Investor & Analyst presentation

May 2018

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Certain assumptions made by Lundbeck are required by Danish Securities Law for full disclosure of material corporate information. Some assumptions, including assumptions relating to sales associated with products that are prescribed for unapproved uses, are made taking into account past performances of other similar drugs for similar disease states or past performance of the same drug in other regions where the products are currently marketed. It is important to note that although physicians may, as part of their freedom to practice medicine in the US, prescribe approved drugs for any use they deem appropriate, including unapproved uses, at Lundbeck, promotion of unapproved uses is strictly prohibited.

Lundbeck in brief

DISEASE AREAS

50m patients

Alzheimer's disease

6m patients

Parkinson's disease

300m patients

Mood disorder

21m patients

Psychotic disorders

~$40bn

KEY PRODUCTS

~$1.5bn

Northera

Abilify Maintena

Brintellix

Trintellix

Onfi

REXULTI

GLOBAL PRESENCE

We are headquartered in Denmark and present in 55 countries

55

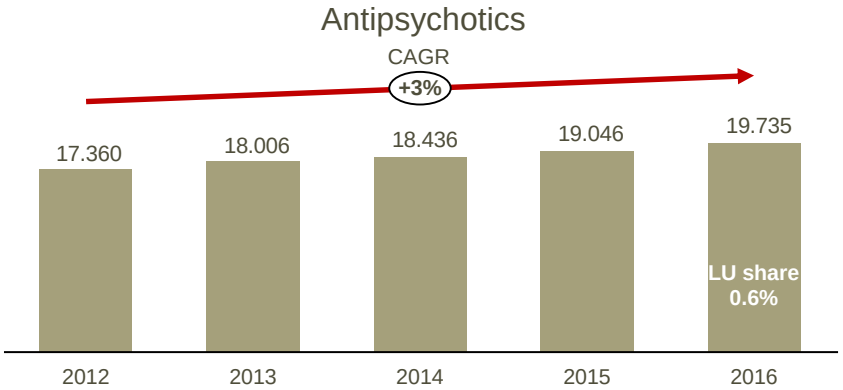
REVENUE

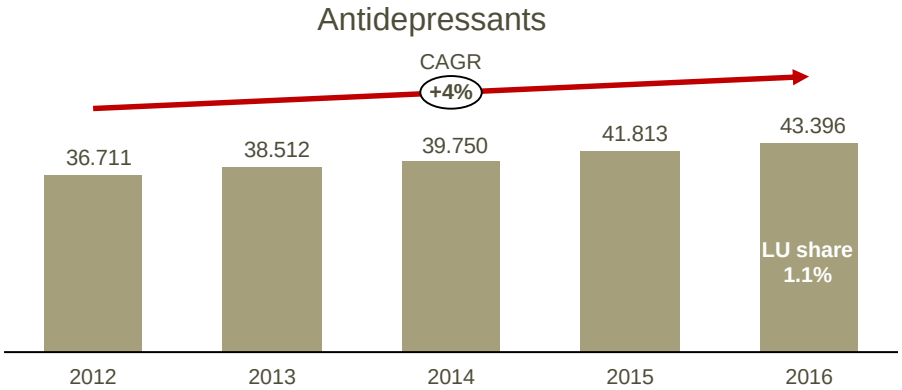
~60% of our revenue is generated in North America

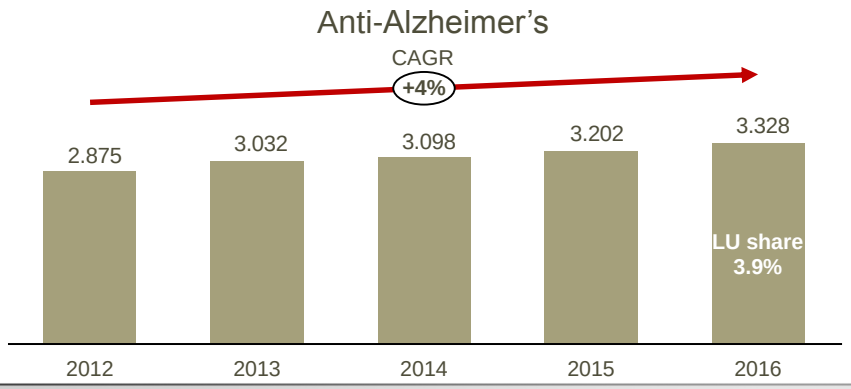
~60%

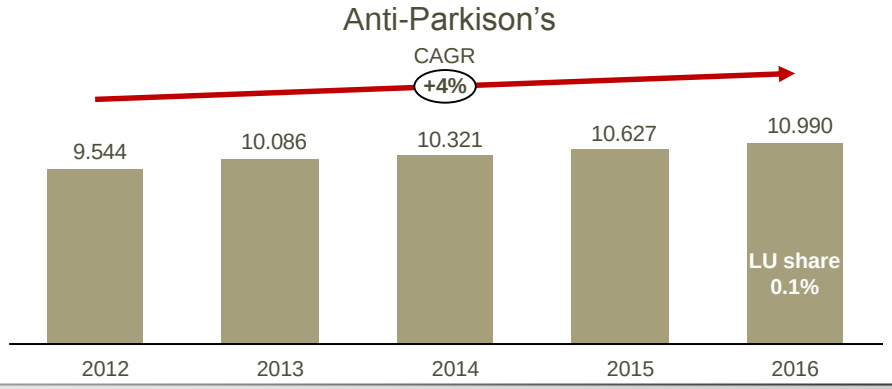

Our strategy for a
FOCUSED LUNDBECK
sets the direction
for our future success
Four diseases
Independent drug development and commercialization
Profitable growth

Volume growth in our four focus disease areas









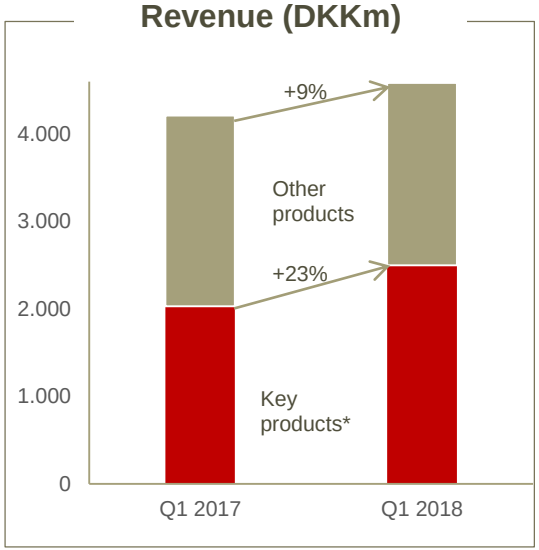
Source: IMS Health Analytics Link 2016 (Audited sales). Values are in standard units. Lundbeck share represents Lundbeck sales only

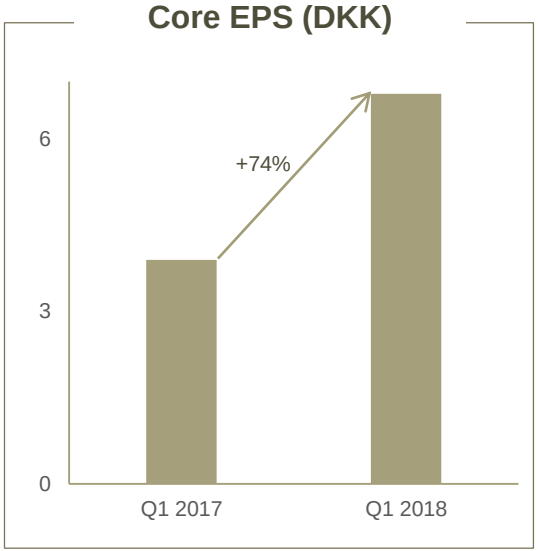
Four focus disease areas that represent a USD ~40bn opportunity

Source: IMS Health Analytics Link 2016 (Audited sales)

Strong financial performance in the first quarter of 2018

- **Revenue:** +9% (14% in L.C.) to DKK 4.6 billion
- **Hedging:** contributed DKK 182 million in the quarter
- **Key products*:** +23% to DKK 2.5 billion representing 55% of revenue
- **EBIT:** increased 64% to DKK 1.7 billion. EBIT margin significantly improved to 36.1% positively impacted by hedging gains
- **EPS:** up 103% to DKK 6.03



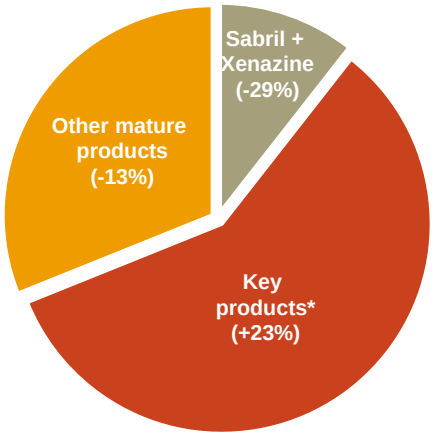


*) *Abilify Maintena, Brintellix/Trintellix, Northera, Onfi and Rexulti*

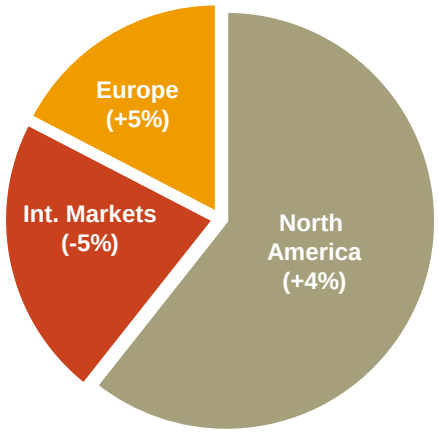
Solid revenue growth of 9% to DKK 4.6 billion in Q1 2018 – in local currencies growth reached 14%

- **Key products*** continue the strong growth momentum
- **Sabril** and **Xenazine** are down 29% combined following generic erosion
- Growth in all regions in local currencies
- Both North America and International Markets see increased currency headwind
- Largest markets are the U.S., Canada, China, France and Japan

Revenue distribution**
(product categories)



Revenue distribution**
(regional split)

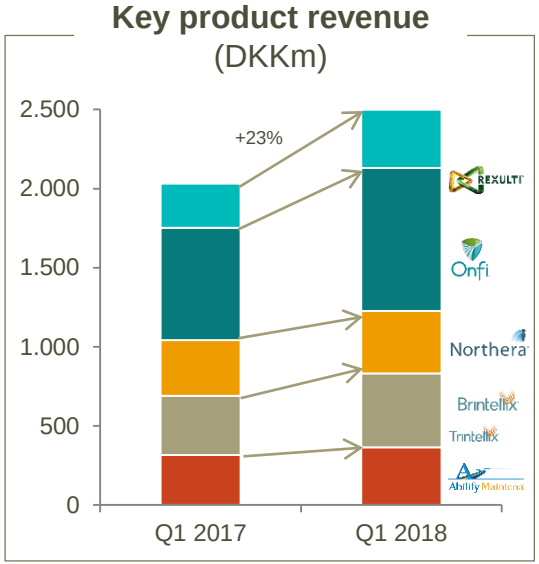


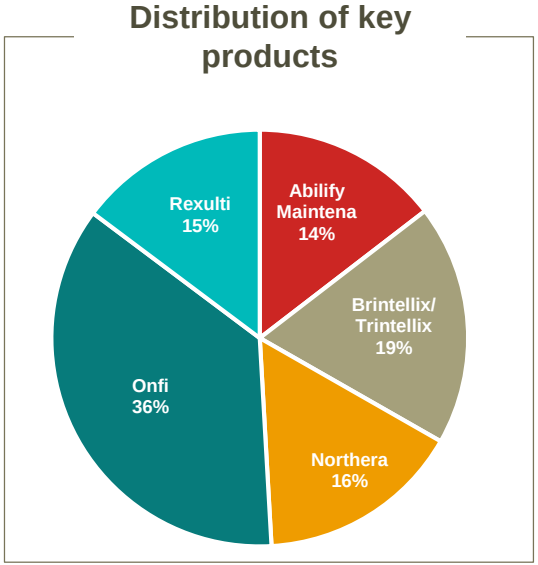
**) Abilify Maintena, Brintellix/Trintellix, Northera, Onfi and Rexulti*

