Diasorin S.p.A.

"First Quarter 2025 Results Conference Call"

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MODERATORS: CARLO ROSA, CHIEF EXECUTIVE OFFICER

PIERGIORGIO PEDRON, CHIEF FINANCIAL OFFICER

OPERATOR: Good afternoon. This is the Chorus Call conference operator. Welcome, and thank you for joining the Diasorin First Quarter 2025 Results Conference Call. As a reminder, all participants are in listen-only mode. After the presentation, there will be an opportunity to ask questions. Should anyone need assistance during the conference call, they may signal an operator by pressing "*" and "0" on their telephone.

At this time, I would like to turn the conference over to Mr. Carlo Rosa, CEO of Diasorin. Please go ahead, sir.

CARLO ROSA: Yes. Thank you, operator. Good afternoon, and welcome to the Quarter 1 results for Diasorin. As usual, we're going to make some general comments about the quarter, and then Mr. Pedron, our CFO, will drive you through the numbers.

So, Quarter 1 was a very good quarter for Diasorin, with revenues of almost €10 million, 7% growth versus Q1 '24. If you look at the base business, excluding COVID, it's 9% in line with expectation. COVID revenues, €5 million in the quarter. I remind you that the guidance was…for '25 was €20 million, so we are in line with guidance for COVID as well.

EBITDA margin, 34%, is a very solid start of the year, with underlying growth despite micro headwinds. The immuno is back to high single-digit growth. The molecular respiratory did benefit from pickup of the flu season in Q1, and it's a very good start of the year for our multiplexing. They grew 25%, and I will comment later, and also for our targeted single-target specialties in molecular, which is growing now 14%.

And then, as far as LTG, we had a very strong quarter, 13% up versus last year. Although, I'll be commenting later, let's make sure that we understand there is a phasing effect of certain bulk orders in Q1 that made this quarter

extraordinary in terms of growth. And our Quarter 1 performance confirms our guidance for full years of 8% growth of base business revenue and 34% EBITDA margin.

Now, let's get into the different segments. Let's start from the immunodiagnostic. The immunodiagnostic ex-COVID grew 8%, in line with expectations and confirming the strong positive trend of immuno, notwithstanding headwinds in China. If we look at CLIA, that does represent the majority of revenues in immuno, it grew overall 9% in the quarter, driven by the excellent performance of CLIA, our specialty menu, and our US hospital strategy that continues to deliver according to expectations.

Clearly, all this is partially offset by the impact in China of VBP, but by the same token, we just got approval in China of our LIAISON XL manufacturing unit, and then there so we expect in the next few quarters that we will be able to react to this negative impact. I will comment more specifically on China later.

Let's look at North America, plus 18%, so it continues to be the engine of growth for Diasorin, CLIA, grew 19%. Again, driven by the success of the US hospital strategy. And the Quarter 1 placements are in line with full year expectations and consistent with the 2025 target of achieving roughly 600 placements or 600 hospitals in the US. And again, as in the previous quarter, this has been possible by the increased commercial footprint following the Luminex acquisition.

As far as Europe is concerned, plus 5% in Quarter 1, driven by CLIA, plus 6%. And the result is partially offset by what we discussed, I think, outbreaks in mycoplasma and Parvovirus that we experienced in 2024 in some of the European countries. So, strong growth, even if the comparison

on quarter-to-quarter was unfavourable because, again, of outbreaks that happened in 2024 and did not happen in 2025.

Export pretty much grew in all geographies, in line with the overall business growth in Diasorin, so not diluted. China with a minus 18% in the quarter. Most of the impact is due to the VBP. The overall effect of VBP full year is around €5 million. So, this is in line with our expectations. China continues to be a very difficult market. There's a combination of, again, VBP, price pressure, and also competition by local players, although for Diasorin in China represents less than 3% of revenue, so the impact for the company is fairly limited.

