novocure®

patientforward

forward-looking statements

In addition to historical facts or statements of current condition, this presentation may contain forward-looking statements. Forward-looking statements provide Novocure's current expectations or forecasts of future events. These may include statements regarding anticipated scientific progress on its research programs, clinical trial progress, development of potential products, interpretation of clinical results, prospects for regulatory approval, manufacturing development and capabilities, market prospects for its products, coverage, collections from third-party payers and other statements regarding matters that are not historical facts. You may identify some of these forward-looking statements by the use of words in the statements such as "anticipate," "estimate," "expect," "project," "intend," "plan," "believe" or other words and terms of similar meaning. Novocure's performance and financial results could differ materially from those reflected in these forward-looking statements due to general financial, economic, environmental, regulatory and political conditions and other more specific risks and uncertainties facing Novocure such as those set forth in its Annual Report on Form 10-K filed on February 22, 2024, and subsequent filings with the U.S. Securities and Exchange Commission. Given these risks and uncertainties, any or all of these forward-looking statements may prove to be incorrect. Therefore, you should not rely on any such factors or forward-looking statements. Furthermore, Novocure does not intend to update publicly any forward-looking statement, except as required by law. Any forward-looking statements herein speak only as of the date hereof. The Private Securities Litigation Reform Act of 1995 permits this discussion.

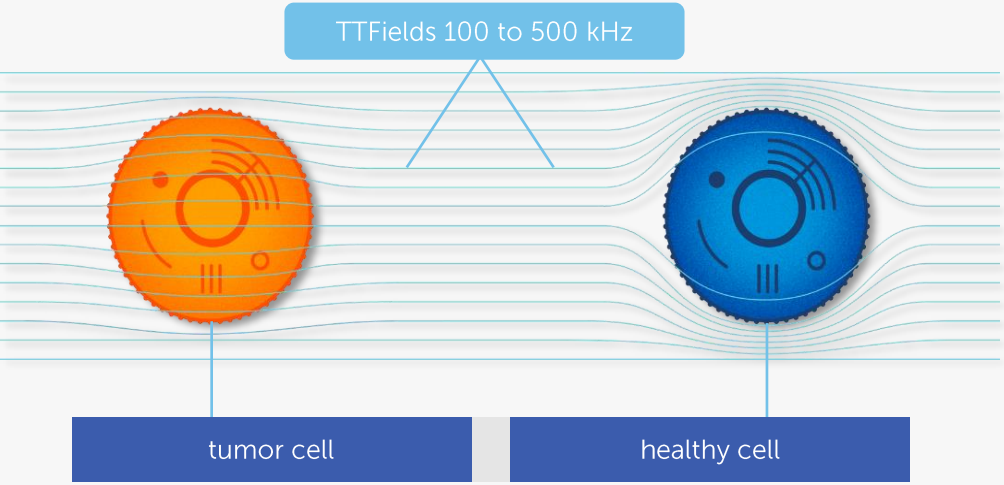
The statements contained in this presentation are made as at the date of this presentation, unless some other time is specified in relation to them, and service of this presentation shall not give rise to any implication that there has been no change in the facts set out in this presentation since such date. Nothing contained in this presentation shall be deemed to be a forecast, projection or estimate of the future financial performance of Novocure, except where expressly stated.

