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## **Pipeline summary**

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**Marketed products additional indications**

**Global Development late-stage trials**

**pRED (Roche Pharma Research & Early Development)**

**gRED (Genentech Research & Early Development)**

**Roche Group HY 2014 sales**

**Diagnostics**

**Foreign exchange rate information**

# Changes to the development pipeline

## *HY 2014 update*

New to Phase I	New to Phase II	New to Phase III	New to Registration
<p><b>3 NMEs added by pRED</b>  <b>RG7342</b> mGlu5 PAM  schizophrenia  <b>RG7775</b> MDM2 (4) antagonist IV  prodrug AML  <b>RG7935</b> a-synuclein MAb  Parkinson's Disease  <b>1 NME added by gRED</b>  <b>RG7882</b> ADC - ovarian cancer</p>	<p><b>4 NMEs moved from phase 1</b>  <b>RG1662</b> GABRA5 NAM - Down  syndrome  <b>RG7155</b> CSF-1R MAb - PVNS  <b>RG7604</b> taselisib (PI3k beta sparing) -  solid tumors  <b>RG7221</b> Ang2-VEGF MAb - colorectal  cancer  <b>1 AI</b>  <b>RG7601</b> Bcl-2 inh - DLBCL  <b>NME ACE910 shown as RG6013</b>  FIXA/FX bispecific MAb - hemophilia  A (inlicensed from Chugai)</p>	<p><b>1 NME moved from phase 2</b>  <b>RG7413</b> etrolizumab - ulcerative  colitis  <b>1 Chugai NME moved from  phase 1</b>  <b>IL6R</b> MAb in neuromyelitis optica   <b>2 AIs</b>  <b>RG3502</b> Kadcylla + Perjeta HER2-  positive BC adjuvant  <b>RG3502</b> Kadcylla + Perjeta HER2-  positive BC neoadjuvant</p>	<p><b>1 AI following EU/US submission</b>  <b>RG435</b> Avastin - recurrent cervical  cancer</p>
Removed from Phase I	Removed from Phase II	Removed from Phase III	Removed from Registration
<p><b>1 AI</b>  <b>RG3638</b> onartuzumab - liver  cancer  <b>2 NMEs</b>  <b>RG7863</b> TLR7 agonist (2) - HBV  <b>RG7598</b> ADC - multiple myeloma  <b>1 NME terminated by Roche  and Chugai</b>  <b>RG7167</b> MEK inh - solid tumors</p>	<p><b>1 AI</b>  <b>RG3638</b> onartuzumab - mCRC 1st line  <b>2 NMEs</b>  <b>RG7415</b> rontalizumab - systemic  lupus erythematosus  <b>RG7652</b> PCSK9 MAb - metabolic  diseases</p>	<p><b>2 NMEs</b>  <b>RG3638</b> onartuzumab - gastric  cancer  <b>RG3806</b> oral octreotide -  acromegaly  <b>2 AIs</b>  <b>RG435</b> Avastin - HER2-neg. BC  adjuvant  <b>RG435</b> Avastin - high risk  carcinoid</p>	<p><b>1 AI following EU Approval</b>  <b>RG1569</b> Actemra - RA sc  formulation</p>

# Roche Group development pipeline

## Phase I (28 NMEs + 8 AIs)

### Oncology

RG6016	LSD1 inh	AML
RG7116	HER3 MAb	solid tumors
RG7304	Raf & MEK dual inh	solid tumors
RG7388	MDM2 ant	solid & hem tumors
RG7446	PD-L1 MAb+Tarceva	NSCLC EGFR+
RG7446	PD-L1 MAb+Zelboraf	m. melanoma
RG7446	PD-L1 MAb+Avastin+chemo	solid tumors
RG7446	PD-L1 MAb+cobimetinib	solid tumors
RG7446	PD-L1 MAb	solid tumors
RG7450	Steap 1 ADC	prostate ca.
RG7458	MUC16 ADC	ovarian & pancreatic ca.
RG7600	Mesothelin ADC	pancreatic ca.
RG7601	Bcl-2 inh + Gazyva	CLL
RG7601	Bcl-2 inh	heme indications
RG7636	ETBR ADC	metastatic melanoma
RG7666	PI3k inh	glioblastoma 2L
RG7741	ChK1 inh	solid tum & lymphoma
RG7775	MDM2 (4) IV prodrug	AML
RG7813	CEA IL2v	solid tumors
RG7841	ADC	solid tumors
RG7842	ERK inh	solid tumors
RG7845	-	heme tumors
RG7882	ADC	ovarian ca.
CHU	PI3K inh	solid tumors

### Other disease areas

RG7624	IL-17 MAb	autoimmune diseases
RG7795	TLR7 agonist	HBV
RG7641	aldosterone synth inh	kidney disease
RG7697	GIP/GLP-1 dual ago	type 2 diabetes
CHU	URAT 1 inh	gout
RG7203	PDE10A inh	schizophrenia
RG7342	mGlu5 PAM	schizophrenia
RG7410	TAAR1 ago	schizophrenia
RG7800	SMN2 splicer	spinal muscular atrophy
RG7935	a-synuclein MAb	Parkinson's Disease
RG3645	Lucentis sust. deliv.	AMD/RVO/DME
RG7716	VEGF-ANG2 MAb	wAMD

<span style="background-color: #ADD8E6; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>New Molecular Entity (NME)</b>
<span style="background-color: #0070C0; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Additional Indication (AI)</b>
<span style="background-color: #FFA500; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Oncology</b>
<span style="background-color: #9370DB; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Immunology</b>
<span style="background-color: #800000; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Infectious Diseases</b>
<span style="background-color: #90EE90; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>CardioMetabolism</b>
<span style="background-color: #FFFF00; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Neuroscience</b>
<span style="background-color: #ADD8E6; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Ophthalmology</b>
<span style="background-color: #808080; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Other</b>
<b>RG-No</b>	<b>Roche Genentech managed</b>
<b>CHU</b>	<b>Chugai managed</b>



# Roche Group development pipeline

## Phase II (29 NMEs + 8 AIs)

RG3616	Erivedge	AML
RG7155	CSF-1R MAb	PVNS
RG7221	Ang2-VEGF MAb	colorectal cancer
RG7321	pictilisib (PI3K inh)	solid tumors
RG7440	ipatasertib (AKT inh)	solid tumors
RG7446	PD-L1 MAb	NSCLC 2 <sup>nd</sup> /3 <sup>rd</sup> line
RG7446	PD-L1 MAb + Avastin	RCC
RG7446	PD-L1 MAb	bladder cancer
RG7593	pinatumumab vedotin (CD22 ADC)	hem tumors
RG7596	polatumumab vedotin (CD79bADC)	hem tumors
RG7597	HER3/EGFR MAb	m. epithelial tumors
RG7599	NaPi2b ADC	Pt-resistant ovarian cancer
RG7601	Bcl-2 inh	CLL rel/refract 17pdel
RG7601	Bcl-2 inh	DLBCL
RG7604	taselisib (PI3K inh beta sparing)	solid tumors
RG7686	glypican-3 MAb	liver cancer
RG7853	alelectinib (ALK inhibitor)	NSCLC
RG1569	Actemra	systemic sclerosis
RG3637	lebrikizumab	idiopathic pulmonary fibrosis
RG7449	quilizumab	asthma
CHU	IL-31R MAb	atopic dermatitis
RG7128	mericitabine	HCV
RG7227	danoprevir	HCV
RG7667	CMV MAb	CMV
RG7745	Flu A MAb	influenza
RG7790	setrobuvir	HCV
RG7929	LptD antibiotic	antibacterial
RG1512	inlacumab	ACS/CVD
RG1577	MAO-B inh	Alzheimer's
RG1578	decoglutant (mGlu2 NAM)	depression
RG1662	GABRA5 NAM	Down Syndrome
RG1678	bitopertin	obsessive compulsive dis.
RG7090	basimglurant (mGlu5 NAM)	TRD
RG7314	V1 receptor antag	autism
RG7412	crenezumab	Alzheimer's
RG7417	lampalizumab (factor D)	geo. atrophy
RG6013	FIXa /FX bispecific MAb	hemophilia A

## Phase III (8 NMEs + 18 AIs)

RG435	Avastin	NSCLC adj
RG435 <sup>1</sup>	Avastin	ovarian cancer 1 <sup>st</sup> line
RG435 <sup>1</sup>	Avastin	rel. ovarian ca. Pt-sensitive
RG1273	Perjeta	HER2+ mBC 2 <sup>nd</sup> line
RG1273	Perjeta	HER2+ BC adj
RG1273	Perjeta	HER2+ gastric cancer
RG3502	Kadcyla	HER2+ gastric cancer
RG3502	Kadcyla +/- Perjeta	HER2+ mBC 1 <sup>st</sup> l
RG3502	Kadcyla	HER2+ BC adj
RG3502	Kadcyla + Perjeta	HER2+ BC adj
RG3502	Kadcyla + Perjeta	HER2+ BC neoadj
RG7159	Gazyva (obinutuzumab)	DLBCL
RG7159	Gazyva (obinutuzumab)	iNHL relapsed
RG7159	Gazyva (obinutuzumab)	iNHL front-line
RG7204	Zelboraf	m. melanoma adj
RG7421	cobimetinib + Zelboraf	m. melanoma
RG7446	PD-L1 MAb	NSCLC 2 <sup>nd</sup> line
RG7601	Bcl-2 inh	CLL rel/refract
RG1569	Actemra	giant cell arteritis
RG3637	lebrikizumab	severe asthma
RG7413	etrolizumab	ulcerative colitis
CHU	Suvenyl	enthesopathy
CHU	IL-6R MAb	neuromyelitis optica
RG1450	gantenerumab	Alzheimer's
RG1594	ocrelizumab	RMS
RG1594	ocrelizumab	PPMS

## Registration (1 NME + 4 AIs)

RG435	Avastin	recurrent cervical cancer
RG435	Avastin	rel. ovarian ca. Pt-resistant
RG435 <sup>2</sup>	Avastin	glioblastoma 1 <sup>st</sup> line
RG7159 <sup>3</sup>	Gazyvaro (obinutuzumab)	CLL
RG1569 <sup>4</sup>	Actemra	early RA

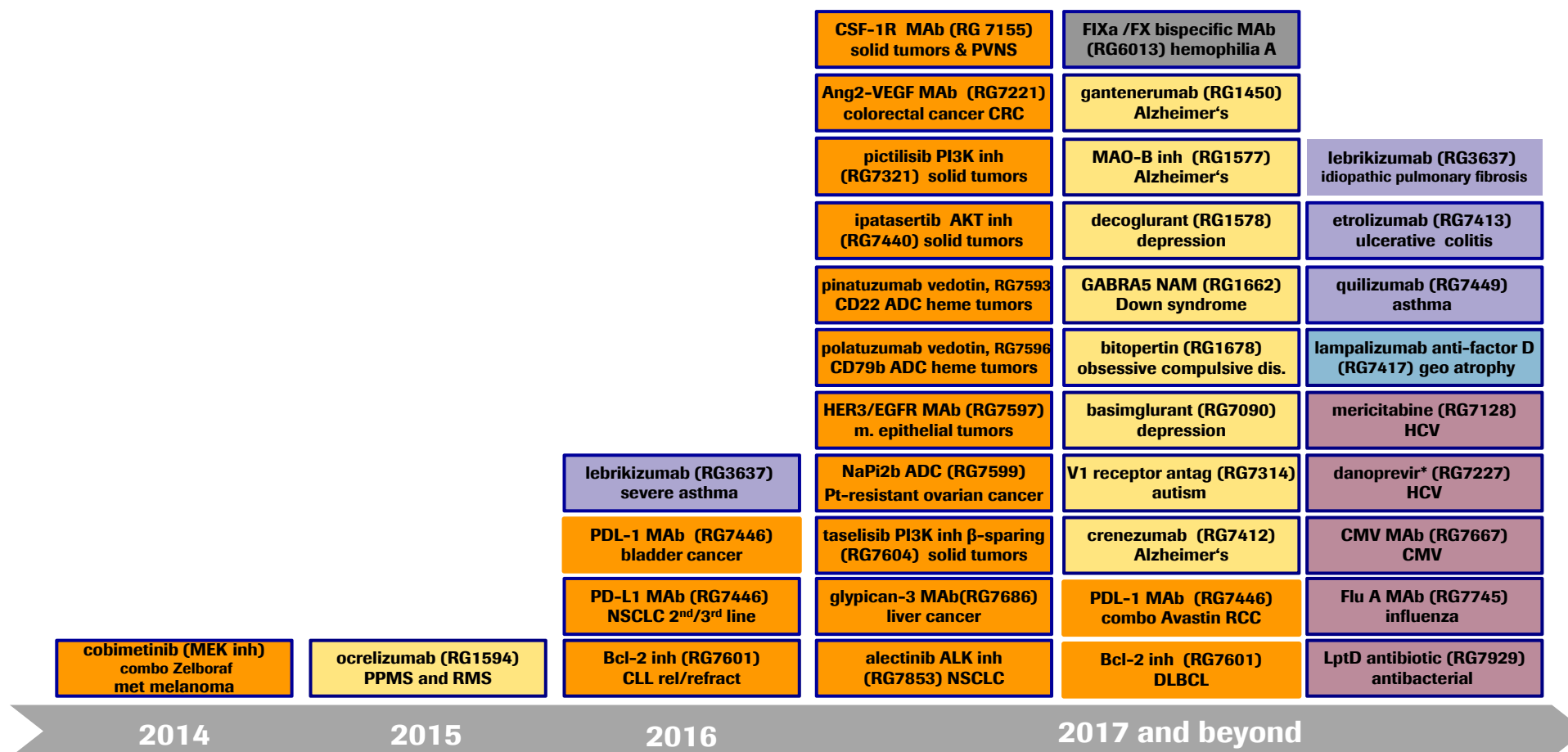
- 1 US only: FDA submission decision pending
- 2 Submitted in EU, US filing pending
- 3 Approved in US, submitted in EU
- 4 Submitted in EU

<span style="background-color: #ADD8E6; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>New Molecular Entity (NME)</b>
<span style="background-color: #0070C0; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Additional Indication (AI)</b>
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<span style="background-color: #9370DB; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Immunology</b>
<span style="background-color: #C08080; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Infectious Diseases</b>
<span style="background-color: #90EE90; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>CardioMetabolism</b>
<span style="background-color: #FFFF00; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Neuroscience</b>
<span style="background-color: #ADD8E6; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Ophthalmology</b>
<span style="background-color: #D3D3D3; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Other</b>
<b>RG-No</b>	<b>Roche Genentech managed</b>
<span style="background-color: #808080; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span>	<b>Chugai managed</b>
<b>RG105</b>	<b>MabThera is branded as Rituxan in US and Japan</b>
<b>RG1569</b>	<b>Actemra is branded as RoActemra in EU</b>
<b>RG7159</b>	<b>Gazyva is branded as Gazyvaro in EU</b>

Status as of July 24, 2014

# NME submissions and their additional indications

## *Projects currently in phase 2 and 3*

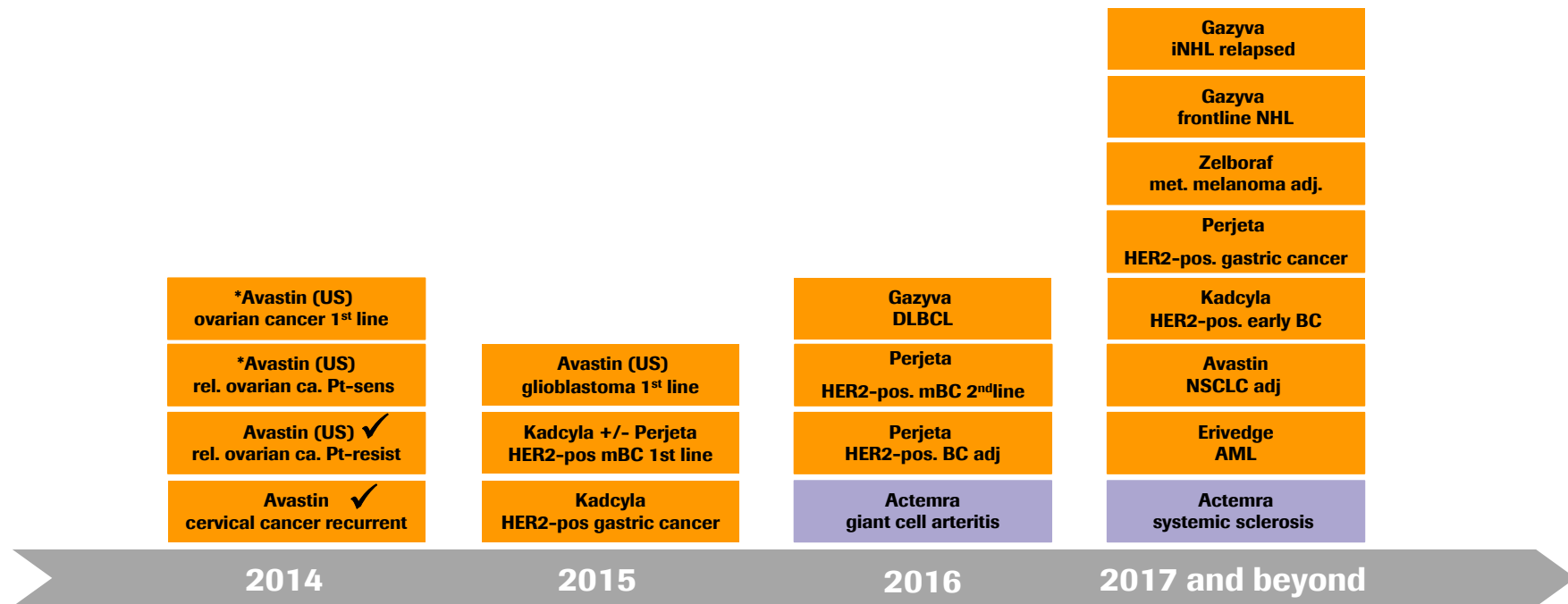


Unless stated otherwise, submissions are planned to occur in US and EU  
 \* lead market China

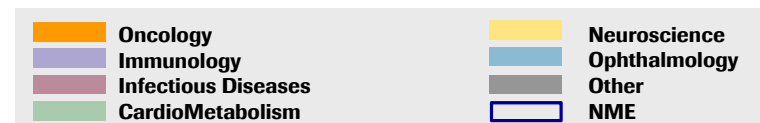
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<span style="display:inline-block; width:15px; height:15px; background-color:purple; border:1px solid black;"></span> Immunology	<span style="display:inline-block; width:15px; height:15px; background-color:lightblue; border:1px solid black;"></span> Ophthalmology
<span style="display:inline-block; width:15px; height:15px; background-color:lightpurple; border:1px solid black;"></span> Infectious Diseases	<span style="display:inline-block; width:15px; height:15px; background-color:grey; border:1px solid black;"></span> Other
<span style="display:inline-block; width:15px; height:15px; background-color:lightgreen; border:1px solid black;"></span> CardioMetabolism	<span style="display:inline-block; width:15px; height:15px; background-color:blue; border:1px solid black;"></span> NME

# Submissions of additional indications for existing products

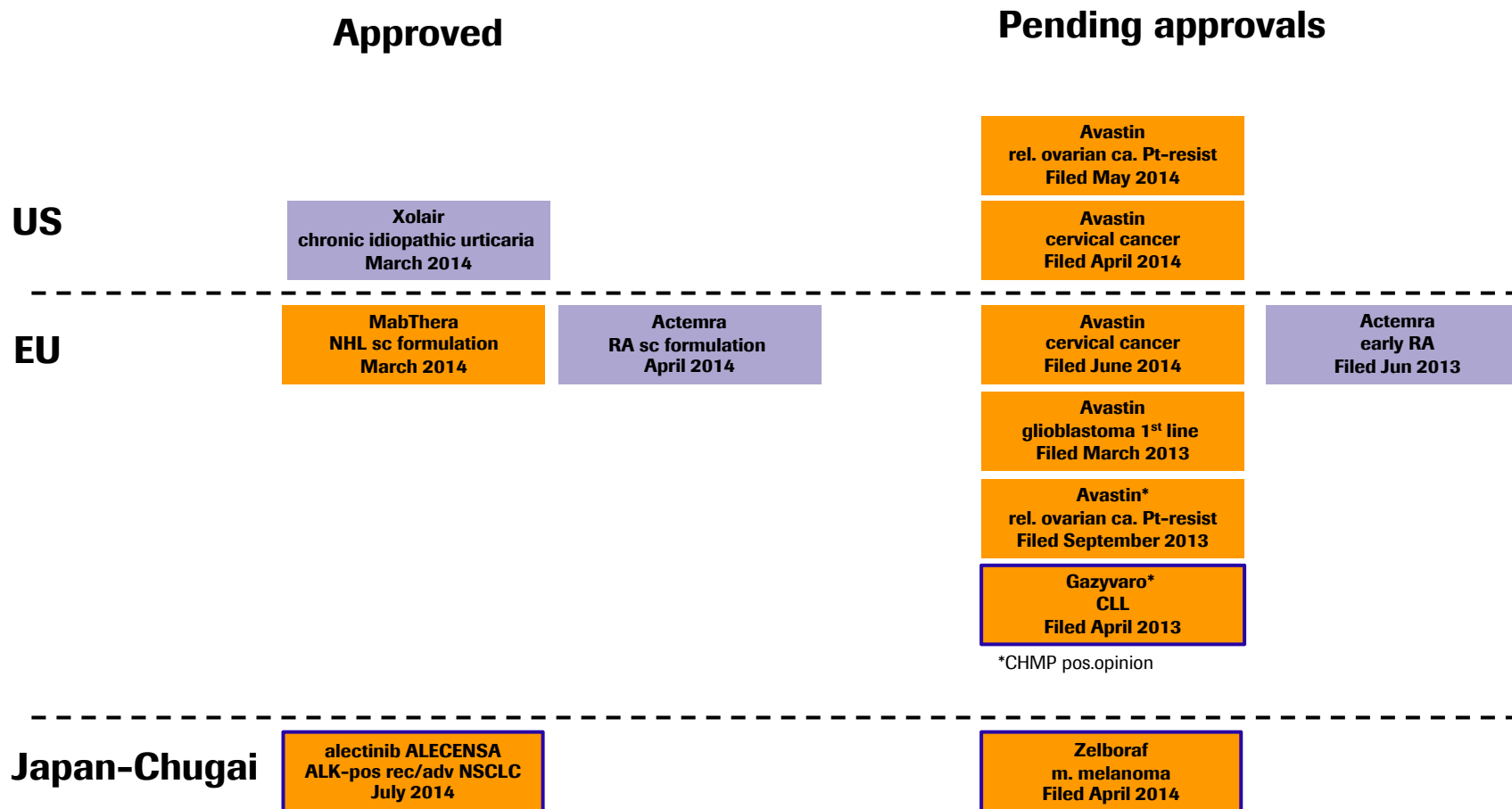
## *Projects currently in phase 2 and 3*



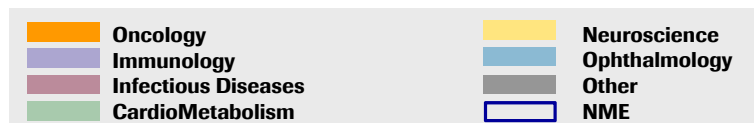
✓ Indicates submission to health authorities has occurred.  
 \* Approved in the EU  
 Unless stated otherwise, submissions are planned to occur in US and EU.



