Better Antibodies By Design

Investor Presentation
December 2017

Genmab

Forward Looking Statement

This presentation contains forward looking statements. The words “believe”, “expect”, “anticipate”, “intend” and “plan” and similar expressions identify forward looking statements. All statements other than statements of historical facts included in this presentation, including, without limitation, those regarding our financial position, business strategy, plans and objectives of management for future operations (including development plans and objectives relating to our products), are forward looking statements. Such forward looking statements involve known and unknown risks, uncertainties and other factors which may cause our actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by such forward looking statements. Such forward looking statements are based on numerous assumptions regarding our present and future business strategies and the environment in which we will operate in the future. The important factors that could cause our actual results, performance or achievements to differ materially from those in the forward looking statements include, among others, risks associated with product discovery and development, uncertainties related to the outcome of clinical trials, slower than expected rates of patient recruitment, unforeseen safety issues resulting from the administration of our products in patients, uncertainties related to product manufacturing, the lack of market acceptance of our products, our inability to manage growth, the competitive environment in relation to our business area and markets, our inability to attract and retain suitably qualified personnel, the unenforceability or lack of protection of our patents and proprietary rights, our relationships with affiliated entities, changes and developments in technology which may render our products obsolete, and other factors. Further, certain forward looking statements are based upon assumptions of future events which may not prove to be accurate. The forward looking statements in this document speak only as at the date of this presentation.

Genmab At-A-Glance

Vision: By 2025, our own product has transformed cancer treatment and we have a pipeline of knock-your-socks off antibodies

DARZALEX®
Arzerra®

2 marketed products generating royalty income

Tisotumab vedotin
HuMax®-AXL-ADC
HexaBody® -DR5/DR5

3 exciting proprietary clinical programs

DuoBody® Platform
HexaBody® Tech.

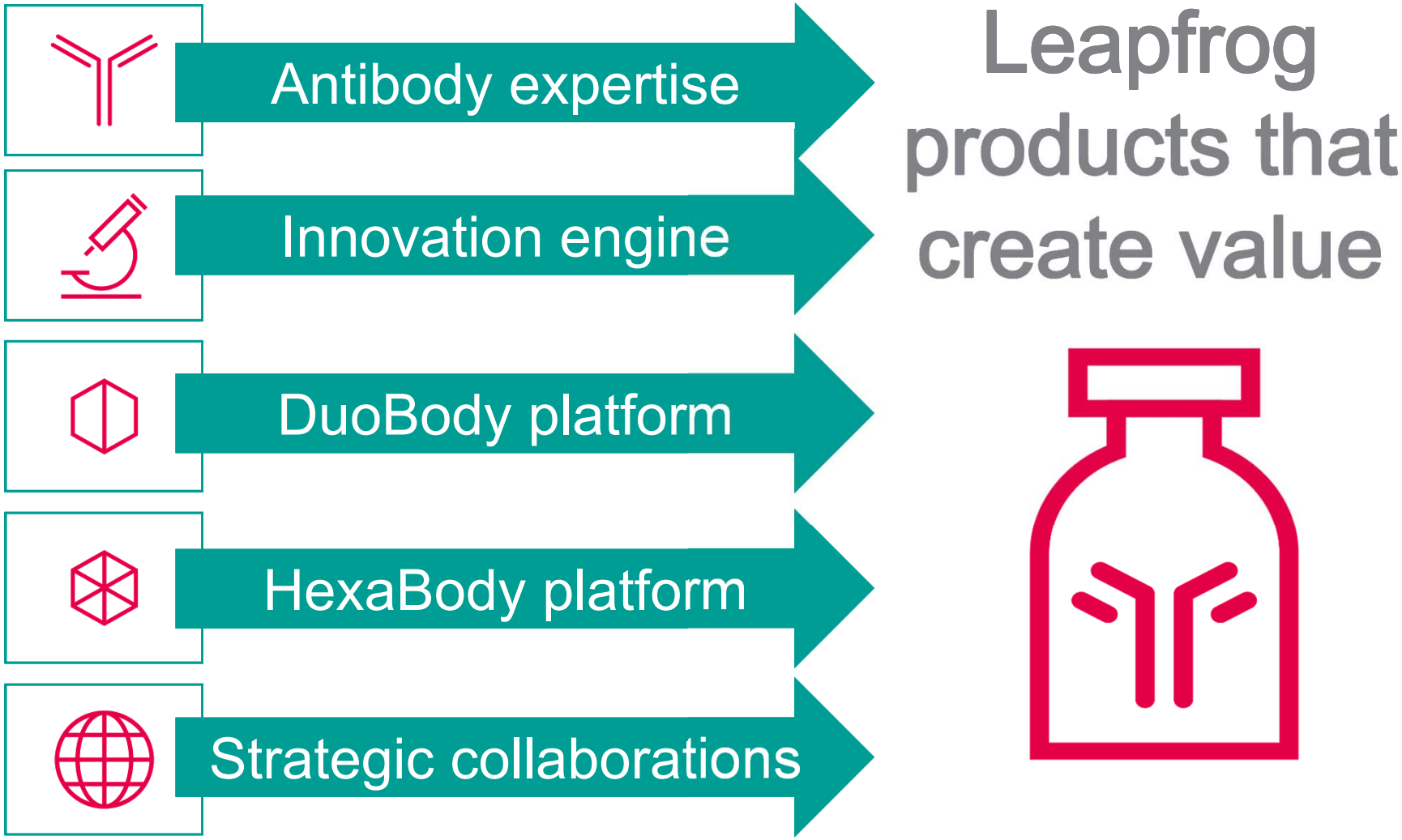
2 proprietary next gen. technologies for robust pre-clinical pipeline

Solid financial base

Aim to own at least 50% of product rights
Allows for building capabilities to market own product in future

Antibody Innovation Powerhouse

Creating Value for Stakeholders



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Innovative Clinical & Pre-clinical Pipeline

Further Development for Marketed Products

Product	Disease Indications	Development Phase: Pre-Clinical	I	I/II	II	III
Daratumumab BTD (2 - MM) Target: CD38 Partner: Janssen	Multiple myeloma (MM)					
	Amyloidosis					
	Natural Killer /T-Cell Lymphoma (NKTCL), Nasal Type					
	Myelodysplastic Syndromes (MDS)					
	Solid tumors					
Ofatumumab BTD (CLL) Target: CD20 Indication: Cancer Partner: Novartis	Follicular lymphoma (FL)					
Ofatumumab (OMB157) Target: CD20 Indication: AI Partner: Novartis	Relapsing multiple sclerosis (RMS) (SubQ)					

Innovative Clinical & Pre-clinical Pipeline

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Product	Disease Indications	Development Phase (Pre-Clinical, I, I/II, II, III)
Tisotumab vedotin Target: TF	Solid cancers	
HuMax-AXL-ADC Target: AXL	Solid cancers	
Teprotumumab (RV001) BTD Target: IGF-1R, Partner: Horizon Pharma	Graves' orbitopathy	
AMG 714 Target: IL-15, Partner: Celimmune	Celiac Disease	
ADCT-301 (HuMax-TAC-ADC) Target: CD25, Partner: ADCT	Lymphoma	
	Acute myeloid leukemia (AML) or acute lymphoblastic leukemia (ALL)	
JNJ-61186372 Targets: EGFR, cMet, Partner: Janssen	Non-small-cell lung cancer (NSCLC)	
JNJ-63709178 Targets: CD3, CD123, Partner: Janssen	Acute Myeloid Leukemia (AML)	
JNJ-64007957 Targets: BCMA, CD3, Partner: Janssen	Relapsed or refractory MM	
>20 Active Pre-clinical programs incl. HexaBody-DR5/DR5, DuoBody CD3xCD20	Proprietary programs: HuMab, HuMab-ADC, DuoBody, DuoBody-ADC & HexaBody	
	Partnered programs: HuMab, DuoBody & HexaBody	

