



Roche at the forefront of cancer therapy
Oncology Media Briefing June 20, 2006

William M. Burns, CEO Division Roche Pharma



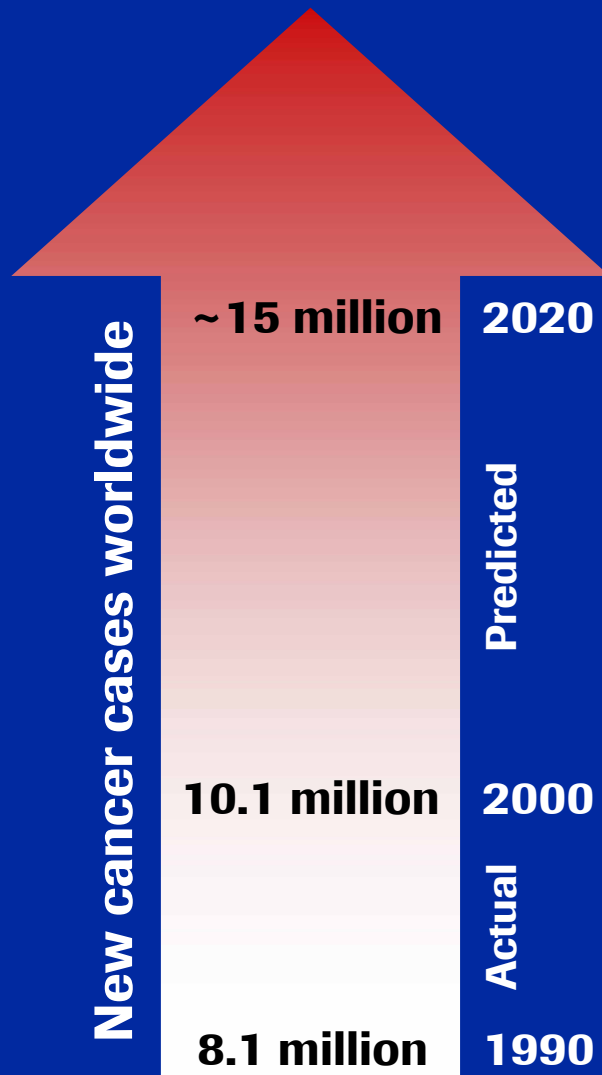
The reality of the cancer burden

Roche in Oncology

Oncology – Funding and Access

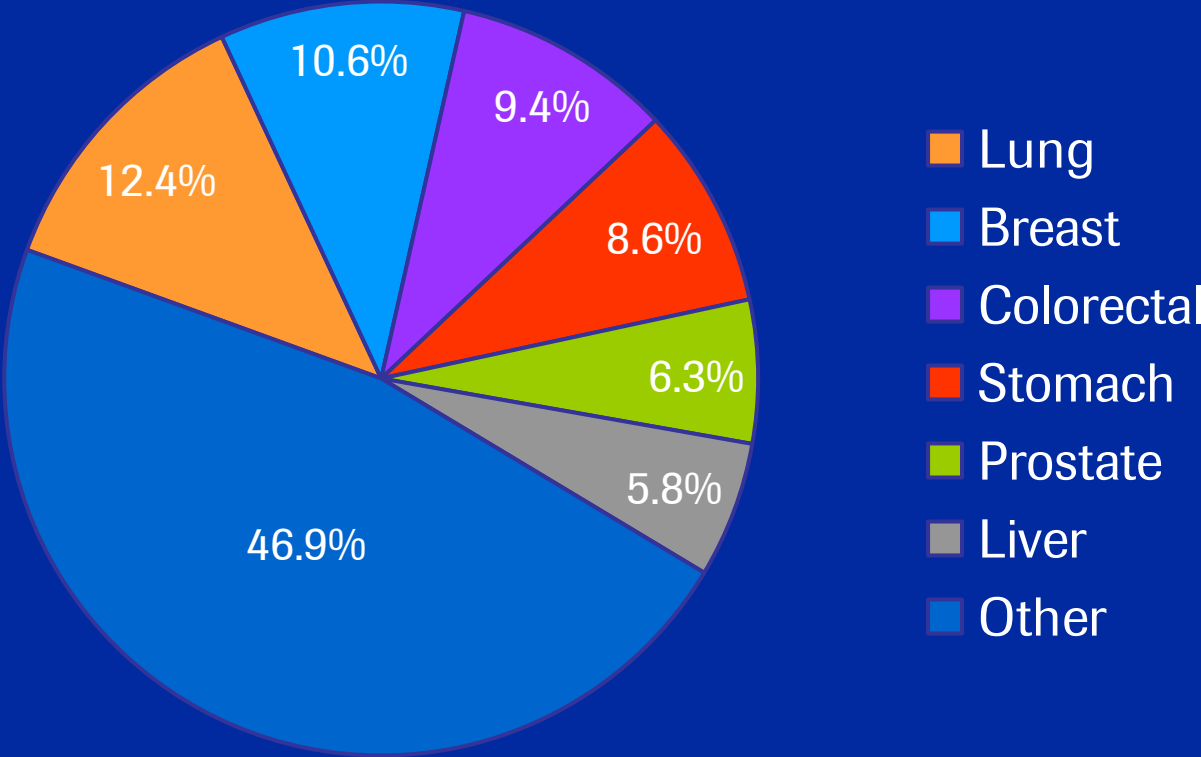
Incidence of Cancer Is Increasing

Doubling over the past 50 years



- 10.9 million people were newly diagnosed with cancer in 2002
- Annual cancer incidence is predicted to rise to about 15 million by 2020
