3.

Immunodiagnostics

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[1] EBIT is defined as the “Operating Result" net of interests and taxes – [2] EBITDA is defined as the “Operating Result”, gross of amortization and depreciation of intangible and tangible assets. EBITDA is a measure used by the Company to monitor and evaluate the Group's operating performance and is not defined as an accounting measure in IFRS and therefore shall not be considered an alternative measure for assessing the Group's operating result performance. - [3] Adjusted EBITDA is defined as Adjusted EBITDA, excluding extraordinary costs and expenses incurred in the Luminex transaction announced on April 11, 2021 - [4] The Net Financial Position is defined as the algebraic sum (positive balance sheet assets and negative balance sheet liabilities) of cash and cash equivalents and other current financial assets, minus current financial liabilities and non-current financial liabilities.-[5] Free Cash Flow is defined as the set of means available to the Company and is equal to cash flows deriving from operating activities net of interest received or paid, and net of investments and divestments of fixed assets.

Diasorin Immunodiagnostic Menu Development

2000

PHASE 1
RIA/EIA (Diasorin)

Conversion from RIA/EIA to CLIA
~ 80 tests

- From RIA/ELISA to CLIA on LIAISON® automated platform
- Increase Menu, 6/8 new tests per year

2010

PHASE 2
EIA/CLIA (Partnerships & acquisitions)

Expansion of menu through acquisitions and partnerships
~ 120 tests

- Acquisitions → Murex, Biotrin
- Partnerships → Meridian, Qiagen
- LIAISON® XL launch

2023

PHASE 3
FOCUS on new paradigm

Development of new biomarkers and new markets
Value Based Care products

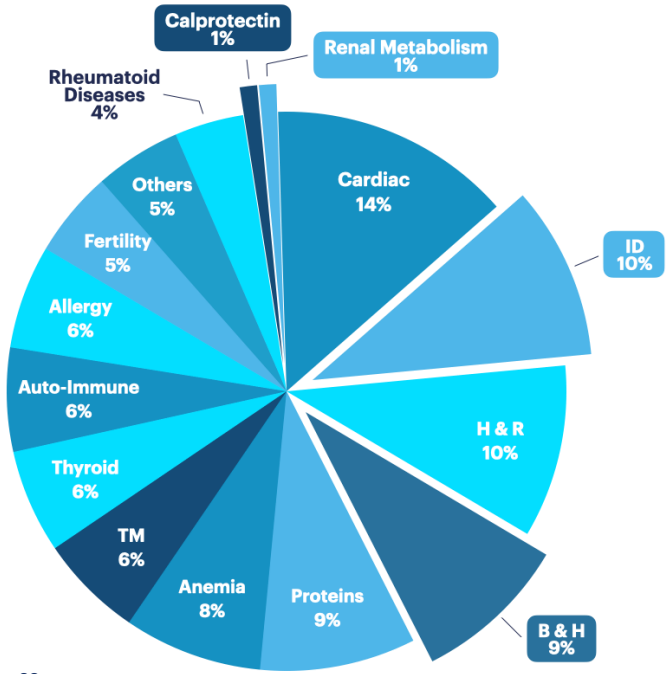
- Combine AI & IVD
- Focus on prognosis & disease management
- Address regulatory and market access challenges
- Enhance clinical education
- Complementary ID molecular programs

Immunodiagnostic Market, Size And Rationale For Phase 3.0

IVD market = € 60 billions (Excluding Covid)*

- Whereof 23% → Immunoassay market size = 14 €/bn
- Estimated growth: 2% on annual base

EU Immunoassay market segmentation (Q2'23 EDMA(**) Data)
(22% of total Immunoassay market)*

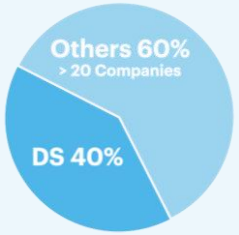


(*) Berenberg MedTech report, Nov 22

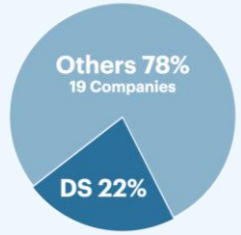
(**) EDMA: European Diagnostic Manufactures Association

