



Expanding leadership in oncology

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Maintain leadership in oncology



Vision

 The oncology market – growth rates – drivers – therapeutic trends

Roche's oncology portfolio



Vision



- Roche with Genentech and Chugai to maintain the number 1 position in oncology and supportive care
- Develop selective and better tolerated products with survival benefits
- Bring enhanced performance supportive care products to market
- Seek added value through collaboration of Pharmaceutical and Diagnostics



Achieving the vision



- Innovative products can achieve sales CHF 1 2 billion
- Focus on five tumor types (breast, NSCLC, CRC, prostate, NHL)
- Out of four therapeutic classes Roche markets in three and has research in two
- No major patent expirations of "young" growth drivers near term
 - Herceptin 2012
 - MabThera 2013
 - Xeloda 2013

Robust exciting pipeline



Achieving the vision

- 12 18 % market share
- Steady flow of products (innovatives, cytotoxics, supportive care)
- Products with clear benefits in terms of survival and quality of life
- Multiple products of CHF > 1 billion
- Competitive investments in marketing, especially phase IV trials and adjuvant studies
- Strong market presence in US and Japan
- Strong Diagnostics presence





Maintain leadership in oncology



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Oncology worldwide market



We expect in the next 10 years

- Oncology market to grow at around 10 % CAGR
- Roche / Genentech / Chugai to outperform the market
- Innovatives to surpass chemotherapeutics
- Supportive care to grow at over 10 % CAGR
- A revolution in molecular targets but only an evolution in survival benefits



Oncology worldwide market *Innovatives to become biggest segment*



total market of CHF 87 billion in 2011 (CAGR 10.2 %)

Targeting Cancer With Care Roche Oncology

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source IMS, analyst reports, decision resources

Breast cancer worldwide market *Size and growth rates*



total market of CHF 12.3 billion in 2011 (CAGR 9.3 %)

Targeting Cancer With Care Roche Oncology

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source IMS, analyst reports, decision resources

Therapeutic trends breast cancer



• Current treatment

- hormonal therapy
- older cytotoxics: anthracyclines, alkylating agents
- newer cytotoxics: taxanes, **Xeloda**, vinorelbine
- monoclonal antibodies: Herceptin
- supportive care: **bisphosphonates, growth factors**
- Future treatment
 - next-generation hormonals: aromatase inhibitors, SERM's
 - HER family inhibitors: **2C4**, Erbitux, **Tarceva**
 - targeted inhibitors: MUC-1
 - angiogenesis inhibitors: Avastin, Angiozyme
 - cytotoxics: Taxanes, Topo 1 inhibitors, epothilones (D), farnesyl transferase inhibitors, CDK-M
 - novel signal transduction inhibitors
 - novel biotechnology: vaccines, gene therapy, antisense



Oncology market dynamics



- Increase in prevalence
- Increase in prescription penetration in major tumor types
- Longer treatment periods in major tumor types
- Generic erosions
- Tailor made drugs
- Evidenced based medicine in Japan



Oncology market dynamics Predictive diagnostics







Oncology market drivers *Unmet medical needs*

- Current unmet needs
 - generally low survival rates in the major indications
 - improved safety profile needed
- New therapies expected
 - wider use of oral therapies
 - increasing adjuvant usage of more effective and better tolerated drugs
 - more drugs targeting of specific processes and genes in the tumor
 - major role for diagnostics for specific treatments





Oncology market drivers *Supportive care*

- Increased treatment of anemia
- Improved convenience of currently marketed products through pegylation
- Improved control of delayed emesis with NK1 inhibitors
- Generic erosion
 - in emesis for the 5-HT3 antagonist within the next 5 years
 - erythropoietins



Maintain leadership in oncology



• Vision

 The oncology market – growth rates – drivers – therapeutic trends

Roche's oncology portfolio



Roche **Roche oncology portfolio* overview** Strong mix of new and marketed products R1273 R1492 **Avastin** MabThera rhuMAb2C4 **Epothilone D** anticancei **Furtulon** R1550 R1549 Y-90 MuMabHMFG-1 HuMabHMFG-1 Roferon-A R1536 Herceptin DMXAA Diflomotecan Xeloda Tarceva In-111 MuFabHMFG-1 in development marketed supportive **NeoRecormon** Epogin R1124 **Kytril** NK1 care **R744** Bondronat Targeting Cancer **CERA** With Care * Roche and Genentech combined; HMFG = human milk fat globulin Roche Oncology



Oncology - Roche the no. 1 company *Outperforming the market*

	Roche Prescription		Japan Prescription		USA Prescription		Roche world wide Prescription	
	FY 2002 CHF m	local growth	FY 2002 CHF m	local growth	FY 2002 CHF m	local growth	FY 2002 CHF m	local growth
MabThera	502	73 %	70	176 %	1,760	40 %	2,332	48 %
Herceptin	385	64 %	73	318 %	549	9 %	1,007	34 %
Xeloda	191	89 %			253	78 %	444	83 %
Bondronat	29	-5 %					29	-5 %
Kytril	114	22 %	128	9 %	209	4 %	451	12 %
sub-total	1,221	66 %	271	69 %	2,771	35 %	4,262	42 %
Neupogen	213	-30 %					213	-30 %
Furtulon	22	-24 %	226	-7 %			248	-9 %
NeoRecormon*	239	32 %					239	65 %
Roferon-A**	106	-15 %	1	-66 %	4	-97 %	111	-16 %
Picibanil			3				3	
Neutrogin			93				93	
sub-total	581	-9 %	323	31 %	4	-97 %	907	2 %
total	1,802	42 %	594	15 %	2,775	35 %	5,169	35 %

