

Targeted Therapies for Serious Rare and Ultra-Rare Diseases

Corporate Presentation
October, 2021









Forward Looking Statements

This presentation may contain forward-looking statements that involve future events. These forward-looking statements include terminology such as “believe,” “will,” “may,” “estimate,” “continue,” “anticipate,” “contemplate,” “intend,” “target,” “project,” “should,” “plan,” “expect,” “predict,” “could,” “potentially” or the negative of these terms. All statements other than statements of historical facts contained in this presentation, including statements regarding our future financial condition, timing for and outcomes of clinical results, prospective products, preclinical and clinical pipelines, regulatory objectives, business strategy and plans and objectives for future operations, are forward looking statements. Forward-looking statements are our current statements regarding our intentions, beliefs, projections, outlook, analyses or current expectations concerning, among other things, our anticipated significant milestones in 2021 and 2022; the timing of our ongoing and planned clinical development; the sufficiency of our cash, cash equivalents and investments to fund our operations into the fourth quarter of 2023; our development programs for Zokinvy generally; and the potential approval of Zokinvy in jurisdictions outside of the U.S., including the EU in 2021; our progression and continued enrollment of our Phase 3 D-LIVR study in HDV and expectations regarding the timing and availability of topline data; our ability to maintain supply of our commercial and clinical trial materials; our plans to advance Peginterferon Lambda in HDV in the U.S. and EU; our progression of Peginterferon Lambda for COVID-19 and Avexitide for post-bariatric hypoglycemia and congenital hyperinsulinism; our ability to finance the continued advancement of our development pipeline products; and the potential for success of any of our product candidates. These statements concern product candidates that have not yet been approved for marketing by the U.S. Food and Drug Administration (FDA). No representation is made as to their safety or effectiveness for the purposes for which they are being investigated. Various important factors could cause actual results or events to differ materially from the forward-looking statements that Eiger makes, including additional applicable risks and uncertainties described in the "Risk Factors" sections in the Quarterly Report on Form 10-Q for the quarter ended June 30, 2021 and Eiger's subsequent filings with the SEC. The forward-looking statements contained in this press release are based on information currently available to Eiger and speak only as of the date on which they are made. Eiger does not undertake and specifically disclaims any obligation to update any forward-looking statements, whether as a result of any new information, future events, changed circumstances or otherwise. Additional information may be available in press releases or other public announcements and public filings made after the date of this presentation.

This presentation concerns products that have not yet been approved for marketing by the FDA. No representation is made as to their safety or effectiveness for the purposes for which they are being investigated.

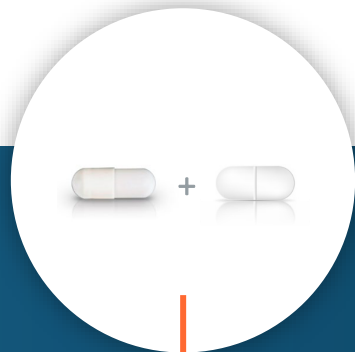
Multiple Catalysts for Value Creation

TARGETED INDICATION	DRUG	ORPHAN US / EU	BREAKTHROUGH THERAPY	RARE PEDIATRIC DISEASE	STATUS
 Hepatitis Delta Virus	Lonafarnib	✓	✓	N/A	Phase 3 >90% Enrolled*; Full Enrollment by Year-End
	Peginterferon Lambda	✓	✓	N/A	Phase 3 Initiating
 Post-Bariatric Hypoglycemia	Avexitide	✓	✓	N/A	Manufacturing and Device Development in 2021; Phase 3 as Early as 2022
 Congenital Hyperinsulinism		✓	✓	✓	
 COVID-19	Peginterferon Lambda	N/A	N/A	N/A	Phase 3 Enrolling
 Progeria & Progeroid Laminopathies	 Zokinvy® (lonafarnib) capsules 50 mg/75 mg	✓	✓	PRV Sold	FDA Approved; MAA Under Review



Eiger HDV Platform in Phase 3

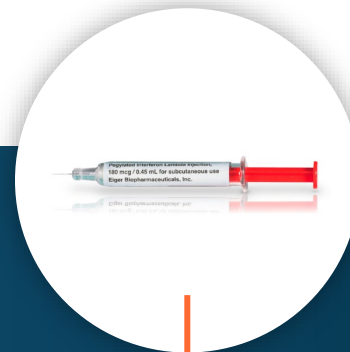
FOUNDATIONAL THERAPIES FOR FUTURE COMBINATIONS



