2026-02-13

Pila Pharma

Accelerating Toward Clinical Development

Pila Pharma AB (“Pila Pharma” or “the Company”) is developing the drug candidate XEN-D0501 for obesity, type 2 diabetes, and erythromelalgia, an orally administered, small-molecule TRPV1 antagonist aiming to reduce hyperactive inflammation linked to metabolic disorders. The candidate is considered scalable and provides a differentiated alternative to current therapies, expected to be essential in making obesity treatment more accessible. Analyst Group argues that the potential relative to the associated risks is not reflected in the current valuation, and based on an rNPV model, a present value of SEK 5.7 (6.3) per share is derived in a Base scenario.

▪ The Clinical Plan Remains Intact

The preclinical obesity studies presented in January did not demonstrate any effect on body weight, while it remains unclear whether the animals in the study were exposed to XEN-D0501, with exposure data pending. In parallel, the Company has entered into an agreement with a new CRO to prepare a clinical application, signaling continued strategic focus on obesity. It is still estimated that Pila Pharma initiates Phase IIa clinical studies in obesity and type 2 diabetes during year 2026. However, additional external capital is assessed to be required, given that the cash position at the end of H2-25 of SEK 19.2m and estimated proceeds from TO2 are not expected to be sufficient to finance these studies.

▪ Initiates Clinical Development in Erythromelalgia

On February 9, Pila Pharma announced that the Company has initiated preparations to apply for a clinical study in erythromelalgia. The study is a smaller proof-of-concept trial aimed at demonstrating the potential effect of XEN-D0501 in alleviating perceived pain associated with erythromelalgia. The indication had previously been assumed to be deprioritized in coming years due to focus on clinical development in obesity and type 2 diabetes. It is now assumed that Pila Pharma conducts the study to strengthen the attractiveness of the drug portfolio ahead of a potential partnership. Given this, a somewhat higher deal value is now estimated in the projected licensing agreement during year 2028 of USD 310m (USD 300m), with the partner thereafter expected to advance clinical development through a registrational Phase II/III study, with estimated market approval during year 2032.

▪ Updated Valuation Range

Pila Pharma has in recent months taken important steps toward continued clinical development to realize the value of the drug portfolio. Given the discrepancy between the share price and the subscription price for TO2 of SEK 1.50 per share, proceeds from the warrants are assessed not to be sufficient to conduct the estimated clinical activities, implying additional financing needs to realize the substantial potential. Given uncertainty regarding future financing, the WACC has been increased to 19.7% (15.1%), which, in combination with lower dilution from TO2, results in an updated valuation range, where the Base scenario amounts to SEK 5.7 (SEK 6.3) per share.

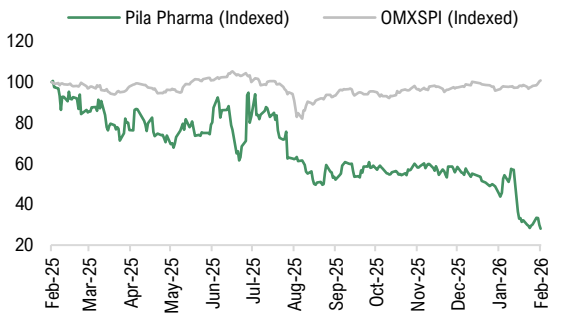
Valuation Range

Bear	Base	Bull
SEK 0.8	SEK 5.7	SEK 9.6

Key Information

Share Price (2026-02-12)	1.12
Shares Outstanding	42,084,415
Market Cap (SEKm)	47.2
Net cash(-)/debt(+) (SEKm)	-19.3[1]
Enterprise Value (SEKm)	27.9
List	Nasdaq First North Growth Market
Half year report 2026	2026-08-27

Share Price Development



Owners (Source: The Company, 2025-12-31)	Insider
Virala Oy Ab	16.3%
Dorte X. Gram	14.2%
Goldman Sachs & Co	3.2%
BNY Mellon Sa/Nv For Jyske	2.8%
Saxo Bank A/S Client Assets	2.2%

Estimates (SEKm)	2026E	2027E	2028E	2029E
Riskadjust. revenues (type 2 diabetes)	0.0	0.0	0.0	0.0
Riskadjust. revenues (obesity)	0.0	0.0	0.0	0.0
Riskadjust. revenues (erythromelalgia)	0.0	0.0	0.0	0.0
Riskadjust. revenues (license deal)	0.0	0.0	55.8	0.0
Total riskadjust. Revenues	**0.0**	**0.0**	**55.8**	**0.0**
Operational expenses	-36.0	-15.0	-6.0	-6.0
EBIT	**-36.0**	**-15.0**	**49.8**	**-6.0**
EBIT margin (adj.)	neg.	neg.	89.3%	neg.

[1]Combined cash position of the parent company and the subsidiary.

Please read our disclaimer at the end of the report

Introduction

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About the Company

Pila Pharma is a Swedish biotech company established in 2014, based on the discovery that inhibition of the TRPV1 receptor may improve blood glucose control and body weight. The Company is developing XEN-D0501, a selective small-molecule TRPV1 antagonist, across three primary indications: type 2 diabetes, obesity, and erythromelalgia. The candidate has been evaluated in over 300 individuals with good results. The ambition is to advance clinical development across all three indications in order to create a comprehensive and commercially attractive data package. The Company has been listed on First North since year 2021.

CEO and Chairman

CEO	Gustav Hanghøj Gram
Chairman	Dorte X. Gram

Analyst

Namn	Axel Ljunghammer
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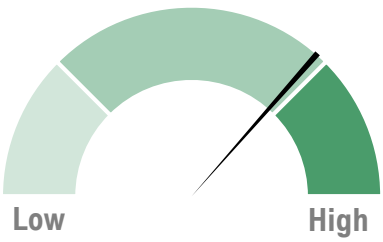
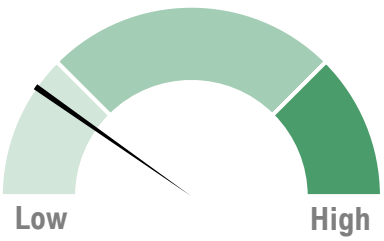
Value Drivers



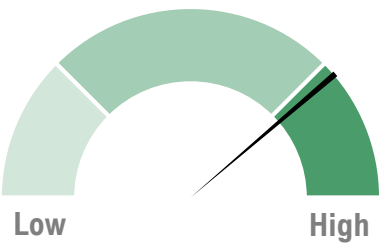
In the short term, exposure data from the preclinical obesity studies represent an important trigger, followed by progress and initiation of the planned clinical studies across all three indications. In recent years, interest in obesity treatments has increased among larger pharmaceutical companies, strengthening risk appetite for in-licensing and acquisitions of new candidates. Analyst Group assesses that Pila Pharma represents an attractive candidate, provided that XEN-D0501 demonstrates positive data in the clinical studies.

Historical Profitability



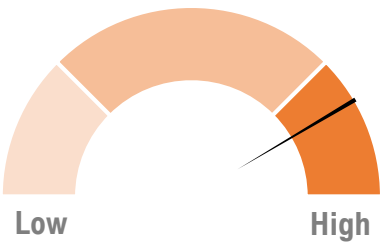
Pila Pharma is a clinical-stage biotech company, and as such, revenue generation has not yet commenced, resulting in a history of negative cash flows. Analyst Group considers the Company to be operating with solid cost control. The rating is based on Pila Pharma's historical profitability and does not reflect future projections.

Management & Board



Pila Pharma's founder, Dr Dorte X. Gram, serves as Chair of the Board and CSO of the Company and is one of the main shareholders, holding 14.2% of the shares, which supports confidence. Gustav Gram has been CEO since year 2024 but has worked at the Company in various roles since year 2016. Analyst Group also considers the remaining Board members and the Scientific Advisory Board to possess relevant experience in drug development, commercialization, and financing.

Risk Profile



Drug development involves high risk, as clinical trial outcomes are binary by nature. In addition, financing of the clinical development constitutes a risk. The cash position at the end of year 2025 amounted to SEK 19.3m, implying that liquidity needs to be strengthened in order to conduct the planned clinical studies. Warrants of series TO2 are estimated not to provide sufficient capital for these studies, indicating that additional external capital is expected to be required to realize the potential of Pila Pharma's drug portfolio.

Investment Thesis

COMPETITIVE STRENGTH THROUGH SCALABILITY

The Obesity Drug Market Shifts Toward Scalable Alternatives – Tablets Seen as the Future

As obesity has become one of the most pressing global public health challenges, the pharmaceutical industry has increasingly focused on treatments that can be scaled to reach large patient populations. Today's dominant therapies are mostly injectable and peptide-based, requiring complex biological manufacturing, strict requirements for active substances, cold-chain logistics, and limited production capacity. Against this backdrop, oral treatments, especially small molecules, are viewed as a more sustainable long-term alternative, offering better conditions for industrial scale-up, distribution, and global access. This development has driven investments into tablet-based drugs, with Novo Nordisk receiving approval for Wegovy as the first tablet-based treatment in December year 2025, however, this is not a small molecule. Pila Pharma is well positioned to capitalize on this trend through XEN-D0501, a small-molecule oral TRPV1 inhibitor with simple chemical synthesis and stable tablet formulation, enabling a scalable solution compared to other tablet-based treatments already approved or expected to reach the market shortly, to address the large patient population. Furthermore, combination of therapies represent a growing trend in obesity, where Pila Pharma, through its differentiated mechanism of action, may potentially serve as a complementary treatment option alongside other mechanisms.

Differentiated Side Effect Profile as a Potential Competitive Advantage

GLP-1-based obesity drugs are often associated with gastrointestinal side effects such as nausea and vomiting, limiting adherence. Studies show that over half of patients discontinue treatment within one year, with side effects being a key reason. This has increased demand for drugs with alternative mechanisms and better tolerability. XEN-D0501 stands out by not affecting gut hormones and has shown a favorable safety profile in earlier studies, with mainly transient, mild nerve-related side effects and no serious adverse events. This differentiated profile may enable improved adherence and represents a competitive advantage, provided future studies confirm efficacy and tolerability over longer treatment periods.

Strong Interest in Novel Obesity Drugs Among Major Pharma Companies

SEVERAL MAJOR LICENSING AND ACQUISITION DEALS IN THE MARKET

In recent years, larger pharmaceutical companies have shown increasing interest in obesity drugs with alternative mechanisms of action, particularly oral small-molecule candidates. This has been reflected in several major licensing and acquisition deals, where companies have invested significant capital in early-stage projects to address the limitations of existing treatments. The elevated risk appetite in these deals indicates a willingness to act early in the development cycle to secure access to differentiated technologies. In this context, Pila Pharma is considered well positioned, as the Company's oral small-molecule TRPV1 antagonist combines a novel mechanism with potential for strong tolerability and scalability. This is expected to increase the likelihood of forming a strategic partnership at an earlier stage, provided upcoming study results are positive. Analyst Group estimates such a partnership to be signed in year 2028, with a total deal value of USD 310m, following phase IIa trials in obesity and type 2 diabetes.

Forecast and Valuation: Summary

SEK 5.7 VALUE PER SHARE BASE SCENARIO

Analyst Group estimates that Pila Pharma signs a partnership deal for the out-licensing of XEN-D0501 across three indications in year 2028 with a total value of USD 310m, including approximately USD 22m in upfront payment and an estimated 11% royalty on future sales of XEN-D0501. The valuation is based on an rNPV model where licensing and royalty revenues are estimated and risk-adjusted based on the assessed probability of commercialization for each indication. The estimated cash flows are discounted using a WACC of 19.7%, resulting in a derived present value per share of SEK 5.7 in a Base scenario.

Clinical Drug Development Carries High Risk and High Potential

As with all clinical-stage biotech companies, Pila Pharma's drug development carries significant development risk, with binary outcomes regarding efficacy and safety. The next clinical step for Pila Pharma is expected to be phase IIa proof-of-concept studies in obesity and type 2 diabetes, typically considered a key challenge. Regarding safety, the Company has already tested XEN-D0501 in several clinical studies involving approximately 300 patients without significant adverse events, supporting a favorable safety profile. Clinical studies are also capital intensive, and Pila Pharma requires additional funding for continued development. Analyst Group estimates a licensing deal in year 2028 through which the partner finances further development. Should such a deal not materialize and the Company continues independently, additional external capital would be required.

Comment on H2-report

Preparations for a Clinical Trial Application in Erythromelalgia

On February 9, Pila Pharma announced that the Company has initiated preparations to apply for a clinical study in erythromelalgia. The disease is a rare and often severely debilitating condition characterized by neurogenically driven inflammation and disturbances in nerve and vascular function. The condition manifests as recurrent or persistent episodes of intense pain, burning sensations, increased heat, and redness, typically localized to the feet and hands but sometimes affecting other parts of the body. Current treatment focuses on symptom relief and management of triggering factors, and patients are often advised to avoid triggers such as heat, physical exertion, and pressure on affected areas, which in practice may result in significant limitations in daily life.

XEN-D0501 OFFERS A NOVEL APPROACH

Pila Pharma's candidate XEN-D0501 offers a novel approach to erythromelalgia by blocking TRPV1, a receptor that plays a central role in the nerve-driven inflammation and hypersensitivity underlying the severe pain attacks. By attenuating this overactivation, the candidate targets an underlying disease mechanism rather than merely alleviating symptoms, as is the case with current treatments. With the first clinical study in this indication now being prepared, the objective is to establish proof-of-concept by demonstrating XEN-D0501's potential effect in reducing perceived pain in erythromelalgia.

