



## EXHIBITS

Proceeding/Serial No: **91184978**

Filed: 2/22/2011

Title: EXHIBITS TO THE JAN. 13, 2011  
DEPOSITION OF ROHINISH HOODA FILED  
WITH ESTTA ON 2/22/2011

Part: 2 of 3

**91184978**

His team's failure to disclose the biopsy in February, while McCain was still fending off primary rivals, and the minor surgery this month reflected the campaign's sensitivity to questions about the 71-year-old candidate's age, health and abilities to carry out presidential duties.

"Sen. McCain enjoys excellent health and displays extraordinary energy," Eckstein said, and "I and my colleagues can find no medical reason or problems that would preclude Sen. McCain from fulfilling all the duties and obligations of the President."

The conference call with the medical team followed the limited disclosure of more than 1,000 pages of medical records to a pool of reporters, who were allowed access to them for three hours but not permitted to make copies.

Following the limited document dump at the start of a long holiday weekend, the campaign also released the top two pages of the 2006 tax returns of his wife, Cindy McCain, showing she made more than \$6 million from her family's beer distributorship and paid \$1.7 million in taxes. The couple file their taxes separately. [rsisk@nydailynews.com](mailto:rsisk@nydailynews.com)  
**WHAT'S AILING JOHN AGE:** 71  
**HEIGHT:** 5-feet- 9  
**WEIGHT:** 163 pounds  
**Vertigo**Invasive melanoma removed from left temple in 2000  
**Cataract surgery**Arthritis in both shoulders, likely to need artificial joints  
**Melanoma** removed from left shoulder in 1993  
**Melanoma** removed upper left arm in 2000  
**Melanoma** removed from his nose in 2002  
**Kidney stones**Polyps removed from colon earlier this year  
**Surgery** to reduce enlarged prostate  
**Arthritis** in right knee  
**Squamous cell carcinoma** removed from right shin earlier this year  
**BLOOD PRESSURE:** A robust 134 over 84  
**CHOLESTEROL:** A healthful 192  
**BODY MASS INDEX:** A healthful 24  
He was a two-pack-a-day smoker until quitting in 1980  
**WHAT HE'S TAKING**Simvastatin to lower cholesterol  
Hydrochlorothiazide to prevent kidney stones  
Amiloride to preserve potassium  
Baby aspirin to ward off heart attack  
Zyrtec/ Claritin/Flonase for nasal allergies  
Ambien CR to help him sleep when traveling  
A multivitamin tablet

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### **The Monterey County Herald Online (Monterey, CA)**

#### **Headaches, allergies a bad mix**

**May 23, 2008**

Dear Dr. Gott: I suffer from headaches associated with allergies and have tried numerous medications without much success. With spring here, the grass growing and flowers blooming, I'm really in a bind to find something I feel safe taking. Do you have any suggestions?

Dear Reader: Allergies and headaches can be difficult to deal with and seem to affect us all at some point in our lives. Worse still, they seem to occur only at important occasions or other inappropriate times. You don't indicate what you have taken for relief, so I hope I can point you in the right direction.

Visit your local pharmacy to see what is available over the counter. There are several allergy products on the market. You may want to try Claritin, formerly a prescription medication now approved for over-the-counter sale. The newest prescription-turned-OTC is Zyrtec. If you stop the allergies, you should be able to prevent the headaches.

If you prefer homeopathic choices, I recommend Sinol, which is the first headache nasal spray registered with the Food and Drug Administration. It is purported to relieve headache pain and also comes in an allergy-relief spray. It supposedly reduces, prevents and/or stops sinus pain, as well as congestion and inflammation. It is nonaddictive and free of harsh side effects.

If you need some guidance, speak with a pharmacist, who may be able to provide more information about the types of medication that will best control your symptoms and provide prompt relief. If you still have questions, make an appointment with your primary-care physician for his or her recommendations.

Dear Dr. Gott: My husband is suffering from nerve damage caused by knee surgery. He is currently using Lidoderm patches and Neurontin to help control the pain. The patches cause him to have a bad taste in mouth, and the Neurontin makes him very drowsy. He would rather use something natural and stop the prescription medications. Do you have any suggestions?

Dear Reader: Nerve damage is a common consequence of joint surgery. In most cases, it is minor and short-lived. Your husband, however, appears to have severe damage with resulting pain. His doctor has taken appropriate steps to help him, but nerve pain can be very difficult to treat. Also, your husband needs to return to his physician to report the side effects of the medications.

I have received many letters from people with nerve pain in their feet caused by diabetes. I often recommend Neurontin. However, your husband is currently taking it and would prefer a nonprescription, so I recommend Vicks VapoRub rubbed onto the affected area as often as needed. Many patients have had stunning success, but it doesn't work for everyone. If this is the case, I recommend you return to the surgeon for further advice.

Write to Dr. Gott c/o United Media, 200 Madison Ave., 4th fl., New York, N.Y. 10016.

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### **Associated Press**

#### **A look at McCain's health records**

**May 23, 2008**

Republican presidential candidate John McCain's campaign allowed The Associated Press to review his medical records, spanning 2000 through May 2008. Highlights of the records:

--His most recent complete physical was in March; his latest checkup was last week.

--Blood pressure was 134 over 84. Optimal is below 120 over 80, and high blood pressure begins at 140 over 90. An in-between reading is sometimes called prehypertension, but McCain's doctor said other recent readings were lower and his blood pressure is normal.

--Total cholesterol is a healthy 192, below the worrisome 240 level. His so-called bad or LDL cholesterol is a healthy 123. But his so-called good or HDL cholesterol is 42, below the recommended 60.

--He weighs 163 pounds and is 5 feet 9 1/2 inches tall.

--His BMI, or body mass index, was just under 24, which puts him at upper end of normal; 25 or higher is overweight.

--He has had four separate melanomas removed, in 1993, 2000 and 2002. Most were very early stage forms but one, a spot on his temple in 2000, was invasive cancer deemed "intermediate-stage" melanoma. He has had no sign of melanoma since 2002, but has his skin checked every three or four months. Doctors frequently remove precancerous lesions and in February removed a small, early squamous cell carcinoma, an easily surgically cured skin cancer.

--Doctors removed common benign growths called polyps during a routine colonoscopy in March. Doctors often screen patients with polyps more frequently, as they can be precancerous.

--He has suffered occasional bouts of dizziness, usually when standing suddenly, since 2000 that repeated tests concluded were harmless vertigo.

--In 2001, he had successful minimally invasive surgery to reduce an enlarged prostate, common in older men, and shows no sign of prostate cancer.

--His medications include simvastatin, part of the popular statin family of anti-cholesterol drugs; a baby aspirin, commonly prescribed starting in middle age to prevent heart attacks; Claritin, Zyrtec or Flonase as needed for seasonal allergies; the sleeping pill Ambien as needed during travel; and HCTZ, or hydrochlorothiazide, to prevent kidney stones.

--McCain's stress test showed no signs of blockages, and his ejection fraction, a measure of the heart's pumping strength, was a very healthy 60 percent.

--He has small kidney stones and benign kidney cysts that don't impact his kidney function, which is normal.

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**CNN.com**  
**McCain in 'excellent health,' doctor says**  
**May 23, 2008**

FOUNTAIN HILLS, Arizona (CNN) -- -- There's no medical reason to prevent Sen. John McCain from being president, the doctor for the presumptive GOP nominee said in a statement the McCain campaign released Friday.

"At the present time, Sen. McCain enjoys excellent health and displays extraordinary energy," said Dr. John D. Eckstein, an internal medicine specialist at the Mayo Clinic who has treated the candidate for 16 years.

"While it is impossible to predict any person's future health, today I can find no medical reason or problems that would preclude Sen. McCain from fulfilling all the duties and obligations of president of the United States."

McCain, who turns 72 in August, would be the oldest person to be elected to a first term as president if he wins in November. He has been treated for skin cancer three times and was a prisoner of war in the Vietnam War for 5½ years.

McCain has had no recurrence of skin cancer since it was surgically removed in 2000, Eckstein said.

"We continue to find no evidence of metastasis or recurrence of the invasive melanoma as we approach the eighth anniversary of that operation," he said.

"This was most recently confirmed with his comprehensive examination and tests" in March, he noted, and with Dr. Suzanne M. Connolly's skin examination on May 12.

"The prognosis for Sen. McCain is good because the time of greatest risk for recurrence of invasive melanoma is within the first few years after the surgery."

Dr. Sanjay Gupta, CNN's chief medical correspondent who reviewed the medical records, found new details about the 2000 operation.

The surgeon, Dr. Michael Hinni, wrote in the records that "through an abundance of caution," the surgery was aggressive, removing some of the senator's lymph nodes as well as the tumor.

McCain developed swelling beneath the skin and had to be taken back for a second operation.

Hinni said the prominence of the senator's left jaw is not a sign of cancer.

"This is a result of an absence of soft tissue on the face in front of his ear that makes the masseter (the chewing muscle) over the jaw appear more prominent," he said in the statement the campaign issued. "To be clear, the swelling is not due to any evidence of cancer."

McCain is checked for skin cancer every three to four months, Connolly said in the statement.

He has been treated for bladder stones and has kidney stones, the clinic said, but they do not affect urologic function. He has no evidence of cardiovascular disease.

The senator has used the Mayo Clinic in Arizona since 1992. He checks in under a pseudonym.

McCain's cholesterol levels are potentially worrying, Gupta found, but his blood pressure is good.

Heart disease, the leading cause of death in America, could be a risk factor for McCain because of his age and family history, making his blood pressure and cholesterol levels relevant.

His father, Adm. John S. McCain Jr., died of a heart attack at age 70.

The statement listed the medications McCain takes:

- Simvastatin, a cholesterol-lowering medicine
- Hydrochlorothiazide, for kidney stone prevention
- Amiloride, which preserves potassium in the bloodstream
- Aspirin, for blood clot prevention
- Zyrtec, an antihistamine, which he uses as necessary for nasal allergies
- Ambien CR, used as necessary to help him sleep when traveling
- A multiple-vitamin tablet

He does not take pain medication to deal with the after-effects of his Vietnam injuries, which resulted after his ejection from a plane in 1967 and torture as a POW, the clinic said.

A leg and both his arms were broken when a Vietnamese missile shot down his U.S. Navy A-4E Skyhawk over Hanoi. He also was stabbed with a bayonet and punched by a mob that discovered him.

McCain is releasing his medical records voluntarily. He did the same when he ran for president in 2000.

The two Democratic presidential candidates, Sens. Barack Obama and Hillary Clinton, haven't released their doctors' files.

# **EXHIBIT 68**

**Zyrtec Press Clippings**  
**November 2007 – October 2008**  
**Part 2**

**CNN: CNN Newsroom**

**Obama Courts Cuban Americans; Fire Erupts on U.S. Aircraft Carrier; Hagee Controversy Continues**

**May 23, 2008**

**By Barbara Starr, Jeffrey Toobin, Susan Candiotti, John Zarrella, Don Lemon, Brianna Keilar, Dr. Sanjay Gupta, Abbie Boudreau, Wolf Blitzer, Susan Lisovicz**

LEMON: Yes. Well, the release of John McCain's medical records puts a spotlight on presidential health. Being president is one of the most powerful and most stressful jobs in the world.

Dr. Connie Mariano has a unique perspective on all this. She was White House physician for President Clinton and both President Bushes. And she joins us now from Fountain Hills, Arizona.

Thank you very much for joining us here today.

OK, so we have been looking at the medical records. And real quickly, just up front, I want to show you, these are the stats from John McCain's medical records. It has his age -- 71 years old; his height -- 5'6" tall, although we heard from Sanjay Gupta at one point it said he was 5'9"; 170 -- 163 pounds; and his B.P. would be 134 -- which is his blood pressure -- 134 over 84.

How does that seem to you?

Does that seem fairly normal for someone of his age?

DR. CONNIE MARIANO, FORMER WHITE HOUSE PHYSICIAN: For his age, it appears appropriate.

LEMON: It appears appropriate. OK, what is it, real quick, is he 5'6" or is he 5'9"?

(AUDIO GAP)

LEMON: Can you hear me, doctor?

MARIANO: Go ahead.

LEMON: Yes. I'm saying what's with the discrepancy in height here?

Is that just something that's not a big deal?

MARIANO: You know, I don't know whether or how they recorded it and whether the different records have varied according to that. So, you know, what was the current one and depending on what it was, you know, 10, 20 years ago, he's going to lose some height. You worry about osteoporosis -- osteopenia, thinning of the bones. So there will be variations in height over time. LEMON: OK. So he may have gone from 5'9" to 5'6" depending on how his body reacted to age.

MARIANO: Yes.

LEMON: OK, we've heard...

MARIANO: My...

LEMON: Go ahead.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
BEFORE THE TRADEMARK TRIAL AND APPEAL BOARD

McNeil-PPC, Inc.,

Opposer,

Opp. No. 91184978

v.

Walgreen Co.,

Applicant.

**Rohinish Hooda; Opposer Test. Dep. Ex. 68**

**McNeil 000397**

MARIANO: My question is whether his physician, his internist, has noted this, whether he had back pain and other things that come to mind, certain conditions that can cause sudden accelerated height loss. So that's something that unless his physician has noted at, that should be looked at.

LEMON: When we had when we spoke to our Dr. Sanjay Gupta here, as well, there were a litany of, you know, ailments that seemed minor that were listed off here. And it also talked about his cholesterol, which was 192; LDL bad cholesterol, 123; HDL, good cholesterol, 42. And then it talked about the medications, doctor, that he was on and it listed a whole, you know, thing from Zyrtec to Ambien to multi- vitamins to Hydrochlorazide -- all kinds of things taken here. And all you say, or would you think, pretty normal for someone with his medical condition, right?

MARIANO: They're fairly common medications. I think they had also mentioned he does take Ambien for sleep occasionally.

My question is how often he takes that? Is it on a regular basis?

LEMON: OK. The big question here is should John McCain be elected president, should the American people be worried, from anything that you have found in these medical records?

MARIANO: I did look over the records that the Mayo Clinic has released and there wasn't anything there that worried me. The only thing I would question or ask his doctors to clarify or go on the record is the issue of any prior history of substance abuse, alcohol use, whether they're concerned about that; whether there's in question of neurological deficit, whether there are mental status changes, whether there's any evidence of mood disorder that may become a problem in the future.

LEMON: OK. Now we know about the melanoma, which many Americans suffer from. And we tell people, you know, to wear their sunscreen and what have you, to take care of your skin, to make sure you're not out in the sun a lot. That would not appear -- or would it appear to be something that is of -- that is of concern here?

MARIANO: No. He's pretty much clear. His physicians did a sentinel node biopsy at the time of his surgery. He's been followed very closely by an excellent dermatologist, Dr.

Suzanne Connolly, who I know very well, at Mayo. And he's essentially clean of recurrence of that melanoma. And he gets very, very good surveillance on that. So I don't think that's an issue.

LEMON: OK. And the other concern here that, you know, prisoner of war. He has gone through a lot.

Mental health -- in the records, what can you tell us about that and what do you know about that?

MARIANO: You know, I have not seen his prisoner of war records. I think what people need to look at is how is he at this current time. You know, I think the biggest test in terms of mental status is really the campaign in and of itself.

When they're on the road, they're doing 18-hour days. They're constantly answering questions. You members of the press are hammering them for questions, trying to catch them, whether or not they are astute enough to listen to the questions and answer it correctly. So that's a tremendous mental status test, if anything, is to survive a presidential campaign, and then ultimately to go to the convention.

How are they in terms of their speaking? Are there any lapses of memory?

And then how well do they think on their feet?

I think that's a very good test as to how they're operating mentally.

LEMON: Dr. Connie Mariano is a former White House physician.



We thank you for joining us in the CNN NEWSROOM.

MARIANO: Thank you.

LEMON: And a reminder, you can see more on this topic this weekend. Doctor Gupta explores the health demands of being commander-in-chief and the challenges facing presidential doctors. It's a one hour special report, "The First Patient: Health and The Presidency." You can catch that Saturday and Sunday, 8:00 p.m. and 11:00 p.m. Eastern on CNN.

KEILAR: Talk about the school of hard knocks, that is the teacher giving a student the smackdown.

(COMMERCIAL BREAK)

KEILAR: A major agreement has been reached in the fight against what some people view as human slavery. This is the end of a long battle between advocates for migrant workers and a major fast food chain.

And here to tell us more about this now is CNN's Abbie Boudreau with our Special Investigations Unit.

What's going on here?

ABBIE BOUDREAU, CNN SPECIAL INVESTIGATIONS UNIT CORRESPONDENT: Well, Burger King has agreed to pay a penny more per pound for tomatoes. That may not seem like much, but advocates say it will help make a huge difference for those that work in the Florida's fields.

The Burger King increase follows similar increases by McDonald's and Yum! brands, which operates Taco Bell, KFC and other restaurants. Burger King also says it will ensure it will not buy from growers with poor working conditions.

Now, this is a story we told you about when we went to Immokalee, Florida few months ago. Police told us how some workers were held as slaves living and working in deplorable conditions, making hardly enough money, if any, to survive.

Today's decision is being applauded by Senator Bernie Sanders, who announced the agreement between Burger King and the Florida-based Immokalee workers.

(BEGIN VIDEO CLIP)

SEN. BERNIE SANDERS (I), VERMONT: With poverty in America increasing, with millions of people working longer hours for low wages, with a race to the bottom taking place, it was important for some of us to find out where that bottom was. And I expect that bottom is in Immokalee, Florida.

AMY WAGNER, SENIOR VICE PRESIDENT, BURGER KING: We, along with other industry leaders, recognize that the Florida tomato harvesters are in need of better wages, working conditions and respect for the hard work that they do every day.

(END VIDEO CLIP)

BOUDREAU: Burger King also says it will work in the Coalition of Immokalee Workers to improve labor conditions.

When we were in Florida, police showed us how some of the workers lived in these primitive migrant camps. We've learned at least seven investigations into slavery are underway right now.

KEILAR: Wow. And one penny a pound. I mean that's just -- it's amazing to even think about it.

CNN's Abbie Boudreau -- you're with our Special Investigations Unit.

Thanks for that.

BOUDREAU: Thank you.

KEILAR: Don.

LEMON: Well, check this out. There it is. That's a teacher and he's giving a student the smackdown. The video, next.

(COMMERCIAL BREAK) LEMON: OK. Now it's time for Caught on Camera. And this one was caught on a cell phone camera. That's a Florida middle school teacher giving a 14-year-old student the old classroom smackdown. The teacher resigned after the video came out, though. He says it was playful wrestling that went just too far. The principal calls it inappropriate. The 14-year-old's family doesn't want to prosecute. He says it just went a little bit too far.

Time now to check in with CNN's Wolf Blitzer.

KEILAR: He is standing in "THE SITUATION ROOM" to tell us what's coming up at the top of the hour -- Wolf.

WOLF BLITZER, CNN ANCHOR: It did go a little bit too far.

KEILAR: Yes.

BLITZER: All right, guys.

Thanks very much.

Coming up, the former John McCain supporter, the pastor, John Hagee, he makes a public statement, as we just saw, about the news media, the candidate and what he wants to happen next. We're following through on this story.

And John McCain's medical records released. Our own Dr. Sanjay Gupta pored through hundreds of pages and he learned some new details about the candidate's health. We're going to have complete coverage coming up.

Also, it's a weapon and a video recorder. Some officers hope it will help sort out exactly what happens during police shootings. We're going to demonstrate exactly how this new technology works.

All that, guys, and a lot more coming up right here in "THE SITUATION ROOM."

KEILAR: Thanks, Wolf.

LEMON: Thanks, Wolf.

KEILAR: And when we come back, we're going to chat with Susan Lisovicz. She's all that and a bag of chips.

But how much are those chips, anyway, in this era of rising prices?

(COMMERCIAL BREAK)

KEILAR: Let's head to Wall Street now and Susan Lisovicz.

SUSAN LISOVICZ, CNN CORRESPONDENT: Hey, Brianna.

Well, the barbecue index is something that's very upsetting.

(STOCK MARKET REPORT)

LISOVICZ: I'll see you guys next week. Have a great long holiday weekend.

LEMON: You enjoy, Susan. Have a fantastic time, whatever you do.

KEILAR: And let's head now to "THE SITUATION ROOM" --

LEMON: -- and Mr. Wolf Blitzer.

Take it away, Wolf.

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**Paso Robles Press Online (Paso Robles, CA)**

**Allergy season in full bloom**

**May 22, 2008**

**By Julia Bluff**

Those who are suffering from an itchy and scratchy throat, watering eyes and frequent sneezing can take comfort in the fact they are not alone — it is allergy season on the Central Coast.

According to Templeton-based allergist and immunologist Dr. Shields Abernathy, allergies tend to peak from the end of February through early July while the blooming period is in full swing. Tiny grains of pollen, especially from oak trees and grasses, are currently drifting in the air, wreaking havoc on those who are genetically predisposed to allergies.

"An allergic person is just the opposite of an AIDS patient in that an allergic person has too good of an immune system," he said. "When foreignness, like oak pollen or mite material settles in our nose or our lungs, we all go to destroy it so it won't destroy us. Allergics destroy it so forcefully because of a genetic coding, that not only do they destroy it like normal, but the attack spills over and they hurt themselves."

The immune overreaction leaves the sufferer with a runny nose and a stopped up nasal passage, sneezing, itchy and watering eyes and an itchy throat. In addition, some people experience tightness in the chest, wheezing and shortness of breath. These symptoms are often mistaken by the allergy sufferer as a common cold and are subsequently ignored in hopes that they will go away on their own, Abernathy said.

"The way you differentiate is that a cold will last seven days and then stop, whereas allergies will continue on," he said.

Additionally, many who have long suffered with allergies tend to forego treatment options in favor of toughing out the symptoms. Many patients go through what Abernathy refers to as “denial, minimization and accommodation.” The patient in denial refuses to believe that they even have allergies; the minimizer pretends that allergies aren’t a big problem and the accommodator insists that they have had the symptoms so long that they have gotten used to them, he said.

Allergies are incredibly common — as many as one in five Americans suffer from them. Though allergies are rarely life threatening, they do have some very real consequences, Abernathy said.

“There are plenty of studies that show that whereas allergies aren’t life taking per se, they do cut down on somebody’s quality of life not being as effective at his or her work or school,” he said. “So it is a big cost economically there.”

Severe allergies lead to a number of direct complications, Abernathy said. Allergy sufferers may develop “Allergic Tension Fatigue Syndrome” due to fighting the allergies all the time and literally lack of sleep. This makes students not perform at their maximum academically, athletically, or socially and places adults operating any heavy machinery or getting behind the wheel of a car into a risky situation. In addition, allergies may lead to life threatening complications as sinusitis, asthma, and frank anaphylaxis or an acute allergic reaction.

Still, it is the annoyance of constant allergy symptoms that has most allergics concerned.

“A non-allergic person just doesn’t understand how totally affecting in bad way allergies can be to a person,” Abernathy said.

But there are a variety of very effective treatment options that cut down on the needless suffering resultant of allergies. The cornerstone of the allergic’s defense against airborne irritations is avoidance, Abernathy said. He recommends that those who have allergies try to stay indoors except in the early morning hours, after the dew has settled allergens in the air and before the wind has kicked them up again.

“If you stop that overactive immune system in the first place, then you would never have the inflammation engendered,” he said. “But you can’t live in a plastic bubble, so it never can be done perfectly enough.”

There are a number of over-the-counter medicines that are available to relieve those who are allergic to the symptoms that they suffer. Non-sedating anti-histamines, such as Claritin and Zyrtec, can be helpful for those over the age of 12. Sudafed, which can be purchased over the counter with a patient signature, can aid sufferers, provided they do not have any history of high blood pressure or heart disease. If symptoms don’t improve with over-the-counter-remedies, patients should consult their doctor for more prescription medication options, Abernathy said.

Still, for one out of four allergy patients, medication may not be enough. If the symptoms do not improve or the problem is chronic — meaning that a patient suffers from allergies more of the year than less — Abernathy suggests allergy shots.

“By giving you gradationally larger amounts of what you are allergic to, we teach your body that it is a friend, not a foe, so you don’t mount as aggressive of an attack or the attack cuts down to normalcy,” he said.

Eighty percent of those who undergo allergy shots get a positive response in terms of the severity of their symptoms.

“It is remarkable how many of that 80 percent say it is one of the best things they have ever done for themselves or their children,” Abernathy said.

Allergy sufferers are advised to consult a doctor before beginning any treatments.

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**News10.net (ABC; Sacramento, CA)**  
**Allergy Sufferers Pay the Price**  
**May 21, 2008**  
**By Karen Massie**

A few people were out in the Rose Garden at Sacramento's McKinley Park Wednesday. The blustery wind kept many people inside because they suffer from allergies.

Allergist Dr. Stephen Nagy knows the swirling wind will stir up pollen and spell agony for his patients.

"I'll probably hear from them tomorrow and Friday," Nagy said. "They're going to have a lot of symptoms, eye itching, runny nose, especially some cough and wheezing."

Some of his patients get allergy shots for long term relief. But not everyone can afford them.

"The insurance co-pays will range anywhere from \$5 to \$15 for a shot. We ask patients to stick with them for at least year to see how they'll do. And usually that means one shot a week for 52 weeks," Nagy said.

Allergy shots are tailor-made for each patient. They also have to pay for the antigen in the injection which is a combination of pollens and other things to which they're allergic.

"The antigen charge is \$200 to \$600 per year. Based on your insurance, the cost may be 50 percent," Nagy said.

The cost forces many people to turn to over-the-counter (OTC) medications. If they want to use Zyrtec, one of the antihistamines on the market, they have to be prepared to pay.

"For the brand-name Zyrtec, the cost is about 80 cents a pill. The generic version cost about 50 cents a pill," Nagy said.

Zyrtec at a one local pharmacy sells for \$23 for 30 pills. The dosage is one pill a day.

"That leaves patients trying to control allergy symptoms with other less expensive OTC medicines," Nagy said. "We also tell patients to avoid what is that they're allergic to. Keep the house closed up and drive around with the windows up."

Nagy pointed out avoiding allergens also comes at a cost. Allergy sufferers will have to either pay more for rising gas prices if they drive around with the air condition on and their windows closed or they'll have to pay for higher electricity bills to keep their homes cool.

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**Globe Gazette Online (IA)**  
**Weather swings bring on allergies**  
**May 20, 2008**  
**By Kristin Buehner**

MASON CITY — Allergy season in Iowa is coming on strong, thanks to big swings in the weather this spring, experts say.

Dr. James Oggel of Sioux City Allergy and Asthma says spring can be pretty intense for allergy sufferers, especially with a wild swing in temperatures — 80 degrees one day, 40 degrees the next.

He also says windy weather makes people miserable because the wind carries pollen farther.

Dr. Tim Dettmer, allergist at Mercy Medical Center-North Iowa, said tree pollen count is high and grasses and molds are a big problem, too.

"We've had a lot of people come in over the last couple weeks," he said. "It's really picking up, in correlation to changes in the weather."

Tree pollination occurs primarily in April and May, with grass pollen and mold high from spring through fall.

Ragweed becomes a problem in the fall — August and September, Dettmer said.

Allergy sufferers should be tested to determine what they are allergic to "so they know what to avoid and/or take medications for," he said.

Medications range from allergy shots, which are the most effective alternative for people with severe allergies, to oral medications, such as Zyrtec or Claritin-D, over-the-counter medications.

Another newer option is drops that go under the tongue.

Dr. Alan Li, resident with Mercy's Family Practice Residency Program, also advises patients to wash out their nostrils with a saline solution whenever they come in from outdoors.

To reduce exposure to pollen, it is important to keep house windows closed, especially in the early-morning hours, limit outdoor activities and be consistent in taking medications.

The vast majority of people who suffer from allergies — 80 percent — have developed them by the age of 20 or 30, Dettmer said.

"Usually it affects people from early on."

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**Baltimore Sun Online**  
**Taking the sting out of insect allergies**  
**Expert advice**  
**May 15, 2008**

It is the season of baseball games, picnics, backyard barbecues ... and all kinds of insects. If you've ever been stung by a bee or wasp, you know it's no fun at all. For many people, a sting can be a serious matter, says Dr. David Golden, associate professor of medicine at the Johns Hopkins University and chief of the allergy division at Franklin Square and Sinai hospitals.

What constitutes an allergic reaction to insect stings?

There are different kinds of allergic reactions: If you get stung and have pain and itching, that is normal. If you get a huge swelling that lasts a week, that is probably a local allergic reaction, and it isn't really dangerous unless you get stung in the throat.

But if you are stung and 10 minutes later, you break out in hives, you feel faint or your throat starts to swell, these are potentially life-threatening or even fatal reactions, and this is called a systemic reaction.

How many people will typically be allergic to insect stings?

About 3 percent of adults have had a systemic reaction to an insect sting sometime in their lives. Two to three times that many have had reactions that cause large swellings. If you have had a large swelling

after getting a sting, there is a 5 percent chance that you will have a systemic reaction next time. If you have had a systemic reaction, there is a 50 percent chance it will happen again.

What kinds of insects are most likely to cause an allergic reaction?

Biting insects almost never cause systemic reactions. The really big deal in allergic reactions is stinging insects. Bees, including honey and bumble, don't really like to sting you, and if they do, they die. So mostly people who run around barefoot need to watch out for them.

The wasps, including yellow jackets, hornets and paper wasps, are the group responsible for almost all of the severe reactions that we see. The third group of stinging insects is the fire ants, and they are mostly in the southeast third of the country (Alabama, Mississippi and Texas) so they are not as relevant in Maryland.

What happens if you are allergic to an insect sting?

Systemic reactions or anaphylaxis are usually fairly quick, coming in 20 to 30 minutes after the sting. So if you get stung and don't have an allergic reaction in 30 minutes, you probably are not going to have one.

If someone does get stung and 10 minutes later feels like his throat is swelling and has trouble breathing or dizziness like he is going to pass out, then it is a potentially dangerous problem. This person could be breaking out in hives all over the body. Breaking out in hives is not yet an emergency, but it could turn out to be one.

When should you call a doctor?

If you are breaking out in hives, go to a doctor. If you are having any internal symptoms like throat swelling, then call 911. That could get real bad real fast.

If you have had an allergic reaction to a sting once before, should you be concerned about future stings?

A lot of people will have one reaction and think it was a fluke, but they ought to tell a doctor. If they have had any symptoms like hives or swelling of the throat, they can have them again.

People with bee sting allergies should be immunized so they don't have to worry about having a reaction. If you go to the ER with a reaction, they should give you an EpiPen or Twinject [auto-injectors that administers epinephrine], but ultimately, you should be immunized.

We have allergy tests and shots that can make it so you will never have this kind of reaction again.

How do you treat a sting?

Cleanse the area, remove the stinger if you can, and treat with ice. There is allergy medicine for the itching like Benadryl or Zyrtec (both have over-the-counter or generic forms).

Folk remedies such as toothpaste don't really work. Meat tenderizer theoretically works, but you'd have to keep it in your pocket, and most of us don't.

What if you have a large swelling?

If the swelling is prolonged, put ice on the area. You can also call the doctor for cortisone to help with the swelling and to get steroid pills in the first day if possible. But the swelling is not dangerous and will go away in five to 10 days without treatment.

What is the treatment for a systemic reaction?

The only antidote for a systemic reaction to anything from peanuts to bee stings is an injection of epinephrine (adrenaline). That is what comes in the EpiPens that severely allergic people carry with them. The EpiPens or Twinjects can save your life.

Do you have any tips about avoiding getting stung?

Ideally, if you have a bad allergy to insect stings then you would never drink or eat outdoors -- period. Food and drink attract stinging insects so picnics and garbage cans are off-limits and absolutely don't drink out of cans or through straws -- anything that you can't see inside of.

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#### **Reuters**

#### **UCB says Q1 meets its expectations, revenue down**

**May 15, 2008**

BRUSSELS, May 15 (Reuters) - Belgian pharmaceutical group UCB said on Thursday its first-quarter financial results were in line with its expectations, including a single digit percentage drop in revenue and net sales. Excluding the impact of currency fluctuations, UCB said the decrease was marginal compared to the first quarter of 2007.

The company repeated that the recall from the U.S. market of its Neupro patches to treat Parkinson's disease had placed its 2008 financial outlook under review and that it expected to provide an update when it reports half-year figures on August 1.

UCB had previously forecast revenue would fall to about 3.4 billion euros (\$5.26 billion) in 2008 from 3.6 billion last year. Recurring core profit (EBITDA) would be about 650 million euros and net profit was expected to exceed 100 million.

The recall, announced at the end of March, had a limited impact in the first three months.

Net sales of epilepsy drug Keppra grew by a double-digit percentage as did revenues of allergy drug Xyzal and cough medicine Tussionex. U.S. sales of hayfever drug Zyrtec dropped sharply after its patent expiry in December 2007.

UCB said its progress on synergies from integrating German peer Schwarz Pharma, bought last year, was progressing well. It added that EBITDA (earnings before interest, tax, depreciation and amortisation) and net profit levels were "satisfying". (Reporting by Philip Blenkinsop, editing by Darren Ennis and Sue Thomas)

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#### **Dow Jones**

#### **UCB 1Q Earnings As Expected, Sales Fall Slightly**

**May 15, 2008**

**By Alessandro Torello**

BRUSSELS (Dow Jones)--Pharmaceutical company UCB SA (UCB.BT) Thursday said earnings in the first quarter were in line with expectations, with sales falling at a single digit percentage rate, mainly due to currency fluctuations, compared with the same quarter of last year.

"The company reached a satisfying level of earnings, namely recurring Ebitda (or earnings before interest, taxes, depreciation and amortization) and net profit," Brussels-based UCB said in a statement.

The company, Belgium's leading pharmaceutical by sales, didn't provide figures.



At 1019 GMT, UCB shares were up 0.7% at EUR25.05 in an overall negative Brussels market. The stock has lost more than 40% in a year.

Sales and revenue from royalties for antihistamine treatment drug Zyrtec fell "significantly" in the U.S. after its patent expired in December, the company said. The whole of the U.S. market accounted for 46% of UCB's total sales last year.

"The positive progress of Tussionex is good news," said Brussels-based

Degroof analyst Thibaud Rutsaert highlighted in a research note the positive progress of prescription cough medicine Tussionex. He had expected a drop in 2008 sales following a warning last month from the U.S. Food and Drug Administration after it received reports of adverse events, including deaths, associated with misuse of the medication.

Despite that, Tussionex was one of three products, together with epilepsy drug Keppra and allergy medicine Xyzal, to drive growth in the quarter, UCB said.

Net profit fell 59% to EUR160 million in 2007 compared with the year-earlier period, on a pro forma basis, mainly due to the cost of integrating its 2006 purchase of German drug maker Schwarz Pharma.

The company in March said it was recalling its Parkinson's disease patch Neupro in the U.S. and some batches from Europe, due to a problem in the U.S. manufacturing process.

UCB reiterated Thursday that "considering the resolution timeline and risk mitigation of this issue is still undetermined, the full effect on UCB's business is not yet known."

It repeated that its outlook is under review and expects an update by August. The company has said it will take months before the drug can resume sales.

Company Web site: [www.ucb-group.com](http://www.ucb-group.com)

-By Alessandro Torello, Dow Jones Newswires; +32 2 741 14 88; [alessandro.torello@dowjones.com](mailto:alessandro.torello@dowjones.com) [ 15-05-08 0835GMT ]

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**Thomson Financial (picked up by AFX International Focus)  
UCB says Q1 'in line with expectations'; 2008 outlook 'under review' UPDATE  
May 15, 2008**

BRUSSELS (Thomson Financial) - Belgian pharmaceutical group UCB SA said its first-quarter performance was 'in line with expectations' but placed its financial outlook for the year 'under review,' adding that it would give an update on this in August.

UCB said that in line with its forecast for first-quarter revenue and net sales, these 'decreased by only a single digit percentage rate to a lower level than the prior year'.

'The decrease was only marginal compared to the first quarter of 2007,' it added.

The group said that in March it had recalled Neupro and had an out-of-stock situation in the United States, prompting it to place its targets under review.

'Considering the resolution timeline and risk mitigation of this issue is still undetermined, the full effect on UCB's business is not yet known,' said the statement.

'Therefore, UCB's 2008 financial outlook is under review. UCB expects an update on this situation at the time of its half year reporting on Aug 1, 2008,' it added.

"We've had a lot of people come in over the last couple weeks," he said. "It's really picking up, in correlation to changes in the weather."

Tree pollination occurs primarily in April and May, with grass pollen and mold high from spring through fall.

Ragweed becomes a problem in the fall — August and September, Dettmer said.

It's important for allergy sufferers to be tested to determine what they are allergic to "so they know what to avoid and/or take medications for," he said.

Medications range from allergy shots, which are the most effective alternative for people with severe allergies, to oral medications, such as Zyrtec, an over-the-counter medication.

Another newer option is drops that go under the tongue.

To reduce exposure to pollen, it is important to keep house windows closed, especially in the early-morning hours, limit outdoor activities and be consistent in taking medications.

The vast majority of people who suffer from allergies — 80 percent — have developed them by the age of 20 or 30, Dettmer said.

"Usually it affects people from early on."

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***The New York Times***  
**Turner to Offer Marketers Way to Link Ads to Content**  
**May 15, 2008**  
**By Stuart Elliott**

Ever smile while watching a movie on TV because, say, you just saw the scene from "The Godfather" when Vito Corleone leaves his office at the Genco Olive Oil factory and a commercial comes on for Bertolli olive oil? Turner Entertainment Networks wants to turn those coincidences into sales opportunities.

At the Turner Entertainment upfront presentation on Wednesday, Linda Yaccarino, executive vice president and general manager for advertising sales and marketing, described a new system intended to pair commercials with relevant moments in the shows they interrupt. The system, called TV in Context, was more than a year in development, she said.

Ms. Yaccarino likened TV in Context to contextual targeting, which is all the rage in online advertising and takes advantage of tracking the online behavior of computer users to serve them ads they would find relevant. The Turner Entertainment system, part of Time Warner, "matches spots with relevant scenes," she said, in the movies and series that are shown by the TBS, TNT and TruTV cable networks.

TV in Context involves combing through the thousands of properties in the Turner Entertainment library, cataloging scenes by subject matter and tracking the commercials that agencies deliver to the networks to run. The first placements are available in the fall.

Ms. Yaccarino showed an example as part of her presentation. After the conclusion of a scene from the movie "Anchorman" in which Will Ferrell, Paul Rudd and Steve Carell discuss love, the first spot in the next commercial break could be for the eHarmony.com online dating service.

She also described an example of a scene from the movie "Hitch" in which Will Smith suffers an allergic reaction to his food. That could be followed, Ms. Yaccarino said, by a commercial for the Walgreen drugstore chain for the allergy medicine Zyrtec.

The growing allure of contextual targeting online is encouraging several TV networks to look into offering their own versions. For instance, the AMC cable network is teaming up with Nielsen Media Research to offer what it calls A.I.M., for Audience Identity Metric. AMC will put together packages of movies from its film library for advertisers that are tailored to the behavior of the consumers who watch those movies.

For example, an automaker that wants to reach men ages 25 to 49 in the market for a new car may have its commercials run in a movie package that would include "The Godfather."

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**UCB Press Release**

**Interim Report: UCB off to a good start in 2008**

**May 15, 2008**

Brussels/Belgium, May 15, 2008 at 7:00 am CET - UCB announced today that the financial performance of the UCB Group in the first three months of 2008 was in-line with expectations.

"In the first three months of 2008, UCB made significant progress and achieved important milestones executing our strategy. In April, we launched Cimzia® in the United States for the treatment of Crohn's disease, less than 48 hours following the FDA's approval," comments Roch Doliveux, CEO of UCB. "On the other hand, in March we had to announce a recall of Neupro® and an out-of-stock situation in the United States. This issue had only limited impact to the financial performance of the UCB Group in the first three months of 2008. Overall, in the first quarter, we achieved a financial performance well in line with our stated expectations."

Consistent with the company's expectations, in the period from January to March 2008, UCB's revenue and net sales decreased by only a single digit percentage rate to a lower level than the prior year. Excluding the impact of currency fluctuations, the decrease was only marginal compared to the first quarter of 2007. Key products contributing to the growth in the quarter were Keppra® (levetiracetam), which continued to show double digit percentages in net sales growth as did Xyzal® (levocetirizine) revenues as well as Tussionex® (hydrocodone polistirex and chlorpheniramine polistirex). In line with expectations, net sales and royalty income of Zyrtec® (cetirizine) in the US market decreased significantly due to the patent expiration in December 2007 while net sales of omeprazole were negatively affected by further generic competition.

This development is also reflected in the performance of UCB in the US market where positive sales contribution from Keppra® and Tussionex® was counter balanced by the patent expiration of Zyrtec®, generic omeprazole and the declining US-Dollar. In 2007, the US market represented 46% of UCB's total net sales. Europe, which in 2007 represented 42% of total net sales, grew year-over-year thanks to Keppra®, Xyzal® and Neupro® (rotigotine transdermal system), despite a competitive environment. In other regions sales were more or less stable despite a competitive environment and adverse currency fluctuations.

UCB continued its integration of Schwarz Pharma and achieved further progress on the synergy achievements. The company reached a satisfying level of earnings, namely recurring EBITDA (Earnings Before Interest, Taxes, Depreciation and Amortization) and net profit.

At the end of March, UCB announced the recall of its anti-Parkinson's drug Neupro® from the US market and of certain batches in Europe which led to an out-of stock situation in the US. Considering the resolution timeline and risk mitigation of this issue is still undetermined, the full effect on UCB's business is not yet known. Therefore, UCB's 2008 financial outlook is under review. UCB expects an update on this situation at the time of its half year reporting on August 1, 2008.

R&D update: UCB's pipeline is progressing well

Cimzia® (certolizumab pegol) was approved in the US for treatment of Crohn's disease on April 22, 2008. The regulatory application of Cimzia® in rheumatoid arthritis in the US has been accepted for filing and review by the US authorities in January 2008. In Canada, the dossier of Cimzia® for the treatment of

rheumatoid arthritis was accepted for review at the end of April, filing in Europe for rheumatoid arthritis is on track as planned for mid 2008.

End of March 2008, the Committee for Medicinal Products for Human Use (CHMP) of the European Medicines Agency (EMA) has affirmed a negative opinion on the market authorisation application for Cimzia® for the treatment of patients with Crohn's disease.

In 2007, UCB completed a Phase II re-treatment study for Cimzia® in psoriasis with positive results. UCB is finalising further development plans for Cimzia® in psoriasis with an update expected at the time of its half year reporting on August 1, 2008.

UCB successfully reached other important milestones since the beginning of 2008, such as filing of Keppra®XR (levetiracetam) in the adjunctive treatment of partial onset seizures in adults with epilepsy with the US Food and Drug Administration (FDA), approval of Xyzal® oral solution in the US and encouraging clinical Phase II trial results of the anti-cancer drug CDP791 for which UCB is looking for a partner. At the end of April, the CHMP of EMA has adopted a positive opinion on the market authorisation application for Neupro® for the symptomatic treatment of moderate-to-severe idiopathic restless legs syndrome (RLS). UCB is hopeful that the European Commission will act favourably on the marketing authorization for restless legs syndrome. UCB will be filing a restless legs syndrome manufacturing variation with the EMA.

Rikelta™ (brivaracetam)'s second Phase III study in Unverricht Lundborg Disease (ULD) has been completed. Like the first trial, the second trial did not meet the primary endpoint of symptom relief of action myoclonus, but has shown beneficial effects in a subset of patients for which additional analyses are ongoing. UCB has broken new ground as the first company to engage in regulatory studies aimed at this severe progressive myoclonic epilepsy.

The Phase III clinical programme for Rikelta™ is ongoing as adjunctive therapy in patients with refractory partial-onset epilepsy. Results are expected in the third quarter 2009.

A proof of concept trial (Phase IIa) with lacosamide in fibromyalgia is on track for first results to be reported by the end of June this year.

#### About UCB

UCB (Brussels, Belgium) ([www.ucb-group.com](http://www.ucb-group.com)) is a global leader in the biopharmaceutical industry dedicated to the research, development and commercialisation of innovative pharmaceutical and biotechnology products in the fields of central nervous system disorders, allergy/respiratory diseases, immune and inflammatory disorders and oncology. UCB focuses on securing a leading position in severe disease categories. Employing around 12 000 people in over 40 countries, UCB achieved revenue of 3.6 billion euro in 2007. UCB S.A. is listed on Euronext Brussels.

#### Further information

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#### Forward looking statement

This press release contains forward-looking statements based on current plans, estimates and beliefs of management. Such statements are subject to risks and uncertainties that may cause actual results to be materially different from those that may be implied by such forward-looking statements contained in this press release. Important factors that could result in such differences include: changes in general economic, business and competitive conditions, effects of future judicial decisions, changes in regulation, exchange rate fluctuations and hiring and retention of its employees.

For the pdf-version of this press release, please click on the link below:

<http://hugin.info/133973/R/1219304/255803.pdf>

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## **Ad Age**

### **Turner Offers to Place Ads Next to Relevant Content Also Introduces Slate That Includes 'Truth in Advertising'**

**May 14, 2008**

**By Andrew Hampp**

NEW YORK (AdAge.com) -- TNT and TBS are out to prove they could play with the big boys of broadcast. The Turner Broadcasting properties were the first entertainment cable networks to vie for media buyers' ad dollars during the week traditionally dominated by the five national broadcast networks.

David Levy, president of Turner Broadcasting Sales, began by declaring, "Today's consumers are watching TV without any delineation between broadcast and cable." He and his colleagues then pointed to the ratings success of TNT's "The Closer" and "Saving Grace" and TBS's "House of Payne" and "Frank TV" as further evidence of cable's success in wooing viewers.

#### **'Excellent broadcast replacements'**

Steve Koonin, president of Turner Entertainment Networks, even pitted images from NBC's "American Gladiators" and "Knight Rider" remake against headshots of TNT stars Kyra Sedgwick and Holly Hunter and asked the audience to identify which looked more like a broadcast network. "We're excellent broadcast replacements," he said. "Our desire is for our brands to not only deliver the best value for your brands, but be the best destination."

Turner is also seeking to add value to ad deals this year with a new ad-targeting system called TVinContext. The system will help align marketers' ads with scenes from Turner shows or movies related to their product or service. Linda Yaccarino, exec VP-general manager of Turner Entertainment ad sales and marketing, used a scene in the movie "Hitch" where Will Smith has an allergic reaction to his meal. That clip could then be followed by a Walgreen's ad for Zyrtec, while viewers' minds are still focused on allergies.

And a scene from "Anchorman" in which Steve Carell declares his love for carpet that was paired with an ad for eHarmony.com made a less-obvious matchup that drew fewer chuckles from the crowd. The first contextual ad placements will be made available to a limited number of clients and will roll out in the fall.

#### **Programming slate**

On the programming front, TNT unveiled a very broadcast-like slate of three dramas, beginning with a new legal drama from "NYPD Blue" creator Steven Bochco. Called "Raising the Bar," the show stars Mark-Paul Gosselaar as a fledgling lawyer and Jane Kaczmarek as a hard-edged judge, and could capitalize on the courtroom-drama void left by Fox's just-canceled "Canterbury's Law." Also on the fall slate is "Leverage," a modern-day "Robin Hood" from creator Dean Devlin starring Timothy Hutton.

Perhaps of most interest to the upfront crowd, however, was "Truth In Advertising," starring Eric McCormack ("Will and Grace") and Tom Cavanagh ("Ed") as a high-strung art director and copywriter for a Chicago ad agency. Like AMC's "Mad Men," the show appears to be less about the ad world than it is the eccentricities of its main characters. Mr. Cavanagh's copywriter, for example, began the show's clip reel rattling on about his coffee addiction.

TBS has also made a strong commitment to original programming, and vowed to flip its ratio of 80% acquired content vs. 20% originals to 80% original fare by 2010. For 2008-09, Mr. Koonin focused on a slate of returning series, having successfully launched sitcoms such as "House of Payne," "The Bill

Engvall Show" and "Frank TV" last year to an audience that has gotten even more ad-friendly. As TBS' ratings among adults 18 to 34 have increased 44%, the median age has dipped to 33, he said. New seasons of TBS's modestly successful first ventures into original sitcoms, "My Boys" and "10 Items or Less," could stand to gain a larger, younger following when they return this summer.

#### TruTV

Most focused of all on original programming is TruTV, the network formerly known as Court TV, which rebranded in January to focus on "actuality" programming. Since the rebranding, the network has seen the highest ratings of its 17-year history, said Mark Juris, exec VP-general manager of TruTV. "We like to say TruTV is what reality TV should be if it wasn't so fake."

With plans to bring 300 hours of its own shows to air this year, TruTV is putting its biggest hopes on two shows that are distinctly Discovery Channel in nature. "Black Gold" is an oil-drilling series from the creator of "Deadliest Catch," a kind of "Dirty Jobs" crossed with "There Will Be Blood." And "Man v. Cartoon" has TruTV delving into the Warner Bros. animation catalog by commissioning scientists to re-create vintage Wile E. Coyote and Road Runner stunts in real life. Sample stunt: launching a boulder from one cliff to another.

Making new hits is especially critical for Turner this year as it vies for a larger share of TV budgets. TNT, despite its new hit "Saving Grace," actually saw a nearly 10% decrease in ad dollars last year to \$978 million, according to TNS Media Intelligence. Before becoming TruTV this year, Court TV also saw a slight dip in spending to \$216.2 million in 2007. Only TBS saw a boost from its new schedule of originals, rising to \$803.7 million.

Buyers were skeptical about Turner's ambitious broadcast-week positioning going into today's presentation, but seemed to be sold on the new pitch. John Moore, director of ideas and innovations for Interpublic Group of Cos.' Mullen, said, "I truly believed they pulled it off in spades. If you don't back that up, it almost becomes worse than better. All the cable networks should be proud of what Turner did today."

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**Contra Costa Times Online (CA)**  
**Spring is here, and so are allergies**  
**May 14, 2008**  
**By Naras K. Bhat**

Spring is here, and that means allergy season has started. Are you prepared?

Unlike most health conditions, seasonal allergies follow predictable trends. As the weather begins to warm in February and the first week of March, trees begin to pollinate and so starts the "Tree Season."

As the warming continues in April, the "Grass Season" starts and lasts into June. The amount of rainfall in a given year will also factor in. Plant growth increases with increased rainfall, resulting in higher pollen counts and more severe allergy symptoms. By the end of January of this year we had already received more rainfall than we did during the first three months of 2007, so allergy sufferers beware.

Of particular interest in 2008 are changes in the availability of popular medications. Zyrtec-D, last year's most commonly prescribed allergy medication, and Zyrtec are now available over-the-counter. However, this does not mean you can expect to find them both in the pharmacy aisle.

Due to FDA regulations enacted in September 2006, medications containing a drug called pseudoephedrine, a very effective and safe decongestant, must be kept behind the pharmacy counter requiring consumers to ask for them. Both Zyrtec-D and Claritin-D contain pseudoephedrine and have consequently been moved. Don't let this scare you, though, the move is an attempt to prevent the use of these medications in the manufacture of illegal street drugs, not a response to safety concerns. Zyrtec and Claritin do not contain pseudoephedrine and are available in the allergy aisle, but lack the decongestant properties of their sister products.

Another change this year is the banning of traditional albuterol inhalers effective Dec. 31, 2008. These inhalers use a chemical propellant called CFC, an ozone-depleting substance banned for all but "essential use" since 1996. Because no viable chemical alternative existed at the time, CFC use in medical inhalers was deemed "essential." In recent years, however, two new inhalers have become available — ProventilHFA and VentolinHFA — that use HFA (hydrofluoroalkane) in place of CFC. Both medications use albuterol sulfate as their active ingredient and individuals who rely on inhalers should be able to make the change without foreseeable complication.

Although the medications used to treat allergy symptoms may change from year-to-year, the non-medical means of control are always the same. Allergy sufferers can limit exposure to allergens like pollen during the allergy season by keeping windows and doors closed, staying inside or restricting outdoor activities, limiting exposure to pets that frequently go outdoors, and using vacuum cleaners with HEPA filters. When you do have to go outside, showering afterwards to rinse away allergens can also help.

For most people, seasonal allergies can be effectively controlled through the combination of oral medications and avoidance. For persistent sufferers, allergy shots are available from your allergist. As with all chronic medical conditions, it is important to work closely with your physician and follow their instructions to limit the effect of seasonal allergies as much as possible.

Dr. Naras K. Bhat is a Board Certified Allergy and Immunology Specialist. He has been practicing medicine for over 30 years.

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***The Salt Lake Tribune***  
**Late allergy season coming into bloom**  
**May 13, 2008**  
**By Carlos Mayorga and Melinda Rogers**

When spring blooms in Utah, Jennifer Gardner sneezes as soon as she steps outside.

From flowering cottonwood trees to new grass poking through the ground, Mother Nature's antidote to winter typically leaves Gardner sniffing, itching and wiping watery eyes in an annual battle with allergies.

"Everything beautiful we've been waiting for makes me nuts," the Draper mother said on Monday as she waited in the lobby of the Intermountain Allergy and Asthma Clinic.

Allergy sufferers across the Salt Lake Valley may be struck with symptoms later this year than in previous springs. A cold winter and cooler than usual spring have delayed budding in trees, pushing prime allergy season back a few weeks, said Duane Harris, an allergist at the Draper clinic.

Instead of pollen starting to fly in mid-February, counts didn't start showing up until the second week of March, said Harris.

"We had a cold winter and we had no thaw. [Typically] the thaw in January triggers the trees and then you need to start thinking about pollination," he said. "And that never happened this year."

Pollen is now, however, making up for lost time.

Harris' office in Draper conducts a pollen count daily and posts results at [www.intermountainallergy](http://www.intermountainallergy.com/pollen.html)

[.com/pollen.html](http://www.intermountainallergy.com/pollen.html). On Monday, pollen counts for mulberry trees were the highest recorded so far this year, followed by sycamore, maple, oak, birch and cedar trees.

While people with tree allergies are already hurting, those with grass allergies are in for swollen eyes and runny noses in coming days, said Marsha Branam, a medical assistant and certified aerobiologist at the clinic.

"We typically should be in the grass [allergy] season by now, and we're just starting to see it," she said.

Branam said in recent years, the worst weeks for people with grass allergies are generally over by Memorial Day weekend. This year, the holiday may instead be their peak time for symptoms, she said.

And with the tree allergy season starting late, those bothered by both trees and grasses may soon get a double whammy, Branam and Harris said.

"We can see the wave [of patients] coming," Branam said.

Harris said for two-thirds of the allergy patients he sees, grass presents the most problems. "For most people, the worst is yet to come," he said.

Allergy season can also be harsh on people with asthma, said Marlene Peng, an allergist at the Greenwood Health Center at the University of Utah.