Lonafarnib/Ritonavir

ORAL

D-LIVR



Peginterferon Lambda

WEEKLY SUB Q

LMT-2

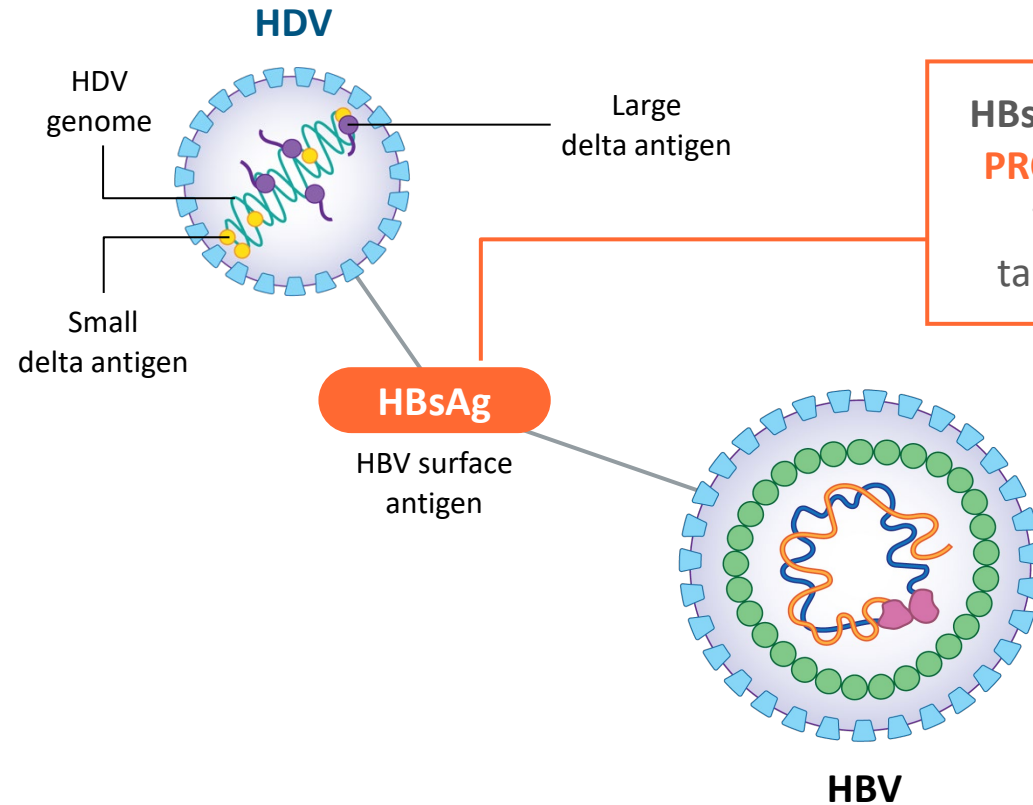
Convenient administration for improved patient compliance
Potential HDV cure and maintenance therapies



HDV is Always a Co-infection with HBV

HDV REQUIRES HBsAg TO COMPLETE VIRUS ASSEMBLY

HDV consists of a single stranded, circular RNA virus, with an envelope made up of HBsAg