- Cancer accounts for about one-fifth of all deaths worldwide

Global Incidence of Cancer

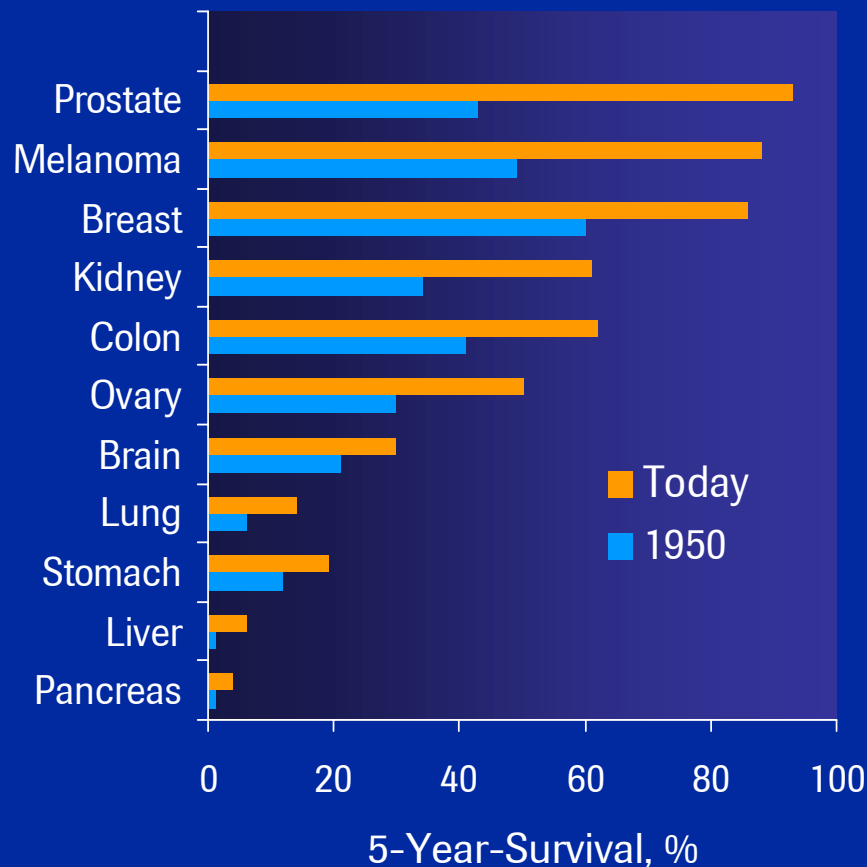


Worldwide incidence, GLOBOCAN 2002

Managing the burden of cancer

- Death rates are declining due to screening programmes, reduced smoking and therapeutic advances
- At least 1/3 of all cancers are preventable
- With early detection a further 1/3 of cases could be treated effectively
- Increased 5-year survival rates for major tumour types over the last decades

