Presentation Outline

TREAT Marc Pfeffer, MD, PhD

Dzau Professor of Medicine, Harvard Medical School, Cardiovascular Division, Brigham and Women's Hospital

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

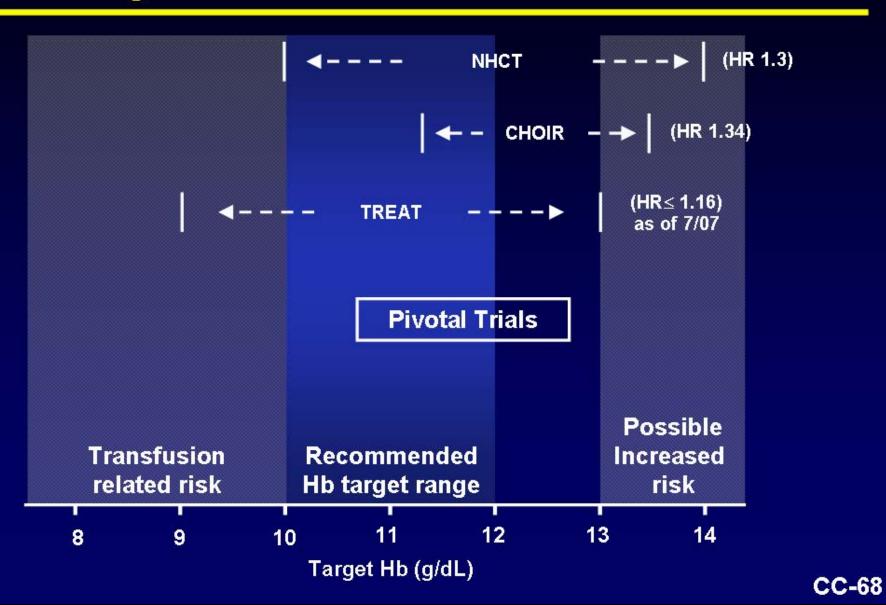
Risk Management Paul Eisenberg, MD, MPH, FACC

Global Regulatory Affairs & Safety, Amgen Inc.

Sponsors Are Committed to Additional Risk Management on Key Issues

- Hb target
- ESA responsiveness
- Hb cycling

Hb Target



Hb target

ESA responsiveness

Hb cycling

	Risk Management	Additional Risk Assessment
	Label – target 10-12 g/dL	
		TREAT study
Hb target	Dose according to current label	RCT to evaluate Hb target
	Physician and patient education (eg medication guide)	based on TREAT outcome

	Risk Management	Additional Risk Assessment
	Label – target 10-12 g/dL	TREAT study
Hb target	Dose according to current label	RCT to evaluate Hb target
	Physician and patient education (eg medication guide)	based on TREAT outcome
	Label advising recognition and management	
ESA responsiveness	Description of increased risk	RCT to evaluate appropriate management
	Dose limitations should be individualized	

ESA Responsiveness

- Proposed definition of hyporesponsiveness in product labeling
 - Unable to achieve desired Hb target within range of 10-12 g/dL despite use of appropriate dose titrations per label over a 12 week period
- Patient management
 - Evaluate for reversible causes
 - Use lowest dose to maintain stable Hb
 - Periodically reassess responsiveness
- Additional RCTs to refine risk management

	Risk Management	Additional Risk Assessment
	Label – target 10-12 g/dL	TREAT study
Hb target	Dose according to current label	RCT to evaluate Hb target
	Physician and patient education (eg medication guide)	based on TREAT outcome
	Label advising recognition and management	
ESA responsiveness	Description of increased risk	RCT to evaluate appropriate management
	Dose limitations should be individualized	
Hb cycling	Advise to maintain stable Hb within target of 10-12 g/dL	Clinical studies

Risk Management	Additional Risk Assessment
Label – target 10-12 g/dL	TREAT study
Dose according to current label	RCT to evaluate Hb target
Physician and patient education (eg medication guide)	based on TREAT outcome
Label advising recognition and management	
Description of increased risk	RCT to evaluate appropriate management
Dose limitations should be individualized	
Advise to maintain stable Hb within target of 10-12 g/dL	Clinical studies
	Label – target 10-12 g/dL Dose according to current label Physician and patient education (eg medication guide) Label advising recognition and management Description of increased risk Dose limitations should be individualized Advise to maintain stable Hb

Erythropoiesis-Stimulating Agent (ESA) Therapy in Chronic Renal Failure (CRF)

Joint Meeting Between the Cardiovascular and Renal Drugs & Drug Safety and Risk Management Advisory Committees

11 September 2007