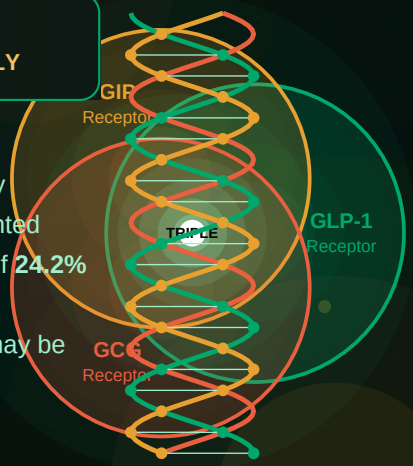
TRIPLE GIP / GLP-1 / GLUCAGON RECEPTOR AGONIST · PHASE 3 TRIALS

RETRA-TRUTIDE

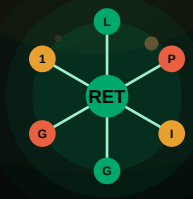
Triple the Power.

The Future of Metabolic Medicine.

TRIPLE RECEPTOR · RECORD WEIGHT LOSS · PHASE 3 · ELI LILLY



Retatrutide is the world's first **triple receptor agonist** — simultaneously activating GIP, GLP-1, and glucagon receptors to create an unprecedented metabolic response. In phase 2 trials, it delivered average weight loss of **24.2% over 48 weeks** — the highest ever recorded in a clinical obesity trial, surpassing even tirzepatide. With phase 3 trials underway, retatrutide may be the most powerful obesity and metabolic medicine ever developed.



~24%	Triple	Phase 3	Weekly
PEAK WEIGHT LOSS	RECEPTOR ACTION	CLINICAL STAGE	DOSING SCHEDULE

What Is Retatrutide?

How activating three metabolic receptors at once rewrites the rules of weight loss

Beyond Dual — The Third Receptor That Changes Everything

Retatrutide builds on the dual GIP/GLP-1 foundation of tirzepatide by adding activation of the **glucagon receptor** — the third and most powerful driver of energy expenditure in the body. Glucagon is the hormone that signals the liver to break down stored fat and glycogen, and that dramatically increases the rate at which the body burns calories. By combining all three incretin and metabolic hormone pathways simultaneously, retatrutide creates a metabolic environment that no previous compound has been able to achieve.

The Glucagon Advantage — Turning Up the Metabolic Furnace

Glucagon receptor activation was historically avoided in metabolic drugs because it can raise blood sugar. Retatrutide solves this elegantly: the GLP-1 and GIP components provide powerful insulin-stimulating effects that fully offset any glucagon-driven glucose increase, while the glucagon component drives a massive increase in energy expenditure — boosting fat burning in the liver, brown adipose tissue, and muscle. The result is fat loss that is both deeper and faster than any dual-agonist can achieve.

Three Receptors — Three Distinct Actions

GLP-1 Receptor

Reduces appetite and food intake, slows gastric emptying, stimulates glucose-dependent insulin secretion.

GIP Receptor

Amplifies fat mobilisation, enhances brain satiety signals, improves adipose tissue metabolic health.

Glucagon Receptor

Dramatically increases energy expenditure and hepatic fat oxidation — the key differentiator over dual agonists.

★ PHASE 2 DATA — BREAKING ALL RECORDS

In the published phase 2 TRIUMPH trial (NEJM, 2023), retatrutide at 12 mg delivered a mean weight loss of 24.2% over 48 weeks — with some participants losing over 30% of their body weight. At every dose level tested, it outperformed historical semaglutide and tirzepatide benchmarks, establishing it as the most potent obesity pharmacotherapy ever evaluated in a randomised clinical trial.

The Benefits of Retatrutide

Triple-receptor power — unprecedented outcomes across weight, metabolism, and beyond

01 Record-Setting Weight Loss

Phase 2 data show average weight loss of 24.2% at the 12 mg dose over 48 weeks — with one-third of participants approaching or exceeding 30% total body weight reduction. This surpasses every prior approved or investigational pharmacotherapy.

02 Unmatched Energy Expenditure

The glucagon receptor component of retatrutide significantly increases the body's resting metabolic rate — promoting a level of calorie burning that diet and exercise alone, or even dual agonists, cannot replicate.

03 Liver Fat Elimination

Retatrutide's glucagon and GLP-1 components combine to produce dramatic reductions in hepatic steatosis. Phase 2 data show near-complete elimination of liver fat in many participants — with major implications for NASH treatment.

04 Blood Sugar Control

Like tirzepatide and semaglutide, retatrutide delivers significant reductions in HbA1c for people with type 2 diabetes — with glucose-dependent insulin stimulation preventing hypoglycaemia despite the co-administration of glucagon receptor activation.

05 Superior Cardiovascular Profile

Early data show meaningful reductions in blood pressure, triglycerides, LDL cholesterol, and inflammatory markers — building a cardiometabolic risk reduction picture that may exceed that of currently approved agents.

06 Visceral Fat Targeting

The triple-receptor mechanism preferentially drives the loss of visceral (abdominal) fat — the metabolically dangerous fat that drives insulin resistance, inflammation, and cardiovascular risk — rather than lean tissue or subcutaneous fat.

07 Kidney & Cardiorenal Benefits

Retatrutide is expected to provide similar cardiorenal protection to semaglutide and tirzepatide, with ongoing phase 3 trials evaluating its effects on kidney function, proteinuria, and renal disease progression.

08 Next-Generation Obesity Medicine

With its unique triple mechanism and record clinical results, retatrutide is positioned to become the most effective pharmacological treatment for obesity ever approved — offering hope to the estimated 1 billion people worldwide living with obesity.

Semaglutide changed the game. Tirzepatide raised the bar. Retatrutide is in a category of its own — the first compound to harness three metabolic hormone pathways at once, delivering weight loss outcomes that were unimaginable just five years ago. The era of triple agonism has begun.

Important: Retatrutide is an investigational drug currently in phase 3 clinical trials. It is not yet approved by the FDA or any other regulatory body. Data cited are from the published phase 2 TRIUMPH trial (NEJM 2023) and related studies. This brochure is for informational purposes only.