>Phase I In collaboration with NIH (US)</i>	Launched in India; Filed in Emerging Markets	<i>Phase III</i> completed NDA filed in India
Potential Indication	cUTI, HABP / VABP (Global) + Carbapenem Resistant infections (India)	cUTI HABP / VABP	cUTI	ABSSSI	CABP / RTI
Target Market	Global	Global	Global	Emerging Market	Emerging Market
Positioning	Destination therapy for difficult-to-treat Gram-ve Klebsiella, Acinetobacter and Pseudomonas	Empiric-use; Carbapenem-sparing Gram-ve	Out-patient therapy for MDR Gram -ve	MDR Gram+ve Anti-MRSA	Macrolide-resistant Respiratory Pathogens, Quinolone-Sparing

HABP: Hospital Acquired Bacterial Pneumonia; VABP: Ventilator Acquired Bacterial Pneumonia cUTI : Complicated urinary tract infections; CABP: Community-acquired bacterial pneumonia ; RTI: Respiratory Tract Infection; ABSSSI: Acute bacterial skin and skin structure infections; MDR: Multidrug resistance , MRSA: Methicillin-resistant Staphylococcus aureus; Gram -ve: Gram negative; Gram +ve: Gram positive

® Trademark registered in India

Top 6 Super bugs inflicting global mortality

Number of deaths associated with Anti-Microbial Resistance





ZAYNICH[®] (WCK 5222)

Establishing β -lactam enhancer - a new class of antibiotic to treat MDR/ XDR Gram-negative infections

WCK 5222 : Cefepime + Zidebactam [ZAYNICH®]

Late-stage novel mechanism-based, first-in-class life-saving destination therapy for MDR/XDR Gram-negative infections in ICU setting



Unmet Need



High Carbapenem resistance globally

Acinetobacter B. : 22%; Pseudomonas A. : 60% ;
E.coli+ Klebsiella P. : 17% - in US



On-therapy resistance reported for newer therapies

like Ceftazidime+ Avibactam



30- 60% mortality

in HABP/VABP & BSI with existing therapies



Solution: WCK 5222 : Cefepime + Zidebactam



Life Saving Safer therapy

for serious **Gram-negative infections** caused by ESBL¹, Class C, KPC², Enterobacterales, MBL³-producing **MDR/XDR⁴ pathogens (incl. Pseudomonas & Acinetobacter)**



Novel mechanism of action

β lactam enhancer action, first in class drug
Novel MOA⁵ ensures broadest coverage of pathogens



Demonstrated Potential for Clinical Efficacy in infections caused by diverse Gram-negative resistant mechanisms

XDR-Pseudomonas, Acinetobacter and Enterobacterales infections, basis global coverage



PK/PD⁶ adequacy

Scientifically selected dosing regimen for critically-ill patients to offer consistent efficacy thus simplify the management of such patients

WCK 5222 : Cefepime + Zidebactam [ZAYNICH®]

Late-stage novel mechanism-based, first in class life-saving destination therapy for MDR/XDR Gram-negative infections in ICU setting



Indication potential



Complicated Urinary tract Infection



**Hospital acquired bacterial pneumonia /
Ventilator associated bacterial
pneumonia**



Complicated Intra-abdominal Infections



Blood Stream infections



WCK 5222

Patents: Compound & Composition patent granted in key markets

Qualified Infectious Disease Product (QIDP) status granted by
USFDA

Key opinion leaders from US, EU and China

Treatment Regimen



Hospital injectable

TID for 7-14 days

Scientific Publications

- 52 full length peer reviewed publications in top international journals by independent KOLs
- 50 posters presentations + oral talks in prestigious conferences