Peng said about two-thirds of people diagnosed with asthma are affected by allergies as well.

"Asthma can flare up when someone has an allergic reaction," Peng said.

She said although spring allergy season, which typically starts in mid-March, is in full swing, some allergy sufferers will be afflicted until late fall.

Those who suffer from weeds, such as rag weed or sage, will likely be affected from August until the first frost. In Utah, the first frost is generally in October, but could occur as late as November, Peng said.

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#### How to minimize allergy symptoms

- \* Avoid whatever you are allergic to. If allergic to pollens, close windows at night or avoid opening them at all.

- \* If possible, use central air conditioning instead of a swamp cooler. A swamp cooler brings in some outside air and is only partially filtered, often ushering in pollen in the process.

- \* After working in the yard, change clothes and shower immediately after entering your home.

- \* Try over-the-counter allergy medications such as Claritin or Zyrtec. If symptoms persist, visit your physician or an allergist to try a prescription medication or an allergy shot.

Source: Allergist Duane Harris of the Intermountain Allergy and Asthma Clinic

#### Free screenings

An allergist from Intermountain Allergy and Asthma will offer free screenings for people with breathing problems or who think they may have asthma. About 8 percent of Utahns suffer from asthma, said Jenny Johnson, a health specialist with the Utah Department of Health asthma program.

- \* When: Saturday, 10 a.m. to 2 p.m.



\* Where: Fashion Place Mall Center Court in Murray.

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**The Bergen Record Online**  
**Pollen counts may soar into June Tuesday**  
**May 13, 2008**  
**By Lindy Washburn**

Maybe it's global warming, or the lushness of new growth in North Jersey, as oaks and birches and maples burst into leaf. Whatever the cause, this spring is worse than ever for those who suffer from seasonal allergies.

Dr. Stuart From, an Englewood allergist, has added office hours and still has patients clamoring for appointments.

**BY THE NUMBERS:** A pollen count of more than 1,500 is a red alert day for allergy sufferers. Here are the five worst days this season for tree pollen in North Jersey (grains of pollen per cubic meter):

- April 24: 2,988
- April 25: 2,625
- April 30: 2,354
- May 8: 2,297
- May 6: 1,985
- Tuesday's count: 1,856

Source: American Academy of Allergy, Asthma and Immunology

A very early and wet spring has caused trees to produce unprecedented amounts of pollen — the yellow powder floating through the air, coating car windshields, clogging rain gutters and causing misery to allergy sufferers.

"Normally, we see five to 10 days of peak [tree pollen] production, said Dr. Leonard Bielory, director of the Allergy and Asthma Research Center at the University of Medicine and Dentistry's New Jersey Medical School.

This year, peak pollen production is in its third week — and likely to keep going for another seven to 10 days, he said.

The tree pollen count soared on April 24 to 2,988 grains per cubic meter of air, and has registered "very high concentrations" since then on nine of the 14 days measured. On Tuesday, the tree pollen count was 1,856 grains per cubic meter, well into the red zone for allergy sufferers.

Added to that, the warmth and moisture from recent rains led to a spike in mold spores.

That's bad news for people like Susan Han, 33, of Fort Lee, who visited From's office Tuesday in search of relief. Claritin, Zyrtec and Allegra hadn't cut her symptoms.

"It's been horrifying to get through the day," she told From. Her eyes itch and tear, making it difficult to see. She had rubbed her eyes so much she thought she might have hurt them. Over-the-counter eye drops didn't help.

From, chief of the allergy division of Englewood Hospital and Medical Center, took a history and did a series of allergy tests.

"There's a lot we can do for you," he said, after determining that Han was allergic to mold, ragweed, mixed weeds, dust mites, feathers, dogs and cats. He prescribed eye drops containing small doses of steroids to calm the inflammation, as well as stronger antihistamines.

Another patient, Elayne Matusow, also of Fort Lee, has suffered with allergies for years. Normally, she takes antihistamines to control the symptoms. This year, that wasn't enough.

Like many patients, she developed a secondary bacterial infection after having been congested for so long. A fever, sore throat and several sleepless nights with a cough led her to the doctor, who prescribed antibiotics, cough medicine and a combined course of prescription-strength Allegra and Zyrtec.

By the time she visited From for a follow-up Tuesday, two days after starting the antibiotic, she felt much better.

The season has been so bad that it's hard to find over-the-counter allergy medications at some pharmacies.

This is the first spring allergy season that Zyrtec has been available without a prescription, but that didn't help Melissa Brown, 28, a patient of Dr. Bielory. She couldn't find it anywhere.

"I'm miserable," she said. "My eyes are bloodshot red, and my nose is all sloppy. I've been like this for weeks. Every year I get it worse and worse."

Peggy Ballman, a spokeswoman for McNeil Consumer Healthcare, Zyrtec's maker, acknowledged that "some consumers have found their local store is temporarily out of stock." The drug was the No. 1 prescribed allergy medication in the United States before it became available without prescription in January.

"We're working through this with our retail partners to ensure that Zyrtec is readily available for consumers," Ballman said.

Is there hope on the horizon for allergy sufferers?

"It should have ended about a week and a half ago," Bielory said. "But it will probably last into June."

Said Michelis: "In two weeks, if you're not allergic to grass pollen, you'll feel better."

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**Reuters News**  
**Pfizer CFO not obliged to do mid-size deals**  
**May 13, 2008**  
**By Ransdell Pierson**

NEW YORK, May 13 (Reuters) - The chief financial officer of Pfizer Inc on Tuesday said the company does not feel obliged to buy mid-size drugmakers, in the \$10 billion to \$15 billion price range, before its Lipitor cholesterol drug loses U.S. patent protection by 2012.

"We don't think we have to do them," Frank D'Amelio said in an interview when asked about assertions by some industry analysts that Pfizer needs to make deals of that size in order to obtain new medicines to offset expected lower sales of Lipitor.

"If they make good sense, we'll consider and possibly do them, but not 'have to' or 'need to,'" D'Amelio said.

Pfizer in recent years has focused on far smaller transactions, typically licensing deals for individual products made by biotechnology companies that are not yet approved for sale.

Many industry analysts have urged Pfizer to instead go after bigger prey, including companies like Biogen Idec that already have big-selling products on the market.

"Last year we did a series of smaller deals; this year we've done some smaller deals," D'Amelio said, adding that Pfizer would continue to be "very prudent" about future transactions.

Pfizer has said it is not interested, however, in any "mega-deals" -- meaning purchases of the largest U.S. and European drugmakers -- because of inherent problems of companies that size.

Pfizer itself became the world's biggest drugmaker with two earlier mega-mergers. It paid \$114 billion in 2000 for its longtime partner Warner-Lambert Corp, thereby gaining full ownership of Lipitor, and spent \$60 billion in 2003 for Pharmacia Corp.

Thanks to job eliminations and other cost savings from the two mergers, Pfizer for several years boasted the highest earnings growth in the industry.

But earnings growth has suffered during the past two years from generic competition for a number of its medicines, including allergy drug Zyrtec and Norvasc for high blood pressure, and the company's inability to develop many big-selling products to provide replacement revenue. (Editing by John Wallace, Gary Hill)

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**Chicago Tribune**  
**J&J shares feel little under the weather**  
**May 11, 2008**  
**By Andrew Leckey**

Question: Can I expect my shares of Johnson & Johnson to increase in price soon?

-- F.C., via the Internet

Answer: Even the world's largest health-care firm has its ups and downs.

On the up side, its Band-Aid, Listerine, Motrin IB, Neutrogena, Stayfree, Carefree, Sudafed and Tylenol are familiar over-the-counter products for consumers.

It is regularly listed among Fortune's "Most Admired Companies," and its board of directors is highly regarded.

Profit rose 40 percent in the first quarter, thanks in part to new over-the-counter sales of the allergy drug Zyrtec, solid sales of inflammatory disease treatment Remicade and a boost in foreign revenue because of a weak dollar.

More than two-thirds of its products are No. 1 or No. 2 in their markets. Aging baby boomers requiring more health-care services are a positive sign for its future.

On the down side, however, the firm introduced no new products in the quarter, and it is cautious in its outlook for the rest of this year.

Sales of its Procrit and Eprex anemia drugs declined on concerns about blood clots, which led to a label change and more study, while sales of its Cypher drug-eluting stent used to prop open coronary arteries also are down on health concerns.

Shares of Johnson & Johnson are down slightly this year after a gain of 1 percent last year. It increased its quarterly dividend by 11 percent and has a \$10 billion share repurchase program in full swing.

Johnson & Johnson loses patent protection for anti-psychotic drug Risperdal in June and has voluntarily recalled a version of popular pain patch Duragesic because of manufacturing problems that could result in accidental overdose.

The Food and Drug administration warned doctors of a possible link between the firm's Prezista HIV drug and liver damage. The agency is also looking at a study that suggests diabetics using the drug Regranex have higher rates of cancer.

Johnson & Johnson earnings are expected to rise 7 percent this year and 5 percent next year, according to Thomson.

Q: Is the MFS Value Fund a good investment? It has been recommended.

-- L.M., via the Internet

A: It is a consistent blue-chip value fund that doesn't get into restructuring or bankruptcy plays. Holding about 100 primarily domestic stocks in its portfolio, it spreads around risk and keeps volatility to a minimum.

It is also the largest fund in the MFS family, with \$16 billion in assets.

MFS Value Fund "A" (MEIAX) is down 5 percent during the past 12 months and has a three-year annualized return of 10 percent. Both results rank in the top one-fifth of large value funds.

"While I like this fund the best of the MFS domestic equity funds, it is not an analyst pick because there are better large-cap value funds out there," said Andrew Gunter, analyst with Morningstar Inc. in Chicago. "However, it is a good fund if, say, your 401(k) plan offers mostly MFS funds or you are limited for other reasons, for it is a good one to buy if you're a long-term investor."

Nearly one-fourth of MFS Value holdings are in financial services, with other significant concentrations in energy and industrial materials. Its top holdings are Lockheed Martin, Altria Group, Allstate, Exxon Mobil, Total SA, Metropolitan Life Insurance, Johnson & Johnson, Bank of America, AT&T and Bank of New York Mellon.

This fund requires a 5.75 percent "load" (sales charge) and \$1,000 minimum initial investment. Annual expense ratio is 1.11 percent.

Andrew Leckey is a Tribune Media Services columnist. E-mail him at [your@moneytribune.com](mailto:your@moneytribune.com).

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**Bristol Herald Courier - McClatchy-Tribune Press Release  
Massive Pollen Assault Triggers Sneezes, Runny Noses, Etc.  
May 10, 2008**

May 10, 2008 (Bristol Herald Courier - McClatchy-Tribune Information Services via COMTEX) -- Spring has sprung, and so has allergy season.

During this time of year, pollen pursues its mission of fertilizing various flowering plants. But tree pollen is especially heavy this spring, and unintended targets, such as human noses, eyes, throats and lungs aren't enamored by these frisky particles.

"The pollination is stronger this year, and this already is one of the most allergenic areas in the nation," said Dr. Marek Pienkowski, with Bristol Tennessee's Allergic Diseases Asthma & Immunology Clinic. "The number of days on which there are alerts for excessive amounts of pollen in the air is increasing, and the biggest contributor right now is maple tree pollen."

Pienkowski knows his sniffles and sneezes. He is a graduate of Johns Hopkins Medical School, specializing in allergies and immunology.

"We've had a cold start to spring, and the pollen had been relatively dormant," he said. "The temperatures have increased suddenly. Mix that with the generous amount of rainfall we've been getting, and you have a greater-than-normal dispersal. The pollen has gone into overdrive. It's trying to catch up."

Pollens are tiny, egg-shaped male cells of flowering plants. The granules that come from bright flowers, such as roses, usually do not trigger allergies. These waxy pollens are carried by bees and other insects.

On the other hand, many trees, grasses and low-growing weeds have small, light, dry pollens that are well-suited for airborne flight on their own. And when the stuff starts to fly, some of us handle the irritating particles better than others.

The immune systems of people with allergies basically react too fast and work too hard when relatively harmless gunk like pollen happens to waft their way.

Symptoms from allergic reactions to what doctors call pollen allergy, or hay fever, include sneezing, coughing, itching, runny noses and watering eyes.

Pollens are the most frequent troublemakers. But other undesirables can also cause allergic reactions: mold spores, housedust mites, animal dander, foods, insect bites or stings, plants, viruses, bacteria, medications and certain environmental conditions.

"We really only have two times during the year when pollen, mold and spores are very low -- that's from late July to early August, and the coldest winter months," Pienkowski said. "Right now, I would not advise exercising outdoors, especially in the morning."

People suffering from mild allergic reactions because of seasonal allergies should be OK with over-the-counter medications, such as Claritin or the recently introduced Zyrtec. But for those whose suffering demands more attention, the doctor suggests vaccine therapy.

"An allergy is an immunological imbalance, and the only way we can effectively deal with allergies is with special vaccines," he said. "The vaccines must be developed on a case-by-case basis, but they are extremely successful."

Balancing the immune system is a growing, worldwide problem. About 30 percent of Americans suffer from allergies, but only 7 to 8 percent of people in underdeveloped countries have such problems, he added.

"One reason for this is the overuse of antibiotics in the U.S. and other industrialized countries," he said. "People's systems develop a tolerance from antibiotics, and that's when a bacteria introduced to the body can really do harm. You don't see that in some countries, even those where people are living in squalor."

Meanwhile, back in Southwest Virginia and Northeast Tennessee, there is good news and bad news. Pienkowski says the tree pollen counts should start thinning out in a few weeks. Unfortunately, that's about the time pollen from grasses and weeds will begin making their pilgrimages.

"The tree pollen starts in March and the grass starts in May, so they're overlapping, and I'd say the grass pollen season is going to be worse," said Dr. Neil Wallen, a certified immunologist with Highlands Allergy & Asthma Center, also in Bristol, Tenn.

The area is undergoing a "pretty severe" pollen season, but that fact holds true almost every year about this time, he said.

On Thursday, the pollen count, which is measured in parts per cubic meter, was 300 grains, or particles. Surprisingly, the mold spore count was five times that at 1,500 parts per cubic meter, Wallen said.

"Today I saw two people that were very debilitated from allergies, and they had just been sitting at home with wet cloths on their eyes," he said Thursday. "When I see a patient, I ask myself, 'how much are these symptoms interfering with their lives?' Another thing I look for is whether they are having problems with their lungs."

Wallen advised people the best single defense to fend off pollen is to keep the windows in their vehicles rolled up.

He agreed with Pienkowski that mild allergic symptoms can be treated with over-the-counter antihistamines.

"The next step would be prescription medicines, including nasal sprays," he said. "The next step would be allergy shots which are used to suppress one small part of the immune system."

Wallen said it is too early to tell if the coming grass pollen season will produce more symptoms in people prone to allergies.

Pollen.com is Web site that provides daily updates on allergy alerts and conditions, and ranks the density of airborne pollen on a scale from 1-10, with 10 being the most severe.

On Thursday, Mountain Empire region came in at 4.5, which is in the low to medium range.

That ranking is projected to rise today to 8.2. The medium to high ranking stems mainly from maple, hickory and mulberry trees and is likely to affect a large number of people who suffer from seasonal allergies.

The number is projected to drop back down Sunday and Monday to the low to medium range, according to the site.

"I would say the number of people coming in here suffering from allergies has definitely picked up, especially over the past three weeks," said Craig Jones, a CVS pharmacist in Bristol, Va. "We normally see a lot of allergies in spring and fall, but this spring we're seeing a pretty large increase."

Tree pollen and mold appear to be causing most allergies in the area this spring. Mold, which produces spores that enter the air, is thriving thanks to rains seen in the region so far this year, Jones said.

"Most people, they come in and go right for the cough suppressant," Jones said. "But what they really need more is an antihistamine."

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What are allergies?

--Allergies are the immune system's exaggerated response to a foreign substance. Normally harmless substances, such as pollen, cause the immune system to react as if the substance is harmful. Substances that cause allergies are called allergens.

What are the symptoms of allergies?

--Mild reactions include symptoms affecting a specific area of the body such as a rash, hives and watery eyes.

--Moderate reactions include symptoms that spread to other parts of the body. Symptoms include itchiness, hives and difficulty breathing.

--Severe reactions, known as anaphylaxis, are life-threatening reactions in which the body's response to an allergen is sudden and affects the entire body, including swelling of the throat, cramps and confusion or dizziness.

Source: Cleveland Clinic

To check current local allergen levels, types of common pollens and information on symptoms and remedies, visit [www.pollen.com](http://www.pollen.com). A pollen index also is published daily in the Bristol Herald Courier with the weather forecast. Tri-City Medical Research is conducting a study on a drug recently approved by the Federal Drug Administration. For information on how to participate, call (423) 989-3105.

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**Daytona Beach News-Journal Online (FL)**  
**Locals accused in \$77 million Internet drug scheme**  
**May 10, 2008**  
**By Julie Murphy**

DAYTONA BEACH -- They served up 44 million doses of prescription drugs over three years that, prosecutors say, brought in \$77 million, and now the three current and former Volusia County ringleaders are named in a 73-count indictment filed by federal prosecutors Friday.

In addition to the drug sales done over the Internet, Jude LaCour, 35, formerly of Daytona Beach, and his father, Jeffrey LaCour, 60, of South Daytona are accused of money laundering. Hudson Smith, 36, of DeLand also was indicted -- along with eight others, seven of them doctors, from across the country -- for drug-trafficking offenses, according to U. S. Attorney Robert O'Neill.

Controlled substances and other prescription drugs were distributed through Jive Network to customers throughout the United States who did not have valid prescriptions, according to the indictment.

Jude LaCour owned and operated Jive Network, the indictment states. Smith was the director of pharmacy and physician operations.

Jeffrey LaCour, the company's director of operations, was a Daytona Beach mayoral candidate in 1981 when he led an anti-pornography movement. His criminal history includes a 1986 conviction for practicing chiropractic medicine without a license.

Jive Network sold controlled substances, mostly stimulants and depressants, using Internet sites and customer service representatives who were located at its office in Daytona Beach, according to a release from O'Neill's office.

Customers, without prescriptions, purchased drugs online and paid the costs by credit card or money order, the report states.

Health history questionnaires were completed as part of the process, but customer identities were not verified and medical records were not required. Additionally, the indictment says Jive Network doctors approved and issued drug orders for personal profit rather than to diagnose and treat medical conditions between 2002 and 2005. The doctors were paid a fee for each questionnaire they reviewed.

"The 'prescriptions' they issued for Jive Network customers were invalid," the indictment states.

The LaCours and Smith recruited these doctors and pharmacies, according to the indictment.

"I don't think it's true," said Judson Rogers, a neighbor and friend of Jeffrey LaCour. "I have no reason to believe he would do anything like that, and I won't until he's convicted."

Investigators obtained a letter written by Smith and dated Aug. 20, 2004, that outlines the operation.

In that letter addressed to "Alex," Smith says Jive represents more than 100 online prescription Web sites. "Our pharmacies make between \$3,000 and \$10,000 profit per day fulfilling for us," Smith said.

Jive paid \$4.50 for each prescription that was processed on top of the costs of pills and shipping.

Viagra, Zyrtec, Seasonale, Flonase, Diflucan and Celebrex are among the prescription drugs dealt through Jive, according to Smith's letter.

In the indictment, O'Neill's office singled out sales for the controlled Schedule III and IV substances Didrex, Phendimetrazine, Bontril, Phentermine and Adipex-P, drugs that are described in the indictment as "potentially harmful" and "addictive."

The LaCours are accused of counts 35 through 73 of the indictment involving the wire transfer of funds to conduct their business and money laundering. Count 73 was a \$2 million transfer from Jive Network's Wachovia bank account to Jude LaCour's Morgan Stanley Dean Witter account, the indictment states.

The LaCours could forfeit any and all traceable property as a result of money laundering. This includes money and investments in 24 separate accounts and Jude LaCour's Daytona Beach home on Pleasant Valley Drive.

The FBI, the Internal Revenue Service and the Food and Drug Administration investigated this case.

Ultimate Vitality, formerly located at 420 Fentress Blvd. and owned by Jude LaCour, was raided in 2005.

Smith, reached by phone Friday evening, would not comment.

Jeffrey LaCour could not be reached by phone and was not at home. His Orlando attorney Cheney Mason did not respond to phone or e-mail messages Friday.

Neither Jude LaCour nor his attorney in Pennsylvania could be reached.

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### **Tahlequah Daily Press**

#### **Wheezing, sneezing, maybe breathing: Which OTC allergy medicines are best?**

**May 9, 2008**

May 09, 2008 (Tahlequah Daily Press - McClatchy-Tribune Information Services via COMTEX)

A sneeze, a cough, a runny nose -- -- welcome to the spring allergy season. If you don't experience them, someone you know does.

Symptoms often attack at the most inopportune times, like that all-important school play, a phone interview, a baseball game or any other event.

An over-the-counter allergy medicine may be the answer.



"For upper respiratory [allergies], i.e., itchy, watery eyes, you'll want an antihistamine," said Rick McAuliff, doctor of pharmacy.

McAuliff spent Wednesday filling in for the usual pharmacist at Drug Warehouse.

"Antihistamines range from the traditional Benadryl, to the more user friendly Claritin once-a-day," said McAuliff.

There's also the popular Zyrtec, which recently became available over the counter. A bottle with enough pills to last more than a month costs less than \$30 over the counter.

Antihistamines, said McAuliff, can come with or without a decongestant, which removes mucus from the upper respiratory tract when present in medication.

According to statistics on [medicinenet.com](http://www.medicinenet.com), the U.S. spends more than \$10 billion per year on allergies. Furthermore, it is estimated some 50 million in the U.S. are affected by some form of allergy.

Pat Welch fights allergies in all sorts of places.

"Animals, certain flowers and plants," said Welch. "It seems like a bunch of people have runny noses right now. I mean, there are people who never fight allergies who are coughing all the time right now."

Allergies are definitely a nuisance for 17-year-old Shelton Hannover.

"Sneezing. I do that all the time," said Hannover.

But not long ago, Hannover was introduced to a nasal spray he says puts a halt to sneezing temporarily.

"Took me a while to get used to [using] it, but I'm used to it now," he said. "And I don't use it as much anymore."

For lower respiratory issues, like chest congestion, McAuliff said medications like Mucinex will do the job.

"Or generic forms," he said, "and those, too, come with or without a decongestant."

McAuliff said there's not a big difference between name-brand relief and generic forms.

"By law, [generic brands] have to be bio-equivalent," said McAuliff. "They must contain the same medication, and the same amount."

McAuliff says children age 6 or younger should see a doctor before taking OTC medications.

"Children older than 6, and adults, can benefit from OTC products," said McAuliff.

Learn more

For more information on allergies, including medications, expert views, procedures and tests, and related conditions and allergy news, visit [www.medicinenet.com/allergy/index.htm](http://www.medicinenet.com/allergy/index.htm).

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**Reuters**

**Longs Drug April same-store sales hurt by Easter shift  
May 8, 2008**

May 8 (Reuters) - Longs Drug Stores Corp posted a 1.5 percent drop in April sales at stores open at least a year, hurt by the shift of Easter to March.

The drugstore chain's same-store sales of "front-end" goods, such as shampoo and candy, fell 2.4 percent in April due to the early Easter.

Easter fell on March 23 this year compared with April 8 last year, making it the earliest Easter since 1913, according to the National Retail Federation.

Longs, whose stores fill prescriptions and sell health and beauty aids, convenience foods and greeting cards, said pharmacy same-store sales fell 0.5 percent.

Longs Drug Stores, like its larger rivals Walgreen Co , CVS Caremark and Rite Aid , has lately been plagued by sluggish holiday sales and cheap generic drugs cutting into sales.

The switch of the prescription allergy medicine Zyrtec to over-the-counter status and a mild conclusion to the cold and flu season versus last year also hurt pharmacy same-store sales, the company said in a statement.

Total retail drug store sales rose 0.4 percent to \$366 million for the month, while 2.9 percent to \$1.22 billion for the thirteen-week period ended May 1.

Shares of the company were down 70 cents at \$43 in trading after the bell. They had closed at \$43.70 Thursday on the New York Stock Exchange. (Reporting by Dilipp S. Nag in Bangalore; Editing by Himani Sarkar)

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**About.com**

**Hard to Control Allergies**

**May 7, 2008**

**By Vincent Iannelli, M.D.**

About.com Health's Disease and Condition content is reviewed by Kate Grossman, MD

Many kids have seasonal allergies that get worse in the spring.

Allergies are easy to treat for many children, they simply take an allergy medication, such as Allegra1 (fexofenadine), Claritin2 (loratadine), Singulair3 (montelukast), or Zyrtec4 (cetirizine), and their allergy symptoms get under easy control.

Other children have more hard-to-control allergies though, and suffer either with their allergy symptoms5 or try many different allergy medicines without relief. It is much better to get help to learn treat your child's allergies more effectively.

**Hard-to-Control Allergies**

To help treat your child's allergies, it can be helpful to:

- avoid allergy triggers as much as possible
- figure out what is triggering your child's allergies with a symptom diary or allergy testing
- consider giving your child his allergy medicine every day, especially during his allergy season

- make sure your child is taking the right medication for his allergy symptoms
- consider a combination of medications, such as an antihistamine and a nasal steroid
- try nasal washes to clear allergens, irritants, and mucus from your child's nose
- consider allergy shots if your child has moderate to severe allergy symptoms that are hard to control
- see a pediatric allergist to evaluate and manage your child's allergies

#### Allergy Triggers

Avoiding those things that trigger your child's allergies (allergens) would seem like the easiest and best thing to prevent and control allergies, unfortunately that isn't always easy to do. It can be if you are allergic to things like cats or dogs, and you don't have any pets, or if you are only allergic to East Texas trees and you live in California.

But what if you are allergic to cats and you own a cat or if you are allergic to East Texas trees and you live in East Texas? Allergen avoidance becomes a little harder then.

How do you even know what is triggering your child's allergies and what allergens to avoid?

One technique is to simply try and avoid all of the most common things that trigger allergies, especially by controlling indoor allergens<sup>6</sup>:

#### Dust Mites

- place a zippered allergy proof cover on your child's mattress, box spring, and pillow to avoid dust mites that often live in beds
- wash all bedding in hot water (130 degrees F) at least every two weeks
- remove dust collectors from your child's bedroom, including carpets, heavy curtains, and stuffed animals, etc., and try to minimize the use of carpets and upholstered furniture in the rest of your house
- avoid humidifiers and consider using a dehumidifier, as dust mites like humidity
- use a vacuum that includes a HEPA filter, but only when your child is not in room

Pet Dander - don't get a pet if your child seems to be allergic to it, keep pets outdoors and off furniture and your child's bedding, use a HEPA air cleaner, and wash pets weekly. Keep in mind that it can take as long as four months to get pet dander out of a home when you find a new home for your pet if you find that your child is allergic to your cat or dog,

Mold - molds are allergens that can be present both inside and outside the home. You can avoid outdoor mold by checking mold counts (they are usually higher after it rains), and avoiding dark, wet areas around your home. Indoor mold can often be controlled by decreasing humidity and quickly cleaning areas damaged by water spills or leaks, to prevent the growth of mold in your home.

Pollens - pollens from trees, grasses, and weeds typically cause seasonal allergy symptoms. Although you can't avoid these allergens unless you never go outside, you can reduce your child's exposure by: keeping windows closed in your home and car  
 avoid outdoor activities when pollen counts are very high and/or it is windy  
 take a bath or shower or at least change clothes and wash your child's hands and face after being outdoors on high pollen days  
 consider using a HEPA air cleaner inside your home

Cockroaches - controlling cockroaches inside your home, since their droppings are a common indoor allergen and can trigger both allergies and asthma symptoms, is a good idea if you are trying to avoid common allergy triggers.

#### Allergy Symptom Diary

If you aren't having much luck controlling your child's allergies by simply trying to avoid common allergy triggers, you can try to keep an allergy symptom diary to try and narrow down exactly what your child is allergic to.

As with other symptom diaries, just record all of the things that your child recently did around the time that his allergy symptoms worsened, and look for things like allergy symptoms that are:

- worse on a rainy day (mold allergy)
- worse on a windy day (pollen or mold allergy)
- better on a rainy day (pollen allergy)
- worse when your child mows the lawn or is around someone that is mowing the lawn (mold allergy)
- worse after exposure to a specific pet, like your friend's cat, or simply after exposure to someone who owns a cat (pet dander)
- worse when you vacuum in the house (dust mites)
- worse when specific pollen or mold counts are high (pollen or mold allergy)

Over time, your child's allergy symptom diary may help you figure out what is triggering your child's allergies and what you need really need to try and avoid.

#### Allergy Testing

If you can't figure out what is triggering your child's allergies with an allergy symptom diary, and trying to avoid common allergens isn't working, then allergy testing<sup>7</sup> may be helpful for your child.

Although many parents don't consider allergy testing because they think their child is too young or because allergy testing is too painful, it is an important tool that can be done relatively painlessly at almost any age.

In addition to the traditional skin prick testing that is usually done by an allergist, your pediatrician may be able to order the Immunocap CAP-RAST test, which is a blood test that can check for antibodies to many different allergens, including foods, pollens, mold, etc.

An itchy nose is a classic sign of allergies.

Photo ? Rebecca EllisAllergy Medicines

In addition to avoid allergy triggers, your child with allergies will likely need to take one or more allergy medicines<sup>8</sup> to help control his allergy symptoms, including some that are now available over-the-counter.

Keep in mind that for the child with hard-to-control allergies, choosing the right allergy medication can take a little more thought than choosing one off of the shelf at the pharmacy.

Allergy medicines include:

Antihistamines (first generation, meaning older) - usually very sedating

- Diphenhydramine (Benadryl)
- Chlorpheniramine (Extendryl, AH-Chew)
- Brompheniramine (Ala-Hist)
- Antihistamines (second generation)
- Allegra
- Clarinex<sup>9</sup> (desloratadine)
- Claritin
- Xyzal<sup>10</sup> (levocetirizine)
- Zyrtec
- Leukotriene Antagonists - Singulair
- Nasal Steroids
- Flonase (fluticasone)

- Nasocort AQ (triamcinolone)
- Nasonex11 (mometasone)
- Rhinocort Aqua (budesonide)
- Veramyst (fluticasone)
- Nasal Antihistamines - Astelin12 (azelastine)
- Allergy Eye Drops
- Acular13 (ketorolac)
- Optivar (azelastine)
- Pataday14 (olopatadine) - once a day
- Patanol15 (olopatadine)
- Zaditor16 (ketotifen) - over-the-counter

With so many choices, how do you know which allergy medicine will be best for your child?

Your pediatrician will likely start with an age-appropriate allergy medication, either a second-generation antihistamine or Singulair. If that doesn't work, the next step will likely be to change to a different medication.

For the child with continued allergy symptoms, your pediatrician may add in a second allergy medication, typically a nasal steroid.

Keep in mind that some allergy medications do a better job of treating certain allergy symptoms than others. For example, antihistamines usually do not relieve congestion, while Singulair and nasal steroids do.

Allergy eye drops can also be helpful if your child's main allergy symptoms are red, itchy eyes.

A decongestant, either by itself, or in combination with another allergy medication, such as Allegra-D, Claritin-D, or Zyrtec-D, is also sometimes helpful for children with hard-to-control allergies.

#### Allergy Shots

Allergy shots<sup>17</sup> are overlooked as an option to treat children with hard-to-control allergies. Some parents don't think that they are available for children, while others don't think that children will tolerate getting allergy shots every week.

Children can actually start getting allergy shots as young as age five and for those kids who need them, the benefits usually outweigh any possible downsides, such as side effects, the cost of therapy, the inconvenience of getting allergy shots once or twice a week, the high probability of a relapse of allergy symptoms when you eventually stop the allergy shots, and the fact that younger school-age children may not want to get shots at all.

On the other hand, your child likely doesn't want to suffer with allergy symptoms<sup>18</sup> every day, especially if he has hard-to-control allergies that aren't responding to allergy medications and attempts to avoid allergy triggers. And in the long run, the cost of allergy shots may be less than the cost of your child's allergy medications.

Allergy shots can also have the added benefit of preventing your child from developing new allergies or to keep simple allergies from progressing to asthma<sup>19</sup>.

How often will your child need to get allergy shots? It depends, but children usually get allergy shots one or two times a week for three to six months during their initial build-up phase. The time between allergy shots is then increased to every two to four weeks during the child's maintenance phase, which can continue for three to five years.

Because your child will get allergy shots so often, it shouldn't be surprising that one of the biggest reason that some parents stop allergy shots early is that they are inconvenient to get. Taking a child out of school once or twice a week to get an allergy shot can be especially difficult. Seeing an allergist that is near your home can be helpful, especially one that gives allergy shots during after-school hours.

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**The News Journal Online (MD)**

**DELAWARE: April pollen count an all-time high**

**May 7, 2008**

**By Hiran Ratanayake**

The jeep in Beth Keen's driveway isn't yellow. The vehicle only looked that way in recent weeks because it was blanketed in tree pollen. The same yellow haze coated her grill and outdoor hot tub.

"It just looked like a yellow powder had been sprinkled over things," said Keen, who lives in Bear. "It was everywhere."

Tree pollen plays havoc with her 11-year-old son, Arden Jr., causing him to cough, sneeze, and, one time, vomit.

"You could tell that he was just deteriorating. You could just see him dwindling," she said. "I think the season is worse this year than it ever was before."

She might be right. Delaware's pollen counts in April were the highest ever recorded.

In typical seasons, the peak tree pollen count is about 1,900 pollen grains per cubic meter of air. In late April, the count was 3,256, the highest springtime count since the Delaware Department of Natural Resources and Environmental Control began this kind of sampling 15 years ago. Since then, it has eased a bit.

Trees, weeds and grasses release tiny particles of pollen, which are carried on currents of air to fertilize plants. This year, lighter-than-normal rainfall in March and April left more of the pollen in the air to drift into noses and throats, leading to itchy eyes, runny noses, hacking and trips to the drugstore.

Jeanne Carrera, who works at a Wilmington law firm, said she suffers from "itchy eyes and runny nose" each spring. Yet she was determined to head outdoors during her lunch break.

"You gotta exercise somehow," she said during her workout in Brandywine Park. "I don't want my allergies to interfere with whether I can walk or run."

She gets allergy shots twice a year and takes Zyrtec, approved for over-the-counter use this season by the Food and Drug Administration. Claritin, another allergy drug, has been available without a prescription for years.

"Right now, when the flowers start blooming, I'm congested," Carrera said.

The American Academy of Allergy, Asthma and Immunology lists tree pollen counts above 1,500 as very high. Counts above 90 are considered high. DNREC's count in early March was above 100. Normally at that time, it's about 12 or less.

Heavy counts are due to light rainfall. When pollen spores meet water, they become too heavy to stay in the air, a relief for allergy sufferers. Delaware got between 2 and 6 inches of rain in April, based on data from the National Weather Service. Last year, that total was between 10 and 15 inches.

"When there's less rain, it's going to make [the season] worse because more of the pollen is going to still be in the air," said Michael McDowell, laboratory technician for Air Quality Management at DNREC. "It's governed by the weather."

Shutting windows and doors keeps out some pollen, but hermits aren't immune. Genetics plays a role in how bad a person's allergies get, said Dr. Joel Temple, an allergist in Dover.

After tree pollen subsides, grass pollen becomes more prominent in May and June, followed by ragweed at the end of summer.

"We're having a surge right now" with the tree pollen, Temple said.

Arden Keen Jr. didn't think this season would be any worse than last year's. He participated in a roadside cleanup with his Boy Scout troop on the last Saturday in April. He went home and did some yard work. Until his allergies kicked in, that is.

"I'd keep coughing over and over and over again and I couldn't seem to stop it," he said.

Sudafed used to keep his allergies in check, but that wasn't enough. His doctor put him on an albuterol inhaler, a nasal spray and Zyrtec.

Arden said the medicines are "working like a charm."

While at Killens Pond State Park in Felton for a Boy Scout camp out, another boy had to leave because of allergies, but Arden was fine.

"I felt like it was probably going to be me next, that I was going to be the next victim," Arden said, "but my allergies weren't bothering me at all."

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#### **Perrigo Company Press Release**

**Perrigo Reports Record Sales and Earnings for Third Quarter Fiscal 2008; - Third quarter revenue increased \$141 million, or 39 percent, to \$504 million on important new product launches; - GAAP net income increased 134 percent to \$40 million, or \$0.42 per share; - Adjusted net income increased 100 percent to \$44 million, or \$0.47 per share; - Refined full year fiscal 2008 adjusted earnings guidance to be in a range of \$1.55 to \$1.60 per share, with a tax rate in a range of 23% to 27%**

**May 6, 2008**

ALLEGAN, Mich., May 6 /PRNewswire-FirstCall/ -- Perrigo Company (Nasdaq: PRGO; TASE) today announced results for its third quarter fiscal year 2008 and nine months ended March 29, 2008.

Perrigo Company

(in thousands, except per share amounts)

	Third Quarter		Nine Months	
	2008	2007	2008	2007
Net Sales	\$503,707	\$362,288	\$1,321,930	\$1,073,132
Net Income	\$39,967	\$17,056	\$108,275	\$55,026
Adjusted Net Income	\$44,264	\$22,082	\$112,572	\$60,470
Diluted EPS	\$0.42	\$0.18	\$1.14	\$0.59
Adjusted Diluted EPS	\$0.47	\$0.24	\$1.18	\$0.65
Diluted Shares	94,955	93,298	95,115	93,604

These reported results include an acquisition-related write-off of the in- process research and development (IPR&D) of \$2.0 million after-tax and a charge for the write-off of the step-up of inventory acquired of \$2.1 million after-tax, both related to our January 9, 2008 acquisition of Galpharm Healthcare, Ltd., a leading supplier of over-the-counter store brand pharmaceuticals in the United Kingdom. (Refer to Table II at the end of this press release for additional adjustments in the current year and prior year periods and additional non-GAAP disclosure information.)

### Third Quarter results

Net sales for the third quarter of fiscal 2008 were a record \$503.7 million, an increase of \$141.4 million, or 39 percent, compared with \$362.3 million last year. Reported net income was \$40.0 million, or \$0.42 per share, compared with net income of \$17.1 million, or \$0.18 per share a year ago. In the third quarter of fiscal 2008 and fiscal 2007, the Company recorded several net of tax charges, summarized as follows:

	2008	2007
-- Write-off of IPR&D	\$2.0	\$4.8
-- Inventory step-up	2.1	-
-- Restructuring	0.2	0.2
	\$4.3	\$5.0

Excluding the impact of the charges noted above, adjusted net income for the third quarter of fiscal 2008 was \$44.3 million, or \$0.47 per share. For the third quarter of fiscal year 2007, adjusted net income was \$22.1 million, or \$0.24 per share.

(Refer to Table II at the end of this press release for additional non- GAAP disclosure information.)

Perrigo's Chairman and CEO Joseph C. Papa commented, "For the second quarter in a row, we delivered record sales and earnings with successful launches of two of the largest products in our 120 year history, Omeprazole and Cetirizine. We also began shipping products from our Galpharm acquisition in the United Kingdom and launched Clobetasol Foam in Rx. The results this quarter clearly show the benefits of our long term commitment to our new product pipeline."

### Nine Months Results

Net sales for the nine months ended March 29, 2008 were \$1,321.9 million, compared with \$1,073.1 million last year, an increase of \$249 million, or 23 percent. Reported net income for the nine months was \$108.3 million, or \$1.14 per share, compared with \$55.0 million, or \$0.59 per share last year. In the first nine months of fiscal 2008 and fiscal 2007, the Company recorded several net of tax charges, summarized as follows:

	2008	2007
-- Write-off of IRP&D	\$2.0	\$4.8
-- Inventory step-up	2.1	-
-- Restructuring	0.2	0.6
	\$4.3	\$5.4

Excluding the impact of the charges noted above, adjusted net income for the nine months of fiscal 2008 was \$112.6 million, or \$1.18 per share. For the nine months of fiscal 2007, adjusted net income was \$60.5 million, or \$0.65 per share.



(Refer to Table II at the end of this press release for additional non- GAAP disclosure information.)

#### Consumer Healthcare

Consumer Healthcare segment net sales for the quarter were a record \$373 million, up \$111 million, or 42 percent, compared with \$262 million last year. The sales increase included \$97 million in new product revenue, led by Omeprazole and Cetirizine, strong sales in the cough/cold, analgesic and smoking cessation product categories. Reported operating income was \$51.7 million, compared with \$21.9 million last year. Adjusted operating income was \$54.9 million, compared with adjusted operating income of \$22.2 million a year ago.

On December 28, 2007, Perrigo announced it received final approval from the FDA for its Abbreviated New Drug Application (ANDA) for OTC Cetirizine Hydrochloride Tablets, 5 and 10 mg. The product is being marketed under store brand labels and is comparable to McNeil Consumer Healthcare's Zyrtec(R) Tablets. Store brand shipments began in January.

On January 9, 2008, the Company announced it acquired Galpharm Healthcare, Ltd., a leading United Kingdom-based supplier of over-the-counter store brand products, for approximately \$87 million. The acquisition is expected to add more than \$55 million in net sales annually and be accretive to earnings in the first 12 months.

On March 4, 2008, Perrigo announced that it began shipping 20 mg Omeprazole delayed released tablets to its retail customers. This product delivers the same medicine at the same dose as Prilosec OTC(R) and is indicated for the treatment of frequent heartburn.

For the first nine months of fiscal 2008, Consumer Healthcare net sales were \$961.5 million, up \$181.5 million, or 23 percent, compared with \$780.0 million last year. The sales gain was driven by new product sales of \$117 million, largely Omeprazole, Cetirizine and Smoking Cessation products. Reported operating income was \$120.5 million, compared with \$56.8 million a year ago. Adjusted operating income was \$123.8 million, compared with adjusted operating income of \$57.7 million last year.

#### Rx Pharmaceuticals

The Rx Pharmaceutical segment reported third quarter net sales of \$49.2 million, including \$3.1 million of service and royalty revenue and an \$8.5 million payment for termination of a license agreement. This represents an increase of \$15.2 million, or 45 percent, compared with \$34.0 million last year, of which \$5.8 million was service and royalty revenue. Operating income was \$11.3 million, up from \$7.6 million a year ago, as a result of increased volume and improved margins.

For the first nine months of fiscal 2008, net sales were \$122.8 million, including \$11.9 million of service and royalty revenue and an \$8.5 million payment for termination of a license agreement, resulting in an increase of \$29.1 million, or 31 percent, compared with \$93.7 million last year, of which \$15.8 million was service and royalty revenue. Operating income was \$27.2 million, up \$10.2 million, or 60 percent, from \$17.0 million in the year-ago period.

#### API

API segment third quarter net sales were \$37.8 million, compared with \$30.1 million last year, an increase of 26 percent. Operating income was \$6.0 million, compared with \$4.2 million last year. API performance in the quarter benefited from a one-time \$4.9 million accrual reversal related to a long standing customer contract negotiation. For the first nine months of fiscal 2008, net sales were \$111.2 million, up \$22.7 million, or 26 percent from \$88.5 million last year. Operating income was \$16.7 million, compared with \$14.9 million a year ago.

#### Other

The Other category, consisting of Israel Consumer Products and Israel Pharmaceutical and Diagnostic Products segments, reported third quarter net sales of \$43.6 million, compared with \$35.9 million a year ago, an increase of 22 percent. Operating income was \$0.9 million, compared with \$1.6 million last year. For the first nine months of fiscal 2008, net sales were \$126.3 million, up \$15.4 million, or 14 percent, compared with \$110.9 million last year. Operating income was \$6.9 million, compared with \$7.0 million last year.

#### Unallocated Expenses

In the third quarter of fiscal 2008, unallocated expenses were \$10.2 million, compared with \$10.6 million a year ago. Both periods included an acquisition-related write-off of IPR&D. These pre-tax expenses were \$2.8 million and \$8.3 million, respectively. For the nine months in fiscal 2008, unallocated expenses were \$15.7 million, compared with \$18.7 million last year. Both periods included acquisition-related write-offs of IPR&D, which were \$2.8 million and \$8.3 million, respectively.

#### Outlook

The Company has refined its expected range of adjusted EPS for the full fiscal year to \$1.55 to \$1.60 per share, excluding acquisition and restructuring related charges. It has increased its full-year tax rate expectations to a range of 23 to 27 percent. The Company still expects to generate cash from operations in the range of \$180 million to \$200 million for the full fiscal year.

(Refer to Table III at the end of this press release for additional non- GAAP earnings guidance disclosure information.)

Perrigo's Chairman and CEO Joseph C. Papa concluded, "In this dynamic environment, our focus continues to be executing our plan, maintaining quality, improving our customer service and lowering working capital. While we are very pleased with our performance to date, there is always work to be done to continue launching quality, affordable new healthcare products into the marketplace."

Perrigo Company is a leading global healthcare supplier that develops, manufactures and distributes over-the-counter (OTC) and prescription pharmaceuticals, nutritional products, active pharmaceutical ingredients (API) and consumer products. The Company is the world's largest manufacturer of OTC pharmaceutical products for the store brand market. The Company's primary markets and locations of manufacturing facilities are the United States, Israel, Mexico and the United Kingdom. Visit Perrigo on the Internet (<http://www.perrigo.com> ).

Note: Certain statements in this press release are forward-looking statements within the meaning of Section 21E of the Securities Exchange Act of 1934, as amended, and are subject to the safe harbor created thereby. These statements relate to future events or the Company's future financial performance and involve known and unknown risks, uncertainties and other factors that may cause the actual results, levels of activity, performance or achievements of the Company or its industry to be materially different from those expressed or implied by any forward-looking statements. In some cases, forward-looking statements can be identified by terminology such as "may," "will," "could," "would," "should," "expect," "plan," "anticipate," "intend," "believe," "estimate," "predict," "potential" or other comparable terminology. The Company has based these forward-looking statements on its current expectations, assumptions, estimates and projections. While the Company believes these expectations, assumptions, estimates and projections are reasonable, such forward-looking statements are only predictions and involve known and unknown risks and uncertainties, many of which are beyond the Company's control. These and other important factors, including those discussed under "Risk Factors" in the Company's Form 10-K for the year ended June 30, 2007, as well as the Company's subsequent filings with the Securities and Exchange Commission, may cause actual results, performance or achievements to differ materially from those expressed or implied by these forward-looking statements. The forward-looking statements in this press release are made only as of the date hereof, and unless otherwise required by applicable securities laws, the Company disclaims any intention or obligation to update or revise any forward-looking statements, whether as a result of new information, future events or otherwise.

PERRIGO COMPANY  
CONDENSED CONSOLIDATED STATEMENTS OF INCOME  
(in thousands, except per share amounts)  
(unaudited)

	Third Quarter		Year-to-Date	
	2008	2007	2008	2007
Net sales	\$503,707	\$362,288	\$1,321,930	\$1,073,132
Cost of sales	345,761	262,751	915,903	784,273
Gross profit	157,946	99,537	406,027	288,859
Operating expenses				
Distribution	7,987	7,020	22,805	21,559
Research and development	19,160	16,390	51,623	44,339
Selling and administration	67,978	42,863	172,822	136,857
Subtotal	95,125	66,273	247,250	202,755
Write-off of in-process research and development	2,786	8,252	2,786	8,252
Restructuring	348	306	348	948
Total	98,259	74,831	250,384	211,955
Operating income	59,687	24,706	155,643	76,904
Interest, net	3,688	3,650	12,017	11,536
Other (income) expense, net	448	(699)	(637)	(2,919)
Income before income taxes	55,551	21,755	144,263	68,287
Income tax expense	15,584	4,699	35,988	13,261
Net income	\$39,967	\$17,056	\$108,275	\$55,026
Earnings per share				
Basic	\$0.43	\$0.19	\$1.16	\$0.60
Diluted	\$0.42	\$0.18	\$1.14	\$0.59
Weighted average shares outstanding				
Basic	92,854	91,643	93,127	92,161
Diluted	94,955	93,298	95,115	93,604
Dividends declared per share	\$0.050	\$0.045	\$0.145	\$0.133

PERRIGO COMPANY  
CONDENSED CONSOLIDATED BALANCE SHEETS  
(in thousands)

	March 29, 2008	June 30, 2007	March 31, 2007
Assets	(unaudited)		(unaudited)

#### Current assets

Cash and cash equivalents	\$64,402	\$30,305	\$34,873
Investment securities	725	49,110	58,220
Accounts receivable	372,526	282,045	246,582
Inventories	356,906	295,114	310,272
Current deferred income taxes	37,716	41,400	39,122
Income taxes refundable	4,684	-	-
Assets held for sale	2,746	2,746	-
Prepaid expenses and other current assets	16,146	18,340	23,833
Total current assets	855,851	719,060	712,902

Property and equipment	708,297	664,096	641,343
Less accumulated depreciation	372,618	333,024	320,672
	335,679	331,072	320,671

Restricted cash	400,000	422,000	422,000
Goodwill	264,913	196,218	189,450
Other intangible assets	231,033	159,977	159,427
Non-current deferred income taxes	51,033	54,908	42,624
Other non-current assets	58,876	41,919	43,487
	\$2,197,385	\$1,925,154	\$1,890,561

#### Liabilities and Shareholders' Equity

##### Current liabilities

Accounts payable	\$229,744	\$164,318	\$158,499
Notes payable	10,169	11,776	3,763
Payroll and related taxes	54,849	46,226	43,590
Accrued customer programs	45,773	48,218	40,494
Accrued liabilities	39,039	47,333	48,135
Accrued income taxes	-	29,460	16,210
Current deferred income taxes	18,864	17,125	13,886
Current portion of long-term debt	17,598	15,381	14,910
Total current liabilities	416,036	379,837	339,487

##### Non-current liabilities

Long-term debt	697,598	650,762	709,342
Non-current deferred income taxes	112,675	103,775	102,129
Other non-current liabilities	110,512	36,311	34,346
Total non-current liabilities	920,785	790,848	845,817

##### Shareholders' equity

Preferred stock, without par value, 10,000 shares authorized	-	-	-
Common stock, without par value, 200,000 shares authorized	498,002	519,419	507,025
Accumulated other comprehensive income	95,398	56,676	34,434
Retained earnings	267,164	178,374	163,798
Total shareholders' equity	860,564	754,469	705,257
	\$2,197,385	\$1,925,154	\$1,890,561

#### Supplemental Disclosures of Balance

##### Sheet Information

Allowance for doubtful accounts	\$9,511	\$9,421	\$9,933
Allowance for inventory	\$36,962	\$36,210	\$37,390

Working capital	\$439,815	\$339,223	\$373,415
Preferred stock, shares issued	-	-	-
Common stock, shares issued	93,380	93,395	92,510

PERRIGO COMPANY  
CONDENSED CONSOLIDATED STATEMENTS OF CASH FLOWS  
(in thousands)  
(unaudited)

	Year-to-Date	
	2008	2007
<b>Cash Flows (For) From Operating Activities</b>		
Net income	\$108,275	\$55,026
Adjustments to derive cash flows		
Write-off of in-process research and development	2,786	8,252
Depreciation and amortization	50,822	41,997
Share-based compensation	6,457	6,530
Deferred income taxes	8,336	12,749
Sub-total	176,676	124,554
Changes in operating assets and liabilities, net of business and asset acquisitions and restructuring		
Accounts receivable	(71,497)	(8,616)
Inventories	(37,314)	(4,224)
Income taxes refundable	(4,684)	-
Accounts payable	52,513	(19,254)
Payroll and related taxes	6,958	(10,151)
Accrued customer programs	(2,445)	(9,040)
Accrued liabilities	(14,771)	2,968
Accrued income taxes	12,089	3,008
Other	17,969	(5,084)
Sub-total	(41,182)	(50,393)
Net cash from operating activities	135,494	74,161
<b>Cash Flows (For) From Investing Activities</b>		
Purchases of securities	(170,552)	(228,341)
Proceeds from sales of securities	201,436	198,530
Additions to property and equipment	(26,022)	(30,133)
Proceeds from sale of property and equipment	-	2,613
Acquisition of business	(87,130)	-
Acquisition of assets	(12,401)	(59,538)
Net cash for investing activities	(94,669)	(116,869)
<b>Cash (For) From Financing Activities</b>		
Repayments of short-term debt, net	(1,607)	(16,293)
Borrowings of long-term debt	140,000	130,000
Repayments of long-term debt	(95,801)	(30,000)
Tax effect of stock transactions	5,008	(30)

Issuance of common stock	26,097	5,347
Repurchases of common stock	(58,979)	(20,919)
Cash dividends	(13,551)	(12,281)
Net cash from financing activities	1,167	55,824
Net increase in cash and cash equivalents	41,992	13,116
Cash and cash equivalents, beginning of period	30,305	19,018
Effect of exchange rate changes on cash	(7,895)	2,739
Cash and cash equivalents, end of period	\$64,402	\$34,873

Supplemental Disclosures of Cash Flow Information

Cash paid/received during the period for:

Interest paid	\$29,102	\$27,973
Interest received	\$15,590	\$15,119
Income taxes paid	\$25,715	\$8,500
Income taxes refunded	\$6,560	\$8,443

Table I  
PERRIGO COMPANY  
SEGMENT INFORMATION  
(in thousands)  
(unaudited)

	Third Quarter		Fiscal Year	
	2008	2007	2008	2007
<b>Segment Sales</b>				
Consumer Healthcare	\$373,031	\$262,277	\$961,495	\$780,033
Rx Pharmaceuticals	49,231	34,025	122,846	93,710
API	37,818	30,095	111,240	88,507
Other	43,627	35,891	126,349	110,882
Total	\$503,707	\$362,288	\$1,321,930	\$1,073,132
<b>Segment Operating Income (Loss)</b>				
Consumer Healthcare	\$51,693	\$21,905	\$120,549	\$56,770
Rx Pharmaceuticals	11,349	7,615	27,160	17,047
API	6,024	4,238	16,723	14,851
Other	868	1,550	6,922	6,959
Unallocated expenses	(7,461)	(2,350)	(12,925)	(10,471)
Write-off of in-process R&D	(2,786)	(8,252)	(2,786)	(8,252)
Total	\$59,687	\$24,706	\$155,643	\$76,904

Table II  
PERRIGO COMPANY  
RECONCILIATION OF NON-GAAP MEASURES  
(in thousands, except per share amounts)  
(unaudited)

	Third Quarter		Fiscal Year	
	2008	2007	2008	2007
Net sales	\$503,707	\$362,288	\$1,321,930	\$1,073,132
Reported gross profit	\$157,946	\$99,537	\$406,027	\$288,859
Inventory step-up	2,878	-	2,878	-
Adjusted gross profit	\$160,824	\$99,537	\$408,905	\$288,859
Adjusted gross profit %	31.9%	27.5%	30.9%	26.9%
Reported operating income	\$59,687	\$24,706	\$155,643	\$76,904
Inventory step-up	2,878	-	2,878	-
Restructuring	348	306	348	948
Write-off of in-process R&D	2,786	8,252	2,786	8,252
Adjusted operating income	\$65,699	\$33,264	\$161,655	\$86,104
Adjusted operating income %	13.0%	9.2%	12.2%	8.0%
Reported net income	\$39,967	\$17,056	\$108,275	\$55,026
Inventory step-up (1)	2,072	-	2,072	-
Restructuring - Michigan Plants (2)	-	199	-	617
Restructuring - West Coast (3)	219	-	219	-
Write-off of in-process R&D - Glades acquisition (4)	-	4,827	-	4,827
Write-off of in-process R&D - Galpharm acquisition (1)	2,006	-	2,006	-
Adjusted net income	\$44,264	\$22,082	\$112,572	\$60,470
Diluted earnings per share				
Reported	\$0.42	\$0.18	\$1.14	\$0.59
Adjusted	\$0.47	\$0.24	\$1.18	\$0.65
Diluted weighted average shares outstanding	94,955	93,298	95,115	93,604

- (1) Net of taxes at 28%  
(2) Net of taxes at 35%  
(3) Net of taxes at 37%  
(4) Net of taxes at 41.5%

Table II (Continued)  
REPORTABLE SEGMENTS  
RECONCILIATION OF NON-GAAP MEASURES  
(in thousands, except per share amounts)  
(unaudited)

	Third Quarter		Year-To-Date	
	2008	2007	2008	2007
Consumer Healthcare				
Net sales	\$373,031	\$262,277	\$961,495	\$780,033
Reported gross profit	\$107,819	\$59,560	\$266,728	\$175,452
Inventory step-up	2,878	-	2,878	-

Adjusted gross profit	\$110,697	\$59,560	\$269,606	\$175,452
Adjusted gross profit %	29.7%	22.7%	28.0%	22.5%
Reported operating expenses	\$56,126	\$37,655	\$146,179	\$118,682
Restructuring	(348)	(306)	(348)	(948)
Adjusted operating expenses	\$55,778	\$37,349	\$145,831	\$117,734
Reported operating income	\$51,693	\$21,905	\$120,549	\$56,770
Inventory step-up	2,878	-	2,878	-
Restructuring	348	306	348	948
Adjusted operating income	\$54,919	\$22,211	\$123,775	\$57,718
Adjusted operating income %	14.7%	8.5%	12.9%	7.4%
Unallocated				
Reported operating loss	\$(10,247)	\$(10,602)	\$(15,711)	\$(18,723)
Write-off of in-process R&D	2,786	8,252	2,786	8,252
Adjusted operating income (loss)	\$(7,461)	\$(2,350)	\$(12,925)	\$(10,471)

Table III  
2008 GUIDANCE  
RECONCILIATION OF NON-GAAP MEASURES  
(unaudited)

Full Year  
Fiscal 2008 Guidance

Reported earnings per share range	\$1.48 - \$1.53
Write-off of in-process R&D	\$0.021
Inventory step-up	\$0.044
Restructuring	\$0.004
Adjusted earnings per share range	\$1.55 - \$1.60

SOURCE Perrigo Company

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**Charlotte Observer**

**'Tis the sneezin'; Allergy season has been fairly mild because of colder weather and rain, but the pollen count is often high**

**May 6, 2008**

**By Karen Garloch**

Tree pollen's in the air, coating cars with that familiar yellow-green dust and sending many Charlotteans into fits of sneezing and sniffing.

