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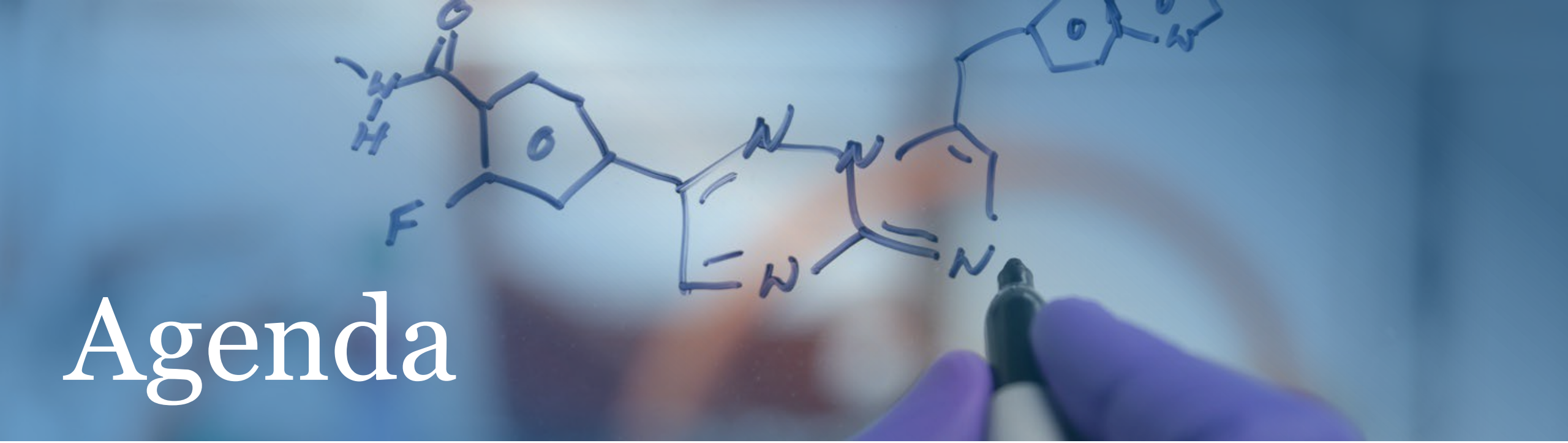
# First Quarter 2026 Financial Results & Business Update

APRIL 28, 2026



# Agenda

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Bill Meury | *Chief Executive Officer*

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Steven Stein, M.D. | *EVP, Chief Medical Officer and Head of Late-Stage Development*
Dave Gardner | *EVP, Chief Strategy Officer*
Mohamed Issa, Pharm.D. | *EVP, Head of US Commercial*

# Forward looking statements

Except for the historical information set forth herein, the matters set forth in this presentation contain predictions, estimates and other forward-looking statements, including any discussion of the following: Incyte's potential for continued performance and plans for sustainable, long-term growth; the strength of Incyte's core business; net sales guidance for FY26, including guidance for Jakafi, Opzelura and Hematology and Oncology; expectations regarding the core business ex-Jakafi; the potential and progress of programs in our pipeline and the potential sales opportunities presented by the pipeline; anticipated pipeline milestones and expectations regarding clinical trials to be initiated, ongoing clinical trials and data readouts, including for '989 (mutCALR), '734 (KRASG12D), '890 (TGFβR2xPD-1), '667 (CDK2), povorcitinib, ruxolitinib cream, axatilimab and '058 (JAK2V617F); expectations regarding regulatory submissions, approvals and launches across Jakafi (ruxolitinib) XR, Opzelura (ruxolitinib) cream, Monjuvi (tafasitamab-cxix) and povorcitinib; and 2026 newsflow items.

These forward-looking statements are based on Incyte's current expectations and subject to risks and uncertainties that may cause actual results to differ materially, including risks and uncertainties regarding research and development of products and product candidates, the sufficiency of clinical trial data to meet applicable regulatory standards or warrant continued development, the ability to enroll sufficient numbers of subjects in clinical trials and the ability to enroll subjects in accordance with planned schedules, determinations made by the FDA, EMA and other regulatory agencies, Incyte's dependence on its relationships with and changes in the plans of its collaboration partners, the efficacy or safety of Incyte's products and the products of Incyte's collaboration partners, the acceptance of Incyte's products and the products of Incyte's collaboration partners in the marketplace, market competition, unexpected variations in the demand for Incyte's products and the products of Incyte's collaboration partners, the effects of announced or unexpected price regulation or limitations on reimbursement or coverage for Incyte's products and the products of Incyte's collaboration partners, sales, marketing, manufacturing and distribution requirements, including Incyte's and its collaboration partners' ability to successfully commercialize and build commercial infrastructure for newly approved products and any additional products that become approved, greater than expected expenses, including expenses relating to litigation or strategic activities, variations in foreign currency exchange rates, and other risks detailed in Incyte's reports filed with the Securities and Exchange Commission, including its annual report on form 10-K for the year ended December 31, 2025. Incyte disclaims any intent or obligation to update these forward-looking statements.

# Opening Remarks & Business Progress

**Bill Meury** | *Chief Executive Officer*

# Incyte's *progress year-to-date*

- **Total net sales of $1.10B** in 1Q26, a **20%** growth YoY[1]
- **Advanced povorcitinib development program,** including regulatory application acceptance in HS and positive Phase 3 results in nonsegmental vitiligo
- **Four anticipated approval and launches** across Jakafi XR, Opzelura®, Monjuvi®/Minjuvi® and povorcitinib into early-2027[2]
- **Progressed late-stage pipeline with ten Phase 3 studies underway**; trial initiations for '989 in 2L ET and 2L MF on track
- **Evolution of leadership team**

[1]Reflects net sales, excluding royalty revenue and milestone and contract revenue. [2]Jakafi XR resubmission to U.S. FDA, Opzelura for moderate AD in Europe, Monjuvi/Minjuvi for 1L DLBCL, and povorcitinib for HS.