WCK 5222 displays broadest coverage of MDR/XDR Gram negative pathogens

Differentiation endorsed by leading global KOL based on published literature

Activity against resistant infection Organism/ Resistance Mechanism	Best comparable Pipeline Drugs			Best available Approved Drugs						
	WCK 5222 ¹	Product 1	Product 2	Product 3	Product 4	Product 5	Product 6	Product 7	Product 8	Product 9
<i>K. pneumoniae</i> (ESβL)	Green	Green	Green	Green	Green	Green	Green	Green	Red	Green
<i>K. pneumoniae</i> (KPC)	Green	Green	Green	Green	Green	Green	Green	Green	Red	Red
<i>K. pneumoniae</i> (MβL)	Green	Yellow	Green	Yellow	Red	Red	Yellow	Red	Red	Red
<i>E. coli</i> (PBP3 insert+ESBL/Class C)	Green	Green	Yellow	Green	Green	Green	Green	Green	Red	Green
<i>E. coli</i> (MβL± PBP3 Insert)	Green	Red	Yellow	Red	Red	Red	Yellow	Red	Red	Red
Enterobacter (AmpC)	Green	Green	Green	Green	Green	Green	Green	Green	Red	Green
Proteus (ESβL, Class C)	Green	Green	Green	Green	Red	Green	Green	Green	Red	Green
<i>P. aeruginosa</i> (AmpC + oprD +Efflux)	Green	Green	Red	Green	Green	Red	Red	Yellow	Red	Red
<i>P. aeruginosa</i> (Oxa, oprD + Efflux)	Green	Green	Red	Green	Green	Red	Red	Yellow	Red	Red
<i>P. aeruginosa</i> (MβL)	Green	Red	Red	Yellow	Red	Red	Red	Red	Red	Red
<i>A. baumannii</i> (CHDL, OXA)	Green	Red	Red	Yellow	Red	Red	Red	Red	Green	Red
<i>S. maltophilia</i> MDR/XDR	Green	Red	Red	Green	Red	Red	Red	Red	Red	Red

Most Isolates Susceptible

Variable Susceptibility

Most Isolates Resistant

1. WCK 5222: Wockhardt's combination of Cefepime (Cephalosporin) with Zidebactam (β-lactam enhancer); Product 1.Cefepime/taniborbactam ; Product 2.Aztreonam/avibactam ; Product 3. Cefiderocol ; Product 4.Imipenem/relebactam ;Product 5.Meropenem/vaborbactam ; Product 6.Plazomicin ; Product 7.Ceftazidime/avibactam ; Product 8.Sulbactam/durlobactam ;Product 9.Imipenem or meropenem

WCK 5222 Development status

WCK 5222 (Cefepime + Zidebactam) – Destination therapy for XDR Gram Negative Acinetobacter & Pseudomonas



- Phase I studies completed
- Clinical Pulmonary PK, renal impairment and cardiovascular safety studies completed
- Single Phase III clinical study based on US FDA approved abridged development path
- **Global Phase III cUTI study ongoing: ~90% patient recruitment completed**
- **India Carbapenem-resistant clinical study ongoing: ~60% patient recruitment completed**

Unmet Need

- Carbapenem resistant Pseudomonas and Acinetobacter (20-95%) infections are desperately treated with efficacy and safety-compromised colistin/polymyxin/tigecycline.
- WCK 5222 would provide a safer and consistently efficacious therapy for such life-threatening infections.

Compassionate Use

100% clinical and microbiological success thus far in 38 patients with extremely difficult to treat infections, where all the available therapies failed

*-Phase II waiver

WCK 5222 : Key updates

1

Continued success under compassionate use program

38 patients treated with WCK 5222 resulting in complete clinical as well as microbiological cure

2

US FDA granted Expanded Access IND (compassionate use) for use of WCK 5222 in a young patient

Post treatment with WCK 5222, patient was cured of infection

3

CLSI, USA assignment of investigational susceptibility breakpoint of 64 µg/mL to WCK 5222 for major group of Gram-negative pathogens even before US FDA approval

Breakpoint has been granted for all three major Gram-negative pathogen families

4

Status of on-going clinical studies

- Global registration (Phase III) study: ~90% patient recruitment completed
- India Carbapenem-resistant clinical study ongoing: ~60% patient recruitment completed



