Jiangsu Hengrui Pharmaceuticals Co., Ltd.
江蘇恒瑞醫藥股份有限公司

(A joint stock company incorporated in the People's Republic of China with limited liability)

(Stock Code: 1276)

OVERSEAS REGULATORY ANNOUNCEMENT

This announcement is made pursuant to the disclosure requirements under Rule 13.10B of the Rules Governing the Listing of Securities on The Stock Exchange of Hong Kong Limited.

According to the relevant regulations of the People's Republic of China, Jiangsu Hengrui Pharmaceuticals Co., Ltd. (the "**Company**") had published an announcement on the website of the Shanghai Stock Exchange (www.sse.com.cn). The following is a translation of the abovementioned announcement solely for reference only. Should there be any discrepancies, the Chinese version will prevail.

By order of the Board
Jiangsu Hengrui Pharmaceuticals Co., Ltd.
江蘇恒瑞醫藥股份有限公司
Mr. Sun Piaoyang
Chairman

Shanghai, PRC
September 10, 2026

As at the date of this announcement, the Board comprises: (i) Mr. Sun Piaoyang, Mr. Dai Hongbin, Ms. Feng Ji, Mr. Zhang Lianshan, Mr. Jiang Frank Ningjun and Mr. Sun Jieping as executive Directors; (ii) Ms. Guo Congzhao as non-executive Director; and (iii) Mr. Lou Liguang, Mr. Zeng Qingsheng, Mr. Sun Jinyun and Mr. Chow Kyan Mervyn as independent non-executive Directors.

Jiangsu Hengrui Pharmaceuticals Co., Ltd. Announcement in Relation to the Approval for Drug Registration

The board of directors of the Company and all directors warrant that this announcement does not contain any false information, misleading statement or material omission, and accept legal liability for the truthfulness, accuracy and completeness of the contents herein.

Recently, Jiangsu Hengrui Pharmaceuticals Co., Ltd. (江蘇恒瑞醫藥股份有限公司) (the "Company") received a notice from the National Medical Products Administration (the "NMPA") approving two new indications for the Company's self-developed Class 1 innovative drug, Hetrombopag Olamine Tablets. The relevant information is hereby announced as follows:

I. Basic Information of the Drug

Drug Name: Hetrombopag Olamine Tablets

Dosage Form: Tablet

Strength: 2.5 mg; 2.5 mg, 3.75 mg, 5 mg

Registration Category: Chemical Drug Class 2.4

Acceptance No.:CXHS2500096, CXHS2500092, CXHS2500093, CXHS2500094

Prescription Drug/Over-the-Counter Drug: Prescription drug

Approved Indications: 1. For the treatment of adult patients with thrombocytopenia caused by chemotherapy-based anti-tumor therapy for solid tumors (CTIT). 2. This product is indicated for pediatric patients aged ≥ 6 years with chronic primary immune thrombocytopenia (ITP) who have previously had poor response to treatments such as glucocorticoids and immunoglobulins to increase platelet count and reduce or prevent bleeding. This product should only be used in patients with ITP who

are at increased risk of bleeding due to thrombocytopenia and clinical conditions.

II. The Approved Indications of the Drug

Hetrombopag Olamine Tablets have previously been approved for marketing for three indications: 1. This product is indicated for the treatment of adult patients with chronic primary immune thrombocytopenia (ITP) who have had an insufficient response to glucocorticoids, immunoglobulins or other similar treatments. 2. This product is indicated for the treatment of adult patients with severe aplastic anemia (SAA) who have had an inadequate response to immunosuppressive therapy (IST). 3. This product, in combination with immunosuppressive therapy, is indicated for patients aged 15 years and older with treatment-naive severe aplastic anemia (SAA).