**HBsAg Acquired Through
PROTEIN PRENYLATION**

This is mechanism
targeted by lonafarnib



HDV: Most Severe Form of Viral Hepatitis

60% OF HDV-INFECTED PATIENTS DIE WITHIN 10 YEARS AFTER INFECTION

Co-infection with HBV

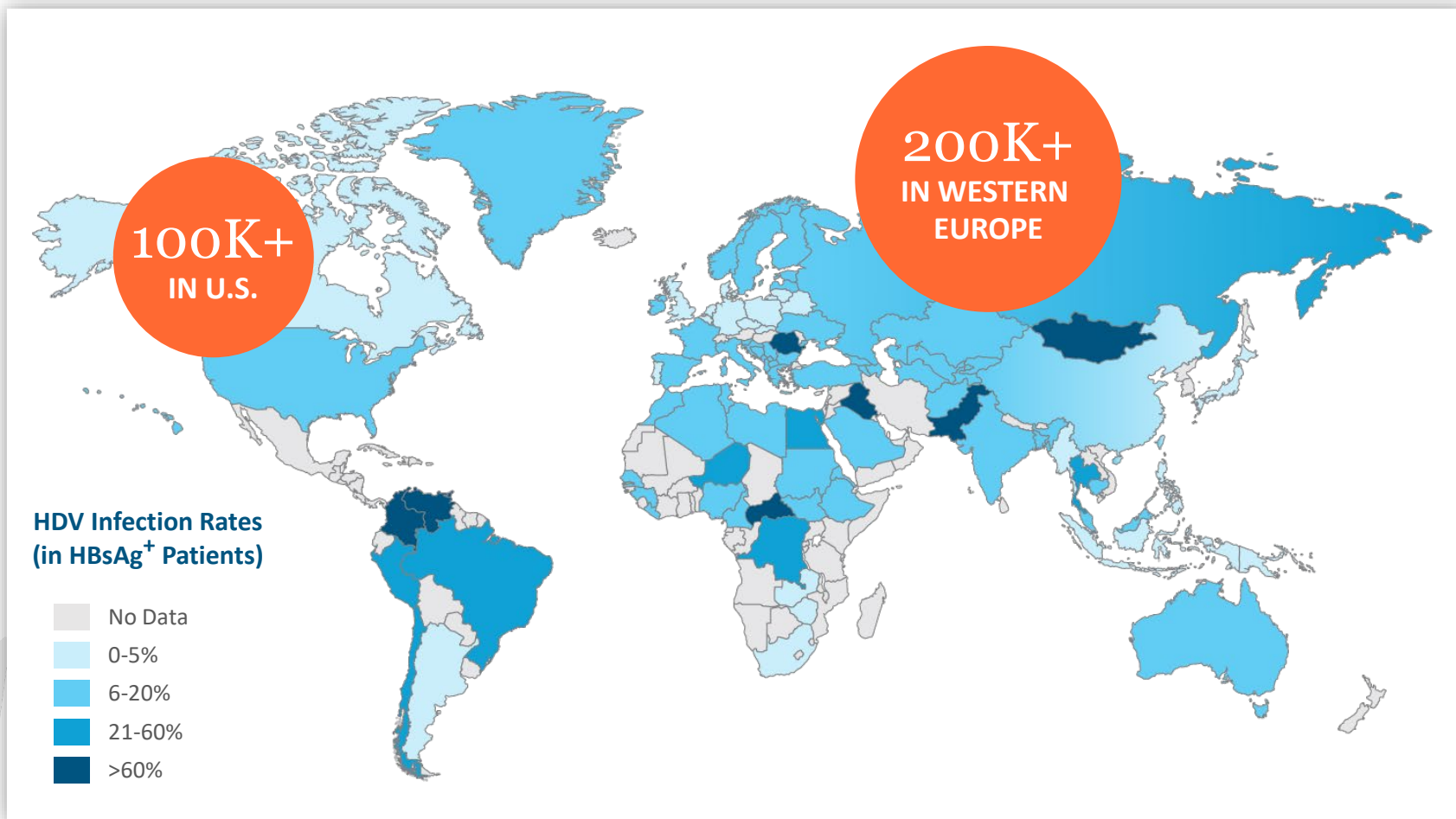


Progression to Cirrhosis	
HCV	10-20% within 20 Years
HBV	20% within 5 Years
HDV	70% within 5-10 Years



12M HDV Patients Worldwide

~4-6% OF HBV-INFECTED POPULATION



Migration
Contributing to
Globalization
of Disease



\$1B+ HDV Market Opportunity

ONLY 3% MARKET PENETRATION REQUIRED



ADDRESSABLE MARKET

~300,000 Patients¹

~100K
in US

~200K
in EU



PENETRATION REQUIRED FOR \$1B SALES

~3% of Patients²

~3K
in US

~6K
in EU



ORPHAN PRICING

Per Year³

~\$150,000
in US

~\$98,000
in EU



What Does a Win Look Like for HDV Patients?

CONSISTENT WITH FDA GUIDANCE ON DEVELOPMENT OF TREATMENTS FOR HDV



- Reduction in HDV Viral Load
- Improvement in Liver Inflammation (ALT)



- Slows Disease Progression
- Improves Liver Histology
- Improves Survival



Lonafarnib for HDV

FIRST AND ONLY ORAL AGENT IN DEVELOPMENT FOR HDV

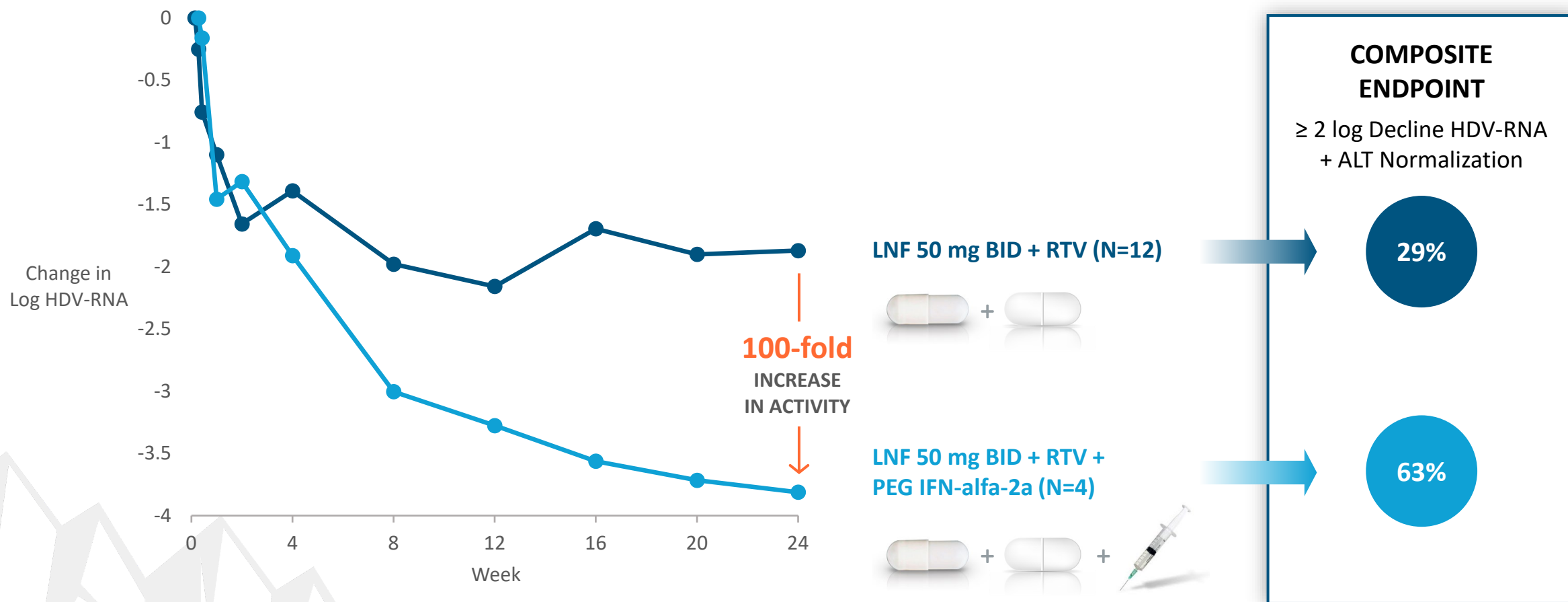
- Well-characterized in patients
 - > 2,000 patients dosed in oncology program by Merck (Schering)
 - > 90 children dosed in Progeria program by Boston Children's Hospital
 - > 170 patients dosed in HDV program
 - Longest duration of dosing > 10 years
- Most common AEs are GI related
- **Orphan Designation** U.S. and EU
- **FDA Breakthrough Therapy** Designation
- **EMA PRIME** Designation
- Patent estate covers broad range of lonafarnib + ritonavir doses and durations