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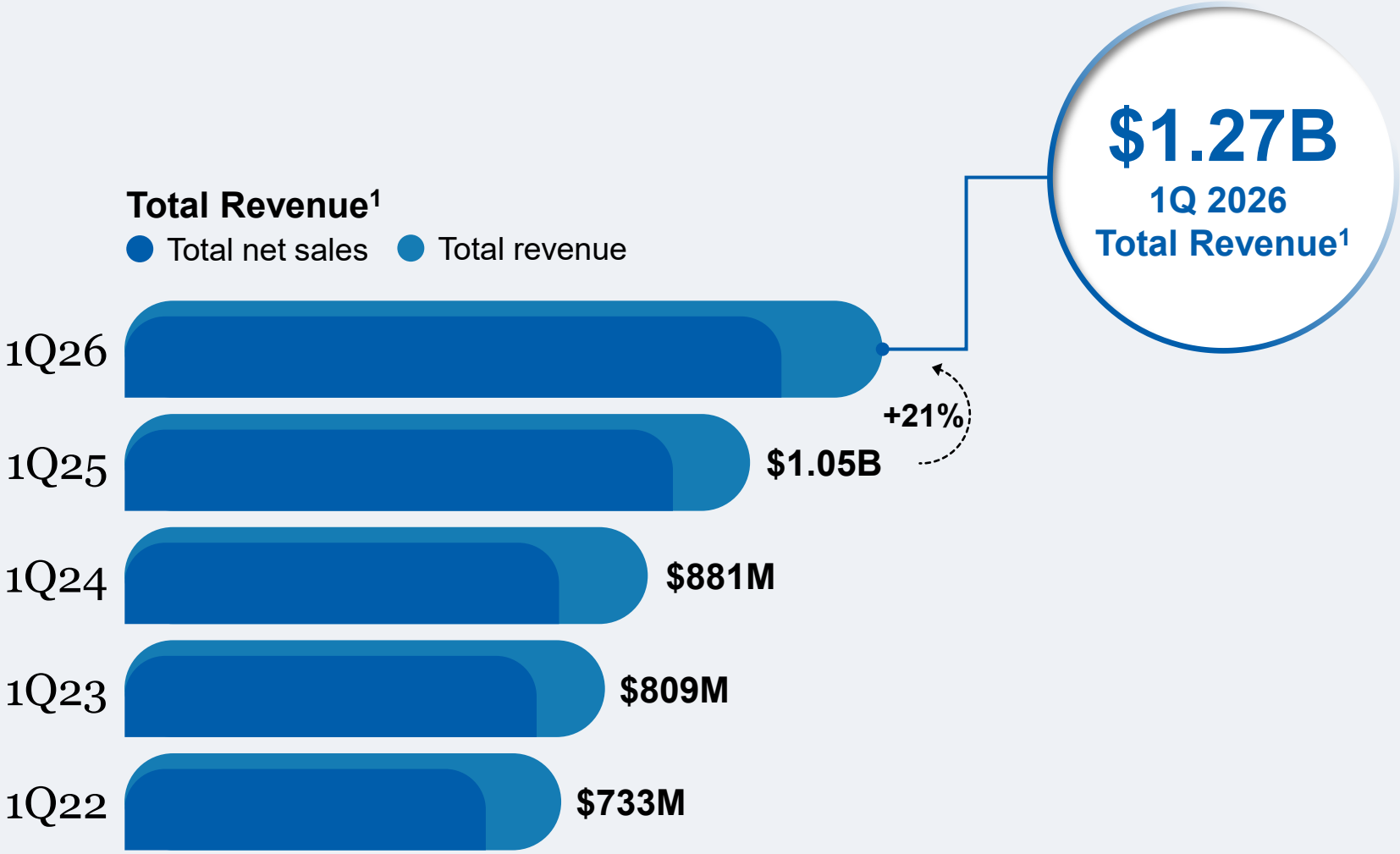
# Total revenue reflects 21% year-over-year growth

**$1.27B 1Q26** total revenue (+21% vs. 1Q25)

**$1.10B** total net sales

**$168M** royalty & contract revenue




[1]Reflects net sales, royalty revenue, and milestone and contract revenue.

