

1
2 UNITED STATES PATENT AND TRADEMARK OFFICE

3 BEFORE THE PATENT TRIAL AND APPEAL BOARD

4
5 SANDOZ INC.,
6 APOTEX INC., and APOTEX CORP.,
7 EMCURE PHARMACEUTICALS LTD.,
8 HERITAGE PHARMA LABS INC.,
9 HERITAGE PHARMACEUTICALS INC.,
10 GLENMARK PHARMACEUTICALS, INC., USA,
11 GLENMARK HOLDING SA,
12 GLENMARK PHARMACEUTICALS, LTD., MYLAN LABORATORIES
13 LIMITED, TEVA PHARMACEUTICALS,
14 FRESENIUS KABI USA, LLC and WOCKHARDT BIO AG,
15 Petitioners,

16
17 v.

18 ELI LILLY & COMPANY
19 Patent Owner.

20 Case IPR2016-00318
21 U.S. Patent No. 7,772,209

22 VIDEOTAPED DEPOSITION OF PATRICK J. STOVER, PH.D.
23 Chicago, Illinois
24 Friday, February 10, 2017

25 Reported by: PAULA CAMPBELL, CSR, RDR, CRR, CRC

Job No: 118359

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February 10, 2017
9:11 A.M.

Videotaped discovery deposition of
PATRICK J. STOVER, Ph.D., held at the offices
of BRINKS GILSON & LIONE, 455 North Cityfront
Plaza Drive, Chicago, Illinois, pursuant to
notice before Paula Campbell, CSR, RDR, CRR,
CRC.

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A P P E A R A N C E S:
ALSTON & BIRD
Attorneys for Mylan Laboratories Limited
90 Park Avenue
New York, NY 10016
BY: THOMAS PARKER, ESQ. (telephone)

SKIERMONT DERBY
Attorneys for Neptune Generics, LLC
2200 Ross Avenue
Dallas, TX 75201
BY: SARAH SPIRES, ESQ. (telephone)

CARLSON CASPERS VANDENBURGH
Attorneys for Teva Pharmaceuticals USA, Inc.
and Fresenius Kabi USA, LLC
225 South Sixth Street
Minneapolis, MN 55402
BY: GARY SPEIER, ESQ. (telephone)

ALSO PRESENT:
Robert Zellner, Videographer

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A P P E A R A N C E S:
WILLIAMS & CONNOLLY
Attorneys for the Patent Owner
725 Twelfth Street Northwest
Washington, DC 20005
BY: DAVID KRINSKY, ESQ.

ELI LILLY AND COMPANY
Attorneys for the Patent Owner
Eli Lilly Corporate Center
Indianapolis, IN 46285
BY: JAMES LEEDS, ESQ.

BRINKS GILSON & LIONE
Attorneys for Sandoz Inc.
455 North Cityfront Plaza Drive
Chicago, IL 60611
BY: LAURA LYDIGSEN, ESQ.

BRINKS GILSON & LIONE
4721 Emperor Boulevard
Durham, NC 27703
BY: BRYAN RICHARDSON, ESQ.

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VIDEOGRAPHER: Good morning. This is the
start of tape labeled number one of the
videotaped deposition of Patrick J. Stover,
Ph.D., in the matter of Sandoz, Inc, et al.,
versus Eli Lilly and Company in the United
States Patent and Trademark Office, before the
Patent Trial and Appeal Board, Case
Number IPR2016-00318.

This deposition is being held at Brinks
Gilson & Lione at NBC Tower, 455 North
Cityfront Plaza Drive, Suite 3600, Chicago,
Illinois, 60611, on February 10th, 2017, at
approximately 9:11 A.M.

My name is Robert Zellner, from TSG
Reporting, Inc., and I am the legal video
specialist. The court reporter is Paula
Campbell in association with TSG Reporting.

And will counsel please introduce
yourselves for the record?

MR. KRINSKY: David Krinsky of Williams &
Connelly, LLP on behalf of Patent Owner Eli
Lilly and Company. With me is James Leeds of
Eli Lilly and Company.