***) Excluding Other revenue and effects from hedging*

Key products grew by DKK 467 million or 23% in Q1 2018 – in local currencies growth reached 39%

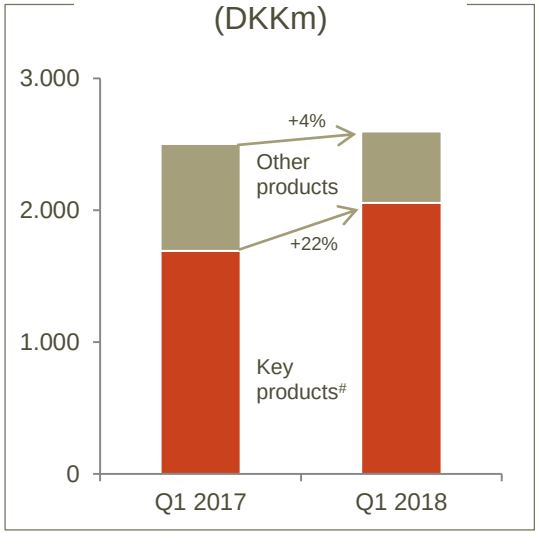
- Reached DKK 2.5 billion – up from DKK 2.0 billion in Q1 2017
- **Abilify Maintena** – up 15% to DKK 364 million
- **Brintellix/Trintellix** – up 25% to DKK 467 million
- **Northera** – up 13% to DKK 396 million
- **Onfi** – up 27% to DKK 903 million
- **Rexulti** – up 32% to DKK 369 million



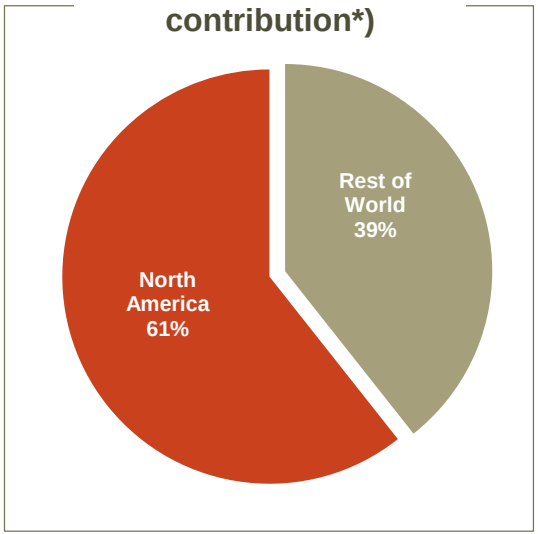


North America grew 4% driven by Northera, Onfi and Rexulti – currency headwind had significant negative impact

- North America grew 4% (19% in L.C.) to DKK 2,598 million in Q1 2018
- Key products[#] grew 22% and constitute 79% of revenue in Q1 2018
- North America is expected to continue growing in local currencies despite LOE



[#]) *Abilify Maintena, Northera, Onfi, Rexulti and Trintellix*



*) *Excluding Other revenue and effects from hedging*

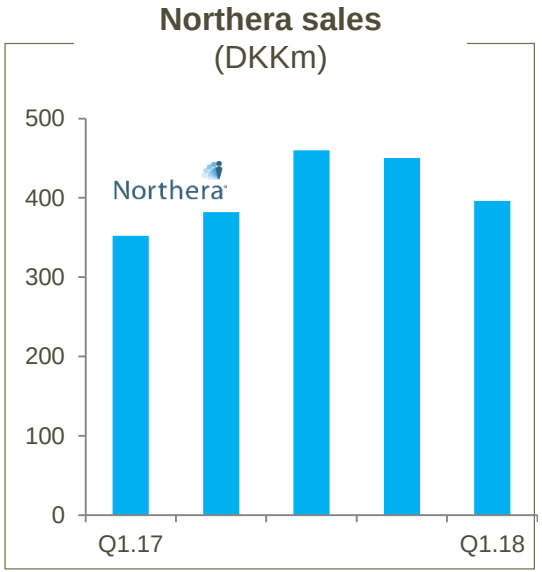
U.S. neurology products, Northera and Onfi, continue to show solid growth in local currency

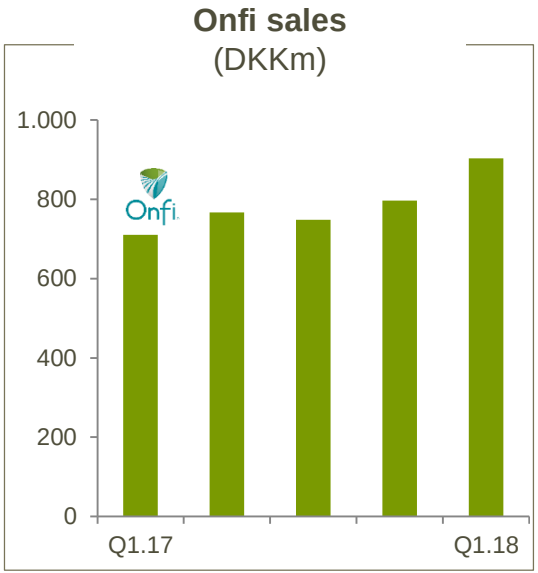
Northera

- Up 13% (29% in L.C.) to DKK 396 million in Q1 2018
- Northera impacted by seasonal swings in demand
- Expected continued growth

Onfi

- Up 27% (46% in L.C.) to DKK 903 million in Q1 2018
- Expected to grow until generic clobazam is introduced

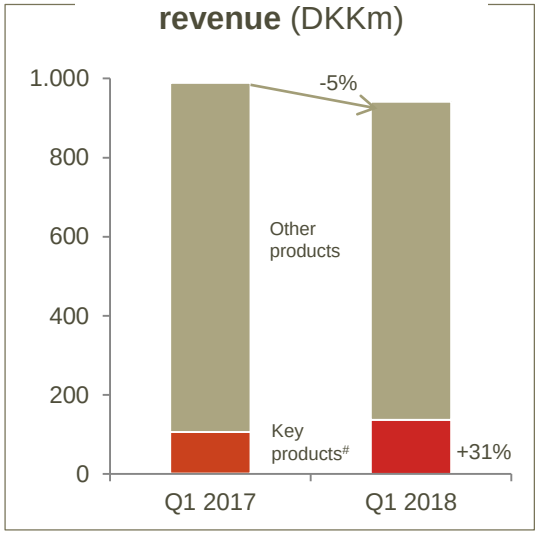




International Markets declined 5% – 5% growth in local currencies

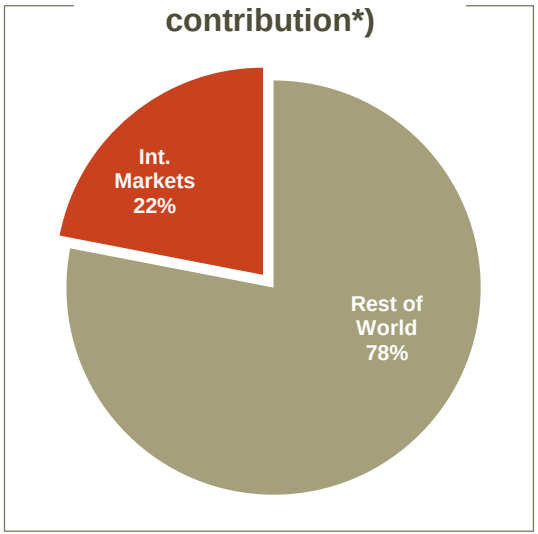
- International Markets declined 5% (up 5% in L.C.) to DKK 941 million in Q1 2018
- Key products[#] grew by 31% and contributed 15% of sales
- Market exclusivity for Lexapro extended by two years in Japan
- Main markets are China, Japan, Brazil and South Korea
- International Markets is expected to continue growing in 2018 in local currencies

International Markets revenue (DKKm)



#) *Abilify Maintena, Brintellix and Rexulti*

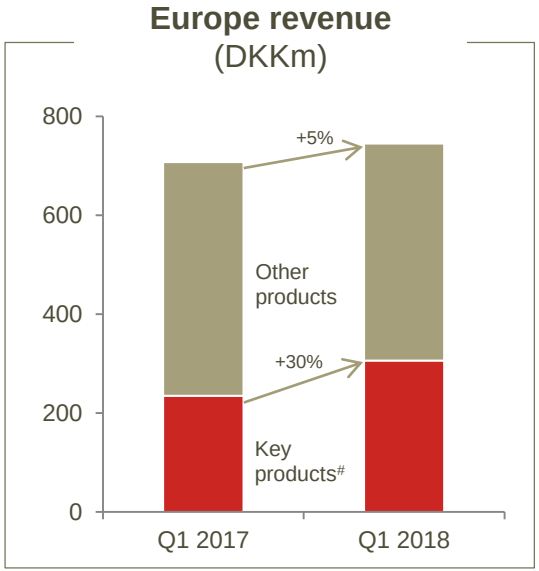
International Markets' contribution*)



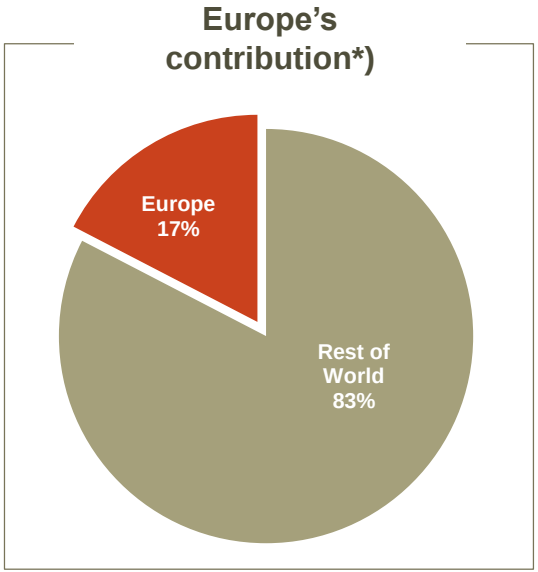
*) *Excluding Other revenue and effects from hedging*

Europe is up 5% in Q1 2018 driven by key products

- Europe grew 5% to DKK 745 million in Q1 2018
- Key products[#] grew 30% and contribute 41% of sales
- Largest markets are France, Italy and Spain
- Continued strong performance for Brintellix, especially in France, Italy and Spain
- Profitability significantly improved
- Europe is expected to continue growing in 2018