And again, last comment, as far as immunodiagnostics is concerned, QuantiFERON continues to be a driver of growth together with stool panel and in both cases, we registered double-digit growth, and we also have a good performance of all the other infectious disease assays.

As far as MeMed is concerned, our ambition for 2025 is to have 25 new customers ending by year-end, ending with approximately 100 signed customers at the end of 2025. And in Q1, we signed 25, so we are in line with achieving as well the target for MeMed in number of customers by year-end. So, we see an acceleration of MeMed, which is a combination of the good results that were published in Journal Plus increased adoption due to all the marketing activities that together with MeMed we did in the last 2 years.

When it comes to…when it comes to now molecular diagnostics, let's move to molecular diagnostics, molecular diagnostics ex-COVID grew 7%. If we exclude ARIES, ARIES is a platform that was developed by Luminex, and we did sunset at the end of last year. If we exclude the effect of the ARIES sunsetting, which is roughly €5.5 million that happened in H1 '24, and we

don't see it any longer in '25. So, ex-ARIES, the growth goes from 7% of molecular to 12%, so double-digit growth. Multiplexing Quarter 1 growth of 25% in line with full-year expectations.

I remind everybody that we share with the market our target to grow the business, the full multiplexing business, by 25% from €60 million to €75 million Q1 revenues line. We're in line with that. As far as the LIAISON PLEX, very good performance in terms of placement, notwithstanding the fact that this happened during the flu season. So, now we expect an acceleration of placement during an off-flu season to get ready for the next flu season by the end of 2025.

One more comment in molecular to do with our targeted molecular business is the, I call it, old Diasorin brand, which is not multiplexing. It's single-plex, and we continue to have a very strong growth in this segment due to our specialty offering, and I remind everybody that Candida auris, which was approved a couple of months ago, that is really driving new placements of LIAISON MDX in the US market. We are the only company with an FDA-cleared assay for Candida auris.

PLEX submissions in line with what we have projected and discussed during our Analyst Day/Market Day in 2023. So, respiratory, as you know, has been approved last year. Blood culture, BCY, was approved in 2024, BCN, approved in April, a month ago, and we expect BCP to be approved within the next 8 weeks.

And we are done with the clinical studies for GI, and we will submit GI by the end of 2025. So, we are in line with expectations and in line with our plan that we share with the market again in 2023.

As far as customers for PLEX placements, it's not noticeable. The fact that we now place more systems with the PLEX approach rather than fix is now 60% of customers are using PLEX and 40% are using fix. But the trend is certainly that placement and adoption is going to move toward the flexible panel, which is the real innovation that the association is bringing to the market.

And as far as a split of labs, 20% of placements are in commercial labs and 80% in hospital labs, which is expected with respiratory since the majority of the market actually sits in the hospital segment. The VERIGENE other panels are stable as expected.

LIAISON NES we have concluded the clinical studies in the US, and we are on track for filing the LIAISON NES, which is our decentralization platform [indiscernible] COVID and RSV. We are on-track for filing in July 2025, and again in line with the timeline that was communicated during our Analyst Day in 2023.

Next panel to come that is currently under clinical is Group A Strep, and we expect that we're going to wrap up clinical and submission is expected by Quarter 4 of 2025. Again, in line with what was communicated to the market.

Last but not least, the LTG the Licensed Technology, is a very solid result in the quarter 13%. And the strong performance is due to the fact that the in-diagnostic growth continues to be strong as well as in pharma customers, and this has been partially offset by the result of [ph] life science partners, which are more related linked to the academia and funding and everything that is happening these days in the US.

Again, the result is also affected by the fact that we have some bulk shipments in Q1 that will not repeat in the second quarter. So, we reiterate that our expectation is that LTG by year-end will grow low single-digit.

A couple of comments, and Mr. Pedron is going to go through it. US tariffs, and now we're talking about the tariffs and counter tariffs, which have been now raised primarily between US and China, because as you know, there are no tariffs as of today for medical products made in US and exported to Europe.

