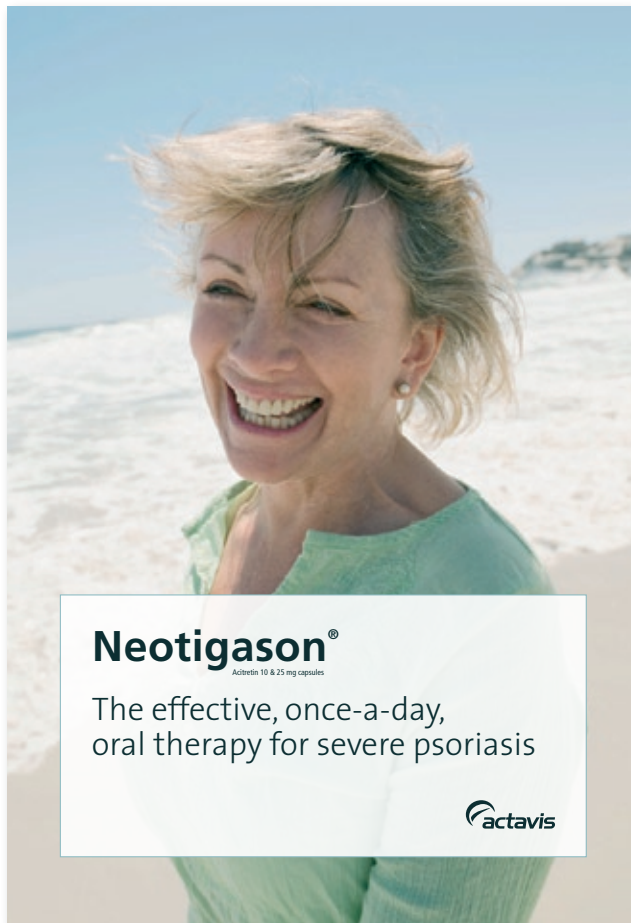




I forbindelse med Actavis' akkvisition af tre nye brands har United udviklet salgsmaterialer til brug for re-lancering /re-branding. Inkluderer bl.a. medicinsk koncept, storyflow, udvikling af key messages – nationalt og internationalt.



Neotigason®
Acitretin 10 & 25 mg capsules

The effective, once-a-day, oral therapy for severe psoriasis



Severe psoriasis – Impairs quality of life

- although psoriasis primarily does not affect actual quality of life a number of major negative effects on patients, demonstrable by a significant decrease in quality of life
- the negative effect of psoriasis on psychological, psychological and social dimensions of life can be greater than those resulting from the accompanying symptoms such as myocardial infarction*

Psoriasis can be as debilitating as other serious medical or psychiatric conditions*



Neotigason® – effective, once-a-day, oral therapy for severe psoriasis

"Neotigason® is the only oral retinoid approved specifically for treating psoriasis"

Broad indications*

- severe inflammatory psoriasis in all its forms effective in five major types of psoriasis:
 - plaque
 - psoriatic
 - erythrodermic and
 - psoriasis
- severe forms of disorders of keratinisation such as:
 - hyperkeratosis palmare et plantare
 - psoriasis palmare et plantare
 - actinoid
 - keratosis follicularis (Darier's disease)
 - lichen planus affecting the skin of the mucosa
 - psoriasis rubra plantae

Neotigason® – a convenient oral treatment of severe psoriasis

- currently the only oral retinoid approved for psoriasis
- free from inconvenience of using messy ointment or painful injections
- once-daily dosage
- adults: 25 mg, once daily (Neotigason: Not suitable for pregnant patients and those expecting to get pregnant within 3 years of cessation of therapy)

Neotigason®

- can be used both as an initial and a maintenance treatment
- offers immunosuppressive and anti-inflammatory effects

Neotigason® – in severe forms of keratinisation disorders

64% of the patients with lichen planus showed remission or marked improvement**



75% reduction of all symptoms in patients with hyperkeratotic changes of the palms**



Neotigason® – well established safety profile

- prescribed to more than 1 million patients worldwide
- well established safety profile
- in contrast to other systemic antipsoriatic drugs, it is neither cytotoxic nor immunosuppressive
- is not immunosuppressive, it is generally safe for long-term use and has no known side effects

Warning: Teratogenic Effects. Pregnancy Category X.

