

From: gilmore o'neill/cambridge/biogen;nsf;gilmore.oneill@biogenidec.com;smt
Sent: Thu Jun 29 2006 03:52:34 EDT
To: [REDACTED]
CC: cara lansden/cambridge/biogen@biogenidec.com; [REDACTED];minhua yang/cambridge/biogen@biogenidec.com;
Subject: Re: REVIEW REQUEST BG12 PROTOCOLS- 1 question

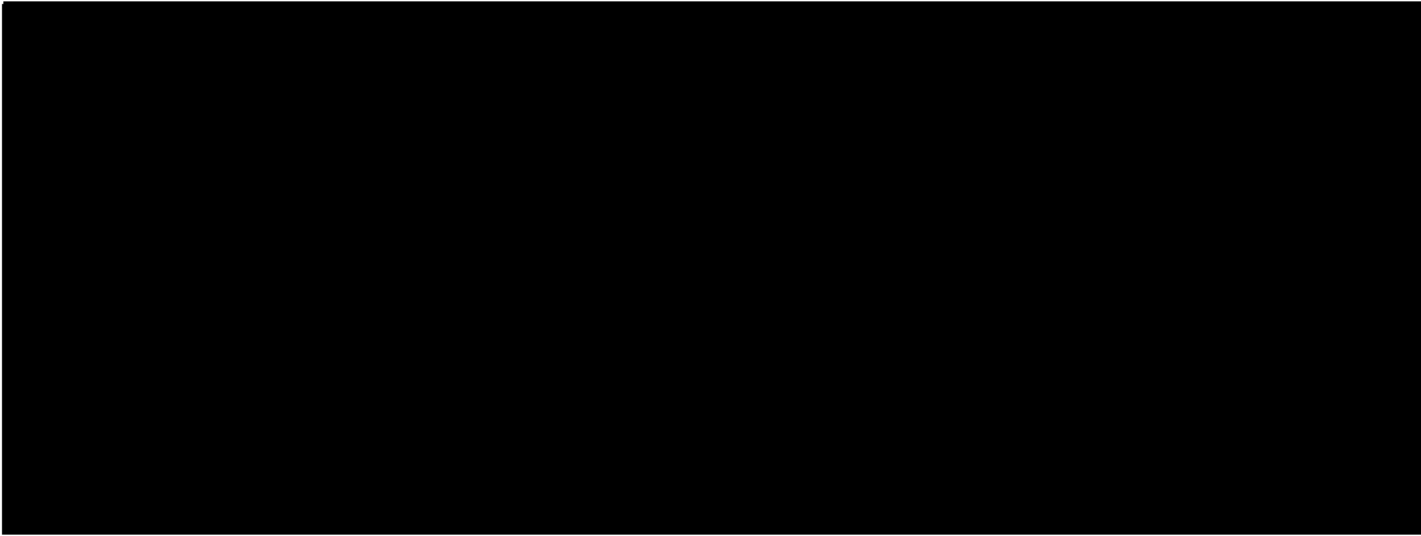
[REDACTED]

Since this will be an intention to treat analysis, we should allow patients to reduce dose if they cannot tolerate the drug. I would write it as we wrote it for C1900.

Best regards

Gilmore

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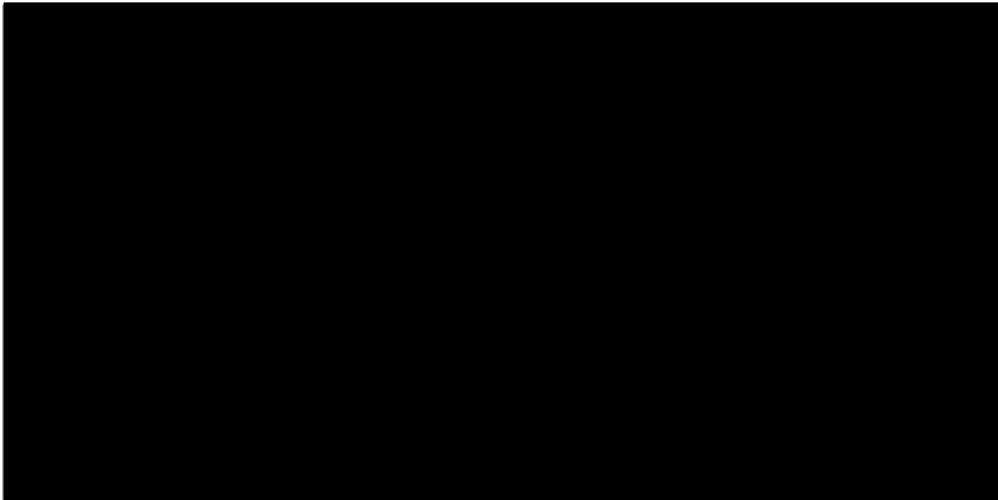


Hi Minhua,

We touched on this a couple of times. For these studies it was my impression, that if subjects did not tolerate BG12 at the higher dose, they would be prematurely discontinued from the study for "intolerance to study drug". From what I understood, it was okay in the C-1900 study because there was a dose ranging study (or dose finding) and for all intent and purposes these phase 3 studies are "fixed" at one dose level.

I realize this is not in the protocol - but we could certainly add it, or clarify based on Gilmore's opinion.

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Hi ██████████/Gilmore:

While I was reviewing the protocols I had a question about dosing. This is a Gilmore question. In C-1900 we allow subjects to take reduced dose i.e. 1 pill each time 3 pills total a day due to study drug intolerance, do we allow that in our phase 3 protocols?

-minhua

Note:

Section 14.3: Test and Assessments: is not complete and will not be completed until the Study Activity Flowcharts are "final".

Section 15 - Safety: [REDACTED] made changes to this section, which have been highlighted and strikethrough, to make it easy to review for those of you in DSRM.

Thank you for your time and attention.

Regards,

[REDACTED]

