UNITED STATES PATENT AND TRADEMARK OFFICE BEFORE THE PATENT TRIAL AND APPEAL BOARD _____ INNOPHARMA LICENSING, INC.,) INNOPHARMA LICENSING LLC,) INNOPHARMA INC., INNOPHARMA LLC) MYLAN PHARMACEUTICALS INC. and) MYLAN INC., Petitioner,) Case No.) IPR2015-00902 vs. SENJU PHARMACEUTICAL CO., LTD.,) BAUSCH & LOMB, INC., and BAUSCH) & LOMB PHARMA HOLDINGS CORP.,) Patent Owner.) *** CAPTION CONTINUED ***) _____) VIDEOTAPED DEPOSITION OF WILLIAM B. TRATTLER, M.D. Tuesday, February 23, 2016 Miami, Florida

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1	IN THE UNITED STATES DISTRICT COURT		1 2		APPEARANCES	
2 3	FOR THE DISTRICT OF NE	FOR THE DISTRICT OF NEW JERSEY		On behalf of Sen	ju Pharmaceutical Co., Ltd.,	
4			4	Bausch & Lomb Ind		
5	SENJU PHARMACEUTICAL CO., LTD.,) BAUSCH & LOMB INCORPORATED, and)			JUSTIN J. HASFORD), ESQUIRE	
6	BAUSCH & LOMB PHARMA HOLDINGS)	C. A. Nos.	5	901 New York Aver	on Farabow Garrett & Dunner, LLP nue, N.W.	
7		1:14-cv-00667 1:14-cv-04149	6	Washington, D.C. 202-408-4000 (P)		
-	Plaintiffs,)	1:14-cv-05144	7	justin. hasford@fi		
8	VS.)		8	On behalf of Lupi	n Limited and Lupin Pharmaceutica	ls,
9	LUPIN LIMITED and LUPIN		10	Inc.: NATASHA E. DAUGHI		
10	PHARMACEUTICALS, INC.,)			Goodwin Procter L	LP ´	
11) Defendente			The New York Time 620 Eighth Avenue		
11	Defendants.))		12	New York, New Yor 212-813-8800 (P)		
12	vs.)		13	ndaughtrey@goodwi	nprocter.com	
13	INNOPHARMA LICENSING, INC.,	C.A. Nos.	14	(PRESENT BY TELEF	HUNE)	
11		1:14-cv-06893 1:15-cv-03240	15	On behalf of Inno	Pharma Licensing, Inc.,	
14	INNOPHARMA, INC., and)	1:15-00-05240	16	InnoPharma Licens	sing LLC, InnoPharma Inc.,	
15	Defendants.)		17	and Mylan Inc.:	lylan Pharmaceuticals Inc.,	
16	/		18	JOSEPH M. JANUSZ, Alston & Bird LLF		
17 18				Bank of America F 101 South Tryon S	Plaza	
19				Charlotte, North	Carolina 28280-4000	
20 21	VIDEOTAPED DEPOSITION OF WILLI Tuesday, February 2		20) 704-444-1000 (P) 704-444-1738 (F) joe.janusz@alston.com		
22	Miami, Florid		21	Also present:		
23 24			23	Jeffrey Menton, (CLVS	
25			24 25			
25		Dara 2				Darra
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3 (Pages 6 to 9)

						3 (Pages 6 to 9)
				Page 6		Page 8
1			EXHIBITS (Continued)		1	THE VIDEOGRAPHER: This begins video media
2					2	disc number one, volume one. This is the
3	EXHIBIT		DESCRIPTION	PAGE	3	videotaped deposition of William V. Trattler,
4	Exhibit No.	6	Prescribing information for	57	4	that's T-r-a-t-t-l-e-r, M.D. in the matter of
5			Xibrom		5	Innopharm Licensing, Inc. et al versus Senju
6					6	Pharmaceuticals Company Limited, et al, Case Number
7	Exhibit No.	7	Prescribing information for	60	7	IPR2015-00903 and 14-CV-0667-JBS-KMW et al in the
8			bromfenac ophthalmic solution		8	United States Patent and Trademark Office before
9	F 1 1 1 1 1 N	0		01	9	the Patent Trial and Appeals Board and the U.S.
10	Exhibit No.	8	Document previously marked	91	10	District Court for the District of New Jersey.
11 12			Senju 2060		11	Today is February 23, 2016. The time is
12	Exhibit No.	0	Document previously marked as	93	12	12:19 p.m. This video deposition is taking place at the Dadeland Marriott at 9090 South Dadeland