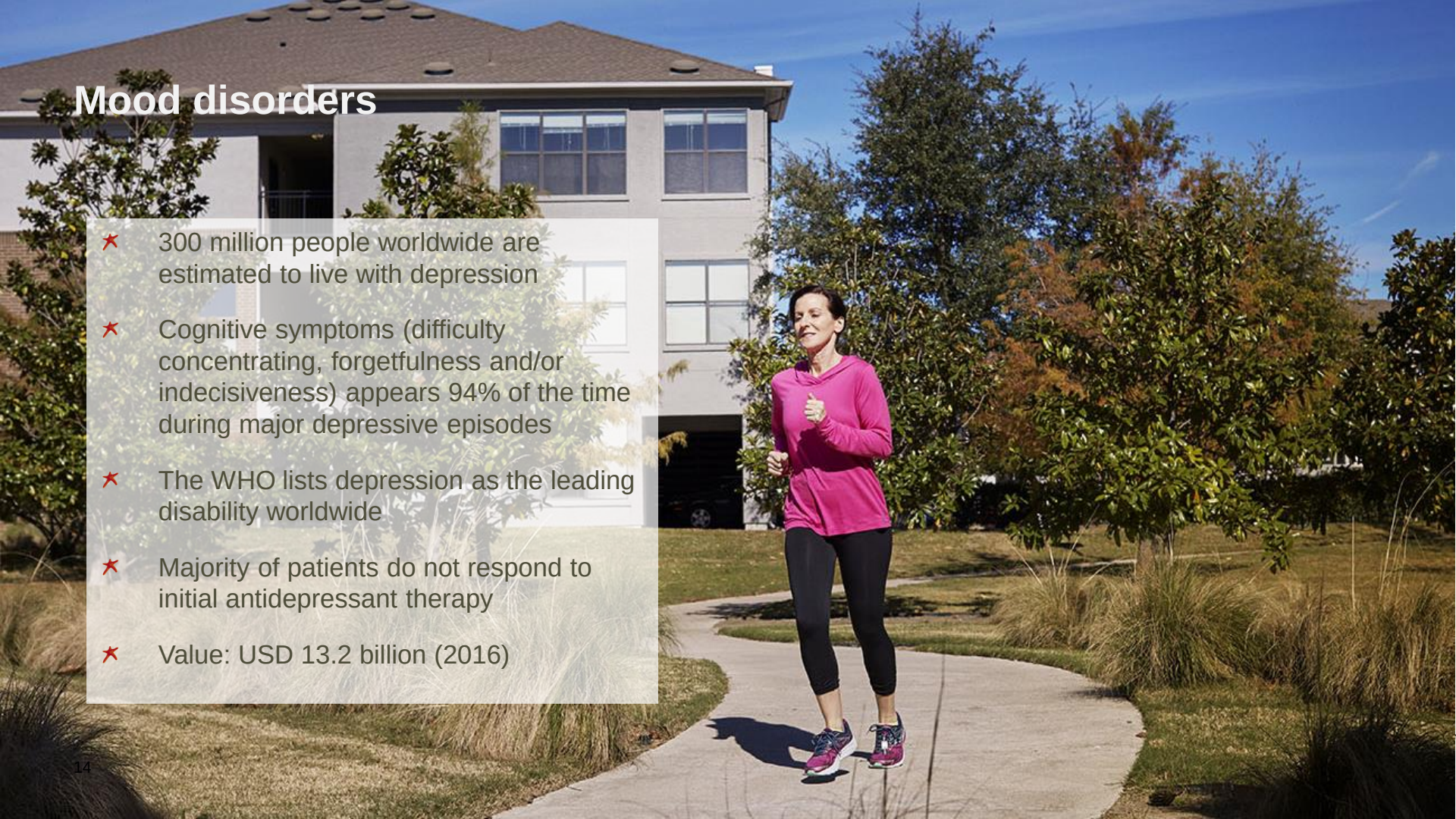


#) *Abilify Maintena and Brintellix*



*) *Excluding Other revenue and effects from hedging*

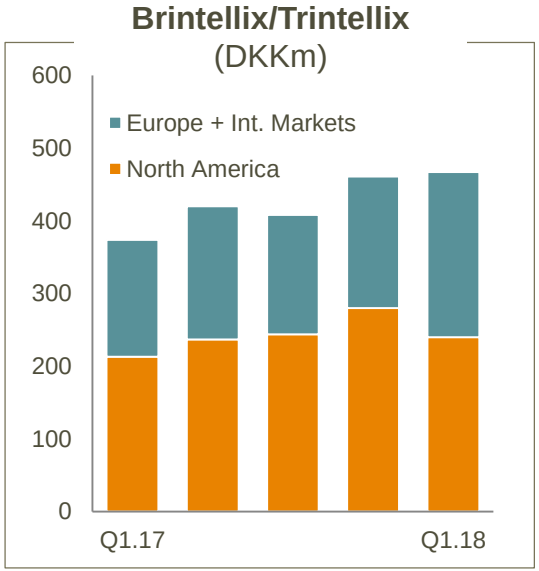
Mood disorders

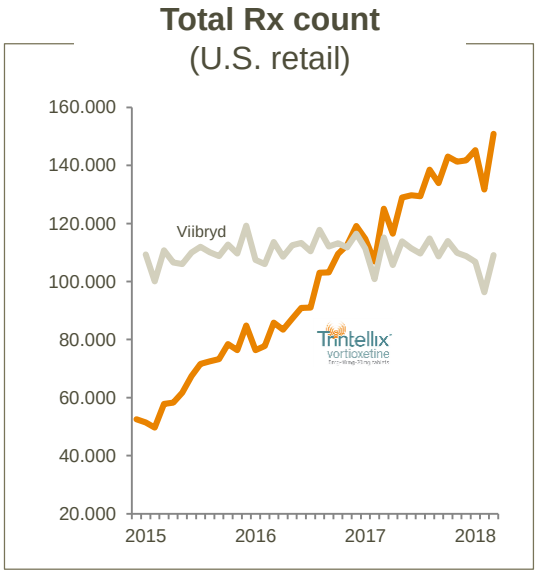


- 300 million people worldwide are estimated to live with depression
- Cognitive symptoms (difficulty concentrating, forgetfulness and/or indecisiveness) appears 94% of the time during major depressive episodes
- The WHO lists depression as the leading disability worldwide
- Majority of patients do not respond to initial antidepressant therapy
- Value: USD 13.2 billion (2016)

Brintellix/Trintellix grew 25% to DKK 467 million in Q1 2018 – in local currencies the growth was 38%

- North America grew by 13% (28% in L.C.) to DKK 240 million
- Europe and International Markets grew 41% combined to DKK 227 million
- Largest markets are the U.S., Canada, Spain and Brazil
- Growth mainly driven by France, Saudi Arabia, Spain and the U.S.
- Brintellix continues to gain value share which exceeds 5% in France and Italy
- Trintellix increases value share in Canada and the U.S. to 4.4% and 18.5%, respectively



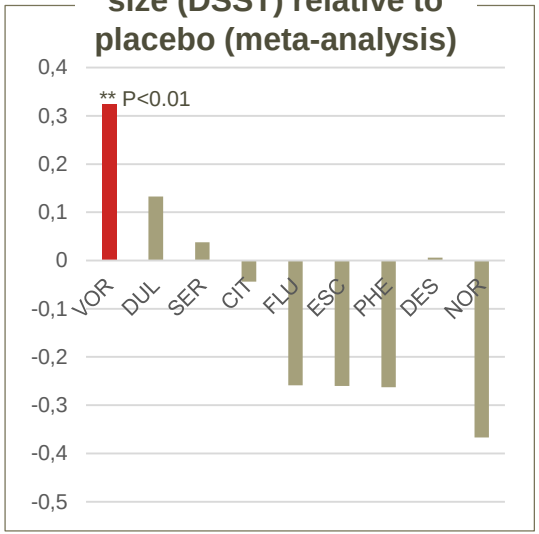


Source: Symphony Health Solutions/Bloomberg (monthly data ending 3/2018)

Trintellix is the first FDA-approved treatment for MDD to have data on processing speed, an aspect of cognitive function that is impaired in many patients with MDD

- FDA updates Trintellix label to include data showing improvement in processing speed, an important aspect of cognitive function
- Comparative studies have not been conducted to demonstrate a therapeutic advantage over other antidepressants on the DSST
- MDD is a multidimensional disorder consisting not only of mood, but also physical and cognitive symptoms
- Cognitive symptoms in MDD are highly prevalent and persistent even after treatment

Standardized effect size (DSST) relative to placebo (meta-analysis)



Baune BT, et al. Int J Neuropsychopharmacol; 2018 Feb 1;21(2):97-107

The prevalence of cognitive symptoms in MDD

Acute phase – 94%
Cognitive problems dominate the course of depression and were present for up to 94% of the time during depressive episode

Remission – 44%
Even patients thought to be in remission, cognitive symptoms were present in depressed patients for an average of 39-44% of the time

Conradi HJ et al. Psychol Med 2011; 41: 1165-1174

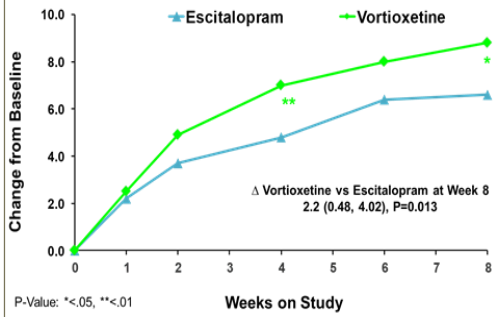
Further potential strengthening of Trintellix label

- FDA acceptance of sNDA for Trintellix for Treatment-Emergent Sexual Dysfunction (TESD)
- PDUFA on 21 October 2018
- The prevalence of TESD reach 25-80% (SSRIs) and 40-80% (SNRIs)
- Sexual dysfunction ranked as the most bothersome adverse event (AE), followed by drowsiness, weight gain, and insomnia

Completed studies in TESD

	Study #1 (NCT01364649)	Study #2 (NCT02932904)
Completed enrollment:	450 patients included	352 healthy volunteers
Intervention:	10-20mg vortioxetine, 10-20mg escitalopram and placebo	10-20mg vortioxetine, 20mg paroxetine and placebo
Treatment duration:	8 weeks	8 weeks
Primary outcome measures:	Change From Baseline in the CSFQ-14 Total Score[1]	

Change from baseline in CSFQ-14 Total Score

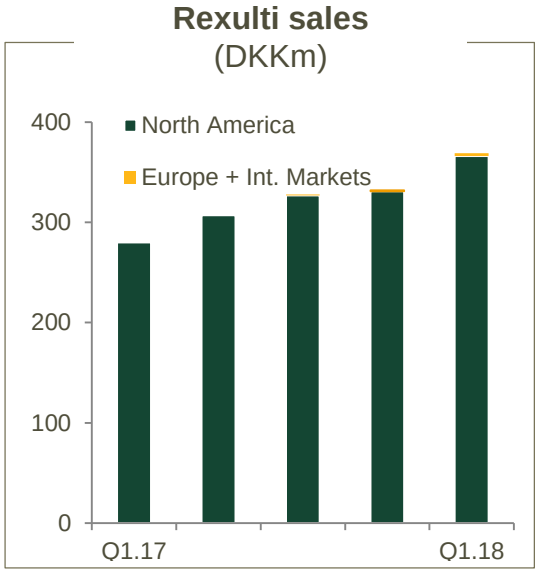


Paula L. Jacobsen; Atul R. Mahableshwarkar; Yinzhong Chen; Lambros Chrones; Anita H. Clayton: A Head-to-Head, Randomized Comparison Study of Vortioxetine vs. Escitalopram in Patients Well Treated for Major Depressive Disorder and Experiencing Treatment-Emergent Sexual Dysfunction. Presented at the American Society of Clinical Psychopharmacology (ASCP) Annual Meeting, June 16–19, 2014, Hollywood, FL.

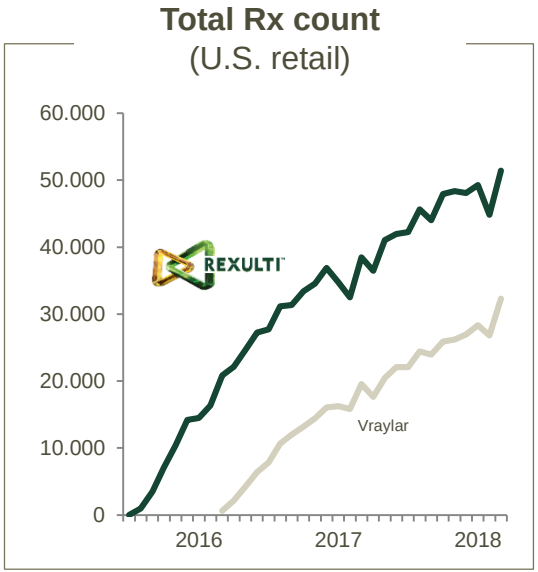
Serretti, A: Treatment-Emergent Sexual Dysfunction Related To Antidepressants – A Meta-Analysis. Journal of Clinical Psychopharmacology. Vol. 29, No. 3, June 2009
Kennedy, SH: Sexual Dysfunction, Depression, and the Impact of Antidepressants. Journal of Clinical Psychopharmacology. Vol. 29, No. 2, April 2009
Clayton AH, Montejo AL. Major depressive disorder, antidepressants, and sexual dysfunction. J Clin Psychiatry. 2006;67 Suppl 6:33-37.