The impact for the group is negligible, non-material. We expect that in 2025, the impact at the EBITDA level is going to be below €5 million. So to the contrary of other companies, what has been reported by other companies, because of the fact that we do have a footprint that is local-for-local, so a lot of US products are actually manufactured in the US for the US market, we are not exposed to the tariff.

At this point, I'm going to turn the microphone to Mr. Pedron, and he's going to take you through the numbers.

PIERGIORGIO PEDRON: Yes, Carlo. Good morning. Good afternoon, everybody. Thank you for joining Diasorin Q1 2025 earnings call and for the interest you are showing in our company. In the next few minutes, I'm going to walk you through the financial performance of the first quarter, and then I will turn the line to the operator for the Q&A session.

Q1 2025 total revenues at €313 million are above last year by 8%, despite the expected decrease in COVID sales down by €4 million or almost 50%. The business ex-COVID is growing in the quarter at constant exchange rate by 9%. Therefore, a touch better than the full year guidance because of the solid performance of immuno and molecular businesses in combination

with some tailwind coming from a couple of backorders of LTG customers, net of which we would have been in line with the guidance. The FX impact in the quarter is positive for about €4 million.

Talking about exchange rate, let me please remind you that since our business is exposed to USD/euro fluctuations, we might see some FX headwind for the remainder part of the year, considering where the US dollar is trading now compared with the last 9 months of 2024, which saw an average exchange rate of about 1.08 USD per euro.

As a rule of thumb, let me please remind you, as I've done several times in the past, that for every 0.01 movement of the dollar against the euro Diasorin revenues moves by about €6 million to €8 million on an yearly basis. And that the adjusted EBITDA moves by about €2 million to €3 million again on an yearly basis.

First quarter adjusted gross profit at €205 million, 65% of revenues, is better than last year by 7% with a ratio of revenues, which is substantially in line with 2024, which closed at 66%. Q1 '25 adjusted operating expenses at €118 million increased by 3% compared to 2024 with a ratio of revenues of 38% vis-à-vis 40% last year.

The increase at constant exchange rate is just a touch above 1%. And the improvement of the operating leverage, about 200 basis points in Q1, will be the main driver of our margin expansion as discussed several times over the last quarter calls and during the Capital Market Day we had back at the end of December '23.

Other adjusted operating expenses negative for €4 million are substantially in line with 2024. As a result of what just described, Q1 '25 adjusted EBIT

at €83 million or 27% of revenues is better than previous year by 13% or €9 million.

Adjusted interest income at €1 million is slightly lower than last year, which closed at €2 million, mainly because of lower yield on our cash balance, coming mainly from a reduction of interest rate. Whereas the adjusted tax rate increased from 23% to 24%, mostly because of determination of the patent box regime in our Italian legal entity. This measure has not been renewed by the Italian fiscal authority as expected and shared with investors during the last Capital Market Day. Year-to-date adjusted net result at €64 million or 20% of revenues have increased by €5 million or 9% compared to 2024.

And lastly, Q1 '25 adjusted EBITDA at €107 million or 34% of revenues is better than last year by €10 million or 10%, with a margin of 34% in line with our full year guidance. The EBITDA margin at constant exchange rate has increased by about 100 basis points compared to Q1 2024.

Let me now move to the net financial position. We closed Q1 '25 with a net debt of €672 million, €55 million more than the end of 2024. This variance is largely driven by the combined effect of the very sound free cash flow generation, €42 million in the quarter, more than offset by €97 million debt towards those shareholders who have exercised their withdrawal rights in connection with the recent adoption of the announcement of the increased voting rights mechanism.

Lastly, we confirmed 2025 guidance, which is calling a previous year exchange rate for revenues ex-COVID to grow by about 8% with COVID sales around €20 million and then adjusted EBITDA margin at about 34%.

Please note that this guidance includes the expected impact of the tariffs recently introduced in the different geographies where we do business. We all acknowledge that the overall scenario is still in flux, but considering what we know today and the mitigation actions we have already introduced and are about to implement, the estimated impact on our profitability is deemed not material.