But thanks to regular rain that's helped keep pollen down, this spring's allergy season has been relatively mild.

In April, the tree pollen count stayed high for only a few days before dropping to zero when rain cleared the air.



"It's been really kind of up and down this spring," said Dr. John Klimas, an allergist whose office, Carolina Asthma & Allergy Center, measures pollen regularly. "My perception from just listening to patients is that it's been a little milder than last year."

That does little to console Michael Stittsworth, 39, a Bank of America executive who's training for a triathlon.

After a 50-mile bike ride three Sundays ago, Stittsworth developed a sore throat and nasal congestion. The next day, he left work several hours early after developing "a massive headache."

"I went home and just slept," said Stittsworth, who takes traditional allergy medicines and shots. "It typically hits me once a year in the spring."

He's one of an estimated 40 million Americans who have allergic rhinitis, or hay fever. There's no cure, and the best treatment is to avoid pollen. But that's tough in the Southeast, where spring stretches from February through June.

Problem pollens don't come from flowering trees, which are pollinated by insects, but from hardwoods such as oaks, whose reproductive cycles depend on microscopic pollen particles.

In Charlotte, oak, birch and pine pollen are prevalent now. Pine pollen, although more visible, is heavier and doesn't cause as much trouble as the others.

Although trees will finish pollinating soon, there's no relief in sight.

Grass pollen just started coming out, and it lasts through November.

A Top 25 city

Charlotte often finds itself in the Top 10 spring allergy capitals, as ranked by the Washington-based Asthma and Allergy Foundation of America. But this year, Charlotte dropped to 23rd among the 100 biggest U.S. cities. Rankings are based on a city's pollen scores as well as the sales of allergy medicines and the availability of board-certified allergists. Even slight changes in those factors can rearrange the whole list.

There is one constant.

Most of the Top 50 cities are in the Southeast.

Two other Carolinas cities beat Charlotte this year; Greensboro ranked second and Greenville, S.C., 17th.

Details : 800-7-ASTHMA (727-8462); [www.aafa.org](http://www.aafa.org).

Allergy treatments range from traditional prescription and over-the-counter medicines to alternative therapies, such as herbs and acupuncture. A review:

Charlotte allergist John Klimas said many of his patients use non-sedating antihistamines, such as Claritin, Allegra and Zyrtec, in combination with nasal steroids, such as Flonase and Nasonex.

If that doesn't provide enough relief, patients can get immunotherapy or allergy shots to suppress the body's reaction to particular allergens.

Many allergy sufferers also get relief from nasal irrigation with warm salt water to ease symptoms and reduce the risk of sinus infection. Saline solution can be purchased or prepared at home -- one teaspoon

of non-iodized salt for 8 ounces of warm water. Squirt the water, or pour it, in one nostril and out the other. (See [drweilselfhealing.com](http://drweilselfhealing.com).)

Advocates of alternative therapies also suggest treating symptoms with stinging nettles or butterbur, herbs that are sold in health food stores. Quercetin, a flavonoid compound found in apples and onions, can help prevent symptoms by reducing the body's inflammatory response to allergens, according to Dr. Andrew Weil, the well-known advocate of integrative medicine. For best effect, allergy sufferers should begin using it a few weeks before allergy season starts.

Acupuncture can also help, according to Weil's Web site. It quotes a 2004 study that found acupuncture eased symptoms for adults with hay fever who had weekly acupuncture sessions while taking a customized Chinese herbal formula.

Weil says allergies are a "learned immune response" that can be "unlearned" through mind-body methods such as guided imagery and hypnosis. He cites a 2005 study in which people with hay fever who practiced self-hypnosis regularly needed less allergy medication.

Avoiding allergens is the best way to prevent symptoms. Do this by staying indoors, especially during peak pollen hours, keeping doors and windows closed, changing clothes after outdoor activity, wearing a mask when mowing and using a high-grade filter for your air conditioner.

#### Diet

Can a healthy diet improve allergy symptoms?

Practitioners of what is becoming known as "integrative medicine" think so.

Because hay fever is inflammation of nasal membranes, an anti-inflammatory diet can play an important role in reducing allergic reactions, said Dr. Chris Magryta, a Salisbury pediatrician.

Magryta recommends increasing omega-3 fats (found in wild salmon, freshly ground flax seeds and fish oil supplements) and antioxidant-rich produce, such as berries and dark leafy greens.

He also recommends cutting back on dairy products, polyunsaturated vegetable oils and trans fats.

Miriam Basso of Salisbury said her 12-year-old twin son Jason has benefited from a more Mediterranean diet, recommended by Magryta. "He eats very healthy. A lot of vegetables and a lot of fruit," she said.

Jason, who was diagnosed with allergies and asthma in kindergarten, also takes traditional medicines -- including the antihistamine Zyrtec and Pulmicort, an inhaled steroid -- that keep him symptom-free most of the time.

But after a bout of flu in January, he suffered an asthma flare-up that required five days of prednisone treatment. That's when Magryta and Basso sat down to reassess.

"He said, 'OK, what happened? We have done everything for him. You have no carpet. No pets. Nobody smokes in your house. Let's talk about your cooking,'" Basso said.

Magryta recommended more fruits and vegetables, along with vitamins and fish oil.

"That's been working really good," said Basso, even though she has to "get really tricky" about hiding certain unpopular vegetables.

But the effort has paid off, Basso said. Jason hasn't had any problems for three months, and he's been able to cut back by half of his dose of Pulmicort.

"Very soon," Basso said, "we'll probably be able to get rid of the Zyrtec." 2E

Can a healthy diet help relieve symptoms?

Which medications or alternative methods are best?

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#### **Associated Press**

##### **Walgreens same-store sales rise 1.6 percent in April May 2, 2008**

DEERFIELD, Ill. (AP) - Drugstore operator Walgreens Co. said Friday its same-store sales rose just 1.6 percent in April as Easter holiday sales were shifted to March this year.

Same-store sales, or sales in stores open at least one year, is a key gauge of retail industry performance because it measures sales at established stores rather than newly opened ones.

Front-end same-store sales of cosmetics, candy and other non-pharmacy items decreased 3.1 percent, while pharmacy same-store sales rose 4.2 percent. However, Walgreens said same-store pharmacy sales lost 3.7 percentage points because of generic drug introductions during the last 12 months.

Total sales for the month grew 7.9 percent to \$4.85 billion.

The retailer said April sales were helped by sales of allergy medicine Zyrtec, which recently switched from prescription to over-the-counter status, and by strong sales of consumables.

Fiscal 2008 year-to-date same-store sales rose 4.6 percent, while total sales grew 10.1 percent to \$39.4 billion.

As of April 30, the company operated 6,614 locations in 49 states, the District of Columbia and Puerto Rico.

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#### **Reuters**

##### **Walgreen April sales hurt by Easter shift May 2, 2008 By Brad Dorfman**

CHICAGO, May 2 (Reuters) - Walgreen Co on Friday posted a 1.6 percent rise in sales at stores open at least a year, hurt by the shift of Easter to March.

The drugstore operator said pharmacy same-store sales rose 4.2 percent but were slowed by new generic drug introductions in the past year. Sales of general merchandise, also known as "front end" sales, fell 3.1 percent due to the early Easter.

Rival CVS Caremark said on Thursday April front-end sales fell 0.2 percent.

Walgreen total sales rose 7.9 percent to \$4.85 billion.

Total prescriptions filled at comparable stores increased 2.7 percent.

April prescriptions filled were negatively impacted by 1.7 percentage points by a slower flu season for prescriptions compared to last year, the switch of Zyrtec to over-the-counter status and concerns over some prescription statin medications, Walgreen said. (Reporting by Brad Dorfman, editing by Mark Porter)

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**Thomson Financial**  
**Walgreen Co. April same-store sales up 1.6%**  
**May 2, 2008**

BOSTON (Thomson Financial) - Walgreen Co. Friday said April same-store sales rose 1.6%, while same-store front end-sales fell 3.1%.

Total April sales rose 7.9% to \$4.85 billion from \$4.49 billion in the same month in 2007.

Walgreen said April sales were hurt by the March Easter compared with an April Easter last year, while April front-end sales were helped by allergy medicine Zyrtec and by strong sales of consumables.

Shares of Deerfield, Ill.-based Walgreen closed Thursday at \$35.69.

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**WSYR.com (Syracuse, NY)**  
**Pharmacy foul-ups: The Real Deal**  
**May 2, 2008**

Syracuse, New York (WSYR-TV) - When you pick up a prescription at the pharmacy, you probably just assume the medication in the bottle is what the doctor prescribed. But pharmacy foul-ups do happen.

Christie Thuet didn't want to waste any time when her two year old son Tyler got croup. She went straight to the pharmacy to fill his prescription.

"I was going to give it to him right when we got out to the parking lot but thought, on an empty stomach... Let's go get you something to eat," Christie said.

That decision saved little Tyler from taking way more medication than was needed. The pharmacist had made an error in the dosage, and he called to alert them as soon as he realized he put 'milligrams' down instead of 'milliliters'.

Gerry Levy of Leader Drugs in Syracuse is not Christie's pharmacist, but says one of the main causes of those mistakes is misinterpreting the handwriting on the scripts. "We were taught in school that the person who says they've never made a mistake is the one that makes them all the time. It's human nature. Machines make mistakes, people make mistakes," he says.

Another source of confusion is similar medication names, like Ditrilizan and Diasapan, which are used for two completely different illnesses.

There are literally thousands of drugs that sound and look alike....Amikin and Amicar Hydralazine and Hydroxyline, Zantec and Zyrtec. Pharmacies have computer systems, bar codes and procedures to try and keep them all straight, but they should also be telling you what drug they're giving you for what illness before you leave the counter.

It's hard to tell just how many pharmacy foul-ups happen every year because unless they make someone seriously ill, they're normally dealt with in house and therefore go unreported.

Last year, the State Pharmacy Board only investigated 111 complaints against pharmacies- a fraction of which led to any sort of discipline.

If you find yourself in a similar prescription mix-up situation and you're not satisfied with how your pharmacy handled it, you can contact the State Pharmacy Board to file a formal complaint at 1-800-442-8106.

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**Shape****14 allergy strategies that bring relief FAST****May 1, 2008****By Rachelle Vander Schaaf**

Don't resign yourself to sneezing and watery eyes. Make this the year you reclaim the outdoors-with these expert tips.

Ah, spring. Trees are budding and gentle breezes are blowing-and your nose is running, your eyes are itching, and your brain is fuzzy. As much as you'd love to just curl up with a box of tissues, you shrug it off and soldier on. After all, it's only allergies, right?

While it's easy to trivialize these annoying symptoms-which plague some 36 million Americans-experts say they're nothing to sneeze at. In fact, 80 percent of seasonal allergy sufferers report being less productive because of the condition, costing the U.S. economy an estimated \$700 million a year in lost work, according to a study by the Asthma and Allergy Foundation of America.

Also called hay fever, seasonal allergies worsen when the weather warms up and blossoming flowers, trees, weeds, and grasses spew pollen into the air. "An overzealous immune system mistakes these harmless particles for intruders and releases inflammatory chemicals called histamines and leukotrienes to combat them," explains Thomas B. Casale, chief of allergy/ immunology at Creighton University School of Medicine in Omaha, Nebraska, and president of the American Academy of Allergy, Asthma, and Immunology (AAAAI). Consequently, your airways and nasal linings swell, triggering congestion, wheezing, and foggy thinking.

Although experts aren't clear why people develop the lifelong condition in the first place, they say genes are partly to blame. While there's no instant fix for seasonal allergies, making a few tweaks to your environment and schedule-like showering at night instead of in the a.m.-can alleviate symptoms. Try these easy everyday strategies and you'll finally have a snuffle-free spring.

**AT HOME**

\* **Block out allergens** The No. 1 antiallergy move is to keep those triggers at bay, so be sure to leave your windows shut during pollen season. Then run the air conditioner on the "recycle" setting, which filters the air that's indoors. "That will trap any particles that did sneak inside," says Eric Schenkel, M.D., a clinical assistant professor of medicine at Drexel University School of Medicine in Philadelphia. Also rinse or replace the filter every two weeks to remove any dust and keep it running efficiently.

\* **Rethink your bedtime routine** Hopping in the shower in the morning is one way to kick-start your day, but switching to a nighttime routine during the spring and summer can curb your symptoms. You'll wash away the allergens that stick to your hair and face, so they won't rub off on your pillow and irritate your eyes and nose. "At the very least, gently clean your eyelids with a little baby shampoo each evening," suggests Clifford W. Bassett, M.D., an assistant clinical professor of medicine at Long Island College Hospital in Brooklyn, New York

\* **Hit the laundry room more frequently** When you get back from a walk or barbecue, change into a clean set of clothes. Then toss the old ones right into your hamper or laundry so you won't track allergens throughout the house. And wash your sheets once a week on the hot cycle: Korean researchers recently found that water heated to 140°F eliminates virtually all allergens, including pollen and dust mites, sneeze-causing organisms that thrive in humid weather.

\* **Put pets in their place** Dogs and cats that frolic outdoors can collect pollen in their fur and transport it into your home. During hay fever season, ban your pet from your bedroom or at least keep him off the

furniture, says Bassett. Bathe him as frequently as possible or wipe him down when he comes in from the yard with a premoistened cloth, such as Simple Solution Allergy Relief from Pets (\$7; petco.com).

\* Clear the air Almost half of seasonal allergy sufferers are also bothered by irritants such as fragrances and cleaning products, according to a recent study in the journal *Indoor Air*. To breathe easier, invest in a HEPA air purifier, which filters out aggravating indoor pollutants. A good pick: Honeywell HEPA Tower Air Purifier (\$250; target.com).

\* Trim your lawn Not only will your manicured yard be the envy of your neighbors, the shorter blades won't trap as much pollen from trees and flowers. (But because mowing can stir up pollen, ask someone else to do it-or cover your nose and mouth with a face mask or handkerchief.)

#### DURING OUTDOOR WORKOUTS

\* Fine-tune your fitness routine "You breathe at least twice as fast when you're working out, which means you'll inhale even more allergens if you exercise outdoors," says Brian Smart, M.D., a Chicago allergist and AAAAI spokesperson. Morning exercisers are hit hardest of all because airborne allergens peak during the early hours, starting at 4 a.m. and lasting until noon. Because pollen rises as morning dew evaporates, the ideal time for an outdoor workout is in the mid-afternoon, says Christopher C. Randolph, M.D., a clinical associate professor at Yale University's Division of Allergy in New Haven, Connecticut. He notes that where you work out can also matter: Exercising on the beach, an asphalt tennis court, the track at your local high school, or in the swimming pool are better options than working out on a grassy field.

\* Run right after it rains "The best time to hit the pavement is immediately after a downpour, because the moisture washes away the pollen for up to several hours," says Gillian Shepherd, M.D., a clinical associate professor of medicine at Weill Medical College of Cornell University. But once the air dries, take cover: The additional moisture generates even more pollen and mold, which can hang around for a few days afterward. (Before heading out, check pollen and mold reports on [aaaai.org](http://aaaai.org).)

\* Slip on shades Not only do wraparound sunglasses shield you from harmful UV rays, they'll also stop airborne allergens from getting in your eyes. Another way to ward off symptoms: a Use allergy-relieving eyedrops, such as I Visine-A (\$7; drug store.com), a few hours before heading outside. This will combat histamines, which are the compounds that cause your eyes to water and itch.

\* Drink up Fill up a water bottle or hydration pack to bring on your run, walk, or bike ride. "Fluids help thin mucus and hydrate the airways, so you won't get as stuffed up," says William S. Silvers, M.D., a clinical professor of allergy and immunology at the University of Colorado in Denver. Then use the rest to rinse off any pollen that's on your face and hands.

#### AT THE DOCTOR'S OFFICE

\* ID your triggers "If you know what they are, you'll know how to defend yourself against them," says Smart. Request a skin-prick test, in which an allergist applies a man-made version of the potential allergen to your forearm and makes a small prick in the skin so the solution can enter. If you're allergic, a lump resembling a mosquito bite will appear at the site.

\* Give your medication a checkup While some may find relief with an over-the-counter medicine, such as Clarion, Alavert, or Zyrtec-D, others may prefer a stronger one-a-day prescription tablet, such as Singulair. Ask your doctor for her recommendations, but don't mix your meds: Following a non-drowsy 24-hour drug with a different p.m. pill that night could lead to dizziness, increased heartbeat, and nausea. "But what's most important is that you take allergy medications as regularly as suggested by a doctor to ward off attacks, rather than when you're just experiencing symptoms," says Casale.

\* Try a spray If you find that pills aren't easing your symptoms, your M.D. may prescribe a nasal steroid like Veramyst, Flonase, or Nasonex. "These sprays effectively treat runny noses and watery eyes," says Randolph, who adds that you shouldn't be put off by the word "steroid." "Nasal sprays are extremely safe.

The small amount of steroids you spritz into your nose is metabolized quickly, so little-if any actually enters the body." Use one a few weeks before allergies hit; symptoms will start later and be less severe.

\* Get your shots If you're affected by seasonal allergies for more than three months of the year, allergy shots, also called immunotherapy, may be in order. An allergist will inject you with gradually increasing doses of an allergen one to three times a week over the course of up to seven months, which enables you to build up tolerance to the offending substance. (After that, you'll get the shots once a month for three to five years.) "Shots change the immune system's pathway," says Randolph. "They are effective for a number of years, and they can even prevent the development of other allergies as well as asthma."

breathe easy with these natural fixes

1 NASAL IRRIGATION New research from the University of Michigan, Ann Arbor finds that a simple saltwater solution can offer relief from symptoms. "It's perfect for postnasal drip or if mucus has become thick or dry, causing congestion," says lead author Melissa A. Pynnonen, M.D. Dissolve a quarter of a teaspoon each of kosher salt and baking soda in a cup of warm water. Using a bulb syringe, squirt bottle, or neti pot (\$36 at netipot.org), squirt this solution into your right nasal passage while leaning over a sink. Then tilt your head to the left, allowing the water to drain out of your left nostril; repeat on the other side.

2 QUERCETIN Taken in tablet or caplet form, this bioflavonoid, found in foods like red wine, tea, and apples, has anti-inflammatory effects. Researchers from Boston University School of Medicine found that quercetin helps block the production of symptom-causing histamines. A 1,000-milligram tablet, taken one to three times a day, is enough to alleviate allergies, says William S. Silvers, M.D., a professor at the University of Colorado.

3 OMEGA-3s These antiinflammatory fatty acids may alleviate symptoms in hay fever sufferers, reports a study in the journal *Allergy*. Silvers recommends having a serving of cold-water fish, such as salmon or mackerel, walnuts, ground flaxseed, or a fish-oil supplement at least three to four times a week.

A serving of allergy relief: 14 walnut halves

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**Erie Times News (Erie, PA)**

**Sneezing season**

**May 1, 2008**

**By David Bruce**

An unusually warm and dry April was a relief to most of us after a long, cold winter.

But it has made some folks feel absolutely miserable.

May is traditionally the height of spring allergy season, but physicians said they have been treating patients with severe allergy symptoms for about a month.

"We've been seeing patients ever since the weather turned warmer," said Craig Johnston, D.O., a family physician with Pinecrest Family Practice, 3535 Pine Ave. "It hasn't been pretty. Lots of folks with continuous runny noses, watery eyes and lots of itching."

Seasonal allergies are common. They affect about one in every six Americans.

It's been a rough season so far for them. The recent warm, dry weather has kept pollen counts high, said Phil Gallagher, M.D., a physician with Allergy and Asthma Associates of Northwestern Pennsylvania, 2202 W. 15th St.

"Dry, windy weather is the worst for allergies," Gallagher said. "Rain washes the pollen away, but the wind blows it all around."

People who wheeze and sneeze in the spring are usually allergic to tree pollen, especially birch and oak, Gallagher said. Summer allergies are caused by grass pollen, and late summer/fall allergies are often from the pollen of ragweed and other late-blooming weeds and plants.

An unfortunate few suffer all three allergies.

"They are miserable from April all the way through the first frost," Gallagher said. Seasonal allergies occur because a person's immune system mistakenly treats harmless pollen as a foreign invader and attacks it.

"Allergy symptoms are the body's way of clearing these supposedly noxious stimuli from the nose," Gallagher said. "Your nose gets stuffed so it filters better, then you sneeze to forcefully clear the nose. It also runs to clear out pollen better."

Allergies can be treated but not often cured. Treatments range from over-the-counter medications to prescription allergy shots.

Most allergy patients have already tried over-the-counter antihistamines by the time they see Johnston or Gallagher. Antihistamines like Claritin and Zyrtec -- which recently became available over the counter -- work by blocking the effects of histamine, a chemical released in the body during an allergic reaction.

"When I see a patient with allergies, I often prescribe a steroid nasal spray. The studies show they are twice as effective as the antihistamines," said Johnston, a member of Pinecrest Family Practice, 3535 Pine Ave. "Sometimes I prescribe both a nasal spray and an antihistamine." Regular saline nasal sprays will alleviate symptoms, Gallagher said.

"If you go outside and get a snootful of pollen, just rinsing your nasal passages out helps a lot," Gallagher said. "Just make sure you do it before you use a steroid nasal spray, because you don't want the medicine to rinse out."

Patients with severe allergies often require allergy shots. They work by slowly building up the immune system's tolerance for a particular allergen.

Gallagher injects the patient with a tiny amount of the allergen, just enough to stimulate the immune system, but not cause a full-blown allergic reaction.

"It's a more durable kind of solution," Gallagher said. "You get the shots for a few years, and you might be symptoms free for several more years. Some are done forever." Rich Caputo has been getting allergy shots for about six years. The Millcreek Township man is allergic to cats, dust mites and grass pollen.

"The shots help quite a bit," Caputo said. "I used to get really bad watery eyes, I sneezed a lot and just irritable," said Caputo, 49. "Now I get a little clogged up in the summer, but not like I used to get. I just take an over-the-counter pill and I'm fine."

DAVID BRUCE can be reached at 870-1736 or by e-mail.

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**Star-Tribune Online (St. Paul, MN)**  
**How to deal with allergy misery**  
**April 29, 2008**



**By ANGELA TOWNSEND, Newhouse News Service**

Spring, for millions of you, is not your friend.

Your waking hours are consumed with sneezing, coughing and wheezing. You either can't breathe through your nose, or you can't stop it from running. Your body itches -- your ears, throat, the back of your knees. And, for some, your relationship with your cat or dog is in peril.

Ah, allergies.

You could move to a country where pollen, grass, mold, dust mites and pet dander don't exist. Or more practically, you can take steps to make the time between now and the first frost more bearable.

Medicate

There are both prescription and over-the-counter options. Antihistamines come with or without a decongestant. First-generation drugs, such as Benadryl, carry more side effects, including drowsiness.

Claritin and Zyrtec, second-generation non-sedating antihistamines, also are available over the counter. This is the first allergy season since the Food and Drug Administration approved Zyrtec as an over-the-counter drug. Claritin has been available for several years.

People with other underlying medical conditions should check with their family doctors before using a decongestant. Nasal sprays can lessen symptoms. Nasonex and Flonase are among the prescription offerings.

And there are options from A to Z for itchy eyes, as in Alaway and Zaditor, both over-the-counter eyedrops.

People with severe allergies are good candidates for allergy shots, which are designed to increase your tolerance to the allergens that cause the problems in the first place. Allergy shots are given regularly, gradually decreasing in frequency over the course of several months or years.

With the wide array of over-the-counter drugs available these days, it's tempting to skip a visit to the doctor and try to treat yourself. But finding the right approach may not be simple.

"We're all individuals," said Dr. Samuel Friedlander, an allergist with Cleveland's University Hospitals. "What might work for one might not work for the next person."

So don't expect that the remedy your neighbor or co-worker swears by will do the trick for you.

"Self-treatment can be fraught with complications," he said. For example, taking a nasal decongestant more than five days in a row could put you at risk for "rebound" congestion, which could take much longer to clear up.

Holistic options

For those seeking a more holistic approach, there are always natural remedies for mild allergy symptoms.

A member-driven website, [mamaherb.com](http://mamaherb.com), suggests various natural remedies for a multitude of ailments including allergies. One remedy for hay fever is to drink a glass of warm water with juice from half of a lemon every day for a week.

Acupuncture also has been shown to be successful in treating hay fever symptoms, said Dr. Ofer Wellisch, a researcher in immunology at New York University and the medical consultant for [mamaherb.com](http://mamaherb.com).

"Today, modern medicine has seen some natural remedies work just as well as traditional drugs," Wellisch said.

#### Environmental controls

This is one of the most important steps and one of the hardest to do, especially if you've waited impatiently all winter to enjoy the warmer weather.

Keep your windows closed and let the air conditioner run. Don't hang clothes out to dry; you'll just bring pollen inside. Wear a mask when you're mowing the lawn, raking leaves or gardening.

"The best way to treat allergies is environmentally," said Dr. Theodore Sher, an immunologist with Allergy Immunology Associates Inc. in South Euclid, Ohio.

Wash your pet often to reduce dander, for example.

"If you do have animals, keep them out of the bedroom," Sher said.

#### Cost consciousness

When drugs like Zyrtec become available over the counter, they become more expensive for consumers whose health insurance no longer covers the cost. But for those with no insurance or with high co-pays, it's a welcome relief.

It may be worth the time to shop around.

Depending on the drug, and whether a generic equivalent is available, you might be able to find it much cheaper at a wholesale store in bulk than at a drugstore.

There's "no reason on Earth" to use more expensive brand-name drugs if a generic equivalent exists, said Dr. Sidney Wolfe, director of the Public Citizen's Health Research Group and a lead author of "Worst Pills, Best Pills: A Consumer's Guide to Avoiding Drug-Induced Death or Illness."

"Doctors have the responsibility to educate their patients that generics are just as good as name drugs."

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#### **The Standard Democrat Online (MO)**

**Parents are being more cautious with children's medicine this allergy season**

**Scrutiny surrounding medications for children causing some concern**

**April 29, 2008**

**By Michelle Felter**

SIKESTON — Recent scrutiny surrounding children's medications — in addition to some being pulled from shelves — are making parents a bit more cautious this allergy season. But local pharmacists say there are still plenty of over the counter options, they just need to be used correctly.

"There are still quite a few allergy things available over the counter for children," said Sarah Dovin, a pharmacist at the Medical Arts Pharmacy in Sikeston. "Everything out there is still, in my professional opinion, safe as long as the parents use it in the manner prescribed and follow the labeling that's on the package."

The U.S. Food and Drug Administration issued a public health advisory in January recommending over-the-counter cough and cold products not be used to treat infants and children less than 2 years of age.

Randy Ackman, owner of Randy's Rx in Sikeston, said that the recommendation leaves plenty of items on the shelf and OK for children's use, but it does make it a bit more difficult for doctors to prescribe medicines to treat allergies.

"What's happening is that more and more of these products are disappearing and you have to find alternative medication," said Ackman. "Then we (the pharmacist and doctor) need to consult with each other about what the equivalent dosing is and there is a lot more interaction now."

Over the past week, the pharmacists have seen a jump in customers looking for allergy relief, for their children and themselves. "This is beginning to be the peak allergy season," said Ackman.

According to "Medical News Today," about 8 million children suffer from springtime allergies. They are the third most chronic condition among those 18 and younger in the United States, says the Asthma & Allergy Foundation of America.

The pharmacists said a common problem with parents is giving them the wrong medicine, to treat symptoms a child is not experiencing.

"They'll say they can't shake this cold, and then you ask for some of their symptoms," said Ackman. "They're not feeling bad and not running a fever and as you talk to them more it becomes clear they're suffering from allergies."

Red or puffy circles under one's eyes are a good indicator of allergies, said Dovin. Another sign is "a cough that's just there," as well as "a runny nose that never goes away," she said.

Ackman added sneezing, sniffing and tearing eyes to the list of common symptom for allergies.

For those who have suffered from allergies in the past, Dovin recommended preventative medications be taken daily, such as over-the-counter Claritin and Zyrtec "It's very well tolerated and not extremely costly," she said.

Another suggestion from Dovin is to use sinus rinses. "Those are available and very safe for children to use," she said. "It's a little intimidating in the beginning, but they do help rinse out the sinuses in the front lobe of the face and also helps to rinse out the allergens that are in there."

If left untreated, allergies can lead to even worse problems, according to a news release from Medicap Pharmacy.

"It's important to include a health care professional at the onset of even the slightest allergy symptoms," said Bill Stonebraker, registered pharmacist and regional vice president of Medicap Pharmacies Inc. in the news release. "Once families have identified the cause of the allergies, they can immediately take the right course of treatment and/or prevention."

Dovin and Achman said untreated allergies can lead to ear infections, as well as sinus or bronchial infections. They agreed it's best to tackle the problem at its onset.

"If can can, get the condition under control," suggested Ackman. "You'll just save yourself from feeling bad."

#### Tips for treating allergies

There are a few things parents can do to make better choices to treat their children's allergies, in addition to recognize, treat and prevent them. They include:

- > Talk with your physician or pharmacist – Talking with a physician or pharmacist will help pinpoint the cause of symptoms, as well as determine the right medication to relieve and prevent prolonged suffering for symptoms.
- > Recognize allergy symptoms – While some allergy symptoms, such as sneezing and itchy eyes, are easy to spot, other indicators aren't as clear. This is especially true with children, who often don't understand that a condition they're experiencing is a symptom of a greater health issue. If a child develops repeated cold-like symptoms, has difficulty breathing, or complains of itchiness or tingling in the throat, visit your physician or allergist to test for allergies.
- > Do not ignore symptoms – Allergies should not be taken lightly. Insufficiently treated allergies can lead to serious medical conditions, including sinus or ear infections, asthma and sleep problems. If you recognize symptoms that may be allergies, take the appropriate action right away and contact your physician.
- > Follow medication instructions – It's crucial to take any medication as instructed by your physician or as directed on the medication packaging. Self-regulating medication dosage will not reduce or cease symptoms faster and could cause harmful side effects. Parents also should be aware of whether the drug restricts use for children under a certain age.
- > Control allergen exposure – Many allergies can be triggered by allergens in the home, such as dust mites or mold. If pollen is one of your family's allergy culprits, check out local pollen counts online. During days of elevated counts, stay indoors, close the windows and turn on the air conditioning, especially between sunrise and late morning when pollen counts can be higher. If you need to venture outdoors, make sure to wash your child's clothes and bathe him or her afterward.

Source: Medicap Pharmacy

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**Reuters**

**Medco CEO weighs greater presence in OTC drugs**

**April 29, 2008**

**By Lewis Krauskopf**

NEW YORK, April 29 (Reuters) - Medco Health Solutions Inc , one of the largest U.S. managers of prescription-drug benefits, is considering increasing its presence in over-the-counter medicines to help manage patients with chronic disease.

Medco historically has stayed away from drugs that patients can buy without a prescription, but it would not be a big change for the company, Chief Executive Officer David Snow said in an interview.

Pharmacy benefit managers like Medco administer prescription drug benefits for employers and health plans and operate large mail-order pharmacies.

"We can obviously, with our size and scale, buy with great economy," Snow said. "The cost when we're already serving those patients at mail is minimal because we have extra capacity in mailing packages. It makes all kinds of sense that we make that part of the service."

Snow said drug interactions exist between medicines that require a prescription and those that don't, underscoring the rationale for monitoring the over-the-counter medicines.

"There is a real safety feature for us, especially around chronic disease, to have visibility to those OTC products," Snow said.

"We don't want to do every OTC that there is, but we certainly want to do ones when there are meaningful health outcomes and quality issues when you lose track of that drug," Snow said.

One example of such a drug is Zyrtec, an allergy drug that just became available without a prescription.

"We have lots of users that were on prescription Zyrtec," Snow said. "Why wouldn't we keep that in the continuum of care relative to those patients?"

Snow said better management of OTC drugs fits with Medco's strategy of developing therapeutic resource centers, in which the company's pharmacists specialize in managing certain chronic conditions and diseases.

"We are fundamentally convinced that we can get better clinical and financial outcomes if we manage end-to-end those patients," Snow said. (Editing by Braden Reddall)

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**The Huntsville Times Online (AL)**  
**Don't like shots? Allergy treatment has options**  
**April 29, 2008**

In addition to medications and shots, allergy sufferers have other treatment options: Holistic options: For those who want to take a more holistic approach, there are always natural remedies for more-mild allergy symptoms.

A member-driven Web site, [mamaherb.com](http://mamaherb.com), offers various natural remedies for a multitude of ailments including allergies. One remedy for hay fever is to drink a glass a day of warm water with juice from half of a lemon for a week.

Acupuncture also has been shown to be successful in treating hay fever symptoms, said Dr. Ofer Wellisch, a researcher in immunology at New York University and the medical consultant for [mamaherb.com](http://mamaherb.com).

"Today, modern medicine has seen some natural remedies work just as well as traditional drugs," Wellisch said.

**Environmental controls:** This is one of the most important steps and one of the hardest to do, especially if you've waited impatiently all winter to enjoy the warmer weather.

Keep your windows closed and let the air conditioner run. Don't hang clothes out to dry; you'll just bring pollen inside. Wear a mask when you're mowing the lawn, raking leaves or gardening.

Raby said one of the best ways to control allergens in your environment is to keep pets from the bedroom and bathe them (including cats) as often as possible.

"The longer you are exposed to pet dander, the more likely you are to develop allergies," said Raby. "If the pets go outdoors, they can bring in pollen. You can just bathe them with water and that will help."

**Cost consciousness:** When drugs like Zyrtec become available over the counter, they become more expensive for consumers whose health insurance no longer covers the cost. But for those with no insurance or with higher co-pays, it's a welcome relief.

It may be worth the time to shop around.

Depending on the drug, and whether a generic equivalent is available, you might be able to find it much cheaper at a wholesale store in bulk than at a drugstore.

There's "no reason on Earth" to use more expensive brand-name drugs if a generic equivalent exists, said Dr. Sidney Wolfe, director of the Public Citizen's Health Research Group and one of the lead authors of "Worst Pills, Best Pills: A Consumer's Guide to Avoiding Drug-Induced Death or Illness."

"Doctors have the responsibility to educate their patients that generics are just as good as name drugs."

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**CantonRep.com (Canton, OH)**  
**Summer safety: Things you should know now**  
**April 29, 2008**  
**BY Diana Rossetti**

With summer on the horizon, nearly everyone's focus is on the great outdoors. Herewith, news you can use to help you enjoy a safe season.

#### BEFORE 'FORE'

If your golf swing was stored with your clubs last fall, you still have a chance to loosen up and avoid muscle strains if you make the right moves, said Matt Root, a certified athletic trainer and golf swing analyzer at Aultman Hospital.

"Amateur golfers, about 70 percent never or seldom warm up before they go out. They'll run from the car to the clubhouse to the first tee," Root commented. "People understand before they play basketball or softball, they need to stretch and get their heart beating, but you need to do the same with golf."

Root suggests a compact warm-up regimen that begins with five to 10 minutes of brisk walking followed by a number of golf-specific stretches.

Because a golf swing relies on trunk rotation, the back is the site of many game-related injuries.

"Don't go to the driving range and crank out those balls as hard as you can," he continued. "Take a club, a wedge or a 9 iron, and work on half shots initially, not hitting it as far as you can. Swing at 50 percent for a minute. Then work up to 75 percent and add speed until you're taking full swings at full speed."

To stretch the shoulder, hold the club overhead with both hands and bend to each side. To avoid elbow tendinitis, Root recommends putting arms forward. Let one hand push up on the other while it resists by pushing downward. Reverse the motion, pushing down against resistance hand.

And check the Internet. "I refer lots of people there to look for golf warm-up programs," he said. "They are easy to find and generally easy to do. But the important thing to remember is that in October, when you can't golf any more, that's the time to develop a regular workout to keep those muscles working for next year."

Strengthening the entire kinetic chain — legs, hips, back and abdominal muscles — will help improve distance, power and swing mechanics.

And avoid divots, say the doctors at the Mount Sinai School of Medicine orthopedics department in New York City. The sudden change in velocity causes tremendous stress in your shoulders and can exacerbate a prior shoulder condition. Remember to adjust your stance and grip accordingly to accommodate swinging on an incline.

#### NOTHING TO SNEEZE AT

You never have had allergies, you say, but suddenly your nose is itching and your eyes are watering as you weed the flower beds.

It is entirely possible to develop allergies in adulthood, explained Dr. Steven R. Morman of Allergy and Dermatology Associates on Fulton Road NW, Jackson Township.

"It absolutely is possible. We see it often," he said. "People can develop allergies or they may become sensitive to irritants in the air. The sinuses are susceptible to pollen, environmental things, the ozone. Some people become sensitized to the temperature in the air; going from hot to cold starts their nose running. Noses can almost tell the weather because it affects people's sinuses as well."

Though fall is the worst time for allergy sufferers, asthmatics are at risk for attacks in spring and fall.

"I typically recommend that people who are allergic to outdoor allergens, come inside and shower and change into fresh clothes, rinse out the sinuses with a saline nasal spray so the pollen they've just inhaled isn't sitting in the sinuses all day and bothering them," Morman continued. "And Zyrtec, a relatively new drug that was prescription, now is available over the counter. It seems to help a lot of people and it only makes about 5 percent of them drowsy."

The Weather Channel just launched an interactive Web site — [www.weather.com/allergies](http://www.weather.com/allergies)— that features local and travel pollen forecasts, an allergy help center, tips on common triggers and relief techniques as well as a pollen almanac. The PollenCast allows users to plan ahead with a localized, four-day expanded grass, tree and weed pollen forecast.

#### SUN SAFETY

Ohioans emerging from winter hibernation long for the sun's warming rays and the Vitamin D they generate. But safe sunning is the key to reaping the benefits without risking skin cancer.

"When the tan shows, the cellular damage is already done," said dermatologist Elizabeth Hale of Laser & Skin Surgery Center of New York and assistant professor of dermatology at New York University School of Medicine. "In fact, according to the Skin Cancer Foundation, one blistering sunburn when you are young more than doubles your chance of developing a melanoma later in life."

Hale's best advice:

-- Apply, apply, apply sunscreen. Apply again every 80 minutes and after swimming, toweling off or sweating, even if the sunscreen is water- and sweat-proof.

-- Double up. When you think you have applied enough, apply some more. It takes at least one ounce of sunscreen to effectively protect the face and body.

-- Follow the shadow rule. If your shadow is shorter than you are, the sun's rays are at their strongest. Cover up with sun protection such as a hat and sunglasses and head for the shade.

#### GETTING BUGGED

Keep potentially dangerous bugs at bay by wearing insect repellent clothing or using insect repellent lotions. Dusk to dawn are the prime mosquito biting hours, say experts at the Centers of Disease Control.

West Nile virus, Lyme disease and even dengue fever are diseases carried by mosquitoes, not just in Asia and Africa but here in the United States. In 2007, there were 121 deaths among the 3,598 reported cases of West Nile virus. Lyme disease cases have doubled since 1991 with more than 21,000 cases reported annually.

Eliminate standing water, where mosquitoes breed, around your home and repair window and door screens.

You won't find Lyme disease-carrying ticks in the middle of your yard. They live where lawns border wooded areas or shady areas with leaves and high humidity. When you are in the woods, wear long-sleeved shirts and pants in light colors so ticks are easier to spot.

Finally, be aware of the risk of anaphylaxis, a life-threatening allergic reaction to bees and other stinging insects, warns Dr. Linda Lawrence, president of the American College of Emergency Physicians.

Anaphylaxis can involve multiple bodily systems, causing at least 50 deaths annually among the 500,000 emergency room visits necessitated by insect stings.

"That's why it's especially important for a person who had had past reactions to insects to avoid getting stung because even if an initial reaction was mild, subsequent ones can become life-threatening," Lawrence explained.

Common symptoms may include a tingling or itching sensation or a strange metallic taste. Others include hives, a sensation of warmth, trouble breathing or swelling of the mouth and throat. Lawrence said anyone experiencing those symptoms following a sting should seek emergency care immediately. For information, visit [www.cdc.gov/travel](http://www.cdc.gov/travel).

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#### **The Daily Oklahoman Online**

#### **Allergy season in Oklahoma could be rough, experts say**

**April 25, 2008**

**By Jim Killackey**

Apr. 25--Kyle McClain braced for what he knew would be another springtime assault by tiny tree pollen scattered by Oklahoma winds.

Then the cruel symptoms hit, the Edmond resident said: itchy eyes, at least five sneezes an hour, a runny nose that wouldn't stop, boxes of tissue everywhere and various other inconveniences.

"I knew it was coming. I expected it," said McClain, 35, an allergy sufferer much like thousands of other Oklahomans.

Oklahoma City physicians this week issued the year's first allergy alert as high pollen counts from oak, willow and mulberry trees caused symptoms including stuffy noses, sneezing fits, sore throats, fatigue and insomnia.

The alert by the Oklahoma Allergy and Asthma Clinic surprised clinic allergist Dr. Warren V. Filley.

"With the storm damage to our trees this past winter, the spring so far has been average in pollen counts. We've been having high but not very high days. We thought heavy pollen producers of cedar, elm and oak trees were either finished or winding down," he said.

But conditions changed this week, with pollen counts reaching 1,564 pollen grains per cubic meter of air. When allergens reach 1,500 pollen grains per cubic meter of air, it's considered very high.

That's when an allergy alert is issued, Filley said.

The count dropped Thursday, and the tree pollen rating was adjusted from very high to high.

About 500,000 Oklahomans have seasonal allergies, usually in the spring and fall.



"If you are allergic and not controlled with medicine or allergy shots, this could be a bad season for you," Filley said. "We have seen our usual upturn of seasonally sick patients.

"With the current weather conditions of wind and some rain, we can expect pollen, mold and dust in the air off and on all spring and summer."

Rain will wash down many pollen grains for a day or two, but they will come back, especially with winds, Filley said.

Antihistamines and decongestants help treat allergy symptoms, and patients often receive steroid shots, Filley said.

Edmond family physician Dr. Tim Siler said his clinic is seeing more patients with spring allergy problems. He advises them to keep taking their medications for a sustained time so they don't have a recurrence of allergy symptoms.

Allergy sufferers are urged to shower more frequently. Children and women with long hair have a propensity to bring pollen inside the home. People should wash their hair at night to get rid of tree pollen before going to bed, according to the Allergy and Asthma Clinic.

Q:Why are allergies so bad in Oklahoma?

A:Allergist Dr. Warren V. Filley said Oklahoma City, Tulsa and many other cities in the Midwest sit on the cross timbers. "This is where the Eastern woodlands meet the prairie. So we have the worst of two worlds for pollen. Add to that the wind and you have a mix for lots of allergy problems," he said. A recent study by the Asthma and Allergy Foundation of America ranks Oklahoma City 11th and Tulsa 19th among 100 U.S. cities as the "most challenging" places to live with allergies.

Q:What allergies are worst here, and when?

A:People with allergies usually have problems in March through November in Southern states like Oklahoma. They are affected by pollen allergies (hay fever), said Dr. Don Wilber.

Q:What are some problems from hay fever?

A:Hay fever causes inflammation of the mucous membrane and is aggravated by tree, grass and weed pollens, which dominate at different times during the allergy season, he said.

Q:Are kids more susceptible to allergies?

A:"Children in families where one or both parents have allergies or asthma are more likely to develop allergies or asthma," said Dr. Don Wilber. "Parents should reduce contact of allergens to delay or prevent the onset of symptoms by removing objects that collect dust from the bedroom or by keeping relative humidity indoors below 50 percent." There are medications for children including Clarinex and Zyrtec, available in syrup form and are approved for children over 6 months, Wilber said.

Q:What medications can sufferers take?

A:"If you find yourself suffering from the familiar symptoms of allergies, consult your doctor or start with an over-the-counter antihistamine like Claritin or Benadryl to relieve itching, sneezing and a runny nose," said Dr. Don Wilber. Decongestants like Sudafed work in coordination with antihistamines and may help.

Q:Are prescription medications helpful?

A:If over-the-counter medications don't control allergy symptoms or cause significant side effects, said Dr. Don Wilber, try prescription nasal steroids instead.

"Allergen immunotherapy, which desensitizes you to specific allergens, requires skin testing and weekly injections. Although it's a more aggressive treatment, it may be required for some people."

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**Dow Jones  
Ranbaxy Gets US FDA Nod For Cetirizine HCl Oral Solution  
April 25, 2008**

BANGALORE (Dow Jones)--Ranbaxy Laboratories Ltd. (500359.BY) Friday said it has received final approval from the U.S. Food and Drug Administration to make and sell Cetirizine Hydrochloride oral solution for allergies and Children's Cetirizine Hydrochloride for hives relief.

Ranbaxy's Cetirizine Hydrochloride is a generic version of McNeil Consumer Healthcare's Children's Zyrtec Oral Solution for allergies and Children's Zyrtec Oral Solution for hives relief, the company said in a statement.

Total annual market sales for Cetirizine Hydrochloride syrup as a prescription-only product were \$157 million, the statement said.

-By Rumman Ahmed, Dow Jones Newswires; 91-9845104173; rumman.ahmed@dowjones.com [ 25-04-08 1134GMT ]

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**Reuters  
India's Ranbaxy gets FDA nod for cetirizine HCL  
April 25, 2008**

MUMBAI, April 25 (Reuters) - Indian drug maker Ranbaxy Laboratories Ltd said on Friday it had received approval from the U.S. Food and Drug Administration for cetirizine hydrochloride oral solution.

The Indian firm also received approval for children's cetirizine hydrochloride oral solution, it said.

The allergy drug is a generic equivalent of McNeil Consumer Healthcare's Zyrtec, it said.

Total annual market sales for cetirizine hydrochloride syrup were \$157 million, Ranbaxy said in a statement. (Reporting by Rina Chandran; Editing by Ranjit Gangadharan)

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**Ohm Laboratories Inc. Ranbaxy Laboratories Limited Press Release  
Ranbaxy Receives Final Approval to Manufacture and Market Cetirizine Hydrochloride Oral  
Solution: Ohm Laboratories to Market in OTC Private Label Market  
April 25, 2008**

(picked up by Biloxi Sun Herald Online, PharmaLive.com)

PRINCETON, N.J., April 25 /PRNewswire/ -- Ohm Laboratories Inc (Ohm), a wholly owned subsidiary of Ranbaxy Laboratories Limited (RLL), announced today that RLL has received final approval from the U.S. Food and Drug Administration to manufacture and market Cetirizine Hydrochloride Oral Solution (Allergy) and Children's Cetirizine Hydrochloride Oral Solution (Hives-Relief), 1 mg/mL (OTC). The Office of Generic Drugs, U.S. Food and Drug Administration, has determined the Ohm formulation to be bioequivalent and have the same therapeutic effect as that of the reference listed drug Children's Zyrtec Oral Solution (Allergy) and Children's Zyrtec Oral

Solution (Hives-Relief), 1mg/mL of McNeil Consumer Healthcare. Total annual market sales for Cetirizine Hydrochloride Syrup as a prescription only product were \$157 million (IMS - MAT: December 2007).

Cetirizine Hydrochloride is indicated for the temporary relief of runny nose, sneezing, itching of the nose or throat, and itchy, watery eyes due to hay fever or other upper respiratory allergies. Other indications include relief from itching due to hives (urticaria).

"We are pleased to receive this final approval for Cetirizine Hydrochloride Oral Solution that has proven its clinical value and utility in both adults and children. We are pleased to offer this preferred formulation that will meet the needs of all patients who need this medication in response to allergic reactions as an over-the-counter product. This product formulation further expands our portfolio of affordable generic alternatives and will be launched immediately to all classes of trade participating in the OTC private label market," said Jim Meehan, Vice President of Sales and Distribution for Ohm Laboratories, a wholly owned subsidiary company of RLL.

Ohm, based in North Brunswick, New Jersey, is a wholly owned subsidiary of Ranbaxy Laboratories Limited (RLL), India's largest pharmaceutical company. Ohm is engaged in the sale and distribution of generic and branded private label, OTC products in the U.S. healthcare system.

Ranbaxy Laboratories Limited, headquartered in India, is an integrated, research based, international pharmaceutical company producing a wide range of quality, affordable generic medicines, trusted by healthcare professionals and patients across geographies. Ranbaxy's continued focus on R&D has resulted in several approvals in developed markets and significant progress in New Drug Discovery Research. The Company's foray into Novel Drug Delivery Systems has led to proprietary "platform technologies", resulting in a number of products under development. The Company is serving its customers in over 125 countries and has an expanding international portfolio of affiliates, joint ventures and alliances, ground operations in 49 countries and manufacturing operations in 11 countries.

\*Children's Zyrtec(R) Oral Solution is a registered trademark of McNeil Consumer Healthcare.

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SOURCE Ranbaxy Laboratories Limited.

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**UCB Press Release  
UCB's CEO Confirms Company Strategy  
April 24, 2008**

BRUSSELS, BELGIUM -- (MARKET WIRE) -- Apr 24, 2008 --

Statement of the CEO of UCB at the AGM

Dividend increased by 2.2% to a gross dividend of EUR 0.92 (EUR 0.69 net) per share

All resolutions passed the ordinary and extraordinary meeting

New composition of the Board of Directors approved

Brussels (Belgium) - April 24, 2008 - 2:00 PM (CEST) - Today, UCB held its Annual General Meeting (AGM). During the course of this meeting Roch Doliveux, Chief Executive Officer UCB, gave the shareholders of UCB a short overview of the financial year 2007, an update on the most recent development of the group and confirmed the company's strategy to build the next generation biopharma leader.

"2007 was an important year for UCB and 2008 will be another one as we advance in our execution phase", said Roch Doliveux, CEO of UCB. "For 2007, Keppra® reached blockbuster status, two new products were launched in the US and four regulatory filings were achieved in the US and the EU. We also delivered an impressive amount of R&D milestones. I am particularly proud that more and more patients with severe diseases benefit from UCB's medicines. I am also pleased by the underlying positive financial performance, which is in line with previous years' all time high performance and supported by our successful integration."

"While UCB had its share of good news concerning the progression of our pipeline, we also had our disappointments. On March 20th, we announced that we were recalling our anti-Parkinson's drug Neupro® from the US market and certain batches in Europe. The issue is neither one of efficacy of Neupro® nor of safety, but of solubility with the active substance crystallizing over time in the patch. It is a known phenomenon in the industry that can be resolved by changing formulation. We are working to correct the issue as fast as possible but it might take some time to have Neupro® back on the US market. The situation in Europe is being monitored. Depending on the resolution timeline of this issue, the full effect on UCB will be different and we are working on ways to mitigate the impact. More detailed information will be presented as we report our 2008 half year results."

"We were particularly pleased with the approval of Cimzia® in the US for treatment of Crohn's disease. The US represents over 70% of the world anti-TNF market for Crohn's disease. Cimzia® is the first and only PEGylated Fc free anti-TNF. Cimzia® will be launched in the US 48 hours after approval, a tribute to the preparedness of my UCB colleagues. We have put competitive programs in place that address the needs of patients, physicians and payers."

"UCB successfully reached other important milestones since the beginning of 2008, such as filing of Keppra®XR in the US, approval of Xyzal® oral solution and positive results of our new anti-cancer drug CDP791 which we will partner."