Rexulti grew 32% to DKK 369 million in Q1 2018 – in local currencies the growth was 51%

- Approved in Saudi Arabia in both depression and schizophrenia – launch expected in H2 2018
- Submitted for approval in markets such as Brazil, Europe, and Mexico in 2017
- Rexulti has 10.3% value share (U.S.)
- Third study in AAD to commence by mid-2018
- Pivotal programme in bipolar mania to conclude H1 2019
- PoC study in PTSD to conclude in H1 2019
- Additional LCM activity progressing



Lundbeck's share of revenue.
NOTE: Outside North America, Rexulti has only been launched in Australia



Source: Symphony Health Solutions/Bloomberg (monthly data ending 3/2018)

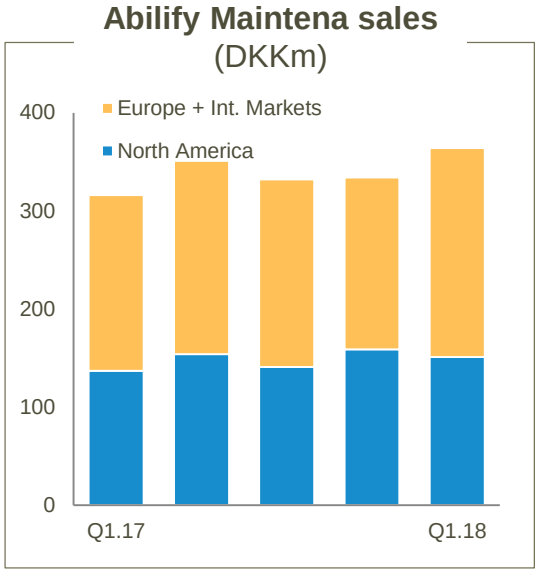
AAD: Agitation in Alzheimer's disease. LCM: Life-Cycle Mgmt.

Psychotic disorders

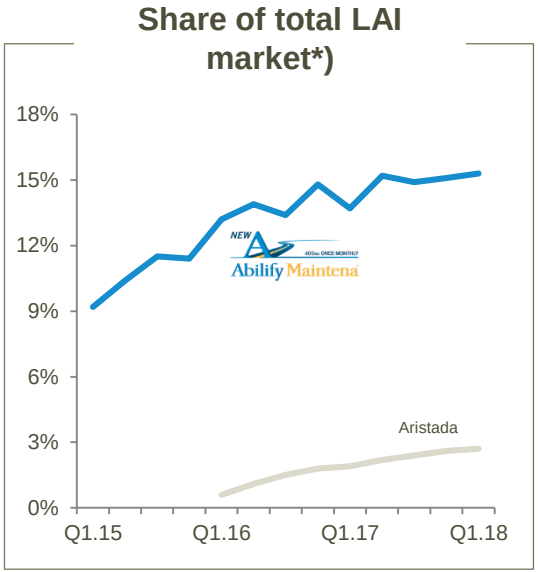
- The WHO estimates that over 21 million people suffer from schizophrenia
- Schizophrenia is among the most financially costly illnesses in the world
- The disease is marked by positive symptoms (hallucinations and delusions) and negative symptoms (blunted emotions and social withdrawal)
- Around 30% of patients with schizophrenia have inadequate response to antipsychotics
- Current therapies are sub-optimal
- Value: USD 18.8 billion (2016)

Abilify Maintena grew 15% to DKK 364 million in Q1 2018 – in local currencies the growth was 23%

- Europe up 19% to DKK 184 million
- International Markets up 16% (26% in L.C.) to DKK 29 million
- North America up 10% (25% in L.C.) to DKK 151 million
- Growth driven by Canada, France, Spain and the U.S.
- Largest markets are the U.S., Canada, Spain and France
- Market share increasing - >20% volume share (LAI retail) in most markets
- Total LAI market reached USD 1.1 billion (+13%) in Q1 2018



Lundbeck's share of revenue



**) Based on quarterly reports from Lundbeck, Otsuka, Alkermes (Bloomberg Q4-consensus) and Johnson & Johnson*

LAI: Long-acting injectable anti-psychotics

Brexpiprazole pivotal programme initiated in acute manic episodes associated with Bipolar I disorder

Expected brexpiprazole profile:

- Established efficacy and treatment of bipolar I disorder
- Favorable tolerability profile over SoC (e.g., improved metabolic profile, fewer AEs including low frequency of sedating and activating side effects might support improved functioning and ability to work
- Expected completion by January 2019

REXULTI™

The studies

Study #1 (NCT03259555)	Study #2 (NCT03257865)

Estimated enrollment: 320 adult patients in each study

Intervention: 2-4 mg brexpiprazole and placebo

Treatment duration: 21 days

Primary outcome measures: change from baseline in YMRS score[1]

Study start: September 2017

6-month safety study:
Enrolling completers from Study #1 and #2

1) Young-Mania Rating Scale (YMRS) Score

Bipolar disorder

- More than 6 million affected in the U.S.
- Low rate of diagnosis (45%)
- A disease with high add-on and switch rates indicating need for new treatment options
- Patients in treatment spent 44% of their time being ill over a 9-year period[2]
- Bipolar disorder represents around one-third of the use of atypical antipsychotics

2) A. Forte et al. / Journal of Affective Disorders 178 (2015) 71–78

Brexpiprazole in a Proof-of-Concept study in Post-traumatic Stress Disorder (PTSD)

- 4-arm, 12-week trial using 1-3 mg of brexpiprazole
- Monotherapy or in combination with sertraline
- ~330 patients to be enrolled
- Primary endpoint: Change from baseline in the CAPS-5 total score#)
- Study started in January 2017 with expected completion by December 2018

*) NCT03033069
#) Clinician-Administered PTSD Scale for DSM-5 (CAPS-5)

PTSD

- ~8.6m American adults affected[1)], but ~80% is undiagnosed
- Growing economic and social burden to care for people with PTSD
- Inadequate response with FDA approved SSRIs sertraline and paroxetine
  - Polypharmacy the norm

1) http://www.cohenveteransbioscience.org/post-traumatic-stress/. *US Census Bureau. Annual estimates of the resident population by sex and selected age groups for the United States: April 1, 2010 to July 1, 2011 (NC-EST2011-02). 2012. http://www.census.gov/popest/data/national/asrh/2011/index.html.*

What causes PTSD?

1	Rape
2	Combat exposure
4	Childhood neglect
4	Childhood physical abuse

1	Rape
2	Sexual molestation
3	Physical attack
4	Being threatened with a weapon

First pivotal study using Lu AF35700 in Treatment Resistant Schizophrenia (TRS) on track

- Unique mode of action. In contrast to current treatment, antipsychotic effect at **low D_2 blockade**
- Combined D_1/D_2 and 5-HT_6 profile gives good activity combined with a **benign tolerability profile**
- Very **long half-life** leads to reduced risk of relapse

Treatment Resistant Schizophrenia

- Around 1/3 of schizophrenia patients are treatment resistant
- Only clozapine approved for TRS
- Large unmet medical need

Clinical programme

- Three studies in healthy people and one in patients with schizophrenia are concluded[1)]
- The first pivotal study (*DayBreak1*) commenced in March 2016[2)]
- Other key studies ongoing:
  - Long-term safety study[3)]
  - Cardiac repolarization[4)]
  - ED or LD TRS (*Anew*)[5)]

1) Clinicaltrials.gov identifier: NCT02202226
2) NCT02717195. 3) NCT02892422. 4) NCT02901587.
5) NCT03230864 (early-in-disease (ED) or late-in-disease (LD) treatment-resistant schizophrenia)

Set-up in first study (*DayBreak1*) in pivotal programme using Lu AF35700 in Treatment Resistant Schizophrenia

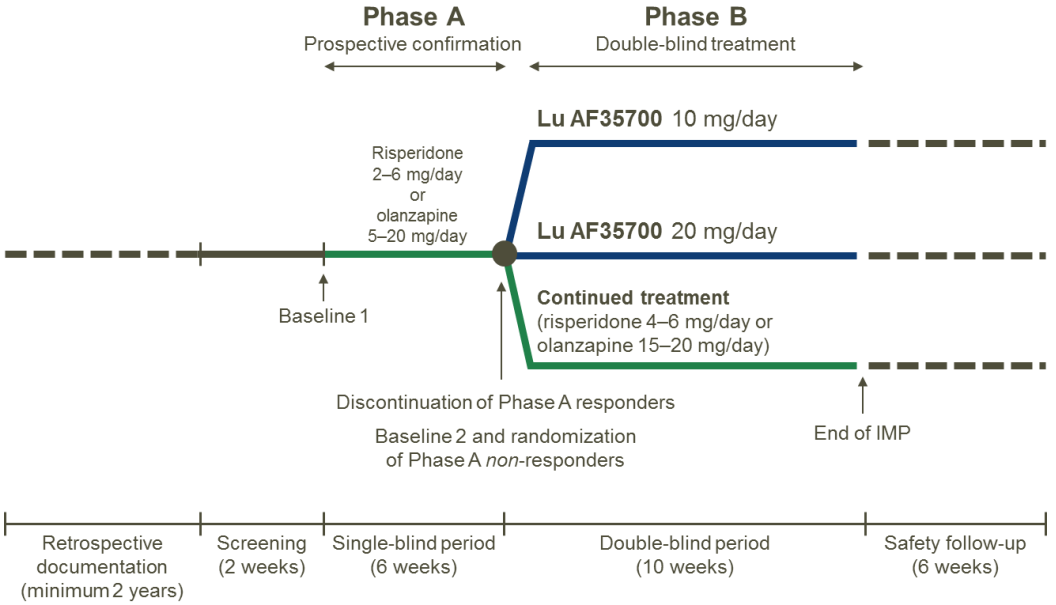
- Oral, once daily
- Approximately 1,000 patients
- Expected completion by Q1 2019

Primary endpoint

- Change in PANSS total score

Secondary endpoints

- Clinical Global Impression Severity scale (CGI-S)
- Personal and Social Performance (PSP) total score



*) NCT02717195

Alzheimer’s disease

- 50 million people worldwide have dementia (Alzheimer’s is the most common cause of dementia contributing 60-70% of cases)
- It is predicted that the number of people affected by dementia will almost double every 20 years
- People with Alzheimer’s live an average of 8 years after their symptoms become noticeable to others
- The total global societal costs of dementia are estimated to be USD 600 billion
- Value: USD 4.5 billion (2016)

Brexpiprazole in pivotal programme in agitation in Alzheimer's

REXULTI™

Clinical programme

- Two studies in the pivotal programme finalized
- A third study to commence by mid-2018 following conclusions from a FDA Type C meeting, where…
  - …one study was considered positive and one study was considered supportive by the agency
- *Fast Track* designation granted February 2016

Agitation in Alzheimer's (AAD)

- >20% of individuals in a community setting and >50% of nursing home residents with dementia have agitation
- 1.5-2m dementia patients in the U.S. with agitation / aggression
- No FDA approved medication

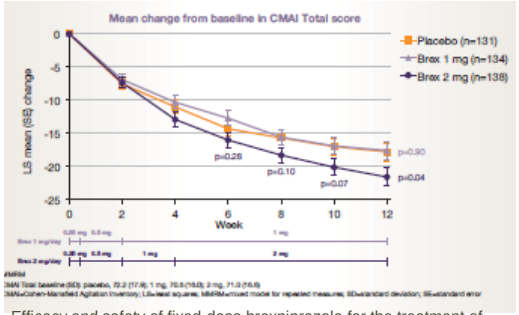
Associated with:

- Increased caregiver burden
- Decreased functioning
- Earlier nursing home placement

Grossberg: "*Efficacy and safety of fixed-dose brexpiprazole for the treatment of agitation in Alzheimer's type dementia*" (AAGP2018)

- Brexpiprazole 2 mg/day showed a statistically significant improvement over placebo on the primary efficacy endpoint
- On the key secondary efficacy endpoint, change from baseline to Week 12 in CGI-S score, numerical improvement was observed for brexpiprazole 2 mg/day from Week 6 and was sustained up to Week 12, although statistical significance was not reached
- No new safety signals were observed

Primary endpoint



Efficacy and safety of fixed-dose brexpiprazole for the treatment of agitation in Alzheimer's type dementia: a randomized, double-blind, fixed-dose, 12-week, placebo-controlled global clinical trial
George T. Grossberg, Eva Kohegyi, Victor Mergel, Joan Amatniek, Mette Krog Josiassen, Didier Meulien, Mary Hobart, Raymond Sanchez,2 Margaretta Nyilas, Mary Slomkowski, Ross A. Baker, Robert McQuade, Jeffrey Cummings

Study I (NCT01862640)

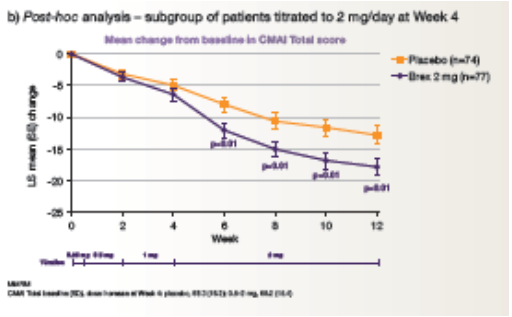
- N = 433 patients (recruited from Europe, Russia, Ukraine and the U.S.)
- Male or female, aged 55-90 years
- 1 mg, 2 mg and placebo
- 12 weeks' treatment duration
- CMAI[1)]: 2 mg statistically superior to placebo
- CGI-S[2)]: 2 mg not statistically superior to placebo