14	EXILIBITE NO.	7	Senju Exhibit 2134	75	14	Boulevard, Miami, Florida. This video deposition
15					15	has been at the request of Joseph Janusz from the
16	Exhibit No.	10	Document previously marked as	99	16	law firm of Alston & Bird, LLP. My name is Jeff
17			Senju 2030		17	Menton. I am the certified legal video specialist,
18			2		18	and the court reporter is Michele Anzivino. We're
19	Exhibit No.	11	Curriculum vitae	102	19	from Gregory Edwards LLC.
20					20	Would counsel please state their appearance
21	Exhibit No.	12	Opening expert report	120	21	for the record and state whom you represent
22					22	starting with the noticing attorney, and then will
23	Exhibit No.	13	Reply expert report	122	23	the court reporter please swear the witness in.
24					24	MR. JANUSZ: Joe Janusz of Alston & Bird on
25	///				25	behalf of the Innopharm entities which are a
				Page 7		Page 9
1			EXHIBITS (Continued)	i ugo i	1	petitioner in the IPR proceedings and a defendant
2					2	in the District Court litigation.
	EXHIBIT		DESCRIPTION	PAGE	3	MS. DAUGHTREY: And this is Natasha Daughtrey
4	Exhibit No.	14	Document, Bates	135	4	from Goodwin Proctor on defendant of the Lubin
5			PR0L0333863 - 869		5	defendant in the District Court litigation.
6					6	MR. HASFORD: Justin Hasford of Finnegan on
7	Exhibit No.	15	Document, Bates	140	7	behalf of Senju and Bausch & Lomb in both the IPR
8			PR0L0333854 - 862		8	and the District Court proceedings.
9			-000-		9	Thereupon,
10					10	WILLIAM V. TRATTLER, M.D.,
11					11	having been duly sworn or affirmed, was examined and
12					12	testified as follows:
13					13	THE WITNESS: Yes, I do.
14					14	DIRECT EXAMINATION BY MR. JANUSZ: Q. Good morning, Dr. Trattler. How are you?
15					16	A. Great, thank you.
16 17					17	Q. I'm going to go over a few ground rules ahead
18					18	of time. Ha have you ever depose been deposed
19					19	before?
20					20	A. I have, yes.
21					21	Q. Okay. So I'm going to run through this
					22	quickly. I'm sure it's all stuff you've heard before.
22					1 22	
					23	You understand that you're under oath in giving your
22					24	testimony today, right?
22 23						

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4 (Pages 10 to 13) Page 10 Page 12 1 been marked as Exhibits 1 and 2. We'll refer to them Q. Okay. I'm going to ask you a series of 1 2 here as Trattler Exhibits 1 and 2, but Trattler Exhibit 2 questions today, and I'm going to ask that those 1 is Senju Exhibit 2116 in the IPR 2015-00902 3 questions be answered. Even though intermittently your 3 4 counsel may interject objections, unless he instructs proceeding. And Trattler 2 is the same Senju Exhibit 4 5 you not to answer the question I'd ask that you answer 5 Number 2116 in the 903 proceeding. 6 the question. 6 These are your declarations that you 7 7 submitted in the IPR proceedings, correct? A. Okav. 8 Q. We'll -- we're also going to need verbal 8 A. Yes. 9 9 answers so that the court reporter doesn't have any O. Okay. And you understand that -- that the 10 trouble recording what our discussion is here today. opinions that -- that you've offered -- and just let me 10 11 She can't effectively record head nods or shakes or 11 back up a minute. 12 anything like that, so -- and then we'll take breaks 12 Obviously there have been a lot of opinions, 13 periodically throughout the day. And the only thing you know, submitted in this case on -- on your behalf. 13 14 that I'd ask -- and -- and if you need a break please 14 And so I'd like to try to streamline things as much as 15 let me know obviously. The only thing I'd ask is that I can. And so, you know, part of what I'm going to do 15 16 if there is a question pending that you answer the here is just to try to get you, if you're willing to, 17 question before we go into a break. 17 to confirm that the opinions you offered in each of 18 A. Perfect. 18 these declarations are largely similar if that's -- if 19 Q. that's something you're comfortable with. Okay. Have you ever submitted an -- well, 19 20 let me start with this actually. 20 A. Yes, they are. MR. HASFORD: Joe, if it will speed things Q. Okay. And -- okay. Now, if I can touch a 21 21 22 along, we can stipulate that he's here pursuant to 22 little bit on your -- on your background. You --23 this notice. 23 you're an ophthalmologist, correct? 24 MR. JANUSZ: Very well, then. 24 A. Correct. MR. HASFORD: Okay. 25 25 Q. Okay. And have you -- I presume you've Page 11 Page 13 1 BY MR. JANUSZ: performed cataract surgeries before? 1 2 Q. Okay. So have you ever submitted a -- a 2 A. Yes. declaration in an IPR proceeding before? Okay. Approximately how often -- and we'll 3 3 Q. 4 A. No, this is my first time. 4 start in -- in roughly a month. How -- how often during the course of a month do you perform cataract 5 Q. Okay. And have you ever testified in a 5 patent case in a District Court proceeding before? 6 6 surgery? 7 A. This is my first time, as well. 7 A. Approximately 60 cases a month. Okay. And so you -- you have testified at a 60 cases a month? 