Presentation Outline

TREAT Marc Pfeffer, MD, PhD

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Introduction Paul Eisenberg, MD, MPH, FACC

Global Regulatory Affairs & Safety, Amgen Inc.

Clinical Perspective Allen R. Nissenson, MD, FACP, FASN

Professor of Medicine, Associate Dean, Director,

Dialysis Program, David Geffen School of Medicine, UCLA

Benefit/Risk Preston Klassen, MD, MHS

Global Development, Amgen Inc

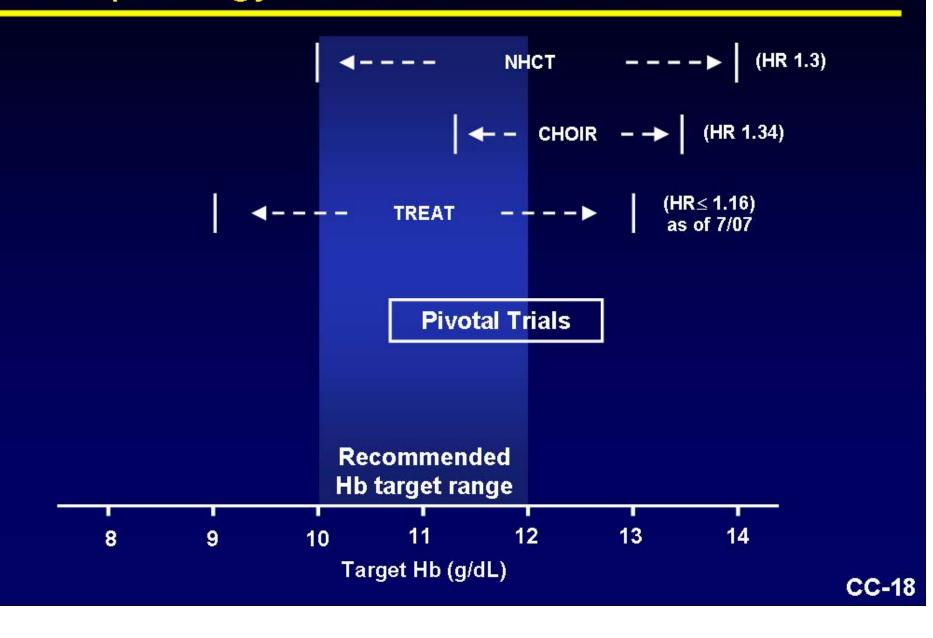
Risk Management Paul Eisenberg, MD, MPH, FACC

Global Regulatory Affairs & Safety, Amgen Inc.

Key Points

- ESAs provide clear clinical benefits in CRF patients
 - Transfusion avoidance
 - Improvements in anemia symptoms, physical function, and exercise capacity
- Different risks are associated with targeting vs achieving specific Hb levels
 - Targeting higher Hb (>13 g/dL) appears to confer risk
 - Patients who achieve Hb level >11 g/dL have less risk, however, this
 observation is complicated by factors such as underlying health status
 - Relationship of dose to risk is confounded
- Rapid rise or decline in Hb (cycling) should be minimized
- Target Hb range of 10-12 g/dL is recommended as a prudent approach to risk management
 - Managing risk through an achieved Hb ceiling of 12 g/dL is not consistent with results of RCTs

Summary Benefit and Risk of ESAs in Nephrology as Defined in RCTs



Sponsors Are Committed to Additional Risk Management on Key Issues

- Hb target
- ESA responsiveness
- Hb cycling