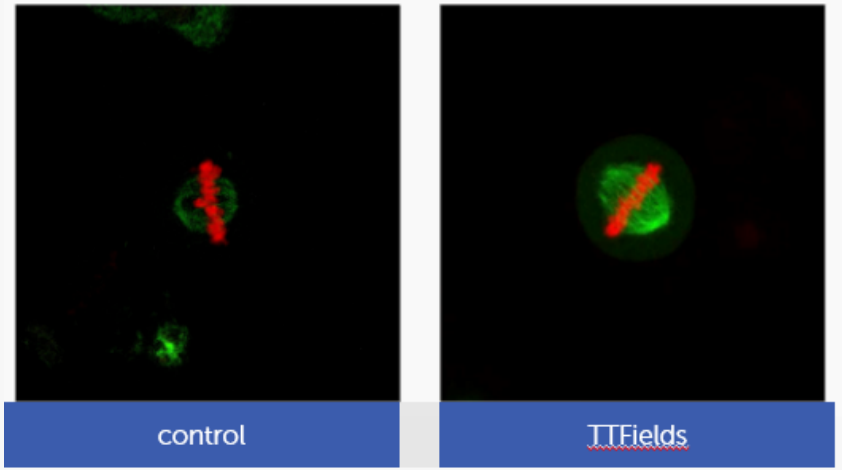
As of the date of this presentation, Optune Gio is FDA-approved for the treatment of adults with supratentorial glioblastoma (GBM). Optune Lua is FDA-approved for the treatment of adult patients with metastatic non-small cell lung cancer (mNSCLC) and for the treatment of adults with malignant pleural mesothelioma or pleural mesothelioma (MPM),respectively, and the approval for use in other indications is not certain. Novocure can provide no assurances regarding market acceptance of Optune Gio or Optune Lua or their successful commercialization and can provide no assurances regarding the company's results of operations or financial condition in the future. This presentation is for informational purposes only and may not be relied upon in connection with the purchase or sale of any security.

together with our patients,
we strive to extend survival
in some of the most
aggressive forms of cancer

patientforward®

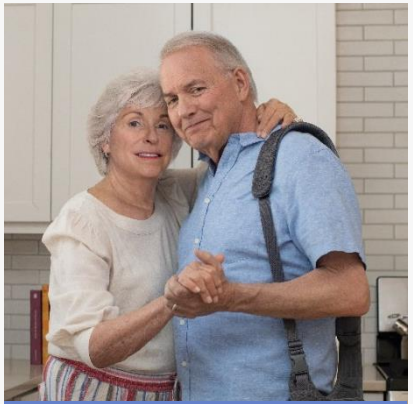
Tumor Treating Fields (TTFields) target the electrical properties of cancer cells





TTFields are delivered through a portable, wearable medical device

OPTUNE GIO®



OPTUNE LUA®

patientforward®

strong foundation and building towards profitability

approved and reimbursed
IN MAJOR GLOBAL MARKETS

>4,000
GLOBAL ACTIVE PATIENTS ON THERAPY

NCCN Category 1
GUIDELINE RECOMMENDATION

$605M
2024 NET REVENUE[1]

$213M
R&D INVESTMENTS LTM[2]

intellectual property
ROBUST PORTFOLIO WITH ONGOING DEVELOPMENTS

patientforward®

1. Preliminary, subject to audit and adjustment. 2. As of December 31, 2024; 3. R&D investment made from Q4 2023 through Q3 2024 progression. GBM, glioblastoma; LTM, last twelve months; NSCLC, non-small cell lung cancer; R&D, research and development.

significant achievements in 2024

GROW GBM
- $605m net revenue*
- Successful launch in France
- Improved U.S. approval rates

LAUNCH LUNG
- PMA received
- U.S. launch
- 52 new Rx; 20 active patients

DELIVER PIPELINE
- Phase 3 METIS successful
- Phase 3 PANOVA-3 successful
- Flex array PMA suppl. approved

patientforward®

* Preliminary. Subject to audit and adjustment. GBM, glioblastoma; PMA, Premarket Approval; Rx, prescriptions; suppl., supplement.

entering a new era with expanding oncology platform driven by 3 positive phase 3 trials

