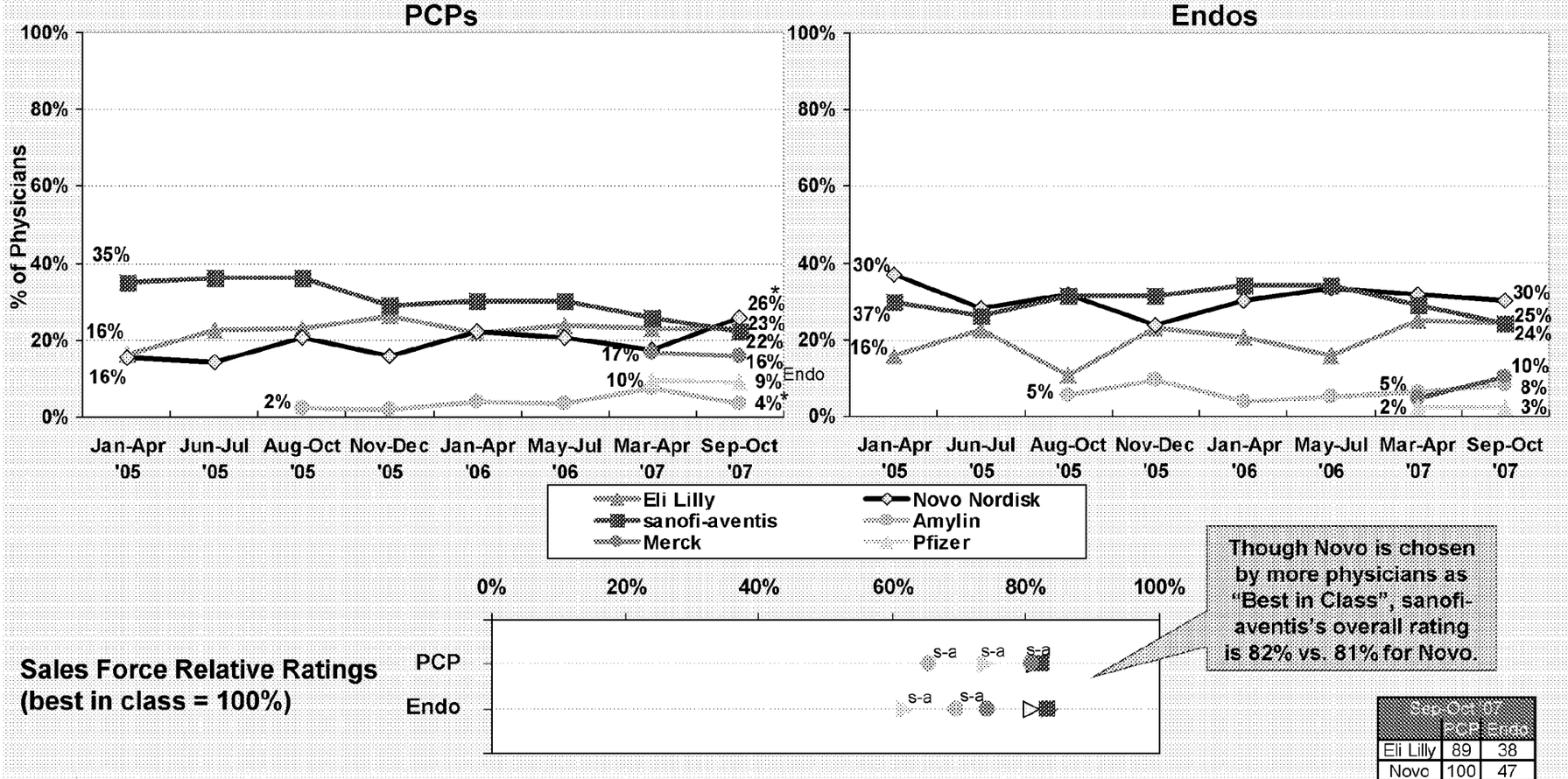
Directionally, Novo Nordisk's diabetes sales force is considered "best in class" by the highest percentage of physicians in Sep-Oct '07

Best in Class Diabetes Sales Force: by Specialty



Sales Force Relative Ratings (best in class = 100%)

Though Novo is chosen by more physicians as "Best in Class", sanofi-aventis's overall rating is 82% vs. 81% for Novo.

Sep-Oct '07	PCP	Endo
Eli Lilly	89	38
Novo	100	47
s-a	85	38
Amylin	14	13
Merck	61	16
Pfizer	35	4

COMPASS

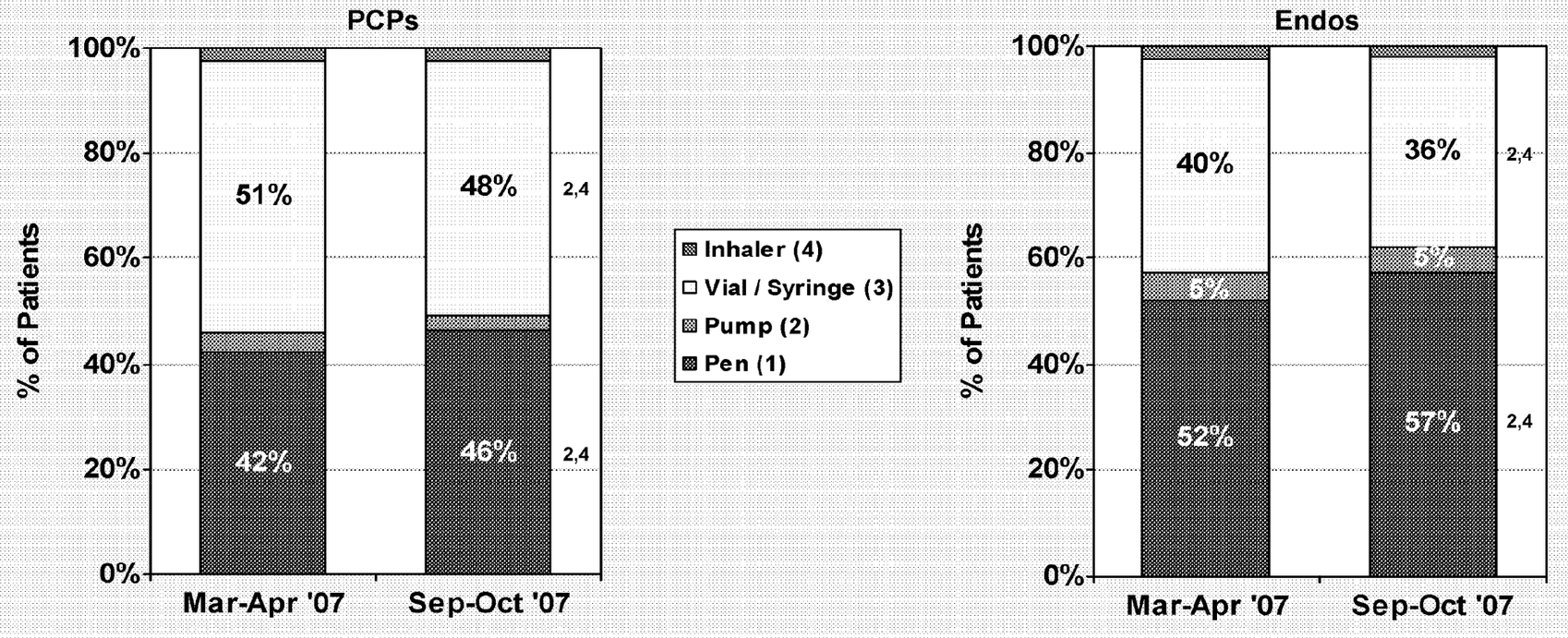
Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. Statistical testing between companies shown in appendix. s-a = statistically different at 95% between sanofi-aventis and other companies as noted. VL2: In this exercise, we would like to understand you overall impression of the sales force for each company that details you for diabetes products. Considering these companies, which one would you define as the "best" in terms of meeting your needs?

Appendix Contents

- Introduction
- Key Findings
- Awareness and Trial
- Special Topics
- Product Perceptions
- Product Usage
- Sales Force
- Appendix
  - Appendix 1: Additional ATU Slides
  - Appendix 2: Additional Sales Force Slides
  - Appendix 3: Stat Testing Appendix & New Question List

The percentage of physicians initiating patients with an insulin pen increased directionally in Sep-Oct '07

Delivery Method of Insulins to Type 2 Patients: by Specialty



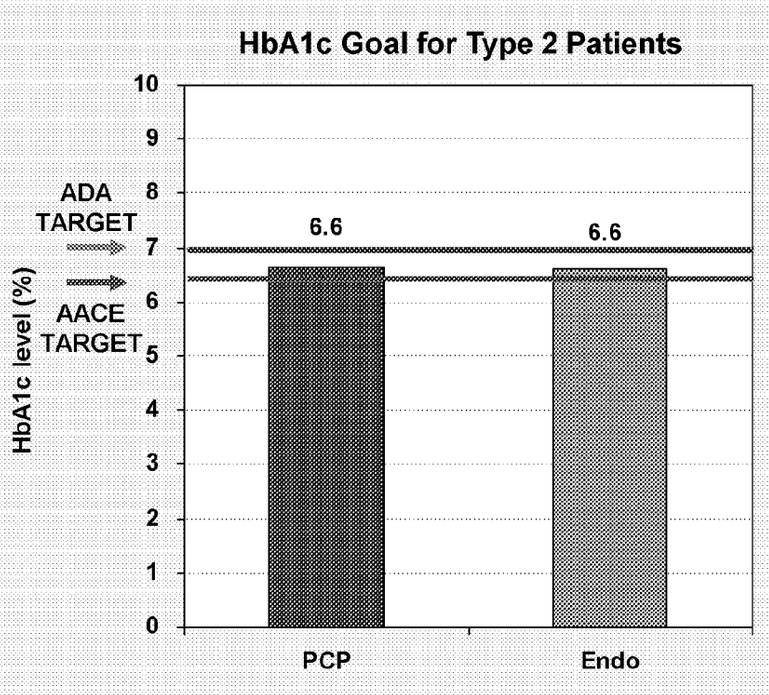
COMPASS

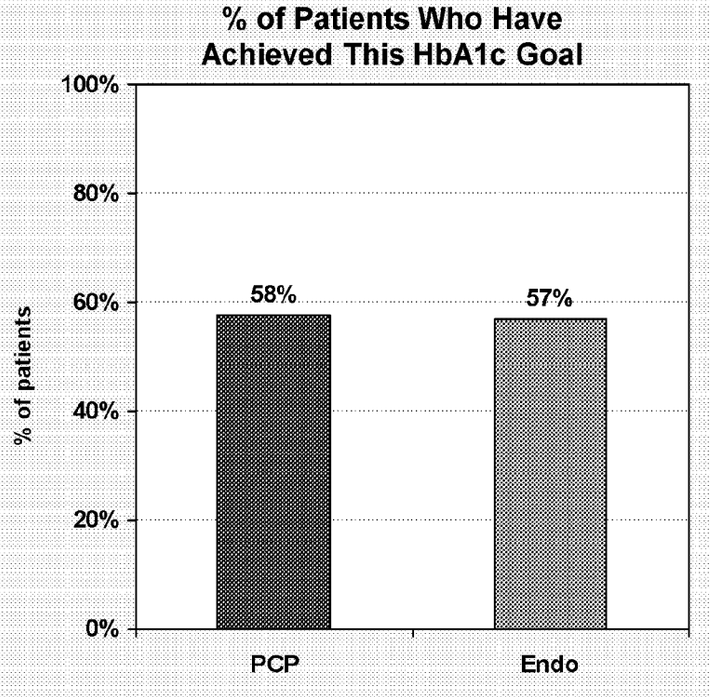
Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population and patient base. INS3: Please consider your Type 2 diabetes patients using insulin. What percent did you personally initiate with each of the following methods of delivery?

Sep-Oct '07	
PCP	125
Endo	76

On average, PCPs and Endos consider Type 2 patients to be at goal when HbA1c levels reach 6.6; however, only 57% to 58% of patients achieve this goal

HbA1c Goals & Achievement: by Specialty





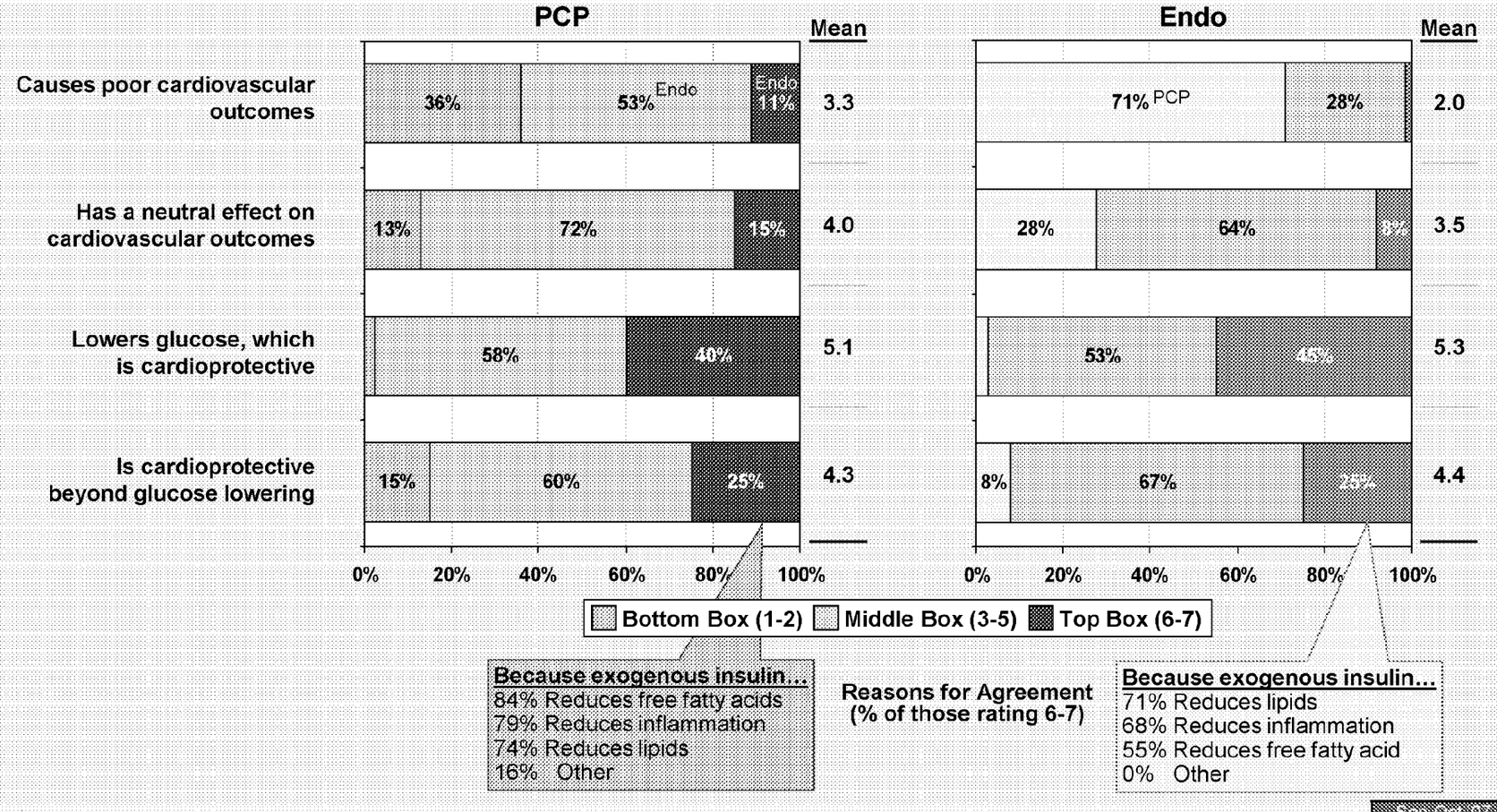
COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. HBA1: Please consider your Type 2 patients. What is your HbA1c goal, on average, for these patients? HBA2: What percentage of your Type 2 patients have achieved this HbA1c goal?

Sept-Oct '07	
PCP	125
Endo	76

Physicians agree most strongly that exogenous insulin is cardioprotective because it lowers glucose; approximately one-quarter believe that insulin's cardioprotective benefits extend beyond glucose lowering

Cardiovascular Effects of Exogenous Insulin: by Specialty



Because exogenous insulin…
84% Reduces free fatty acids
79% Reduces inflammation
74% Reduces lipids
16% Other

Reasons for Agreement (% of those rating 6-7)

Because exogenous insulin…
71% Reduces lipids
68% Reduces inflammation
55% Reduces free fatty acid
0% Other

COMPASS

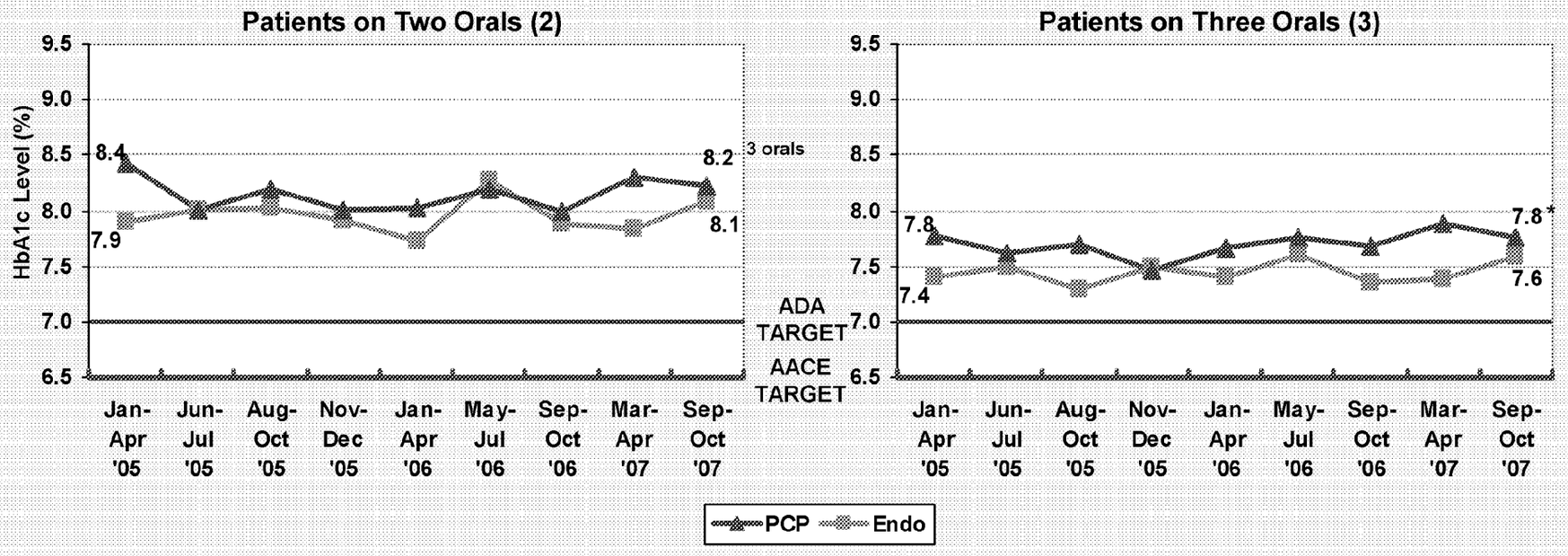
Source: COMPASS Physician ATU Tracking Study
CV1: For each of the statements below, on a scale of 1 to 7, please indicate how much you agree or disagree with each statement. (Please select one response for each statement) CV2: Why do you strongly agree that "the use of exogenous insulin is cardioprotective beyond glucose lowering"? Please select all that apply.

Sample Size: 07

	PCP	Endo
CV1	125	76
CV2	31	19

Despite goals that are comparable to AACE, most physicians wait until HbA1c approaches 8.0 to introduce insulin into the treatment regimen

HbA1c Level at Which Insulin Is Introduced



Addressing barriers to insulinization and emphasizing Lantus' efficacy at helping patients achieve HbA1c goals remains an opportunity for Lantus

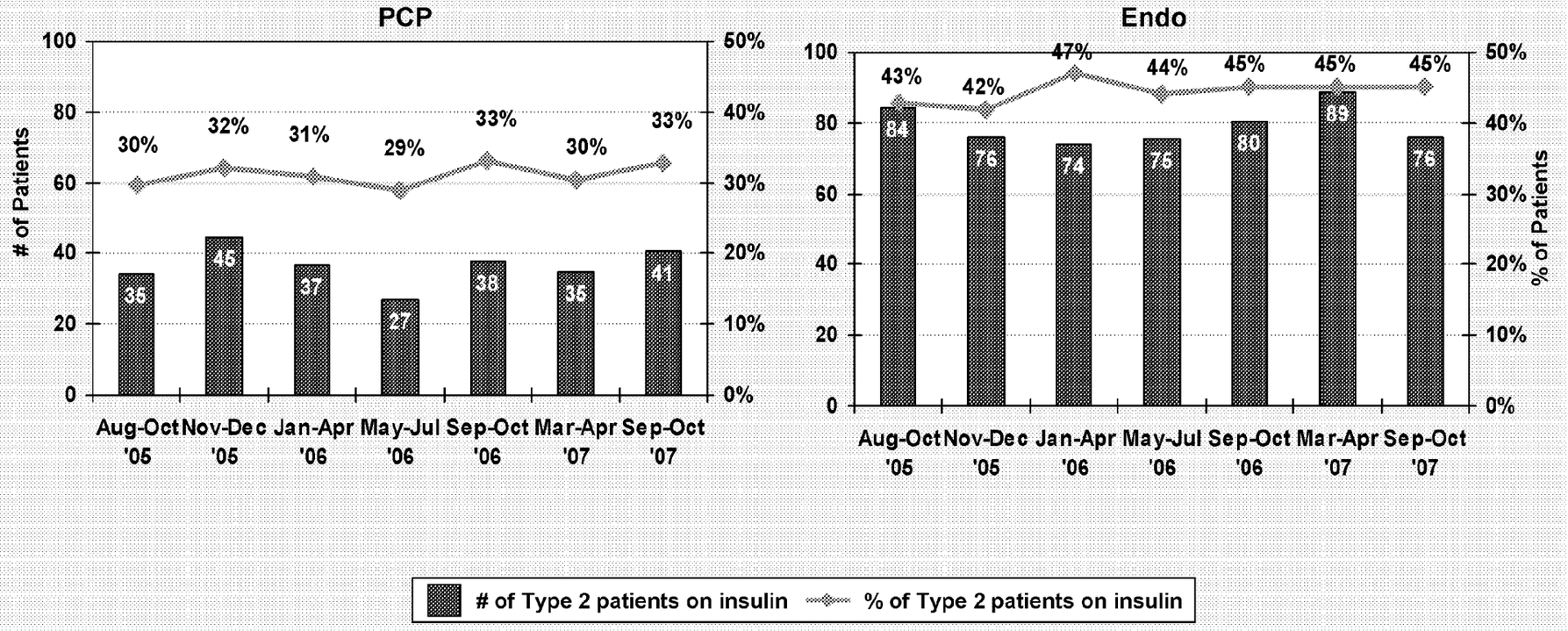
COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. LAN2B: For each patient type described below, what level of HbA1c would compel you to introduce insulin into the treatment regimen?

Sep-Oct '07	
PCP	125
Endo	76

In Sep-Oct '07 only 33% of PCP and 45% of Endo patients are treated with insulin

Type 2 Patients Treated with Insulin per Month: by Specialty

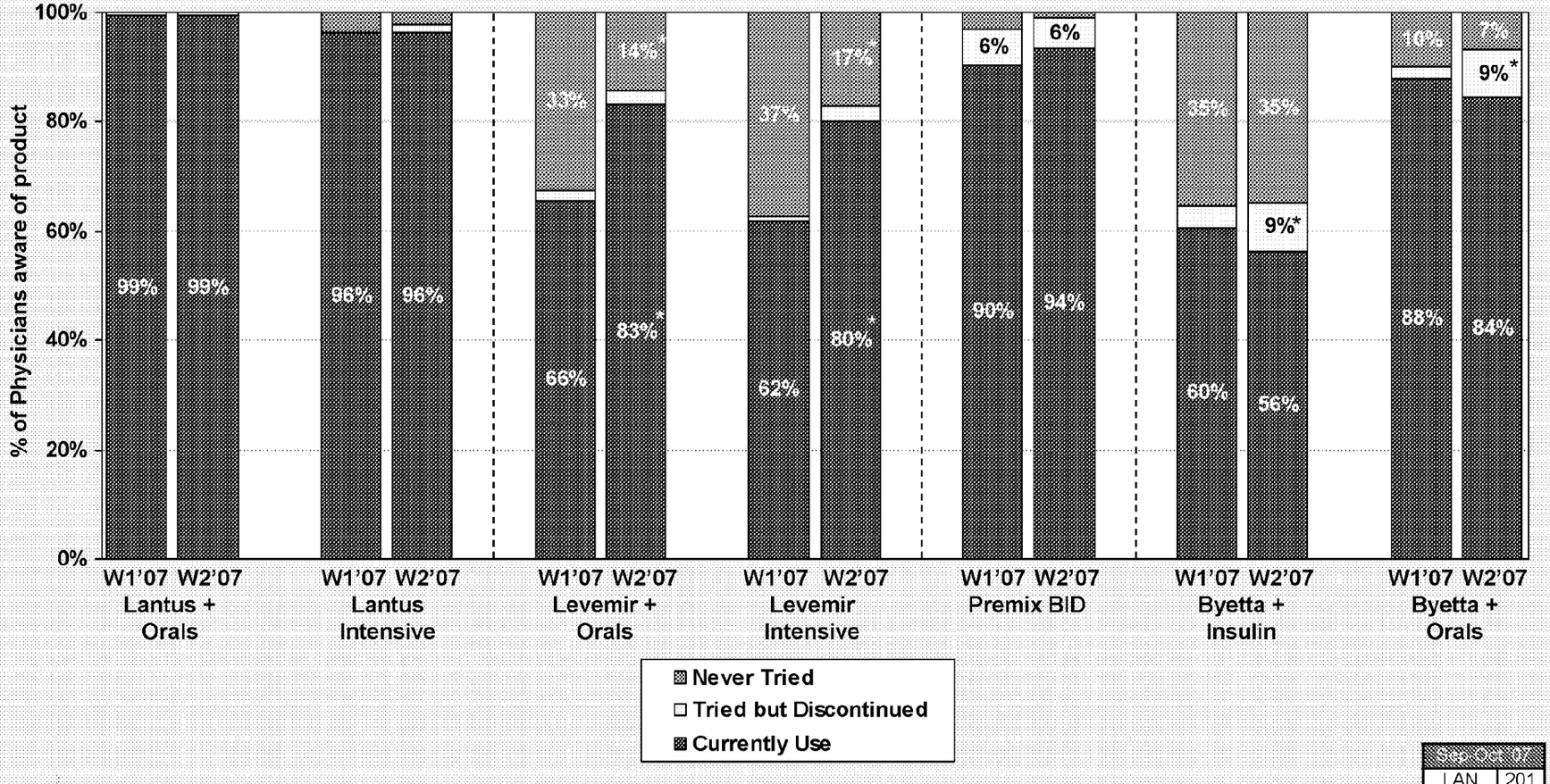


Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. BS2A: In the past month, how many total patients did you treat for each of the following conditions? (If the past month was not a typical month, please answer based on a "typical month"). TP1A: In the past month, what percent of your Type 2 diabetes patients did you treat with the following? Please consider a fixed combination oral pill as one therapy.

Sep-Oct '07	
PCP	125
Endo	76

Lantus usage remains nearly universal in Sep-Oct '07 while Levemir usage increased significantly since last wave

Aided Therapy Experience: Total



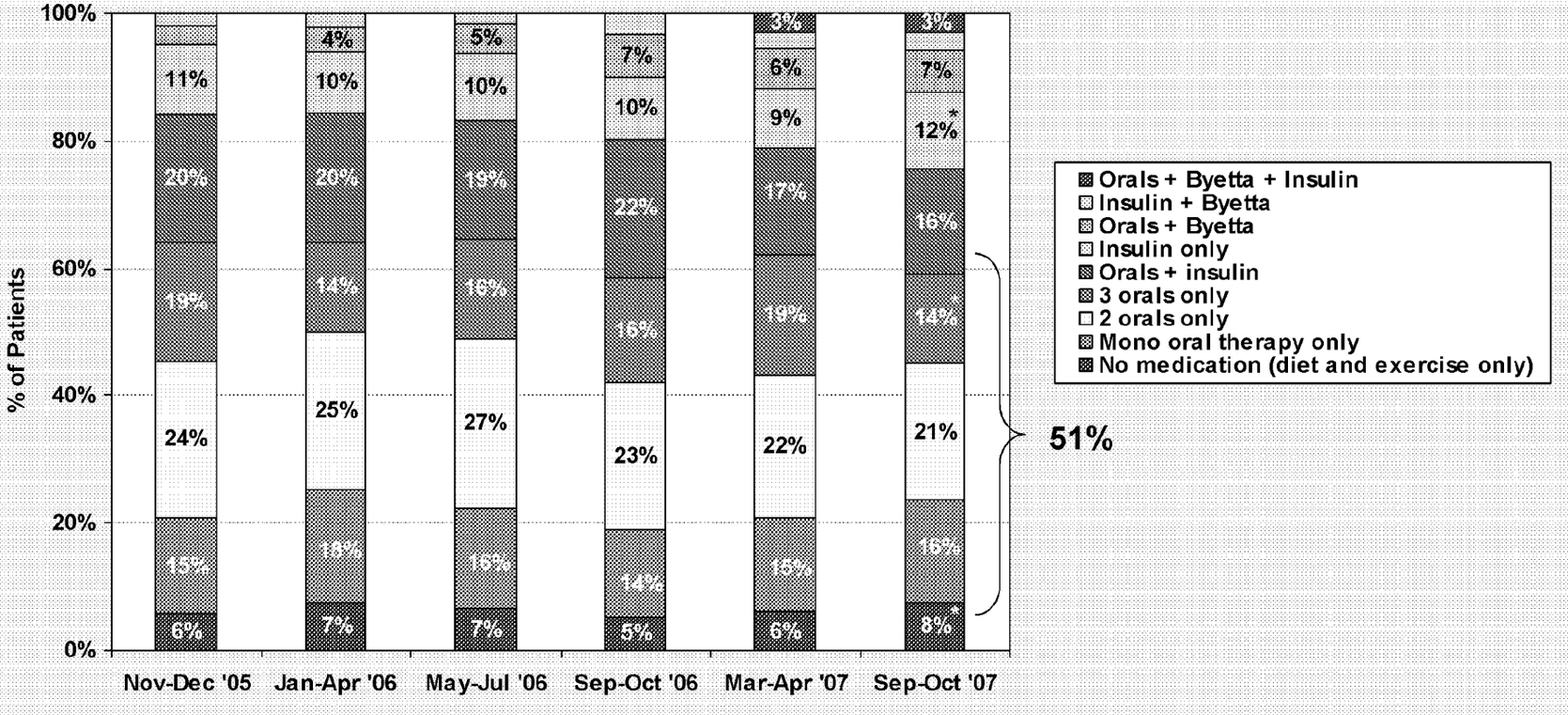
Sep-Oct '07	
LAN	201
LEV	200
PRE	201
BYT	200

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. Stat testing across products for current wave shown in appendix. TP11: Please indicate your experience with each of the following therapies by checking the appropriate box for each therapy listed below.

In Sep-Oct '07, physicians report that just over 50% of their Type 2 patients were treated with an orals only regimen in the past month

Therapies for Treatment of Type 2 Patients: Total



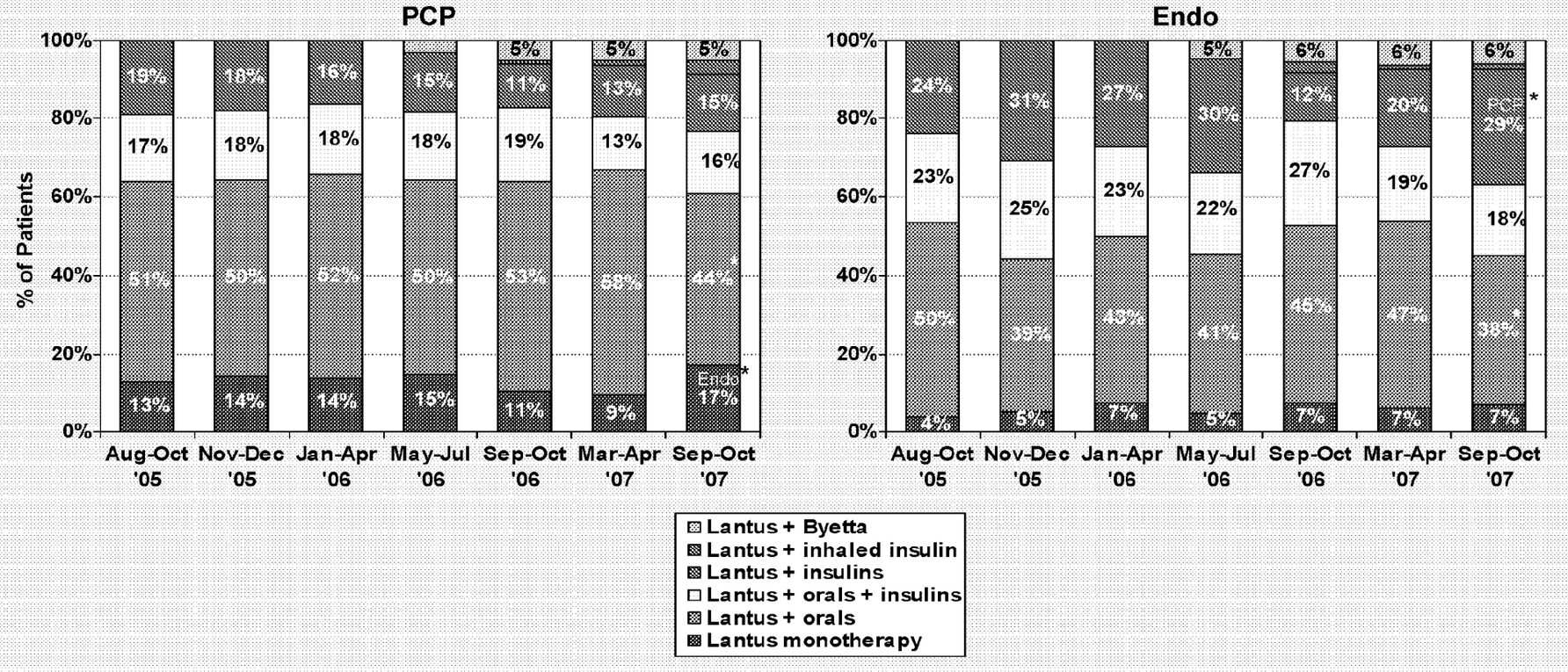
COMPASS

Source: COMPASS Physician ATU Tracking Study.
Note: Data are weighted by patient base and physician population. TP1A: In the past month, what percent of your Type 2 diabetes patients did you treat with the following types of therapy?

Slide Ref No.	
TP1_A	201

Reported Endo usage of Lantus with other insulins has increased over the past year from 12% to 29%

Lantus Usage for Type 2 Patients: by Specialty



COMPASS

Source: COMPASS Physician ATU Tracking Study

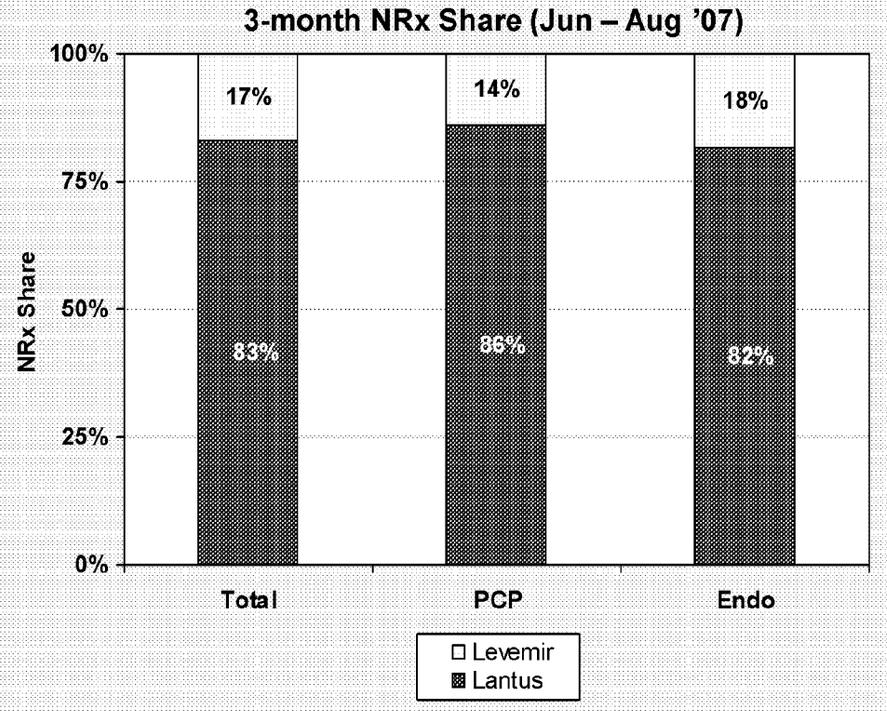
Note: Data are weighted by patient base and physician population. Statistical testing between therapies shown in appendix. LAN4B: Please think about all of the times that you have used Lantus with Type 2 patients. What percentage of the time would you say that you use the following?