# Major granted and pending approvals 2014



\*CHMP pos.opinion





## Pipeline summary

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## **Marketed products additional indications**

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### Global Development late-stage trials

pRED (Roche Pharma Research & Early Development)

gRED (Genentech Research & Early Development)

Roche Group HY 2014 sales

Diagnostics

Foreign exchange rate information

# Avastin

## *Ovarian cancer clinical development programme*

Patient population	Front-line metastatic ovarian cancer	
Phase/study	Phase III GOG-0218	Phase III ICON7
# of patients	N=1,873	N=1,528
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Paclitaxel and carboplatin for 6 cycles plus 5 cycles of concurrent placebo followed by placebo alone for up to 22 cycles (15 months)</li> <li>▪ <b>ARM B:</b> Paclitaxel and carboplatin for 6 cycles plus 5 cycles of concurrent Avastin followed by placebo alone for up to 22 cycles (15 months)</li> <li>▪ <b>ARM C:</b> Paclitaxel and carboplatin for 6 cycles plus 5 cycles of concurrent Avastin followed by Avastin alone for up to 22 cycles (15 months)</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Paclitaxel and carboplatin for 6 cycles</li> <li>▪ <b>ARM B:</b> Paclitaxel and carboplatin plus concurrent Avastin for 6 cycles followed by Avastin alone for up to 18 cycles (12 months)</li> </ul>
Avastin dose	<ul style="list-style-type: none"> <li>▪ 15 mg/kg q3 weeks</li> </ul>	<ul style="list-style-type: none"> <li>▪ 7.5 mg/kg q3 weeks</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Study met its primary endpoint in Q1 2010</li> <li>▪ Data presented at ASCO 2010 and 2011</li> <li>▪ Results: NEJM 2011 Dec 29;365(26):2484-96</li> </ul>	<ul style="list-style-type: none"> <li>▪ Study met its primary endpoint Q3 2010</li> <li>▪ Data presented at ESMO 2010 and ASCO 2011</li> <li>▪ Results: NEJM 2011 Dec 29;365(26):2473-83</li> <li>▪ OS data presented at ECC 2013</li> </ul>
	<ul style="list-style-type: none"> <li>▪ EMA approval Q4 2011</li> <li>▪ Re-evaluate FDA submission in 2014</li> </ul>	

# Avastin

## *Ovarian cancer clinical development programme*

Patient population	Relapsed Platinum-sensitive ovarian cancer	Relapsed Platinum-resistant ovarian cancer
Phase/study	<b>Phase III OCEANS</b>	<b>Phase III AURELIA</b>
# of patients	N=484	N=361
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Carboplatin, gemcitabine, and concurrent placebo for 6-10 cycles, followed by placebo alone until disease progression</li> <li>▪ <b>ARM B:</b> Carboplatin, gemcitabine, and concurrent Avastin for 6-10 cycles, followed by Avastin alone until disease progression.</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Paclitaxel, topotecan or liposomal doxorubicin</li> <li>▪ <b>ARM B:</b> Paclitaxel, topotecan or liposomal doxorubicin plus Avastin</li> </ul>
Avastin dose	<ul style="list-style-type: none"> <li>▪ 15 mg/kg q3 weeks</li> </ul>	<ul style="list-style-type: none"> <li>▪ 10 mg/kg q2 weeks or 15 mg/kg q3 weeks</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Study met its primary endpoint Q1 2011</li> <li>▪ Data presented at ASCO 2011</li> <li>▪ EMA approval received Q4 2012</li> <li>▪ Re-evaluate FDA submission in 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ Study met its primary endpoint Q2 2012</li> <li>▪ Data presented at ASCO 2012</li> <li>▪ Results published in JCO 2014 May 1;32(13):1309-16</li> <li>▪ Filed in EU Q3 2013</li> <li>▪ CHMP positive opinion Q2 2014</li> <li>▪ Filed with the FDA Q2 2014</li> <li>▪ FDA priority review granted July 2014</li> </ul>

# Avastin

## *Cervical cancer clinical development programme*



<b>Patient population</b>	<b>Stage IVB, recurrent or persistent cervical cancer</b>
<b>Phase/study</b>	<b>Phase III GOG-240</b>
<b># of patients</b>	N=452
<b>Design</b>	<ul style="list-style-type: none"><li>▪ <b>ARM A:</b> Paclitaxel, cisplatin</li><li>▪ <b>ARM B:</b> Paclitaxel, cisplatin plus Avastin</li><li>▪ <b>ARM C:</b> Paclitaxel, topotecan</li><li>▪ <b>ARM D:</b> Paclitaxel, topotecan plus Avastin</li></ul>
<b>Avastin dose</b>	<ul style="list-style-type: none"><li>▪ 15 mg/kg q3 weeks</li></ul>
<b>Primary endpoint</b>	<ul style="list-style-type: none"><li>▪ Progression-free survival</li></ul>
<b>Status</b>	<ul style="list-style-type: none"><li>▪ Study met its primary endpoint Q1 2013</li><li>▪ Results published in NEJM Feb. 2014; 370(8):734-43</li><li>▪ Filed globally Q2 2014</li><li>▪ FDA Priority Review granted July 2014</li></ul>

# Avastin

## *High risk carcinoid, brain and breast cancer development programmes*

Patient population	High risk carcinoid	Newly diagnosed glioblastoma	First-line HER2-negative metastatic breast cancer
Phase/study	Phase III SWOG S0518	Phase III AVAglio	Phase III MERiDiAN
# of patients	N=424	N=920	N=480
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Depot octreotide plus interferon alpha</li> <li>▪ <b>ARM B:</b> Depot octreotide plus Avastin</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Concurrent radiation and temozolomide plus placebo; followed by maintenance TMZ plus placebo for 6 cycles; then placebo until disease progression</li> <li>▪ <b>ARM B:</b> Concurrent radiation and TMZ plus Avastin; followed by maintenance TMZ plus Avastin for 6 cycles; then Avastin (15mg/kg q3 weeks) monotherapy until disease progression</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Paclitaxel + Avastin</li> <li>▪ <b>ARM B:</b> Paclitaxel + Placebo</li> </ul>
Avastin dose	<ul style="list-style-type: none"> <li>▪ 15 mg/kg q3 weeks</li> </ul>	<ul style="list-style-type: none"> <li>▪ 10 mg/kg q2 weeks or 15 mg/kg q3 weeks</li> </ul>	<ul style="list-style-type: none"> <li>▪ 10 mg/kg q2 weeks</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> <li>▪ Overall survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ PFS in ITT</li> <li>▪ PFS in patients with high plasma VEGF-A</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Recruitment completed</li> <li>▪ Stopped at interim due to futility Q2 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ Co-primary endpoint of PFS met Q3 2012</li> <li>▪ Overall survival data presented at ASCO 2013</li> <li>▪ Filed in EU Q1 2013</li> <li>▪ Negative CHMP opinion Q2 2014</li> <li>▪ Re-examination ongoing</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q3 2012</li> <li>▪ Expect data in 2015</li> </ul>

TMZ=temozolomide

ASCO=American Society of Clinical Oncology

# Avastin



## *Adjuvant clinical development programme*

Patient population	Adjuvant lung cancer	Adjuvant breast cancer
Phase/study	Phase III ECOG 1505	Phase III ECOG 5103 HER2-negative
# of patients	N=1,500	N=4,950
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Cisplatin plus vinorelbine, docetaxel, gemcitabine or pemetrexed</li> <li>▪ <b>ARM B:</b> Cisplatin plus vinorelbine, docetaxel, gemcitabine or pemetrexed plus Avastin up to 12 months</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Anthracycline plus cyclophosphamide (AC) followed by paclitaxel</li> <li>▪ <b>ARM B:</b> AC plus Avastin followed by paclitaxel plus Avastin</li> <li>▪ <b>ARM C:</b> AC plus Avastin followed by paclitaxel plus Avastin, followed by Avastin up to 12 months</li> </ul>
Avastin dose	<ul style="list-style-type: none"> <li>▪ 15 mg/kg q3 weeks</li> </ul>	<ul style="list-style-type: none"> <li>▪ 15 mg/kg q3 weeks</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Overall survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Disease-free survival</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q4 2013</li> <li>▪ Expect data in 2016</li> </ul>	<ul style="list-style-type: none"> <li>▪ Primary endpoint not met Q2 2014</li> <li>▪ Data presented at ASCO 2014</li> </ul>

# Erivedge

*A novel small molecule inhibitor of the hedgehog signaling pathway*

Patient population	Locally advanced or metastatic basal cell carcinoma	Acute myelogenous leukemia and relapsed refractory high-risk myelodysplastic syndrome
Phase/study	Phase II STEVIE	Phase II
# of patients	N=1,200	N=60
Design	<ul style="list-style-type: none"> <li>▪ <b>Single ARM:</b> 150 mg Erivedge orally once daily</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> 150mg Erivedge orally once daily</li> <li>▪ <b>ARM B:</b> Cytarabine</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Safety: Incidence of adverse events</li> </ul>	<ul style="list-style-type: none"> <li>▪ Overall response rate</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ FPI Q2 2011</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q3 2013</li> </ul>

# Gazyva

*Type II, glycoengineered anti-CD20 monoclonal antibody*

Patient population	Front-line chronic lymphocytic leukaemia Patients with comorbidities	Previously untreated or relapsed/refractory chronic lymphocytic CLL
Phase/study	Phase III CLL11	Phase III GREEN
# of patients	N=781	N=800
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Gazyva 1000mg iv plus chlorambucil</li> <li>▪ <b>ARM B:</b> MabThera/Rituxan plus chlorambucil</li> <li>▪ <b>ARM C:</b> Chlorambucil alone</li> </ul>	<ul style="list-style-type: none"> <li>▪ Single-arm cohort study: Gazyva alone or in combination with different chemotherapy regimens (FC, Bendamustin or Clb)</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety in combination with different chemotherapy regimens</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Filed globally Q2 2013</li> <li>▪ FDA approval granted Q4 2013</li> <li>▪ Positive CHMP opinion Q2 2014</li> <li>▪ Full data published NEJM Mar 2014; 370(12):1101-10</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q4 2013</li> </ul>



# Gazyva

*Type II, glycoengineered anti-CD20 monoclonal antibody*

Patient population	Diffuse large B-cell lymphoma (DLBCL)	Indolent non-Hodgkin's lymphoma MabThera/Rituxan refractory	Front-line indolent non-Hodgkin's lymphoma
Phase/study	<b>Phase III GOYA</b>	<b>Phase III GADOLIN</b> Induction and maintenance study	<b>Phase III GALLIUM</b> Induction and maintenance study
# of patients	N=1,400	N=410	N=1,400
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Gazyva 1000mg iv plus CHOP</li> <li>▪ <b>ARM B:</b> MabThera/Rituxan plus CHOP</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Gazyva 1000mg iv plus bendamustine followed by Gazyva maintenance</li> <li>▪ <b>ARM B:</b> bendamustine</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Gazyva 1000mg iv plus chemotherapy followed by Gazyva maintenance</li> <li>▪ <b>ARM B:</b> MabThera/Rituxan plus chemotherapy followed by MabThera/Rituxan maintenance</li> <li>▪ Chemotherapy:               <ul style="list-style-type: none"> <li>▪ For follicular lymphoma: CHOP, CVP or bendamustine</li> <li>▪ For non-follicular lymphoma: physician's choice</li> </ul> </li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q2 2014</li> <li>▪ Expect data in 2015</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q2 2010</li> <li>▪ Expect data in 2017</li> </ul>	<ul style="list-style-type: none"> <li>▪ Recruitment completed</li> <li>▪ Expect data in 2017</li> </ul>

In collaboration with Biogen Idec

CHOP=Cyclophosphamide, Doxorubicin, Vincristine and Prednisone; CVP=Cyclophosphamide, Vincristine and Prednisolone

# Kadcyla

## *Evaluating new treatment options in HER2-positive early breast cancer*

Patient population	HER2-positive neoadjuvant breast cancer	HER2-positive early breast cancer high-risk patients	Operable HER2-positive early breast cancer
Phase/study	Phase III <b>KRISTINE</b>	Phase III <b>KATHERINE</b>	Phase III <b>KAITLIN</b>
# of patients	N=432	N=1,484	N=2,500
Design	<p>Before surgery patients will receive 6 cycles of:</p> <ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Herceptin plus Perjeta plus docetaxel plus carboplatin</li> <li>▪ <b>ARM B:</b> Kadcyla plus Perjeta</li> </ul> <p>After surgery patients will receive:</p> <ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Herceptin plus Perjeta</li> <li>▪ <b>ARM B:</b> Kadcyla plus Perjeta</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Kadcyla 3.6mg/kg q3w</li> <li>▪ <b>ARM B:</b> Herceptin</li> </ul>	<p>Following surgery and anthracycline-based therapy:</p> <ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Herceptin 6mg/kg q3w plus Perjeta 420 mg/kg q3w plus taxane</li> <li>▪ <b>ARM B:</b> Kadcyla 3.6mg/kg q3w plus Perjeta 420mg/kg q3w</li> </ul>
Primary endpoint	▪ Pathologic Complete Response (pCR)	▪ Invasive disease-free survival (IDFS)	▪ Invasive disease-free survival (IDFS)
Status	▪ FPI Q2 2014	▪ FPI Q1 2013	▪ FPI Q1 2014

# Kadcyla

## *Evaluating new treatment options in HER2-positive breast and gastric cancer*

Patient population	Previously untreated HER2 pos. metastatic breast cancer	Previously Treated Locally Advanced Or Metastatic Her2-Positive Gastric Cancer
Phase/study	Phase III <b>MARIANNE</b>	Phase II/III <b>GATSBY</b>
# of patients	N=1,092	N=412
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Herceptin plus taxane</li> <li>▪ <b>ARM B:</b> Kadcyla 3.6mg/kg q3w plus Perjeta</li> <li>▪ <b>ARM C:</b> Kadcyla 3.6 mg/kg q3w plus placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Kadcyla 3.6mg/kg q3w</li> <li>▪ <b>ARM B:</b> Kadcyla 2.4mg/kg weekly</li> <li>▪ <b>ARM C:</b> Docetaxel or paclitaxel</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Progression-free survival assessed by IRF</li> </ul>	<ul style="list-style-type: none"> <li>▪ Phase II: Dose-finding</li> <li>▪ Phase III: Overall survival</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q2 2012</li> <li>▪ Expect data in 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q3 2012</li> </ul>

# MabThera/Rituxan

## *Oncology development programme*

<b>Patient population</b>	<b>Previously untreated chronic lymphocytic leukemia</b>
<b>Phase/study</b>	<b>Phase Ib SAWYER</b> Subcutaneous study <i>Study being conducted ex-US</i>
<b># of patients</b>	N=225
<b>Design</b>	<ul style="list-style-type: none"> <li>▪ Two-stage design:             <ul style="list-style-type: none"> <li>- Stage 1 (dose-finding, N=55)</li> <li>- Stage 2 (N=170): CLL dose confirmation:</li> </ul> </li> <li>▪ <b>ARM A:</b> MabThera iv plus chemotherapy (fludarabine and cyclophosphamide)</li> <li>▪ <b>ARM B:</b> MabThera 1600mg sc plus chemotherapy (fludarabine and cyclophosphamide)</li> </ul>
<b>Primary endpoint</b>	<ul style="list-style-type: none"> <li>▪ Part 1: PK (dose selection)</li> <li>▪ Part 2: PK of MabThera iv versus MabThera sc (arm A vs arm B)</li> </ul>
<b>Status</b>	<ul style="list-style-type: none"> <li>▪ FPI (stage 2) Q3 2012</li> <li>▪ Stage 1 data presented at ASH 2012</li> </ul>

# Perjeta

*First in a new class of HER dimerization inhibitors*

Patient population	Neoadjuvant HER2-positive breast cancer		Adjuvant HER2-positive breast cancer
Phase/ study	Phase II NEOSPHERE	Phase II TRYPHAENA	Phase III APHINITY
# of patients	N=417	N=225	N=4,803
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Herceptin plus docetaxel</li> <li>▪ <b>ARM B:</b> Perjeta (840mg loading, 420mg q3w) plus Herceptin and docetaxel</li> <li>▪ <b>ARM C:</b> Perjeta plus Herceptin</li> <li>▪ <b>ARM D:</b> Perjeta plus docetaxel</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> FEC followed by Taxane with Herceptin and pertuzumab (H+P given concurrently)</li> <li>▪ <b>ARM B:</b> FEC followed by Taxane with Herceptin + pertuzumab (H+P given sequentially)</li> <li>▪ <b>ARM C:</b> TCH + pertuzumab (H+P given concurrently)</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Perjeta (840mg loading, 420 q3w) plus Herceptin for 52 weeks plus chemotherapy (6-8 cycles)</li> <li>▪ <b>ARM B:</b> Placebo plus Herceptin (52 weeks) plus chemotherapy (6-8 cycles)</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Pathologic complete response (pCR)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety</li> </ul>	<ul style="list-style-type: none"> <li>▪ Invasive disease-free survival (IDFS)</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Positive data presented at SABCS 2010</li> <li>▪ Biomarker data presented SABCS 2011</li> </ul>	<ul style="list-style-type: none"> <li>▪ Positive safety and efficacy data presented at SABCS 2011</li> </ul>	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q3 2013</li> <li>▪ Expect data in 2016</li> </ul>
	<ul style="list-style-type: none"> <li>▪ Filed in US Q2 2013</li> <li>▪ FDA approval granted Q3 2013</li> <li>▪ EU submission in preparation</li> </ul>		

FEC = Fluorouracil, Epirubicin, and Cyclophosphamide; TCH = Docetaxel, Carboplatin, Herceptin; SABCS=San Antonio Breast Cancer Symposium.

# Perjeta

*First in a new class of HER dimerization inhibitors*

Patient population	Second-line HER2-positive metastatic breast cancer	Advanced HER2-positive gastric cancer	Neoadjuvant/adjuvant HER2-positive breast cancer
Phase/study	<b>Phase III PHEREXA</b>	<b>Phase III JACOB</b>	<b>Phase II BERENICE</b>
# of patients	N=450	N=780	N=780
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Herceptin plus Xeloda</li> <li>▪ <b>ARM B:</b> Perjeta plus Herceptin and Xeloda</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Perjeta (840mg loading, 420mg q3w) plus Herceptin and chemotherapy</li> <li>▪ <b>ARM B:</b> Placebo plus Herceptin and chemotherapy</li> </ul>	<p>Neoadjuvant treatment:</p> <ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> ddAC q2w x4 cycles followed by weekly paclitaxel for 12 weeks, with P+H x4 cycles</li> <li>▪ <b>ARM B:</b> FEC+P+H x4 cycles followed by docetaxel+P+H x4 cycles</li> </ul> <p>Adjuvant treatment:</p> <ul style="list-style-type: none"> <li>▪ P+H q3w to complete 1 year of HER2 therapy</li> <li>▪ Hormonal and radiation therapy as indicated</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Overall survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q3 2013</li> <li>▪ Expect data in 2015</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q2 2013</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI expected Q3 2014</li> </ul>

ddAC=dose-dense doxorubicin plus cyclophosphamide; FEC = Fluorouracil, Epirubicin, and Cyclophosphamide;

# Zelboraf

*A selective novel small molecule that inhibits mutant BRAF*

Patient population	Adjuvant therapy in patients with resected cutaneous BRAF mutation positive melanoma
Phase/study	Phase III BRIM8
# of patients	N=725
Design	<ul style="list-style-type: none"> <li>▪ 52-week treatment</li> <li>▪ <b>ARM A:</b> Zelboraf 960mg bid</li> <li>▪ <b>ARM B:</b> Placebo</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Disease-free survival</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ FPI Q3 2012</li> </ul>

# Actemra/RoActemra

## *Interleukin 6 receptor inhibitor*

Patient population	Early moderate-to-severe rheumatoid arthritis	Moderate-to-severe rheumatoid arthritis	Moderate-to-severe rheumatoid arthritis
Phase/study	<b>Phase III FUNCTION</b>	<b>Phase III SUMMACTA</b> Subcutaneous study	<b>Pivotal Phase III BREVACTA</b> Subcutaneous study
# of patients	N=1,162	N=1,262	N=656
Design	<ul style="list-style-type: none"> <li>104 week treatment</li> <li><b>ARM A:</b> Actemra IV 8 mg/kg q4w plus placebo MTX</li> <li><b>ARM B:</b> Actemra IV 8 mg/kg q4w plus MTX</li> <li><b>ARM C:</b> Actemra IV 4 mg/kg q4w plus MTX</li> <li><b>ARM D:</b> MTX alone</li> </ul>	<ul style="list-style-type: none"> <li>Add-on to DMARD therapy</li> <li>Weekly dosing for 104 weeks</li> <li><b>ARM A:</b> Actemra SC 162mg weekly plus placebo IV q4w</li> <li><b>ARM B:</b> Actemra IV 8mg/kg q4w plus placebo SC weekly</li> </ul>	<ul style="list-style-type: none"> <li>Add-on to DMARD therapy</li> <li>Dosing every two weeks for 104 weeks</li> <li><b>ARM A:</b> Actemra SC 162mg q2w</li> <li><b>ARM B:</b> Placebo SC q2w</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>DAS28 remission at 24 weeks, 1 year and 2 years</li> </ul>	<ul style="list-style-type: none"> <li>ACR 20 at week 24</li> </ul>	<ul style="list-style-type: none"> <li>ACR 20 at week 24</li> </ul>
Status	<ul style="list-style-type: none"> <li>Primary endpoint met Q3 2012</li> <li>Data presented at EULAR 2013</li> <li>Filed in EU Q3 2013</li> </ul>	<ul style="list-style-type: none"> <li>Primary endpoint met Q2 2012</li> <li>Presented at ACR 2012</li> <li>Filed in US and EU in Q4 2012</li> </ul>	<ul style="list-style-type: none"> <li>Primary endpoint met Q3 2012</li> <li>Presented at ACR 2012</li> <li>Filed in US and EU in Q4 2012</li> </ul>
		<ul style="list-style-type: none"> <li>FDA approval received Q4 2013</li> <li>Approved in EU Q2 2014</li> </ul>	

In collaboration with Chugai

MTX=methotrexate; DMARD=Disease-Modifying Anti-Rheumatic Drugs

EULAR=The European League Against Rheumatism, ACR=American College of Rheumatology



# Actemra/RoActemra

## *Interleukin 6 receptor inhibitor*

Patient population	Systemic sclerosis	Giant Cell Arteritis
Phase/study	<b>Phase II faSScinate</b> Proof-of-concept study	<b>Phase III GiACTA</b>
# of patients	N=86	N=250
Design	<ul style="list-style-type: none"> <li>Blinded 48-week treatment with weekly dosing:               <ul style="list-style-type: none"> <li><b>ARM A:</b> Actemra SC 162mg</li> <li><b>ARM B:</b> Placebo SC</li> </ul> </li> <li>Open-label weekly dosing at weeks 49 to 96:               <ul style="list-style-type: none"> <li>Actemra SC 162mg</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Part 1: 52-week blinded period               <ul style="list-style-type: none"> <li><b>ARM A:</b> Actemra SC 162mg qw + 26 weeks prednisone taper</li> <li><b>ARM B:</b> Actemra SC 162mg q2w + 26 weeks prednisone taper</li> <li><b>ARM C:</b> Placebo+ 26 weeks prednisone taper</li> <li><b>ARM D:</b> Placebo+ 52 weeks prednisone taper</li> </ul> </li> <li>Part II:               <ul style="list-style-type: none"> <li>104-week open label extension – patients in remission followed off of the study drug; Patients with active disease receive open label Actemra SC 162mg qw</li> </ul> </li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Change in modified Rodnan skin score (mRSS) at week 24</li> <li>Safety</li> </ul>	<ul style="list-style-type: none"> <li>Proportion of patients in sustained remission at week 52</li> </ul>
Status	<ul style="list-style-type: none"> <li>Primary endpoint not met, trend with improved efficacy with longer treatment observed</li> <li>Adboard to advise on phase 3 held in June 2014</li> <li>Study is ongoing in a blinded manner to week 48</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q3 2013</li> </ul>

**Pipeline summary**

**Marketed products additional indications**

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**Global Development late-stage trials**

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**pRED (Roche Pharma Research & Early Development)**