Secured Global Supply Chain

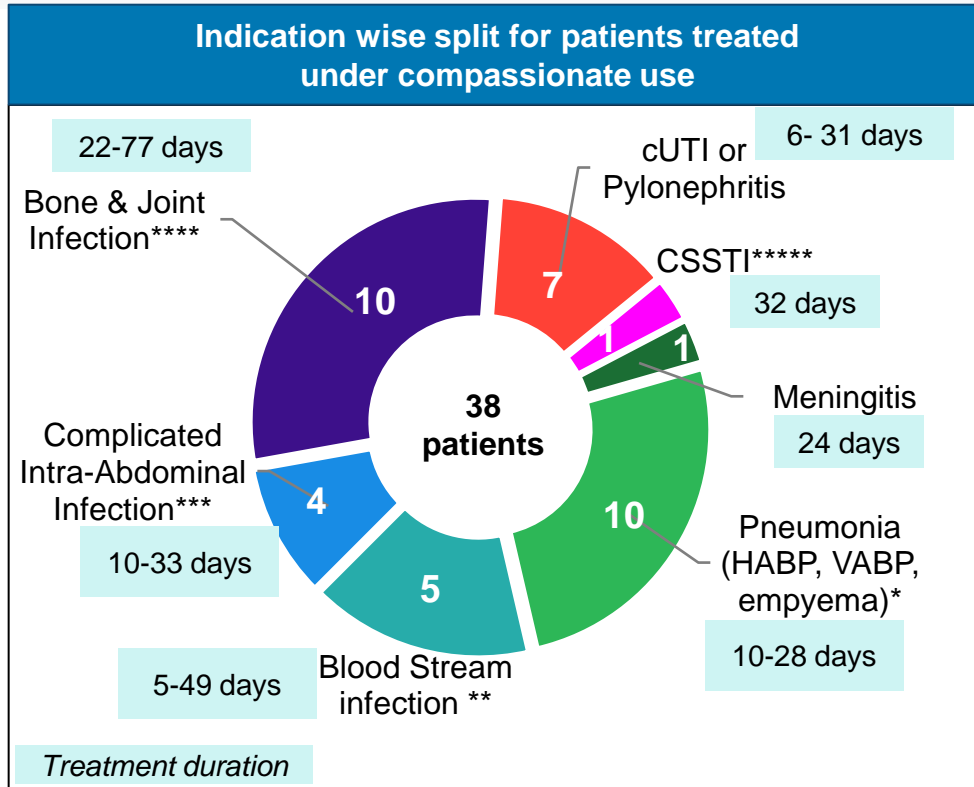
- Manufacturing of WCK 5222 from US FDA approved European site
- Sourcing of sterile Cefepime from US FDA approved European site

1

ZAYNICH® (WCK 5222) has treated 38 patients under compassionate use program so far in India

Pathogens inflicting infections and associated indications of 38 patients

Complete clinical as well as microbiological cure attained in all patients



Pathogen	38 Patients treated	Treatment duration
Pseudomonas aeruginosa	29 ^a	5 to 77 days
Acinetobacter baumannii + Pseudomonas aeruginosa	1 ^b	10 days
Escherichia coli	1 ^c	20 days
Serratia marcescens	1 ^d	22 days
Klebsiella pneumoniae	5 ^e	7 to 33 days
Acinetobacter baumannii	1 ^f	7 days

- a. 22/29 patients had Colistin / Polymyxin failure; 8/29 patients had CAZ/AVI & Aztreonam failure; 8/29 patients had Fosfomycin IV failure
- b. Patient had Polymyxin & CAZ/AVI failure
- c. Patient had CAZ/AVI + Aztreonam & Colistin failure
- d. Patient had CAZ/AVI & Tigecycline failure
- e. 4/5 Patients had CAZ/AVI + Aztreonam & Colistin failure; 1/5 had Polymixin/ Meropenem + Sulbactam failure
- f. Patient had Cefiderocol, CAZ/AVI + Aztreonam , Polymixin B & Meropenem failure

*--1/10 patients also had cIAI ; 3/10 patients had septic shock, 1/10 has cIAI and 1/10 had BSI; **- 3/5 patients also had Pneumonia; ***- 1/5 also had BSI & 1/5 had Osteomyelitis; ****- 1/10 also has HABP & renal dysfunction and 1/10 had renal dysfunction; *****- Also had BSI & Pneumonia (HAP)

WCK 5222 was effective even in patients that failed Colistin / Polymyxin-B treatment

