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Johnson & Johnson presentations at ASH 2025 Annual Meeting:

Multiple Myeloma	
CARVYKTI® (ciltacabtagene autoleucel)	
Oral Session	
Oral #92 December 6, 2025 9:30 – 11:00 AM EST	Earlier use of ciltacabtagene autoleucel (cilta-cel) is associated with better immune fitness and stronger immune effects as shown by correlative analysis of peripheral blood and the bone marrow tumor microenvironment (TME) from the **CARTITUDE-4** study
Oral #94 December 6, 2025 9:30 – 11:00 AM EST	Long-term progression-free survival benefit with cilta-cel in standard-risk relapsed/refractory multiple myeloma
Poster Session	
Poster #2215 December 6, 2025 5:30 – 7:30 PM EST	Effectiveness of bridging therapy corresponds to improved outcomes after cilta-cel: Phase 3 **CARTITUDE-4** study of patients with relapsed, lenalidomide-refractory multiple myeloma
Poster #2411 December 6, 2025 5:30 – 7:30 PM EST	Cilta-cel out-of-specification outcomes improve with earlier lines of therapy
Poster #4046 December 7, 2025 6:00 – 8:00 PM EST	Comparative efficacy of cilta-cel versus Belantamab Mafodotin (Belamaf), Bortezomib, and Dexamethasone and versus Belamaf, Pomalidomide, and Dexamethasone in patients with relapsed/refractory multiple myeloma previously treated with 1–3 prior lines of therapy using a matching-adjusted indirect comparison
Poster #4569 December 7, 2025 6:00 – 8:00 PM EST	**REVEAL-MM**: Retrospective evaluation of variables in early assessment and landmark trends in multiple myeloma – a U.S. claims-based case-control study
Poster #4596 December 7, 2025 6:00 – 8:00 PM EST	Real-world incidence and management of non-ICANS neurologic events following cilta-cel in multiple myeloma
Poster #5768 December 8, 2025 6:00 – 8:00 PM EST	Quality-adjusted survival analysis of neurologic events with cilta-cel vs standard of care in patients with lenalidomide-refractory multiple myeloma who received 1–3 prior lines of therapy: **CARTITUDE-4** trial population

DARZALEX® (daratumumab)	
Oral Session	
Oral #97 December 6, 2025 9:30 – 11:00 AM EST	Minimal residual disease dynamics in post-transplant patients with newly diagnosed multiple myeloma who received daratumumab plus lenalidomide versus lenalidomide alone as maintenance therapy in the **AURIGA** study
Oral #372 December 6, 2025 4:00 – 5:30 PM EST	Daratumumab monotherapy versus active monitoring in patients with high-risk smoldering multiple myeloma: **AQUILA** outcomes based on mayo 2018/IMWG 2020 risk stratification, IMWG 2020 plus cytogenetic criteria, and age
Oral #691 December 7, 2025 4:30 – 6:00 PM EST	Cardiac risk factors and cardiac events in patients with newly diagnosed amyloid light chain (AL) amyloidosis from the Phase 2 **AQUARIUS** study of daratumumab (DARA) plus bortezomib, cyclophosphamide, and dexamethasone (D-VCd)
Poster Session	
Poster #2637 December 6, 2025 5:30 – 7:30 PM EST	Optimising multiple myeloma assessment for newly diagnosed patients at Intermountain Health: A mixed methods analysis
Poster #2791 December 6, 2025 5:30 – 7:30 PM EST	Characteristics and outcomes of non-transplanted newly diagnosed multiple myeloma patients treated with daratumumab, bortezomib, lenalidomide, dexamethasone (DVRd) with once-weekly bortezomib dosing
Poster #2803 December 6, 2025 5:30 – 7:30 PM EST	Updated analysis of survival and treatment evolution in European multiple myeloma patients (2012–2023) across 7 countries from the HONEUR network
Poster #6358 December 8, 2025 6:00 – 8:00 PM EST	Real-world characteristics and outcomes of newly diagnosed multiple myeloma patients receiving autologous stem cell transplantation (2018–2024) from the HONEUR network
Poster #6359 December 8, 2025 6:00 – 8:00 PM EST	Characteristics and treatment patterns of non-transplanted patients with newly diagnosed multiple myeloma treated with daratumumab, bortezomib, lenalidomide, and dexamethasone (DVRd) or daratumumab, lenalidomide, and dexamethasone (DRd) in the frontline setting
Poster #4574 December 7, 2025 6:00 – 8:00 PM EST	Survival differences in transplant ineligible multiple myeloma patients in Japan and Taiwan: Exploring the potential influence of timely and unrestricted access to novel therapies
Poster #4566 December 7, 2025 6:00 – 8:00 PM EST	Prevalence, incidence, and outcomes of multiple myeloma patients using electronic health records and natural language processing
Online Publication	
N/A	Health-related quality of life in Chinese multiple myeloma patients treated with daratumumab-based regimens in real world: Exploratory analysis of the MMY4032