EU EDMA(**) data 12 months rolling, Q2'23

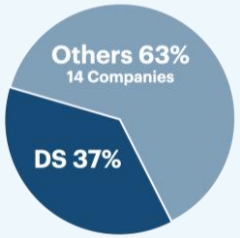
Infectious disease



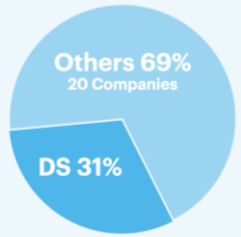
Bone & mineral



Calprotectin



Renal metabolism



DS = Diasorin

DIASORIN STRATEGY:
Driving the market grow with 3rd generation assays in ID and GI/Stool areas

QIAGEN Partnership On QuantiFERON® Technology

QIAGEN QuantiFERON® Technology and Diasorin IVD Testing expertise combined

Diasorin

Leader in immunodiagnostic assays (B Cells)

QIAGEN

Leader in QuantiFERON® IGRA Technology (T Cells)

Tuberculosis infection

Early Lyme disease

Tuberculosis Infection: Market And Opportunity

- Tuberculosis (TB) caused by *Mycobacterium tuberculosis* with 2 broad clinical forms:
  - Latent TB infection (LTBI)
  - Active TB disease
- LTBI can progress to active disease in patients with suppressed immune systems
- Patients with active disease can spread infection through aerosol transmission
- WHO Global Tuberculosis program goal = TB free with zero deaths, targeting:
  - Highly vulnerable population
  - Healthcare workers and beyond, such as in the fields of social protection, labour, immigration and justice
- TB testing & diagnosis
  - Skin test: injection of a small amount of tuberculin into skin
  - Blood testing (IGRA) is looking for the immune response to infection, not the pathogen itself
  - Blood testing (IGRA): searching for the immune response to *Mycobacterium tuberculosis* infection

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Assays measuring IFN-γ release

TB infection

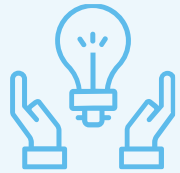
QIAGEN

Stimulation of patient whole blood sample using QuantiFERON® IGRA Technology

Worldwide estimated LTBI market size ~ **70-80 mln tests**

North America 20 million
Latin America ~8 million
EMEA ~ 5 million
Japan ~ 7 million
China ~15 million
Asia-Pacific ~15 million

A winning partnership solution (**IGRA Technology + Automation**)



~30% of TB testing already converted from skin test in last few years

LIAISON® LymeDetect® To Address Lyme Disease: An Emergent Challenge

- Lyme disease caused by the bacterium *Borrelia burgdorferi* transmitted to humans by infected *Ixodes* ticks
- Symptoms may appear within a few days and/or later (months), following an infectious tick bite typically during spring and summer
- Common sign of early infection: bulls eye rash (*erythema migrans)* 1-2 weeks post exposure
- If untreated, Lyme diseases can evolve into severe forms with neurological symptoms, heart problems and arthritis
- Testing & diagnosis: serology IgG and IgM (less sensitive in Early Lyme disease) cannot differentiate between past and new infections

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Assays measuring serology IgG/IgM

LymeDetect®

QIAGEN

Stimulation of patient whole blood using QuantiFERON® IGRA technology

Potential annual U.S. market for **Acute Phase** threatening: **~120 $/mln**

Algorithm leading to **increased clinical determination**: **>30-50%** vs. sTTT

The only test available for Acute Phase

LymeDetect® Diagnostic Algorithm (IgG + IgM + IGRA)

Partnership benefits:

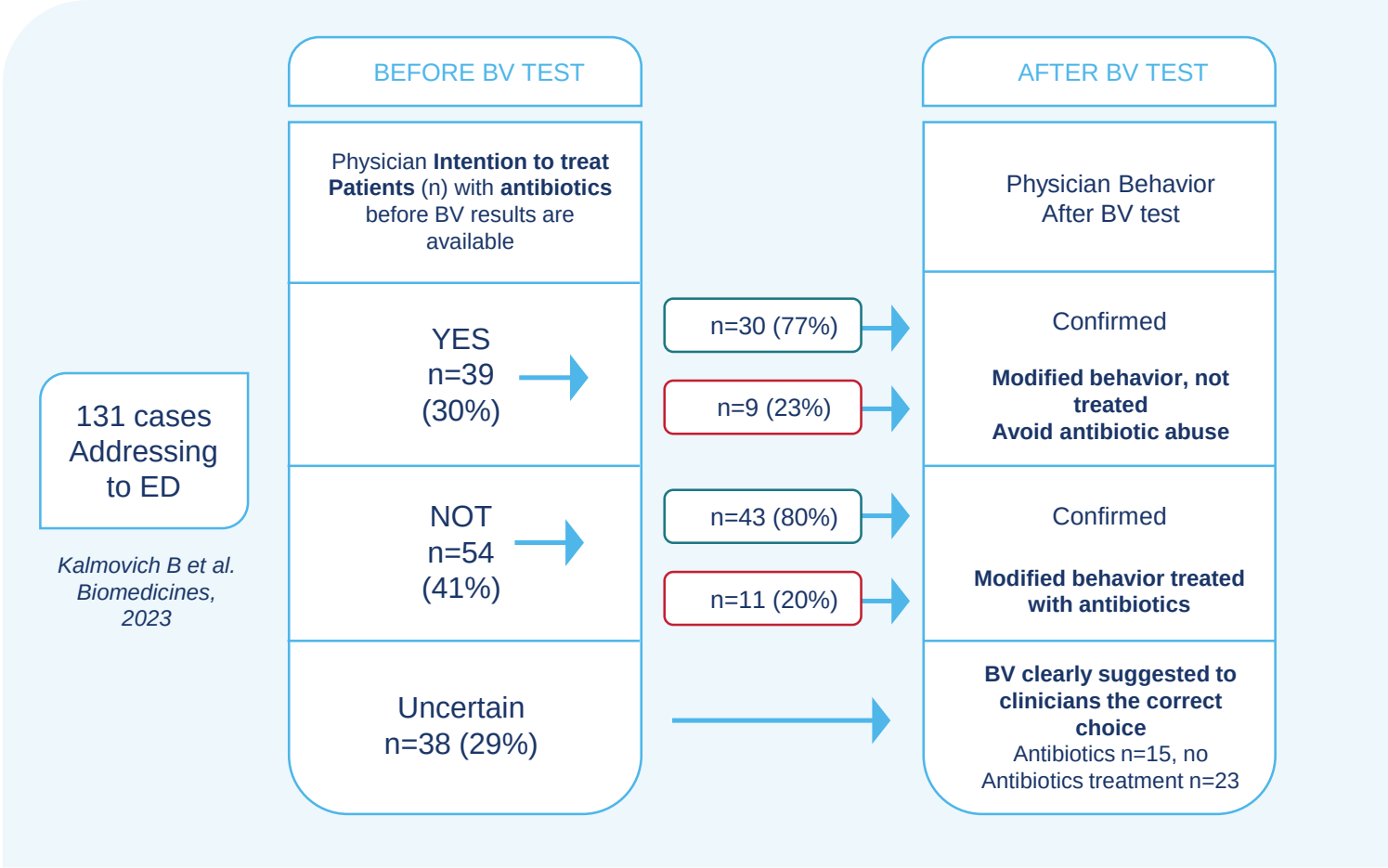
- **Improving** early patient **identification**
- **Better** driving of **antibiotic therapy decision** and **appropriate treatment**

Focus: U.S. market, with go-to-market strategy in place.
Expected submission: Dec 2023

LIAISON® MeMed BV®, Solving The Clinical Dilemma: Bacterial Or Viral Infection?