Daratumumab (Marketed as DARZALEX®)
Approved in US & EU

First-in-class antibody targeting CD38 – 2 FDA BTDs

Marketed as monotherapy in US & EU for double refractory MM

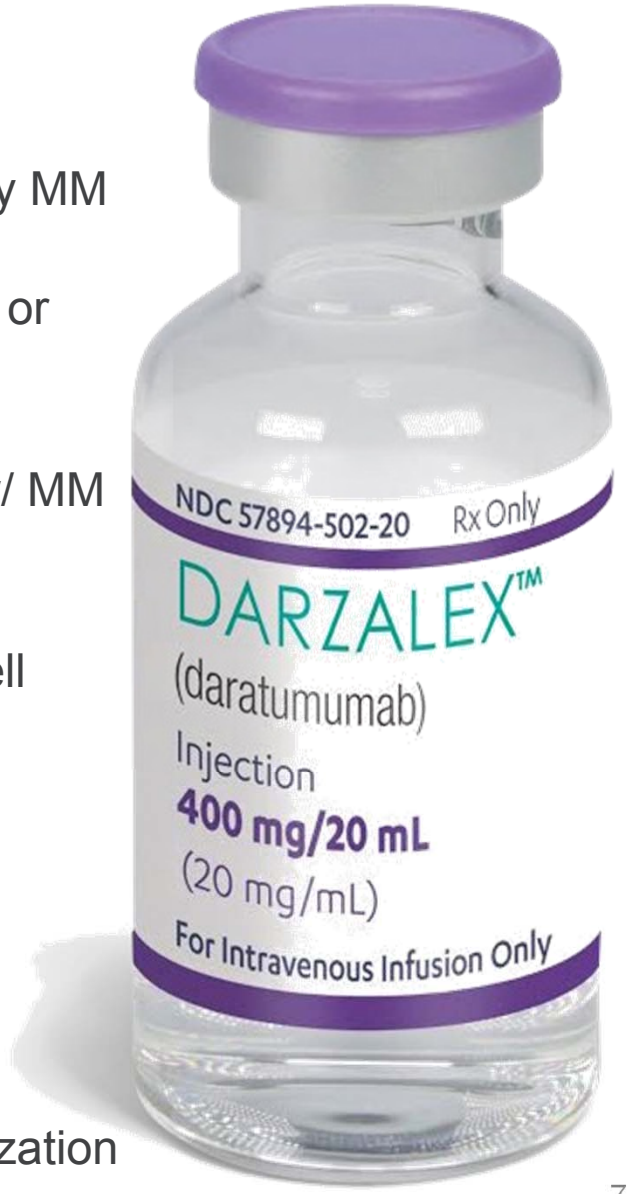
Approved in US, EU & Japan in combo. w/ Revlimid & dex or Velcade & dex for relapsed / refractory MM

Approved in the US in combo. w/ Pomalyst & dex for pts w/ MM who have received at least 2 prior therapies

Industry sponsored clinical studies ongoing in MM, NKT-cell lymphoma, MDS, amyloidosis and solid tumors

Blockbuster potential – growing royalty income
- Royalty rate: 12% - 20%

Collaboration w/ Janssen Biotech
- Up to $1bn in dev., reg. & sales milestones, Janssen responsible for all costs assoc. w/ dev. & commercialization



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Expansive Daratumumab Clinical Development: MM

Disease Stage	Therapy	No. Pts	Development Phase: Pre-Clinical	I	I/II	II	III
High Risk Smoldering	Subcutaneous	360	AQUILA				
	Monotherapy	126	✓ CENTAURUS				
Front line (transplant & non-transplant)	Dara + VMP	706	✓ ALCYONE				
	Dara + VMP (Asia Pacific)	192					
	Dara + Rd	744	✓ MAIA				
	Dara + VTd	1,080	✓ CASSIOPEIA				
	Dara + RVd	216	GRIFFIN				
	Multi combo study (6 arms)	250	EQUULEUS				
Relapsed or Refractory	Dara + Vd (China)	210					
	Dara + Kd	450	CANDOR				
	Dara + Pom + d	302	APOLLO				
	Subcutaneous vs IV	480	COLUMBA				
	Dara + Imfinzi*	264	FUSION				
	Dara + Keytruda	57					
	Dara + Venclexta + d +/- V	90					
	Dara + Opdivo*	375					
	Dara + Tecentriq*	288					
	Dara + JNJ-63723283	386					

V = bortezomib , MP = melphalan-prednisone , T = thalidomide , d= dexamethasone, R = lenalidomide, K = Kyprolis, Pom = Pomalyst

✓ Fully recruited *Trials on partial clinical hold, unrelated to daratumumab Maintenance integrated into some study protocols

Select Studies

Expansive Daratumumab Clinical Development

Other Indications

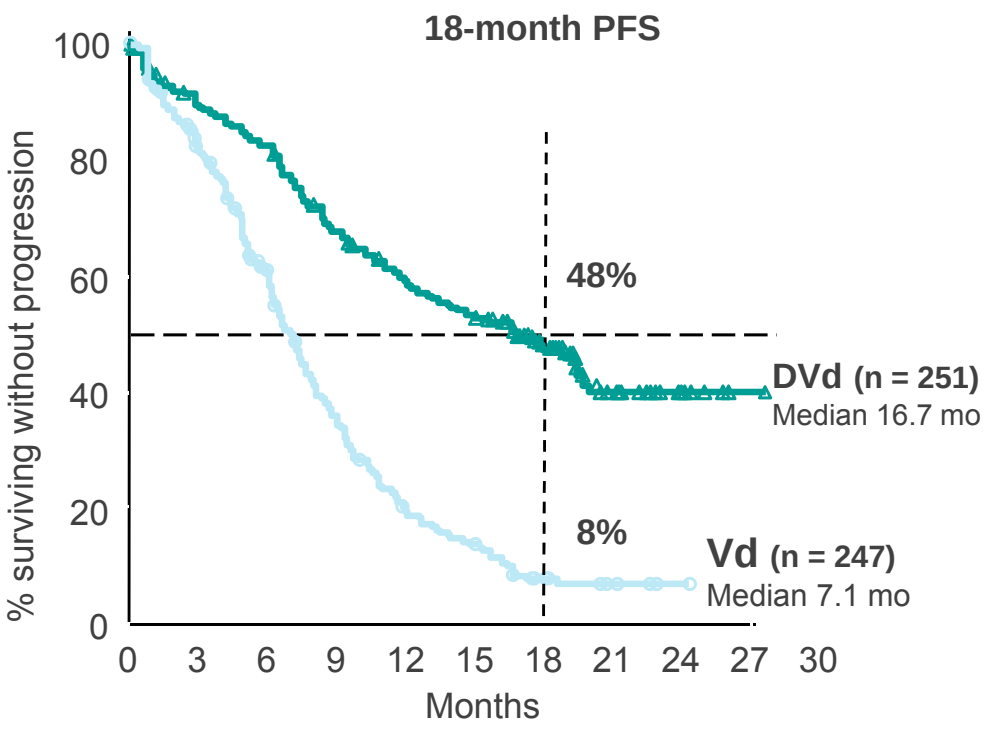
Disease Stage	Therapy	No. Pts	Development Phase: Pre-Clinical	I	I/II	II	III
Amyloidosis	Dara SC + CyBorD	370	ANDROMEDA				
NKTCL (nasal type)	Monotherapy	32	VOLANS				
Colon cancer	Dara + Opdivo	340					
MDS	Dara or talacotuzumab	31					
NSCLC	Dara + Tecentriq	96	CALLISTO				
NSCLC, pancreatic, triple neg. breast cancers	Dara + Opdivo	120					
Virus associated tumors	Dara + Opdivo	500					

CyBorD = cyclophosphamide, bortezomib and dexamethasone

Updated Efficacy: CASTOR & POLLUX
Phase III Relapsed or Refractory Multiple Myeloma