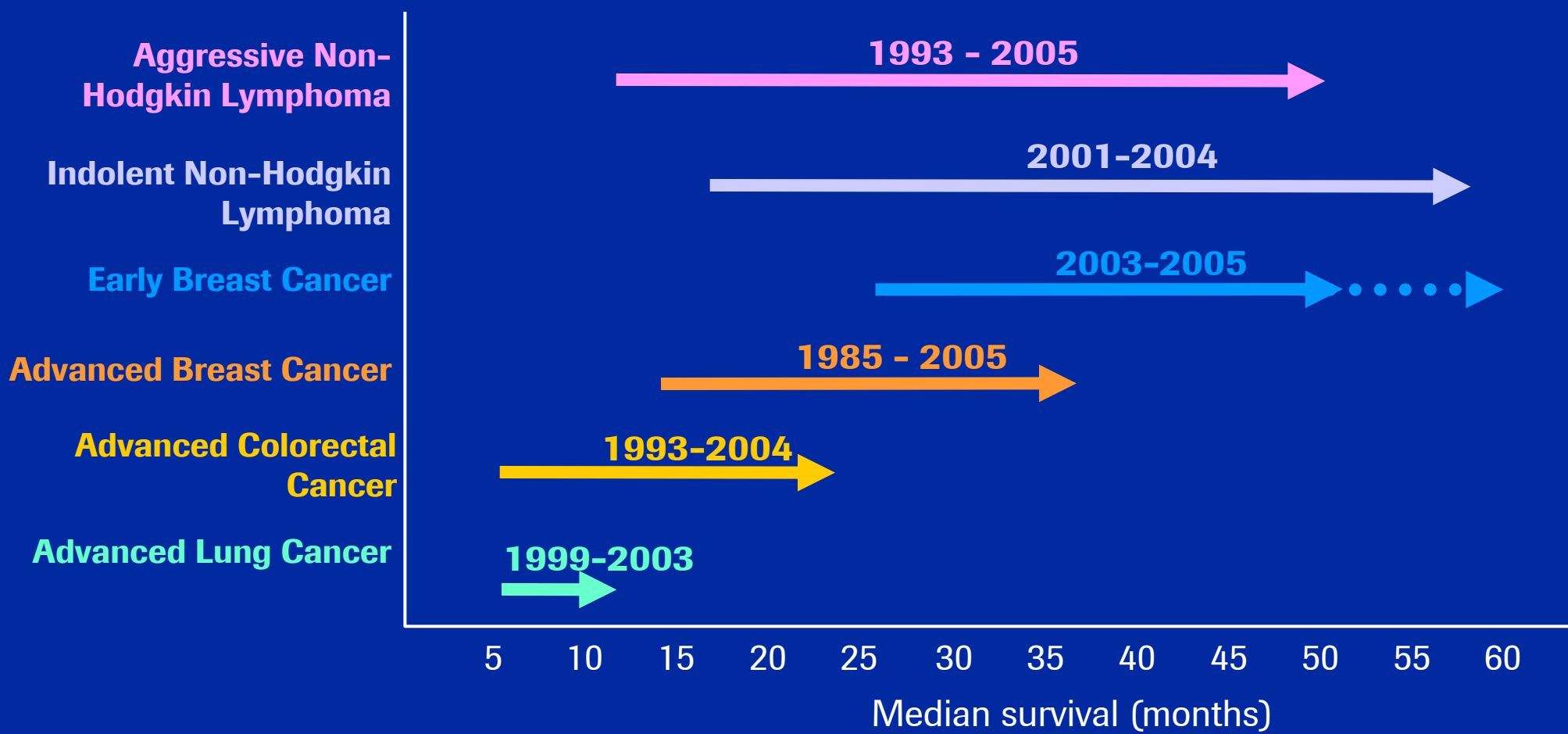
Changes in 5-year Survival





Cancer treatment outcomes

Substantial treatment progress in recent years



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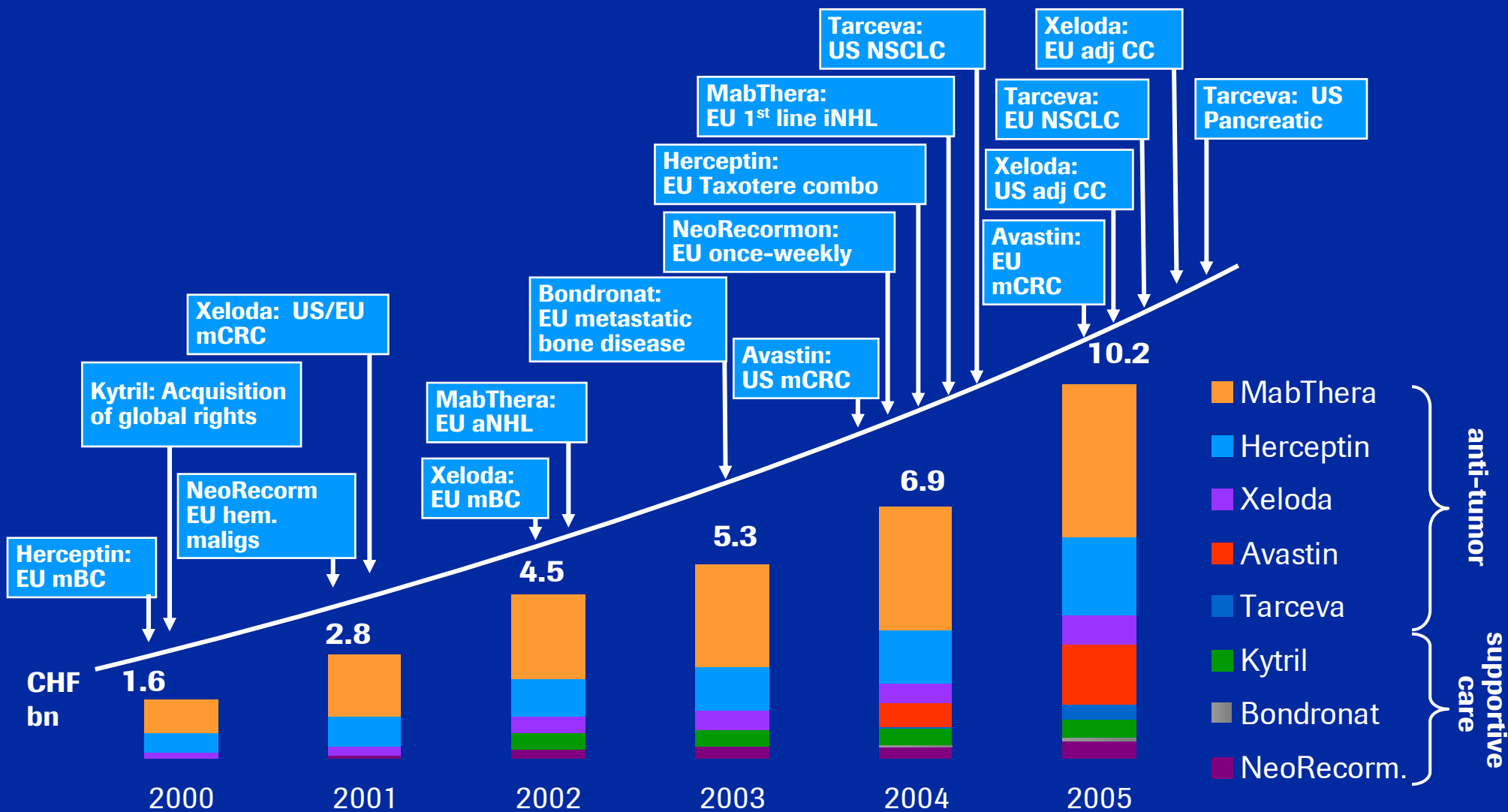
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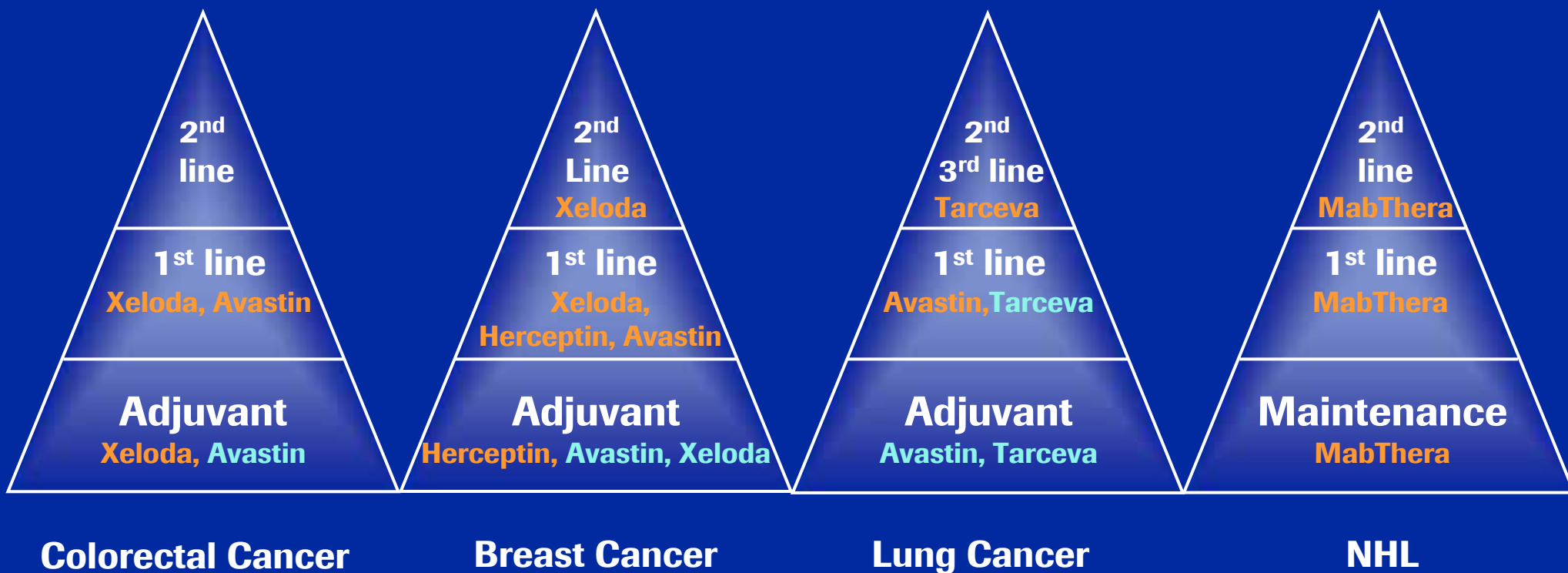
Leadership in oncology achieved in five years

Success through life-extending medicines





Roche medicines becoming crucial components of the standard of care



proven efficacy
in development



A strong base in Oncology Research and Development

- Strong global R&D network: 4 Roche Group sites in Japan, US and Germany complemented by strategic partners
 - ~25% of all research programmes and ~40% of all development projects are in Oncology
- Extensive research into new biomarkers of high diagnostic value
- Large clinical trial programmes: close to 45,000 patients and around 7000 centres participate in global oncology trials managed by the Roche Group
- Compassionate use programmes: help patients gain access to new medicines between approval and launch