2 US FDA under Expanded Access IND provision granted permission for use of WCK 5222 in a young patient



Patient with multiple sites of infection in large wounds



Patient was not responding to available antibiotic treatment



WCK 5222 was initiated on patient

post US FDA approval under Expanded Access IND provision



In 37 days after treatment with WCK 5222, patient was free of infection

3 CLSI (USA) assignment of susceptibility breakpoint of 64 µg/mL to WCK 5222 for major group of Gram-negative pathogens even before US FDA approval

MIC breakpoint has been granted for all three major Gram-negative pathogen

1 CLSI (USA) recently granted a susceptibility breakpoint of 64 µg/mL

For all the three major group of Gram-negative pathogens -Enterobacterales, Pseudomonas aeruginosa and Acinetobacter baumannii

2 Supports much wider therapeutic scope of WCK 5222

For coverage of carbapenem-resistant Acinetobacter baumannii (CRAB), carbapenem-resistant Enterobacterales and carbapenem-resistant Pseudomonas aeruginosa.

- Generally, CLSI breakpoints are granted to products approved by US FDA.
- As an investigational drug, WCK 5222 received breakpoint during clinical developmental phase.



Global cUTI study status

More than 90% patient recruitment completed

- Total Patients: 528
- Patients recruited: > 90%
- Sites: 57
- Countries
 - **Europe** : Poland, Bulgaria, Estonia, Slovakia, Lithuania
 - **North America**: USA
 - **Latin America** : Mexico
 - **Asia**: India, China



India Carbapenem resistant organism (CRO) study status

India study status

- Total Patients: 60
- Patients recruited: ~ 60%
- Sites : 19

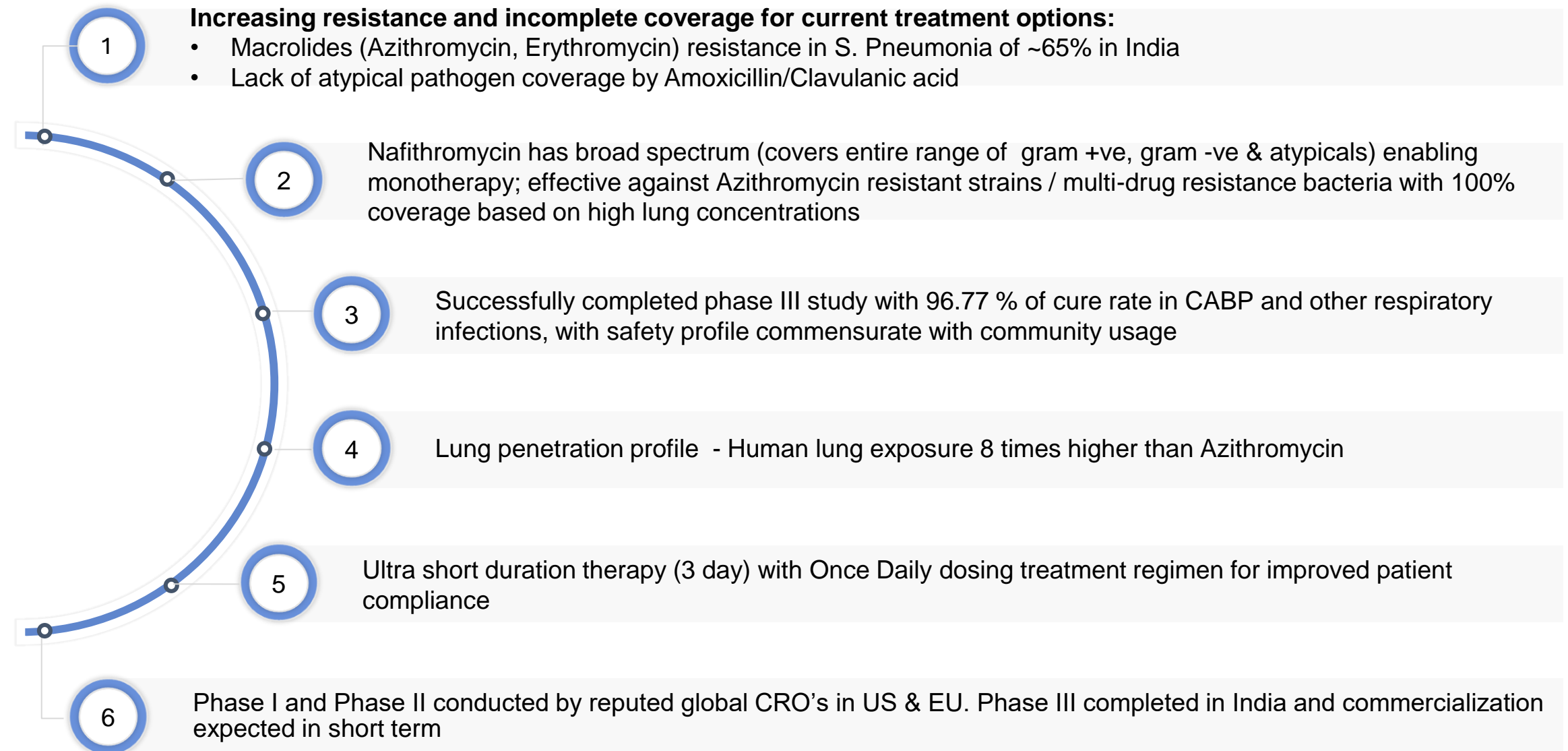
Multi-indication study for carbapenem-resistant gram-negative infections