**gRED (Genentech Research & Early Development)**

**Roche Group HY 2014 sales**

**Diagnostics**

**Foreign exchange rate information**

# Alectinib (ALK inhibitor, RG7853, AF802)

*New brain-penetrating inhibitor of anaplastic lymphoma kinase*

Patient population	ALK-positive crizotinib-naïve advanced NSCLC	ALK-positive advanced NSCLC patients who failed crizotinib treatment	Treatment-naïve ALK-positive advanced NSCLC
Phase/study	Phase I/II	Phase I/II	Phase III ALEX
# of patients	N=70	N=269	N=286
Design	<ul style="list-style-type: none"> <li>▪ <b>Part 1:</b> Dose escalation monotherapy</li> <li>▪ <b>Part 2:</b> Monotherapy, dose selected based on the results of Part 1</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>Part 1:</b> Dose escalation monotherapy</li> <li>▪ <b>Part 2:</b> Monotherapy, dose selected based on the results of Part 1</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> alectinib 600mg BID</li> <li>▪ <b>ARM B:</b> crizotinib 250mg BID</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Safety and efficacy</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety and efficacy</li> </ul>	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Study in crizotinib-naïve patients in Japan completed; crizotinib-failure patients in US ongoing</li> <li>▪ Data presented at ECC 2013</li> <li>▪ Japan study results: Lancet Oncology 2013 Jun;14(7):590-8</li> <li>▪ Approved in Japan with a brand name Alecensa July 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ Phase II FPI Q2 2013</li> </ul>	<ul style="list-style-type: none"> <li>▪ Expect FPI Q3 2014</li> </ul>
<ul style="list-style-type: none"> <li>▪ Breakthrough therapy designation granted by the FDA June 2013</li> </ul>			

In collaboration with Chugai  
ECC=European Cancer Congress

# Anti-PDL1 (MPDL3280A, RG7446)

*Novel approach in cancer immunotherapy*

Patient population	Metastatic NSCLC 2 <sup>nd</sup> line	Locally advanced or metastatic NSCLC PD-L1 positive	Locally advanced or metastatic NSCLC PD-L1 positive	Locally advanced or metastatic NSCLC (2 <sup>nd</sup> /3 <sup>rd</sup> line)	Non-small cell lung cancer
Phase/study	Phase III OAK	Phase II FIR	Phase II BIRCH	Phase II POPLAR	Phase I
# of patients	N=850	N=130	N=300	N=300	N=32
Design	<ul style="list-style-type: none"> <li>RG7446 1200mg q3w</li> <li>docetaxel</li> </ul>	<ul style="list-style-type: none"> <li>Single arm study</li> <li>1200mg of RG7446 q3w for maximum of 16 cycles</li> </ul>	<ul style="list-style-type: none"> <li>Single arm study</li> <li>1200mg of RG7446 q3w for maximum of 16 cycles</li> </ul>	<ul style="list-style-type: none"> <li><b>ARM A:</b> RG7446 1200mg IV q3w, up to 16 cycles</li> <li><b>ARM B:</b> Docetaxel IV q3w</li> </ul>	<ul style="list-style-type: none"> <li>RG7446 plus Tarceva<sup>1</sup></li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Overall survival</li> </ul>	<ul style="list-style-type: none"> <li>Overall response rate</li> </ul>	<ul style="list-style-type: none"> <li>Objective response rate</li> </ul>	<ul style="list-style-type: none"> <li>Overall survival</li> </ul>	<ul style="list-style-type: none"> <li>Safety</li> </ul>
Status	<ul style="list-style-type: none"> <li>FPI Q1 2014</li> </ul>	<ul style="list-style-type: none"> <li>Recruitment completed Q2 2014</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q1 2014</li> </ul>	<ul style="list-style-type: none"> <li>Recruitment completed Q2 2014</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q1 2014</li> </ul>

<sup>1</sup>Tarceva is a registered trademark of OSI Pharmaceuticals, LLC, a subsidiary of Astellas US, LLC;



# Anti-PDL1 (MPDL3280A, RG7446)

*Novel approach in cancer immunotherapy*

Patient population	Untreated advanced renal cell carcinoma	Locally advanced or metastatic urothelial bladder cancer	Solid tumors	Locally advanced or metastatic solid tumors
Phase/study	Phase II	Phase II	Phase I	Phase I
# of patients	N=150	N=330	N=154	N=200
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> RG7446 plus Avastin</li> <li>▪ <b>ARM B:</b> RG7446; following PD: RG7446 plus Avastin</li> <li>▪ <b>ARM C:</b> sunitinib; following PD: RG7446 plus Avastin</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>Cohort 1:</b> Treatment-naive and cisplatin-ineligible patients</li> <li>▪ <b>Cohort 2:</b> Patients with disease progression following or during platinum-containing treatment</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> RG7446 + Avastin</li> <li>▪ <b>ARM B:</b> RG7446 + Avastin + FOLFOX</li> <li>▪ <b>ARM C:</b> RG7446 + Avastin + carboplatin+paclitaxel</li> <li>▪ <b>ARM D:</b> RG7446 + Avastin + carboplatin+ pemetrexed</li> <li>▪ <b>ARM E:</b> RG7446 + Avastin + carboplatin+ nab-paclitaxel</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> RG7446 plus ipilimumab</li> <li>▪ <b>ARM B:</b> RG7446 plus interferon alpha-2b</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Progression free survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Objective response rate</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety/PK</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ FPI Q1 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q2 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q2 2012</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI expected Q3 2014</li> </ul>

# Anti-PDL1 (MPDL3280A, RG7446)

*Novel approach in cancer immunotherapy*

Patient population	Previously untreated metastatic melanoma BRAF mutation positive	Locally advanced or metastatic tumors	Solid tumors
Phase/study	Phase I	Phase I	Phase I
# of patients	N=44	N=90	N=344
Design	<ul style="list-style-type: none"> <li>Three-arm study with different doses of RG7446-Zelboraf<sup>1</sup> combination</li> </ul>	<ul style="list-style-type: none"> <li><b>ARM A:</b> Dose-finding – RG7446 plus cobimetinib<sup>2</sup></li> <li><b>ARM B:</b> Dose-expansion – RG7446 plus cobimetinib</li> </ul>	<ul style="list-style-type: none"> <li>Dose escalation study</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Safety/PK</li> </ul>	<ul style="list-style-type: none"> <li>Safety</li> </ul>	<ul style="list-style-type: none"> <li>Safety/PK</li> </ul>
Status	<ul style="list-style-type: none"> <li>FPI Q4 2012</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q4 2013</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q2 2011</li> <li>Initial efficacy data presented at ASCO 2013</li> <li>Updated data presented at ECC 2013</li> <li>Data from bladder cohort presented at ASCO 2014</li> </ul>

<sup>1</sup>Zelboraf in collaboration with Plexxikon, a member of Daiichi Sankyo Group;

<sup>2</sup>Cobimetinib in collaboration with Exelixis



# Bcl-2 inhibitor (RG7601, ABT-199/GDC-0199)

*Novel small molecule Bcl-2 selective inhibitor*

Patient population	Relapsed or Refractory CLL	Relapsed CLL and SLL	Relapsed/Refractory or previously untreated CLL	Relapsed/Refractory or previously untreated CLL
Phase/study	Phase III MURANO	Phase Ib	Phase I	Phase I
# of patients	N=370	N=50	N=70	N=74
Design	<ul style="list-style-type: none"><li>▪ <b>ARM A:</b> RG7601 plus Rituxan</li><li>▪ <b>ARM B:</b> Rituxan plus bendamustine</li></ul>	<ul style="list-style-type: none"><li>▪ Dose-escalation study in combination with MabThera/Rituxan</li></ul>	<ul style="list-style-type: none"><li>▪ RG7601 in combination with MabThera/Rituxan and bendamustine</li></ul>	<ul style="list-style-type: none"><li>▪ RG7601 in combination with Gazyva</li></ul>
Primary endpoint	<ul style="list-style-type: none"><li>▪ Safety/MTD</li></ul>	<ul style="list-style-type: none"><li>▪ Safety/MTD</li></ul>	<ul style="list-style-type: none"><li>▪ Safety/MTD</li></ul>	<ul style="list-style-type: none"><li>▪ Safety/MTD</li></ul>
Status	<ul style="list-style-type: none"><li>▪ FPI Q1 2014</li></ul>	<ul style="list-style-type: none"><li>▪ FPI Q3 2012</li><li>▪ Data presented at ASCO 2014</li></ul>	<ul style="list-style-type: none"><li>▪ FPI Q2 2013</li></ul>	<ul style="list-style-type: none"><li>▪ FPI Q1 2014</li></ul>

Joint project with AbbVie in collaboration with WEHI (The Walter and Eliza Hall Institute)  
CLL=Chronic Lymphocytic Leukemia; NHL=Non-Hodgkin's Lymphoma; SLL=Small Lymphocytic Lymphoma  
ASH=American Society of Hematology; ASCO=American Society of Clinical Oncology



# Bcl-2 inhibitor (RG7601, ABT-199/GDC-0199)

*Novel small molecule Bcl-2 selective inhibitor*

Patient population	Relapsed/Refractory CLL with 17p deletion	Relapsed or Refractory follicular non-Hodgkin's lymphoma
Phase/study	Phase II	Phase II
# of patients	N=100	N=156
Design	<ul style="list-style-type: none"><li>▪ Single-agent RG7601</li></ul>	<ul style="list-style-type: none"><li>▪ <b>ARM A:</b> RG7601 plus Rituxan</li><li>▪ <b>ARM B:</b> RG7601 plus Rituxan plus bendamustine</li><li>▪ <b>ARM C:</b> Rituxan plus bendamustine</li></ul>
Primary endpoint	<ul style="list-style-type: none"><li>▪ Safety/MTD</li></ul>	<ul style="list-style-type: none"><li>▪ Overall response rate</li></ul>
Status	<ul style="list-style-type: none"><li>▪ FPI Q3 2013</li></ul>	<ul style="list-style-type: none"><li>▪ Expect FPI Q3 2014</li></ul>

Joint project with AbbVie in collaboration with WEHI (The Walter and Eliza Hall Institute)



# Bcl-2 inhibitor (RG7601, ABT-199/GDC-0199)

*Novel small molecule Bcl-2 selective inhibitor*

Patient population	Front-line DLBCL	Relapsed or Refractory NHL	Relapsed/Refractory CLL and NHL
Phase/study	Phase I/II	Phase I	Phase I
# of patients	N=230	N=40	N=121
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> RG7601+R-CHOP</li> <li>▪ <b>ARM B:</b> RG7601+G-CHOP</li> </ul>	<ul style="list-style-type: none"> <li>▪ Dose escalation of RG7601 in combination with Rituxan and bendamustine</li> </ul>	<ul style="list-style-type: none"> <li>▪ Dose-escalation study</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Safety and efficacy</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety/MTD</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety/PK/Response rate</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ FPI Q2 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q2 2012</li> <li>▪ Study resumed Q3 2013</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q2 2011</li> <li>▪ CLL and NHL data presented at ASCO 2013</li> <li>▪ Updated CLL and SLL data presented at ASH 2013</li> <li>▪ Updated CLL, SLL and NHL (DLBCL and FL) data presented at ASCO 2014</li> </ul>

Joint project with AbbVie in collaboration with WEHI (The Walter and Eliza Hall Institute)  
 CLL=Chronic Lymphocytic Leukemia; NHL=Non-Hodgkin's Lymphoma; SLL=Small Lymphocytic Lymphoma  
 ASH=American Society of Hematology; ASCO=American Society of Clinical Oncology



# Bcl-2 inhibitor (RG7601, ABT-199/GDC-0199)

*Novel small molecule Bcl-2 selective inhibitor*

Patient population	Relapsed/Refractory multiple myeloma	Relapsed/Refractory multiple myeloma	Acute myelogenous leukemia (AML)
Phase/study	Phase I	Phase I	Phase I/II
# of patients	N=30	N=30	N=54
Design	<ul style="list-style-type: none"> <li>Patients receiving Bortezomib and Dexamethasone as standard therapy:</li> <li>Dose escalation cohort: RG7601+bortezomib+dexamethasone</li> <li>Safety expansion cohort: RG7601+bortezomib+dexamethasone</li> </ul>	<ul style="list-style-type: none"> <li>Dose escalation cohort</li> <li>Safety expansion cohort</li> </ul>	<ul style="list-style-type: none"> <li>Dose escalation of RG7601</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Safety/MTD</li> </ul>	<ul style="list-style-type: none"> <li>Safety/MTD</li> </ul>	<ul style="list-style-type: none"> <li>Overall response rate</li> </ul>
Status	<ul style="list-style-type: none"> <li>FPI Q4 2012</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q4 2012</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q4 2013</li> </ul>

Joint project with AbbVie in collaboration with WEHI (The Walter and Eliza Hall Institute)

# Cobimetinib (RG7421, GDC-0973)

*Selective small molecule inhibitor of mitogen-activated protein kinase kinase*

Patient population	Previously untreated metastatic melanoma BRAF mutation positive	Metastatic melanoma BRAF mutation positive	Locally advanced or metastatic tumors	Locally advanced or metastatic tumors with mutant KRAS
Phase/study	Phase III coBRIM	Phase Ib BRIM7	Phase I	Phase I
# of patients	N=500	N=~100	N=90	N=50
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Zelboraf<sup>1</sup> plus cobimetinib</li> <li>▪ <b>ARM B:</b> Zelboraf<sup>1</sup> plus placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ Dose escalation study evaluating Zelboraf<sup>1</sup> plus cobimetinib</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Dose-finding - cobimetinib plus RG7446 (anti-PDL1)</li> <li>▪ <b>ARM B:</b> Dose-expansion - cobimetinib plus RG7446 (anti-PDL1)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Dose finding of cobimetinib plus RG7597 (anti-HER3/EGFR DAF)</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety/PK</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Enrollment completed Q1 2014</li> <li>▪ Primary endpoint met July 2014</li> <li>▪ Data to be presented H2 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ Enrollment completed</li> <li>▪ Final data presented at EADO and ASCO 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q4 2013</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q4 2013</li> </ul>

In collaboration with Exelixis

<sup>1</sup>Zelboraf In collaboration with Plexxikon, a member of Daiichi Sankyo Group; <sup>2</sup>ipatasertib in collaboration with Array BioPharma  
EADO=European Association of Dermato-Oncology; ASCO=American Society of Clinical Oncology

# Pictilisib (RG7321, GDC-0941)

*Pan-PI3 kinase inhibitor with potential activity in multiple cancers*

Patient population	2L ER-positive metastatic breast cancer	Previously untreated advanced or recurrent NSCLC	Locally recurrent or metastatic HER2-negative HR-positive breast cancer
Phase	Phase II FERGI	Phase II FIGARO	Phase II PEGGY
# of patients	N=340	N=302	N=180
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> pictilisib plus hormonal therapy</li> <li>▪ <b>ARM B:</b> apitolisib plus hormonal therapy (ARM B discontinued)</li> <li>▪ <b>ARM C:</b> Hormonal therapy + placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Pictilisib + carboplatin + paclitaxel</li> <li>▪ <b>ARM B:</b> Placebo + carboplatin + paclitaxel</li> <li>▪ <b>ARM C:</b> Pictilisib+ carboplatin + paclitaxel + bevacizumab</li> <li>▪ <b>ARM D:</b> Pictilisib+ carboplatin + paclitaxel + bevacizumab</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Pictilisib+ paclitaxel</li> <li>▪ <b>ARM B:</b> Placebo + paclitaxel</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q1 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q1 2012</li> </ul>	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q2 2014</li> </ul>

# Polatuzumab vedotin (RG7596)

*Antibody drug conjugate targeting CD79b for the treatment of B-cell malignancies*

Patient population	Non-Hodgkin's lymphoma	Non-Hodgkin's lymphoma
Phase	<b>Phase II ROMULUS</b>	<b>Phase Ib</b>
# of patients	N=120	N=90
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> RG7593 plus Rituxan</li> <li>▪ <b>ARM B:</b> RG7596 plus Rituxan</li> </ul>	<ul style="list-style-type: none"> <li>▪ Dose escalation study in combination with Rituxan and chemotherapy</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Safety and anti-tumor activity</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q1 2014</li> <li>▪ Initial data presented at ASCO 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q4 2013</li> </ul>

# Taselisib(RG7604, GDC-0032)

*Beta isoform sparing PI3 kinase inhibitor targeting commonly mutated oncogene*

Patient population	Solid tumors and HER2-negative HR-positive breast cancer	HER2-negative locally recurrent or metastatic breast cancer	PI3KCAmut-pos. 2L squamous NSCLC Lung Master Protocol
Phase	Phase I/II	Phase I	Phase II Lung-MAP
# of patients	N=260	N=65	N=120
Design	<ul style="list-style-type: none"> <li>Phase I</li> <li>RG7604</li> <li>RG7604 plus letrozole or fulvestrant</li> <li>Phase II</li> <li>RG7604 (multiple doses) plus letrozole or fulvestrant</li> </ul>	<ul style="list-style-type: none"> <li>RG7604 plus docetaxel</li> <li>RG7604 plus paclitaxel</li> </ul>	<ul style="list-style-type: none"> <li>RG7604 vs. chemo</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Safety/PK/efficacy</li> </ul>	<ul style="list-style-type: none"> <li>Safety</li> </ul>	<ul style="list-style-type: none"> <li>Progression-free survival</li> </ul>
Status	<ul style="list-style-type: none"> <li>Recruitment completed Q2 2014</li> <li>Data presented at SABCS 2013</li> <li>Biomarker data presented at AACR 2014</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q2 2013</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q2 2014</li> </ul>

# Bitopertin (GlyT-1, RG1678)

*A small molecule first-in-class glycine reuptake inhibitor (GRI)*

Patient population	Sub-optimally controlled symptoms of schizophrenia	Obsessive-compulsive disorder
Phase/study	Phase III NIGHTLYTE	Phase II SKYLYTE
# of patients	N=600	N=99
Design	<ul style="list-style-type: none"> <li>Add-on therapy to anti-psychotics</li> <li>52-week treatment period</li> <li><b>ARM A:</b> bitopertin daily (10 mg)</li> <li><b>ARM B:</b> bitopertin daily (20 mg)</li> <li><b>ARM C:</b> Placebo</li> </ul>	<ul style="list-style-type: none"> <li>16-week treatment period</li> <li>Background therapy of selective serotonin reuptake inhibitors (SSRI)               <ul style="list-style-type: none"> <li><b>ARM A:</b> bitopertin daily (30 mg)</li> <li><b>ARM B:</b> bitopertin daily (10 mg)</li> <li><b>ARM C:</b> Placebo</li> </ul> </li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>PANSS positive symptom factor at week 12</li> </ul>	<ul style="list-style-type: none"> <li>Change in total score on Yale-Brown Obsessive Compulsive Scale</li> </ul>
Status	<ul style="list-style-type: none"> <li>FPI Q4 2010</li> <li>10 mg dose arm met primary endpoint Q2 2014</li> <li>Further steps under evaluation</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q4 2012</li> </ul>



# Gantenerumab (RG1450)

*Fully human monoclonal antibody against amyloid-beta*

Patient population	Prodromal Alzheimer's Disease	Mild Alzheimer's Disease
Phase/study	Phase II/III SCarlet RoAD	Phase III Marguerite Road
# of patients	N=799	N=1,000
Design	<ul style="list-style-type: none"><li>▪ 104-week subcutaneous treatment period</li><li>▪ <b>ARM A:</b> Gantenerumab (225 mg)</li><li>▪ <b>ARM B:</b> Gantenerumab (105 mg)</li><li>▪ <b>ARM C:</b> Placebo</li></ul>	<ul style="list-style-type: none"><li>▪ 104-week subcutaneous treatment period</li><li>▪ <b>ARM A:</b> Gantenerumab</li><li>▪ <b>ARM B:</b> Placebo</li></ul>
Primary endpoint	<ul style="list-style-type: none"><li>▪ Change in CDR-SOB at 2 years</li><li>▪ Sub-study: change in brain amyloid by PET at 2 years</li></ul>	<ul style="list-style-type: none"><li>▪ Change in ADAS-Cog and ADCS-ADL at 2 years (co-primary)</li></ul>
Status	<ul style="list-style-type: none"><li>▪ Phase I PET data: Archives of Neurology 2012 Feb;69(2):198-207</li><li>▪ Enrollment completed Q4 2013</li><li>▪ Data expected in 2016</li></ul>	<ul style="list-style-type: none"><li>▪ FPI Q1 2014</li></ul>

In collaboration with Morphosys  
CDR-SOB=Clinical Dementia Rating scale Sum of Boxes





# Etrolizumab (RG7413)

*A humanized monoclonal antibody against beta 7 integrin*

Patient population	Ulcerative colitis patients who are TNF naïve		
Phase/study	<b>Phase III HIBISCUS I</b> Induction study	<b>Phase III HIBISCUS II</b> Induction study	<b>Phase III GARDENIA</b> Sustained remission study
# of patients	N=350	N=350	N=720
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> etrolizumab 105mg SC q4w + adalimumab placebo</li> <li>▪ <b>ARM B:</b> etrolizumab placebo + adalimumab</li> <li>▪ <b>ARM C:</b> etrolizumab placebo + adalimumab placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> etrolizumab 105mg SC q4w + adalimumab placebo</li> <li>▪ <b>ARM B:</b> etrolizumab placebo + adalimumab</li> <li>▪ <b>ARM C:</b> etrolizumab placebo + adalimumab placebo</li> </ul>	Time on treatment 54 weeks <ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> etrolizumab 105mg SC q4w + placebo IV</li> <li>▪ <b>ARM B:</b> placebo SC q4w + adalimumab SC</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Induction of remission compared with placebo as determined by the Mayo Clinic Score (MCS) at week 10</li> </ul>	<ul style="list-style-type: none"> <li>▪ Induction of remission compared with placebo as determined by the Mayo Clinic Score (MCS) at week 10</li> </ul>	<ul style="list-style-type: none"> <li>▪ Proportion of patients in sustained clinical remission as determined by Mayo Clinic Score (MCS) at weeks 10, 30 and 54</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Expect FPI Q3 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ Expect FPI Q3 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ Expect FPI Q3 2014</li> </ul>

# Etrolizumab (RG7413)

*A humanized monoclonal antibody against beta 7 integrin*

Patient population	UC patient who are TNF naïve and refractory or intolerant to immunosuppressant and/or corticosteroid treatment	UC patient who are refractory or intolerant of TNF inhibitors
Phase/study	<p><b>Phase III LAUREL</b> Maintenance study</p>	<p><b>Phase III HICKORY</b> Induction and maintenance study</p>
# of patients	N=350	N=800
Design	<p>Induction phase:</p> <ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> open label etrolizumab 105mg SC q4w</li> </ul> <p>Maintenance study:</p> <ul style="list-style-type: none"> <li>▪ <b>ARM B:</b> etrolizumab 105mg SC q4w</li> <li>▪ <b>ARM C:</b> placebo</li> </ul>	<p>Cohort 1 (open-label):</p> <ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> etrolizumab induction + placebo maintenance</li> <li>▪ <b>ARM B:</b> etrolizumab induction + maintenance</li> </ul> <p>Cohort 2 (blinded):</p> <ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> etrolizumab induction + maintenance</li> <li>▪ <b>ARM B:</b> placebo induction + maintenance</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Maintenance of remission (at week 62) among randomized patients in remission at Week 10 as determined by the Mayo Clinic Score (MCS)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Clinical Remission (Mayo Clinic Score, MCS) at Week 14</li> <li>▪ Remission maintenance (by MCS, at Week 66) among patients with remission at Week 14</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Expect FPI Q3 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q2 2014</li> </ul>



# Etrolizumab (RG7413)

*A humanized monoclonal antibody against beta 7 integrin*

Patient population	Moderate to severe ulcerative colitis	Moderate to severe ulcerative colitis
Phase/study	<b>Phase II SPRUCE</b> Open label extension study	<b>Phase III COTTONWOOD</b> Open label extension study
# of patients	N=116	N=2,600
Design	<ul style="list-style-type: none"> <li>Patients who were enrolled in EUCALYPTUS study and meet enrollment criteria will receive etrolizumab 105 sc q4w</li> </ul>	<ul style="list-style-type: none"> <li>Patients who were previously enrolled in etrolizumab phase III studies and meet enrollment criteria will receive etrolizumab 105 sc q4w</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Safety</li> </ul>	<ul style="list-style-type: none"> <li>Long-term efficacy as determined by partial Mayo Clinic Score (pMCS)</li> <li>Incidence of adverse events</li> </ul>
Status	<ul style="list-style-type: none"> <li>Recruitment completed</li> </ul>	<ul style="list-style-type: none"> <li>Expect FPI Q3 2014</li> </ul>

# HCV: Mericitabine, danoprevir, setrobuvir

*IFN-free combination of different direct-acting antivirals in treatment-naïve patients*

