ONLINE EXPERT POSTER REVIEW AND DISCUSSION

Advances in Chronic Hepatitis C Management and Treatment

REPORTING FROM

THE 62ND AMERICAN ASSOCIATION FOR THE STUDY OF LIVER DISEASES ANNUAL MEETING

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TMC435 IN COMBINATION WITH PEGINTERFERON AND RIBAVIRIN IN TREATMENT-NAÏVE HCV GENOTYPE 1 PATIENTS: FINAL ANALYSIS OF THE PILLAR PHASE IIB STUDY

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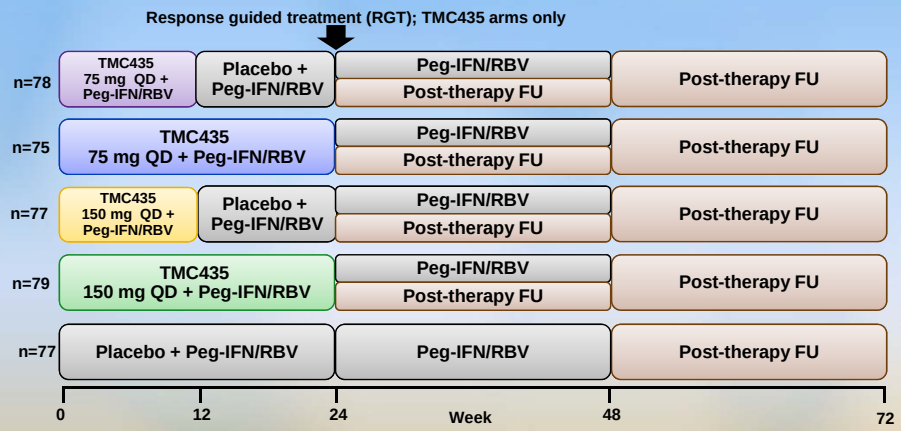
Abstract LB-5

PILLAR Study: Design



- RGT criteria in TMC435 arms: End treatment at W24, if HCV RNA <25 IU/mL detectable/undetectable at W4 and <25 IU/mL undetectable at W12, W16, W20 (all other patients continued Peg-IFN/RBV up to W48)

QD: once-daily; FU: follow-up; Peg-IFN/RBV: peg-interferon □-2a (180 µg/wk) + ribavirin (1000-1200 mg/day)

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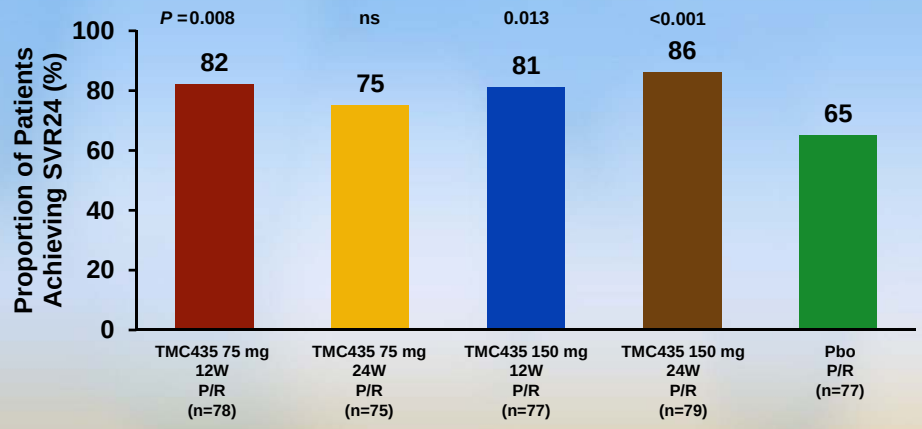
PILLAR Study: Proportion of Patients Achieving SVR24 (ITT)



HCV RNA assay: Roche COBAS TaqMan HCV assay v2; significant difference versus placebo control (closed testing procedure);
ITT, intent-to-treat; P/R, peginterferon □-2a + ribavirin;
SVR24, HCV RNA <25 IU/mL undetectable 24 weeks after planned end of treatment; W, Week