The Company has been granted Orphan Drug Designation for XEN-D0501 by the FDA in erythromelalgia, providing benefits such as tax credits, market exclusivity in the event of approval, and a potentially faster path to commercialization. Upon successful proof-of-concept in the forthcoming clinical study, we expect Pila Pharma to also apply for orphan drug status within the EU.

SUCCESSFUL STUDY EXPECTED TO BENEFIT PARTNER DISCUSSIONS

In our initiation analysis of Pila Pharma, we estimated that development within erythromelalgia would be deprioritized in the coming years as the Company focused on obesity and type 2 diabetes. The announced initiation of preparations for a clinical study indicates that Pila Pharma intends to accelerate clinical development within this indication. The initial proof-of-concept study is expected to be relatively small and therefore less costly, with Analyst Group estimating a cost of approximately SEK 2–4m. At the same time, a successful study is expected to strengthen Pila Pharma's negotiating position in potential future partnership discussions, while orphan drug status in the EU would provide additional benefits, making the study an important future value driver.

Incomplete Preclinical Results and Agreement with a New CRO

On January 26, Pila Pharma announced that the Company's preclinical obesity studies had been completed, showing no effect on body weight in the obese rats included in the study. However, the study results are not yet finalized, and it remains unclear whether the rats were exposed to Pila Pharma's candidate XEN-D0501. In connection with the study results, Pila Pharma also announced that the Company has entered into an agreement with a new clinical contract research organization (CRO) to prepare and submit an application for a clinical trial in obesity, which according to Analyst Group slightly reduces the execution risk.

REDUCES EXECUTION RISK

Analyst Group assesses that the lack of observed weight reduction in the preclinical study cannot be unequivocally interpreted as a lack of efficacy, as uncertainty remains regarding actual drug exposure due to the change in formulation. The outcome of the ongoing exposure analysis will therefore be central to the continued assessment and is expected to be presented in the coming months. At the same time, Pila Pharma has already initiated preparations for clinical development in obesity through an agreement with a new CRO, indicating a continued strategic focus on the indication. Given the extensive safety documentation for XEN-D0501, a clinical study is considered to be regulatorily feasible, although continued development in the event of confirmed lack of preclinical efficacy would entail an elevated risk profile.

Comment on H2-report

Costs in Line with Our Estimates

Operating expenses amounted to approximately SEK 3.5m (3.6), demonstrating solid cost control. In addition, Pila Pharma reported a shareholder contribution of approximately SEK 8.7m to a group company, which is assumed to relate to Pila Pharma's subsidiary, as the interim report only presents the parent company's financial statements. The contribution is assumed to be attributable to ongoing costs in the Danish subsidiary, such as the preclinical obesity study and preparations for clinical studies across all indications. Furthermore, cash in the subsidiary amounted to SEK 3.4m.

SEK 19.3M
TOTAL CASH POSITION AT THE END OF H2-25

The cash balance amounted to SEK 19.3m at the end of December 2025, including the subsidiary's cash balance, and was strengthened in August through an oversubscribed rights issue that provided Pila Pharma with net proceeds of approximately SEK 27m in August 2025. The Company has outstanding warrants of series TO2 with an exercise period of February 5–15, 2026, at a subscription price of SEK 1.50 per share. In an interview in connection with the H2 report, Pila Pharma's CEO Gustav H. Gram stated that the Company has received indications from certain shareholders of their intention to exercise their warrants, and that both he and Chairman of the Board Dorte X. Gram intend to exercise their warrants, which instills confidence in management's alignment with shareholders.

ADDITIONAL CAPITAL ASSESSED TO BE REQUIRED TO REALIZE THE POTENTIAL

As Pila Pharma intends to maintain a high pace of clinical development, illustrated by preparations for a clinical study in erythromelalgia and the agreement with a CRO to prepare and submit a clinical trial application in obesity, this is expected to result in a need for additional external capital to realize the potential of the drug portfolio. Pila Pharma states that the Company is financed into 2027 based on currently planned activities; however, to complete the planned clinical studies within the respective indications, Analyst Group assesses that additional capital will be required, where the outcome of the TO2 warrants will be an important factor for the future financing needs.

In summary, Pila Pharma is maintaining a high operational pace, with completed preclinical studies and initiated preparations for clinical development in both erythromelalgia and obesity, while also expected to continue clinical development in type 2 diabetes, which together constitute strong potential value drivers going forward. We view XEN-D0501 as a scalable candidate offering a differentiated alternative compared to current therapies across the various indications. However, to accelerate clinical development according to plan, additional external capital is expected to be required, with the outcome of the TO2 warrants becoming important for the extent of any future financing needs.

Company Description

The Role of TRPV1 Antagonists in Blood Sugar and Weight Regulation

TRPV1 is a receptor on certain nerves that may become overactive in individuals with overweight and type 2 diabetes, contributing to inflammation and impaired regulation of blood glucose and body weight. By blocking this receptor with a TRPV1 antagonist, such overactivity may be reduced, potentially improving blood sugar control, enhancing insulin response, and lowering the tendency for weight gain. This is the mechanism of action behind Pila Pharma's drug candidate XEN-D0501.

Pila Pharma is a Swedish biotech company founded in its current form in year 2014, based on the discovery that inhibiting the TRPV1 receptor may improve blood glucose control and body weight. The idea was developed by the Company's founder, Dr. Dorte X. Gram, whose research at Novo Nordisk laid the foundation for a patent portfolio that was bought out by Dorte and later transferred to Pila Pharma. In year 2016, the clinical candidate XEN-D0501, a selective TRPV1 antagonist originally developed by Bayer, was in-licensed and later acquired, enabling the Company's development efforts in diabetes. Since then, two phase IIa studies have been completed, demonstrating a favorable safety profile and significant effects on glucose tolerance and insulin response to glucose. A pronounced reduction was also observed in a biomarker associated with heart failure risk, indicating a potentially cardioprotective effect. The Company is preparing for the next phase IIa trial, which is extended to twelve weeks compared to four in the previous study, and involves higher dosing.

The strategy has been broadened through establishment of a separate development track in obesity, with the objective of achieving clinical proof-of-concept in patients with obesity in order to stimulate tangible partner interest. In addition to these efforts, XEN-D0501 is also being developed in the field of pain, where the compound received Orphan Drug Designation in the US in year 2022 for the treatment of the rare and painful disease erythromelalgia. TRPV1 is a receptor involved in the regulation of pain and inflammation and has been extensively studied as a therapeutic target for pain relief. However, many approaches targeting TRPV1 have been associated with safety concerns, whereas XEN-D0501 appears not to exhibit such issues in studies conducted so far, including over 300 patients. Pila Pharma has initiated preparations to apply for a clinical study in erythromelalgia.

Furthermore, Pila Pharma has conducted preclinical studies with XEN-D0501 in cardiovascular disease, specifically abdominal aortic aneurysm, where the compound significantly reduced aneurysm growth in mice, supporting its favorable cardiovascular profile and establishing preclinical proof-of-concept. Thus, Pila Pharma is addressing several areas with substantial need for improved accessibility and scalability of treatments, as well as clear medical needs.

Indication Areas – Type 2 diabetes

Type 2 diabetes

Disease Description

Type 2 Diabetes is a chronic, progressive disease characterized by the development of insulin resistance in the body's cells, along with a decline in the pancreas's ability to produce insulin. This results in persistently elevated blood glucose levels, which over time damage blood vessels and tissues in multiple organs. The disease typically develops over many years and is closely linked to overweight, low-grade inflammation, genetics, and lifestyle factors such as physical inactivity. As insulin resistance increases, the pancreas is forced to produce larger amounts of insulin to maintain normal glucose regulation, but when this compensatory ability fails, diabetes becomes established. Poorly controlled type 2 diabetes poses significant risk for long-term complications. Among the most common are cardiovascular disease, impaired kidney function, and nerve damage in the limbs, all of which contribute to increased morbidity and mortality. Continuous and stable blood glucose control is therefore central to treatment, where modern therapies aim to improve both insulin sensitivity and insulin secretion.

Current Treatment

Current Treatment Approach

The treatment of type 2 diabetes aims to achieve stable blood glucose levels, thereby reducing the risk of long-term complications. Lifestyle changes, such as dietary adjustments, increased physical activity, and weight management, form the foundation of therapy. When these measures are insufficient, pharmacological treatment is initiated, typically with metformin as the first-line option due to its effect on insulin sensitivity and well-established safety profile. As the disease progresses, many patients require additional therapies. Drugs such as GLP-1 analogues, SGLT2 inhibitors, DPP-4 inhibitors, or insulin are often used in combination to improve glucose control. However, treatment response varies among individuals, and a significant portion of patients fail to reach target levels despite therapy. Side effects, costs, and administration challenges also limit outcomes, leaving a strong need for new therapies that more effectively address the underlying disease mechanisms.

XEN-D0501

Potential with XEN-D0501 and status

XEN-D0501 has the potential to address several unmet treatment needs in type 2 diabetes and obesity. By blocking the TRPV1 receptor, it reduces hyperactive neurogenic inflammation that drives insulin resistance and metabolic dysfunction, with the receptor considered a central regulator in these processes. The mechanism is systemic rather than locally targeted and does not affect gut hormones, avoiding the gastrointestinal side effects commonly associated with GLP-1-based therapies. In previous studies, XEN-D0501 has demonstrated improved glucose tolerance, enhanced insulin response, and signs of positive cardiovascular effects. As many patients fail to reach treatment goals with current drugs, a TRPV1 antagonist may offer a novel and complementary approach with potential to improve both metabolic parameters and long-term health outcomes. The next clinical step for the type 2 diabetes indication is a phase IIa study evaluating the safety and tolerability of increased doses of XEN-D0501 over a 12-week period.

Company Description

Indication Areas – Obesity

Obesity

Disease Description

Obesity is a chronic and complex disease characterized by excessive accumulation of body fat that negatively affects health and bodily functions. The condition arises from a prolonged energy surplus but is also influenced by genetic factors, hormonal and metabolic imbalances, psychological aspects, and lifestyle-related behaviors. In particular, the accumulation of visceral fat disrupts hormonal and inflammatory balance, placing strain on metabolism and multiple key organ systems. Obesity is closely linked to insulin resistance and represents a major risk factor for type 2 diabetes. It also increases the risk of cardiovascular disease, sleep apnea, fatty liver, joint pain, and certain types of cancer. Beyond medical complications, obesity can impair mobility, energy levels, and quality of life, and is often a slowly progressive condition that develops over many years.

Current Treatment

Current Treatment Approach

The treatment of obesity primarily relies on lifestyle changes such as dietary and physical activity adjustments, though these often result in limited and difficult-to-maintain effects long term. For patients with more severe weight issues, pharmacological treatments are used, with GLP-1-based therapies becoming central due to their ability to induce significant weight loss. However, treatment response varies between individuals, and many experience gastrointestinal side effects that lead to treatment discontinuation, high treatment costs, or challenges related to long-term injections. Despite progress, there remains a clear need for new therapies, particularly treatments that can provide sustainable weight regulation and target the underlying biological mechanisms of obesity. In addition, accessibility remains a challenge given the large number of patients living with obesity, driven in part by high drug costs and supply limitations for popular therapies.

XEN-D0501

Potential with XEN-D0501 and status

XEN-D0501 represents a novel approach by blocking TRPV1, a receptor believed to contribute to the inflammation and metabolic imbalance driving obesity. This mechanism differs from today's incretin-based drugs and does not affect gut hormones, potentially reducing the risk of gastrointestinal side effects commonly experienced with GLP-1 therapies. As a small, oral molecule, XEN-D0501 may also be easier to manufacture, distribute, and administer than injection-based treatments, making it more scalable and potentially more accessible. Provided the effect is confirmed in upcoming studies, the candidate could serve as an important complement for patients who do not tolerate, have access to, or adequately respond to current options. Pila Pharma is expected to receive exposure data from the Company's preclinical obesity study during Q1-26, while a first clinical study is being prepared.

Indication Areas – Erythromelalgia

Erythromelalgia

Disease Description

Erythromelalgia is a rare and often severely disabling disease characterized by neurogenically driven inflammation and dysfunction in nerve and vascular regulation. The condition presents as recurring or persistent episodes of intense pain, burning sensation, warmth, and redness, typically in the feet and hands, though other body parts may also be affected. Symptoms are often triggered by heat, physical activity, or pressure but can also occur spontaneously without clear external stimuli. The disease can significantly limit daily life, as many patients must adapt their environment and activities to avoid pain-inducing triggers. The chronic pain burden may lead to sleep disturbances, social isolation, and severely reduced quality of life. In severe cases, erythromelalgia has been associated with increased suicide risk, and some patient groups report impacts on mortality.

Current Treatment

Current Treatment Approach

There are currently no approved or specifically targeted treatments for erythromelalgia, and management therefore focuses on symptom relief and avoidance of triggering factors. Patients are often advised to avoid heat, physical exertion, and pressure on affected areas, which in practice can result in significant limitations in daily life. Topical agents, sodium channel blockers, and neuropathic pain medications may be tried, though outcomes vary widely between individuals. In more severe and treatment-resistant cases, some patients may undergo interventional procedures such as nerve blocks or sympathetic blocks, though these approaches lack robust evidence and are primarily used when other options provide insufficient relief. As current therapies largely rely on symptom management and often fail to deliver adequate pain control, there remains a substantial medical need for new, more effective and targeted treatments.