"Four years ago, UCB was thriving on Zyrtec®'s success with two major challenges ahead: Zyrtec® patent expiry in the US end of 2007 and Keppra® loss of exclusivity a few months later. Since then, we have successfully transformed UCB into a pure biopharmaceutical company with a particularly rich pipeline which not only will offset the losses from the patent expiries, but drives UCB's growth in the mid and long-term. Both Celltech and Schwarz Pharma have been promptly integrated and we are now in the midst of the "Execution stage", delivering on our R&D milestones, addressing the timing uncertainties of all regulatory approvals in our industry and being ready for our new product launches. This Execution

phase will be followed by an Intense Growth phase during which we will realize the commercial potential of our new products such as Cimzia®, Vimpat®, Neupro® or Rikelta™."

At the Annual General Meeting (AGM) 110.9 million shares (61.5% of shares outstanding) were represented. The AGM and the Extraordinary General Meeting (109.2 million shares or 60.6% of shares outstanding were represented), which also took place today, approved all resolutions. For details please see UCB's website [www.ucb-group.com/investor\\_relations/calendar](http://www.ucb-group.com/investor_relations/calendar).

The AGM also approved for the fiscal year 2007 the payment of a gross dividend of EUR 0.92 per share (net dividend of EUR 0.69 per share) compared with EUR 0.90 per share for 2006 (net EUR 0.675). The dividend will be payable on Monday 28 April 2008 (coupon No. 10).

The AGM appointed Jean-Pierre Kinet, Armand De Decker, Norman J. Ornstein and Thomas Leysen (effective January 2009) as independent Directors and new members of the Board of Directors of UCB and re-elected Evelyn du Monceau de Bergendal, Peter Fellner, Gerhard Mayr (independent Director), Arnoud de Pret and Bridget van Rijckevorsel. For curriculum vitae of the new members, please see UCB's website [www.ucb-group.com/investor\\_relations/calendar](http://www.ucb-group.com/investor_relations/calendar).

The Annual Report 2007 of UCB is published on the internet: [www.ucb-group.com/investor\\_relations/financials/annual\\_reports](http://www.ucb-group.com/investor_relations/financials/annual_reports)

An interim report on the first three months is due on 15 May 2008, the financial results for the first half year 2008 will be announced on 1 August 2008 and an interim report for the first nine months of 2008 is due on 31 October 2008. Next year's AGM will be held on Thursday 30 April 2009 at 11:00am in Brussels (Belgium).

#### About UCB

UCB (Brussels, Belgium) ([www.ucb-group.com](http://www.ucb-group.com)) is a global leader in the biopharmaceutical industry dedicated to the research, development and commercialization of innovative pharmaceutical and biotechnology products in the fields of central nervous system disorders, allergy/respiratory diseases, immune and inflammatory disorders and oncology. UCB focuses on securing a leading position in severe disease categories. Employing around 12 000 people in over 40 countries, UCB achieved revenue of 3.6 billion euro in 2007. UCB S.A. is listed on Euronext Brussels.

#### Further information

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#### Forward looking statement

This press release contains forward-looking statements based on current plans, estimates and beliefs of management. Such statements are subject to risks and uncertainties that may cause actual results to be materially different from those that may be implied by such forward-looking statements contained in this press release. Important factors that could result in such differences include: changes in general economic, business and competitive conditions, effects of future judicial decisions, changes in regulation, exchange rate fluctuations and hiring and retention of its employees.

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**NielsenHealth Press Release**

**NielsenHealth Launches 32 Ailment Panels in the U.S.**

**Findings Show 62% of U.S. Over-the-Counter Zyrtec Buyers Use Allergy Prescription Drugs: OTC likely to Challenge Prescription Allergy Market**

**April 24, 2008**

NEW YORK, April 24, 2008, NY– NielsenHealth, a Nielsen Company service focused on healthcare, released findings today that show 62% of Zyrtec OTC buyers took an allergy prescription in the last 12 months, and of those buyers, more than 53% claimed to be “very satisfied” with their Rx allergy medication at the time.

“This is an important finding,” said Matt Dumas, Managing Director of NielsenHealth, “and a signal that OTC alternatives to allergy prescriptions may become the preference to both consumers and managed care providers in large part due to efficacy and price.”

The findings are from NielsenHealth’s newly launched Allergy Panel, one of 32 new NielsenHealth Ailment Panels being launched to provide manufacturers and retailers insights into consumer related attitudes and behaviors of patients suffering important diseases and medical conditions.

The NielsenHealth Ailment Panels consist of 110,000 U.S. consumers identified as suffering from one or more ailments tracked by Nielsen, including allergy, gastro-intestinal and conditions like diabetes, obesity and cardiovascular disease. Each Panel tracks panelists suffering a specific condition and their actual purchases, demographics, as well as critical patient facts relating to their specific conditions and treatment regimes.

The NielsenHealth Ailment Panels are a subset of the Nielsen Homescan Panel, which tracks the attitudes and behaviors of 125,000 U.S. households longitudinally over time. This enables the Panels to capture panelist purchases of health related products together with other household purchases. The large sample size allows Nielsen clients to obtain granular insights at the brand and store level for greater actionability not found with other longitudinal healthcare panels.

Additional findings from the Allergy Panel show that 42% of Zyrtec OTC buyers who claim to experience spring time allergies have severe allergy symptoms. The research also found that 22% of the allergy sufferers in the Panel treat their condition with Rx medication alone and 23% use concomitant Rx-OTC therapies. “This could have a significant impact on the holistic allergy market because it suggests that severe sufferers see OTC as an option whereas before this patient tended to migrate to Rx options only or concomitant Rx-OTC usage,” said Dumas, “It would not be surprising to see sufferers shift more to using OTC medications only over the next 6-12 months.”

Dumas concluded, “As demonstrated by our work in the allergy category, the NielsenHealth Ailment Panels help manufacturers and retailers view patients as consumers in how and why they make the choices they do as a unique buyer group.”

**About NielsenHealth**

NielsenHealth, is a Nielsen Company service focusing on healthcare related issues facing manufacturing, retail and media clients. The group takes a “consumer-centric” approach to critical targeting, marketing effectiveness and media related healthcare issues integrating The Nielsen Company’s proprietary data and methodologies in the consumer and media space.

**About The Nielsen Company**

The Nielsen Company is a global information and media company with leading market positions in marketing information (ACNielsen), media information (Nielsen Media Research), online intelligence (NetRatings and BuzzMetrics), trade shows and business publications (Billboard, The Hollywood

Reporter, Adweek). The privately held company is active in more than 100 countries, with headquarters in Haarlem, the Netherlands, and New York, USA. For more information, please visit, [www.nielsen.com](http://www.nielsen.com).

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**WVLT.com (Knoxville, TN)**

**Tips to relieve springtime allergies**

**April 23, 2008**

**By Lauren Davis**

Knoxville (WVLT) - Allergies have a strong grip on Americans especially during the spring.

Knoxville, Tennessee was just named number one by Asthma and Allergy Foundation of America as the most challenging place in America for people with allergies.

Local physicians are seeing more patients right now because of the tree pollen floating around our city.

William Wilkerson doesn't even flinch as he gets his weekly allergy shot. He's an equipment operator for KUB and he works outside all the time feeling the symptoms from spring pollen.

"Itchy eyes watery eyes runny nose sneezing things like that," Wilkerson said.

Sound familiar. According to a recent study Knoxville ranks sixth in the nation for allergy sufferers like William. Lexington is number one and Johnson City is number three. All top six cities are in the south.

"The further south you go the longer the growing seasons are for trees grass and weeds," Dr. Paul Carter said.

Right now Dr. Carter is seeing patients suffering from tree pollen. Next comes grass pollen which lasts until June. Then weed pollen and ragweed in August, but you may experience more symptoms right now.

"Usually people have had two or three months during the winter when they didn't really have many symptoms," Dr. Carter said.

They can be treated with over the counter anti-histamines like Benadryl, Claritin or Zyrtec. If those don't work you can use prescribed nasal sprays or like William get shots.

At first he was running from the shots, but now he's glad he's getting them.

"Is it a pain to come in and get it done? No not really because the benefits outweigh the shot itself," Wilkerson said.

And that's good news for allergy sufferers who live in and around Knoxville, Tennessee.

Another thing doctors suggest is not going outside in the early mornings or on windy days when pollen is more abundant. Immediately after rain the air is relatively clear of pollen.

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**Stamford Times Online**

**Spring is in the air — Allergy season will be one of the worst**

**April 23, 2008**

**By BEN LEVINE**

STAMFORD — Spring marks the beginning of many things. For some, it means baseball. For others, the budding of trees and a chance to get outside after the cold winter season.

But for 40 million Americans nationwide, spring means the beginning of the allergy season.

"We're in the midst of it right now," said Leslie Coleman, M.D., director of allergies and immunology at Stamford Hospital. "April and May is when the trees begin to pollinate, and the wind carries a variety of pollens many miles throughout the region."

If you're allergic to any one of the 10 different types of tree pollen in Fairfield County, such as oak or birch, you've probably already begun to feel the affects — itchy eyes, a runny nose and a sneeze that just won't seem to go away.

"This allergy season is going to be one of the worst we've seen in 50 years," said Clifford W. Bassett, M.D., assistant clinical professor of medicine at the Long Island College Hospital in Brooklyn, N.Y. "The next two to four weeks are going to be especially bad in the northeast for allergy sufferers."

Because of the delayed onset of the tree pollination season, combined with high levels of precipitation, trees have produced more pollen than usual, Bassett said.

"What's happening now is tree pollen is mixing with grass pollen, causing a double whammy effect," Bassett said.

This time of year can be particularly bad for allergy sufferers with asthma, Coleman said, who may notice themselves wheezing.

"Now is the time to take proper medications, and in more serious cases, go to see an allergy specialist," Coleman said.

The full allergy season runs from April till the year's first frost, which usually occurs in mid-October. After the tree pollen months of April and May, June brings grass allergens (timothy grass is kind that grows in Connecticut); July lurks with the threat of outdoor mold, and then, from August till the end of September, ragweed has people running for tissues and eye drops.

"Then the trouble starts with indoor allergens," Coleman said.

Coleman said many allergy sufferers are symptomatic to all stages of the season. Being in the middle of the pollen season, Coleman suggests residents check the daily pollen count, which they can usually get from a local newspaper or morning news program, to get a sense of how severe the day may prove. Local pollen counts can also be found on the American Academy of Allergy, Asthma & Immunology's Web site, [www.aaaai.org/nab/index.cfm](http://www.aaaai.org/nab/index.cfm), or on [www.weather.com](http://www.weather.com).

"If it's high, you shouldn't spend a lot of time outside, or sitting in a park all day," Coleman said. "We suggest that when you drive, keep the windows up, and while at home don't keep the windows open at night."

She said that medications like Claritin and Zyrtec — both of which are now available without a prescription — are a very good at keeping allergy symptoms in check on a daily basis.

For a more preventative approach, Coleman suggests people use steroid nasal sprays like Flonase, which should be used once a day either in the morning or at night.

"The third thing to consider is being skin tested by an allergist," she said. "A doctor can offer you a series of allergy injections that, over time, will make you less sensitive to pollen. It usually takes about two to three years for your body to build up an immunity."



Bassett said the best thing about allergies is that they are treatable and preventable, and he suggests seeing an allergist sooner rather than later.

"About 85 percent of my patients are women," he said. "For whatever reason, they seem to be more proactive about taking care of their health."

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**Des Moines Register Online (Des Moines, IA)**  
**Launch allergy attack**  
**April 23, 2008**  
**By DAWN SAGARIO**

Seasonal allergy sufferers rejoice.

If there was one positive thing to come out of this excruciatingly long winter, it's that we've bypassed part of the tree pollen season.

"Pollen tends to come out the same time every year," said Dr. James Wille of Allergy Asthma Associates in Des Moines. "If it's colder, rainier, you have less pollen."

That means a temporary reprieve from the sneezing, runny nose, watery, itchy eyes and asthma symptoms.

But there's a catch.

"Even though we're getting off to a late start, I don't think it's going to be any milder of a tree pollen season as we have had in the past," said Dr. Mary Beth Fasano, associate clinical professor in the division of allergy immunology at the University of Iowa.

As for the upcoming grass and ragweed seasons, Wille said, "Those you can't make a prediction yet at all."

Grass pollens appear in the late spring and summer; ragweed in the summer and into the fall.

Seasonal allergic rhinitis, or hayfever, affects nearly 36 million Americans, according to the American Academy of Allergy, Asthma and Immunology.

When those symptoms do kick in and people are looking for relief, doctors say, individuals will have more over-the-counter options to choose from.

Zyrtec is the newest drug to be sold without a prescription; the generic cetirizine also is available. Claritin and the generic drug, loratadine, have been available without a prescription for several years.

Doctors encouraged those who have, or think they have, allergies to first try those remedies.

"But I think the important thing to convey is that if they do try them and they're not getting any better, then it should be their prompt to touch base with their primary doctor or their allergist," Fasano said.

The problem may actually not be allergies, she said. Those with allergies who don't get better with the over-the-counter drugs may need more aggressive treatment, including nasal sprays or prescription allergy pills.

Dr. Ahmad Al-Shash of the Allergy Institute in West Des Moines, said those with high blood pressure should be cautious when taking the nonprescription medications as they may cause a slight increase in blood pressure.

Other new prescriptions on the market include Xyzal, a "cousin" of Zyrtec, Wille said, and Omnaris, a steroid nasal spray. "Prescription nasal sprays are the most effective and probably have the least side effects," he said.

Jean Kutsch, 40, of Des Moines said she's already feeling the allergy symptoms.

"It doesn't seem to be every day, just all of the sudden my head hurts, my eyes start burning and my nose runs," Kutsch wrote via e-mail.

She's never seen a doctor for her allergies, but said over-the-counter drugs Claritin and Benadryl have helped alleviate the symptoms.

"If that wouldn't have helped, then I would've (sought) some professional help," she said.

Tami Conley of Norwalk said she hasn't started getting symptoms yet. But she's been able to keep her allergies in control using allergy shots - they help build immunity to allergens - and Allegra, another prescription medication.

She also runs her air conditioner and leaves the windows closed, to keep allergens out.

"It's been a lot better," Conley, 52, said of her allergies since starting the regimen. "I feel like it's worth it."

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**WHNT.com (AL)**  
**Pollen Count is High Causing Allergy Problems**  
**April 23, 2008**  
**By Amber Stuart**

The weather has been spectacular but it comes with a curse attached to it. The pollen count is up across the Tennessee Valley, driving some people to the emergency room.

"He's been complaining of chest pain and been having a little bit of wheezing," said Dr. Carlos Abanses. "So he's getting a breathing treatment."

Dr. Carlos Abanses with Huntsville Hospital is treating a patient for classic pollen symptoms.

"And that's what we're talking about, a lot of patients coming in right now because of the pollen count with the increased chest pains and wheezing and trouble breathing. So that's the problem that's been going on with them," said Dr. Abanses.

Young patients have been coming in to the pediatric E.R. more frequently at Huntsville Hospital, because of the pollen from trees.

"We're seeing a lot of people coming in with allergies and running nose itching eyes and those kind of things. And as well as a lot of asthmatics," said Dr. Abanses.

One way to stay out of the E.R. is to take allergy medications.

"If you know you have seasonal allergies and every year they get bad when the pollen comes out, you can take it. It used to be prescription Claritin or Zyrtec which work great and you just have to take them on a daily basis," said Dr. Abanses.

Pollen or not, Dr. Abanses does encourage getting outside.

"It's just too pretty to stay indoors," said Dr. Abanses.

The pollen we're seeing right now is from trees. Here's the bad news. We haven't seen the worst of it yet.

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**The Roanoke Times Online**

**Achoo! Clearing the air on allergies**

**Local allergists offer common-sense tips for reducing symptoms.**

**April 22, 2008**

**By Pete Dybdahl**

Top 10 Allergy Capitals, 2008

Lexington, Ky.  
Greensboro, N.C.  
Johnson City, Tenn.  
Augusta, Ga.  
Jackson, Miss.  
Knoxville, Tenn.  
Birmingham, Ala.  
New Orleans, La.  
Little Rock, Ark.  
San Diego, Calif.

Compiled by the Asthma and Allergy Foundation of America. Rankings are based on seasonal pollen, allergy medicine utilization per patient and the number of board-certified allergists per patient.

Roanoke was not named one of this spring's "Allergy Capitals," a list of high-pollen cities where allergy sufferers suffer the most. But there's still trouble in the air.

Lexington, Ky., topped the rankings, compiled by the Asthma and Allergy Foundation of America, with Greensboro, N.C., and Johnson City, Tenn., close behind.

"If your nearby cities are in the top 10 that's not good news," said Angel Waldron, a spokeswoman for the Washington, D.C.-based group.

Oak, maple and elm trees are some of the usual culprits across the Southeast, making it one of the worst regions for spring allergies, she said. And though anyone with weepy eyes or a case of the sniffles already knows it, pollen seems to collect in the Roanoke Valley.

"The valley ... works like a plate," said Dr. George Abraham, a Roanoke allergist who has noticed a seasonal uptick in patients at Allergy & Asthma Associates.

Dr. Saju Eapen compared it to a different piece of tableware.

"People talk about the bowl effect," said Eapen, an allergist with the Asthma & Allergy Center of Roanoke. Did that make this a particularly bad season for local folks? "Every year seems like a bad one to the person with symptoms."

And their number is growing. About 50 million Americans suffer from allergies, according to Johnson & Johnson, maker of the antihistamine, Benadryl. Eapen said he has seen "an explosion" in the number of people with allergies, too, especially children.

In addition, climate change has drawn what was once a definitive four-week season out to six or eight weeks, said Waldron, with the allergy foundation. Allergists are seeing a rise in bookings earlier in the season, she said.

For the afflicted, Waldron suggests a trip to the allergist for an allergy, or skin prick, test. That way patients can be sure they are treating their allergies with the right medicine.

"If you don't want to take that route and you're stubborn," she said, you can try your drug store options -- common over-the-counter choices include Claritin, Allavert, Zyrtec and their generics. Though if symptoms aren't any better in three days, she advised against buying any more.

Local allergists offered some common-sense tips for reducing symptoms: Close the windows and run the air conditioner. Avoid yard work. A bath and change of clothes can help after being outside.

And though at times it may seem like nothing will do short of moving to Arizona, take heart.

"It may work, but for a lot of people it won't," Eapen said. "There are allergens in Arizona also."

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**The Plain Dealer Online**  
**Wrestling with your allergies?**  
**April 22, 2008**

Here are some things you should be aware of to ease the suffering.

**Control your environment**

Stay indoors. No open windows. Wear a mask while mowing the lawn or gardening. Try keeping your pet at arms length, unless it's a hairless dog. Extreme? Maybe, but it beats itching, sneezing and wheezing all summer.

**Medications**

There are more over-the counter and prescription offerings than you can count. Antihistamines come in eye drop, nasal spray, pills and liquid forms. Pills are either "first generation," such as Benadryl, or "second generation," such as Claritin and Zyrtec, and often also come with a combination decongestant. Check with your doctor before using one of the combos if you have other health issues.

**Immunotherapy**

People with severe allergies are good candidates for allergy shots, which are given regularly, gradually decreasing in frequency over the course of several months or years. Holistic approaches and natural options Castor oil, garlic and a plant extract called butterbur have all been proven to provide some allergy relief. Other combinations of natural ingredients might be options for those with less severe allergies who want to forego Western medicine. Check out mamaherb.com for tips.

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**Taro Pharmaceutical Industries Ltd. Press Release**  
**Taro Receives Final FDA Approval for Cetirizine Hydrochloride Oral Solution ANDA**  
**April 22, 2008**

**(picked up by StreetInsider.com, Genetic Engineering News Online, Pharmalive.com)**

HAWTHORNE, N.Y.--(BUSINESS WIRE)--April 22, 2008 - Taro Pharmaceutical Industries Ltd. (Pink Sheets: TAROF, "Taro", the "Company") reported today that it has received final approval from the U.S. Food and Drug Administration ("FDA") for its Abbreviated New Drug Application ("ANDA") for cetirizine hydrochloride oral solution, 1 mg / 1 mL ("Cetirizine Oral Solution"). The product will be marketed by Taro's U.S. affiliate, Taro Pharmaceuticals U.S.A., Inc.

Taro's Cetirizine Oral Solution is bioequivalent to McNeil Consumer Healthcare's Zyrtec(R) Oral Solution. Cetirizine Oral Solution is an over-the-counter antihistamine used for the relief of sneezing, runny nose, itchy, watery eyes and itchy throat or nose due to indoor and outdoor allergies and for the relief of itching due to hives. According to industry sources, annual U.S. sales of this product, when it was previously sold by prescription only, were approximately \$160 million.

Taro is a multinational, science-based pharmaceutical company, dedicated to meeting the needs of its customers through the discovery, development, manufacturing and marketing of the highest quality healthcare products.

For further information on Taro Pharmaceutical Industries Ltd., please visit the Company's website at [www.taro.com](http://www.taro.com).

Certain statements in this release are forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995, including statements regarding Taro's Cetirizine Oral Solution product. Although Taro believes the expectations reflected in such forward-looking statements to be based on reasonable assumptions, it can give no assurance that its expectations will be attained. Factors that could cause actual results to differ include industry and market conditions; slower than anticipated penetration of new markets; physician, pharmacist or patient acceptance of Taro's Cetirizine Oral Solution product and other products; changes in Taro's financial position; regulatory actions; and, other risks detailed from time to time in Taro's SEC reports, including its Annual Reports on Form 20-F. Forward-looking statements speak only as of the date on which they are made. Taro undertakes no obligation to update, change or revise any forward-looking statements, whether as a result of new information, additional or subsequent developments or otherwise.

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#### **DoctorsGuide.com Reviewers Say Children Should Not Take Antihistamines for Chronic Cough April 21, 2008**

NEW YORK -- April 21, 2008 -- According to a review in the latest issue of The Cochrane Library, possible adverse events may outweigh the benefits of antihistamines when used to treat chronic cough in children. This review adds to the growing body of evidence casting doubt on the use of a variety of medicines for children.

The authors examined 5 studies involving nearly 1,000 children, with ages ranging from 6 months to 17 years. Many children had allergies to grass, pollen, or dust mites, or they had a family history of allergy.

Two of the studies the authors reviewed were larger studies that showed significant improvement both in children who took antihistamines and those who took placebo, but no significant difference was seen between the 2 groups.

A smaller study involving 20 school-aged children found that cetirizine (Zyrtec) clinically improves cough due to pollen allergy. In that study, the antihistamine was significantly more effective than placebo in reducing chronic cough in children with allergies.

Another study examined the use of ketotifen (Zaditen) to minimise the frequency of asthma attacks in 113 infants ranging in age from 6 months to 36 months. After a 4-week, no-medication baseline, infants received a placebo or ketotifen for 16 weeks. The researchers concluded that they were "unable to show a therapeutic advantage of ketotifen over placebo."

The reviewers noted that the effectiveness of these medications should be weighed against their reported side effects, especially in young children. Most of the events reported in these studies were minor, and the most common events were irritability and gastrointestinal upset. Four children were withdrawn from 1 study, and 12 other children felt drowsy after taking the study medication.

A small trial involving cetirizine had reported that there were no adverse effects.

However, because not all antihistamines are created equal, older antihistamines may have more anticholinergic activity, said Richard Irwin, MD, Professor, University of Massachusetts Medical School, Worcester, Massachusetts.

"These older drugs, therefore, can work when the cause of the upper airway cough is not due to allergies, and they can also work if the cause of the cough is due to allergies," Dr. Irwin said. "On the other hand, because the new drugs such as cetirizine or loratadine don't have much anticholinergic activity to speak of, they will only work if the cause of the upper airway cough is due to allergies."

Newer antihistamines "have been shown to be of help in children with allergic rhinitis," Dr. Irwin said. "The literature supports using these specific antihistamines when children have cough in association with seasonal allergies that involve the nose."

In children, it is important to elucidate the cause of the cough, said lead reviewer Anne B. Chang, PhD, Royal Children's Hospital, Brisbane, Australia, and Professor, Menzies School of Health Research, Queensland, Australia. She recommends that physicians talk to parents about their fears and concerns and says that parents who smoke should stop. When Dr. Chang's patients show up with a nonspecific cough, she says she uses a cautious, wait-see-and-review approach.

The reviewers concluded, "In contrast to recommendations in adults with chronic cough, antihistamines cannot be recommended as empirical therapy for children with chronic cough."

SOURCE: The Cochrane Library, 2008, Issue 2

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***Drug Store News***  
**Rite Aid on right track for fiscal 2009**  
**April 21, 2008**  
**By Michael Johnsen**

CAMP HILL, Pa.- Rite Aid is one month shy of completing systems conversions across its acquired Brooks/Eckerd store base-as of earlier this month, conversions to Rite Aid's NexGen pharmacy system had been completed in some 1,300 stores, or 75 percent of the Brooks/Eckerd store base.

The chain is two months shy of folding Brooks/Eckerd same-store sales into its own comparable-period sales results. And while those Brooks/Eckerd stores are currently trending negative in same-store sales results, those figures ought to flip positive and provide a boost to Rite Aid's overall sales results once prior-to-Rite Aid heavy front-end promotions are cycled through-and even more so once Rite Aid's conversion of those stores, from the back-end information technology systems through the front-end product mix, is cycled through well into next year. "We expect margins in these stores to continue to improve as we cycle aggressive pre-acquisition promotions and continue to increase their generic-dispense rate and private-brand penetration," stated Mary Sammons, Rite Aid chairman, president and chief executive officer, to analysts earlier this month. "We expect same-store sales trends at the acquired stores to turn positive in the third quarter of the year," she said, noting that overall sales at the acquired stores were below what Rite Aid expected when it took the reigns in June of last year, "much of the decrease is likely due to the nine months it took to complete the transaction," Sammons said.

And Rite Aid is six months shy of taking the last vestiges of Brooks/Eckerd from the retail landscape. After taking a hiatus for the holidays in December, Rite Aid has worked up toward executing 60 minor remodels per week since February. To date, more than 450 stores have been completely transformed.

Rite Aid's private-label penetration across the Brooks/ Eckerd network already has improved some 200 basis points since the chain acquired the East Coast retailer last June, and some 125 former Brooks/Eckerd locations now boast a GNC vitamin and supplement department-the majority of 350 additional GNCs will be added to the Brooks and Eckerd stores this fiscal year-which, on a category basis, provides a comparable sales boost three times greater compared with Rite Aid supplement departments without the GNC branding.

In other words, Rite Aid is right on course with its initial plans of assimilating the Brooks/Eckerd stores into the Rite Aid mix. The only projection that's really changed since Rite Aid acquired Brooks/ Eckerd almost a year ago is the capital expenditures commitment the chain planned to make this year-from a projection of around \$700 million to \$600 million on account of the weaker economy. "As we've said in the past, we are recession-resistant, but not recession-proof," said Kevin Twomey, Rite Aid executive vice president and chief financial officer. Accordingly, Rite Aid has scaled back its capital expenditures in anticipation that the current economic climate will get worse before it gets better.

Brooks/Eckerd conversions aside, a weakened economy is of particular concern not only to Rite Aid, but all drug store retailers. While a weakened economy may entice consumers to trade down more aggressively toward generic medicines and store-brand alternatives, it also will force retailers into being a little more promotional on the front end to prevent any kind of mass exodus to such deep discounters as Wal-Mart.

Rite Aid already appears to be well-positioned in its promotional strategy going forward. The chain reported a front-end same-store sales increase of 5.7 percent, including a 300- to 400-basis-point benefit from an early Easter, compared with last year. "We had been looking for 2 percent front-end comps, including [an approximate] 80 basis points from Easter," noted Lehman Brothers analyst Meredith Adler in an April 4 research note. "Thus the actual underlying run rate of [around] 2.2 percent was above our base case forecast of [around] 1.2 percent, and was on pace with the recent trend despite the ongoing economic slowdown," Adler said, noting that the tail end of the flu season was neutral to front-end comps and that there was a slight lift from the Rx-to-OTC switch of McNeil Consumer's Zyrtec allergy remedy.

"Although results for fiscal 2008 were not as strong as we had planned when we started the year, we continue to set the stage for our future long-term growth with our Brooks/Eckerd acquisition, our integration activities, our sales and expense control initiatives and the increased depth we added to our senior management team, especially in operations," Sammons told analysts.

It's the company's focus on core market growth that prompted Rite Aid to load up on 12 Pharm Drug Stores in the Toledo, Ohio, area in an acquisition from Spartan Stores last month, in a deal that's expected to close this summer. "In contrast, [it's also] why we sold our stores in Las Vegas, which has never been a core market for Rite Aid," Sammons said.

The No. 3 drug retailer reported a net loss of \$1.1 billion for its fiscal 2008 ended March 1, which included only three quarters of results from its acquired Brooks/ Eckerd operations. "Without the impact of [a] tax charge, and the resulting loss of a tax benefit in the fourth quarter, we would have reported a net loss that was within our guided range," Sammons said, noting that the net loss would have been around 29 cents per share versus the \$1.54 loss per diluted share that the chain recorded for the year.

Rite Aid recorded \$24.3 billion in overall revenues for the year, an increase of 39.8 percent. Rite Aid's adjusted EBITDA was tallied at \$962.8 million, or 4 percent of revenues for the year, compared with \$696.9 million or 4 percent of revenues for last year. Analysts had expected Rite Aid's EBITDA to be slightly higher-between \$970 million and \$975 million, or just below the midpoint of Rite Aid's 2008 guidance.

Same-store sales for the 52-week year increased 1.3 percent (not including Brooks/Eckerd operations), consisting of a 1.7 percent pharmacy same-store sales increase and a 0.7 percent increase in front-end same-store sales.

Providing guidance for fiscal 2009, which ends Feb. 28, Rite Aid expects to cut those net losses to less than \$375 million on sales ranging between \$26.7 billion and \$27.2 billion, and same-store sales (which at that time will include nine months of sales from the Brooks/Eckerd stores) to improve 2 percent to 4 percent compared with fiscal 2008. Adjusted EBITDA is expected to fall between \$1 billion and \$1.1 billion.

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### **Supermarket News**

#### **OTC: ALLERGY ACTION**

**April 21, 2008**

**By AL HELLER**

To cash in on the popularity of Rx-to-OTC switches, supermarkets gain an edge when they're early to market the new self-care remedies, with visible displays, competitive prices and pharmacists trained to make the recommendation.

Food stores that execute best, and connect switches to nurse-run clinics and wellness themes, will more certainly earn an image as a health care destination, retailers and health care industry experts told SN.

The rewards of getting it right are great. Self-care categories grew dramatically in the switch heydays of the past two decades, so supermarkets were ready to pounce on Zyrtec and Zyrtec-D from McNeil Consumer Healthcare, Fort Washington, Pa., the 24-hour, indoor-outdoor allergy medication that attained over-the-counter status this winter.

This launch was unusual because of the near-simultaneous launch of a generic version, which chains used as an opportunity to market private label. Typically, the Food and Drug Administration could grant a branded switch up to three years of market exclusivity if the manufacturer shows the switch is new and different. That happened with proton pump inhibitor Prilosec in 2003, for example.

However, because allergy medication Claritin-D did not get exclusivity when it went OTC in 2002, the makers of Zyrtec didn't even attempt to get it in 2008, said Laura Mahecha, health care industry manager of the Kline & Co. consultancy, Little Falls, N.J.

Before that, the most significant switch was last summer's weight-loss aid Alli from GlaxoSmithKline, Moon Township, Pa., which broke new marketing ground by surrounding the former Xenical prescription drug with an educational book and calls for users to exercise more and eat low-fat foods.

As spring arrived, John Fegan, senior vice president of pharmacy, Ahold USA, Quincy, Mass., said, "We'll see Zyrtec flying off the shelves, with flu season done and allergy season on the way." OTC Zyrtec launched at the beginning of the year.

Even in its early days of over-the-counter distribution, he called unit sales "significant. Of course, we're dispensing more tablets in the category, but getting fewer sales dollars because the branded prescription was so much more expensive. We're also seeing an increase in generic prescriptions."

The effect of the price break didn't surprise him, however. "Some insurance carriers are covering the OTC version when patients are directed by their physicians. They can move them off of higher-cost products without negatively impacting their health, and it helps to control their expenses," Fegan added.

Bob Mueller, director of pharmacy, Schnuck Markets, St. Louis, observed that many customers in his trading area lost their insurance coverage for Zyrtec once it went OTC, and that is driving them to buy the less-expensive generic OTC version rather than the branded Zyrtec OTC product.



"Branded and generic prescription volume has fallen off a cliff with the switch," he said, calling the dynamics within the corresponding OTC segment "interesting. The drug entity is doing great, but the brand name isn't faring too well because, in this case, generics reached the shelves as fast as the brand name. Brands usually come out at least weeks ahead of the generics and get a jump."

Texas consumers are "glad they don't have to go get a prescription anymore for their allergy relief," said Ron Peters, vice president of pharmacy, Minyard Food Stores, Coppell, Texas. "The OTC is a good product, and there's a less expensive generic available too."

On the West Coast, Michele Snider, director of pharmacy at Save Mart Supermarkets, Modesto, Calif., also noted consumer preference for the generic OTC over the Zyrtec OTC because the brand is so expensive. "Most pharmacy benefit managers no longer cover Zyrtec, and few antihistamines are prescription only, so the PBMs recommended that their members take the OTC version," she said.

This aggressive pursuit of switch sales is understandable, given drug distribution trends and America's ongoing shift to self-care, the 47 million uninsured and a tightening economy that has people seeking lower-cost health care solutions. More than 700 OTC drugs use ingredients and dosages that were only available as prescriptions less than 30 years ago.

"When a drug goes OTC, it goes from being available in 55,000 locations to 500,000 locations — everywhere from the local 7-Eleven to airport bookstores. Pharmacy loses that anchor and retailers either get busy or lose their share," said Bruce Kneeland, president of the PharmacyConnections consultancy, Valley Forge, Pa.

"Unfortunately, I don't see supermarket wellness themes reaching into the switch arena. It continually evades me how supermarket pharmacy trails in segment volume. It seems counter-intuitive," he added.

If supermarkets do trail the sharp pricing and wide assortments of big-box discounters and the expertise and image of drug stores, there still appears to be plenty of switch volume and growth to go around for the foreseeable future.

#### PHARMACIST'S ADVICE

Field execution will be key to their brand success, suggested Kneeland, who told how his own attempt to buy Zyrtec was squelched by a relief pharmacist on duty at a nearby supermarket. "The pharmacist I trust recently moved over to this store," he said. "I went to see the product and get her opinion because I've only used Sudafed until now. A freestanding display of Zyrtec had no price. The relief pharmacist told me it was \$29, but, 'You don't want to buy it anyway. It's just a longer-acting version of Adderax [a mild tranquilizer/powerful antihistamine marketed by Pfizer in the 1970s].'"

"No consumer in the world would know that. I walked away. Five weeks later, I bought the private label at a discounter. Manufacturers need to educate pharmacists. This demonstrated the power of the pharmacist recommendation in reverse."

Supermarkets are at a slight disadvantage with switches because brand marketers tend to focus on drug and mass channels with displays, signs and training, said Kline's Mahecha. "A company as large as Ahold should also get good attention, but small regional operators get less.

"Since switches are pretty high-priced items with [good] margins, it behooves supermarket pharmacists to be informed, even if they have to chase the information online or elsewhere," she noted, urging supermarkets to request that manufacturers also provide them with all of the same marketing and educational materials.

"Pharmacists are so trusted that consumers tend to buy whatever they recommend," she added.

Zyrtec-D has pseudoephedrine, so it's behind the counter like Claritin-D and other remedies. Despite daily purchase limits and the loss of impulse, Mahecha sees a positive side to these restrained displays: "Patients are becoming accustomed to asking for PSE products, and this opens the line of communication with the pharmacist."

Supermarkets may not match the variety of Wal-Mart, with eight different Zyrtec OTC stockkeeping units, or its private label, or its pricing, but the intimacy of the supermarket format with walk-in clinics can create a key focal area for merchandising OTCs, and Rx-to-OTC switches in particular. "Supermarkets need to develop merchandising around the entryway to clinics, just as they have for pharmacy checkouts," said Kneeland. "Their artful display of switched products can help capture first sales. The halo effect surrounding clinics adds a rational component to the strategy."

"There's an opportunity now for the nurse-practitioner to recommend the switched product and say, 'Ordinarily, I'd prescribe this for you, but it's now available over the counter. If you'll take that, let me put it in your record so we can document it, track it and consult with you on any possible interactions,'" Kneeland added. "By treating the transaction seriously, supermarkets do a better job of convincing people that OTCs are real medicines."

#### ZYRTEC AND ALLI

How great is the potential of Zyrtec and Alli for food stores and other channels? Zyrtec prescription sales were \$1.3 billion in 2007, according to IMS Health, Norwalk, Conn. With the switch, retailers have told SN that prescription sales expectedly plummeted, and over-the-counter sales of the drug entity are strong. However, people are often buying the private label at the expense of Zyrtec to save money. That's not such bad news for supermarkets enjoying their high margins on the generic-produced alternatives.

By comparison, Xenical sales had dwindled dramatically to \$86.6 million in 2005, said IMS, and Alli has since revived the drug. After reaching store shelves in June 2007, Alli has sold significantly in spite of well-publicized leakage and oily discharge issues (from unabsorbed fat) associated with its use, and an estimated \$60-per-month consumer cost.

Alli has sold \$141.6 million in U.S. food, drug and mass merchandise outlets (excluding Wal-Mart) in the 52-week period ended March 23, on sales of 2.4 million units, according to Information Resources Inc.'s Infocan Reviews data. This represents a 37.5% share of dollar sales of the \$377.7 million weight-control candy-tablet segment. The brand's contribution to segment sales is greater than first appears, however, because Alli achieved its sales in less time than the 52 weeks reported for the entire segment.

It also opens the door for supermarket pharmacists to partner with store dietitians to provide some additional counseling about healthy eating as an adjunct to pharmacological therapy, John Beckner, director, pharmacy and health services, Ukrop's Super Markets, Richmond, Va., told SN.

Wal-Mart said in January that Alli had become its best-selling OTC diet product.

What the data doesn't show is the degree of initial launch and first-time consumer sales vs. follow-up purchases reflective of people sticking with the regimen. "Glaxo has been praised for its educational materials and consumer outreach. They don't want consumers looking for a magic pill. They want users who'll eat right and exercise to lose weight," said Kline's Mahecha. "That said, if people spend that much, they want results. It's not a formalized program like Jenny Craig or Weight Watchers, and people who do it alone can fall back quickly. And the side effects are unpleasant."

"Will sales sustain? We'll see. It's certainly done a lot better than I thought it would," she added. Additional reporting by Wendy Toth

[www.primemediabusiness.com](http://www.primemediabusiness.com)

**The Associated Press**

**Analysts: Drug maker earns get temporary lift amid problems**

**April 21, 2008**

**By LINDA A. JOHNSON**

**(picked up by The Houston Chronicle Online, TheNewsTribune.com, Fort Worth Star Telegram Online, San Diego Union Tribune, and Bay News 9 (FL))**

TRENTON, N.J. — Major drug companies saw their bottom lines buoyed by a weak dollar, one-time gains and other temporary items, but their shares still fell because of basic economic problems hurting the industry.

With generic drugs shrinking sales of former blockbusters, a shortage of strong new products and a lack of promising drugs in their research pipelines, most drug makers tried to beat or at least match Wall Street expectations through increased spending on marketing and cost cuts, some analysts say.

"They've all been the same — one-shot gimmicks or foreign exchange rates" boosting results this quarter, said Steve Brozak of WBB Securities. "This proves to us that we are in a recession."

Rising foreign sales and favorable currency exchanges rates were also a big help to large drug makers because the weak dollar raises the value of overseas sales when converted back to U.S. currency.

George Farra of Woodley Farra Manion Portfolio Management Inc., which owns Eli Lilly and Co. and Abbott Laboratories Inc. shares, said big pharmaceutical companies have returned a "mixed bag" of results this quarter. But he said the industry "lacks a catalyst" — new blockbusters to spur growth.

"Each company generally has had somewhat of the same narrative ... limited pipeline visibility, patent expirations and decelerating growth in their main products," said Les Funtleyder, an analyst for Miller Tabak and Co.

Deutsche Bank analyst Barbara Ryan said drug makers taking a huge hit to sales from generic competition keep reducing costs and trying to pick the right research projects as they endure the current down cycle.

"In this market, you just can't miss earnings" forecasts without your stock being hammered, she added.

Eli Lilly and Co. missed with its report on Monday, by a nickel per share, and its stock dropped \$2.48, or nearly 5 percent, to \$45.59. Merck & Co. Inc. shares slipped 13 cents to \$39.63.

Whitehouse Station, N.J.-based Merck nearly doubled its profit, helped by a \$1.4 billion payment from longtime marketing partner AstraZeneca PLC. Merck, the maker of allergy pill Singulair posted net income of \$3.3 billion, or \$1.52 per share, up from \$1.7 billion, or 78 cents a share, a year earlier.

Excluding one-time items, Merck earned 89 cents, 3 cents more than expected by analysts surveyed by Thomson Financial. But Merck missed its forecast with only \$5.82 billion in sales, which would have been down about 3 percent without a big boost from favorable currency exchange rates.

Its newer products are selling well, but osteoporosis treatment Fosamax, which had been the leading drug in the category, saw first-quarter sales plunge 37 percent as sales of generic drugs cut into its profits.

Lilly, based in Indianapolis, said earnings jumped to \$1.06 billion, or 97 cents per share, including a gain on settling an IRS audit, from its year-ago profit of \$508.7 million, when it took a hefty acquisition charge.

Revenues increased 14 percent to \$4.81 billion, on higher sales of depression treatment Cymbalta and impotence drug Cialis. But U.S. sales of the anti-psychotic Zyprexa, Lilly's top-seller, fell 5 percent.

Lilly last week said it planned to cut up to 500 of its 40,300 jobs to streamline the manufacturing of some insulin products and the osteoporosis drug Forteo.

Meanwhile, Switzerland's Novartis AG reported a 7 percent rise in first-quarter profit, citing a declining dollar as well as a solid performance in its vaccines and diagnostics division.

Earnings rose to \$2.32 billion (1.47 billion euros), or \$1.02 per share, from \$2.17 billion, or 92 cents, in the same quarter last year. In local currencies, earnings appeared more modest or even declined

Analysts said its profits were better than expected, but the company has been hit by strong competition from generics, particularly in the U.S., where its sales fell 19 percent.

Lehman Brothers analyst Tony Butler noted that so far this quarter demand for drug makers' products outside the United States appears to consistently exceed "relatively anemic" U.S. demand.

Last week, Pfizer, the world's biggest drug maker, reported an 18 percent drop in first-quarter profit, to \$2.78 billion, or 41 cents per share. The New York-based company blamed tougher generic competition, particularly for blood-pressure drug Norvasc and allergy drug Zyrtec.

Pfizer earned 61 cents per share, excluding charges for two buyouts, but analysts had expected 66 cents and revenue of \$12.09 billion — about \$250 million more than Pfizer had.

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**Detroit Free Press Online**  
**PHARMACEUTICALS: Generics hurt Pfizer**  
**April 18, 2008**

Pfizer Inc., the world's biggest drugmaker, said Thursday its first-quarter profit fell 18% as generic competition hurt sales of blood-pressure drug Norvasc and allergy drug Zyrtec.

The results fell short of Wall Street estimates, and its shares fell 70 cents, or 3.3%, to close at \$20.40 Thursday.

The company earned \$2.78 billion, or 41 cents per share, compared with profit of \$3.39 billion, or 48 cents per share, during the same period a year ago.

Pfizer earned 61 cents per share, excluding charges for the buyouts of CovX and Coley Pharmaceutical Group Inc.

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**Chicago Tribune Online**  
**AMD's loss narrows; Pfizer's net slides; Nokia cuts forecast**  
**April 18, 2008**

Pfizer Inc., the world's biggest drugmaker, reported an 18 percent drop in its first-quarter profit on tougher generic competition but said it still expects to meet profit expectations for the full year.

The latest earnings and revenue figures each were below Wall Street expectations, and Pfizer shares fell 70 cents, or 3.3 percent, to \$20.40.

Its profit fell because of sharp declines in sales of the blood-pressure drug Norvasc and allergy drug Zyrtec. Both have lost patent protection and compete against cheaper generic drugs. The company

earned \$2.78 billion, or 41 cents per share, in the quarter, compared with profit of \$3.39 billion, or 48 cents per share, a year earlier. Pfizer earned 61 cents per share excluding charges.

Revenue fell 5 percent, to \$11.85 billion.

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#### **MarketWatch**

#### **Drug stocks follow broader market north**

**April 18, 2008**

**By Val Brickates Kennedy**

BOSTON (MarketWatch) -- Drug stocks tracked the broader market higher Friday, with shares of Pfizer Inc. on the rebound after sliding almost 4% Thursday on a disappointing earnings report.

The Amex Pharmaceutical Index (\$DRGpharmaceutical index drg \$DRG) climbed 0.9% to 300.3 and the Amex Biotechnology Index (\$BTKbiotechnology index \$BTK) advanced 1.2% to 763.2 and 757.1 during a comparatively calm session for the sectors on Wall Street in the middle of earnings season.

Pfizer (PFEPfizer Inc PFE) shares were up fractionally at \$20.44.

Pfizer's first-quarter profit dropped 18%, reflecting increased generic competition for such top-selling products as Norvasc, Zyrtec and Lipitor, the blue-chip drugmaker said Thursday.

For the three months ended March 31, New York-based Pfizer posted net income of \$2.8 billion, or 41 cents a share, down from \$3.4 billion, or 48 cents, earned in the year-earlier first quarter.

Excluding various accounting items, Pfizer would have reported adjusted quarterly earnings of 61 cents a share, off from 68 cents in 2007.

Revenue for the 2008 quarter fell 5% to \$11.85 billion, slipping from \$12.47 billion last year. Currency translations contributed 5% to this year's top line. See full story.

BioMarin (BMRNBMRN BMRN) Pharmaceutical shares advanced 4% to \$34.84. The biotech group reportedly began distributing its therapy Naglazyme in Japan earlier this week through AnGes MG Inc. Naglazyme is used to treat the rare genetic disorder MPS VI.

Val Brickates Kennedy is a reporter for MarketWatch in Boston.

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#### **Global Insight Daily Analysis**

#### **As Lipitor Stumbles, Pfizer Reports 18% Drop in Q1 Profits**

**April 18, 2008**

**By Aparna Krishnan**

Global Insight Perspective

#### **Significance**

Key product sales were hit by generic competition over the quarter. Worryingly, Lipitor (atorvastatin) showed signs of weakening, with U.S. sales down 18%. Operating income was down 17.6%, while net profit dropped by 18%.

#### **Implications**

On the positive front, products such as Chantix, Sutent, and Lyrica have kept revenues afloat, along with cost-cutting measures.

#### **Outlook**

Guidance remains unchanged, but there is concern over whether it is achievable given the firm's dependence on blockbuster drug Lipitor.

U.S. pharmaceutical major Pfizer reported a dip in revenues of 5% at US\$11.84 billion for the first quarter of 2008. Domestic pharmaceutical sales were notably down 21%, with international revenues at US\$5.76 billion absorbing some of the pressures of the challenging U.S. pharma scene. The company has attributed its sales decline to generic competition for key products Norvasc (amlodipine), Camptosar (irinotecan), and Zyrtec (cetirizine). Cost of sales and selling, informational and administrative (SIA) expenses were only marginally higher at 5% and 4%, respectively. Acquisition related in process R&D charges witnessed a 40% growth year-on-year (y/y), affecting total expenditure. However, restructuring measures and the favourable impact of foreign exchange mitigated some of the pressures of the cost structure this quarter.

Selected Highlights: Pfizer Q1 (US\$ mil. unless otherwise stated)

	Q1 2008 % Change Y/Y on Reported Basis	
Revenues	11,848	-5
Cost of Sales	1,986	5
Selling, Informational and Administrative (SIA) Expenses	3,492	4
Research and Development (R&D)	1,791	8
Operating Income*	4,579	-17.65
U.S. Pharmaceutical Revenues	5,141	-21
International Pharmaceutical Revenues	5763	13
Total Pharmaceuticals Revenues	10904	-6
Net Income	2784	-18

Source: Company except \*Global Insight calculation based on revenues minus cost of sales, SIA and R&D expenditure

In terms of product sales, Lipitor revenues dropped by 7% y/y despite the favourable impact of foreign exchange, which helped push up revenues by 4%. The product's U.S. sales were down 18%, mainly attributed to a cost-sensitive and highly competitive statins market. Lipitor's international sales helped mitigate some of the losses with a 13% y/y growth rate in the quarter. While generic competition affected Norvasc, Camptosar, and Zyrtec; growth was depressed for other products, including Zithromax, Diflunac, Relpax, and Neurontin. As the second-largest product contributor in value, Celebrex posted lacklustre growth at just 2%. However, Pfizer noted that international sales reported a 20% y/y growth rate, reflecting increased demand. Chantix/Champix, Viagra, Vfend, Sutent, and Xalatan have kept up their increased contributions to overall sales.

Pfizer: Product Sales

	Q1 2008 (US\$ mil.) % Growth	
Cardiovascular/Metabolic	4494	-13
Lipitor	3137	-7
Norvasc	513	-52
Chantix/Champix	277	71
Caduet	147	1
Cardura	121	-10
Central Nervous System	1386	11
Lyrica	582	47
Geodon/Zeldox	241	12
Zolof	122	-17
Neurontin	89	-19
Aricept*	104	22
Xanax/XR	86	14
Relpax	77	-7
Arthritis/Pain	755	1

Celebrex	611	2	
Infectious Disease and Respiratory	931		2
Zyvox	259	1	
Vfend	171	15	
Zithromax/Zmax	120		-8
Diflucan	89	-19	
Urology	748	4	
Viagra	460	6	
Detrol/Detrol LA	313	3	
Oncology	637	7	
Camptosar	192	-16	
Sutent	190	86	
Aromasin	104	13	
Ophthalmology	413	13	
Xalatan/Xalacom	405	13	
Endocrine Disorders	258	6	
Genotropin	206	3	
All Other	758	-35	
Zyrtec/Zyrtec D	117	-75	
Alliance Revenues**	488	23	
Animal Health	619	6	
Other***	325	6	

Source: Company \*Represents direct sales under agreement with Eisai (Japan).\*\*Aricept, Macugen, Mirapex, Olmetec, Rebif and Spiriva.\*\*\* Includes Consumer Healthcare business transition activity, Capsugel and Pfizer Centersource.

Pfizer has also announced that the Canadian federal court upheld its patent covering Norvasc (amlodipine besylate) in Canada against generic producer Pharmascience. The product faces patent expiry in August 2010.

#### Outlook and Implications

The first-quarter figures reflect the challenging landscape for branded pharmaceutical firms in the United States. Like in 2007, the pressures in terms of generic competition and a cost-sensitive climate have persisted into the first quarter for Pfizer. While cost cutting measures have helped mitigate some of the losses, the impact of international sales and the favourable influence of foreign exchange have been Pfizer's saving grace. The pharma major has reiterated its guidance for 2008, confirming the adjusted income of US\$15.6-16.6 billion for 2008. However, the first-quarter performance has raised some concern as to whether this target is realistic. One of the issues relates to Lipitor and its contributions to topline, which has seen a fall this quarter, exposing the company's potential dependence on the drug in the short to medium term. Chief executive and chairman Jeff Kindler has admitted that the company is now seeking to "find a way to not be so dependent on one blockbuster," reports the Associated Press. The U.S. major is undertaking efforts to diversify and create a stronger product basket. Emphasis on alliances and acquisitions on a smaller scale have been seen to assume a greater role in an attempt to strengthen R&D pipelines; Pfizer's acquisition of Encysive Pharmaceuticals is one such example. The tough pharma environment is expected to continue to pressurise Pfizer's financial results in the forthcoming quarters.

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#### *Pittsburgh Post-Gazette*

#### **WALL STREET MIXED ON UNEVEN EARNINGS**

**April 18, 2008**

**By Tim Paradis**

NEW YORK -- Wall Street closed an erratic session mixed yesterday after an uneven batch of earnings reports made investors more cautious about buying stocks. Disappointing economic readings added to the market's uneasiness.

Investors were jittery after the Philadelphia Federal Reserve said regional manufacturing activity weakened further in April. The index of manufacturing activity fell to a negative 24.9 from a negative 17.4 in March. The survey found most manufacturing executives were "cautiously optimistic" about future activity, but a report of higher unemployment claims reinforced the market's recession worries.

Merrill Lynch & Co. reported a first-quarter loss of \$2.14 billion, a shortfall that was wider than the average analyst estimate. The loss came after the world's largest brokerage wrote down the value of assets tied to mortgages and leveraged loans by several billion dollars. The company also said it would eliminate 3,000 more jobs, for a total of 4,000 in the latest round of cuts.

Merrill's report followed a larger-than-anticipated rise in IBM Corp.'s quarterly earnings, but there also were disappointing results from Nokia Corp., the world's biggest mobile phone company, and drug maker Pfizer Inc.

Dan Laufenberg, chief economist for Ameriprise, said the market remained cautious, though less so than in recent weeks and months.

"The market is going to go up and down. When you have nice moves like you had yesterday and you hold onto most of that gain, I think that tends to be a more positive signal," he said.

The Dow Jones industrial average rose 1.22 to 12,620.49, after fluctuating throughout the day. The Standard & Poor's 500 index edged up 0.85 to 1,365.56, and the Nasdaq composite index fell 8.28 to 2,341.83.

Advancing issues narrowly outnumbered decliners on the New York Stock Exchange, where consolidated volume came to 3.6 billion shares vs. 4.1 billion traded Wednesday.

The mixed performance came a day after stocks shot higher in response to stronger-than-expected earnings from JPMorgan Chase & Co., Coca-Cola Co. and Intel Corp.

The quarterly reports that investors parsed yesterday were not as auspicious. Nokia, the Helsinki-based cell phone maker, said its profit rose by a weaker-than-expected 25 percent. It also said its global market share was down slightly. Its U.S. shares fell \$4.74, or 14.1 percent, to \$28.95.

Pfizer fell 70 cents, or 3.3 percent, to \$20.40 after its report that its first-quarter profit fell 18 percent due to competition from generics and falling sales of drugs including Lipitor, Norvasc and Zyrtec.

Harley-Davidson Inc. fell 70 cents, or 2 percent, to \$36.09 after the motorcycle maker said its profit declined, that it was cutting hundreds of jobs, and that it would ship up to 27,000 fewer motorcycles this year.

IBM was among the bright spots, boasting a higher-than-expected 26 percent jump in profits. IBM rose \$2.61, or 2.2 percent, to \$123.08.

The Russell 2000 index of smaller companies fell 5.72, or 0.80 percent, to 707.67.