1) Primary efficacy endpoint: Cohen-Mansfield Agitation Inventory (CMAI) total score, a 29-item scale to systematically assess the symptoms of agitation
2) Key secondary efficacy endpoint: Clinical Global Impression-Severity of Illness (CGI-S) score, a 7-point scale assessing overall severity of the patient's agitation
Presented at the 40th Annual Meeting of the American Association for Geriatric Psychiatry (AAGP), Honolulu, Hawaii, 15–18 March 2018

Cummings: "*Efficacy and safety of flexibly-dosed brexpiprazole for the treatment of agitation in Alzheimer's type dementia*" (AAGP2018)

- Primary efficacy endpoint (CMAI) were numerically favorable for flexibly-dosed brexpiprazole (0.5–2 mg/day) over placebo, but not statistically significant
- Brexpiprazole 2 mg/day showed improvement for both the primary and key secondary efficacy endpoints (post-hoc analyses, p≤0.01).
- The results suggest that brexpiprazole 2 mg/day may be an effective, safe, and well-tolerated new treatment for agitation in Alzheimer's dementia

Post-hoc analysis – subgroup of patients titrated to 2mg



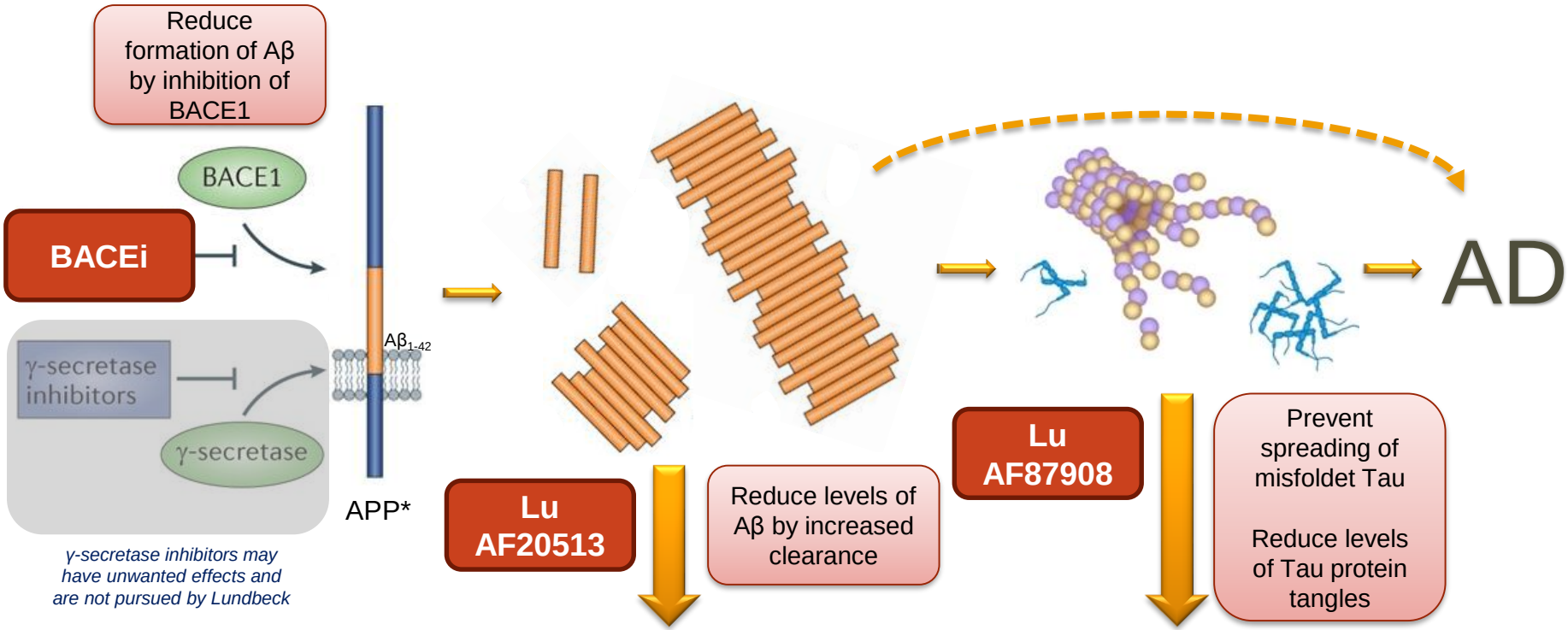
Efficacy and safety of flexibly-dosed brexpiprazole for the treatment of agitation in Alzheimer's type dementia: a randomized, double-blind, flexibly-dosed, 12-week, placebo-controlled global clinical trial
Jeffrey Cummings, Eva Kohegyi, Victor Mergel, Joan Amatniek, Mette Krog Josiassen,3 Didier Meulien,3 Mary Hobart, Raymond Sanchez, Margaretta Nyilas,2 Mary Slomkowski, Ross A. Baker, Robert McQuade, George T. Grossberg

Study II (NCT01922258)

- N = 270 patients (from 62 sites in Europe and North America)
- Male or female, aged 55-90 years
- Flexible dose: 0.5-2 mg
- 12 weeks' treatment duration
- CMAI[1)]: 0.5-2 mg not superior to placebo
- CGI-S[2)]: 0.5-2 mg superior to placebo

1) Primary efficacy endpoint: Cohen-Mansfield Agitation Inventory (CMAI) total score, a 29-item scale to systematically assess the symptoms of agitation
2) Key secondary efficacy endpoint: Clinical Global Impression-Severity of Illness (CGI-S) score, a 7-point scale assessing overall severity of the patient's agitation
Presented at the 40th Annual Meeting of the American Association for Geriatric Psychiatry (AAGP), Honolulu, Hawaii, 15–18 March 2018

Lundbeck is active in the investigation of various novel treatment concepts in Alzheimer's

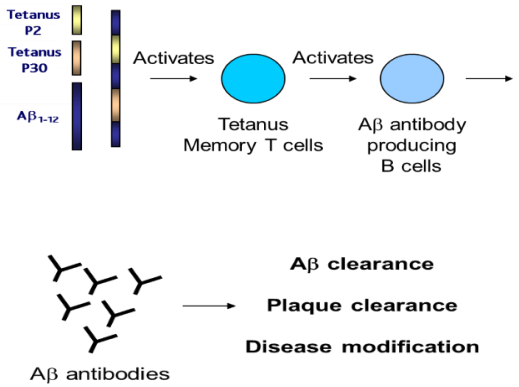


*) APP : Amyloid Precursor Protein

Lu AF20513 – an active therapeutic vaccine against β-amyloid

- Lu AF20513 induce specific antibodies against Aβ using AD patients' own immune system
- Formed antibodies binds to and enhances the clearance of Aβ
- Reduce induction of Tau pathology
- Lu AF20513 has demonstrated to be immunogenic in animal models without activation of Aβ specific T-cells ► low risk of auto-immunogenicity
- Co-developed with Otsuka

AutoVac – unique and proprietary concept



Study design*)

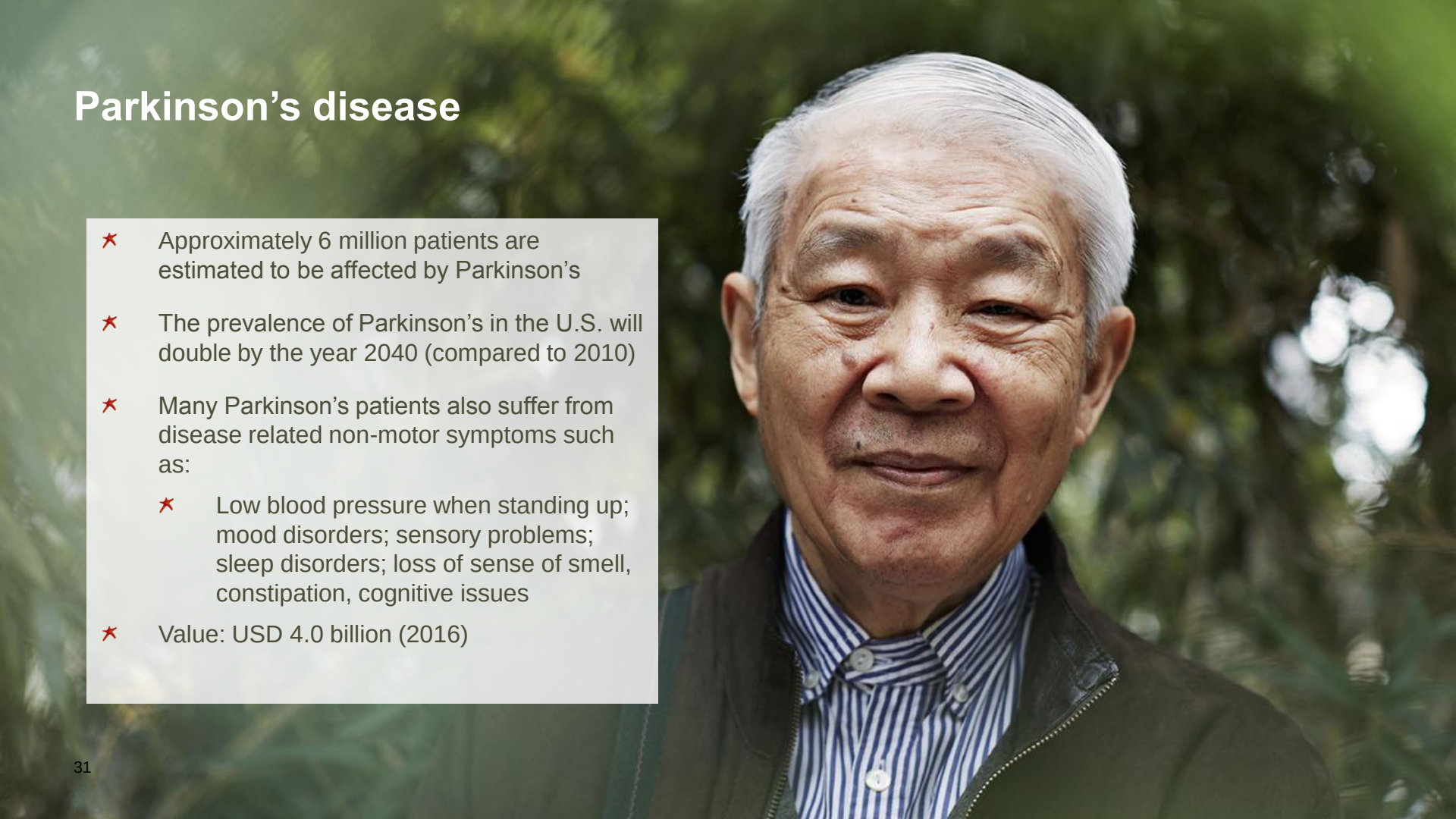
- Open-label, dose escalation study
- 35 patients from centers in Europe
- Patients with mild Alzheimer's (MMSE 19-26)
- Eight injections of Lu AF20513

Purpose:

- Evaluate safety and tolerability
- Measure Aβ-specific antibody titer

*) NCT02388152

Parkinson’s disease

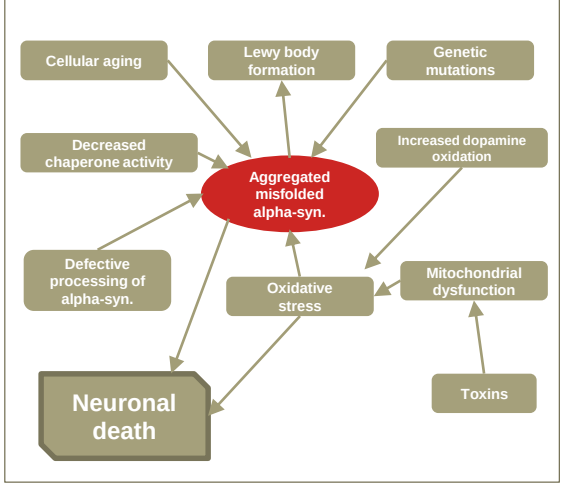


- Approximately 6 million patients are estimated to be affected by Parkinson’s
- The prevalence of Parkinson’s in the U.S. will double by the year 2040 (compared to 2010)
- Many Parkinson’s patients also suffer from disease related non-motor symptoms such as:
  - Low blood pressure when standing up; mood disorders; sensory problems; sleep disorders; loss of sense of smell, constipation, cognitive issues
- Value: USD 4.0 billion (2016)