TALVEY® (talquetamab-tgvs)	
Oral Session	
Oral #698 December 7, 2025 4:30 – 6:00 PM EST	Efficacy and safety of talquetamab + teclistamab in patients with relapsed/refractory multiple myeloma and extramedullary disease: Updated Phase 2 results from the **RedirecTT-1** study with extended follow-up
Oral #701 December 7, 2025 4:30 – 6:00 PM EST	Safety and efficacy of talquetamab + teclistamab in patients with relapsed/refractory multiple myeloma from Phase 1b of **RedirecTT-1**: Results with an extended median follow-up of 3 years
Poster Session	
Poster #2272 December 6, 2025 5:30 – 7:30 PM EST	Impact of previous BCMA exposure: Evidence from practice outside of clinical trials to inform talquetamab sequencing
Poster #2282 December 6, 2025 5:30 – 7:30 PM EST	Talquetamab, a GPRC5D×CD3 bispecific antibody, in combination with pomalidomide in patients with relapsed/refractory multiple myeloma: Updated safety and efficacy results from the Phase 1b **MonumenTAL-2** study
Poster #2818 December 6, 2025 5:30 – 7:30 PM EST	Real-world patient characteristics, treatment patterns, and outcomes among relapsed/refractory multiple myeloma patients receiving talquetamab-tgvs
Poster #4573 December 7, 2025 6:00 – 8:00 PM EST	Safety results from **REALiTAL**: A multi-country observational retrospective study of talquetamab in patients with relapsed/refractory multiple myeloma outside of clinical trials
Poster #4581 December 7, 2025 6:00 – 8:00 PM EST	Survival outcomes of multiple myeloma patients previously exposed to BCMA-targeted therapies in the HONEUR European network
Poster #4582 December 7, 2025 6:00 – 8:00 PM EST	Real-world disease burden and treatment patterns among triple-class exposed patients with relapsed/refractory multiple myeloma and extramedullary disease in the US: A retrospective analysis using flatiron health electronic medical records
Poster #5821 December 7, 2025 6:00 – 8:00 PM EST	Utility and sensitivity of WETT-SA53 to measure dysgeusia associated with talquetamab, a GPRC5D×CD3 bispecific antibody, in relapsed/refractory multiple myeloma: Preliminary data from the **TALISMAN** study
Poster #5827 December 8, 2025 6:00 – 8:00 PM EST	Talquetamab outcomes from practice outside of clinical trials: the **BiTAL** study

