

Basel, 10 September 2008

Roche to present data showing progress in treating lung, gastric and brain cancers at ESMO

100+ abstracts on Roche medicines feature at this congress

More than 100 Roche abstracts have been accepted for the biggest cancer congress in Europe, the European Society for Medical Oncology (ESMO), which opens in Stockholm on Friday (12th September). The Roche abstracts include the latest data on Avastin (bevacizumab), Herceptin (trastuzumab), Tarceva (erlotinib), Xeloda (capecitabine) and the new breast cancer drug, pertuzumab, which is currently in phase III trials. Roche's pipeline drug IGF-1R, which is in early development, will also feature.

Key presentations include:

- Final results of the AVAiL study, which confirm the use of Avastin as first line treatment for the most common form of lung cancer, non-small cell lung cancer (NSCLC)
- Data on the use of oral chemotherapy drug Xeloda to treat advanced stomach cancer
- Analysis of the GBG26 study, a phase III trial conducted by the German Breast Group on continuation of Herceptin treatment after the cancer progresses (advanced breast cancer)
- Phase II data on the use of Avastin in treating glioblastoma, an aggressive form of brain cancer

AVAiL reported results previously that showed a significant improvement in progression-free survival (PFS) when Avastin was added to chemotherapy. The earlier US-based study, E4599, demonstrated a significant improvement in overall survival (OS) when Avastin was added to chemotherapy. The final analysis of the AVAiL study including an update on the primary endpoint of PFS and OS analysed as a secondary endpoint will be presented in the presidential session at ESMO on September 15th.

Two studies with oral Xeloda will confirm that it is superior to intravenous 5-FU in treating advanced stomach cancer, with patients living longer and with an improved quality of life.

Analysis of the GBG26 study, a phase III trial conducted by the German Breast Group, shows that continuation of Herceptin treatment can benefit women who need additional treatment after their cancer

progressed during initial Herceptin treatment. Data presented at ESMO add to the existing evidence that Herceptin extends survival throughout all stages of HER2-positive breast cancer and offers great hope to women with this aggressive disease.

The Avastin Phase II study of patients with recurrent, treatment-resistant glioblastoma show improvements in progression free survival and overall survival. The findings are significant as patients with this aggressive form of brain cancer have a very poor prognosis.

“The results of these studies will be welcome news for patients, their families, and the oncology community who currently have few options for treating debilitating cancers like stomach, lung and brain cancer. We will continue to invest in researching a wide range of cancers, including those where there is still a high unmet need or which may be obscure. The Avastin clinical trial program alone has more than 40,000 patients globally enrolled in trials investigating its use in 20 different tumour types”, said William M. Burns, CEO of Roche’s Pharmaceuticals Division.

In the last two decades there have been substantial improvements in cancer outcomes for many tumour types such as HER2-positive breast cancer and colorectal cancer, made possible through better screening, earlier diagnosis and innovative new drugs. Despite this progress, there remains a high unmet medical need for many other tumour types such as cancers of the liver, lung, stomach, pancreas, brain and throat.

Roche will present an update on their key data at a press briefing for journalists on Thursday 11th September at 14:00 at the Clarion Sign Hotel, Stockholm, Sweden. Journalists can register for the event by contacting acameron@galliardhealth.com

- Breast Cancer is the most common cancer among women worldwide.¹ Each year more than one million new cases of breast cancer are diagnosed worldwide, and nearly 400,000 people will die of the disease annually.² In HER2-positive breast cancer, increased quantities of the HER2 protein are present on the surface of the tumour cells. This is known as ‘HER2-positivity’. High levels of HER2 are present in a particularly aggressive form of the disease which responds poorly to chemotherapy. Research shows that HER2-positivity affects approximately 20-30 percent of women with breast cancer.³
- Glioma (cancer of the glial cells) is the most common type of primary brain tumour, accounting for over half of all cases diagnosed.⁴ Glioblastoma (or glioblastoma multiforme; GBM) is the most common and most aggressive type of glioma. All GBMs are advanced when diagnosed, and they can invade normal

brain tissue and spread from the original tumour location, but rarely to areas beyond the brain.⁴ About 78,000 people each year are diagnosed with GBM worldwide and approximately 75% of these individuals will die from their disease.⁵

- Lung Cancer, according to the World Health Organization (WHO), is the leading cause of cancer-related deaths in both men and women worldwide,⁶ with more than 1.3 million cases of the disease diagnosed each year.⁶ Each day, more than 3,000 people die from lung cancer worldwide.⁶ Lung cancer is the most common cause of death from cancer, claiming 334,800 lives in Europe in 2006 alone, and accounting for 19.7% of all deaths from cancer in this region.⁷
- Stomach Cancer is a particularly aggressive and debilitating type of cancer. It is the second leading cause of cancer deaths worldwide after lung cancer with an estimated 866,000 deaths worldwide each year,⁸ and nearly 140,000 deaths in Europe alone.⁹

About Roche

Headquartered in Basel, Switzerland, Roche is one of the world's leading research-focused healthcare groups in the fields of pharmaceuticals and diagnostics. As the world's biggest biotech company and an innovator of products and services for the early detection, prevention, diagnosis and treatment of diseases, the Group contributes on a broad range of fronts to improving people's health and quality of life. Roche is the world leader in in-vitro diagnostics and drugs for cancer and transplantation, and is a market leader in virology. It is also active in other major therapeutic areas such as autoimmune diseases, inflammatory and metabolic disorders and diseases of the central nervous system. In 2007 sales by the Pharmaceuticals Division totalled 36.8 billion Swiss francs, and the Diagnostics Division posted sales of 9.3 billion francs. Roche has R&D agreements and strategic alliances with numerous partners, including majority ownership interests in Genentech and Chugai, and invested over 8 billion Swiss francs in R&D in 2007. Worldwide, the Group employs about 80,000 people. Additional information is available on the Internet at www.roche.com.

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References:

1. World Health Organization, <http://www.who.int/cancer/detection/breastcancer/en/>
2. Ferlay J, et al., GLOBOCAN 2002. Cancer Incidence, Mortality and Prevalence Worldwide. IARC CancerBase No.5, Version 2.0. IARC Press, Lyon, 2004. 2004
3. Harries M, Smith I. The development and clinical use of trastuzumab (Herceptin). *Endocr Relat Cancer* 9: 75-85, 2002
4. Cancer research UK 2007 brain tumours <http://www.cancerhelp.org.uk/help/default.asp?page=5014>
5. GLOBOCAN 2002 stats: <http://www-dep.iarc.fr/>
6. Kamangar F, et al. Patterns of cancer incidence, mortality, and prevalence across five continents: defining priorities to reduce cancer disparities in different geographic regions of the world. *J Clin Oncol*, 2006; 24: 2137-50.
7. Ferlay J, et al. Estimates of the cancer incidence and mortality in Europe in 2006. *Ann Oncol*, 2007; 18: 581-92.
8. <http://www.who.int/mediacentre/factsheets/fs297/en/index.html> Accessed July 2008
9. Boyle, P & Ferlay, J. Cancer incidence and mortality in Europe 2004. *Annals of Oncology* 2005; 16(3):481-4883

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