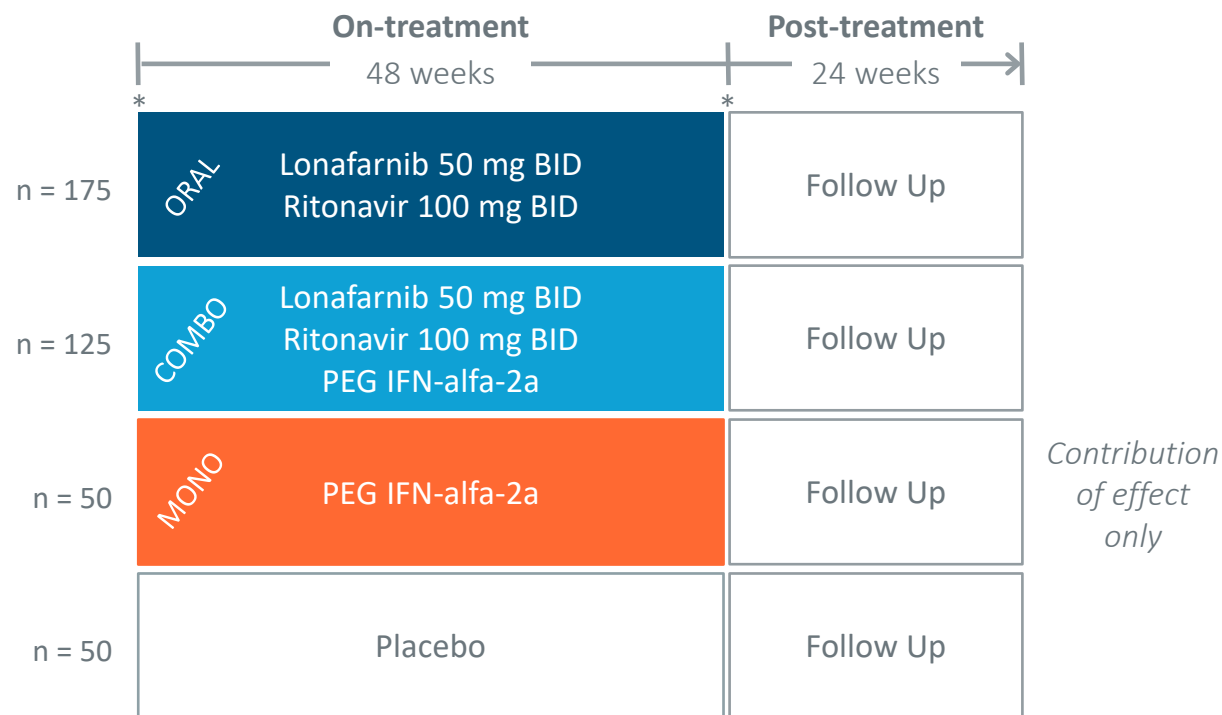
Lonafarnib Phase 2 Data

TWO LONAFARNIB-BASED REGIMENS IDENTIFIED FOR REGISTRATION



D-LIVR Phase 3 Global Study

MULTIPLE PATHWAYS TO APPROVAL



**Primary Endpoint
at Week 48**
≥ 2 log decline in HDV RNA
+
Normalization of ALT

**Secondary Endpoint
at Week 48**
Histologic improvement
Improvement of fibrosis

* biopsy
All patients will be maintained on background HBV nucleoside therapy.
Superiority over PEG IFN-alfa-2a not required.