Segment	n
PCP	124
Endo	76

125

Levemir comprises 17% of the Jun-Aug '07 basal insulins prescribed (NRx) by physicians surveyed in Sep-Oct '07

Sample NRx Share of Basal Insulins (Lantus and Levemir only): by Specialty



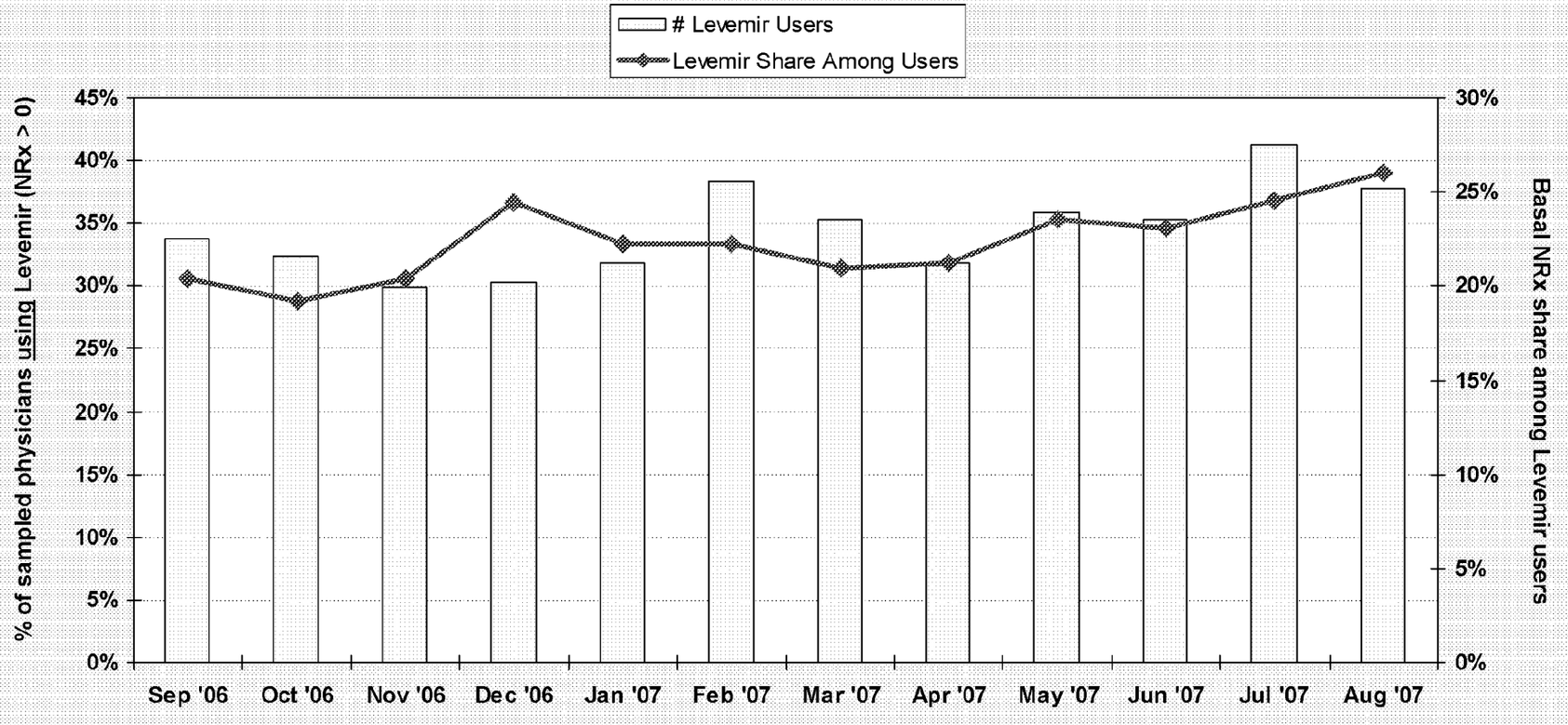
COMPASS

Source: COMPASS Physician ATU Tracking Study, IMS Health Confidential Proprietary: Source IMS Health Incorporated Xponent NRx share Jun-Aug '07. Data are not weighted. Note: Basal market includes Lantus and Levemir only.

Sep-Oct '07	
Total	201

30% of physicians in the sample wrote new Levemir prescriptions in Sep '06, compared to 38% in Aug '07; average share among writers increased from 20% to 26% in that timeframe

Sample Physician Levemir Users and Basal NRx Share: Total



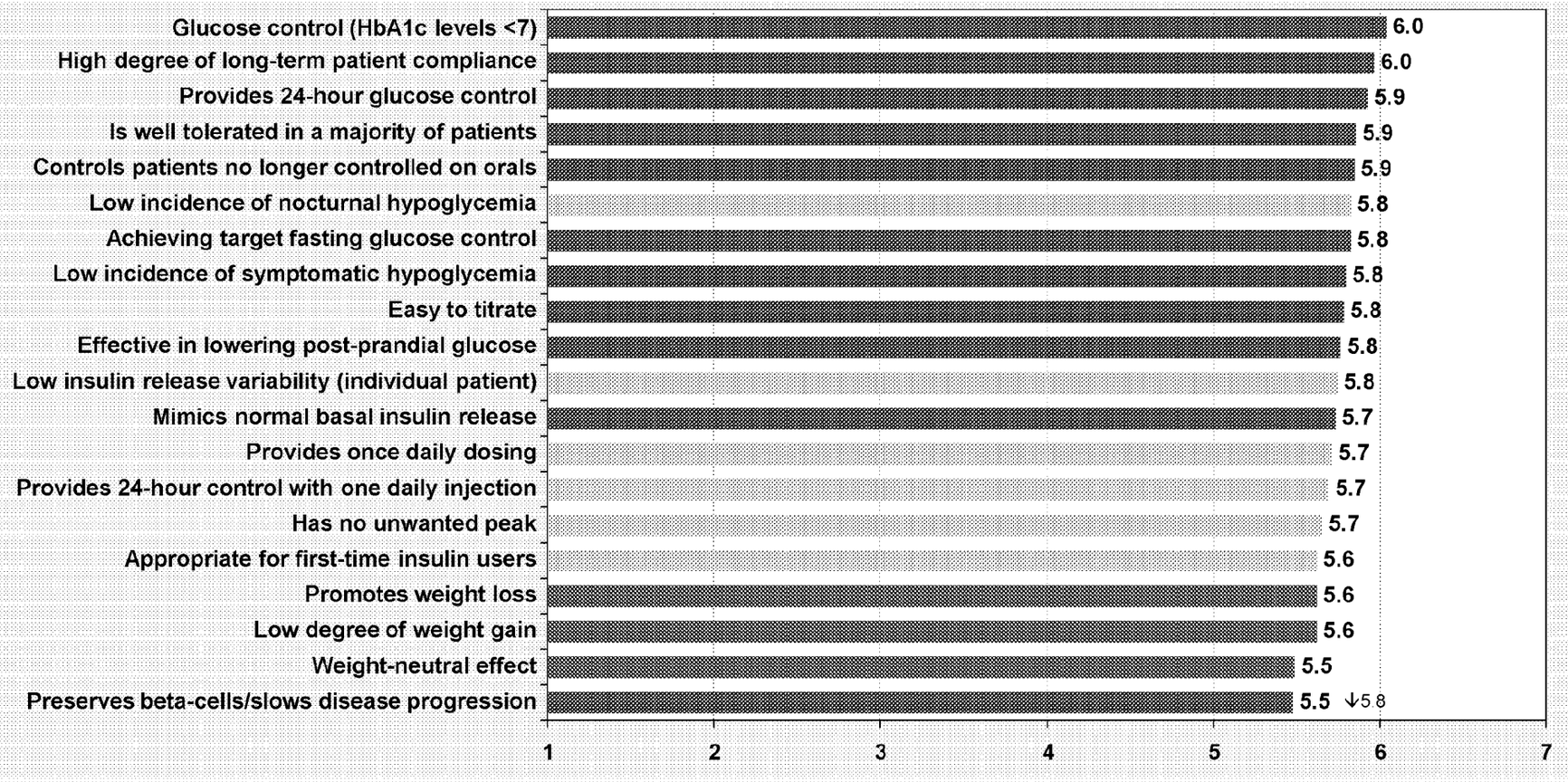
Source: Lantus COMPASS Physician ATU Tracking Study , IMS Lantus NRx Data Jun-Aug '07

Sep-Oct '07 | 201

Physicians rate efficacy and safety attributes as the most important in Sep-Oct '07 while weight attributes are considered the least relevant when selecting a product for their patients

Efficacy | Weight
Safety | Dosing

Attribute Stated Importance Means: Total

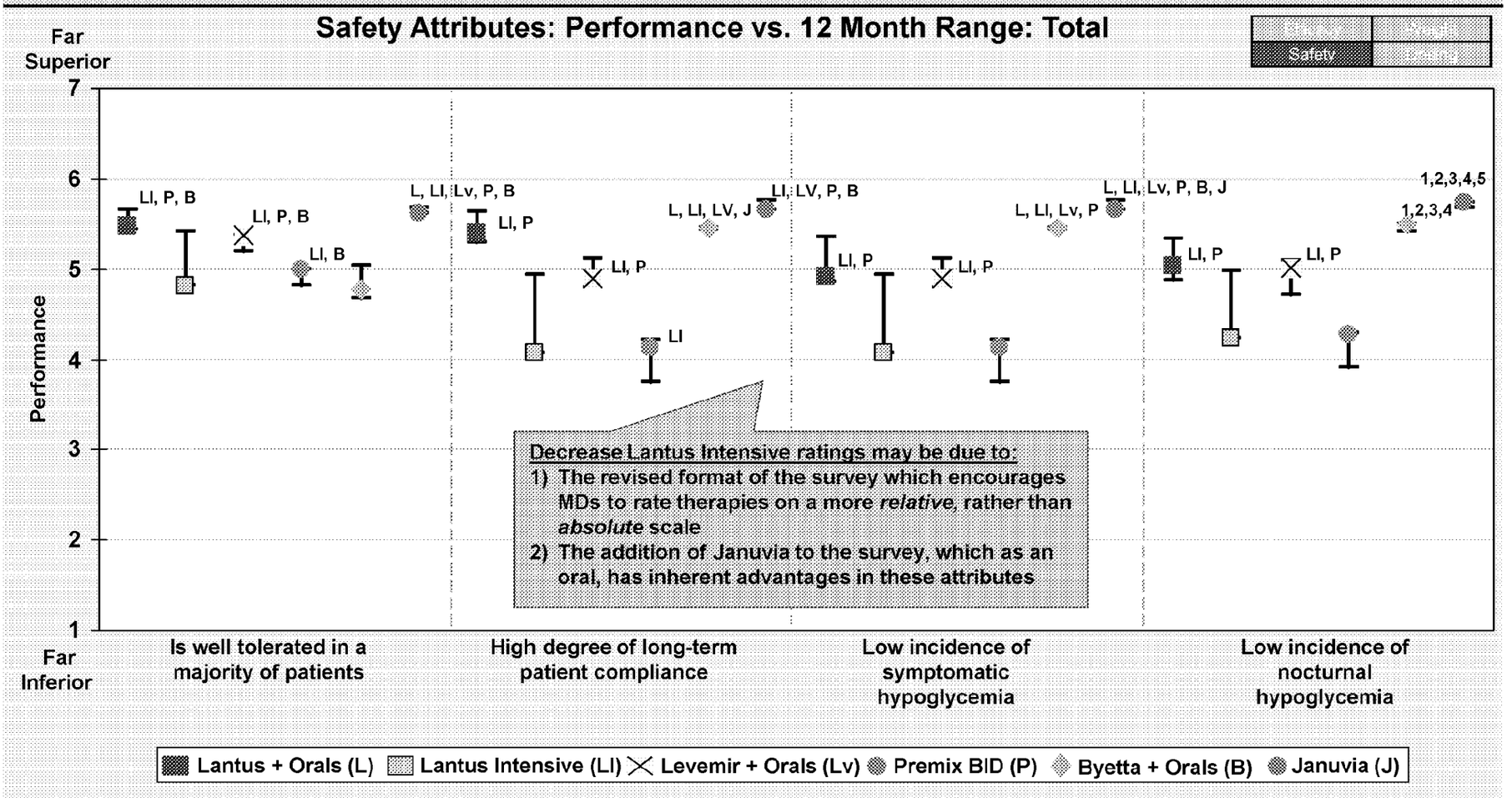


COMPASS

Source: COMPASS Physician Study
Note: Data are weighted by physician population. PR3A: For each of the factors listed below, please indicate how important each factor is in your selection of a particular diabetes product for Type 2 patients.

Sep-Oct '07
Sep-Oct '07	201

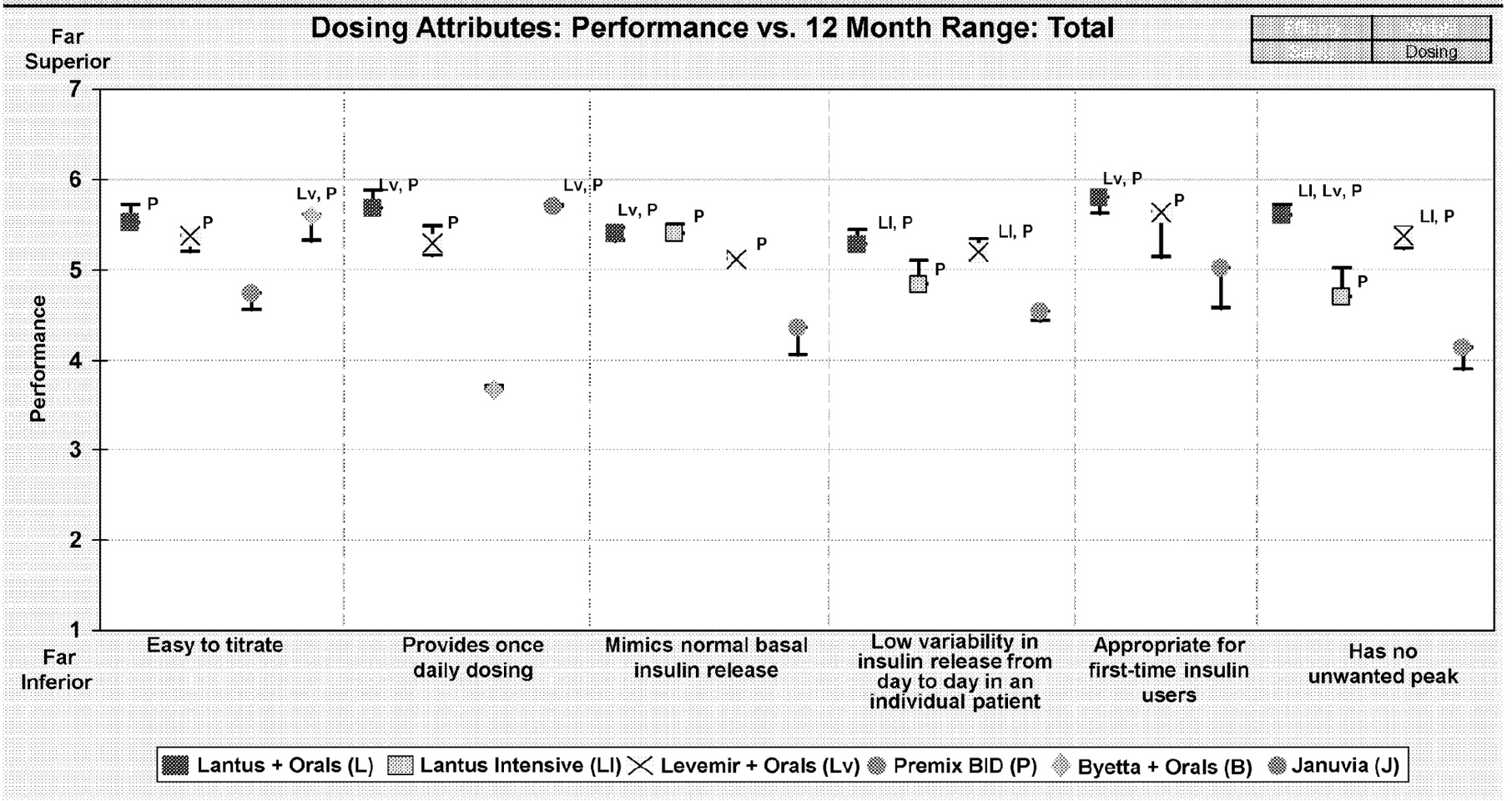
Physicians do not differentiate significantly between Lantus with orals and Levemir with orals on any safety attributes



Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. PR3B: On a scale of 1 to 7, please rate how well you feel each therapy performs on these attributes/functions for Type 2 patients. Please consider all other therapies that you currently use with your Type 2 diabetes patients (not only the therapies listed below). Not all attributes applicable for all therapies.

Sept - Oct '07
179-201

Lantus maintains at least a directional advantage over other insulins across all dosing attributes

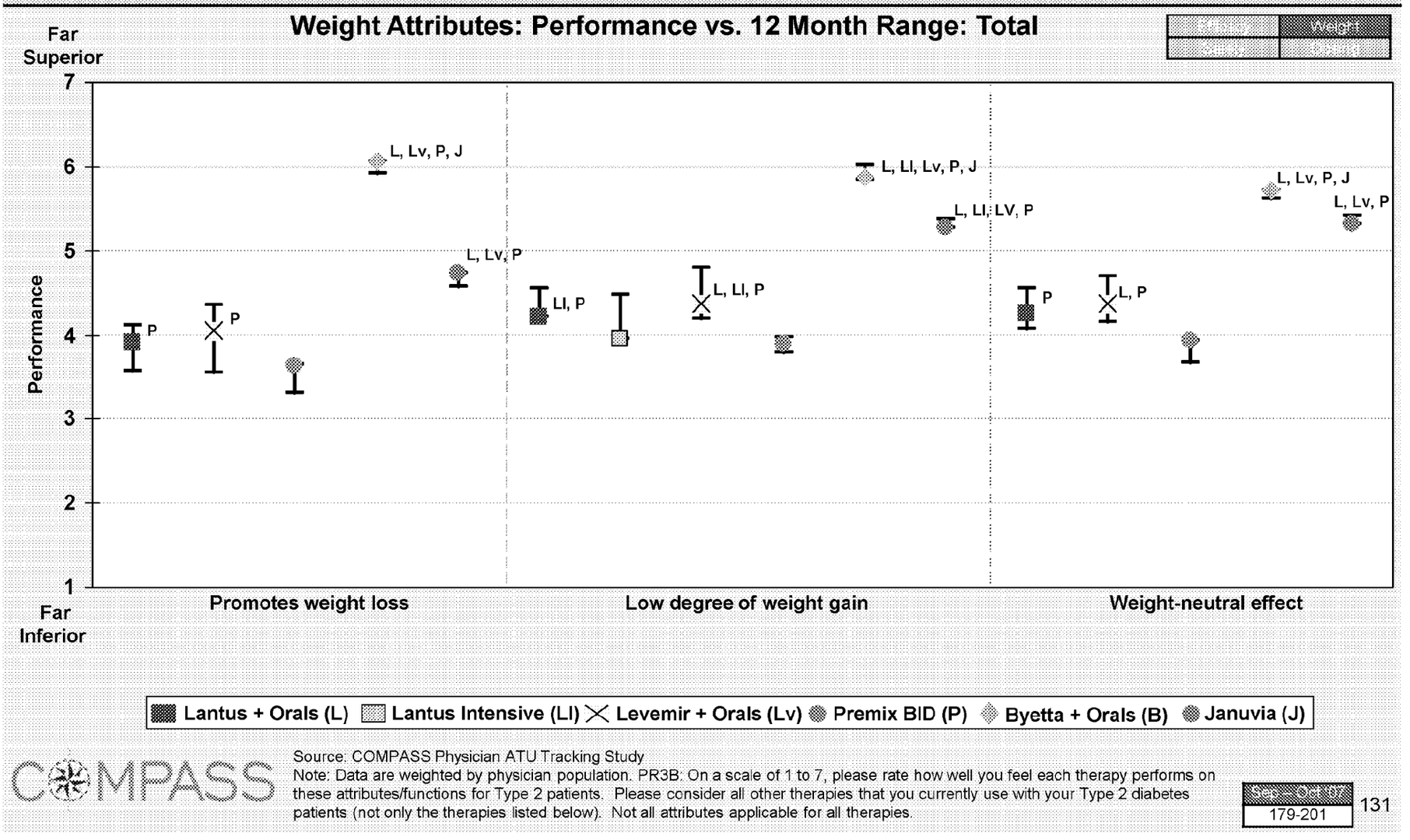


COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. PR3B: On a scale of 1 to 7, please rate how well you feel each therapy performs on these attributes/functions for Type 2 patients. Please consider all other therapies that you currently use with your Type 2 diabetes patients (not only the therapies listed below). Not all attributes applicable for all therapies.

Sep - Oct '07
179-201

Byetta is the clear leader in weight-related attribute performance; Levemir with orals is perceived as better than Lantus with orals on *Low degree of weight gain* and *Weight-neutral effect*



COMPASS

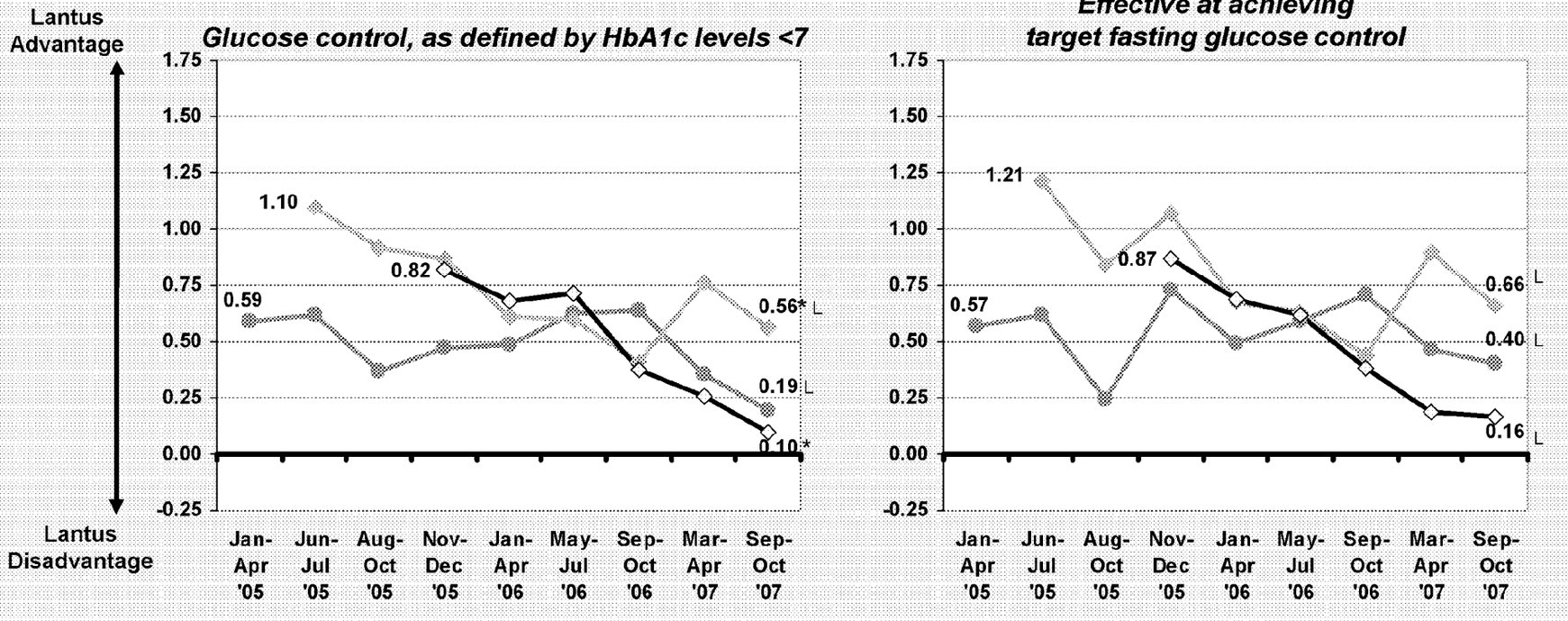
Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. PR3B: On a scale of 1 to 7, please rate how well you feel each therapy performs on these attributes/functions for Type 2 patients. Please consider all other therapies that you currently use with your Type 2 diabetes patients (not only the therapies listed below). Not all attributes applicable for all therapies.

Sept - Oct '07
179-201

Over the past year Levemir and Premix have made steady progress closing the gap against Lantus on *glucose control* attributes

Lantus vs. Competitors Performance Ratings – Selected Attributes: Total

Efficacy | Hypos
Safety | Dosing



Sep - Oct '07	
LAN	201
LEV	179
BYT	190
PRE	199

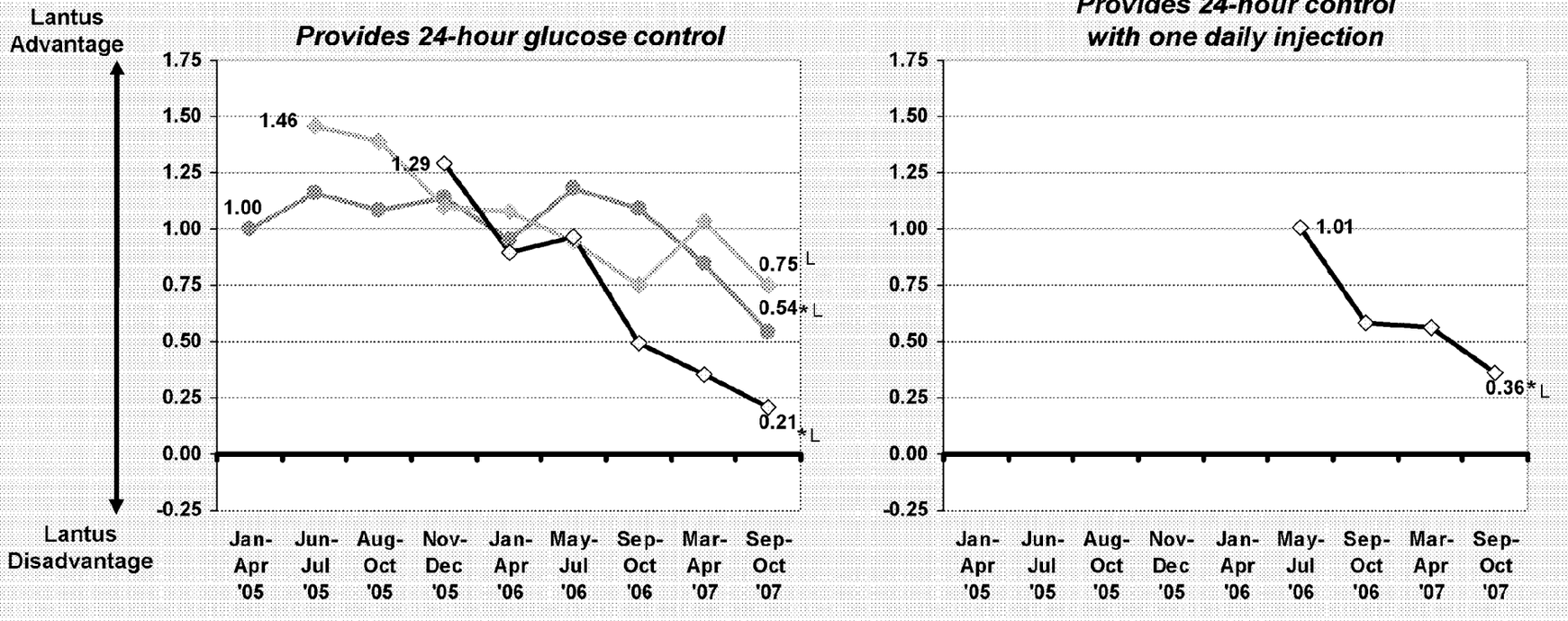
COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. L = statistically different between Lantus and [Product]. Stat testing performed with paired data points, using data only from physicians who answered for both regimens. PR3B: On a scale of 1 to 7, where 1 means "Far inferior to all other products" and 7 means "Far superior to all other products," please rate how well you feel each product performs on these attributes/functions for Type 2 Patients.

Despite large gains by Levemir and Premix over the past year, Lantus maintains a significant advantage on *24-hour glucose control* attributes

Lantus vs. Competitors Performance Ratings – Selected Attributes: Total

Efficacy | Hypos
Safety | Dosing



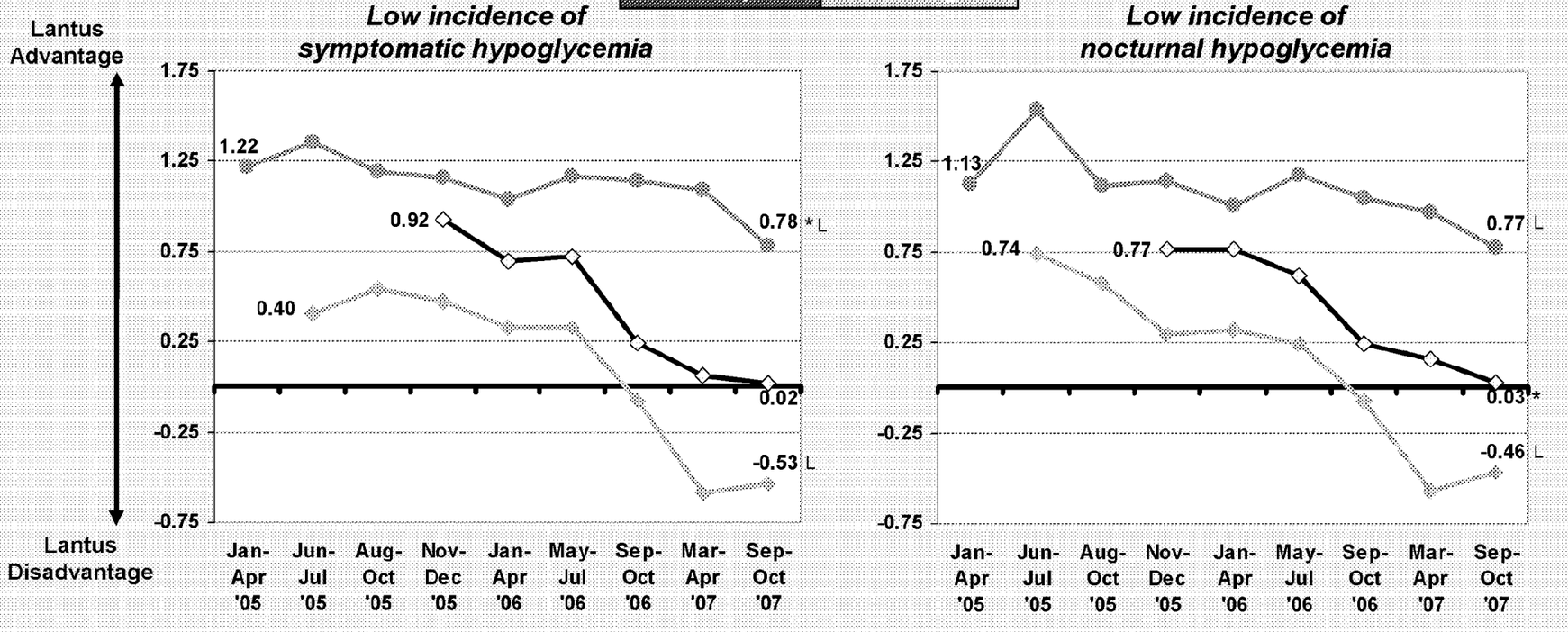
Sep - Oct '07	
LAN	201
LEV	179
BYT	190
PRE	199

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. L = statistically different between Lantus and [Product]. Stat testing performed with paired data points, using data only from physicians who answered for both regimens. PR3B: On a scale of 1 to 7, where 1 means "Far inferior to all other products" and 7 means "Far superior to all other products," please rate how well you feel each product performs on these attributes/functions for Type 2 Patients.

Physicians perceive only small performance gaps between Lantus and Levemir on *hypoglycemia* attributes

Lantus vs. Competitors Performance Ratings – Selected Attributes: Total

Efficacy | Ease of Use
Safety | Dosing

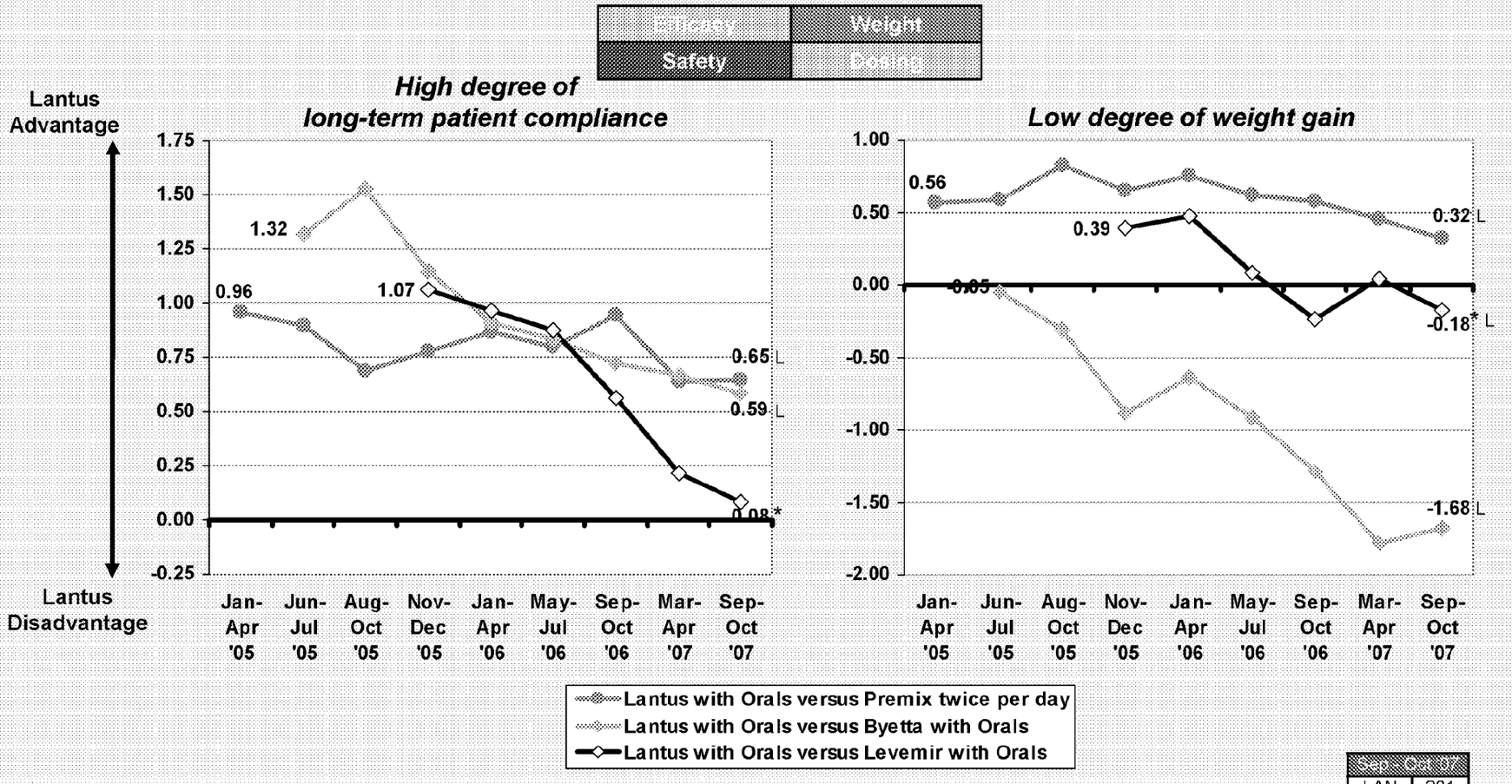


Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. L = statistically different between Lantus and [Product]. Stat testing performed with paired data points, using data only from physicians who answered for both regimens. PR3B: On a scale of 1 to 7, where 1 means "Far inferior to all other products" and 7 means "Far superior to all other products," please rate how well you feel each product performs on these attributes/functions for Type 2 Patients.