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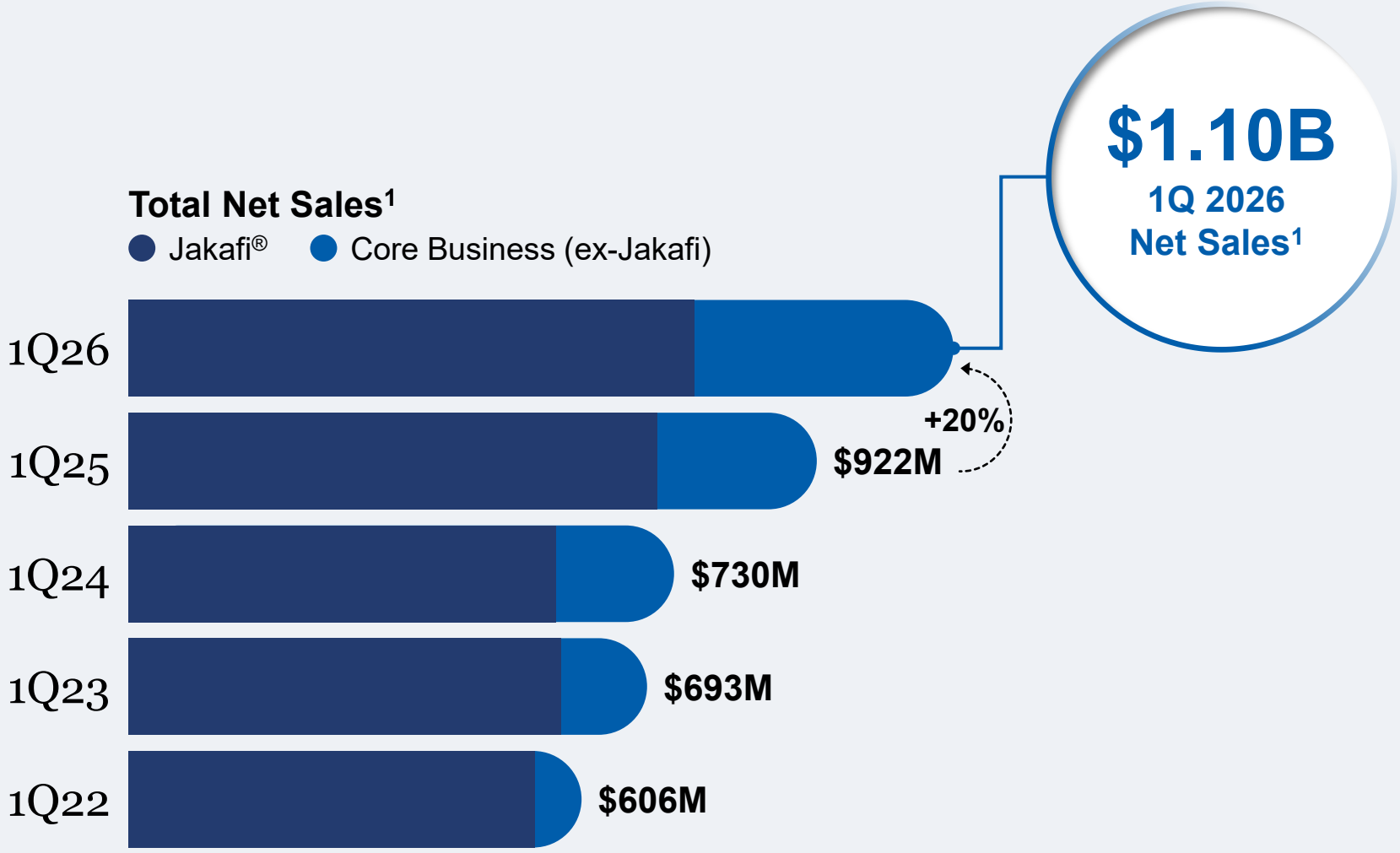
# Commercial execution drives increase in total net sales

**$1.10B 1Q26** total net sales (+20% vs. 1Q25)

**FY26** total net sales guidance of **$4.77–$4.94B**




[1]Reflects net sales, excluding royalty revenue and milestone and contract revenue.

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# Jakafi commercial performance driven by sustained demand

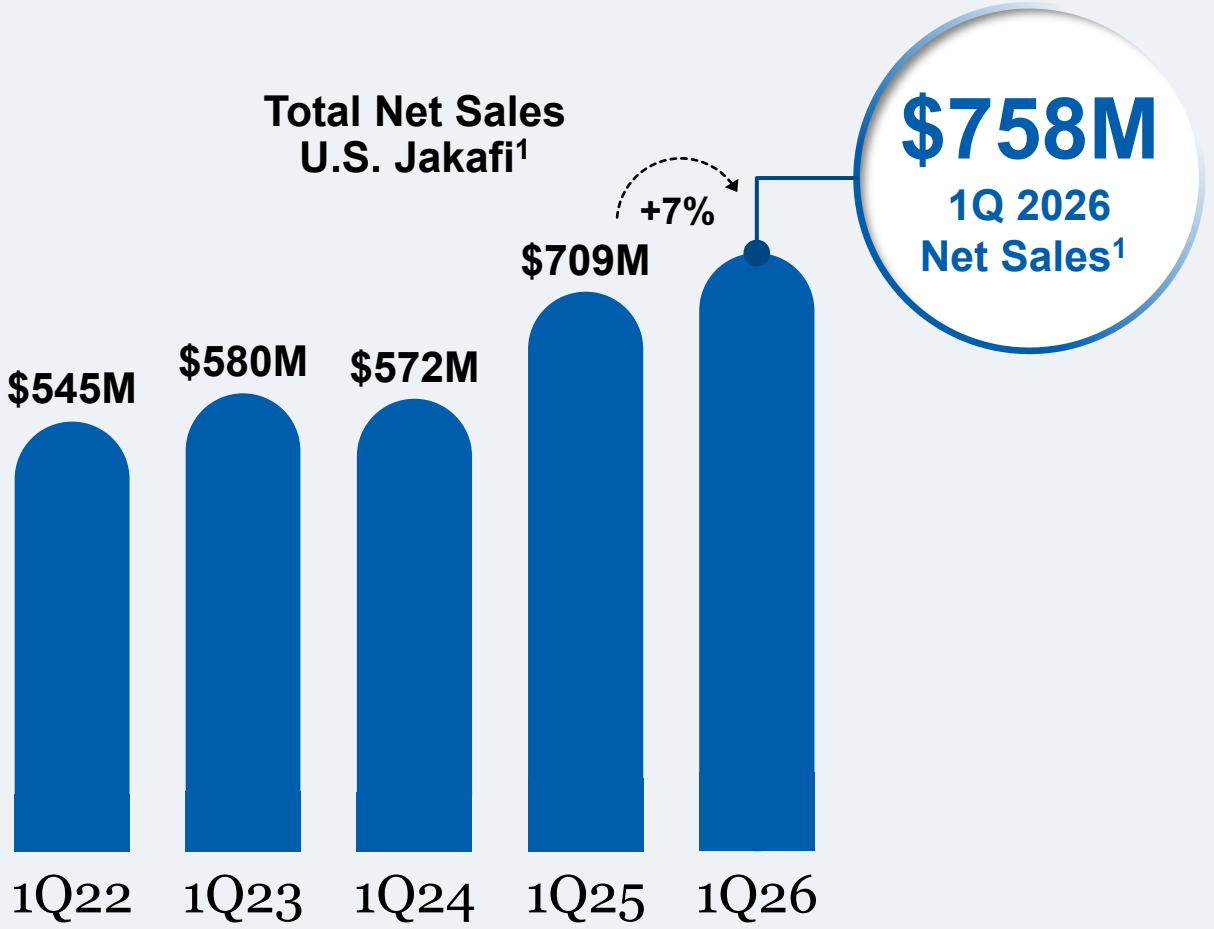
**$758M 1Q26** net sales (+7% vs. 1Q25)

Demand **+6%** vs. 1Q25

Broad based growth across **PV, MF and GVHD**

Channel inventory within **normal range**

**FY26** net sales guidance of **$3.22–$3.27B**




[1]Reflects net sales, excluding royalty revenue and milestone and contract revenue.