XEN-D0501

Potential with XEN-D0501 and status

XEN-D0501 offers a novel approach to treating erythromelalgia by blocking TRPV1, a receptor that plays a central role in the nerve-driven inflammation and hypersensitivity underlying the intense pain episodes. By reducing this overactivation, the candidate targets an underlying mechanism rather than merely alleviating symptoms, as current treatments aim to do. Unlike today's therapies, which often show limited efficacy and varying tolerability, XEN-D0501 is based on systemic yet selective TRPV1 blockade. This allows avoidance of many side effects associated with less specific pain or vascular-acting drugs. If clinical efficacy is confirmed, XEN-D0501 could address a significant treatment gap for a patient group that currently lacks both effective and approved therapies. The compound may also be developed as a topical formulation, enabling targeted pain relief, while the oral formulation could provide systemic effects and potentially reduce spontaneous burning pain flare-ups. Pila Pharma is currently preparing a small clinical proof-of-concept study (Phase Ib/IIa).

Company Description

Pipeline

Candidate	Indication area	Preclinical	Phase I	Phase IIa	Phase IIb	Phase III
XEN-D0501	Type 2 diabetes					
	Obesity					
	Erythromelalgia					
	Abdominal Aorta Aneurism					

Pila Pharma is advancing a single drug candidate, XEN-D0501, across four indications in two development tracks, with one focus directed toward the metabolic pathway with type 2 diabetes and obesity, two indications with similar treatment strategies and mechanisms of action. The cardiovascular project targeting abdominal aortic aneurysm is in an early preclinical phase, where prior studies showed that XEN-D0501 reduced aneurysm growth in mice, which is also included in the metabolic track. Data generated within the AAA indication may be viewed as secondary effects to the primary obesity program, as improvements in inflammatory and metabolic pathways could translate into reduced cardiovascular and vascular risk. Such effects may broaden the candidate's overall clinical value proposition and enhance its strategic attractiveness in potential partnership contexts.

ORPHAN DRUG DESIGNATION IN THE US

In erythromelalgia, the Company has received Orphan Drug Designation from the FDA for XEN-D0501. Developing orphan drugs in the US allows for a clinical development program with certain benefits, including tax incentives and the possibility to submit some preclinical safety data post-approval and commercialization. Development activities in this indication are planned to advance once appropriate funding is in place. Pila Pharma's ambition is to initiate parallel phase IIa studies in type 2 diabetes with obesity, and in patients with obesity only, while preparations for a first clinical study in erythromelalgia have been initiated.

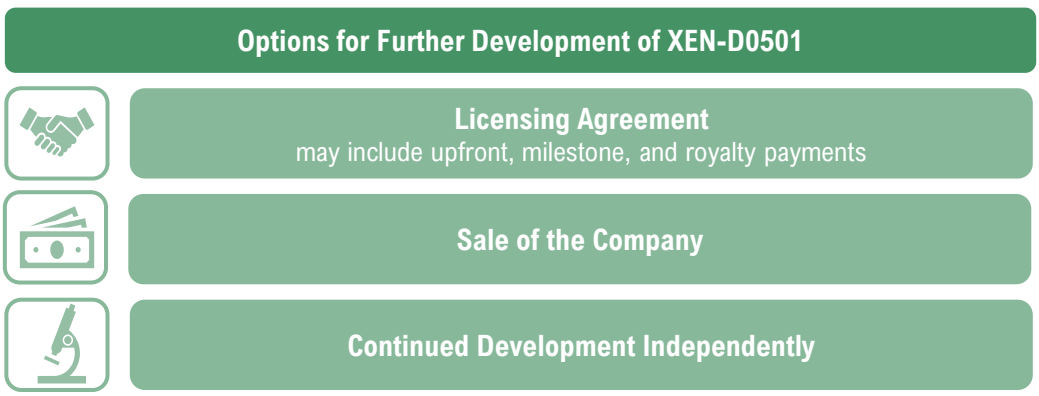
Business Model and Strategic Outlook

AIMS TO BUILD AN ATTRACTIVE DATA PACKAGE

Pila Pharma's strategy is to build an attractive data package around its molecule XEN-D0501 and its expected mechanisms of action, supported by prior studies in type 2 diabetes, obesity, pain, and potentially positive cardiovascular effects. The key short-term milestones and value drivers for the Company are to initiate clinical studies in both type 2 diabetes and obesity as well as erythromelalgia.

If results are favorable, this would strengthen the clinical data on the safety and efficacy of XEN-D0501 in the indications, increasing the likelihood of securing a partnership with a larger pharmaceutical company for further clinical development and potential commercialization, where the partner would fund subsequent trials. A licensing agreement may include a mix of upfront payments, milestone payments, and royalty revenues, where an upfront is paid upon signing, milestones are paid as development progresses, and royalties are based on a percentage of future product sales.

A full acquisition of the Company may also be considered to advance development and eventually comercialize XEN-D0501. If no partnership or acquisition takes place, Pila Pharma may continue development independently.

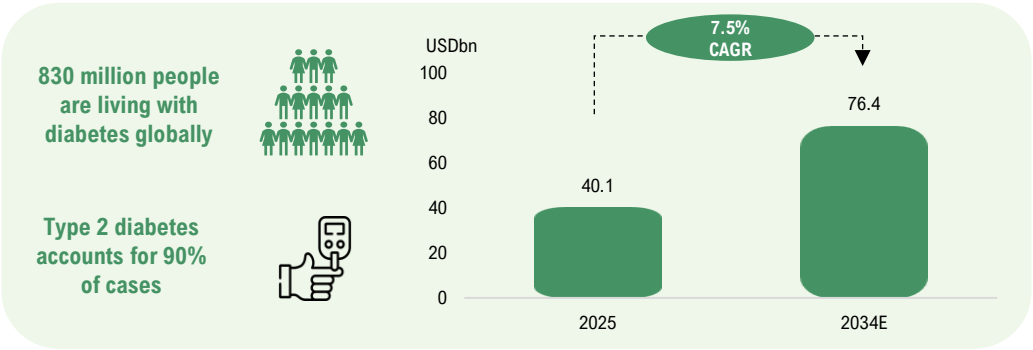


Market Analysis

Type 2 Diabetes

Diabetes is a chronic metabolic disease where elevated blood sugar levels gradually cause serious organ damage, with type 2 diabetes, accounting for approximately 90% of all diabetes cases, being the dominant form. According to a study by Zhou, Bin et al.[1], the number of people living with diabetes increased by 630 million to 828 million between year 1990 and year 2022, corresponding to an annual patient growth rate of 4.5%. In terms of market value, Precedence Research estimates the global type 2 diabetes market to be worth approximately USD 40bn in year 2025, growing at a rate of 7.5% annually to reach USD 76.4bn by year 2034. Key market drivers include the rapidly rising patient prevalence, driven by an aging population and increasing obesity levels, alongside higher R&D investments, technological advances in treatment and diagnostics, and a more supportive regulatory and political environment.

Market Data for type 2 diabetes



Source: WHO & Precedence Research

Obesity

1.13 BILLION PATIENTS BY YEAR 2030

According to WHO, approximately 890 million adults were living with obesity globally in year 2022, equivalent to roughly 1 in 8 adults worldwide. The World Obesity Federation expects this number to rise to 1.13 billion adults by year 2030, representing an annual growth rate of approximately 2.8% from year 2022. In December year 2025, WHO published guidelines for the use of GLP-1 therapies in treating obesity in adults, marking the first time the organization classified obesity as a disease. This is considered a validation of the growing global health challenges related to obesity. The market for obesity drugs is expected to grow significantly in the coming years due to the rising global prevalence of obesity and related comorbidities, alongside increased medical awareness, regulatory support, and significant therapeutic progress. Grand View Research estimates the market to reach approximately USD 60.5bn by year 2030, corresponding to a CAGR of 22.3% from year 2025, while Coherent Market Insights estimates a market size of approximately USD 82.5bn by year 2032, equivalent to a CAGR of 18% from year 2025.

Current Treatment Methods for Obesity Have Clear Limitations

GLP-1 THERAPIES ASSOCIATED WITH GASTRO-INTESTINAL SIDE EFFECTS

The obesity drug market is currently dominated by Novo Nordisk and Eli Lilly and their GLP-1-based products Wegovy and Zepbound. However, tolerability is a clear limitation, as GLP-1 therapies are frequently associated with gastrointestinal side effects such as nausea, vomiting, diarrhea, and constipation, which negatively affects treatment adherence. According to a year 2025 study, 52% of patients using Wegovy had discontinued treatment one year after initiation, with side effects cited as one of the main reasons. Against this backdrop, the development of new therapies is expected to drive the market going forward by focusing on novel mechanisms of action and treatment profiles that reduce the side effect burden and improve the likelihood of long-term adherence.

Pila Pharma is developing a differentiated alternative through the TRPV1 antagonist XEN-D0501, which does not rely on gut hormone mechanisms and is therefore expected to have a different side effect profile than GLP-1, with primarily transient nerve-related side effects such as mild headache and dizziness, heat sensations, and oral symptoms like discomfort or altered taste. This differentiated side effect profile is expected to provide a competitive advantage in potential commercialization, although upcoming longer-term studies will be important for further insights. It is important to note that Pila Pharma's drug candidate XEN-D0501 has been tested in more than 300 patients with favorable safety data and modest side effects.

[1] *Worldwide trends in diabetes prevalence and treatment from 1990 to 2022: a pooled analysis of 1108 population-representative studies with 141 million participants*

Market Analysis

The Obesity Drug Market Requires New Scalable Alternatives

SIGNIFICANT INVESTMENTS IN ORAL SOLUTIONS

To effectively treat the large volume of patients affected by obesity, oral treatments (tablets) are considered a crucial next step, as they may enable more practical long-term use in daily life and expand adoption beyond today's injection-dominated market. Given this, significant investments are currently being made in the development of oral obesity drugs, expected to provide multiple patient benefits such as convenient administration and greater accessibility for those with injection-related concerns.

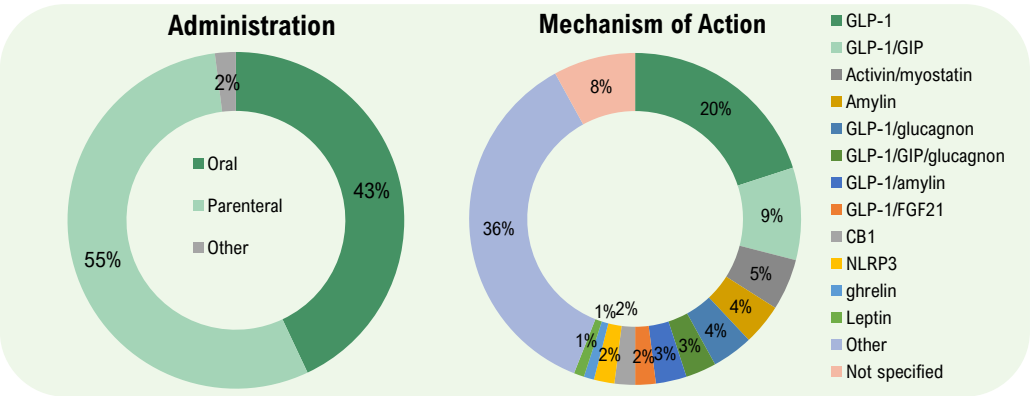
Beyond patient preferences, the shift toward tablets is also driven by scalability and logistics. For peptide-based GLP-1 drugs in tablet form, production challenges remain, as oral administration typically requires far more active substance, and the manufacturing process is demanding due to complex chemical procedures. Pila Pharma's drug candidate XEN-D0501 is a small molecule with a less complex production process, which is expected to allow for easier scale-up. Additionally, the drug has demonstrated good stability, with one study indicating a shelf life of up to five years at temperatures up to 25°C, supporting simplified distribution without cold-chain requirements compared to many injectable alternatives.

High Activity in Obesity Drug Development

THE MARKET IS SHIFTING AWAY FROM GLP-1 DRUGS

Since the first obesity treatments reached the market, development of new therapies has expanded rapidly. A report from IQVIA Analytics published in January year 2026 states that the pipeline of new obesity drugs comprises 193 compounds in clinical development and that year 2026 is expected to represent a breakthrough for oral treatments, driven by anticipated regulatory approvals and launches of tablet-based GLP-1 therapies improving accessibility, adherence, and reducing cold-chain dependency. In December year 2024, the same source reported that 43% of the pipeline targeted oral administration and 55% parenteral routes, while only 20% consisted of GLP-1 therapies, illustrating accelerating efforts to identify improved mechanisms of action, weight-loss quality, scalability, and side-effect profiles.