Caption: Paul Sakuma/Associated Press Google co-founder Larry Page, left, and Google CEO Eric Schmidt, right, at the Consumer Electronics Show in January in Las Vegas. After the market closed, Google post first-quarter earnings that easily beat estimates. Its stock rose by more than 17 percent.

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**Chicago Tribune**

**Merrill Lynch loses \$2 billion, will cut 4,000; AMD's loss narrows; Pfizer's net slides; Nokia cuts forecast**

**April 18, 2008**



Investment bank Merrill Lynch & Co. posted a substantial loss on Thursday and announced it would cut about 4,000 jobs by the end of the year.

The 4,000 jobs include 1,100 -- mostly in mortgage-related businesses -- that have already been cut this year.

Merrill reported worse-than-expected earnings for the first quarter, including \$6.5 billion in write-downs and adjustments to assets in its mortgage, leveraged finance and other assets. The write-downs bring Merrill's total in the last three quarters to more than \$30 billion.

Merrill said it had lost \$1.96 billion, or \$2.19 a share, after its write-downs, down from a profit of \$2.106 billion, or \$2.26 a share, in the same period a year ago. Merrill's revenue, including interest and dividends, was \$2.9 billion -- down 69 percent from a year ago.

The job cuts will come from the company's global markets and investment banking division, which includes fixed income, currency, commodity and equity trading as well as banking. The layoffs will save \$800 million a year in compensation expenses, the bank said.

Chief Executive John Thain warned that Merrill could continue to struggle as the broader economic downturn continues. But he said the firm was on solid footing; it has raised more than \$12 billion in fresh capital.

Merrill shares rose \$1.82, or 4 percent, to \$46.71.

#### Other earnings news

Struggling chipmaker Advanced Micro Devices Inc. says its first-quarter loss narrowed but sales across all business segments were lower than it had expected.

AMD said that during the quarter it lost \$358 million, or 59 cents per share, compared with a loss of \$611 million, or \$1.11 per share, a year earlier.

The latest quarter's results include charges of 8 cents a share for the acquisition of graphics chip-maker ATI Technologies.

AMD's revenue rose 22 percent, to \$1.51 billion from \$1.23 billion.

The results came after the close of regular trading; AMD shares rose in after-hours activity.

Pfizer Inc., the world's biggest drugmaker, reported an 18 percent drop in its first-quarter profit on tougher generic competition but said it still expects to meet profit expectations for the full year.

The latest earnings and revenue figures each were below Wall Street expectations, and Pfizer shares fell 70 cents, or 3.3 percent, to \$20.40.

Its profit fell because of sharp declines in sales of the blood-pressure drug Norvasc and allergy drug Zyrtec. Both have lost patent protection and compete against cheaper generic drugs. The company earned \$2.78 billion, or 41 cents per share, in the quarter, compared with profit of \$3.39 billion, or 48 cents per share, a year earlier. Pfizer earned 61 cents per share excluding charges.

Revenue fell 5 percent, to \$11.85 billion.

Shares in Nokia Corp. plunged more than 14 percent in New York trading after the world's largest mobile phone manufacturer downgraded its forecast for the global handset market and posted lower-than-expected earnings in the first quarter.

Nokia reported a net profit of \$1.9 billion, 25 percent more than \$1.6 billion a year earlier, but below analyst forecasts.

Revenue grew 28 percent, to \$20 billion from \$15.6 billion.

The Espoo, Finland-based company said its market share slipped from 40 percent in the fourth quarter to 39 percent in the first quarter this year. But it sold 115 million mobile devices in the first quarter -- up 27 percent from a year earlier, and its market share was 3 points higher than in the first quarter a year ago.

Shares dropped \$4.74, or 14.1 percent, to \$28.95.

Southwest Airlines Co. eked out a profit in the first quarter but said rising costs would force it to slow its fleet expansion plans.

Travelers can also expect to pay more to fly this summer. Southwest raised prices last week, then bumped them again this week by up to \$10 each way for flights from mid-June through mid-August.

Southwest said it earned \$34 million, or 5 cents per share, in the quarter, compared with \$93 million, or 12 cents per share, a year earlier.

"They did a masterful job given the amount of adversity in the airline industry," said Dan Ortwerth, an analyst with Edward Jones. "It's a good house in a very bad neighborhood."

Revenue rose 15 percent, to \$2.53 billion. Southwest shares advanced 11 cents, to \$12.61.

Grocery giant Supervalu Inc., the parent of Jewel stores, said fiscal fourth-quarter profits jumped 30 percent as it paid down debt and cut administrative expenses.

Earnings rose to \$156 million, or 73 cents per share, from \$120 million, or 57 cents per share a year earlier.

Revenue climbed less than 1 percent, to \$10.39 billion from \$10.3 billion.

For the full year, Supervalu earned \$593 million, or \$2.76 per share, up from \$452 million, or \$2.32 per share, during the prior year. Revenue rose to \$44.05 billion, from \$37.41 billion a year ago.

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***The Wall Street Journal***

**Corporate News: Pfizer Net Drops 18% As Rivals Strengthen**

**April 18, 2008**

**By Avery Johnson**

Pfizer Inc.'s first-quarter profit tumbled 18% on stiffer competition and signs of weakness in blockbuster drug Lipitor, falling short of Wall Street's estimates and adding to long-term downward pressure on the company's stock.

The New York drug maker has encountered several headwinds recently. Two big sellers, blood-pressure medicine Norvasc and allergy treatment Zyrtec, were pummeled by competition. Concern about a possible link to suicide appeared to slow the growth of one of Pfizer's most promising new products, smoking-cessation treatment Chantix. And Lipitor, which had nearly \$13 billion of sales last year, has so far failed to benefit from competitors' struggles.

The rough quarter is likely to increase investor unease ahead of Pfizer's annual shareholder meeting Thursday. Chief among shareholders' worries is how Pfizer will weather generic competition to Lipitor as soon as 2010. Chief Executive Jeffrey Kindler reiterated a strategy Thursday that focuses on international

markets, cost cuts, maximizing growth from older products and advancing drugs in the development pipeline.

"If you put all of these together, we're confident they will provide us with a whole range of revenue opportunities going forward," Mr. Kindler said in an interview.

Wall Street appeared unconvinced. Pfizer's stock, already down 19% since Mr. Kindler took over in July 2006, fell 70 cents, or 3.3%, to \$20.40 in 4 p.m. New York Stock Exchange composite trading Thursday. Says Jami Rubin, a Morgan Stanley drug analyst: "Jeff's strategy for growth is falling on deaf ears."

Lipitor sales fell 7% to \$3.14 billion. Analysts had hoped Lipitor would get a boost at the expense of Vytorin and Zetia, cholesterol medicines sold by Merck & Co. and Schering-Plough Corp. whose effectiveness against heart disease was undercut by negative results from a study in January. Ms. Rubin had estimated Lipitor sales in the first quarter at \$3.3 billion.

But Vytorin users appear to be migrating first to a cheaper generic option, simvastatin. Mr. Kindler said that when new simvastatin users don't reach their cholesterol targets they might switch to Lipitor. The statin market as a whole has also slowed, says Barbara Ryan, a Deutsche Bank pharmaceuticals analyst.

Sales of Norvasc, which lost patent protection in March 2007, fell 52% to \$513 million. Pfizer sold the over-the-counter rights to Zyrtec to Johnson & Johnson and stopped selling the prescription version in January; its sales plunged 75% to \$117 million.

Lyrica, a medicine for pain, sold \$582 million in the quarter, up 47%. Sutent, a promising cancer drug, posted \$190 million in quarterly sales, up 86%.

But the third of Pfizer's hottest new products, Chantix, underwhelmed Wall Street with \$277 million in sales, after a label change warning of suicidal thinking slowed its growth. Sanford C. Bernstein analyst Tim Anderson had estimated first-quarter sales of \$315 million. Pfizer reiterated its confidence in the medicine's risk-benefit balance and pledged to continue to aggressively promote it.

Peter Loftus contributed to this article.

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**Associated Press**  
**Stocks end mixed after companies turn in uneven results**  
**April 18, 2008**

Wall Street finished an erratic session mixed Thursday after an uneven batch of earnings reports made investors cautious about buying stocks. Disappointing economic readings added to the market's uneasiness a day after a big rally.

The Dow Jones industrial average was little changed, edging up 1.22, or 0.01 percent, to 12,620.49, after fluctuating throughout the session. Broader stock indicators were mixed. The Standard & Poor's 500-stock index advanced 0.85, or 0.06 percent, to 1365.56, while the Nasdaq composite index fell 8.28, or 0.35 percent, to 2341.83.

Investors grew nervous after the Philadelphia Federal Reserve said regional manufacturing weakened further in April. The survey found most manufacturing executives were "cautiously optimistic" about future activity, but a report of higher unemployment claims reinforced the market's concern about recession.

In corporate news, Merrill Lynch reported a first-quarter loss of \$2.14 billion, a shortfall that was wider than the average estimate by analysts. The report followed a larger-than-anticipated rise in IBM's quarterly earnings, but Nokia and Pfizer posted disappointing results. Nokia, the Finnish cellphone maker, said its profit rose by 25 percent, which was weaker than expected. It also said its global market share is down slightly.

Oil prices set another record high overnight, but crude fell 7 cents from Wednesday's close to settle at \$114.86 a barrel on the New York Mercantile Exchange, the contract's first closing decline in a week.

#### Movers

Pfizer declined 70 cents, or 3.3 percent, to \$20.40 following the company's report that its first-quarter profit fell 18 percent following competition from generics and falling sales of drugs including Lipitor, Norvasc and Zyrtec.

IBM rose \$2.61, or 2.2 percent, to \$123.08 and was among the biggest gainers of the 30 stocks that comprise the Dow Jones industrials.

Harley-Davidson fell 70 cents, to \$36.09, after the motorcycle maker said that its profit declined, that it was cutting hundreds of jobs and that it would ship up to 27,000 fewer motorcycles this year.

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**Detroit Free Press Online**  
**PHARMACEUTICALS: Generics hurt Pfizer**  
**April 18, 2008**

Pfizer Inc., the world's biggest drugmaker, said Thursday its first-quarter profit fell 18% as generic competition hurt sales of blood-pressure drug Norvasc and allergy drug Zyrtec.

The results fell short of Wall Street estimates, and its shares fell 70 cents, or 3.3%, to close at \$20.40 Thursday.

The company earned \$2.78 billion, or 41 cents per share, compared with profit of \$3.39 billion, or 48 cents per share, during the same period a year ago.

Pfizer earned 61 cents per share, excluding charges for the buyouts of CovX and Coley Pharmaceutical Group Inc.

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**fox28.com (South Bend, IN)**  
**New Allergy Help is Here**  
**April 17, 2008**

We all love the warm weather, but for a lot of us it means allergy season.

If budding trees and flowers aren't your friends, there's a new medication that might help.

XYZAL is a new allergy medication that hit the market just in the last few months.

Doctors are saying it's stronger than most medications out there.

Marc Merrill from Merrill Pharmacy says, "XYZAL is the newest one on the market. It is available, but only by prescription. It's considerably more potent than Zyrtec. It can be used for both indoor and outdoor allergies, and it can also be used for hives."

Doctors say it's not too late to take antihistamines to help prevent some allergy symptoms.

They also recommend everyday steps to help fight the allergies, like washing your hair before bed, driving with your windows up, and having an air purifier in your home.

**TheStreet.com**  
**Thursday's Health Winners & Losers**  
**April 17, 2008**  
**By Elizabeth Trotta**

Health stocks, particularly pharmaceuticals, traded lower on Thursday amid earnings and investor disappointment.

The Nasdaq and Amex biotechnology indices were both down roughly 1.3%, and the Amex pharmaceutical index was down 1.4%.

Gilead GILD was among the biotechs in the red. The company beat estimates Wednesday post close, but found itself down \$1.76, or 3.4%, at \$50.04 on Thursday. The HIV drug specialist reported earning \$522.1 million, or 54 cents a share, before items, in the first quarter, compared to \$447.6 million, or 46 cents a share, in the year-ago quarter. Revenue rose 22% to \$1.26 billion. Results beat estimates of analysts surveyed by Thomson Financial who'd expected earnings of 48 cents a share on \$1.2 billion in revenue.

In other earnings news, Pfizer PFE suffered from lost exclusivity of Norvasc and Zyrtec. The company earned \$4 billion, or 61 cents a share, down from \$4.8 billion, or 68 cents a share, in the 2007 period, on an adjusted basis. Revenue declined to \$11.8 billion from \$12.4 billion in the quarter. Results were short of the consensus estimate offered by analysts surveyed by Thomson Financial. They were looking for earnings of 66 cents a share on roughly \$12 billion in revenue.

Pfizer's shares shed 82 cents, or 3.8%, to \$20.30. Some of Pfizer's pharma peers, Eli Lilly LLY, Bristol-Myers Squibb BMY, Merck MRK and AstraZeneca AZN were also on the downtick. Lilly, Bristol and AstraZeneca fell more than 2%, and Merck gave up 1.7%.

Also on the decline, Meridian Biosciences VIVO fell \$5.64, or 16.7%, to \$28.09 Thursday. The company said it earned \$7.3 million, or 18 cents a share, in the first quarter vs. \$5.9 million, or 15 cents a share, in the year-ago quarter. Sales increased 13% to \$36.2 million. Analysts polled by Thomson Financial had predicted 19 cents a share on \$37 million in revenue.

The company reiterated its guidance for earnings of 72 to 75 cents a share on sales of between \$140 million and \$142 million in 2008. Analysts had pegged 75 cents a share on revenue of \$141 million.

Elsewhere, Regulus, a joint venture between Isis ISIS and Alnylam ALNY announced a deal with GlaxoSmithKline GSK for microRNA, or small RNA that are thought to regulate genes linked to diseases like cancer and rheumatoid arthritis.

Glaxo will pay the pair \$20 million upfront in a \$15 million option fee and a \$5 million note that will convert into Regulus stock under the certain conditions. Regulus could receive up to \$144.5 million in future milestones, and also tiered royalties, on sales on each of four targeted therapeutics.

Isis shares added 5.2% to \$17.39, while Alnylam and Glaxo traded down 0.4% and 0.1%, respectively.

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**BusinessWeek Online**  
**Movers: IBM, Merrill Lynch, eBay, Nokia, Pfizer**  
**April 17, 2008**

Pfizer (PFE) posts \$0.61, vs. \$0.68, first quarter adjusted EPS on 5.0% revenue decline. Says results primarily impacted by the March 2007 loss of U.S. exclusivity of Norvasc, January 2008 loss of U.S. exclusivity of Zyrtec, which PFE ceased selling in late January Reaffirms \$2.35-\$2.45 2008 adjusted EPS on \$47-\$49 billion revenue forecast.

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**The Star-Ledger Online**

**Pfizer earnings fall, miss estimates on competition for Lipitor, Norvasc**

**April 17, 2008**

Pfizer Inc., the world's biggest drugmaker, said profit fell 18 percent, missing analysts' estimates, on generic competition to its cholesterol pill Lipitor and blood pressure drug Norvasc, according to a report in Bloomberg.

First-quarter net income dropped to \$2.8 billion, or 41 cents a share, from \$3.4 billion, or 48 cents, a year earlier, the New York-based company said today in a statement. Profit excluding some items was 61 cents a share, missing the 66-cent estimate by 16 analysts surveyed by Bloomberg.

Revenue fell 5 percent to \$11.8 billion. Pfizer has struggled to replace sales lost to generic competition and fired workers to lower costs. The company doesn't have enough new products in development to replace those going off patent in the next four years, including Lipitor, which accounts for about 40 percent of its profits, analysts said.

"I'm not sure any real progress can happen this year," said Linda Bannister, an analyst with Edward Jones & Co. in Des Peres, Missouri, in a telephone interview. "We need to continue to see progression in Pfizer's pipeline, and as it continues to progress, we'll get a sense of how many potential blockbusters there are. I'm not sure that will happen this year."

Pfizer shares rose 37 cents, or 1.8 percent, to \$21.08, yesterday in New York Stock Exchange composite trading. The stock has fallen 22 percent in the 12 months before today.

Lipitor sales fell 7 percent to \$3.1 billion. That compared with an estimate of \$3.4 billion by Deutsche Bank's Ryan. Doctors have been switching patients from Lipitor, the world's best selling drug, to generic copies of a rival cholesterol pill, Merck & Co.'s Zocor.

Sales of Norvasc have plunged 52 percent to \$513 million since generic copies of the blood pressure medicine came on the market last March.

Pfizer reaffirmed its guidance of revenue between \$47 billion and \$49 billion this year and earnings per share, excluding certain items, of \$2.35 to \$2.45.

To contact the reporter on this story: Shannon Pettypiece in New York at [spetty@bloomberg.net](mailto:spetty@bloomberg.net)

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**The Wall Street Journal Online**

**Pfizer's Net Falls 11% As Generics Advance**

**April 17, 2008**

**By JOHN FLOWERS**

Pfizer Inc.'s first-quarter net income fell 18% as generics invaded the market for two drugs and sales slipped again for its cornerstone drug Lipitor.

The world's largest drug maker by sales recorded net income of \$2.78 billion, or 41 cents a share, compared to \$3.39 billion, or 48 cents a share, a year earlier. Both periods included 20 cents in charges.

Revenue decreased 5% to \$11.85 billion, despite a five-percentage-point gain from the weaker dollar.

Analysts' mean estimates for earnings per share and revenue were 66 cents and \$12.09 billion, respectively, according to Thomson Financial.

Sales of its blockbuster Lipitor, the best-selling drug in the world, fell 6.6% to \$3.14 billion. The drug goes off patent in 2011 and is the cornerstone of Pfizer's fortunes. Last year it recorded its first year-over-year sales decline, and the company has yet to develop a drug that comes close to replacing revenue that will be lost when generic competition enters the market.

Sales of arthritis drug Celebrex rose 2.2%, while that of anti-smoking drug Chantix, which the Food and Drug Administration has warned may be linked to suicidal behavior, rose 71%.

Zyrtec, an allergy drug, saw its sales plummet 75% as Johnson & Johnson has entered the market with a Zyrtec generic. Pfizer in January stopped selling Zyrtec, an allergy medicine that brought in \$1.5 billion in 2007 sales. As part of the 2006 sale of Pfizer's consumer-health business, J&J won the rights to sell Zyrtec over the counter and Pfizer agreed to stop selling its prescription version when those sales began.

Sales of more recently developed painkillers, such as Lyrica -- which debuted in 2005 and sales of which rose 47% -- are noteworthy but the exception not the rule. Several drugs pegged to be perennial all-stars have not panned out. Inhaled-insulin Exubera was perhaps the biggest of these busts, instead costing the company \$2.8 billion in write-downs after its unwieldy size virtually killed sales.

As Pfizer deals with its weak drug pipeline, it is engaged in a rear-guard action of slashing costs, cutting jobs and outsourcing manufacturing and in the face of the advancing generics.

The company also is trying another common strategy in the industry -- growth by acquisition. Pfizer purchased a majority share, with plans to acquire the rest, in Encysive Pharmaceuticals Inc. Tuesday for \$195 million in cash, promising to shepherd the troubled drug company's signature drug Thelin through a new U.S. trial.

Looking ahead, the drugmaker reaffirmed full-year earnings forecasts excluding items of \$2.35 to \$2.45 a share on revenue of \$47 billion to \$49 billion.

Write to John Flowers at [john.flowers@dowjones.com](mailto:john.flowers@dowjones.com)

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#### **Thomson Financial**

**Pfizer 1Q adjusted eps misses Wall St. view by nickel; co. backs FY08 outlook**

**April 17, 2008**

**(picked up by AFX International Focus)**

NEW YORK (Thomson Financial) - Pfizer Inc. Thursday reported first-quarter adjusted earnings of \$4.1 billion, or 61 cents a share, 5 cents short of the mean estimate of analysts polled by Thomson Financial.

Revenue fell 5% in the latest three months to \$11.85 billion from \$12.47 billion in the same period a year earlier. Wall Street's consensus estimate was for revenue of \$12.09 billion in the March period.

The New York City-based drug giant attributed the revenue decline to its loss of U.S. exclusivity for Norvasc.

'As we discussed in our fourth-quarter 2007 earnings call and materials, the first-quarter 2008 is not comparable to the year-ago quarter due to the loss of U.S. exclusivity of Norvasc in late March 2007 and Zyrtec in late January 2008,' said Jeff Kindler, the company's chairman and chief executive officer. 'These results, however, are in-line with our expectations'

For the full year, Pfizer reaffirmed an outlook for adjusted earnings of \$2.35 to 42.45 a share on revenue of between \$47 billion and \$49 billion.

The current mean estimate of analysts polled by Thomson Financial is for a profit of \$2.39 a share in fiscal 2008 on revenue of \$48.37 billion.

The stock closed Wednesday at \$21.10.

Michael Baron

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**Bloomberg**  
**Pfizer Earnings Fall on Norvasc, Lipitor Competition**  
**April 17, 2008**  
**By Shannon Pettypiece**

April 17 (Bloomberg) -- Pfizer Inc., the world's biggest drugmaker, said profit fell 18 percent, missing analysts' estimates, on generic competition to its cholesterol pill Lipitor and blood pressure drug Norvasc.

Pfizer dropped as much as 4.4 percent in early New York trading. First-quarter net income declined to \$2.8 billion, or 41 cents a share, the New York-based company said today in a statement. Profit excluding some items missed analysts' estimates by 5 cents.

Revenue slid 5 percent to \$11.8 billion. The company doesn't have enough new products in development to replace those going off patent in the next four years, including Lipitor, which accounts for about 40 percent of its profits, analysts said. Pfizer Chief Executive Officer Jeffrey Kindler has tried to keep earnings up by cutting as much as \$2 billion in costs and squeezing more revenue out of existing products.

"Unless Kindler's plan is to tank revenue, I would say his plan is not working," said Les Funtleyder, an analyst with Miller Tabak & Co. in New York, in a telephone interview today. "There has been a lot of dissatisfaction from shareholders that they haven't been more aggressive. I think this announcement will only raise the din of investment concern."

Pfizer fell 89 cents, to \$20.21, at 7:37 a.m. in trading before the New York Stock Exchange opened. The stock declined 22 percent in the 12 months before today.

#### Exchange Rates

Foreign-exchange rates boosted revenue by \$570 million, or 5 percent, Pfizer said. Still, Lipitor sales fell 7 percent to \$3.1 billion, including a 4 percent boost from foreign exchange. That compared with an estimate of \$3.4 billion by Barbara Ryan, a Deutsche Bank analyst in Greenwich, Connecticut.

Doctors have been switching patients from Lipitor, the world's best-selling drug, to generic copies of a rival cholesterol pill, Merck & Co.'s Zocor, which costs about 80 percent less.

Sales of Norvasc have plunged 52 percent to \$513 million since generic copies of the blood pressure medicine came on the market last March.

Pfizer reaffirmed its forecast for revenue of \$47 billion to \$49 billion this year and earnings, excluding certain items, of \$2.35 to \$2.45 a share.

Analysts expected the company to report first-quarter earnings of 66 cents, according to the average estimate of 14 analysts surveyed by Bloomberg. Net income for the quarter a year earlier was \$3.4 billion, or 48 cents.

#### New Drugs

Pfizer has been counting on sales of new drugs to help offset some of the losses.



The two-year-old smoking drug Chantix increased 71 percent to \$277 million and the pain pill Lyrica gained 47 percent to \$582 billion since getting an expanded approval last year to treat fibromyalgia, a chronic pain condition.

Prescriptions for Chantix have been declining since the company said an unusual number of patients taking the pill committed or attempted suicide. The company said the drug may be responsible though there was no definitive link.

In February, the U.S. Food and Drug Administration warned that Chantix appears to raise the risk of psychiatric disorders after 39 patients committed suicide while taking the drug.

To contact the reporter on this story: Shannon Pettypiece in New York at [spettypiece@bloomberg.net](mailto:spettypiece@bloomberg.net)

Last Updated: April 17, 2008 09:09 EDT

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**Dow Jones**  
**Pfizer Inc 1Q EPS 41c Vs EPS 48c**  
**April 17, 2008**

Pfizer Inc.'s (PFE) first-quarter net income fell to \$2.78 billion, or 41 cents a share, from \$3.39 billion, or 48 cents, a year earlier, hurt in part by the loss of U.S. exclusivity for drugs Norvasc and Zyrtec.

Excluding items, earnings were 61 cent a share for the quarter.

A Thomson Financial survey of analysts, on average, projected earnings of 66 cents a share for the quarter. Analysts' estimates usually exclude items.

The pharmaceutical company said revenue dropped 5% \$11.85 billion from \$12.47 billion, hurt in part by lower Liptor revenue in the U.S.

The company expects 2008 revenue of \$47 billion to \$49 billion on earnings of \$1.73 to \$1.88 a share.

-Veronica Dagher; 201-938-5400; [AskNewswires@dowjones.com](mailto:AskNewswires@dowjones.com) [ 04-17-08 0714ET ]

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**Reuters**  
**Pfizer earnings fall 18 pct, hurt by generic drugs**  
**April 17, 2008**

**(picked up by CNBC.com)**

NEW YORK, April 17 (Reuters) - Pfizer Inc on Thursday reported a worse-than-expected decline in first-quarter earnings after declining sales of cholesterol fighter Lipitor and medicines now facing generic competition, sending shares down almost 4 percent.

The world's biggest drug maker said net profit fell 18 percent to \$2.78 billion, or 41 cents per share, from \$3.39 billion, or 48 cents per share, a year earlier when Pfizer took a big restructuring charge.

Excluding special items, Pfizer earned 61 cents per share. On that basis, analysts polled by Reuters Estimates had forecast 66 cents per share.

Global quarterly revenue fell 5 percent to \$11.85 billion, shy of the \$12.06 billion Reuters Estimates forecast. Sales would have fallen 10 percent if not for the weak dollar, which raises the value of overseas sales when converted back to dollars.

New York-based Pfizer said lower sales were due primarily to the loss a year ago of U.S. patent protection on blood pressure drug Norvasc and new generic competition for Zyrtec, an allergy drug Pfizer stopped selling in late January.

Global sales of Lipitor, Pfizer's flagship product and the world's top-selling drug, fell 7 percent to \$3.1 billion. U.S. sales of the medicine plunged 18 percent despite widespread publicity since January about the failure of Vytorin, a rival drug sold by Schering-Plough Corp and Merck & Co, to reduce artery plaque in a closely watched trial.

Pfizer said it still expects earnings this year excluding special items of \$2.35 to \$2.45 per share. That would represent growth of 6.8 to 13.3 percent, due largely to an ongoing aggressive cost-cutting program that has already eliminated more than 10,000 jobs. (Reporting by Ransdell Pierson; editing by Mark Porter) (Additional reporting by Lewis Krauskopf)

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### **Associated Press**

#### **Pfizer 1Q profit falls on buyout charges, patent losses**

**April 17, 2008**

NEW YORK - Drug maker Pfizer Inc. said Thursday its first-quarter profit fell 18 percent as generic competition hurt sales of blood-pressure drug Norvasc and allergy drug Zyrtec.

The profit drop weighed on Pfizer (nyse: PFE - news - people )'s stock in premarket trading, sending shares down 85 cents, or 4 percent, to \$20.25.

The company earned \$2.78 billion, or 41 cents per share, compared with profit of \$3.39 billion, or 48 cents per share, during the same period a year ago. Pfizer earned 61 cents per share, excluding charges for the buyouts of CovX and Coley Pharmaceutical Group Inc.

Revenue fell 5 percent to \$11.85 billion from \$12.47 billion.

Analysts polled by Thomson Financial expected higher adjusted profit of 66 cents per share on revenue of \$12.09 billion.

Norvasc lost patent protection in March of 2007 and sales were cut in half to \$513 million during the quarter. Pfizer stopped selling Zyrtec in January after that drug lost patent protection.

Pfizer said cost-cutting measures partially offset revenue declines and the company is on track to reduce costs by \$1.5 billion to \$2 billion by the end of 2008. The measures, which included cutting 11,000 jobs and closing eight facilities in 2007, are part of an effort to shore up the company's financial position as it faces more costly drug patent expirations.

Sales of the world's best-selling drug, Lipitor, fell 7 percent to \$3.14 billion from \$3.36 billion during the quarter. The cholesterol drug is Pfizer's key revenue driver and will lose patent protection in 2010, opening the floodgates for cheaper generic versions.

Despite the overall sales drop, Chairman and Chief Executive Jeff Kindler touted the drug's international sales.

"Lipitor remains a powerful global brand supported by extensive outcomes data and it continues to grow on an operational basis in many international markets," he said, in a statement.

Sales of the anti-smoking drug Chantix rose 71 percent to \$277 million from \$162 million, though Wall Street has become concerned over the drug's future growth because of stronger safety warnings, due to higher risks for psychiatric problems.

Other key revenue drivers for the company included the fibromyalgia treatment Lyrica, which had a sales boost of 47 percent to \$582 million. Sales of Celebrex, the only COX-2 inhibitor painkiller still on the market since Vioxx was withdrawn, rose 2 percent to \$611 million.

Kindler reaffirmed the company's full-year outlook for adjusted profit between \$2.35 and \$2.45 per share. Analysts, on average, forecast profit of \$2.39 per share.

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**Investor's Business Daily Online**  
**Pfizer Profit Hit By Patent Losses**  
**April 17, 2008**

The drug giant's Q1 EPS fell 10% to 61 cents ex items, missing views by 5 cents. Sales of Pfizer's (PFE) blood-pressure drug Norvasc and allergy drug Zyrtec fell as patents expired and rivals launched cheaper generics. Sales slid 5% to \$11.85 bil, also below views, with sales of cholesterol fighter Lipitor dropping 7% to \$3.14 bil. Pfizer fell 3%.

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**Forbes.com**  
**Earnings: The Long Wait For Pfizer**  
**April 17, 2008**  
**By Matthew Herper**

Pfizer hasn't recently faced the kind of big disasters that have decimated some of its peers. For investors, it hasn't mattered.

Shares in rival Merck (nyse: MRK - news - people ) dropped 15% on March 31 over worries about the cholesterol drug Vytarin. Pfizer (nyse: PFE - news - people ) shares haven't moved more than 3% in either direction in 12 months. But the stock prices in both companies are both down by about a fifth over the past year. The problem for Pfizer is that, although the bad news is all in, investors are still waiting for some piece of hope to reverse what has been a long, slow decline.

Pfizer shares dropped 4% this morning as it missed Wall Street earnings-per-share estimates by 8% and sales of cholesterol-reducer Lipitor, the world's top-selling drug fell 7% from a year ago. Pfizer said it was sticking by its financial guidance for the year.

Chief Executive Jeffrey Kindler, who has been trying to turn around the drug giant since July 2006, says investors should be interested in his company's stock because of its strong dividend, the company's concern for shareholder return, and its strategy of rejuvenating its laboratories and unlocking value in foreign markets. "We're on track with our plans," says Kindler, "we're in a very good position, and we're all about executing."

Kindler has also said that he will match Pfizer's size to its total sales, even if sales don't grow as fast as the company hopes. That could mean more job cuts. "The intent is not to go there," says Frank D'Amelio, the chief financial officer who came to Pfizer from Lucent a year ago. "The intent is to grow the company."

What makes that tough is that the stable of best-sellers that has made Pfizer the world's biggest drug firm are losing patent protection in the U.S. This quarter, the big losses are blood-pressure pill Norvasc and antihistamine Zyrtec; sales decreased by \$556 million and \$334 million, respectively. In 2011, Lipitor loses patent protection.

One possible silver lining is that Lipitor sales could get better before they get worse. Health plans were so excited when Merck's cholesterol drug Zocor went generic they started encouraging patients to take it long before the patent expired. Lipitor could represent an even bigger cost-savings opportunity for managed care. Deutsche Bank (nyse: DB - news - people ) analyst Barbara Ryan wrote in a note to investors yesterday that she expects this to happen next year.

Pfizer points to another potential way to extend Lipitor's life. In some developing markets, like China, patents just don't matter as much. In these markets, consumers and doctors don't trust generic versions of drugs as much and aren't forced by insurers to switch to a generic as soon as a medicine goes off patent.

Another benefit could come from the controversial ENHANCE study, in which rival drug Vytorin didn't do any better than Zocor at preventing heart-attack-causing atherosclerosis. Pfizer says patients are switching off Lipitor less, but that it will take a while for changes in the cholesterol market to show up. "It's early days in terms of the most recent events," Kindler says.

A lot of the talk on Pfizer's conference call, though, had less to do with growing than with figuring out how to make the best, most efficient use of Pfizer's gargantuan cash flow. D'Amelio laid out several complicated scenarios showing how Pfizer's heft helps it. For instance, he said the company can borrow money easily, that debt will be higher at points during the year and then should end up lower than they were to begin with.

Kindler says he's trying to think of the business as a whole on one hand and at the same time find better ways to manage the company. In the meantime, some good news from the company's pipeline of experimental drugs would be a big help. Pfizer's track record at inventing new medicines is awful, but its executives have been trying to convince Wall Street they have turned things around.

Recently, the company stopped a trial of a melanoma medicine because patients weren't benefiting, but it just also started a big, late-stage study of a lung cancer drug. The new medicine targets insulin-like growth factor one (IGF-1), a promising anti-cancer target. Merck and Amgen (nasdaq: AMGN - news - people ) are among the companies that are also developing anti-IGF-1 medicines.

"The oncology pipeline is particularly exciting," says Kindler. He says Briggs Morrison, the clinical development expert Pfizer recruited from Merck, "strongly believes we have the best oncology pipeline in the business. I feel very good about it."

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**TheMotleyFool.com**  
**Johnson & Johnson Chugs Along**  
**April 16, 2008**  
**By Brian Orelli**

On the surface it seems ludicrous. Yesterday Johnson & Johnson (NYSE: JNJ) announced that sales were up almost 8% year over year for the first quarter and upped its full-year non-GAAP earnings guidance, yet its stock closed down for the day.

If you dig a little deeper into the earnings statement, the reason becomes clear -- most of that growth came from the weak dollar pushing year-over-year overseas growth into the double-digit percentages. Excluding currency effects, sales were up just 2.6% year over year in the first quarter. Not horrible, especially in this environment, but no reason for the stock to soar, either.

Consumer sales -- over-the-counter drugs and other products like lotions and mouthwash -- had a pretty decent quarter, growing almost 10% year over year, excluding currency effects. Getting to sell Pfizer's (NYSE: PFE) Zyrtec over the counter certainly helped boost this category.

Sales of drugs that require a prescription, on the other hand, weren't looking so hot. A 37% increase in sales of anti-inflammatory Remicade -- thanks in large part to international marketing partner Schering-Plough's (NYSE: SGP) contribution of 410% growth year over year -- wasn't enough to overcome decreases in other major brands. As one would expect -- given the troubles J&J and Amgen (Nasdaq: AMGN) have had with their anemia drugs -- sales of Procrit fell 27% year over year at constant currencies for the quarter. Sales of heartburn medication Acipex also got hammered this quarter, thanks to launches of generic versions of Wyeth (NYSE: WYE) and Nycomed's heartburn medication, Protonix.

Medical devices landed somewhere in the middle, sporting a 1.4% year-over-year increase in sales excluding currency effects. Sales of drug-eluting stents were down, as J&J doubled its U.S. competition when Medtronic's (NYSE: MDT) stent was approved mid-quarter, but things are looking good for the company's contact lenses, minimally invasive surgery products, and products for diabetics.

While it's appropriate to discount J&J's currency movements when trying to figure out how fast the company is growing, the fact remains that the company really did bring all that additional cash into its coffers. Given its track record of making good strategic acquisitions, I expect it'll take the cash and grow it wisely before investors want it back (when the dollar moves in the other direction).

Johnson & Johnson and Pfizer are both Income Investor recommendations. To see how dividend-paying stocks can offer both secure income and the opportunity for growth, take a free look at this newsletter with a 30-day trial.

Fool contributor Brian Orelli, Ph.D., doesn't own shares of any company mentioned in this article. Pfizer is also a recommendation of Inside Value. The Fool has a disclosure policy.

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**Your4State.com** (Hagerstown, MD)  
**Local Pollen Count Skyrockets, Allergists Offer Advice**  
**April 16, 2008**  
**By Megan Healey**

HAGERSTOWN, MD - The warm weather is finally here, but for many, that also signifies the kick-off of the often brutal spring-time allergy season.

"She gets sinus infections, ear infections, throat, same situations as every month. We're constantly at the doctors," says Jerry Stanton, who's daughter suffers from allergies.

"This year things have come on very suddenly because it was so cold and now it's warmed up. The trees were just waiting to pollinate and they've literally exploded in pollen in just the last two days," says Dr. Nicholas Orfan, with the Asthma and Allergy Center in Hagerstown.

Right now, the pollen count in Hagerstown is teetering around 700. But allergists say it could rise to 3,000 before all is said and done.

"People with allergies tend to develop more symptoms as the season progresses," says Orfan.

So what can you do to make the most of spring without feeling crummy? Dr. Orfan says, keep your windows closed and run the a-c instead, use an over-the-counter anti-histamine like Claritin or Zyrtec, which just recently became available without a prescription. If your symptoms persist, see an allergist who can test for specific allergies, and start a regimen of shots.

"He's been taking allergy shots for about two years and it has made the biggest difference. His head doesn't shut up anymore, he doesn't get sick. He was going to his pediatrician every week and he was on anti-biotics all the time and it's made a world of difference in his health," says Tracy Miller, who's son suffers from allergies.

Doctor Orfan also recommends that allergy sufferers avoid long periods outside on days when the pollen count rises above 2,000.

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**U.S. News & World Report Online**  
**Antibiotic-free Tips for Treating Sinus Infections**  
**April 16, 2008**  
**By January W. Payne**

With new medical research increasingly discouraging the use of antibiotics against mild sinus infections, what else can you do to treat sinusitis symptoms at home? U.S. News asked two medical specialists for advice.

Wash your nose. "Nasal irrigation is an excellent way to help get over an acute sinus problem," says Stanley Chia, a staff otolaryngologist at Washington Hospital Center in Washington, D.C. Cleansing your nose "tends to mechanically remove the bacteria that are clogging the sinuses and any allergens...and remove the pus drainage that is coming from the sinuses." U.S. News offers tips for at-home nasal washings.

Consider oral decongestants, but not without a doctor's approval if you have high blood pressure—which can be worsened by taking these medicines, Chia says. Nasal spray decongestants are also an option, and are less of a concern for those with high blood pressure, but they shouldn't be used for longer than three days at a time because they can cause a rebound effect involving constriction of the blood vessels in the nose, he says.

Try pain relievers for the pain, pressure, and elevated temperature often associated with sinusitis, advises Richard Rosenfeld, professor and chairman of otolaryngology at Long Island College Hospital in Brooklyn, N.Y.

Avoid antihistamines. Don't take medicines like Benadryl, Claritin, and Zyrtec unless you know allergies are at least partially responsible for your symptoms. Taking antihistamines simply to treat sinus infections is "not beneficial and could theoretically worsen the congestion because they dry out the mucous membranes in the nose," Rosenfeld says.

Take a nasal steroid. "There is some evidence [that] nasal steroids may give some relief," Rosenfeld says. Prescription nasal sprays like Nasonex and Flonase may ease symptoms by reducing inflammation, which promotes sinus drainage, he says.

Be patient. One conclusion shared by all of the recent research is that it takes time to recover from sinusitis, whether or not you take an antibiotic. It may take as long as 10 to 14 days—or longer, in some cases—to feel like your old self again.

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***The Miami Herald***

**Cordis revenue drops 10% as stent sales decline; Sales of stents from Miami Lakes-based Cordis continue to decline, but profits of parent Johnson & Johnson are soaring. PHARMACEUTICALS  
April 16, 2008**

**BY JOHN DORSCHNER**

While revenue in some Johnson & Johnson divisions soared in the first quarter, sales of drug-coated stents from the Miami Lakes-based Cordis division continued to decline, the company announced Tuesday.

Profits climbed 40 percent to \$3.6 billion for the quarter compared to the first quarter of 2007, due to gains in pharmaceutical drugs and consumer products, while Cordis revenue fell 10 percent to \$835 million, the company said.

Much of the Cordis decline continued to be in the sales of its Cypher drug-coated stent, which has been dropping since October 2006 when some researchers linked drug-coated stents to 2,000 patient deaths. Other studies have disputed that finding, but sales have continued to drop.

Worldwide, Cypher sales fell 24 percent to \$400 million. In the United States, the drop was 28 percent to \$169 million.

Two years ago, U.S. sales for the first quarter were \$366 million, according to Cordis spokesman Christopher Allman.

Doctors were turning to other measures, including bypass surgery, bare metal stents or drugs to reduce cholesterol and hypertension. In some cases cardiologists decided the most prudent decision was to do nothing at all.

Last July, J&J announced it planned to cut employment in its Cordis division because of the declining sales, transferring some workers to its New Jersey headquarters, but it did not reveal then how many of the 2,000 Miami Lakes workers would lose their jobs.

On Tuesday, Allman said in an e-mail, "Cordis will continue to have selected business functions based in Miami Lakes for the foreseeable future. We are not giving exact numbers of employees currently in Miami Lakes but the number has been reduced since last August."

Cypher production is now completely handled outside of Miami, Allman said, mostly in Mexico and Puerto Rico. Some support functions for manufacturing, quality and finances remain in South Florida, Allman said.

The company is hoping that a new product, the Conor Sirolimus-eluting stent, will boost sales if it gets approval after a trial on 388 patients at 40 sites worldwide.

Linda Bannister, an analyst with Edward Jones said she expected the decline of Cypher sales to abate soon, because more than a year has passed since the negative research report, but even with new stent products, J&J will face a "much more competitive market" because of growing list of stents from other companies.

She said Edward Jones maintained a buy rating on the company because it has "well diversified healthcare products."

In the first quarter, the company said its record sales of \$16.2 billion was helped by the strong performance of Zyrtec, an over-the-counter allergy treatment; Listerine mouth wash; Baby Care products; and skin care products of Neutrogena, Clean & Clear and Aveeno.

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***The Wall Street Journal***

**J&J Thrives Due to Diverse Exposure**

**Consumer-Health Unit Offsets Drug Setbacks; Revenue Increases 7.7%**

**April 16, 2008**

**By SHIRLEY S. WANG and PETER LOFTUS**

Johnson & Johnson's solid first-quarter earnings, boosted by the launch of over-the-counter allergy drug Zyrtec, exceeded analyst expectations and offered hope that diversified health-care companies may better weather economic uncertainty than some big drug makers.

01/25/08 First-quarter revenue increased 7.7% to \$16.19 billion, helped by the weaker dollar and strong sales in its consumer-health division, which rose 16% to \$4 billion. The consumer unit helped compensate for J&J's lackluster pharmaceutical revenue, which rose 3.3% but would have declined if not for the favorable currency rate. J&J's medical-devices sales grew 7.2%.

Analysts said such diversified revenue streams could provide more-stable earnings. Still, J&J continues to face challenges, including generic competition to its top drugs and declining sales of some products due to safety concerns. What J&J's showing says about the overall state of the health sector may become clearer Wednesday, when health-care conglomerate Abbott Laboratories reports earnings.

Overall, J&J posted a 40% increase in first-quarter profits, resulting in part from a big charge in the year-ago period. But its revised full-year profit outlook -- just a penny more than its earlier guidance -- may have disappointed some investors, as it appears some of the first quarter's gains may not persist.

"They're maintaining a cautious outlook for the rest of the year, and that's a bit disappointing to investors given the strength of the quarter," said Tim Nelson, senior equity analyst at FAF Advisors in Minneapolis, which owns 8.3 million J&J shares.

Bright spots so far include its inflammatory-disease treatment Remicade, which saw global revenue jump 37%, and the launch of Zyrtec, which J&J acquired when it bought Pfizer Inc.'s consumer-health unit in late 2006. Though J&J declined to break out sales for Zyrtec, Chief Financial Officer Dominic Caruso said during a conference call that the entire category of over-the-counter medications grew 25%. He cautioned, however, that sales aren't likely to continue at the same rate for either product.

As expected, sales of J&J's drug-eluting stent, Cypher, continued to slide amid continuing safety concerns about these devices, which are used to prop open coronary arteries. The New Brunswick, N.J., company's Cordis unit, which sells Cypher, posted a 10% decline.

J&J anti-anemia drugs Procrit and Eprex also lost more ground in the wake of safety concerns that led to a label change and a Food and Drug Administration committee's recommendation that the drugs' use be further curtailed. U.S. sales plummeted 37% compared with the first quarter a year ago and international sales fell 9%.

Some uncertainty surrounds J&J's hospital-surgery products, Mr. Caruso said, noting "some slight decline in procedure volume." He said it is too early to know whether this might reflect a trend toward fewer elective surgeries stemming from the broader economic slowdown -- a comment some analysts find worrisome.

See earnings cheat sheets for large tech, health, banking and other companies.



"If J&J is the canary in the coal mine, it could imply there could be further weakness in the [medical technology] group," said UBS analyst Bruce Cranna.

Generic-drug competition to J&J's blockbuster antipsychotic Risperdal, expected to arrive on the market in June, poses another threat to its bottom line. Risperdal sales tumbled 34% internationally, where generic competition has already begun, and historically generics hurt U.S. sales more, Mr. Caruso said.

J&J's diversification could provide a buffer against both its troubles in pharmaceuticals and the harsher economic climate. "Certainly the economic downturn is going to affect health care, but when you're so well diversified, you can kind of sustain some shocks in some areas by growth in another," says Eldene Doyle, an investment analyst for Optique Capital Management in Racine, Wis., which owns 265,000 J&J shares.

Write to Peter Loftus at [peter.loftus@dowjones.com](mailto:peter.loftus@dowjones.com)

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### **MarketWatch**

#### **J&J reports 40% boost in quarterly profit; Foreign currency rates help push top-line growth ahead of estimates**

**April 15, 2008**

**By Val Brickates Kennedy**

BOSTON (MarketWatch) -- Johnson & Johnson, the world's largest health-care group, reported a 40% increase in first-quarter earnings early Tuesday, due largely to a favorable foreign-exchange rate and accounting charges in the year-earlier quarter.

J&J (JNJ, US) posted net income of \$3.6 billion, or \$1.26 a share, compared with \$2.57 billion, or 88 cents a share, a year earlier.

Excluding various accounting items a year ago, J&J reported adjusted earnings of \$1.16 a share.

Although revenue jumped 7.7% to \$16.19 billion, operational sales growth was only 2.6%. A favorable exchange rate contributed 5.1% to the top-line.

J&J was expected to post earnings of \$1.20 and adjusted earnings of \$1.24, according to FactSet Research. Sales were expected at \$15.88 billion, compared with \$15.04 billion a year earlier.

J&J also tweaked its 2008 financial forecast. The company now sees adjusted earnings coming in at \$4.40 to \$4.45 a share. According to FactSet, Wall Street was expecting J&J to post 2008 earnings of \$4.43 a share, with adjusted earnings of \$4.58 a share.

According to analysts at Cowen & Co., J&J's stronger-than-expected revenue showing was also bolstered by earlier-than-expected orders for its drugs Zyrtec and Remicade during the first quarter.

"Rather than representing stronger underlying demand for the products, it appears the strength is simply a timing issue, with larger orders simply coming in before J&J planned, but the level of sales for the year remains relatively unchanged," wrote the Cowen analysts in their note.

"We expect the Street to moderate current EPS forecasts for second quarter and third quarter to reflect timing patterns. We do however continue to view the guidance as conservative given the current foreign exchange environment, tax guidance, and ongoing stock buy back," the analysts added.

Investors, meanwhile, appeared unimpressed by J&J's financial forecast. Shares of the industry juggernaut were down 0.7% to \$65.26 in midday trading.

One weak spot in the company's financial report was its prescription drugs business.

Sales of pharmaceutical products fell 0.6% operationally, with international sales sliding 3.1%. Including the impact of foreign exchange rates, sales of prescription drugs rose 3.3% to \$6.4 billion.

J&J said that lower sales of the company's anemia drug Procrit contributed to the slump. Sales of Procrit have been under pressure in recent quarters due to the imposition of tightened prescribing restrictions by the Food and Drug Administration and tougher reimbursement standards by Medicare. Amgen Inc. (AMGN, US) markets a similar product under the name Epogen.

J&J said worldwide Procrit sales fell 27% operationally to \$629 million for the quarter. The sharpest decline was seen in the U.S., where Procrit sales tumbled 37% operationally to \$334 million.

J&J's top-selling drug, Risperdal, also saw signs of sales erosion, due largely to the advent of generic competition. Worldwide sales of the antipsychotic slid 9% operationally to \$809 million. This was offset to some degree by sales of a newer formulation of the drug, Risperdal Consta, which grew 10% operationally to \$309 million.

One standout was the company's rheumatoid arthritis drug Remicade. Worldwide sales of Remicade jumped 37% operationally to \$998 million.

Medical-device sales, meanwhile, grew by 7.2% to \$5.7 billion, with a favorable currency rate contributing about 5.8%. Highest growth was seen in such products as contact lenses, diabetes monitoring devices and insulin delivery products.

Sales of the company's drug-coated coronary stents, however, continued to lag. Procedures for the products have been down over the past two years due to lingering concerns about their safety and effectiveness in certain patients.

J&J's Cordis unit, which produces the coronary stents, reported a 15% operation decline, with worldwide sales of \$835 million.

Cowen and Co. analysts noted that sales of Cypher stents were down 27% at \$400 million for the quarter. J&J executives on the company's quarterly conference call indicated they expect to see continued weakness in that market, given a decline in procedures and the recent launch of a competing product by Medtronic Inc. (MDT, US)

Hottest growth was seen in the company's consumer products division, which saw sales shoot up 16% to \$4.1 billion, fueled by a 20% increase in international sales. Excluding currency impact, however, consumer product sales grew operationally by only 9.9%.

J&J nearly doubled the size of its consumer products division in 2006 with the purchase of Pfizer's mammoth personal-care products unit.

Johnson & Johnson, the world's largest health-care group, reports a 40% increase in first-quarter earnings, due largely to higher sales, a favorable foreign-exchange rate, and accounting charges in the year-earlier quarter.

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**Dow Jones**  
**J&J 1Q Net Up 40%; Sales Helped By Weak Dollar**  
**April 15, 2008**  
**By Peter Loftus**

Johnson & Johnson's (JNJ) first-quarter profit rose 40% thanks, in part, to a big year-earlier charge, while sales were helped by a weak dollar and the launch of an over-the-counter allergy medicine.

The health-care products company's quarterly results handily exceeded Wall Street's expectations. But J&J's newly revised earnings outlook for the full year may have disappointed some investors, as it appears some of the first-quarter's gains may not persist throughout the year. J&J continues to face challenges, including generic competition for top drugs and sales declines of certain products due to safety concerns.

J&J shares recently fell 4 cents to \$65.71.

"They're maintaining a cautious outlook for the rest of the year and that's a bit disappointing to investors, given the strength of the quarter," said Tim Nelson, senior equity analyst at FAF Advisors in Minneapolis, which owns J&J shares.

J&J also indicated that, while most of its business shouldn't be hurt by a broad economic downturn, sales of its products used in elective surgeries experienced a slight slowdown during the first quarter.

The New Brunswick, N.J., company's net income for the three months ended March 31 rose to \$3.6 billion, or \$1.26 a share, from \$2.57 billion, or 88 cents a share, a year earlier. Prior-year results include a 28-cent charge from the acquisition of Conor Medsystems; excluding the charge earnings would have been \$1.16 a share.

Revenue increased 7.7% to \$16.19 billion, helped by a 5.1 percentage point gain from the weaker dollar.

Analysts expected earnings of \$1.20 a shares on revenue of \$15.83 billion, according to a survey by Thomson Financial.

Sales at J&J's three main units were up, with the medical-devices business rising 7.2% and the pharmaceutical unit up 3.3%.

The consumer-products unit had the strongest quarter, with sales rising 16% to \$4 billion. Sales of baby-care, over-the-counter drugs and nutritional products were among the strongest gainers.

In January, J&J began selling a nonprescription version of allergy drug Zyrtec, which was formerly a Pfizer Inc. (PFE) prescription drug. J&J acquired Pfizer's consumer-health unit in late 2006. J&J indicated that pharmacies stocked up on the product, but that such inventory stocking may not last throughout the year.

"Its launch has gone very well," J&J Chief Financial Officer Dominic Caruso said during a conference call. "We've reached 90% of U.S. stores in our first three months. We are very encouraged by the response."

International sales growth, which is increasing as a portion of total sales, outpaced domestic sales growth in all divisions.

Pharmaceutical sales for some of J&J's heavy hitters were mostly poor, save for inflammatory disease treatment Remicade, up 37%. Johnson & Johnson said sales of its anti-anemia drugs Procrit and Eprex continued their slide, falling 23%. The company was forced to relabel the drug amid studies suggesting a potential risk of heart attack and stroke in cancer patients taking that class of drug.

J&J also said sales of Risperdal, an antipsychotic medication due to lose its market exclusivity in June, were down 6.7%. Teva Pharmaceutical Industries Ltd. (TEVA) recently won a lawsuit against the U.S. Food and Drug Administration for 180-day exclusivity period for generic Risperdal upon the patent expiration.

Remicade's big quarterly gain was due largely to increased shipments to Schering-Plough Corp. (SGP), which markets it outside the U.S. Like the inventory buildup for Zyrtec, J&J indicated Remicade may not see such a big gain in subsequent quarters.

The company also reported lower sales of drug-eluting stents in its Cordis franchise sales. Sales of J&J's Cypher stent have been hurt by new competition but were declining since 2006 amid reports that the devices may carry a higher risk of blood-clot development than those not coated in certain medications. J&J's Cordis unit, which sells Cypher, posted a 10% decline in sales to \$835 million.

Bright spots in its device unit included vision-care and diabetes-care products.

There is some uncertainty, however, surrounding its surgery products such as sutures. J&J saw a "little bit of a slowdown in ordering of products used in the surgery suite" in the first quarter, Caruso told Dow Jones Newswires. The company isn't predicting the slowdown will last throughout the year, however.

"When we looked at our performance in the past, compared to economic cycles, we saw very little correlation of our performance versus economic cycles," Caruso said. However, he also noted that the current slowdown seems more pronounced than some past downturns.

Expiring patents, generic competition and a dwindling new drug pipeline are common across a wide swath of pharmaceutical companies. Many, including J&J, are cutting costs and focusing on gains in international arenas - as well as looking at growth by acquisition - to stem losses when the industry's money-making drugs go off patent over the next several years.

J&J is fortunate, however, as it is a more diversified company. Its 2006 acquisition of Pfizer's consumer unit, for example, added such well-known medicine cabinet stock as Listerine, Roloids and Rogaine to the fold.