Lu AF82422 - Potential disease modifying antibody in Parkinson's

- Lu AF82422 is a human IgG1 mAb that recognizes all major alpha-synuclein forms including aggregated/misfolded forms involved in the pathogenesis of PD
- First-in-human study to commence mid 2018
- First single-ascending-dose study to evaluate safety and tolerability of Lu AF82422 in healthy volunteers and PD patients
- Intervention aimed for delay in disease progression in PD or other synucleinopathies

Pathogenesis of Parkinson's (PD)



Modified based on Javed et al. CNS & Neurological Disorders - Drug Targets, 2016, Vol. 15, No. 10

Parkinson's disease

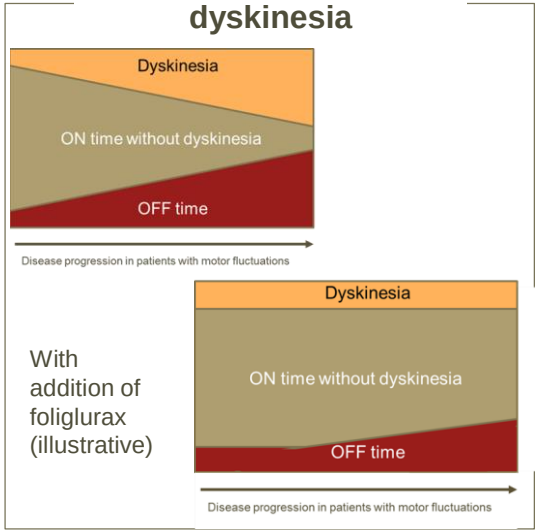
- Affects ~1 million individuals in the U.S. with ~60,000 new cases/year
- Affects more than ~5 million worldwide
- Currently only symptomatic treatment - no disease modifying treatment available
- Compelling evidence that alpha-synuclein may play a role in progression of PD and other synucleinopathies

Foliglurax – an interesting new pipeline asset currently in PoC testing in Parkinson's patients

Foliglurax (PXT002331)

- Increase activity of a specific glutamatergic target (mGluR4)
- Symptomatic treatment of *OFF*-time in Parkinson's and levodopa induced dyskinesia
- Strong IP
- Global rights to foliglurax and full control of asset
- Phase II started in July 2017 and will be concluded H1 2019[1)]
- Two active arms + placebo (BID)
- ~165 patients (Europe)
- Change in awake *OFF* time based on subject diary entries

Levodopa-induced dyskinesia



Modified based on: Jankovic, Mov. Disorder 2005,

Motor complications of levodopa

- PD-LID is the most important unmet medical need after disease modification in Parkinson's[2)]
- PD-LID affects ~50% after 5-10 years increasing to ~90% after 10-15 years of L-DOPA therapy
- 170-200,000 patients in the U.S. with PD-LID
- Once established, PD-LID is difficult to treat

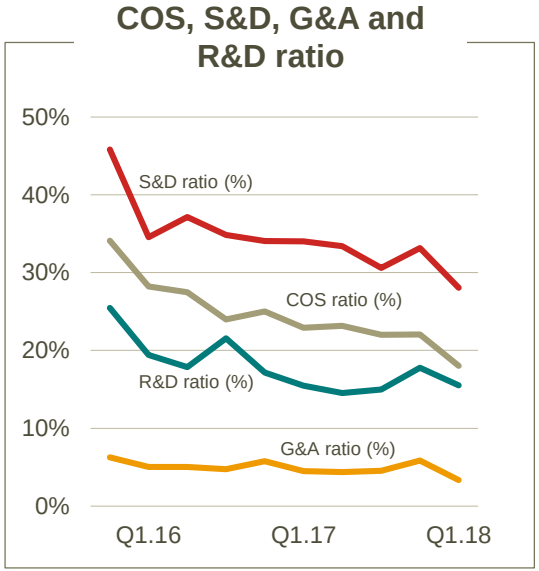
PD-LID: Parkinson's Disease – Levodopa-Induced Dyskinesia
2) Datamonitor

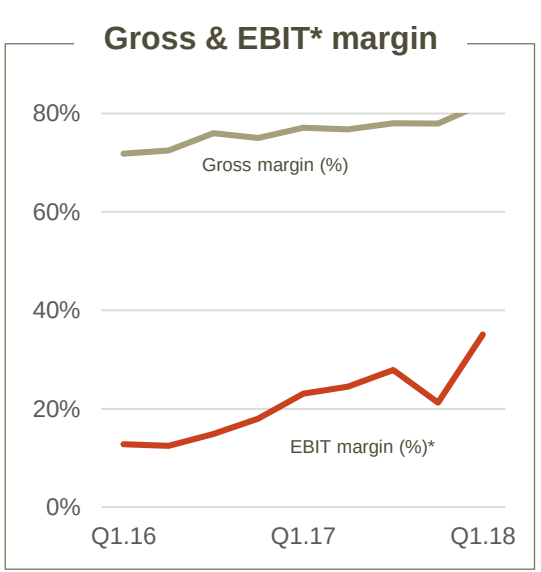
1) NCT03162874

Financial highlights

Continued cost discipline

- **Total costs** down 8% while growing topline by 9% in Q1 2018
- **EBITDA margin** of 41.2% vs. 30.6% in Q1 2017
- **EBIT margin** also improved significantly
- **COS%**: Expected to show continued improvements
- **S&D%**: Stable or modest additional improvements
- **G&A%**: Stable or modest additional improvements
- **R&D%:** Stable or slightly increasing depending on project execution





**) Data adjusted for gain from divestment of properties in the U.S. and Denmark included in EBIT (recognized in Q1.2017, Q3.2017 and Q1.2018)*

Strong growth in earnings with more than a doubling of net profits

- Significant negative impact from FX reducing revenue growth
  - Growth for all key products and in all regions in L.C.
- EPS growth of 103%
- Significant EPS improvement driven by
  - Solid revenue growth
  - Strong improvement of profitability
  - Reduced tax rate as the U.S. tax reform has decreased the tax rate from 41% in Q1 2017 to 27%

Financial results (Quarterly)

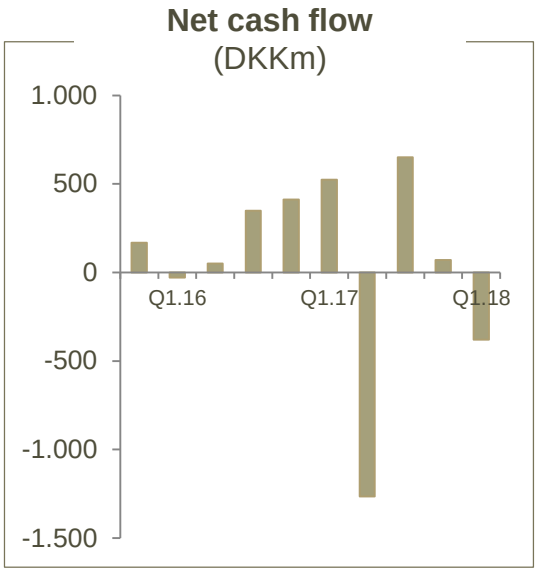
DKKm	Q1.18	Q1.17	Δ%
Revenue	**4,585**	4,211	*9%*
Gross margin	***82.0%***	*77.1%*	-
EBIT	**1,656**	1,011	*64%*
EBIT margin	***36.1%***	*24.0%*	-
Core EBIT	**1,818**	1,213	*50%*
Net profit	**1,199**	587	*104%*
EPS	**6.03**	2.97	*103%*

Revenue (reported vs. L.C)

DKKm	Q1.18	Δ *DKK*	Δ% *L.C.*
Revenue	**4,585**	+374m	*+14%*
- Abilify Maintena	**364**	+48m	*+23%*
- Brintellix/Trintellix	**467**	+93m	*+38%*
- Northera	**396**	+44m	*+29%*
- Onfi	**903**	+193m	*+46%*
- Rexulti	**369**	+89m	*+51%*
North America	**2,598**	+95m	*+19%*
Int. Markets	**941**	-47m	*+5%*
Europe	**745**	+37m	*+6%*

Strong cash flow generation and improved ROIC

- Cash flows from operating activities increased from DKK 651 million in Q1 2017 to DKK 2,003 million in Q1 2018
- Acquisition of Prexton Therapeutics impacts net cash flow by DKK 745 million
- Dividend payout for 2017 increased to DKK 1.6 billion*)
- ROIC increased from 30.8% in 2017 to 57.6% in Q1 2018



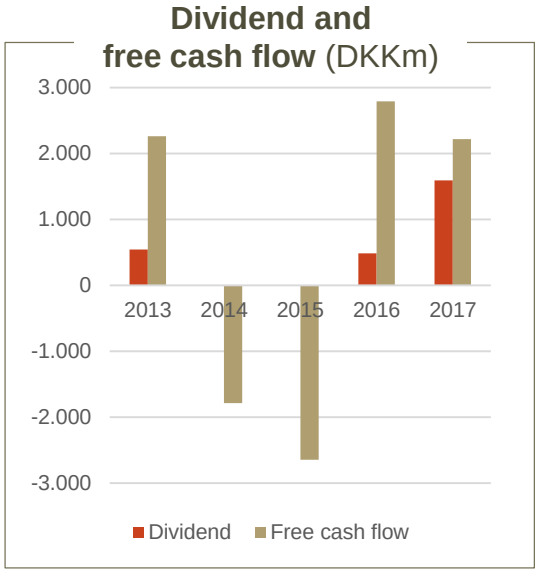
*) In 2017, the dividend payout of DKK 0.5 billion was paid in Q2

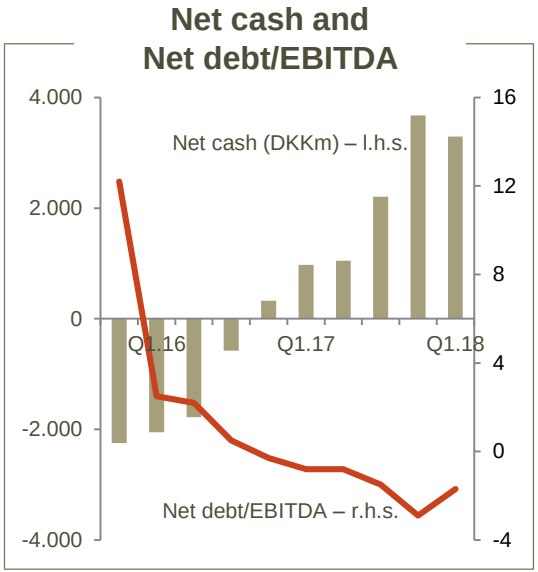
Capital allocation

- Dividend increased from DKK 2.45 to DKK 8.00 per share
- Net debt/EBITDA of -1.7x in Q1 2018 vs. -0.8x in Q1 2017
- Net cash expected to reach DKK 5-5.5 billion in 2018

Cash flow priorities

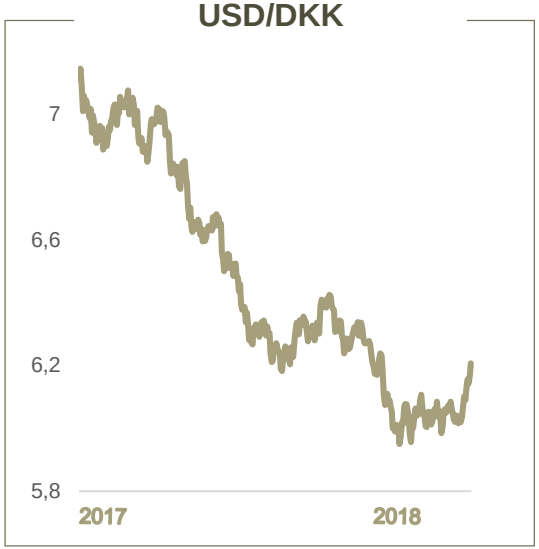
- Strategic cash reserve of DKK 4-6 billion
- Maintain investment grade status (NIBD/EBITDA<2.0x)
- Increasing dividends linked to long-term performance
- Dividend policy: Pay-out ratio of 60-80%