MS. LYDIGSEN: Laura Lydigsen of Brinks

1 P. STOVER
 2 Gilson & Lione for petitioner, Sandoz Inc., and
 3 with me is Bryan Richardson, also of Brinks
 4 Gilson & Lione.
 5 VIDEOGRAPHER: Thank you.
 6 Will the court reporter please swear in the
 7 witness?
 8 REPORTER: Would you please raise your
 9 right hand.
 10 P A T R I C K S T O V E R,
 11 called as a witness, having been duly sworn,
 12 was examined and testified as follows:
 13 MR. KRINSKY: And just before we begin, to
 14 make it clear for the record, I understand
 15 there are a number of other parties who are on
 16 the telephone who will be identified by e-mail
 17 later?
 18 MS. LYDIGSEN: Correct. We will contact
 19 them.
 20 EXAMINATION
 21 BY MR. KRINSKY:
 22 Q. All right. Good morning, Dr. Stover.
 23 A. Good morning, David.
 24 Q. Have you ever been deposed before?
 25 A. I have not.

1 P. STOVER
 2 Q. Okay. Well, I'll give you the -- you have
 3 probably heard this from your counsel, but just so
 4 you understand the flow of the proceedings --
 5 A. Sure.
 6 Q. -- I'm here to ask you questions. Your
 7 answer suggests that one rule that perhaps you need
 8 to get used to is I'll ask questions, your counsel
 9 will object if she has an objection, and then, you
 10 should give your answer, but for the court
 11 reporter's sake, we should all try to avoid talking
 12 over each other. I will try not to interrupt you.
 13 You try not to interrupt me. It will go more
 14 smoothly that way.
 15 A. Certainly.
 16 Q. And regardless of whether your counsel
 17 objects, you're obligated to answer my questions
 18 unless she instructs you not to answer and you
 19 follow her instruction.
 20 A. I understand.
 21 Q. You're not a medical doctor, are you?
 22 A. I am not.
 23 Q. You have a -- you have a Ph.D.?
 24 A. I do.
 25 Q. What is that Ph.D. in?

1 P. STOVER
 2 A. Biochemistry -- biochemistry and molecular
 3 biophysics.
 4 Q. And what do you see -- for purposes of this
 5 proceeding, how would you categorize your expertise?
 6 What do you see yourself as an expert in --
 7 A. Certainly.
 8 Q. -- for today's purposes?
 9 A. Absolutely. I am an expert in folate
 10 metabolism. I think I am recognized as one of the
 11 global leaders in that area, just in terms of
 12 knowledge of the metabolism and the work that I have
 13 contributed to that field.
 14 My Ph.D. focused primarily on enzymology.
 15 So I am very familiar with enzymes, how enzymes are
 16 analyzed, how inhibitors are designed, how
 17 inhibitors are characterized.
 18 My current position is Director of the
 19 Division of Nutritional Sciences at Cornell
 20 University. I've been there since 1994. Prior to
 21 that -- in the Division of Nutritional Sciences, so
 22 I am a -- also considered an expert in nutrition and
 23 human nutrition, and I did my post doc at UC
 24 Berkeley in the Department of Nutritional Sciences.
 25 So my background, I guess, I would put in

1 P. STOVER
 2 three spheres. One is in knowledge of one-carbon
 3 metabolism, including folate and B-12, and the
 4 functioning of enzymes and enzymology, and in the
 5 broader area of nutrition.
 6 Q. Do you have a familiarity with the drug
 7 pemetrexed?
 8 A. I do.
 9 Q. Is that something you have been familiar
 10 with prior to your work on this case?
 11 A. Yes, I actually acquired that compound from
 12 Lilly in some publication -- a characterization of
 13 an enzyme called methylenetetrahydrofolate synthase,
 14 and we used that drug, along with other Lilly drugs,
 15 to try to understand the trafficking of folate and
 16 how it's trafficked intracellularly, how decisions
 17 are made of whether the folate to make purines or
 18 goes to make thymidylate.
 19 Q. And when --
 20 (A short interruption in the proceedings
 21 was had.)
 22 BY MR. KRINSKY:
 23 Q. When was that roughly?
 24 A. Oh, that paper was published in '90 -- or
 25 no, in 2008, I believe. Martha Field is the first

1 P. STOVER

2 author.

