

Roche

Positioning AVASTIN-based therapy as essential to treat cancer

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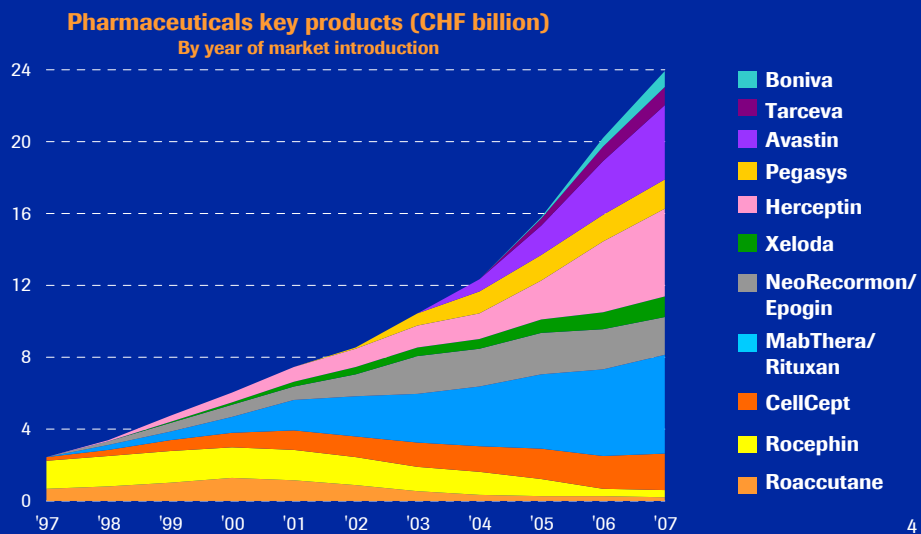
Introduction

Update on Avastin

Summary

Differentiated and rejuvenated product portfolio

From 1 to 9 products with sales around or above CHF 1 billion



Our oncology strategy: Move the standards of care

New tumor types, new combinations, new lines of intervention



Clinically differentiated product

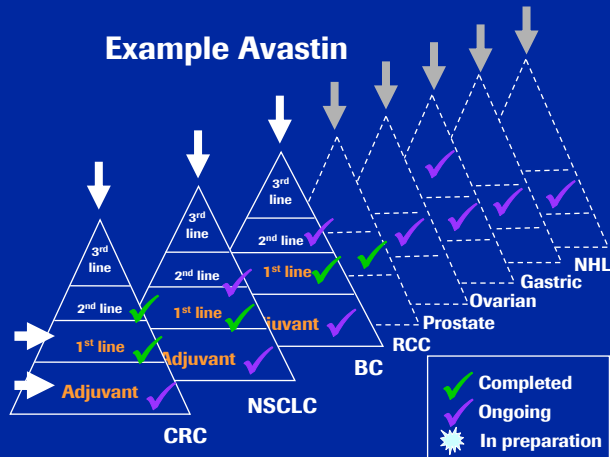
target all tumor types

target all important combinations

target earlier (adjuvant) intervention

Superior outcome for patients

Example Avastin



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Introduction

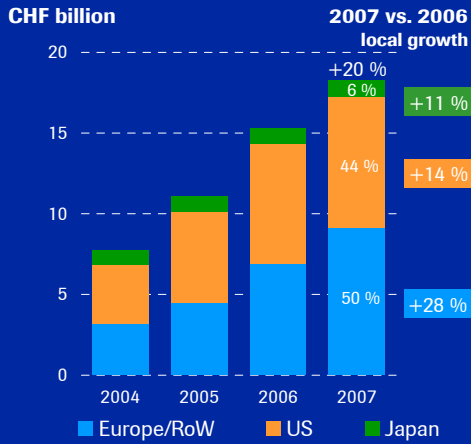
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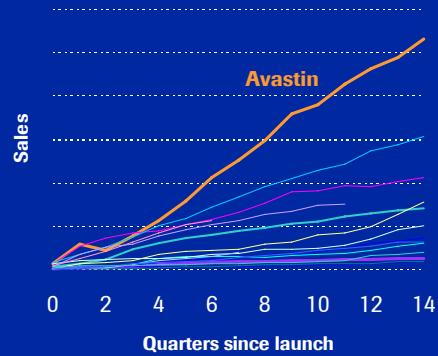


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Roche Oncology: Strongest growing franchise Avastin: Best growing oncology brand ever



Avastin launch compared to other cancer therapies (US plus top-5 EU markets¹)