With that said, let me please turn the line to the operator to open the Q&A session. Thank you.

Q&A

OPERATOR: Thank you, sir. This is the Chorus Call conference operator. We will now begin the question and answer session. Anyone who wishes to ask a question may press "*" and "1" on the touchtone telephone. To remove your question, please press "*" and "2." We kindly ask you to pick-up the phone when asking questions.

The first question comes from Kavya Deshpande of UBS.

KAVYA DESHPANDE: Hi, Carlo. Hi, PG. Thank you for taking my questions. Just…the first was just on your tariff estimates. So I completely understood that it's a very low exposure. I think you said about €5 million of EBITDA. Could I please double-check what this estimate covers? For instance, does it cover raw materials and component shipments as well as finished goods?

And then my second question was on immunodiagnostics. So, clearly, the US hospital strategy has been accelerating for nearly 18 months now. Are you seeing any material growth in the menu consumption and revenue pull-through of hospitals that have been customers year now? Or is revenue

growth here really being driven by new customer wins and new LIAISON placements? Thank you.

PIERGIORGIO PEDRON: Okay, I will start. Hi, Kavya. This is PG speaking. I will take the question on tariffs. So what includes is all the imports from country of origin, let me say Europe and UK, into the US, which are subject to 10% tariffs, whereas goods from the US…our goods, I mean reagents and you know, MedTech goods coming from US to Europe, are not subject to any kind of tariffs. So, it's 10% on our exports from European countries into US and goods moving from the US to China, which are subject to 125% tariffs.

So, this value…the lower than €5 million impact to our EBITDA that Carlo was mentioning, is referred to these 2 flows of course. I'd like also to say, though, that you know, if we look at what's really happening on the ground in China to these 125% tariffs, is that in reality, even though the tariffs are there, what we see when we clear customs is that more often than not, you know, no tariffs are really applied. And this is, we understand, not an exception for Diasorin, we understand this is happening more broadly for reagents, goods, for diagnostic reagents, goods entering into China, which means that if what we are observing now eventually will become a reality and we know that the Chinese government is talking to the US government about these tariffs, eventually this €5 million impact can be slightly diminished.

CARLO ROSA: Hi, Kavya, I'll talk about the growth. As you said, this has been an outstanding program and still we have a long runway to go. I would say that growth is driven as a combination of new placements. As said, it's 100 new customers that we add to the funnel every year, plus the fact that it's typically in our business, we have an add-on policy and so we actually go and sell more products to beef up the menu on the existing base. I really cannot tell you the combination, I mean, the weight of these two effects, but

I would assume that placements clearly is at least 70% of growth, and then add-on represents probably around 30%.

KAVYA DESHPANDE: Understood. That's super helpful. Thank you very much.

OPERATOR: The next question is from Jan Koch of Deutsche Bank.

JAN KOCH: Good afternoon, and thanks for taking my questions. I have 2, please, the first one is on your multiplex business. I was surprised that this business didn't grow above your full year expectations of 25% in Q1, given the strong flu season and the seasonal effect. Should we expect a weaker growth in Q2 and Q3 given the lack of the flu season?

And then...secondly, on the planned launch of the NES, could you share your point of care strategy? And are you planning to provide placement numbers of this instrument once you have launched it.

CARLO ROSA: Yes, listen, you need to understand that to the contrary of other companies we don't provide flu. We provide the overall dual multiplexing base. And we do have a multiplexing business today that the majority of, which today is not respiratory, okay. Because traditionally our VERIGENE 1 business, which is still makes the bulk obviously in Quarter 1 is non-respiratory driven with more blood and NGR.