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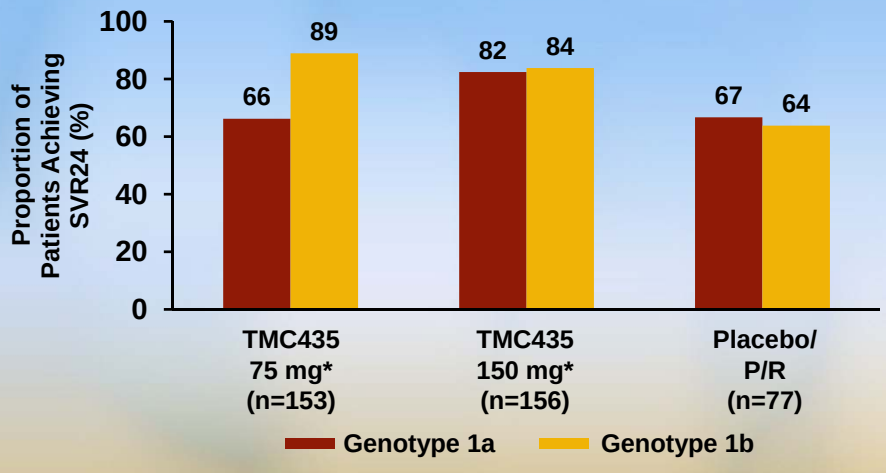
PILLAR Study: Proportion of Patients Achieving SVR24 by HCV Subtype and TMC435 Dose (ITT)



* TMC435 dose groups combined; ITT, intent-to-treat; P/R, peginterferon α-2a + ribavirin; SVR, sustained virologic response

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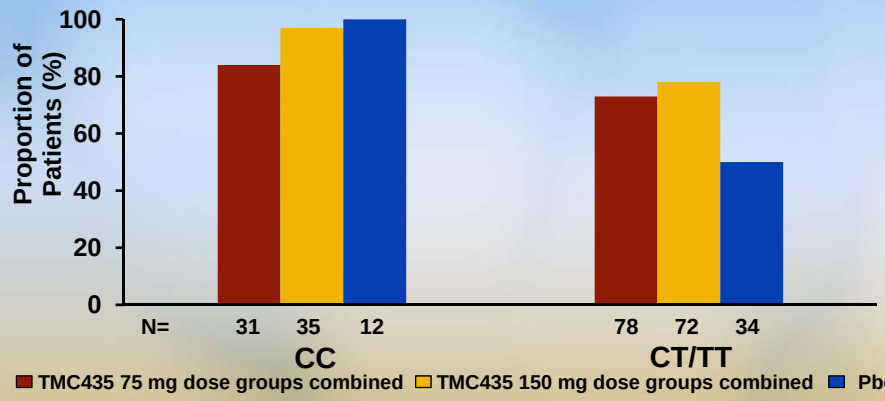
PILLAR Study: SVR24 by *IL28B* Genotype

- In consenting patients (67.9%), distribution of IL28B genotype was 30% CC, 58% CT, and 12% TT



IL28B , polymorphism on chromosome 19 s12979860 Pbo, placebo; P/R, peginterferon α-2a + ribavirin; SVR, sustained virologic response

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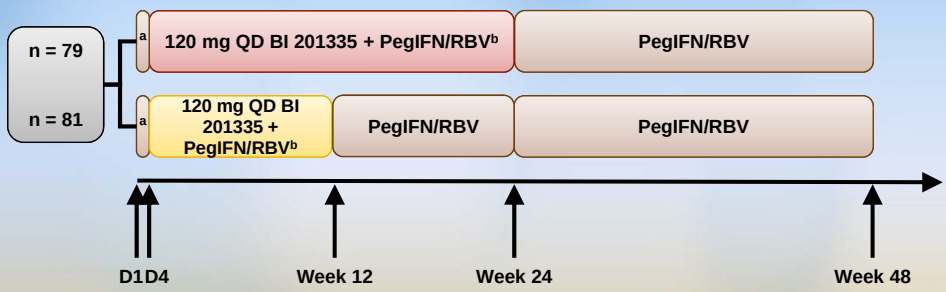
SILEN-C3 Trial