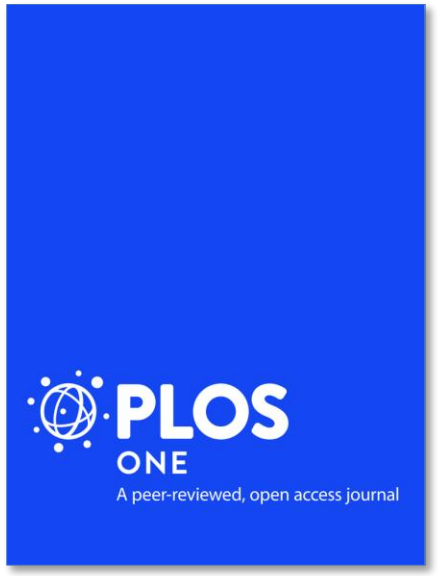
- 4.7 mln of pediatric patients/year in the U.S. address to Emergency Department (ED) with suspect infections
- ED Physicians challenged to quickly decide if patients need:
  - Hospitalization, warding or safely dismission
  - Treatment with antibiotics, considering data report showing:
    - 40% antibiotics overuse
    - 20% antibiotics underuse = risk of exacerbation
- A semi-quantitative assay test measuring 3 non-microbial (host) signature proteins (TRAIL, IP-10, and CRP)
- An algorithm defining bacterial or viral likelihood score for infection (discrimination B/V)

LIAISON® MeMed BV®: empowers clinical decision-making



MeMed BV® high performance independently confirmed in select studies

Thousands of patients enrolled (2013 - 2022)



March 2015
Curiosity study

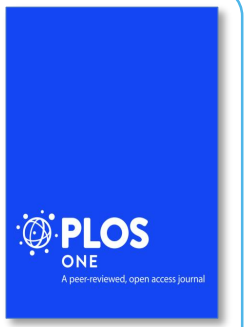
April 2017
Opportunity study

October 2017
Pathfinder study

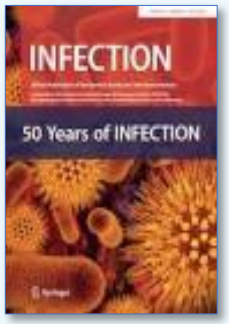
October 2021
Autopilot study

MeMed BV® high performance independently confirmed in select studies

Multiple new evaluations, and real-world evidence on thousands of patients show positive results - published by customers and collaborators in 2023



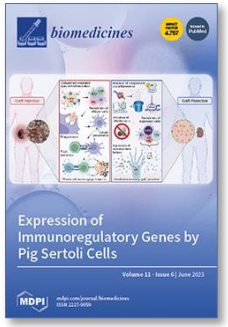
January 2023
Rosetta study



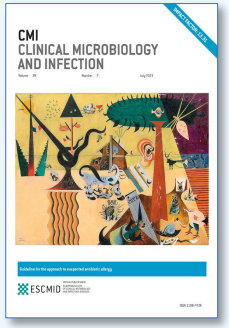
February 2023
German RWE study

March 2023
Maimonides Operational study

May 2023
COVID Severity study



May 2023
Maccabi Pilot real world evidence study



June 2023
Observer study

June 2023
Texas Children's Validation study

November 2023
Spirit study

Focus On U.S. MeMed Reimbursement And Market Creation

Oct 2022 — Obtained PLA Code (AMA)

Jan 2023 — Obtained CLFS Payment (260$)

2025 — Ongoing Processes:

- Unbundling (from APC flat payment to CMS price)
- Coverage requests, CMS & Private Payers: clinical utility data from MeMed Jupiter trial