CASTOR

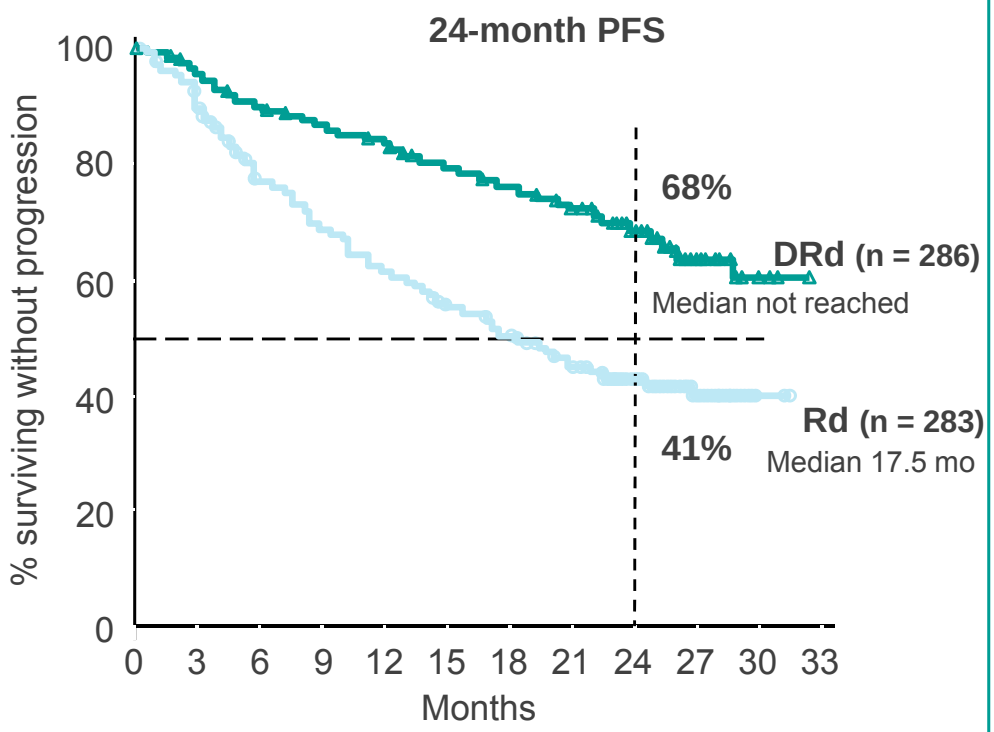
Dara + Bort + Dex (DVd)



HR: 0.31
(95% CI, 0.24-0.39; *P* <0.0001)

POLLUX

Dara + Len + Dex (DRd)

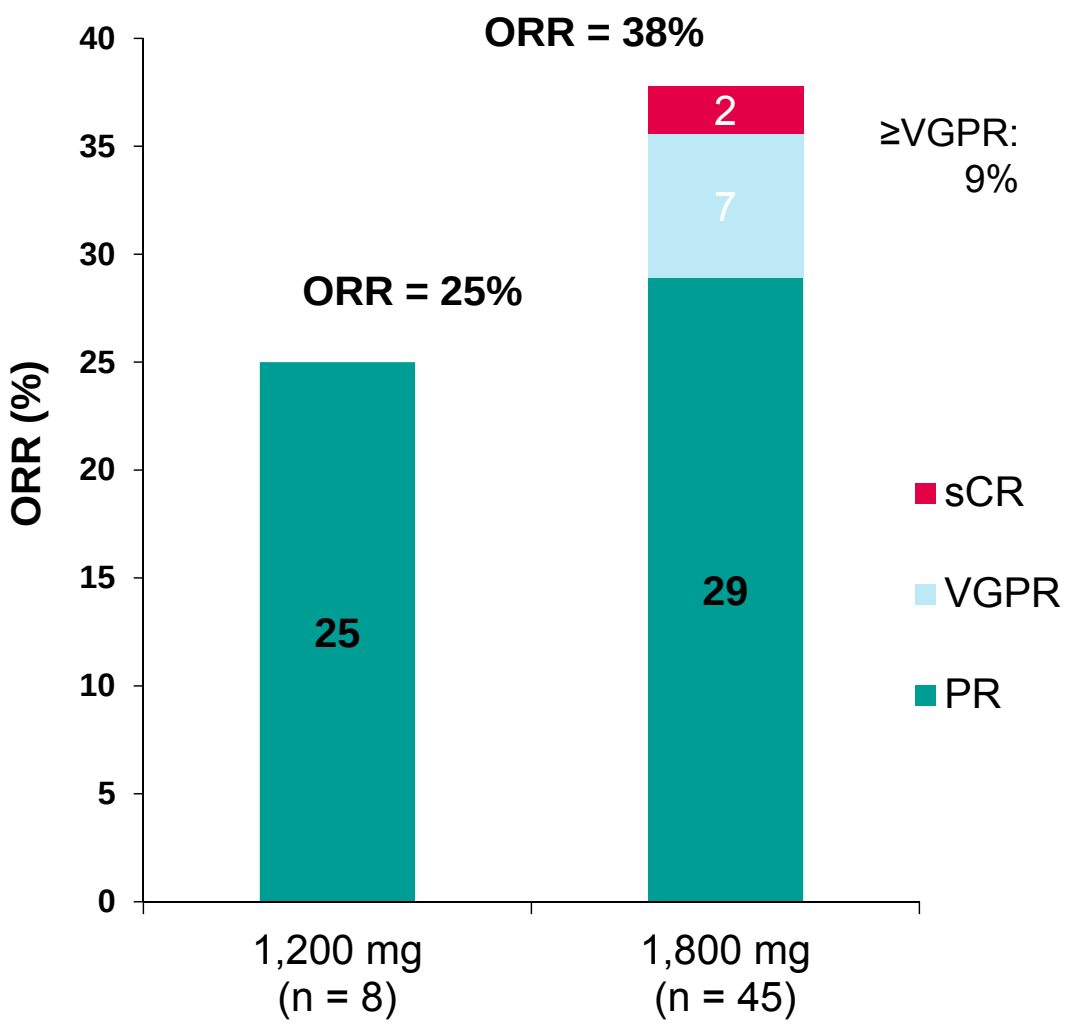


HR, 0.41
(95% CI, 0.31-0.53; *P* <0.0001)

Presented at ASCO – Chicago, June 2017

Subcutaneous Daratumumab

Data PhIb PAVO Study in Relapsed or Refractory MM



Faster Infusion time

- 1,800 mg dose: ~30min
- First IV infusion: 7 hrs

Lower IRR incidence

- 1,800 mg dose: 24%
- 16 mg/kg IV dose: 48%

PK profile of 1,800 mg dose consistent with 16 mg/kg IV dose

Presented at ASH – San Diego, Dec. 2016

Ofatumumab (Arzerra®)

Human antibody targeting CD20

Two Phase III studies in relapsing MS ongoing

MS Advantages: Dosing
Better disease management, subcutaneous dosing

MS Advantages: Attributes
Potential for low immunogenicity, manageable safety profile

Marketed in various territories for certain CLL indications*

Collaboration with Novartis
Cash flow positive for Genmab

*See local country prescribing information for precise indications

Clinical Projects: Tisotumab vedotin

Phase I/II studies in Patients with Solid Tumors

Fully human antibody-drug conjugate (ADC)

Targets Tissue Factor (TF)
- Therapeutic potential in broad range of solid tumors

Studies ongoing in solid tumors
- Indications incl. gynecologic (ovarian, cervical, and endometrial) cancers, prostate, bladder, & esophageal cancers, NSCLC & SCCHN

Encouraging preliminary safety & efficacy data
- Promising data in pts w/ cervical cancer
- Based on data, looking at further dev. in indication