- Open-label phase IIb study in treatment-naïve, hepatitis C virus (HCV) genotype-1 (GT-1) patients



a 3-day lead-in period (LI) of Peg-interferon (IFN) alfa 2a (180 µg/week) plus ribavirin (RBV) (1,000 mg or 1,200 mg/day)
b Patients without extended rapid virologic response (eRVR, HCV RNA < lower limit of quantification [LLOQ] Week 4 and < lower limit of detection [LLOD] Weeks 8 to 18), continued PegIFN/RBV up to Week 48
QD, once daily

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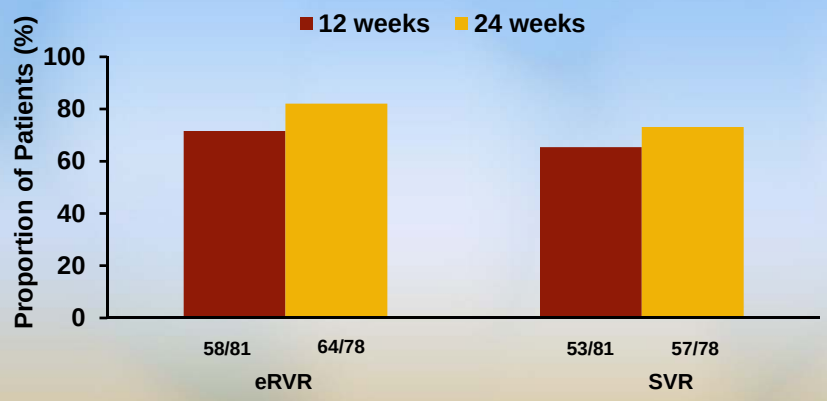
Virological Response



a One patient excluded who discontinued PegIFN prior to BI 201335 for bone pain
eRVR: HCV RNA < LLOQ at Week 4 and < LLOD at Weeks 8 to 18; SVR, sustained virologic response

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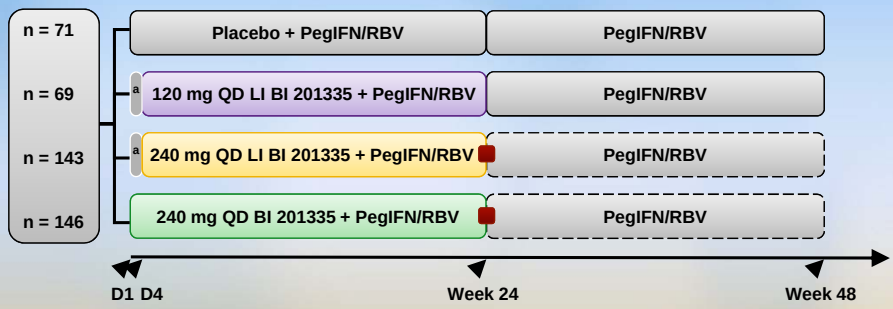
SILEN-C1 Trial

Double-blind, placebo-controlled phase IIb study in treatment-naïve, HCV genotype-1 (GT-1) patients



a 3-day LI of PegIFN alfa 2a (180 µg/week) plus RBV (1,000 mg or 1,200 mg/day);
■ Re-randomisation 1:1 of patients with extended rapid virologic response (eRVR) to 24 versus 48 weeks of PegIFN/RBV

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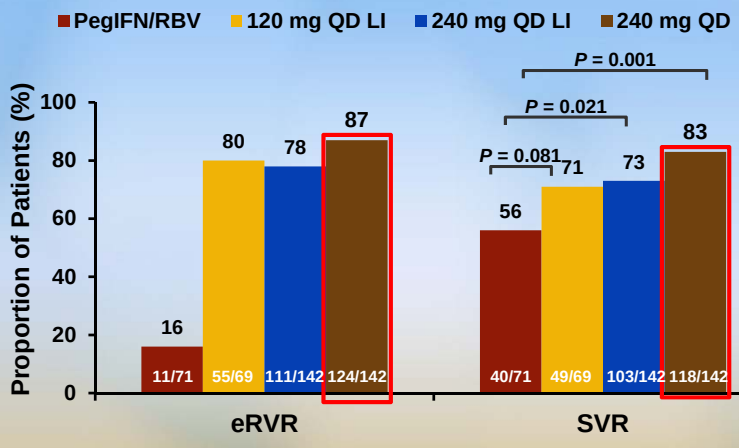
Virologic Response[a]



a Per protocol: excluding 5 patients with non-GT-1 as per NS3/4A sequencing; eRVR: HCV RNA < 25 IU/mL at Week 4 and undetected at Weeks 8 to 20; SVR, sustained virologic response