Sep - Oct '07	
LAN	201
LEV	179
BYT	190
PRE	199

Physicians perceive little difference between Lantus and Levemir on *high degree of long-term patient compliance*

Lantus vs. Competitors Performance Ratings – Selected Attributes: Total



Sep - Oct '07	
LAN	201
LEV	179
BYT	190
PRE	199

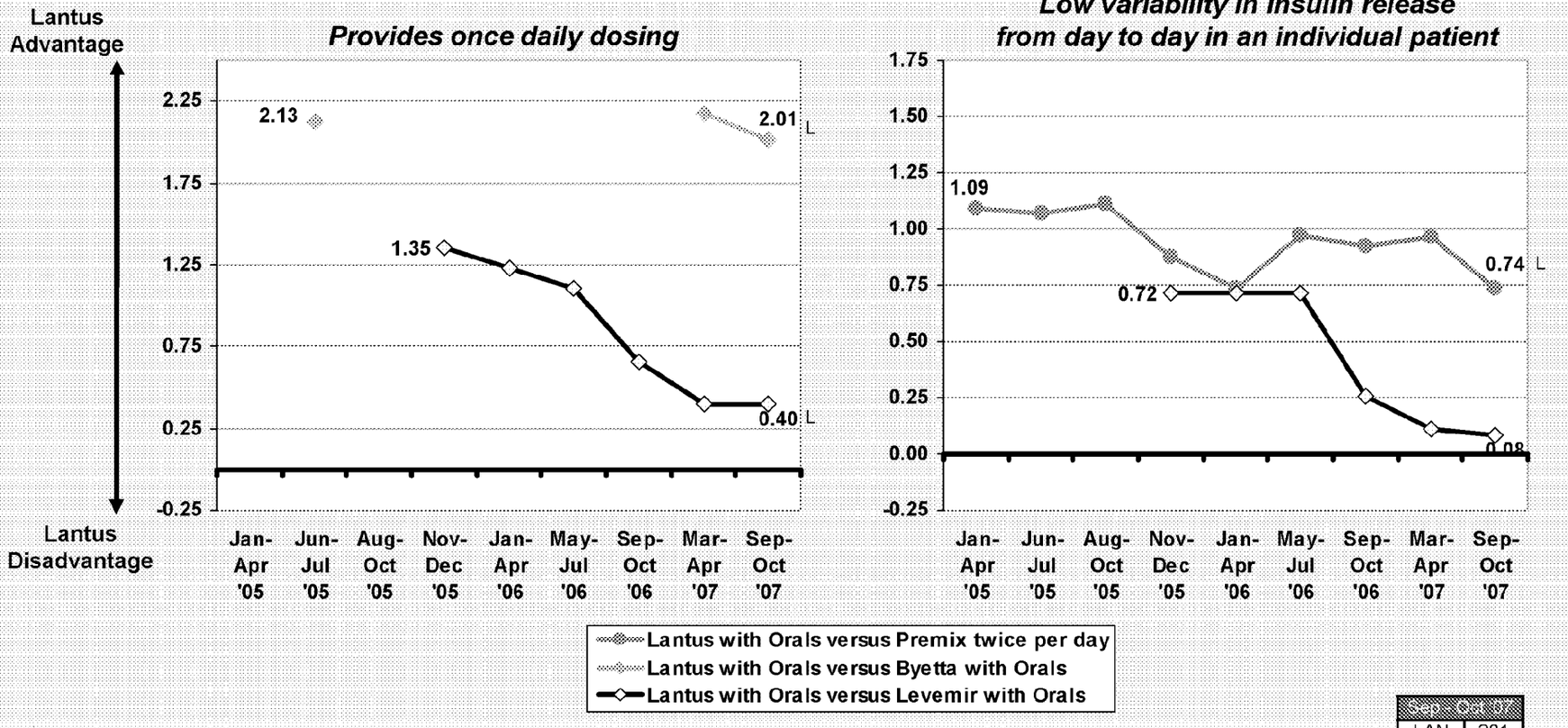
COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. L = statistically different between Lantus and [Product]. Stat testing performed with paired data points, using data only from physicians who answered for both regimens. PR3B: On a scale of 1 to 7, where 1 means "Far inferior to all other products" and 7 means "Far superior to all other products," please rate how well you feel each product performs on these attributes/functions for Type 2 Patients.

Lantus maintains a significant advantage over Levemir on *provides once daily dosing* and *low variability in insulin release*

Lantus vs. Competitors Performance Ratings – Selected Attributes: Total

Efficacy	Variability
Safety	Dosing



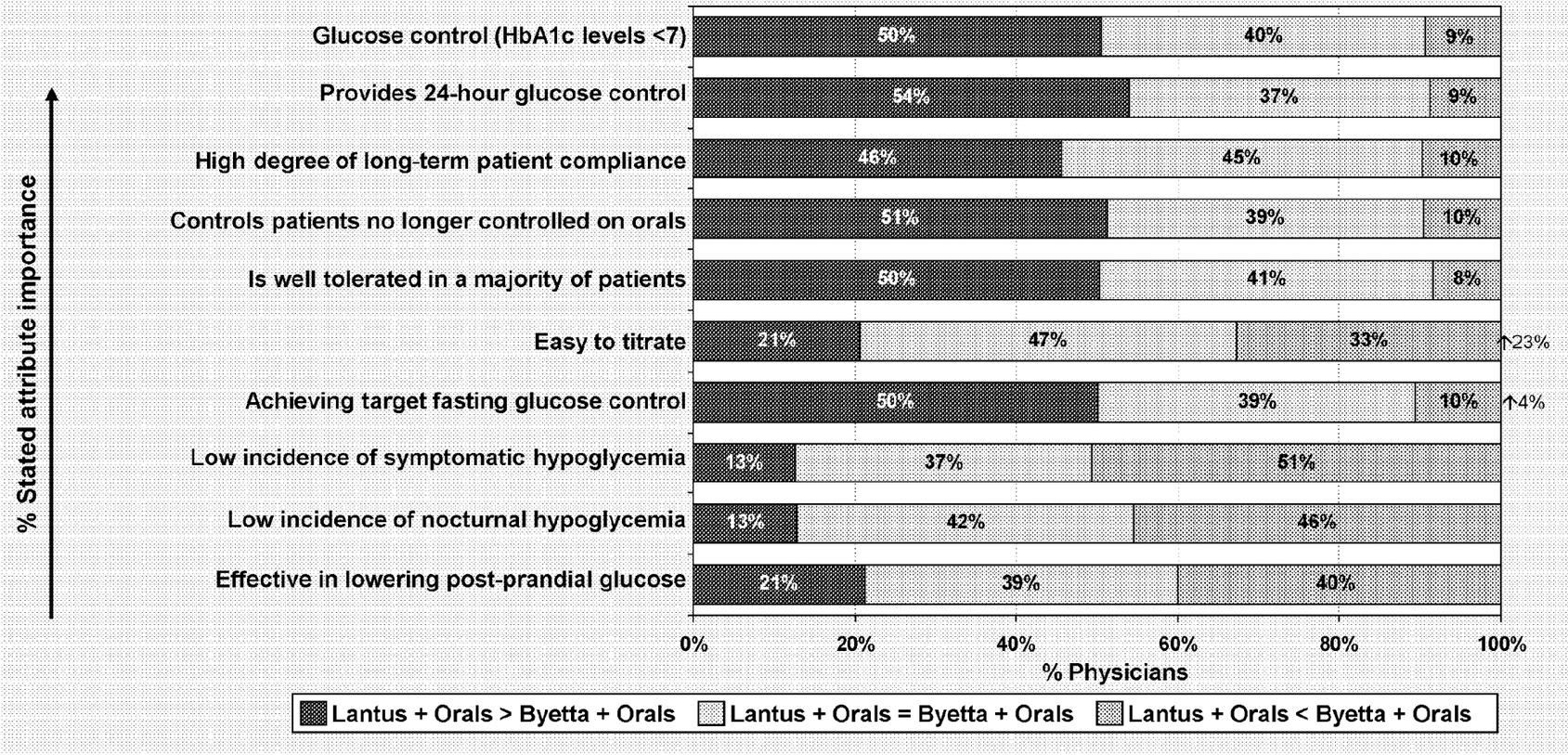
COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. L = statistically different between Lantus and [Product]. Stat testing performed with paired data points, using data only from physicians who answered for both regimens. PR3B: On a scale of 1 to 7, where 1 means "Far inferior to all other products" and 7 means "Far superior to all other products," please rate how well you feel each product performs on these attributes/functions for Type 2 Patients.

Sep - Oct '07	
LAN	201
LEV	179
BYT	190
PRE	199

Roughly 50% of physicians perceive Lantus with Orals as superior to Byetta on efficacy attributes, while a high percentage of physicians prefer Byetta for *low incidence of hypoglycemia*

Top 10 Attributes Head-to-Head Performance Ratings: Total Lantus with Orals vs. Byetta with Orals



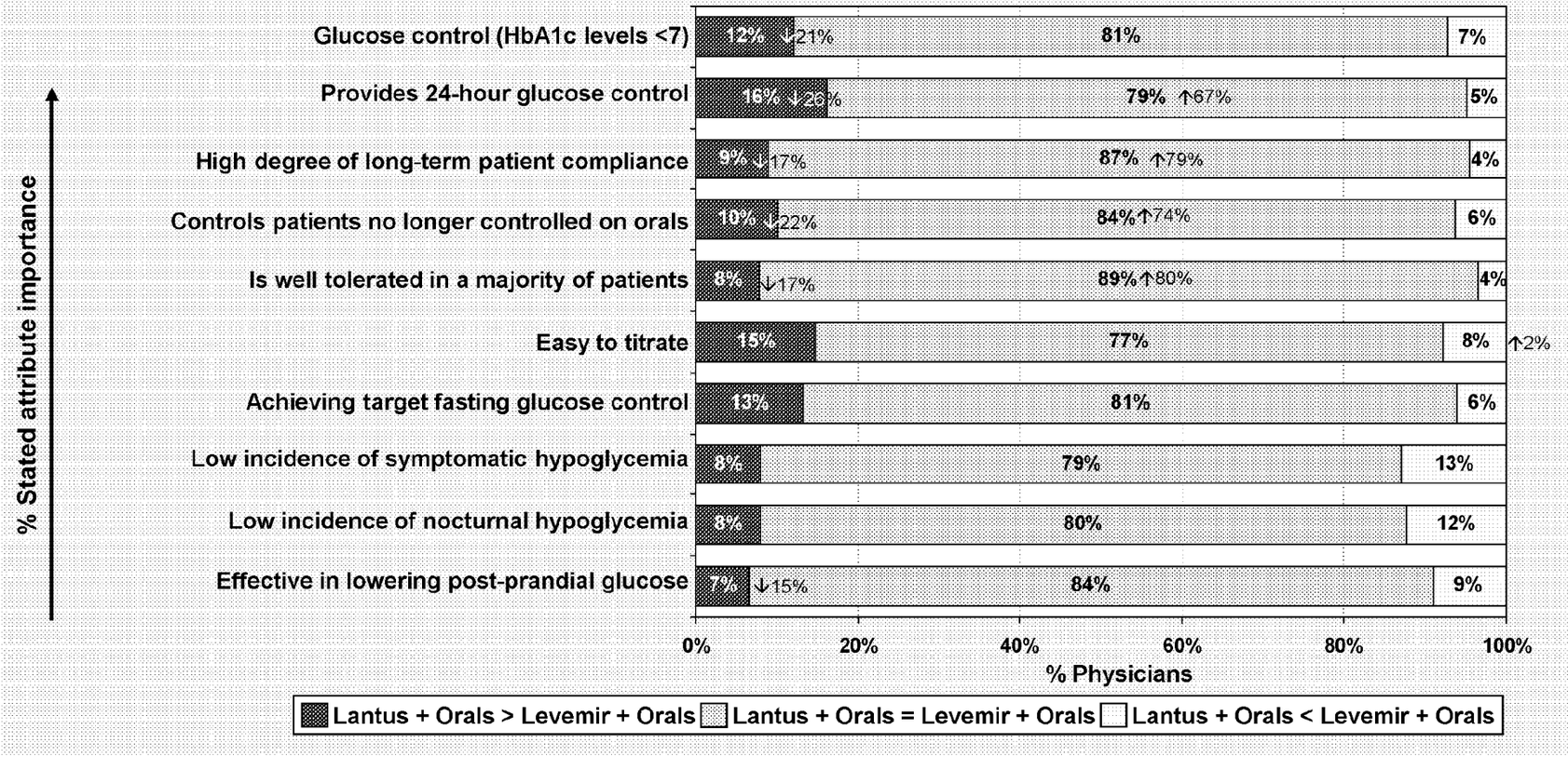
COMPASS

Source: COMPASS Physician ATU Tracking Study
Notes: Data are weighted by physician population. Statistically different at 95% between products as indicated by filled gaps. Stat testing performed on paired data (physicians who answered for both products). PR3B: On a scale of 1 to 7, please rate how well you feel each therapy performs on these attributes/functions for Type 2 patients.

Sep. Oct. 07
190

The majority of physicians believe Lantus and Levemir perform similarly on the top 10 attributes; the percentage of physicians rating Lantus higher than Levemir decreased on several of these attributes since the prior wave

Top 10 Attributes Head-to-Head Performance Ratings: Total Lantus with Orals vs. Levemir with Orals



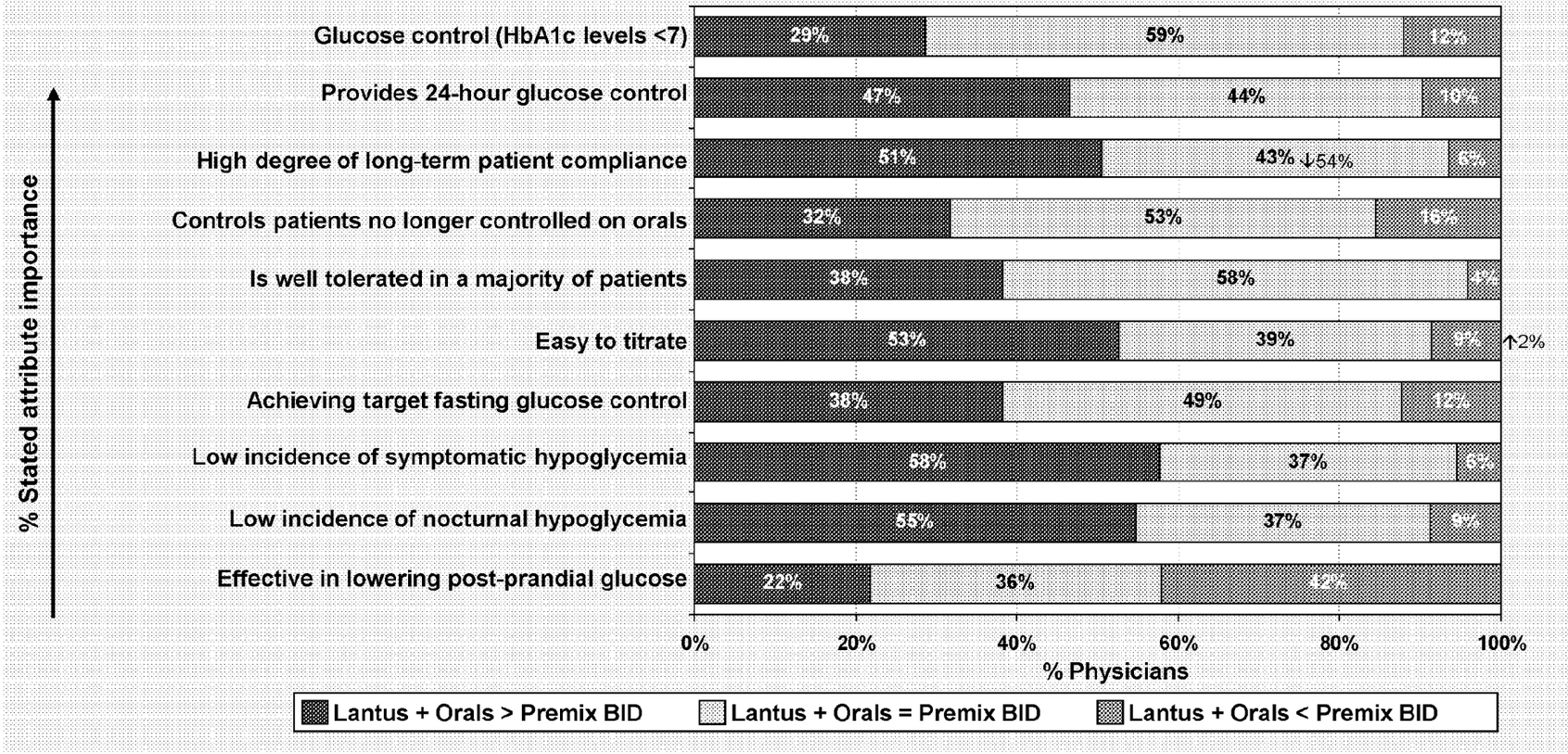
COMPASS

Source: COMPASS Physician ATU Tracking Study
Notes: Data are weighted by physician population. Statistically different at 95% between products as indicated by filled gaps. Stat testing performed on paired data (physicians who answered for both products). PR3B: On a scale of 1 to 7, please rate how well you feel each therapy performs on these attributes/functions for Type 2 patients.

Sep '04 - Oct '07
179

Physicians perceive Lantus with Orals to be equivalent or superior to Premix BID across the top 10 attributes

Top 10 Attributes Head-to-Head Performance Ratings: Total Lantus with Orals vs. Premix BID



COMPASS

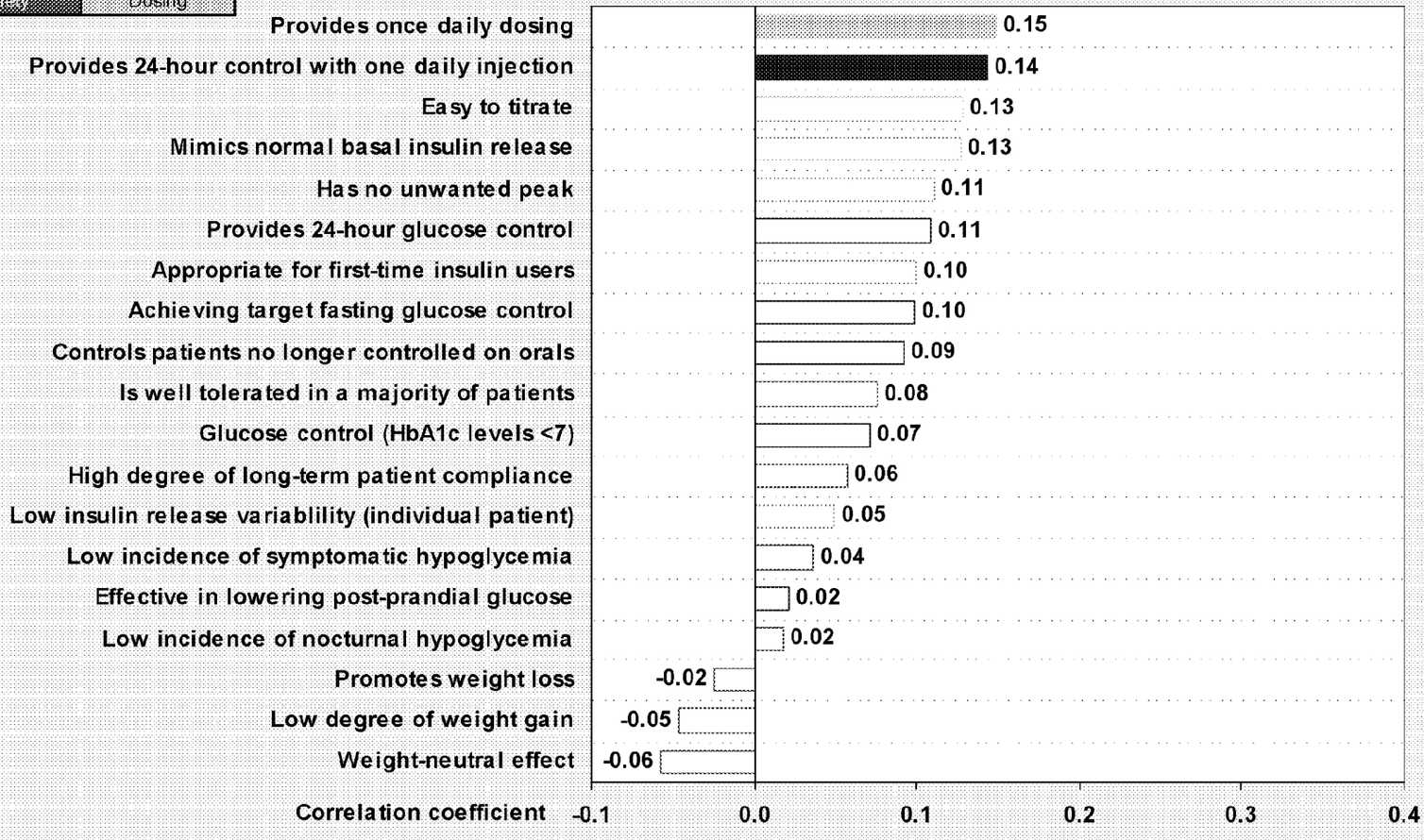
Source: COMPASS Physician ATU Tracking Study
Notes: Data are weighted by physician population. Statistically different at 95% between products as indicated by filled gaps. Stat testing performed on paired data (physicians who answered for both products). PR3B: On a scale of 1 to 7, please rate how well you feel each therapy performs on these attributes/functions for Type 2 patients.

Sep - Oct '07
199

When choosing between Lantus and Levemir, *once daily dosing* and *24-hour control with one injection* are the most important attributes (derived)

Efficacy | Weight
Safety | Dosing

Attribute to NRx Share Correlations: Lantus vs. Levemir (PCPs only)



COMPASS

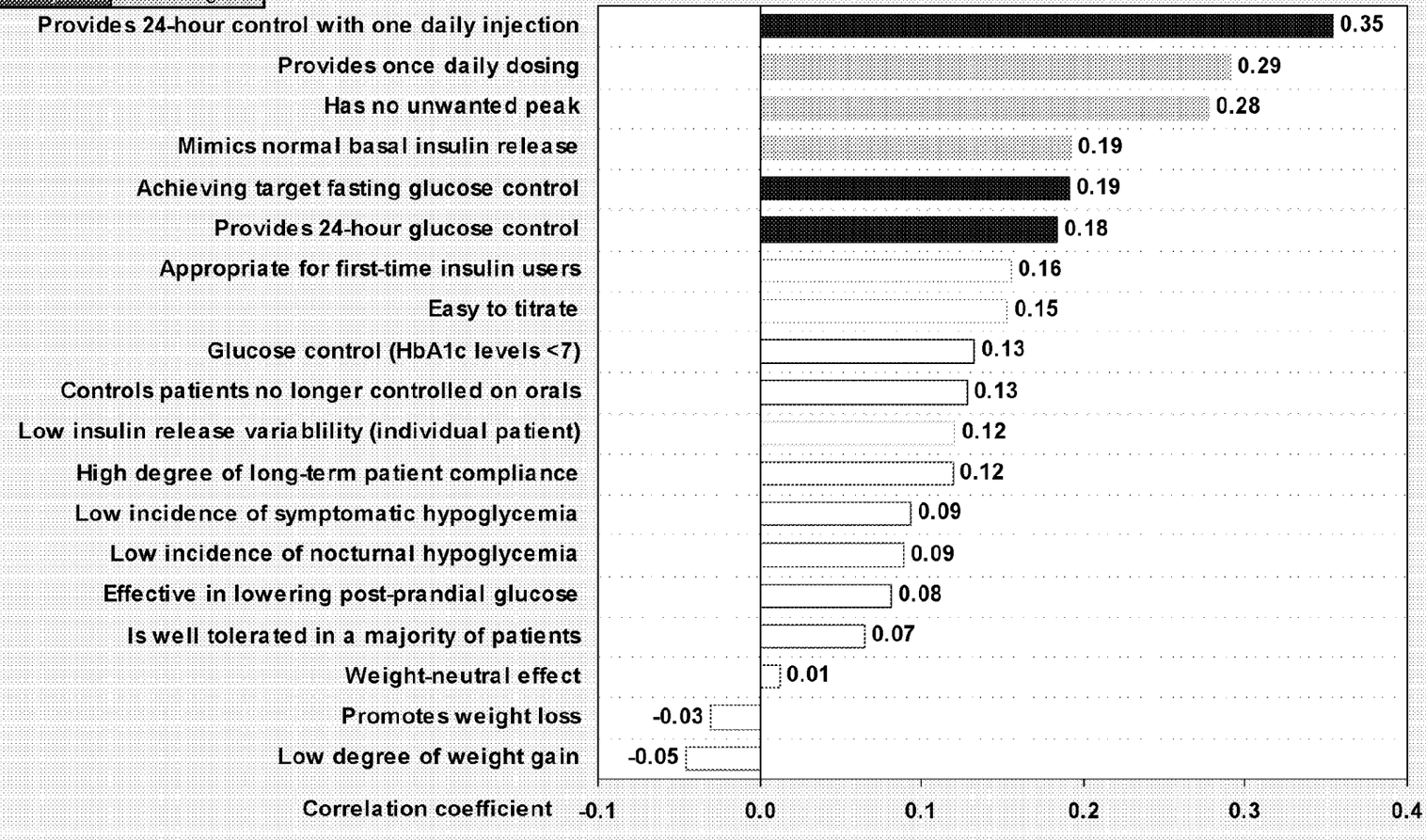
Source: Lantus COMPASS Physician ATU Tracking Study , IMS Lantus NRx Data Jun-Aug '07
PR3B: On a scale of 1 to 7, please rate how well you feel each therapy performs on these attributes/functions for Type 2 patients. Please consider all other therapies that you currently use with your Type 2 diabetes patients. Statistically different at 95% between products as indicated by filled colored bars. Derived importance correlation run for Lantus and Levemir only.

Sep - Oct 07
111

When choosing between Lantus and Levemir, *once daily dosing* and *24-hour control with one injection* are the most important attributes (derived)

Efficacy | Weight | Safety | Dosing

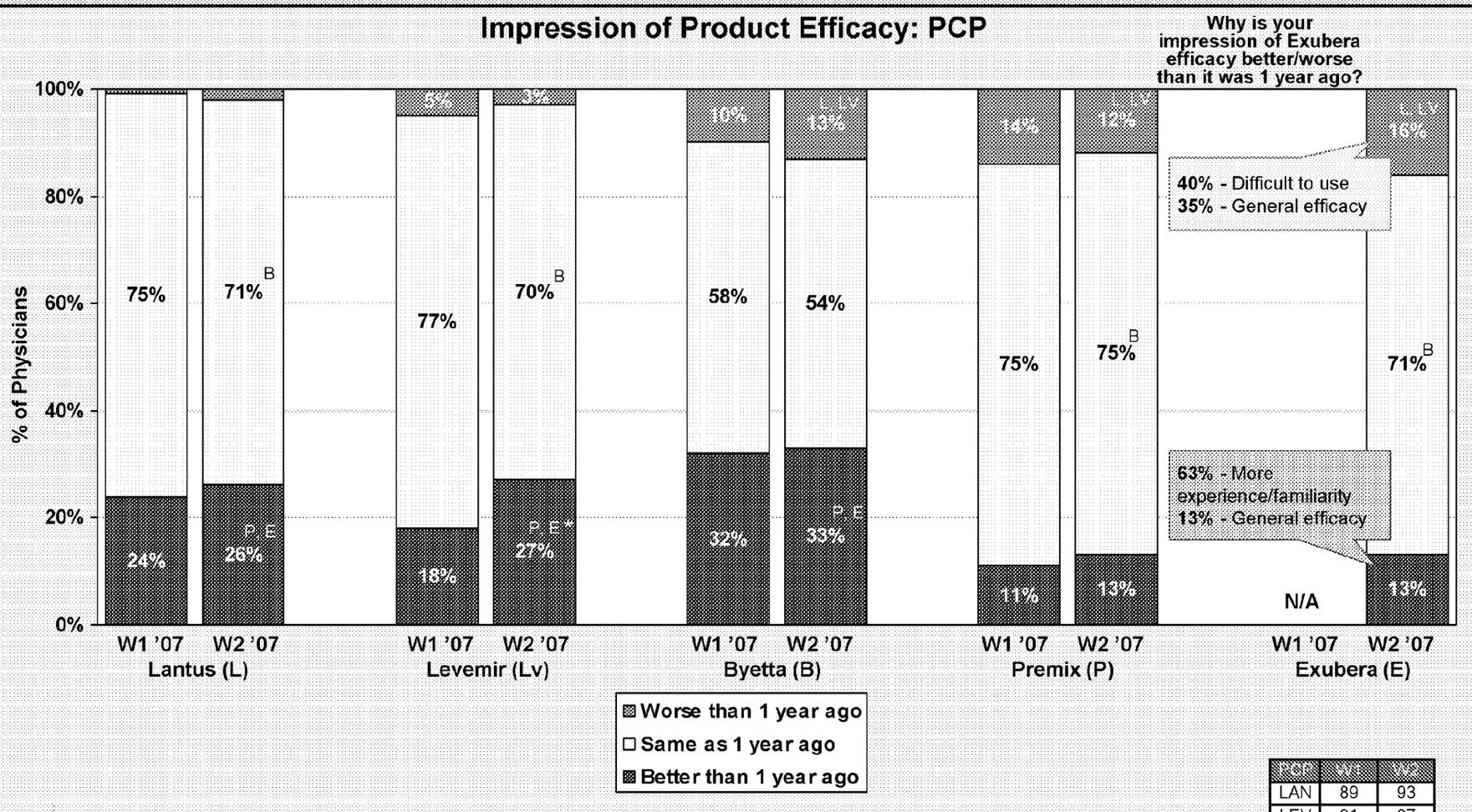
Attribute to NRx Share Correlations: Lantus vs. Levemir (Endos only)



Source: Lantus COMPASS Physician ATU Tracking Study , IMS Lantus NRx Data Jun-Aug '07
PR3B: On a scale of 1 to 7, please rate how well you feel each therapy performs on these attributes/functions for Type 2 patients. Please consider all other therapies that you currently use with your Type 2 diabetes patients. Statistically different at 95% between products as indicated by filled colored bars. Derived importance correlation run for Lantus and Levemir only.

Sep - Oct 07
75

A nearly equal number of PCPs report their impression of Lantus and Levemir *efficacy* as improving in Sep-Oct '07

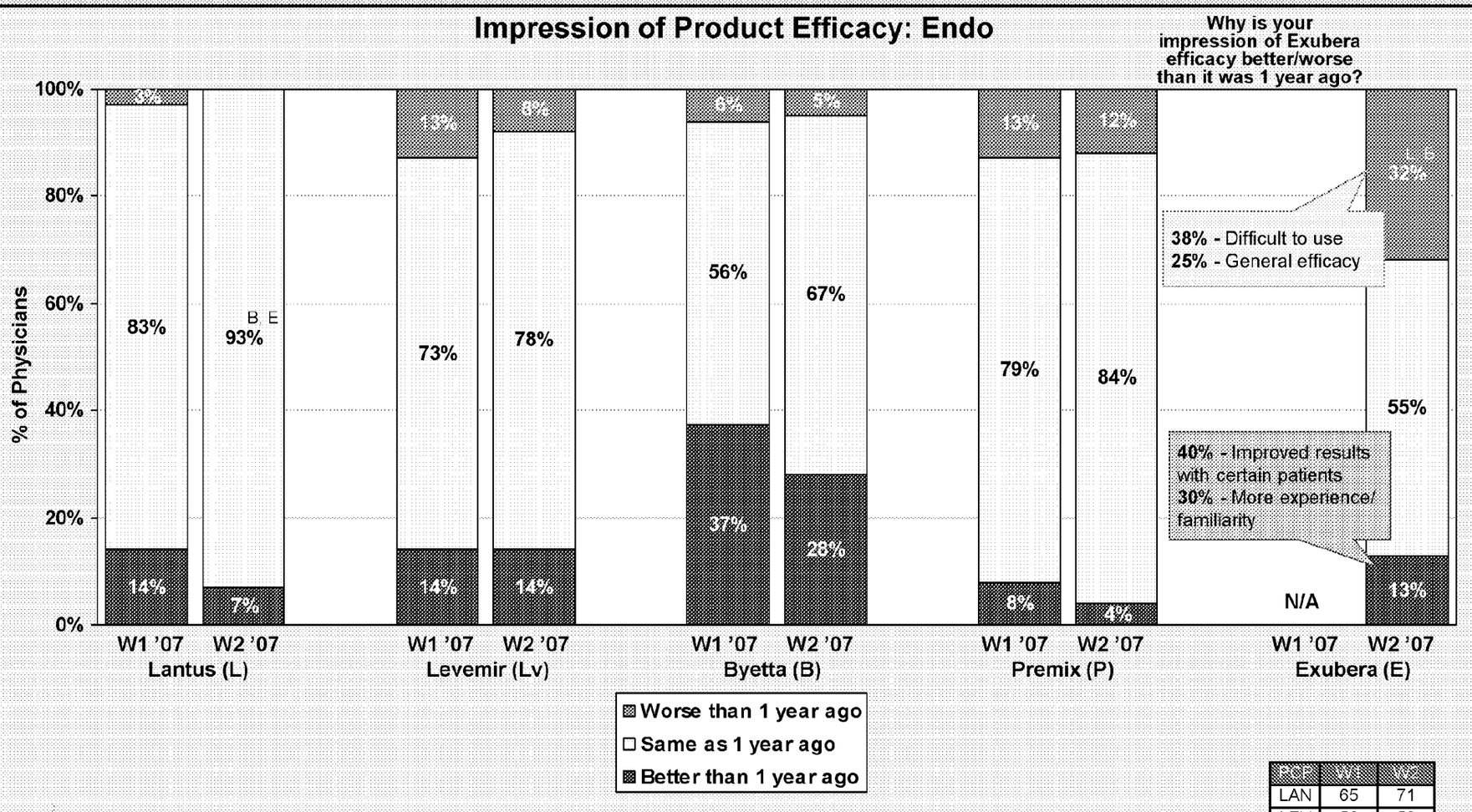


PCP	W1	W2
LAN	89	93
LEV	91	87
BYT	72	67
PRE	94	94
EXU	N/A	88

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. PR5: For each of the products below, which of the following best describes your impression of efficacy as it has evolved over the past year? PR5_E_1/2: Why is your impression of Exubera efficacy better/worse than it was 1 year ago?

Although Endo impression of Lantus efficacy decreased directionally in Sep-Oct '07, none report their impression as *worse than 1 year ago*



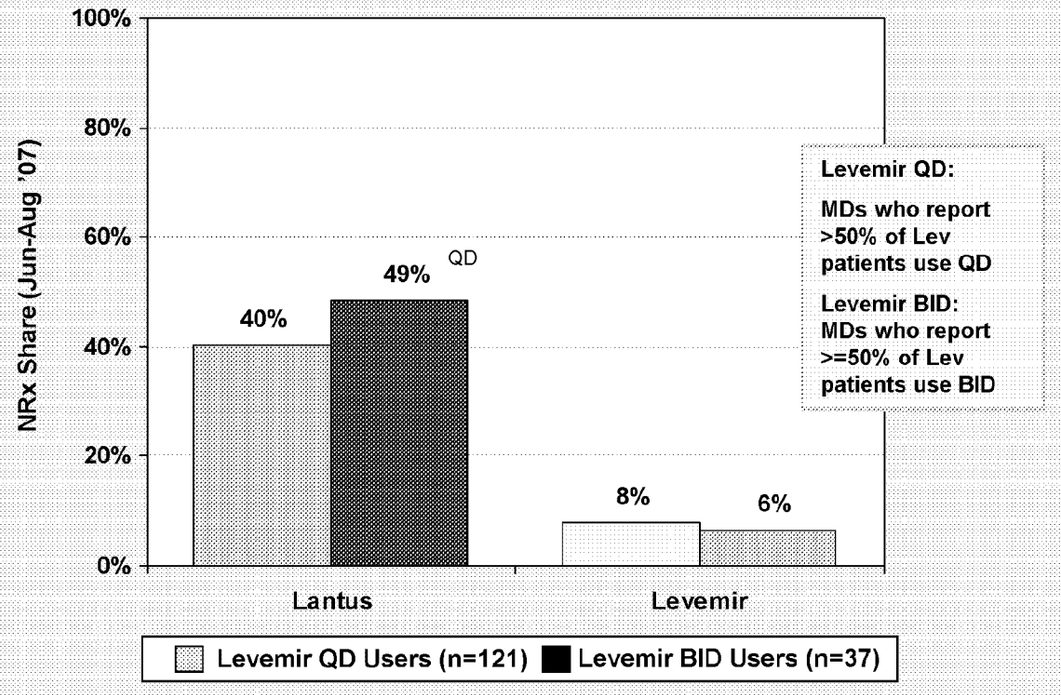
PCP	W1	W2
LAN	65	71
LEV	56	59
BYT	44	51
PRE	62	64
EXU	N/A	42

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. PR5: For each of the products below, which of the following best describes your impression of efficacy as it has evolved over the past year? PR5_E_1/2: Why is your impression of Exubera efficacy better/worse than it was 1 year ago?