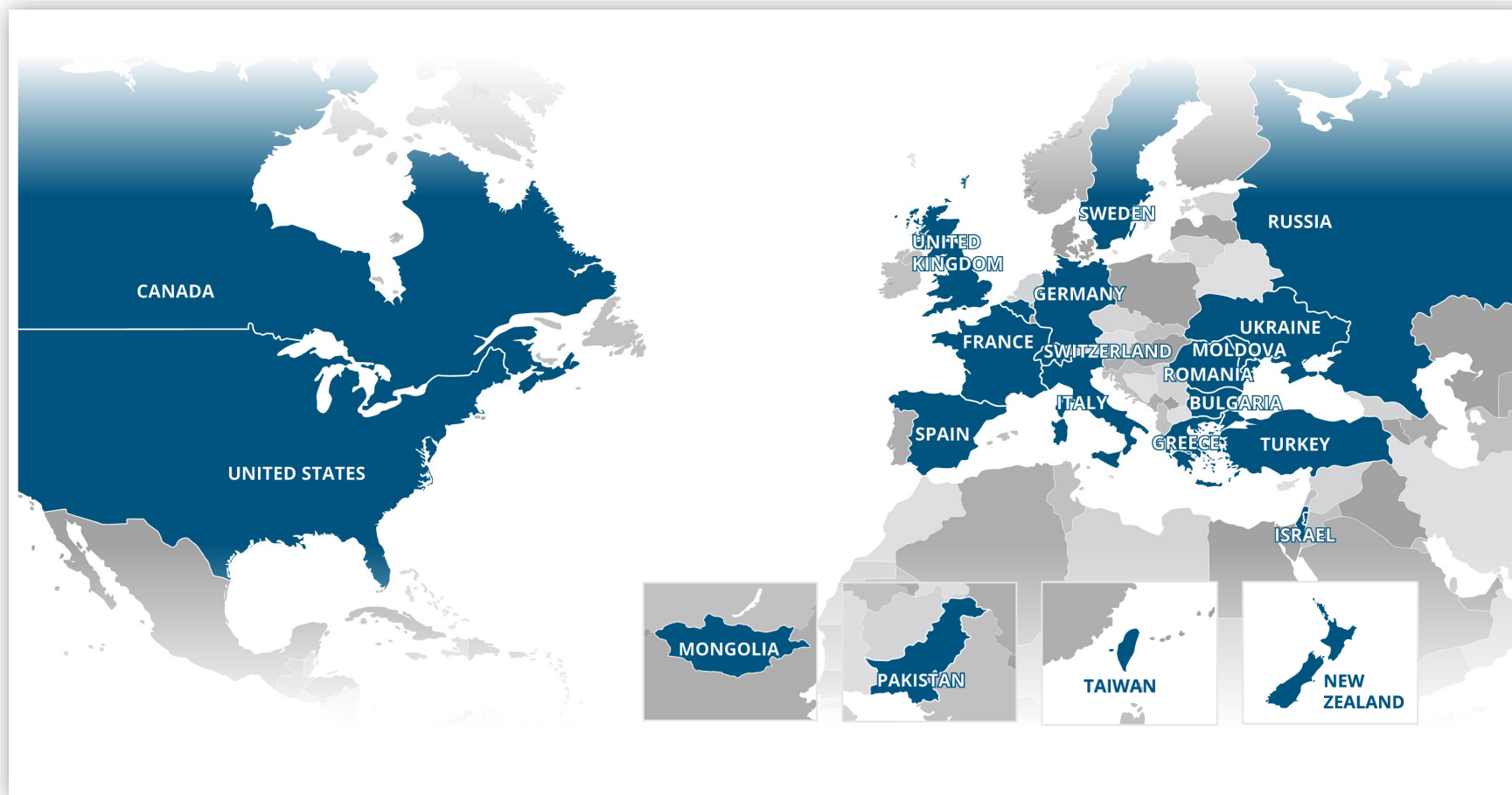
D-LIVR Phase 3 Global Study



>90% Enrolled*

Full Enrollment in 2021

20+ 100+
COUNTRIES SITES





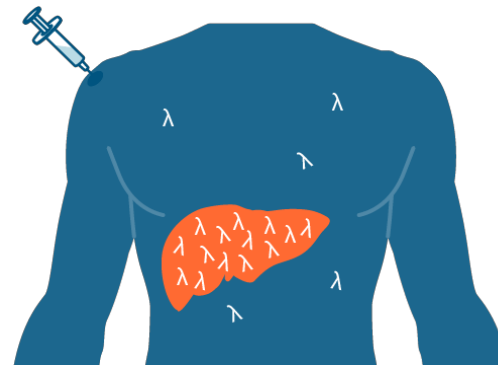
Peginterferon Lambda (Lambda) for HDV

A WELL TOLERATED INTERFERON

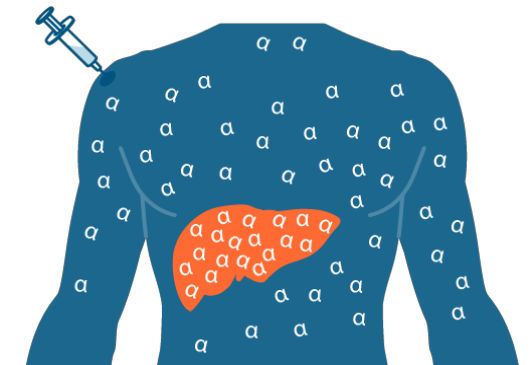
- Binds to a unique receptor vs type I IFN- α
 - Highly expressed on hepatocytes
 - Limited expression on hematopoietic and CNS cells
- Uses similar downstream signaling pathway to IFN- α
- 3,000+ patients in 19 clinical trials (HCV / HBV / HDV)
- **Orphan Designation** in U.S. and EU
- **FDA Breakthrough Therapy Designation**
- Composition of matter and method of use patents