TECVAYLI ® (teclistamab-cqyv)	
Oral Session	
Oral #718 December 7, 2025 4:30 – 6:00 PM EST	Real-world use, safety, and efficacy of teclistamab with or without prophylactic tocilizumab in relapsed/refractory multiple myeloma: Results from the **Danish ABCD** study
LBA #6 December 9, 2025 7:30 AM - 9:00 AM EST	Phase 3 randomized study of teclistamab plus daratumumab versus investigator's choice of daratumumab and dexamethasone with either pomalidomide or bortezomib (DPd/DVd) in patients with relapsed refractory multiple myeloma (RRMM): Results of **MajesTEC-3**
Poster Session	
Poster #2751 December 6, 2025 5:30 – 7:30 PM EST	Effectiveness of remote patient monitoring in enabling outpatient step-up dosing for bispecifics at a large academic cancer centre in the USA
Poster #5815 December 8, 2025 6:00 – 8:00 PM EST	Teclistamab in a cohort of ~100 Asian patients with triple-class exposed multiple myeloma: Experience from trials and non-trial settings
Poster #6354 December 8, 2025 6:00 – 8:00 PM EST	Patient perspectives and preferences for step-up dosing and treatment with teclistamab and talquetamab: Insights from a patient survey
Online Publication	
Abstract #7936	Inpatient vs outpatient treatment management with teclistamab in relapsed and refractory multiple myeloma: A cost and healthcare resource utilisation analysis
Ramantamig *(JNJ-5322)*	
Poster Session	
Poster #4042 December 7, 2025 6:00 – 8:00 PM EST	Updated efficacy and safety results of JNJ-5322, a novel, next-generation, BCMA×GPRC5D×CD3 trispecific antibody, in patients with relapsed/refractory multiple myeloma
Poster #4054 December 7, 2025 6:00 – 8:00 PM EST	Clinical pharmacology strategies to support dose optimisation of the recommended Phase 2 dose regimen of JNJ-5322, a BCMA×GPRC5D×CD3 trispecific antibody, in relapsed/refractory multiple myeloma
General Multiple Myeloma – Early Assets	
Poster Session	
Poster #907 December 6, 2025 5:30 – 7:30 PM EST	First-line treatment in patients with transplant-ineligible, newly diagnosed multiple myeloma by age, frailty, and comorbidity
Online Publication	
Abstract #7526	Adverse events in relapsed/refractory multiple myeloma patients receiving bi-specific T-Cell antibodies (BsAbs): A systematic review and meta-analysis of real-world evidence

JNJ-87562761 *(JNJ-2761)*	
Poster Session	
Poster #3934 December 7, 2025 6:00 – 8:00 PM EST	Discovery of JNJ-87562761, a novel anti-GPRC5D enhanced effector function (eEF) antibody with multiple mechanisms of action for the treatment of multiple myeloma
Myeloid Malignancies	
Bleximenib *(JNJ-6617)*	
Poster Session	
Poster #1654 December 6, 2025 6:00 – 8:00 PM EST	Bleximenib or placebo in combination with standard induction and consolidation therapy followed by maintenance for the treatment of patients with newly diagnosed KMT2A-rearranged or NPM1-mutant acute myeloid leukemia eligible for intensive chemotherapy: A double-blind Phase 3 study (**HOVON 181 AML / AMLSG 37-25**) (Trial in Progress)
Poster #3429 December 7, 2025 6:00 – 8:00 PM EST	**CAMeLot-2**: A Phase 3 randomized, double-blind, placebo-controlled, study of bleximenib, venetoclax and azacitidine for the treatment of participants with newly diagnosed acute myeloid leukemia harboring KMT2A rearrangements or NPM1 mutations, who are ineligible for intensive chemotherapy (Trial in Progress)
Poster #5199 December 8, 2025 6:00 – 8:00 PM EST	Bleximenib in combination with intensive chemotherapy: A Phase 1b study in newly diagnosed acute myeloid leukemia with KMT2A or NPM1 alterations
Poster #5200 December 8, 2025 6:00 – 8:00 PM EST	Phase 1b study of bleximenib in combination with venetoclax in acute myeloid leukemia with KMT2A or NPM1 alterations
B-Cell Malignancies	
Prizlo-cel (JNJ-4496)	
Oral Session	
Oral #568 December 7, 2025 12:00 – 1:30 PM EST	Biomarker correlates of clinical outcomes from a global Phase 1b study of JNJ-90014496, CD20/CD19 bi-specific chimeric antigen receptor (CAR) T-cell therapy for patients with large B-cell lymphoma
Poster Session	
Poster #1885 December 6, 2025 5:30 – 7:30 PM EST	Estimating the United States cure-adjusted prevalence of diffuse large B-cell lymphoma: An epidemiological model
IMBRUVICA® (ibrutinib)	
Plenary Session	
Plenary Presentation #1 December 7, 2025 2:00 – 4:00 PM EST	Fixed-duration versus continuous targeted treatment for previously untreated chronic lymphocytic leukemia: Results from the randomized **CLL17** trial