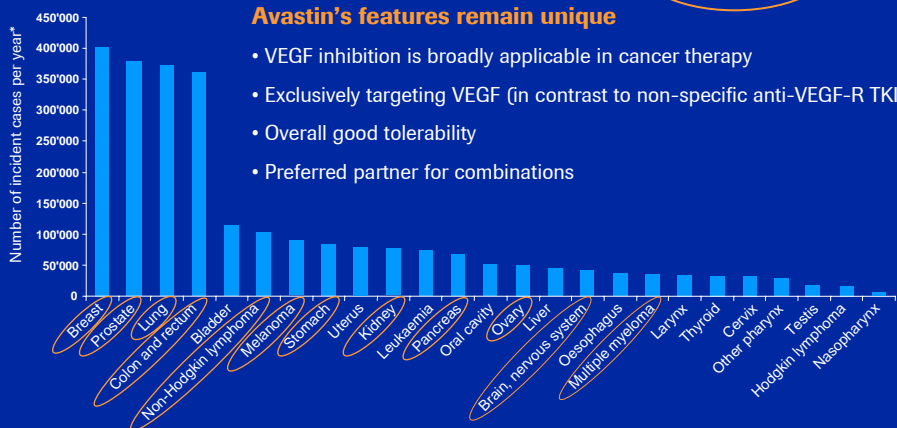


¹Source: IMS. Products included are Avastin, Alimta, Arimidex, Camptosar, Eloxatine, Erbitux, Femara, Gemzar, Herceptin, MabThera, Nexavar, Sutent, Tarceva, Taxol, Taxotere, Xeloda

Avastin Backbone of cancer therapy



Major cancers tested with Avastin



*in USA plus top 5 EU countries

Avastin still early in its journey

Realising full potential across tumour types



Tumour	Early/adjvant (Potential for cure)	Advanced/metastatic (Extending life)	
		1 st -line of treatment	2 nd -line of treatment
Colon/ rectal	Phase III (AVANT, NSABP C-08, E5202, E5204)	✓ Launched [EU, US, JP; broad label in 1st and subsequent lines]	
Lung (NSCLC)	Phase III (E1505)	✓ Launched [EU majority of chemos, US carboplatin/paclitaxel]	Phase III (BETA Lung w/Tarceva)
Breast (HER2-)	Phase III (BEATRICE, E5103)	✓ Launched [EU paclitaxel] Phase III (AVADO, RIBBON-1)	Phase III (RIBBON-2, incl. w/Xeloda)
Breast (HER2+)	Phase III (BETH w/Herceptin)	Phase III (AVEREL w/Herceptin)	-
Kidney (RCC)	-	✓ Launched [EU; with interferon]	

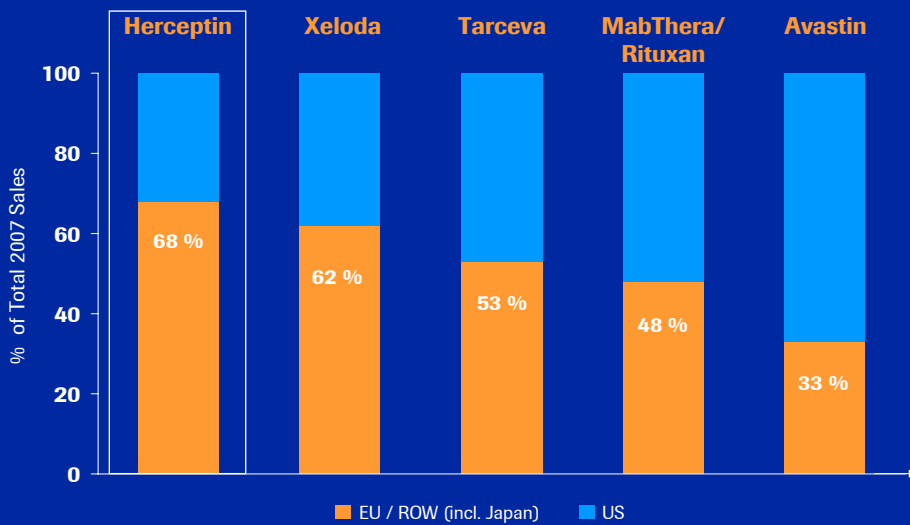
Avastin also trialed in gastric, ovarian, prostate, aNHL, and brain (GBM)

(Trial names) [Approval status]. More trials are ongoing than listed above.