Physicians who prescribe Levemir predominantly BID have a significantly higher share of Lantus compared to those who prescribe Levemir QD

NRx Share of Lantus and Levemir: by Levemir Dosing Segment



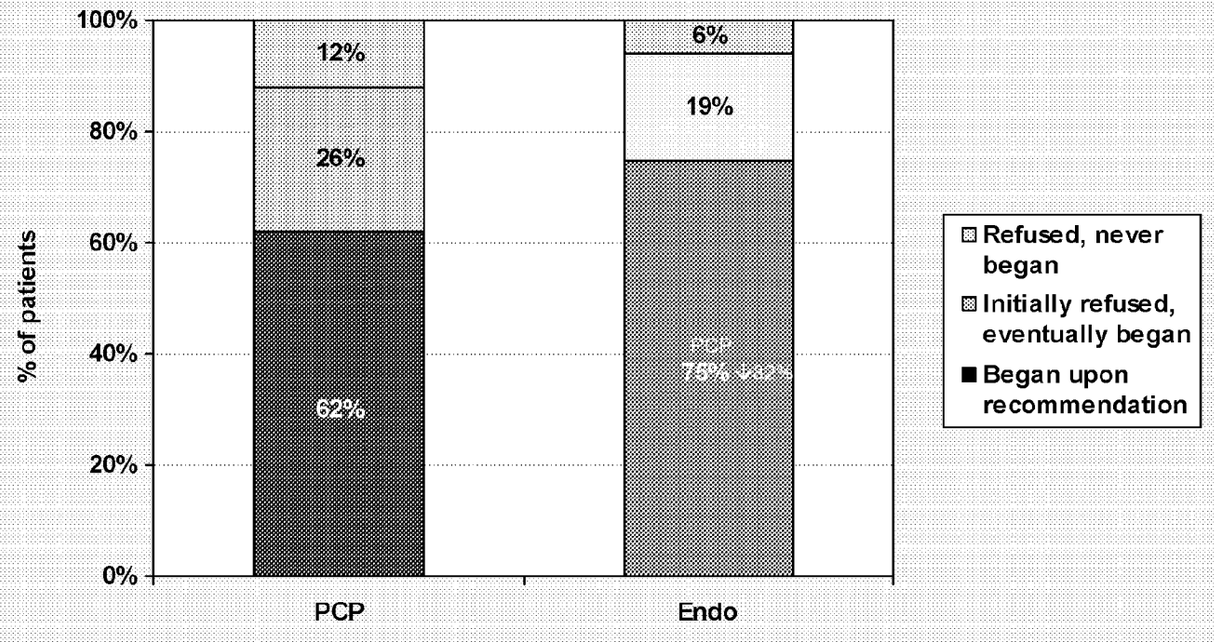
COMPASS

Source: COMPASS Physician ATU Tracking Study, IMS Health Confidential Proprietary
Note: Data are not weighted. IMS Health Incorporated Xponent NRx share of select injectibles market (Jun - Aug '07) for surveyed physicians. LAN22B: Of your Type 2 diabetes patients who currently use Levemir, what percent of these use Levemir once a day versus twice a day?

Sep-Oct '07	
QD	127
BID	44

An lower percentage of Endos report that their patients initiate insulin upon recommendation; however, only 6% of their patients never begin insulinization

Insulin Refusal and Delay: by Specialty



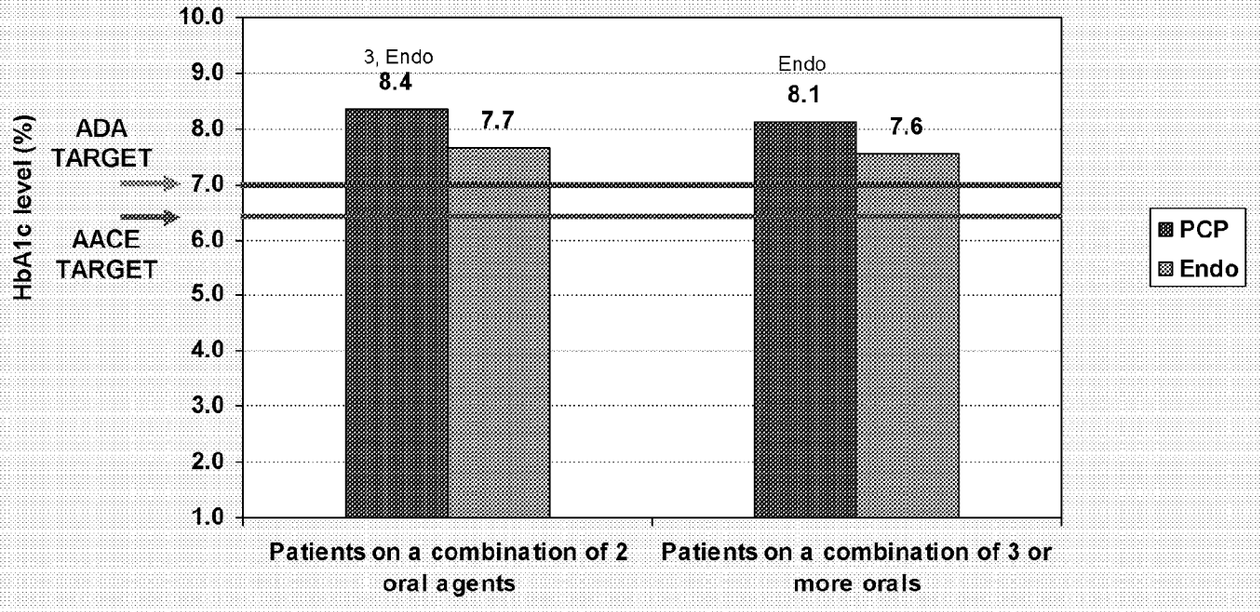
Patients who initially refused, but eventually initiated insulin treatment delayed insulin by an average of 10 months

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population and patient base. TP6: Of the Type 2 diabetes patients to whom you have recommended insulin, what percentage initially refused and did not start on insulin at that time? TP7: Of those patients who did not start insulin when you recommended it, what percentage eventually started insulin?

	Sep-Oct 07	
	TP6	TP7
PCP	125	125
Endo	71	69

Endos have a lower HbA1c threshold at which Byetta is initiated than do PCPs

HbA1c Level at Which Byetta Is Introduced: by Specialty

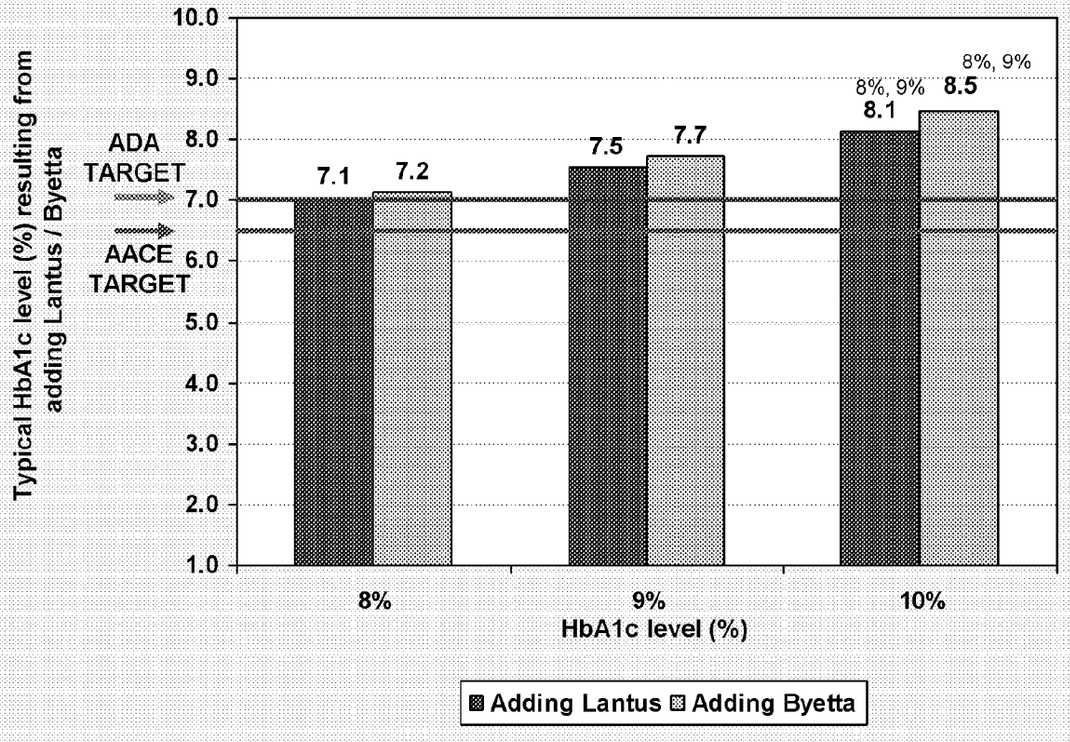


Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. Statistically different at 95% between introduction levels as indicated above: 3 = Patients on a combination of 3 or more orals. LAN2C: For each patient type described below, what level of HbA1c (%) would compel you to introduce Byetta into the treatment regimen?

Sub-Sample	
PCP	102
Endo	75

Directionally, physicians report that adding Lantus to orals is more effective than adding Byetta to orals for patients with HbA1c levels of 8%, 9%, or 10%

HbA1c Resulting from Adding Lantus or Byetta to Oral Therapies: by Total



Source: COMPASS Physician ATU Tracking Study

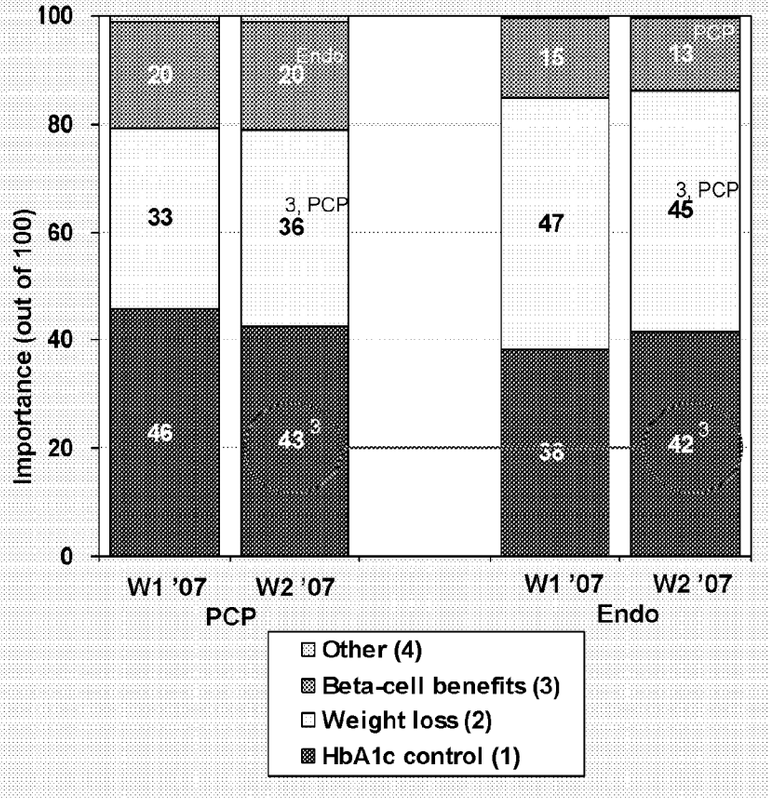
Note: Data are weighted by physician population. Statistically different between current HbA1c levels as noted. LAN27/LAN26: Please consider your Type 2 patients who take [Lantus/Byetta] with oral(s). For patients at the following HbA1c levels (%) before adding [Lantus/Byetta] to the treatment regimen, what is the typical HbA1c level (%) resulting from adding [Lantus/Byetta] to the oral(s) regimen?

Respondents	
LAN	200
BYT	177

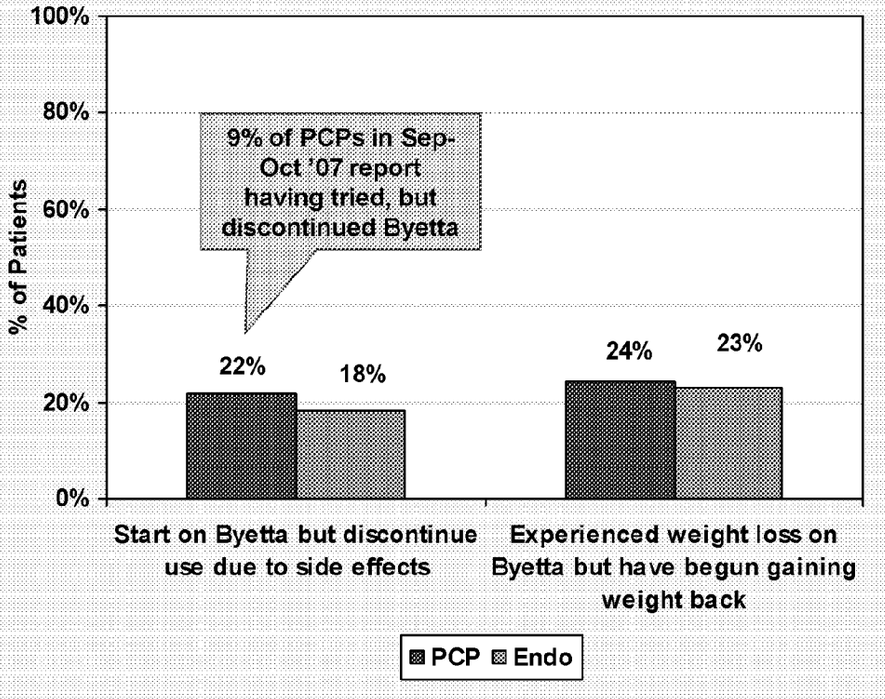
PCPs and Endos value Byetta's *HbA1c control* similarly; Endos place more value on its *Weight loss* effects than do PCPs

Byetta Attributes: by Specialty

Reasons for Prescribing (100 point allocation)



% of Type 2 patients on Byetta who….



Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population and patient weight. LAN31: What percentage of your Type 2 patients who start on Byetta discontinue use due to side effects? LAN32: Byetta has been known to cause weight loss in Type 2 diabetes patients. Of your Type 2 patients who experienced weight loss with Byetta, what percentage of them has begun gaining weight back? LAN34: Considering Byetta's attributes, please allocate 100 points over the following based on what is important to you when you prescribe this product.

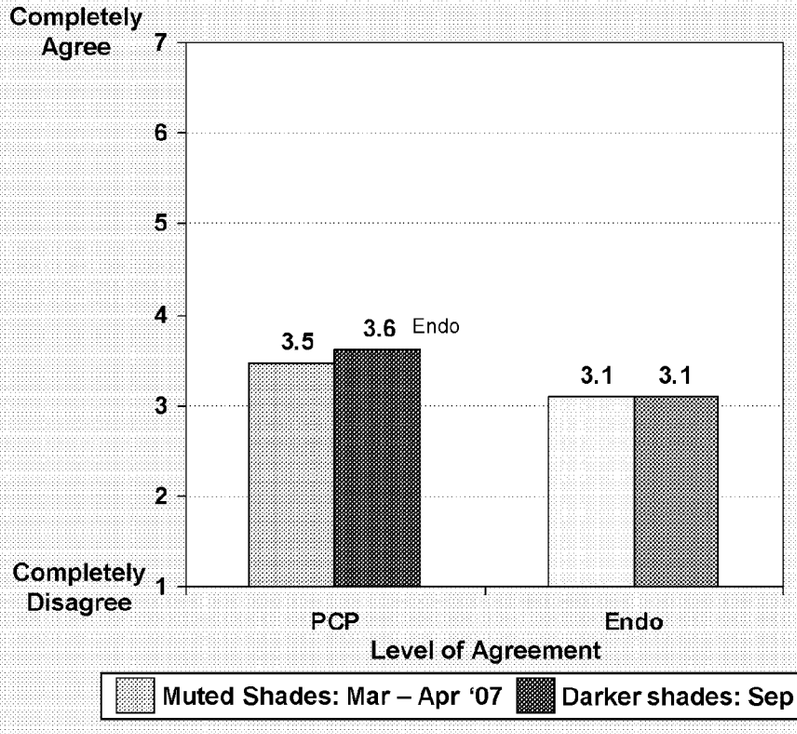
Sep-Oct '07
PCP 102
Endo 75

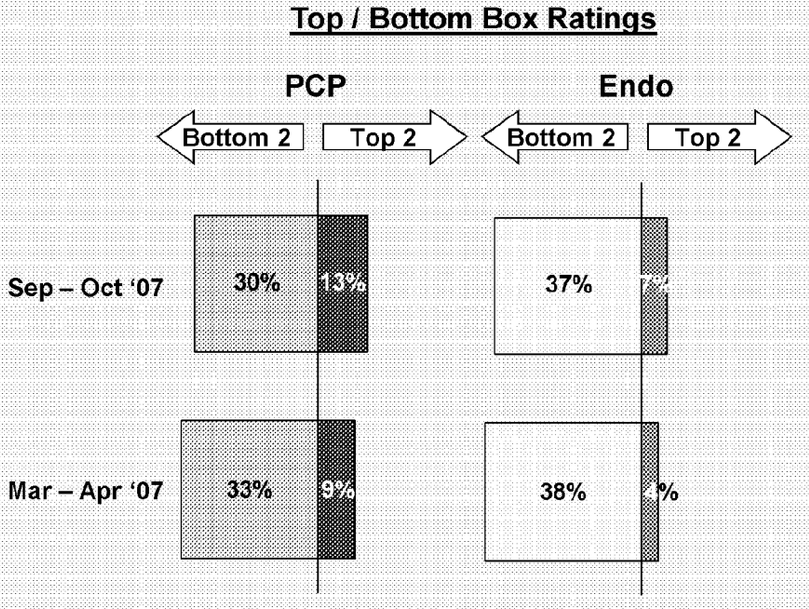
Only a small percentage of physicians believes that Byetta will positively affect beta-cells enough to prevent the need for insulin

Byetta Beta-Cell Benefits: by Specialty

Physician agreement with statement:

"Type 2 patients currently on Byetta and orals are unlikely to ever need insulin because of Byetta's positive effects on beta-cells"





Muted Shades: Mar – Apr '07 | Darker shades: Sep – Oct '07

COMPASS

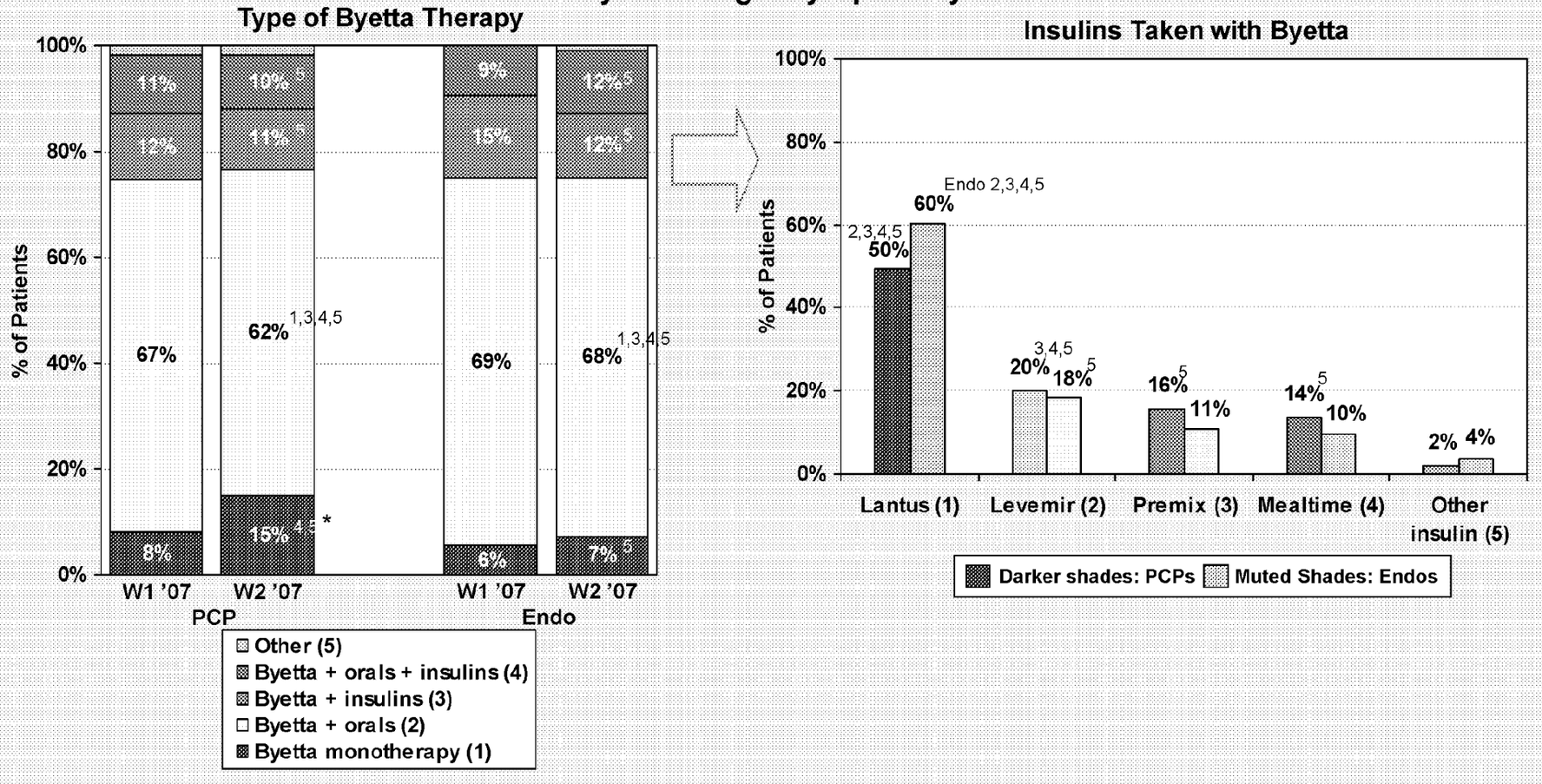
Source: COMPASS Physician ATU Tracking Study

Note: Data are weighted by physician population. LAN33: On a scale of 1 to 7, please indicate how much you agree or disagree with the following statement: "Type 2 patients currently on Byetta and orals are unlikely to ever need insulin because of Byetta's positive effects on beta-cells."

Sep - Oct '07	
PCP	102
Endo	75

A majority of Type 2 patients on Byetta use it in conjunction with an OAD; when Byetta is used in combination with an insulin, Lantus is the preferred choice

Byetta Usage: by Specialty



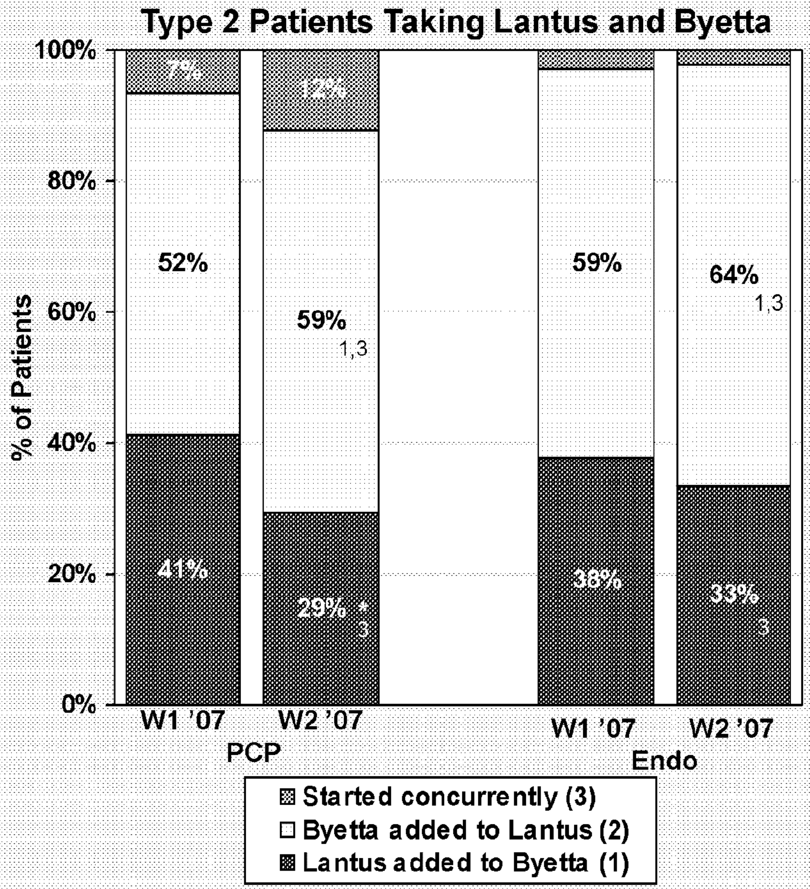
Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by patient base and physician population. Chart on left: statistically different between therapies as noted in legend. LAN28: Of your Type 2 patients currently taking Byetta, what percent are using the following therapies? LAN29: Of those Type 2 patient on Byetta with insulin, what percent take the following insulins with Byetta?

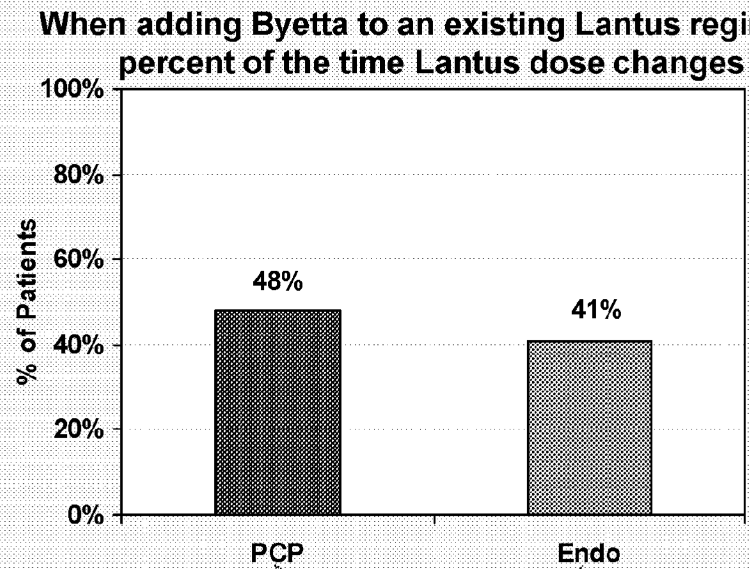
	Sup. Stat for LAN28	LAN29
PCP	102	60
Endo	75	64

150

Nearly 50% of physicians change the Lantus dose when Byetta is added to the therapy; 80-90% of these physicians decrease the units of Lantus

Byetta and Lantus Combination Usage: by Specialty





20% of PCPs increase Lantus dose, a **29%** unit change on average.

80% of PCPs decrease Lantus dose, a **28%** unit change on average.

10% of Endos increase Lantus dose, a **27%** unit change on average

90% of Endos decrease Lantus dose, a **23%** unit change on average.

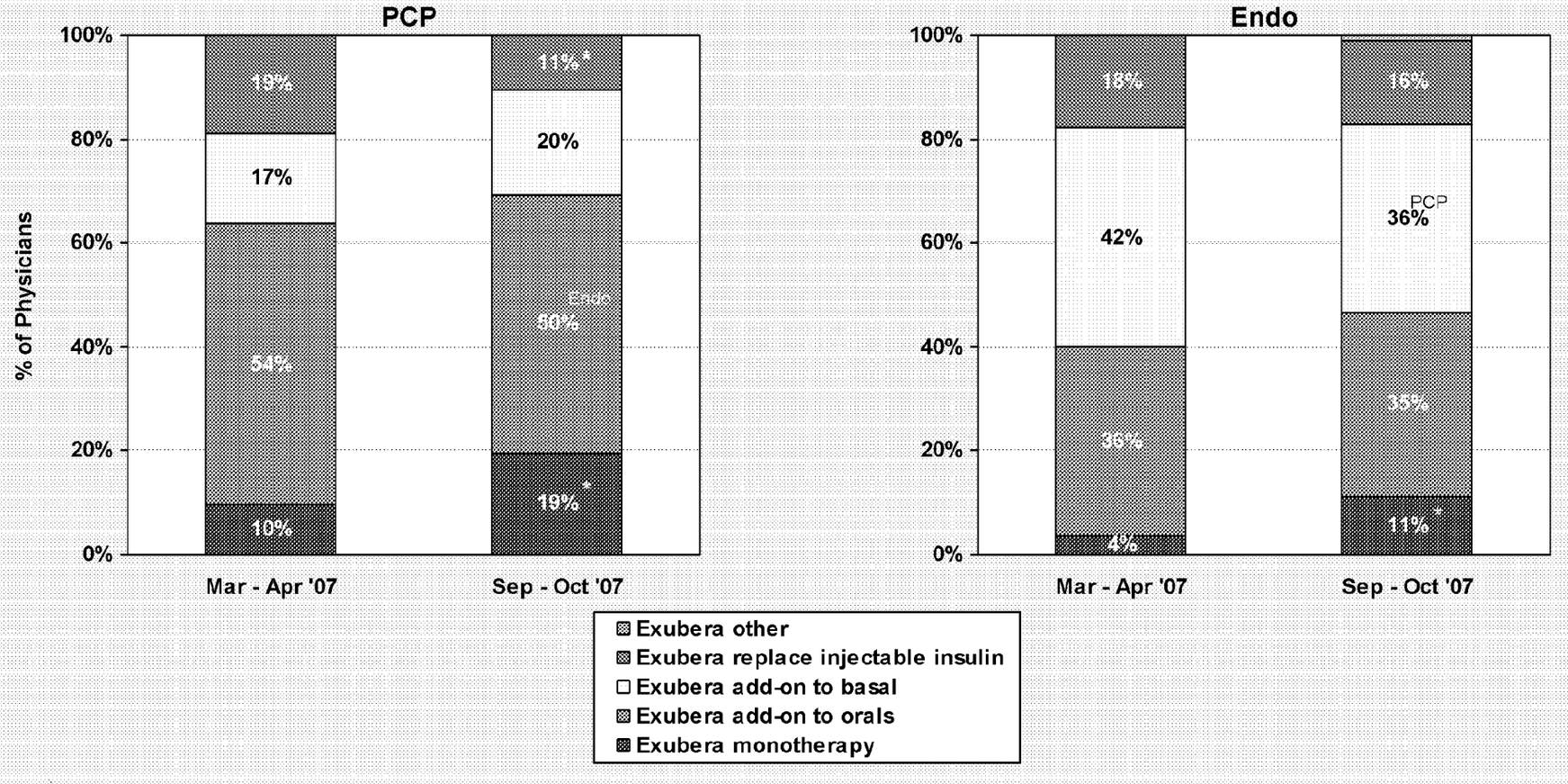
COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population and patient base. LAN35: Please consider your Type 2 patients who are taking Lantus and Byetta. For these patients, what percent of the time was... LAN30: When adding Byetta to an existing Lantus regimen, what percent of the time do you change the Lantus dose? LAN30B: For those patients whose Lantus dose changes, does it typically increase or decrease, and by what percentage?

	Sep-Oct '07 LAN35	LAN30	LAN30B
PCP	59	57	40
Endo	64	59	45

Intention to use Exubera as a monotherapy over the next month increased significantly for both PCPs and Endos in Sep-Oct '07

Exubera Usage: by Specialty



COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physician population. BS11: You indicated that you intend to prescribe Exubera to some of your NEXT 100 Type 2 patients. When using Exubera, what percent of the time will you use the product...

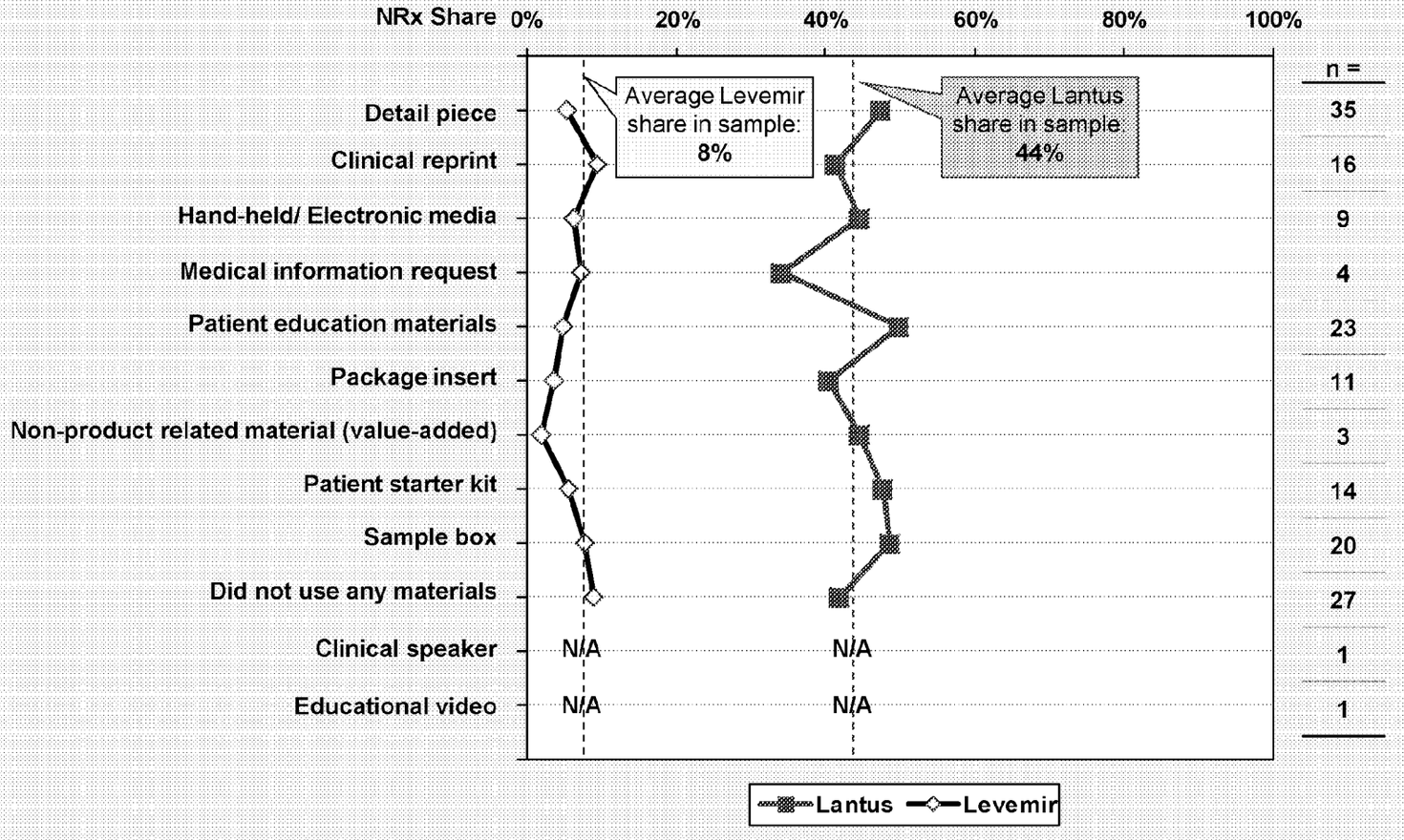
	Sep-Oct '07
PCP	52
Endo	38

Appendix Contents

- Introduction
- Key Findings
- Awareness and Trial
- Special Topics
- Product Perceptions
- Product Usage
- Sales Force
- Appendix
  - Appendix 1: Additional ATU Slides
  - Appendix 2: Additional Sales Force Slides
  - Appendix 3: Stat Testing Appendix & New Question List

Use of patient related resources during a Lantus detail are associated with above average Lantus market share and below average Levemir share

NRx Share by Resources Lantus Rep Used in Last Discussion: Total



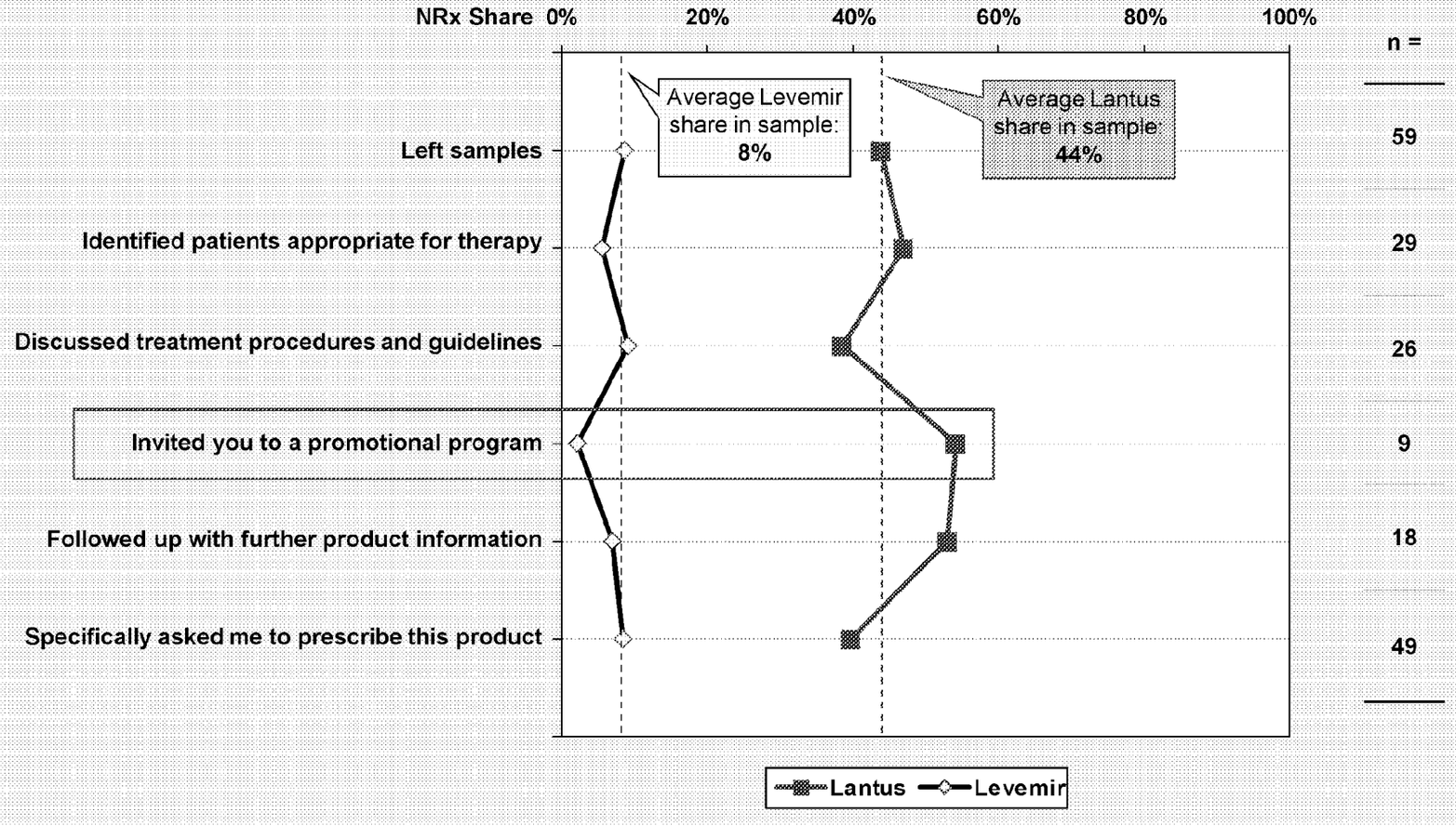
Source: Lantus COMPASS Physician ATU Tracking Study , IMS Lantus NRx Data Jun-Aug '07

Note: Data are weighted by reach. Not statistically different at 95% between Lantus and Levemir market share. TRK6: During the last detail for [Product] what did the sales rep use to aid the discussion? Clinical speaker and Educational video not shown due to small sample size.