MeMed & hospital strategy

- Expanded presence to 5 regions: additional 15 sales reps + 6 scientific professionals
- Offering a complete solution for LIAISON® XL/XS on Hub centers
- Demand creation team of 11 professionals added to drive sales cycles and increase utilization rates
- Focused & Modular geo-targeting campaign in key growth regions through Doximity and Sermo platforms to create clinicians interest & leads for outside the lab

Primary U.S. Focus, potential market 400 $/mln
Program in place for EU

Differential Diagnosis IBD With Novel Biomarkers And Machine Learning Tools

- IBD(*) diagnosis: requires the differentiation from IBS(**) and a conclusive diagnosis is often reached by colonoscopy (invasive and costly procedure)
- Calprotectin is a “non-specific” marker for intestinal neutrophilic inflammation and is higher when IBD is present
- Low fCAL levels (<20 µg/g) = very specific in ruling out IBD, high levels (>250-300 µg/g) = likely indicative of IBD
- The challenge is to provide physicians with an assay aiming at 100% diagnostic precision overcoming the zone of diagnostic uncertainty and accelerating diagnosis time

Global Burden Of Inflammatory Bowel Disease, 2017
(*) Inflammatory Bowel Disease
(**) Irritable Bowel Syndrome

Diasorin

A new assay calprotectin + 2 fecal biomarkers to identify the IBD patients in the less performant range

An algorithm based on computational method will combine the biomarkers in a single reportable result intended to aid in supporting rule-in/rule-out decision for IBD/IBS

Calprotectin: growing at double-digit rate in many geographies (e.g. China & U.S)
Estimated market opportunity with Calprotectin 3.0: 140 €/mln

Machine learning tool = identifies new fecal biomarker combinations

Calprotectin 3.0: improves IBD patients identification from 70% to 99%

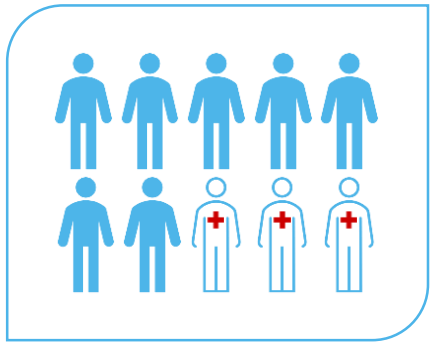
Calprotectin 3.0 algorithm

New Calprotectin 3.0 algorithm will:
- Reduce unnecessary colonoscopies (cost saving)
- Improve patient quality of life with a timely and precise diagnosis

Expected submission: 2025

Impact On Patient Pathway With Calprotectin 3.0

Patients presenting with chronic abdominal pain (~30% sick)



Healthy

Sick

Current flow

Positive (33%)

Negative (49%)

Gray zone (18%)

Calprotectin 3.0 algorithm

Positive (30%)

Negative (70%)

Undesired effects

- Unnecessary colonoscopies on healthy subjects (~8% of tested subjects)
- Delayed diagnosis to sick individuals (~2% of tested subjects)
- Repeat of Calpro tests, and unnecessary colonoscopies if inconclusive (all 18% of tested subjects)

Key advantages

- Timely and accurate diagnosis
- Avoidance of unnecessary colonoscopies (invasive and costly for the healthcare systems)

LIAISON® XXL: The Next Step Forward In The Instrumentation Journey

Faster systems to increase productivity

LIAISON® XL

> 7,000 Installed Base
> 1,000 Connectivities

LIAISON® XXL

Same cartridge for all the LIAISON® solutions

XS
XL
XXL

Large labs and hospital consolidation + Continuous Diasorin portfolio expansion

New LIAISON® XXL platform

- Higher Productivity
- Higher footprint efficiency
- Increased throughput regardless of mix and connectivity
- Better connectivity with other suppliers
- Increased size flexibility using same cartridge technology
- Tailored customer solution, sample bay, direct water supply

- Convert gradually existing LIAISON® XL installed base to allow customer's growing needs
- **Expected submission: 2025**

Diasorin 3.0

Investor Day 2023

December 15, 2023