Therefore, we expect clearly since we're building a base of a respiratory business, we expect that during the next respiratory season, the weight of the respiratory is going to be higher, right? Then what has been in Q1 for this reason, because we are building a base now of placements of PLEX, which are de facto driven by respiratory. We are going to get approval of the last blood panel, as said, within the next couple of months. We do have expectations of placements and revenues coming from blood, but very

limited in 2025. Okay, simply because we're building again the base for blood in 2025. So to me 25% of Q1 is exactly what we were expecting in order to make the overall growth by, by year end.

PIERGIORGIO PEDRON: If I can add a comment, Jan, just building on what Carlo said, I believe in the past we shared with investors that differently from our…from different players in this space, our respiratory panel, let me call it that way, is about 30% of our multiplex sales. So considering that, you know, we have the remaining part of the multiplex business, which as Carlo said, you know, VERIGENE 1, I mean 1, is not growing, you understand that the 25% including it all, really what you should expect in order to get the 25% of TRN. So we are where we wanted to be at the end of Q1.

CARLO ROSA: Now, your second question about LIAISON NES, I'm a little bit confused because we are 1 year away from commercialization. So we'll talk about LIAISON NES at the right time today in terms of how we're going to be reporting the systems. I am not really sure I'm going go on placement, but again, too early to say. Today, what we are focusing on, our effort clearly is to wrap up and submit, and we are on time for the submission on plan. And then we're working on the distribution strategy. That as you know, for the LIAISON NES, we always stated that there are 2 markets, one market is the pure POL. The other market in the US is within IDN systems where you have Hub & Spoke model. So for the Hub & Spoke model, the hospital market, we do have the sale force [ph] to serve that market. For here, we don't have the sale force. And everybody else, we are selecting a distributor to partner with.

JAN KOCH: Makes sense. Thank you. One follow-up, if I may, on LT. Could you help us a bit with the phasing of this business for 2025, given that yes you benefited from some phasing in Q1?

PIERGIORGIO PEDRON: So I believe our expectation for the LTG business full year growth is low to mid-single digit. This is where we guided the market. I believe at the end of last quarter call I said that if you break down the 8% base business growth that, we are expecting for 2025, directionally, you should expect molecular to grow a little bit faster than 8, immuno around 8, and LTG below 8. So these are low to mid-single-digit.

Difficult to make projections because, as you know…and as you, I guess, you might have seen from what other life science companies reported, these cuts to NIH funding in the US might have an impact there. So I believe you know, we will understand better over the next few quarters. Please don't forget though that give or take 50% of our LTG business is going to diagnostic companies. So that part of the business is not going to be exposed to these cuts that we see happening in the US.

JAN KOCH: Understood. Thank you.

OPERATOR: The next question is from Maja Stephanie Pataki of Kepler Cheuvreux.

MAJA STEPHANIE PATAKI: Hi, good evening. I would just like to follow-up a bit about the question that Jan posted on the seasonality of the LIAISON PLEX VERIGENE business. Now, thank you very much for providing again or reminding us again that respiratory is only around 30% of your…of the multiplexing franchise so far. But are you expecting that you know, the high respiratory season in Q1 will be compensated by the number of placements that you're posting in the market, and therefore you're not expecting to see seasonality impact throughout the year or how shall we think about that just to be sure that we don't get into miscalculations? That's Point #1?

And then Point #2, when it comes to the ARIES discontinuation and the impact on the molecular business. You've highlighted you know, 7% growth excluding the write-down of the business that would have been doubled growth. Is that how we should think about the business throughout the year or what kind of phasing are we to expect in that business? Thank you.

PIERGIORGIO PEDRON: Hey, Maja, this is PG speaking. I believe, you know, as I just said, if you need to think about the growth of the overall molecular franchise over 2025, you should expect a number, which is…and that's not a guidance, but it's just if you breakdown our drivers, the 3 main franchises, a number which is higher than the 8% overall growth. So call it, 10, 11, 12, I mean, but that is the ballpark, the number you should expect.

And if you look at Q1 without ARIES, I believe Carlo said 12%, which is in the ballpark number we would have expected.