Unaided Recall	
Lantus	126

Physicians who were invited by Lantus reps to attend a promotional program have above average Lantus market share and below average Levemir share

NRx Share by Activities Lantus Rep Performed During Last Discussion: Total



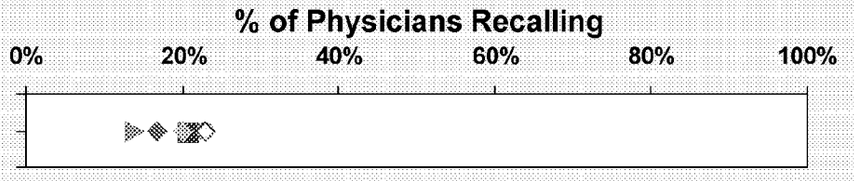
Source: Lantus COMPASS Physician ATU Tracking Study , IMS Lantus NRx Data Jun-Aug '07
Note: Data are weighted by reach. Not statistically different at 95% between Lantus and Levemir market share. SFACT3: During the most recent detail for [Product], which of the following activities did the representative do?

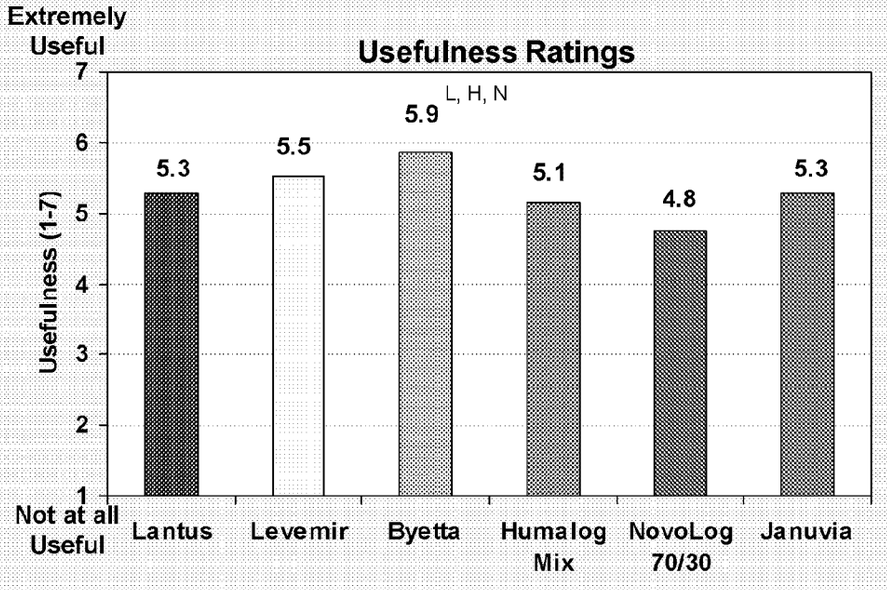
Lantus	126

155

While recalled by only 20% of physicians, Byetta's clinical reprints are considered more valuable than those of Lantus or Premix

Recalled Use of Clinical Reprint: Total





Most Significant Finding
(% out of those who discussed)

Lantus (n=21)	52% Improved HbA1c levels 29% General efficacy 12% Once daily dosing
Levemir (n=31)	40% Less weight gain 23% Improved HbA1c levels 11% Duration of action
Byetta (n=20)	49% Improved HbA1c levels 32% Weight loss / No weight gain 31% General efficacy
Humalog Mix (n=16)	41% Improved HbA1c levels 14% General efficacy 11% Improved PPG control
Novolog 70/30 (n=16)	60% General efficacy 53% Improved HbA1c levels 1% Improved PPG control
Januvia (n=19)	50% Improved HbA1c levels 34% General efficacy 17% Weight loss

Respondents	
Lantus	21
Levemir	31
Byetta	20
Hum Mix	16
Nov 70/30	16
Januvia	19

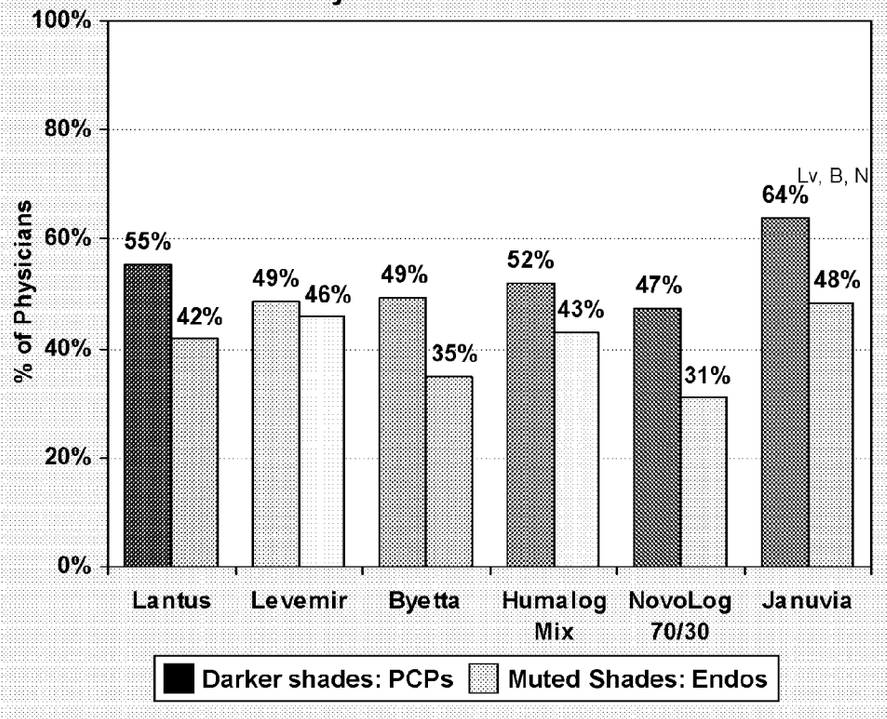
COMPASS

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. TRK6: During the last detail for [Product] what did the sales rep use to aid the discussion? TRK7: What was the most significant finding of the clinical study? TRK8A: How useful was the clinical study that the sales representative used during your last detail for [Product]?

Physicians report no significant differences across products for being specifically asked to prescribe for particular patient types

Specifically Asked to Prescribe to Particular Patient Types: Total

% of Physicians Asked to Prescribe



Specific Patient Types
(% of those who were asked)

Lantus (n=43)	34% Patients who failed on orals 21% Type 2 patients 19% Uncontrolled patients / Patients not at target
Levemir (n=38)	31% Patients who failed on orals 28% Uncontrolled patients / Patients not at target 24% Patients needing basal insulin
Byetta (n=44)	55% Obese patients 24% Uncontrolled patients / Patients not at target 21% Patients who failed on orals
Humalog Mix (n=32)	34% Uncontrolled patients / Patients not at target 17% Type 2 patients 12% Patients needing insulin
Novolog 70/30 (n=26)	35% Patients who failed on orals 26% Uncontrolled patients / Patients not at target 18% Type 2 patients
Januvia (n=41)	30% Type 2 patients 21% Uncontrolled patients / Patients not at target 18% Patients who failed on metformin

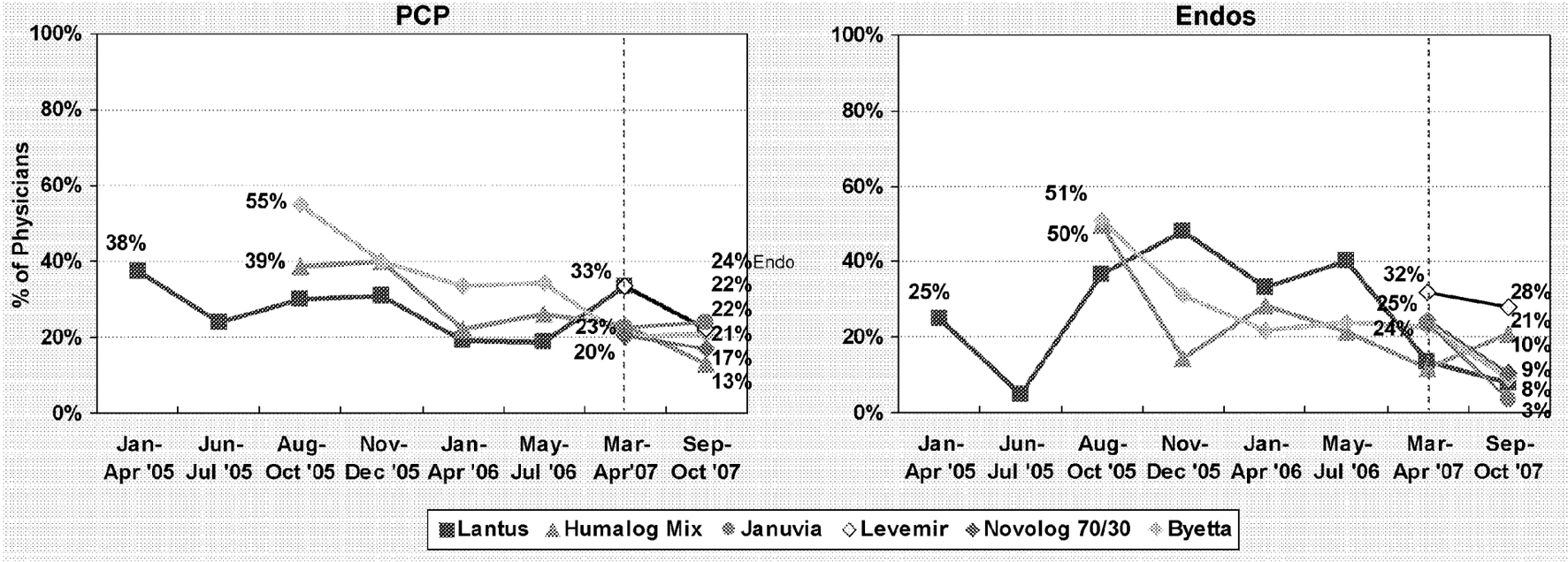
Sep-Oct '07	PCP	Endo
Lantus	76	50
Levemir	76	50
Byetta	75	43
Hum Mix	75	28
Nov 70/30	76	29
Januvia	75	29

COMPASS

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. SFACT3: During the most recent detail for [Product], which of the following activities did the representative do? DET1: For what patient types were you asked to prescribe [product]?

Lantus recalled use of clinical reprints among Endos has decreased from 40% to 8% over the past three waves

Recalled Use of Clinical Reprint: by Specialty



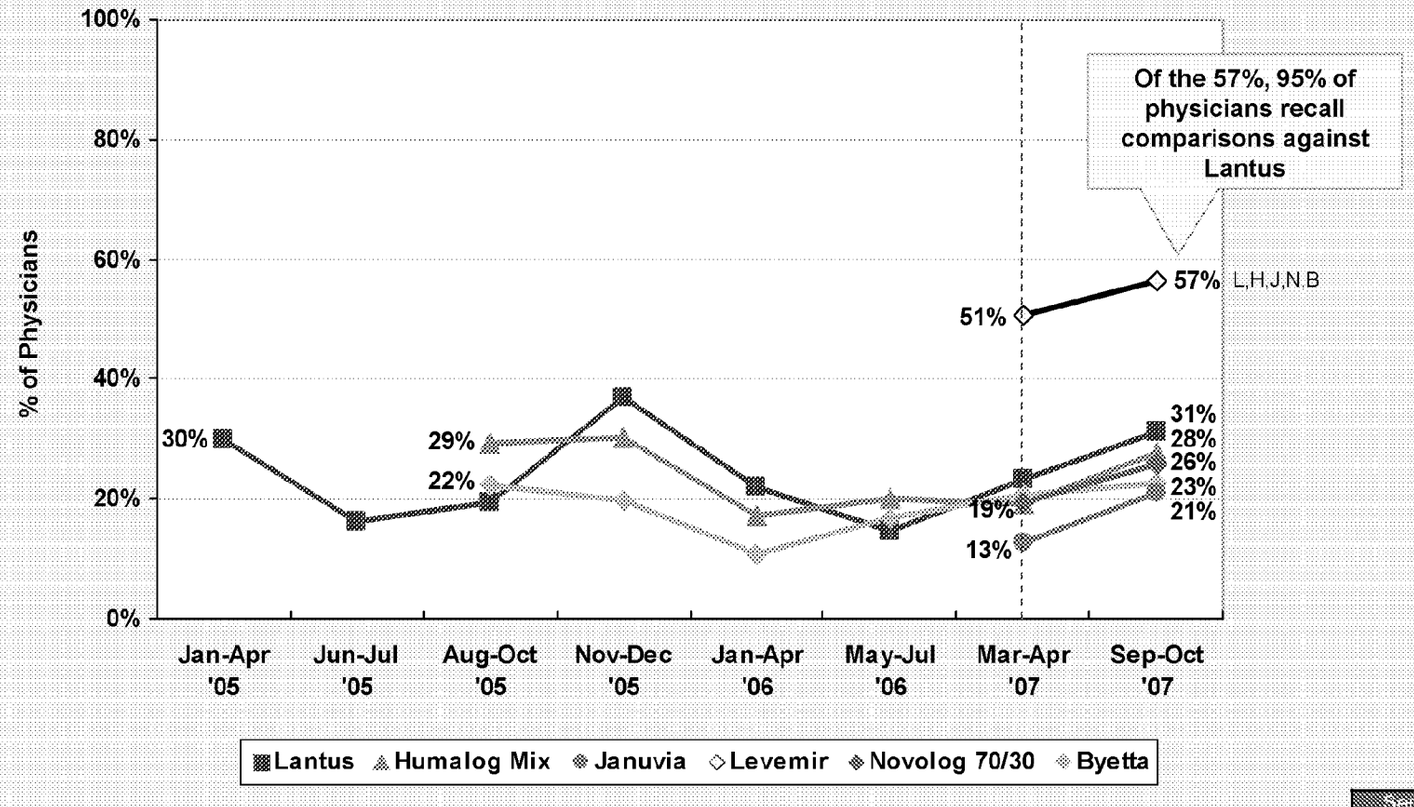
Sep-Oct '07	PCP	Endo
Lantus	76	50
Levemir	76	50
Byetta	75	43
Hum Mix	75	28
Nov 70/30	76	29
Januvia	75	29

COMPASS

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. Dotted red line indicates trend break in quota groups. Green line formerly Eli Lilly Insulins. Novo Nordisk split into Novolog 70/30 and Levemir in Mar-Apr '07. TRK6: During the last detail for [product] which of the following occurred?

Levemir reps make comparisons to another product in 57% of physician details, significantly more often than all other company reps

Comparisons to Other Products: Total



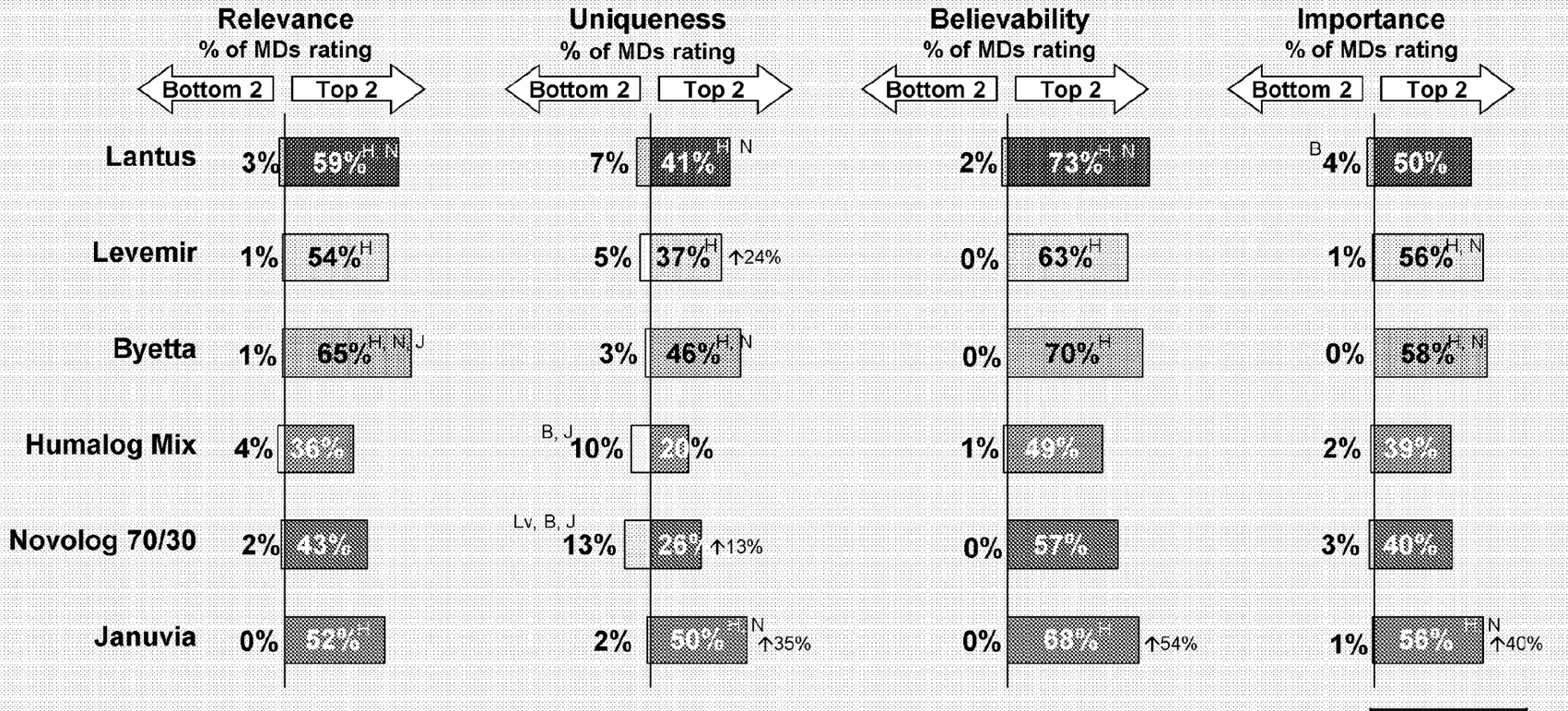
Sep-Oct '07	
Lantus	126
Levemir	126
Byetta	118
Hum Mix	103
Nov 70/30	105
Januvia	104

COMPASS

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. Dotted red line indicates trend break in quota groups. Green line formerly Eli Lilly Insulins.
ME6A_E: Did your [product] sales representative make a comparison to another diabetes product?

Lantus, Levemir, Byetta, and Januvia details are perceived at parity across all of the message effectiveness attributes

Main Message Effectiveness: Total



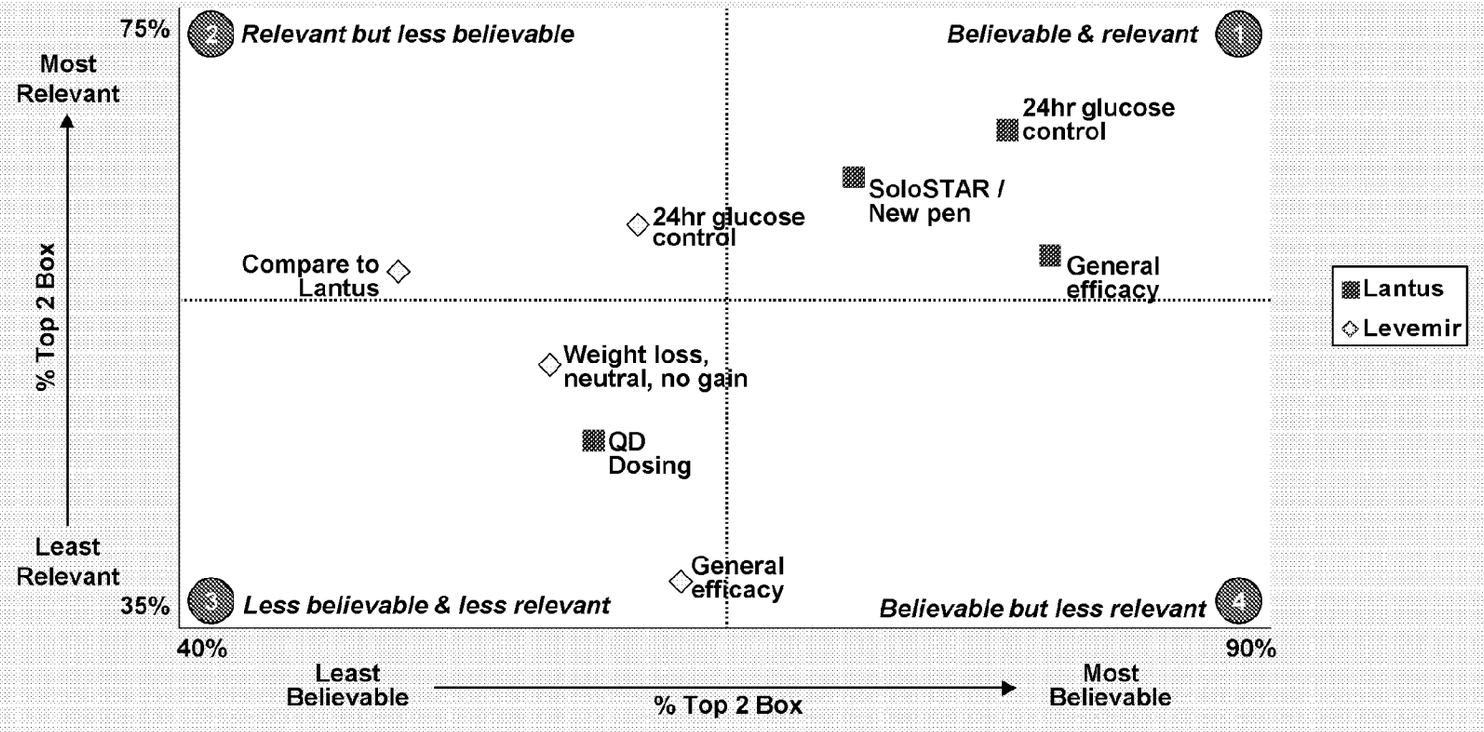
Sep-Oct '07
Lantus	126
Levemir	126
Byetta	118
Hum Mix	103
Nov 70/30	105
Januvia	104

COMPASS

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. ME2-5: During your last visit from your [Product] sales representative, on a scale of 1 to 7 how (relevant, believable, unique, important) was the main message you received about [Product]?

Efficacy, *24 hour coverage* and *SoloSTAR* messages are all rated as highly believable and relevant for Lantus, but physicians have less favorable perceptions of *QD* messages

Main Message Relevance and Believability



QD messages may require additional effort to increase believability and relevance ratings, or they may not be as effective in resonating with physicians

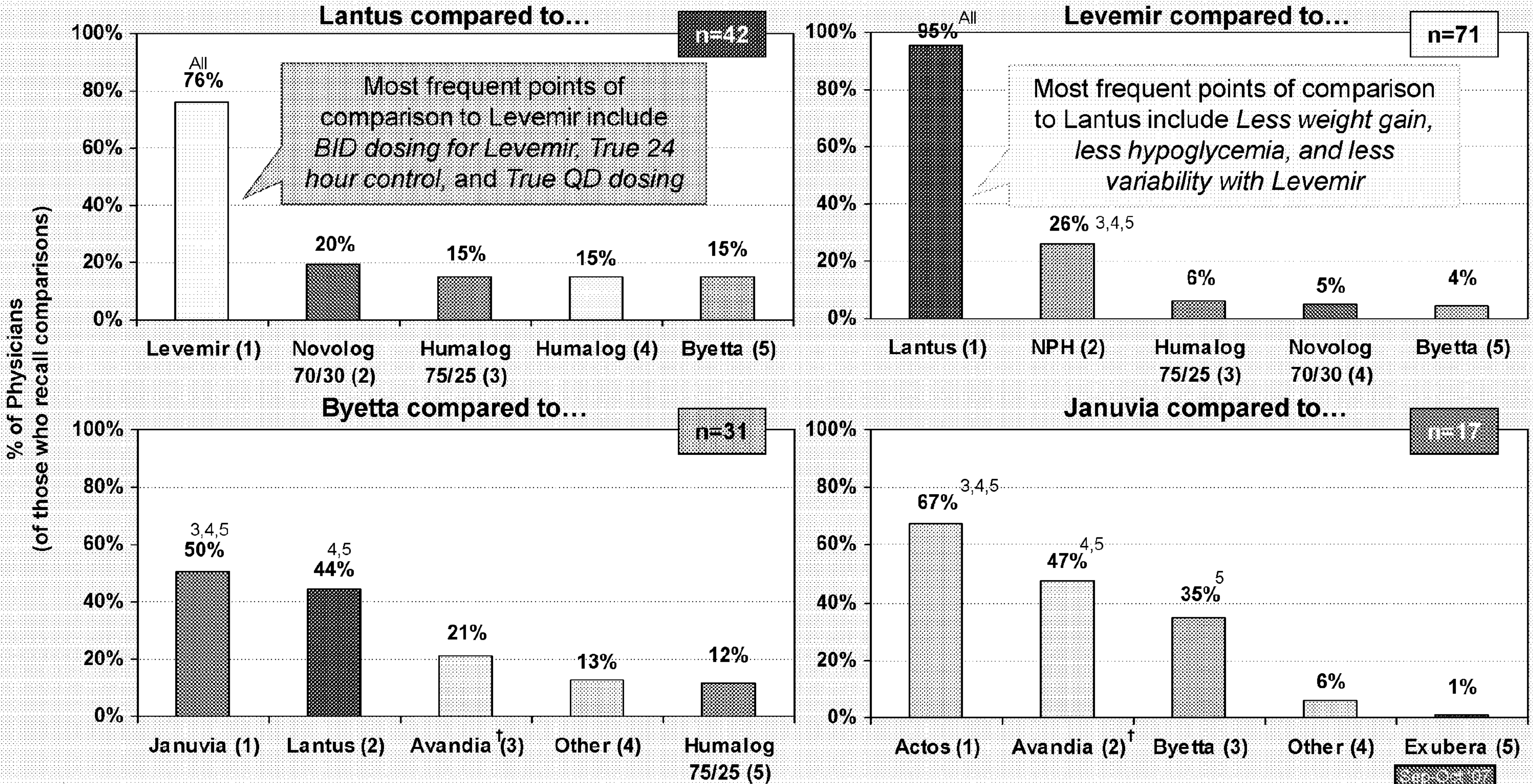
Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. ME2-5: During your last visit from your [Product] sales representative, on a scale of 1 to 7 how (relevant, believable, unique, important) was the main message you received about [Product]? ME1: In your last discussion with your [Company] sales representative, what was the main message conveyed regarding [Product]? Overlap may exist between data points due to unaided recall of multiple messages during the same detail.

Sample Size
Lantus	126
Levemir	126

LANTUS insulin glargine [rDNA origin] injection

Lantus and Levemir are frequently compared to each other during product details; Lantus reps mention superior QD *dosing* while Levemir reps discuss *less weight gain*, *less hypoglycemia*, and *less variability*

Comparisons Made to Other Products: Total



Sep-Oct '07	
Lantus	42
Levemir	71
Byetta	31
Januvia	21

COMPASS

Source: COMPASS Sales Force Tracking Study.
Note: Data are weighted by reach. † Includes Avandia, Avandamet and Avandaryl. Statistically different at 95% between products as noted in legend of each chart. ME6BE: Which product(s) was [Product] compared to? Please select all that apply. ME6: What were the points of comparison between [Product] and [ME6BE answer]?

Cost / Formulary status is mentioned by nearly one-fifth of physicians as the secondary message of their Lantus detail

Unaided Message Recall (Secondary Message): Total

(% of physicians recalling)

sanofi-aventis for Lantus

Main Message	Mar – Apr '07	Sep – Oct '07
Cost / Formulary status	15%	19%
Safety / Tolerability	7%	9%
Duration of action / 24 hour	12%	8%
Less hypoglycemia	3%	8%
General dosing / Titration	5%	7%
n =	127	126

Amylin or Eli Lilly for Byetta

Main Message	Mar – Apr '07	Sep – Oct '07
Weight loss / No weight gain	19%	19%
Safety / Tolerability	5%	9%
Glucose / HbA1c control	5%	9%
Pen / Delivery device	0%	8%
General efficacy	9%	7%
n =	128	118

Novo Nordisk for Levemir

Main Message	Mar – Apr '07	Sep – Oct '07
Pen use	10%	19%
Cost / Formulary status	19%	13%
Less weight gain	7%	9%
Glucose / HbA1c control	8%	9%
Compare to Lantus	6%	7%
n =	122	126

Merck for Januvia

Main Message	Mar – Apr '07	Sep – Oct '07
Safety / Side effects	16%	27%
Cost / Formulary status	22%	15%
General efficacy	9%	11%
Glucose / HbA1c control	8%	8%
Weight loss / No weight gain	7%	7%
n =	126	104

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. Weighted percent of physicians shown for open-ended questions. ME1B: In your last discussion with your [company] sales representative, what other messages were conveyed regarding [product]? Please be as specific as possible.

Premix reps discuss product *cost*, *convenience*, and *delivery devices* in addition to their main messages

Unaided Message Recall (Secondary Message): Total

(% of physicians recalling)

Eli Lilly for Humalog Mix

Main Message	Mar – Apr '07	Sep – Oct '07
Cost / Formulary status	23%	22%
Convenience / Ease of use	16%	14%
Pen / Pump / Delivery device	11%	9%
General efficacy	3%	5%
Glucose / HbA1c control	1%	9%
n =	124	103

Novo Nordisk for Novolog 70/30

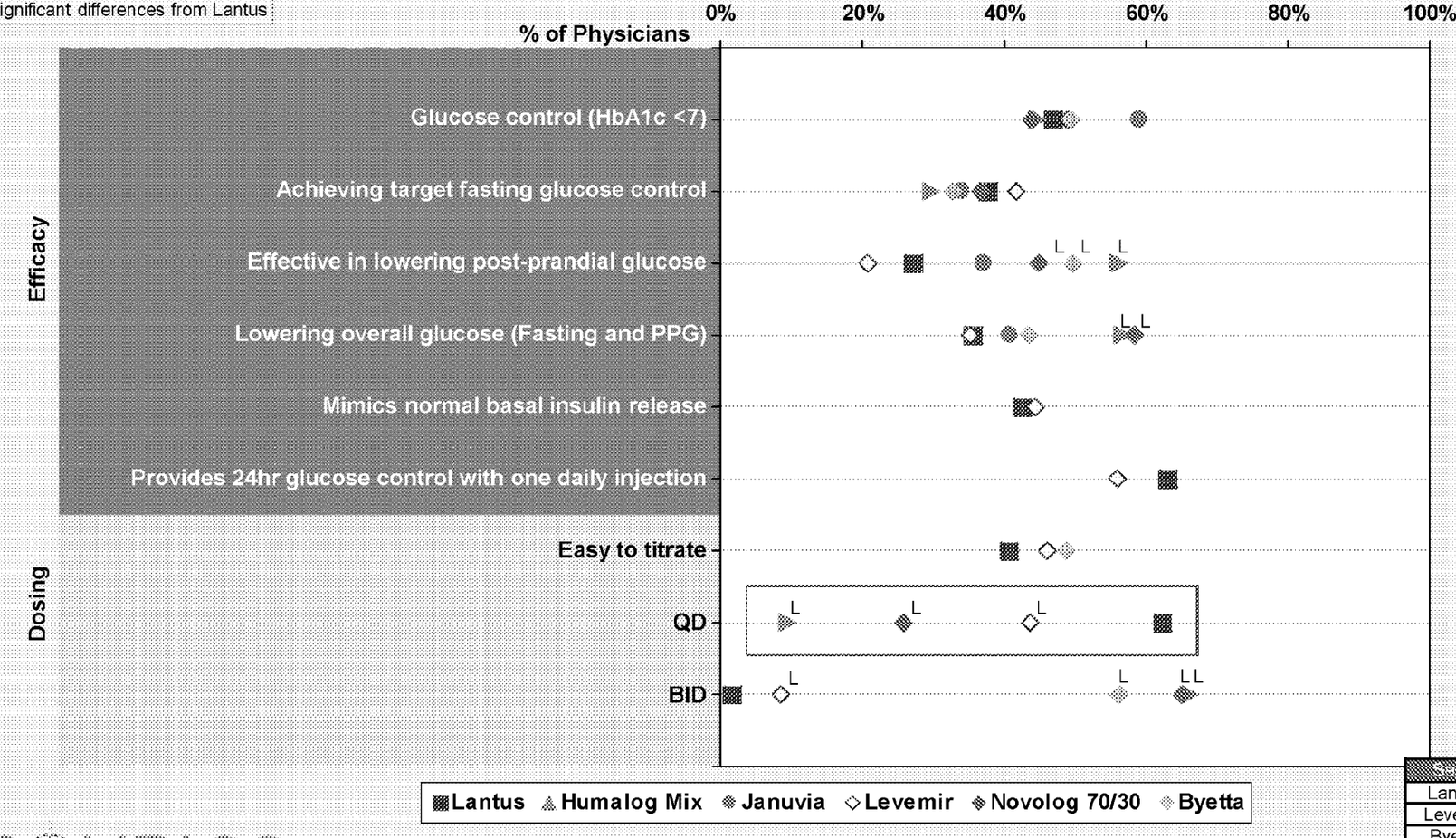
Main Message	Mar – Apr '07	Sep – Oct '07
Pen / Pen's ease of use	19%	24%
Cost / Formulary status	22%	19%
General efficacy	5%	8%
Glucose / HbA1c control	2%	4%
Rapid onset of action	0%	4%
n =	127	105

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. Weighted percent of physicians shown for open-ended questions. ME1B: In your last discussion with your [company] sales representative, what other messages were conveyed regarding [product]? Please be as specific as possible.