Johnson & Johnson boosted its full-year earnings forecast excluding items by 1 cent to a range of \$4.40 to \$4.45 a share. Analysts were expecting \$4.44.

-By Peter Loftus, Dow Jones Newswires; 215-656-8289; peter.loftus@dowjones.com

(John Flowers contributed to this report.) [ 04-15-08 1056ET ]

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**Reuters** (picked up by *The New York Times*)  
**J&J profit up; weak dollar props up anemic sales**  
**April 15, 2008**  
**By Ransdell Pierson**

NEW YORK (Reuters) - Johnson & Johnson posted better-than-expected quarterly earnings on Tuesday as the weak dollar and cost cutting offset plunging sales of anemia drugs hit by safety concerns and medicines facing generic competition.

Demand for the company's vast array of consumer products, including a new over-the-counter form of Pfizer Inc's Zyrtec antihistamine and an array of products recently acquired from Pfizer, boosted results.

But its two other major businesses, pharmaceuticals and medical devices, would have fared poorly if they had not been propped up by the beaten-down dollar.

"International sales and exchange rates in overseas markets that benefit from the weak dollar are the only things that are keeping Johnson & Johnson afloat," said Steve Brozak, an analyst with WBB Securities.

Sales of J&J and other U.S.-based companies could be hurt if interest rates rise and allow the dollar to rebound, he said. "What the weak dollar giveth, the dollar can take away."

The diversified health care company earned \$3.6 billion, or \$1.26 per share, up from \$2.57 billion, or 88 cents per share, a year earlier, when it took several merger-related charges.

Analysts polled by Reuters Estimates, on average, had expected a profit of \$1.20 per share.

J&J said global sales rose 7.7 percent to \$16.2 billion, above the average forecast of \$15.85 billion. Revenue would have risen only 2.6 percent if not for the weak dollar, which boosts the value of sales in overseas markets when converted back into dollars.

"It's not fantastic growth, but when you compare it with General Electric and other large-cap stocks, and the expected earnings of Merck and Schering-Plough, I'll take it," said Eldene Doyle, an analyst for Optique Capital Management.

Sales of the consumer brands, including Band-Aids and Listerine mouthwash, jumped 16 percent to almost \$4.1 billion, revenue from medical devices rose 7.2 percent to \$5.7 billion, and prescription drug sales rose 3.3 percent to \$6.4 billion.

Excluding the benefit of the weak dollar, sales of consumer brands rose 6.3 percent, revenue from medical devices increased just 1.4 percent, and prescription drug sales fell 0.6 percent.

Combined sales of anemia drugs Procrit and Eprex fell 23 percent to \$629 million in the quarter, hurt by concerns that overuse of such medicines can increase the risk of adverse events and death.

Sales of Duragesic, a skin patch for pain now competing with cheaper generics, also fell 23 percent, to \$233 million. Schizophrenia treatment Risperdal, once the company's biggest drug, fell almost 7 percent to \$809 million amid growing competition with other drugs.

Revenue from arthritis treatment Remicade, however, leaped almost 37 percent to \$998 million. Topamax, for epilepsy, rose almost 6 percent to \$646 million.

The company raised its 2008 earnings forecast slightly, to a range of \$4.40 to \$4.45 per share, reflecting growth of up to 7 percent. That represents a slowdown, however, from growth of more than 10 percent last year. Its previous forecast was \$4.39 to \$4.44 per share.

J.P. Morgan analyst Michael Weinstein has predicted U.S. Procrit sales will plunge almost 40 percent this year to \$1 billion, half the sales seen in 2006. He sees overseas revenue of Eprex falling 10 percent to \$1.1 billion.

Moreover, J&J is bracing for generic competition by June for Risperdal and by March 2009 for Topamax, and the expected approval of Abbott Laboratories Inc's Xience stent could hurt sales of J&J's Cypher product.

Launches of new J&J medicines -- including a new psoriasis drug, an antibiotic called ceftobiprole and the once-monthly injectable schizophrenia drug paliperidone -- are expected to help offset some of those sales declines.

Even so, Weinstein expects company pharmaceutical sales to slip 1 percent this year and more than 5 percent next year before growing again in 2010.

J&J shares were down 24 cents to \$65.50 in morning trading on the New York Stock Exchange, amid slight gains for the drug sector.

Optique Capital's Doyle said some investors remain worried about sales of the anemia drugs and may be disappointed that J&J raised its 2008 earnings forecast by just a penny.

(Reporting by Ransdell Pierson; editing by John Wallace)

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**Associated Press**

**Earnings Preview: Pfizer poised to meet profit forecast**

**April 15, 2008**

NEW YORK (AP) - Pfizer Inc. reports earnings for the first quarter on Thursday. The following is a summary of key developments and analyst opinion related to the period.

OVERVIEW: Pfizer entered the first quarter with an upbeat outlook as it continued with a restructuring plan that cut 11,000 jobs and closed eight facilities in 2007. A key issue for the company is how fast it can rebuild its product pipeline as it faces patent expiration for the blockbuster cholesterol drug Lipitor.

The drug, which had revenue of \$3.4 billion during the fourth quarter, will lose patent protection in 2010. Lipitor may have gained a slight marketing boost during the quarter though, after negative data on Merck & Co. and Schering-Plough Corp.'s Vytorin hit the market.

Vytorin, also a cholesterol drug, took a hit when study data showed it was no more effective at limiting plaque buildup than older, less expensive statins. Those older drugs include Pfizer's Lipitor and AstraZeneca PLC's Crestor.

Still, Pfizer spent another quarter entangled in Lipitor patent challenges. In March, a Canadian appeals court ruled in its favor in a dispute with Ranbaxy, as did a U.S. Court in a similar challenge by Teva Pharmaceutical Industries Ltd. A Dutch court in February gave the company mixed rulings.

Meanwhile, the company told investors it was planning for the loss of Lipitor in 2010 by cutting costs in a move that will outsource more manufacturing.

Also, the company's anti-smoking drug Chantix came under fire during the quarter after regulators said the drug is likely connected to incidents of serious psychiatric problems. Pfizer added new warnings to the label.

BY THE NUMBERS: Analysts polled by Thomson Financial, on average, forecast first-quarter profit of 66 cents per share on about \$12.06 billion in revenue.

ANALYST TAKE: Analysts expect the company to meet profit expectations during the first quarter, both on higher international revenue because of a weaker U.S. dollar and stronger sales from several products.

Lehman Brothers analyst Charles Butler expects profit of 69 cents per share during the quarter, just above Wall Street expectations. He said Lipitor sales will probably continue to slow down but the fibromyalgia treatment Lyrica and Chantix will remain strong. Still, total revenue will likely be down from the same period a year prior, partly because of patent losses on the blood-pressure drug Norvasc and the allergy drug Zyrtec.

"Following a relatively uneventful analyst day on March 5 it is not clear where investors' interests will lie," he said, in a note to investors. "Our take from the analyst day was that nothing much will occur in the short-term and that management is focused on the period of time after Lipitor loses US exclusivity in 2010."

BMO Capital Markets analyst Robert Hazlett, meanwhile, expects first-quarter profit of 67 cents per share and expects Lyrica sales increases along with higher sales of the schizophrenia drug Geodon and erectile dysfunction drug Viagra.

STOCK PERFORMANCE: Shares of Pfizer fell about 8 percent during the quarter, opening at \$22.76 Jan. 2 and closing at \$20.93 March 31.

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**Center for the Advancement of Health Press Release**  
**Children should not take antihistamines for chronic cough, reviewers say**  
**April 15, 2008**  
**By Lisa Esposito**

Chronic cough can cut into children's sleep and fray parents' nerves. Although antihistamines can alleviate cough, possible side effects outweigh their benefits, say authors of a new review of studies from Australia.

"In contrast to recommendations in adults with chronic cough, antihistamines cannot be recommended as empirical therapy for children with chronic cough," conclude reviewers led by Dr. Anne Chang.

The review adds to the growing body of evidence casting doubt on the use of a variety of medicines for children.

Cough is the most common symptom presented to general practitioners, said Chang. She is a consultant in pediatric respiratory medicine at the Royal Children's Hospital in Brisbane and the Menzies School of Health Research in Queensland.

A child is considered to have chronic cough after four weeks. A specific cough is associated with symptoms suggestive of an underlying problem. Nonspecific cough is nonproductive cough — without gunk — in the absence of identifiable respiratory disease.

Some children with nonspecific cough have asthma, but most do not. "Most nonspecific cough is likely post-viral," said Chang, who has been researching issues related to cough for the past decade. Children with nonspecific cough are treated with a variety of therapies, including antihistamines.

The review appears in the latest issue of The Cochrane Library, a publication of The Cochrane Collaboration, an international organization that evaluates medical research. Systematic reviews like this one draw evidence-based conclusions about medical practice after considering both the content and quality of existing medical trials on a topic.

The reviewers examined five studies involving about 1,000 children, ranging from six months to 17 years old. Many children had allergies to things like grass, pollen or dust mites, or a family history of allergy.

Two larger studies "described significant improvement" both in children who took antihistamines and those who took placebos "with no significant difference between the two groups," the authors write.

A smaller study involving 20 school-age children found that cetirizine (Zyrtec) clinically improves cough due to pollen allergy. In that study, the antihistamine was significantly more effective than placebos in reducing chronic cough in children with allergies.

Another study examined the use of ketotifen (Zaditen) to minimize the frequency of asthma attacks in 113 infants ranging from six months to 36 months old. After a four-week no-medication baseline, infants received either a placebo or ketotifen for 16 weeks. Researchers concluded that they were "unable to show a therapeutic advantage of ketotifen over placebo."

Any effectiveness the drugs have should be weighed against their reported side effects, especially in young children, including "sedation, paradoxical excitability, dizziness, respiratory depression, hallucinations, arrhythmia and death," Chang writes.

In these studies, however, "most of the events reported were minor, with irritability and gastrointestinal upset being the most common events," the review says. Four children were withdrawn from one study. A dozen other children felt drowsy after taking medicine.

Chang said that the small study involving Zyrtec reported "no adverse effects."

Histamine, a compound found in nearly all tissues of the body, plays a role in allergic reactions. It is released in allergic conditions, including asthma, and gives rise to their symptoms. Antihistamine drugs inhibit histamine.

Still, all antihistamines are not equal, said Richard Irwin, past president of the American College of Chest Physicians.

The older antihistamines, such as Benadryl, have more anticholinergic activity, which is to say they "dry one out" more, said Irwin, a professor at the University of Massachusetts Medical School.

"These older drugs therefore can work when the cause of the upper airway cough is not due to allergies and they can also work if the cause of the cough is due to allergies," Irwin said. On the other hand, because the new drugs such as cetirizine [Zyrtec] or loratadine [Claritin] don't have much anticholinergic activity to speak of, they will only work if the cause of the upper airway cough is due to allergies."

Newer antihistamines, such as Zyrtec, "have been shown to be of help in children with allergic rhinitis," Irwin said. "The literature supports using these specific antihistamines when children have cough in association with seasonal allergies that involve the nose."

Beyond the research, parents continue to seek treatment for their children, spending billions of dollars worldwide on cough and allergy medications every year.

In children, it is important to elucidate the cause of the cough, Chang said. She recommends that physicians talk to parents about their fears and concerns, and says that parents who smoke should stop. When her own patients show up with a nonspecific cough, Chang uses a cautious, wait-see-and-review approach.

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FOR MORE INFORMATION:

Health Behavior News Service: Lisa Esposito at (202) 387-2829 or hbns-editor@cfah.org.

The Cochrane Collaboration is an international nonprofit, independent organization that produces and disseminates systematic reviews of health care interventions and promotes the search for evidence in the form of clinical trials and other studies of interventions. Visit <http://www.cochrane.org> for more information.

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### **The Star-Ledger Online**

#### **J&J Earnings rise on sales of consumer items bought from Pfizer**

**April 15, 2008**

Johnson & Johnson, the world's largest health-products maker, said earnings increased 40 percent on rising sales of consumer items including Listerine mouthwash and Tylenol pain medicine, according to a report in Bloomberg

First-quarter net income rose to \$3.6 billion, or \$1.26 a share, from \$2.57 billion, or 88 cents, a year earlier, the New Brunswick, New Jersey, company said today in a statement. Excluding costs, earnings beat the \$1.20 estimate of 17 analysts surveyed by Bloomberg.

Revenue rose to \$16.2 billion from \$15 billion. The company benefited from drugstore products, including Sudafed cold pills, acquired in its \$16.6 billion purchase of Pfizer's consumer unit in December 2006. That



revenue offset slow sales for some drugs and medical devices. Johnson & Johnson has cut costs as it faces generic competition to its best-selling prescription medicine, the antipsychotic Risperdal.

“Consumer continues to do well,” said Bruce Nudell, an analyst with UBS Investment research in New York, in an interview. “2008 is likely to be a difficult year for Johnson & Johnson’s pharmaceutical business.”

J&J fell 26 cents to \$65.74 yesterday in New York Stock Exchange composite trading, and has gained 5.4 percent in the 12 months before today.

In the first quarter of 2007, J&J reported a 22 percent decline in earnings after an \$807 million write-off for research costs at Conor MedSystems, a stent maker it acquired.

The company announced a \$10 billion share buyback in July to bolster the stock price until new products reach the market. Later that month, J&J said it would eliminate as many as 4,820 jobs, or as much as 4 percent of its workforce.

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**Bloomberg**  
**J&J Profit Up on Sales of Consumer Items From Pfizer**  
**April 15, 2008**  
**By Lisa Rapaport**

April 15 (Bloomberg) -- Johnson & Johnson, the world's largest health-products maker, said earnings increased 40 percent on rising sales of consumer products. The company beat analysts' estimates and raised its forecast.

First-quarter net income rose to \$3.6 billion, or \$1.26 a share, the New Brunswick, New Jersey, company said today in a statement. A year earlier, J&J recorded profit of 88 cents a share when it wrote off \$807 million for research costs at Conor MedSystems, a stent maker it acquired. Excluding costs, J&J's earnings beat analysts' estimates by 6 cents.

Revenue rose 8 percent to \$16.2 billion. The company benefited from drugstore products, including Sudafed cold pills, acquired in its \$16.6 billion purchase of Pfizer's consumer unit in December 2006. That revenue offset slow sales for some drugs and medical devices. Johnson & Johnson has cut costs as it faces generic competition to its best-selling prescription medicine, the antipsychotic Risperdal.

“Consumer continues to do well,” said Bruce Nudell, an analyst with UBS Investment research in New York, in an interview. “2008 is likely to be a difficult year for Johnson & Johnson’s pharmaceutical business.”

J&J raised its 2008 earnings forecast to \$4.40 to \$4.45 a share, from a January projection of \$4.39 to \$4.44, excluding research and development charges or other special items.

Excluding costs, earnings beat the \$1.20 estimate of 17 analysts surveyed by Bloomberg. The company announced a \$10 billion share buyback in July to bolster the stock price until new products reach the market. Later that month, J&J said it would eliminate as many as 4,820 jobs, or as much as 4 percent of its workforce.

The company fell 26 cents to \$65.74 yesterday in New York Stock Exchange composite trading, and has gained 5.4 percent in the 12 months before today.

To contact the reporter on this story: Lisa Rapaport in New York at [Lrapaport1@bloomberg.net](mailto:Lrapaport1@bloomberg.net)

Last Updated: April 15, 2008 08:38 EDT

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**Detroit Free Press Online**

**Brief**

**PHARMACEUTICALS: Perrigo drug approved**

**April 14, 2008**

Perrigo Co., the biggest U.S. maker of nonprescription, store-branded drugs, received Food and Drug Administration approval to manufacture and market an allergy and hives-relief medication for children.

Perrigo's cetirizine hydrochloride oral solution is comparable to McNeil Consumer Healthcare's children's Zyrtec, which had 2007 sales of about \$80 million, the Allegan-based company said Monday. The drugmaker said Wolters Kluwer data showed Zyrtec had 2007 sales of \$80 million.

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**Associated Press**

**FDA approves Perrigo over-the-counter allergy medication for children**

**April 14, 2008**

ALLEGAN, Mich. (AP) - Generic drug and health care products maker Perrigo Co. said Monday it received final approval from the Food and Drug Administration to market a new over-the-counter allergy and hives oral medication for children.

The company expects to begin shipping the product immediately. The product will be marketed under store-brand labels and is comparable to McNeil Consumer Healthcare's Children's Zyrtec Oral Solution.

Brand sales for the original prescription strength product in 2007 were about \$80 million, according to data from health information provider Wolters Kluwer Health Inc.

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**Perrigo Company Press Release**

**Perrigo Announces Approval for Over-the-Counter Children's Cetirizine Oral Solution**

**April 14, 2008**

**(picked up by CNMONEY.com, Biloxi Sun Herald Online, StreetInsider.com, The Saginaw News Online (Michigan), TradingMarkets.com)**

ALLEGAN, Mich., April 14 /PRNewswire-FirstCall/ -- Perrigo Company (Nasdaq: PRGO; TASE) today announced that it has received final approval from the U.S. Food and Drug Administration to manufacture and market over-the-counter (OTC) Children's Cetirizine Hydrochloride Oral Solution (Allergy) and Children's Cetirizine Hydrochloride Oral Solution (Hives-Relief), 1mg/mL.

The product will be marketed under store brand labels and is comparable to McNeil Consumer Healthcare's Children's Zyrtec(R) Oral Solution, 1mg/mL, indicated for indoor and outdoor allergy and hives relief. According to Wolters Kluwer data, brand sales for the original prescription strength version of the product for the last 12 months ending December 2007 were approximately \$80 million.

Perrigo's Chairman and CEO Joseph C. Papa stated, "This approval reflects our strategy to be first to market with the important products that make quality healthcare more affordable for our customers."

The Company expects to begin shipping the product immediately.

Perrigo Company is a leading global healthcare supplier that develops, manufactures and distributes over-the-counter (OTC) and prescription pharmaceuticals, nutritional products, active pharmaceutical ingredients (API) and consumer products. The Company is the world's largest manufacturer of OTC pharmaceutical products for the store brand market. The Company's primary markets and locations of manufacturing facilities are the United States, Israel, Mexico and the United Kingdom. Visit Perrigo on the Internet (<http://www.perrigo.com>).

Note: Certain statements in this press release are forward-looking statements within the meaning of Section 21E of the Securities Exchange Act of 1934, as amended, and are subject to the safe harbor created thereby. These statements relate to future events or the Company's future financial performance and involve known and unknown risks, uncertainties and other factors that may cause the actual results, levels of activity, performance or achievements of the Company or its industry to be materially different from those expressed or implied by any forward-looking statements. In some cases, forward-looking statements can be identified by terminology such as "may," "will," "could," "would," "should," "expect," "plan," "anticipate," "intend," "believe," "estimate," "predict," "potential" or other comparable terminology. The Company has based these forward-looking statements on its current expectations, assumptions, estimates and projections. While the Company believes these expectations, assumptions, estimates and projections are reasonable, such forward-looking statements are only predictions and involve known and unknown risks and uncertainties, many of which are beyond the Company's control. These and other important factors, including those discussed under "Risk Factors" in the Company's Form 10-K for the year ended June 30, 2007, as well as the Company's subsequent filings with the Securities and Exchange Commission, may cause actual results, performance or achievements to differ materially from those expressed or implied by these forward-looking statements. The forward-looking statements in this press release are made only as of the date hereof, and unless otherwise required by applicable securities laws, the Company disclaims any intention or obligation to update or revise any forward-looking statements, whether as a result of new information, future events or otherwise.

SOURCE Perrigo Company

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**The Leaf Chronicle Online**  
**Rising pollen levels irritate allergies**  
**Global warming suspected as one culprit**  
**April 14, 2008**  
**By CLAUDIA PINTO**

Along with the polar bears and sea turtles, there may be another potential victim of global warming: allergy sufferers.

Scientists report that temperatures are rising and warm weather is arriving earlier and lasting longer. This may be translating into a longer and more intense allergy season.

While this is a nationwide issue, Nashville and Middle Tennessee is hit particularly hard by allergies.

The Asthma and Allergy Foundation of America recently ranked Nashville as the 18th-most-challenging city for people with allergies to live this spring, based on pollen counts and other factors.

"Pollen counts are going up nationwide," said Mike Tringale, the foundation's director of external affairs. "Studies have found that higher levels of carbon dioxide trigger the growth of plants that cause allergies."

Dr. Dan Sanders III, an allergist with Allergy and Asthma Associates in Nashville, agrees that allergy seasons are very dependent on climate.

"Common sense tells you that," Sanders said. "The trees germinate and bloom earlier when the weather is warmer."

Nashville has experienced above-normal temperatures for its fourth year in a row. The temperature in 2007 averaged 62.3 degrees. That's 2.4 degrees above normal and just two-tenths of a degree short of the warmest year on record.

Sanders, who has been an allergist for 25 years, said that, for reasons he can't explain, patients exhibit more severe allergy symptoms than they did years ago. However, he said he hasn't noticed that the season lasts longer.

Typically tree pollen is present from mid-February to early May, grass pollen kicks up in late April and lasts until early June, and ragweed blows through from mid-August until mid-October.

Nashville has historically been an allergy hot spot because of its mild temperatures and high humidity.

Another reason is that it's located in a basin. Pollens and irritants settle in and don't get blown away.

OTC meds often help symptoms

Andy Hageman, 60, doesn't need a report to know that Nashville is a bad place for allergies.

He said his allergies are so bad that he spends 90 percent of his time in the house.

"If I go outside I wear a mask," said Hageman, who has tree, grass and mold allergies, among others.

Hageman is one of an estimated 35 million Americans who suffer from seasonal allergies.

They account for more than 14 million doctor visits per year, according to the Centers for Disease Control and Prevention.

Dr. David Hageman, medical director of Vanderbilt's Asthma, Sinus and Allergy Program, said there's been a surge in the number of patients he's treated within the past week or so.

He attributes that to the sudden switch from cold weather to warm weather, which causes a lot of pollen to be released.

"I've been seeing a lot of itchy eyes and runny noses," Hageman said. "The good news is it won't kill you. It will just make you miserable."

Allergies are caused by an overreaction of the human immune system to a foreign substance breathed into the body.

Hageman said the common irritants in Nashville include pollen from trees such as oaks, hickory and poplars, as well as fescue grass.

The body's attempt to purge the substance can result in symptoms such as coughing, sneezing, itchy eyes, headaches, runny nose and scratchy throat. In severe cases it can result in rashes, sinus infections and difficulty breathing.

Over-the-counter medications are often effective. This is the first spring that Zyrtec, an antihistamine, has been available over the counter. Those types of drugs work by blocking the effects of histamine, the chemical responsible for many allergy symptoms.

For more severe cases, people should seek medical treatment because allergy shots or stronger medication may solve the problem.

Residents get used to it

Hageman said shots have helped his allergies, but the only real relief he's ever found was when he won a weeklong trip to Honolulu. He said he took his pills and inhaler with him and never had to use them.

"It was like someone took a vacuum and sucked it all out of my head," Hageman said.

Hageman is quick to add that he's not trying to tell a sob story. He said having lived in Nashville all his life, he's used to having allergies.

"All of our family is here," he said. "So we don't want to move."

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**Daily Local Online (Chester County, PA)**  
**A-choo! 'Tis the season to start sneezin'**  
**WITH SPRING COMES ALLERGIES**  
**April 14, 2008**

For those dealing with seasonal allergies, often as the weather becomes more temperate, they begin to feel worse. Sunshine and a warm breeze usually make for a lovely spring day. But for those with allergies, that warm breeze stirs up all sorts of allergens that make some want to keep the windows and doors shut and run to the medicine cabinet.

Whether you suffer tremendously through allergies, anxiously waiting for a storm to bring relief, or only sneeze here and there, seasonal allergies can dampen your outdoor adventures.

Dr. Joseph L. Smith II, an allergy specialist with the Ear, Nose & Throat Associates of Chester County, said the best way to combat allergies is avoidance. Avoid the allergens, he said, avoid the symptoms. But he admits that's not the easiest thing to do.

According to Smith, it's pollen from grasses and trees that affect most people in the summer and from weeds in the fall. Mold, he said, causes problems year round.

"Trees are wind-pollinated," Smith said. "It might not be in your backyard, but a tree two blocks away blowing ..." and there's nothing you can do about that.

If you do need to get some work done outside, Smith recommends waiting until after 11 a.m. "Pollen counts are highest in the early morning," he said.

But if you need to get out early to mow the grass, or if you work outside and need something to help combat the symptoms, Smith recommends over-the-counter medications like Claritin or Zyrtec. He added that if you don't mind nasal sprays, those can be more effective.

However, if your symptoms are more severe, there are other options available involving immuno therapy. If you see an allergist it's possible that allergy shots may be for you. "The shots change the way the body reacts (to the allergens)," Smith said. Allergy shots, through a regimen designed by your allergist, work like flu shots, exposing the body to the allergens and allowing it to build an immunity.

If needles aren't your thing, though, Smith said allergy drops, which have been popular in Europe for years according to Smith, are another option. The drops are placed under your tongue and act in relatively the same way that shots do. "(The shots) appear to work just as well," Smith said, adding that they are becoming more accepted in the United States.

Mary McCleod, who is 57 and lives in Oxford, has suffered with allergies her entire life: seasonal allergies from grass and weeds, dust, mold and animal dander — especially cats and also horses. "I take medication daily," she said. "It's a nasal spray and it seems to help more."

Advertisement

McCleod said she's dealt with her allergies for as long as she can remember, "ever since I was about 6 years old," she said.

Indoor allergies, those from the dust and mold, tend to go unnoticed by McCleod because she takes her medication, "It's not as bad," she said, "I forget what used to bother me (indoors)."

Her outdoor allergies are a different story, though. "Seasonally I would try to stay inside," McCleod said, jokingly adding that her allergies are a great excuse to keep her from raking leaves and mowing grass.

But what travels through the air isn't the only allergen you have to watch out for when the weather warms. Taking part in outdoor activities can also create allergic discomfort. If you spend time hiking through the woods or even just weeding your garden, you have to be on the lookout for plants like poison ivy, poison oak and poison sumac.

Dr. Jonathan Zieff is a dermatologist with the Health Network of Chester County Hospital. According to Zieff, the idea that reactions to poison ivy or oak or sumac are contagious is a "misconception." Zieff said that "you feel like you spread it yourself, but it just pops up at different times."

Zieff said that once you touch one of those plants, the oil gets on your body and as soon as you touch that part of your body, your hands spread the oil to wherever you touch. But if you were to get the oil on your hands and wash them right away, the reaction would be contained to your hands. He said it's also true with your clothes -- once they've been washed, the oil is gone and so is the risk.

He also recommends washing your dog if you have one. If your pet gets the oil on his fur then every time you or a family member pets it, then you are touching the oil and will probably have another outbreak.

But in the springtime, Smith and McCleod would probably agree with Zieff, "When the pollen hits, you see a lot of people with red, itchy faces."

-- More information about allergies is available at the National Institutes of Health Web site, [www.nih.gov](http://www.nih.gov).

-- To contact staff writer Justin McAneny, send an e-mail to [justinm@dailyllocal.com](mailto:justinm@dailyllocal.com).

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#### **The Biloxi Sun Herald Press Release**

**Does pollen make you sneeze? Trees make it that time of year: Doctor: Allergy season is going hot and heavy**  
**April 14, 2008**

(The Sun Herald - McClatchy-Tribune Information Services via COMTEX) -- -- The good news about the improving health of oaks, pines and other trees tromped by Hurricane Katrina isn't necessarily good news for the thousands of Mississippi Coast residents who suffer from pollen allergies.

"The trees have been sick since Katrina and they're getting healthier -- and that means more pollen," said Dr. Douglas Leavengood of the Gulf Coast Asthma and Allergy Clinic. "For the past two springs since the storm, we haven't seen as much pollen as we do now. The cars are as yellow from the pollen as they were in the springs before Katrina, and the intensity of what I'm seeing in the clinic is up again.

"About two weeks ago, I saw my first 'miserable' patient, and now allergy season is going hot and heavy."

Diagnosis: Seasonal allergic rhinitis. You know -- sneezy, runny nose, testy sinuses. If you don't have the symptoms, most likely a few co-workers, family members or friends do.

Pine pollen appears to be the most plentiful and visible of the tree pollens, but Leavengood, a Biloxian who has practiced on the Coast 23 years, explains that pine pollen is not as bad as its reputation.

"You see the pine pollen because it is upward of five times bigger than the other tree pollens," said Leavengood. "But because you see it, it is not the big allergy cause. It's too big to get much in the nose."

So the culprits?

"It's the pecans and oaks. They're the bad ones in our region," said Leavengood. "You can get more of those smaller pollens in your nose."

Researchers say people in the lower part of the South suffer the most from pollen allergies in the second half of April, but of course a warm spell here speeds things up a bit as trees and plants reawaken.

So what's a seasonal allergy sufferer to do?

Over-the-counter, non-drowsy antihistamines such as loratadine (Claritin or generics), the new-on-the-OTC-market Zyrtec and the old standbys of pseudoephedrine and diphenhydramine (Benadryl or generics) are possibilities.

But Leavengood suggests that if you take any of those and are still uncomfortable or get infected sinuses, it's time to see the doctor, possibly for a prescription.

There are also both OTC and prescription nasal sprays and eye drops that can help.

"The pollens are very seasonal and very predictable," Leavengood said. "Get ready, grass allergies will kick in soon."

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**HealthDay News**  
**Spring and Pollen Are in the Air**  
**April 12, 2008**

SATURDAY, April 12 (HealthDay News) -- Spring is here, and so is allergy season for millions of Americans.

With a bit of planning, effort and common sense, many people can limit their suffering or perhaps even avoid it altogether, according to Dr. Mark Dykewicz, professor of internal medicine and chief of allergy and clinical immunology at the Saint Louis University School of Medicine.

For the most part, seasonal allergies are caused by airborne pollens -- very fine powder released by trees, grasses and weeds as they pollinate and fertilize other plants of the same kind. Molds in outdoor air can also contribute to seasonal allergies.

Although outdoor allergens can be present year-round in warmer climates, allergy season generally begins in late winter or early spring and runs through late summer or early fall. As the season progresses, different types of pollens are present to trigger allergic reactions, Dykewicz said.

Dykewicz cited five important steps that help anyone prevent or relieve symptoms when pollen or mold counts are peaking:

Use over-the-counter antihistamines for relief. For some people, these drugs are very effective at reducing the classic symptoms of seasonal allergies, including sneezing, runny nose, itchy eyes and

scratchy throat. Be aware that some older-generation antihistamines, such as Benadryl, can cause sleepiness and the impairment of thinking and driving. More recent formulations tend to cause no drowsiness (Claritin, for example) or less drowsiness (Zyrtec), Dykewicz said. Keep your home's doors and windows closed. You can't completely seal off your home, but keeping doors and windows closed can help prevent pollens and outdoor molds from entering. As the weather turns nicer, use the air conditioner rather than opening a window to bring in "fresh" air. Limit outdoor activity, particularly in the morning. Avoid being outdoors, especially to exercise, when pollen counts are high, or on windy days when pollen and molds are being blown about. In general, pollen counts are highest from about 5 a.m. to 10 a.m. When traveling by car, keep the windows up. Again, this helps keep out pollens, dust and mold. Take a shower and change clothes. Pollen can collect on clothes and in your hair, so when you've been outside for any significant amount of time, shower and change into fresh clothes as soon as you get home.

If you've followed those steps and you're still suffering, then it is time to see a doctor, Dykewicz said.

A variety of prescription medications can help reduce or block seasonal allergy symptoms, he said. These include other oral antihistamines and several classes of nasal sprays. Nasal sprays tend to be the most effective at relieving symptoms by helping reduce inflammation and counteracting the allergic response.

For harder-to-treat cases, Dykewicz said many patients benefit from allergy immunotherapy -- a long-term series of shots to desensitize a patient from specific allergens.

The good news is there's a lot you and your doctor can do to help relieve or prevent suffering caused by allergies, Dykewicz said in a prepared statement.

More information

The Asthma and Allergy Foundation has more about outdoor seasonal allergies.

SOURCE: Saint Louis University School of Medicine, news release, March 2008

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**The Press Banner Online (San Lorenzo Valley, CA)**  
**Allergies are nothing to sneeze at**  
**April 11, 2008**  
**Terry Hollenbeck**

Allergic rhinitis, commonly called "hay fever," affects as much as 40 percent of children and 10 percent to 30 percent of adults in the United States.

Allergic rhinitis, commonly called "hay fever," affects as much as 40 percent of children and 10 percent to 30 percent of adults in the United States. It is called seasonal if symptoms occur at particular times of the year or perennial if it occurs year-round.

Common symptoms include sneezing, itchy eyes, nasal congestion with a decreased sense of smell, a headache and fatigue. These symptoms can have a tremendous negative impact on quality of life as well as productivity. American workers lose an estimated 6 million work days yearly to this disorder and incur a direct and indirect cost of several billion dollars in evaluation and treatment.

Symptoms for some children may decrease as they reach adulthood, and adults' symptoms often improve as they age.

Symptoms develop when a previously sensitized person breathes in allergens. An allergen is defined as something you are allergic to.



Allergic rhinitis can be divided into several categories. Seasonal rhinitis usually occurs from spring to early fall, caused by pollens from trees, grass and weeds. Perennial rhinitis, occurring throughout most of the year, is caused by indoor allergens such as dust mites, animal dander and mold.

An interesting fact for those who are allergic to cats is that the allergy is caused by protein particles of the cat's dry saliva on its fur, not actually from the fur itself.

The poor acacia tree, because of its high visibility, gets a bad rap, as many people falsely claim to be allergic to it. It is actually low on the allergy scale, because the pollen is heavy and drops to the ground, whereas the less noticeable oak and olive trees are pollinating at the same time and are the more likely culprits.

Living in Santa Cruz County is tough on allergy sufferers; the wonderful climate we love so much supports pollen in the air almost year round.

Nasal stuffiness from allergic rhinitis can cause swelling and obstruction of the sinuses, which can cause a bacterial sinus infection. Symptoms consist of yellow or green mucus, pain in the face or teeth, headache and cough. Unfortunately for the health care provider, there is no single symptom that can help differentiate bacterial sinusitis from allergic rhinitis or even a very bad head cold.

There is a strong association between allergic rhinitis and asthma. As much as half of patients with asthma have allergic rhinitis. Sleep disorders in adults and a high proportion of ear infections in children are also associated with allergic rhinitis.

A careful history taken by a health care provider can most often determine what one is allergic to. A blood test called RAST can also be performed to test for allergies, but is only moderately accurate.

Treatment for people who think they have allergic rhinitis can begin with an over-the-counter antihistamine. Two of the most common types of drugs in this category are Benadryl and Chlortrimeton. They are fairly good at reducing the symptoms of sneezing, runny nose and itching, but they are often associated with the bothersome side effect of drowsiness, as well as dry mouth and eyes, urinary problems and confusion. They should be avoided in children younger than 2 years of age and in the elderly.

By the way, Sudafed is a decongestant, and although it may somewhat help allergy symptoms, it is indicated mostly for relief of congestion caused by colds and flu.

Newer antihistamines such as Claritan and Zyrtec are now available without a prescription and cause significantly fewer side effects than the older antihistamines and are more conveniently dosed at once or twice a day. In general, antihistamines work best in people with mild to moderate symptoms and for those whose symptoms are of shorter duration.

The new "gold standard" of treatment for allergic rhinitis is the use of intranasal steroids. They have been shown to be very effective in symptom relief, with minimal side effects in recommended doses.

I know that many people fear the terms "steroid" and "cortisone," but the sprays have relatively low doses, and most of the drug is deposited on the inside of the nose so that very little gets absorbed into the body. Just ask an allergy sufferer who is being treated with one of these sprays: They are usually thrilled with the results.

As with the antihistamines, nasal steroids need only be taken during the time one has allergic symptoms. The nasal sprays are by prescription, so a visit to your health care provider is necessary.

A health care provider may refer those with chronic allergies to an allergist, who is a medical doctor specializing in the evaluation and treatment of allergies. An allergist is likely to perform skin tests to

identify what one is allergic to. Once the allergy is identified, allergy shots may given regularly to prevent or at the least to minimize symptoms.

At a glance

Allergy treatment summary:

1. Try to avoid your exposure to allergy-provoking situations or substances.
2. If symptomatic, try over-the-counter non-drowsy antihistamines such as Claritan or Zyrtec.
3. If still symptomatic, see your health care practitioner for prescription intranasal steroid sprays.
4. If none of the above helps, ask your practitioner to refer you to an allergist.

Terry Hollenbeck, M.D., is an urgent-care physician at Santa Cruz Medical Foundation in Scotts Valley. A doctor with 34 years' experience, he invites health-related questions at valleydoctor@sbcglobal.net. This e-mail address is being protected from spam bots, you need JavaScript enabled to view it Information in this column is not intended to replace professional advice. For any medical concern, consult a qualified practitioner.

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**9WSYR.com (Syracuse, NY)**

**Allergy Relief**

**April 10, 2008**

Nasal crom is only over-the-counter drug that helps prevent allergies. It stops the release of histamine which is what causes the runny nose and other allergy symptoms.

Allen Krassenbaum, K-Mart Pharmacist: "You have to use it first of all for about two weeks before its effective and you have to take it 4 to 5 times a day, so this sometimes is a problem but it does work fairly well."

Once allergies kick in, Krassenbaum says the best first choice to relieve a runny nose is Claritin, or Zyrtec which you can now get without a prescription... and they don't make you sleepy like Benadryl.

You have to ask the pharmacist to get you Sudafed from behind the counter. But Krassenbaum says it's only temporary relief from a stuffy nose. Otherwise there is a risk of side effects including dizziness, nervousness, sleeplessness and heart palpitations.

Sudafed PE is over-the-counter, but much less effective and can still make you jittery.

And Krassenbaum warns against using decongestant nasal sprays or drops for more than three days in a row because of a rebound effect.

Krassenbaum: "What happens is your nasal passages will actually expand and you'll feel like you have a runny nose if you use it, so in other words, it actually makes it worse and then makes you feel like you have to use it more and more."

If you need longer term relief, prescription steroid nasal sprays such as Nasonex and Flonase are very effective but Krassenbaum says some people are afraid to use them.

Krassenbaum: "And people, when they see corticosteroid they get nervous and say, "OMG, I'm not going to take a steroid". This is a very, very safe steroid drug. It's very localized. It doesn't go through the whole body."

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**Kalorama Information Press Release**

**Use of Rx to OTC Switch as Product Management Tactic Enjoys Comeback**

**April 10, 2008**

NEW YORK, April 10 /PRNewswire/ -- There are 14 prescription drugs that exceeded \$20 billion in sales in 2006, that may have the potential to reach the over-the-counter market in four years. Prescription to OTC switches were frequent in 2006 and 2007 and a new report by Kalorama Information, *The Return of the Rx to OTC Switch: Market Analysis and Product Management Strategies*, predicts this trend will continue.

The markets for Rx to OTC are forecast to reach \$5 billion in 2008 and increase by close to 40% by 2010. More than half of the revenues in 2008 will be from allergy medications that have already made the switch, such as Claritin, Benadryl, Sudafed, Nasalcrom, Mucinex and most recently Zyrtec. However, the forecast compound annual growth rate from antilipidemic agent switches between 2008 and 2013 far outpaces that of the allergy category (127.5% versus 3%).

"Lagging FDA approvals led to a brief absence of Rx to OTC switches in the pharmaceutical marketplace, but 2006 and 2007 saw a number of switches," notes Melissa Elder, the report's author. "We believe this product management tactic will continue to be aggressively utilized as companies seek ways to extend revenue lifecycles."

Factors affecting this recent upswing in Rx to OTC switches include patent expirations, generic competition, suitability for OTC shelves, drug safety and efficacy, petitions to the FDA and manufacturer trends. Some future potential switches include leading gastrointestinal drugs Prevacid, Protonix and AcipHex; antilipidemic agents Mevacor, Pravachol, Lescol and Zocor; the allergy treatment Allegra; the migraine therapy Imitrex, and a number of oral contraceptives.

Kalorama Information's report *Return of the Rx to OTC Switch: Market Analysis and Product Management Strategies* contains a complete overview of the U.S. market for prescription drugs likely to switch in 14 different drug categories. Forecasts are provided for each segment for the years 2008 to 2013. The report includes current issues and trends affecting the industry and identifies trends that may arise in the future. The information and forecasts were gathered through secondary research and interviews conducted with industry executives. The report can be purchased directly from Kalorama Information by visiting <http://www.kaloramainformation.com/Return-Rx-OTC-1692599/>.

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**RTTNews.com**

**Longs Drug Stores March Sales Rise 4.7%; Same-store Sales Up 2.8%**

**April 10, 2008**

4/10/2008 5:51:30 PM Thursday, Longs Drug Stores Corp. (LDG), engaged in the operations of retail drug stores, announced preliminary sales results for the month of March, reporting a 4.7% increase in total retail drug store sales.

The Walnut Creek, California-based Longs Drug Stores said that its March total retail drug store sales increased 4.7% to \$474 million from \$452.7 million in the comparable month of the previous year.

The company reported a 2.8% increase in March same-store sales. Of this, Pharmacy same-store sales increased 0.1% and Front-end same-store sales increased 5.7% for the recent month.

The company estimated that its preliminary March front-end same-store sales were favorably impacted by about 350 to 400 basis points from the three-week shift in Easter holiday sales. Preliminary pharmacy same-store sales were unfavorably impacted by nearly 525 to 575 basis points as a result of recent generic introductions being substituted for higher-priced brand name drugs.

Longs Drug Stores also noted that the switch of the prescription allergy medicine Zyrtec to over-the-counter status and a mild conclusion to the cold and flu season versus last year had an unfavorable impact of about 125 to 150 basis points on pharmacy same-store sales.

For the quarter-to-date period, the company's retail drug store sales improved 4.0% to \$853 million over the prior year period. Same-store sales for the period increased 2.1% with pharmacy same-store sales increasing 1.0% and front-end same-store sales increasing 3.2%.

LDG closed Thursday's regular trading session at \$37.65, down 51 cents or 1.34% from its previous closing of \$38.16.

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#### **Reuters**

#### **Longs Drug March same-store sales rise on Easter April 10, 2008**

April 10 (Reuters) -Longs Drug Stores Corp posted a 2.8 percent rise in March sales at stores open at least a year as strong demand for Easter merchandise helped offset tepid sales growth for prescription drugs.

The drugstore chain's same-store sales of "front-end" goods, such as shampoo and candy, were up 5.7 percent in March, helped by an early Easter.

Easter fell on March 23 this year compared with April 8 last year making it the earliest Easter since 1913, according to the National Retail Federation.

Longs, whose stores fill prescriptions and sell health and beauty aids, convenience foods and greeting cards, said pharmacy same-store sales rose only 0.1 percent.

Longs Drug Stores, like it larger rivals Walgreen Co , CVS Caremark and Rite Aid , has lately been plagued by sluggish holiday sales and cheap generic drugs cutting into sales.

In addition, the switch of the prescription allergy medicine Zyrtec to over-the-counter status and a mild conclusion to the cold and flu season versus last year also hurt pharmacy same-store sales.

Shares of the company were down 31 cents at \$37.34 in trading after the bell. They had closed at \$37.65 Thursday on the New York Stock Exchange. (Reporting by Dhanya Skariachan in Bangalore; Editing by Pratish Narayanan)

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#### **Associated Press**

#### **Longs Drug Stores posts 2.8 percent same-store sales increase, beating analyst forecast April 10, 2008**

WALNUT CREEK, Calif. (AP) - Longs Drug Stores Corp. said Thursday its March same-store sales rose 2.8 percent, crediting a shift of Easter sales into the month.

The growth beat Wall Street predictions. Analysts polled by Thomson Financial expected a same-store sales increase of 2.4 percent.

Same-store sales, or sales at stores open at least a year, is a key indicator of retailer performance since it measures growth at existing stores rather than newly opened ones.

Front-end, or non-pharmacy, same-store sales rose 5.7 percent, while pharmacy sales edged up 0.1 percent, Longs said.

Total retail drug store sales for the five-week period ended April 3 rose 4.7 percent to \$474 million, the company said.

Longs said its March sales benefited from the earlier Easter holiday season, but also was hurt by the introduction of several generic drugs that substitute for higher-priced brand name versions.

The results were also effected by the switch of the prescription allergy medicine Zyrtec to over-the-counter status and a mild end to the cold and flu season, the company said.

Longs shares fell 51 cents to close at \$37.65. The stock earlier traded at a 52-week low of \$36.65, after ranging between \$37.25 and \$59.20 over the past year.

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**Latina Online  
Got Allergies?  
April 10, 2008**

<http://www.latina.com/photos/lifestyle/got-allergies> (Note: slideshow)

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**Consumer Reports on Health  
New OTC Allergy Treatment  
April 2008**

# **Consumer Reports onHealth**

Expert | Independent | Nonprofit® | Volume 20 Number 4 | 43

APRIL 2008



**Defensive eating**

# health wire health wire health wire

symptoms. A new study has found that people with such damage perform worse on certain tests of mental and physical agility. That makes standard stroke prevention, including such steps as lowering blood pressure and getting checked for abnormal heart rhythms and clogged neck vessels, more important than ever. And consider talking with your doctor if you've had recent changes in memory or cognition.

▶ **Fourteen years!** That's how much longer you'll probably live if you exercise regularly, eat at least five servings of fruits and vegetables a day, don't

smoke, and drink alcohol moderately, according to British researchers. They looked at more than 20,000 men and women between the ages of 45 and 79. Participants were given 1 point for each healthy habit they had; those with a perfect 4 lived, on average, almost a decade and a half longer than those who scored a zero. Stubbing out the smoking habit had the single greatest effect. Even people with chronic diseases such as cancer or heart disease who adopted good habits lived longer.

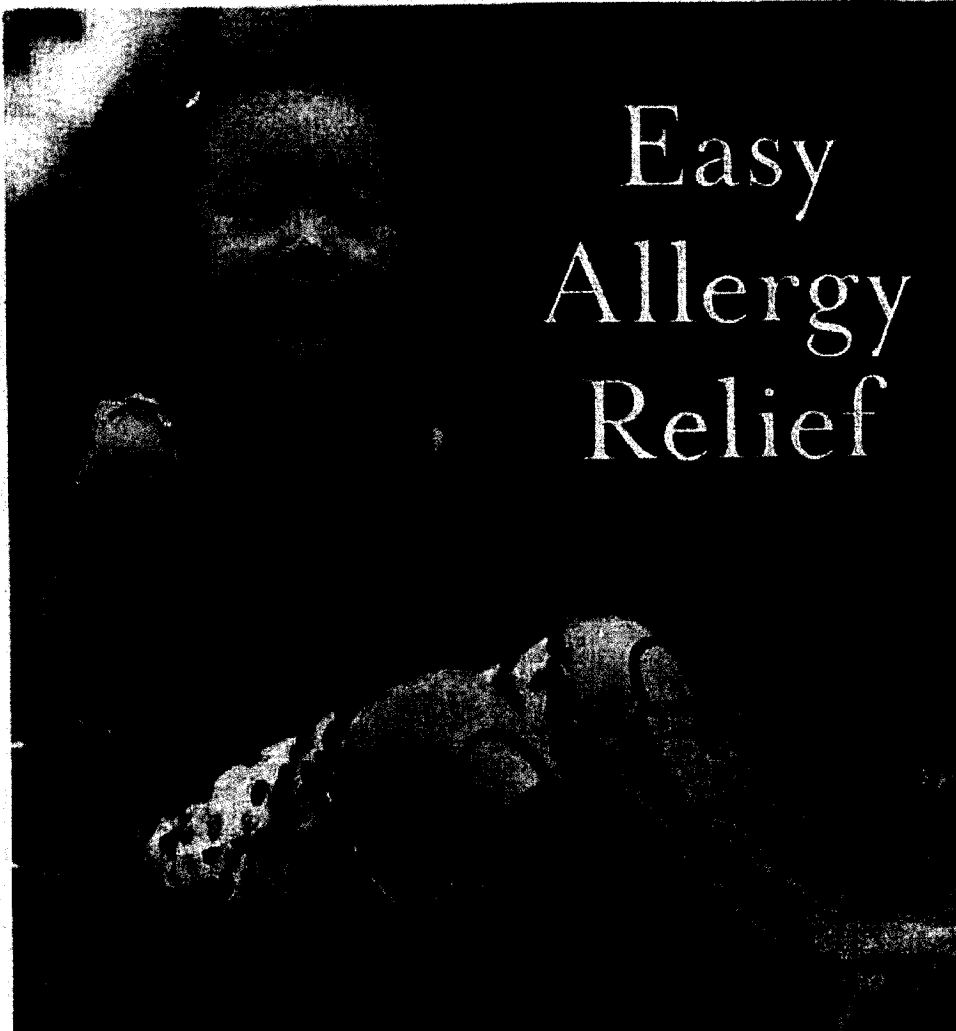


▶ **New OTC allergy treatment.** You can now buy cetirizine (*Zyrtec*) over the counter for temporary relief of hay-fever symptoms in adults and children age 2 and older. It's less sedating than some older nonprescription allergy drugs, such as chlorpheniramine (*Chlor-Trimeton* and generic) and diphenhydramine (*Benadryl Allergy* and generic). But you should probably start with the OTC version of the related drug loratadine (*Claritin* and generic). It's as safe and effective as cetirizine and costs less, since it is sold as a generic.

*Parents*  
Easy Allergy Relief  
April 2008



**YOUR CHILD** *health*





Treating your child's seasonal allergies just got simpler thanks to two new antihistamine products.

**Zyrtec** is now available over the counter in liquid form (for children ages 2 and up) and in tablet and chewable forms (for kids 6 and up) to help relieve sneezing, a runny nose, and itchy, watery eyes.

**Benadryl Perfect Measure**—a prefilled, individually wrapped disposable plastic spoon—contains one dose of children's liquid allergy medicine. Just pop it into your purse when you're on the go.

**The Wichita Eagle Online (Wichita, KS)**

**Allergies: Start taking your medicine now, doctors suggest**

**April 10, 2008**

**BY KAREN SHIDELER**

Tree pollen is in the air and grass pollen isn't far behind. That means it's time to start taking antihistamines if you have seasonal allergies, even if you don't have symptoms yet, said Wichita allergist Joel Fromer of the Allergy and Asthma Center.

"The earlier you start your medications, the better off you will be," Fromer said Monday. "Antihistamines can't possibly keep up" once symptoms appear.

"I tell my patients to start their allergy medications around March 1."

The allergy season has started strong, though it's impossible to tell whether that will continue. But if farmers have a good year, so will allergy doctors, Fromer said -- though the opposite will be true for patients.

This spring's tree allergy season is a week or two later than usual. Fromer said tree pollen usually is a problem through May. Grass pollen season usually starts later in April and goes into June. Weeds start then, peak in late August or September and continue until frost.

A late freeze cut short last year's tree pollen season, but Fromer doesn't see that happening this year.

But the late start to this year's season is giving people a bit more time to prevent or delay allergy symptoms -- the runny nose, sneezing, congestion and other symptoms that affect an estimated 40 million Americans, according to the American Academy of Allergy, Asthma and Immunology.

Fromer said over-the-counter antihistamines such as Zyrtec, Claritin and their generic versions work for people who have mild to moderate allergies. If they need more relief, he suggests Nasalcrom, a nasal spray that must be used for a week or more before relief begins.



"We recommend against self-medication," said Harrison, noting that commonly used medicines such as Benadryl make children very sleepy. "If you think your child may be allergic, take them to the doctor and get an appropriate treatment."

#### Alternative remedies

Alternative therapy is medical treatment for which there is no conclusive, supporting scientific evidence. You simply must be careful in what you choose and how you use it.

**Acupuncture.** A technique that involves inserting needles into key points of the body. May help people with allergies feel more relaxed or calm breathing.

**Biofeedback.** A technique that helps people control involuntary physical responses. Results are mixed, with children and teenagers showing the greatest benefit.

**Chiropractic spinal manipulation.** A technique that emphasizes manipulation of the spine in order to help the body heal itself.

**Hypnosis.** An artificially induced dream state that leaves the person open to suggestion, hypnosis might give people with allergies more self-discipline to follow good health practices.

**Laser treatment.** A technique that uses high-intensity light to shrink swollen tissue or unblock sinuses. Laser therapy may provide temporary relief, but it may also cause scarring or other long-term physical problems.

**Massage, relaxation techniques, art/music therapy, yoga.** Stress and anxiety may cause your airways to constrict more if you have asthma or allergies. Various techniques can help you relax, reduce anxiety or control your breathing, but there is no conclusive evidence that these techniques improve lung function.

Source: Asthma and Allergy Foundation of America

#### CLIP 'N' KEEP!

##### Treating the symptoms

Although the symptoms of seasonal allergies feel disabling, they should not kill you, says Alpen Patel, an allergy specialist at Emory Crawford Long Hospital. He offers some of the preferred treatments for common symptoms. You should consult your doctor if you're taking other medications and if symptoms persist.

**IF YOU HAVE:** Runny nose

**BEST BET (EXAMPLES):** Nasal saline (Ocean nasal spray), nasal steroid spray (prescription only, Flonaz, Veramyst) **BE CAREFUL OF:** Headaches, nasal irritation and dryness

**IF YOU HAVE:** Congestion

**BEST BET (EXAMPLES):** Nasal saline (NeilMed, Neti Pot), nasal steroid spray (prescription only, Flonaz, Veramyst) **BE CAREFUL OF:** Headaches, nasal irritation and dryness

**IF YOU HAVE:** Watery/itchy eyes

**BEST BET (EXAMPLES):** Topical antihistamine eyedrops (prescription, Patanol), oral antihistamines (Claritin, Benadryl) **BE CAREFUL OF:** Drowsiness, dry mouth, blurry vision

**IF YOU HAVE:** Sneezing

**BEST BET (EXAMPLES):** Nasal saline (NeilMed, Neti Pot), nasal steroid spray **BE CAREFUL OF:** Headaches, nasal irritation and dryness

**IF YOU HAVE:** Sore throat

**BEST BET (EXAMPLES):** Oral antihistamine with decongestant (Claritin D, Zyrtec D) **BE CAREFUL OF:** Drowsiness, dry mouth

**IF YOU HAVE:** Coughing

**BEST BET (EXAMPLES):** Oral antihistamine with decongestant (Claritin D, Zyrtec D) **BE CAREFUL OF:** Drowsiness, dry mouth

**IF YOU HAVE:** Wheezing

**BEST BET (EXAMPLES):** Beta 2 agonist inhaler (Albuterol), oral steroid inhaler (prescription) **BE CAREFUL OF:** Heart palpitations, tremors, sore throat, oral thrush

**IF YOU HAVE:** Headache, pain, pressure

**BEST BET (EXAMPLES):** Nasal saline (Ocean nasal spray, Neti Pot), topical or oral decongestant (Afrin, Sudafed) **BE CAREFUL OF:** Drowsiness, poor/bitter taste

**IF YOU HAVE:** Multiple symptoms

**BEST BET (EXAMPLES):** Nasal saline (Ocean nasal spray, Neti Pot), nasal steroid spray (prescription), oral antihistamine plus decongestant, if needed (Claritin D, Zyrtec D) **BE CAREFUL OF:** Headaches, nasal bleeding, drowsiness, dry mouth, blurry vision

Source: Alpen Patel

#### General tips

You can't live your life in a bubble, so here are some basic precautions you can take to minimize exposure:

Keep windows closed at night to prevent pollens or mold from drifting into your home. Instead, if needed, use air conditioning, which cleans, cools and dries the air.