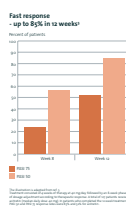
Patients should not donate blood either during or at least one year following discontinuation of therapy with Neotigason®.

Website links for further information: www.psoriasis.org

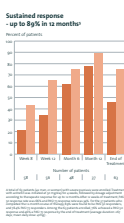
Neotigason® – excellent response rates in severe psoriasis

"The high percentage of patients achieving a 50% or 75% reduction in PASI score during treatment with acitretin confirms the therapeutic efficacy of this drug"

Fast response – up to 82% in 12 weeks*




Sustained response – up to 89% in 12 months*




Neotigason® – synergistic efficacy in combination therapies

Substantially augmentation of the efficacy with PUVA*



Significant additional effect with topical therapy (calcipotriol)***



Combination therapy with Neotigason®

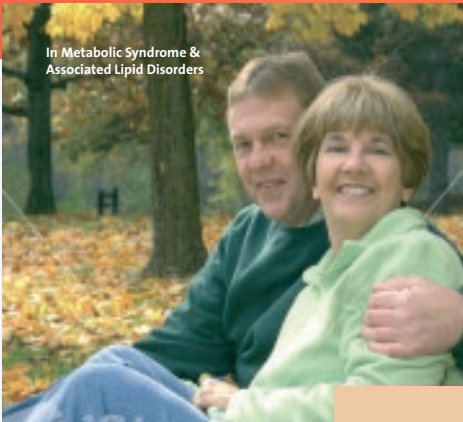
- increased efficacy compared to either component alone**
- allowed reduction of Neotigason® and/or concomitant therapy**

Neotigason® – the effective, once-a-day, oral therapy for severe psoriasis

- Prescribed to more than 1 million patients worldwide for more than 10 years
- Currently the only oral retinoid approved for psoriasis*
- Approved for both initial and maintenance therapy for severe psoriasis in adults*
- In different types of psoriasis: plaque, guttate, erythrodermic, pustular, and palmoplantar
- A well established safety profile*
- Neither cytotoxic nor immunosuppressive

www.actavis.com





In Metabolic Syndrome & Associated Lipid Disorders

BEZALIP®
(bezafibrate 200 mg & 400 mg SR tablets)

– The only Pan-PPAR fibrate

Metabolic Syndrome
A cluster of the most dangerous CVD risk factors

Definition (IDF)

Central obesity (defined as waist circumference ≥ 94cm for European men and ≥ 88cm for European women plus any two of the following four factors:

- raised TG level ≥ 150 mg/dL (1.7 mmol/L) or specific treatment for hypertriglyceridaemia
- reduced HDL cholesterol: < 40 mg/dL for men and < 50 mg/dL for women or specific treatment for this lipid abnormality
- raised blood pressure systolic BP ≥ 130 or diastolic BP ≥ 85 mm Hg, or treatment of previously diagnosed hypertension
- raised fasting plasma glucose (FPG) ≥ 100 mg/dL (5.6 mmol/L) or previously diagnosed type 2 diabetes

Incidence & prevalence

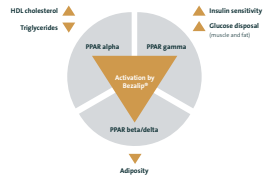
- 25-35 percent of the world's adult population have the metabolic syndrome
- The incidence is growing dramatically

Consequences of Metabolic Syndrome

- Patients are twice as likely to die from and three times as likely to have MI or stroke compared with people without the syndrome
- Patients have a twofold greater risk of developing type 2 diabetes

"The clustering of cardiovascular disease (CVD) risk factors that typifies the metabolic syndrome is now considered to be the driving force for a new CVD epidemic."