FIRST INDICATION IN GBM

3 POSITIVE TRIALS IN NEW INDICATIONS

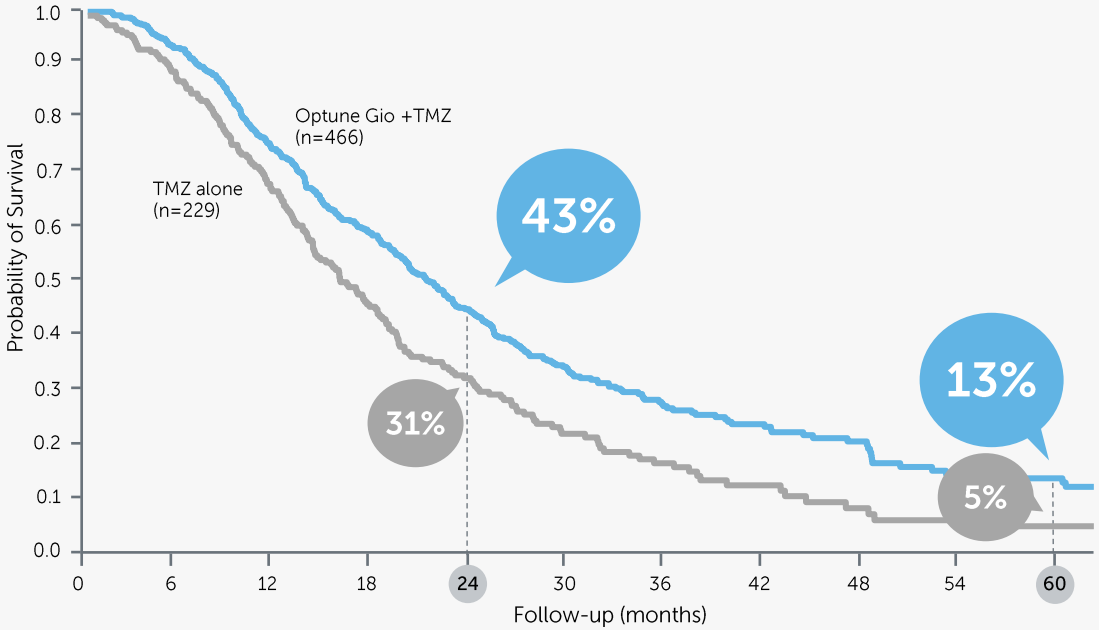
MULTI-INDICATION PLATFORM THERAPY

2025

patientforward®

extended survival in newly diagnosed GBM

EF-14 PHASE 3 CLINCAL TRIAL OVERALL SURVIVAL



	Optune Gio + TMZ (n=466)	TMZ alone (n=229)
Median OS from randomization (months)	20.9	16.0
Log-rank ***P***-value	<0.001	
HR (95% CI)	0.63 (0.53–0.76)	
Median OS from diagnosis (months)	24.5	19.8

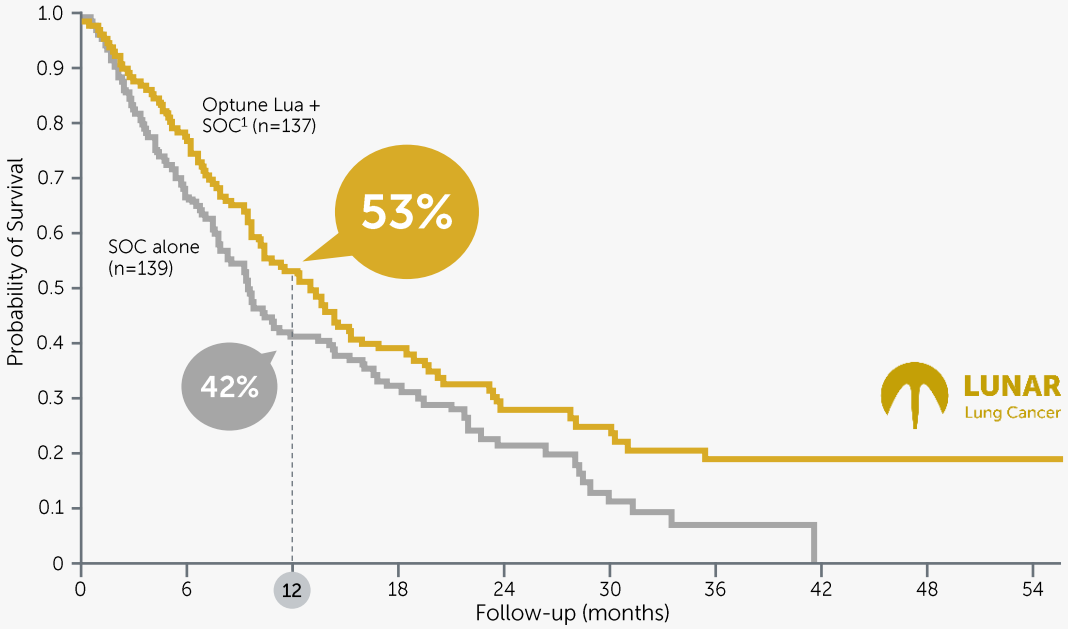
NEXT STEPS:
Potentially label expanding TRIDENT, KEYNOTE D58 trials