Drug Development in Obesity Is Shifting Toward Oral, Scalable Solutions



Source: Iqvia Analytics

XEN-D0501 – A Unique Candidate in an Expanding Landscape

USE OF A TRPV1 ANTAGONIST DIFFERENTIATES PILA PHARMA

In the expanding obesity drug landscape, Pila Pharma stands out with its TRPV1 antagonist XEN-D0501. To Analyst Group's knowledge, the Company is the only one developing a drug targeting TRPV1 for metabolic diseases such as type 2 diabetes and obesity. XEN-D0501 differs from most obesity drugs in development by not affecting gut hormones such as GLP-1, GIP, or amylin. Instead, it blocks TRPV1, a receptor involved in inflammatory processes linked to excess body fat. By reducing inflammation and potentially lowering energy intake through perceived inhibition of activity from the nervus vagus, while potentially increasing energy expenditure, the mechanism is expected to support more balanced weight loss focused on fat mass reduction rather than muscle loss, potentially offering higher-quality weight reduction.

Lastly, combination therapies are emerging as a trend in obesity treatment development, where multiple biological mechanisms are addressed simultaneously to achieve better and more durable effects. In this context, Pila Pharma's XEN-D0501, with its differentiated mechanism of action and small molecule-profile, may become a relevant complementary component in combination treatments, provided upcoming pre-clinical and clinical studies confirm its efficacy and safety.

Financial Forecast

Financial History and Basis for Forecasts

Given that Pila Pharma is in the development phase, the Company has a track record of limited revenue and negative cash flows, in line with other clinical-stage biotech companies. Historical costs are primarily related to ongoing operational expenses such as personnel and IP, in addition to costs from previously conducted studies. Pila Pharma is developing the drug candidate XEN-D0501 in three main indications: type 2 diabetes, obesity, and erythromelalgia. The Company has also conducted a small preclinical study in abdominal aortic aneurysm, a cardiovascular disease, where the compound demonstrated reduced aneurysm growth in mice. Due to the early stage of this indication, it has not been included in our forecasts, which are based on the three core indications. Nevertheless, observations from AAA may represent an early signal of potential cardiovascular relevance, likely as secondary effects to the primary obesity program, thereby incrementally strengthening the compound's overall clinical and strategic profile.

Our forecasts are based on the assumption that XEN-D0501 will be out-licensed for further clinical development. To derive a valuation of Pila Pharma's portfolio, Analyst Group has projected potential comercialization for each individual indication, applying indication-specific assumptions for pricing, market share, and Likelihood of Approval (LoA).

Licensing Agreements

Pila Pharma intends to conduct clinical proof-of-concept studies in the coming years across all three indications in order to establish a comprehensive and commercially attractive data package. Within obesity and type 2 diabetes, this is expected to include Phase Ib/IIa studies with three months of treatment to determine the maximum tolerated dose, confirm the safety profile, and generate preliminary data regarding weight reduction. Within erythromelalgia, the Company intends to conduct a smaller clinical study to obtain an initial clinical proof-of-concept in the indication.

Following these studies, and given positive outcomes, we expect Pila Pharma to explore the possibility of out-licensing XEN-D0501 to a partner for further development or alternatively pursuing a full Company sale. In a scenario where no partnership is formed, Pila Pharma may continue development independently, initially through further phase IIb/III studies in type 2 diabetes and obesity, as these are expected to remain the Company's main focus given the large patient population and commercial potential. However, these studies would be highly demanding financially and operationally, meaning Pila Pharma would require additional external funding to proceed.

LICENSING AGREEMENT IS A KEY MILESTONE

Given this, we view a signed licensing agreement with a major pharmaceutical partner as a key value driver for the Company, with the partner expected to fund the remaining clinical development prior to potential market approval. To estimate a potential deal value for a licensing agreement, comparisons have been made both with Swedish biotech companies at a similar clinical stage as Pila Pharma and with deals signed in the relevant indication areas. The table below presents a selection of licensing deals signed by Swedish biotech companies since year 2020, where none of the deals are in the same indication areas as Pila Pharma.

Licensor	Licensee	Year	Type of deal	Upfront (USDm)	Deal value (USDm)	Geography	Royalty rate	Phase
Aqilion	Merck	2023	License deal	12	1,110	Global		Preclinical
Saniona	Jazz Pharmaceuticals	2025	License deal	43	993	Global	Tiered royalties mid-single digits to low double digits	Preclinical
Cantargia	Otsuka	2025	License deal	33	580	Global		Phase I
Affibody	Acelyrin	2021	License deal	25	280	Global	Tiered royalties mid-single digits to low double digits	Phase II
Hansa Biopharma	Sarepta	2020	License deal	10	398	Global	Tiered royalties low double digits	Ongoing Phase II
Irlab therapeutics	Ipsen	2021	License deal	28	363	Global	Tiered royalties mid-single digits to low double digits	Ongoing Phase IIb
Average				**25**	**621**			
Median				**27**	**489**			
Pila Pharma		**2028E**	**License deal**	**22**	**310**	**Global**	**11%**	**Phase IIb-ready**

Financial Forecast

In recent years, multiple licensing agreements have been executed in the fields of type 2 diabetes and obesity, reflecting strong interest in the area among major pharmaceutical companies. Given the limitations of current treatments, particularly in obesity therapies, related to side effects, cost, and scalability, the industry is now heavily investing in new potential solutions, resulting in numerous deals in this space over the past few years. The table below presents a selection of licensing agreements within the sector, including both licensors and drug candidates based on small molecules, which are expected to be more scalable, as well as alternatives to the current GLP-1-related therapies. Agreements involving novel GLP-1 treatments are also included, making these deals relevant reference points for Pila Pharma.

Licensor	Licensee	Year	Type of deal	Upfront (USDm)	Deal value (USDm)	Candidate	Royalty rate	Phase	Indication area
Lexicon Pharmaceuticals	Sanofi	2015	License deal	300	1,400	sotagliflozin	Tiered royalties escalating double digits	Phase II done	T1 & T2 Diabetes
Poxel	Roviant	2018	License deal	35	600	imeglimin	Royalties double digits	Phase II done	T2D
Eccogene	AstraZeneca	2023	License deal	185	1,830	ECC5004	Tiered royalties	Ongoing phase I	T2D and obesity
YaoPharma	Pfizer	2025	License deal	150	1,935	YP05002	Tiered royalties	Ongoing phase I	Obesity
EraCal	Novo Nordisk	2024	License deal	n.a.	255	Unknown	n.a.	Preclinical	Obesity
Septerna	Novo Nordisk	2025	License deal	200	2,200	multiple oral small molecules	n.a.	Preclinical	Diabetes & obesity
Lexicon Pharmaceuticals	Novo Nordisk	2025	License deal	75	1,000	LX9851	Tiered royalties	Phase I-ready	Obesity
Deep Apple therapeutics	Novo Nordisk	2025	License deal	n.a.	812	Non-incretin-based oral drugs	n.a.	n.a.	Obesity
Inversago	Novo Nordisk	2023	Acquisition	n.a.	1,000	INV-202	n.a.	Phase I done	Obesity
Zealand Pharma	Roche	2025	License deal	1 650	5,250	petrelintide	High teens percentage royalties	Phase III-ready	Obesity
Gubra	AbbVie	2025	License deal	350	2,220	GUB014295	Tiered royalties	Phase I	Obesity
Nimbus Therapeutics	Eli Lilly	2026	License deal	55	1,300	Oral candidate in obesity	Tiered royalties	Preklinisk	Obesity
Average				**333**	**1,650**				
Median				**185**	**1,350**				
Pila Pharma		**2028E**	**License deal**	**21.7**	**310**	**XEN-D0501**	**11%**	**Phase IIb-ready**	**T2D, obesity & erythromelalgia**

For Swedish biotech companies, the average value of signed licensing agreements amounts to approximately USD 600m, while relevant deals within obesity and diabetes generally reach higher total deal values, averaging around USD 1.6bn. Valuations in these agreements is expected to have been driven upward by the growing commercial interest in obesity treatments, as these figures exceed historical benchmarks for diabetes-related deals. Furthermore, agreements involving validated mechanisms such as GLP-1 tend to command higher deal values, whereas novel mechanisms like Pila Pharma's TRPV1 antagonist are typically valued more conservatively. However, the GLP-1 space is described as highly competitive, and with a growing number of alternative solutions under development, this dynamic may shift going forward.

USD 310M
ESTIMATED DEAL VALUE

We apply a conservative approach to estimated deal value, assuming a partner agreement of USD 310m is signed in year 2028, following the planned Phase Ib/IIa clinical studies in type 2 diabetes, obesity, and erythromelalgia, where the agreement is expected to encompass all indications on a global basis. We further estimate an initial upfront payment of USD 22m, corresponding to 7% of the deal value, followed by milestone payments linked to clinical and regulatory progress, along with a royalty rate of 11% on future sales. Additionally, we apply a probability of approximately 29% that such an agreement is signed, aligned with our assumed probability of success for the planned phase IIa studies, and we risk-adjust each milestone payment according to the cumulative likelihood of each outcome. We also estimate that the licensing partner would assume all costs for clinical trials, manufacturing, marketing, and sales. The realization of future value will therefore largely depend on the partner's ability to successfully advance the candidate through the remaining development phases to market approval.

11%
ESTIMATED ROYALTY RATE

Relative to comparable agreements involving biotech companies at a similar stage, we maintain a conservative stance, partly based on the expectation that Pila Pharma still will be in an early phase at the time of signing. Given the strong interest in new treatment modalities for obesity, we estimate a deal after phase IIa studies, albeit with a somewhat more conservative valuation. Furthermore, Pila Pharma's patent position may contribute to a lower deal value. The Company employs a so-called late patent strategy, delaying filings in order to gather more data and maximize the period of market exclusivity. Pila Pharma intends to file patent applications for XEN-D0501 across the four currently targeted indications, as well as for the compound's manufacture and formulation. Analyst Group estimates this will occur in year 2026, providing exclusivity until year 2046. However, a potential partner is still expected to place emphasis on the compound patent for XEN-D0501, as it offers the broadest protection and facilitates potential expansion into additional indications, which supports the assumption of a lower deal value.

Financial Forecast

Sales Forecast – Type 2 Diabetes

Prevalence and Addressable Population

In our sales estimates for XEN-D0501, we base assumptions on sales in the EU5 (Germany, France, the United Kingdom, Italy, and Spain) and the US, markets with comparable regulatory frameworks for new drugs. A study[1] on type 2 diabetes prevalence in year 2017 shows rates ranging between 7–9% across these countries, equating to approximately 57 million patients. According to the *Diabetes Atlas*, historical growth in patient numbers has been 3.1% annually in the US and 1.7% in Europe over the past 15 years, leading to an estimated total of 69 million patients in these markets by year 2025. The same source estimates that 20%–35% live with undiagnosed diabetes and therefore are not receiving treatment.

In the treatment of type 2 diabetes, generic small-molecule drugs such as metformin are typically used as first-line therapy. Analyst Group assumes that XEN-D0501 is positioned as an early-stage treatment, either following or as an add-on to metformin. A study[2] indicates that approximately 35% of type 2 diabetes patients fail to reach target outcomes with metformin alone, highlighting the need for additional therapies, where XEN-D0501 may serve as an option upon potential commercialization. Based on the proportion of diagnosed patients for whom metformin is insufficient, the addressable population for Pila Pharma is estimated at approximately 17.9 million patients in the EU5 and US.

17.9 MILLION
PATIENTS IN ADDRESSABLE POPULATION

Pricing and Market Share

For type 2 diabetes, Analyst Group estimates an annual price of USD 2,000 in the US and USD 1,000 in the EU for XEN-D0501. These prices are derived from comparisons with other small-molecule diabetes drugs such as Jardiance and Januvia, priced between USD 5,500–7,500 in the US. GLP-1 treatments like Rybelsus (oral semaglutide), Ozempic, and Mounjaro are priced at USD 11,000–13,000. Given the competitive landscape, a conservative pricing strategy is assumed to enhance competitiveness versus existing therapies. The prices are weighted according to each market's share of the estimated patient population, yielding an average revenue per treatment of USD 1,500, with price growth assumed in line with 2% annual inflation throughout the forecast period.

USD 1.5K
ESTIMATED PRICE PER TREATMENT

Current treatment of type 2 diabetes involves lifestyle interventions and medications such as metformin, GLP-1 analogues, SGLT2 inhibitors, and insulin, often in combination. Despite these options, many patients do not reach treatment goals, while side effects, costs, and administration challenges further limit usage. XEN-D0501 addresses this treatment gap through a novel mechanism that reduces inflammation linked to insulin resistance, with the potential to improve glucose control without the side effects commonly associated with existing therapies, enabling broader usage as a complementary treatment option.

At the same time, the commercial landscape for type 2 diabetes remains highly competitive, with several established therapies. Pila Pharma is expected to compete primarily on two attributes: efficacy and price, with upcoming studies providing further insight into efficacy. Analyst Group therefore applies a conservative market share assumption of 3% of the addressable population at peak sales.

3%
ESTIMATED MARKET SHARE

Expected Timeline and Peak Sales

Analyst Group estimates that Pila Pharma initiates a phase IIa study in 2026, expected to run for approximately one year. Following the study, and given positive data, a partner deal valued at USD 310m is estimated to be signed, after which phase IIb and III studies would be conducted, funded by the partner. Based on study duration assumptions, market approval is estimated to be achieved by year 2032, at which point revenues begin to accrue.