I am not sure I understood your question on miscalculation on VERIGENE and PLEX. I believe what we said is that we closed last year with €60 million. We were targeting €75 million for the full of 2025. If I look at Q1 absolute number, you know, we are absolutely in line with the 75 target we gave also considering you know, the phasing. So you should expect some you know, for respiratory [indiscernible] with some higher sales in Q1 and Q4, but considering what we saw also for VERIGENE in the past, we don't expect that to be massive.

MAJA STEPHANIE PATAKI: Okay, great. Thank you. PG can I just quickly double check, when you say like indicative the 8% growth or higher than the 8% growth on the molecular franchise for the full year, this is including the discontinuation right? This compares to the 7% reported?

PIERGIORGIO PEDRON: Yes.

MAJA STEPHANIE PATAKI: Okay. So you are anticipating an acceleration throughout the year based on the places.

PIERGIORGIO PEDRON: Also because the effect of the ARIES is going to go away in the second part of the year, right. So yes, also because of that effect, you are going to see some acceleration, and don't forget that we just got power [ph] of the second panel of blood, the third one is coming. So we are also expecting some LIAISON PLEX blood sales in the last part of the year.

MAJA STEPHANIE PATAKI: Great. And then Carlo, just very quickly…sorry my line has been really, really bad and keep losing the call. Did you say that you are a year away from the commercialization of the NES platform?

CARLO ROSA: Yes, what we said is that we are committed in July and we are submitting for the CLIA waiver as well. So we expect that before next summer we will have the system approved. The CLIA waiver takes that longer then just 510(k). And but this is in line with our plan. So we are going to be working further to start catching the 2025 season…sorry 2026 season.

MAJA STEPHANIE PATAKI: 2026, right? Okay. Got it. Thank you very much for that.

OPERATOR: The next question is from Aisyah Noor of Morgan Stanley.

AISYAH NOOR: Hi, good evening. Thanks for taking my question 2 left from my side. The first one was on immunodiagnostics. The differential growth between North America 15% is quite dramatic versus Europe of 4%. Did you see some outsize benefits from the operation of the US for example, which could also continue in Q2 or was it a combination of, you know, the hospital strategy QuantiFERON, stool and everything else. Just trying to explain the differential growth between the 2 regions.

And then a follow-up to PG on FX, so just to clarify based on current spot rates, what is your estimate of the US dollar, kind of, weakness impact on sales and EBITDA for the full year? Thank you.

CARLO ROSA: Aisyah, I will take the first one. Look, we have seen a different in growth between Europe and US consistently over the last years and this is because of the fact that in US we have an aggressive strategy, which allow us to make a lot of new placements, again hospital strategy whereas in Europe, for us, is a more mature market. So it is not driven necessary by placements, it's driven by add-on and new assays. We always stated that our expectation is that Europe will normally should grow mid to high single-digit.

Now, what happened last year, we had clear growth double-digit because we had an effect of outbreaks which we could not proceed. This year, without the outbreaks but with a continuous volume improvement which is prenominal that we see in Europe and continue to see it in Europe. We don't see in the US. Now, we have 5%, 6% growth, okay. So you should be surprised as it happened in the last several quarters to say that the strong growth in US and more stability in the European market for you. PG.

PIERGIORGIO PEDRON: Hey, Aisyah. So if I…in Q1, we had a positive FX impact on our topline as we said. If I look at the last 3 quarters of 2024, we have had an average exchange rate of 1 or 8…$1 or $8 per €1. Now, we are 113. We were at 115 in end of April and May. So if I take, let me say, an average of 114, 115 for the last 9 months of the year, I am expecting an headwind over the full year, right, which is going to wipe out the benefit we had in Q1 of €32 million to €35 million at topline level coming from exchange rate, which is just you know, the usual 108 minus 115, 114 times 7 million annualized, and you need to take out the positive effect with that in Q1. And you get to 30 million, 35 million headwind on the topline coming from FX.

AISYAH NOOR: Okay, thank you very much.