8 Q. 8 Q. deposition previously, they just weren't really patent 9 9 A. Six-zero, yes. cases: is that correct? 10 10 Q. Six-zero? Okay. And would that, you know, equate to across 11 A. Correct. 11 Q. all 12 months of the year? 12 Okay. Have you ever testified at a trial 12 13 before? Correct. You know, we're not -- we're not 13 A. Yes. 14 very seasonal here in Miami. 14 A. 15 Q. Okay. And -- and none of those were related 15 Q. Right. Fair enough. And -- and approximately when in your career to patent issues? 16 16 17 A. Correct. 17 did you first perform cataract surgeries? Okay. Were any of those related to 18 Q. 18 A. So during my residency. My residency was 19 ophthalmic solutions containing bromfenac? 19 from 1993 to 1996. So typically during my second year 20 A. 20 of residency is when you start your first cases. No. 21 Q. 21 Q. Okav. Okav. 22 (Exhibit No. 1 marked for identification.) 22 A. So in the 1994 to '95 range. (Exhibit No. 2 marked for identification.) 23 23 Q. And where was your residency? 24 BY MR. JANUSZ: At -- at Scheie Eye Institute which is in 24 A. 25 25 Philadelphia, Pennsylvania. Part of the University of Q. Dr. Trattler, you've been handed what have

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1		1	5 (Pages 14 to 17)
	Page 14		Page 16
1	Pennsylvania.	1	It's your opinion that making an
2	Q. Okay. If I can have you turn to Trattler	2	ophthalmic application of an ophthalmic solution
3	Exhibit 1, which is your declaration in the 902 case,	3	more comfortable for a patient would increase patient
4	and just just so we are clear, on the front of	4	compliance; is that right?
5	Trattler Exhibit 1 if you look at the very bottom you	5	A. Definitely.
6	see the case number ending in 902.	6	Q. Okay. And and the idea behind that is
7	A. Yes.	7	likely that obviously if a patient's more comfortable
8	Q. And so when I refer to the 902 case, that's	8	with the drug that they're applying to themselves
9	what I'm looking at.	9	they're not going to have any issues applying it; is
10	A. Okay.	10	that right?
11	Q. Similarly with the 903 case.	11	A. Correct. If a if a medication stings and
12	So if I can direct your attention to	12	burns on every application, they may be less likely to
13	paragraph 41 of the declaration, and that appears at	13	put it into their eyes.
14	page 13.	14	Q. Okay. And so it's it's your opinion in
15	A. Okay.	15	this declaration in this in this paragraph of
16	Q. And so in in paragraph 41 you acknowledge	16	your declaration that Prolensa's pH level of 7.8 being
17	that Prolensa is formulated formulated at a pH of	17	closer to that of natural tears being 7.4 at least in
18	7.8, correct?	18	part contributes to the elimination of burning
19	A. Correct.	19	burning and stinging experienced by patients using
20	Q. And it's your opinion that that formulation	20	Prolensa; is that right?
21	is closer to that of natural tears which you identify	21	A. Yeah, my th my understanding is that that
22	as 7.4 as compared to the pH of Xibrom and Bromday	22	would by being closer to the natural pH it can help,
23	which are 8.3; is that correct?	23	and you know, as far as reduced burning and
24	A. Correct.	24	stinging.
25	Q. Okay. Are you aware that the pH levels of	25	Q. Okay. And can you explain when you say it
	Page 15		Page 17
1	natural tears in humans can fluctuate beyond the 7.4	1	can help, can you explain what you mean by that?
2	that you've identified?	2	A. Well, obviously there are some formulations
3	A. I think that, you know, pH can be affected by	3	of medications that are at pH of 7.4 that still cause
4	a variety of different things, but I think the average	4	burning and stinging. So you can have irritating
5	is considered by most experts to be around 7.4.	5	solutions that have a pH of 7.4. So it's a combination
6	Q. Okay. But it can it can go for	6	of of factors.
7	example, it can be lower than 7.4 in certain patients?	7	Q. Okay. And generally speaking, I mean, would
8	A. 7.4 is an is an average.	8	your opinion be that obviously that there are
9	Q. Okay.	9	well, let me let me strike that.
10	• • • • • • • • • • • • •		
10	A. Is I think that's an the understanding	10	Generally speaking, would your opinion be
11	A. Is I think that's an the understanding that when we talk about, you know, patients and their	10 11	Generally speaking, would your opinion be that the closer you get to the natural the pH of
	-		
11	that when we talk about, you know, patients and their	11	that the closer you get to the natural the pH of
11 12	that when we talk about, you know, patients and their tears it's typically considered that 7.4 is the	11 12	that the closer you get to the natural the pH of natural tears, the more likely a solution would be
11 12 13	that when we talk about, you know, patients and their tears it's typically considered that 7.4 is the average.	11 12 13	that the closer you get to the natural the pH of natural tears, the more likely a solution would be comfortable for the user?