<b>Patient population</b>	<b>Hepatitis C patients Treatment-naïve or null-responders to interferon-based treatment</b>
<b>Phase/study</b>	<b>Phase II ANNAPURNA</b>
<b># of patients</b>	N=110
<b>Design</b>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> GT1a including setrobuvir, danoprevir, ritonavir, ribavirin and mericitabine</li> <li>▪ <b>ARM B:</b> GT1a including setrobuvir, danoprevir, ritonavir, ribavirin and mericitabine</li> <li>▪ <b>ARM C:</b> GT1a including setrobuvir, danoprevir, ritonavir and ribavirin</li> <li>▪ <b>ARM D:</b> GT1b including setrobuvir, danoprevir, ritonavir, ribavirin and mericitabine</li> <li>▪ <b>ARM E:</b> GT1b including setrobuvir, danoprevir, ritonavir and ribavirin</li> </ul>
<b>Primary endpoint</b>	<ul style="list-style-type: none"> <li>▪ Sustained virological response at week 12 after the end of the study treatment</li> </ul>
<b>Status</b>	<ul style="list-style-type: none"> <li>▪ FPI Q2 2012</li> <li>▪ Recruitment Part 1 completed in Q4 2012</li> <li>▪ Data presented at APASL 2014</li> <li>▪ Publication is expected in 2015</li> </ul>

Mericitabine (RG7128) licensed from Pharmasset, now part of Gilead; Danoprevir=RG7227; Setrobuvir=RG7790  
 APASL=Asian Pacific Association for the Study of the Liver



# HCV: Danoprevir (RG7227)

*IFN-based triple regimen for treatment-naïve patients of Asian origin conducted in China*

<b>Patient population</b>	<b>Treatment-naïve patients of Asian origin with chronic hepatitis C genotype 1 with or without cirrhosis</b>
<b>Phase/study</b>	<b>Phase II DAPSANG</b>
<b># of patients</b>	N=61
<b>Design</b>	<ul style="list-style-type: none"><li>▪ <b>Without cirrhosis:</b></li><li>▪ <b>ARM A:</b> Danoprevir 125 mg bid + Ritonavir 100mg bid+ Pegasys + Copegus for 12 weeks</li><li>▪ <b>With compensated cirrhosis:</b></li><li>▪ <b>ARM B:</b> Danoprevir 125 mg bid + Ritonavir 100mg bid+ Pegasys + Copegus for 24 weeks</li></ul>
<b>Primary endpoint</b>	<ul style="list-style-type: none"><li>▪ Safety:</li></ul>
<b>Status</b>	<ul style="list-style-type: none"><li>▪ Recruitment completed Q4 2013</li><li>▪ Study ongoing</li></ul>



# Lampalizumab (RG7417)

*Antibody fragment to selectively block activation of alternative complement pathway*

<b>Patient population</b>	<b>Geographic atrophy (GA) secondary to age-related macular degeneration</b>
<b>Phase/study</b>	<b>Phase Ib/II MAHALO</b>
<b># of patients</b>	N=143
<b>Design</b>	<ul style="list-style-type: none"><li>▪ <b>Part 1: Open-label</b></li><li>▪ Multiple dosing</li><li>▪ <b>Part 2: Randomized</b></li><li>▪ <b>ARM A:</b> Lampalizumab injection</li><li>▪ <b>ARM B:</b> Sham injection</li></ul>
<b>Primary endpoint</b>	<ul style="list-style-type: none"><li>▪ Part 1: Safety</li><li>▪ Part 2: Growth rate of GA lesions at month 18</li></ul>
<b>Status</b>	<ul style="list-style-type: none"><li>▪ Primary endpoint met Q3 2013</li><li>▪ Efficacy data including biomarker presented at AAO 2013</li></ul>

# Lebrikizumab (RG3637)

*A humanized monoclonal antibody designed to bind specifically to IL-13*

	Severe uncontrolled adult asthma	
Patient population	Adult patients whose asthma is uncontrolled with inhaled corticosteroids and a second controller medication	
Phase/study	Phase III LAVOLTA I	Phase III LAVOLTA II
# of patients	N=1,050	N=1,050
Design	<ul style="list-style-type: none"> <li>▪ Subcutaneous lebrikizumab q4w on top of SOC for 52 weeks safety follow-up</li> <li>▪ <b>ARM A:</b> Lebrikizumab high dose</li> <li>▪ <b>ARM B:</b> Lebrikizumab low dose</li> <li>▪ <b>ARM C:</b> Placebo</li> <li>▪ Patients will be tested for periostin level</li> </ul>	<ul style="list-style-type: none"> <li>▪ Subcutaneous lebrikizumab q4w on top of SOC for 52 weeks safety follow-up</li> <li>▪ <b>ARM A:</b> Lebrikizumab high dose</li> <li>▪ <b>ARM B:</b> Lebrikizumab low dose</li> <li>▪ <b>ARM C:</b> Placebo</li> <li>▪ Patients will be tested for periostin level</li> </ul>
Primary endpoint	▪ Rate of asthma exacerbations during the 52-week placebo-controlled period	▪ Rate of asthma exacerbations during the 52-week placebo-controlled period
Status	▪ FPI Q3 2013	▪ FPI Q3 2013



# Lebrikizumab (RG3637)

*A humanized monoclonal antibody designed to bind specifically to IL-13*

Patient population	Adolescent patients whose asthma is uncontrolled with inhaled corticosteroids and a second controller medication	Idiopathic pulmonary fibrosis
Phase/study	Phase III <b>ACOUSTICS</b>	Phase II <b>RIFF</b>
# of patients	N=375	N=250
Design	<ul style="list-style-type: none"> <li>▪ Subcutaneous lebrikizumab q4w on top of SOC for 52 weeks with 52 week double-blind active treatment extension</li> <li>▪ <b>ARM A:</b> Lebrikizumab high dose, week 1-104 or week 52-104</li> <li>▪ <b>ARM B:</b> Lebrikizumab low dose, week 1-104 or week 52-104</li> <li>▪ <b>ARM C:</b> Placebo, week 1-52</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Lebrikizumab SC q4w</li> <li>▪ <b>ARM B:</b> Placebo</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Rate of asthma exacerbations during the 52-week placebo-controlled period</li> </ul>	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ FPI Q3 2013</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q4 2013</li> </ul>



# Lebrikizumab (RG3637)

*A humanized monoclonal antibody designed to bind specifically to IL-13*

Patient population	Adult asthma	Adult asthma mild-to-moderate patients
Phase/study	Phase II VOCALS	Phase III STRETTO
# of patients	N=130	N=300
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Lebrikizumab SC q4w</li> <li>▪ <b>ARM B:</b> Placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Lebrikizumab SC q4w</li> <li>▪ <b>ARM B:</b> Placebo</li> <li>▪ <b>ARM C:</b> Montelukast</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Relative change in OCS dose at week 44</li> </ul>	<ul style="list-style-type: none"> <li>▪ Absolute change in FEV1 at week 12</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ FPI Q1 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q2 2014</li> </ul>

# Ocrelizumab (RG1594)

*2nd generation anti-CD20 monoclonal antibody*

Patient population	Relapsing multiple sclerosis (RMS)		Primary progressive multiple sclerosis (PPMS)
Phase/study	Phase III OPERA I	Phase III OPERA II	Phase III ORATORIO
# of patients	N=800	N=800	N=630
Design	<ul style="list-style-type: none"> <li>96-week treatment period:</li> <li><b>ARM A:</b> Ocrelizumab 2x 300 mg iv followed by 600 mg iv every 24 weeks</li> <li><b>ARM B:</b> Interferon <math>\beta</math>-1a</li> </ul>	<ul style="list-style-type: none"> <li>96-week treatment period:</li> <li><b>ARM A:</b> Ocrelizumab 2x 300 mg iv followed by 600 mg iv every 24 weeks</li> <li><b>ARM B:</b> Interferon <math>\beta</math>-1a</li> </ul>	<ul style="list-style-type: none"> <li>120-week treatment period:</li> <li><b>ARM A:</b> Ocrelizumab 2x 300 mg iv every 24 weeks</li> <li><b>ARM B:</b> Placebo</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Annualized relapse rate at 96 weeks versus Rebif</li> </ul>	<ul style="list-style-type: none"> <li>Annualized relapse rate at 96 weeks versus Rebif</li> </ul>	<ul style="list-style-type: none"> <li>Sustained disability progression versus placebo by Expanded Disability Status Scale (EDSS)</li> </ul>
Status	<ul style="list-style-type: none"> <li>Enrolment completed Q1 2013</li> <li>Expect data in 2015</li> </ul>	<ul style="list-style-type: none"> <li>Enrolment completed Q1 2013</li> <li>Expect data in 2015</li> </ul>	<ul style="list-style-type: none"> <li>Enrolment completed Q1 2013</li> <li>Expect data in 2015</li> </ul>

**Pipeline summary**

**Marketed products additional indications**

**Global Development late-stage trials**

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**pRED (Roche Pharma Research & Early Development)**

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**gRED (Genentech Research & Early Development)**

**Roche Group HY 2014 sales**

**Diagnostics**

**Foreign exchange rate information**

# Oncology development programmes

## *Small molecules*

Molecule	MDM2 (4) antagonist (RG7388)		MDM2 (4) ant. IV prodrug (RG7775)	LSD1 inhibitor (RG6016)	Raf/MEK inhibitor (RG7304, CKI27)
Patient population	Solid tumors	Acute myeloid leukemia	Advanced cancers including AML	Acute Leukemia	Solid tumors
Phase	Phase I	Phase I	Phase I	Phase I	Phase I
# of patients	N=100	N=100	N=90	N=30	N=52
Design	<ul style="list-style-type: none"> <li>Multiple ascending dose-escalation study</li> </ul>	<ul style="list-style-type: none"> <li>Multiple ascending dose-escalation study</li> </ul>	Dose-escalation study <ul style="list-style-type: none"> <li><b>ARM A:</b> patients with advanced solid tumors</li> <li><b>ARM B:</b> patients with r/r AML</li> </ul>	<ul style="list-style-type: none"> <li>Multiple ascending dose-escalation study</li> </ul>	<ul style="list-style-type: none"> <li>Dose-escalation to MTD</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>MTD</li> </ul>	<ul style="list-style-type: none"> <li>MTD</li> </ul>	<ul style="list-style-type: none"> <li>MTD</li> </ul>	<ul style="list-style-type: none"> <li>MTD</li> </ul>	<ul style="list-style-type: none"> <li>MTD and tumor assessment</li> </ul>
Status	<ul style="list-style-type: none"> <li>Completed Q2 2013</li> <li>Data presented at ASCO 2014</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q1 2013</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q2 2014</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q1 2014</li> </ul>	<ul style="list-style-type: none"> <li>Initiated Q4 2008</li> <li>Enrolment stopped in Q4 2010</li> </ul>
Collaborator				Oryzon Genomics, S.A.	Chugai

# Oncology development programmes

## *Monoclonal antibodies*

Molecule	Anti-glypican-3 MAb (RG7686, GC33)	
Patient population	Metastatic liver cancer (hepatocellular carcinoma)	2L metastatic liver cancer (hepatocellular carcinoma)
Phase	<b>Phase Ib</b>	<b>Phase II</b>
# of patients	N= 40-50	N=171
Design	<ul style="list-style-type: none"> <li>▪ Study US monotherapy</li> <li>▪ Study Japan monotherapy</li> <li>▪ Dose escalation study in combo with SOC</li> </ul>	<ul style="list-style-type: none"> <li>▪ Adaptive design study Double blind randomized 2:1 RG7686 : placebo</li> <li>▪ Patients are stratified according to the level of GPC-3 expression in tumor</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Safety and tolerability</li> </ul>	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q4 2013</li> <li>▪ Dose escalation completed for US and Japan monotherapy and combination therapy studies</li> <li>▪ Patients continuing on combination treatment with SoC on study</li> </ul>	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q1 2013</li> <li>▪ Results under internal review</li> </ul>
Collaborator	Chugai	

SOC=standard of care

# Oncology development programmes

## *Monoclonal antibodies (continued)*

Molecule	GE-huMAb HER3 (RG7116)	
Patient population	Solid tumors	HER2-low and HER3-positive metastatic breast cancer
Phase	Phase I	Phase I
# of patients	N=105	N=40
Design	<ul style="list-style-type: none"> <li>▪ Multiple ascending dose study with extension cohorts and imaging sub-study</li> <li>▪ Combination arms with HER1-targeted therapies (erlotinib, cetuximab)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Multiple ascending dose of RG7116 in combination with Perjeta and paclitaxel</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Safety, PK</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ FPI Q4 2011</li> <li>▪ Biomarker data presented at AACR 2013</li> <li>▪ Data presented at ASCO 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q3 2013</li> </ul>

# Oncology development programmes

## *Monoclonal antibodies (continued)*

Molecule	Ang2-VEGF MAb (RG7221)		CSF-1R huMAb (RG7155)	CEA-IL2v (RG7813)
Patient population	Solid tumors	Metastatic colorectal cancer	Solid tumors and PVNS	Solid tumors
Phase	Phase I	Phase II McCAVE	Phase I/II	Phase I
# of patients	N≈80	N=140	N≈140	N~110
Design	<ul style="list-style-type: none"> <li>Multiple ascending dose study with extension cohorts in solid tumors to assess the PD effects and platinum resistant ovarian cancer</li> </ul>	<ul style="list-style-type: none"> <li><b>ARM A:</b> Induction: Avastin+mFOLFOX-6; followed by maintenance: Avastin+5-FU/LV</li> <li><b>ARM B:</b> Induction: RG7221+mFOLFOX-6; followed by maintenance: RG7221+5-FU/LV</li> </ul>	<ul style="list-style-type: none"> <li>Multiple ascending dose study +/- paclitaxel with extension cohorts</li> </ul>	<ul style="list-style-type: none"> <li>Single and multiple dose escalation study with extension cohorts</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Safety, PK</li> </ul>	<ul style="list-style-type: none"> <li>PFS</li> </ul>	<ul style="list-style-type: none"> <li>Safety, PK, PD &amp; preliminary clinical activity</li> </ul>	<ul style="list-style-type: none"> <li>Safety, PK, PD</li> </ul>
Status	<ul style="list-style-type: none"> <li>FPI Q4 2012</li> <li>Dose escalation data presented at ASCO 2014</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q2 2014</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q4 2011</li> <li>Biomarker data presented at AACR 2013 and AACR 2014</li> <li>Data presented at ASCO 2014</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q4 2013</li> </ul>

# Neuroscience development programmes

Metabolic glutamate receptor pathway				
Molecule	Decoglurant (mGlu2 NAM, RG1578)	Basimglurant (mGlu5 NAM, RG7090)		
Patient population	Adjunctive Treatment of Major Depressive Disorder	Adjunctive Treatment of Major Depressive Disorder	Fragile X Syndrome	
Phase/study	Phase II ArtDeCo	Phase II Marigold	Phase II Fragxis	Phase II FoXtail
# of patients	N=480	N=300	N=180	N=45 Pediatric patients
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> decoglurant 5 mg</li> <li>▪ <b>ARM B:</b> decoglurant 15 mg</li> <li>▪ <b>ARM C:</b> decoglurant 30 mg</li> <li>▪ <b>ARM D:</b> matching placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> basimglurant 0.5 mg</li> <li>▪ <b>ARM B:</b> basimglurant 1.5 mg</li> <li>▪ <b>ARM C:</b> matching placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> basimglurant 0.5 mg</li> <li>▪ <b>ARM B:</b> basimglurant 1.5 mg</li> <li>▪ <b>ARM C:</b> matching placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> basimglurant dose A</li> <li>▪ <b>ARM B:</b> basimglurant dose B</li> <li>▪ <b>ARM C:</b> matching placebo</li> </ul>
Primary Endpoint	<ul style="list-style-type: none"> <li>▪ Efficacy - Montgomery Asberg Depression Rating Scale</li> </ul>	<ul style="list-style-type: none"> <li>▪ Efficacy - Montgomery Asberg Depression Rating Scale</li> </ul>	<ul style="list-style-type: none"> <li>▪ Efficacy, safety and tolerability</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety</li> <li>▪ Exploratory efficacy and tolerability</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Recruitment completed</li> <li>▪ Data in-house under review</li> </ul>	<ul style="list-style-type: none"> <li>▪ Study completed</li> <li>▪ Data in-house under review</li> <li>▪ Data presentation planned H2 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ Recruitment completed</li> <li>▪ Data in-house under review</li> </ul>	<ul style="list-style-type: none"> <li>▪ Recruitment completed</li> <li>▪ Data in-house under review</li> </ul>



# Neuroscience development programmes

Molecule	PDE10A inhibitor (RG7203)	TAAR1 agonist (RG7410)	GABRA5 NAM (RG1662)	mGlu5 PAM (RG7342)
Patient population	Schizophrenia	Schizophrenia	Down Syndrome	Schizophrenia
Phase	Phase I	Phase I	Phase IIB CLEMATIS	Phase I
# of patients	N=48	N= up to 56 (Part 1 and 2)	N=180	N=93
Design	<ul style="list-style-type: none"> <li>Multiple dose, double-blind study in schizophrenia patients</li> <li><b>ARM A:</b> RG7203 plus risperidone</li> <li><b>ARM B:</b> placebo plus risperidone</li> </ul>	<ul style="list-style-type: none"> <li><b>Part 1:</b> Double-blind, randomized, placebo controlled, sequential multiple ascending dose study in HVs</li> <li><b>Part 2:</b> Double-blind, randomized, placebo controlled, parallel group, multiple dose study in type 2 diabetes</li> </ul>	<ul style="list-style-type: none"> <li>For 26 weeks patients will receive:</li> <li><b>ARM A:</b> RG1662 120mg twice daily</li> <li><b>ARM B:</b> RG1662 120mg twice daily</li> <li><b>ARM C:</b> Placebo</li> </ul>	<ul style="list-style-type: none"> <li>Single ascending dose of RG7342</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Safety, tolerability, PK</li> </ul>	<ul style="list-style-type: none"> <li>Part 1: Safety and tolerability in HVs</li> <li>Part 2: Safety and tolerability in patients with type 2 diabetes mellitus</li> </ul>	<ul style="list-style-type: none"> <li>Cognition and adaptive behavior</li> </ul>	<ul style="list-style-type: none"> <li>Safety, tolerability, PK and food effect</li> </ul>
Status	<ul style="list-style-type: none"> <li>FSI Q1 2014</li> </ul>	<ul style="list-style-type: none"> <li>Part 1 FSI July 2014</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q2 2014</li> </ul>	<ul style="list-style-type: none"> <li>FPI July 2014</li> </ul>

NAM=Negative allosteric modulator; HV= healthy volunteer

# Neuroscience development programmes

Molecule	Monoamine oxidase type B (MAO-B) inhibitor (RG1577, EVT-302)	V1 receptor antagonist (RG7314)	SMN2 splicing modifier (RG7800)
Patient population	Alzheimer's Disease	Autism	Spinal muscular atrophy
Phase	Phase IIb MAyfiOwer RoAD	Phase II VANILLA	Phase I
# of patients	N=495	N=150	N=48
Design	<ul style="list-style-type: none"> <li>52-week oral treatment</li> <li><b>ARM A:</b> RG1577 (dose 1)</li> <li><b>ARM B:</b> RG1577 (dose 2)</li> <li><b>ARM C:</b> placebo</li> </ul>	<ul style="list-style-type: none"> <li>Multi-center, randomized, double-blind, placebo-controlled proof-of-concept study in individuals with Autism Spectrum Disorder (ASD)</li> </ul>	<ul style="list-style-type: none"> <li>Healthy volunteer study</li> <li><b>ARM A:</b> RG7800 Single dose</li> <li><b>ARM B:</b> Placebo</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Changes in ADAS-Cog at 52 weeks</li> </ul>	<ul style="list-style-type: none"> <li>Safety and efficacy</li> </ul>	<ul style="list-style-type: none"> <li>Safety, PK</li> </ul>
Status	<ul style="list-style-type: none"> <li>Recruitment completed Q1 2014</li> </ul>	<ul style="list-style-type: none"> <li>FSI Q3 2013</li> </ul>	<ul style="list-style-type: none"> <li>FSI Q1 2014</li> </ul>
Collaborator	Evotec		PTC Therapeutics/ SMA Foundation

# Neuroscience development programmes

<b>Molecule</b>	<b>Anti-aSyn</b> (RG7935, PRX002)	
<b>Patient population</b>	<b>Parkinson's disease</b>	
<b>Phase</b>	<b>Phase I</b>	<b>Phase I</b>
<b># of patients</b>	N=40	N=up to 60
<b>Design</b>	<ul style="list-style-type: none"> <li>▪ Double-blind, placebo-controlled, single ascending dose study of RG7935/PRX002 in healthy subjects</li> </ul>	<ul style="list-style-type: none"> <li>▪ Double-blind, placebo-controlled, multiple ascending dose study of RG7935/PRX002 in patients with Parkinson's disease</li> </ul>
<b>Primary endpoint</b>	<ul style="list-style-type: none"> <li>▪ Safety, tolerability, PK</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety and tolerability</li> </ul>
<b>Status</b>	<ul style="list-style-type: none"> <li>▪ FSI Q2 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI July 2014</li> </ul>
<b>Collaborator</b>	Prothena	

# Infectious diseases programmes

Molecule	TLR7 agonist (RG7795)	LptD antibiotic (RG7929)
Patient population	Chronic hepatitis B	Pseudomonas infections (including MDR strains)
Phase	Phase I	Phase II
# of patients	N=50	N=~50
Design	<ul style="list-style-type: none"> <li>Healthy volunteer study</li> <li><b>ARM A:</b> Single ascending dose of RG7795</li> <li><b>ARM B:</b> Placebo</li> </ul>	<ul style="list-style-type: none"> <li>Patient study with RG7929</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Safety</li> </ul>	<ul style="list-style-type: none"> <li>Safety, PK/PD and efficacy</li> </ul>
Status	<ul style="list-style-type: none"> <li>FPI Q4 2013</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q4 2013</li> <li>QIDP and fast track designation granted Q2 2014</li> </ul>
Collaborator		Polyphor

# Metabolic development programmes

Molecule	Inclacumab (P-selectin huMAb, RG1512)	
Patient population	<b>Prevention of saphenous vein graft disease</b> Patients undergoing coronary artery bypass graft (CABG) surgery	<b>Acute Coronary Syndrome (ACS)</b> Patients undergoing percutaneous coronary intervention (PCI)
Phase/study	<b>Phase II SELECT-CABG</b>	<b>Phase II SELECT-ACS</b>
# of patients	N=384	N=516
Design	<ul style="list-style-type: none"> <li>32-week treatment period</li> <li><b>ARM A:</b> Inclacumab (20 mg/kg)</li> <li><b>ARM B:</b> Placebo</li> </ul>	<ul style="list-style-type: none"> <li>Single infusion</li> <li><b>ARM A:</b> Inclacumab (5 mg/kg)</li> <li><b>ARM B:</b> Inclacumab (20 mg/kg)</li> <li><b>ARM C:</b> Placebo</li> </ul>
Primary Endpoint	<ul style="list-style-type: none"> <li>Sapheneous vein graft re-occlusion</li> </ul>	<ul style="list-style-type: none"> <li>Procedural damage (troponin)</li> </ul>
Status	<ul style="list-style-type: none"> <li>Recruitment completed Q2 2012</li> <li>Data to be published in 2014</li> </ul>	<ul style="list-style-type: none"> <li>Recruitment completed</li> <li>Data presented at ACC 2013</li> </ul>
	<ul style="list-style-type: none"> <li>Candidate for partnering-out</li> </ul>	
Collaborator	Genmab	

# Metabolic, ophthalmology and hemophilia development programmes

Molecule	GLP-1/GIP dual agonist (MAR709, RG7697)	Aldosterone synthase inhibitor (RG7641)	Anti-VEGF/Ang2 (RG7716)	Factor IX/X bispecific (RG6013, ACE910)
Patient population	Type 2 diabetes	Metabolic diseases	Wet age-related macular degeneration	Hemophilia Study in Japanese patients
Phase/study	Phase I	Phase I	Phase I	Phase I
# of patients	N=60	N=96	N=30	N=18
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> RG7697 SC</li> <li>▪ <b>ARM B:</b> placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> RG7641 single dose</li> <li>▪ <b>ARM B:</b> Placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ Healthy volunteer study</li> <li>▪ Single ascending dose of RG7716</li> </ul>	<ul style="list-style-type: none"> <li>▪ Multiple ascending dose study with extension cohort</li> </ul>
Primary Endpoint	<ul style="list-style-type: none"> <li>▪ Safety, PK</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety, PK, PD</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ MAD study ongoing</li> </ul>	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q2 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q4 2013</li> </ul>	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q2 2014 in Japan</li> </ul>
Collaborator	Marcadia Biotech, Inc. acquisition			