patientforward®

Stupp R, et al. *Cancer Res. 2017;77(suppl 13).* American Association for Cancer Research. CI, confidence interval; GBM, glioblastoma; HR, hazard ratio; OS, overall survival; TMZ, temozolomide. Mild to moderate skin irritation is the most common device related adverse event.

extended survival in metastatic NSCLC

LUNAR PHASE 3 CLINCAL TRIAL OVERALL SURVIVAL



	Optune Lua + SOC (n=137)	SOC alone (n=139)
Median OS (months)	13.2	9.9
Log-rank ***P***-value	0.035	
HR (95% CI)	0.74 (0.56–0.98)	
3-year survival (95% CI)	18% (11-27)	7% (2-15)

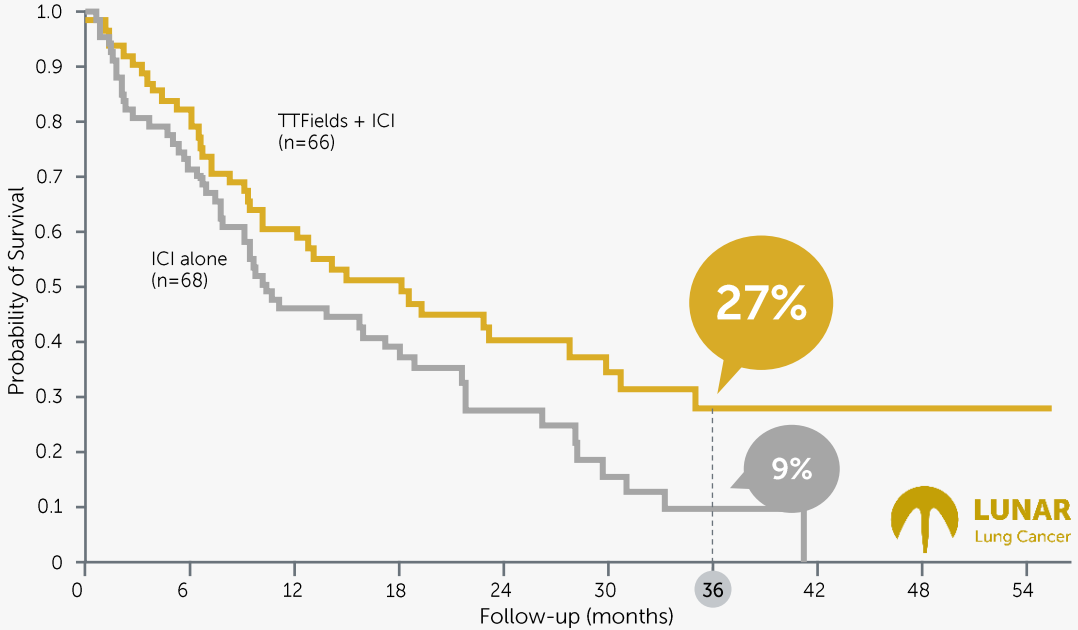
NEXT STEPS:
U.S. launch underway; global applications under review