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Major growth opportunities outside the US

Herceptin leading the way

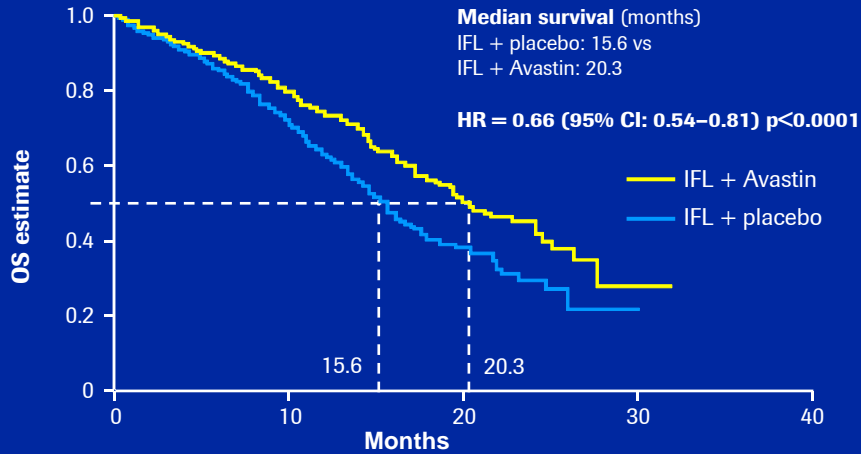


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Avastin in 1st line mCRC



Largest improvement in overall survival in phase III



CI = confidence interval; IFL irinotecan, bolus 5-FU/FA
 H. Hurwitz, et al. *NEJM* 2004;350:2335-42

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Avastin in 1st-line mCRC



Consistently delivers the best PFS outcome

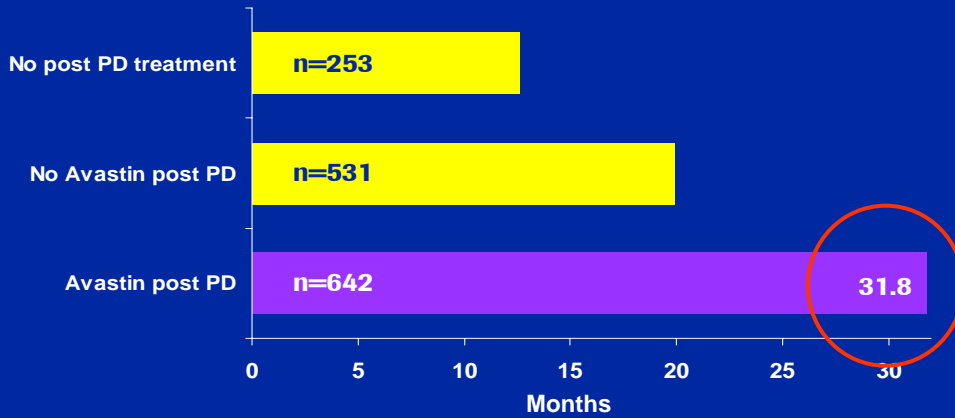


Avastin: The only biologic agent with OS benefit in 1st-line mCRC
Adds benefit to all chemotherapies

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BRiTE: post 1st progression therapy

Avastin beyond progression: potential to increase survival



Superior survival in patients continuing Avastin beyond progression demonstrated in a multivariate analysis (HR=0.53, p < 0.001)

A. Grothey et al. ASCO 2007

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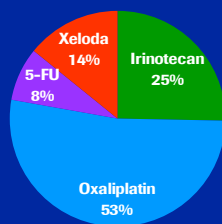
Expanding the market for Avastin and Xeloda in mCRC

Avastin to be combined with any chemo in any line of treatment



Avastin

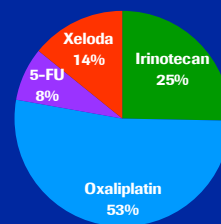
Current EU label:
5-FU or 5-FU + Irinotecan



New EU label:
Any fluoropyrimidine combination



Xeloda



New EU label:
Any combo, including with Avastin



Source: Synovate Healthcare 2005

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Avastin in mCRC

Conclusions

Four randomized trials show compelling efficacy

- AVF2107g
- E3200
- AVF2192
- NO16966

Aiming for cure

- High rates of surgeries with curative intent shown in BEAT and NO16966
- Resection rates for 'liver mets only' patients in NO16966: 19.2% in Avastin arm (vs 12.9%)
- Secondary resection as a concept is promising, but requires further investigation

Incidence: 155,000 cases^{1,2)}

¹⁾ US and top 5 EU, ²⁾ stage IV

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Avastin in adjuvant colon cancer

Key phase III trials fully recruited

NSABP C-08

AVANT

Treatment regimen	FOLFOX-6 ± Avastin	FOLFOX-4 ± Avastin XELOX + Avastin
Number of patients	2,700	3,450
Recruitment duration	Q3 2004 until Q4 2006	Q4 2004 until Q2 2007
Efficacy analysis	First interim look: Q2 2007 Subsequently every 6 months Next interim look: Q2 2008	Event-driven analysis
Filing	2010 (or earlier)	2010 (or earlier)

