## DANIEL BLOCH, PH.D. - 07/14/2017

	DANIEL BLOCH, PH.D 07/14/2017
1	UNITED STATES PATENT AND TRADEMARK OFFICE
2	BEFORE THE PATENT TRIAL AND APPEAL BOARD
3	
4	MYLAN PHARMACEUTICALS, INC., )
5	Petitioner, )
6	vs.
7	ALLERGAN, INC.,
8	PATENT OWNER. )
9	
10	DEPOSITION OF DANIEL BLOCH, Ph.D.
11	
12	8:45 a.m.
13	July 14, 2017
14	701 Fifth Avenue, Suite 5100
15	Seattle, Washington
16	
17	CASE IPR2016-01127, PATENT 8,685,930
18	CASE IPR2016-01128, PATENT 8,629,111
19	CASE IPR2016-01129, PATENT 8,642,566
20	CASE IPR2016-01130, PATENT 8,633,162
21	CASE IPR2016-01131, PATENT 8,648,048
22	CASE IPR2016-01132, PATENT 9,248,191
23	
24	
25	REPORTED BY: Pat Lessard, CCR #2104



	DANIEL BLOCI	•		
1	APPEARANCES	Page 2	1	Page 4 DANIEL BLOCH, being duly sworn, testified
2			2	upon oath, as follows:
3	FOR THE PETITIONER:		3	EXAMINATION
4	MR. MICHAEL J. KANE		4	BY MR. KANE:
5	Fish & Richardson		5	Q. Good morning, Dr. Bloch.
6	3200 RBC Plaza		6	A. Good morning.
7	60 South Sixth Street		7	Q. Could you state your full name for the
8	Minneapolis, MN 55402		8	record.
9	612.335.5070		9	A. Daniel, middle initial A, last name Bloch
10	kane@fr.com		10	spelled with an H.
11			11	Q. What's your current business address?
12	FOR THE RESPONDENT:		12	A. My current business address?
13	MR. STEVEN W. PARMELEE		13	Q. Yes.
14	MS. GRACE A. WINSCHEL		14	A. 8987 East Tanque, spelled T A N Q U E. And
15	Wilson Sonsini Goodrich & Rosati		15	then another word Verde, V ${\tt E}$ R D ${\tt E}. \;\;$ And then a pound
16	701 Fifth Avenue, Suite 5100		16	sign 309-387. Tucson, Arizona 85749.
17	Seattle, WA 98104-7036		17	I've given you that. That's my mailing
18	206.471.2083		18	address. I have an office at Stanford but I live in
19	sparmelee@wsgr.com		19	Tucson and $\mathfrak{m} y$ letterhead has that address on it, $\mathfrak{m} y$
20	MS. JACQUELINE ALTMAN		20	Tucson address.
21	Wilson Sonsini Goodrich & Rosati		21	Q. Thank you. Have you been deposed before?
22	12235 El Camino Real, Suite 200		22	A. Yes.
23	San Diego, CA 92130-3002		23	Q. How many times, approximately?
24	858.350.2300		24	A. A dozen.
25	jacqueline.altman@wsgr.com		25	Q. So you've been through the drill before but
		Page 3		Page F
1	EXAMINATION	Page 3	1	Page 5
1 2		Page 3	<b>1</b> 2	
	EXAMINATION			I'll just kind of give you the ground rules again.
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2	E X A M I N A T I O N ATTORNEY	PAGE	2 3	I'll just kind of give you the ground rules again.  A. Okay.  Q. So I'm going to be asking questions. You're
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Page 8 Page 1 nods of the head or shakes of the head. She can't get 1 Is that right? No? I'm not really quite 2 that down, so that's a good point to remember. sure. Sorry. 3 Finally, we'll take periodic breaks roughly, 3 Q. The signature is June 30th. usually about an hour or so of questions and then let All right. So it had to be early in June. everybody stretch their legs and what have you. 5 Okay. How much time did you spend working 5 If you need a break --6 6 on the declaration? A. Many hours. I don't really have an estimate 7 I'll let you know. 7 8 -- let me know. 8 with me. Certainly more than 50. 9 Q. And did you draft the declaration yourself 9 A. Okav. or how did that process work? 10 Very good. Is there any reason that you 10 can't give accurate and truthful testimony today? 11 11 A. Yes, I did. 12 12 Q. So you typed the words yourself? A. No. A. No. Counsel -- counsel prepared the 13 You understand that you're under oath and 13 14 the testimony you are giving is under oath and is 14 formatting of the declaration and they aided me in 15 admissible in court? 15 figures, formatting and things of that nature, but I 16 A. I do understand, yes. wrote the text. Q. You were talking over me there. You've got Q. How did you write the text? Did you type it 17 17 18 to slow down and let me finish my question. Okay? in some sort of document and send it to counsel? 18 19 Α. Yes. 19 Yeah. Yeah, we went back and forth. Q. What did you do to prepare for your 20 Q. Okay. I'll hand you what's previously been 20 21 marked as Exhibit 1034. deposition today? 21 22 A. I read over materials that are pertinent to 22 Do you recognize that document? 23 or included in my declaration and I met with counsel. 23 A. It appears to be a version of my CV. Yes. Q. When did you meet with counsel? I see it's dated November 1, 2016. 25 A. Yesterday for several hours as well as the 25 Yes, I see that, too. Page 7 Page 9 1 day before. 1 Was it accurate as of that date? 2 Q. Did you speak to anyone other than counsel 3 about the deposition? Have there been any changes to your CV in 3 Q. A. No. 4 the meantime? 5 Q. I'm going to hand you, Dr. Bloch, what's 5 A. There are some minor ones, I believe. There been marked as Exhibit 1040. has been at least one manuscript that was submitted 7 7 that has been accepted, so that would be a change. A. Okay. Q. Do you recognize that document? Otherwise, I don't think I changed -- I 8 8 9 A. Yes, this is my declaration, a copy of my 9 would have changed anything. I think that's probably the only change of substance, maybe. 10 declaration. 10 11 Q. And on page 35, that's your electronic 11 Q. What was the nature of that manuscript? 12 signature? A. Oh, it had to do with an intervention of a 12 13 A. Yes, it is. 13 pharmaceutical company having to do with artificial 14 Q. And if you look at the front cover you'll 14 protection of too much scarring as a result of back see that there are a total of six IPRs listed. 15 15 surgery on the spine. Do you see that? 16 16 Q. When you say "intervention," what do you 17 A. Right. 17 mean? Q. And you provided the same declaration or one They have to cut you open and put this tube 18 18 Α. in here where they are surgically trying to help you deposition for all six IPRs? 19 19 20 A. That's my understanding why they're listed 20 with your debilitation. 21 21 Thank you. And looking at the front of your here. 22 Q. When did you begin working on this CV -- I may have said 1034 before but it's actually 23 declaration? 23 Exhibit 1043, if I misspoke -- I saw you got a BS from Stanford in statistics and a Ph.D. from Johns Hopkins 24 A. Sometime early in June -- no, sometime early 24