3 Q. So that was published at a time when
4 pemetrexed was already an approved anticancer
5 therapy?

6 A. I can't speak to that. It was my
7 understanding as it was, but I'm not a clinician.

8 Q. And you don't have any particular
9 experience in the area of oncology?

10 A. I don't. I work with veterinary
11 oncologists to try to understand how folate
12 metabolism changes during cellular transformation.
13 Much of my research focuses on uses of cancer
14 models. So I am interested in how cellular
15 transformation modifies the metabolic pathway to
16 achieve the goals of the cancer cell.

17 So I have made transgenic mice where we
18 have altered metabolism. We have crossed those mice
19 to colon cancer models and measured things like
20 tumor number, tumor multiplicity, so forth and so
21 on.

22 So our cancer work is limited to a
23 fundamental understanding of how nutrition interacts
24 with genetics in cancer.

25 Q. So is it fair to say that you've done work

1 P. STOVER

2 on sort of the pure science underlying the
3 biochemistry of cancer, but not -- you haven't done
4 work directly on human cancer treatment?

5 A. That would be absolutely correct. I have
6 done work with some agencies in terms of expert
7 guidance and consulting on the role of folate and
8 cancer risk at the population level, but we are not
9 talking about treatment. We are talking about
10 prevention there.

11 Q. And just to be clear in what you're talking
12 about, you are talking about the effects of folate
13 on the incidence of cancer in the population?

14 A. That's correct, but it would include
15 effects not only on incidence but on mortality at
16 the population level.

17 Q. Okay. From -- from your standpoint as --
18 as a biochemist and an expert in folate metabolism,
19 how does pemetrexed work to treat cancer?

20 A. So pemetrexed is known as a multitargeted
21 antifolate. It's -- there is a long generation of
22 these antifolates. Early in the 1940s, when Lederle
23 Labs first elucidated the structure of folate and
24 synthesized folic acid, almost immediately
25 thereafter they began to design inhibitors or

1 P. STOVER

2 analogs that would inhibit DNA synthesis, because
3 they knew that this compound that they had isolated
4 from biological material was needed for DNA
5 synthesis. Almost immediately they came out with
6 compounds to try to inhibit DNA synthesis.

7 So pemetrexed is a multitargeted
8 antifolate. It has a hierarchy in terms of its
9 targets. It binds most tightly to thymidylate
10 synthase, but also is an effective inhibitor of
11 dihydrofolate reductase, and it also has weaker --
12 this is all relative of course, it's a hierarchy --
13 weaker affinity for -- for FGAR transformylase.

14 Q. Is FGAR transformylase sometimes known as
15 GARFT?

16 A. It is.

17 Q. I'm going to call it that for simplicity's
18 sake.

19 A. We'll call it GARFT, absolutely.

20 Q. And thymidylate synthase is often referred
21 to as TS?

22 A. Well, actually now the nomenclature they
23 like TYMS, but I'll -- happy to go with TS.

24 Q. Okay. I think -- I think we lawyers
25 settled on TS a while ago.

1 P. STOVER

2 A. Okay. There you go. Well, we had too, but
3 then these, you know, boards who change the names of
4 genes for this and that changed it to TYMS.

5 Q. Okay. Well, we'll -- we'll go with TS for
6 today, if that's all right.

7 A. That's fine.

8 Q. What is the relevance of pemetrexed's
9 ability to inhibit these various enzymes to the
10 treatment of cancer?

11 A. I'm sorry. Could you repeat?

12 Q. What is the relevance of pemetrexed's
13 ability to inhibit these various enzymes to the
14 treatment of cancer?

15 MS. LYDIGSEN: Objection. Vague.

16 A. The -- they are folate analogs. So they
17 are structurally similar to substrates of
18 folate-dependent enzymes. They bind to those
19 enzymes in a competitive way so that the natural
20 substrate can't bind, and they tend to bind more
21 tighter than the natural substrate, thereby they
22 inhibit the activity.

23 And in the case of TS, they prevent the
24 synthesis of thymidylate, which is one of the four
25 required bases for DNA synthesis.