Pan – PPAR activation as a unique therapeutic concept in Metabolic Syndrome²



- Bezafibrate:**
- The first clinically tested pan-PPARα, β and γ activator
 - The archetype of a clinically tested pan-PPAR ligand



RAPILYSIN®

Confidence in thrombolysis

Confidence in action

Confidence in dosing is crucial

- The clinical benefit of thrombolytic therapy has been shown to correlate directly with completion and speed of reperfusion of the infarct-related coronary artery
- In patients requiring weight adjusted dosing, errors with reteplase resulted in higher rates of bleeding and intracranial haemorrhage

Confidence in saving time

- The therapeutic benefit of thrombolytic therapy has been shown to correlate directly with completion and speed of reperfusion of the infarct-related coronary artery
- The simple double-bolus regimen of reteplase (Rapilysin®) dose regimens is conducive to prehospital initiation of thrombolytic treatment in patients with ST-segment elevation myocardial infarction (STEMI), which reduces the time to treatment, a critical factor in improving long-term survival¹⁸

Rapilysin® – in thrombolytic therapy of myocardial infarction

- A simple choice
- Rapilysin® is indicated for thrombolytic therapy of acute myocardial infarction (AMI) within 90 minutes after the onset of AMI symptoms¹⁸
- No need for hepatic dose adjustment¹⁸
- Faster initiation of thrombolytic therapy

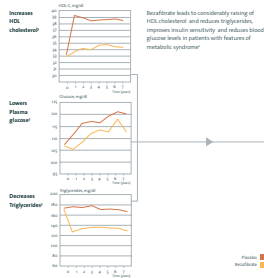
Thrombolytic effect
Rapilysin® is recombinant plasminogen activator which catalyses the cleavage of endogenous plasminogen to generate plasmin. Plasmin in turn degrades fibrinogen and fibrin, which is a component of the matrix of the thrombus, thereby exerting its thrombolytic effect.

"Use of a bolus thrombolytic agent reduced the rate of medication errors. Thus, use of the simpler bolus thrombolytic agents may improve overall clinical outcome."

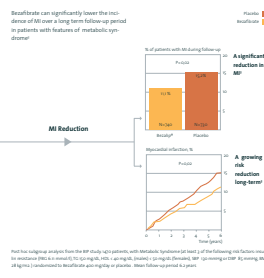
Rapilysin Detailed aid

Bezalip Detailed aid

Bezalip Pan-PPAR activation – Impact on CV Risk Markers



– and the resulting reduction in CV events



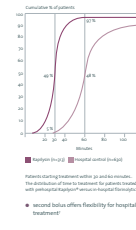
Pool the subgroup analysis from the BEZALIP study in patients with metabolic syndrome (total N=202) of the following 1000 patients who received BEZALIP 400 mg daily (N=100) or Placebo (N=100) for 12 weeks. HDL = high-density lipoprotein, MACE = major adverse cardiovascular events, MI = myocardial infarction, TG = triglycerides, FPG = fasting plasma glucose. Mean values are presented as mean ± SD.

Rapilysin® – confidence in dosing

- One dose for all patients**
- No need for weight adjustment¹⁸
 - Rapilysin® administered as a single standard dose for all patients
- Simple to use**
- Rapilysin® is administered as a double bolus regimen¹⁸
 - Each bolus should be administered as a slow intravenous injection over not more than 3 minutes
 - The second bolus is administered 30 minutes after administration of the first bolus injection

Rapilysin® – confidence in saving time

First bolus to save critical time



"The ease of administration of reteplase (Rapilysin®) dose regimens is conducive to prehospital initiation of thrombolytic treatment in patients with ST-segment elevation myocardial infarction (STEMI), which reduces the time to treatment, a critical factor in improving long-term survival"



¹⁸ Regional elevation myocardial infarction (STEMI)