III. Other Information of the Drug

CTIT is a common adverse reaction of anti-tumor treatment, which not only increases the risk of skin and mucosal bleeding and even serious bleeding, but may also lead to dose reduction, treatment delay or interruption of anti-tumor drugs, affect the intensity of treatment dose and benefit to patients, and increase the burden of platelet transfusion, hospitalization monitoring and medical resources. Some traditional platelet-raising treatments rely on injection, and patients need to travel back and forth to the hospital repeatedly, increasing the burden of time and care, and also causing inconvenience in the in-hospital/out-of-hospital transition and full-course management of CTIT. Therefore, there is an urgent clinical need for treatment options with both efficacy and convenience of medication, so as to facilitate the progress of anti-tumor treatment as planned. Hetrombopag is the first non-peptide oral TPO-RA independently developed in China. The approval of this new indication makes this product the first thrombopoietin receptor agonist (TPO-RA) approved for CTIT indication in the world, which will provide strong support for anti-tumor treatment and promote the standardized management of CTIT throughout the whole process.

ITP is one of the most common acquired hemorrhagic diseases in children, with an annual incidence of about 1.6–5.3/100,000, and exhibits substantial clinical heterogeneity [1–3]. Although about 75% of children can achieve spontaneous remission within 6 months, 10–20% still progress to chronic ITP, and the risk of chronicization

increases with age, reaching 47% in children ≥ 10 years[4,5]. At present, in the treatment of ITP, the formulation of its treatment regimen follows the principle of individualization. It is recommended to increase platelet count to a safe level on the basis of minimizing adverse reactions to treatment, reduce bleeding events, and use limited-duration treatment as much as possible to achieve long-term remission of the disease[2]. However, in clinical practice, long-term use of glucocorticoids and intravenous immunoglobulin as first-line treatment has limitations such as many adverse reactions, high recurrence rate and limited duration, and most children still need to enter second-line treatment[6]. The approval of this new indication of Hetrombopag marks the first oral thrombopoietin receptor agonist (TPO-RA) independently developed by China in the field of pediatric ITP in China, and will provide a new oral treatment option for more patients as second-line treatment.

Hetrombopag Olamine Tablets are an oral nonpeptide thrombopoietin receptor (TPO-R) agonist that promotes platelet production by activating TPO-R-mediated STAT and MAPK signaling pathways. Upon inquiry, it was found that similar products have been marketed in China and abroad, including Eltrombopag (trade name Promacta), Avatrombopag (trade name Doptelet) and Lusutrombopag (trade name Mulpleta), and all three products have been approved for marketing in China. According to the EvaluatePharma database, the combined global sales of similar products in 2025 amounted to approximately USD 2.222 billion. As of now, the cumulative research and development investment for Hetrombopag Olamine Tablets related projects is approximately RMB 657.70 million (unaudited).

IV. Risk Warning

The Company places great importance on drug R&D, and strictly controls the quality and safety throughout the processes of drug R&D, manufacture, and sales. However, post-approval production and sales may be subject to uncertainties. Investors are kindly advised to make prudent decisions and pay attention to investment risks.

Notice is hereby given.

Board of Directors of Jiangsu Hengrui Pharmaceuticals Co., Ltd.

September 10, 2026

1.Wu R, et al. Efficacy and safety of hetrombopag, a novel thrombopoietin receptor agonist, in children and adolescents with immune thrombocytopenia: results from a randomized, multicenter, placebo-controlled phase 3 trial. J Hematol Oncol. 2026 Apr 8;19(1):24.
2.Thrombosis and Hemostasis Group, Chinese Society of Hematology, Chinese Medical Association. Chinese guideline for the diagnosis and treatment of adult primary immune thrombocytopenia (2025 edition). Chinese Journal of Hematology. 2025;46(12):1105-1113.
3.Chinese Working Group on the Adaptation of Guidelines for the Diagnosis and Treatment of Childhood Primary Immune Thrombocytopenia, et al. Adapted guideline for the diagnosis and treatment of childhood primary immune thrombocytopenia (2021 edition). Chinese Journal of Pediatrics. 2021;59(10):810-819.
4.Al-Jadiry M, et al. PB2301: Pediatric immune thrombocytopenia; a glance at patients and current therapeutic challenges. HemaSphere. 2020;6(Suppl).
5.Kühne T, et al. A prospective comparative study of 2540 infants and children with newly diagnosed idiopathic thrombocytopenic purpura (ITP) from the Intercontinental Childhood ITP Study Group. J Pediatr. 2003;143(5):605-608.
6.Liang ZY, et al. New advances in the treatment of immune thrombocytopenia. Chinese Journal of Thrombosis and Hemostasis. 2023;29(2):89-96.