MIQNAF[®] (Nafithromycin)

Next generation respiratory tract infection antibiotic

Nafithromycin (Miqnaf®): Broad spectrum novel lactone ketolide for Community Acquired Bacterial Pneumonia (CABP) & Upper Respiratory tract infections(RTI)



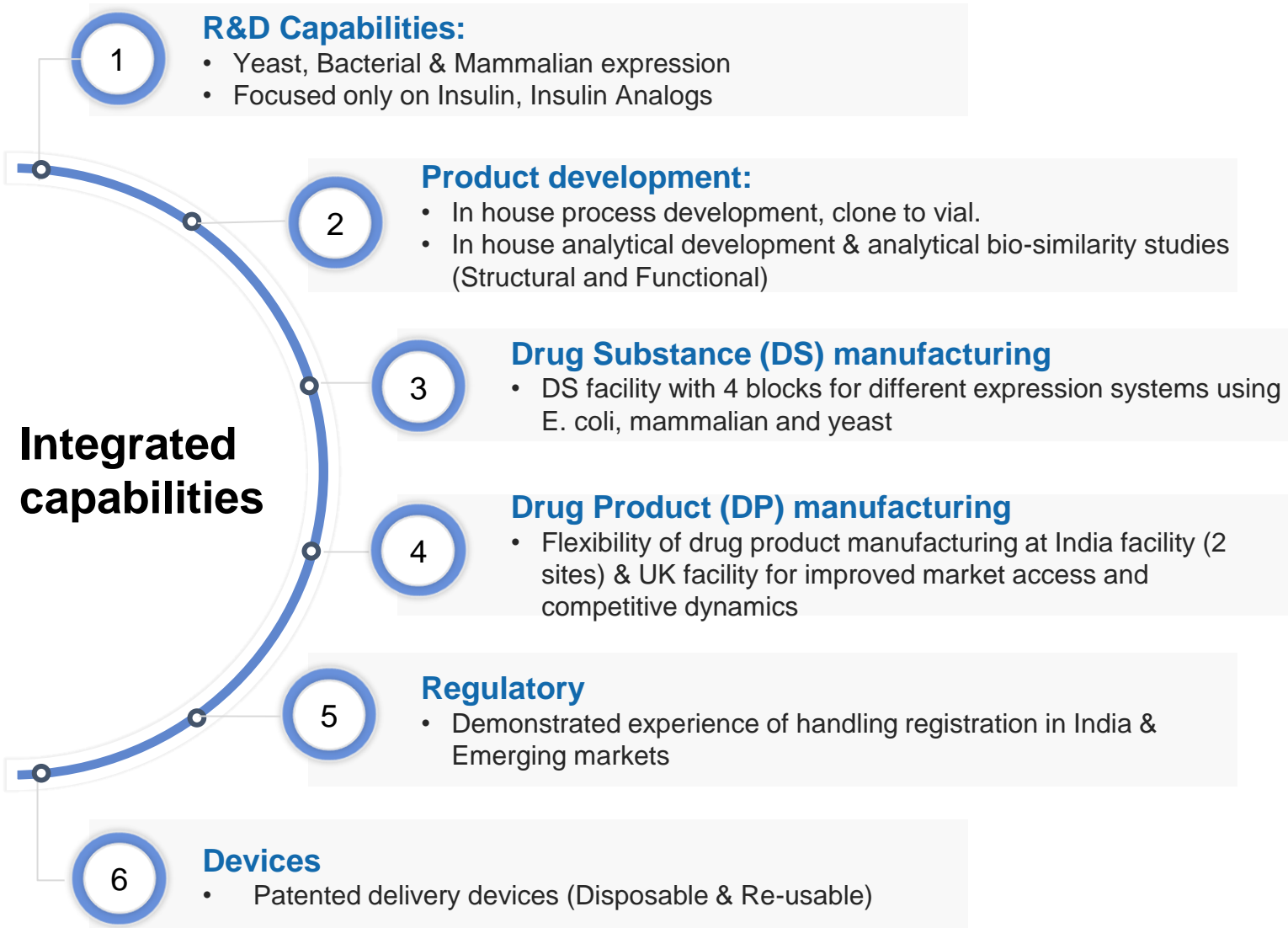


Biotechnology

Wockhardt - Well positioned to capture value in diabetes biosimilars market

- 1 Focused on the antidiabetic biologics market characterized by high entry barriers and limited competition
- 2 Wockhardt advantage of vertically integrated, competitive business model in Diabetes Biosimilars
- 3 R&D infrastructure with ~100 scientists, Patented Insulin Pen, manufacturing encompassing major expression systems with **in-house US-FDA approved clinical facility**
- 4 **Flexibility** of drug product manufacturing at **India facility (2 sites) & UK facility** for **improved market access** and **competitive dynamics** in addition to drug substance facilities with 4 blocks (in India).
- 5 Foothold in **India** and **Emerging Markets (presence across >30 countries)** with planned foray in **Developed markets**
- 6 **Comprehensive antidiabetic biosimilars pipeline of Insulin analogs**

Competitive advantage by providing integrated solutions in Diabetes Biosimilars



Commercialization model

India

- Through own field force for promotion to Diabetologists/ Endocrinologists

Emerging Market

- Through partners/distributors in >30 countries