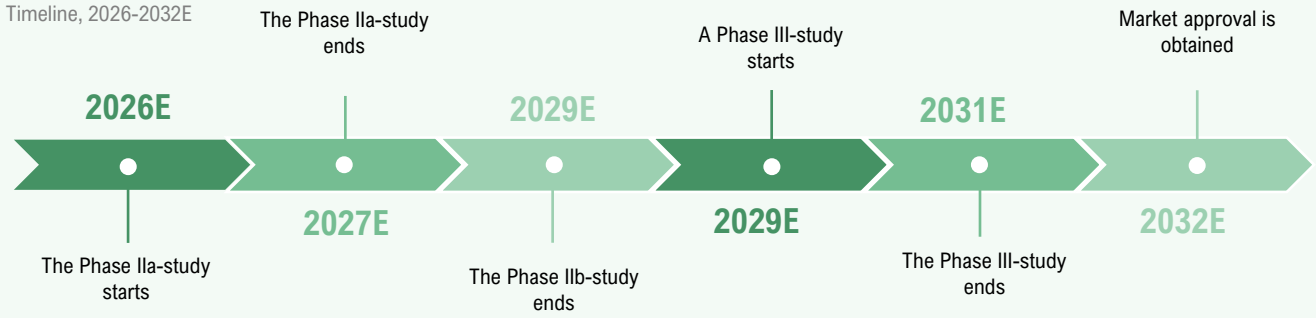
Sales of XEN-D0501 are expected to accelerate following approval, rising from approximately SEK 300m in year 2033 (first full revenue year) to peak sales of around SEK 12bn in year 2039, when the drug reaches its estimated 3% market share. Based on an 11% royalty on sales, this equates to accelerating revenue for Pila Pharma from approximately SEK 32m in year 2033 to approximately SEK 1.4bn in year 2039, with royalty income expected to continue until patent expiry for the indication in year 2046, after which revenues are expected to decline.

[1] *Epidemiology of Type 2 Diabetes – Global Burden of Disease and Forecasted Trends*

[2] *Exploring metformin monotherapy response in Type-2 diabetes: Computational insights through clinical, genomic, and proteomic markers using machine learning algorithms*

Financial Forecast

Overall estimated timeline for XEN-D0501 in type 2 diabetes, given successful studies



Source: Analyst Groups estimates

Sales Forecast – Obesity

Prevalence and Addressable Population

Obesity is a highly prevalent condition, affecting approximately 900 million individuals globally. Data from the World Obesity Observatory show varying prevalence rates by country. In the US, obesity affects roughly 40% of the adult population, while in the EU5, prevalence ranges between 10%-20%, representing a total of approximately 194 million patients across these regions. Morgan Stanley estimates that by year 2035, around 20–25% of individuals living with obesity may receive treatment. Analyst Group applies a 25% assumption, considering the growing recognition of obesity as a disease and the large pipeline of drugs under development. For the rest of the world, approximately 10% of individuals with obesity are expected to receive treatment by that time, compared to just 1% today. We estimate a slightly higher treatment rate in the EU, modeling 15%, which results in a total addressable population of 43.2 million people.

43.2 MILLION
PATIENTS IN ADDRESSABLE POPULATION

Pricing and Market Share

In terms of pricing, we benchmark current treatments, primarily Novo Nordisk's Wegovy and Eli Lilly's Zepbound, which in recent years have fluctuated significantly, from USD 13,000–14,000 annually to lower ranges of USD 4,000–6,000. Novo Nordisk's recently launched oral formulation of Wegovy is priced at USD 1,800–6,000. Given the rapid pace of drug development in the field, competition is expected to be more intense at the time of potential commercialization for Pila Pharma. Price positioning may therefore become a key differentiator for XEN-D0501.

USD 1.05K
ESTIMATED PRICE PER TREATMENT

Analyst Group estimates an annual price of USD 1,300 in the US and USD 800 in the EU5, slightly lower than in the type 2 diabetes indication, reflecting the expected increase in competition. Prices are weighted by market share of the patient population, resulting in an average revenue per treatment of USD 1,050.

Today, obesity treatment is dominated by GLP-1-based drugs, which can offer substantial weight loss but are often limited by gastrointestinal side effects, high costs, and the requirement for long-term injections. These factors, combined with supply constraints, make it difficult to address the vast patient population. XEN-D0501 has the potential to fill this treatment gap with an alternative, non-incretin-based mechanism. As a small, oral molecule, it is expected to be easier to manufacture, distribute, and administer than injection-based therapies, allowing for greater scalability and broader accessibility as a complementary treatment option.

At the same time, hundreds of drugs are in development for obesity, making the competitive landscape at the time of potential launch difficult to predict. However, treatment penetration remains low, supporting strong market growth in the coming years. Analyst Group believes there will be room for multiple therapies on the market to meet the needs of the large patient base. Notably, Pila Pharma is the only company developing an obesity treatment based on a TRPV1 antagonist. Moreover, the pharmaceutical industry is approaching a significant patent expiration within obesity, with several large therapies expected to lose exclusivity over the coming years. Overall, we model a market share of 1.5% of the addressable patient population for XEN-D0501, which we consider a conservative assumption.

[1] *Trends and Disparities in Clinician Diagnosis of Overweight and Obesity*

Financial Forecast

Expected Timeline and Peak Sales

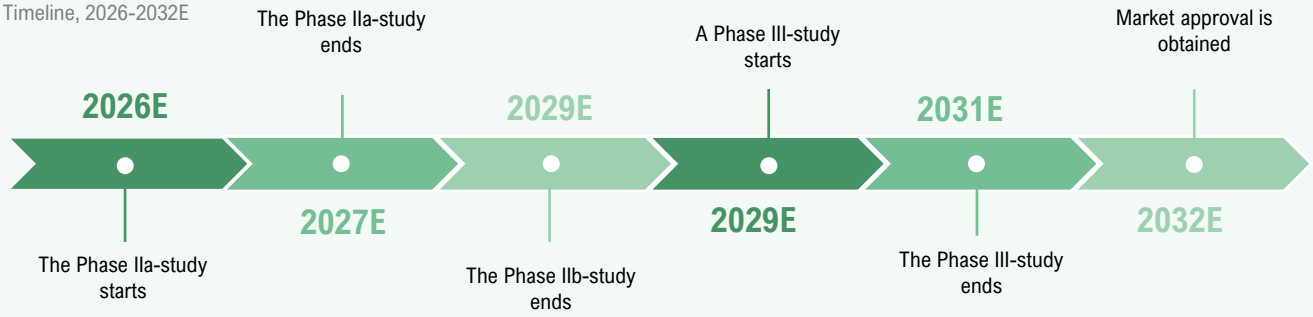
We estimate that Pila Pharma develops the obesity indication in parallel with type 2 diabetes and initiates a phase Ib/IIa study in 2026, expected to last approximately one year. Following the study, and given positive data, a partner deal valued at USD 310m is expected to be signed, after which phase IIb and phase III studies are conducted, with market approval estimated by the end of year 2032, when revenue generation begins.

SEK 10.2BN IN PEAK SALES

Sales of XEN-D0501 in obesity are expected to accelerate following approval and increase from approximately SEK 240m in year 2033, the first full year of revenue, to peak sales of around SEK 10.2bn in year 2039, when the drug reaches an estimated market share of 1.5%. Based on an 11% royalty on sales, this corresponds to rising royalty income for Pila Pharma from approximately SEK 27m in year 2033 to approximately SEK 1.1bn in year 2039. Royalty revenue is expected to continue until patent expiry for the indication in year 2046, after which revenues are projected to decline.

Overall estimated timeline for XEN-D0501 in obesity, given successful studies

Timeline, 2026-2032E



Source: Analyst Groups estimates

Sales Forecast – Erythromelalgia

Prevalence and Addressable Population

Erythromelalgia is a rare disease with low prevalence. A U.S. study reported a prevalence of approximately 10 patients per 100,000 people, while a Swedish study showed a prevalence of 2 patients per 100,000. Analyst Group applies an estimated prevalence of 6 patients per 100,000, of which approximately 80% are expected to seek treatment. Among these, current treatment options are ineffective for around 70%, forming the addressable population for Pila Pharma. Based on these assumptions, the addressable population is estimated at approximately 23,000 patients in the US and EU5.

23,000 ESTIMATED ADDRESSABLE POPULATION

Pricing and Market Share

To determine a reasonable price point in erythromelalgia, Analyst Group has benchmarked existing drugs used in neuropathic pain. These drugs have had launch or early-stage list prices ranging from USD 2,000 to USD 10,000. XEN-D0501 represents a novel therapeutic approach for erythromelalgia by inhibiting TRPV1, targeting an underlying disease mechanism rather than only addressing symptoms, as current treatments do.

Analyst Group assumes a higher price point for XEN-D0501, USD 20,000 per year in the US and USD 8,000 in the EU5, reflecting the absence of effective treatments today and the potential for Pila Pharma's candidate to become the first effective therapy in the market. These prices are weighted by market share across the patient population, resulting in an average revenue per treated patient of USD 14,000 annually. Given this potential, Analyst Group estimates that the drug could reach 50% of the addressable patient group, accounting for the possible entry of competing products ahead of Pila Pharma.

USD 14K ESTIMATED PRICE PER TREATMENT

HOLDS ORPHAN DRUG DESIG-NATION IN THE US

Expected Timeline and Peak Sales

Analyst Group estimates that Pila Pharma initiates a smaller Phase Ib/IIa proof-of-concept study in the beginning of year 2027, lasting approximately one year. A partnership agreement is projected during year 2028, followed by initiation of a registrational Phase II/III study in year 2029. Market approval is modeled for year 2032, with commercialization thereafter. Given the lack of effective treatments today, sales are expected to ramp up faster than in other indications.

Peak sales are estimated at approximately SEK 1.8bn in year 2036, corresponding to annual royalty revenue of approximately SEK 200m at an 11% rate. Revenue generation is projected until patent expiry in year 2046. Orphan drug designation in the United States provides seven years of market exclusivity, including benefits such as tax incentives. Similar designation in the EU is expected following the proof-of-concept study, providing ten years of exclusivity after approval.

Likelihood of Approval (LoA)

A central parameter in evaluating drug candidates in clinical development is the Probability of Success (PoS) in each phase, and the cumulative probability of market approval, referred to as Likelihood of Approval (LoA). LoA is therefore a key input when risk-adjusting future revenue streams and cash flows, as it accounts for the inherent uncertainty in clinical trials. To derive LoA for each of Pila Pharma's indications based on their current phase, we reference data from a study[1] that analyzed PoS across clinical stages from year 2011 to year 2020. For type 2 diabetes, Pila Pharma has already conducted phase IIa studies showing strong safety and efficacy data. The next step is expected to be an additional phase IIa study to explore dosing. For this indication, we estimate a LoA of 15.1%, in line with the referenced study.

For obesity, With respect to obesity, Pila Pharma has conducted preclinical studies without demonstrated weight reduction, where exposure data during Q1-26 are expected to clarify whether adequate drug exposure was achieved. As XEN-D0501 already has extensive safety data, the next step is expected to be a Phase IIa clinical study, corresponding to a LoA of 10.4% in obesity. Pila Pharma is expected to proceed to clinical studies regardless of the exposure outcome; however, confirmed exposure without weight reduction would imply continued development with elevated risk and thus a lower LoA. Erythromelalgia is assessed to be at a similar stage as obesity. Efficacy data are not yet available, but given extensive safety data, the next step is expected to be a small Phase IIa proof-of-concept study, corresponding to an estimated LoA of 10.4%. The table presents the calculations underlying the derived LoA for each indication.

[1]Clinical Development Success Rates and Contributing Factors 2011–2020

PoS	Preclinical → Phase I	Phase I → Phase II	Phase II → Phase III	Phase III → NDA	Approval	LoA
All indications[1]	69.0%	52.0%	28.9%	57.8%	90.6%	5.4%
T2D	100.0%	100.0%	28.9%	57.8%	90.6%	15.1%
Obesity	69.0%	100.0%	28.9%	57.8%	90.6%	10.4%
Erythromelalgia	69.0%	100.0%	28.9%	57.8%	90.6%	10.4%

Revenue Forecast Summary

We estimate that Pila Pharma will enter into a global licensing agreement for XEN-D0501 in 2028, covering all three indications, with an estimated deal value of USD 310m. The structure is assumed to include an upfront payment of approximately USD 22m, along with milestone payments linked to regulatory and commercial progress. To reflect the binary risk of partnership negotiations, we apply a 29% probability of a deal being signed and risk-adjust all milestone payments based on the cumulative likelihood of success. Royalty revenues are estimated at 11% of future sales but are not included in the above-mentioned deal value.

For type 2 diabetes, the addressable population is estimated at approximately 17.9 million patients, of which Pila Pharma is expected to capture a 3% market share, resulting in peak sales of around SEK 12bn. For obesity, the addressable population is estimated at approximately 43.2 million patients, and with an expected market share of 1.5%, peak sales are projected at approximately SEK 10.1bn. For erythromelalgia, the addressable population is estimated at around 23,000 patients, and based on a projected market share of 50%, peak sales are estimated at approximately SEK 1.8bn. Based on an 11% royalty rate, this would result in annual revenues of approximately SEK 2.7bn across all three indications at peak sales. Lastly, all revenue streams are risk-adjusted with a LoA of 15.1% for type 2 diabetes and 10.4% for both obesity and erythromelalgia.