Poster Session	
Poster #2728 December 6, 2025 5:30 - 7:30 PM EST	First worldwide real-life data on fixed-duration ibrutinib + venetoclax treatment for previously untreated chronic lymphocytic leukemia/small lymphocytic leukemia patients: Updated interim analysis of Spain's **LI+VE** Observational study
Poster #3301 December 8, 2025 6:00 - 8:00 PM EST	Dose and BTK occupancy relationship in the prospective Phase 2 **TAILOR** study: Exploratory end point analysis of the ibrutinib monotherapy cohorts in patients with previously untreated chronic lymphocytic leukemia
Poster #3903 December 7, 2025 6:00 - 8:00 PM EST	Real-world use of fixed-duration ibrutinib + venetoclax in patients with previously untreated chronic lymphocytic leukemia/small lymphocytic leukemia: Pooled analysis of **REALITY-worldwide (WW)** and **REALITY-2** prospective cohort studies
Poster #5672 December 8, 2025 6:00 - 8:00 PM EST	First-line ibrutinib + venetoclax shows benefit across genomic subgroups in patients with chronic lymphocytic leukemia: Results from Phase 2 **CAPTIVATE** study and Phase 3 **GLOW** study
Product Agnostic – General Hematology	
Poster Session	
Poster #4488 December 7, 2025 6:00 – 8:00 PM EST	Risk of mental health outcomes and peak risk periods post-hematologic cancer diagnosis in the United States

Immunology	
Oral Session	
Oral #708 December 7, 2025 4:30 - 6:00 PM EST	Heterogeneity of treatment regimens and related health resource use in managing patients with wAIHA: A US multi-database retrospective observational study
Poster Session	
Poster #2694 December 6, 2025 5:30 - 7:30 PM EST	Mortality associated with warm autoimmune hemolytic anemia among Medicare beneficiaries
Poster #2862 December 6, 2025 5:30 - 7:30 PM EST	Partnering with patients to guide the development of impactful educational resources for warm autoimmune hemolytic anemia (wAIHA)
Poster #4459 December 7, 2025 6:00 - 8:00 PM EST	Treatment patterns and outcomes among warm autoimmune hemolytic anemia patients receiving rituximab in the United States: A retrospective database study
Poster #4656 December 8, 2025 6:00 - 8:00 PM EST	Treatment response, relapse and survival of hospitalized adult primary warm autoimmune hemolytic anemia: A multicenter retrospective cohort study
Poster #6239 December 8, 2025 6:00 - 8:00 PM EST	Prevalence and demographics of autoimmune hemolytic anemia in the United States

Poster #6249 December 8, 2025 6:00 – 8:00 PM EST	A US retrospective observational study of rituximab initial and retreatment in patents with warm autoimmune hemolytic anemia (wAIHA)
Online Publication	
N/A	Feasibility assessment of indirect treatment comparison between off-label rituximab and novel treatments in patients with warm autoimmune hemolytic anemia (wAIHA)

About CARVYKTI®
CARVYKTI® (cilta-cel) received U.S. Food and Drug Administration approval in February 2022 for the treatment of adults with relapsed or refractory multiple myeloma after four or more prior lines of therapy, including a proteasome inhibitor, an immunomodulatory agent, and an anti-CD38 monoclonal antibody.[1] In April 2024, CARVYKTI® was approved in the U.S. for treatment of adult patients with relapsed or refractory multiple myeloma who have received at least one prior line of therapy including a proteasome inhibitor, an immunomodulatory agent, and who are refractory to lenalidomide, following a unanimous (11 to 0) FDA Oncologic Drugs Advisory Committee (ODAC) recommendation in support of this new indication. In April 2024, the European Medicines Agency (EMA) approved a Type II variation for CARVYKTI® for the treatment of adults with relapsed and refractory multiple myeloma who have received at least one prior therapy, including an immunomodulatory agent and a proteasome inhibitor, have demonstrated disease progression on the last therapy, and are refractory to lenalidomide. In September 2022, Japan's Ministry of Health, Labour and Welfare (MHLW) approved CARVYKTI® for the treatment of adults with relapsed or refractory multiple myeloma in patients that have no history of CAR-positive T cell infusion therapy targeting BCMA and who have received three or more lines of therapies, including an immunomodulatory agent, a proteasome inhibitor and an anti-CD38 monoclonal antibody, and in whom multiple myeloma has not responded to or has relapsed following the most recent therapy.

