



Amgen Receives Positive CHMP Opinion To Expand Use Of Nplate® (romiplostim) In Pediatric Patients With Chronic Immune Thrombocytopenic Purpura

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Positive Opinion Based on Five Studies Demonstrating Nplate Reduces Rates of Bleeding in Children With Rare Blood Disorder

THOUSAND OAKS, Calif., Nov. 10, 2017 /PRNewswire/ -- Amgen (NASDAQ:AMGN) today announced that the Committee for Medicinal Products for Human Use (CHMP) of the European Medicines Agency (EMA) has adopted a positive opinion to expand the current indication for Nplate® (romiplostim) to include the treatment of chronic immune (idiopathic) thrombocytopenic purpura (ITP) for patients one year of age and older who are refractory to other treatments (e.g., corticosteroids, immunoglobulins).

The positive CHMP opinion was based on five studies evaluating the safety and efficacy of Nplate in children with ITP, including four completed studies (a Phase 3, a Phase 1/2 placebo-controlled study, and two long-term safety and efficacy studies) and one ongoing long-term safety and efficacy study.

"Children with ITP are at risk for serious bleeding events due to low platelet counts, and currently, limited therapeutic options are available to treat this rare disease," said Sean E. Harper, M.D., executive vice president of Research and Development at Amgen. "We are pleased by today's positive CHMP opinion and look forward to working with European regulatory authorities to deliver on our commitment to bring Nplate to pediatric patients with ITP who are suffering from thrombocytopenia."

ITP is a rare, serious autoimmune disease characterized by low platelet counts in the blood (a condition known as thrombocytopenia) and impaired platelet production.^{1,2} European studies report incidence rates in children between four and five cases per 100,000 children each year.³ The treatment goal for children with ITP is to promote a platelet count that maintains appropriate control of bleeding, improve symptoms and increase the number of platelets.^{1,4}

The CHMP positive opinion will now be reviewed by the European Commission (EC), which has the authority to approve medicines for the European Union (EU). If approved, a centralized marketing authorization will be granted that will be valid in the 28 countries that are members of the EU. Norway, Iceland and Liechtenstein, as members of the European Economic Area (EEA), will take corresponding decisions on the basis of the decision of the EC.

About Nplate® (romiplostim)

Nplate is a thrombopoietin (TPO) receptor agonist indicated for the treatment of low blood platelet counts in adults with chronic ITP, who had an insufficient response to other medicines or surgery. Nplate mimics the body's natural thrombopoietin and is designed to increase platelet counts in patients with chronic ITP.⁵

Nplate is the first U.S. Food and Drug Administration (FDA)-approved treatment specifically for adult chronic ITP.

In the U.S., Nplate is indicated for the treatment of thrombocytopenia in patients with chronic ITP who have had an insufficient response to corticosteroids, immunoglobulins or splenectomy. Nplate is not indicated for the treatment of thrombocytopenia due to myelodysplastic syndrome (MDS) or any cause of thrombocytopenia other than chronic ITP. Nplate should be used only in patients with ITP whose degree of thrombocytopenia and clinical condition increase the risk for bleeding. Nplate should not be used in an attempt to normalize platelet counts.

In the EU, Nplate is indicated for the treatment of adult chronic ITP patients who are refractory to other treatments (e.g., corticosteroids, immunoglobulins).

Nplate was named as a recipient of the U.S. Prix Galien 2009 "Best Biotechnology Product" award and also received the 2009 Scrip Awards for "Best New Drug." Nplate has also been honored with numerous awards throughout the EU, including a 2010 Prix Galien in France in the category of "Drugs for Rare Diseases," and the 2011 Prix Galien in Germany in the category of "Specialist Care." In September 2010, Nplate was awarded the 2010 International Prix Galien Award, an award granted every two years which recognizes the "Best of the Best" selected from previous national Prix Galien award recipients.

Nplate is also approved in Canada, Australia, Russia, Mexico, Switzerland, Lichtenstein, Japan, Argentina, Israel, South Korea, Hong Kong, Chile, Serbia, Kazakhstan, Malaysia, Singapore, Colombia, Kuwait, Taiwan, South Africa, Brazil, Guatemala, Morocco, Ecuador, Macau, Egypt, Lebanon, Peru and Venezuela. Nplate has received orphan designation for chronic ITP in the U.S. (2003), the EU (2005), Switzerland (2005), Japan (2006), Mexico and South Korea (2010).

For more information about Nplate, please visit www.Nplate.com.

Important U.S. Nplate® Safety Information

Risk of Progression of Myelodysplastic Syndromes to Acute Myelogenous Leukemia

- In Nplate® clinical trials of patients with myelodysplastic syndromes (MDS) and severe thrombocytopenia, progression from MDS to acute myelogenous leukemia (AML) has been observed.
- Nplate® is not indicated for the treatment of thrombocytopenia due to MDS or any cause of thrombocytopenia other than chronic ITP.

Thrombotic/Thromboembolic Complications

- Thrombotic/thromboembolic complications may result from increases in platelet counts with Nplate[®] use. Portal vein thrombosis has been reported in patients with chronic liver disease receiving Nplate[®].
- To minimize the risk for thrombotic/thromboembolic complications, do not use Nplate[®] in an attempt to normalize platelet counts. Follow the dose adjustment guidelines to achieve and maintain a platelet count of $\geq 50 \times 10^9/L$.

Loss of Response to Nplate[®]

- Hyporesponsiveness or failure to maintain a platelet response with Nplate[®] should prompt a search for causative factors, including neutralizing antibodies to Nplate[®].
- To detect antibody formation, submit blood samples to Amgen (1-800-772-6436). Amgen will assay these samples for antibodies to Nplate[®] and thrombopoietin (TPO).
- Discontinue Nplate[®] if the platelet count does not increase to a level sufficient to avoid clinically important bleeding after 4 weeks at the highest weekly dose of 10 mcg/kg.