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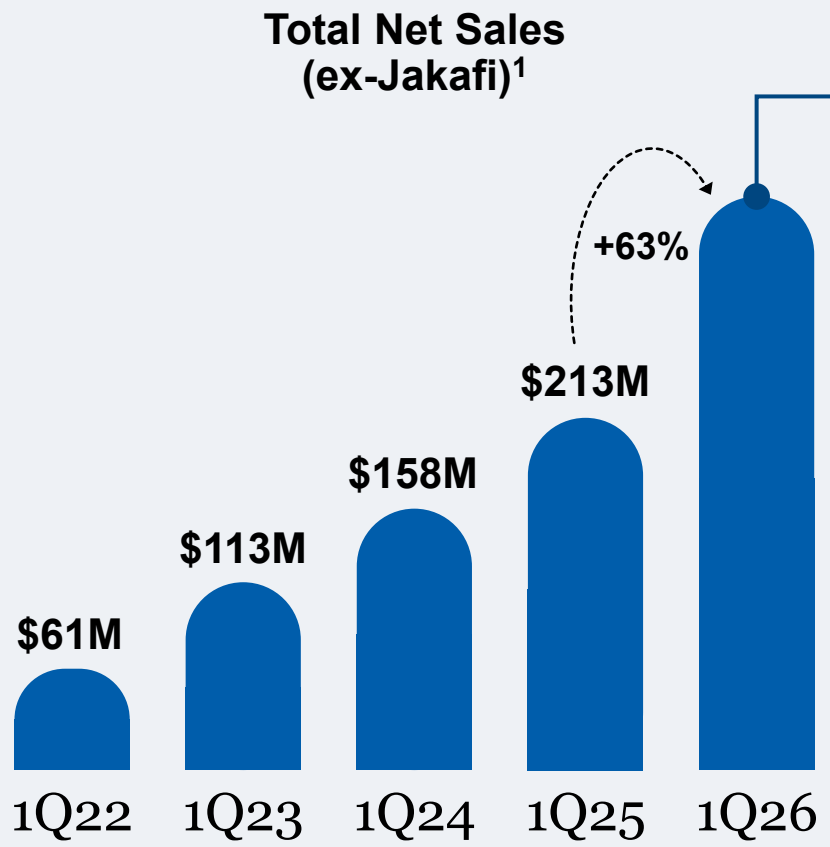
# Core business (ex-Jakafi) delivers 63% year-over-year growth

**$347M 1Q26** total net sales (+63% vs. 1Q25)

**Diversified and resilient revenue mix** provides foundation for **sustainable long-term growth**

Potential to reach **$3–$4B by 2030**




**Products**

Opzelura
Niktimvo™
Monjuvi/Minjuvi
Zynyz®
Pemazyre®
Iclusig®

[1]Reflects net sales, excluding royalty revenue and milestone and contract revenue.



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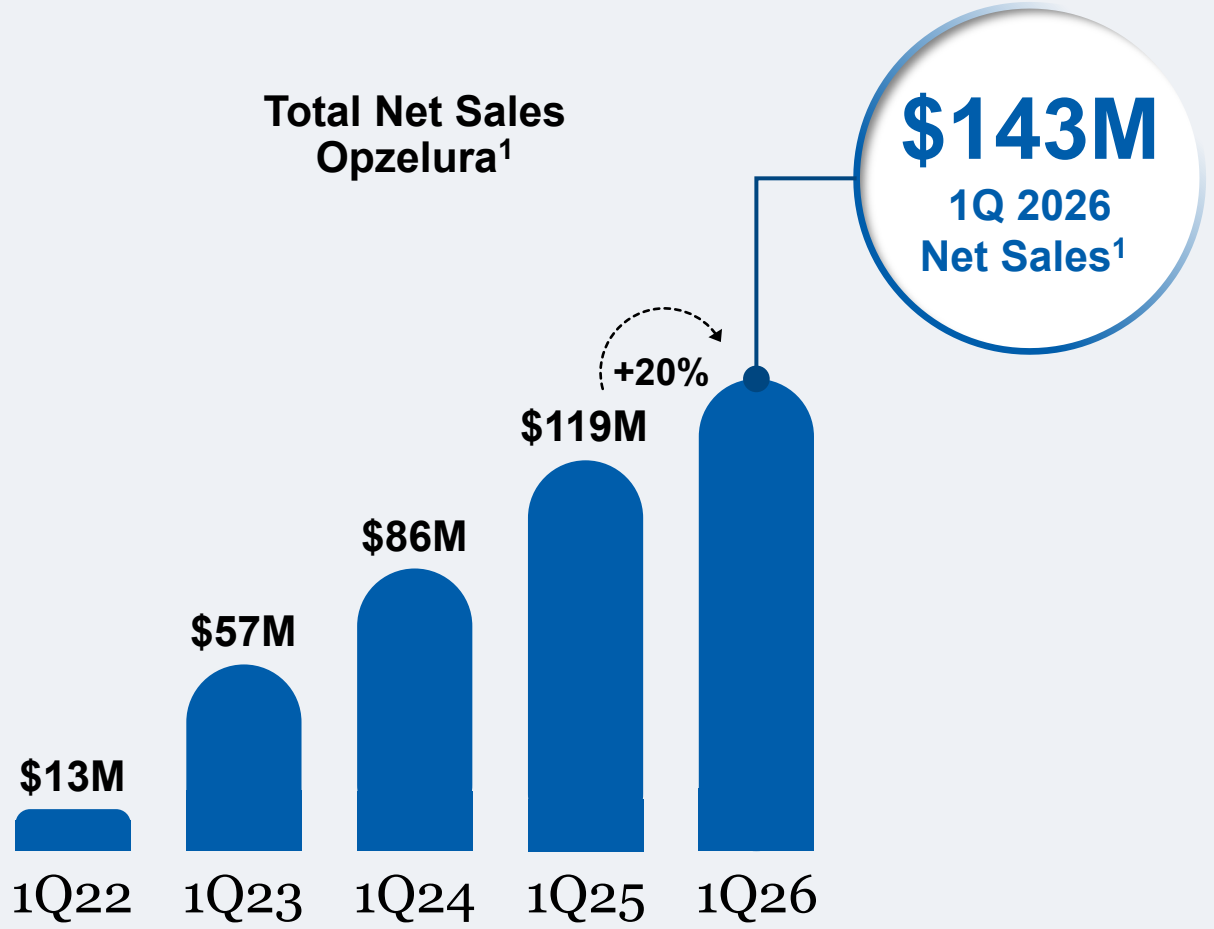
# Opzelura up 20% year-over-year with strong demand across U.S. and international markets