Though Lantus *QD dosing* messages may be perceived as less compelling, a higher percentage of physicians recall discussing *QD dosing* with Lantus reps than with competitor reps

Note: Stat testing only shows significant differences from Lantus

Aided Recall of Topics Discussed: Total



Sep-Oct '07	
Lantus	126
Levemir	126
Byetta	118
Hum Mix	103
Nov 70/30	105
Januvia	104

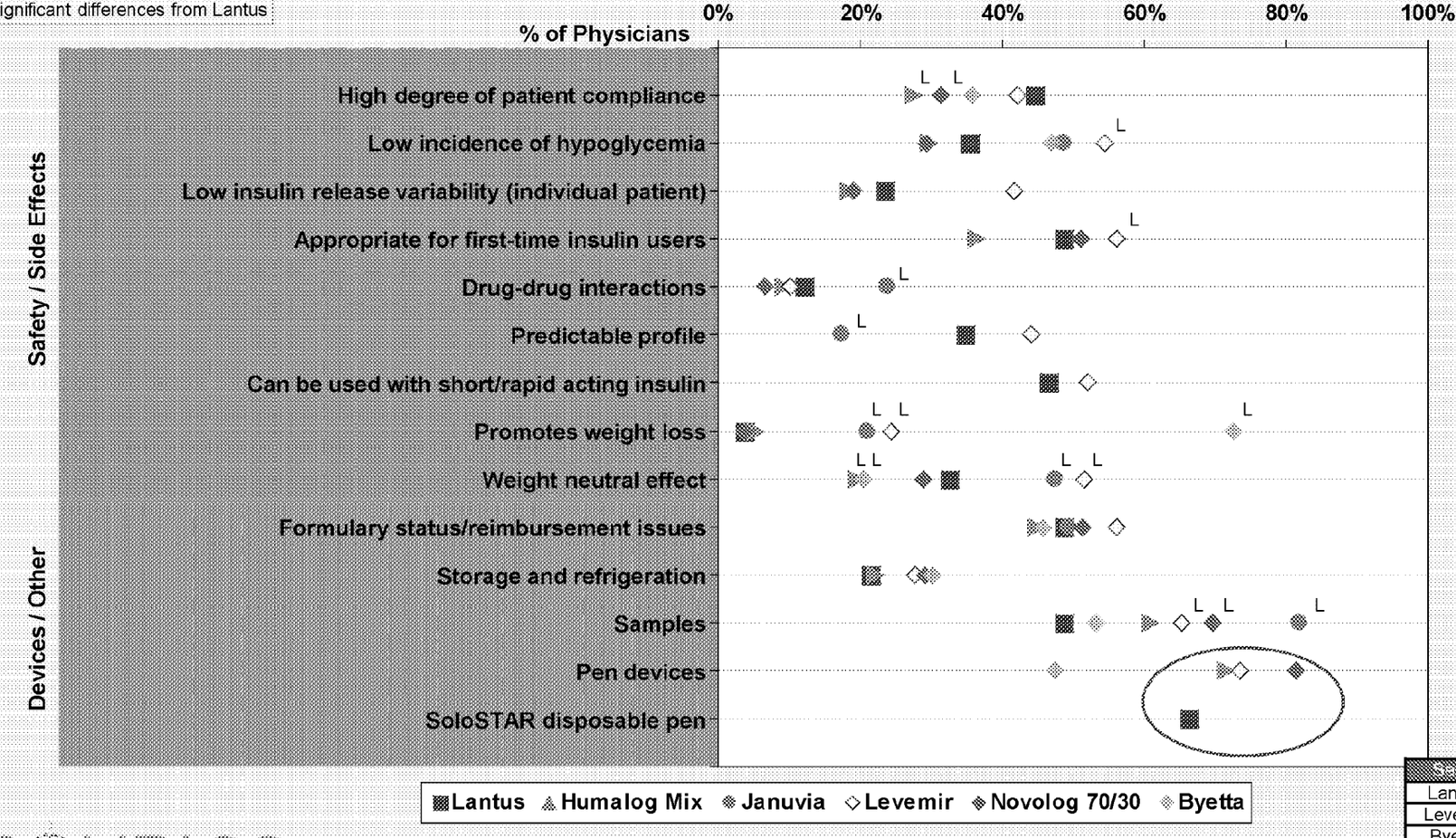
COMPASS

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. L=Statistically different at 95% between Lantus and other products: ME6: Please indicate which of the following product attributes or topics you and the sales representative discussed during your last visit with your representative.

Aided, over 60% of physicians recall discussing SoloSTAR with their Lantus reps; however, directionally more physicians still recall pen discussions with their Novo and Lilly reps

Note: Stat testing only shows significant differences from Lantus

Aided Recall of Topics Discussed: Total

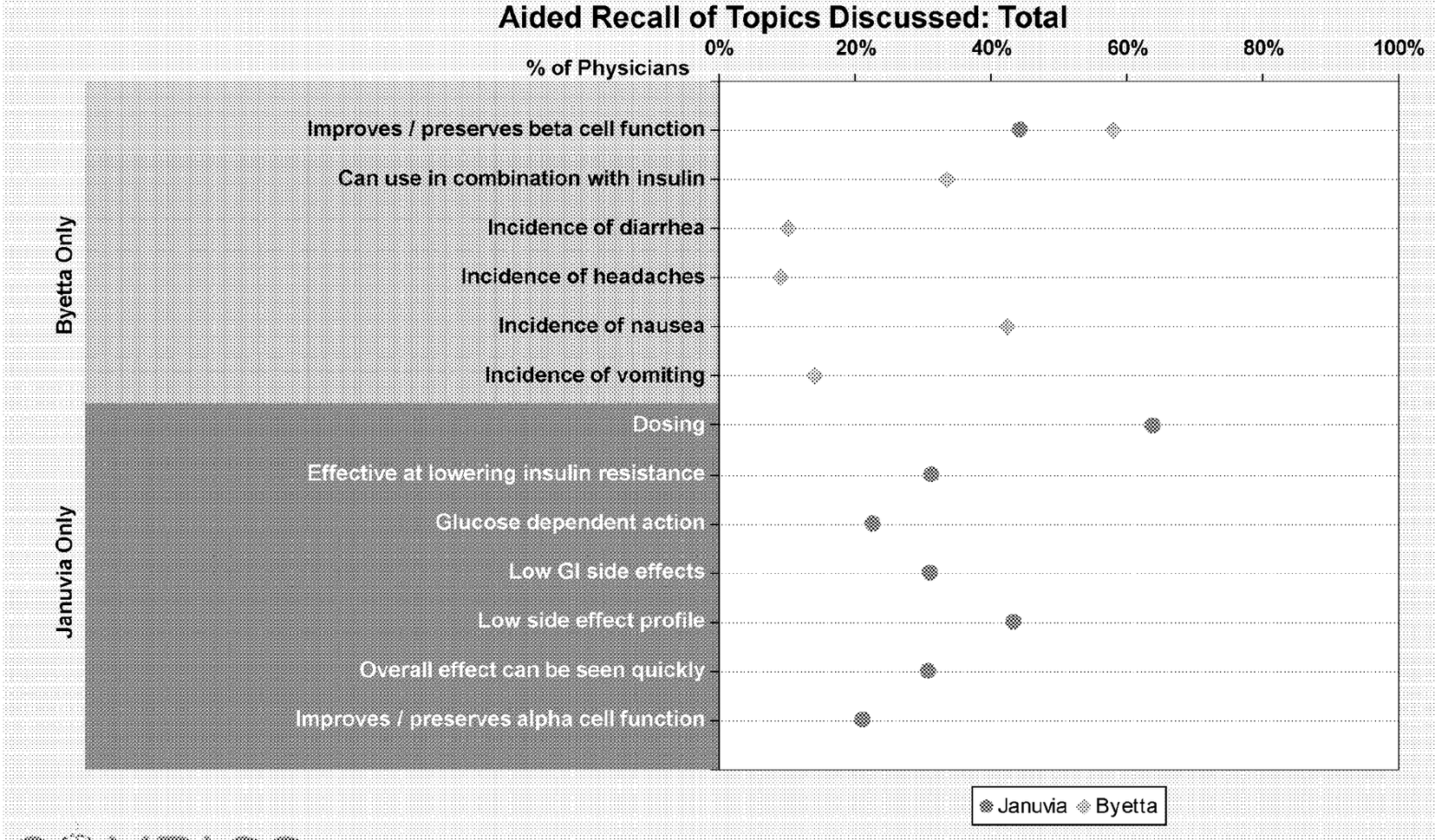


Sep-Oct '07	
Lantus	126
Levemir	126
Byetta	118
Hum Mix	103
Nov 70/30	105
Januvia	104

COMPASS

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. L=Statistically different at 95% between Lantus and other products. ME6: Please indicate which of the following product attributes or topics you and the sales representative discussed during your last visit with your representative.

Nearly 60% of physicians recall Byetta reps discussing the drug's positive effects on beta-cells; side-effects are less frequently discussed



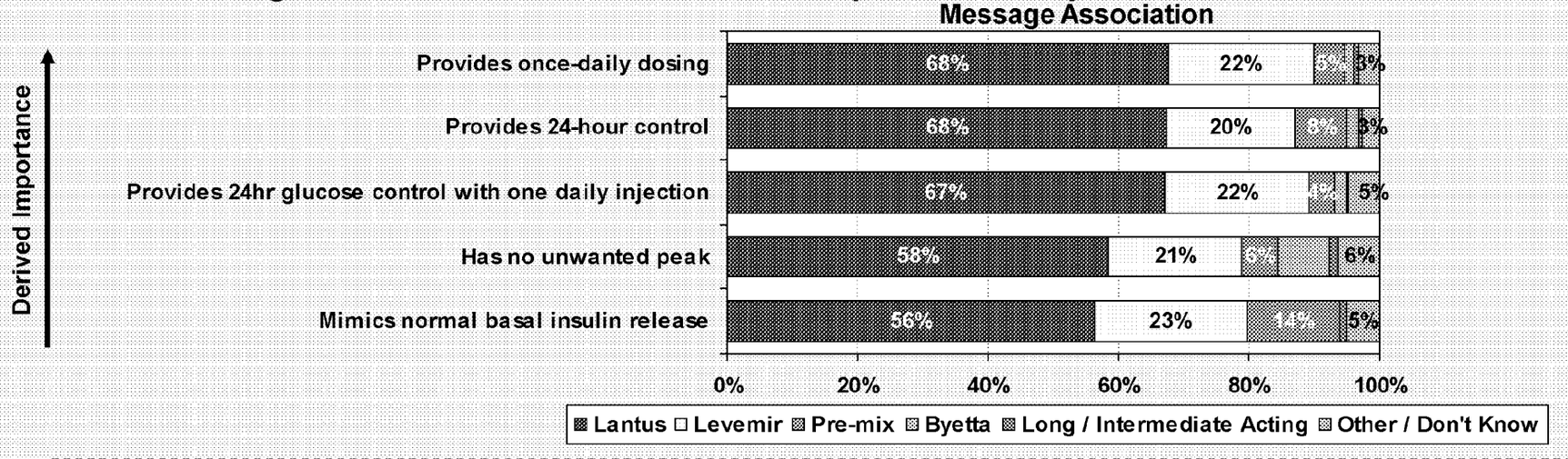
COMPASS

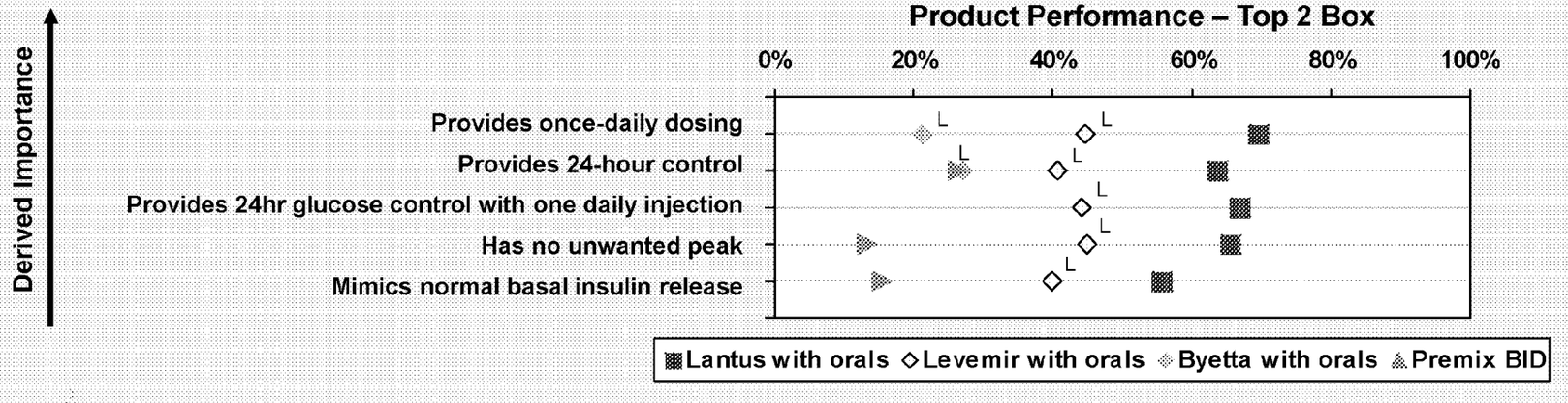
Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. L=Statistically different at 95% between Lantus and other products: ME6: Please indicate which of the following product attributes or topics you and the sales representative discussed during your last visit with your representative.

Sep-Oct '07	
Byetta	118
Januvia	104

In Sep-Oct '07, physicians perceived strong links between Lantus messaging and top derived importance attributes

Message Association and Performance on Top 5 Derived Importance Attributes: Total





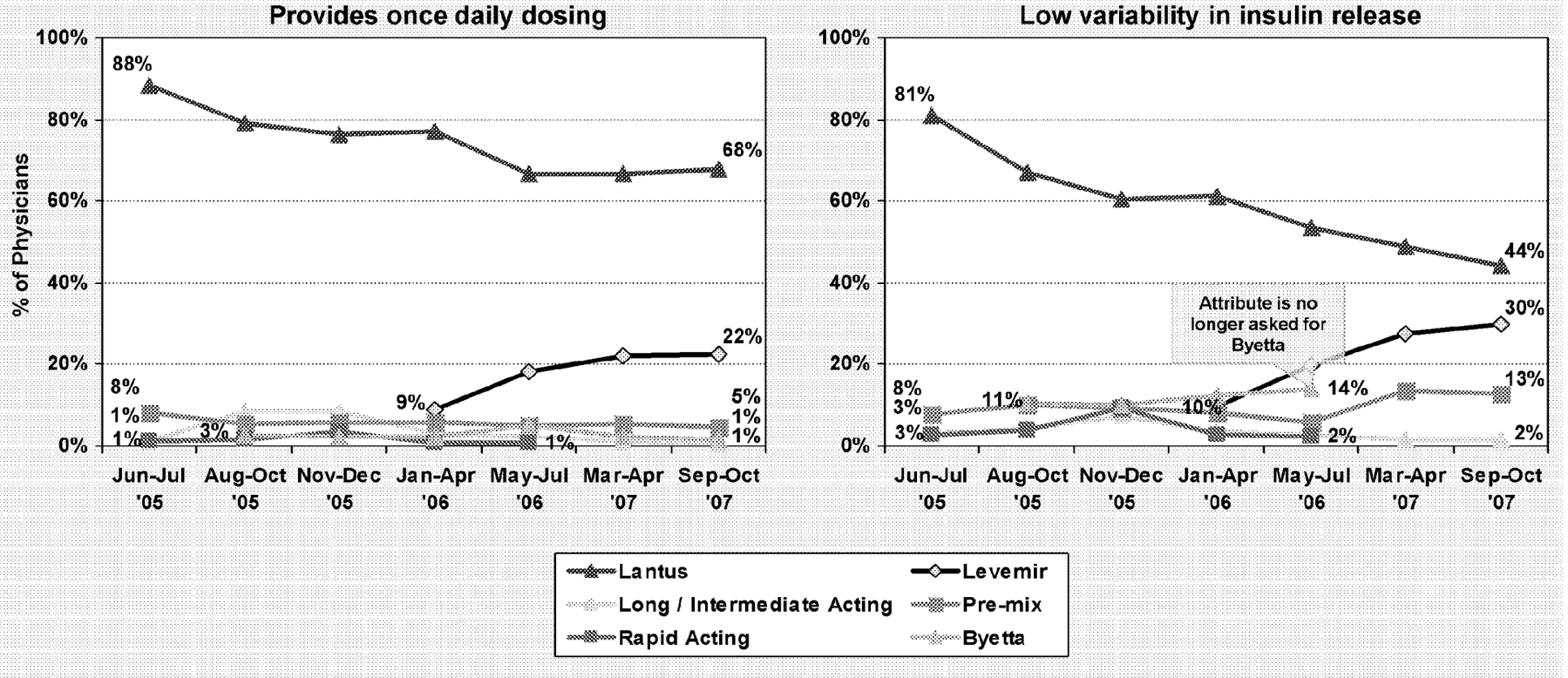
COMPASS

Source: COMPASS Sales Force and Physician Tracking Study
Note: Data are weighted by reach. L=Statistically different at 95% between Lantus and other products. ME7: For each of the following statements please select the one diabetes product that you believe is best associated with the statement. PR3B: On a scale of 1 to 7, please rate how well you feel each therapy performs on these attributes/functions for Type 2 patients.

Sep-Oct '07	
ME7	540
PR3B	179-201

While Lantus continues to maintain ownership of the *Once daily dosing* message, its advantage over Levemir in *Low variability* continues to erode

Message Association: Total (Select ONE Product)

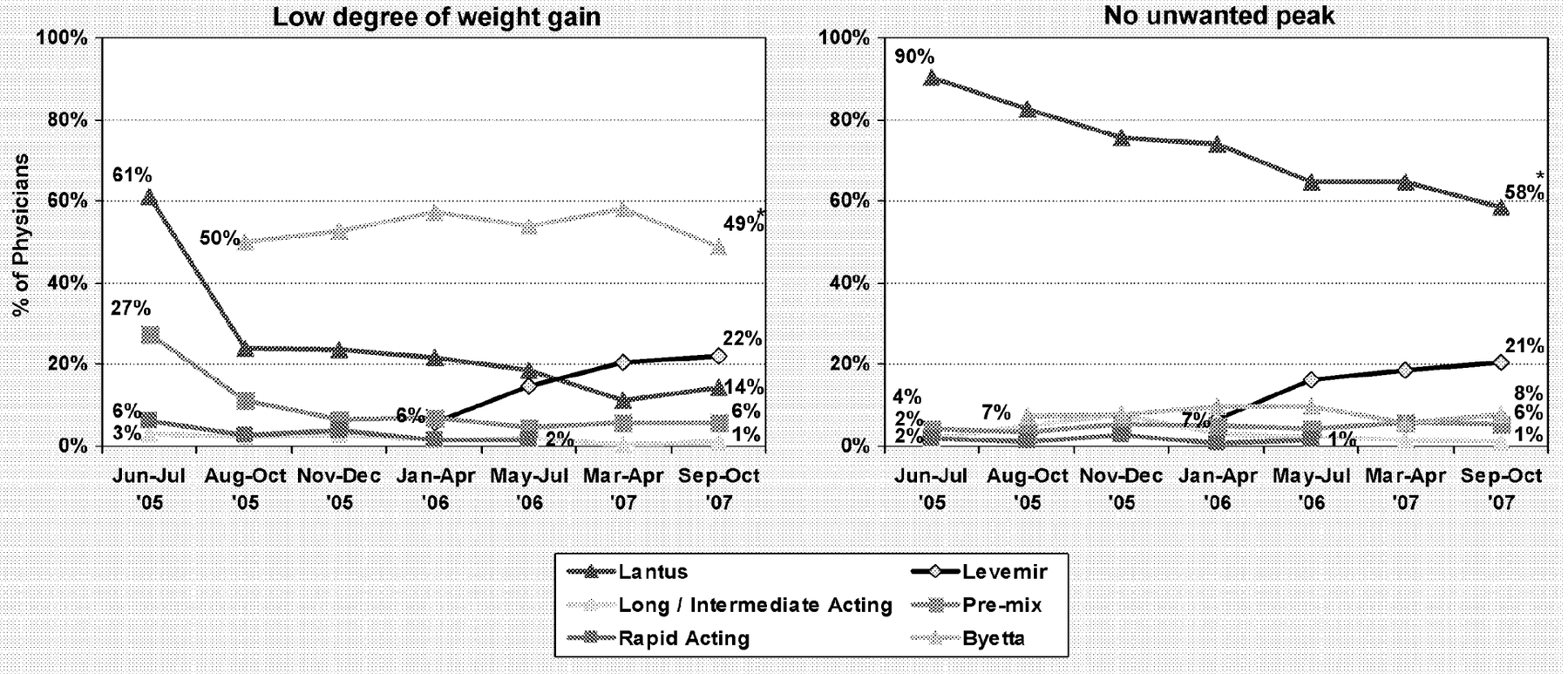


COMPASS

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. ME7: For each of the following statements please select the one diabetes product that you believe is best associated with the statement. Low variability in insulin release not asked for Byetta. Rapid acting products not asked after May-Jul '06.

At the cost of Byetta, Levemir demonstrated directional growth in its share of *Low degree of weight gain*, while Lantus continues its ownership of *No unwanted peak*

Message Association: Total (Select ONE Product)



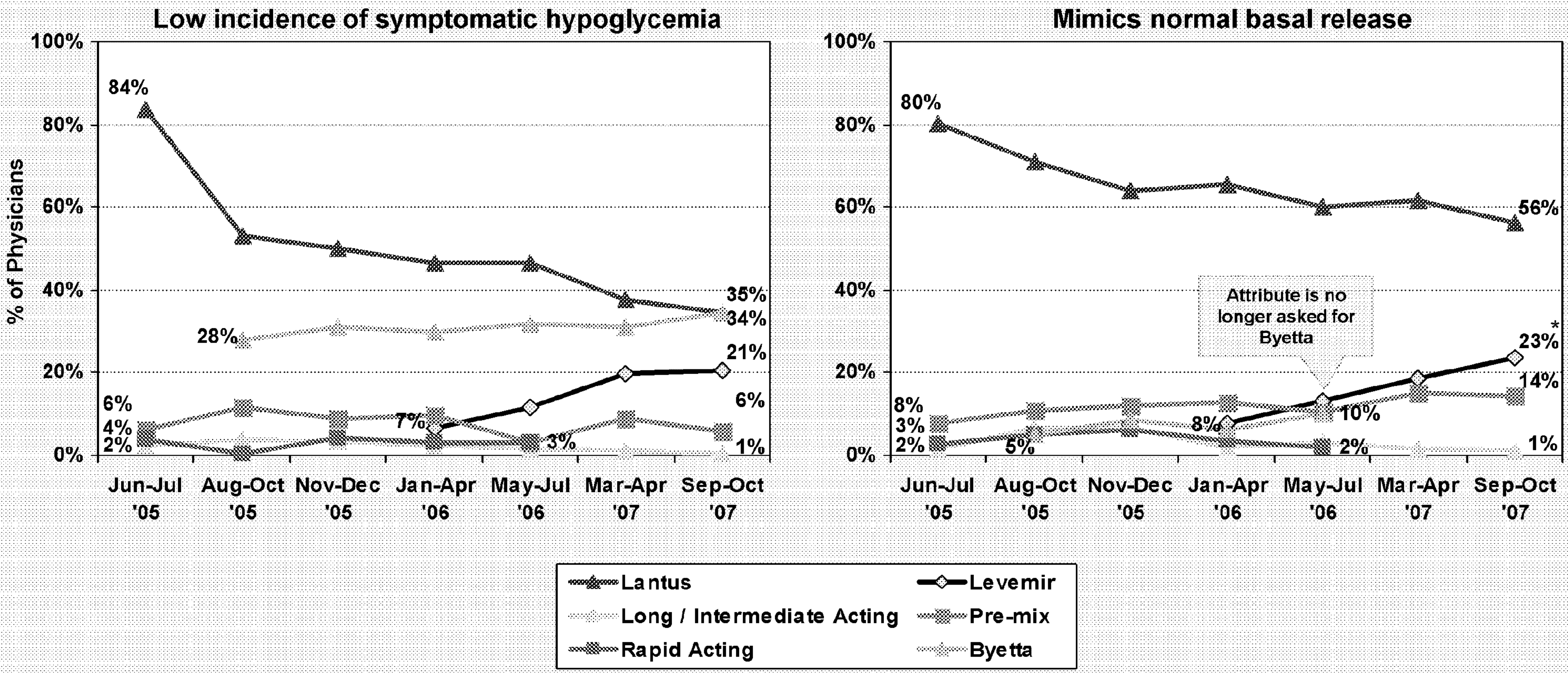
COMPASS

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. ME7: For each of the following statements please select the one diabetes product that you believe is best associated with the statement. Low variability in insulin release not asked for Byetta. Rapid acting products not asked after May-Jul '06.

RESPONSE 540

In Sep - Oct '07, Lantus and Byetta share of *Low incidence of symptomatic hypoglycemia* became nearly equal while Levemir demonstrated significant growth in *Mimics normal basal insulin release*

Message Association: Total
(Select ONE Product)

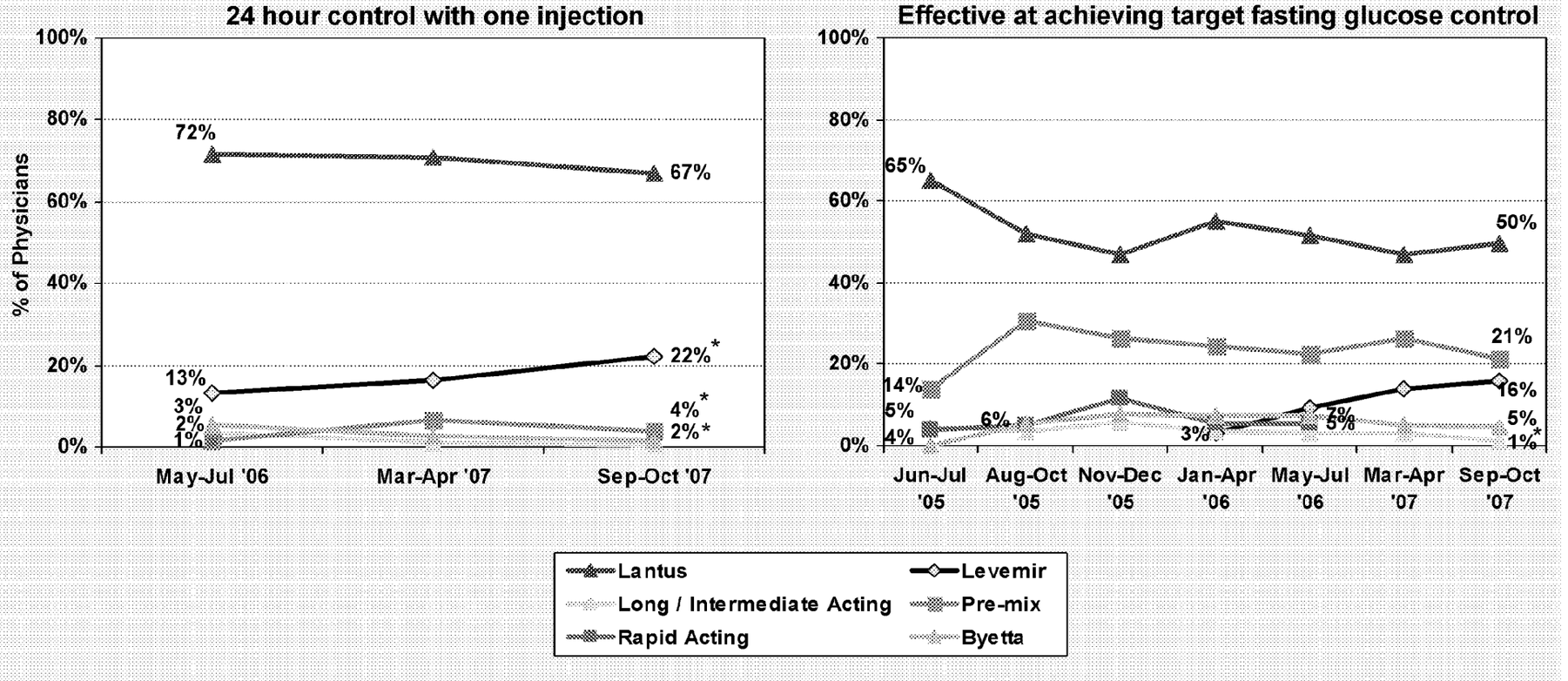


Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. ME7: For each of the following statements please select the one diabetes product that you believe is best associated with the statement. Low variability in insulin release not asked for Byetta. Rapid acting products not asked after May-Jul '06.

Sep-Oct '07
540

While Lantus maintains ownership of *24 hour control with one injection* and *Efficacy controlling FBG*, Levemir continues to gain traction on both attributes

Message Association: Total (Select ONE Product)



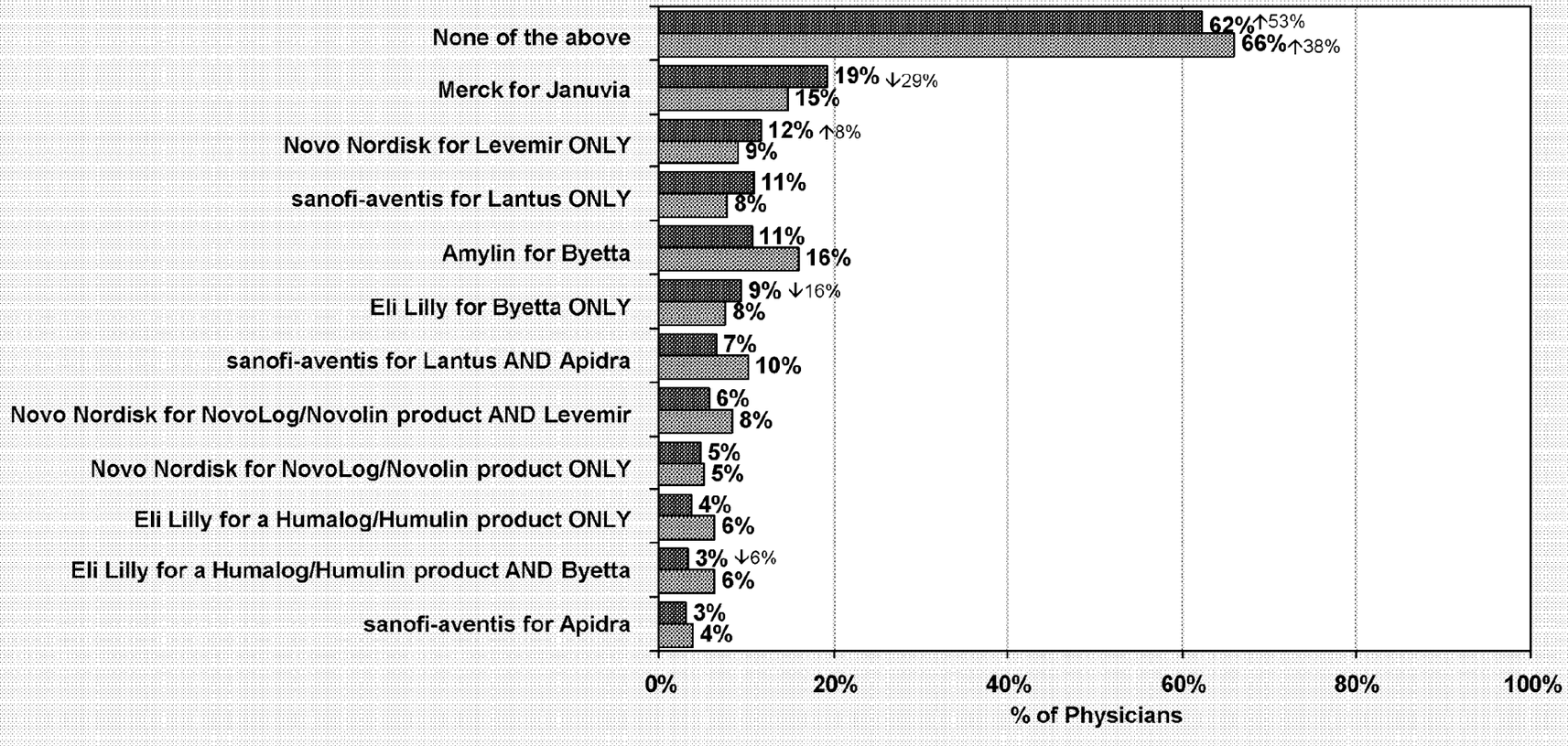
COMPASS

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. ME7: For each of the following statements please select the one diabetes product that you believe is best associated with the statement. Low variability in insulin release not asked for Byetta. Rapid acting products not asked after May-Jul '06.

RESPONSE 540

Nearly two-thirds of physicians did not attend a company sponsored event in the past month

Company Event Attendance: by Specialty



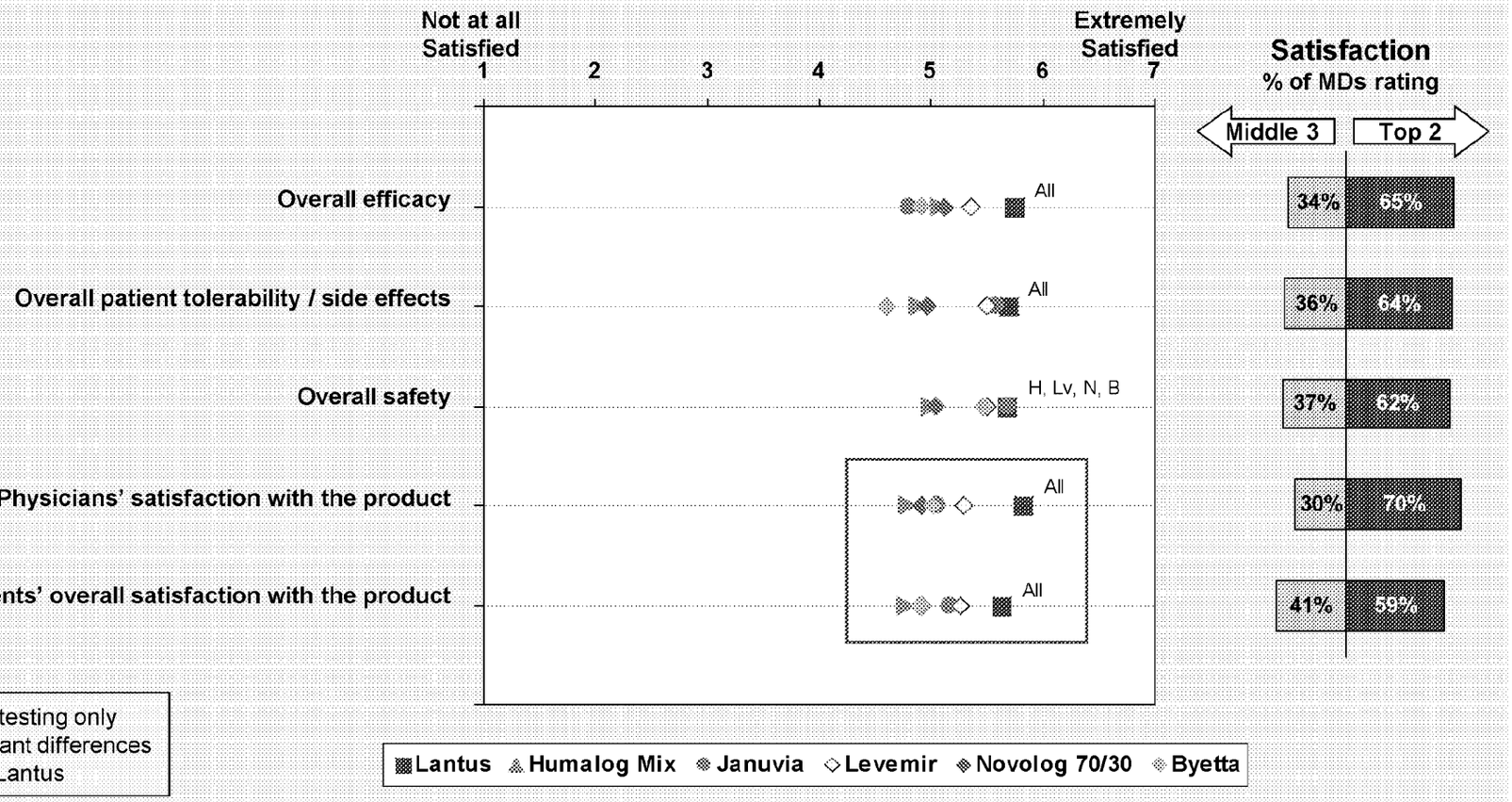
COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by reach. TRK1:Please indicate which companies sponsored a conference, symposium or other event that you attended in the past month.

