

Amgen To Highlight New Data For Investigational Cholesterol-Lowering Medication Evolocumab

November 12, 2014

Thirteen Presentations Include New Analyses of PCSK9 Inhibitor at Upcoming American Heart Association Scientific Sessions

THOUSAND OAKS, Calif., Nov. 12, 2014 /PRNewswire/ -- Amgen (NASDAQ:AMGN) today announced that it will present 13 abstracts at the upcoming American Heart Association (AHA) Scientific Sessions 2014 being held Nov. 15-19 in Chicago, including data from studies evaluating evolocumab, an investigational fully human monoclonal antibody that inhibits proprotein convertase subtilisin/kexin type 9 (PCSK9), a protein that reduces the liver's ability to remove low-density lipoprotein cholesterol (LDL-C), or "bad" cholesterol, from the blood.¹

"We will be sharing diverse data exploring the potential clinical utility of evolocumab at this year's AHA Scientific Sessions, including multiple new analyses that examine longer-term treatment with evolocumab, the effect on different lipid parameters and the efficacy of two dosing regimens," said Sean E. Harper, M.D., executive vice president of Research and Development at Amgen. "The medical community is keenly aware of the significant unmet need for many patients with high cholesterol, and we are continuing to work with regulatory agencies on the global filing packages we have submitted, including in the U.S. and EU."

Several of the abstracts are from the large and comprehensive evolocumab clinical trial program, PROFICIO (Program to Reduce LDL-C and Cardiovascular Qutcomes Following Inhibition of PQSK9 In Different PQpulations).

Data to be presented at the AHA Scientific Sessions 2014 include:

Clinical Development

- Long-Term Reduction in Lipoprotein (a) With the PCSK9 Monoclonal Antibody Evolocumab (AMG 145): A Pooled Analysis of 3278 Patients in Phase 2, 3, and Open Label Extension Studies
 Abstract 15743, Abstract Poster Session, Monday, Nov. 17, 9:30-11 a.m. CST (South Hall A2 – Core 2)
- Evaluation of the Relationship Between Evolocumab 140 mg Every Two Weeks and 420 mg Monthly Dosing Regimens

Abstract 16270, Abstract Poster Session, Monday, Nov. 17, 9:30-11 a.m. CST (South Hall A2 - Core 2)

- Effects of Evolocumab Treatment on Serum Adrenal and Gonadal Hormone Levels: Results from the 52-week, Phase 3, Double-blind, Randomized, Placebo-controlled DESCARTES Study
 Abstract 17005, Abstract Poster Session, Monday, Nov. 17, 9:30-11 a.m. CST (South Hall A2 – Core 2)
- Trial Assessing Long-Term Use of PCSK9 Inhibition in Patients with Genetic LDL Disorders (TAUSSIG): Efficacy and Safety in Patients with Homozygous Familial Hypercholesterolemia Receiving Lipid Apheresis
 Abstract 17016, Abstract Poster Session, Tuesday, Nov. 18, 9:30-11 a.m. CST (South Hall A2 – Core 2)
- The Diagnosis of Heterozygous Familial Hypercholesterolemia: Genotype versus Phenotype
 Abstract 17368, Abstract Poster Session, Tuesday, Nov. 18, 9:30-11 a.m. CST (South Hall A2 Core 2)
- Impact of Baseline PCSK9 Levels on the Efficacy of Evolocumab, a Monoclonal Antibody Against PCSK9
 Abstract 16196, Abstract Poster Session, Tuesday, Nov. 18, 3-4:30 p.m. CST (South Hall A2 Core 2)
- Safety and Tolerability of Very Low LDL-C Levels in Patients Treated with 52 Weeks of Evolocumab (AMG 145)
 Abstract 16865, Abstract Poster Session, Tuesday, Nov. 18, 3-4:30 p.m. CST (South Hall A2 Core 2)

Early Development

- Statin-Induced Myopathy is Mediated by Isoprenoid Depletion and is Independent of Serum Cholesterol Levels Abstract 13907, Abstract Poster Session, Sunday, Nov. 16, 9:30-11 a.m. CST (South Hall A2 Core 2)
- Effects of Evolocumab (AMG 145) as a Monotherapy or in Combination with Statins on Lipoprotein Particles and Subclasses

Abstract 16955, Abstract Poster Session, Wednesday, Nov. 19, 9:30-11 a.m. CST (South Hall A2 - Core 7)

Sponsored Research

PCSK9 is Elevated in HIV+ Patients
 Abstract 17751, Abstract Oral Session, Saturday, Nov. 15, 2:15-2:25 p.m. CST (Room S406A)

Observational Research

 Statin Prescription and Dose Intensity Among Elderly Medicare Beneficiaries, by CV Disease Diagnosis and Prescriber Specialty

Abstract 15677, Abstract Poster Session, Monday, Nov. 17, 9:30-11 a.m. CST (South Hall A2 - Core 2)