Financial Forecast

Type 2 diabates

17.9m patients
Adressable population

USD 1.5K
Per patient and treatment

3%
Market share (peak)

Obesity

43.2m patients
Adressable population

USD 1.05K
Per patient and treatment

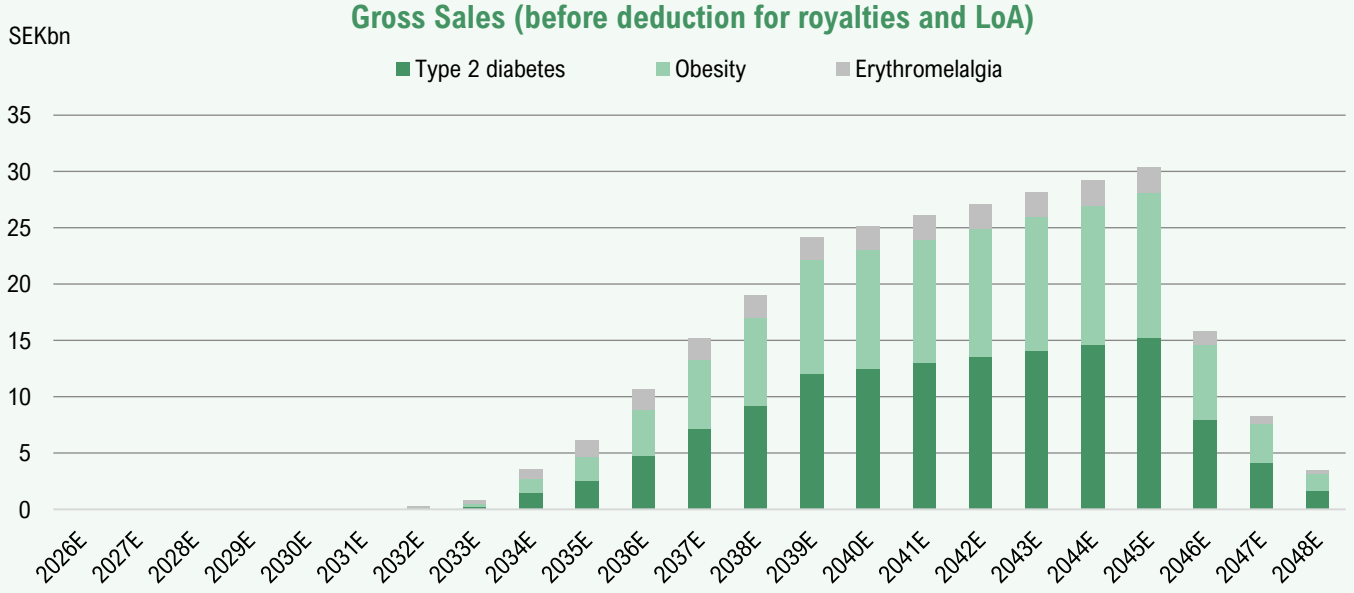
1.5%
Market share (peak)

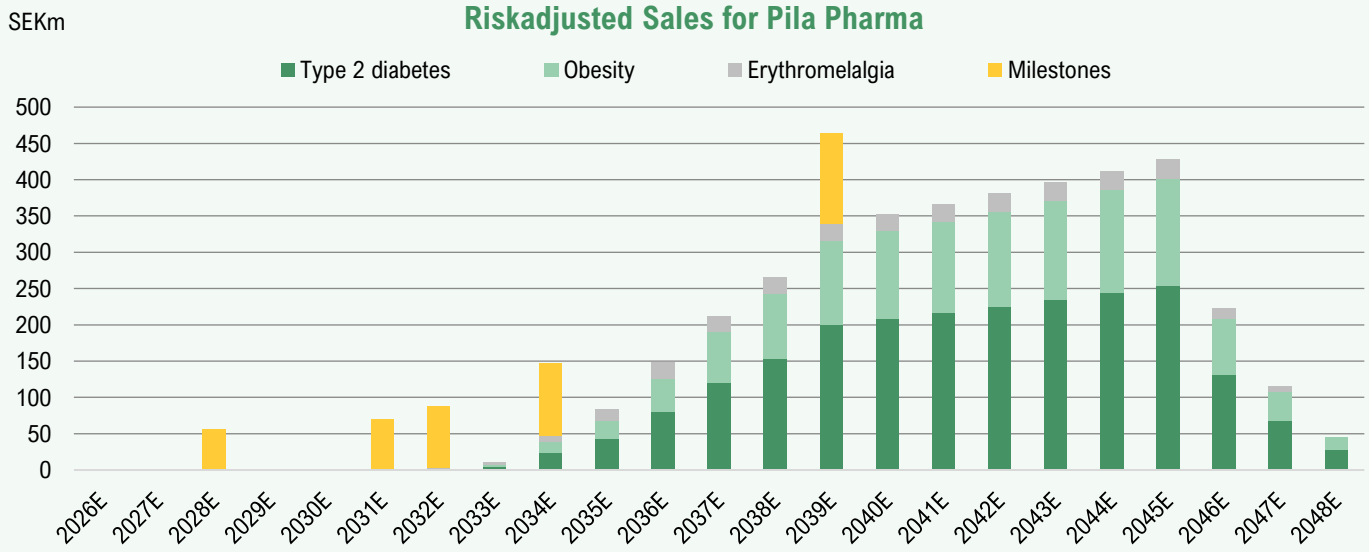
Erythromelalgia

23k patients
Adressable population

USD 14K
Per patient and treatment

50%
Market share (peak)





Financial Forecast

Operating Expenses Forecast

Pila Pharma's operating expenses are expected to consist partly of ongoing costs such as personnel and legal expenses, and partly of costs related to studies being conducted. Over the past few years, expenses have amounted to approximately SEK 7–8m annually, of which the majority is estimated to be fixed costs, projected to remain at SEK 6–7m annually both historically and going forward.

Pila Pharma is expected to accelerate clinical development through parallel Phase Ib/IIa studies in type 2 diabetes and obesity. Analyst Group estimates that costs for the two clinical studies amount to approximately SEK 17m each, corresponding to approximately SEK 340,000 per patient based on an assumption of 50 patients per study. Within erythromelalgia, the Company has initiated preparations for a smaller proof-of-concept study, estimated to cost SEK 2–4m.

LICENSE PARTNER ESTIMATED TO COVER REMAINING DEVELOPMENT COSTS

In the event of a potential licensing agreement, which is estimated to be signed in 2028, Analyst Group assumes that the license partner will bear the costs of continued clinical development. Our projections also assume that the partner will finance future expenses related to manufacturing, marketing, and distribution of XEN-D0501. As a result, Pila Pharma's cost base is expected to gradually decrease after the estimated deal and become negligible in relation to the revenues that may be generated if commercialization is successful.

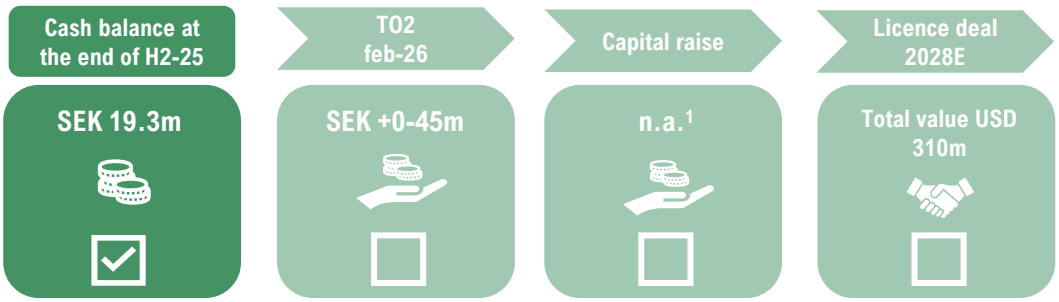
Financial Position

SEK 19.3M CASH POSITION AT THE END OF H2-25

Pila Pharma's cash position amounted to approximately SEK 19.3m at the end of H2-25. The Company is currently a research-focused entity with limited revenue and has historically relied on external capital to finance operations. Liquidity may be strengthened by up to SEK 45m through warrants of series TO2, with a subscription period until February 15 and a subscription price of SEK 1.50 per share. Given the valuation gap relative to the share price at the time of this analysis, proceeds are estimated not to be sufficient to finance continued clinical development across all three indications in line with Analyst Group's estimates. Consequently, additional external capital is assessed to be required to realize the potential of the development portfolio.

Following the near-term clinical studies, a partnership agreement is projected for year 2028, after which the partner is expected to finance further clinical development. In the event that no partnership is signed during year 2028 and Pila Pharma continues development in own operations, additional capital is expected to be required, where external financing is considered the most likely alternative.

Pila Pharma is expected to require additional capital to realize the potential of the drug portfolio and, over time, secure a partnership agreement.



[1]Dependent on the outcome of TO2

Valuation

Valuation: rNPV Model

rNPV: Summary	
Risk-adjusted EV (present)	230.5
Net cash	-22.9
Market cap	253.4
Shares outstanding	44.5
Value per share	**5.7**

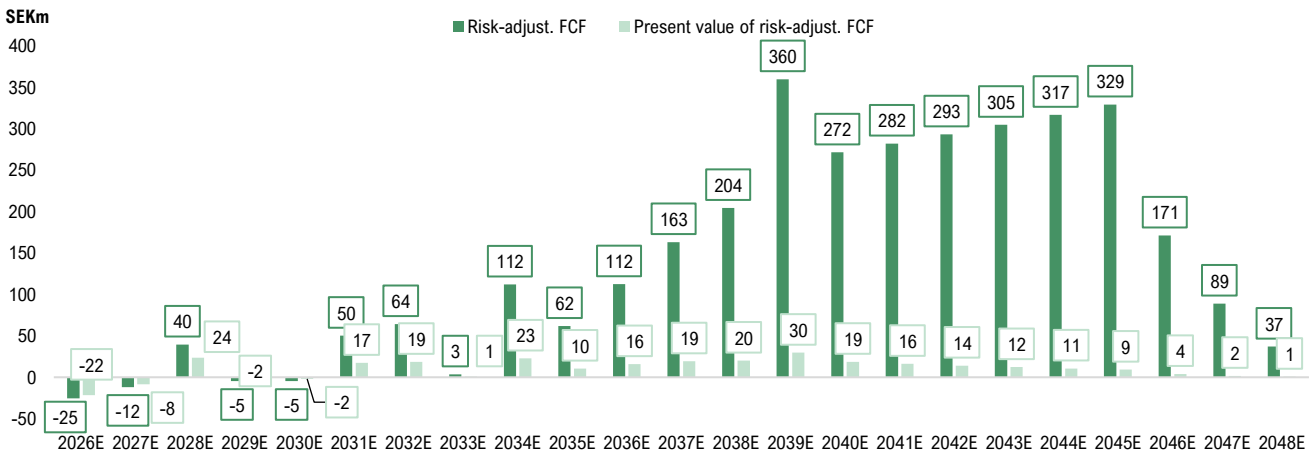
The valuation of Pila Pharma is based on a risk-adjusted DCF model (rNPV), where the model incorporates financial forecasts for XEN-D0501 across three indications: type 2 diabetes, obesity, and erythromelalgia. The model also assumes that a global licensing deal with a total value of USD 310m will be signed in 2028. The estimated cash flows derived from these forecasts are risk-adjusted using a Likelihood of Approval (LoA) depending on the development phase of each indication. In the coming years, Pila Pharma's cost base is expected to be driven by the planned clinical acceleration within the Company's three indications. Following a licensing agreement, the partner is assumed to bear the costs for the remaining clinical development. As a result, Pila Pharma is expected to maintain a relatively low fixed cost base from 2028.

The estimated risk-adjusted cash flows are discounted using a WACC of 19.7%, reflecting the required rate of return and risks in the Company not related to market approval. Compared with the previous analysis, the WACC has been increased (15.1%), attributable to elevated financing risk. In the prior analysis, Pila Pharma was estimated to secure sufficient capital for continued clinical development until a partnership agreement through TO2. However, given the discrepancy between the share price and the TO2 subscription price of SEK 1.50 per share, this is no longer assessed as likely. Additional external capital is therefore considered required. Given uncertainty regarding timing and structure of potential financing, the discount rate has been increased to reflect financing risk rather than modeling a specific transaction. By discounting all risk-adjusted future cash flows, the present value enterprise value amounts to approximately SEK 233m.

Analyst Group nevertheless estimates that Pila Pharma receives capital through TO2, as CEO Gustav H. Gram stated in connection with the H2 report interview that he and Chair Dorte X. Gram intend to subscribe, and certain other shareholders have indicated participation. An 8% subscription rate is therefore assumed. Based on the cash position at the end of year 2025 and proceeds of approximately SEK 3.6m from TO2, net cash is estimated at approximately SEK 22.9m. Including this capital contribution, the number of shares is estimated at approximately 44.5 million. Combined with an enterprise value of approx.-imately SEK 233m and net cash of approximately SEK 22.9m, this corresponds to a potential present value of SEK 5.7 per share.

SEK 5.7
PER SHARE IN A BASE SCENARIO

The timing aspect has a significant impact on the present value of the estimated risk-adjusted free cash flows.
Estimated risk-adjust. FCF and discounted risk-adjust. FCF, Base scenario 2026E-2048E



Source: Analyst Groups estimates

Sensitivity Analysis

Risk-adjusted DCF models rely on numerous assumptions regarding variables far into the future, which can significantly impact the derived per-share value. The table to the right presents a sensitivity analysis illustrating how different levels of royalty rate on future sales, where we as earlier mentioned estimates 11% royalty rate, and our calculated cost of capital of 19.7%, affect the calculated value per share.