patientforward®

Leal et al. Tumor Treating Fields therapy with standard systemic therapy versus standard systemic therapy alone in metastatic non-small-cell lung cancer following progression on or after platinum-based therapy (LUNAR): a randomised, open-label, pivotal phase 3 study. *Lancet Oncol.* 2023 Sep;24(9):1002-1017. 1, Investigator's choice immune checkpoint inhibitor or docetaxel.; CI, confidence interval; HR, hazard ratio; NSCLC, non-small cell lung cancer; OS, overall survival; SOC, standard of care; TTFields, Tumor Treating Fields. Mild to moderate skin irritation is the most common device related adverse event.

extended survival together in mNSCLC with ICI

LUNAR PHASE 3 CLINCAL TRIAL OVERALL SURVIVAL IN ICI COHORT



	TTFields + ICI (n=66)	ICI alone (n=68)
Median OS (months)	18.5	10.8
Log-rank ***P***-value	0.03	
HR (95% CI)	0.63 (0.41–0.96)	
3-year survival (95% CI)	27% (15-27)	9% (3-21)

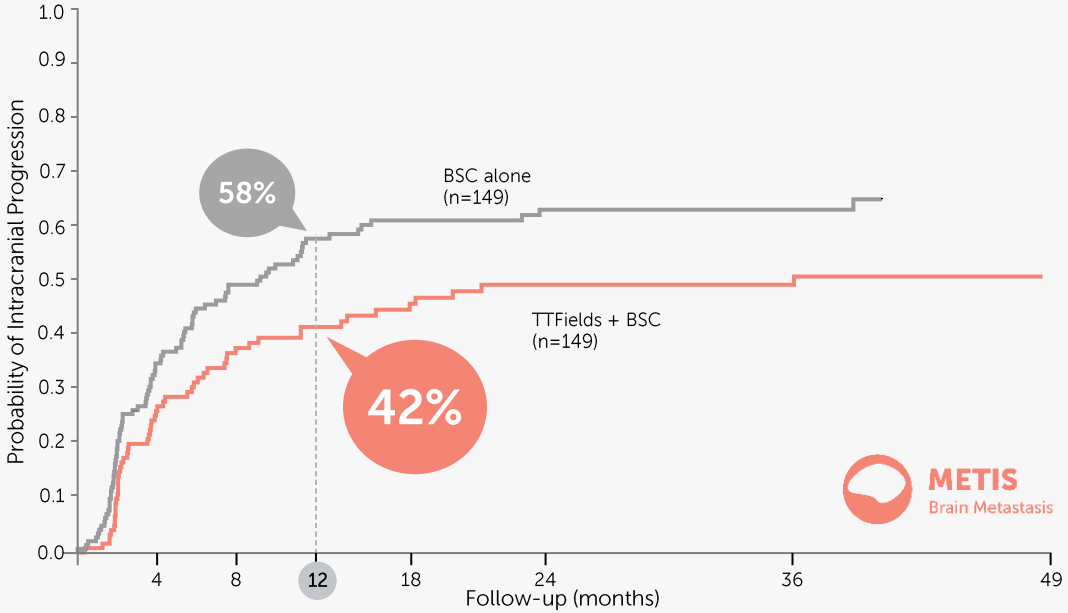
NEXT STEPS:
Potentially label expanding LUNAR-2 trial

patientforward®

Leal et al. Tumor Treating Fields therapy with standard systemic therapy versus standard systemic therapy alone in metastatic non-small-cell lung cancer following progression on or after platinum-based therapy (LUNAR): a randomised, open-label, pivotal phase 3 study. *Lancet Oncol.* 2023 Sep;24(9):1002-1017. CI, confidence interval; HR, hazard ratio; ICI, immune checkpoint inhibitor; mNSCLC, metastatic non-small cell lung cancer; OS, overall survival; SOC, standard of care, TTFields, Tumor Treating Fields. Mild to moderate skin irritation is the most common device related adverse event.