Co-development with Seattle Genetics

Clinical Projects: HuMax-AXL-ADC

Efficacy in *in vivo* Tumor Model

Human ADC

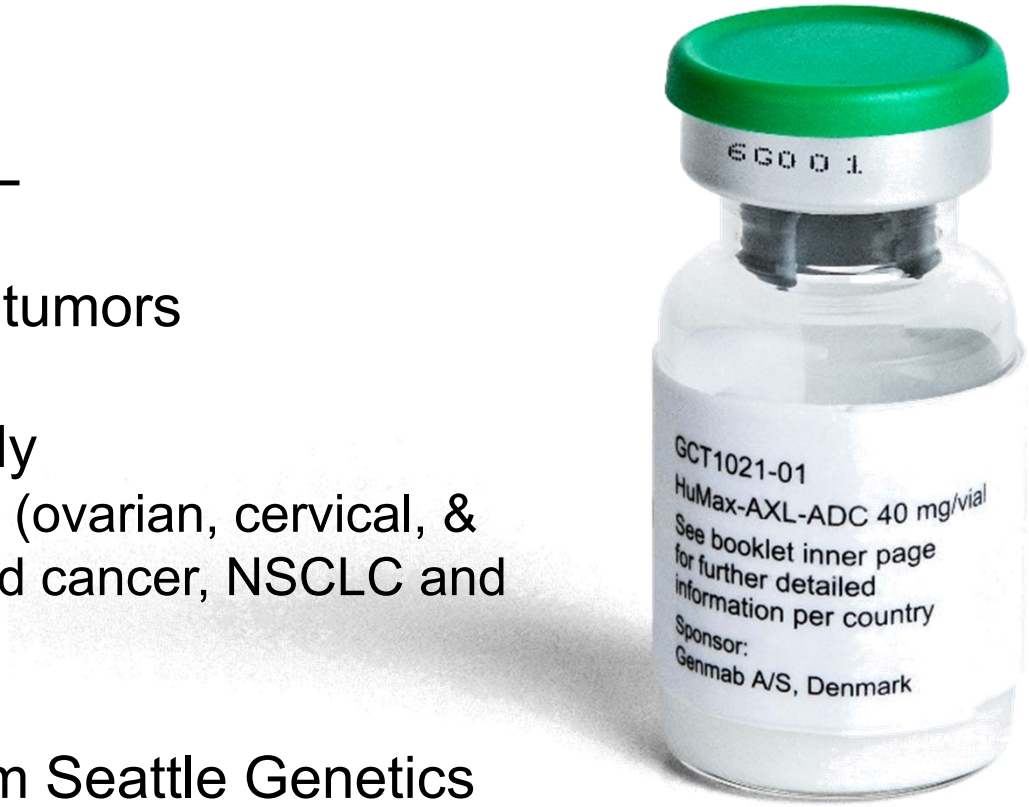
Targets tumor-associated AXL

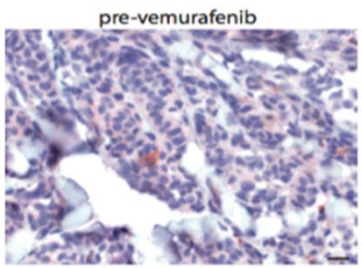
Therapeutic potential in solid tumors

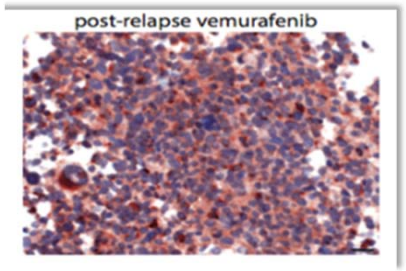
First-in-human Phase I/II study

- Indications incl. gynecologic (ovarian, cervical, & endometrial) cancers, thyroid cancer, NSCLC and melanoma

ADC technology licensed from Seattle Genetics







Malignant Melanoma: AXL expression indicated by brown staining

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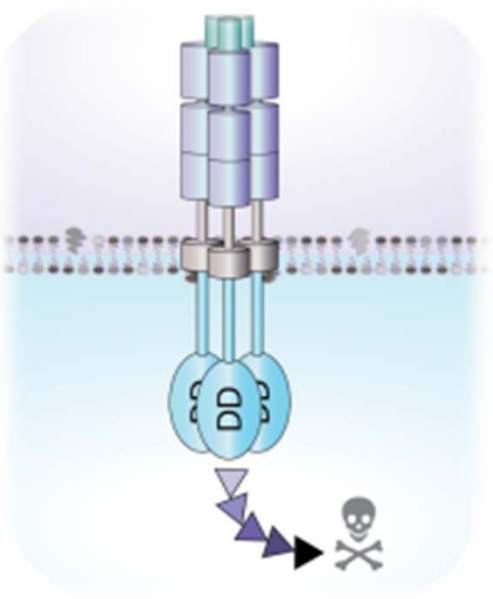
Next in the Clinic: 2017 IND Candidates

HexaBody-DR5/DR5

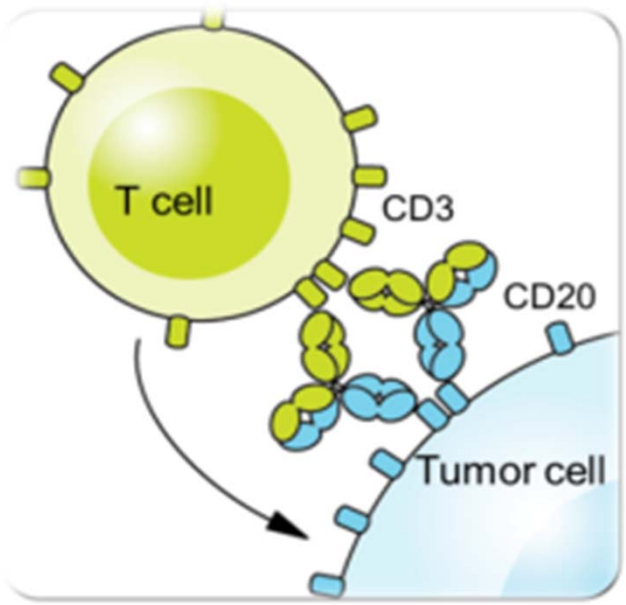
- Targets DR5 for cancer therapy
- Potentially effective in multiple tumor types



DR5 activation induces cell death

DuoBody CD3xCD20

- Humanized IgG1 bispecific antibody
- Activates T cells to kill CD20^{+} tumor cells



Genmab Proprietary Innovative Pipeline

Potential INDs in next 4 years

Technology	product	2017	2018	2019	2020
HexaBody	HexaBody-DR5/DR5				
DuoBody	DuoBody-CD3xCD20				
HexaBody	DuoHexaBody				
DuoBody	DuoBody-CD3xX				
Immuno-Oncology [>10 progr.]*	DuoBody-A				
	DuoBody-B				
	DuoBody-C				
	DuoBody-D				
*: Aduro Biotech & BioNTech	DuoBody-E				

Pre-clinical pipeline targeting at least 4 leapfrog INDs in next 4 years

Cutting Edge Capabilities: Proprietary Technologies to create Leapfrog Drugs

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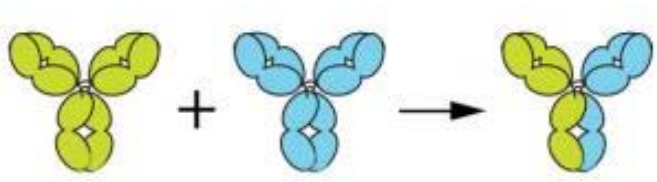
DuoBody



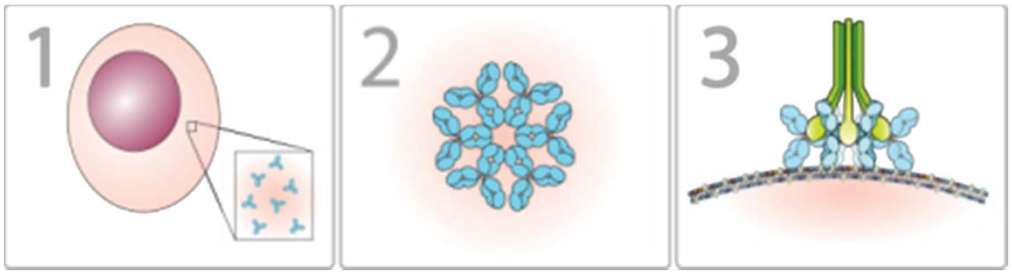
DuoBody

- Efficient & versatile bispecific Ab platform
- Applicable to any antibody from any platform
- Regular IgG format
- Large scale production validated
- No developability liabilities
- Robotized bispecific library generation
- Multiple ongoing collaborations incl. with Novo Nordisk, Gilead & Janssen Biotech