• Low Density Lipoprotein Cholesterol Response and Statin Persistence among Patients with High Coronary Heart Disease Risk Initiating Treatment

Abstract 18986, Abstract Poster Session, Monday, Nov. 17, 9:30-11 a.m. CST (South Hall A2 - Core 2)

Health Economics

 Work Absenteeism, Short Term Disability and Related Indirect Costs Associated with Cardiovascular Events and Related Clinical Procedures

Abstract 13352, Abstract Poster Session, Sunday, Nov. 16, 9:30-11 a.m. CST (South Hall A2 - Core 2)

About Evolocumab

Evolocumab is a fully human monoclonal antibody that inhibits proprotein convertase subtilisin/kexin type 9 (PCSK9). PCSK9 is a protein that targets LDL receptors for degradation and thereby reduces the liver's ability to remove LDL-C, or "bad" cholesterol, from the blood. Evolocumab, being developed by Amgen scientists, is designed to bind to PCSK9 and inhibit PCSK9 from binding to LDL receptors on the liver surface. In the absence of PCSK9, there are more LDL receptors on the surface of the liver to remove LDL-C from the blood.

About PROFICIO: The Evolocumab Clinical Trial Program

PROFICIO, which stands for the Program to Reduce LDL-C and Cardiovascular Qutcomes Eollowing Inhibition of PQSK9 In Different PQpulations, is a large and comprehensive clinical trial program evaluating evolocumab in 22 clinical trials, with a combined planned enrollment of approximately 35,000 patients.

The Phase 3 program includes 16 trials to evaluate evolocumab administered every two weeks and monthly in multiple patient populations, including in combination with statins in patients with hyperlipidemia (LAPLACE-2 and YUKAWA-2); in patients with hyperlipidemia who cannot tolerate statins (GAUSS-2 and GAUSS-3); as a stand-alone treatment in patients with hyperlipidemia (MENDEL-2); in patients whose elevated cholesterol is caused by genetic disorders called heterozygous (RUTHERFORD-2 and TAUSSIG) and homozygous (TESLA and TAUSSIG) familial hypercholesterolemia; the effects of evolocumab on lipoprotein metabolism (FLOREY); and the administration of evolocumab in statin-treated hyperlipidemic patients (THOMAS-1 and THOMAS-2).

Five ongoing studies in the evolocumab Phase 3 program will provide long-term safety and efficacy data. These include FOURIER (Eurther Cardiovascular <u>OU</u>tcomes <u>Research</u> with PCSK9 Inhibition in Subjects with <u>Elevated Risk</u>), which will assess whether treatment with evolocumab in combination with statin therapy compared to placebo and statin therapy reduces recurrent cardiovascular events in approximately 27,500 patients with cardiovascular disease; EBBINGHAUS (Evaluating PCSK9 Binding AntiBody Influence on Cognitive HeAlth in High Cardiovascular Risk Subjects), which will evaluate the effect of evolocumab on cognitive function in a subset of patients enrolled in FOURIER; OSLER-2 (Qpen Label Study of Long TERm Evaluation Against LDL-C Trial-2) in patients with high cholesterol who completed any of the Phase 3 studies; GLAGOV (<u>GL</u>obal Assessment of Plaque ReGression with a PCSK9 AntibQdy as Measured by IntraVascular Ultrasound), which will determine the effect of evolocumab on coronary atherosclerosis in approximately 950 patients undergoing cardiac catheterization; and TAUSSIG (Trial Assessing Long Term <u>US</u>e of PCSK9 Inhibition in Subjects with Genetic LDL Disorders), which will assess the long-term safety and efficacy of evolocumab on LDL-C in patients with severe familial hypercholesterolemia including patients with homozygous familial hypercholesterolemia. The DESCARTES (Durable Effect of PCSK9 Antibody CompARed wiTh PlacEbo Study) study, a long-term safety and efficacy trial in patients with hyperlipidemia at risk for cardiovascular disease, has been completed, presented and published.

About Amgen's Commitment to Cardiovascular Disease

Amgen is dedicated to addressing important scientific questions in order to advance care and improve the lives of patients with cardiovascular disease. Through its own research and development efforts and innovative partnerships, Amgen has built a robust cardiology pipeline consisting of several investigational molecules in an effort to address a number of today's important unmet patient needs, such as high cholesterol and heart failure.

About Amgen

Amgen is committed to unlocking the potential of biology for patients suffering from serious illnesses by discovering, developing, manufacturing and delivering innovative human therapeutics. This approach begins by using tools like advanced human genetics to unravel the complexities of disease and understand the fundamentals of human biology.

Amgen focuses on areas of high unmet medical need and leverages its biologics manufacturing expertise to strive for solutions that improve health outcomes and dramatically improve people's lives. A biotechnology pioneer since 1980, Amgen has grown to be the world's largest independent biotechnology company, has reached millions of patients around the world and is developing a pipeline of medicines with breakaway potential.