Roche Group investments into biotechnology

CHF 2.5 billion investment spread over several years



Basel



Penzberg



Utsunomiya



Oceanside



Vacaville

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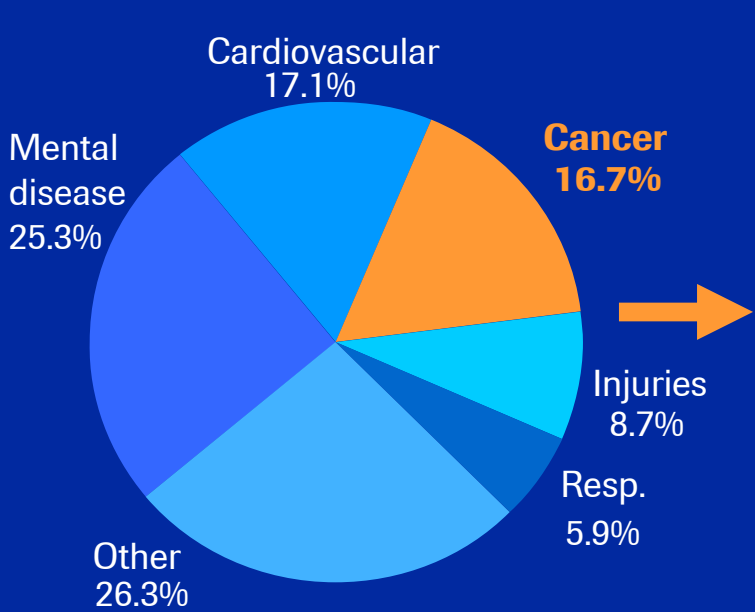
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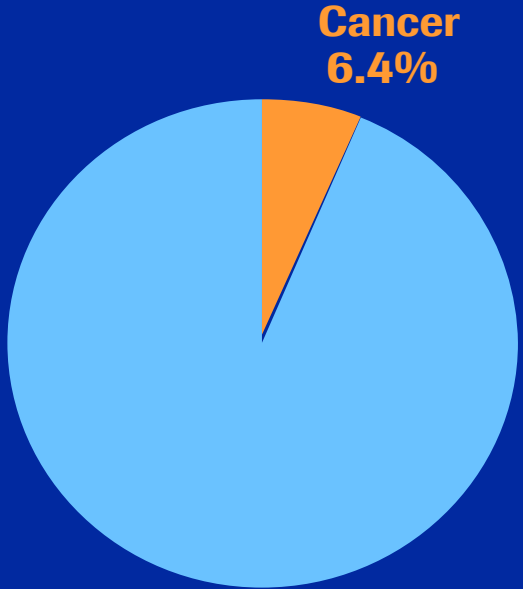
Oncology is dramatically under funded

Compared to other disease areas

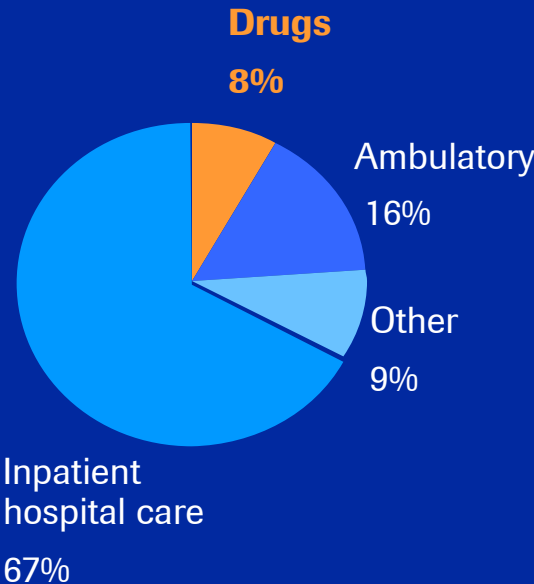
Total disease burden in DALYs



Total healthcare costs



Costs break down in Oncology (Example: Germany)



