

Disclosures

• Dr. Given is an employee and shareholder in Arrowhead Pharmaceuticals, Inc.

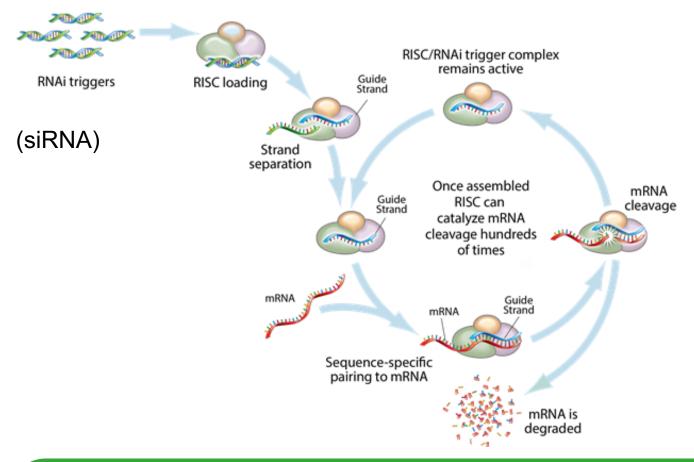


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This presentation contains forward-looking statements within the meaning of the "safe harbor" provisions of the Private Securities Litigation Reform Act of 1995. These statements are based upon our current expectations and speak only as of the date hereof. Our actual results may differ materially and adversely from those expressed in any forward-looking statements as a result of various factors and uncertainties, including, without limitation, our developmental stage and limited operating history, our ability to successfully and timely develop products, enter into collaborations and achieve other projected milestones, rapid technological change in our markets, demand for our future products, legislative, regulatory and competitive developments and general economic conditions. Our Annual Report on Form 10-K, recent and forthcoming Quarterly Reports on Form 10-Q, recent Current Reports on Forms 8-K, and other SEC filings discuss some of the important risk factors that may affect our ability to achieve the anticipated results, as well as our business, results of operations and financial condition. Readers are cautioned not to place undue reliance on these forward-looking statements. Additionally, Arrowhead disclaims any intent to update these forward-looking statements to reflect subsequent developments.



RNAi: Target the Gene Silence the Disease



Therapeutic gene silencing with RNA interference is highly precise and efficient



ARO-HBV: Key Design Elements

- Subcutaneous dosing, monthly or less frequent
- No need for active endosomal escape agent
- Addresses full HBV transcriptome
 - Works for cccDNA and integrated-derived transcripts
- Multiple triggers to avoid resistance development
- Powerful HBsAg reduction
- Wide therapeutic index
- Efficacy and safety in HBV patients



ARO-HBV Phase 1/2 Data Included in this Interim Update

- All NHV single dose data through day 29 EOS
- All CHB data of patients that
 - Received monthly doses x 3 (cohorts 2b-5b, 8, 9)

AND

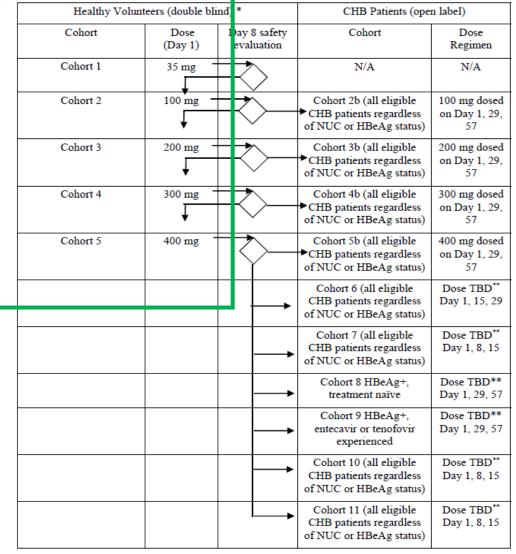
Had > 6 weeks of HBsAg response data available (n=24)