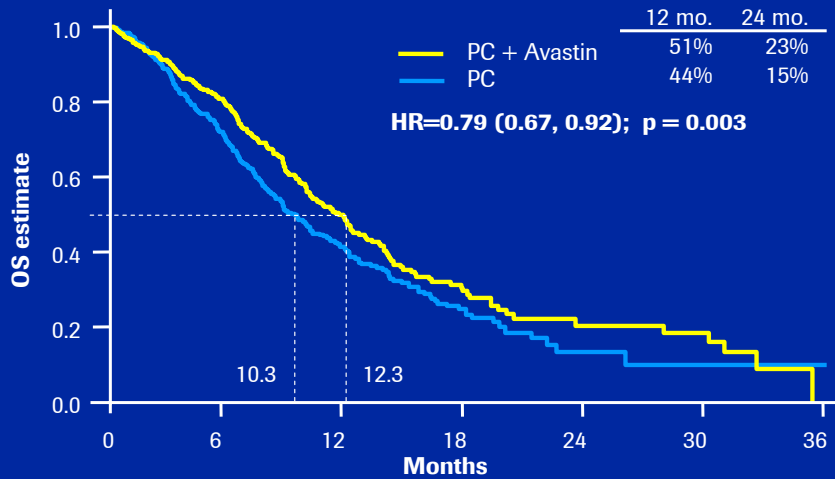
Incidence: 150,000 cases^{1,2)}

¹⁾ US and top 5 EU; ²⁾ stage II high risk, and stage III

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Avastin in 1st line NSCLC (E4599)

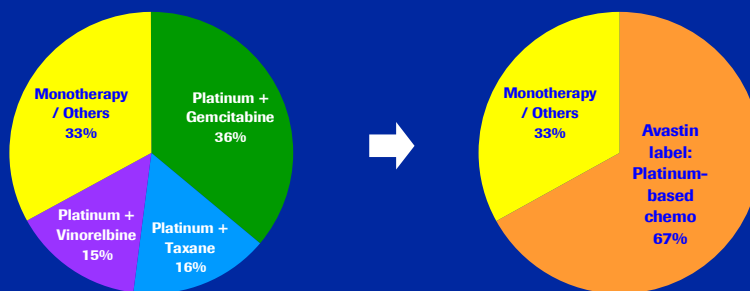
First drug in a decade to show an overall survival benefit



A. Sandler, et al. NEJM 2006 PC= paclitaxel/carboplatin

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Avastin launching with best-possible label in 1st-line NSCLC market in Europe¹



Avastin in combo with all current standards (platinum)

Source: Synovate Healthcare, MAT Q3 2007; ¹ in non-squamous NSCLC

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Avastin in 1st line NSCLC



Conclusions

- First front-line treatment to demonstrate extended survival in over a decade
- Efficacy demonstrated in two randomized phase III trials (E4599 and AVAiL)
- Generally well tolerated
- Approved in US and approved in EU with a broad label
 - in combination with any platinum-based chemotherapy regimens
 - at least 50% of NSCLC population covered

Incidence: 275,000 cases ^{1, 2)}

¹⁾ US and top 5 EU, ²⁾ stage IIIb and IV

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Avastin in adjuvant lung cancer



High unmet medical need

- Phase III E1505
 - Stage IB to IIIA adjuvant squamous and non-squamous NSCLC
 - 1500 patients
 - Started Q3 2007
 - Chemotherapy +/- Avastin (15 mg/kg q3 weeks)
 - Limited therapeutic options currently available

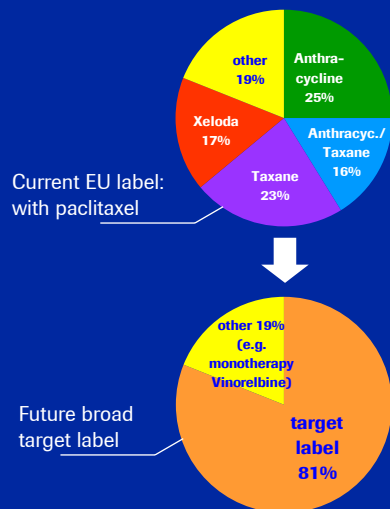
Incidence: 135,000 cases ¹⁾

¹⁾ US and top 5 EU

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Establishing Avastin in metastatic breast cancer

Strong commitment



Source: Genactis MBC study Q4 2005

US submission for 1st line mBC

- ODAC split vote Dec 5, 2007
- FDA action date Feb 23, 2008

Further phase III studies im mBC to report in 2008

- AVADO (docetaxel +/- Avastin): primary objective met Feb 2008
- RIBBON-1 (var. chemos +/- Avastin): data expected in H2 2008

Incidence: 100,000 cases ^{1,2)}

¹⁾ US and top 5 EU, ²⁾ stage IV, HER2-pos. and neg.