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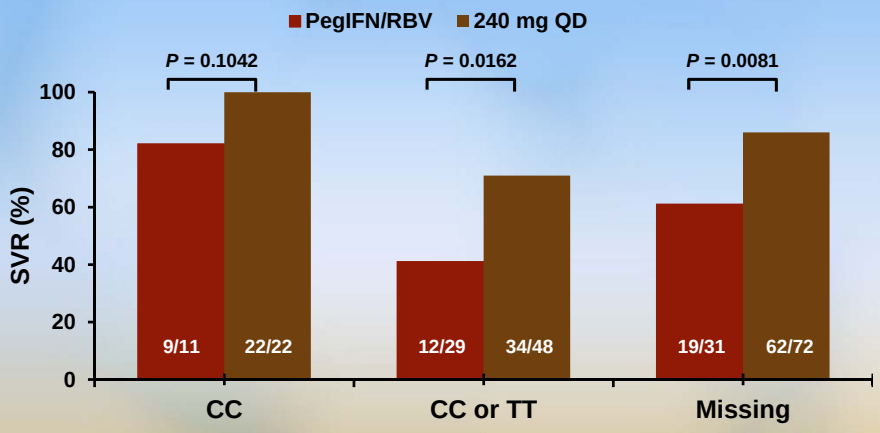
Virologic Response by *IL28B*



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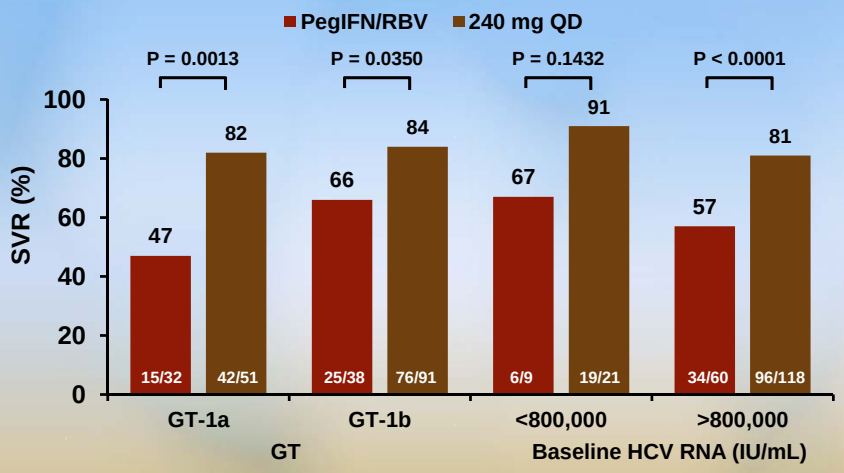
Virologic Response by Subtype and Baseline HCV RNA



a Two GT-1a patients had detectable R155K variants; both achieved SVR; bFour GT-1b patients had detectable D168 variants; three achieved SVR

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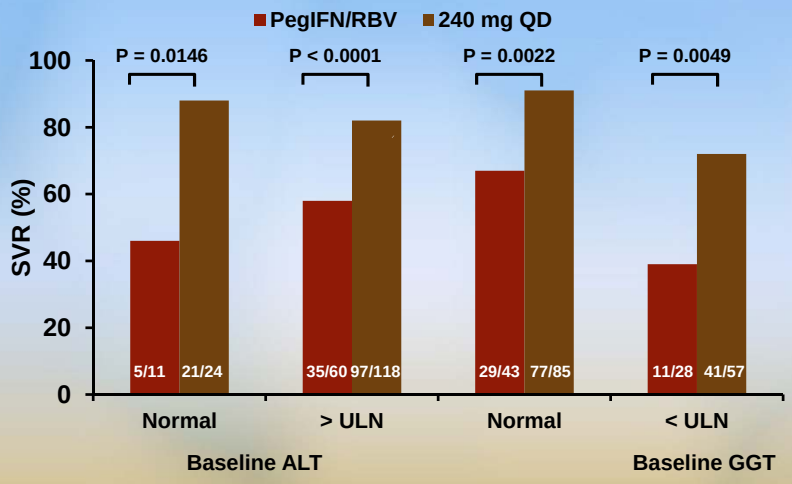
Virologic Response by Hepatic Function