Lambda Receptors Highly Expressed in the Liver

LAMBDA RECEPTORS NOT WIDELY
DISTRIBUTED THROUGHOUT BODY



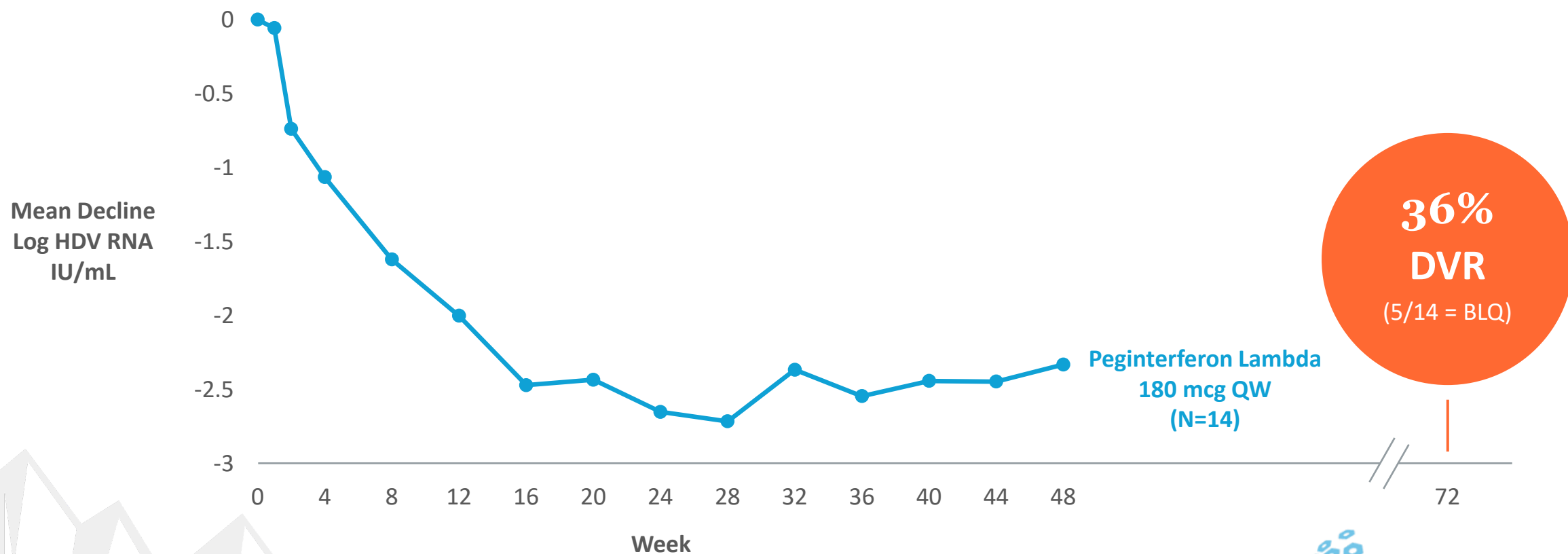
IFN- α RECEPTORS WIDELY
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Phase 2 Peginterferon Lambda Study Results

36% DURABLE VIROLOGIC RESPONSE (DVR) WITH PEGINTERFERON LAMBDA

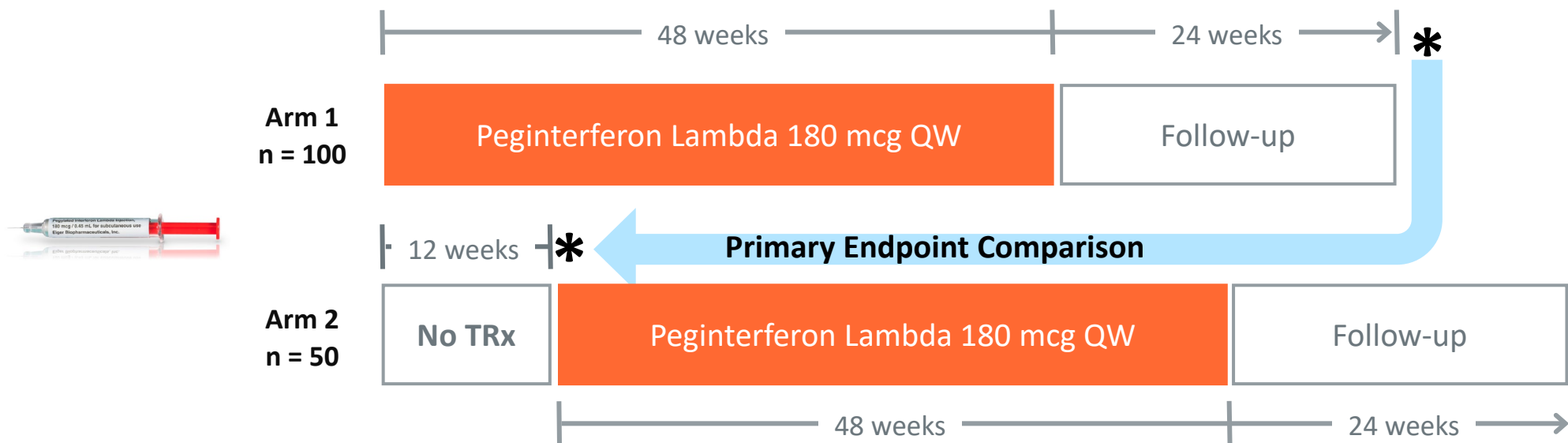




Peginterferon Lambda Phase 3 Study of HDV



STUDY INITIATING IN 2021

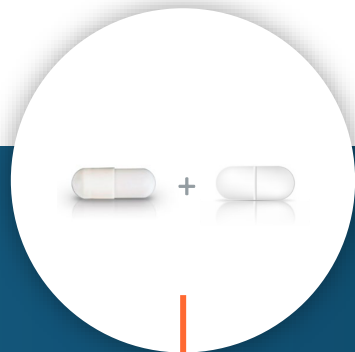


***Primary Endpoint:** DVR at 24 Weeks Post-TRx (Arm 1) versus 12 Weeks Post-No TRx (Arm 2)
DVR (Durable Virologic Response) = Below the Limit of Quantification (BLQ) at 24 Weeks Post-Treatment