extended time to progression in brain metastases

METIS TRIAL TIME TO INTRACRANIAL PROGRESSION



	TTFields + BSC (n=149)	BSC alone (n=149
Median TTIP (months)	21.9	11.3
Log-rank ***P***-value	0.0158	
HR (95% CI)	0.667 (0.480–0.927)	

NEXT STEPS:
Global regulatory filings underway

patientforward®

Minesh P. Mehta et al., Results from METIS (EF-25), an international, multicenter phase III randomized study evaluating the efficacy and safety of tumor treating fields (TTFields) therapy in NSCLC patients with brain metastases. *JCO* **42**, 2008-2008(2024).DOI:10.1200/JCO.2024.42.16_suppl.2008 BSC, best supportive care; CI, confidence interval; HR, hazard ratio; TTFields, Tumor Treating Fields; TTIP, time to intracranial progression.

extended survival in unresectable, locally advanced pancreatic cancer

TTFields arm demonstrated…

16.2 month median overall survival

VS

14.2 month median overall survival on control arm

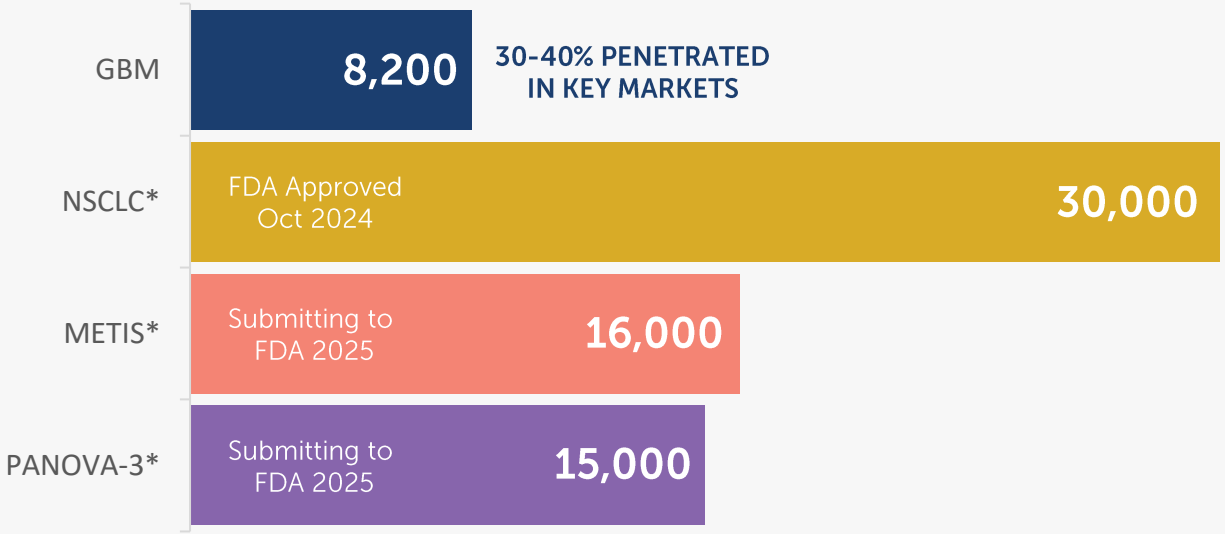
(HR=0.819, p=0.039)

NEXT STEPS:
Data presentation at upcoming medical congress; global regulatory filings underway

HR, hazard ratio; TTFields, Tumor Treating Fields;.