ARO-HBV Phase 1/2 study ongoing

NHV Cohorts

- Fully enrolled with 30 subjects
- All through Day 29 EOS visit
- Now unblinded





The Search for HBV / HDV Cure 2018

NHV Safety Summary

- 20 active : 10 placebo
- No serious AEs, no dropouts
- No pattern of adverse changes in laboratory values (e.g. ALT, AST, Total Bilirubin, Creatinine)
- Subjects reporting AE at injection site: 1 mild bruise at injection site, 1 mild tenderness at injection site



NHV Unblinded AE Table

AEs in >1 subject (as of 8/9/2018)

AEs in Healthy Volunteers	35 mg AROHBV	100 mg AROHBV	AROHBV	300 mg AROHBV	400 mg AROHBV	All Active AROHBV	Placebo	Total AEs
AE Reported Terms	n = 4	n = 4	n = 4	n = 4	n = 4	n= 20	n= 10	
Hot flush, Feeling hot, Subjective Pyrexia	1			1		2	1	3
Headache	1	2	1	1	2	7	2	9
Abdominal pain	1	2	1			4	1	5
Upper respiratory tract infection	1	1			2	4	2	6
Lethargy, Fatigue		1	2			3	2	5
Myalgia		1				1	1	2
Sore Throat		1	1			2	2	4
Sensation of feeling dehydrated		1				1	1	2
Discomfort / bruising at cannula site		1		2	1	4	1	5
Nausea		1	1	2		4	1	5
Dizziness, Lightheadedness, Vertigo		1				1	2	3
Flu like illness, Non Specific Viral Illness		1	1			2		2
Emesis			1	1		2	1	3
Bruising / tenderness at injection site				1	1	2		2
Total AEs in >1 NHV	4	13	8	8	6	39	17	56

- Most common AE: Headache (35% active)
- 70% active v 80% PBO reporting at least 1 AE



ARO-HBV Phase 1/2 Study Update

Healthy Volunteers (double blind) *				CHB Patients (open label)		
Cohort	Dose (Day 1)	Day 8 sa evaluati		Cohort	Dose Regimen	
Cohort 1	35 mg	\Rightarrow		N/A	N/A	
Cohort 2	100 mg	\Rightarrow		Cohort 2b (all eligible CHB patients regardless of NUC or HBeAg status)	100 mg dosed on Day 1, 29, 57	
Cohort 3	200 mg	\Rightarrow		Cohort 3b (all eligible CHB patients regardless of NUC or HBeAg status)	200 mg dosed on Day 1, 29, 57	
Cohort 4	300 mg	\diamondsuit		Cohort 4b (all eligible CHB patients regardless of NUC or HBeAg status)	300 mg dosed on Day 1, 29, 57	
Cohort 5	400 mg	\Diamond		Cohort 5b (all eligible CHB patients regardless of NUC or HBeAg status)	400 mg dosed on Day 1, 29, 57	
			→	Cohort 6 (all eligible CHB patients regardless of NUC or HBeAg status)	Dose TBD** Day 1, 15, 29	
			-	Cohort 7 (all eligible CHB patients regardless of NUC or HBeAg status)	Dose TBD** Day 1, 8, 15	
			—	Cohort 8 HBeAg+, treatment naïve	Dose TBD** Day 1, 29, 57	
			→	Cohort 9 HBeAg+, entecavir or tenofovir experienced	Dose TBD** Day 1, 29, 57	
			→	Cohort 10 (all eligible CHB patients regardless of NUC or HBeAg status)	Dose TBD** Day 1, 8, 15	
			→	Cohort 11 (all eligible CHB patients regardless of NUC or HBeAg status)	Dose TBD** Day 1, 8, 15	

CHB Cohorts

- Fully enrolled per original protocol and per amendment adding cohorts 10 and 11.
- Latest protocol amendments (approved in AU, NZ, HK):
 - 2b-5b up to 8 per cohort
 - 1 year of follow up post-last dose
 - Cellular immunology evaluation in NZ only (U. of Auckland)
 - Adding cohort 1b (25 mg), 1c (50mg) pending EC approval
- TBD doses
 - Cohort 6: 100mg QoWk
 - Cohort 7: 100mg QWk
 - Cohorts 8, 9 (e+): 300mg Q28 day
 - Cohort 10: 200mg Qwk
 - Cohort 11: 300mg Qwk