PIERGIORGIO PEDRON: Thank you.

OPERATOR: The next question is from Shubhangi Gupta of HSBC.

SHUBHANGI GUPTA: Hi, thanks for taking my question. So my first question is on China. You saw decline in revenues in China. So could you explain was it down to volumes or there were more [ph] cuts in China and which segments were impacted more. And yes, I will follow up with the second question.

CARLO ROSA: Listen, China has nothing to do with volume. China has to do with a terrible situation in China, double whammy situation where you're hit on price severely but by VBP and you are hit on our ability to compete against Chinese local players that today are preferred suppliers by the Chinese hospitals. That's it. Nothing to do with testing volume. Testing volume actually in China continues to grow around 2%, 3% as we have seen historically, right. So I kept saying now for quarters to quarter that China unfortunately my very humble opinion in short mid-term is not a growth opportunity at all. It is just limiting damages hoping for the future and what's the hope for Diasorin is that this market will move to a specialist market. Because today for Diasorin, I would see the residual revenues we have are primarily mid to high throughput assays that today are noncompetitive and becoming very cheap.

The Diasorin strategy is to resist being there to activate on our manufacturing site and then transitional our menu to couple of opportunities that we see. TB is one. We have just submitted together with QIAGEN the LIAISON TB to the Chinese authorities and we expect to get approval in 12 months. So we are going to have a TB strategy with the LIAISON.

Today, we don't have…and stool. But if that doesn't happen, so if the market does not provision to specialty market, I see no good news coming from anybody that today is not Chinese and is not offering distinctive products because the Chinese today are very fierce competitors and they are favored by the local hospitals.

SHUBHANGI GUPTA: My second question is on MeMed. So I believe there was expectation of Jupiter's study as well in H1 of this year. Is there any update on it and what is the update on reimbursement levels for MeMed?

CARLO ROSA: There is no reimbursement. There is no update on reimbursement. As you remember, actually MeMed itself is taking care of it and as our expectation of reimbursement is not in '25, I remember it's more on '26. As far as the study Juno I think…Jupiter sorry, they've said that because of the great result of the Juno study which was actually probably last year, they decided to increase the number of certain populations that they were collecting. So, they delayed the Jupiter to the second half of 2025. It is because they want to beef up certain populations in order to make the data that already look great on Juno even stronger statistically. This update we have from MeMed.

SHUBHANGI GUPTA: Thank you.

OPERATOR: The next question is from Natalia Webster of RBC Capital Markets.

NATALIA WEBSTER: Hi, thanks for taking my questions. 2 follow-ups from me, please. The first on the respiratory season and the impact on molecular. Specifically for the targeted sort of legacy molecular business that's exposed to respiratory. Are you able to give us an idea of the contribution from the high flu season here? Is it still the case around 30% of this business is exposed?

And then my second question is just a follow-up on the MeMed BV. Can you remind us how many people are dedicated to pushing this test in the US, and what you're expecting in terms of continued marketing investment here? Thank you.

CARLO ROSA: Sorry on the MeMed I cannot take the question or give you an answer on the MeMed because you know, we have a competitor to come…and any…this information we consider confidential to the business…to the company. We are keeping the information I can give you is that we have a dedicated team, which is dedicated now not to develop more business but to bring home the pipeline that we've been working on. So, a number of hospitals that we already met several times in order to educate on the use of the products. To be more accurate is to close all these accounts and get to the 75-100 accounts closed by year end, which is our primary target. Meanwhile we are still working in digital campaigns. The dollar amount I cannot share. I'm a little bit…I don't understand the question on respiratory. Can you just repeat it?

NATALIA WEBSTER: Sure. It's just around…you mentioned before around the multiplex exposure to the respiratory season. I just wanted to follow-up on targeted [ph] molecular business and how much that's benefitted from the higher flu season in Q1?

CARLO ROSA: I think we said 30%.