HexaBody

- Robust effector function enhanced Ab
- Enables antibodies to readily form clusters of 6 (hexamers)
- Induces & enhances target cell killing after binding (CDC and apoptosis)
- Creates innovative products in cancer & infectious diseases
- Collaborations with Humabs BioMed, Agenus and others

HexaBody



Cutting Edge Capabilities: Immuno-Oncology

Turning Cancer into a Chronic Condition

Innovating cancer treatment

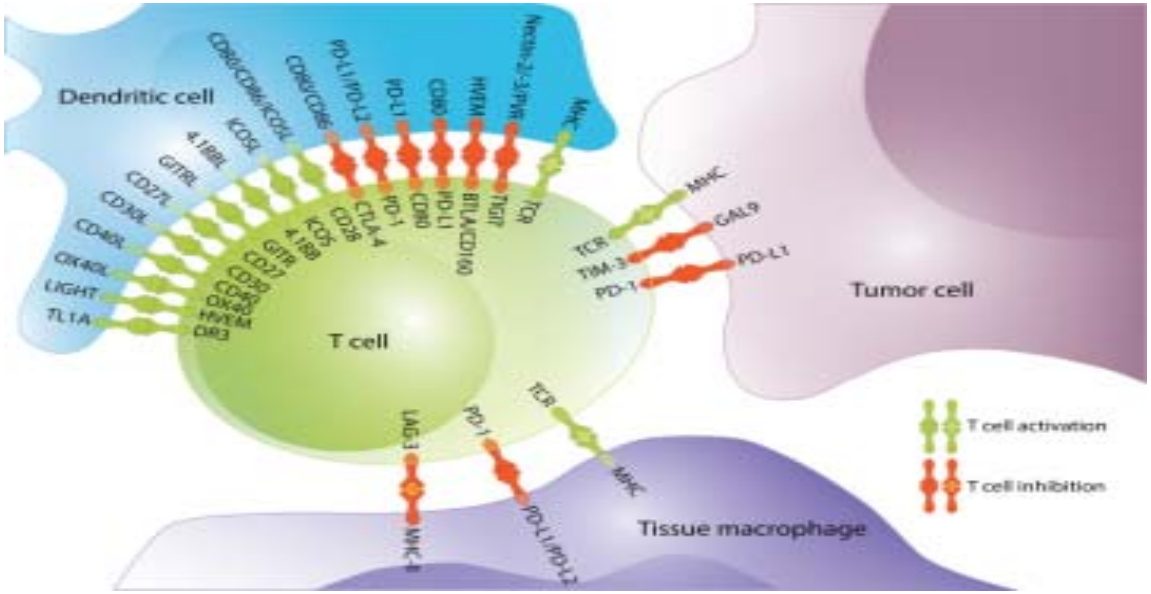
- Activate patient's own immune system
- Long duration of response
- Potential game changer
- >$50B market

DuoBody technology

- Robust & versatile bispecific antibody platform
- Screening multiple combinations in final therapeutic format
- Combined targeting immune check points
- Current Partnerships
  - Aduro Biotech
  - BioNTech

daratumumab + anti-PD-L1 / PD-1

- Multiple studies started in 2016 & 2017
- Ph II study in combi. w/Tecentriq (Genentech) in relapsed / refractory MM & NSCLC
- PhII study in combi. w/ Imfinzi (Celgene) in relapsed / refractory MM
- Ph Ib/II in combi. w/Opdivo (BMS) in solid tumors & MM
- Ph II in combi. w/ Keytruda (Merck) in MM



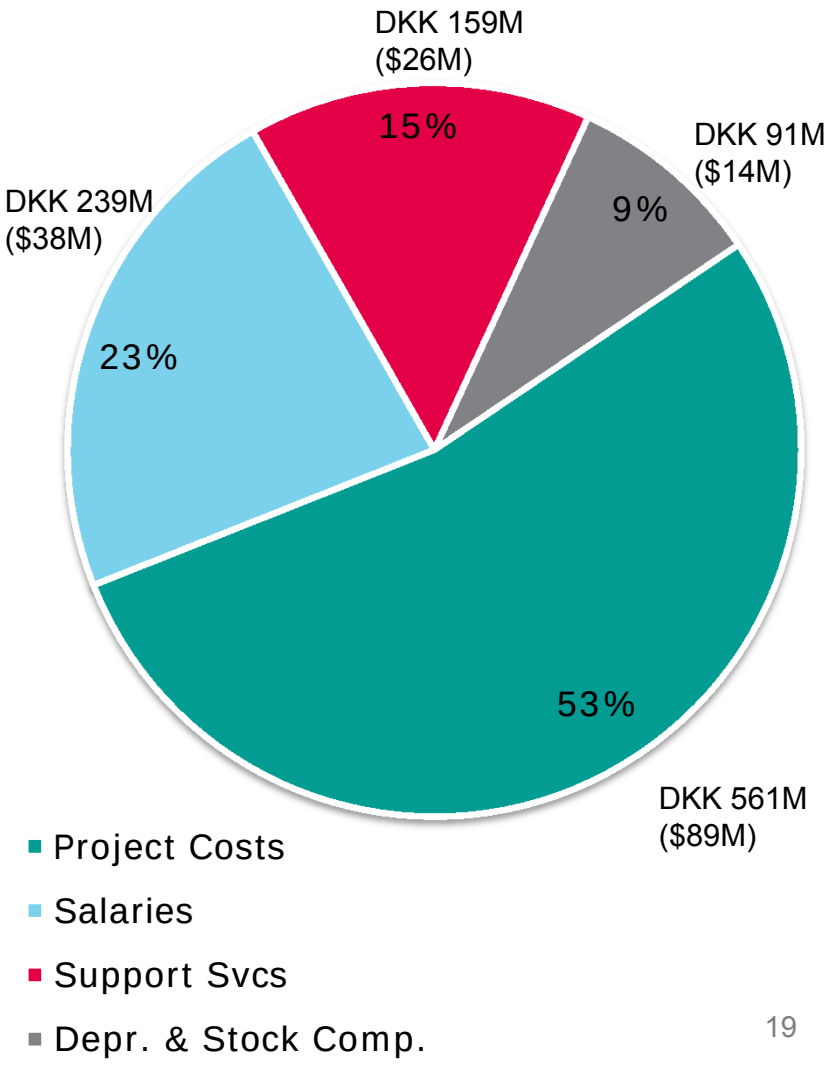
Well-Capitalized Biotech – 2017 Guidance

Income Statement	DKKM	USDM*
Revenue	2,240 – 2,440	355 - 387
Operating expenses	(1,000) – (1,100)	(159) – (174)
Operating income	1,190 – 1,390	189 - 221
Cash position at end of year**	>4,900	>777

*USD 1.00 = DKK 6.3038
**Cash, cash equivalents and marketable securities

2017 Guidance – Nov 29, 2017

2017 Expense Base
DKK 1,050M ($167M)



DARZALEX sales
- Genmab's estimate of DARZALEX net sales USD 1.1-1.3 billion

Revenue mid-point DKK 2,050M
- DARZALEX royalties DKK 1,000M
- DARZALEX milestones DKK 1,090M
- Quality of revenue improving

Expense mid-point DKK 1,050
- Expense increase DKK 287M, +38%
- Continued investment in our clinical & pre-clinical pipeline
- 8 pipeline projects drive ~DKK 440M, 42% of total expense

2017 Goals
Maximizing Differentiated Product Portfolio Value

Priority	✓	Targeted Milestone
Maximize daratumumab progress	✓ ✓ ✓ ✓ ✓	» EMA decision & launch in 2nd line+ in multiple myeloma (MM) relapsed / refractory setting » FDA decision in 3rd line MM setting (daratumumab + POM) » Phase III MM interim efficacy analysis in frontline (Alcyone trial) » Start Phase III subcutaneous trial » Start trials in solid tumors and non-MM blood cancers » Report non-MM clinical data
Optimize ofatumumab value	2018*	» Phase III refractory follicular lymphoma headline results
Strengthen differentiated product pipeline	✓ ✓	» Phase I/II tisotumab vedotin data » Progress HuMax-AXL-ADC Phase I/II clinical trial » IND/CTA submission HexaBody-DR5/DR5 » IND/CTA submission DuoBody-CD3xCD20 » Progress pre-clinical pipeline
Broaden partnership portfolio with next generation technologies		» Enter new technology collaborations » Progress partnered programs
Disciplined financial management		» Execute controlled company growth with selective investments in product pipeline

*Data read out now expected to occur in 2018.