Laboratory Monitoring

- Obtain CBCs, including platelet counts, weekly during the dose adjustment phase of Nplate[®] therapy and then monthly following establishment of a stable Nplate[®] dose.
- Obtain CBCs, including platelet counts, weekly for at least two weeks following discontinuation of Nplate[®].

Adverse Reactions

- In the placebo-controlled trials, headache was the most commonly reported adverse drug reaction, occurring in 35% of patients receiving Nplate[®] and 32% of patients receiving placebo. Headaches were usually of mild or moderate severity.
- Most common adverse reactions ($\geq 5\%$ higher patient incidence in Nplate[®] versus placebo) were Arthralgia (26%, 20%), Dizziness (17%, 0%), Insomnia (16%, 7%), Myalgia (14%, 2%), Pain in Extremity (13%, 5%), Abdominal Pain (11%, 0%), Shoulder Pain (8%, 0%), Dyspepsia (7%, 0%), and Paresthesia (6%, 0%).
- Nplate[®] administration may increase the risk for development or progression of reticulin fiber formation within the bone marrow. This formation may improve upon discontinuation of Nplate[®]. In a clinical trial, one patient with ITP and hemolytic anemia developed marrow fibrosis with collagen during Nplate[®] therapy.
- Women who become pregnant during Nplate[®] treatment are encouraged to enroll in Amgen's Pregnancy Surveillance Program. Patients or their physicians should call 1-800-77-AMGEN (1-800-772-6436) to enroll.

Please see full U.S. Prescribing Information and Medication Guide at www.Nplate.com.

Important EU Nplate[®] Safety Information

The EU Summary of Product Characteristics for Nplate[®] lists the following Special Warnings and Precautions: reoccurrence of thrombocytopenia and bleeding after cessation of treatment, increased bone marrow reticulin, thrombotic/thromboembolic complications, progression of existing myelodysplastic syndromes (MDS), medication errors, loss of response to Nplate, and effects on red and white blood cells.

The most common adverse reactions observed include hypersensitivity reactions (including cases of rash, urticaria and angioedema) and headache. As with all therapeutic proteins, there is a potential for immunogenicity.

Please refer to the Summary of Product Characteristics for full European prescribing information.

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 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 one of the world's leading independent biotechnology companies, 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 the current expectations and beliefs of Amgen. 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 reports filed by Amgen, including our most recent annual report on Form 10-K and any subsequent periodic reports on Form 10-Q and current reports on Form 8-K. Unless otherwise noted, Amgen is providing this information as of the date of this news release and does not undertake any obligation to update any forward-looking statements contained in this document as a result of new information, future events or otherwise.

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. Even when clinical trials are successful, regulatory authorities may question the sufficiency for approval of the trial endpoints we have selected. 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, including our devices, after they are on the market.

Our results may be affected by our ability to successfully market both new and existing products domestically and internationally, clinical and regulatory developments involving current and future products, sales growth of recently launched products, competition from other products including biosimilars, difficulties or delays in manufacturing our products and global economic conditions. In addition, sales of our products are affected by pricing pressure, political and public scrutiny and reimbursement policies imposed by third-party payers, 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. Furthermore, our research, testing, pricing, marketing and other operations are subject to extensive regulation by domestic and foreign government regulatory authorities. Our business may be impacted by government investigations, litigation and product liability claims. In addition, our business may be impacted by the adoption of new tax legislation or exposure to additional tax liabilities. If we fail to meet the compliance obligations in the corporate integrity agreement between us and the U.S. government, we could become subject to significant sanctions. Further, 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, or we may fail to prevail in present and future intellectual property litigation. We perform a substantial amount of our commercial manufacturing activities at a few key facilities, including in Puerto Rico, and also depend on third parties for a portion of our manufacturing activities, and limits on supply may constrain sales of certain of our current products and product candidate development. In addition, we compete with other companies with respect to many of our marketed products as well as for the discovery and development of new products. Further, some raw materials, medical devices and component parts for our products are supplied by sole third-party suppliers. Certain of our distributors, customers and payers have substantial purchasing leverage in their dealings with us. 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 acquire other companies or products and to integrate the operations of companies we have acquired may not be successful. We may not be able to access the capital and credit markets on terms that are favorable to us, or at all. We are increasingly dependent on information technology systems, infrastructure and data security. Our stock price is volatile and may be affected by a number of events. Our business performance could affect or limit the ability of our Board of Directors to declare a dividend or our ability to pay a dividend or repurchase our common stock.

The scientific information discussed in this news release relating to new indications for our products is preliminary and investigative and is not part of the labeling approved by the U.S. Food and Drug Administration for the products. The products are not approved for the investigational use(s) discussed in this news release, and no conclusions can or should be drawn regarding the safety or effectiveness of the products for these uses.

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References:

1. Patient. Immune Thrombocytopenia. <http://patient.info/health/immune-thrombocytopenia-leaflet>. Accessed Aug. 29, 2017.
2. Cines DB et al. Immune thrombocytopenic purpura. *N Engl J Med*. 2002;346:995-1008.
3. Segal JB, Powe NR. Prevalence of immune thrombocytopenia: analyses of administrative data. *J Thromb Haemost*. 2006;4(11):2377-83.
4. US National Institutes of Health. Immune Thrombocytopenia. <http://www.nhlbi.nih.gov/book/export/html/4917>. Accessed Aug. 29, 2017.
5. Nplate® (romiplostim) prescribing information, Amgen.



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