ALT, alanine transaminase; GGT, gamma-glutamyl transpeptidase; ULN, upper limit of normal

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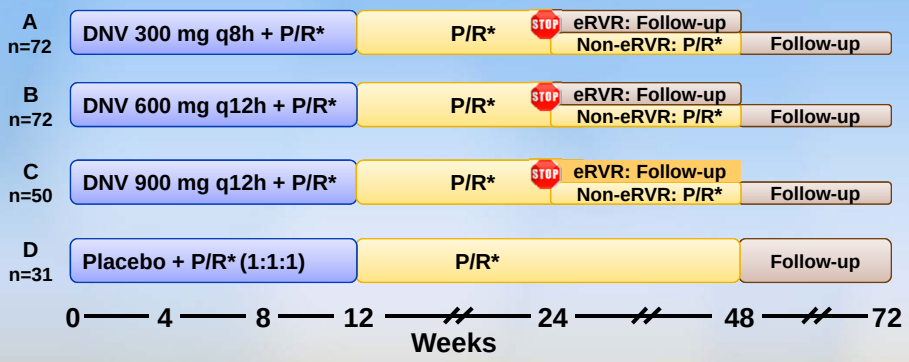
ATLAS Study Design: Phase 2b GT1 Treatment-naive

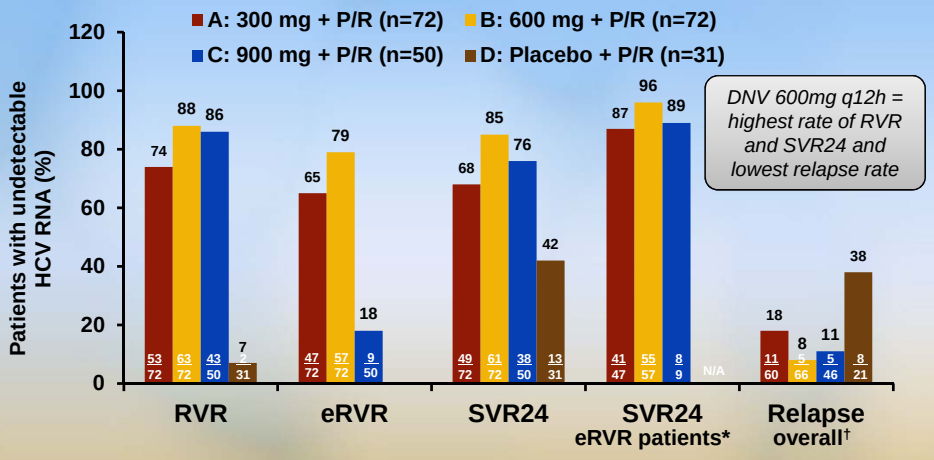


Arm C discontinued prematurely due to SAE (ALT elevation) - patients initially allocated to Arm C who had not initiated study drug were re-randomized to Arms A, B or D

eRVR = extended rapid virologic response, defined as undetectable HCV RNA (<15 IU/mL) at Week 4 of treatment through to Week 20; * P/R = Peginterferon alfa-2a 180 µg/week plus ribavirin 1000 mg/day (<75 kg) or 1200 mg/day (≥75 kg).

Terrault N, et al. 62nd AASLD; San Francisco, CA; November 04-08, 2011. Abst. 79.

Efficacy: Achievement of HCV RNA <15 IU/mL



DNV 600mg q12h = highest rate of RVR and SVR24 and lowest relapse rate

† Among patients with EOT response and at least one post-treatment HCV RNA assessment.
* From a subset of patients who achieved extended RVR in the DNV-treated arms.

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