Creating Value for Patients & Shareholders

Building on 3 central pillars: Focus, Innovation & Execution

- 2 marketed products
- Robust pre-clinical pipeline
- Building commercial expertise
- 2 proprietary early stage clin. programs
- World-class antibody & R&D expertise
- Solid financials
- 2 proprietary technologies
- Strategic collaborations
- Proven track record

Better Antibodies by Design

Appendix

Genmab

Publicly Listed Company with Large Free Float

Large cap, listed on Nasdaq Copenhagen, Denmark & ADR in US

Rest of shares held across world incl.
- USA
- UK
- DK
- NL

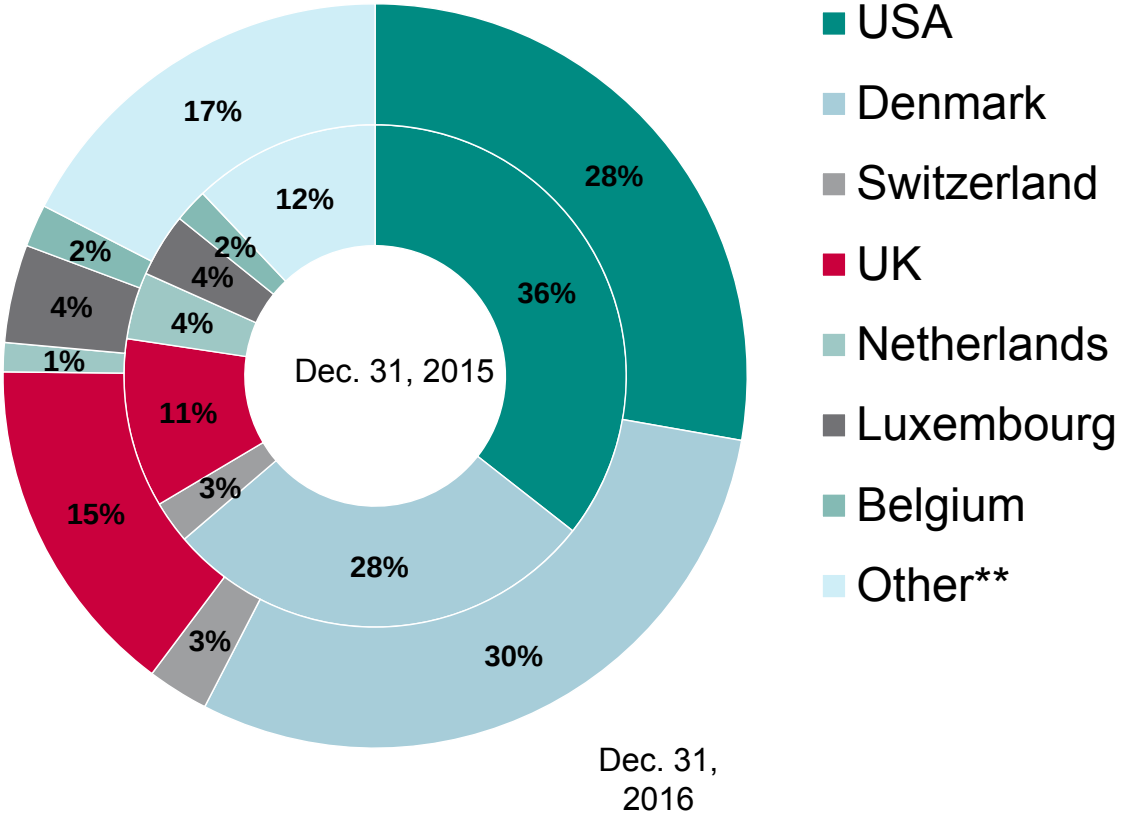
Approx. Market Cap
- DKK 74 bn
- USD 12 bn

Approx. shares outstanding: 61.2M

Warrants outstanding: 1.4M (2%)

Approx. diluted shares: 63M

Geographical Shareholder Distribution*
As of December 31, 2016



* Based on figures from the internal shareholder register per December 31, 2015 and December 31, 2016
** "Other" includes shares held in other countries and shares not held in nominee accounts, including OTC traded shares

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DARZALEX® (daratumumab) Sales Potential

$871M

Net sales
1st 9 Mo. 2017

$1.1 – 1.3B

Genmab projected
2017 sales

$8B

Average analyst*
projected MM sales

Potential upside:
smoldering disease, other
blood cancers, solid
tumors

*Average sales projections of analysts covering Genmab

Genmab

Daratumumab

Other Opportunities

Multiple Myeloma

Smoldering MM

Novel combos with other drugs

- Tecentriq®
- Imfinzi
- Opdivo®
- Keytruda

Subcutaneous formulation

Beyond Multiple Myeloma

Other Indications:

Incl. Solid Tumors

- Amyloidosis, Mantle cell lymphoma (MCL), acute myeloid leukemia (AML), acute lymphoblastic leukemia (T-ALL and B-ALL), myelodysplastic syndromes (MDS), Waldenstrom's macroglobulinemia, NKT-cell lymphomas, non-small cell lung cancer (NSCLC), colorectal cancer, virus assoc. tumors, rheumatoid arthritis (RA)
- Exploit immune modulation as key mechanism of action
- Combination therapy with immune check point inhibitors (Tecentriq, Opdivo)

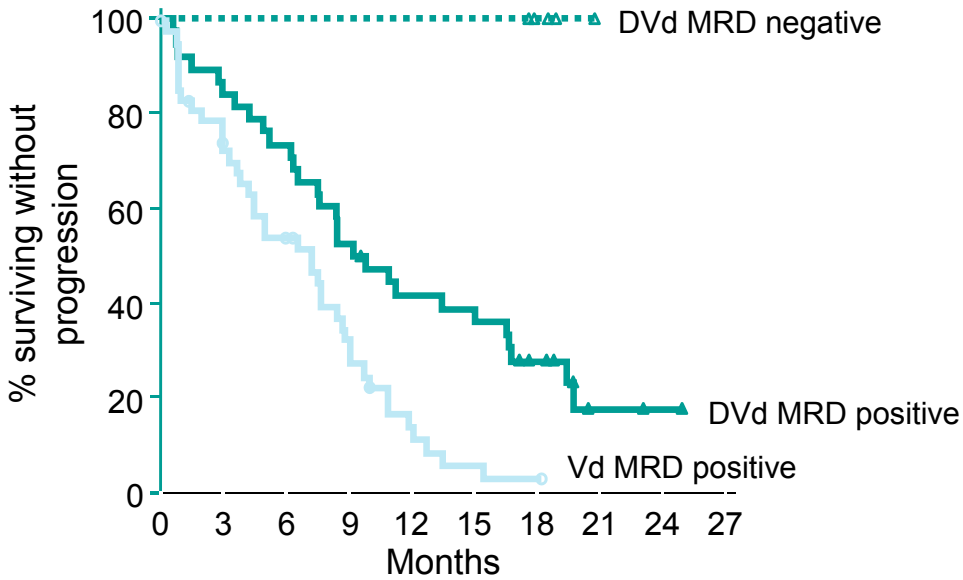
Updated Efficacy: CASTOR & POLLUX

Phase III RRMM: MRD by Cytogenic Risk Status

CASTOR

Dara + Bort + Dex (DVd)