**$143M 1Q26** net sales (+20% vs. 1Q25)
- U.S. net sales of **$106M** (+12% vs. 1Q25)
  - **+17%** TRx growth
- Ex-U.S. net sales of **$37M** (+56% vs. 1Q25)

**FY26** net sales guidance of **$750–$790M**




[1]Reflects net sales, excluding royalty revenue and milestone and contract revenue.

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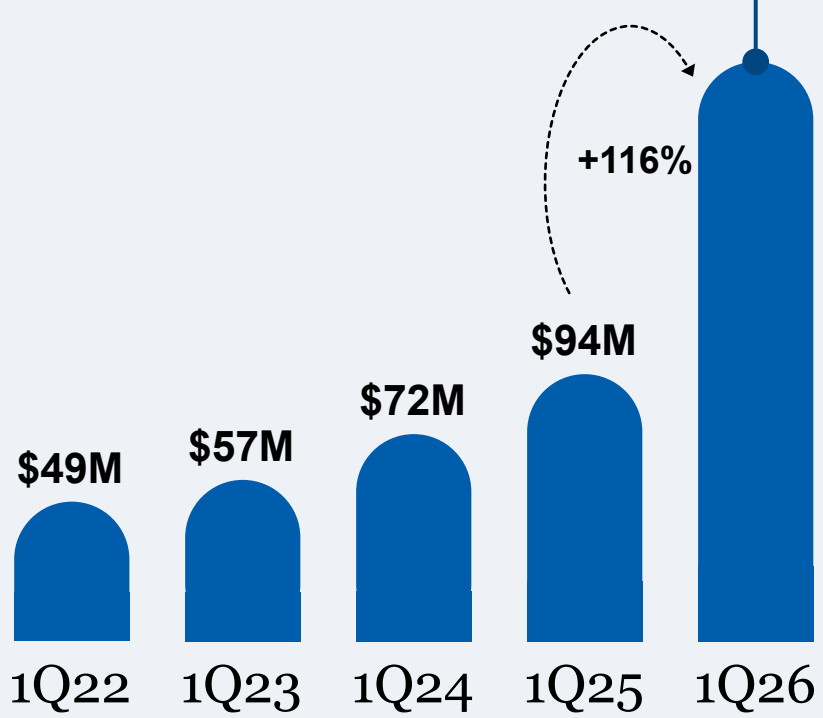
# Strong Hematology and Oncology performance driven by recent launches

**$204M 1Q26** net sales (+116% vs. 1Q25) driven by:

- Niktimvo **1Q26** net sales of **$55M** (+305%)[2]
- Monjuvi/Minjuvi **1Q26** net sales of **$49M** (+67%)[2]
- Zynyz **1Q26** net sales of **$41M** (+1,276%)[2]

**FY26** net sales guidance of **$800–$880M**

**Total Net Sales**
**Hematology and Oncology[1]**




**$204M**
**1Q 2026 Net Sales[1]**

**Products**

Niktimvo
Monjuvi/Minjuvi
Zynyz
Pemazyre
Iclusig

[1]Reflects net sales, excluding royalty revenue and milestone and contract revenue.
[2]Reflects sales growth compared to the first quarter of 2025.

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# Research & Development Highlights

**Pablo Cagnoni, M.D.** | *President & Global Head of R&D*

# R&D progress year-to-date

## Hematology

### Registrational development efforts progressing:

- ✓ Positive EOP meeting with FDA for ’989 2L ET Ph. 3 development program
- ✓ Completed Ph. 1 study of ’989 SC administration in HV
- ✓ Initiated Ph. 1 trial evaluating ’058 ASD formulation in MPN patients
- ✓ Results of Ph. 3 frontMIND trial of tafasitamab in 1L DLBCL to be presented at ASCO

## Oncology

### Oncology pipeline in pivotal development:

- ✓ EC approval of Zynyz for SCAC
- ✓ Initiated Ph. 3 DAWN-303 study for ’734 ($KRAS^{G12D}$) in 1L PDAC
- ✓ Ph. 3 study ongoing for ’890 (TGFβR2xPD-1) in 1L MSS CRC
- ✓ Pivotal studies initiated and ongoing for ’667 (CDK2) in PROC

## IAI

### Development milestones pave path for povorcitinib approval:

- ✓ Application acceptance by FDA for povorcitinib in HS with anticipated approval in 1Q27
- ✓ 54-week data of povorcitinib in HS presented at AAD
- ✓ Positive results for both Ph. 3 trials of povorcitinib in vitiligo (STOP-V1 & STOP-V2)

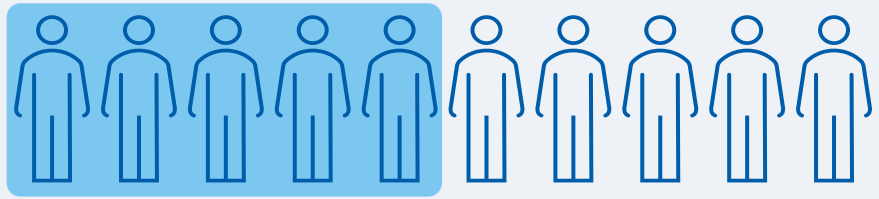
# ’989: Initiation of Phase 3 trial in 2L ET on track for mid-year