new indications significantly expand eligible patient population

U.S. ANNUAL DIAGNOSES OF ON-LABEL PATIENTS SEEKING THERAPY



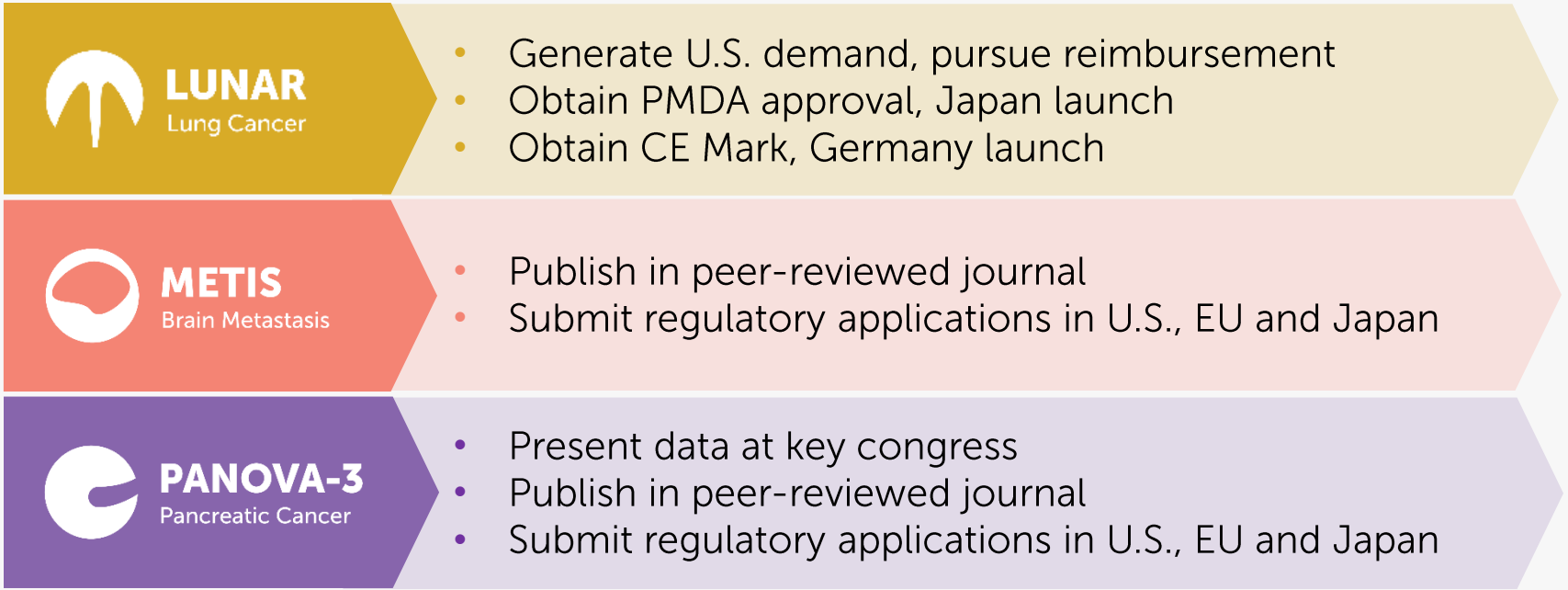
7x

EXPANSION IN TOTAL ADDRESSABLE MARKET FROM NEW INDICATIONS

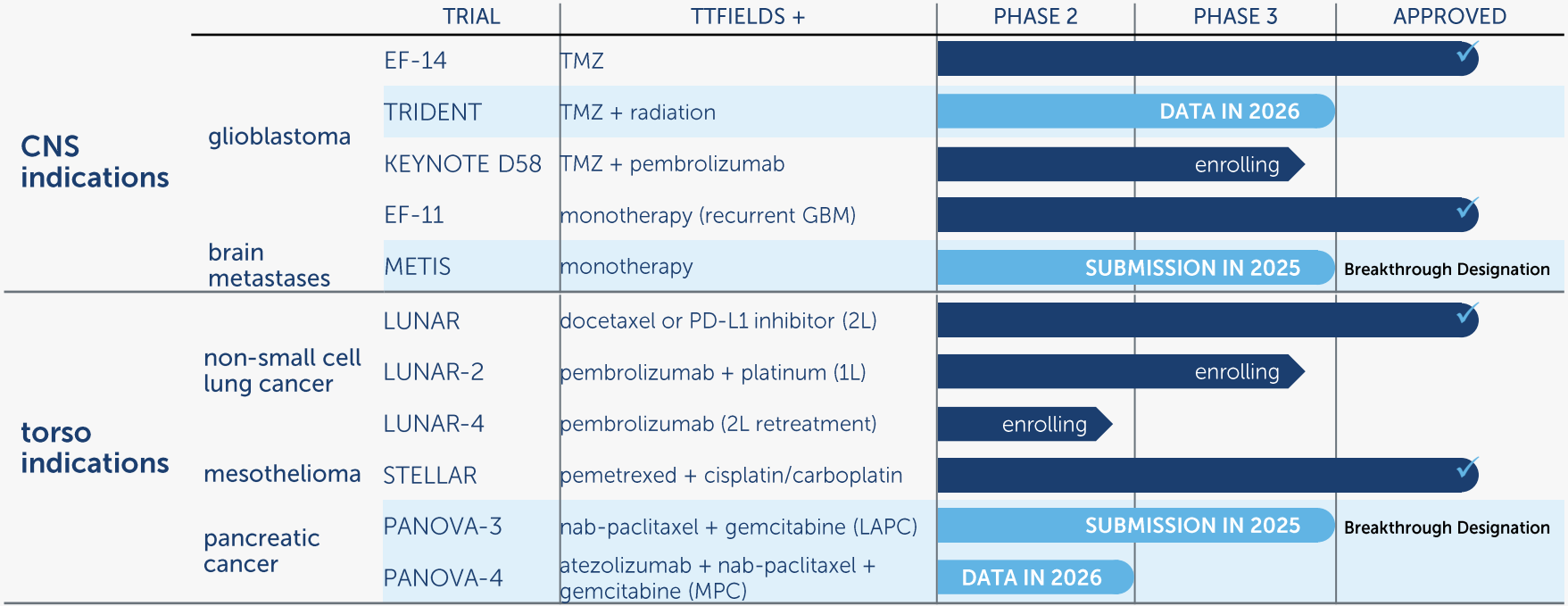
patientforward®

*Eligible patient population estimates based on patients that would meet inclusion criteria for clinical trial protocol.

2025 anticipated commercialization milestones



2025-2026 anticipated clinical development milestones