in July, I think.

in statistics?

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A. That's correct.Q. Has your employment history been focused on

3 statistics?

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4 A. Yes. Well, in terms of the academic part of 5 my career.

6 I've been self-employed as a contractor as 7 well. That's a completely different profession.

8 Q. What kind of activities did you undertake as 9 a contractor?

10 A. I was a general contractor in California. I 11 built homes.

Q. Really.

13 A. Custom homes, things of that nature. That's 14 why there's a gap between 1972 and 1984 on that front 15 page.

Q. Prior to -- well, let me step back. You're
obviously aware this IPR, or these are IPRs and they
relate to a proceeding going on in the Patent Office,
correct?

20 A. Yes, I've been told that.

21 Q. You also understand that there's a District

22 Court litigation going on in Marshall, Texas?

23 A. Yes.

24 Q. And you've been engaged to work on the

25 litigation as well?

A. Yes, I have.

Q. Prior to being engaged with respect to the dispute regarding Restasis, had you done any work related to ophthalmology?

5 A. Well, that's a very broad question. As a 6 biostatistician, I've interacted with people at 7 Stanford that have done studies with eye tissues.

8 I have consulted for startup companies 9 having to do with devices that they've had for the 10 eye.

Most recently with the startup company, actually in Tucson, Arizona, where they have a device where they can snake something in the back of the eye to help ocular, macular degeneration.

15 So, you know, broadly, yes, I have been 16 involved with ocular-type things. And with 17 specifically with this compound, you know.

18 Q. And by the compound, you're talking about 19 cyclosporin?

A. Well, what is it called. Restasis?

Q. Yes.

A. RESTASIS.

Q. Yes. That's the brand name. Cyclosporin is the active ingredient.

So have you done any work related to

treatment of dry eye or KCS?

A. When you say have I done any work, I've

advised people. I had a colleague at Stanford who has

dry eye and she asked me to -- at the time that she

got that diagnosis to peruse the literature to help

her understand, you know, what the evidence is of one

thing perhaps working better than another.

8 So that was a case that was -- it wasn't 9 through a pharmaceutical company, it was just a 10 private kind of thing.

But otherwise, I think with dry eye, I don't recall that being a subject matter that I've been involved with.