PFS in High-Risk Patients

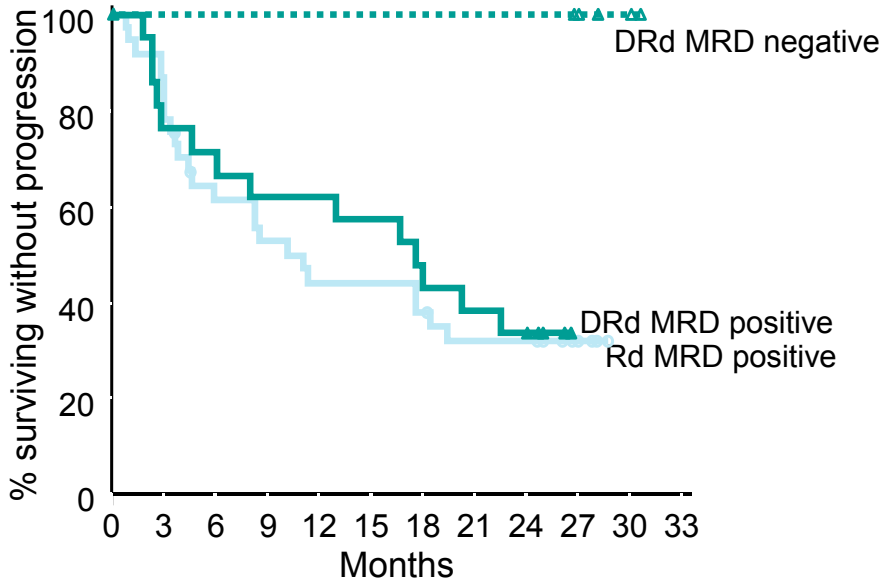


No. at risk										
Vd MRD negative	0	0	0	0	0	0	0	0	0	0
DVd MRD negative	6	6	6	6	6	6	3	0	0	0
Vd MRD positive	51	32	23	13	4	2	1	0	0	0
DVd MRD positive	38	32	28	20	15	14	8	2	1	0

POLLUX

Dara + Len + Dex (DRd)

PFS in High-Risk Patients



No. at risk												
Rd MRD negative	0	0	0	0	0	0	0	0	0	0	0	0
DRd MRD negative	6	6	6	6	6	6	6	6	6	4	2	0
Rd MRD positive	37	32	21	18	15	15	13	10	10	4	0	0
DRd MRD positive	22	16	15	13	13	12	10	8	7	0	0	0

Presented at ASCO – Chicago, June 2017

HexaBody-DR5/DR5

DR5 (death receptor 5)

Cell surface receptor that mediates programmed cell death

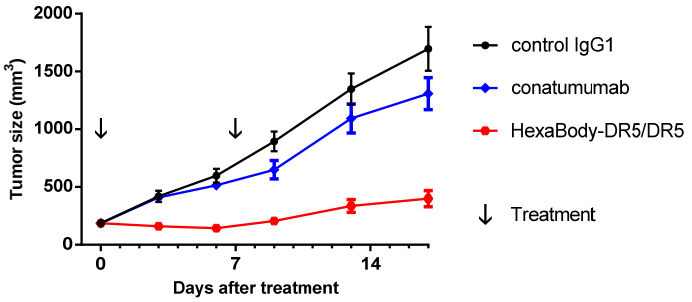
In normal physiology, binding of TRAIL ligand results in DR5 clustering & cell death

Targeting DR5 for treatment of cancer

Agonistic DR5 mAb induce apoptosis after crosslinking

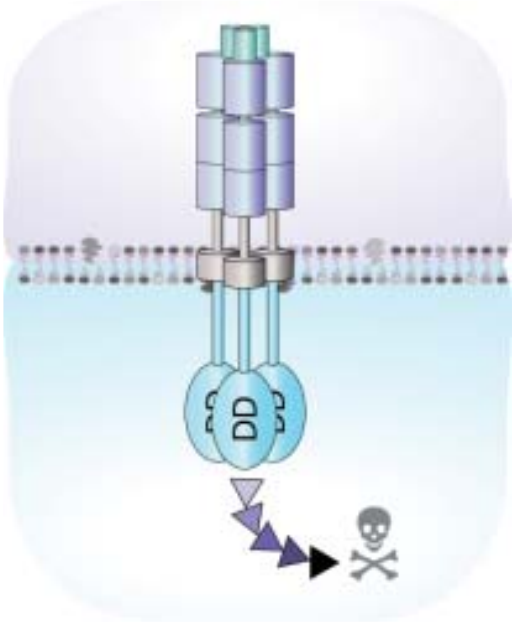
- Agonistic DR5 antibodies have shown limited anti-tumor activity in the clinic

Mouse xenograft model



Need for increased therapeutic potency

- Use HexaBody technology to induce clustering & activation of DR5 molecules, <u>without</u> a need for additional crosslinking
- Combination of two HexaBody molecules against two non-overlapping DR5 epitopes induces maximal cell death

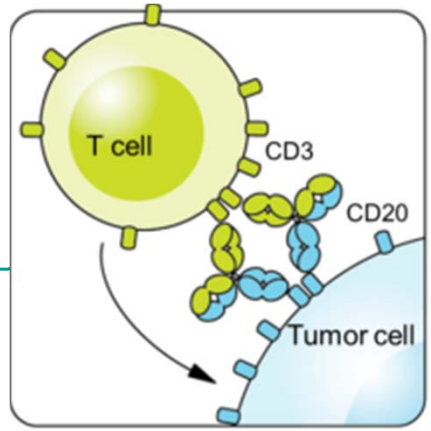


DR5 activation induces cell death

DuoBody CD3xCD20

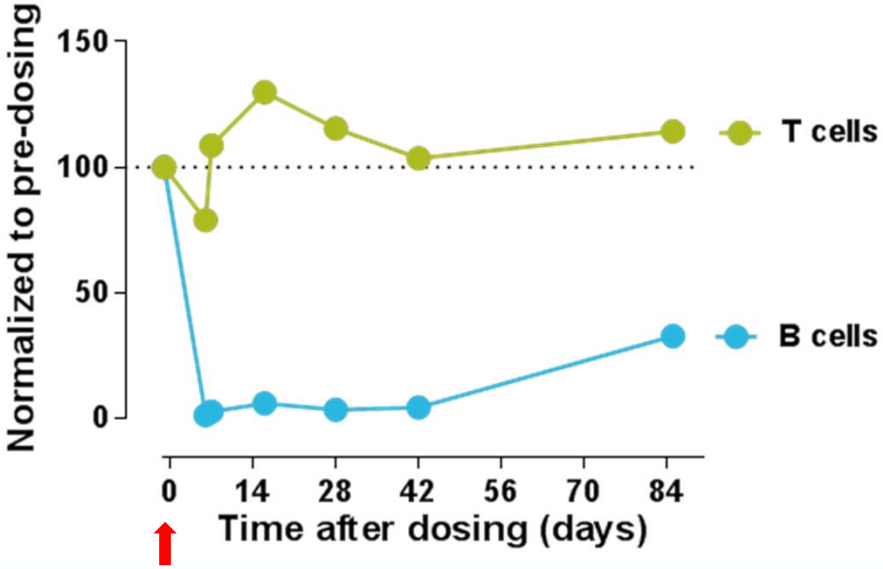
Key Characteristics

Humanized IgG1 bispecific antibody



- DuoBody platform
- Regular half life
- Non-activating Fc-domain
- Potently activates T cells to kill CD20^{+} tumor cells
- Cynomolgus CD3 & CD20 x-reactive
  - Potent Cynomolgus B cell depletion (peripheral blood, lymph nodes)
- 2017 IND candidate