Install high-efficiency filters in your cooling and heating system.

Minimize outdoor activity between 5 and 10 a.m. when pollen is usually emitted.

Try to stay indoors when the pollen count or humidity is high and on windy days when dust and pollen are blowing about.

Keep your car windows closed when traveling.

Take a shower after spending time outside because pollen can collect on hair and skin.

Remove rugs, carpet and upholstered furniture. If not, dust and vacuum frequently.

Don't hang sheets or clothing outside to dry where pollen can collect on them.

Avoid cigarette smoke.

Source: American Academy of Allergy, Asthma & Immunology

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**KTAR.com (AZ)**  
**Valley's Allergy Season At Its Peak**  
**April 9, 2008**  
**By Bob McClay**

PHOENIX -- This year's allergy season in the Valley is being called the worst in years.

"It has been horrible," said Dr. Duane Wong, an allergy specialist.

"We've had a ton of rain and the plants and the trees have really, really responded quite well to the rain, so we've seen a bumper crop of pollens being put out there," Wong said. "Right now, we're at the peak of the season."

Wong suggests that allergy sufferers stay inside as much as possible.

"We certainly recommend that allergy sufferers close their windows at night, and we also recommend some type of air cleaner, like a hepa-filter of some sort," he said. "If you put that in the bedroom and you close the windows and doors, then you can really filter out a lot of the pollen particles."

If sufferers do go outside, Wong said cleanliness is the key.

"After people have finished gardening, for example, we really recommend that they shower very thoroughly to get all of the pollen particles that kind of adhere to the skin."

Over-the-counter medications can help, Wong said.

"The number of antihistamines like Claritin and the newest one that you can buy over the counter is actually Zyrtec," he said. "It's been a mainstay of allergy treatment, and it actually works fairly quickly, 20 to 30 minutes, and it has been pretty effective."

Another tip: wash your sheets in hot water to limit your exposure to dust mites.

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**WSAZ.com (Charleston-Huntington, WV)**  
**Early Allergy Season**  
**April 8, 2008**  
**By Bill Murray**

AIRONTON, Ohio (WSAZ) -- Someone somewhere is sneezing right now, especially if you're one of more than 35 million suffering with allergies. If you're thinking the season is starting a little early, you're absolutely right.

This time of year, the closest George Dalton likes to be with what grows outside is the salad on his lunch plate.

"Started coughing, sneezing, and had a hard time breathing the next morning. I went the hospital and that's what happened," Dalton said.

It's an allergy attack bad enough to trigger a trip to the hospital. Sure it looks nice and feels great outside, but a bee landing on the flower isn't making a pit stop, its gathering pollen. It's nature at work.

Dr. Sue Adams is a family doctor. It's rare, but whether you know it or not, you can develop allergies.

"If you have respiratory symptoms that last two weeks or more," Dr. Adams says, "get it checked out."

Dr. Matthew Wilson sees hard-core sufferers. He's an allergist.

"The most common cause of school loss in America is related to allergies. It is the sixth most prevalent disease in the United States," Dr. Wilson said.

Jim Noel knows it's that time of year thanks to his nose and it could be a long, long summer.

"It's one of those things where you just take your medication, go have your fun and blow your nose when you have to," Noel said.

If you suffer with allergies, there's a big difference this year for folks taking the allergy medicine Zyrtec. You can now get it without a prescription.

A great time to take a shower is at night because pollen is sticky and your hair and skin are no exception. Rinsing that off means your not bed partners with those allergens for eight hours making you feel miserable.

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**Elmira Star-Gazette Online (Elmira, NY)**

**Spring is in the air: For people with allergies, it's a season of sniffing and stress.**

**April 7, 2008**

**By Jennifer Kingsley**

Pollen from grass, weeds and trees is in the air, and it's not only making people sneeze, it's making some of them grumpy.

As spring allergy season arrives in much of the country, the 40 million Americans who have seasonal allergies -- sensitivity to tree, flower and other plant pollens -- will be sneezing and congested and fending off sinus and headaches and red eyes for weeks to come.

A number of them will also endure a host of other less concrete symptoms including irritability, mood changes, fatigue and even depression.

When it comes to seasonal allergies, most people associate sneezing, a running or congested nose and swollen, itchy eyes as the symptoms, said Dr. Joseph Flanagan of Asthma & Allergy Associates at 216 W. Gray St. in Elmira.

Allergies can make some people irritable, but it's likely caused by fatigue, he said.

"Sometimes it's just allergies interfering with sleep," Flanagan said. "People feel run down."

Typically, those who suffer most are children and adults in their 20s, Flanagan said. Immune systems are generally more active at those ages than later in life, and an allergic reaction happens when the immune system is overactive.

Allergic reactions happen when the body's immune system overreacts to harmless things like pollen, pet hair or dust, he said. Trees have been releasing pollen for the past couple weeks, Flanagan said, slightly ahead of schedule.

"The pollen counts are high," said Dr. Dariusz Chrostowski, Flanagan's colleague at Asthma & Allergy Associates. "You can see the yellow buds on the trees, just waiting to burst."

Pollen count forecasts for the weekend are expected to be high, according to the Pollen Web site, at [www.pollen.com](http://www.pollen.com), where visitors can punch in their ZIP codes for region specific counts.

But there are a few measures allergy sufferers can take to relieve their symptoms, Flanagan said.

"The first is to avoid the problem," Flanagan said.

Pet dander, dust mites and other allergens can be reduced by cleaning your house, including mattresses and pillows, he said.

That's something Cathy Schillings, a nurse and late-in-life allergy sufferer from Elmira, knows all about, she said.

"I'm allergic to everything," said Schillings, who started suffering with allergies about three years ago. "Even as a nurse with children who have asthma, I'm still learning ways to keep my environment allergy-free. I just learned how to get a HEPA filter for my vacuum. You don't have to buy a special vacuum, anyone can get the filter."

HEPA filters hold allergens such as pollen grains, dust and pet dander, according to the Allergy Relief Center Web site.

Some over-the-counter medications, such as Zyrtec or Benadryl, can help ease allergy symptoms as well, Flanagan said.

"With Zyrtec, there's less sedation than with Benadryl," Flanagan said. Benadryl often causes drowsiness, he said.

But for those who have cleaned their environment and tried over-the-counter remedies without success, Flanagan said perhaps allergy shots can be the solution.

"Shots retrain the immune system," Flanagan said.

During the winter months, allergy sufferers receive one shot per month, Chrostowski said. However, in the spring, when pollen counts are high, patients will receive two shots per month, he said.

During the past few weeks, Asthma & Allergy Associates have administered about 100 shots a day, Chrostowski said, adding, "When the pollen counts are high, we see more patients."

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***St. Louis Post-Dispatch***

**Build a home 'blockade' against allergens**

**April 7, 2008**

**By Dr. Bob Wilmott**

Spring is here, and for many people, including children, that means allergy season. As the weather warms, trees are germinating and grass is growing, so large quantities of pollen get into the air.

Warmer temperatures bring greater humidity and an increase in mold, which can cause problems for allergy sufferers. As if that weren't enough, the recent flooding in several areas near St. Louis may add to mold problems.

The body's immune system is designed to defend against particles it perceives as foreign, such as germs. What happens with allergy is that our body reacts differently, producing too much mucus and fluid. That makes the membranes in the nose boggy and thick. Allergy's symptoms are all-too-familiar to many St. Louisans: sneezing, watery eyes, runny nose, scratchy throat and lots of congestion.

- Clean the room thoroughly and completely once a week.
- Clean floors, furniture, tops of doors, window frames and sills, etc., with a damp cloth or oil mop.
- Carefully vacuum carpet and upholstery regularly.
- Use a special filter in the vacuum cleaner.
- Wash curtains often at 130 degrees.
- Air the room thoroughly.

#### CARPETING AND FLOORING

Carpeting makes dust control impossible. Although shag carpets are the worst type to have for the dust-sensitive, all carpets trap dust. Therefore, health care experts recommend hardwood, tile or linoleum floors. Treating carpets with tannic acid eliminates some dust mite allergen. However, tannic acid:

- is not as effective as removing the carpet.
- is irritating to some people.
- must be applied repeatedly.

#### BEDS AND BEDDING

- Keep only one bed in the bedroom. Most importantly, encase box springs and mattress in a zippered dust-proof or allergen-proof cover. Scrub bed springs outside the room. If you must have a second bed in the room, prepare it in the same manner.

- Use only washable materials on the bed. Sheets, blankets, and other bedclothes should be washed frequently in water that is at least 130 degrees Fahrenheit.

- Lower temperatures will not kill dust mites.

- If you set your hot water temperature lower, wash items at a laundry that uses high wash temperatures or dry the items in a dryer on high heat until dry.

- Use a synthetic, such as Dacron, mattress pad and pillow. Avoid fuzzy wool blankets or feather - or wool-stuffed comforters and mattress pads.

#### FURNITURE AND

#### FURNISHINGS

- Keep furniture and furnishings in the bedroom to a minimum.
- Avoid upholstered furniture and blinds.
- Use only a wooden or metal chair that you can scrub.
- Use only plain, lightweight curtains or blinds on the windows.

#### AIR CONTROL

- Air filters - either added to a furnace or a room unit - can reduce the levels of allergens. Electrostatic and HEPA (high-efficiency particulate absorption) filters can effectively remove many allergens from the air.

- A dehumidifier may help because house dust mites and mold need high humidity to live and grow. You should take special care to clean the unit frequently with a weak bleach solution (1 cup bleach in 1 gallon water) or with a commercial product to prevent mold growth. Although low humidity may reduce dust mite levels, it might irritate your nose and lungs. Allergic children do best when the indoor humidity is kept between 40 and 50 percent.

## CHILDREN

In addition to the above guidelines, if you are caring for a child who is dust-sensitive:

- Keep toys that will accumulate dust out of the child's bedroom.
- Avoid stuffed toys.
- Use only washable toys of wood, rubber, metal or plastic.
- Store toys in a closed toy box or chest.

## PETS

- Keep all animals with fur or feathers out of the bedroom. If your child is allergic to dust mites, he or she could also be allergic or develop an allergy to cats, dogs or other animals.

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### ***The News & Observer***

#### **Allergy-drug sales surge as yellow haze descends**

**April 5, 2008**

**By David Ranii**

These are the times that try men's nasal passages.

Spring is the onset of allergy season, when Americans run to the store for medicine to ease their runny noses, teary eyes and other symptoms of seasonal allergic rhinitis -- better known as hay fever.

The drill at Wake Forest Drug is to have 50 percent to 60 percent more allergy drugs on hand, both prescription medications and the over-the-counter variety, to serve the rheumy masses this time of year.

"As the yellow haze begins to descend upon us, the pine pollen, that's when people start coming in," said Scott Townsend, pharmacist and co-owner of the Wake Forest pharmacy.

Access to potent allergy drugs has become easier for wheezing consumers as over-the-counter versions of top-selling prescription drugs Claritin and Zyrtec have hit the market. And the extra competition, including store brands whose ingredients mimic the name brands, is keeping prices down.

Drug makers roll out promotions and coupons this time of year to boost interest. And some health insurers are providing financial incentives that encourage customers to seek nonprescription relief.

Even so, sales of prescription allergy and asthma drugs nationwide rose 17 percent last year, according to market research firm Verispan.

That's a bright spot in the pharmaceutical industry, which is struggling with slowing sales and increasing generic competition.

Sales of over-the-counter allergy drugs doubled in 2003 -- when sales were spurred by the introduction of over-the-counter Claritin. The total value of sales has flattened since then, according to Kline & Co., a market research and management consulting firm.

But the sales volume is climbing, said Laura Mahecha, industry manager for health care at Kline. With the growing popularity of over-the-counter allergy drugs and intense price competition, people can buy more for less, she said.

Another spike in sales is expected this year thanks to Zyrtec, which became available without a prescription in January.

"It's hard for people to turn on the TV or flip through a magazine without seeing Zyrtec," said Scott Porter, who buys over-the-counter health products for Raleigh-based Kerr Drug.

Experience shows that could be a shot in the arm for competing drugs as well. "New customers will enter the category," he said.

The introduction of nonprescription Zyrtec already has had a big impact, said Ron Smith, vice president of Blue Cross and Blue Shield of North Carolina, the state's largest health insurer. He credits Zyrtec's debut for a 25 percent drop in allergy drug prescriptions among customers in January and February compared to a year earlier.

Blue Cross encouraged that shift by mailing a pair of \$5 coupons to 50,000 customers who take antihistamines.

Smith says customers can save money by going with OTC or generic prescription drugs because the average co-pay for a name brand antihistamine is \$40 to \$50. Blue Cross requires higher co-pays on name-brand drugs, such as antihistamines, that have strong OTC or generic alternatives.

#### Miserable spring

Andrea Hunnicutt Grater's allergies are so severe that she gets allergy shots year-round, but she still pops pills "just to take the edge off" when her symptoms are at their worst. Grater, a vice president at IBD Insurance Services, alternates between prescription and OTC medications.

At this time of year, "my eyes are always irritated," she said. "I wear contacts and by [mid-afternoon] my computer screen starts getting blurry. I talk to a lot of clients, and I start getting hoarse at the end of the day."

In the Triangle, the prime allergy season begins in March and peaks in April and May, said Patti Becherer, site manager in the Raleigh office of N.C. Clinical Research, a company that conducts drug trials involving patients with respiratory diseases.

Prescriptions for allergy drugs typically run 40 percent to 60 percent higher during the spring allergy season, said Ted Lingerfeldt, director of pharmacy procurement for Kerr Drug. The fall allergy season, which is when the ragweed flies, produces a smaller spike -- prescriptions jump by 20 percent to 30 percent at Kerr.

The pine pollen that yellows your car actually isn't a major allergen. But it's a visible sign that other tree pollens -- especially oak pollens -- are causing irritation.

#### Most self-medicate

Allergic rhinitis afflicts 20 percent of all adults and up to 40 percent of children, triggering 16.7 million treks to the doctor's office each year, according to the American Academy of Allergy Asthma and Immunology.



But according to a survey commissioned by Schering-Plough, the maker of the antihistamine Claritin, only about one-third of allergy sufferers see a doctor when their symptoms flare up.

That's where over-the-counter medications like Claritin, the No. 1 nonprescription allergy medication, and Benadryl come in.

Ed Weems, co-owner of Capital City Grocery and a marketing and business strategy lecturer at N.C. State University, used to take prescription allergy medication but switched to Claritin when it went over-the-counter to save money.

Before he found pharmaceutical relief, he said, "I sneezed and my eyes ran and I was almost unfunctional. It was difficult to work."

Even with Claritin, he avoids the pollen in the spring by staying indoors as much as he can.

"I'm feeling fine as long as I don't go walking down the street," Weems said.

'The tree pollen is going like crazy out there,' says Joan Renken. She stopped by Kerr Drug in North Raleigh on her break.

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**Reno Gazette-Journal Online (Reno, NV)**  
**Allergens spring up as seasons change**  
**April 3, 2008**  
**By TAMMY KRIKORIAN**

The beauty of spring blossoms brings something less desirable to Northern Nevadans: allergy season.

Dr. Leonard Shapiro, an allergist with Allergy & Asthma Associates, said trees have been pollinating since late February. Wetter winters, such as the one experienced this year, can make allergy season worse, Shapiro said.

"In wet years, there's heavier growth in plants and we do have more problems than in drought times," he said.

Tim Miles of Reno said he suffers from allergies in the spring and fall and has been feeling symptoms for about a month, including sneezing, congestion and ringing in the ears.

"(Spring) doesn't affect me as harsh as fall does, personally," Miles said.

Miles said he is allergic to ragweed, wheat, grasses and sagebrush. Symptoms are worse on windy days, he said, and when it's really bad, he gets run down.

"I sleep an extra hour or two hours a day during the height of the allergy season," he said.

Peak allergy season, and how long allergy season lasts, has to do with an individual's allergies, Shapiro said. Allergy season generally begins with tree pollination in the spring, continues with grasses in the summer and wraps up with weeds in early to late fall.

"We usually get a rush (of patients) in the spring," he said. "It stays busy spring through fall."

It starts with Juniper trees, followed by maple trees, then elms. Each lasts a couple of weeks, and in June the pine trees begin pollinating, especially noticeable at Lake Tahoe. Shapiro said most people aren't allergic to pine, but some are, and the pollination can last into fall.

Grass allergies usually kick in around May, and toward the end of July weeds such as Russian Thistle start. Next comes sagebrush and ragweed in late August and September.

Relief comes with a killing frost, except for those allergic to winter allergens such as pets, mold or a house dust mite.

#### Knowing you're allergic

Symptoms can include nasal congestion; a runny nose, usually with clear, watery mucus; itchy watery burning eyes; slight swelling around the eyes; and sneezing, said Dr. Kent Elliott of the Renown North Valleys Clinic.

Some cases produce itching, a rash such or hives. Those who go untreated will develop a cough, Elliott said, and people with asthma will notice an increase in wheezing or shortness of breath.

Shapiro said a fever or yellow and green mucus could indicate an infection rather than an allergy.

"Sometimes you can have a cold or virus on top of an allergy or vice-versa," he said.

#### How you become allergic

Most people begin developing allergies in childhood, Shapiro said.

"But for the individual, you can't say because you didn't have (an allergy) in childhood you're not going to have it as an adult," he said.

Changes in job, like moving from an indoor to and outdoor job or working with animals, could bring on an allergy.

Some people develop allergies when they move. For example, more ragweed grows east of Colorado than locally, Shapiro said. And more sagebrush grows in Northern Nevada than in the East.

People who move here may begin to develop symptoms after two or three years.

#### Treating an allergy

"In general we say if you can avoid what you're allergic to, that would solve problem," Shapiro said. For example, if you're allergic to cats, don't keep them as pets.

"Very often, avoidance doesn't work very well, especially with pollen allergy," he said. "Days when pollen counts are high, try to stay indoors."

Shapiro said it helps to keep doors and windows shut and to have air conditioning in the home and car because the air is filtered. Pollen can also end up in hair, so brushing or washing hair before bed can prevent it from ending up on the pillow. Wearing a hat outdoors is also a good idea.

Over-the-counter medications such as Claritin, Zyrtec or Sudafed can treat an allergy. If they don't work or have side effects, Shapiro said patients can be tested to find out what they're allergic to and receive shots.

Over-the-counter treatments such as nose sprays and eye drops should not be overused because they can cause reverse problems or make problems worse, Shapiro said. He recommends using them no more than five times a month or getting a prescription.

Chuck Boiselle, a pharmacist at Don's Pharmacy, said Zyrtec's switch earlier this year from prescription to over-the-counter hasn't had a huge impact because insurances haven't been covering allergy medications as much since Claritin went over-the-counter.

"(I also) tell someone to take a hot shower to get rid of a clog," he said.

Neti pots, which irrigate the nose with a saline solution, have also been popular, Boiselle said.

"The work pretty good, clearing the sinuses or allergens," he said.

Miles, born and raised in the area, said eating local honey or taking stinging nettle in pill form mellows out his allergy symptoms, though they don't completely go away. The pollen in the honey is supposed to counteract the allergic reaction, Miles said.

Last fall, he also got a steroid shot to help his symptoms.

For indoor allergies, Elliott said minimizing items such as stuffed animals, which can collect dust, and keeping curtains vacuumed will help.

"There's a lot of online allergy places where you can get special pillow covers, mattress covers, to protect the person from the dust that comes out of those items," he said. "Pillows, mattresses and bedding are a big source of allergens indoors."

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#### **Opelika-Auburn News Online (Opelika, AL)**

#### **Sniffles increase as pollen season peaks**

**April 3, 2008**

**By Brittany Whitley**

If your nose is running like a faucet and eyes feel like sand paper, you're not alone — it's the peak of spring allergy season.

East Alabama Nose & Throat is getting "lots and lots and lots of (allergy) complaints," said Dr. William R. Blythe, M.D., FACS.

This year's pollen troubles are a little worse than last year's, he said.

Helen Dudas, office manager at Auburn Urgent Care, said they are also seeing a lot of allergy cases — about 15 to 20 a day.

Most of the yellow dusting covering cars and sidewalks is pine pollen, which is not the worst of the pollens. The worst of the spring pollens are oak, maple, cedar, hickory and pecan trees, Blythe said.

Those pollens are harder to spot because their grains are finer than pine pollen grains.

There are also more pine trees, which, in turn, means more pine pollen, he said.

"When you have the yellow fog, it's a pine fog," he said.

"There are three ways you can treat allergies, and only three ways," Blythe said.

The first type of treatment is avoidance. A person should know what they are allergic to and avoid it.

This can be achieved by reducing the allergy burden. Allergy sufferers can change air filters, keep windows closed and wash their sheets to reduce allergic reactions.

Blythe calls these methods common sense, but he also said avoidance is usually not enough to stop allergy sufferers from sniffing.

The second type of treatment is medication.

Medications can range from nasal sprays to non-sedating antihistamines.

Blythe said all the medications work wonderfully.

Another medical route is nasal saline irrigation.

"Rinsing the nose with saline is one of the most effective and less harmful things you can do," he said.

Blythe suggests people try an over-the-counter medication before going to the doctor for a prescription.

Claritin and Zyrtec are both over-the-counter drugs that used to be prescriptions. Now, a person can get the same dosage over the counter.

"We were prescribing it a month ago," he said, referring to Zyrtec.

Just because a medication is available over the counter doesn't mean it is less effective, he said.

The third route of treatment is allergy shots.

"The shots are not for everybody," he said.

Shots are good options for two types of people, he said, those who suffer from allergy symptoms year round and people who are dissatisfied with their allergy medications.

Although spring allergies can be bad, Blythe said, fall allergies are especially brutal.

"If you hear a football whistle, it's allergy season in Alabama," he said.

Allergy symptoms can include sneezing, itchy eyes, postnasal discharge, cough, worsening of asthma, upper respiratory infections and ear infections.

Blythe recommends anyone with asthma receive an allergy shot, but for the average person, over-the-counter medications will suffice.

"Most people will do well with that," he said.

Dudas said doctors at Auburn Urgent Care recommend staying away from pollen.

"(The) best thing is avoidance... stay out of the pollen," she said. Wear a mask if working outside, wash eyes out with artificial tears and use saline nasal spray when coming back indoors.

bwhitley@oanow.com

#### Pollen Facts:

- Individual pieces of pollen are called grains
- In Alabama, fall allergies tend to affect people more severely than spring allergies
- The yellow pollen commonly seen on cars and sidewalks is pine tree pollen

Source: William R. Blythe, M.D., FACS

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**RTTNews.com**

**Walgreen March Sales Rise 10.6% On Strong Easter Sales [WAG]**

**April 2, 2008**

Wednesday, drugstore chain Walgreen Co (WAG) reported a 10.6% year-on-year rise in March sales, helped by strong Easter seasonal sales. Comparable store sales, for stores open at least a year, increased 4.4%.

Boosted by an early Easter this year, the Deerfield Illinois based company's March sales grew to \$5.11 billion from \$4.62 billion a year ago. Easter came in April last year.

Comparable stores front-end sales for the month rose 11.3%. Walgreen said that March front-end sales surpassed expectations despite the challenging economic conditions.

March pharmacy sales increased 6.9% and accounted for 64.5% of total sales for the month.

Comparable pharmacy sales posted an increase of 0.8%, inspite a 4.4 percentage point negative impact in the last twelve months due to generic drug introductions. Fiscal 2008 year-to-date sales rose to \$34.5 billion from \$31.27 billion.

Total prescriptions filled at comparable stores declined 0.1%, mainly on account of shift of prescription allergy medicine Zyrtec to over-the counter status and a slower flu season.

Last month, the drugstore operator reported its second quarter earnings results. It announced a 5.2% year-on-year rise in its second-quarter profit, helped by an extra selling day in February due to leap year and benefits from its cost-cutting initiative. The company's net earnings were \$685.9 million.

Walgreen's earning per share of 69 cents for the quarter, beat analyst expectations. On average, 17 analysts polled by First Call/Thomson Financial had expected earnings of 67 cents per share for the second quarter.

The company's quarterly sales increased 10.5% to \$15.39 billion from \$13.93 billion in the prior-year quarter. Total comparable stores sales were up 4.7% in the second quarter, while front-end comparable drugstore sales rose 4%.

In March, the company also announced a new, multi-year contract with Prime Therapeutics to become Prime's exclusive provider for specialty pharmacy products. Prime, based in St. Paul, Minnesota, is a pharmacy benefit manager collectively owned by 10 Blue Cross Blue Shield Plans, subsidiaries or affiliates of those Plans. Walgreen opened 39 stores during March, including five relocations, acquired one store and closed one. As of March 31, Walgreen operated 6,271 drugstores, including 89 home care division locations, 12 specialty pharmacies and two mail service facilities, in 49 states and Puerto Rico, versus 5,675 a year ago.

Among its competitors, Pennsylvania based retail drugstore chain Rite Aid Corp. (RAD) is scheduled to announce its fourth-quarter results on April 10.

Another rival, CVS Caremark Corp. (CVS) in January reported fourth-quarter net earnings of \$815.0 million, or \$0.55 per share, significantly up from \$417.2 million or \$0.49 per share, in the same quarter last year. Net sales surged more than 80% to \$21.94 billion from \$12.07 billion in the year ago quarter.

Walgreen shares have been trading in a 52-week range of between \$32.50 and \$48.09 at the NYSE.

WAG is currently trading at \$38.01, down \$0.92 or 2.36%, on a volume of 423,000 shares.

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**Market Intelligence Center Online**

**Walgreen (WAG) NewsBite - Walgreen Falls on Weak Drug Prescriptions**

**April 2, 2008**

Walgreen Co. (WAG) opened at 38.80. So far today, the stock has hit a low of 37.68 and a high of 38.83. WAG is now trading at 38.69, down 0.24 (-0.62%). The stock hit its 52 week high of 48.09 in September and set its 52 week low of 32.50 in January. The stock dropped during the last months of 2007, but has shown signs of strength this year. Walgreen posted this morning a 10.6% growth for its March sales, helped by the Easter holiday which made same-store sales rise 4.4%. However, the company's shares have been falling after reporting a drop of 0.1% for its stores prescription, due mainly to its prescriptions related to allergy drug Zyrtec. Technical indicators for the stock are bullish and steady while S&P gives WAG a neutral 3 STARS (out of 5) hold rating. If you're looking for a hedged play on this stock, consider a July bear-call credit spread above the \$42.50 range. WAG stock could rise up to 9.8% before expiration and this position would still be profitable. [RHF - Seven Summits Strategic Investments NewsBite]  
Click Symbol For More News On: (WAG)

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**Chicago Tribune Online**

**Walgreens' sales climb 10.6%**

**April 2, 2008**

**By James P. Miller**

Walgreen Co. said Wednesday that sales in March rose 10.6 percent, to \$5.11 billion from \$4.62 billion in the year-ago month, helped in part by an early Easter

Sales on a "comparable-store" basis, which offers a better view of underlying trends by measuring results only at outlets open at least twelve months, rose 4.4 percent, the Deerfield drugstore chain reported.

Pharmacy sales, which represent roughly two-thirds of Walgreen's overall sales, rose 6.9 percent; comparable-store pharmacy sales rose just 0.8 percent, the company said. Pharmacy sales totals are being suppressed to an extent, the company noted, by the recent introduction of generic drugs, which cost significantly less than the patented brand-name pharmaceuticals they replace.

In addition, the company noted, the allergy medicine Zyrtec switched from a prescription basis to an over-the-counter product; such OTC drug sales aren't included in the pharmacy segment's sales totals.

Walgreen said "front-of the store" sales -- or sales of non-pharmacy products such as food, cosmetics and the like -- surged 11.3 percent on a comp-store basis. The upturn reflects the fact that Easter-related sales came in March this year, while Easter occurred in April in 2007. Despite the slowing economy, Walgreen said, front-end sales exceeded internal forecasts.

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**Reuters**

**Walgreen March sales up on Easter; pharmacy lags**

**April 2, 2008**

**By Brad Dorfman**

CHICAGO (Reuters) - Walgreen Co (WAG.N: Quote, Profile, Research) posted on Wednesday a 4.4 percent increase in sales at stores open at least a year as strong demand for Easter merchandise helped offset tepid sales growth for prescription drugs.

Pharmacy same-store sales rose just 0.8 percent, hurt by lower-priced generic drugs, a slower flu season and the switch of allergy medicine Zyrtec to over-the-counter status. The number of prescriptions filled at established stores fell 0.1 percent.

Same-store sales of general, or front-end, merchandise rose 11.3 percent, helped by the early Easter, which came in March this year and April last year.

"Front-end strength was partially attributable to the earlier Easter, which is transitory," Goldman Sachs analyst John Heinbockel said in a research note.

Walgreen and rival CVS Caremark Corp (CVS.N: Quote, Profile, Research), the two largest U.S. drugstore operators, have seen sales of general merchandise hurt by the weak U.S. economy, but Walgreen said front-end sales in March exceeded expectations because of strong Easter sales.

Goldman's Heinbockel said the improvement in sales of seasonal items for Easter, compared with a weak Christmas, might be because Easter items cost less.

Total sales rose 10.6 percent to \$5.11 billion in March, the company said.

Walgreen shares were down 1.5 percent to \$38.34 in early Wednesday afternoon trading while CVS shares were down 1.6 percent to \$40.51, both on the New York Stock Exchange.

(Reporting by Brad Dorfman, editing by Lisa Von Ahn and Tim Dobbyn)

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**New York Daily News Online**  
**The Daily Checkup: Allergies are nothing to sniff at**  
**April 2, 2008**  
**BY KATIE CHARLES**

It's springtime in New York and allergies are in bloom. A Mount Sinai specialist has the lowdown on sneezing season.

The specialist: Dr. Beth Corn

As an allergy immunologist of 10 years' standing, Dr. Beth Corn has heard every story in the book about itching, scratching and sneezing. A certified spinning instructor and native New Yorker, she lives on the upper East Side.

The big story:

It's that time of year again: allergy season. And if this year is anything like last - where record pollen levels made hay fever rampant in New York City - we're in for a long season of sniffing.

Who's at risk:

Some 50 million Americans suffer from allergies, Corn says and they strike both men and women, all races and socioeconomic groups. In children, there is one trend that shifts in adolescence. "In the pediatric population, allergies are more common in males than females," says Corn, "but as the population ages, it evens out." Often, patients can outgrow their childhood allergies. Doctors divide allergies into two types: perennial and seasonal. People with perennial allergies suffer throughout the year, and people with seasonal allergies suffer during certain seasons, usually when certain plants are pollinating.

Some patients can suffer from both types; their perennial allergies then flare up during the high season.

Seasonal allergies follow the growth cycle of plants. In spring, starting around early March, the main culprit is tree pollen, and by late April or early May, the grass will start to pollinate. Things don't quiet

down until July; the next round of ragweed and other weeds start their pollination in August. "This season continues until the first frost," says Corn, "So a warm fall is a bad time for allergies."

#### Signs and symptoms:

Allergy symptoms often manifest themselves through the eyes, nose and throat. Corn has a short list of the typical signs she sees in allergy patients: sneezing; itchy; watery eyes; runny nose; congestion; headache; itchy skin; difficulty breathing; shortness of breath, and wheezing.

"If you hear people clear their throat," Corn notes, "that's often the result of postnasal drip."

Sometimes the symptoms are more subtle. "Someone can just feel kind of lousy, lethargic for a couple of weeks in the spring or fall," says Corn.

How can you tell the difference between allergies and a garden variety cold? "Typically, if you have a cold, it's going to go away after a couple of days," says Corn.

"If your symptoms persist for more than a week, chances are it's allergies, especially during the high season of the spring or fall."

#### Traditional treatment:

The good news is that doctors have effective tools for treating allergies.

The first step is to get a good diagnosis. "The most important thing you can do is find out what you're allergic to," Corn says. "Go to an allergist and get skin testing, where the allergist sees what you're allergic to by putting various proteins onto your skin."

The second step is avoidance. If you have seasonal allergies, you may need to limit your time outside during the peak pollen hours.

For itchy eyes, there are antihistamine eye drops; for postnasal drip or a stuffy nose, there are nasal sprays, which insert a topical steroid into your nose that decreases inflammation in the nose and throat.

Two types of medication are available for systemic allergies. Antihistamines like Benadryl, Claritin and Zyrtec are available over the counter. The newest drug in this family is Xyzal, a pill you take once a day to treat both outdoor and indoor symptoms. The second type of medication is a leukotriene antagonist, which staves off inflammation and is also used to fight asthma. This type includes the drug Singulair, a Merck product that requires a prescription.

If you can't manage your symptoms with medication, then you may need allergy shots, also called immunotherapy. For the first four to six months, you would visit your allergist every week to get a shot; then, you can scale back to once a month for the next two years. "This whole process takes about three years," says Corn. But if you stick to the regimen, you might not have to take any more allergy medicine afterward. Corn notes that "85% of people derive benefit from immunotherapy."

#### Research breakthroughs:

Right now, researchers are working to target the different molecules that lead to allergic reactions so they can find ways to counter them. The research is promising, but Corn says, "This is in the labs still" - so it will be some time before findings become available to allergy sufferers.

One advance that is already available in Europe is "sublingual immunotherapy," which involves holding a substance that includes modified allergens under your tongue. "It's an alternative to getting shots," Corn says, but it's still not widely available in U.S.

#### Questions for your doctor:

The first question to ask is: "Can I get skin-tested?"

"Everyone should know what they're allergic to," says Corn, "In fact, 90% of those people who are symptomatic discover they have allergies once they are tested."

How about an allergy that only shows up sometimes?



For mild allergies, Corn suggests taking an over-the-counter antihistamine when symptoms arise or before you know you're going to a trigger site. For persistent attacks, she says prescription-strength antihistamines and nasal sprays may work.

What you can do:

- Minimize your exposure. If you're seasonally allergic, stay away from pollen. Keep windows closed as much as possible. Remove the clothing you wear outside when you come in the door; take a shower when you come inside.
- Keep dust out of your bedroom. Carpets, curtains, books and stuffed animals are notorious dust collectors, so keep them out of your bedroom.
- Keep dust out of your bed. Cover your mattress and pillow with dust-mite covers. "This prevents dust from seeping out of your pillow and mattress," says Corn.
- Get informed. The American Academy of Allergy, Asthma & Immunology Web site ([www.aaaai.org](http://www.aaaai.org)) is a good research tool. Its "find an allergist" search engine is very user-friendly.

By the numbers:

- Allergies affect more than 50 million Americans
- Allergies are the 5th most common chronic disease in the U.S.; and the 3rd most common in children
- A recent survey found that 54.6% of Americans test positive to at least one allergy

*\* statistics from the American Academy of Allergy, Asthma & Immunology*

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### **Vail Sun Online (Vail, AZ)**

#### **April flowers bring spring pollen, triggering allergies**

**April 1, 2008**

**By Adam Bernal**

The arrival of spring has brought pollen and other particles in the air, and Vail residents are looking for relief from seasonal allergies.

Dr. Troy Tompkins, member of the Carondelet Medical Group in Rita Ranch, said this is the time of the year when dust and blooming plants can cause problems for allergy sufferers. Nearly anything in bloom can cause an allergy, he said.

Depending on the allergy symptoms, Tompkins said many patients prefer to use different over-the-counter medications. Patients with nose and sinus problems often use nasal sprays for relief, or if they have itchy eyes and other symptoms, antihistamines such as Claritin and Zyrtec are effective, he said.

With so many allergens in the air this time of year, Tompkins said it is difficult to avoid having some sort of reaction. Wearing a mask while doing yard work and being careful to avoid direct contact with certain plants in case of a skin allergy are some simple ways to avoid problems, he said.

Tompkins said that spring and fall are the worst times of year for people with allergies. Summer is also bad for allergies, but the extra moisture from monsoon rains helps make it less severe, he said.

There is also the option of desensitization shots to help build temporary tolerance for a specific allergy, said Tompkins. Since it requires receiving multiple injections twice a week for almost a year, he stressed this procedure is reserved for severe cases.

If over-the-counter medications are not effective in managing allergy symptoms, Tompkins urged seeing a doctor. If patients have symptoms such as a persistent cough, it may be a sign of asthma or another type of condition, he said.

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**Hattiesburg American Online (Hattiesburg, Mississippi)**  
**Doctors share ways to make your springtime less miserable**  
**March 31, 2008**  
**By ED KEMP**

It's a cruel joke for many Mississippi residents. Spring - the season in which the natural world comes alive with budding red maples, blooming azaleas and the high-pitched singing of cedar waxwings - leaves them feeling dead on their feet. That's because many are battling runny noses, itchy and watery eyes, stuffy heads, headaches and other telltale symptoms of pollen allergies, commonly known as hay fever.

Hay fever is not unique to this region of the country. According to the U.S. Department of Health and Human Services, 35 million Americans suffer from airborne allergies. But Mississippi's year-round temperate climate can be especially harsh for area residents - causing pollens to be released earlier and stay around longer than many other places.

The problem is definitely felt by doctors and sufferers, alike.

Dr. Bill Sullivan, an allergy specialist at the Asthma and Allergy Clinic of Hattiesburg, notes an increase in allergy patients. He said he sees, on average, 10 percent to 20 percent more patients in spring than any other time of year.

Last year, Mary Rosado of Hattiesburg said she was well aware of spring's arrival.

"It's raining pollen, so I try to avoid it as much as I can, but I keep maintenance medications available," Rosado said.

#### Cause and effect

Allergies are not limited to hay fever, as anyone who has developed a rash after eating peanuts or brushing against poison ivy will tell you. Hay fever can be caused by a variety of airborne particles including pet dander, dust particles and mold spores.

Sullivan said allergies are the body's immune system reacting to these allergens, entering our body. In the process of antibodies attacking the allergens, certain cells release the chemical histamine. In turn, histamine triggers the allergic reaction we have to the allergen, whether it is running nose, swelling, throat tightening, etc.

Sullivan said his first rule of allergy treatment is to avoid what you are allergic to - though it may be nearly impossible to totally avoid grass and tree pollen.

"I try to get people focused on doing their normal activities," he said.

Because freshly-cut grass is a heavy source of pollen, Sullivan advises people with allergies to wear a mask when they mow their lawn. He said he doesn't recommend restricting children from doing normal activities or closing windows to prevent pollen from entering.

"The problem with sealing your house is that it prevents proper ventilation," he said explaining this traps allergens for people with indoor allergies.

#### Treatment

Stephanie Kile, pharmacy manager of Walgreens in Richland, said antihistamines in combination with nasal decongestants are the most common allergy treatment.

While this treatment can be effective for some, there still are some risks. Nasal decongestants can be tricky, Sullivan said. They don't treat the illness, so much as provide symptom relief, and users can become dependent on them.

"They certainly have a rebound effect," said Sullivan who added discontinuing a decongestant can cause an even more severe return of previous symptoms.

To prevent the symptoms from ever starting, Kile recommends the over-the-counter allergy preventive medicine, Nasalcrom, which doesn't have the side effects that decongestants have. It's no good for people suffering allergies currently, she said, but can be quite effective when used before people start having spring allergy symptoms.

"It's a miracle," she said.

Both Kile and Sullivan also recommend over-the-counter antihistamines such as Claritin and Zyrtec. Kile said sleepiness can be a side effect of Zyrtec.

Sullivan also said prescription intranasal steroid sprays have, in comparison to over-the-counter antihistamines, "the most bang for the buck." Examples include Flonase, Nasonex and Veramyst.

For sufferers like Rosado, OTC medications aren't enough and more intense treatment may be needed.

"They want to retest to make sure they are treating me right because your allergies change as you age," said Rosado, whose doctor recommends that she be retested every five years.

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### ***The News & Observer***

**Pollen season is upon us -- and our cars**

**March 31, 2008**

**By Marlon A. Walker**

RALEIGH--Triangle residents are thankful for any rain that falls as North Carolina trudges through a debilitating drought. Even more so as pollen begins its annual tradition of covering cars and decks -- and causing headaches for allergy sufferers.

Between mid-March and mid-April, many trees in North Carolina release pollen as a part of their reproductive process. Vehicles, porches and decks and other outside equipment are the biggest targets for the airborne particles.

Sunday's rain -- about two-tenths of an inch fell at Raleigh-Durham International Airport -- helped wash pollen particles from the atmosphere, said Ron Humble, a meteorologist at the National Weather Service in Raleigh.

But, he said, driving yellow cars and taking allergy pills could still be the norm for many people over the next few weeks.

"There's a reasonable possibility for below-normal precipitation," he said. "April is one of the driest months on average."

### **MELLOW YELLOW**

The best defense against pollen on your automobile might be to learn how to live with it for a while. Frequent washing wears at the paint, and pollen has a tendency to reaccumulate quickly during peak times.

### **ANOTHER CHANCE FOR RELIEF**

A light rain is expected Tuesday night. More significant rainfall is expected Friday night, lasting into Saturday morning.

#### RELIEVE THE SNEEZE

Pharmacists suggest Claritin and Zyrtec as the best over-the-counter medications in the battle against seasonal allergies. If those don't work, doctors can prescribe nasal sprays.

#### KEEP HOPE FOR RAIN ALIVE

Last year, April's total rainfall was 3.88 inches, far above the monthly average of 2.8 inches.

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**WITNTV.com (Washington, NC)**  
**Pollen Makes Life Miserable For Some**  
**March 28, 2008**  
**By Dave Jordan**

The warm weather Friday had many heading outdoors, but others trying to avoid it. It's all because of the pollen, which affects about 35 million Americans.

Conditions were breezy and just right for bee pollen from pine trees to cover several cars. But studies say it's the pollen you can't see that causes allergic reactions. This form comes from grasses which pollinate in late spring or summer.

Many prescription drugs are used to combat these allergic reactions like hay fever and itchy watery eyes.

The drug Zyrtec, commonly used to combat allergies, is now being sold over the counter. The price of the drug dropped from about \$90.00 to \$12.00.

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**News14.com (Raleigh, NC)**  
**Two local cities ranked high for pollen**  
**March 28, 2008**  
**By Gavin MacRoberts**

FAYETTEVILLE -- April showers might have brought May flowers 20 years ago, but scientists say global warming is to blame for spring flowers blooming in March.

An early spring is why the allergy season is starting a month earlier. Raleigh and Greensboro were recently listed by Pollen.com as being one of the five worst cities in the U.S. for pollen.

Allergy sufferers say they have to stock up on their allergy medications earlier every year. Kimi West and her husband run a lawn and garden business. She says the pollen has gotten so bad this year she now gets allergy shots.

"Actually the strength had to go up on [my shots] because the pollen is coming sooner and sooner," she said.

Barbara Kacin can tell that pollen is filling the air just by listening to her husband. "Well, my husband sneezes a lot when he does yard work, so I have to assume there is a lot of pollen out there."

An early spring is why the allergy season is starting a month earlier. John Calhoun is a pharmacist for Cape Fear Discount Drugs. He is already seeing an increase in antihistamine sales.

"We just barely got through the cough, cold, and the flu season and the allergy season is upon us already," he said.

Often times it is not the pollen you can see, but the pollen you can't that causes the problems.

"If you really need a more potent antihistamine, you can go to Benadryl which is more sedating but is much more potent than the Claritin or the Zyrtec," said Calhoun.

Thirty scientists told the Associated Press that global warming is to blame for the early spring. One study found red maples in Washington, D.C. are now blooming 19 days earlier than in 1970.

West says an early spring has more than an effect on trees. Animals are forced to adapt to a changing environment, "There is no seasons any more. If you notice, we did not have that hard of a winter. Therefore, the bugs and the snakes are unbelievable. I think it is because of global warming, I really do."

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***The Press Democrat (CA)***

**Allergens in bloom around North Coast**

**POLLEN: Yearly rite of sneezing may peak in 8 weeks**

**March 27, 2008**

**By ROBERT DIGITALE**

Jane Grenawalt was enjoying a sunny walk around Santa Rosa's Spring Lake when she looked up at a yellow-blossomed acacia tree standing near the water.

"That's what's making my eyes water," said Grenawalt, a Santa Rosa resident who was strolling Wednesday morning with her sister, Cynthia Moffatt of Vancouver, British Columbia.

The North Coast once more is abloom in spring, and allergy sufferers are trying to admire the beauty even as they reach for their hankies.

Pollen season has begun, but the peak remains about eight weeks away, closer to Memorial Day.

No one knows how bad this year will be, but experts suggest the suffering is as certain as the sunrise.

"This is a very difficult area for people who have pollen allergies," said Dr. Michael Martin, a Santa Rosa allergist.

Those who sneeze and sniffle say they try various remedies to ease their discomfort.

Grenawalt, who loves to garden and walk the lake path, said consuming locally produced honey has helped reduce her symptoms in past years.

"That's the natural way to go," she said.

Another Spring Lake hiker, who goes by one name, Shenina, said her relatively mild springtime symptoms have lessened in recent years after giving up meat, eggs and dairy products for Lent.

Shenina, a Santa Rosa resident, and her daughter Sophia Onyemaechi, 12, were circling the lake with Barbara Owens. Owens, also of Santa Rosa, said she is taking over-the-counter medicine a few times each week. Nonetheless, at times the star jasmine planted in her yard "drives me crazy."

The most severely afflicted can get allergy shots to cope with the pollen. And someday those sufferers may be able to take a daily dose of drops under the tongue, known as sublingual immunotherapy, which is now available in Europe but not in the United States, Martin said.

For now, relief also can come in the form of prescription nasal sprays that can prevent many of the worst symptoms.

"Start it now before all that inflammation is built up," Martin said of the treatment.

Laura Berke, a family nurse practitioner in Kaiser Permanente's allergy department in Santa Rosa, said those who prefer to treat themselves at home can benefit from two over-the-counter products that once required prescriptions: Zaditor, an eye drop that addresses itchy eyes, and Zyrtec, an antihistamine for the nose, chest and eyes.

Sufferers also can use nasal rinses and, for those working in the great outdoors, pollen masks, she said.

Kaiser Permanente no longer takes its spring and summer pollen counts for Santa Rosa. Instead, it recommends that members look to [www.pollen.com](http://www.pollen.com).

Martin said pollen counts remain available for a few Northern California communities at the American Academy of Allergy Asthma and Immunology's Web site: [www.aaaai.org/nab](http://www.aaaai.org/nab).

What sufferers and health care workers acknowledge is that pollen is a fact of life in this fertile region.

"We are really blessed with just a great climate here," Berke said. "And the plants love it."

Spring Lake hikers Mary and Frank Outcalt said the hay fever and related allergies they suffer from here ended while they lived for two years in Vancouver, Wash. Nonetheless, they eventually returned to Santa Rosa and consider the occasional discomfort a small price to pay to live in a temperate and picturesque location.

"We lasted two winters, and then we were back down here," Frank Outcalt said.

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**WHEC.com (NBC, Rochester, NY)**  
**Generics now available for Zyrtec and Prilosec**  
**March 25, 2008**

If you suffer from seasonal allergies, you can now get Zyrtec cheaper. The drug is now available in a store brand generic for 25% less. That represents a 4 to 5 dollar savings when you buy the Wegmans or CVS version of Zyrtec.

Heartburn sufferers are also being offered a store brand generic for Prilosec. Excellus Blue Cross Blue Shield says this adds up to tens of millions of dollars in savings, when you consider the prescriptions cost \$80 to \$160 dollars a month.

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**KDKA.com (CBS, Pittsburgh, PA)**  
**Doctor: OTC Meds Effective In Treating Allergies**  
**March 25, 2008**

PITTSBURGH (KDKA) — Allergy season is here but this year children might be able to get relief from some new over-the-counter medications.

"People who have experiences it in previous seasons know to get ready," Allergist for Children's Hospital David Nash said. "We are in the pollen season, most people start to experience symptoms by the end of March."

This time of year, telling allergies apart from colds can be challenging.

"Allergies tend to respond pretty quickly to meds, certainly antihistamines. So if you take an antihistamine and you're better, in even a couple of hours, suggests allergies more than a cold virus."

These days to fight allergies, people have more over-the-counter choices than ever.

The latest addition is the antihistamine Zyrtec and it's generic.

"It went over the counter in January, it's once a day, it's similar to a medicine that has been over-the-counter for a few years called Claritin," Nash said. "To some extent, we've doubled our arsenal of once a day medicines."

Both used to be by prescription only. They don't make you sleepy, work within an hour, and can be taken as needed.

Decongestants and nasal saline spray are other no-prescription options, but Dr. Nash's favorite is the antihistamines.

"I think they're the first line. I think the majority of patients do well on those," Nash said. "If you don't do well on those, my second choice is usually a prescription nasal steroid."

And will this year be the worst year ever?

"Every year, the allergist says it's the worst year. Perhaps this will be a bad year. That's the theory because of the mild winter," Nash said.

With mild winters, the pollen count is slightly higher.

Pollen in the air can be measure at the beginning of March, typically tree pollen. This will continue to be active through April and through most of May.

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***San Pedro Valley News-Sun (Benson, AZ)***

**Allergy season under way: Spring flowers: Although colorful, beware of an abundance of pollen in the atmosphere, warns Benson physician Dr. Andrew Mayberry**

**March 25, 2008**

**By Adam Bernal**

With the warmer months approaching, allergy season is under way as Benson residents deal with the nagging problems that come from pollen and other particles in the air.

Dr. Andrew Mayberry said that some of the most active pollens in the air this month include cottonwood, mulberry, cyprus and juniper. During April, he said that mulberry, creosote, acacia, palo verde, bermuda grass and olive trees would be active.

Typical allergy symptoms this time of year include itchy eyes, runny nose and a mild cough, said Mayberry. If people suffer from more than one type of allergy, he said there might be different symptoms for each specific allergy.

Mayberry said the most effective measure for these allergies is over-the-counter antihistamines, with Claritin and Zyrtec being particularly effective. If they don't work or if there is a fever or severe cough, he said it is necessary to see a doctor in case there are additional problems.

If you suffer from particularly frequent or severe allergies, Mayberry said you can see an allergy specialist for desensitization shots to build tolerance for the allergen. For those interested in knowing what allergens are in the air during specific months of the year, Mayberry recommended visiting the calendar on the University of Arizona's Health Sciences Center's Web site. The address is [allergy.peds.arizona.edu/southwest/calendars.html](http://allergy.peds.arizona.edu/southwest/calendars.html).

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**KDSK.com (St. Louis, MO)**  
**Spring Allergy Season Arrives**  
**March 24, 2008**

KSDK- Spring is finally here, and for many people, including many kids, that means spring allergy season.

Dr. Ken Haller is a pediatrician at Cardinal Glennon Children's Medical Center and an Associate Professor of Pediatrics at Saint Louis University School of Medicine. He explains how allergies can affect your children.

Would you say this is the worst time of year for allergies?

As the weather warms up, the trees are germinating, flowers are blooming, and all of that pollen is getting into the air. And with increased humidity, there's a lot more mold out there. Some people really react badly to all of that. Now our immune system is supposed to react against stuff its perceives as foreign, like pollen and mold, but what happens with allergy is that our body overreacts, producing too much mucus and fluid, making the membranes in the nose boggy and thick, and that can really cause a lot of problems for kids.

What are the signs and symptoms of allergies?

Pretty much sneezing, watery eyes, runny nose, and lots of congestion, often in response to certain situations like just going outside.

What are some ways to deal with allergies?

There are a number of things you can do for yourself and your kids; one is to avoid the allergens, so when we hear report of high pollens and mold counts, stay inside. Air conditioning is actually very good for filtering that stuff out of the air. You can also get rid of some of the allergens after you breathe them in. For example, if you get something on your skin that you know you're allergic to, you're going to wash it off, right? Same thing with your child's nose. If you know that she's allergic to stuff in the air, you can get a saline nasal solution, like Ocean Spray, spray it in and then have her blow or suction her nose to wash the bad stuff out before her body has a chance to react against the allergens. If things are really bad, talk to your doctor because there are medications that can help in more severe cases. Non-drowsy antihistamines like Claritin and Zyrtec are now available over the counter, but I would still suggest talking to your doctor before using them. Anti-inflammatory nasal sprays like Flonase and Nasacort can also be helpful for adults and kids, but you need a prescription for those.

Can allergies also lead to other ailments?

Yes, they can. The nose does lots of important things including draining fluid and mucus from our eyes, our sinuses and our middle ear. When the nose gets clogged up, the stuff that is supposed to be drained out can build up, leading to sinus infections or ear infections. Keeping those passages clear as much as possible by avoiding allergens, washing away allergens with a saline spray or drops, and using medications if your doctor recommends them, can be very helpful in avoiding infections that result from allergies.

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# **EXHIBIT 69**

**Zyrtec Press Clippings**  
**January – March 2008**  
**Part 3**

**KESQ.com (Palm Desert, CA)**  
**Winter Rains Pave Way for Intense Allergy Season**  
**March 24, 2008**  
**By Arnell Dimaandal**

The blooming flowers this spring may add a little color and beauty to the desert landscape, but its abundance is making things miserable for allergy sufferers.

Medical experts say this past winter's rains have caused more plants and flowers to bloom this season. That means there's a lot more pollen and dust in the air.

With the intense bloom in place, remedies are being brought to the forefront with allergy sufferers, which account for 20 percent of the population in the valley.

Allergy medicines like anti-histamines are pretty popular with pharmacy customers.

"I have been spraying my allergies with saline solution and that seems to just clear everything up," long-time allergy sufferer Lillian Scherer said. "My allergies were so bad before, I could not really function. I used to sneeze about 50 times before breakfast."

Experts say seniors and those who are usually exposed outdoors are more prone to suffer from the seasonal discomfort.

Aside from over-the-counter medicines, there's also a drug-free remedy called "neti-pot" that does the trick.

"All you have to do is take these little packets of saline and administer into the nasal passages," compounding pharmacist Steve Pomerance explains.

Despite being in the thick of allergy season, experts say the discomfort should be temporary.

Most allergy sufferers usually try to treat themselves, but doctors say an allergy test is the best way to determine if you are suffering from an allergy or an infection.

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**St. Louis Post-Dispatch**  
**Ah-chooooo! It's allergy season again**  
**March 24, 2008**

Spring is in the air and so is all the allergy-causing gunk that comes with the season.