Specialty	N
PCP	384
Endo	156

Physicians and patients (as perceived by physicians) are more satisfied with Lantus than with any other therapy

Overall Product Satisfaction: by Total



Note: Stat testing only shows significant differences from Lantus

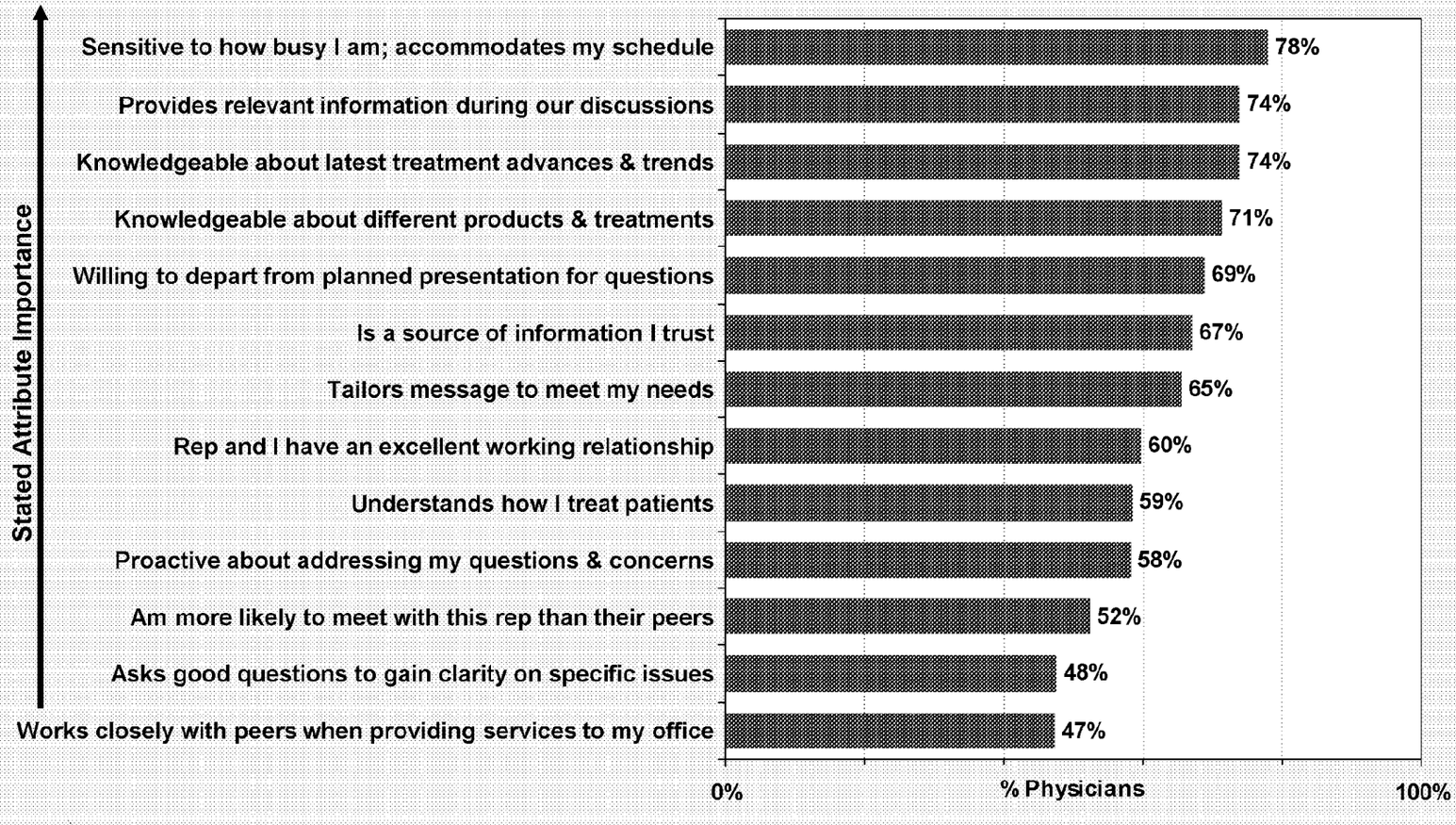
COMPASS

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. SFPR1 For each of the following diabetes products, please rate how well you feel each product performs on these factors.

Sep-Oct '12
540

Sensitivity to physicians' schedules is stated as the most important sales rep characteristic in Sep-Oct '07

Sales Rep Attribute Stated Importance Top 2 Box: Total



	Mean Rating	
	PCP	Endo
Sensitive to how busy I am; accommodates my schedule	6.2	6.3
Provides relevant information during our discussions	6.0	5.9
Knowledgeable about latest treatment advances & trends	6.0	5.8
Knowledgeable about different products & treatments	6.0	5.8
Willing to depart from planned presentation for questions	5.8	5.9
Is a source of information I trust	5.8	5.8
Tailors message to meet my needs	5.8	5.8
Rep and I have an excellent working relationship	5.7	5.8
Understands how I treat patients	5.7	5.6
Proactive about addressing my questions & concerns	5.5	5.7
Am more likely to meet with this rep than their peers	5.4	5.3
Asks good questions to gain clarity on specific issues	5.3	5.3
Works closely with peers when providing services to my office	5.3	5.4

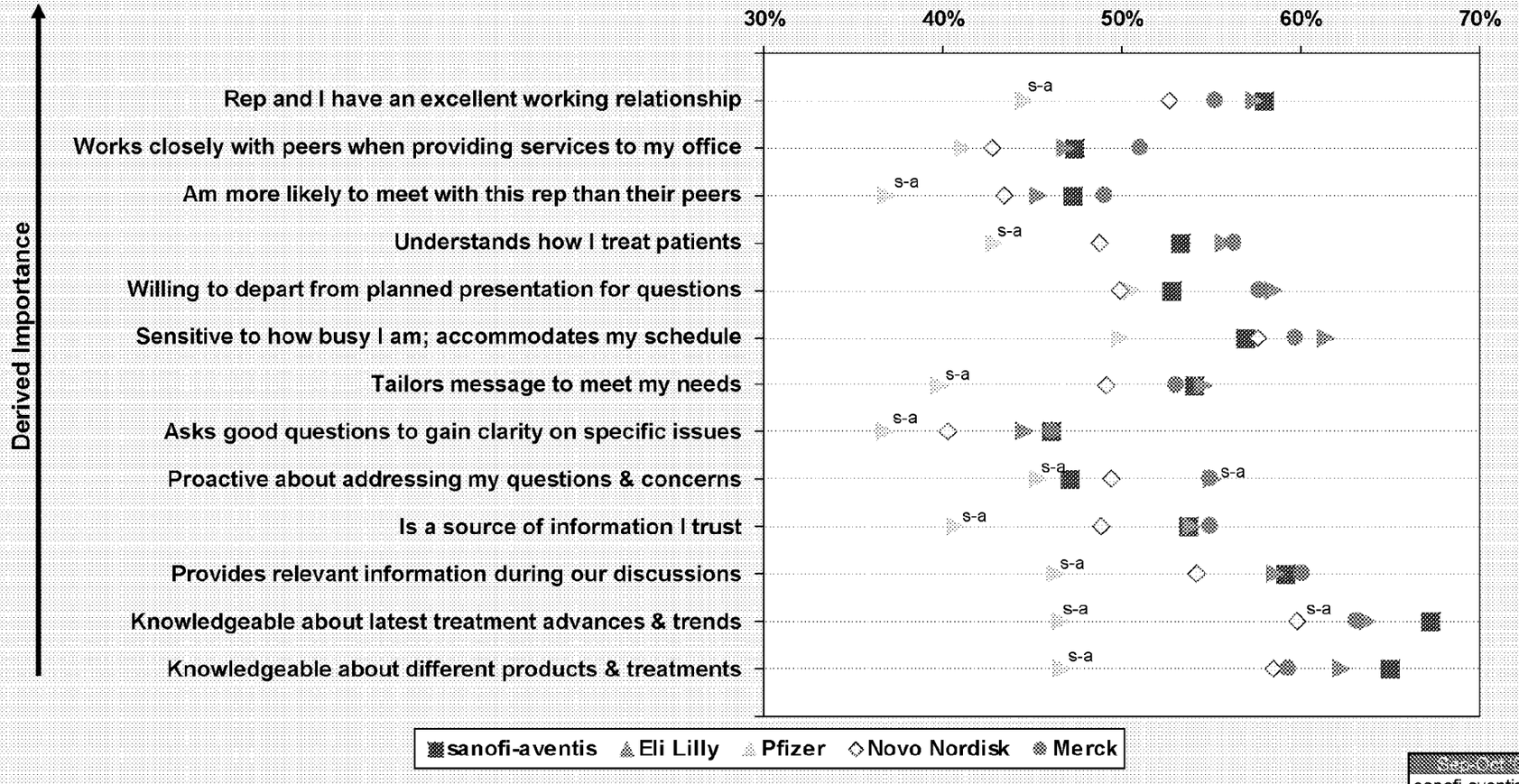
COMPASS

Source: COMPASS Physician Study
Note: Data are weighted by physician population. VL1: Please indicate how important each of the following sales representative qualities o services are as they relate to the diabetes market.

Sep-Oct '07	
PCP	384
Endo	156
Total	540

Physicians rate sanofi-aventis directionally higher than Novo Nordisk on the five sales rep attributes most highly correlated with NRx share

Sales Force Performance: Total



Sales Rep Ratings	
sanofi-aventis	323
Eli Lilly	327
Pfizer	333
Novo Nordisk	313
Merck	313

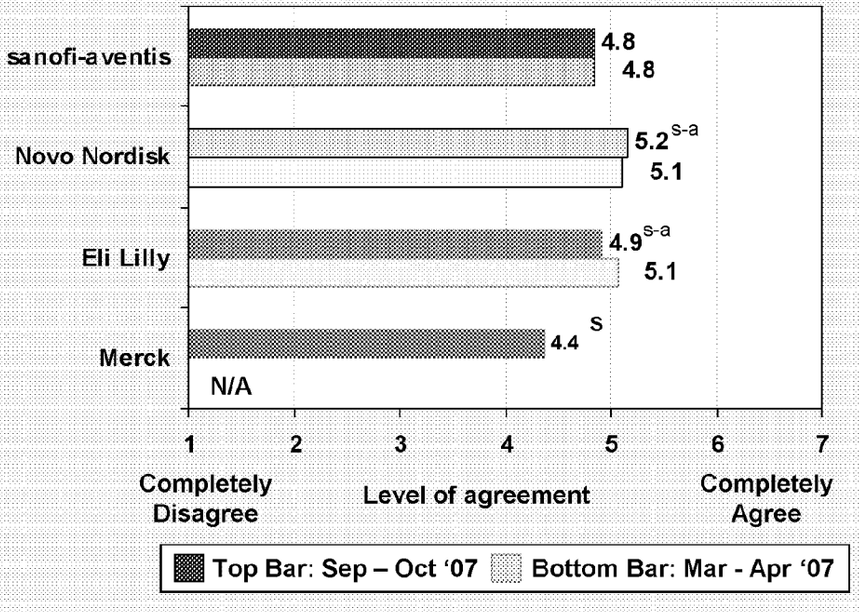
COMPASS

Source: COMPASS Sales Force Tracking Study
Note: Data are weighted by reach. s-a = statistically different at 95% between sanofi-aventis and other companies as noted. VL6. For each of the following sales qualities or services, please rate how well the following sales forces for diabetes products perform in that category.

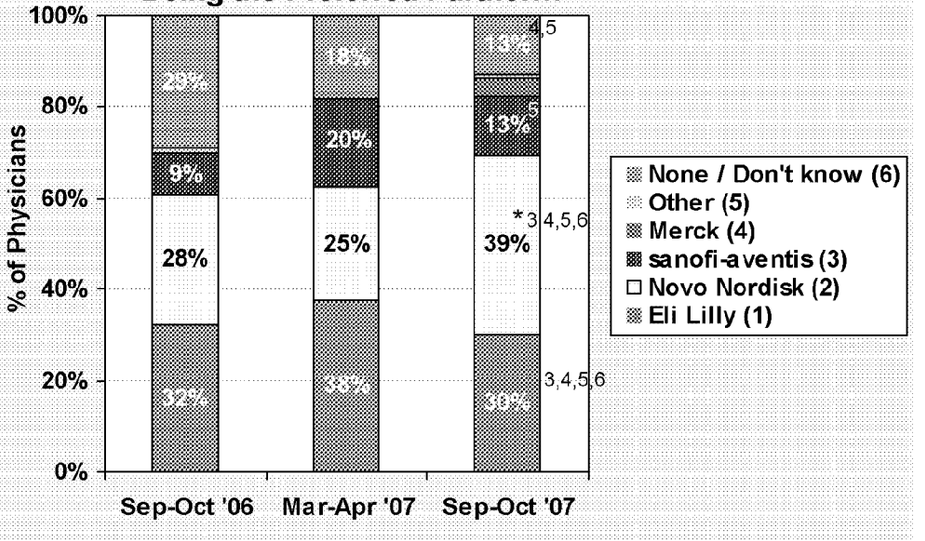
Physicians most often see Novo Nordisk or Eli Lilly as the *Preferred partner of diabetes patients and health care professionals*

Preferred Partner of Diabetes Patients and Health Care Professionals

Level of Agreement that Company is the Preferred Partner…



Company most Associated with Being the Preferred Partner…



The percentage of physicians who call sanofi-aventis their Preferred Partner increased significantly in Sep – Oct '07

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by physicians population. In Mar-Apr '07, Merck was not an option. LAN11A: Which company do you most associate with being "the preferred partner of diabetes patients and healthcare professionals"? LAN12: For each of the statements below, on a scale of 1 to 7, please indicate how much you agree or disagree with each statement.

Sep-Oct '07	
LAN11A	77
LAN 12	201

The majority of physicians rating sanofi-aventis *as the preferred partner of diabetes patients and healthcare professionals* cite superior representatives as the company's primary strength

Strengths and Weakness of Preferred Partner: Total

Strengths

sanofi-aventis (n=32)		Novo Nordisk (n=77)		Eli Lilly (n=54)		Merck (n=6)	
Superior reps / Support	53%	Superior reps / Support	35%	Long-term reputation / history of DM care	32%	Superior reps / Support	4
Best (quality) products	27%	Superior patient / CME programs & materials	19%	Superior reps / Support	23%	More samples	1
Superior patient / CME programs & materials	17%	Best (quality) products	17%	Superior patient / CME programs & materials	19%	Experience / relationship with rep	1

Weaknesses

sanofi-aventis (n=32)		Novo Nordisk (n=77)		Eli Lilly (n=54)		Merck (n=6)	
None / Nothing	71%	None / Nothing	53%	None / Nothing	41%	None / Nothing	67%
Cost / formulary status	15%	Cost / formulary status	27%	Lack of innovation	12%	Rep turnover	17%
Lack of / poor CME materials	6%	No (or too few) oral medications	8%	Inferior quality product	8%	Lack of innovation	17%

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: Data are weighted by reach. Weighted percent of physicians shown for open-ended question. LAN11A: Why do you associate [Company] with being the "preferred partner of diabetes patients and healthcare professionals"? LAN11B: What do you see as [Company]'s weaknesses as the "preferred partner of diabetes patients and healthcare professionals"?

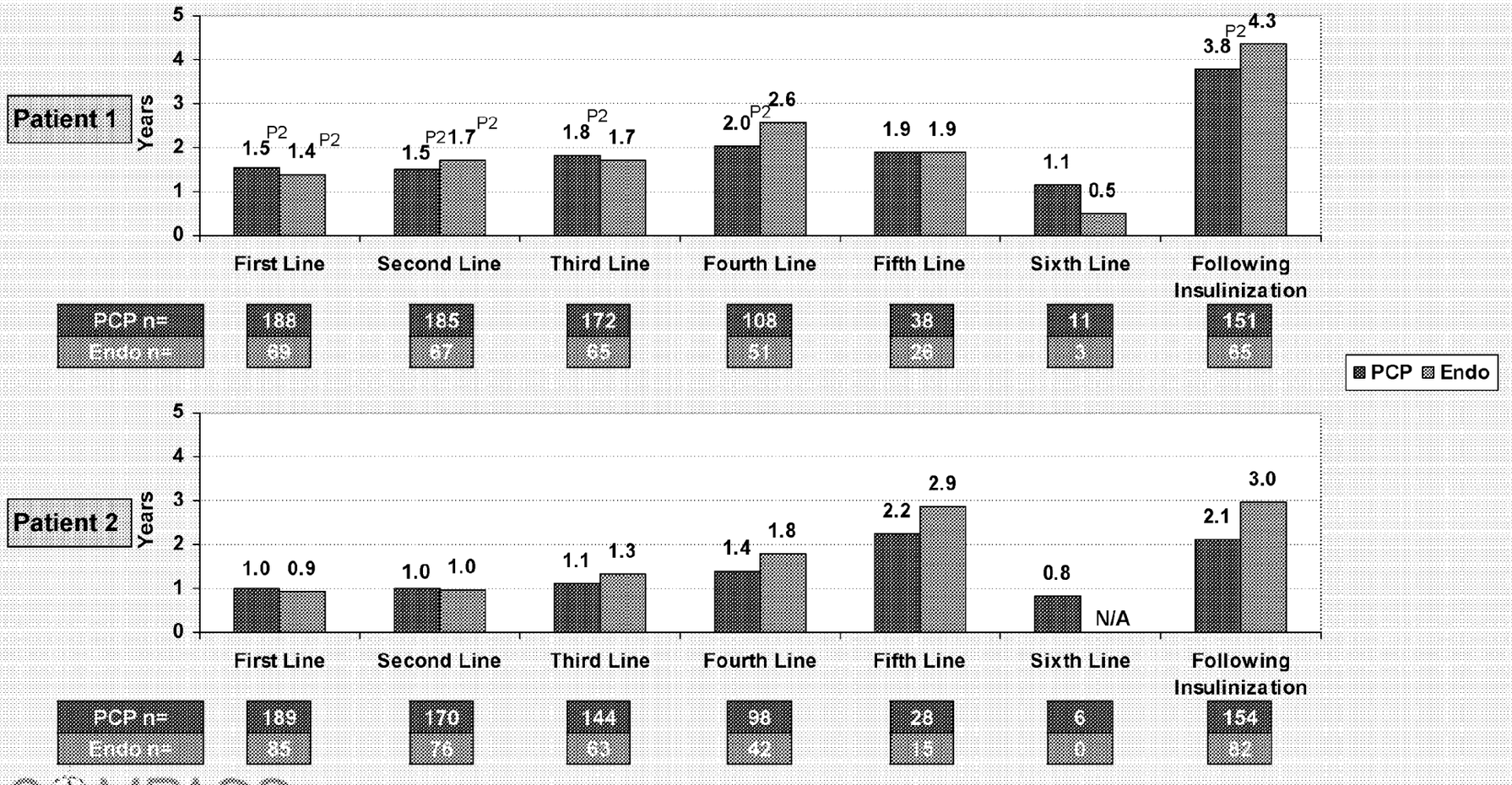
LANTUS
insulin glargine [rDNA origin] injection

Appendix
Additional Treatment Pathway Slides

COMPASS

PCPs and Endos tend to wait longer before switching or adding medication to achieve a desired HbA1c goal for Patient 1 than for Patient 2

Average Years before Switching or Adding Another Agent: by Specialty



COMPASS

Source: COMPASS Sales Force Tracking Study
Note: TXP5: How long do you expect that this patient's HbA1c level will be controlled using this therapy before you will need to change their therapy (either by switching or adding on medications)? Responses beyond 3 standard deviations not included in analysis.

Endos have more aggressive HbA1c thresholds than PCPs for both patient types; however, the number of products used and reported time to insulin do not differ by specialty

Treatment Process Overview

	Patient 1 PCP	Patient 1 Endo	Patient 2 PCP	Patient 2 Endo
Average HbA1c at which therapy is altered (%)	7.23 Endo	6.96	7.35 P1, Endo	7.17 P1
Average line of therapy insulin is initiated (numeric value for Line 1 - 6)	3.7 P2	4.1 P2, PCP	3.4	3.3
Average length of time until insulin (years)	4.5	4.8	2.4	2.4
Average length of time on **first line** of therapy	1.5	1.4	1.0	0.9
Average length of time on **second line** of therapy	1.5	1.7	1.0	1.0
Average length of time on **third line** of therapy	1.8	1.7	1.1	1.3
Average length of time on **fourth line** of therapy	2.0	2.6	1.4	1.8
Average length of time on **fifth line** of therapy	1.9	1.9	2.2	2.9
Average length of time on **sixth line** of therapy	1.1	0.5	0.8	-

Patient 1 - Healthier
- 45 years old
- BMI of 29 (overweight, but not obese)
- HbA1c of 7.5
- Fasting glucose of 155

Patient 2 – Less Healthy
- 45 years old
- BMI of 34 (obese)
- HbA1c of 9.5
- Fasting glucose of 200
- Treated for dyslipidemia & hypertension

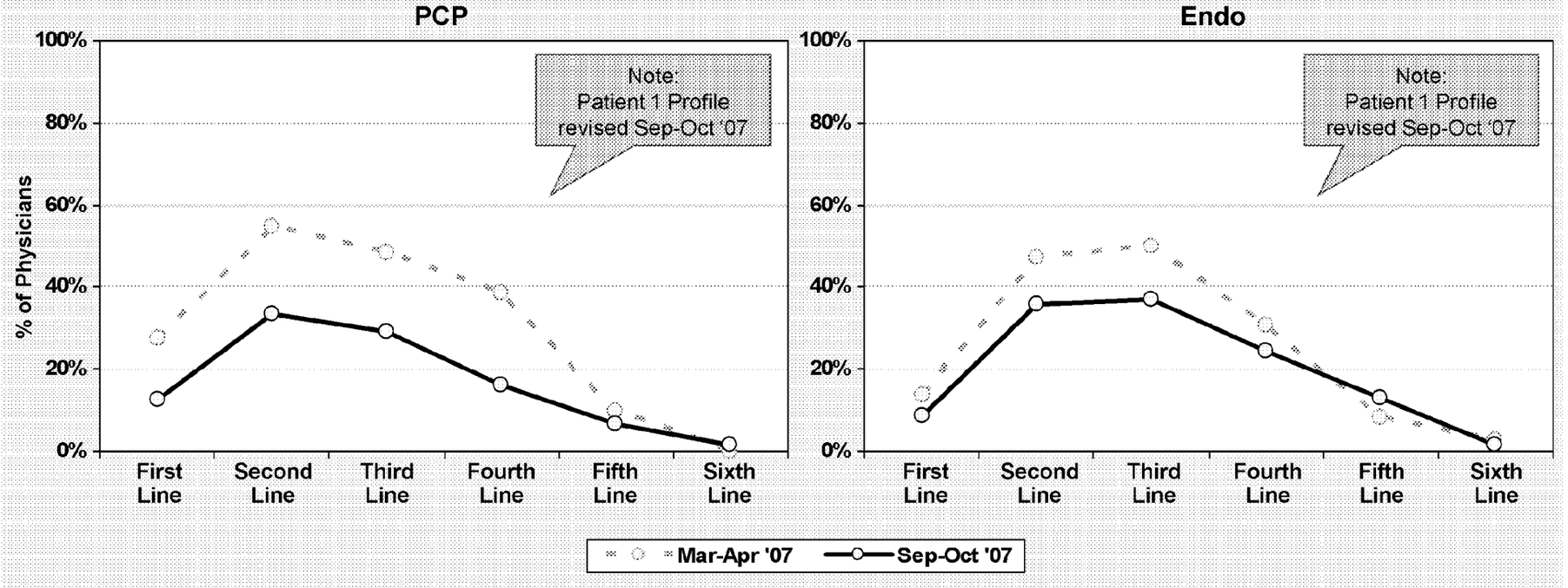
COMPASS

Source: COMPASS Sales Force Tracking Study
Note: TXP5: Length of time controlled on this therapy before switching to next therapy. TXP6: HbA1c level at which you alter the patient's therapy

Sep - Oct '07	
	Docs
P1	191	70
P2	189	85

Likely due to Avandia safety concerns, physicians in Sep-Oct '07 recommend TZDs to Patient 1 less frequently than in Mar-Apr '07; the decrease is more pronounced among PCPs than Endos

Percentage of MDs Using TZDs in Each Line for Patient 1: by Specialty



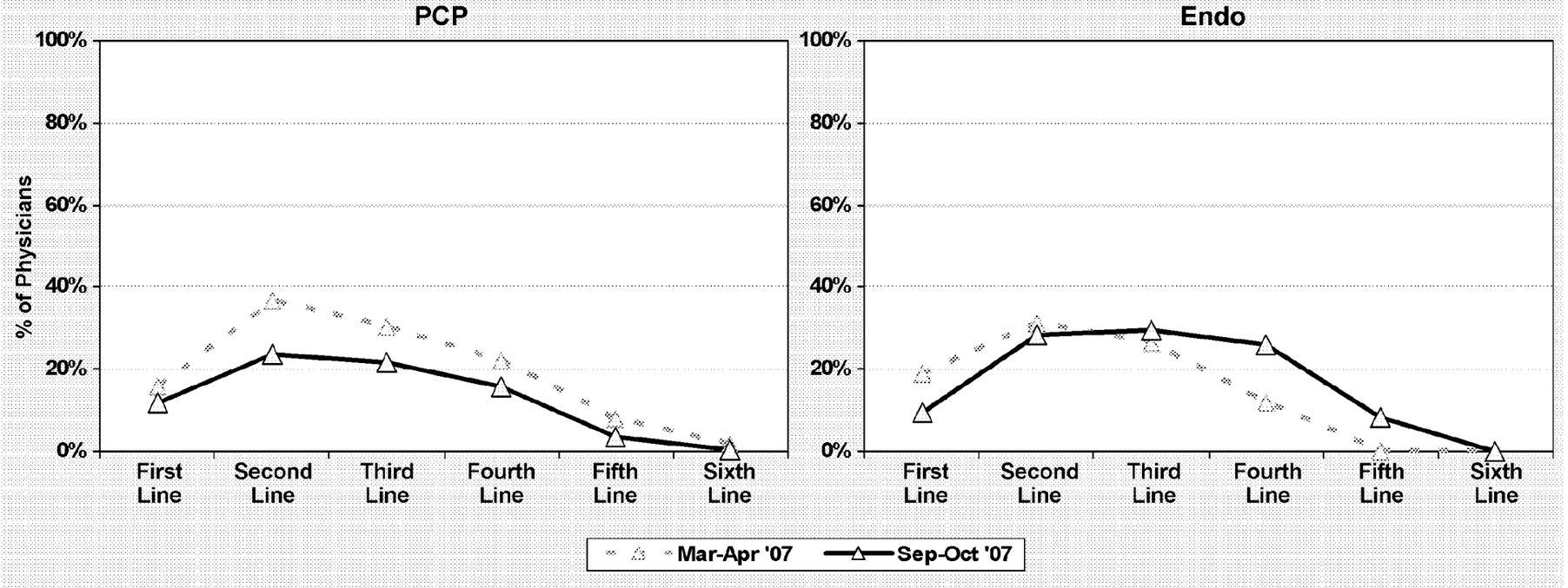
Source: COMPASS Sales Force Tracking Study
TXP: What would you recommend as each line of therapy? If you would recommend more than one medication for each any line of therapy for this patient, please check all that apply. If you would add treatments to a next line of therapy (rather than discontinuing a prior treatment) please select all treatments for that line of therapy, both prior and new treatments. Note: Data assumes that once insulin is added to the treatment regimen, it remains in the regimen through the sixth line. Question also asked for Meglitinides, Alpha-glucose inhibitors, and Referral, but data not shown for these options.

Sep - Oct '07	PCP	Endo
P1	191	70
P2	189	85

PTX-0739.0182
Sanofi Exhibit 2146.182
Mylan v. Sanofi
IPR2018-01675

Compared to Patient 1, the decrease in TZD usage for Patient 2 is less drastic among both PCPs and Endos

Percentage of MDs Using TZDs in Each Line for Patient 2: by Specialty



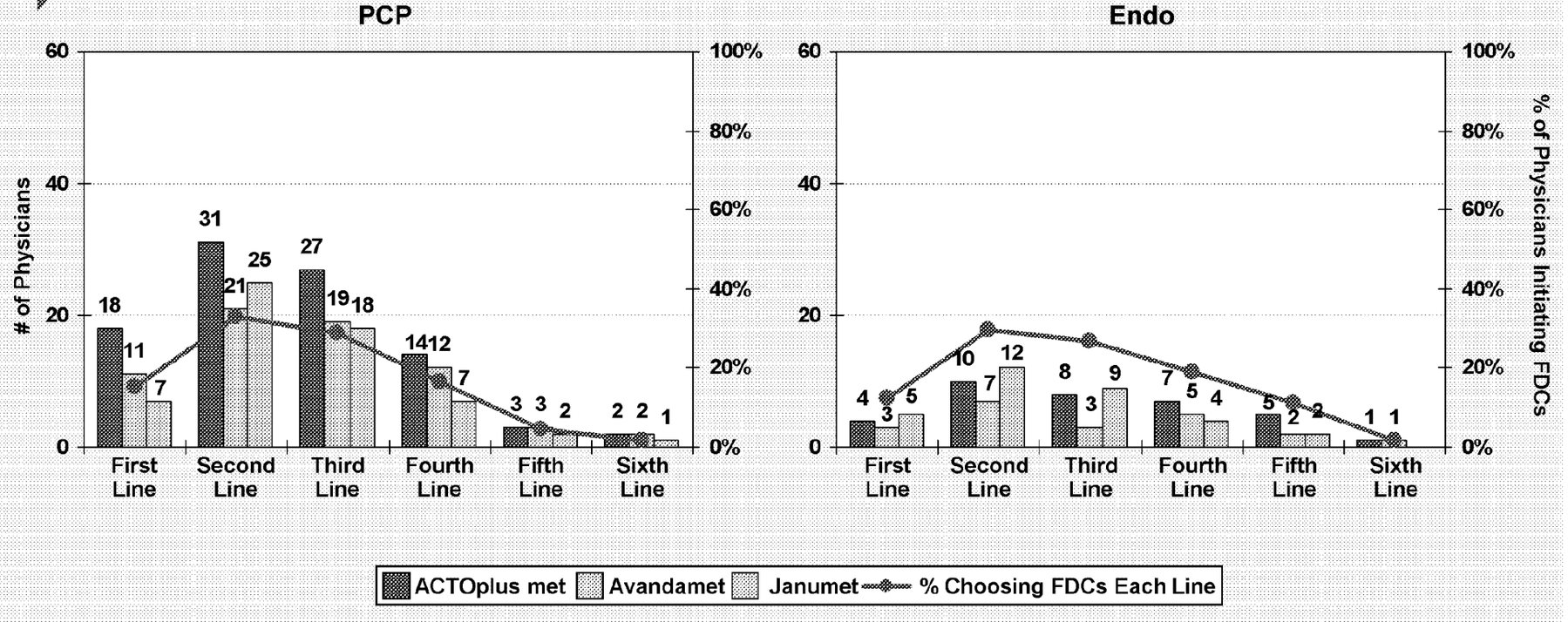
Source: COMPASS Sales Force Tracking Study
TXP: What would you recommend as each line of therapy? If you would recommend more than one medication for each any line of therapy for this patient, please check all that apply. If you would add treatments to a next line of therapy (rather than discontinuing a prior treatment) please select all treatments for that line of therapy, both prior and new treatments. Note: Data assumes that once insulin is added to the treatment regimen, it remains in the regimen through the sixth line. Question also asked for Meglitinides, Alpha-glucose inhibitors, and Referral, but data not shown for these options.

Sep - Oct '07	PCPs	Endos
P1	191	70
P2	189	85

Fixed dose combinations are most frequently chosen as second or third line treatments for Patient 1; PCPs show a slight preference toward ACTOplus met, while Endos recommend Janumet most often

NEW Question

Type of FDC Selected in Each Line of Therapy for Patient 1: by Specialty



COMPASS

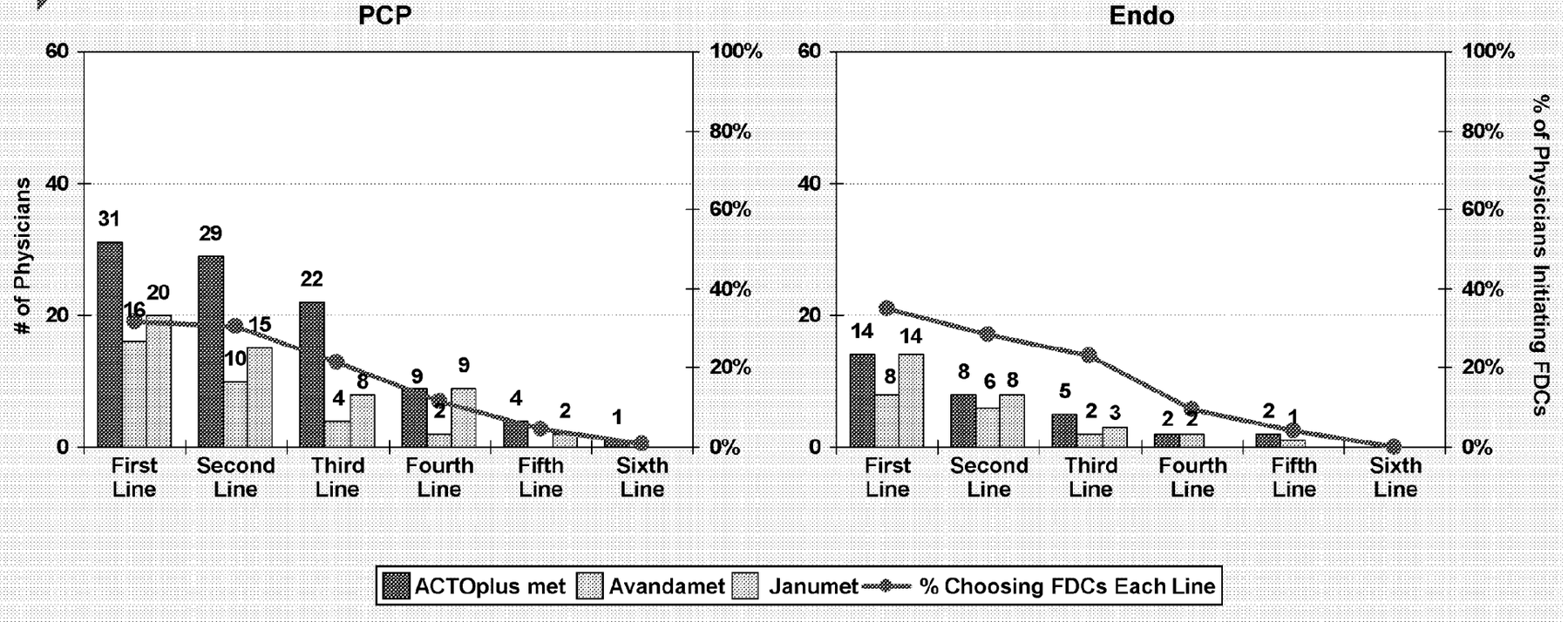
Source: COMPASS Sales Force Tracking Study
TXP: What would you recommend as each line of therapy? Statistical testing between products within a line shown in appendix. Data assumes that once insulin is added to the treatment regimen, it remains in the regimen. Physicians able to select more than one kind of FDC in same line.

Sep - Oct '07		
	PCPs	Endos
P1	191	70
P2	189	85

For Patient 2, fixed dose combinations are most commonly chosen as first or second line therapies; PCPs choose ACTOplus met most often, while Endos select ACTOplus met and Janumet similarly

NEW Question

Type of FDC Selected in Each Line of Therapy for Patient 2: by Specialty

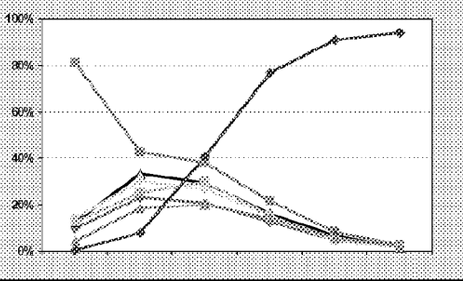


Source: COMPASS Sales Force Tracking Study
TXP: What would you recommend as each line of therapy? Statistical testing between products within a line shown in appendix. Data assumes that once insulin is added to the treatment regimen, it remains in the regimen. Physicians able to select more than one kind of FDC in same line.