**Pipeline summary**

**Marketed products additional indications**

**Global Development late-stage trials**

**pRED (Roche Pharma Research & Early Development)**

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**gRED (Genentech Research & Early Development)**

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**Roche Group HY 2014 sales**

**Diagnostics**

**Foreign exchange rate information**

# Oncology development programmes

## *Monoclonal antibodies*



Growth factor signaling				
Molecule	Anti-HER3 EGFR DAF MAb (RG7597)			
Patient population	Metastatic/recurrent SCCHN	KRAS wild-type metastatic colorectal cancer	1L recurrent/metastatic squamous cell carcinoma of head and neck	Locally advanced or metastatic tumors with mutant KRAS
Phase/study	Phase II MEHGAN	Phase II DARECK	Phase Ib	Phase I
# of patients	N=170	N=130	N=21	N=50
Design	<ul style="list-style-type: none"> <li>ARM A: RG7597</li> <li>ARM B: Cetuximab</li> </ul>	<ul style="list-style-type: none"> <li>ARM A: RG7597+FOLFIRI</li> <li>ARM B: Cetuximab+FOLFIRI</li> </ul>	<ul style="list-style-type: none"> <li>Evaluating safety/tolerability with two chemo backbones</li> <li>Arm A: Cisplatin/5-FU</li> <li>Arm B: Carboplatin/Paclitaxel</li> </ul>	<ul style="list-style-type: none"> <li>Dose finding of RG7597 plus cobimetinib<sup>1</sup></li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Progression-free survival</li> </ul>	<ul style="list-style-type: none"> <li>Progression-free survival</li> </ul>	<ul style="list-style-type: none"> <li>Safety, DLT, PK</li> </ul>	<ul style="list-style-type: none"> <li>Safety</li> </ul>
Status	<ul style="list-style-type: none"> <li>Recruitment completed Q2 2013</li> <li>Data to be presented at ESMO 2014</li> </ul>	<ul style="list-style-type: none"> <li>Recruitment completed Q4 2013</li> </ul>	<ul style="list-style-type: none"> <li>Recruitment completed Q2 2014</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q4 2013</li> </ul>

<sup>1</sup>cobimetinib in collaboration with Exelixis

SCCHN=Squamous Cell Carcinoma of the Head and Neck

FOLFOX=Folinic acid, Fluorouracil, Oxaliplatin; FOLFIRI=Folinic acid, Fluorouracil, Irinotecan



# Oncology development programmes

## *Antibody drug conjugates*



Antibody drug conjugates (ADCs)			
Molecule	Anti-STEAP1 ADC (RG7450)	Anti-MUC16 ADC (RG7458)	NME ADC (RG7882)
Patient population	Prostate cancer	Ovarian and pancreatic cancer	Pt. resistant ovarian cancer or unrespectable pancreatic cancer
Phase	Phase I	Phase I	Phase I
# of patients	N=67	N=57	N=75
Design	<ul style="list-style-type: none"> <li>Dose escalation study</li> </ul>	<ul style="list-style-type: none"> <li>Dose escalation study</li> </ul>	<ul style="list-style-type: none"> <li>Dose escalation study</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Safety</li> </ul>	<ul style="list-style-type: none"> <li>Safety/PK</li> </ul>	<ul style="list-style-type: none"> <li>Safety/PK</li> </ul>
Status	<ul style="list-style-type: none"> <li>FPI Q1 2011</li> <li>Data presented at ASCO 2013-2014 and AACR 2014</li> </ul>	<ul style="list-style-type: none"> <li>Recruitment completed Q2 2014</li> <li>Safety and PK data presented at AACR 2013</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q2 2014</li> </ul>
Collaborator	Seattle Genetics and Agensys	Seattle Genetics	

# Oncology development programmes

## *Antibody drug conjugates (continued)*



Antibody drug conjugates (ADCs)			
Molecule	Anti-NaPi2b ADC (RG7599)		
Patient population	NSCLC and ovarian cancer	Platinum-sensitive ovarian cancer	Platinum-resistant ovarian cancer
Phase	Phase I	Phase Ib	Phase II HERAEA
# of patients	N=96	N=42	N=92
Design	<ul style="list-style-type: none"> <li>Dose escalation study</li> </ul>	<ul style="list-style-type: none"> <li>Dose escalation of RG7599 in combination with carboplatin, with or without Avastin</li> </ul>	<ul style="list-style-type: none"> <li><b>ARM A:</b> RG7599</li> <li><b>ARM B:</b> Pegylated liposomal doxorubicin</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Safety</li> </ul>	<ul style="list-style-type: none"> <li>Safety, PK</li> </ul>	<ul style="list-style-type: none"> <li>Progression-free survival</li> </ul>
Status	<ul style="list-style-type: none"> <li>FPI Q2 2011</li> <li>Data presented at ASCO 2014</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q4 2013</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q1 2014</li> </ul>
Collaborator	Seattle Genetics		

# Oncology development programmes

## *Antibody drug conjugates (continued)*



Antibody drug conjugates (ADCs)				
Molecule	Anti-methoselin ADC (RG7600)	Anti-ETBR ADC (RG7636)	Pinatuzumab vedotin (RG7593) vs. polatuzumab vedotin (RG7596)	NME ADC (RG7841)
Patient population	Pancreatic and ovarian cancer	Metastatic or unresectable melanoma	Non-Hodgkin's Lymphoma	Refractory solid tumors
Phase	Phase I	Phase I	Phase II ROMULUS	Phase I
# of patients	N=66-96	N=44-64	N=120	N=115
Design	<ul style="list-style-type: none"> <li>Dose escalation study</li> </ul>	<ul style="list-style-type: none"> <li>Dose escalation study</li> </ul>	<ul style="list-style-type: none"> <li>Pinatuzumab vedotin plus Rituxan</li> <li>Polatuzumab vedotin plus Rituxan</li> </ul>	<ul style="list-style-type: none"> <li>Dose escalation study</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Safety</li> </ul>	<ul style="list-style-type: none"> <li>Safety</li> </ul>	<ul style="list-style-type: none"> <li>Safety and anti-tumor activity</li> </ul>	<ul style="list-style-type: none"> <li>Safety</li> </ul>
Status	<ul style="list-style-type: none"> <li>FPI Q4 2011</li> <li>Data presented at ASCO 2014</li> </ul>	<ul style="list-style-type: none"> <li>Recruitment completed Q1 2014</li> <li>Data presented at AACR 2014</li> </ul>	<ul style="list-style-type: none"> <li>Recruitment completed Q1 2014</li> <li>Interim data presented at ASCO and EHA 2014</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q2 2014</li> </ul>
Collaborator	Seattle Genetics			

# Oncology development programmes

## *Small molecules*



Molecule	<b>Ipatasertib</b> (AKT inhibitor, GDC-0068, RG7440)			
Patient population	Solid tumors	2L Castration-resistant prostate cancer	Solid tumors	1L metastatic gastric or gastroesophageal junction adenocarcinoma
Phase	Phase Ib	Phase II A.MARTIN	Phase Ib	Phase II JAGUAR
# of patients	N=120	N=262	N=62	N=120
Design	<ul style="list-style-type: none"> <li>▪ Dose escalation with:</li> <li>▪ <b>ARM A:</b> Docetaxel</li> <li>▪ <b>ARM B:</b> Fluoropyrimidine plus oxaliplatin</li> <li>▪ <b>ARM C:</b> Paclitaxel</li> <li>▪ <b>ARM D:</b> Enzalutamide</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Ipatasertib (400mg) + abiraterone</li> <li>▪ <b>ARM B:</b> Ipatasertib (200mg) + abiraterone</li> <li>▪ <b>ARM C:</b> Placebo + abiraterone</li> </ul>	<ul style="list-style-type: none"> <li>▪ Dose escalations study of ipatasertib in combination with cobimetinib* (MEK inhibitor)</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Ipatasertib + mFOLFOX6</li> <li>▪ <b>ARM B:</b> Placebo + mFOLFOX6</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Safety</li> </ul>	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety/PK</li> </ul>	<ul style="list-style-type: none"> <li>▪ Progression-free survival</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ FPI Q3 2011</li> <li>▪ Data presented at ASCO and ESMO 2012</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q3 2013</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q2 2012</li> <li>▪ Data presented at AACR 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q3 2013</li> </ul>
Collaborator	Array BioPharma			

\*cobimetinib in collaboration with Exelixis

mFOLFOX6=modified FOLFOX (Folinic acid, Fluorouracil, Oxaliplatin)

ASCO=American Society of Clinical Oncology; ESMO=European Society for Medical Oncology; AACR=American Association for Cancer Research

# Oncology development programmes

## *Small molecules (continued)*



Molecule	ChK1 inhibitor (RG7741, GDC-0575)	ERK inhibitor (RG7842, GDC-0994)	NME (RG7845, GDC-0853)	PI3 Kinase inhibitor (RG7666, GDC-0084)
Patient population	Solid tumors or lymphoma	Solid tumors	B-cell lymphoma and chronic lymphocytic leukemia	Progressive or recurrent high-grade glioma
Phase I	Phase I	Phase I	Phase I	Phase I
# of patients	N=170	N=78	N=121	N=68
Design	<ul style="list-style-type: none"> <li>Dose escalation study</li> </ul>	<ul style="list-style-type: none"> <li>Stage 1: Dose escalation</li> <li>Stage 2: Cohort expansion</li> </ul>	<ul style="list-style-type: none"> <li><b>Stage 1:</b> Dose escalation</li> <li><b>Stage 2:</b> Cohort expansion</li> </ul>	<ul style="list-style-type: none"> <li>Dose escalation study</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>Safety/PK</li> </ul>	<ul style="list-style-type: none"> <li>Safety, MTD, PK</li> </ul>	<ul style="list-style-type: none"> <li>Safety/PK, MTD</li> </ul>	<ul style="list-style-type: none"> <li>Safety/PK</li> </ul>
Status	<ul style="list-style-type: none"> <li>FPI Q2 2012</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q2 2013</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q4 2013</li> </ul>	<ul style="list-style-type: none"> <li>FPI Q2 2012</li> </ul>
Collaborator	Array BioPharma			

# Immunology development programmes



Molecule	Quilizumab (Anti-M1 prime, RG7449)		anti-IL17 (RG7624)
Patient population	Allergic asthma - inadequately controlled	Chronic spontaneous urticaria	Autoimmune diseases
Phase/study	Phase IIb COSTA	Phase II QUAIL	Phase Ib
# of patients	N=560	N=30	N=21
Design	<ul style="list-style-type: none"> <li>▪ SC administration on top of SOC</li> <li>▪ <b>ARM A:</b> Quilizumab 300mg</li> <li>▪ <b>ARM B:</b> Quilizumab 150mg</li> <li>▪ <b>ARM C:</b> Quilizumab 450mg</li> <li>▪ <b>ARM D:</b> Placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Quilizumab sc</li> <li>▪ <b>ARM B:</b> Placebo sc</li> </ul>	<ul style="list-style-type: none"> <li>▪ Randomized, double-blind, placebo-controlled, multiple ascending dose escalation study</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Rate of protocol-defined exacerbations from baseline to week 36</li> </ul>	<ul style="list-style-type: none"> <li>▪ Efficacy and safety</li> </ul>	<ul style="list-style-type: none"> <li>▪ Safety and tolerability</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q3 2013</li> </ul>	<ul style="list-style-type: none"> <li>▪ Recruitment completed Q2 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ Enrolment completed Q2 2012</li> <li>▪ Next study in preparation</li> </ul>
Collaborator			NovImmune

# Neuroscience development programmes



Molecule	Crenezumab (Anti-A $\beta$ , RG7412)		
Patient population	Alzheimer's Disease		Alzheimer's Prevention initiative (API) Colombia
Phase/study	Phase II ABBY Cognition study	Phase II BLAZE Biomarker study	Phase II Cognition study
# of patients	N=450	N=91	N=300
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Crenezumab sc</li> <li>▪ <b>ARM B:</b> Crenezumab iv</li> <li>▪ <b>ARM C:</b> Placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> Crenezumab sc</li> <li>▪ <b>ARM B:</b> Crenezumab iv</li> <li>▪ <b>ARM C:</b> Placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> 100 carriers receive crenezumab sc</li> <li>▪ <b>ARM B:</b> 100 carriers receive placebo</li> <li>▪ <b>ARM C:</b> 100 non-carriers receive placebo</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Change in cognition (ADAS-cog) and Clinical Dementia Rating, Sum of Boxes (CDR-SOB) score from baseline to week 73</li> </ul>	<ul style="list-style-type: none"> <li>▪ Change in brain amyloid load from baseline to week 69</li> </ul>	<ul style="list-style-type: none"> <li>▪ Change on Alzheimer's Prevention Initiative (API) Composite Cognitive Test total score</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ Enrolment completed Q3 2012</li> <li>▪ Data presented at AAIC 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ Enrolment completed Q3 2012</li> <li>▪ Cognition data presented at AAIC 2014</li> <li>▪ Biomarker data to be presented at CTAD 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ FPI Q4 2013</li> </ul>
Collaborator	AC Immune		AC Immune and Banner Alzheimer's Institute

# Metabolism and infectious diseases development programmes



Molecule	Anti-CMV (RG7667)	Anti-Flu A (RG7745)
Patient population	Prevention of cytomegalovirus disease in kidney transplant recipients	Influenza
Phase/study	Phase II	Phase IIa
# of patients	N=120	N=100
Design	<ul style="list-style-type: none"> <li>▪ <b>ARM A:</b> RG7667</li> <li>▪ <b>ARM B:</b> Placebo</li> </ul>	<ul style="list-style-type: none"> <li>▪ Healthy volunteers in an influenza challenge model</li> <li>▪ <b>ARM A:</b> RG7745</li> <li>▪ <b>ARM B:</b> Placebo</li> <li>▪ <b>ARM C:</b> Tamiflu</li> </ul>
Primary endpoint	<ul style="list-style-type: none"> <li>▪ Safety, clinical activity</li> </ul>	<ul style="list-style-type: none"> <li>▪ Reduction in viral activity</li> </ul>
Status	<ul style="list-style-type: none"> <li>▪ FPI Q4 2012</li> <li>▪ Enrollment completed Q2 2014</li> </ul>	<ul style="list-style-type: none"> <li>▪ Data positive with 98% reduction of viral load at 3600mg dose</li> <li>▪ Presented at ISIRV 2014</li> </ul>



**Pipeline summary**

**Marketed products additional indications**

**Global Development late-stage trials**

**pRED (Roche Pharma Research & Early Development)**

**gRED (Genentech Research & Early Development)**

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**Roche Group HY 2014 sales**

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**Diagnostics**

**Foreign exchange rate information**

# Geographical sales split by divisions and Group\*



CHFm	HY 2014	HY 2013	% change CER
<b>Pharmaceuticals Division</b>	<b>17,834</b>	<b>18,162</b>	<b>+4</b>
United States	7,572	7,553	+5
Europe	4,775	4,652	+3
Japan	1,581	1,672	+7
International	3,906	4,285	+2
<b>Diagnostics Division</b>	<b>5,140</b>	<b>5,133</b>	<b>+6</b>
United States	1,147	1,139	+6
Europe	2,082	2,064	+2
Japan	222	242	+4
International	1,689	1,688	+12
<b>Group</b>	<b>22,974</b>	<b>23,295</b>	<b>+5</b>
United States	8,719	8,692	+5
Europe	6,857	6,716	+3
Japan	1,803	1,914	+6
International	5,595	5,973	+5

\* Geographical sales split shown here does not represent operational organization; CER=Constant Exchange Rates

# Pharma Division sales HY 2014 (vs. 2013)

## *Top 20 products*

	Global		US		Europe		Japan		International	
	CHFm	% CER	CHFm	% CER	CHFm	% CER	CHFm	% CER	CHFm	% CER
MabThera/Rituxan	3,360	4	1,624	3	1,018	7	104	0	614	5
Avastin	3,097	6	1,300	6	983	5	332	10	482	8
Herceptin	3,082	6	937	10	1,138	3	130	4	877	6
Lucentis	828	6	828	6	-	-	-	-	-	-
Tarceva	651	-1	325	5	154	-12	49	22	123	-8
Pegasy	582	-15	137	-28	144	-26	32	31	269	-2
Actemra/RoActemra	568	22	180	26	207	20	100	24	81	15
Xeloda	474	-34	159	-47	58	-64	44	-9	213	-3
Xolair	437	19	437	19	-	-	-	-	-	-
CellCept	413	-6	95	-6	110	-7	28	-5	180	-6
Perjeta	388	276	237	183	92	423	37	-	22	*
Tamiflu	372	3	188	-7	72	*	62	-21	50	-23
Activase/TNKase	359	11	335	12	-	-	-	-	24	8
Valcyte/Cymevene	353	12	188	16	92	8	-	-	73	6
Pulmozyme	278	6	181	6	62	1	0	-	35	10
NeoRec./Epogin	231	-8	-	-	98	-12	29	-36	104	9
Kadcyla	227	188	143	83	63	*	9	-	12	*
Mircera	203	11	-	-	52	4	94	9	57	20
Zelboraf	155	-5	36	-43	100	10	-	-	19	73
Madopar	135	-9	0	-	53	-5	8	-1	74	-11



# Pharma Division sales HY 2014 (vs. 2013)

## *Recently launched products*

	Global		US		Europe		Japan		International	
	CHFm	% CER	CHFm	% CER	CHFm	% CER	CHFm	% CER	CHFm	% CER
Erivedge	57	111	35	33	19	*	-	-	3	*
Gazyva	18	-	18	-	-	-	-	-	-	-



# Pharma Division CER sales growth<sup>1</sup> in %

## *Global top 20 products*

	Q2/13	Q3/13	Q4/13	Q1/14	Q2/14
MabThera/Rituxan	0	12	7	3	5
Avastin	13	14	13	9	4
Herceptin	0	7	7	3	9
Lucentis	18	21	22	8	4
Tarceva	9	5	4	-5	3
Pegasy	-24	-16	-20	-19	-10
Actemra/RoActemra	33	33	23	23	21
Xeloda	3	6	-3	-19	-50
Xolair	10	14	17	15	22
CellCept	1	-2	-10	-1	-11
Perjeta	*	262	394	274	277
Tamiflu	44	115	-27	9	-36
Activase/TNKase	3	18	19	-1	26
Valcyte/Cymevene	8	0	26	12	12
Pulmozyme	7	0	18	3	8
NeoRec./Epogin	-20	-16	-14	-9	-8
Kadcyla	-	-	-	474	105
Mircera	35	29	23	21	2
Zelboraf	46	38	26	-2	-9
Madopar	-4	3	9	-20	3

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<sup>1</sup> Q2-Q4/13 vs. Q2-Q4/12; Q1-Q2/14 vs. Q1-Q2/13

CER=Constant Exchange Rates

\* over 500%

# Pharma Division CER sales growth<sup>1</sup> in %

## *Top 20 products by region*

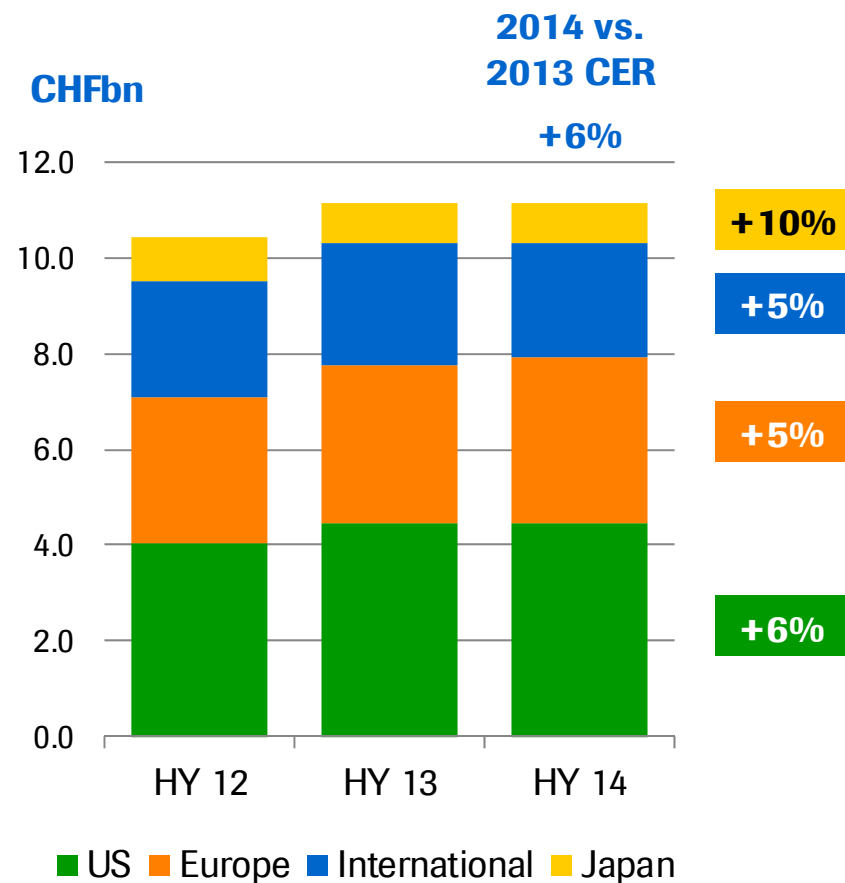
	US				Europe				Japan				International			
	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2
MabThera/Rituxan	20	2	-2	8	6	0	6	8	8	8	20	-17	3	26	12	-2
Avastin	10	4	6	6	17	9	8	2	15	12	27	-5	19	49	7	9
Herceptin	14	3	4	17	-1	-2	2	4	7	11	23	-12	8	21	0	12
Lucentis	21	22	8	4	-	-	-	-	-	-	-	-	-	-	-	-
Tarceva	5	-8	-6	16	0	-3	-12	-12	8	25	42	6	13	27	-6	-9
Pegasy	-51	-55	-40	-14	-14	-14	-19	-32	-22	-28	16	45	18	1	-7	3
Actemra/RoActemra	33	20	22	30	26	21	20	20	26	24	49	5	59	31	3	28
Xeloda	8	-8	-15	-80	1	-9	-57	-71	3	0	8	-23	10	9	-3	-2
Xolair	14	17	15	22	-	-	-	-	-	-	-	-	-	-	-	-
CellCept	13	5	-7	-6	-11	-5	-10	-5	13	8	5	-14	-5	-24	6	-16
Perjeta	129	201	161	205	*	*	*	287	-	-	-	-	-	*	*	*
Tamiflu	*	-24	-9	22	-76	-	*	-71	-73	-47	-17	-74	-17	-72	-8	-44
Activase/TNKase	19	22	0	27	-	-	-	-	-	-	-	-	-1	-13	-4	19
Valcyte/Cymevene	10	19	26	8	-22	28	5	10	-	-	-	-	3	38	-7	24
Pulmozyme	6	16	2	10	6	1	2	-1	29	12	150	-	-25	41	10	9
NeoRec./Epogin	-	-	-	-	-26	-19	-14	-10	-22	-22	-26	-45	3	-2	7	12
Kadcyla	-	-	315	16	-	-	-	*	-	-	-	-	-	-	-	*
Mircera	-	-	-	-	74	29	8	-1	26	21	36	-12	11	20	8	32
Zelboraf	12	-1	-40	-46	36	17	12	8	-	-	-	-	489	425	98	56
Madopar	-	-	-	-	2	-1	-9	-2	5	3	4	-6	3	18	-29	7

# CER sales growth (%)

## *Quarterly development*

	2013 vs. 2012				2014 vs. 2013	
	Q1	Q2	Q3	Q4	Q1	Q2
<b>Pharmaceuticals Division</b>	<b>7</b>	<b>4</b>	<b>9</b>	<b>7</b>	<b>4</b>	<b>4</b>
United States	13	7	16	5	3	8
Europe	1	2	3	2	5	1
Japan	2	2	4	2	19	-4
International	8	2	5	18	1	3
<b>Diagnostics Division</b>	<b>1</b>	<b>4</b>	<b>7</b>	<b>5</b>	<b>7</b>	<b>5</b>
<b>Roche Group</b>	<b>6</b>	<b>4</b>	<b>8</b>	<b>7</b>	<b>5</b>	<b>4</b>