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CHB Safety Summary

- 24 patients in cohort 2b-5b, 8 and 9 have received 3 monthly doses (400mg highest dose administered)
- No SAEs reported, no dropouts
- No dose related pattern of adverse changes in laboratory values (e.g. ALT, AST, total bilirubin, creatinine)
- AEs at injection site (rash, erythema, bruising/hematoma, tenderness) reported with approximately 12% of injections

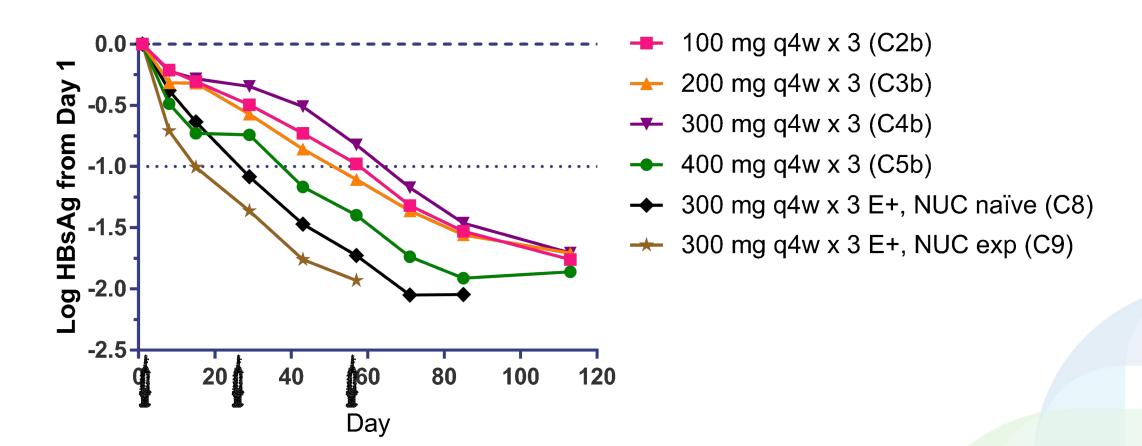


CHB Patient AEs in > 1 Subject (as of 10/23/18)

AEs in HBV Patients AE Reported Terms	Cohort 2b 100 mg AROHBV n = 4	Cohort 3b 200 mg AROHBV n = 4	Cohort 4b 300 mg AROHBV n = 4	Cohort 5b 400 mg AROHBV n = 4	300 mg	300 mg	Total AEs n=24
Insect bites	1		1				2
Upper respiratory infection, sore throat	1		1		1		3
Erythema, redness, hematoma, rash at injection site			1	2	2	2	7
Acne					2		2
Headache			2				2
Raised creatine kinase			1		1		2
Diarrhea			1	1			2
Lower back ache/pain			1		1		2
Total AEs in >1 CHB	2	0	8	3	7	2	22



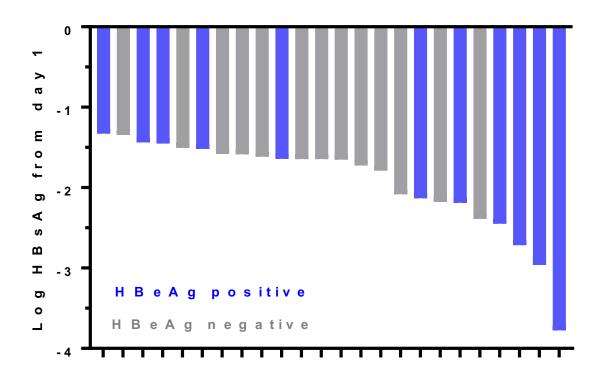
Mean Log HBsAg Reductions by Cohort



Previously reported 4 log reduction in 100 mg patient reduced to 2 logs on re-assay



Individual Max Log HBsAg Reduction from Day 1



- All patients with > 6 weeks of HBsAg results (n=24)
- Range of NADIR: -1.3 to -3.8 Log₁₀
- Mean NADIR: -1.9 Log₁₀
- Similar responses observed for HBeAg negative and positive patients
 - HBeAg positive (n=11): 2.1 Log10
 - HBeAg negative (n=13): -1.8 Log10