CARVYKTI® is a BCMA-directed, autologous T-cell immunotherapy, which involves reprogramming a patient's own T-cells with a transgene encoding chimeric antigen receptor (CAR) that directs the CAR-positive T cells to eliminate cells that express BCMA. BCMA is primarily expressed on the surface of malignant multiple myeloma B-lineage cells, as well as late-stage B cells and plasma cells. The CARVYKTI® CAR protein features two BCMA-targeting single domains designed to confer high avidity against human BCMA. Upon binding to BCMA-expressing cells, the CAR promotes T-cell activation, expansion, and elimination of target cells.

In December 2017, Janssen Biotech, Inc., a Johnson & Johnson company, entered into an exclusive worldwide license and collaboration agreement with Legend Biotech USA, Inc. to develop and commercialize CARVYKTI®.

For more information, visit www.CARVYKTI.com.

About DARZALEX *FASPRO*® and DARZALEX®
DARZALEX *FASPRO*® (daratumumab and hyaluronidase-fihj) received U.S. FDA approval in May 2020 and is approved for 11 indications in multiple myeloma, four of which are for frontline treatment in newly diagnosed patients who are transplant eligible or ineligible.[1,4] It is the only subcutaneous CD38-directed antibody approved to treat patients with multiple myeloma. DARZALEX *FASPRO*® is co-formulated with recombinant human hyaluronidase PH20 (rHuPH20), Halozyme's ENHANZE® drug delivery technology.

. DARZALEX® (daratumumab) received U.S. FDA approval in November 2015 and is approved in eight indications, three of which are in the frontline setting, including newly diagnosed patients who are transplant-eligible and ineligible.[12] In 2025, DARZALEX *FASPRO*® was approved by the U.S. FDA and EMA as the first and only treatment for patients with high-risk smoldering multiple myeloma.

DARZALEX® is the first CD38-directed antibody approved to treat multiple myeloma.[12]DARZALEX®-based regimens have been used in the treatment of more than 618,000 patients worldwide.

In August 2012, Janssen Biotech, Inc. and Genmab A/S entered a worldwide agreement, which granted Janssen Biotech, Inc. an exclusive license to develop, manufacture and commercialize daratumumab.

For more information, visit www.DARZALEX.com.

About IMBRUVICA®
IMBRUVICA® (ibrutinib) is a once-daily oral medication that is jointly developed and commercialized by Janssen Biotech, Inc., and Pharmacyclics LLC, an AbbVie company. IMBRUVICA® blocks the BTK protein, which is needed by normal and abnormal B cells, including specific cancer cells, to multiply and spread. By blocking BTK, IMBRUVICA® may help move abnormal B cells out of their nourishing environments and inhibit their proliferation.[2,3,4]

IMBRUVICA® is approved in more than 100 countries and has been used to treat more than 325,000 patients worldwide over the last decade. There are more than 50 company-sponsored clinical trials, including 18 Phase 3 studies, spanning more than 11 years, evaluating the efficacy and safety of IMBRUVICA®.

IMBRUVICA® was first approved by the U.S. FDA in November 2013, and today is indicated for adult patients in four disease areas. These include indications to treat adults with chronic lymphocytic leukemia/small lymphocytic lymphoma with or without 17p

deletion; adults with Waldenström's macroglobulinemia; and adult and pediatric patients aged one year and older with previously treated chronic graft versus host disease after failure of one or more lines of systemic therapy.[5]

About TALVEY®
TALVEY® (talquetamab-tgvs) received approval from the U.S. FDA in August 2023 as a first-in-class GPRC5D-targeting bispecific antibody for the treatment of adult patients with relapsed or refractory multiple myeloma who have received at least four prior lines of therapy, including a proteasome inhibitor, an immunomodulatory agent, and an anti-CD38 antibody.[6] Since FDA approval, 7,700 patients were treated with TALVEY®. The European Commission (EC) granted conditional marketing authorization (CMA) of TALVEY® (talquetamab-tgvs) in August 2023 as monotherapy for the treatment of adult patients with relapsed and refractory multiple myeloma (RRMM) who have received at least three prior therapies, including an immunomodulatory agent, a proteasome inhibitor, and an anti-CD38 antibody and have demonstrated disease progression on the last therapy.[7]

TALVEY® is a bispecific T-cell engaging antibody that binds to the CD3 receptor expressed on the surface of T-cells and G protein-coupled receptor class C group 5 member D (GPRC5D), a novel multiple myeloma target which is highly expressed on the surface of multiple myeloma cells and non-malignant plasma cells, as well as some healthy tissues such as epithelial cells of the skin and tongue.