# HY 2014: Oncology franchise



## HY 2014 sales of CHF 11.14bn

### US

- HER2 Franchise (Perjeta: sustained growth of US patient shares), Avastin driving growth and performance

### Europe

- Growth mainly driven by Perjeta and Kadcycla

### International

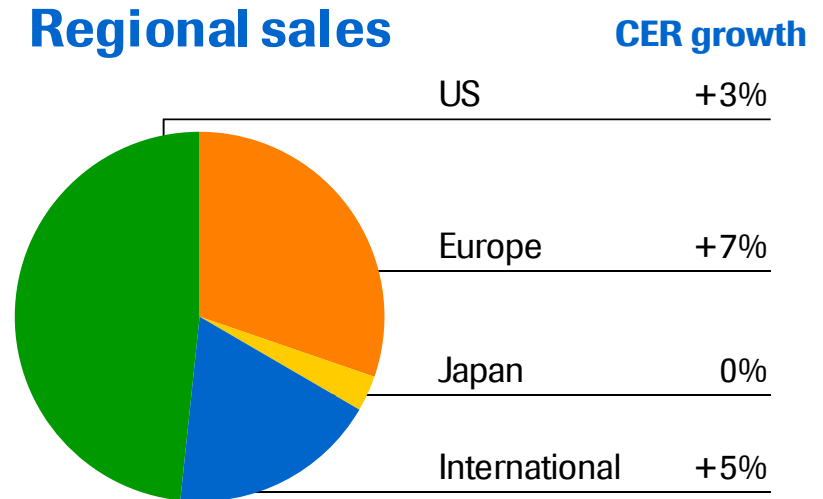
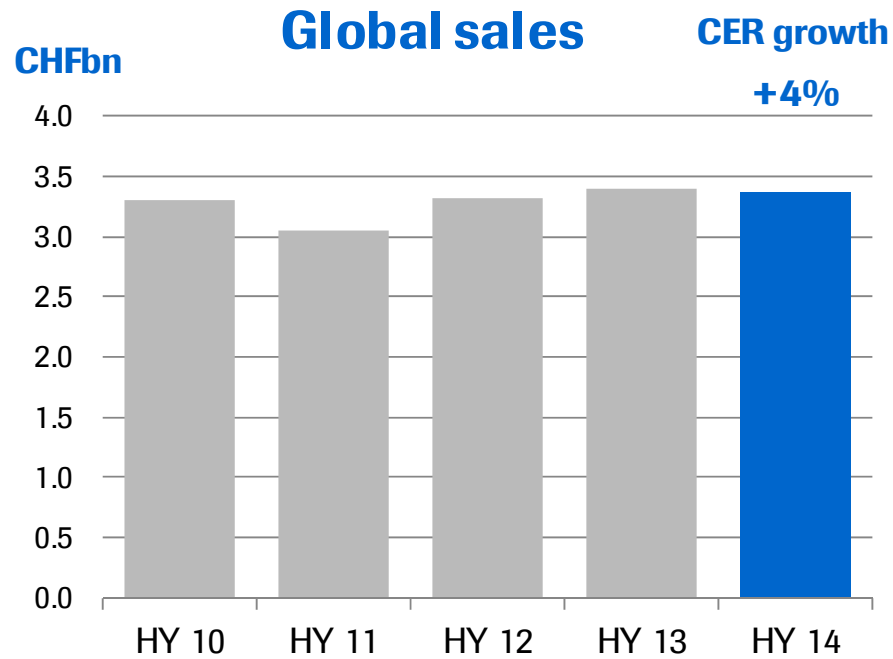
- Strong growth for Avastin and Herceptin

### Japan

- Growth driven largely by Avastin



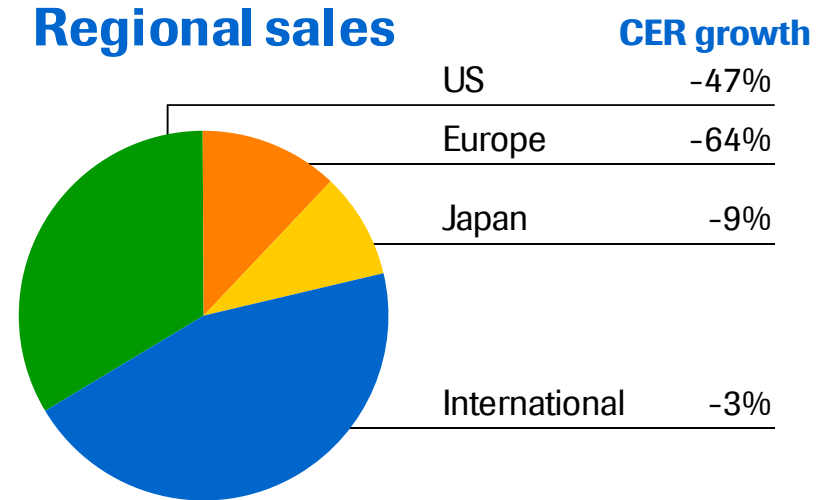
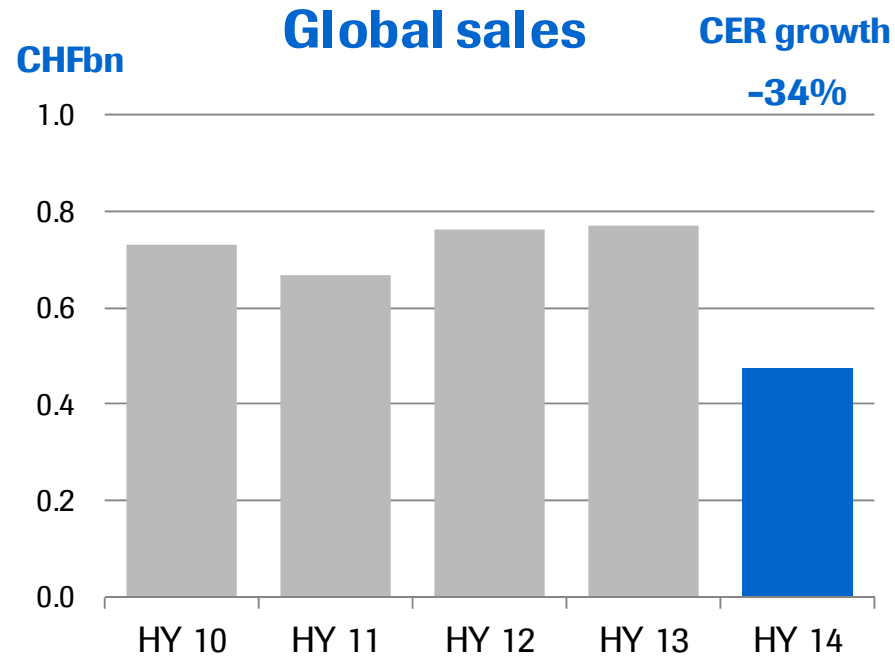
# MabThera/Rituxan



## HY 2014 sales of CHF 3.360bn

- US and Europe: stable market shares in approved indications

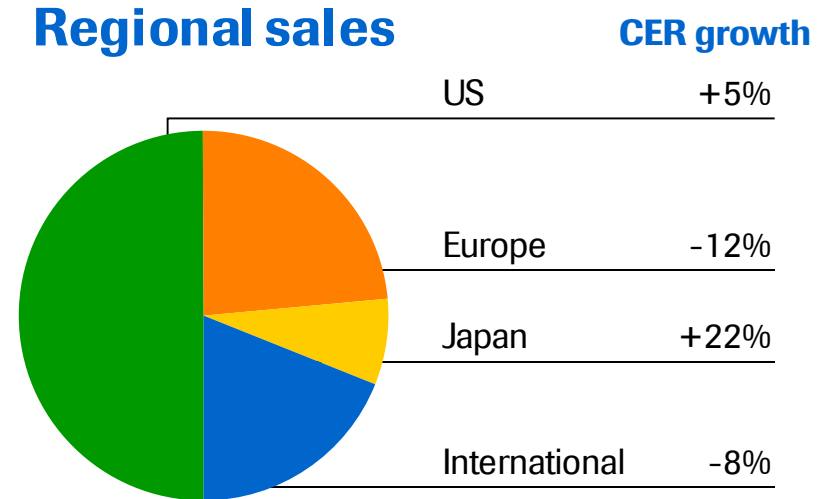
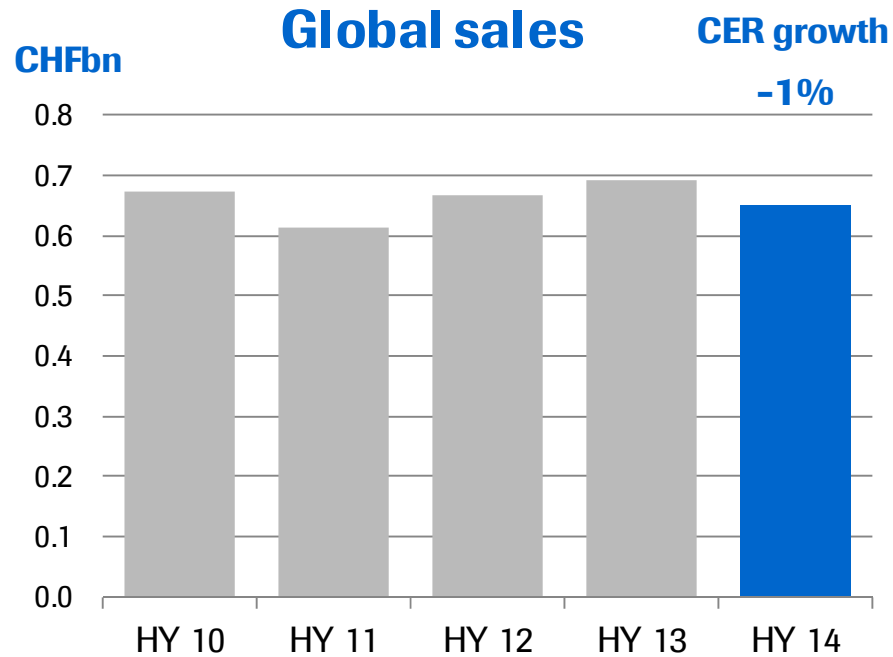
# Xeloda



## HY 2014 sales of CHF 0.474bn

- US: LoE impacts: loss of exclusivity Feb 2014
- Europe: LoE impacts: loss of exclusivity Dec 2013

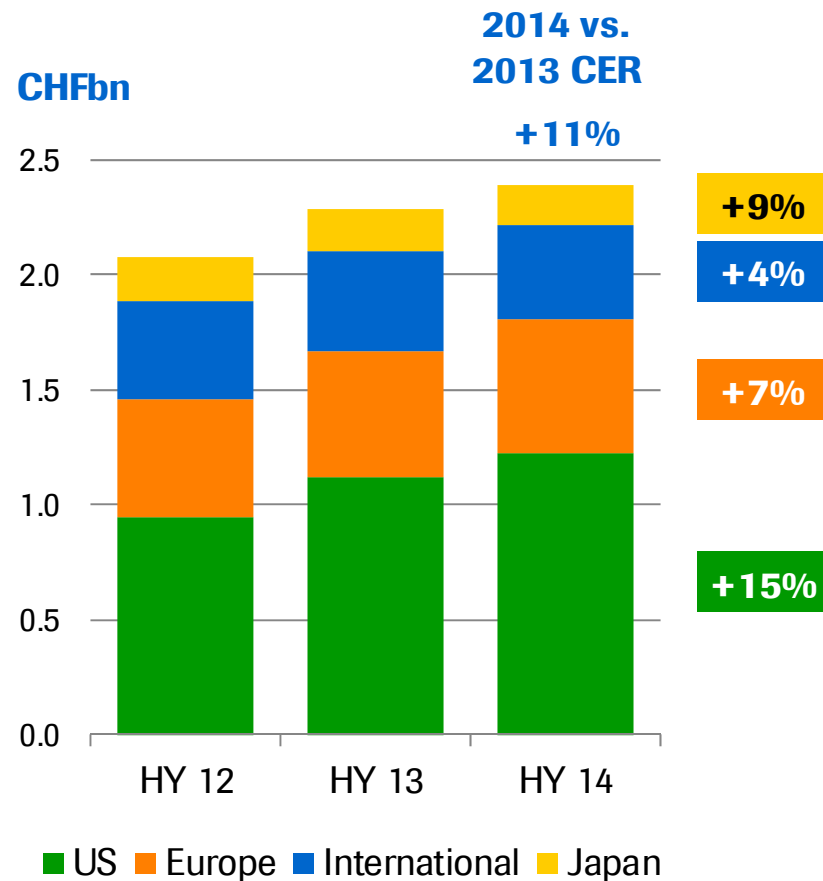
# Tarceva



## HY 2014 sales of CHF 0.651bn

- US: reversal of sales provisions
- Europe: increased competition in 1L EGFR Mut+ market
- International: local competition in China

# HY 2014: Immunology franchise



## HY 2014 sales of CHF 2.389bn

- Strong growth of Actemra/RoActemra and MabThera/Rituxan, CellCept declining

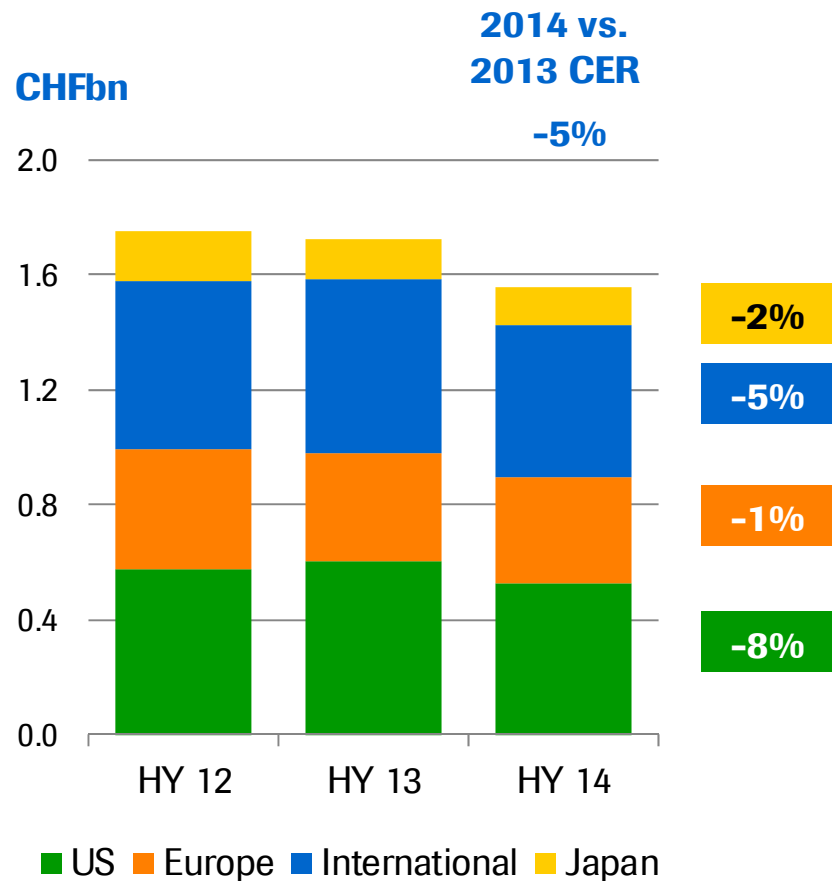
### Actemra/RoActemra

- EU: growth driven by a strong mono patient shares, very encouraging SC
- US: growth is driven by strong IV demand and SC patient share uptake (80% of new patients)

### CellCept

- Decline of sales due to patent expiry key EU countries end 2010

# HY 2014: Infectious diseases



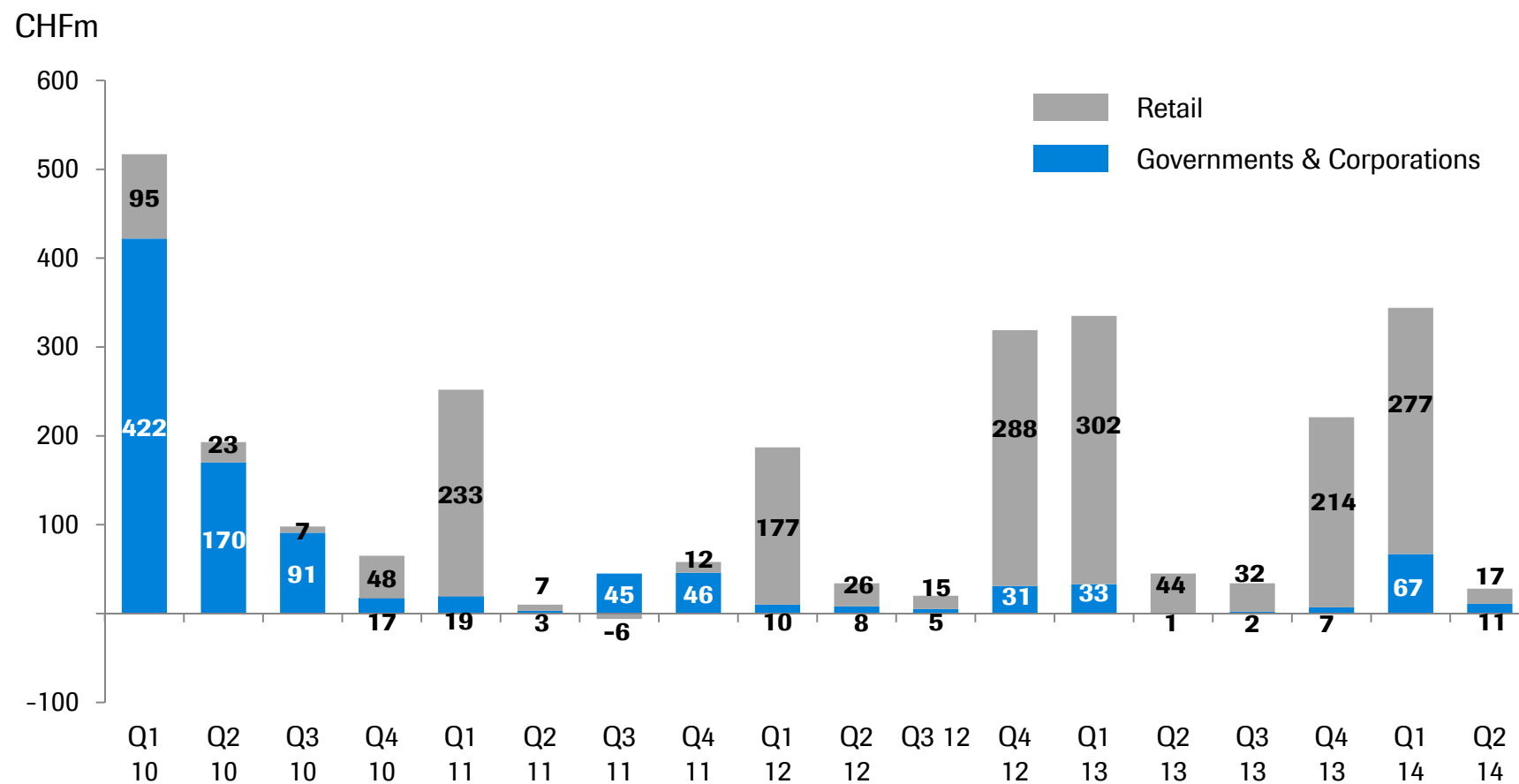
## HY 2014 sales of CHF 1.555bn

Pegasys sales in Q2 are decreasing at lower rates than previous Qs.

- 2nd generation uptake in the US has driven this change.
- Lower and shorter uptake of 2nd generation IFN based are driving sales decrease in Germany and France.
- Solid growth in several LATAM countries driven by market growth with 1st generation DAAs.

# Tamiflu quarterly sales 2010 - 2014

## *Retail and Governments/Corporations*



**Pipeline summary**

**Marketed products additional indications**

**Global Development late-stage trials**

**pRED (Roche Pharma Research & Early Development)**

**gRED (Genentech Research & Early Development)**

**Roche Group HY 2014 sales**

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**Diagnostics**

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**Foreign exchange rate information**



# Diagnostics Division CER growth

## *By Region and Business Area (vs. 2013)*

	<b>Global</b>		<b>North America</b>		<b>EMEA<sup>1</sup></b>		<b>RoW</b>	
	% CER		% CER		% CER		% CER	
	CHFm growth		CHFm growth		CHFm growth		CHFm growth	
Professional Diagnostics	2,904	9	600	9	1,305	4	999	15
Diabetes Care	1,140	0	210	-6	718	0	212	6
Molecular Diagnostics	762	4	268	8	305	-1	189	4
Tissue Diagnostics	334	9	194	5	95	14	45	18
<b>Diagnostics Division</b>	<b>5,140</b>	<b>6</b>	<b>1,272</b>	<b>6</b>	<b>2,423</b>	<b>2</b>	<b>1,445</b>	<b>12</b>

CER=Constant Exchange Rates  
<sup>1</sup> Europe, Middle East and Africa





# Diagnostics Division quarterly sales and CER growth<sup>1</sup>

	Q1 13		Q2 13		Q3 13		Q4 13		Q1 14		Q2 14	
	CHFm	% CER	CHFm	% CER	CHFm	% CER	CHFm	% CER	CHFm	% CER	CHFm	% CER
Professional Diagnostics	1,345	4	1,480	8	1,426	9	1,521	10	1,392	9	1,512	8
Diabetes Care	539	-5	666	-4	576	3	678	-4	538	5	602	-4
Molecular Diagnostics	378	-3	403	6	383	4	416	3	370	4	392	3
Tissue Diagnostics	157	7	165	4	159	8	184	10	156	4	178	14
<b>Dia Division</b>	<b>2,419</b>	<b>1</b>	<b>2,714</b>	<b>4</b>	<b>2,544</b>	<b>7</b>	<b>2,799</b>	<b>5</b>	<b>2,456</b>	<b>7</b>	<b>2,684</b>	<b>5</b>

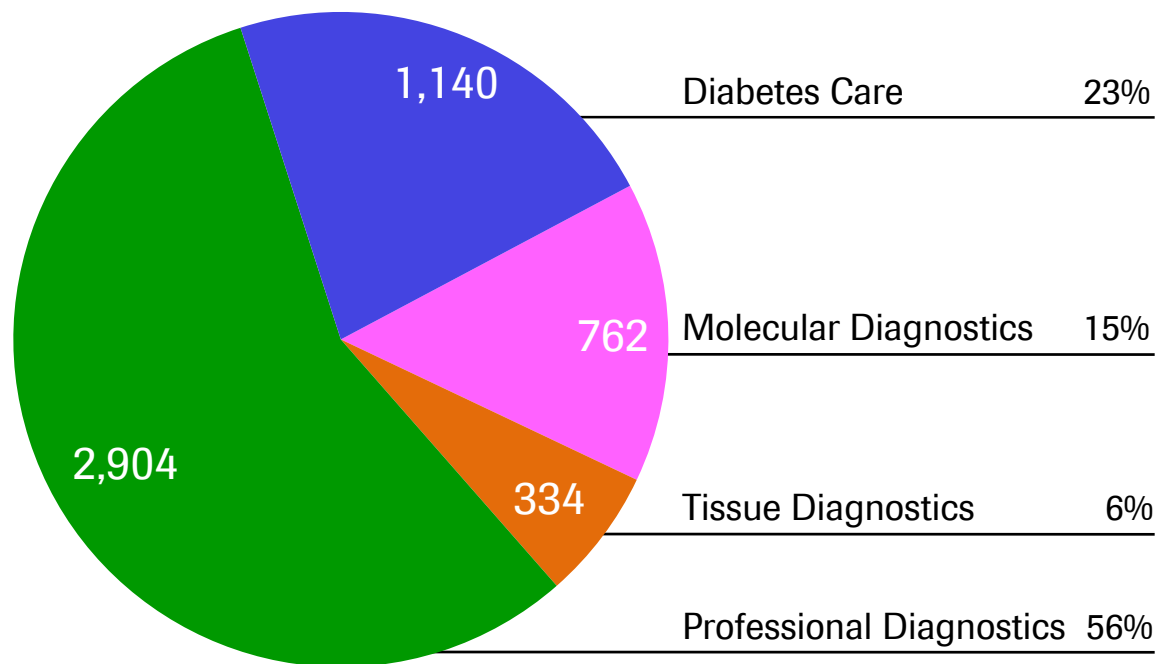
CER=Constant Exchange Rates  
<sup>1</sup> versus same period of prior year