Nadir HBsAg Responses for Monthly Dosed Patients with at least 6 Weeks or Exposure

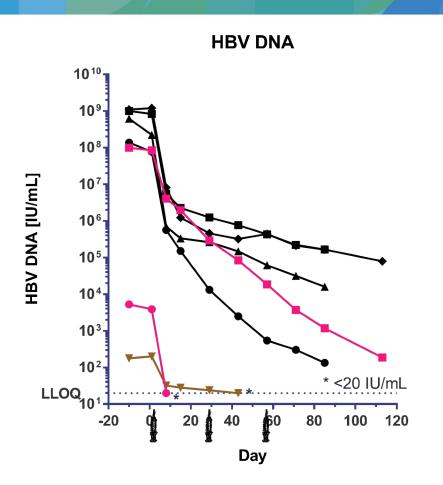
Exposure of 6 weeks or more (n= 24)

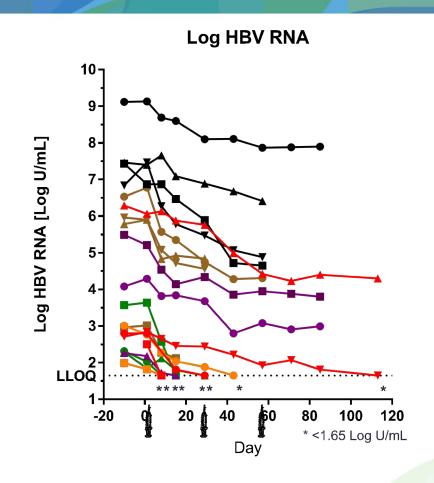
•	>	1	log	(90%)	reduction	100%
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- > 1.5 log (97%) reduction 83%
- > 2 log (99%) reduction 38%
- > 3 log (99.9%) reduction 3%



Individual HBV DNA and RNA Responding Well

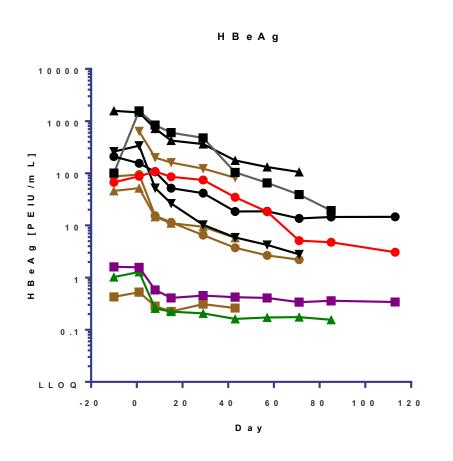


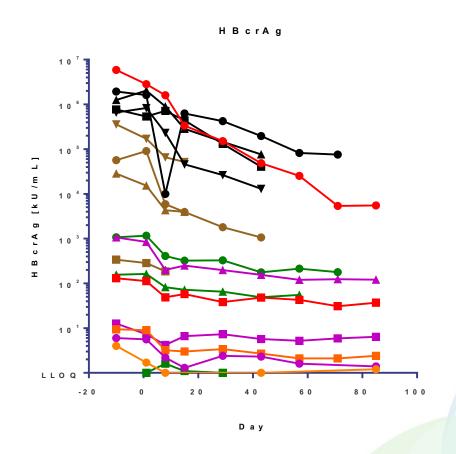


Colors in graphs indicate cohorts as follows: Red (C2b), orange (C3b), purple (C4b), green (C5b), black (C8), brown (C9)



Individual HBeAg and HBcrAg Also Showing Response





Colors in graphs indicate cohorts as follows: Red (C2b), orange (C3b), purple (C4b), green (C5b), black (C8), brown (C9)



Early Conclusions for ARO-HBV

- ARO-HBV appears to be well tolerated
- Responses generally slower in absence of endosomal escape (not unique to HBV)
- HBsAg responding to ARO-HBV in all patient populations (HBeAg +/-, NUC +/-)
- Responses increasing with each dose in most patients
- HBeAg, HBV RNA, HBcrAg, HBV DNA all showing response



Acknowledgements

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