Q. Okay.

15 A. Excuse me.

16 Q. As part of your professional career as a 17 biostatistician, have you been involved with the 18 approval of drugs by FDA?

A. Yes.

20 Q. Have you assisted in review of the 21 submissions to FDA?

MR. PARMELEE: Objection; form.

23 Q. (By Mr. Kane) Have you assisted?

A. What was the question you asked me? I lost my train of thought when the objection came in.

Page 11

Q. My question was have you assisted in submissions to the FDA?

A. Yes.

Q. Have you assisted in review of submissions made to the FDA?

A. Yes. But not as an employee of the FDA.

Q. What was your role in review of submissions made to the FDA?

9 A. Well, it varied depending upon what the 10 submission was. A Phase I submission would be a very 11 different submission than a Phase III preliminary 12 trial that was done to get approval.

Q. I guess my question was directed at, if you weren't an employee of the FDA, why were you reviewing submissions made to the FDA?

A. Because of my expertise in biostatistics the company asks me to do this sometimes.

Q. Have you ever been involved or engaged by FDA to review any submissions?

A. No

Q. You've never been on an FDA advisory panel?

22 A. I have been, yes.

Q. What does that consist of?

A. Again, that's a very varied topic.

For example, one meeting was a group of



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Page 14

1 somewhere around 30 of us met with higher-ups in the 2 statistical personnel of the FDA, biologics, devices

3 and drugs, where the discussion had to do with missing

data in submissions.

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And the FDA wanted advice in terms of how they should handle that broadly but also more specifically how much missing data it would be okay to have and that was a very lively discussion.

So that's just a specific example of the kind of functions that the FDA uses advisory boards for if it's biostatistical in nature.

### Q. How long have you been involved with FDA 13 statistical advisory boards?

A. I'm not currently on the advisory board. You'd have to go to my CV. I think I might have the dates there. I don't actually know.

#### Q. Okay. Why don't we do that.

A. I don't know if it's here. Is it here? I'm 18 19 just looking for it.

Well, 1995 to 2006, it's number eleven.

Q. Right. Okay.

It was in that time frame.

23 Q. Okay. And that's a special government employee, they pay you to be on the advisory board or 25 advisory panel?

Yes, probably. That's right.

2 Okay. So you understand that FDA has 3 statisticians who review clinical data in connection with a drug approval process?

5 A. Yes, more than an understanding. Yes, I 6 know that's true. Yes.

### Q. And have you interacted with those statisticians?

A. Yes.

#### Q. In what capacities?

Well, again, that's fairly varied. I've been on conference calls with companies discussing what the FDA statisticians had concerns with respect to the -- with the investigational plan that had been submitted to the FDA. So there was a discussion about the content that way, long distance.

I have given lectures at the FDA to statisticians and interacted with them directly in that way. Those lectures have been mostly having to do with introducing to them some of the newer things that were going on in statistics that I had expertise with in terms of how they could apply it to their needs.

So it's a variety of ways I've interacted with statisticians at the FDA.

Page 15

A. I said including FDA statistical advisory panel. And I was a special government employee also working with the Veterans Administration hospital in Palo Alto.

The way the Veterans Administration performs many very high level clinical trials.

Excuse me, I'm going to get some water.

In fact, some of the best clinical trials that are done in this country are through the VA system, where their subjects in the VA are veterans.

And these protocols are actually headed by 12 statisticians, unlike many other grants which are 13 headed by PIs which are specialists in the particular 14 field.

And I was the adviser to the VA on the 16 planning and execution of those trials. And there are VA centers throughout the country, five or six, that are involved in these clinical trials that are funded through the government.

So I was a special government employee for that. I don't believe I got paid but they had to designate me somehow to be involved.

Q. I see. And is that -- looking at your professional activities, it's number nine there, is that what you were referring to?

Page 17

## Okay. And do they use those statistical panels, statistical advisory panels, for instance, to stay abreast of current statistical methods?

MR. PARMELEE: Objection; form.

I think -- well, I don't know if they use it specifically for that purpose, but those features are how statistics, you know, continues to evolve and will come out when you're at an advisory panel because people will bring up newer methods that perhaps could be used.

### (By Mr. Kane) When you've given lectures to the FDA regarding statistics, what format or context did that come up in?

A. I can recall one lecture which had to do with presenting to them -- it's a mouthful -- it's called non-parametric regression, non-parametric regression methods, which they wanted to use --  $\mbox{\sc I'm}$ sorry.

I haven't had this frog in my throat all week and now I have to have it.

### Q. That's the way it goes.

And they were hoping to be able to use that methodology in their post-marketing surveillance program, and that's a fairly critical part of what they do. But that's, you know, it speaks for itself.

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