striving to extend survival for as many patients with aggressive cancers as we can

3

FUTURE EXPANSION
Advance label-expanding clinical trials, investment in platform

2

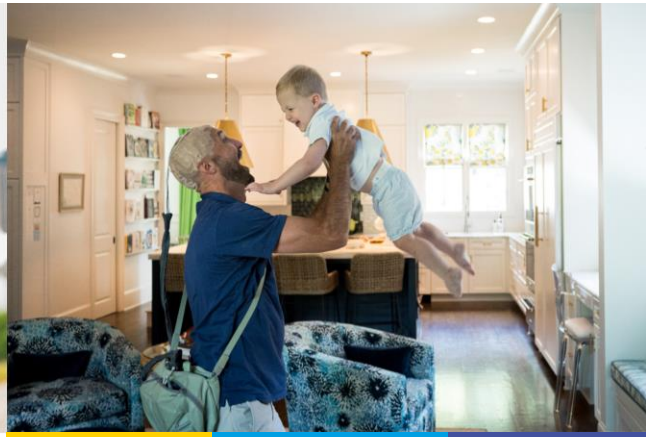
OPPORTUNITIES ON THE HORIZON
Drive new indications (PANOVA; METIS), further product development

1

NEAR-TERM OPPORTUNITIES
Increase GBM penetration, launch lung, launch new arrays

TODAY
4,126 active patients

patientforward®



DRIVE | COURAGE | TRUST | patientforward | EMPATHY | INNOVATION | FOCUS