Source: A pan-European comparison regarding patient access to cancer drugs, Karolinska Institute
 DALY: Disability-Adjusted Life Years, figures from 2002/3; commonly used measure of the burden of disease

Importance of funding

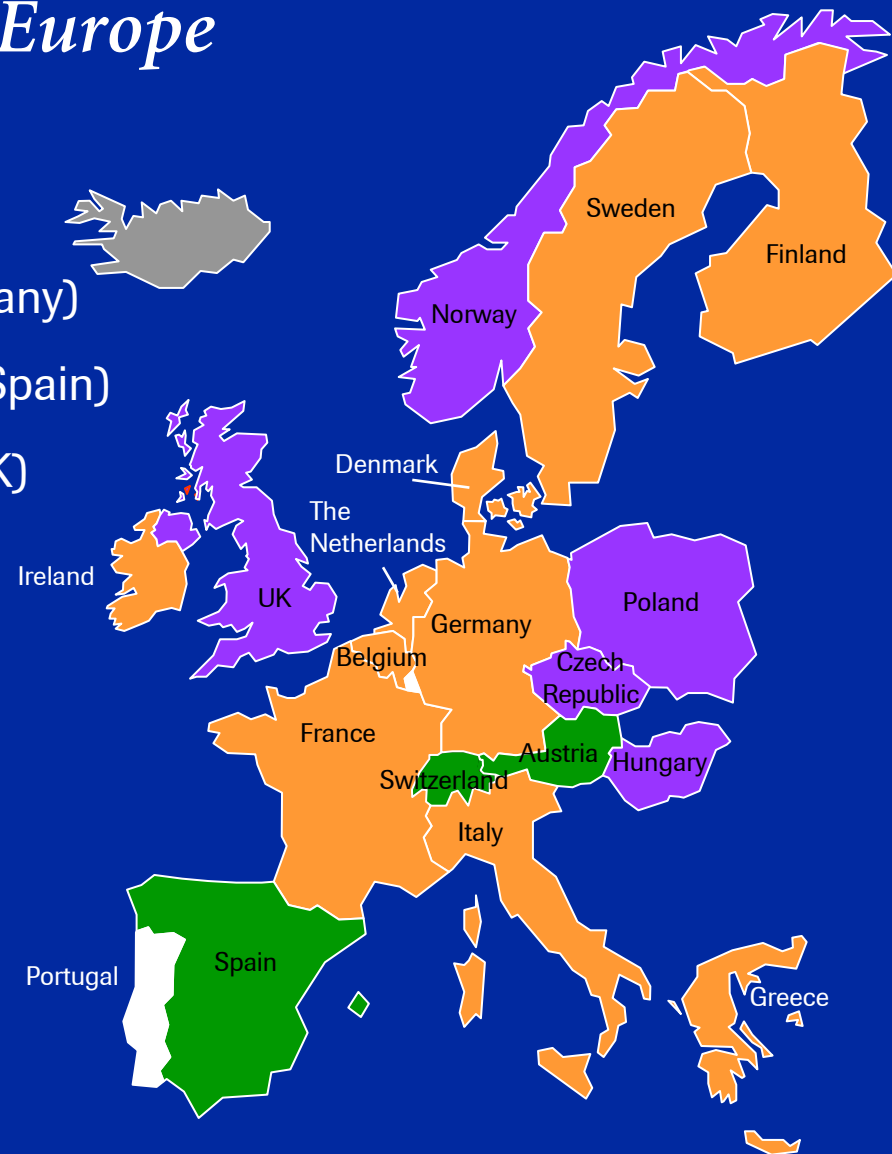
Diverse access to funds across Europe

Three tiers:

- Immediately following approval (e.g. Germany)
- Following price negotiations (e.g. France, Spain)
- Following standard review process (e.g. UK)