	Sep - Oct '07	
	PCPs	Endos
P1	191	70
P2	189	85

LANTUS insulin glargine [rDNA origin] injection

Treatment Process – Patient 1 - PCP



Line 1

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			x	x	x	x	x
TZDs				-	-	-	x
FDCs					-	-	x
Sulfony-lureas						-	x
DDPIVs							x
Byetta							

Line 2

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			x	x	x	x	x
TZDs				-	x	x	x
FDCs					-	-	x
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

Line 3

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		-	x	x	x	x	x
Metformin			x	x	x	x	x
TZDs				-	x	-	x
FDCs					-	-	-
Sulfony-lureas						x	-
DDPIVs							x
Byetta							

Line 4

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			-	-	x	-	x
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

Line 5

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			-	-	-	-	-
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

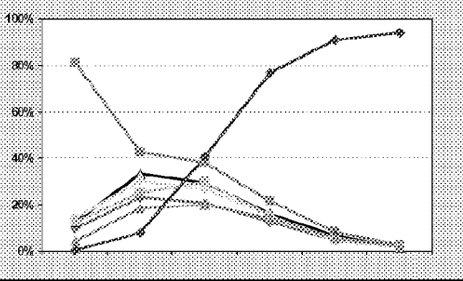
Line 6

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			-	-	-	-	-
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

COMPASS

LANTUS insulin glargine [rDNA origin] injection

Treatment Process – Patient 2 - PCP



Line 1

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	-	x	-	-	-
Metformin			x	x	x	x	x
TZDs				x	-	-	-
FDCs					x	x	x
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

Line 2

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	-	-	-	-	-
Metformin			x	x	x	x	x
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

Line 3

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			-	x	x	-	-
TZDs				-	-	-	-
FDCs					-	-	x
Sulfony-lureas						-	x
DDPIVs							-
Byetta							

Line 4

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			-	x	x	x	-
TZDs				x	x	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

Line 5

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			-	-	x	-	-
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

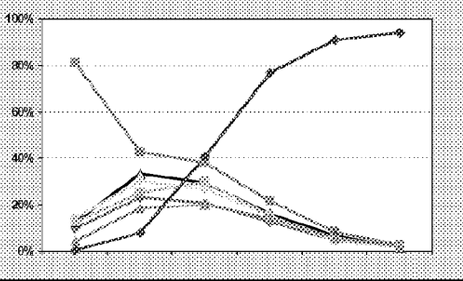
Line 6

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			-	-	-	-	-
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

COMPASS

LANTUS insulin glargine [rDNA origin] injection

Treatment Process – Patient 1 - Endo



Line 1

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	-	-	-	-	-
Metformin			x	x	x	x	x
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

Line 2

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	-	-	-	-
Metformin			-	-	-	-	-
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

Line 3

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		-	-	-	-	-	-
Metformin			-	-	-	-	-
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

Line 4

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		-	x	x	x	x	x
Metformin			-	-	-	-	-
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

Line 5

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			-	-	-	-	-
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

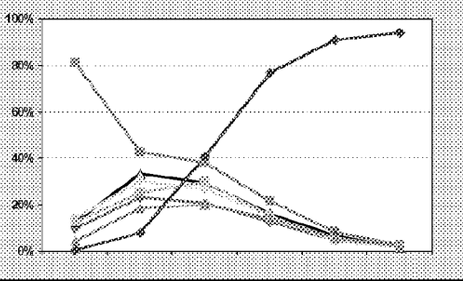
Line 6

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			-	-	-	-	-
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

COMPASS

LANTUS insulin glargine [rDNA origin] injection

Treatment Process – Patient 2 - Endo



Line 1

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	-	-	-	-	-
Metformin			x	x	x	x	x
TZDs				-	-	-	-
FDCs					-	x	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

Line 2

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		-	-	-	-	-	-
Metformin			-	-	x	x	-
TZDs				-	-	-	-
FDCs					-	-	x
Sulfony-lureas						-	x
DDPIVs							x
Byetta							

Line 3

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		-	-	x	-	x	-
Metformin			-	-	-	x	-
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							x
Byetta							

Line 4

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			-	x	-	x	-
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

Line 5

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			-	-	-	-	-
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

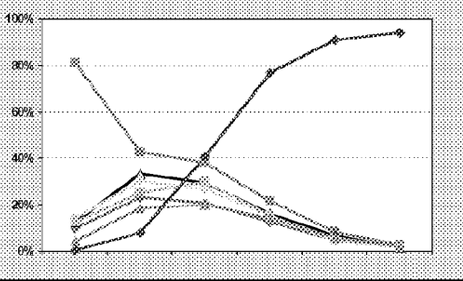
Line 6

	Insulin	Met-formin	TZDs	FDCs	Sulfony-lureas	DDPIVs	Byetta
Insulin		x	x	x	x	x	x
Metformin			-	-	-	-	-
TZDs				-	-	-	-
FDCs					-	-	-
Sulfony-lureas						-	-
DDPIVs							-
Byetta							

COMPASS

LANTUS insulin glargine [rDNA origin] injection

Treatment Process – Patient 1 – Across Specialty



Line 1

	PCPs	Endos
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 2

	PCPs	Endos
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 3

	PCPs	Endos
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 4

	PCPs	Endos
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 5

	PCPs	Endos
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

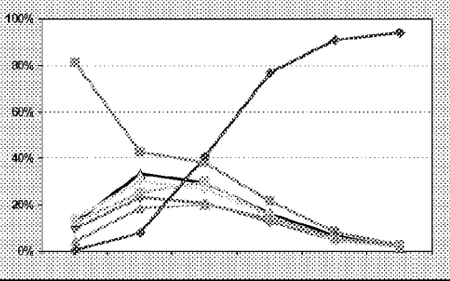
Line 6

	PCPs	Endos
Insulin	-	X
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	X	-
Byetta	X	-

COMPASS

LANTUS insulin glargine [rDNA origin] injection

Treatment Process – Patient 2 – Across Specialty



Line 1

	PCPs	Endos
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 2

	PCPs	Endos
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	X

Line 3

	PCPs	Endos
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 4

	PCPs	Endos
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 5

	PCPs	Endos
Insulin	-	X
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

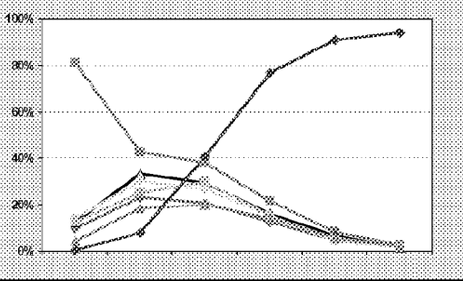
Line 6

	PCPs	Endos
Insulin	-	X
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

COMPASS

LANTUS insulin glargine [rDNA origin] injection

Treatment Process – Patient 1 – PCP – Across Wave



Line 1

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	X	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 2

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	X	-
TZDs	X	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 3

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	X	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	X	-

Line 4

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	X	-
TZDs	X	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 5

	Mar-Apr '07	Sep-Oct '07
Insulin	X	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

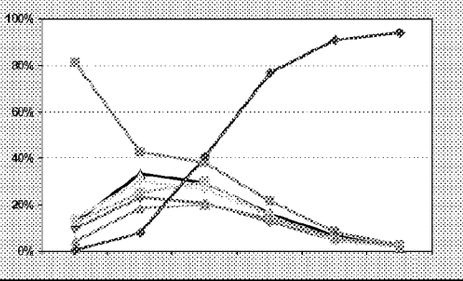
Line 6

	Mar-Apr '07	Sep-Oct '07
Insulin	X	-
Metformin	-	X
TZDs	-	X
FDCs	-	-
Sulfony-lureas	-	X
DDPIVs	-	X
Byetta	-	X

COMPASS

LANTUS insulin glargine [rDNA origin] injection

Treatment Process – Patient 1 – Endo – Across Wave



Line 1

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 2

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 3

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 4

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 5

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

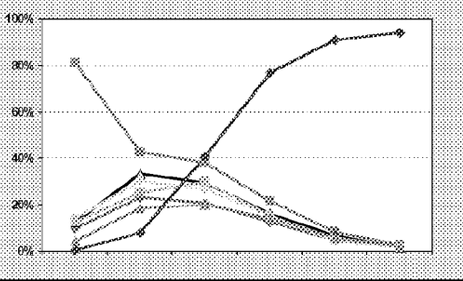
Line 6

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

COMPASS

LANTUS insulin glargine [rDNA origin] injection

Treatment Process – Patient 2 – PCP – Across Wave



Line 1

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	X
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 2

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	X	-
FDCs	X	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 3

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	X	-
Sulfony-lureas	-	-
DDPIVs	X	-
Byetta	-	-

Line 4

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	X	-
Sulfony-lureas	X	-
DDPIVs	-	-
Byetta	-	-

Line 5

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	X	-
DDPIVs	-	-
Byetta	-	-

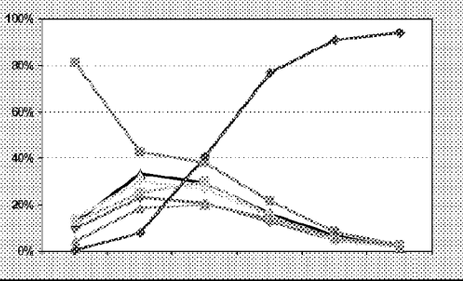
Line 6

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

COMPASS

LANTUS insulin glargine [rDNA origin] injection

Treatment Process – Patient 2 – Endo – Across Wave



Line 1

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 2

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 3

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 4

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 5

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

Line 6

	Mar-Apr '07	Sep-Oct '07
Insulin	-	-
Metformin	-	-
TZDs	-	-
FDCs	-	-
Sulfony-lureas	-	-
DDPIVs	-	-
Byetta	-	-

COMPASS

Printer friendly format – next 6 slides

Each physician answers the treatment pathway questions with the one *particular patient* in mind

Treatment Pathway Example – ILLUSTRATION ONLY

	First Treatment Regimen
Alpha-Glucose Inhibitors (e.g. Glyset, Precose)	☐
Biguanide metformin (e.g. Glucophage, generic metformin)	☑
Meglitinides (e.g. Prandin, Starlix)	☐
Sulfonylureas (e.g. Glipizide, glybunde)	☑
TZDs (e.g. Actos, Avandia)	☐
Fixed dose combinations (e.g. ACTOplus met, Avandamet, Avandaryl, Duetact, Glipizide/Metform, Glyburide/Metfo, Glucovance, Janumet)	☐
DPPIVs (Januvia)	☐
Byetta	☐
Insulin	☐
Referral to another physician	☐
Length of time controlled on this therapy before switching to next therapy	3 years
	6 months
HbA1c level at which you alter the patient's therapy	8.0 %

COMPASS

Each physician answers the treatment pathway questions with the one *particular patient* in mind

Treatment Pathway Example – ILLUSTRATION ONLY

	First Treatment Regimen	Second Treatment Regimen
Alpha-Glucose Inhibitors (e.g. Glyset, Precose)	☐	☐
Biguanide metformin (e.g. Glucophage, generic metformin)	☑	☑
Meglitinides (e.g. Prandin, Starlix)	☐	☐
Sulfonylureas (e.g. Glipizide, glyburide)	☑	☐
TZDs (e.g. Actos, Avandia)	☐	☑
Fixed dose combinations (e.g. ACTOplus met, Avandamet, Avandaryl, Duetact, Glipizide/Metform, Glyburide/Metfo, Glucovance, Janumet)	☐	☐
DPPIVs (Januvia)	☐	
Byetta	☐	
Insulin	☐	
Referral to another physician	☐	☐
Length of time controlled on this therapy before switching to next therapy	3 years	3 years
	6 months	0 months
HbA1c level at which you alter the patient's therapy	8.0 %	7.6 %

Previous responses remain visible as physicians advance to later lines

COMPASS

Each physician answers the treatment pathway questions with the one *particular patient* in mind

Treatment Pathway Example – ILLUSTRATION ONLY

	First Treatment Regimen	Second Treatment Regimen	Third Treatment Regimen
Alpha-Glucose inhibitors (e.g. Glyset, Precose)	☐	☐	☐
Biguanide metformin (e.g. Glucophage, generic metformin)	☑	☑	☐
Meglitinides (e.g. Prandin, Starlix)	☐	☐	☐
Sulfonylureas (e.g. Glipizide, glyburide)	☑	☐	☐
TZDs (e.g. Actos, Avandia)	☐	☑	☐
Fixed dose combinations Duetact, Glipizide/Metform	☐	☐	☑

Fixed Dose Combinations

- ☐ ACTOplus met
- ☐ Avandamet
- ☐ Avandaryl
- ☐ Duetact
- ☐ Glipizide/Metform
- ☐ Glyburide/Metfo
- ☐ Glucovance
- ☑ Janumet
- ☐ Other fixed-dose combination pill

When fixed dose combinations are selected, physicians specify the appropriate combination(s)

COMPASS

Each physician answers the treatment pathway questions with the one *particular patient* in mind

Treatment Pathway Example – ILLUSTRATION ONLY

Sulfonylureas (e.g. Glipizide, glyburide)	☑	☐	☐	☐
TZDs (e.g. Actos, Avandia)	☐	☑	☐	☐
Fixed dose combinations (e.g. ACTOplus met, Avandamet, Avandaryl, Duetact, Glipizide/Metform, Glyburide/Metfo, Glucovance, Janumet)	☐	☐	☐	☐
DPPIVs (Januvia)	☐	☐	☐	☐
Byetta	☐	☐	☐	☑
Insulin	☐	☐	☐	☑
Referral to another physician	☐	☐	☐	☐

insulin

	Check all that apply	Number of shots / doses per day
Lantus	☑	1
Levemir	☐	
NPH	☐	
Premixed insulin	☐	
Exubera	☐	
Apidra	☐	
Humalog	☐	
Novolog	☐	
Regular human insulin	☐	

When insulin is selected, physicians specify the appropriate insulin(s) and the number of doses per day

Each physician answers the treatment pathway questions with the one *particular patient* in mind

Treatment Pathway Example – ILLUSTRATION ONLY

Byetta	☐	☐	☐	☐	☑
Insulin				☑	☑
Referral to another physician	☐	☐	☐	☐	☐
Length of time controlled on this therapy before switching to next therapy	3 years	3 years	1 years	10 years	10 years
	6 months	0 months	6 months	0 months	0 months
HbA1c level at which you alter the patient's therapy	8.0 %	7.5 %	7.5 %	7.0 %	7.0 %

Insulin

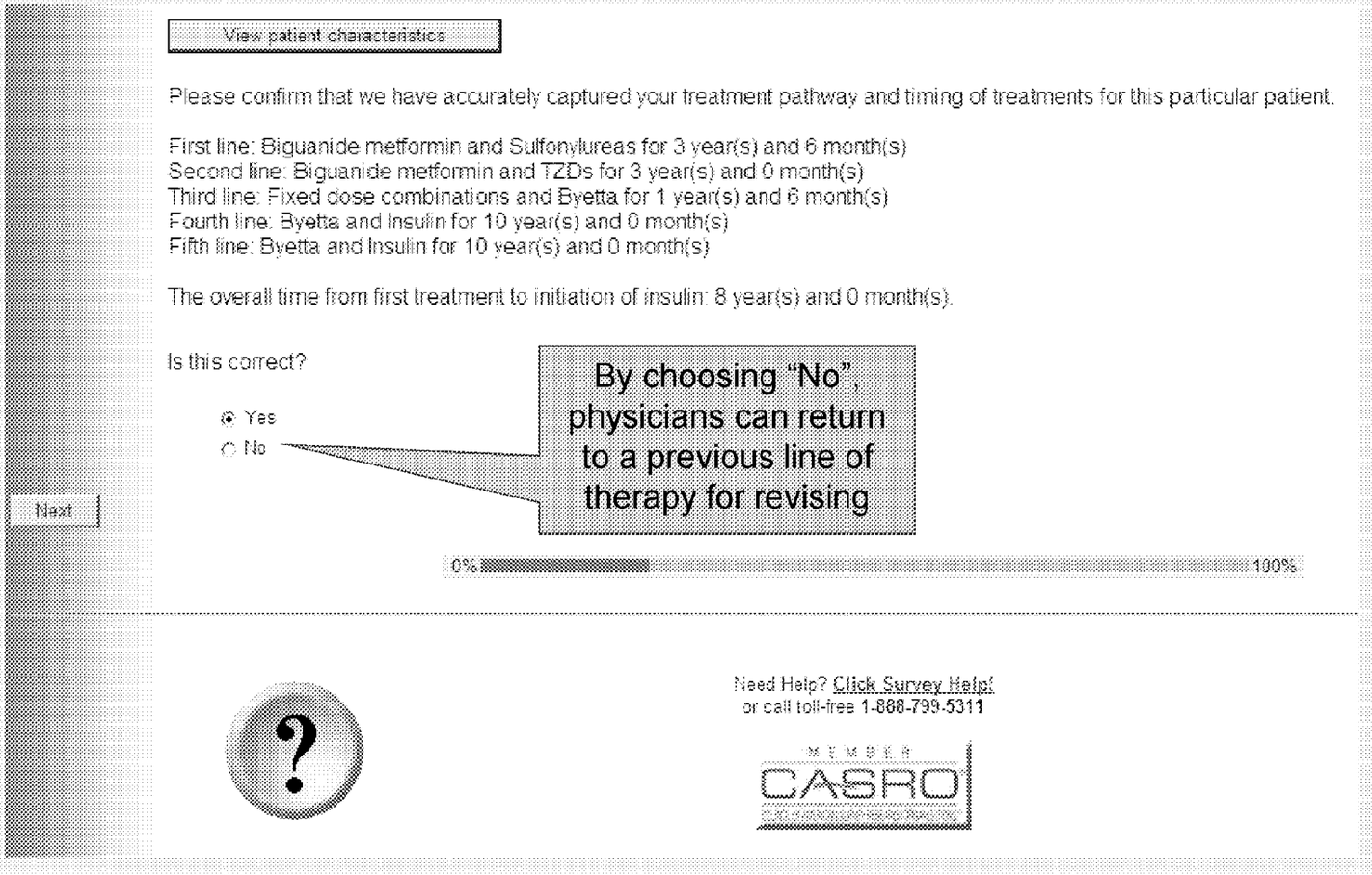
	Check all that apply	Number of shots / doses per day
Lantus	☑	1
Levemir	☐	
NPH	☐	
Premixed insulin	☐	
Exubera	☐	
Apidra	☑	2
Humalog	☐	
Novolog	☐	
Regular human insulin	☐	

After insulin is FIRST initiated, physicians are asked one additional line of therapy

COMPASS

Each physician answers the treatment pathway questions with the one *particular patient* in mind

Treatment Pathway Example – ILLUSTRATION ONLY



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Appendix Contents

- Introduction
- Key Findings
- Awareness and Trial
- Special Topics
- Product Perceptions
- Product Usage
- Sales Force
- Appendix
  - Appendix 1: Additional ATU Slides
  - Appendix 2: Additional Sales Force Slides
  - Appendix 3: Stat Testing Appendix & New Question List

COMPASS

LANTUS insulin glargine [rDNA origin] injection

AWR1 - Product Familiarity by Specialty
Sep- Oct '07 - *PCP*

Currently use

PCP	L	B	N	H	Lv	A	NP	E	J
L		x	x	-	x	x	x	x	x
B			x	x	-	x	-	x	x
N				-	x	x	x	x	x
H					x	x	x	x	x
Lv						x	x	x	-
A							x	x	x
NP								x	x
E									x
J									

Heard of, but never tried

PCP	L	B	N	H	Lv	A	NP	E	J
L		x	-	-	x	x	-	x	x
B			x	x	-	x	x	x	-
N				-	x	x	-	x	x
H					x	x	-	x	x
Lv						x	x	x	-
A							x	x	x
NP								x	x
E									x
J									

Tried but discontinued

PCP	L	B	N	H	Lv	A	NP	E	J
L		x	-	-	-	-	x	x	-
B			x	x	x	x	x	-	x
N				-	-	-	x	-	x
H					-	-	x	x	-
Lv						-	x	x	-
A							x	x	-
NP								x	x
E									x
J									

Never heard of

PCP	L	B	N	H	Lv	A	NP	E	J
L		-	-	-	-	x	-	-	x
B			-	-	-	x	-	-	-
N				-	-	x	-	-	x
H					-	x	-	-	x
Lv						x	-	-	-
A							x	x	-
NP								-	x
E									-
J									

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: AWR1: Please indicate your experience with each of the following diabetes products. X denotes significance between products

LANTUS insulin glargine [rDNA origin] injection

AWR1 - Product Familiarity by Specialty
Sep- Oct '07 - *Endos*

Currently use

PCP	L	B	N	H	Lv	A	NP	E	J
L		-	-	-	-	-	-	x	-
B			-	-	-	-	-	x	-
N				-	-	-	-	x	-
H					-	-	-	x	-
Lv						-	-	x	-
A							-	-	-
NP								x	-
E									x
J									

Heard of, but never tried

PCP	L	B	N	H	Lv	A	NP	E	J
L		-	-	-	-	-	-	x	-
B			-	-	-	-	-	x	-
N				-	-	-	-	x	-
H					-	-	-	x	-
Lv						-	-	x	-
A							-	-	-
NP								x	-
E									x
J									

Tried but discontinued

PCP	L	B	N	H	Lv	A	NP	E	J
L		-	-	-	-	-	-	-	-
B			-	-	-	-	-	-	-
N				-	-	-	-	-	-
H					-	-	-	-	-
Lv						-	-	-	-
A							-	-	-
NP								-	-
E									-
J									

Never heard of

PCP	L	B	N	H	Lv	A	NP	E	J
L		-	-	-	-	-	-	-	-
B			-	-	-	-	-	-	-
N				-	-	-	-	-	-
H					-	-	-	-	-
Lv						-	-	-	-
A							-	-	-
NP								-	-
E									-
J									

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: AWR1: Please indicate your experience with each of the following diabetes products. X denotes significance between products

LANTUS insulin glargine [rDNA origin] injection

PR3B – Product attribute performance
Sep – Oct '07

Glucose control (HbA1c levels <7)

	L	Lv	P	B	J	Li
L		-	x	x	x	x
Lv			x	x	x	x
P				x	x	x
B					x	x
J						x
Li						

High degree of long-term patient compliance

	L	Lv	P	B	J	Li
L		-	x	x	-	x
Lv			x	x	x	x
P				-	x	x
B					x	x
J						x
Li						

Low degree of weight gain

	L	Lv	P	B	J	Li
L		x	x	x	x	x
Lv			x	x	x	x
P				x	x	-
B					x	x
J						x
Li						

Provides once daily dosing

	L	Lv	P	B	J	Li
L		x	-	x	-	-
Lv			-	x	x	-
P				-	-	-
B					x	-
J						-
Li						

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: PR3B: On a scale of 1 to 7, please rate how well you feel each therapy performs on these attributes/functions for Type 2 patients.

LANTUS insulin glargine [rDNA origin] injection

TP11 – Insulin therapy experience
Sep – Oct '07

Currently Use

	Lantus + orals	Lantus intensive	Levemir + orals	Levemir intensive	Premix BID	Byetta + insulin	Byetta + orals
Lantus + orals		x	x	x	x	x	x
Lantus intensive			x	x	x	x	x
Levemir + orals				-	x	-	x
Levemir intensive					x	-	x
Premix BID						x	-
Byetta + insulin							x
Byetta + orals							

Tried but Discontinued

	Lantus + orals	Lantus intensive	Levemir + orals	Levemir intensive	Premix BID	Byetta + insulin	Byetta + orals
Lantus + orals		-	-	-	x	x	-
Lantus intensive			-	-	x	x	x
Levemir + orals				-	x	-	-
Levemir intensive					x	x	-
Premix BID						-	x
Byetta + insulin							-
Byetta + orals							

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: TP11: Please indicate your experience with each of the following therapies by checking the appropriate box for each therapy listed below.

LANTUS insulin glargine [rDNA origin] injection

TP11 – Insulin therapy experience
Sep – Oct '07

Never Heard of

	Lantus + orals	Lantus intensive	Levemir + orals	Levemir intensive	Premix BID	Byetta + insulin	Byetta + orals
Lantus + orals		x	x	x	x	x	x
Lantus intensive			x	x	x	x	x
Levemir + orals				-	x	-	x
Levemir intensive					x	-	x
Premix BID						x	-
Byetta + insulin							x
Byetta + orals							

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: TP11: Please indicate your experience with each of the following therapies by checking the appropriate box for each therapy listed below.

LAN4B – Lantus Usage – by Specialty
Sep – Oct '07

PCPs

	Lantus mono-therapy	Lantus + orals	Lantus + orals + insulins	Lantus + insulins	Lantus + inhaled insulin	Lantus + Byetta
Lantus mono-therapy		x	-	-	x	x
Lantus + orals			x	x	x	x
Lantus + orals + insulins				-	x	x
Lantus + insulins					x	x
Lantus + inhaled insulin						-
Lantus + Byetta						

Endos

	Lantus mono-therapy	Lantus + orals	Lantus + orals + insulins	Lantus + insulins	Lantus + inhaled insulin	Lantus + Byetta
Lantus mono-therapy		x	-	x	-	-
Lantus + orals			-	-	-	-
Lantus + orals + insulins				-	-	-
Lantus + insulins					-	-
Lantus + inhaled insulin						-
Lantus + Byetta						

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: LAN4B: Please think about all of the times that you have used Lantus with Type 2 patients. What percentage of the time would you say that you use the following?

LAN5 – Uncontrolled on Orals – by Specialty
Sep – Oct '07

PCPs

	Adding other oral agent(s)	Lantus	Other insulin options	Byetta	Levemir	Exubera
Adding other oral agent(s)		-	-	x	-	-
Lantus			-	x	-	-
Other insulin options				x	-	-
Byetta					-	-
Levemir						-
Exubera						

Endos

	Adding other oral agent(s)	Lantus	Other insulin options	Byetta	Levemir	Exubera
Adding other oral agent(s)		-	-	-	x	x
Lantus			-	-	x	x
Other insulin options				-	x	x
Byetta					x	x
Levemir						x
Exubera						

Source: COMPASS Physician ATU Tracking Study
Note: LAN5: In your practice over the next year, for Type 2 diabetes patients who are uncontrolled on two oral medications, what percent of the time will you recommend the following?

LANTUS insulin glargine [rDNA origin] injection

TZD5: Therapy adjustments following Avandia news - Sep – Oct '07 - PCPs

Sep-Oct '07 - PCP

	Continued Avandia / Avandamet / Avandaryl	Discontinued Avandia / Avandamet / Avandaryl and did not replace with another product	Switched to another oral diabetes drug class	Switched to Byetta	Switched to insulin	Other, please specify
Continued Avandia / Avandamet / Avandaryl		x	x	x	x	x
Discontinued Avandia / Avandamet / Avandaryl and did not replace with another product			x	x	x	x
Switched to another oral diabetes drug class				x	x	x
Switched to Byetta					-	-
Switched to insulin						-
Other, please specify						

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: TZD5: Considering your patients who were taking Avandia / Avandamet / Avandaryl at the time when the information about the potential link to cardiovascular side effects was released (May- June 2007), what percentage...

LANTUS insulin glargine [rDNA origin] injection

TZD5: Therapy adjustments following Avandia news - Sep – Oct '07 - Endos

Sep-Oct '07 - Endo

	Continued Avandia / Avandamet / Avandaryl	Discontinued Avandia / Avandamet / Avandaryl and did not replace with another product	Switched to another oral diabetes drug class	Switched to Byetta	Switched to insulin	Other, please specify
Continued Avandia / Avandamet / Avandaryl		-	-	x	x	x
Discontinued Avandia / Avandamet / Avandaryl and did not replace with another product			-	x	x	-
Switched to another oral diabetes drug class				x	x	x
Switched to Byetta					-	-
Switched to insulin						-
Other, please specify						

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: TZD5: Considering your patients who were taking Avandia / Avandamet / Avandaryl at the time when the information about the potential link to cardiovascular side effects was released (May- June 2007), what percentage...

LANTUS insulin glargine [rDNA origin] injection

TZD7: Oral therapy selection following Avandia news - Sep – Oct '07

Sep-Oct '07 - Total

	Actos / ActoPLUS met/ Duetact	DPPIVs	Biguanide Metformin	Sulfonylureas	FDC w/o a TZD component	Meglitinides	Alpha-Glucose inhibitors
Actos / ActoPLUS met/ Duetact		x	x	x	x	x	x
DPPIVs			-	x	x	x	x
Biguanide Metformin				x	x	x	x
Sulfonylureas					x	x	x
FDC w/o a TZD component						x	x
Meglitinides							x
Alpha-Glucose inhibitors							

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: TZD7: Of the Avandia / Avandaryl / Avandamet patients you have switched to another oral diabetes medication, to what percent have you prescribed each of the following? Your answers may sum to > 100%.

LANTUS insulin glargine [rDNA origin] injection

BS4- Recalled details - Sep – Oct '07

Sep-Oct '07 – PCP

	Lantus	Byetta	Novolog 70/30	Levemir	Humalog 75/25	Januvia
Lantus		x	-	x	-	-
Byetta			-	x	-	-
Novolog 70/30				-	-	-
Levemir					-	-
Humalog 75/25						-
Januvia						

Sep-Oct '07 – Endo

	Lantus	Byetta	Novolog 70/30	Levemir	Humalog 75/25	Januvia
Lantus		-	-	-	-	-
Byetta			-	-	-	-
Novolog 70/30				-	-	-
Levemir					-	-
Humalog 75/25						-
Januvia						

COMPASS

Source: COMPASS Physician ATU Tracking Study
Note: BS4: In the past month, how many times has a sales representative visited you to inform you about each of the following products?

LANTUS insulin glargine [rDNA origin] injection

Detail characteristics footnotes - PCPs

Source: COMPASS Sales Force Tracking Study

Note: Data are weighted by share of voice.

TRK5:How long has this [Product] representative been visiting you to discuss products made by that company?

TRK3: How long, in minutes, was this discussion of [Product]?

SFACT1: Which of the following best describes your last discussion with your [Company] representative regarding?

SFACT4: Where did your last discussion with your [Company] representative regarding [Product] take place?

TRK4: During your last visit from your [Company] sales representative about [Product], did you learn anything new?

TRK4A: did you learn that was new? Please be as specific as possible.

TRK5	
LAN	61
LEV	58
BYT	59
HUM	59
NOV	56
JAN	59

TRK3	
LAN	76
LEV	76
BYT	75
HUM	75
NOV	76
JAN	75

SFACT1	
LAN	48
LEV	48
BYT	50
HUM	35
NOV	45
JAN	47

SFACT4	
LAN	76
LEV	76
BYT	75
HUM	75
NOV	76
JAN	75

TRK4	
LAN	76
LEV	76
BYT	75
HUM	75
NOV	76
JAN	75

TRK4A	
LAN	23
LEV	25
BYT	18
HUM	11
NOV	8
JAN	14

COMPASS

LANTUS insulin glargine [rDNA origin] injection

Detail characteristics footnotes - Endos

Source: COMPASS Sales Force Tracking Study

Note: Data are weighted by share of voice.

TRK5:How long has this [Product] representative been visiting you to discuss products made by that company?

TRK3: How long, in minutes, was this discussion of [Product]?

SFACT1: Which of the following best describes your last discussion with your [Company] representative regarding?

SFACT4: Where did your last discussion with your [Company] representative regarding [Product] take place?

TRK4: During your last visit from your [Company] sales representative about [Product], did you learn anything new?

TRK4A: did you learn that was new? Please be as specific as possible.

TRK5	
LAN	45
LEV	41
BYT	35
HUM	23
NOV	22
JAN	25

TRK3	
LAN	50
LEV	50
BYT	43
HUM	28
NOV	29
JAN	29

SFACT1	
LAN	36
LEV	35
BYT	36
HUM	14
NOV	13
JAN	19

SFACT4	
LAN	50
LEV	50
BYT	43
HUM	28
NOV	29
JAN	29

TRK4	
LAN	50
LEV	50
BYT	28
HUM	43
NOV	29
JAN	29

TRK4A	
LAN	13
LEV	8
BYT	8
HUM	2
NOV	2
JAN	5

COMPASS

LANTUS insulin glargine [rDNA origin] injection

TRK6: Company best at meeting needs - Sep-Oct '07

PCPs

	Eli Lilly	Novo Nordisk	sanofi-aventis	Amylin	Merck	Pfizer
Eli Lilly		-	-	x	x	x
Novo Nordisk			-	x	x	x
sanofi-aventis				x	x	x
Amylin					x	x
Merck						x
Pfizer						

Endo

	Eli Lilly	Novo Nordisk	sanofi-aventis	Amylin	Merck	Pfizer
Eli Lilly		-	-	-	-	x
Novo Nordisk			-	x	x	x
sanofi-aventis				-	-	x
Amylin					-	-
Merck						-
Pfizer						

COMPASS

Source: COMPASS Sales Force Tracking Study
Note: TRK6: During the last detail for [Product] what did the sales rep use to aid the discussion?

LANTUS insulin glargine [rDNA origin] injection

TRK6: Detail piece - Sep-Oct '07

PCPs

	L	H	B	Lv	N	J
L		-	-	-	-	-
H			-	-	-	x
J				-	-	-
Lv					-	-
N						-
B						

Endo

Not statistically different at 95% between products

COMPASS

Source: COMPASS Sales Force Tracking Study
Note: TRK6: During the last detail for [Product] what did the sales rep use to aid the discussion?

LAN8- Closed the Call - Sep – Oct '07

Sep-Oct '07 – PCP

	Lantus	Byetta	Novolog 70/30	Levemir	Humalog 75/25	Januvia
Lantus		-	-	-	-	-
Byetta			-	-	-	x
Novolog 70/30				-	-	x
Levemir					-	x
Humalog 75/25						-
Januvia						

Sep-Oct '07 – Endo

	Lantus	Byetta	Novolog 70/30	Levemir	Humalog 75/25	Januvia
Lantus		-	-	-	-	-
Byetta			-	-	-	-
Novolog 70/30				-	-	-
Levemir					-	-
Humalog 75/25						-
Januvia						

COMPASS

Source: COMPASS Physician SF Tracking Study
Note: LAN8: During your last visit from your [company] sales representative for [product], did the representative specifically ask you to prescribe the product?

LANTUS insulin glargine [rDNA origin] injection

New questions in Wave 2 2007 are given a marker:

- **Market Overview**
  - Are you aware of the 2006 ADA Guidelines that recommend earlier use of basal insulin among Type 2 patients (that is, the ADA now recommends adding basal insulin as early as after 2-3 months if Metformin is insufficient)?
  - As a result of these guidelines, are you likely to initiate insulin sooner?
  - How much sooner are you likely to initiate insulin as a result of these guidelines?
- **Pen Devices**
  - Of your Type 2 diabetes patients currently using a pen device to inject Lantus insulin, what percent use the following devices?
  - Of your patients who inject Lantus with the SoloSTAR pen device, what percent are new to Lantus, switched from Lantus vial / syringe, or switched from OptiClik?
  - Of your new to Lantus patients who inject with the SoloSTAR pen device, what percent came from an oral regimen vs. another insulin regimen?
  - For each of the factors listed below, please indicate how important each factor is when considering a particular diabetes pen.
  - Now, please choose the three attributes which you feel are MOST important when considering a particular diabetes pen.
  - On a scale of 1 to 7, please rate how well you feel each pen performs on these attributes/functions.
  - Overall, how would you rate SoloSTAR compared to the other insulin injection devices? Please consider the insulin pen independently from the insulin medication it contains. "SoloSTAR is..."
  - Why do you rate SoloSTAR better / worse than FlexPen?
  - Overall, what do you consider to be the main advantages / disadvantages of SoloSTAR?
- **Market Drivers and Product Positioning**
  - Why is your impression of Exubera efficacy better / worse than it was 1 year ago?
- **TZD Safety**
  - Considering the recent news linking Avandia to a possible increased risk of cardiovascular side effects, do you believe this to be a class effect?
  - What percentage of your patients using Avandia / Avandamet / Avandaryl in the past six months have inquired about the news events?
  - On a scale of 1-7, how influential have these issues been on your decision to prescribe Avandia / Avandamet / Avandaryl?
  - On a scale of 1-7, how influential have these issues been on your decision to prescribe Actos / ACTOplus Met? / Duetact?
  - Considering your patients who were taking Avandia / Avandamet / Avandaryl at the time when the information about the potential link to cardiovascular side effects was released (May- June 2007), what percentage:
  - How has the Avandia news affected your prescribing habits for new patients? You may check more than one option below.
  - By what percent have you reduced your new prescriptions written for Avandia / Avandamet / Avandaryl? ___%
  - By what percent have you reduce your new prescriptions written for Actos / ACTOplus Met / Duetact? ___%
  - Of the Avandia / Avandaryl / Avandamet patients you have switched to another oral diabetes medication, to what percent have you prescribed each of the following? Your answers may sum to > 100%.
  - As a result of the Avandia safety concerns, how likely are you to initiate your patients on insulin sooner? Please use a 1 to 7 scale where '1' is 'Not at all likely' and '7' is 'Extremely likely'.
  - How much sooner are you likely to initiate your patients on insulin as a result of the Avandia safety concerns?
- **Other**
  - For each of the statements below, on a scale of 1 to 7, please indicate how much you agree or disagree with each statement. (Please select one response for each statement). The use of exogenous insulin...
  - Why do you strongly agree that "the use of exogenous insulin is cardioprotective beyond glucose lowering"?

COMPASS