WACC \ Royalty Rate	9.0%	10.0%	11.0%	12.0%	13.0%
17.7%	6.1	6.5	7.0	7.5	8.0
18.7%	5.5	5.9	6.3	6.8	7.2
19.7%	4.9	5.3	**5.7**	6.1	6.5
20.7%	4.5	4.8	5.1	5.5	5.8
21.7%	4.1	4.4	4.7	5.0	5.3

Valuation

Valuation: Relative Valuation

To support the valuation of Pila Pharma further, a relative valuation has been carried out by comparing the Company with other biotech firms operating within the same therapeutic areas. While there are differences between the companies regarding mechanism of action, pipeline size, and development phase, the selected peers are all developing drug candidates within obesity and type 2 diabetes. The majority of these are small molecules administered orally and are thus expected to be more scalable at potential commercialization due to simpler production and distribution compared to current therapies. Additionally, the selected peers are focusing on non-GLP-1-based mechanisms, similar to Pila Pharma's candidate XEN-D0501, which may result in a different side effect profile.

Company	List	Lead candidate	No. Of candidates in clinical development	Clinical phase (comparable project)	Market cap (SEKm)
Structure Therapeutics	Nasdaq	Aleniglipron	3	Phase IIb done	45,819
Wave Life Sciences	Nasdaq	WVE-007	4	Phase I done	21,002
Bioage	Nasdaq	BGE-102	1	Phase I	7,397
Fractyl Health	Nasdaq	REVEAL-1	2	n.a.	563
Palantin Technologies	NYSE American	Bremelanotide	4	Phase II done	261
Viking Therapeutics	Nasdaq	VK2735	3	Ongoing Phase II (oral) and Phase III (subcutaneous)	31,007
Average					**17,675**
Median					**14,200**
Pila Pharma	**First North Stockholm**	**XEN-D0501**	**1**	**Phase IIa-ready**	**51**

Compared to its peers, Pila Pharma is significantly smaller in terms of market capitalization. However, there are important differences to consider. Several of the peer companies have multiple drug candidates in development across additional indications, creating a more risk-diversified portfolio and thereby justifying a premium valuation. In addition, several peers have progressed further in clinical development, with a number having reported positive clinical data in obesity. Finally, a U.S. listing generally implies a valuation premium, as companies listed in the United States are often valued at higher levels.

Nevertheless, the large valuation gap highlights the strong investor interest in companies developing scalable, oral therapies for obesity and type 2 diabetes with differentiated mechanisms of action. Several companies with promising clinical data in obesity have been significantly revalued by the market, reflecting interest from large pharmaceutical companies in acquiring or licensing assets with potential to become scalable oral obesity treatments.

STRONG INTEREST IN NEW OBESITY TREATMENTS

While some valuation gap is justified due to differences in pipeline maturity and diversification, Analyst Group considers the current gap too large. The potential of developing a scalable oral obesity treatment is clearly valued highly by the market. Therefore, we believe Pila Pharma is undervalued, and the relative valuation supports our derived value from the rNPV model.

Valuation: Summary

In summary, based on the rNPV model, a present value equity value of approximately SEK 256m is derived, corresponding to SEK 5.7 per share, including a certain capital contribution and dilution from TO2. The relative valuation provides further support for the derived value. Although realization of the value in Pila Pharma's drug portfolio depends on a future license agreement and continued clinical progress, making it inherently binary, we assess that the current market capitalization does not reflect the potential in the Company's research portfolio.

SEK 5.7 PER SHARE IN A BASE SCENARIO

Bull & Bear

Bull Scenario

In a Bull scenario, a potential partner is expected to see greater value in Pila Pharma's development portfolio based on positive phase IIa clinical results in both type 2 diabetes and obesity. Combined with continued strong investment appetite from large pharmaceutical companies within the obesity space, this leads to a higher estimated licensing deal value in 2028, amounting to USD 420m. The licensing agreement is estimated to include an upfront payment of 10% of the total deal value, equivalent to USD 42m, followed by milestone payments linked to clinical and regulatory progress, as well as ongoing royalties on future sales, estimated at 13%.

Furthermore, XEN-D0501 is expected to achieve a higher market share within the addressable population, given its potential advantages over existing treatments, primarily in terms of scalability, safety profile, and the fact that the Company is the only one developing an obesity drug through targeting TRPV1-inhibition. Analyst Group estimates a market share of 2% within the extensive obesity market. For type 2 diabetes, a market share of 4% is assumed, and for erythromelalgia 70%, which reflects the significant unmet medical need in that indication due to the current lack of effective treatments. In terms of pricing, the Bull scenario assumes a higher annual price per patient compared to the Base scenario, USD 1.7K for type 2 diabetes and USD 1.2K for obesity. Based on these assumptions, this is estimated to result in approximately SEK 4.6bn in annual royalty revenues across all three indications at peak sales for Pila Pharma.

SEK 9.6
PER SHARE IN A BULL SCENARIO

The estimated risk-adjusted cash flows are discounted using a WACC of 19.7%, which, among other factors, reflects the financing risk, resulting in a present-value derived enterprise value (EV) of approximately SEK 412m. In a Bull scenario, a 10% subscription rate of warrants of series TO2 at a subscription price of SEK 1.50 per share is assumed. Additional proceeds and dilution are thereby incorporated into the valuation model, resulting in a potential present value per share of SEK 9.6 in the Bull scenario.

Bear Scenario

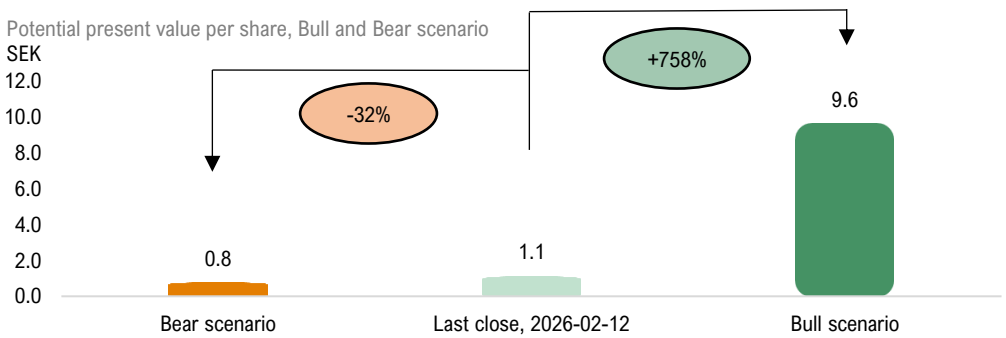
In a Bear scenario, market interest in Pila Pharma's drug candidate is assumed to weaken following completion of the Phase IIa studies in type 2 diabetes and obesity, resulting in no licensing agreement during year 2028. Instead, an agreement is projected for year 2030 after completion of estimated Phase IIb studies. These studies are expected to be highly capital intensive and require substantial funding, which may prove challenging in a continued weak investment climate for small, unprofitable biotech companies, notwithstanding the oversubscribed rights issue completed during summer year 2025.

The licensing agreement projected for year 2030 is estimated at a lower total value of USD 110m, including an upfront payment of USD 7.7m. A prolonged process is expected to weaken Pila Pharma's negotiating position due to a strained financial position and strengthened competitive positioning by peers, resulting in lower deal value and reduced royalties of 9%. In addition, lower achieved market share and pricing across all indications are assumed, reflecting the risk that competing candidates reach the market earlier and partly address current treatment limitations targeted by XEN-D0501.

SEK 0.8
PER SHARE IN A BEAR SCENARIO

Under these assumptions, a potential present value per share of SEK 0.8 is derived in the Bear scenario through the risk-adjusted DCF model.

Illustration of potential valuation in a Bull and Bear scenario.



Source: Analyst Groups valuation

Management & Board

Gustav Hanghøj Gram, CEO

Gustav Hanghøj Gram has been CEO of Pila Pharma since 2024 and previously held several positions within the Company in business administration and finance since 2016. He holds a degree from the University of Copenhagen with a focus on business administration and international relations as well as experience from exchange studies at the Federal University of Minas Gerais in Brazil. Gustav has previously served at the Danish Consulate in São Paulo with market analysis.

Shareholding: Gustav owns 207,484 shares (0.5%) in Pila.

Hampus Darell, CFO

Hampus Darrell is part-time Chief Financial Officer for Pila Pharma since 2024, hired in via Aspia. He is a Certified Public Accountant with a Master of Science in Business and Economics from Lund University and has extensive experience in financial advisory and accounting services across several industries. Hampus has previously served as an auditor at KPMG, held various financial positions within the energy group E.ON, and was CFO at Setterwalls Advokatbyrå Malmö between 2019 and 2024. He is currently Office Leader at Aspia in Malmö and possesses deep expertise in controlling and financial management for both entrepreneur-led companies and large industrial corporations.

Shareholding: Hampus owns 0 shares in Pila.

Dorte X. Gram, Chairman & CSO

Dorte X. Gram is the founder of Pila Pharma and has been Chairman of the Board since 2014, having previously served as CEO of the Company between 2014 and 2024. She is a Doctor of Veterinary Medicine and holds a PhD with extensive experience from the life science industry, including over ten years in research and development at Novo Nordisk A/S. Dorte is the inventor behind the principle of treating diabetes and obesity with TRPV1 antagonists and has authored numerous scientific publications and patents within the field. She is currently Chairman of the Board of Gram Equity Invest AB as well as owner of Xenia Pharma ApS and Bara Gamla Skola Islandshästar.

Shareholding: Dorte owns 5,969,303 shares (14.2%) in Pila.

Richard Busellato, Director of the Board

Richard Busellato is a Director of the Board of Pila Pharma and possesses extensive experience from the financial sector and capital markets. He studied macroeconomics and philosophy at Stockholm University and has over 30 years of experience in portfolio management at international financial institutions and hedge funds. Richard has previously held leadership positions at Stora, Moore Capital, Millennium Capital Partners, and LindenGrove Capital, and has served as a Director at Bank of America. He is currently a Senior Advisor at Horizon Asset and a co-founder of the sustainability initiative Rethinking Choices.

Shareholding: Richard owns 79,957 shares (0.2%) in Pila.

Management & Board

Julie Waras Brogren, Director of the Board

Julie Waras Brogren has been a Director of the Board of Pila Pharma since 2024. She holds a Master of Science in International Business Administration from Copenhagen Business School and has over 20 years of experience in strategic development and commercialization within the life science sector. Julie has previously held leadership positions at Novo Nordisk, served as CEO of the medtech company BresoTEC, and worked as a consultant at Accenture. She is currently Deputy CEO of Ascelia Pharma AB and a Director of the Board of Implexion Pharma AB as well as a board representative in BOYDSense (EIB).

Shareholding: Julie owns 105,507 shares (0.3%) in Pila.

Lasse Richter Petersen, Director of the Board

Lasse Richter Petersen has been a Director of the Board of Pila Pharma since 2024. He holds a Master of Science in Business Administration and Strategy from Copenhagen Business School and possesses extensive experience in global strategy development and organizational design within the pharmaceutical industry. Lasse has previously held several leadership positions at Eli Lilly and Sanofi, including VP for Global Commercial Excellence, and has been responsible for product launches within the diabetes and cardiovascular markets. He is currently active within Ventac Partners, is a co-founder of Cenexum Technologies, and serves as Chairman of the Board and CEO of CT 2024 ApS.

Shareholding: Lasse owns 94,351 shares (0.2%) in Pila.