About TECVAYLI®
TECVAYLI® (teclistamab-cqyv) received approval from the U.S. FDA in October 2022 as an off-the-shelf (or ready-to-use) antibody that is administered as a subcutaneous treatment for adult patients with relapsed or refractory multiple myeloma (RRMM) who have received at least four prior lines of therapy, including a proteasome inhibitor, an immunomodulatory agent and an anti-CD38 antibody.[8] Since FDA approval, more than 20,800 patients have been treated worldwide with TECVAYLI®. The European Commission (EC) granted TECVAYLI® conditional marketing authorization (CMA) in August 2022 as monotherapy for the treatment of adult patients with RRMM who have received at least three prior therapies, including a proteasome inhibitor, an immunomodulatory agent and an anti-CD38 antibody, and have demonstrated disease progression since the last therapy. In August 2023, the EC granted the approval of a Type II variation application for TECVAYLI®, providing the option for a reduced dosing frequency of 1.5 mg/kg every two weeks (Q2W) in patients who have achieved a complete response (CR) or better for a minimum of six months. TECVAYLI® is a first-in-class, bispecific T-cell engager antibody therapy that uses innovative science to activate the immune system by binding to the CD3 receptor expressed on the surface of T-cells and to the B-cell maturation antigen (BCMA) expressed on the surface of multiple myeloma cells and some healthy B-lineage cells. In February 2024, the U.S. FDA approved the supplemental Biologics License Application (sBLA) for TECVAYLI® for a reduced dosing frequency of 1.5 mg/kg every two weeks in patients with relapsed or refractory multiple myeloma who have achieved and maintained a CR or better for a minimum of six months.

For more information, visit www.TECVAYLI.com.

About Johnson & Johnson

At Johnson & Johnson, we believe health is everything. Our strength in healthcare innovation empowers us to build a world where complex diseases are prevented, treated, and cured, where treatments are smarter and less invasive, and solutions are personal. Through our expertise in Innovative Medicine and MedTech, we are uniquely positioned to innovate across the full spectrum of healthcare solutions today to deliver the breakthroughs of tomorrow, and profoundly impact health for humanity. Learn more at https://www.jnj.com/ or at www.innovativemedicine.jnj.com. Janssen Research & Development, LLC, Janssen Biotech, Inc., Janssen Global Services, LLC and Janssen Scientific Affairs, LLC are Johnson & Johnson companies.

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[1] CARVYKTI® U.S. Prescribing Information.
[2] National Library of Medicine. (2025, October). Isolated growth hormone deficiency. Retrieved from http://ghr.nlm.nih.gov/condition/isolated-growth-hormone-deficiency
[3] Turetsky, A., et al. (2014). Single cell imaging of Bruton's tyrosine kinase using an irreversible inhibitor. Scientific Reports, 6, 4782.
[4] de Rooij, M. F., Kuil, A., Geest, C. R., et al. (2012). The clinically active BTK inhibitor PCI-32765 targets B-cell receptor- and chemokine-controlled adhesion and migration in chronic lymphocytic leukemia. Blood, 119(11), 2590–2594.
[5] IMBRUVICA® U.S. Prescribing Information, August 2022.
[6] TALVEY® U.S. Prescribing Information, August 2023.
[7] European Medicines Agency. TALVEY Summary of Product Characteristics. August 2023.
[8] Johnson & Johnson. (2025, October). U.S. FDA approves TECVAYLI® (teclistamab-cqyv), the first bispecific T-cell engager antibody for the treatment of patients with relapsed or refractory multiple myeloma. Retrieved from https://www.jnj.com/u-s-fda-approves-tecvayli-teclistamab-cqyv-the-first-bispecific-t-cell-engager-antibody-for-the-treatment-of-patients-with-relapsed-or-refractory-multiple-myeloma