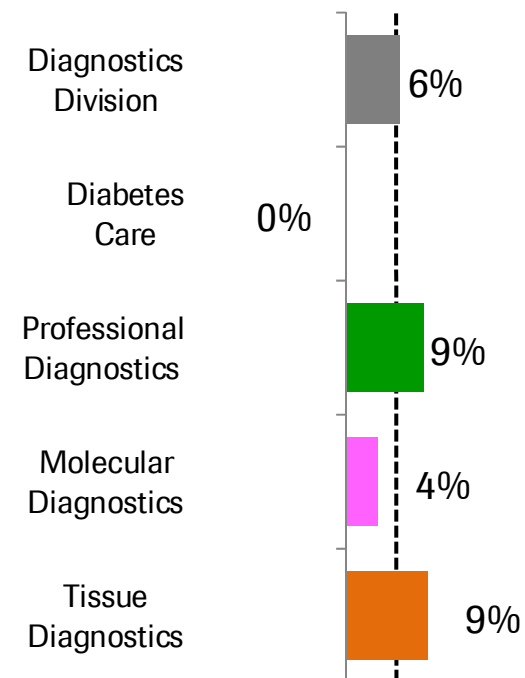
# HY 2014: Diagnostics Division sales

## *Growth driven by Professional Diagnostics*

CHF 5,140 m



CER sales growth

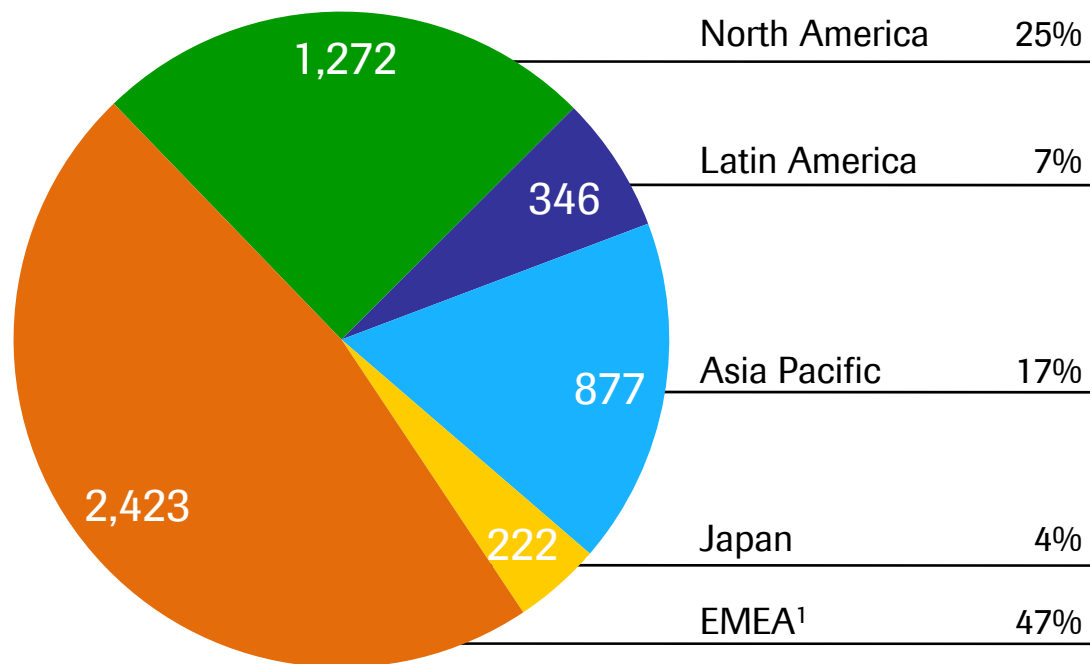


CER=Constant Exchange Rates

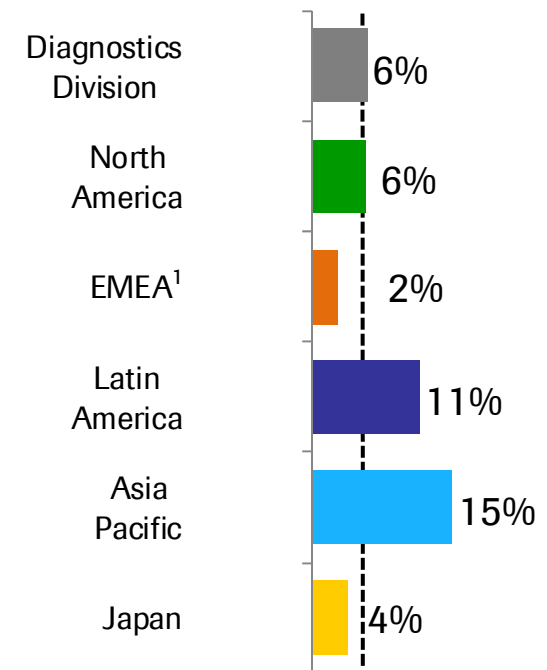
# HY 2014: Diagnostics Division sales

## *Growth driven by Asia Pacific and North America*

**CHF 5,140 m**



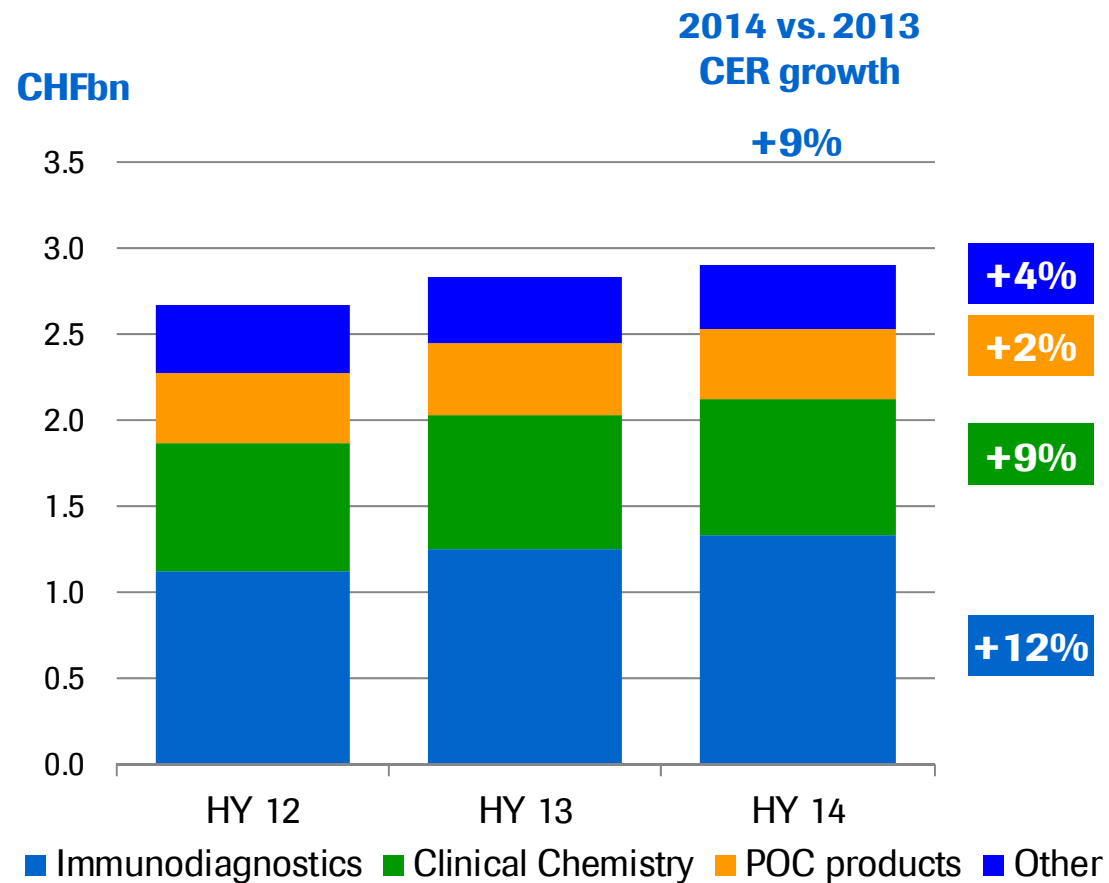
**CER sales growth**



CER=Constant Exchange Rates  
<sup>1</sup> Europe, Middle East and Africa

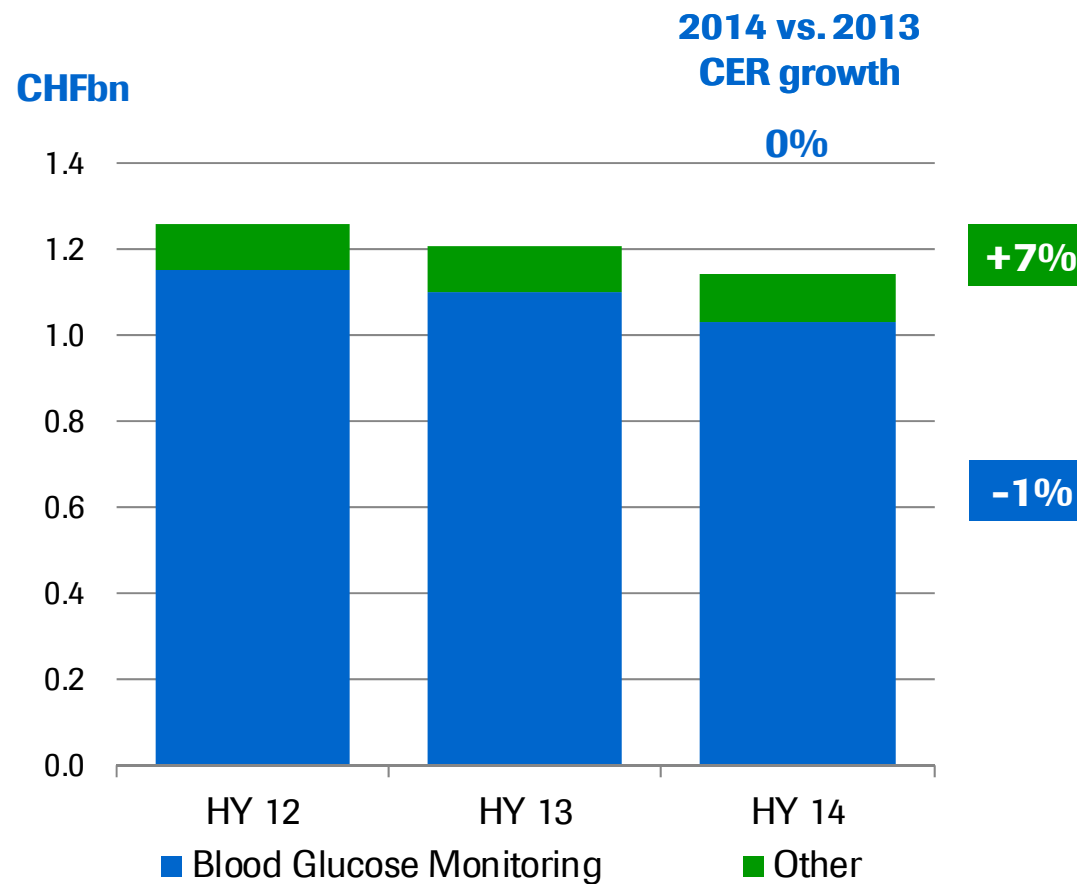
# Professional Diagnostics

## *Strong growth driven by Immunodiagnostics*



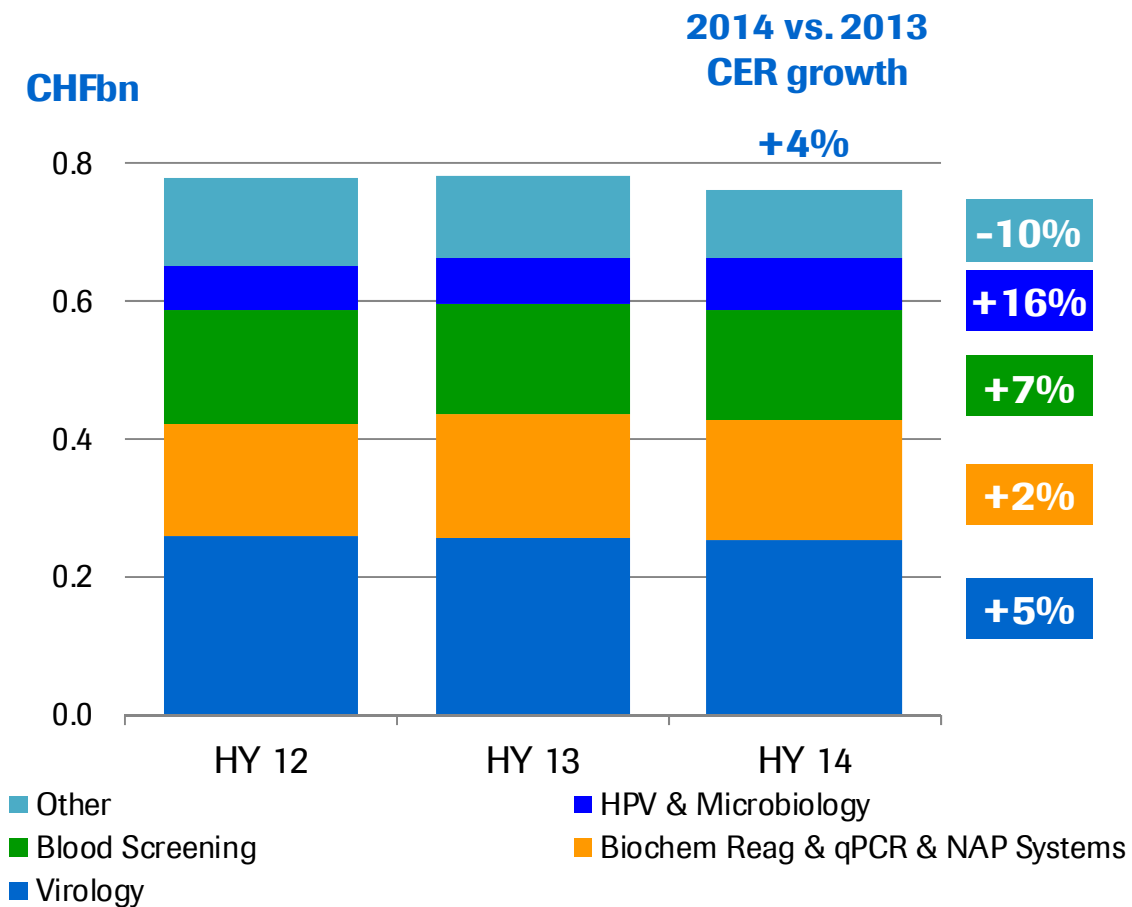
# Diabetes Care

## *Adapting to a challenging market environment*



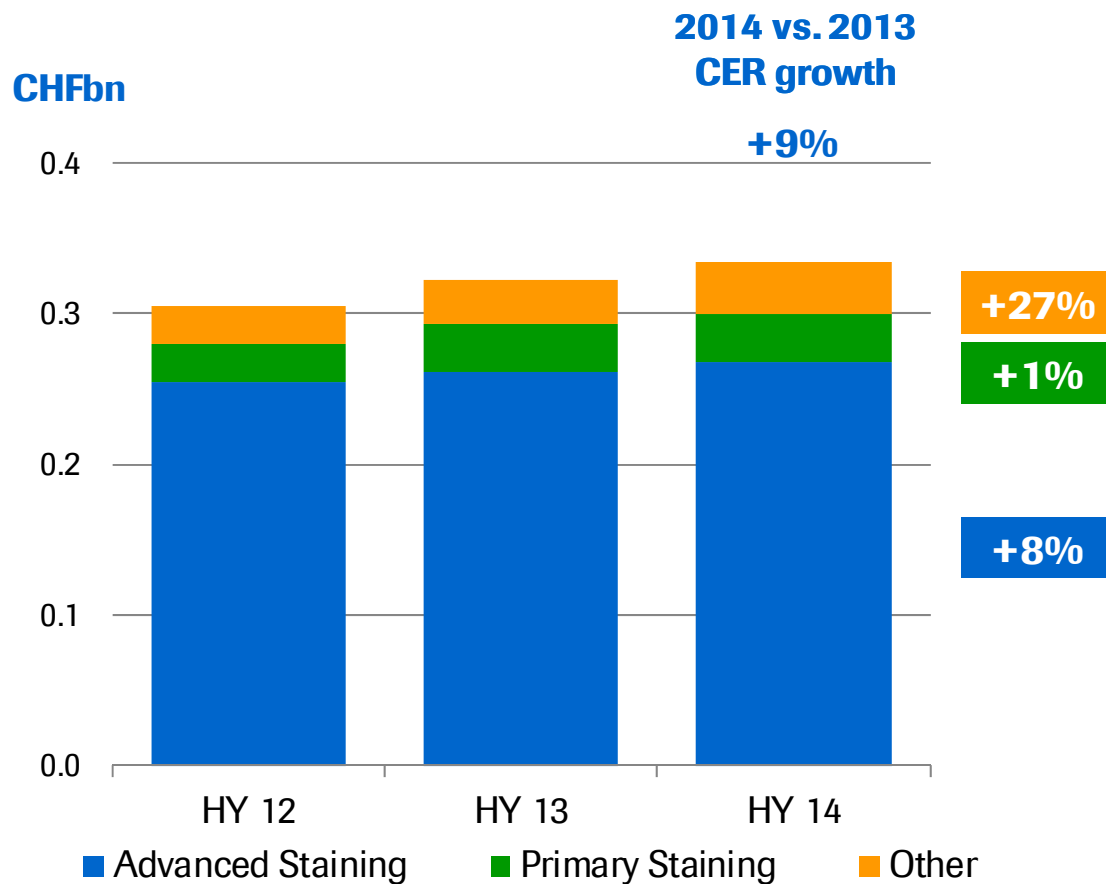
# Molecular Diagnostics

## *Growth driven by Virology and Blood Screening*



# Tissue Diagnostics

*Strong growth in EMEA<sup>1</sup> and APAC<sup>2</sup>*



CER=Constant Exchange Rates

<sup>1</sup> Europe, Middle East and Africa <sup>2</sup> Asia Pacific



## 2014: Key product launches

### *Professional Diagnostics*

Product	Description	Region
cobas m 511	Fully integrated and automated Hematology system	EU
cobas 6500 (u 701)	Automated urinalysis work area platform including u701 microscopy analyzer	EU ✓
Syphilis	Immunoassay for the detection of <i>Treponema pallidum</i>	EU ✓
PE Prognosis	Claim extension for short-term prediction, rule in/out of Preeclampsia in pregnancy	EU
Anti Mullerian Hormone	Fully automated test for the assessment of ovarian reserve for fertility	EU

Planned launches may be delayed or not occur as a result of adverse regulatory decisions or other factors





## 2014: Key product launches

### *Diabetes Care*

Product	Description	Region
Accu-Chek Connect	bG meter that connects wirelessly via Bluetooth to a smartphone app and cloud to transmit bG values	EU
Accu-Chek Insight	Next generation insulin delivery system combining an insulin pump and a blood glucose meter that functions as a pump remote control	EU ✓



## 2014: Key product launches

### *Molecular Diagnostics*

Product	Description	Region
cobas 6800/8800	Next generation PCR platform for molecular testing in virology and blood screening, serving mid to high volumes	WW*
MPX 2.0	Next generation multiplex test for blood screening for HIV, HCV and HBV	US
HSV 1 and 2 test	Detection of Herpes Simplex Virus on cobas 4800 platform	EU ✓
MRSA/SA test	Detection of MRSA/SA on cobas 4800	EU ✓
C-difficile test	Detection of C-difficile on cobas 4800	US ✓

\* excluding US

Planned launches may be delayed or not occur as a result of adverse regulatory decisions or other factors



## 2014: Key product launches

### *Tissue Diagnostics*

Product	Description	Region
Connect-V	Middleware providing connectivity for RTD instruments to simplify interfacing and connectivity to laboratory and hospital information systems	WW

**Pipeline summary**

**Marketed products additional indications**

**Global Development late-stage trials**

**pRED (Roche Pharma Research & Early Development)**

**gRED (Genentech Research & Early Development)**

**Roche Group HY 2014 sales**

**Diagnostics**

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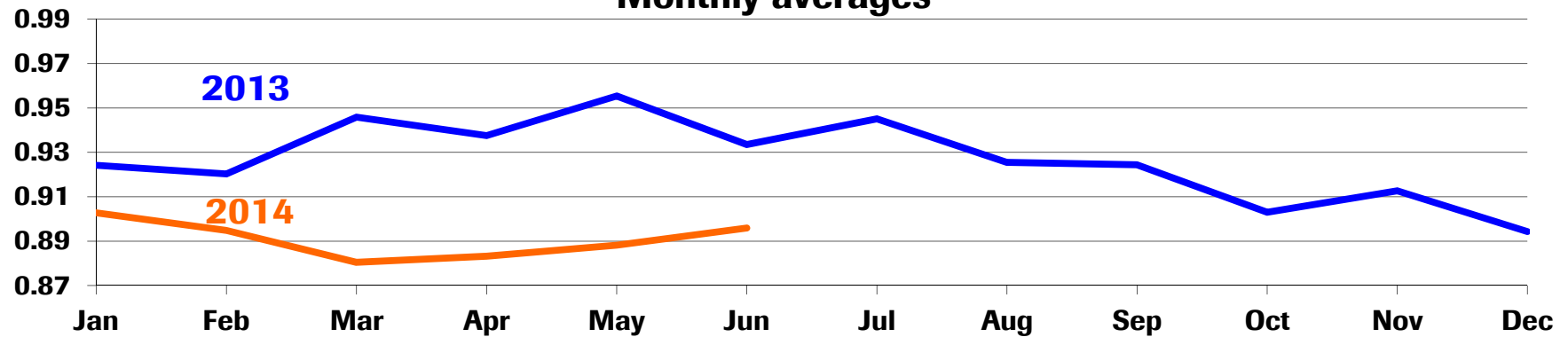
**Foreign exchange rate information**

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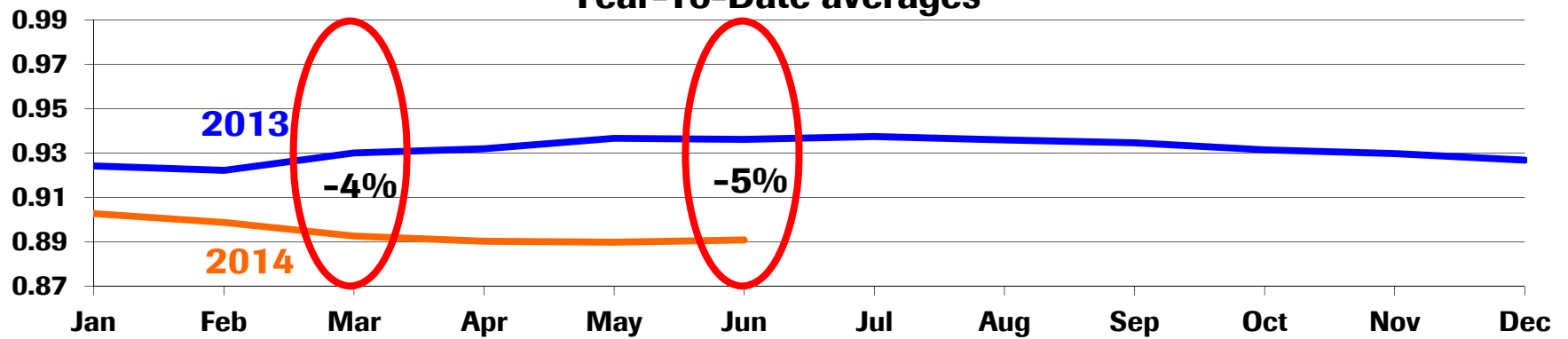
# CHF / USD