Summary uptake of new oncology products in breast and colorectal cancer, NSCLC, NHL, CML and bone metastases

- Above average
- Average
- Below average
- Data not available/analysed



Source: A pan European comparison regarding patient access to cancer, Karolinska Institute 2005

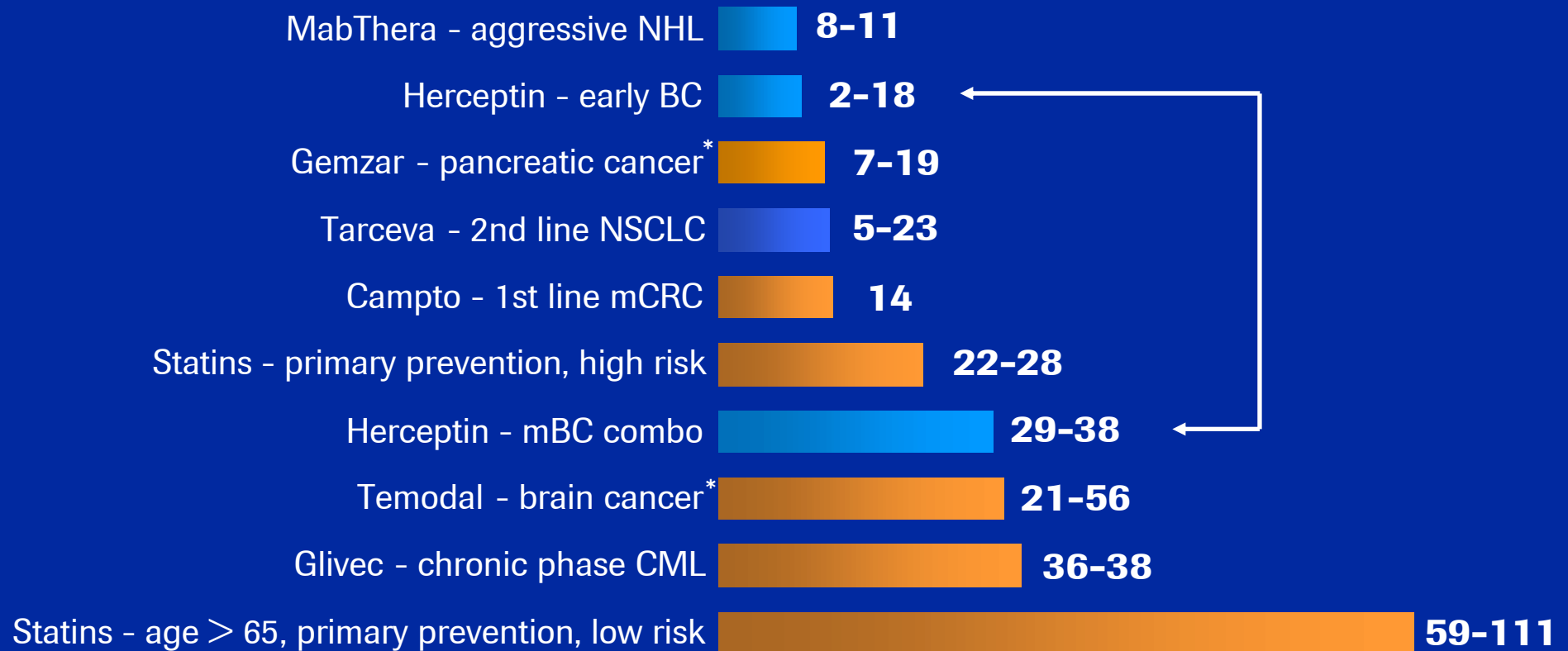


Many targeted therapies are cost-effective

Favorable comparison to other products

Cost per QALY for selected drugs (UK data – NICE/SMC)

Xeloda - mBC, adjuvant + mCRC **COST SAVINGS**



* per LYG

in 1,000 GBP