- End to end capabilities provides flexibility for leveraging local regulations.- e.g. flexibility to supply Drug Substance to partner where local manufacturing is given preference



Enhanced competitive posture helps penetrate market

In-house R&D and clinical capabilities to develop antidiabetic biosimilars for global markets

Integrated R&D centers

~100 scientists including 14 PhDs¹

46 product patents in biosimilar
incl. 23 patents for pen device¹

- ▶ Expertise across varied areas of biotechnology research - from **gene to drug product**
- ▶ Capability across 3 expression systems - **Yeast, Bacteria, Mammalian**
- ▶ Globally patented, in-house designed and developed **disposable and re-usable pens**
- ▶ Robust product pipeline at an advance stage of development

In-house bioassay labs and clinical unit

In-house bio-assay capability and...

- ▶ In-house lab for **structural characterization** to establish bio-similarity

...Clinical Pharmacokinetics & Biopharmaceutics (CPB) unit offers substantial cost advantage

- ▶ Includes **clinical facility with 76 beds** and Glucose clamp ward with **8 special beds**
- ▶ State-of-the-art infrastructure
- ▶ **Validated by major globally recognized regulatory authorities**

US FDA

MHRA,
UK

CDSCO,
India

ANVISA,
Brazil

ISO 15189,
NABL
(pathology lab)

Integrated manufacturing infrastructure

Drug substance facilities

- Manufactures **all** recombinant biopharmaceutical **drug substances (DS)** at its **own facilities**
- Operates **DS facility with 4 blocks** for different expression systems using
 - **E. coli**
 - **Mammalian**
 - **Yeast**