**Positive EOP meeting with FDA in Q1**

**Key Ph. 3 trial design features:**

- **Type 1 and non-type 1** mutCALR positive ET patients
- **750mg IV Q2W**; dose escalation to **2500mg IV Q2W** based on platelet response
- **Primary** endpoint of **DCHR at Week 24**[1]
- **Secondary** endpoints to include **mutCALR VAF reduction** from baseline

**20k** people in the U.S. with **CALR+ ET**



**50%** have a suboptimal response to HU or SOC[2]

Only **25%** achieve a complete HR[2]

**~25%** are resistant or intolerant to HU[3]

[1]DCHR is defined as the confirmed reduction of platelet count to ≤ 400 x $10^9$/L and absence of WBC elevation to ≥ 10 x $10^9$/L by Week 12 maintained for at least 12 weeks and the absence of any major thrombotic or hemorrhagic events or disease progression
[2]Carobbio A, et al. Blood. 2010;116(7). [3]Sever M, et al. Leuk Lymphoma. 2014.

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# ’989: Substantial progress to date, with multiple development inflection points ahead

## ET

✓Regulatory alignment on pivotal development program (2L)

**Mid-26:**
- Ph. 3 trial initiation in 2L ET
- Updated data from ongoing Ph. 1 cohort (2L ET)

## MF

✓Enrollment of 1L MF cohort (’989 vs. ’989 + ruxolitinib)

**Mid-26:** Updated data from ongoing Ph. 1 cohort (2L MF)

**2H 26:**
- Ph. 3 trial initiation in 2L MF
- Data from Ph. 1 cohort in 1L MF

## SC

✓ Agreement with FDA on SC
✓ Phase 1 trial in HV completed

**Mid-26**: Ph. 1 trial in mutCALR patients

# ’734: Potential first KRAS G12D targeted therapy in PDAC with registrational efforts underway

**200K+** Diagnosed PDAC patients

- G12D is the most prevalent driver mutation in PDAC (40% of patients)[1]
- No targeted therapies
- SOC has been chemotherapy for decades
- Very low 5-year survival rate (<10%)[2]

## Phase 3 trial of ’734 in combination with SOC chemotherapy in 1L PDAC underway

- Investigators choice of GEMNabP or mFOLFIRINOX

Extensive Ph. 1 program in G12D-mutated solid tumors, ~400 patients including 200+ with PDAC[3]

- Manageable tolerability profile with +GEMNabP or +mFOLFIRINOX without compromising chemotherapy dose intensity in PDAC[4]
- Ph. 1 efficacy and safety data in combination with SOC in 1L PDAC patients in **2H 2026**
- Evaluation in other tumor types ongoing



[1] Lee JK, et al. NPJ Precis Oncol. [2] Rompianesi et al., 2025, Cancers. [3] Incyte data on file. [4] Wainberg Z, et al. ASCO-GI 2026.

# High impact oncology portfolio in pivotal development

## ’890

TGFβR2xPD-1 bispecific

### MSS colorectal cancer

- Large, underserved population with no approved IO options

✓ **Ph. 3 trial in 1L MSS CRC ongoing**

- **2H 26:** Ph. 1 data of ’890 in combination with SOC chemotherapy (FOLFOX + bevacizumab) in 1L MSS CRC

## ’734

KRAS$^{G12D}$ inhibitor

### PDAC (KRAS$^{G12D}$)

- First targeted therapy for the most common PDAC driver

✓ **Ph. 3 trial in 1L PDAC ongoing**

- **2H 26:** Ph. 1 data of ’734 in combination with SOC chemotherapy (GEMNabP or mFOLFIRINOX) in 1L PDAC

## ’667

CDK2 inhibitor

### Ovarian (CCNE1+)

- Addresses genetically defined, high-risk ovarian cancer subset

✓ **MAESTRA-1 & -2 trials ongoing**

- **2H 26:** Planned Ph. 3 initiation (1L maintenance)




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# Povorcitinib: Compelling clinical evidence establishes clear path to approval across indications

## Hidradenitis Suppurativa

- **Continuous improvements in clinical outcomes observed with long-term treatment across studies**[1,2]
  - **Long-term disease control**:
    - **57-71%** of patients achieved HiSCR50
    - **39-57%** of patients achieved HiSCR75
    - **19-29%** of patients achieved HiSCR100
  - **Lesion resolution: Up to 20%** of patients achieved full clearance (ANdT=0)
  - Clinically meaningful improvements in **skin pain, fatigue and QoL** measures
- Both doses (45mg, 75mg) were **generally well-tolerated**

## Nonsegmental Vitiligo

- **Statistically significant reductions in facial vitiligo vs. placebo observed across both studies**[3]
  - **Both studies achieved primary endpoint of reduction in F-VASI75 from baseline at Week 52**[3,4]
    - STOP-V1: **18.9%** vs 6.8% placebo (p<0.001)
    - STOP-V2: **18.9%** vs 3.1% placebo (p<0.001)
  - **Statistically significant and clinically meaningful** improvements observed in **key secondary endpoints**, including T-VASI50 at Week 52
  - **Overall safety profile consistent with prior studies**, with no new safety signals; 30mg dose well-tolerated



[1]Porter M, et al. AAD 2026. [2]Through Week 54. [3]Incyte data on file.

# Late-stage IAI portfolio addressing immune-mediated derm conditions

## Ruxolitinib Cream

JAK1/2 small molecule

### Hidradenitis Suppurativa

- Potential third indication to expand addressable market
- ✓ **Ph. 3 studies ongoing** (TRuE-HS1; TRuE-HS2)
- **4Q 26:** Ph. 3 topline data

## Povorcitinib

JAK1 small molecule

### Hidradenitis Suppurativa

- Anchor indication with large commercial opportunity
- ✓ **Regulatory applications accepted** by FDA & EMA
- **Late-26 | 1Q 27:** Anticipated approval & launch (EU | U.S.)[1]

### Nonsegmental Vitiligo

- Broadens franchise→ expansion to moderate-severe
- ✓ **Positive Ph. 3 results** (STOP-V1; STOP-V2)
- **1H 27:** Planned regulatory submissions

### Prurigo Nodularis

- JAK dependent immuno-derm disease
- ✓ **Ph. 3 studies ongoing** (STOP-PN1; STOP-PN2)
- **4Q 26:** Ph. 3 topline data




[1]Launch estimates assume EC and FDA approvals.