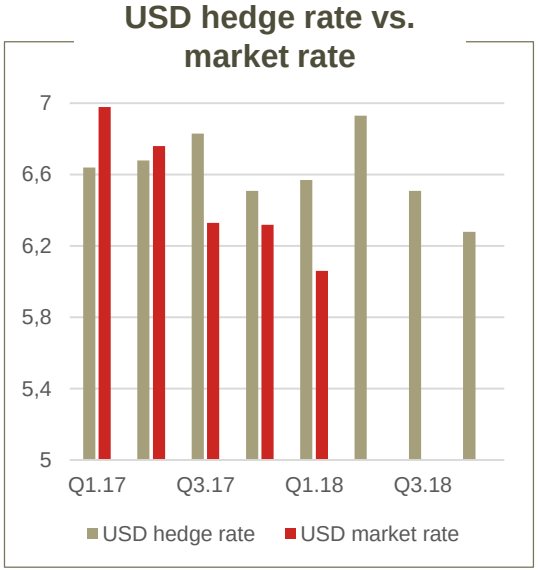




Hedging at Lundbeck

- The main currency risk concerns fluctuations of USD, JPY, CNY and CAD
- Lundbeck hedges a significant part of the risk (at EBIT level) for a period of 12-18 months
- From Q1 2018, gains/losses (net) will be shown as a separate line item in revenue
- Expected hedging gain of DKK 300-400 million in 2018





Source: Bloomberg

2018 financial outlook maintained

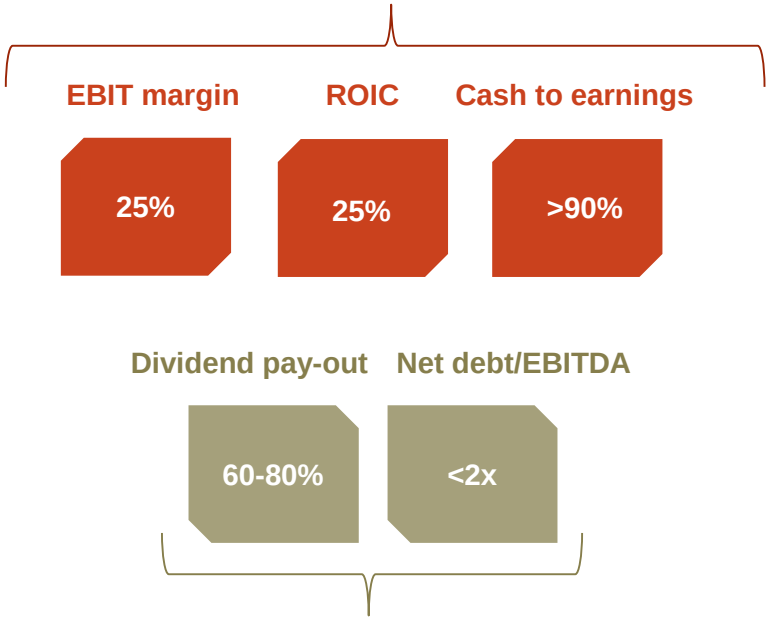
- Growth in all three regions in local currencies
- Continued growth for key products to outpace the decline from generic erosion
- Net financial items of DKK ±50 million expected in 2018
- No known one-off income and/or expenses
- Unchanged currencies from end-April 2018

2018 financial guidance

DKKbn	2016	2017	2018 guidance	~Δ% (y/y)
Revenue	15.6	17.2	**17.2-18.0**	*0-5%*
EBIT	2.3	4.4	**4.8-5.2**	*9-18%*
Implied EBIT margin	*14.7%*	*25.6%*	***~27-30%***	-
Tax rate	*43.9%*	*38.7%*	***26-28%***	-

Financial targets

Targets within the 2018-2020 period

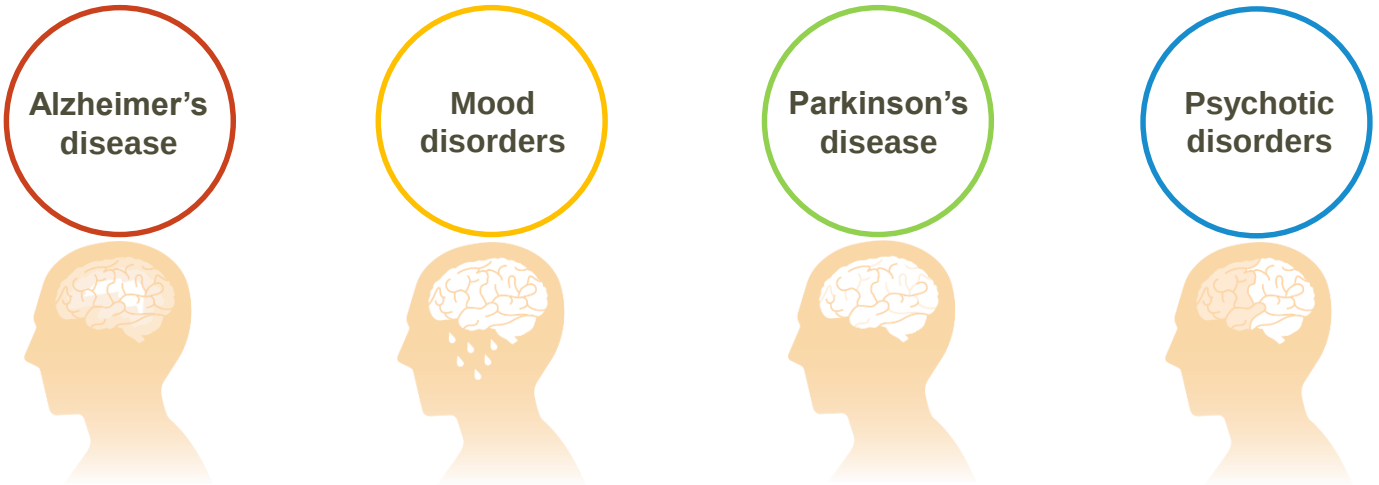


Target achievements

	Q1.18	2017	2016	2015
EBIT margin	***36.1%***	*25.6%*	*14.7%*	*(46.7%)*
ROIC (annualized)	***57.6%***	*30.8%*	*13.2%*	*(45.4%)*
Cash to earnings	***101.5%***	*141.8%*	*230.3%*	*N/A*
Dividend Pay-out	**-**	*61%*	*40%*	*0%*
Net debt/EBITDA	**(1.7)**	(0.7)	(0.1)	10.7

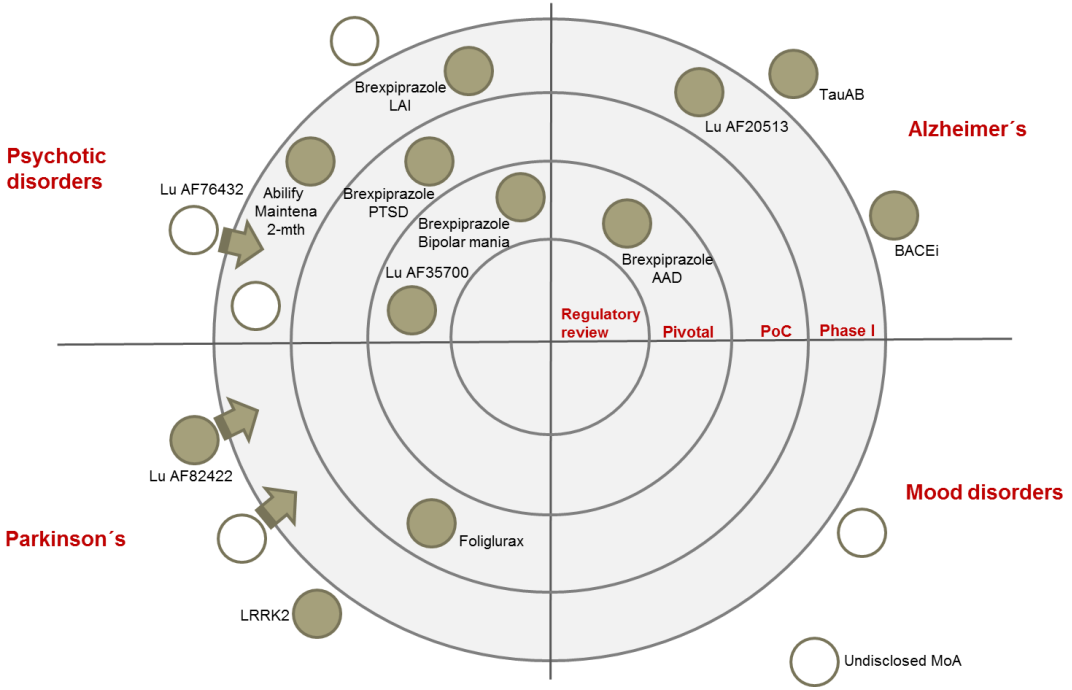
R&D in Lundbeck

Innovation focused across four key disease areas



Continued progression in our R&D pipeline

- **Trintellix**: U.S. label update to include DSST data and sNDA accepted for TESD
- **Foliglurax:** Acquired in March 2018. Clinical phase II initiated in 2017
- **Brexpiprazole AAD**: Third study (n=~300) to commence by mid-2018
- **New projects**:
  - Lu AF76432 FIH planned to start in Q2 2018 (schizophrenia)
  - Lu AF82422 FIH planned to start in Q3 2018 (Parkinson's)
  - A third project likely to enter clinical testing in 2018



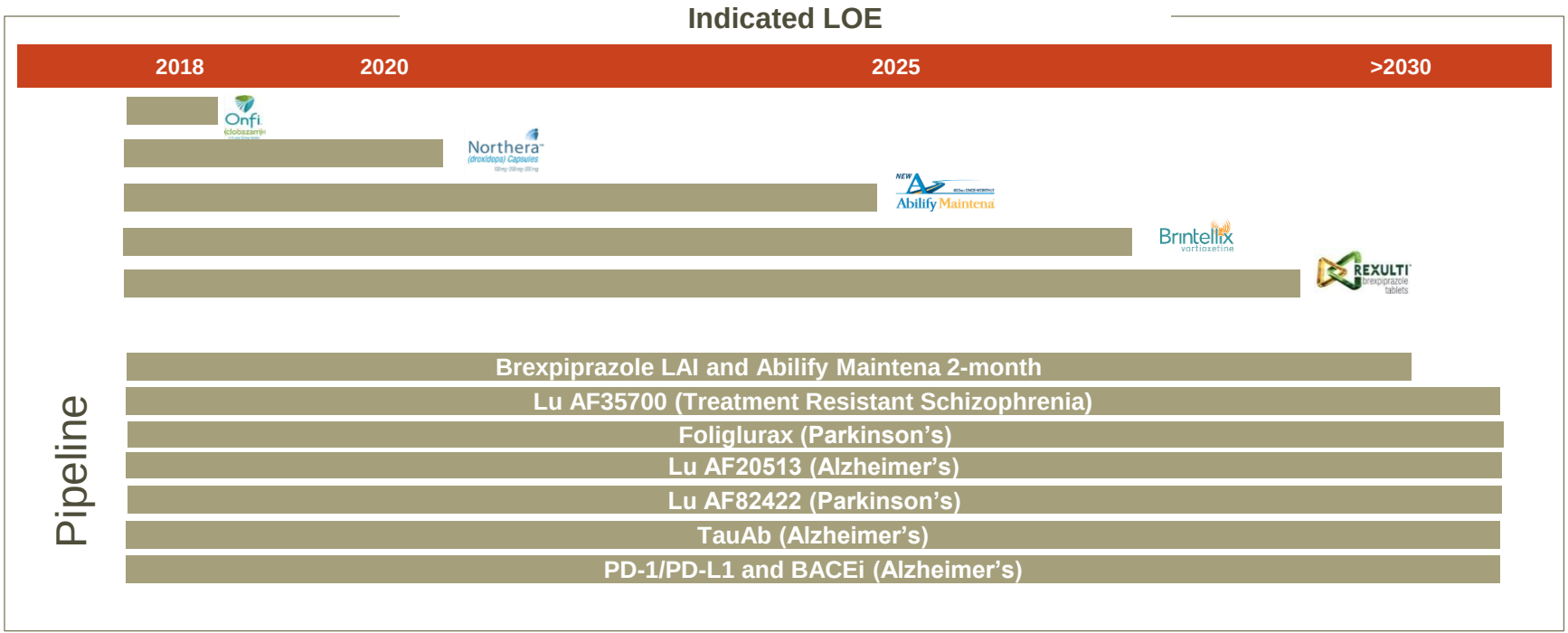
Innovation through partnerships

- In line with strategy, focus has been on early research projects and partnerships that support our own pipeline for the past 2-3 years
- Continue to identify external early-stage innovation from preclinical up to clinical phase II