Drug product facilities

- **3 fully equipped drug product (DP) facilities**
- Facilities **handle various dosage forms**: cartridges, vials, pre-filled syringes, pen assembly
- Operations are supported by a **robust quality control and assurance infrastructure** and experienced staff

Facilities	Target markets	Dosage form
DP site 1 (India)	India & Emerging Markets	Cartridge
		Vial
DP site 2 (India)	India & Emerging Markets	Cartridge
		Vial
DP site 3 (UK)	Developed markets	Cartridge
		Vial

Consistent compliance track record for drug substance and drug product facilities from key regulatory bodies

WHO GMP issued by

CDSCO,
India

ANVISA,
Brazil

INVIMA,
Colombia

FDA,
Philippines

MOH,
Thailand

NDA,
Uganda

MOH,
Namibia

TMMDA,
Turkey

Diabetes Biosimilars for Emerging markets - Competitive scenario



Comprehensive antidiabetic biosimilars pipeline across Human Insulin & Insulin analogs

Commercialized products	
Product	Target Market
Recombinant Human Insulin	● ●
Glargine 100 IU	● ●

Pipeline : Insulin and Insulins analogs	
Product	Target Market
Glargine 100 IU	●
Aspart R	● ● ●
Lispro R	● ● ●
Aspart Mix	● ●
WCK 9406 (Fast-acting + Long-acting bio-better) *	● ●

*Wockhardt's innovative bio better

● Developed markets ● India ● Emerging markets

Development status of Insulin analogues in Emerging Markets

	Aspart R	Aspart 30/70	Lispro R	WCK 9406
Process development	✓	✓	✓	✓
Process Scale Up	✓	✓	✓*	Planned
Drug substance validation batches	✓	✓	✓*	✓
Drug product validation batches	✓			
PK/PD study	✓	Planned	Planned	Planned
Analytical similarity	✓			

Filed in India

E.Coli host cell as platform technology for all above products

✓ Completed

* To be further scaled up

Status of Insulin analogues for Developed Markets



Product



Insulin type



Development stage

1

Insulin Glargine

Long-acting Analogue

GMP batches for Clinical

2

Insulin Aspart

Rapid-acting Analogue

Product developed / Under optimization

3

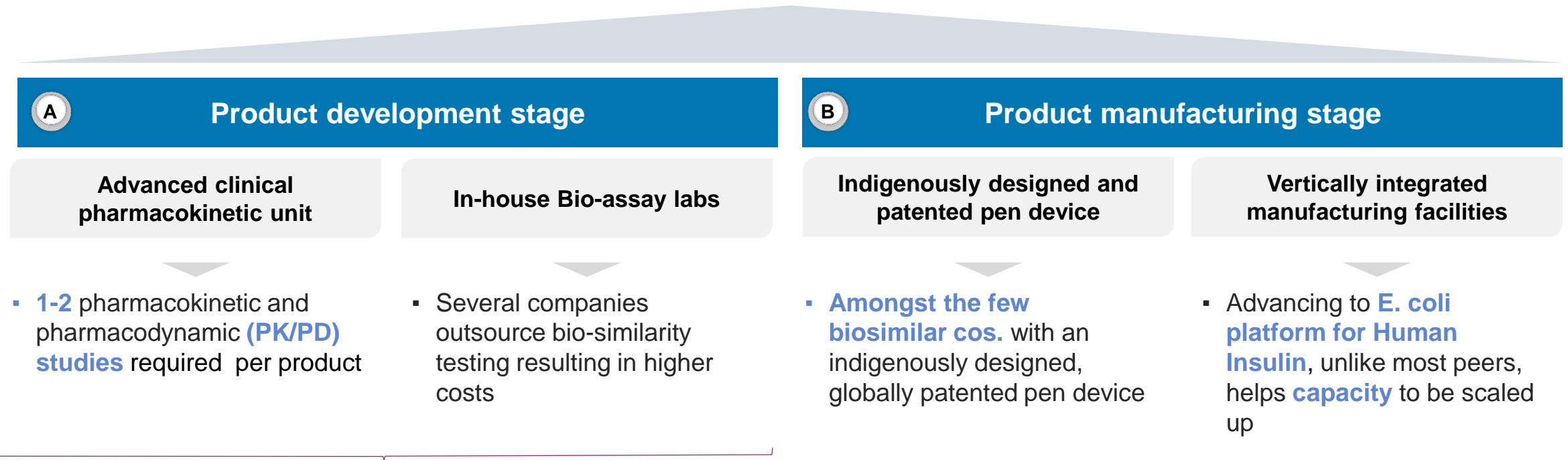
Insulin Lispro

Rapid-acting Analogue

Product developed / Under optimization

Wockhardt differentiated business model: comprehensive range, cost competitiveness & market access