# 2026 pipeline milestones

Hematology Oncology IAI

## YTD

- ✓’734 Ph. 3 initiated (1L PDAC)
- ✓’890 Ph. 3 initiated (1L MSS CRC)
- ✓Povorcitinib NDA acceptance (HS)
- ✓Povorcitinib Ph. 3 data (nonsegmental vitiligo)

## Q2

- Tafasitamab sBLA submission (1L DLBCL)

### Mid-26

- ’989 Ph. 1 data (2L ET+MF)
- ’989 trial initiation (Ph. 3 2L ET)
- Ruxolitinib XR approval and launch

## Q3

### 2H ’26

- Povorcitinib Ph. 2 PoC data (asthma)
- ’989 Ph. 1 data (1L MF)
- ’989 Ph. 3 initiation (2L MF)
- ’058 Ph. 1 data
- ’890 Ph. 1 data (1L combo in MSS CRC)
- ’734 Ph. 1 data (1L combo in PDAC)
- ’667 Ph. 3 initiation (1L maintenance ovarian cancer)
- Opzelura moderate AD approval and launch

## Q4

- Opzelura Ph. 3 data (HS)
- Povorcitinib Ph. 3 data (PN)
- Povorcitinib HS approval (EU)
- Axatilimab +ruxolitinib data (1L cGVHD)

# Financial Results

**Tom Tray** | *Principal Financial Officer*

# Non-GAAP adjustments

- Management has chosen to present financial highlights for the quarter ended March 31, 2026, and 2025 on both a GAAP and Non-GAAP basis in the belief that this Non-GAAP information is useful for investors.
- Management uses such information internally and externally for establishing budgets, operating goals and financial planning purposes. These metrics are also used to manage the Company's business and monitor performance. The Company adjusts, where appropriate, for expenses in order to reflect the Company's core operations.
- The Company believes these adjustments are useful to investors by providing an enhanced understanding of the financial performance of the Company's core operations. The metrics have been adopted to align the Company with disclosures provided by industry peers.
- As changes in exchange rates are an important factor in understanding period-to-period comparisons, Management believes the presentation of certain revenue results on a constant currency basis in addition to reported results helps improve investors' ability to understand its operating results and evaluate its performance in comparison to prior periods. Constant currency information compares results between periods as if exchange rates had remained constant period over period. The Company calculates constant currency by calculating current year results using prior year foreign currency exchange rates and generally refers to such amounts calculated on a constant currency basis as excluding the impact of foreign exchange or being on a constant currency basis. These results should be considered in addition to, not as a substitute for, results reported in accordance with GAAP. Results on a constant currency basis, as the Company presents them, may not be comparable to similarly titled measures used by other companies and are not measures of performance presented in accordance with GAAP.

# Financial highlights – revenues

| $ MILLIONS | Q1 2026 GAAP | Q1 2025 GAAP | YOY CHANGE *AS REPORTED* | YOY CHANGE *CONSTANT CURRENCY* |
|---|---|---|---|---|
| **Net sales** | **1,104** | **922** | **20%** | **19%** |
| Jakafi | 758 | 709 | 7% | NA |
| Opzelura | 143 | 119 | 20% | 18% |
| Hematology and Oncology[1] | 204 | 94 | 116% | 110% |
| **Royalties** | **151** | **131** | **16%** | |
| Jakavi | 106 | 92 | 15% | 5% |
| Olumiant | 36 | 31 | 18% | 12% |
| Tabrecta | 6 | 6 | (7)% | NA |
| Other | 3 | 1 | 156 % | NA |
| **Total product & royalty revenues** | **1,256** | **1,053** | **19%** | |
| Milestone and contract revenue | 17 | — | NM | |
| **Total revenues** | **1,273** | **1,053** | **21%** | |




For all periods there were no adjustments between GAAP and Non-GAAP revenues. Totals may not add due to rounding. [1]Pemazyre in the U.S., Canada, Europe, Japan, Asia Pacific (APAC), Middle East and Africa (MEA) and Latin America (LatAm); Niktimvo and Monjuvi in the U.S.; Zynyz in the U.S. and Europe; Iclusig in Europe and MEA; and Minjuvi in Canada, Europe, APAC, MEA and LatAm. NM, not meaningful; NA, not applicable.

# Financial highlights – operating expenses

| $ MILLIONS | Q1 2026 GAAP | Q1 2025 GAAP | YoY Change |
|---|---|---|---|
| **COGS** | **105** | **73** | **43%** |
| As a percentage of net sales | 9.5% | 7.9% | |
| **R&D** | **516** | **437** | **18%** |
| R&D – ongoing | 503 | 421 | 19% |
| R&D – upfront and milestones & Escient costs[1] | 13 | 16 | (21)% |
| **SG&A** | **328** | **326** | **1%** |
| **Asset impairment and related disposal costs** | **23** | **—** | **NM** |
| **(Gain) loss on change in fair value of acquisition - related contingent consideration** | **(0.2)** | **12** | **(101)%** |
| **Total operating expenses - ongoing[2]** | **936** | **820** | **14%** |




NM, not meaningful. Totals may not add due to rounding. [1]Includes $12.6 million and $15.5 million of upfront and milestone payments for the three months ended March 31, 2026 and 2025, respectively. Includes $0.5 million of Escient acquisition related compensation expense related to severance payments for the three months ended March 31, 2025. [2]Excludes asset impairment and related disposal costs and contingent consideration.