11 12 13 14	 that when we talk about, you know, patients and their tears it's typically considered that 7.4 is the average. Q. Okay. Now, is it your opinion that strike 	11 12 13 14	that the closer you get to the natural the pH of natural tears, the more likely a solution would be comfortable for the user? MR. HASFORD: Objection. Incomplete
11 12 13 14 15	<pre>that when we talk about, you know, patients and their tears it's typically considered that 7.4 is the average. Q. Okay. Now, is it your opinion that strike that.</pre>	11 12 13 14 15	that the closer you get to the natural the pH of natural tears, the more likely a solution would be comfortable for the user? MR. HASFORD: Objection. Incomplete hypothetical.
11 12 13 14 15 16	<pre>that when we talk about, you know, patients and their tears it's typically considered that 7.4 is the average. Q. Okay. Now, is it your opinion that strike that. It's your opinion that if well, let me</pre>	11 12 13 14 15 16	that the closer you get to the natural the pH of natural tears, the more likely a solution would be comfortable for the user? MR. HASFORD: Objection. Incomplete hypothetical. THE WITNESS: Right. So it all depends on so
11 12 13 14 15 16 17	<pre>that when we talk about, you know, patients and their tears it's typically considered that 7.4 is the average. Q. Okay. Now, is it your opinion that strike that.</pre>	11 12 13 14 15 16 17	<pre>that the closer you get to the natural the pH of natural tears, the more likely a solution would be comfortable for the user?</pre>
 11 12 13 14 15 16 17 18 	 that when we talk about, you know, patients and their tears it's typically considered that 7.4 is the average. Q. Okay. Now, is it your opinion that strike that. It's your opinion that if well, let me direct your attention to the last sentence in in paragraph 41. And if you can read that out loud, it 	11 12 13 14 15 16 17 18	<pre>that the closer you get to the natural the pH of natural tears, the more likely a solution would be comfortable for the user?</pre>
11 12 13 14 15 16 17 18 19	<pre>that when we talk about, you know, patients and their tears it's typically considered that 7.4 is the average.</pre>	11 12 13 14 15 16 17 18 19	<pre>that the closer you get to the natural the pH of natural tears, the more likely a solution would be comfortable for the user?</pre>
11 12 13 14 15 16 17 18 19 20	 that when we talk about, you know, patients and their tears it's typically considered that 7.4 is the average. Q. Okay. Now, is it your opinion that strike that. It's your opinion that if well, let me direct your attention to the last sentence in in paragraph 41. And if you can read that out loud, it starts with the reduced pH. A. Yes. "The reduced pH and amount of 	11 12 13 14 15 16 17 18 19 20	that the closer you get to the natural the pH of natural tears, the more likely a solution would be comfortable for the user? MR. HASFORD: Objection. Incomplete hypothetical. THE WITNESS: Right. So it all depends on so many factors. So if we the had same solution, potentially, and again we have to evaluate it, but if it's closer to the natural you know, the pH of of our natural tears is it more likely to be
 11 12 13 14 15 16 17 18 19 20 21 	 that when we talk about, you know, patients and their tears it's typically considered that 7.4 is the average. Q. Okay. Now, is it your opinion that strike that. It's your opinion that if well, let me direct your attention to the last sentence in in paragraph 41. And if you can read that out loud, it starts with the reduced pH. A. Yes. "The reduced pH and amount of surfactant in Prolensa eliminated the burning and 	11 12 13 14 15 16 17 18 19 20 21	that the closer you get to the natural the pH of natural tears, the more likely a solution would be comfortable for the user? MR. HASFORD: Objection. Incomplete hypothetical. THE WITNESS: Right. So it all depends on so many factors. So if we the had same solution, potentially, and again we have to evaluate it, but if it's closer to the natural you know, the pH of of our natural tears is it more likely to be comfortable. But obviously it depends on, you
 11 12 13 14 15 16 17 18 19 20 21 22 	 that when we talk about, you know, patients and their tears it's typically considered that 7.4 is the average. Q. Okay. Now, is it your opinion that strike that. It's your opinion that if well, let me direct your attention to the last sentence in in paragraph 41. And if you can read that out loud, it starts with the reduced pH. A. Yes. "The reduced pH and amount of surfactant in Prolensa eliminated the burning and stinging sensation making it more comfortable ensuring 	11 12 13 14 15 16 17 18 19 20 21 22	<pre>that the closer you get to the natural the pH of natural tears, the more likely a solution would be comfortable for the user?</pre>

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