Wockhardt Cost advantages



In-house capabilities offer time advantage

Cost competitiveness shall be a key differentiator as Wockhardt gains market share globally

Abbreviations

®: Registered	Gram –ve: Gram negative	NPRA – National Pharmaceutical Regulatory Agency
~: Approximate	Gram +ve: Gram positive	OPD: Outpatient Department
A.baumannii: Acinetobacter baumannii	HABP: Hospital Acquired Bacterial Pneumonia	oprD: Outer membrane porin
ABSSSI: Acute bacterial skin and skin structure infections	ICMR: Indian Council of Medical Research	OTC: Over the counter
AmpC: Ampicillin-resistance gene group C	ICU: Intensive care unit	Oxa: Oxacillinases
AMR: Anti Microbial Resistance	IND: Investigational New Drug	P. Aeruginosa: Pseudomonas Aeruginosa
ANVISA: Agency Nacional de Vigilancia Sanitaria	INVIMA: National Institute of Drug and Food Surveillance	PBP3: Penicillin binding protein 3
β-lactam: Beta Lactam	INR: Indian rupee	PhD: Doctor of Philosophy
Bn: Billion	ISO: International Organization for Standardization	PK: Pharmacokinetics
BSI: Blood Stream infection	IU – International Unit	PK/PD – Pharmacokinetics/Pharmacodynamics
CABP: Community-acquired bacterial pneumonia	IV: Intravenous	QIDP: Qualified Infectious Disease Product
CAZ/AVI: Ceftazidime-avibactam	KOLs: Key Opinion Leaders	R&D: Research and Development
CDSCO: Central Drugs Standard Control Organization	K Pneumoniae :Klebsiella pneumoniae	RTI: Respiratory Tract Infection
clAI: Complicated Intra-abdominal Infections	KPC: Klebsiella pneumoniae carbapenemase	S. maltophilia : Stenotrophomonas maltophilia
CIS: Commonwealth of independent state	MAT: Moving Annual Total	TID: Thrice a day
CLSI: Clinical & Laboratory Standards Institute, USA	MBL: Metallo-beta-lactamase	TMMDA – Tanzania Medicines and Medical Devices Authority
CHDL: High-density lipoprotein cholesterol	MDR: Multidrug resistance	UK: United Kingdom
CMO: Contract manufacturing organization	MDR/XDR: Multi Drug Resistant/ Extremely drug resistant	US: United States
CNS: Central nervous system	MHRA: Medicines and Healthcare products Regulatory Agency	US-FDA: United States Food and Drug Administration
Cr.: Crore	MIC: Minimum Inhibitory Concentration	VABP: Ventilator Acquired Bacterial Pneumonia
CRAB: Carbapenem-Resistant Acinetobacter baumannii	Mn – Million	WHO: World Health Organization
CSSTI: Complicated skin and soft tissue infection	MOA: Mechanism of Action	Y-o-Y: Year-over-year
cUTI : Complicated urinary tract infections	MOH – Ministry of Health	
DP: Drug Product	MRSA: Methicillin-resistant Staphylococcus aureus	
DS: Drug Substance	NABL: National Accreditation Board for Testing and Calibration Laboratories	
EBITDA : Earnings before interest, taxes, depreciation, and amortization	NCE: New chemical entity	
E.coli: Escherichia coli	NDA: New Drug Application	
ESBL-Extended spectrum beta-lactamase	NDA Uganda: National Drug Authority Uganda	
EU: European Opinion	NIH: National Institute of Health	
GMP: Good Manufacturing Practices		

Thank You

Golden
50
years

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