# Full year 2026 financial guidance

| | FY 2026 |
|---|---|
| **Total net sales** | **$4,770M - $4,940M** |
| Jakafi[1] | $3,220M - $3,270M |
| Opzelura[2] | $750M - $790M |
| Hematology and Oncology[3] | $800M - $880M |
| **Total R&D and SG&A operating expenses (GAAP)** | **$3,495M - $3,675M** |
| **Total R&D and SG&A operating expenses (non-GAAP)[4]** | **$3,205M - $3,375M** |

[1]Includes the initial launch of Jakafi XR. [2] Includes net sales for moderate atopic dermatitis in Europe which is anticipated to be approved in the second half of 2026. [3]Includes Pemazyre in the U.S., Canada, Europe, Japan, APAC, MEA, and LatAm; Niktimvo and Monjuvi in the U.S.; Zynyz in the U.S., Europe and Japan; Iclusig in Europe and MEA; and Minjuvi in Canada, Europe, Japan, APAC, MEA and LatAm.[4]Adjusted to exclude the estimated cost of stock-based compensation.

# Closing Remarks

**Bill Meury** | *Chief Executive Officer*


Incyte
Q&A


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# Appendix

# Upcoming pipeline milestones

| THERAPEUTIC | PROGRAM | INDICATION(S) | PROOF OF CONCEPT | PIVOTAL | MILESTONE/STATUS |
|---|---|---|---|---|---|
| Hematology | **Axatilimab** CSF-1R | 1L cGvHD (+ ruxolitinib) | ● | | Data 2H 2026 |
| | | 1L cGvHD (+ steroids) | ● | ● | Data early-2028 |
| | **INCA033989** mutCALR | CALR-mutated ET (2L) | ● | ● | Ph. 3 initiation mid-2026 |
| | | CALR-mutated MF (1L) | ● | | Data 2H 2026 |
| | | CALR-mutated MF (2L) | ● | ● | Ph. 3 initiation 2H 2026 |
| | **INCB160058** JAK2V617F | JAK2 V617F-mutated MPNs | ● | | Data 2H 2026 |
| | **INCA035784** mutCALRxCD3 bispecific | CALR-mutated MF, ET | ● | | Data 2027 |
| | **Ruxolitinib XR (QD)** JAK1/JAK2 | MF, PV, cGvHD | ● | ● | Approval/launch mid-2026[1] |
| | **Tafasitamab** CD19 | 1L DLBCL | ● | ● | sBLA submission 1H 2026 |
| Oncology | **INCB123667** CDK2 | PROC | ● | ● | Pivotal trials ongoing |
| | | Ovarian (1L maintenance) | ● | | Ph. 3 initiation 2H 2026 |
| | **INCB161734** KRAS G12D | PDAC (G12D-mutated) | ● | ● | Ph. 3 trial ongoing |
| | **INCA33890** TGFβR2×PD-1 bispecific | MSS CRC | ● | ● | Ph. 3 trial ongoing |
| IAI | **Ruxolitinib Cream** JAK1/JAK2 | HS (mild/moderate) | ● | ● | Data 4Q 2026 |
| | **Povorcitinib** JAK1 | HS (moderate/severe) | ● | ● | Approval/launch late-2026 and 1Q 2027[2] |
| | | PN (moderate/severe) | ● | ● | Data 4Q 2026 |
| | | Vitiligo (moderate/severe) | ● | ● | sNDA submission 1H 2027 |
| | | Asthma | ● | | Data 2H 2026 |




[1]Launch assuming FDA approval; [2]Anticipated approval and launch in the EU and US, respectively.

# Abbreviation directory

| | |
|---|---|
| **’058** | INCB160058 |
| **’667** | INCB123667 |
| **’734** | INCB161734 |
| **’890** | INCA33890 |
| **’989** | INCA033989 |
| **1L** | First-line |
| **2L** | Second-line |
| **AAD** | American Academy of Dermatology |
| **AD** | Atopic dermatitis |
| **ANdT** | Abscess, inflammatory nodule and draining tunnel |
| **ASCO** | American Society of Clinical Oncology |
| **ASD** | Amorphous solid dispersion |
| **BA** | Bioavailability |
| **CCNE+** | Cyclin E1 positive |
| **CRC** | Colorectal cancer |
| **DCHR** | Durable complete hematologic response |
| **DLBCL** | Diffuse large b-cell lymphoma |
| **EC** | European Commission |
| **EMA** | European Medicines Agency |
| **EOP** | End of phase |
| **ET** | Essential thrombocythemia |
| **FDA** | U.S. Food and Drug Administration |
| **FOLFOX** | Leucovorin, fluorouracil and oxaliplatin |
| **F-VASI** | Facial Vitiligo Area Scoring Index |
| **GEMNabP** | Gemcitabine, nab-paclitaxel |
| **GVHD** | Graft-versus-host disease |
| **HR** | Hematologic response |
| **HS** | Hidradenitis suppurativa |
| **HU** | Hydroxyurea |
| **HV** | Healthy volunteers |
| **IAI** | Inflammation & Autoimmunity |
| **IV** | Intravenous |
| **JAK** | Janus kinase |
| **MF** | Myelofibrosis |
| **mFOLFIRINOX** | Modified leucovorin calcium, fluorouracil, irinotecan hydrochloride, oxaliplatin |
| **MPN** | Myeloproliferative neoplasms |
| **MSS** | Microsatellite stable |
| **NDA** | New Drug Application |
| **PDAC** | Pancreatic ductal adenocarcinoma |
| **PK** | Pharmacokinetics |
| **PN** | Prurigo nodularis |
| **PROC** | Platinum-resistant ovarian cancer |
| **PV** | Polycythemia vera |
| **Q2W** | Every two weeks |
| **QoL** | Quality of life |
| **sBLA** | Supplemental biologics application |
| **SC** | Subcutaneous |
| **SCAC** | Squamous cell carcinoma of the anal canal |
| **SOC** | Standard of care |
| **TRx** | Total prescription |
| **T-VASI** | Total Vitiligo Area Scoring Index |
| **VAF** | Variant allele frequency |
| **YoY** | Year-over-year |
| **XR** | Extended-release |