* 25 % / ** 60 % of total sales

29 % Roche Pharma Business



Women with metastatic breast cancer live longer with Xeloda combination





Xeloda Target market



Xeloda in colorectal cancer (CRC) ~ 510,000 metastatic CRC patients ~ 725,000 adjuvant CRC patients (6-8 cycles)



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Roche Oncology

Xeloda in colorectal cancer *Strategic initiatives*

- Establish Xeloda as 1st line therapy by replacing 5-FU/LV in monotherapy and combination therapy through registrations and phase IV.
- Develop and register Xeloda in adjuvant colon as monotherapy and combination therapy
- Xeloda as backbone therapy for new agents to add to rather than 5-FU/LV



Xeloda in metastatic breast cancer *Strategic initiatives*

- Establish Xeloda + Taxotere in anthracycline failures (survival)
- Establish Xeloda in taxane failures
- Develop and register Xeloda in adjuvant with taxanes
- Large supportive phase IV program



Xeloda *Clinical update - 12000 patients*







MabThera in aggressive NHL ~ 210,000 patients globally



MabThera in indolent NHL ~ 170,000 patients globally



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MabThera *Strategic initiatives*

- Increase penetration in indolent NHL from 20 %
 - move to 1st line with longer treatment
- Establish MabThera in aggressive NHL by increasing penetration from 25 % and make it the cornerstone with any chemotherapy
- In both indications earlier and longer treatment
- Patient demand for treatment / reimbursement
- Maintenance



MabThera Increase blockbuster potential



 Interim data first line aggressive NHL study (younger population)

2005

• **New indication:** first line indolent NHL and new data in relapsed indolent NHL

2008

• New indication: CLL filing expected



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Herceptin® Trastuzumab anti-HER@ monoclonal antibody

Targeted to increase survival



Roche Herceptin in metastatic breast cancer ~ 750,000 women ~ 3 million women adjuvant breast cancer (12 - 24 months) 1st line 9 months (+ taxane) **60** % patient distributior 2nd line course 30 % of disease 6 months (monotherapy) 3rd line 10 % **3 months** Targeting Cancer With Care source: estimations based on clinical trial data Roche Oncology

Herceptin Strategic initiatives

- Maximize numbers of metastatic breast cancer patients treated with Herceptin
 - increase penetration of testing
 - expand 1st line usage
 - increase duration of treatment
 - re-treatment and treatment beyond progression
- Funding access
 - reimbursement
 - hospital budgets
- Develop and register adjuvant indication



Herceptin *Building for the future*



variation	approval	
testing: fluorescence in situ hybridization (FISH)	Q1 '03	
metastatic breast cancer: combination with hormonal therapy	Q3 '07	
adjuvant breast cancer (interim 2005)	Q1 '09	

- Enlarge the diagnostic component of the label
- Add new indications





Treat cancer without nausea & vomiting challenges



Less complicated 24 hour prevention of nausea & vomiting



Kytril *Turned the corner*



• Achievements

- 54 % market share in Japan
- ~ 23 % global market share
- returned to global growth through Chugai alliance and aggressive contracting in the US
- US PONV* approval in August '02
- Future growth
 - increased share of voice
 - consistent differentiation from competitors (true 24 hour coverage, drug interactions, cardio-toxicity)



global (Roche & Chugai)



NeoRecormon[®] in oncology



NeoRecormon® Epoetin Beta

Builds blood Builds strength Builds hope



NeoRecormon



- Anaemia weakens the patients ability to fight the cancer at poorer survival prognosis
- Once a week for solid and hematological tumors
- Pain free injection with better delivery systems (30,000 PFS)
- NeoRecormon oncology potential
 - approx. CHF 500 600 million
 - no sales in oncology yet in Japan (Chugai)



Continuous erythropoiesis receptor activator (CERA)

• Strategic fit

- entry into two key strategic markets, US and Japan
- defend current sales against new competitors and bio-generics in Europe and Japan
- grow the market with optimum dosing
- Development objectives
 - develop a compound with clinical and competitive advantages compared to EPO and NESP
- Filing expected 2006







Tarceva *Differences to Iressa*

1st line non-small cell lung cancer

- At therapeutic doses AUC Tarceva is **5 6 times** AUC Iressa
- Metabolism of Tarceva generates an **active metabolite**
- Roche / partners dose to rash (MTD*) Iressa 33 % MTD
- Powered for median survival improvement of 25 % (Tarceva)
 vs. 33 % (Iressa).
- Phase II clinical data show broad anti-tumor activity in NSCLC, pancreatic, head & neck cancer and ovarian cancer



Avastin What's special about it?

- Angiogenesis essential for growth of all tumors
- VEGF crucial for development of new blood vessels
- Anti-VEGF (Avastin) to inhibit angiogenesis and therefore new tumor formation and grow of existing tumors
- Phase III data expected in 2002