B cell depletion Cynomolgus Lymph Nodes



Ongoing Daratumumab Clinical Trials

Janssen Sponsored Phase II & III

Daratumumab Trials Sponsored by Pharma / Biotech

Ct.gov Identifier	Phase	Sponsor	Indication	Therapy
NCT02252172	III	Janssen	Untreated MM	Daratumumab + Rd (MAIA)
NCT02195479	III	Janssen	Untreated MM	Daratumumab + VMP (ALCYONE)
NCT02541383	III	Janssen	Untreated MM	Daratumumab + VTd (CASSIOPEIA)
NCT02076009	III	Janssen	Relapsed or Refractory MM	Daratumumab + Rd (POLLUX)
NCT02136134	III	Janssen	Relapsed or Refractory MM	Daratumumab + Vd (CASTOR)
NCT03180736	III	Janssen	Relapsed or Refractory MM	Daratumumab + Pom-d (APOLLO)
NCT03201965	III	Janssen	Amyloidosis	Daratumumab + CyBorD
NCT03217812	III	Janssen	Untreated MM	Daratumumab + VMP (Asia Pacific)
NCT03234972	III	Janssen	Relapsed or Refractory MM	Daratumumab + Vd vs Vd (China)
NCT03277105	III	Janssen	Relapsed or Refractory MM	Daratumumab SC vs IV
NCT03301220	III	Janssen	Smoldering MM	Daratumumab SC
NCT01985126	II	Janssen	Relapsed or Refractory MM	Monotherapy, basis for approval
NCT02951819	II	Janssen	Untreated and Relapsed MM	Daratumumab + CyBorD (LYRA)
NCT02874742	II	Janssen	Untreated MM	Daratumumab + RVd (GRIFFIN)
NCT02316106	II	Janssen	Smoldering MM	Monotherapy (CENTAURUS)
NCT02927925	II	Janssen	NKTCL, Nasal Type	Monotherapy
NCT03011034	II	Janssen	Myelodysplastic Syndromes	Daratumumab or Talacotuzumab

Ongoing Daratumumab Clinical Trials
Janssen Sponsored Phase I & I/II

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Daratumumab Trials Sponsored by Pharma / Biotech

Ct.gov Identifier	Phase	Sponsor	Indication	Therapy
NCT01615029	I/II	Janssen	Relapsed and Refractory MM	Daratumumab + Rd
NCT03023423	I/II	Janssen	Previously treated NSCLC	Daratumumab + Tecentriq (atezolizumab)
NCT02852837	I	Janssen	Relapsed or Refractory MM	Monotherapy (in China)
NCT02519452	I	Janssen	Relapsed or Refractory MM	Monotherapy, subcutaneous (PAVO)
NCT02497378	I	Janssen	Relapsed or Refractory MM	Daratumumab + Vd (in Japan)
NCT02918331	I	Janssen	Untreated MM	Daratumumab + Rd (Japan)
NCT03242889	I	Janssen	Relapsed or Refractory MM	Daratumumab subq (Japan)
NCT01998971	I	Janssen	Various MM	Daratumumab + backbone regimens (Vd, VMP, VTd, Pom-d, Kd, KRd) (EQUULEUS)
NCT03320707	I	Janssen	Healthy volunteers	Daratumumab vs placebo
NCT03357952	I	Janssen	Relapsed or Refractory MM	Daratumumab + JNJ-63723283

Ongoing Daratumumab Clinical Trials

Other Industry Sponsored Trials

Daratumumab Trials Sponsored by Pharma / Biotech

Ct.gov Identifier	Phase	Sponsor	Indication	Therapy
NCT03158688	III	Amgen	Relapsed or Refractory MM	Daratumumab + Kd
NCT01946477	II	Celgene	Relapsed or Refractory MM	Daratumumab + Pom-d
NCT03000452 NCT02807454	II	Celgene	Relapsed and Refractory MM	Daratumumab + Imfinzi (FUSION)
NCT02060188	II	BMS	Recurrent & Metastatic Colon Cancer	Daratumumab + nivolumab
NCT03221634	II	Merck	RRMM	Daratumumab + Keytruda
NCT03314181	II	AbbVie	RRMM	Daratumumab + Venetoclax + dex w/wout bort
NCT02488759	I/II	BMS	Virus assoc tumors	Daratumumab + nivolumab
NCT03098550	I/II	BMS	Various solid tumors	Daratumumab + nivolumab
NCT02343042	I/II	Karyopharm	Relapsed or Refractory MM	Daratumumab + Selinexor + Dex
NCT01592370	I	BMS	Relapsed or Refractory MM	Daratumumab + nivolumab
NCT02431208	I	Roche	Resistant or Refractory MM	Daratumumab + Tecentriq (atezolizumab)
NCT03068351	I	Roche	Resistant or Refractory MM	Daratumumab + RO6870810

Ongoing Daratumumab Clinical Trials

Investigator Sponsored Study (ISS): MM

Investigator Sponsored Studies (ISS) of Daratumumab

Ct.gov Identifier	Phase	Sponsor	Indication	Therapy
NCT02944565	II	ISS	MM	Daratumumab accelerated infusion
NCT02977494	II	ISS	R/R MM & Severe Renal Impairment	Daratumumab + Vd
NCT02626481	II	ISS	Resistant or Ref9ractory MM	Daratumumab + dexamethasone
NCT03004287	II	ISS	Newly diagnosed MM	KTD-Dara-PACE / Dara-KD / Dara-RD
NCT03012880	II	ISS	Newly diagnosed MM	Daratumumab+ Ixazomib, Len & Dex
NCT03143036	II	ISS	RRMM	Daratumumab + thalidomide + Dex
NCT03184194	II	ISS	RRMM	Daratumumab + nivolumab w/ or w/out Len & Dex
NCT03188172	II	ISS	Newly diagnosed MM	Daratumumab + VRd
NCT03215524	II	ISS	RRMM	Daratumumab + Dex, Cy, Pom
NCT03224507	II	ISS	Deep remission in MM	Daratumumab + KRd
NCT03290950	II	ISS	Newly Diagnosed MM	Daratumumab + KRd
NCT03289299	II	ISS	Smoldering MM	Daratumumab + carfilzomib, lenalidomide & dexamethasone
NCT03346135	II	ISS	MM	Dara as maintenance after ASCT
NCT03236428	I	ISS	Smoldering MM	Daratumumab
NCT02955810	I	ISS	Untreated MM	Daratumumab + CyBorD
NCT03311828	I	ISS	Relapsed MM	Daratumumab + positron emission tomography
NCT02751255	I/II	ISS	RRMM	Daratumumab + All-trans retinoic acid

Ongoing Daratumumab Clinical Trials

ISS: Other Indications

Investigator Sponsored Studies (ISS) of Daratumumab

Ct.gov Identifier	Phase	Sponsor	Indication	Therapy
NCT02816476	II	ISS	Amyloidosis	Monotherapy
NCT03067571	II	ISS	AML or MDS	Monotherapy
NCT03095118	II	ISS	Membranoproliferative Glomerulonephritis	Monotherapy
NCT03187262	II	ISS	Waldenstrom macroglobulinemia	Monotherapy
NCT03207542	II	ISS	ALL	Monotherapy
NCT02841033	I/II	ISS	Amyloidosis	Monotherapy
NCT03177460	I	ISS	High-risk localized prostate cancer	Monotherapy with prostatectomy
NCT03283917	I	ISS	Amyloidosis	Daratumumab, ixazomib & dex

Dex = dexamethasone
Pom = Pomalyst (pomalidomide)
Rd = Revlimid (lenalidomide) + dexamethasone

Pom-d = Pomalyst (pomalidomide) + dexamethasone
CyBorD = Cyclophosphamide, bortezomib, dexamethasone
KRd = Kyprolis (carfilzomib) + Revlimid (lenalidomide) + dexamethasone

VTd = Velcade (bortezomib) + thalidomidde + dexamethasone
VMP = Velcade (bortezomib) + melphalan-prednisone
Kd = Kyprolis (carfilzomib) + dexamethasone

Vd = Velcade (bortezomib) + dexamethasone

As per clinicaltrials.gov, Nov 2017

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