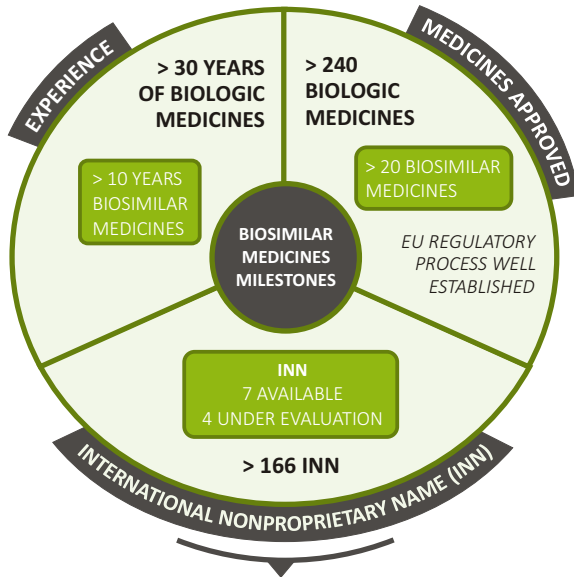


CLINICAL EXPERIENCE WITH BIOSIMILAR ERYTHROPOIETIN*



KEY:

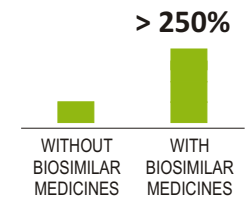
- BIOLOGICS INCLUDING BIOSIMILAR MEDICINES
- BIOSIMILAR MEDICINES

CASE STUDY

- BULGARIA
- CZECH REPUBLIC
- ROMANIA

1 LAUNCH OF BIOSIMILAR ERYTHROPOIETIN

2 AVERAGE INCREASE ON MEDICAL USE OF ERYTHROPOIETIN



3 MORE PATIENTS TREATED

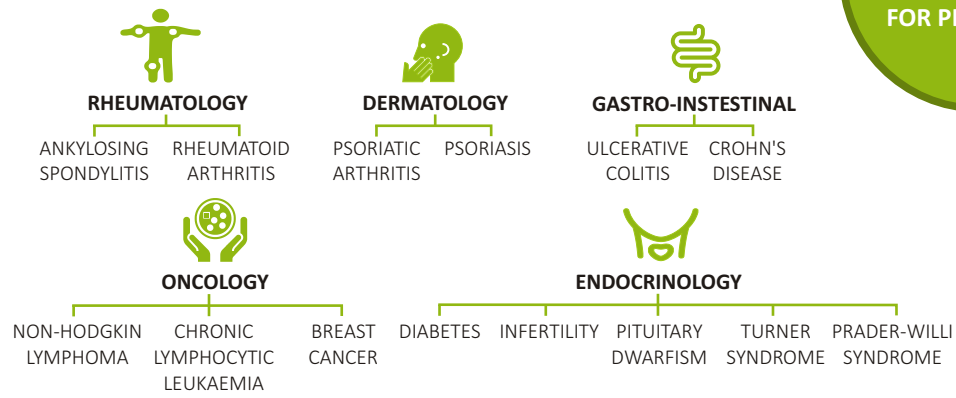
INCREASED PATIENT ACCESS

BIOSIMILAR MEDICINES: INCREASED OPTIONS FOR PHYSICIANS

MORE CHOICE OF MODERN TREATMENTS

Source: 1 and 2

MAJOR THERAPY AREAS



Source: 1

Source: 3

SOURCE 1: Adapted from European Medicines Agency website (www.ema.europa.eu/ema). **SOURCE 2:** Biopharmaceutical benchmarks 2014. G. Walsh, volumen 32, number 10, October 2014. Nature Biotechnology **SOURCE 3:** Adapted from IMS report: Delivering on the potential of biosimilar medicines. the role of functioning competitive markets. IMS Institute For Healthcare Informatics. march 2016. www.imshealth.com/files/web/imsh_institute/healthcare_briefs/documents/ims_institute_biosimilar_brief_march_2016.pdf For more information please see consensus information paper Q&A physicians ec.europa.eu/docsroom/documents/8242

* ERYTHROPOIETIN IS INDICATED IN THE FOLLOWING THERAPEUTIC AREAS: ANEMIA; CONSEQUENCE OF CHRONIC KIDNEY FAILURE; FOLLOW-UP OF CANCER TREATMENT (ADAPTED FROM RESPECTIVE EPAR)