PIERGIORGIO PEDRON: Really and more or less. More or less what we said is that if I look at the past, VERIGENE 1 right, because we just launched PLEX. Hey by the way, hi Natalia. This is PG speaking obviously. What we said in a few occasions is that different from other players in this space, our business…multiplex business was kind of less exposed to respiratory season. We said around 30% and what we also said in the past is that we did not observe considering

our customer base very material fluctuations of respiratory balances sales from quarter-to-quarter. We had obviously some relative cap in Q1 and Q4, but nothing super material.

NATALIA WEBSTER: Okay, thank you. And just a follow-up on MeMed. Given that the delay in the Jupiter study and the plans reimbursement there, is it fair to say that we should really see an acceleration in 2026 onwards from the contribution there?

CARLO ROSA: So, I think that you know, it's so relative, right? Our immuno is an 800 million franchise and so acceleration is clearly is on a relative to the side of the business. Now, if you talk about the absolute values, so MeMed growth per se yes, absolutely, but it's very important for us. We weren't looking, to be honest with you, up to 2 things, the MeMed business, the adoption, so number of hospitals. This is why we are fixated between closing 75 to 100 accounts by year end and the volume…the testing volume because what we noticed is that when the hospitals start using it, then you see an increased adoption, right? Today our statistic is limited, because we have a limited number of accounts. So, for us, it's very important to demonstrate at year-end that not only we have a base now, but we also have base that is consuming more of the assay because they learn how to use it.

NATALIA WEBSTER: Okay, thank you. Sorry, just one quick follow-up as well, and on LymeDetect. Is there any updates on the progress there towards FDA approval?

CARLO ROSA: On LymeDetect, I think it's being disclosed by QIAGEN but I'm not sure about this. So, we are in discussion with the FDA about the clinical study and how to classify a patient vis-à-vis the comparator study. So, we don't need to do more clinical study at this point. We need to get together more

clinical information on the patient sets that we have already run. So, stay tuned.

NATALIA WEBSTER: Okay, thank you.

OPERATOR: The last question is from Marianne Bulot of Bank of America.

MARIANNE BULOT: Yes, good evening and thank you very much for taking my question. I hope you can hear me. And the first one is on immunodiagnostic and on the geographies. I was just wondering, how do you expect the different geographies to play out for the rest of the year. Wondering if there were tougher comps in Europe for the full year or if you see some more forgers…some forgers more impacted by the tough response?

And my second question is on the tariff. Just wondering if you have tried to estimate what could be the impact if there were going to be a tariff from Europe onto goods manufactured into the US? Thank you very much.

CARLO ROSA: Look on the tariff questions from now Europe, we are not spending time to be honest with you, trying to play scenarios because as you have seen, scenarios are changing by the day. And also the…if you think about the Chinese all these announcement about massive tariffs and then shipments today of medical good are not subject to tariffs. And then the last shipment for us was 2 days ago. So it's a waste of plan. So, wait and see. Clearly the only exercise we did was what is known, and maybe there to stay which is the US tariffs and there as said, we give an estimate which is a tariff for us fortunately relatively immaterial.

It was very difficult to hear your first question. I think you're asking about immunoassay and trends moving forward, and if in the second part of the year, we see that there is less in terms of the effect of outbreaks, if it makes

a difference. We…actually the Q2, if I remember correctly, by Q2, beginning of Q3, the outbreak, parvovirus and micro was primarily gone. And so, I believe that this effect will ease up in Q4. So, Q4 you should see a cleaner effect versus the last year. US there was no effect to be honest with you. There were no outbreaks. The outbreaks were primarily European. So it's a regular trend, as far as, US is concerned. And then, that's it, right? I think that that was the question I hope.

MARIANNE BULOT: Yes, that was the question. Thank you very much.

CARLO ROSA: Okay, thank you.

OPERATOR: Mr. Rosa, gentlemen, there are no questions registered at this time.

CARLO ROSA: Thank you operator. Thank you everybody.

PIERGIORGIO PEDRON: Thank you. Bye.