Eiger HDV Platform in Phase 3

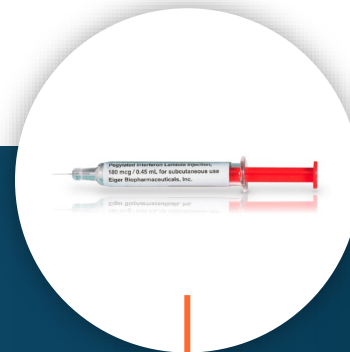
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Peginterferon Lambda for COVID-19

POTENTIAL AS A CONVENIENT, OUTPATIENT THERAPY FOR NEWLY DIAGNOSED PATIENTS

- Positive Phase 2 *ILIAD* results in newly diagnosed COVID-19 outpatients
- Potential to improve clinical outcomes and curb community spread
- Treatment well tolerated*
- Resistance due to variants of SARS-CoV-2 may not be an issue due to mechanism of action
- Provided in a prefilled syringe as a convenient, single dose, outpatient treatment





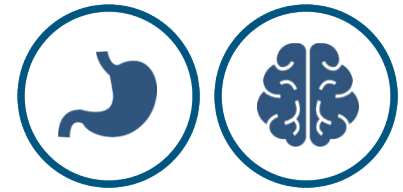
together•COVID-19 Phase 3 Platform Study

POSITIVE DATA COULD SUPPORT EMERGENCY USE AUTHORIZATION SUBMISSION



- Multi-center, investigator-sponsored, randomized, placebo-controlled Phase 3 study
- Peginterferon Lambda arm enrolling up to 800 high-risk, non-hospitalized patients
- Primary endpoint is reduction of emergency room visits and hospitalizations
- Recruiting at twelve sites in Brazil
- First interim futility analysis: Sep 2021 DSMB recommends to continue Peginterferon Lambda
- Additional interim futility analyses planned

Avexitide Is a First-in-Class GLP-1 Antagonist



TARGETED MOA FOR POST-BARIATRIC HYPOGLYCEMIA AND CONGENITAL HYPERINSULINISM

- Novel Liquid Formulation Developed
- Sub-cutaneous Delivery
- Targeted Mechanism of Action
- Differential Device Strategies for PBH & HI
- Patent Protection Will Provide Market Exclusivity Through at Least 2039



Avexitide for PBH

PHASE 3 READY IN 2022



POST-BARIATRIC HYPOGLYCEMIA (PBH)



- Complication of bariatric surgery
- Dangerously low blood sugar after meals
- ~**5-10%** of Roux-en-Y Gastric Bypass
- ~**2.5%** of Vertical Sleeve Gastrectomy
- ~150K PBH patients in U.S. & EU5
- Other procedures: esophagectomy, gastrectomy, Nissen fundoplication

PBH results in **SEVERE HYPOGLYCEMIA**:
altered mental status, loss of consciousness, seizures, coma

CLINICAL & REGULATORY STATUS

- Proof of concept demonstrated in 54 patients dosed across 4 completed Phase 2 studies
- Most recent Phase 2 data published in *JCEM* 2021
- FDA **Breakthrough Therapy** Designation for Hypoglycemic Hypoglycemia
- Concurrence with FDA and EMA on single pivotal study (N=90) with end points previously demonstrated in Phase 2

Phase 3 ready as early as 2022:
Manufacturing and device development ongoing

Avexitide for HI

FDA DISCUSSIONS ONGOING FOR PHASE 3 STUDY DESIGN



CONGENITAL HYPERINSULINISM (HI)



- Ultra-rare pediatric metabolic disorder
- Most frequent cause of persistent hypoglycemia in neonates and children
- >3,300 patients in U.S. & EU5
- Well-defined market; multiple therapies in development
- Near-total pancreatectomy is indicated

HI results in **PERMANENT BRAIN DAMAGE** with neurodevelopmental deficits in up to 50% of patients

CLINICAL & REGULATORY STATUS

- Proof of concept demonstrated in 39 patients across 3 Phase 2 studies (neonates, children, adolescents/adults)
- Clinically significant endpoint (glucose infusion rate) demonstrated
- **FDA Breakthrough Therapy Designation**
- **FDA Rare Pediatric Disease Designation**; PRV eligible
- Differentiated from PBH based on dose and device