Appendix

Base scenario, income estimates	2026E	2027E	2028E	2029E	2030E	2031E	2032E	2033E	2034E	2035E	2036E	2037E	2038E	2039E	2040E	2041E	2042E	2043E	2044E	2045E	2046E	2047E	2048E
Type 2 diabetes																							
Prevalence (thousands)	17,920	18,278	18,644	19,017	19,397	19,785	20,181	20,585	20,996	21,416	21,844	22,281	22,727	23,182	23,645	24,118	24,600	25,092	25,594	26,106	26,628	27,161	27,704
Achieved market share	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.5%	0.8%	1.4%	2.0%	2.4%	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%	1.5%	0.8%	0.3%
Number of treated patients (thousands)	0.0	0.0	0.0	0.0	0.0	0.0	6.1	18.5	94.5	160.6	294.9	434.5	545.4	695.4	709.4	723.5	738.0	752.8	767.8	783.2	399.4	203.7	83.1
Price per treatment (SEKk)	13	14	14	14	14	15	15	15	16	16	16	17	17	17	18	18	18	19	19	19	20	20	21
Gross revenue (SEKm)	0	0	0	0	0	0	91	285	1,480	2,567	4,806	7,223	9,249	12,029	12,514	13,020	13,546	14,093	14,663	15,255	7,936	4,128	1,718
Royalties (SEKm)	0	0	0	0	0	0	10	31	163	282	529	795	1,017	1,323	1,377	1,432	1,490	1,550	1,613	1,678	873	454	189
LoA (%)	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%
Risk-adjust. Net revenue (MSEK)	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**1.5**	**4.7**	**24.6**	**42.7**	**80.0**	**120.2**	**154.0**	**200.2**	**208.3**	**216.8**	**225.5**	**234.6**	**244.1**	**254.0**	**132.1**	**68.7**	**28.6**
Obesity																							
Prevalence (thousands)	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	62	63	64	65	67
Achieved market share	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.2%	0.4%	0.7%	1.0%	1.2%	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	0.8%	0.4%	0.2%
Number of treated patients (thousands)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.2	0.4	0.5	0.7	0.8	0.9	0.9	0.9	0.9	0.9	0.9	0.5	0.2	0.1
Price per treatment (SEKk)	9	10	10	10	10	10	11	11	11	11	11	12	12	12	12	13	13	13	13	14	14	14	14
Gross revenue (SEKm)	0	0	0	0	0	0	77	240	1,247	2,162	4,050	6,086	7,793	10,134	10,544	10,970	11,413	11,874	12,354	12,853	6,686	3,478	1,447
Royalties (SEKm)	0	0	0	0	0	0	8	26	137	238	445	669	857	1,115	1,160	1,207	1,255	1,306	1,359	1,414	735	383	159
LoA (%)	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
Risk-adjust. Net revenue (MSEK)	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.9**	**2.8**	**14.3**	**24.8**	**46.5**	**69.9**	**89.5**	**116.4**	**121.1**	**126.0**	**131.1**	**136.4**	**141.9**	**147.6**	**76.8**	**40.0**	**16.6**
Erythromelalgia																							
Prevalence (thousands)	23	23	23	23	23	23	23	24	24	24	24	24	24	24	24	25	25	25	25	25	25	25	25
Achieved market share	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	2.5%	7.5%	22.5%	40.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	25.0%	12.5%	5.0%
Number of treated patients (thousands)	0.0	0.0	0.0	0.0	0.0	0.0	0.6	1.8	5.3	9.5	12.0	12.0	12.1	12.2	12.2	12.3	12.3	12.4	12.5	12.5	6.3	3.2	1.3
Price per treatment (SEKk)	125	127	130	132	135	138	141	143	146	149	152	155	158	162	165	168	171	175	178	182	186	189	193
Gross revenue (SEKm)	0	0	0	0	0	0	83	254	781	1,423	1,823	1,869	1,916	1,964	2,013	2,064	2,116	2,169	2,223	2,279	1,168	599	245
Royalties (SEKm)	0	0	0	0	0	0	9	28	86	157	201	206	211	216	221	227	233	239	245	251	128	66	27
LoA (%)	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
Risk-adjust. Net revenue (MSEK)	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.9**	**2.9**	**9.0**	**16.3**	**20.9**	**21.5**	**22.0**	**22.6**	**23.1**	**23.7**	**24.3**	**24.9**	**25.5**	**26.2**	**13.4**	**6.9**	**2.8**
Licensavtal																							
Risk-adjusted upfront/milestones-payments (SEKm)	0.0	0.0	55.8	0.0	0.0	69.1	83.5	0.0	99.2	0.0	0.0	0.0	0.0	124.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total risk-adjust. Net revenue (SEKm)	**0.0**	**0.0**	**55.8**	**0.0**	**0.0**	**69.1**	**86.9**	**10.4**	**147.1**	**83.9**	**147.5**	**211.6**	**265.5**	**463.6**	**352.6**	**366.5**	**380.9**	**395.9**	**411.5**	**427.8**	**222.3**	**115.6**	**48.0**

Appendix

Bull scenario, income estimates	2026E	2027E	2028E	2029E	2030E	2031E	2032E	2033E	2034E	2035E	2036E	2037E	2038E	2039E	2040E	2041E	2042E	2043E	2044E	2045E	2046E	2047E	2048E
Type 2 diabetes																							
Prevalence (thousands)	17,920	18,278	18,644	19,017	19,397	19,785	20,181	20,585	20,996	21,416	21,844	22,281	22,727	23,182	23,645	24,118	24,600	25,092	25,594	26,106	26,628	27,161	27,704
Achieved market share	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.6%	1.0%	1.8%	2.6%	3.2%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	2.0%	1.0%	0.4%
Number of treated patients (thousands)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	24.7	126.0	214.2	393.2	579.3	727.3	927.3	945.8	964.7	984.0	1003.7	1023.8	1044.2	532.6	271.6	110.8
Price per treatment (SEKk)	15	15	15	16	16	16	17	17	17	18	18	18	19	19	19	20	20	21	21	21	22	22	23
Gross revenue (SEKm)	0	0	0	0	0	0	0	417	2,171	3,764	7,049	10,594	13,565	17,642	18,355	19,096	19,868	20,670	21,505	22,374	11,639	6,055	2,520
Royalties (SEKm)	0	0	0	0	0	0	0	54	282	489	916	1,377	1,764	2,293	2,386	2,482	2,583	2,687	2,796	2,909	1,513	787	328
LoA (%)	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%
Risk-adjust. Net revenue (MSEK)	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**8.2**	**42.7**	**74.1**	**138.7**	**208.4**	**266.9**	**347.1**	**361.1**	**375.7**	**390.9**	**406.7**	**423.1**	**440.2**	**229.0**	**119.1**	**49.6**
Obesity																							
Prevalence (thousands)	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	62	63	64	65	67
Achieved market share	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.3%	0.5%	0.9%	1.3%	1.6%	2.0%	2.0%	2.0%	2.0%	2.0%	2.0%	2.0%	1.0%	0.5%	0.2%
Number of treated patients (thousands)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	0.3	0.5	0.7	0.9	1.1	1.1	1.2	1.2	1.2	1.2	1.3	0.6	0.3	0.1
Price per treatment (SEKk)	10	10	11	11	11	11	12	12	12	12	13	13	13	13	14	14	14	14	15	15	15	16	16
Gross revenue (SEKm)	0	0	0	0	0	0	0	352	1,829	3,172	5,939	8,926	11,429	14,864	15,464	16,089	16,739	17,415	18,119	18,851	9,806	5,101	2,123
Royalties (SEKm)	0	0	0	0	0	0	0	46	238	412	772	1,160	1,486	1,932	2,010	2,092	2,176	2,264	2,355	2,451	1,275	663	276
LoA (%)	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
Risk-adjust. Net revenue (MSEK)	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**4.8**	**24.8**	**43.1**	**80.6**	**121.2**	**155.2**	**201.8**	**209.9**	**218.4**	**227.2**	**236.4**	**246.0**	**255.9**	**133.1**	**69.3**	**28.8**
Erythromelalgia																							
Prevalence (thousands)	23	23	23	23	23	23	23	24	24	24	24	24	24	24	24	25	25	25	25	25	25	25	25
Achieved market share	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	10.5%	31.5%	56.0%	70.0%	70.0%	70.0%	70.0%	70.0%	70.0%	70.0%	70.0%	70.0%	35.0%	17.5%	7.0%
Number of treated patients (thousands)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.5	7.5	13.4	16.9	16.9	17.0	17.1	17.2	17.3	17.4	17.5	17.5	8.8	4.4	1.8
Price per treatment (SEKk)	137	140	143	146	149	152	155	158	161	164	167	171	174	178	181	185	189	192	196	200	204	208	212
Gross revenue (SEKm)	0	0	0	0	0	0	0	0	401	1,233	2,246	2,878	2,950	3,024	3,100	3,178	3,258	3,340	3,424	3,510	1,799	922	378
Royalties (SEKm)	0	0	0	0	0	0	0	0	52	160	292	374	384	393	403	413	424	434	445	456	234	120	49
LoA (%)	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
Risk-adjust. Net revenue (MSEK)	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**5.4**	**16.7**	**30.5**	**39.1**	**40.1**	**41.1**	**42.1**	**43.1**	**44.2**	**45.3**	**46.5**	**47.6**	**24.4**	**12.5**	**5.1**
Licensavtal																							
Risk-adjusted upfront/milestones-payments (SEKm)	0.0	0.0	108.0	0.0	0.0	93.7	113.1	0.0	134.4	0.0	0.0	0.0	0.0	153.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total risk-adjust. Net revenue (SEKm)	**0.0**	**0.0**	**108.0**	**0.0**	**0.0**	**93.7**	**113.1**	**13.0**	**207.3**	**133.8**	**249.8**	**368.7**	**462.1**	**743.1**	**613.1**	**637.3**	**662.3**	**688.4**	**715.5**	**743.7**	**386.5**	**200.9**	**83.5**

Appendix

Bear scenario, income estimates	2026E	2027E	2028E	2029E	2030E	2031E	2032E	2033E	2034E	2035E	2036E	2037E	2038E	2039E	2040E	2041E	2042E	2043E	2044E	2045E	2046E	2047E	2048E
Type 2 diabetes																							
Prevalence (thousands)	17,920	18,099	18,280	18,463	18,648	18,834	19,023	19,213	19,405	19,599	19,795	19,993	20,193	20,395	20,599	20,805	21,013	21,223	21,435	21,649	21,866	22,085	22,305
Achieved market share	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.3%	0.5%	0.9%	1.3%	1.6%	2.0%	2.0%	2.0%	2.0%	2.0%	2.0%	2.0%	1.0%	0.5%	0.2%
Number of treated patients (thousands)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	11.5	58.2	98.0	178.2	259.9	323.1	407.9	412.0	416.1	420.3	424.5	428.7	433.0	218.7	110.4	44.6
Price per treatment (SEKk)	11	11	11	11	12	12	12	12	13	13	13	13	14	14	14	14	15	15	15	16	16	16	17
Gross revenue (SEKm)	0	0	0	0	0	0	0	142	730	1,253	2,323	3,457	4,383	5,644	5,814	5,990	6,171	6,357	6,549	6,747	3,475	1,790	738
Royalties (SEKm)	0	0	0	0	0	0	0	13	66	113	209	311	394	508	523	539	555	572	589	607	313	161	66
LoA (%)	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%
Risk-adjust. Net revenue (MSEK)	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**1.9**	**9.9**	**17.1**	**31.6**	**47.1**	**59.7**	**76.9**	**79.2**	**81.6**	**84.1**	**86.6**	**89.2**	**91.9**	**47.3**	**24.4**	**10.0**
Obesity																							
Prevalence (thousands)	43	44	44	44	45	45	46	46	47	47	48	48	49	49	50	50	51	51	52	52	53	53	54
Achieved market share	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.2%	0.3%	0.4%	0.5%	0.5%	0.5%	0.5%	0.5%	0.5%	0.5%	0.3%	0.1%	0.1%
Number of treated patients (thousands)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.1	0.2	0.2	0.2	0.2	0.3	0.3	0.3	0.3	0.3	0.1	0.1	0.0
Price per treatment (SEKk)	7	8	8	8	8	8	8	9	9	9	9	9	9	10	10	10	10	10	11	11	11	11	12
Gross revenue (SEKm)	0	0	0	0	0	0	0	60	307	528	979	1,456	1,846	2,378	2,449	2,523	2,600	2,678	2,759	2,842	1,464	754	311
Royalties (SEKm)	0	0	0	0	0	0	0	5	28	47	88	131	166	214	220	227	234	241	248	256	132	68	28
LoA (%)	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
Risk-adjust. Net revenue (MSEK)	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.6**	**2.9**	**5.0**	**9.2**	**13.7**	**17.4**	**22.3**	**23.0**	**23.7**	**24.4**	**25.2**	**25.9**	**26.7**	**13.8**	**7.1**	**2.9**
Erythromelalgia																							
Prevalence (thousands)	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	24	24	24	24	24	24	24
Achieved market share	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.0%	3.0%	9.0%	16.0%	20.0%	20.0%	20.0%	20.0%	20.0%	20.0%	20.0%	20.0%	20.0%	20.0%	10.0%	5.0%	2.0%
Number of treated patients (thousands)	0.0	0.0	0.0	0.0	0.0	0.0	0.2	0.7	2.1	3.7	4.7	4.7	4.7	4.7	4.7	4.7	4.7	4.7	4.7	4.7	2.4	1.2	0.5
Price per treatment (SEKk)	94	96	97	99	101	103	105	108	110	112	114	116	119	121	124	126	129	131	134	136	139	142	145
Gross revenue (SEKm)	0	0	0	0	0	0	24	75	229	416	531	543	555	567	579	592	605	618	632	646	330	169	69
Royalties (SEKm)	0	0	0	0	0	0	2	7	21	37	48	49	50	51	52	53	54	56	57	58	30	15	6
LoA (%)	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
Risk-adjust. Net revenue (MSEK)	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.0**	**0.2**	**0.7**	**2.1**	**3.9**	**5.0**	**5.1**	**5.2**	**5.3**	**5.4**	**5.6**	**5.7**	**5.8**	**5.9**	**6.1**	**3.1**	**1.6**	**0.6**
Licensavtal																							
Risk-adjusted upfront/milestones-payments (SEKm)	0.0	0.0	0.0	0.0	19.8	0.0	0.0	24.5	29.6	0.0	35.2	0.0	0.0	0.0	0.0	44.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total risk-adjust. Net revenue (SEKm)	**0.0**	**0.0**	**0.0**	**0.0**	**19.8**	**0.0**	**0.2**	**27.7**	**44.6**	**25.9**	**81.0**	**65.9**	**82.3**	**104.5**	**107.7**	**155.0**	**114.2**	**117.6**	**121.1**	**124.7**	**64.2**	**33.1**	**13.6**

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