For more information, visit www.amgen.com and follow us on www.twitter.com/amgen.

Forward-Looking Statements

This news release contains forward-looking statements that are based on management's current expectations and beliefs and are subject to a number of risks, uncertainties and assumptions that could cause actual results to differ materially from those described. All statements, other than statements of historical fact, are statements that could be deemed forward-looking statements, including estimates of revenues, operating margins, capital expenditures, cash, other financial metrics, expected legal, arbitration, political, regulatory or clinical results or practices, customer and prescriber patterns or practices, reimbursement activities and outcomes and other such estimates and results. Forward-looking statements involve significant risks and uncertainties, including those discussed below and more fully described in the Securities and Exchange Commission (SEC) reports filed by Amgen, including Amgen's most recent annual report on Form 10-K and any subsequent periodic reports on Form 10-Q and Form 8-K. Please refer to

Amgen's most recent Forms 10-K, 10-Q and 8-K for additional information on the uncertainties and risk factors related to our business. Unless otherwise noted, Amgen is providing this information as of Nov. 12, 2014, and expressly disclaims any duty to update information contained in this news release.

No forward-looking statement can be guaranteed and actual results may differ materially from those we project. Discovery or identification of new product candidates or development of new indications for existing products cannot be guaranteed and movement from concept to product is uncertain; consequently, there can be no guarantee that any particular product candidate or development of a new indication for an existing product will be successful and become a commercial product. Further, preclinical results do not guarantee safe and effective performance of product candidates in humans. The complexity of the human body cannot be perfectly, or sometimes, even adequately modeled by computer or cell culture systems or animal models. The length of time that it takes for us to complete clinical trials and obtain regulatory approval for product marketing has in the past varied and we expect similar variability in the future. We develop product candidates internally and through licensing collaborations, partnerships and joint ventures. Product candidates that are derived from relationships may be subject to disputes between the parties or may prove to be not as effective or as safe as we may have believed at the time of entering into such relationship. Also, we or others could identify safety, side effects or manufacturing problems with our products after they are on the market. Our business may be impacted by government investigations, litigation and products liability claims. We depend on third parties for a significant portion of our manufacturing capacity for the supply of certain of our current and future products and limits on supply may constrain sales of certain of our current products and product candidate development.

In addition, sales of our products are affected by the reimbursement policies imposed by third-party payors, including governments, private insurance plans and managed care providers and may be affected by regulatory, clinical and guideline developments and domestic and international trends toward managed care and healthcare cost containment as well as U.S. legislation affecting pharmaceutical pricing and reimbursement. Government and others' regulations and reimbursement policies may affect the development, usage and pricing of our products. In addition, we compete with other companies with respect to some of our marketed products as well as for the discovery and development of new products. We believe that some of our newer products, product candidates or new indications for existing products, may face competition when and as they are approved and marketed. Our products may compete against products that have lower prices, established reimbursement, superior performance, are easier to administer, or that are otherwise competitive with our products. In addition, while we routinely obtain patents for our products and technology, the protection offered by our patents and patent applications may be challenged, invalidated or circumvented by our competitors and there can be no guarantee of our ability to obtain or maintain patent protection for our products or product candidates. We cannot guarantee that we will be able to produce commercially successful products or maintain the commercial success of our existing products. Our stock price may be affected by actual or perceived market opportunity, competitive position, and success or failure of our products or product candidates. Further, the discovery of significant problems with a product similar to one of our products that implicate an entire class of products could have a material adverse effect on sales of the affected products and on our business and results of operations. Our efforts to integrate the operations of companies we have acquired may not be successful. Cost saving initiatives may result in us incurring impairment or other related charges on our assets. We may experience difficulties, delays or unexpected costs and not achieve anticipated benefits and savings from our recently announced restructuring plans. Our business performance could affect or limit the ability of our Board of Directors to declare a dividend or their ability to pay a dividend or repurchase our common stock.

The scientific information discussed in this news release related to our product candidates is preliminary and investigative. Such product candidates are not approved by the U.S. Food and Drug Administration (FDA), and no conclusions can or should be drawn regarding the safety or effectiveness of the product candidates.

CONTACT: Amgen, Thousand Oaks Kristen Davis: 805-447-3008 (media) Trish Hawkins: 805-447-5631 (media) Arvind Sood: 805-447-1060 (investors)

References

- 1. Amgen Data on File, Investigator Brochure.
- 2. Abifadel M, Varret M, Rabes JP, et al. Mutations in PCSK9 Cause Autosomal Dominant Hypercholesterolemia. Nat Genet. 2003;34:154-156.



Logo - http://photos.prnewswire.com/prnh/20081015/AMGENLOGO

SOURCE Amgen