FDA discussions ongoing for Phase 3 neonate/child studies

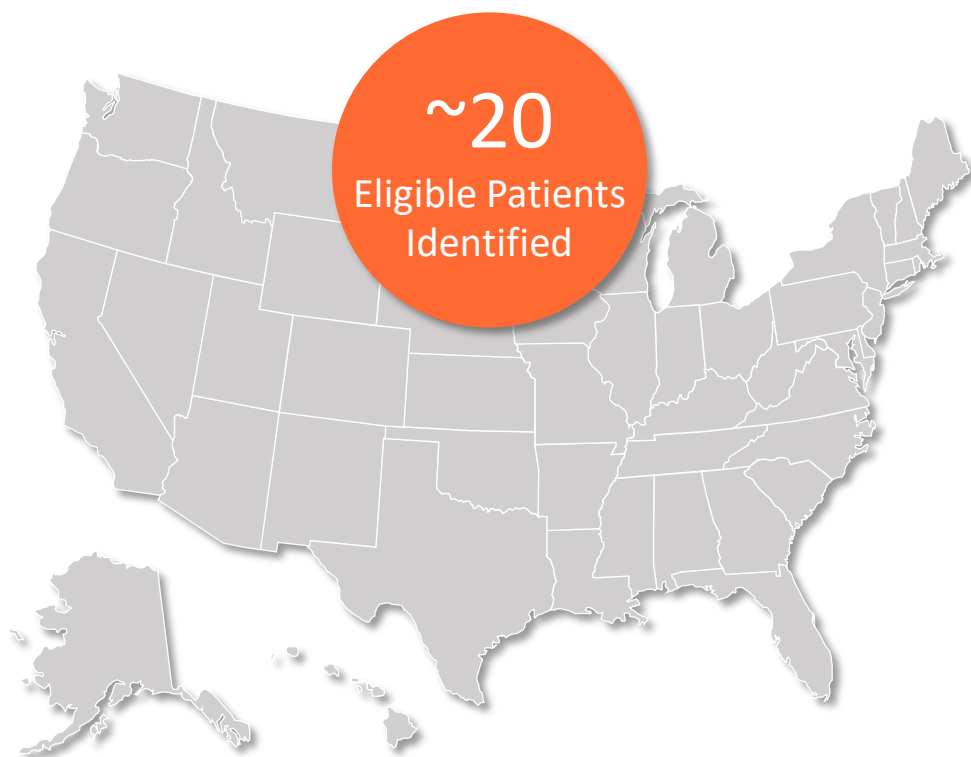


FDA Approved to Reduce the Risk of Mortality in Hutchinson-Gilford Progeria Syndrome (Progeria)

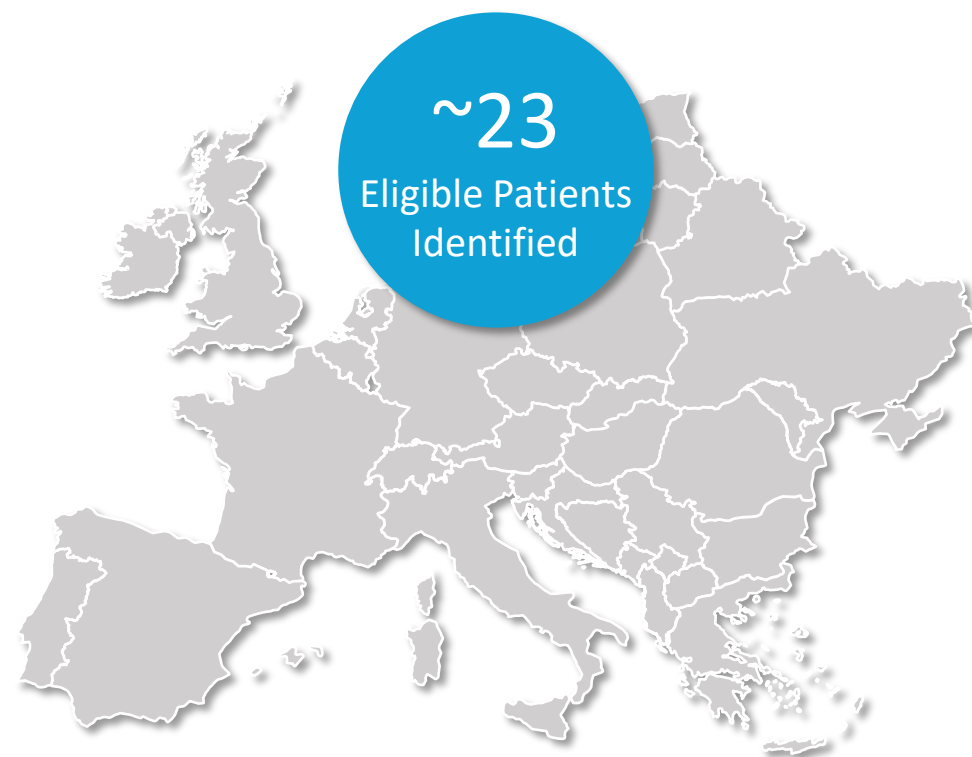


Photos courtesy of The Progeria Research Foundation and Progeria Family Circle

Initial Commercial Focus in U.S. and Europe



U.S. – Commercially Launched in Jan 2021



Europe – Preparing for Commercial Launch



- Phase 3 HDV *D-LIVR*: >90% enrolled*; full enrollment by end of 2021
- Phase 3 HDV *LIMT-2* study initiating
- Phase 3 COVID-19 *TOGETHER* study enrolling
- Zokinvy EMA decision expected in 2021
- Avexitide manufacturing and device development in 2021
- Strong cash balance: planned operations funded into 4Q 2023