1 P. STOVER

2 Q. So pemetrexed has the effect, then, of
3 inhibiting DNA synthesis?

4 A. Correct.

5 Q. And in order to divide, cancer cells need
6 to perform DNA synthesis?

7 A. That's correct.

8 Q. And so, the idea then is that the
9 pemetrexed kills the cancer cell, because it can't
10 make DNA?

11 MS. LYDIGSEN: Objection to form.

12 A. It's more complicated than that. What you
13 actually get is stalling of the replication fork
14 that triggers other cellular events, among those
15 is -- can be a ptois or other biological event. So
16 it isn't -- it's more complicated than you're
17 describing it.

18 Q. Okay. But the -- is it fair to say that
19 the primary mechanism by which pemetrexed works on
20 cancer cells is by inhibiting DNA synthesis?

21 A. That's the leading hypothesis and the most
22 likely explanation. I would agree with that.

23 Q. And that would have been the understanding
24 of a person of ordinary skill in the art in this
25 case?

1 P. STOVER

2 A. I would agree with that.

3 Q. How does -- you understand that one of the
4 issues in this case surrounds the toxicities that
5 pemetrexed had been observed to cause prior to 1999?

6 A. I didn't address that in my declaration.

7 Q. You understand that pemetrexed does cause
8 toxicities?

9 A. Yes, I do.

10 Q. And how does pemetrexed cause toxicities?

11 MS. LYDIGSEN: Objection. Outside the
12 scope.

13 A. Pemetrexed is a multitargeted antifolate.
14 So not only does it inhibit its primary target, or
15 at least its highest affinity target, TYMS, but it
16 targets other enzymes as well, as I indicated.

17 Toxicities, depending on the nature of the
18 toxicity, could originate from any off-target
19 effect. Calling -- if we are referring to the
20 target effect as the inhibition of TS.

21 Q. Are you familiar with a particular toxicity
22 called neutropenia?

23 A. I am not an expert in neutropenia, no.

24 Q. Okay. So do you know how pemetrexed causes
25 neutropenia?

1 P. STOVER

2 A. I -- I am not an expert in how pemetrexed
3 causes neutropenia, no.

4 Q. Okay. So to the extent other experts in
5 this case have opined that pemetrexed can cause
6 neutropenia by inhibiting DNA synthesis, you don't
7 agree with that opinion?

8 A. I have --

9 MS. LYDIGSEN: Objection. Outside the
10 scope.

11 A. I have no opinion on that.

12 Q. Is the same true of other particular
13 hematological toxicities?

14 MS. LYDIGSEN: Objection. Outside the
15 scope.

16 A. Which would you be referring to, to a
17 megaloblastic anemia or -- which -- which --

18 Q. Any other hematologic toxicity.

19 A. Rapidly dividing cells require DNA
20 synthesis. So if you impair DNA synthesis, you will
21 have -- you are more likely to have both chromosomal
22 abnormalities in those cells as well as lower rates
23 of cell division proliferation.

24 Q. So one of the mechanisms by which
25 pemetrexed can cause, and would have been understood

1 P. STOVER

2 to be able to cause, toxicities is by inhibiting DNA
3 synthesis in noncancerous but rapidly dividing
4 cells; is that fair?

5 A. That would be a hypothesis. Pemetrexed has
6 off-target effects that can have other effects, such
7 as its effects on dihydrofolate reductase.

8 Q. Well, and dihydrofolate -- you say
9 off-target, but does dihydro -- excuse me.

10 Does dihydrofolate reductase inhibition
11 have any bearing on pemetrexed's ability to treat
12 cancer?

13 MS. LYDIGSEN: Objection. Outside the
14 scope.

15 A. I need clarification in terms of what you
16 are meaning in terms of treating cancer.

17 Q. Well, a few moments ago we discussed the,
18 at least at a very general level, and I understand
19 there is -- there is underlying complexity --

20 A. Absolutely.

21 Q. -- we discussed at a general level the way
22 in which by inhibiting TS pemetrexed can treat
23 cancer.

24 A. Correct.

25 Q. My question is: Does pemetrexed's

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