Selected recent partnerships

Strategic R&D collaborations	Supportive technologies	Access to assets
23andMe	Ubiquigent	Vanderbilt University
GE Healthcare	Piramal	ImmunoBrain Checkpoint
Cerevau technologies		confo therapeutics
Circuit Therapeutics		Prexton Therapeutics
IBM Watson		
Brigham Health / Brigham and Women's Hospital / Brigham Research Institute		
Massachusetts Life Sciences Center		
Vanderbilt University		
University of Glasgow		

Higher degree of transparency in future revenue drivers than Lundbeck has had historically



Key priorities

- Sustain sales **momentum** of key products
- Continue to **focus** on high profitability
- Deliver on **innovation**
- High **dividend** pay-outs

Lundbeck

2016 - CNS market overview

	Market size (2016)					Market leaders (2016)	
	Value USDbn	Value Growth	Volume Growth	# of patients*	Unmet medical needs	Compound	Share value
Total pharma	1,005	+5%	+2%	-	-	-	-
Total CNS	149	0%	+2%	-	-	-	-
Anti-Alzheimer's (N7D)	4.5	-16%	+4%	>7 million	• Disease modifying treatment • Disease slowing agents • Improved symptomatic treatments • Longer lasting symptomatic treatments	1. Memantine 2. Donepezil 3. Rivastigmine 4. Galantamine	46% 22% 21% 8%
Anti-depressants (N6A)	13.2	-1%	+4%	~40 million	• Drugs with higher remission rates • Increased onset of action • Current therapies are relatively well-tolerated but still room for improvement especially on sexual side effects	1. Duloxetine 2. Escitalopram 3. Bupropion 4. Venlafaxine	13% 10% 9% 9%
Anti-Parkinson's (N4A)	4.0	0%	+3%	>3 million	• Therapies that provide neuroprotection and/or neurorestoration • An optimal trial design for demonstrating neuroprotection and/or neurorestoration • Control of levodopa-induced motor response complications	1.Levodopa 2.Rasagiline 3.Pramipexole 4.Rotigotine	16% 15% 12% 11%
Anti-psychotics (N5A)	18.8	-13%	+4%	Approx 1% of global population	• Improved treatment of cognitive dysfunction • Improved treatment of negative symptoms • Improved treatment of co-morbid depression and anxiety • Early stage, definitive diagnostics	1.Aripiprazole 2.Quetiapine 3.Paliperidone Palmitate 4.Lurasidone	21% 14% 14% 12%

Source: IMS Health Analytics Link 2016 (Audited sales), Growth, USD % y/y

Financial terms and territory structure of the Otsuka alliance entered in November 2011

Milestone payments

Payment to: Otsuka / Lundbeck

	Abilify Maintena	Rexulti	Selincro
Development milestones/upfront	USD 200m	USD 600m[3)]	EUR 105m*
Approval milestones	USD 275m[1)]	USD 300m[2)]	Un-disclosed
Sales milestones	Up to USD 425m depending on sales development		Un-disclosed

1) USD 100m upon US approval, USD 75m upon EU approval in schizophrenia, and USD 50m US and EU for a second indication. 2) USD 100m (US) and USD 50m (EU) for each of the two first indications
3) Development milestones of up to USD 600m after which shared development costs between parties. 4) USD 125m, USD 25m and USD 50m for first indication in the US, EU and Japan respectively. Second indication gives USD 50m, USD 25m and USD 25m, respectively.

Lundbeck's share of revenue and costs

Otsuka / Lundbeck

	Abilify Maintena	Rexulti	Selincro
USA	20%	45%	-
EU-5, Nordic and Canada	50%	50%	-
Other Lundbeck territories	65%**	65%**	Un-disclosed

* Includes sales milestones
** All regions except Asia, Turkey and Egypt
*** All regions except Thailand and Vietnam

- Selincro for Japan added to the alliance in October 2013

Q1 2018 and FY 2017 - Product distribution of revenue

DKKm	FY 2017	FY 2016*)	Q1 2018	Q1 2017	*Growth*	*Growth in local currencies*	*% of total*
TOTAL:							
Abilify Maintena	1,333	1,114	**364**	316	*15%*	*23%*	*8%*
Brintellix/Trintellix	1,663	1,105	**467**	374	*25%*	*38%*	*10%*
Cipralex/Lexapro	2,392	2,518	**665**	690	*(4%)*	*5%*	*14%*
Northera	1,644	1,087	**396**	352	*13%*	*29%*	*9%*
Onfi	3,022	2,409	**903**	710	*27%*	*46%*	*20%*
Rexulti	1,247	826	**369**	280	*32%*	*51%*	*8%*
Sabril	1,509	1,342	**341**	378	*(10%)*	*3%*	*7%*
Xenazine	1,046	1,571	**112**	257	*(56%)*	*(50%)*	*2%*
Other pharmaceuticals	3,028	3,337	**667**	842	*(21%)*	*(16%)*	*15%*
Other revenue	402	325	**119**	74	*61%*	*62%*	*3%*
Hedging	(52)	-	**182**	(62)	-	-	*4%*
Total revenue	**17,234**	**15,634**	**4,585**	**4,211**	***9%***	***14%***	***100%***

*) In 2016 effects from hedging is included in revenue for the individual producs.

Q1 2018 and FY 2017 - Geographic distribution of revenue - 1

DKKm	FY 2017	FY 2016*)	Q1 2018	Q1 2017	*Growth*	*Growth in local currencies*	*% of total*
NORTH AMERICA:							
Abilify Maintena	591	526	**151**	137	*10%*	*25%*	*6%*
Trintellix	974	706	**240**	213	*13%*	*28%*	*9%*
Northera	1,644	1,087	**396**	352	*13%*	*29%*	*15%*
Onfi	3,022	2,409	**903**	710	*27%*	*46%*	*35%*
Rexulti	1,245	826	**366**	280	*31%*	*50%*	*14%*
Sabril	1,509	1,342	**341**	378	*(10%)*	*3%*	*13%*
Xenazine	1,016	1,557	**107**	250	*(57%)*	*(51%)*	*4%*
Other pharmaceuticals	672	669	**94**	183	*(49%)*	*(39%)*	*4%*
Total revenue	**10,673**	**9,122**	**2,598**	**2,503**	***4%***	***19%***	***100%***

*) In 2016 effects from hedging is included in revenue for the individual producs.

Q1 2018 and FY 2017 - Geographic distribution of revenue - 2

DKKm	FY 2017	FY 2016*)	Q1 2018	Q1 2017	*Growth*	*Growth in local currencies*	*% of total*
EUROPE:							
Abilify Maintena	637	508	**184**	154	*19%*	*20%*	*25%*
Brintellix	376	220	**122**	81	*50%*	*50%*	*16%*
Cipralex	643	760	**163**	168	*(3%)*	*(2%)*	*22%*
Other pharmaceuticals	1,149	1,424	**276**	305	*(9%)*	*(9%)*	*37%*
Total revenue	**2,805**	**2,912**	**745**	**708**	***5%***	***6%***	***100%***
INTERNATIONAL MARKETS:							
Abilify Maintena	105	80	**29**	25	*16%*	*26%*	*3%*
Brintellix	313	179	**105**	80	*32%*	*49%*	*11%*
Cipralex/Lexapro	1,582	1,571	**469**	469	-	*11%*	*50%*
Ebixa	469	486	**141**	176	*(20%)*	*(14%)*	*15%*
Other pharmaceuticals	937	959	**197**	238	*(17%)*	*(11%)*	*21%*
Total revenue	**3,406**	**3,275**	**941**	**988**	***(5%)***	***5%***	***100%***

*) In 2016 effects from hedging is included in revenue for the individual producs.

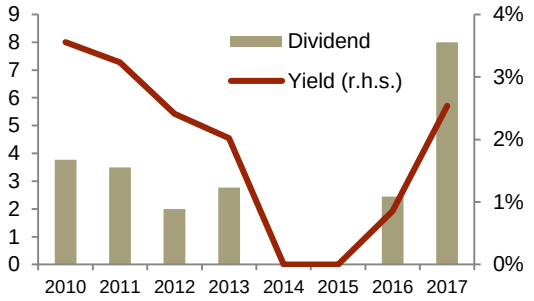
Q1 2018 - Cash generation

DKKm	Q1 2018	Q1 2017	FY 2017
Cash flows from operating activities	**2,003**	651	4,045
Cash flows from investing activities	**(795)**	30	(1,830)
Cash flows from operating and investing activities (free cash flow)	**1,208**	**681**	**2,215**
Cash flows from financing activities	**(1,588)**	(157)	(2,235)
Net cash flow for the period	**(380)**	**524**	**(20)**
Cash, bank balances and securities, end of period	**3,292**	2,745	3,677
Interest-bearing debt	**-**	(1,770)	-
Net cash/(net debt)	**3,292**	**975**	**3,677**

Q1 2018 - Balance sheet and dividend

DKKm	31.03.2018	31.12.2017
Intangible assets	7,933	7,565
Other non-current assets	3,260	3,347
Current assets	8,560	8,844
Assets	19,753	**19,756**
Equity	11,633	12,181
Non-current liabilities	1,125	1,096
Current liabilities	6,995	6,479
Equity and liabilities	19,753	**19,756**
Cash and bank balances	1,771	2,155
Securities	1,521	1,522
Interest-bearing debt	-	-
Interest-bearing debt, cash, bank balances and securities, net end of period	3,292	**3,677**

Dividend (DKK)



- Dividend of DKK 8.00 per share for 2017, corresponding to a payout ratio of 61%
  - A total of DKK 1.6 million and a yield of 2.5%*
- Dividend policy: Pay-out ratio of 60-80%

*Based on the share price of DKK 315.00

Costs – Full year figures

DKKm	2017	2016	2015	*2017 (Δ%)*	*2016 (Δ%)*
Revenue	**17,234**	15,634	14,594	*10%*	*7%*
Cost of sales	**3,881**	4,082	5,395	*(5%)*	*(24%)*
Sales & Distribution costs	**5,649**	5,488	6,706	*3%*	*(18%)*
Administrative expenses	**833**	805	1,160	*3%*	*(31%)*
R&D costs	**2,705**	2,967	8,149	*(9%)*	*(64%)*
Total costs	**13,068**	**13,342**	**21,410**[1)]	***(2%)***	***(38%)***
EBIT	**4,408**[2)]	2,292	(6,816)	*92%*	-
Core EBIT	**5,115**	3,477	847	*47%*	*311%*
Cost of sales	***23%***	26%	*37%*	-	-
Sales & Distribution costs	***33%***	35%	*46%*	-	-
Administrative expenses	***5%***	5%	*8%*	-	-
R&D costs	***16%***	19%	*56%*	-	-
EBIT margin	***26%***	15%	*(47%)*	-	-

Included are 1) Restructuring costs and impairment of product rights of around DKK 7bn. 2) Includes Other operating income

For more information, please contact Investor Relations

- Lundbeck's shares have been listed on the Copenhagen Stock Exchange since 18 June 1999
- Lundbeck has a Deutsche Bank sponsored ADR programme listed in the U.S. (OTC) effective from 18 May 2012
- For additional company information, please visit Lundbeck at: www.lundbeck.com

Number of shares	199,047,808
Own shares	388,327
Classes of shares	1
Restrictions	None
ISIN code	DK0010287234
Ticker symbol	LUN DC/LUN.CO (Bloomberg/Reuters)
ADR programme	Sponsored level 1
ADR symbol	HLUYY
Ratio	1:1

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Financial calendar

6M 2018	8 August 2018
9M 2018	7 November 2018
FY 2018	5 February 2019

Thank you!

Lundbeck