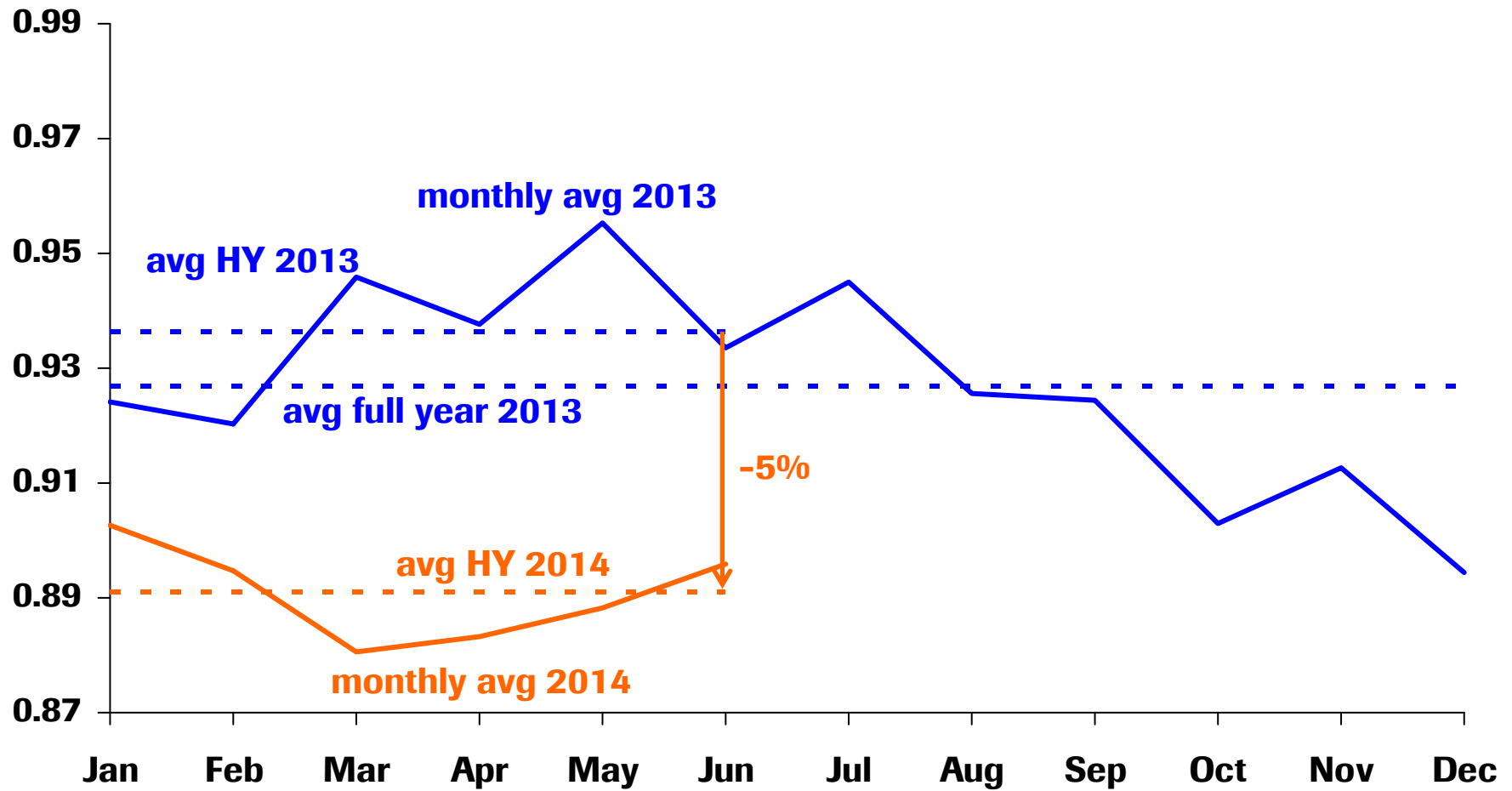
### Monthly averages



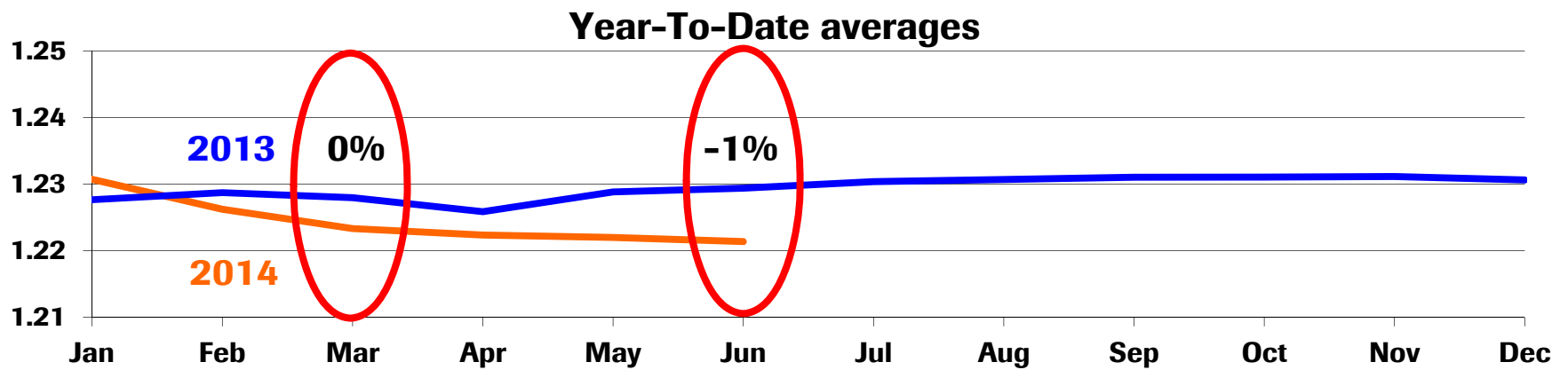
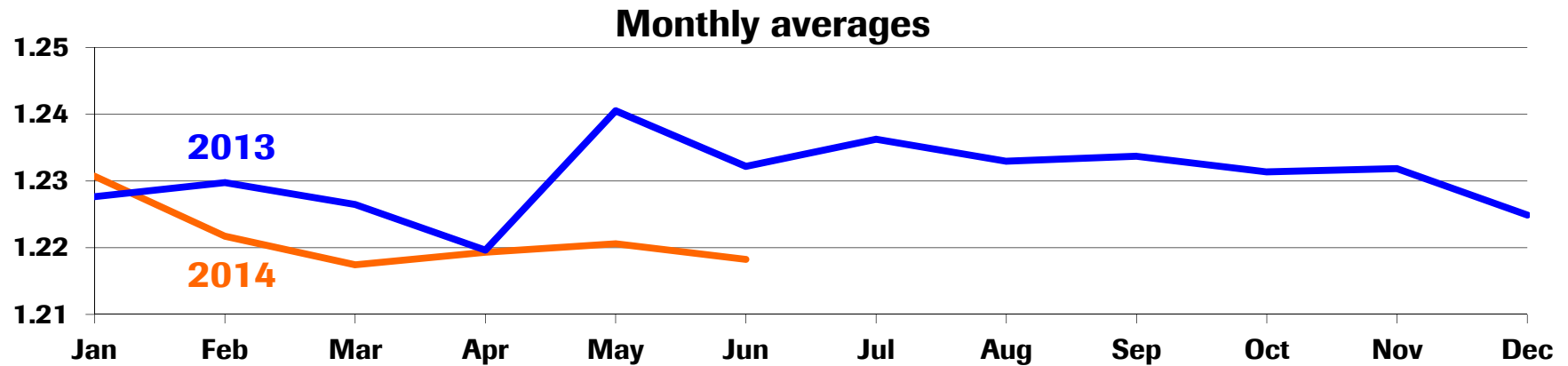
### Year-To-Date averages



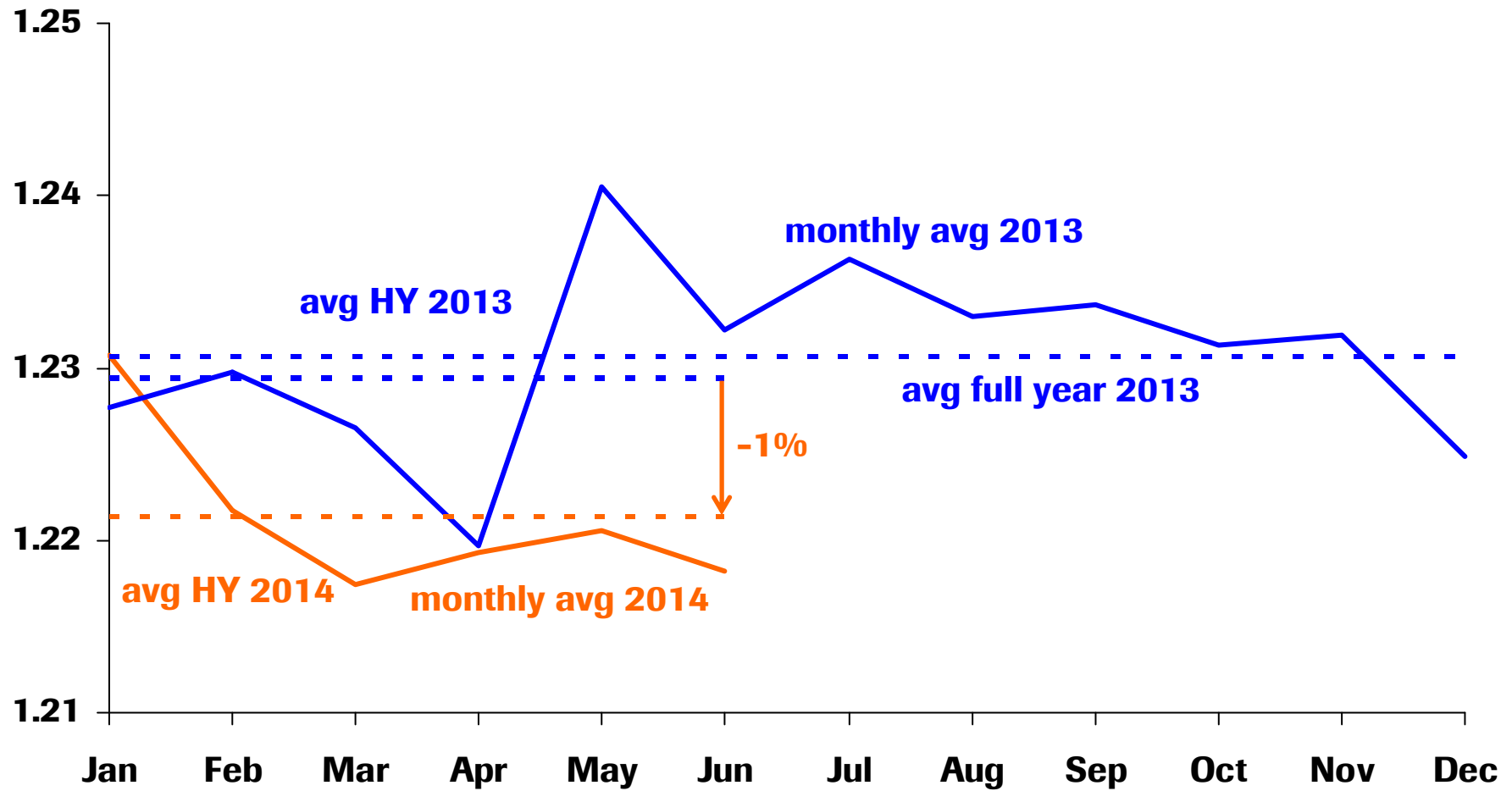
# CHF / USD



# CHF / EUR

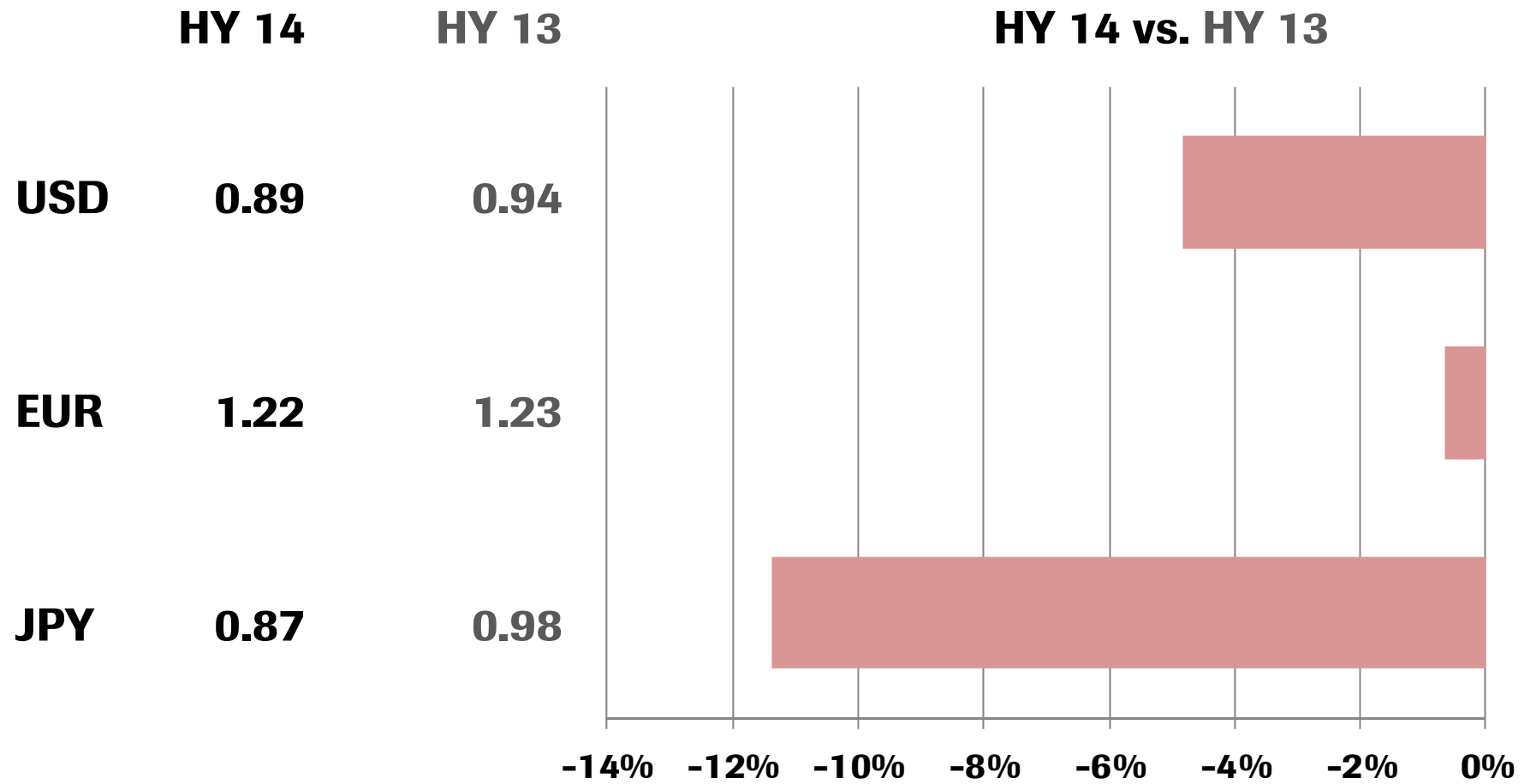


# CHF / EUR





# Average exchange rates



# Exchange rate impact on sales growth

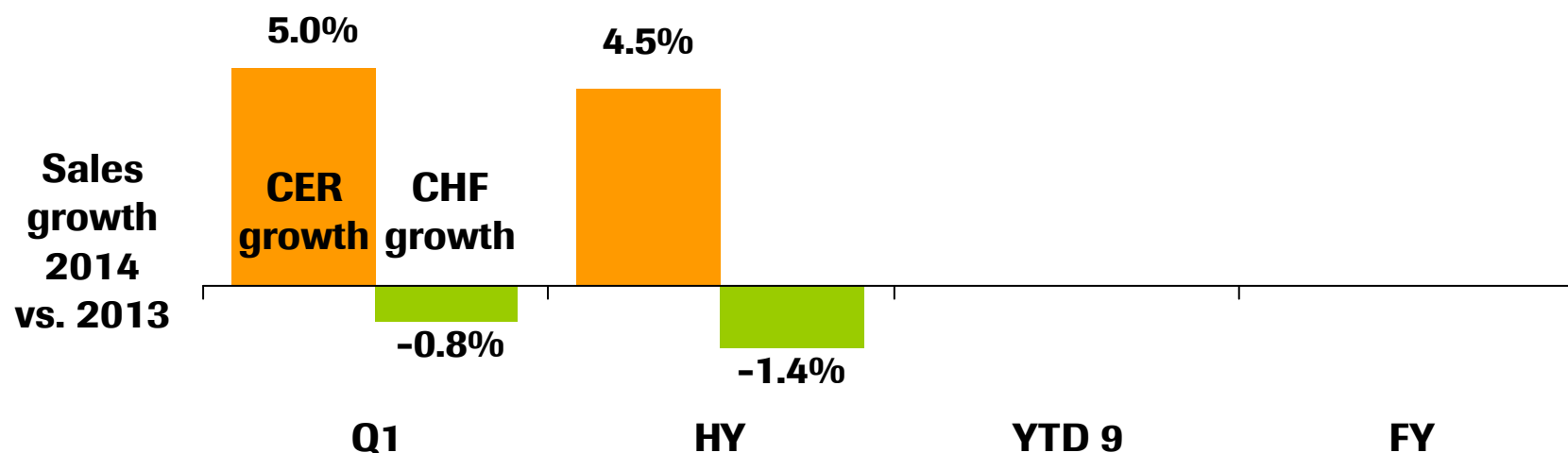
## *In H1 2014 negative impact from USD, Latin American currencies and JPY*

Development of average exchange rates versus prior year period

CHF / EUR	-0.4%	-0.7%
CHF / USD	-4.0%	-4.8%
CHF / JPY	-13.9%	-11.4%

Difference in CHF / CER growth

	-5.8%p	-5.9%p
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# Exchange rate impact on sales growth

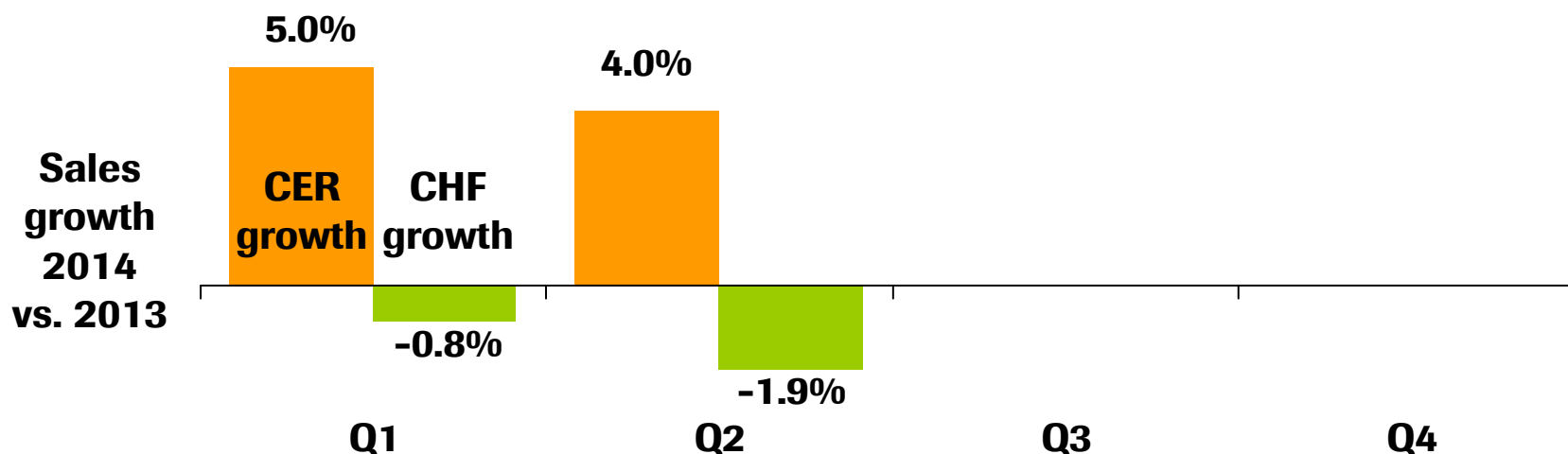
## *In H1 2014 negative impact from USD, Latin American currencies and JPY*

Development of average exchange rates versus prior year period

CHF / EUR	-0.4%	-0.9%
CHF / USD	-4.0%	-5.6%
CHF / JPY	-13.9%	-8.9%

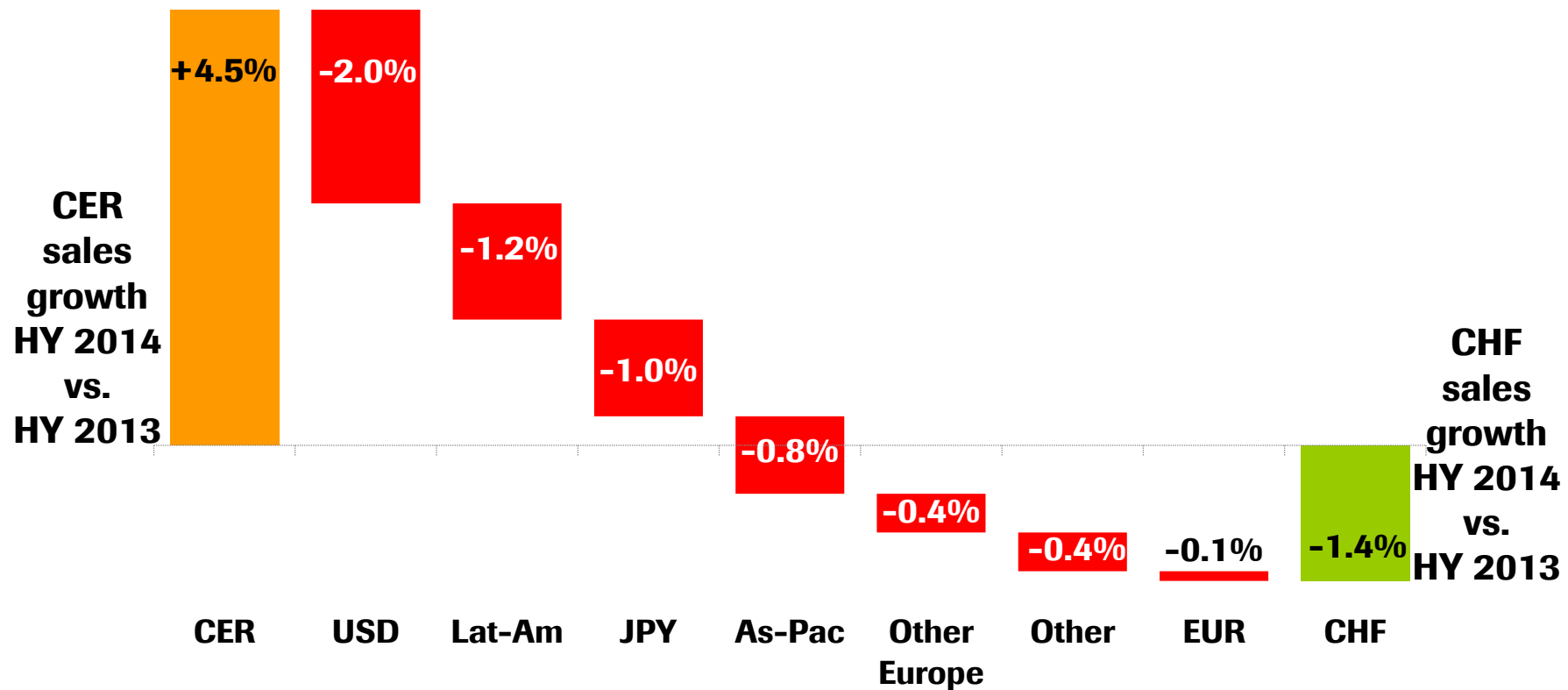
Difference in CHF / CER growth

	-5.8%p	-5.9%p
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# Exchange rate impact on sales growth

*Negative impact from USD, Latin American currencies and JPY*



*Doing now what patients need next*