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Avastin in adjuvant breast cancer

Large opportunity – major phase III trials started

	Phase II E2104	Phase III E 5103	Phase III BEATRICE	Phase III BETH
Patient population	HER2-negative	HER2-negative	HER2-, ER-, PR-negative	HER2-positive
Number of patients	226	4950	2530	~3600
Design	Anthracyclines + Avastin followed by paclitaxel + Avastin (2 arms)	AC +/- Avastin followed by paclitaxel +/- Avastin (3 arms)	Antracycline or taxane-based chemos +/- Avastin	Chemo + Herceptin +/- Avastin
Primary endpoint	safety	Disease-free survival	Disease-free survival	Disease-free survival
Status	Initial safety results presented at SABCS 2007	FPI Q4 2007	FPI Q4 2007	Expect FPI H1 2008

Incidence: 320,000 cases ¹⁾

¹⁾ US and top 5 EU

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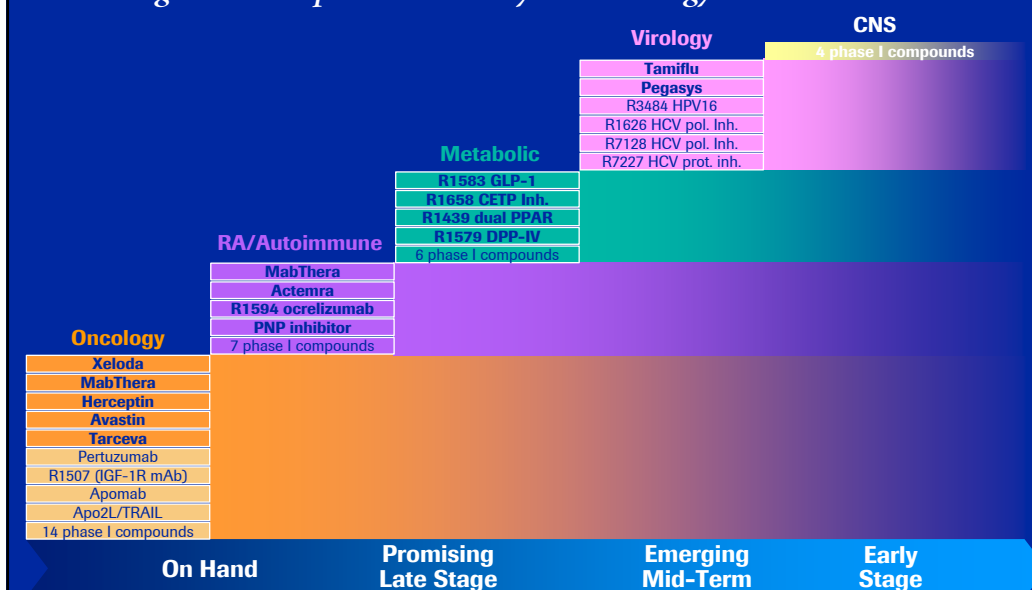
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Roche key therapeutic areas

Entering new therapeutic areas beyond oncology



Roche: A unique investment case



- **Clear and focused strategy**
 - Medically-differentiated products; poised to become leader in Personalized Healthcare
- **Attractive risk profile**
 - Low generic risk; lowest among European large-cap players
 - 42 phase III projects; many additional indications
- **Assets in place for sustained success**
 - World market leader in Oncology
 - Emerging Rheumatology & Autoimmune franchises
 - Promising phase II pipeline in Diabetes, Metabolism; early-stage compounds in CNS and Virology
- **Industry-leading organic growth & value creation**
 - 2007: Sales +10 %, Core EPS +20%

Unique high-tech healthcare investment

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Our objectives for 2008



Sales

- High single-digit local currency sales increase for Roche Group (excl. Tamiflu pandemic¹)
- Above-market sales growth¹ in both divisions

Core EPS

- Core earnings per share target² at least at record 2007 level despite significant increase in R&D investment and considerably lower Tamiflu pandemic sales

Shareholder return

- Continuous increase in dividend pay-out ratio over the next 3 years

¹ Excluding government and corporate stockpiling orders of Tamiflu for pandemic use
² At constant exchange rates

Barring unforeseen events

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