Still, says Dr. Mark Dykewicz, chief of allergy and clinical immunology at St. Louis University School of Medicine, you can take steps to lessen your discomfort.

This is a big deal in the spring because inhaling microscopic mold and pollen from trees, grass and weeds sets off an exaggerated immune system response in people with allergies.

The result is sneezing, itching, coughing and even asthma attacks.

**FIVE TIPS**

Dykewicz offered five tips that can reduce the misery of allergies.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
BEFORE THE TRADEMARK TRIAL AND APPEAL BOARD

McNeil-PPC, Inc.,

Opposer,

Opp. No. 91184978

v.

Walgreen Co.,

Applicant.

Rohinish Hooda; Opposer Test. Dep. Ex. 69

**McNeil 000547**

- Use over-the-counter antihistamines to reduce sneezing, runny nose, itchy eyes and, occasionally, the scratchy throat that comes with it. Older-generation antihistamines such as Benadryl can cause sleepiness and aren't safe to take when you're driving. Dykewicz recommends the newer over-the-counter drugs such as Claritin and Zyrtec.

- Keep your home's doors and windows closed. Nice weather is a temptation to open doors and windows. Rethink that, Dykewicz says. Opening your home to the outdoors brings pollen and mold into your home in greater concentrations. Instead, use your air conditioner.

- Limit outdoor activity, particularly in the morning. In general, pollen counts are highest in the morning, usually from about 5 a.m. to 10 a.m. Avoid being outdoors - especially to exercise - when pollen counts are high, or on windy days when pollen and mold are being blown about.

- Keep car windows up to keep allergens out.

- When you come in from outside, shower and change clothes. Allergens can accumulate in your hair and on your clothing.

Meanwhile, "When you've done all you can on your own and you can't find relief, then it's time to see your doctor," Dykewicz says.

An allergist can determine what specifically plagues you then offer an array of choices. Choices include flu shots, steroidal nasal sprays and prescription drugs that include brand names and generics.

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**Andalusia Star News Online (Alabama)**  
**Allergist offers tips for pollen-related symptoms**  
**March 20, 2008**  
**By Andrew Garner**

The yellow stuff is back.

Andalusia, Covington County and the entire state of Alabama has been suffering through the side effects of the yellow blanket of pollen that comes at the dawn of spring.

The culprits behind the manifestations of pollen are trees, weeds and grass, especially oak, pine, cedar and ash trees.

Dr. Angelo Agro, an Andalusia allergist and specialist in ear, nose and throat, said the best defense is a good offense when dealing with allergies caused by pollen.

"The very young should stay indoors in a controlled environment as much as possible with some sort of air cleaning system," Agro said. "Being outdoors and breathing in the pollen directly is worse than being indoors."

Agro said that in case home clean air system do not do the trick, over the counter medications might help.

"A lot of the over the counter medications particularly Claritin and Zyrtec are available and are certainly worth a try," he said. "If over the counter medications are not sufficient, there is a whole range of very simple to complicated medications available."

Agro said that the visible pollen on cars and sidewalks is not the one that people should worry about.

"Yellow pollen is fairly large and visible and that's not the one that gets the furthest down into the respiratory track," he said. "The yellow stuff is not the bad guy, it's the stuff that travels with the bad guy. The larger pollen you can see can get filtered by the nose and respiratory track."

One other tip Agro recommended for residents is to keep their homes as "sealed" as possible.

"Try to keep your house as sealed as possible and not have windows or doors open," he said. "More than anything else, the pollen collects in the heating and air conditioning ducts. Keep what's outside out and clean air in. The main thing to do is to change your filters and pleated ones are generally better. The filters come with a rating. Buy the highest rating you can afford."

Agro added that allergies have been more prevalent all over the globe for quite some time.

"Allergies in general have been increasing all over the United States and the world," he said. "People will tend to be reacting to it more in their environment than they have in the past decade. The more you keep things clean and kill germs, the more you keep those things away from your immune system and then it will start fighting harmless things like food allergies."

To get more information about pollen counts and levels of pollen in the area, visit [www.pollen.com](http://www.pollen.com) or call the Alabama Allergic Disease and Asthma Center in Birmingham at 1-205-871-9661.

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**Dow Jones**  
**UCB Neupro Recall May Hit 08 Sales, Client Confidence**  
**March 20, 2008**  
**By Alessandro Torello**

BRUSSELS (Dow Jones)--Belgium's biggest pharmaceutical company UCB SA (UCB.BT) Thursday said it was recalling its Parkinson's drug Neupro in the United States and some batches from Europe, prompting a review of its 2008 forecast.

The drug maker's recall resulted from some patches not working properly, due to a problem in the U.S. manufacturing process.

As a result, "UCB's 2008 financial outlook is under review and will be updated as soon as possible," the Brussels-based company said.

Analysts said the move could hit UCB's earnings this year and also hurt customer confidence.

Investors reacted by selling UCB stock. Its shares were down 10% at EUR23.78 as of 1031 GMT in a negative overall market.

Deutsche Bank in a note said "this disruption comes at a crucial time in the launch phase of this important franchise as UCB transitions from earnings dependence on Zyrtec and Keppra to newer products."

"It is possible the franchise could be significantly impaired and that approval and launch of the important Restless Legs Syndrome indication could be significantly delayed until regulators are satisfied that all quality issues are resolved," Deutsche Bank said.

-By Alessandro Torello, Dow Jones Newswires; +32 2 741 14 88; [alessandro.torello@dowjones.com](mailto:alessandro.torello@dowjones.com) [ 20-03-08 1115GMT ]

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***The Atlanta Journal - Constitution***  
**Breezin' through spring: New glycerin-based serum therapy could displace shots for treating severe allergies**  
**March 19, 2008**  
**By VIKKI CONWELL**

Severe allergy sufferers will breathe a little easier as a new treatment option brings relief closer to home.

Instead of going to the doctor's office to receive trigger-specific injections called immunotherapy, a patient takes home vials containing a glycerin-based serum of allergens and places several drops under his or her tongue daily for three to five years.

Sublingual immunotherapy has been used in Europe for about 15 years, but the Food and Drug Administration has not yet approved any SLIT drugs for use for seasonal allergies, according to an FDA representative. The agency also cannot comment on the existence of a pending application.

However, physicians are legally allowed to use their own discretion in therapy. And several in Atlanta, including Alpen Patel, an allergy specialist at Emory Crawford Long Hospital, are already administering the treatment. Patel expects FDA approval soon, and in the next 10 to 15 years allergy shots could become obsolete.

"It will change the landscape of how we practice for the severely allergic," he said, estimating a monthly dosage, which is not yet covered by insurance, costs about \$100. "It will be like taking a daily vitamin."

Each spring, about 25 percent of Atlantans suffer from nasal congestion, sneezing, itchy/watery eyes and runny noses resulting from seasonal allergies.

For some, the sneezing began in February as unseasonably warm weather produced high pollen counts that sparked a flurry of symptoms.

"People were coming in complaining of typical seasonal allergy symptoms," said Stanley Fineman of the Atlanta Asthma and Allergy Clinic, which treated an unusually high number of patients last month. The rebounding of temperatures may make sufferers even more sensitive during peak pollen season between now and May, he warned.

Atlanta ranked 10th in 2007 among cities where the challenge is greatest for living with spring allergies, according to the Asthma and Allergy Foundation of America, a nonprofit that ranks "allergy capitals." The rankings are based on pollen scores, number of allergy specialists per patient and number of medications used per patient. New figures are expected soon.

The abundance of trees and green space plus a warm climate --- exacerbated by an increasing amount of smog and soot emitted from cars --- creates an incubator for airborne grass/tree/weed pollens, mold spores, dust and other allergens.

The primary culprits for springtime allergies are pine, oak, sweet gum, elm and birch. (Trees such as dogwoods and rosebuds often produce visible pollens that dust cars, driveways and windowsills but seldom cause allergy symptoms.) Pollen counts as low as 50 can trigger symptoms in some people.

Minimize exposure by closing windows in your car and home, covering your face and restricting outside activities.

For those with persistent symptoms, sorting through myriad decongestants, antihistamines, nasal sprays, eyedrops and creams aimed at tackling them can be a challenge.

If those symptoms are severe, allergy shots can help build resistance and possibly lead to long-term cures even after the patient stops taking the shots, said Patel.

#### GENERAL TIPS

You can't live your life in a bubble until cooler weather returns, so here are some basic precautions you can take to minimize exposure:

Keep windows closed at night to prevent pollens or mold from drifting into your home. Instead, if needed, use air conditioning, which cleans, cools and dries the air.

Install high-efficiency filters in your cooling and heating system.

Minimize outdoor activity between 5 and 10 a.m. when pollen is usually emitted.

Try to stay indoors when the pollen count or humidity is high and on windy days when dust and pollen are blowing about.

Keep your car windows closed when traveling.

Take a shower after spending time outside because pollen can collect on hair and skin.

Remove rugs, carpet and upholstered furniture. If not, dust and vacuum frequently.

Don't hang sheets or clothing outside to dry where pollen can collect on them.

Avoid cigarette smoke.

Source: American Academy of Allergy, Asthma & Immunology

Clip 'n' keep!

#### TREATING THE SYMPTOMS

Although the symptoms of seasonal allergies feel disabling, they should not kill you, says Alpen Patel, an allergy specialist at Emory Crawford Long Hospital. He offers some of the preferred treatments for common symptoms. You should consult your doctor if you're taking other medications and if symptoms persist.

IF YOU HAVE: Runny nose

BEST BET (EXAMPLES): Nasal saline (Ocean nasal spray, Neti Pot), nasal steroid spray (prescription only, Flonaz, Veramyst) BE CAREFUL OF: Headaches, nasal irritation and dryness

IF YOU HAVE: Congestion

BEST BET (EXAMPLES): Nasal saline (NeilMed, Neti Pot), nasal steroid spray (prescription only, Flonaz, Veramyst) BE CAREFUL OF: Headaches, nasal irritation and dryness

IF YOU HAVE: Watery/itchy eyes

BEST BET (EXAMPLES): Topical antihistamine eyedrops (prescription, Patanol), oral antihistamines (Claritin, Benadryl) BE CAREFUL OF: Drowsiness, dry mouth, blurry vision

IF YOU HAVE: Sneezing

BEST BET (EXAMPLES): Nasal saline (NeilMed, Neti Pot), nasal steroid spray BE CAREFUL OF: Headaches, nasal irritation and dryness

IF YOU HAVE: Sore throat

BEST BET (EXAMPLES): Oral antihistamine with decongestant (Claritin D, Zyrtec D) BE CAREFUL OF: Drowsiness, dry mouth

IF YOU HAVE: Coughing

BEST BET (EXAMPLES): Oral antihistamine with decongestant (Claritin D, Zyrtec D) BE CAREFUL OF: Drowsiness, dry mouth

IF YOU HAVE: Wheezing

BEST BET (EXAMPLES): Beta 2 agnostic inhaler (Albuterol), oral steroid inhaler (prescription) BE CAREFUL OF: Heart palpitations, tremors, sore throat, oral thrush

IF YOU HAVE: Headache, pain, pressure

BEST BET (EXAMPLES): Nasal saline (Ocean nasal spray, Neti Pot), topical or oral decongestant (Afrin, Sudafed) BE CAREFUL OF: Drowsiness, poor/bitter taste

IF YOU HAVE: Multiple symptoms

BEST BET (EXAMPLES): Nasal saline (Ocean nasal spray, Neti Pot), nasal steroid spray (prescription), oral antihistamine plus decongestant, if needed (Claritin D, Zyrtec D) BE CAREFUL OF: Headaches, nasal bleeding, drowsiness, dry mouth, blurry vision

Source: Alpen Patel

#### LIKE PARENT, LIKE CHILD

The symptoms that annoy parents can also plague their children as 40 percent of youngsters experience seasonal allergies.

Children are genetically predisposed to allergies, so if one or more parents suffer, the child may suffer, too. Environmental factors and underdeveloped immune systems also contribute to the higher prevalence in children, although an immunological cause has not yet been revealed, said Robert Harrison, a pediatrician with Children's Healthcare of Atlanta.

Allergies in children usually occur by age 3 or 4 but can develop as early as age 2. In addition to common symptoms such as nasal congestion, runny nose and watery eyes, parents should also be aware of constant eye and nose rubbing and dark circles under the eyes.

Minimize the child's exposure to outside allergens, and control your home environment by replacing rugs and carpet with hardwood flooring and using high-efficiency air filters.

If symptoms persist, consult a doctor because over-the-counter medications are not advised for children.

"We recommend against self-medication," said Harrison, noting that commonly used medicines such as Benadryl make children very sleepy. "If you think your child may be allergic, take them to the doctor and get an appropriate treatment."

#### ALTERNATIVE REMEDIES

Alternative therapy is medical treatment for which there is no conclusive, supporting scientific evidence. You simply must be careful in what you choose and how you use it.

**Acupuncture.** A technique that involves inserting needles into key points of the body. May help people with allergies feel more relaxed or calm breathing.

**Biofeedback.** A technique that helps people control involuntary physical responses. Results are mixed, with children and teenagers showing the greatest benefit.



Chiropractic spinal manipulation. A technique that emphasizes manipulation of the spine in order to help the body heal itself.

Hypnosis. An artificially induced dream state that leaves the person open to suggestion, hypnosis might give people with allergies more self-discipline to follow good health practices.

Laser treatment. A technique that uses high-intensity light to shrink swollen tissue or unblock sinuses. Laser therapy may provide temporary relief, but it may also cause scarring or other long-term physical problems.

Massage, relaxation techniques, art/music therapy, yoga. Stress and anxiety may cause your airways to constrict more if you have asthma or allergies. Various techniques can help you relax, reduce anxiety or control your breathing, but there is no conclusive evidence that these techniques improve lung function.

Source: Asthma and Allergy Foundation of America

#### GENERAL TIPS

You can't live your life in a bubble until cooler weather returns, so here are some basic precautions you can take to minimize exposure:

Keep windows closed at night to prevent pollens or mold from drifting into your home. Instead, if needed, use air conditioning, which cleans, cools and dries the air.

Install high-efficiency filters in your cooling and heating system.

Minimize outdoor activity between 5 and 10 a.m. when pollen is usually emitted.

Try to stay indoors when the pollen count or humidity is high and on windy days when dust and pollen are blowing about.

Keep your car windows closed when traveling.

Take a shower after spending time outside because pollen can collect on hair and skin.

Remove rugs, carpet and upholstered furniture. If not, dust and vacuum frequently.

Don't hang sheets or clothing outside to dry where pollen can collect on them.

Avoid cigarette smoke.

Source: American Academy of Allergy, Asthma & Immunology

For Reprints in the Original Format: <http://www.ajc.com/info/content/services/info/reprint2.html>

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**achooallergy.com**

**Molly Shannon: Allergies Are No Laughing Matter**

**March 16, 2008**

Actress and allergy sufferer Molly Shannon has teamed up with the Asthma and Allergy Foundation of America (AAFA) and the makers of Zyrtec to launch the Allergies Are No Laughing Matter campaign.

Molly and the AAFA will teach allergy sufferers about different treatment options and how to avoid allergy triggers. The site contains an online quiz to help people learn if they may have allergies.

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In the youtube video below, Molly explains, "It's something I could really relate to - putting the word out about how to manage your allergies better."

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**Standard Democrat Online (Missouri)**  
**Pharmacists warn against mixing prescription meds**  
**March 11, 2008**  
**By Leonna Heuring**

SIKESTON — It may sound like a simple task, but reading medicine bottle labels and instructions carefully isn't practiced by everyone.

"Some people get casual with medications, and medications are dangerous," said Jim Barnes, director of pharmacy at Missouri Delta Medical Center in Sikeston. "They're good and can cure and correct a lot of medical conditions but when taken incorrectly or inappropriately, they can certainly cause serious harm, allergic reactions or even death."

In January, 28-year-old actor Heath Ledger was found dead in his apartment. Ledger's death was ruled accidental, resulting from the abuse of prescription medications prescribed commonly for treatment and alleviation of insomnia, anxiety, depression, pain, cold symptoms and related ailments.

"People need to make sure they understand what they're taking, what they're taking it for and how it should be taken," said Ernie Moxey, pharmacist at The Medicine Shoppe in Sikeston. "As far as whether it shouldn't be taken with other prescription medications or over-the-counter medicines, that should be brought out during counseling with the pharmacist when the medicine is presented."

Nearly 50 percent of prescriptions in the United States are taken incorrectly, according to the National Center for Policy Analysis' 2006 Prescription Not Followed Survey. This costs an estimated \$177 billion annually in health care costs, the National Council on Patient Information and Education said.

Ignoring dosage instructions, taking an over-the-counter medication instead of the prescription or not communicating openly with the physician or pharmacist are among the causes of the most common medication mistakes, according to a Medicap Pharmacy news release.

Even though pharmacists explain instructions for correctly taking their prescribed medicines, some consumers still don't take them like they should, said Ronnie Hamra, a pharmacist at Medicap Pharmacy in Sikeston.

It should be common sense, Hamra said, who added that some take for granted medications which are pretty potent and can have bad side effects. Generally, an information sheet accompanies prescriptions and covers some of the basics about the medicine — but not all the information about it, Moxey said.

In order to be safe, always follow directions on a prescription label when taking medications, Barnes suggested.

A person should pay attention to brightly colored labels on prescription containers that provide additional information on taking the medicine safely. Examples of those labels include: "May cause drowsiness," "Alcohol may intensify this effect," "Use care when operating a car or dangerous machinery."

"They're placed on there to help the patient take the medicine safely. Not everybody reads labels and that causes people to take medications incorrectly," Barnes said.

Consumers should also be careful with over-the-counter medicines, the pharmacists warned.

"Over-the-counter medications are typically regarded as mild or weak and taken for granted, and people tend to over do it and not read the instructions thoroughly. They feel like maybe it doesn't apply to them and take more than the dose that's safely recommended," Moxey said.

Over the last 15 to 20 years, the Food and Drug Administration have released a number of considerably more potent over-the-counter medications, and now more than ever, it's more important to read instructions and follow them closely, Moxey said.

"We've seen evidence of that in the number of overdoses with prescriptions — and nonprescription medicines. And it's not just overdoses, but misuse can cause other negative effects," said Moxey, adding that was part of the problem with the recent recall of cough and cold medicines for children.

Claritin, Zyrtec, Motrin, Aleve and Prilosec are some of the more common over-the-counter medicines, Barnes noted.

"They're still medications and can cause serious side effects. Read the label carefully in order to not have side effects," Barnes said.

Too much Motrin and Aleve can lead to the development of stomach ulcers or bleeding. Consumers should adhere to the maximum dose of over-the-counter medicines and read the directions on the bottles.

Besides telling pharmacists of other prescription and over-the-counter medicines they're taking, consumers should let them know of any herbal supplements they're taking, too, Moxey said.

"You can also have drug activity with herbal supplements and they can interact with medicines," Moxey said.

Another tip is to check with a pharmacist or doctor about drinking alcohol while taking medication to be sure it's safe, Barnes said.

If someone needs to take a dose of medication when they're sleepy or have just awakened from a deep sleep, they should be sure to double check that they're about to take the correct medication, Barnes said.

"We have had situations occur where a patient accidentally grabs their husband or wife's bottle and end up taking the wrong medicine," Barnes said.

A person should take the entire prescription as ordered by the doctor unless they've developed side effects that prevent them from taking it, and then they should inform their doctor, Barnes suggested.

Don't mix medications either. Don't pour pills of one bottle into the other because it might be easy to forget which tablet treats what condition, Barnes said.

"Since a doctor prescribes medication to treat a particular medical condition and symptoms, you should not take another person's prescription medications," Barnes said.

Having all medications come through one source can help the pharmacist identify harmful interactions between multiple prescriptions, according to a Mediap Pharmacy news release. Replace expired medications; medications lose potency after the expiration date.

When getting a new prescription filled, ask the pharmacist about symptoms or side effects that usually occur with that medication, Barnes said. Keep medicines in a safe place and out of reach of children, he said.

Education and communication are key, Moxey said.

"If people understand why they're taking the medications, they'll be more apt to take it and take it the way they're supposed to. If they don't understand it, they're more likely to stop taking it too soon," Moxey said.

If they haven't asked their doctor about their concerns or don't feel comfortable, pharmacists are accessible for that purpose, Moxey said.

"No question is too stupid or embarrassing," Moxey said. "We've probably heard about all of it. That's why we're here, and we're here to address their questions in a professional manner and get an answer and resolution of their problems."

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**CBS5.com (San Francisco, CA)**  
**Free Service Helps Consumers Save On Prescriptions**  
**March 11, 2008**  
**By Jeanette Pavini**

Saving money on prescriptions can be easy when doctors prescribe generic drugs. It can be difficult when the drug does not have a generic equivalent. That's where Consumer Reports Best Buy Drug Guide is stepping up to the plate to help both patients and physicians.

Peter Mandell has experienced the money crunch when it comes to prescription drugs. Since suffering a disabling stroke, he runs the gauntlet to keep his drug costs down.

"You pretty much find a way to do it. And I've been at this for 5 or 6 years now," Mandell described. "I used to go to Walgreens and now I go to Costco and try to save money that way. You can get longer prescriptions too if that helps. I get it from Canada. It's a little bit cheaper in Canada,"

Even when he factors in Medicare and insurance, some months Mandell can wind up paying \$300 to \$400 for his medications.

Mandell's doctor works with him to find the cheapest medicines, but not all doctors invest this time with their patients. Some end up overspending on drugs.

Consumer Reports found that up to 85% of people on name brand statins could safely be taking much cheaper generics alternatives.

"Physicians are pushed to the wall in terms of their time and energy and I don't know many people who systematically generate lists of generic medicine so that they can preferentially give those. What Consumer Reports has done is done that job for the doctor," said Dr. Erica Goode.

Consumer Reports put hundreds of the most common medications side by side to see whether older, cheaper drugs could be effective substitutes for the newer, more expensive ones. In most cases, the answer was yes.

In Mandell's case, the drug he hasn't been able to replace with generics is Vytorin. A study by Consumer Reports found that taking the generic equivalent Symastatin instead of Vytorin could save Mandell \$50 to \$65 a month.

Other examples released by Consumer Reports include the allergy drug Claritin, which costs only \$13 compared to Zyrtec at \$101, saving patients \$88 per month.

The cholesterol lowering drug Lovastatin costs \$34, compared to Lipitor at \$98. The switch is \$66 cheaper.

The most savings are with Prilosec, an over the counter heartburn medication at just \$26. This is compared to \$210 for prescription Nexium, which saves patients a whopping \$184.

Remember that patients cannot self-prescribe these medicines. Dr Goode said most doctors will look at the options.

"I really appreciate lists because if they have come up with all of the stuff that they are taking and bringing their computer print out of everything they are taking then it makes my job way easier," added Dr. Goode.

Consumer Reports is making these drug lists free to CBS 5 viewers. If you're taking multiple drugs, bring the list of possible money savers to your doctor to discuss the options.

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***Drug Topics***

**New OTCs Just In Time for Allergy Season**

**What OTCs Do R.Ph.s. Recommend for Allergies?**

**March 10, 2008**

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# DRUG TOPICS

THE NEWSMAGAZINE FOR PHARMACISTS

## Self-Care

# New OTCs just in time for allergy season

Sandra Levy

Spring is almost here. That means that consumers will be combing the aisles in search of products that provide relief from the symptoms of allergies. Manufacturers are nipping at each other's heels to unleash new treatments.

Here's a look at some of the innovative products:

### Remedies galore

McNeil Consumer Healthcare is premiering Children's Benadryl Allergy Perfect Measure, a pre-measured amount of cherry-flavored Children's Benadryl liquid allergy medicine in portable, individually wrapped spoons. Each pre-filled spoon contains the histamine blocker diphenhydramine, the active ingredient that is intended to help relieve symptoms such as sneezing; runny nose; itchy, watery eyes; and itchy throat, caused by hay fever or other upper respiratory allergies and/or runny nose and sneezing due to the common cold. The product is available in a package of 10 pre-filled single-use spoons.

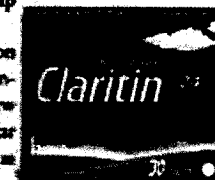


McNeil is also trotting out Tylenol Allergy Multi-Symptom Rapid Release Gels, with specially designed holes to release medicine fast. The item combines allergy medicine with the pain relief of Tylenol. The product is intended to relieve symptoms of hay fever or other upper respiratory allergies including headache, sinus congestion and pressure, nasal congestion as well as itching of the nose or throat.

McNeil is unveiling its new line of Zyrtec OTC items for adults and children. The adult line-up includes Zyrtec 10 mg for indoor and outdoor allergies and Zyrtec-D tablets. In August Zyrtec Hives Relief will be available. For children, the company is offering Zyrtec Chewable 5 mg and 10 mg (for ages six and up), Zyrtec Allergy Syrup (for ages two and up), and Zyrtec Hives Relief Syrup (for ages six and up).



Schering-Plough is getting in on the act by touting its Claritin non-drowsy allergy medication in a new promotion featuring NASCAR star Carl Edwards. Edwards will serve as



spokesperson for the Claritin "Clear to Drive" campaign. A sweepstakes planned for later this year will give five fans the opportunity to win a trip around the track with Edwards, or a Ford Mustang.



New Claritin ad campaign features NASCAR star Carl Edwards.


Iovate Health Sciences is unveiling AllergyMD Rapid-Tab<sup>®</sup> All-Season Allergy Relief Formula. The homeopathic tablet, which contains echinacea, is supposed to provide relief from allergy symptoms including sneezing; runny nose; itchy, watery eyes; hay fever; and nasal congestion. The firm claims it is non-drowsy.

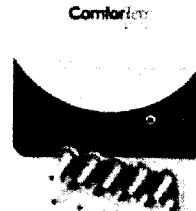
Botanical Laboratories is launching NastraBio Allergy Relief Non-Drowsy Tablets for the relief of runny nose; sneezing; itchy, watery eyes; hay fever; allergies; and upset stomach. The product contains echinacea angustifolia.

Airborne Seasonal Relief is a new effervescent tablet that is supposed to be dissolved in water. The product is supposed to promote normal histamine levels. The firm claims the formula is non-drowsy. Ingredients include Vitamin C and Vitamin B<sub>6</sub>. The item is available in citrus blend.

### Allergy tests

ImmuneTech is launching MyAllergyTest, a home test that requires a finger stick of blood, which is mailed to the Immune Tech lab for analysis. The kit tests for pollens such as Timothy grass, Bermuda grass, Mountain cedar (juniper), ragweed, mold, cat hair, foods (milk, egg white, and wheat), and dust mites.

HollisterStier Laboratories is unveiling ComforTen Multiple Skin Test System, a 10-test, self-loading surgical steel allergy testing device. The device features 10 surgical steel 1.2mm lancing tips, which the firm claims create minimal skin trauma for comfortable testing of allergies, including foods and tree pollens. 



## Self-Care

Featuring this month: Allergy relief

# What OTCs do R.Ph.s. recommend for allergies?

Sandra Levy

**S**pring is right around the corner. That means patients will be seeking advice about over-the-counter items for allergies.

The big news is pharmacists report that patients will need more counseling about Zyrtec now that it is available OTC.

This finding comes from an exclusive *Drug Topics* survey of a sampling of pharmacists in chain, independent, and other settings. To view the full survey results, go to [www.drugtopics.com](http://www.drugtopics.com) and click on Drug Topics Exclusive Survey.

Conducted by Advanstar Communications Research Services, the online survey was fielded in late January and closed in early February. It obtained a total of 244 usable replies.

### R.Ph.s give OTC Zyrtec the nod

Four out of 10 respondents to *Drug Topics'* 2007 Allergy Survey said they strongly approve of Zyrtec becoming an OTC product, 47% said they approve the move, 10% stated that they somewhat approve the switch, 1% shook their head in disapproval, and 1% asserted that they strongly disapprove of it.

When asked to indicate reasons behind their approval

ratings for Zyrtec OTC, one pharmacist said, "Because Zyrtec gives the patient another option besides Claritin for non-sedating antihistamine." Another respondent said, "Claritin is not strong enough for many people and Zyrtec has less drowsiness than Benadryl or Chlor-Trimeton."

Yet another R.Ph. offered this sentiment, "Claritin had such a strong response and has proven to be safe and effective over the counter. Zyrtec should have a similar side-effect profile as well."

When asked to rate the extent to which they agree that customers will need more counseling about Zyrtec OTC, 20% of respondents said they

strongly agree that customers will need more counseling about the product, 45% said they mostly agree, and 26% stated they somewhat agree with the statement. Only 8% disagreed and 1% strongly disagreed that patients will need more counseling about Zyrtec OTC.

When it comes to counseling patients on allergy medications, respondents said they counsel an average of 30 patients a week during allergy season. In terms of time spent on counseling, respondents averaged 3.2 minutes per session.

### Seeking words of wisdom


Who gets the dialogue going? Customers aren't bashful about initiating a dialogue with R.Ph.s. Some 81% of pharmacists reported that customers typically initiate the conversation. Pharmacists begin these interactions only 19% of the time.

Pharmacists who live in the Southwest appear to counsel most patients per week during allergy season, while those in the Southeast counseled the least number of patients.

Do patients hang on R.Ph.s. words? Some 37% of respondents mentioned that patients "almost always" follow their advice on OTC allergy products, 58% said patients "frequently" take their words to heart, and 4% reported that patients "sometimes" heed their advice.

### Impact of Zyrtec OTC

Four out of 10 respondents revealed that their No. 1 and No. 2 brand recommendations for adult allergy and antihistamine tablets will change with the introduction of Zyrtec OTC. Among these respondents, 62% will make Zyrtec OTC their No. 1 brand recommendation. Thirty-one percent said they expect to make it their No. 2 brand recommendation.

Three out of 10 respondents stated that their leading brand recommendations for adult allergy/antihistamine/nasal decongestant tablets will change in the wake of the introduction of Zyrtec OTC. Among these respondents, 67% will make Zyrtec OTC their highest brand recommendation and 29% will make it their second highest brand recommendation. 

### Which top two allergy brands do pharmacists recommend?

#### Adult allergy and antihistamine tablets

Claritin  
Benadryl

#### Adult allergy/Antihistamine/ Nasal decongestant tablets

Claritin-D  
Sudafed

#### Children's allergy liquids

Claritin Children's Allergy Relief  
Dimetapp Children's Liquid

**InsideBayaArea.com (Oakland, CA)**  
**It's allergy season for your cats, dogs**  
**March 9, 2008**

THIS TIME OF YEAR plenty of us start in with our sniffing, sneezing and itchy eyes, and our pets can have the same types of allergies.

However, their outward signs are often quite different than ours, and noticing these can be important in preventing the problem from getting worse in dogs and cats.

Probably the most common signs of allergies in dogs are itchy ears and itchy paws. Dogs will scratch at their ears, sometimes almost constantly, and will shake their head and ears frequently throughout the day. Of course, ear infections or foreign objects in the ear can cause this as well, and it is a good idea to have a pet examined in this case.

Dogs also often also lick or bite their paws during allergy season. In cats, itchy ears and runny eyes are often the first indicators of allergies.

Of course, things don't necessarily stop there.

Because the mechanism by which pollens and molds cause reactions in dogs is their direct contact with the skin, rather than being inhaled, any area of the body can become itchy.

The other most common areas are those that come in contact with the ground (pollens and molds ultimately drift down and land on the ground) and have the thinnest fur, for example, the underbelly, or sides of the legs. In the worst cases, dogs and cats seem to itch and scratch everywhere on their body.

Once a dog begins scratching at these areas, they transfer more allergens from the ground to their skin, and by causing small abrasions on the skin by scratching, those allergens gain even deeper access to the skin. This perpetuates the itching/scratching cycle, often leading to bacterial or yeast infections on the skin.

In many allergy cases, dogs will develop serious ear infections as well. These infections themselves cause further itching, and even if the allergy season passes, some dogs continue scratching at their skin and ears as a result of the infection that is present.

Although not necessarily practical, frequent bathing with mild shampoos will help reduce a dog's allergic itching by simply lowering the allergen load on their skin.

However, this is rarely sufficient by itself. Antihistamines and other medications are often necessary to stop the allergic reaction, and if secondary skin infections are present these must be managed with antibacterial or antiyeast medications.

If a dog is "smelly" — has a bad body odor that comes back a day or two after a shampoo — it is a fair bet that some degree of infection is present on the skin. Check with your veterinarian for which type of shampoo is best to use in this case.

Dogs will get some relief from allergies by taking antihistamines twice a day. Benadryl and other antihistamines can alleviate symptoms for dogs. In cats, chlorpheniramine is often used. Use of newer antihistamines like Claritin, Zyrtec and Allegra is beginning, but data is not yet available that summarizes how effective these are.

Stronger medicines such as prednisone can be used, although this medication has a long list of potential side effects besides its excellent anti-itching effect, and these should be discussed with your veterinarian before beginning.



Other medications, including true allergy shots like people take, can also be given to dogs and cats. All these options can be discussed with your veterinarian. There are even veterinary dermatologists who are specialists in the area of skin diseases — including allergies — in dogs and cats.

In any case, once the allergy season is in full bloom and a dog or cat is well into the itching/scratching cycle, the problem is more difficult to control. Be aware of when your pets start showing signs of allergies early in the season and take steps then to reduce their itching in order to minimize the risk of secondary skin and ear infections.

For questions or comments, e-mail [bishopranchvets@yahoo.com](mailto:bishopranchvets@yahoo.com)

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### **The Daily Nonperil Online (Council Bluffs, Iowa)**

#### **List of drug-food interactions**

**March 9, 2008**

**Antihistamines (over-the-counter Benadryl, prescription Allegra, Claritin and Zyrtec, etc.):** Prescription antihistamines are most effective when taken on an empty stomach. May increase drowsiness and slow mental and motor performance, especially with alcohol. Use caution when operating machinery or driving.

**Analgesic/antipyretic drugs (Tylenol, other acetaminophen products):** For fastest relief, take on empty stomach. Avoid or limit the use of alcohol. If you consume three or more alcoholic drinks per day, talk to your doctor or pharmacist before taking.

**Non-steroidal anti-inflammatory drugs (products with aspirin, ibuprofen, naproxen, ketoprofen or nabumetone):** NSAIDs can irritate the stomach; best taken with food or milk. Avoid or limit the use of alcohol. Buffered aspirin or enteric-coated aspirin can help decrease stomach bleeding.

**Corticosteroids (prednisone, etc.):** Take with food or milk to decrease stomach upset.

**Narcotic analgesics (Prescription codeine, morphine, oxycodone, hydrocodone, etc.):** Some used in combination with non-narcotic drugs, such as acetaminophen, aspirin or cough syrups. May be habit-forming, and can cause serious side effects when used improperly. Avoid alcohol, because it increases the sedative effects of the medications. Use caution when operating machinery or driving.

**Bronchodilators (theophylline, albuterol, epinephrine):** High-fat meals may increase theophylline in the body, while high-carbohydrate meals may decrease it. Food can have different effects, depending on the dose form (e.g., regular release, sustained release or sprinkles). Food has little effect on Theo-Dur and Slo-Bid, but food increases the absorption of Theo-24 and Uniphyl, which can cause side effects of nausea, vomiting, headache and irritability. Food can decrease absorption of products like Theo-Dur Sprinkles for children. Avoid consuming large amounts of caffeine, because both oral bronchodilators and caffeine stimulate the central nervous system. Avoid alcohol if on theophylline medications, because of increased risk of side effects, such as nausea, vomiting, headache and irritability.

**Diuretics (furosemide, triamterene/hydrochlorothiazide, etc.):** Some diuretics cause loss of potassium, calcium, and magnesium. However, triamterene blocks the kidneys' excretion of potassium, which can cause hyperkalemia (increased potassium). Excess potassium may result in irregular heartbeat and heart palpitations. When taking triamterene, avoid eating large amounts of potassium-rich foods such as bananas, oranges and green leafy vegetables, or salt substitutes that contain potassium.

**Beta blockers (atenolol, metoprolol, propranolol, etc.):** Avoid drinking alcohol with propranolol, sold as Inderal, because the combination lowers blood pressure too much.

**Nitrates (nitroglycerin, etc.):** Avoid alcohol, because it may add to the blood vessel-relaxing effect of nitrates and result in dangerously low blood pressure.

Angiotensin Converting Enzyme Inhibitors (captopril, enalapril, etc.): Food can decrease absorption. Take one hour before or two hours after meals. ACE inhibitors may increase potassium in your body, and too much can be harmful. Tell your doctor if you are taking potassium supplements or diuretics that may increase the amount of potassium in your body. Avoid eating large amounts of potassium-rich foods, such as bananas, green-leafy vegetables, and oranges.

HMG-CoA Reductase Inhibitors (atorvastatin, lovastatin, pravastatin, simvastatin): Lovastatin (Mevacor) should be taken with the evening meal to enhance absorption. Avoid drinking large amounts of alcohol with statins, because it may increase the risk of liver damage.

Anticoagulants (warfarin, sold as Coumadin): Vitamin K produces blood-clotting substances and may reduce the effectiveness of anticoagulants. Limit foods high in vitamin K (such as broccoli, spinach, turnip greens, cauliflower, and brussel sprouts). High doses of vitamin E (400 IU or more) may prolong clotting time and increase the risk of bleeding. Talk to your doctor before taking vitamin E supplements.

#### Antibacterials

Penicillin (penicillin V, amoxicillin and ampicillin), Cephalosporins (cefactor, cefadroxil, etc.), Macrolides (azithromycin, clarithromycin and erythromycin), Sulfonamides (sulfamethoxazole and trimethoprim)

Best taken on an empty stomach one hour before or two hours after meals. If your stomach gets upset, take with food. Finish medication, even if you are feeling better. Take with plenty of water. Tell doctor about any skin rashes you have had with antibiotics or that you get while taking this medication. A rash can be a symptom of an allergic reaction, and allergic reactions can be very serious. Also, tell your doctor if you experience diarrhea. If you are using birth control, consult with your health care provider, because some methods may not work when taken with antibiotics.

Tetracyclines (tetracycline, doxycycline and minocycline): Avoid taking tetracycline with dairy products, antacids and vitamins containing iron, because these can interfere with the medication's effectiveness.

Quinolones ciprofloxacin, levofloxacin, etc.): Avoid calcium-containing products like milk, yogurt, vitamins or minerals containing iron, and antacids, because they significantly decrease drug concentration. Taking these medications with caffeine products may lead to excitability and nervousness.

Nitroimidazole (metronidazole, sold as Flagyl): Avoid drinking alcohol or using medications that contain alcohol or eating foods prepared with alcohol while you are taking metronidazole and for at least three days after you finish the medication. Alcohol may cause nausea, abdominal cramps, vomiting, headaches, and flushing.

Antifungals (fluconazole, itraconazole, etc.): Avoid taking with dairy products or antacids. Avoid drinking alcohol, using medications that contain alcohol, or eating foods prepared with alcohol while you are taking ketoconazole, sold as Nizoral, and for at least three days after you finish the medication. Alcohol may cause nausea, abdominal cramps, vomiting, headaches and flushing.

#### Mood disorders

Follow instructions carefully. Take dose as directed, even if you are feeling better, and do not stop without consulting doctor. May take several weeks to reduce symptoms.

Monoamine oxidase inhibitors (phenelzine, tranylcypromine, etc.): Rapid, potentially fatal increase in blood pressure can occur if foods or alcoholic beverages containing tyramine are consumed while on MAO Inhibitors. Do not drink beer, red wine, other alcoholic beverages, non-alcoholic and reduced-alcohol beer and red-wine products. Avoid American processed, cheddar, blue, brie, mozzarella and Parmesan cheese; yogurt, sour cream; beef or chicken liver; cured meats such as sausage and salami; game meat; caviar; dried fish; avocados, bananas, yeast extracts, raisins, sauerkraut, soy sauce, ginseng and caffeine.

Anti-anxiety drugs (lorazepam, diazepam or Valium and alprazolam): Can interact with alcohol and impair mental and motor performance (e.g., driving, operating machinery). May interact with caffeine and cause excitability, nervousness, and hyperactivity and lessen the anti-anxiety effects of the drugs.

Antidepressants (paroxetine or Paxil, sertraline or Zoloft, fluoxetine or Prozac): Although alcohol may not significantly interact with these drugs to affect mental or motor skills, people who are depressed should not drink alcohol. These medications can be taken with or without food.

Histamine blockers (cimetidine or Tagamet, famotidine or Pepcid AC, ranitidine or Zantac, etc.): Avoid alcohol while taking these products, as it may irritate stomach and make it more difficult for stomach to heal. Can be taken with or without meals. Caffeine products may irritate stomach.

- National Consumers League and Food and Drug Administration. For more information on the NCL, call (202) 835-3323 or go to [www.nclnet.org](http://www.nclnet.org).

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**The Beaumont Enterprise Online (Beaumont, TX)**  
**Pollen count in sneezy Southeast Texas expected to be worse than national levels**  
**March 9, 2008**  
**By ROSE YBARRA**

Redbuds blossom at Tyrrell Park in Beaumont. Spring means the beginning of allergy season.

Trees are budding, flowers are blooming and birds are singing - and the sights and sounds of spring can be a welcome change after months of chilly, dark and gray days. But for those with seasonal allergies, like Beatrice Lopez, 74, of Beaumont, springtime can be less than idyllic.

"I get terrible headaches," Lopez said. "I also get a powdery feeling in my throat because of the pollen."

Pollen counts in Southeast Texas are expected to be higher this year than they were in 2007 and higher than national levels, said Scott Hanslip, a vice president at Surveillance Data, Inc., the company that oversees pollen.com. The Web site provides allergy forecasts by ZIP code.

"The area is flagged as being much higher than the rest of the country," Hanslip said.

Southeast Texas had a mild winter, which causes pollen counts to increase. **ALLERGY SUFFERERS, CLEAN HOUSE!**

Use HEPA air purifiers. Allergy sufferers should especially use them in their bedrooms. HEPA filters must capture a minimum of 99.97% of pollutants in order to earn the HEPA classification.

Allergic to cats or dogs? The best solution is to get rid of Socks or Fido, but a more practical answer is to keep pets out of the allergy sufferer's bedroom and off the upholstery. Bathe pets often.

After being outdoors, shower and change your clothes. Pollen sticks to clothing, skin and hair. Some experts advise washing hair daily because pollen can collect and transfer to the pillow.

Don't allow smoking in your house.

Change central air and heat filters religiously.

Vacuum at least twice a week with a HEPA-filter vacuum cleaner.

Avoid using fans and ceiling fans, which stir up dust.

Opt for hard surfaces instead of carpeting for flooring.

Wash bedding weekly in hot water.

Regularly steam clean mattresses, drapes and upholstery to kill dust mites.

Replace down-filled bedding with synthetic fibers. Dust mites cling to feathers.

Don't keep plants indoors. Soil encourages mold growth.

Sources: Audrey Conant, Southeast Texas Ear, Nose and Throat and Cleveland Clinic lab supervisor.

Trees pollinate earlier, triggering an early start to the allergy season, according to the American College of Allergy, Asthma and Immunology.

In Southeast Texas, mold is a trigger for allergies year-round because of the area's humidity.

In the spring, pollen, flowering plants and trees, especially oak, are the main culprits, said Beaumont's Dr. Jeremy Roebuck, who practices otolaryngology, the medical specialty for ear, nose and throat maladies.

Roebuck said seasonal allergies usually present themselves like a cold that just won't go away.

The symptoms - headache, stuffy nose, sneezing, wheezing and itchy eyes - can make life downright miserable for allergy sufferers.

Chris Ayala, 17, a Lumberton High School senior, said he's missed several days of school because of his allergy symptoms.

"I was getting sick every couple of weeks," he said.

Ayala wasn't sleeping well because he had trouble breathing and then he'd wake up groggy and with a pounding headache.

About 26 million Americans have chronic seasonal allergies and the number of people with milder symptoms might be as high as 40 million, according to the U.S. Food and Drug Administration.

Americans spend about \$2.4 billion on over-the-counter medications and another \$1.1 billion on doctor bills yearly, the FDA said.

Mild cases of seasonal allergies can be treated with over-the-counter allergy medications such as Claritin and Zyrtec, both of which previously were prescription drugs, Roebuck said.

He said antihistamines are known to cause drowsiness and should be used with caution.

People suffering chronic symptoms and symptoms affecting overall quality of life should see a doctor for further evaluation, Roebuck said.

Signs that it's time to see a doctor include sinus pain or other symptoms of sinus infection such as fever or yellow or green discharge from the nose.

Other warnings are a cough or cold that lasts more than a week and ear pain.

Patients with severe allergy symptoms can be given a blood or skin test to identify specific allergies.

Treatment for allergies includes medication and/or allergy shots.

Health-care providers also can recommend environmental changes, such as the use of air purifiers or special vacuums with filters.

Ayala, who recently was checked for allergies using a skin test, said the minor discomfort was worth it.

"I just want to find out what I'm allergic to and get it under control," he said.

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**Associated Press**

**Perrigo, Teva get allergy drug approval**

**March 7, 2008**

(picked up by Forbes Online, CNNMoney.com, MSNMoney.com, CNBC.com, Houston Chronicle Online)

NEW YORK (AP) - Drug developer Perrigo Co. said Thursday its partner Teva Pharmaceutical Industries Ltd. received Food and Drug Administration approval to sell an over-the-counter version of the allergy treatment Zyrtec-D.

The generic version will be sold by Perrigo under store brand names. McNeil Consumer Healthcare, a unit of Johnson & Johnson, said launched its over-the-counter version of Zyrtec in January.

Perrigo said it plans to ship the product in the next 90 days.

Shares of Allegan, Mich.-based Perrigo fell 94 cents, or 2.8 percent, to \$32.78 in afternoon trading. The stock has traded between \$16.09 and \$36.86 over the last 52 weeks. Shares of Israel-based Teva fell \$1.43, or 2.9 percent, to \$48.13.

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**Woman'sDay.com**

**How She Does It: Molly Shannon**

**March 7, 2008**

Molly Shannon, who we all came to know and love as a zany Catholic school girl on Saturday Night Live and in hit movies Serendipity and Evan Almighty, has recently teamed up with Zyrtec—the now-OTC allergy drug that saves sufferers every day from pollen and puppy attacks. Here, she tells us a little bit about her allergy onset nightmare, being a mom to 4-year-old Stella Shannon Chestnut and 3-year-old Nolan Shannon Chestnut and her new TV series.

What are your upcoming projects?

I'm committed to a project for NBC. It's called Kath & Kim—it's a big hit in Australia. They're doing the same thing they did with The Office. I play the mother, Kath, and Selma Blair plays my daughter; it's about their dysfunctional relationship. I go to L.A. in June to shoot it for a couple months, and then I'm assuming it will air in the fall. I'm really excited about it because I get to play a character closer to myself: She's a Midwesterner, lives in Florida and she thinks she's pretty fancy.

Have you ever worked with Selma Blair before?

No, I haven't. But I've met her because I've been out there for the casting. We've been reading with other actors, and she's great. I'm such a fan of hers and I'm really excited to work with her. A lot of people are like, "How can you play Selma Blair's mother?" But, the women in the Australian series are from a comedy troupe and they're actually like a year apart, something like that.

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So it's supposed to be obvious?

It's more like sketch comedy, like that kind of over-the-top type feeling.

How did you get involved with it?

They asked me to do it. A year ago they developed a script with another writer and it wasn't quite right, and then they got a new writer and sent me the script again, and I really liked the way she'd adapted it, so I agreed to do it.

How did you get involved with the Zyrtec campaign?

I got involved because I've been a long-term allergy sufferer, and I come from a long line of allergy sufferers. My dad had allergies, I have allergies, my son Nolan has allergies—I'm glad my daughter doesn't, but it's hereditary. Zyrtec and the Asthma and Allergy Foundation came to me and said that they had this great campaign called "Allergies Are No Laughing Matter." I was like, "Oh, I would love to be a part of it."

I'm fortunate that I know how to manage my allergies. I take Zyrtec, which actually just became available over the counter. But I can sympathize with people who don't know how to manage allergies, or always think it's a cold. There's this great website, [allergysavvy.com](http://allergysavvy.com), and you can go on it and take a quiz and find out whether or not you have allergies.

What kind of allergies do you have?

I'm allergic to cats. It's terrible: wheezing, my eyes get itchy, I feel kind of asthmatic, as if my lungs are filling up with water, I can't breathe. Growing up, I would go to slumber parties at girls' houses and I'd have to leave in the middle of the night because I couldn't breathe and it was so uncomfortable. So for people who really suffer, they get it.

I work with animals a lot as an actor, and you never want to have to turn down a job. Like in *Year of the Dog*, I had to work with all these dogs. It can be tough. And I didn't tell the director that I was allergic because I didn't want him to worry. He'd written the script for me and he'd developed it for me, and I was like, "Oh, whatever. I'm not going to say anything. It's much worse with cats." So I just didn't mention it. And then the day before we started, I had a shoot with a little dog, and the dog licked my face and I broke out in hives. So then I thought, "Oh God, I better tell them." So I said, "I have this allergy to dogs," and there was all the hysteria. I ended up having to go to the doctor and he got me a prescription for Zyrtec. But I ended up being fine. I did a lot of outdoor scenes. But, like I said, if it would have been cats it would have been so much worse.

What were your favorite shows and movies to be in, besides SNL?

Well I loved *Talladega Nights with Will [Ferrell]*. We shot that at the racetrack. It was crazy! I did my scenes for the movie during a real race—so much fun. It was such a crazy big-budget movie. It's always fun when you work with your friends, because you know them and you just go out for dinner. I did a movie for TV called *The Music Man*, which was, like, so-so, but I met Kristin Chenoweth, Matthew Broderick and Victor Garber. During the day, it was dancing and then at night, every single night, we would go out for dinner. It's fun when you're working with a lot of people who are the same age as you. I think that was the most fun I've had. We would be so tired because we would be working, going out to dinner, waking up and working again. But, it was like a party every night.

What was your experience like on *Sex and the City*? Are you excited for the movie?

I'm so excited for the movie! I'm such a fan of the show, and at that time I got cast on it, I was still just a huge fan. When I got to be in a scene with Sarah Jessica Parker, I felt like I wasn't even an actress. I felt I was like a tourist who won a part on the show because I was such a fan. I'm like, "I can't believe I'm doing a scene with Carrie Bradshaw." Ya know? And they were so nice. Michael Patrick King is so talented and Sarah Jessica's amazing; I'm such a fan of hers. And it was great working with such great comedy writers, and all the girls. I had a scene with Sarah Jessica, Kim Cattrall and Amy Sedaris, and I played the book publisher—so fun. I really didn't like seeing myself in the show because I'm such a fan of the show. I didn't want to watch it and see myself, I just wanted to watch the show and enjoy it.

Where is your family living right now?  
We live in Manhattan. We love it.

What does your husband do?  
He's a painter. Figurative...he's a figurative painter.

So you're shooting in L.A.? Is the whole gang coming along?  
Yup...just transport the whole family. My kids are still really little, just in preschool, so I bring them everywhere I go. If I do movies I'm always working out of town: Vancouver more than L.A. for some reason. We just go live in hotels or rent houses. I like it. But when they get older, when they're set in school, it won't be so easy. So, I just take it one day at a time, and try to not worry about that right now.

What is your last-minute meal, for the kids, or for you?  
For the kids, I do egg whites a lot. They like egg whites and cinnamon toast and, of course, macaroni and cheese. I do quick smoothies a lot, they like that. They go through stages. They get sick of stuff. They'll be into something, and then they'll get sick of it. But, I'm a big Trader Joe's person. For myself at night. I make quick chicken burgers and tater tots. That's my regular meal, with mayonnaise. Chicken burgers from Whole Foods, I forget the brand name. They are delicious! And I put a little mayo, onions... I bake it for thirty minutes while I'm reading stories to them, and then by the time they're in bed, it's ready. I get a side of mayo to dip the tater tots in, turn on a little Oprah, and I'm set.

What do you like to do with your kids to have fun?  
They're very simple. My kids are little. My son will be 3 in two weeks and my daughter's 4 1/2. They like to stay in, and we just make up games around the house. They pretend their puppies, and I bring them to the puppy store. I pretend like I ordered a doll and I put them in a box, and I'm like, "Oh my God, look at this baby doll...she talks!"

What is the best parenting advice you've ever received?  
Understand them. Have empathy. I love that. That's basically what adults want, too. You don't want somebody to fix it; you just want somebody to listen sometimes. Kids are smart. Also, delay of gratification is a really important thing to learn, that you can't have everything that you want right now. You have to be firm.

What three things do you always keep in your refrigerator and pantry?  
Coffee—I put my coffee in the refrigerator because I like it cold. So I have amaretto coffee. I like Lays potato chips, and I love mayonnaise. I can't be without mayo. I'm a Midwestern girl. I like mayo on everything.

What is the last thing you do before you go to bed at night?  
Brush my teeth. Brush and floss.

What's the last book you read that you really enjoyed?  
I just read a great kids book called How to Talk So Kids Will Listen and Listen So Kids Will Talk by Adele Faber and Elaine Mazlish. They're famous, I think they were big in the '70s or something. And I also loved Eat, Pray, Love by Elizabeth Gilbert. I was bummed when it ended. It's one of those books that make you feel like you're sitting with the author, like it's a friend. She's such a good writer. I also love Augusten Burrows, Running With Scissors.

Do you keep any sort of diet or exercise regime?  
I don't diet at all. I eat when I'm hungry and I stop eating when I'm full, and if I do eat too much to the point where I'm too full, I'm just gentle with myself. That's my general rule. I don't weigh myself or anything like that. So, I do not diet. I did that a long time ago, and for me, it doesn't work. It makes me crazy, and makes me feel deprived. I don't deprive myself. I have French fries and mayo, but then naturally I will eat healthy because I don't deprive myself. And I exercise. I run every day for like 30 minutes, and I have a little yoga tape, so I do a short routine for 15 minutes. But running is pretty much what I do every day. If I want a really good workout, I'll add the 15 minutes of sun salutations, and that

makes me feel amazing. I just don't have time for 90-minute yoga classes as a mom. I like running because it's quick and you can get it done, and that's it. I don't think of it in terms of weight control. It makes me a more relaxed mother, it makes me calmer, it makes me happier. I do headstands; they're a natural anti-depressant. It's really good for your mood.

What's your favorite movie from this past year?

I love La Vie en Rose. I loved her [Marion Cotillard's] performance. I loved There Will Be Blood. Daniel Day Lewis is amazing.--Brynn Mannino

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**iParenting.com**

**Molly Shannon Has the Last Laugh on Allergies**

**March 7, 2008**

With the first day of spring only days away, actress and entertainer Molly Shannon is teaming with the Asthma and Allergy Foundation of America (AAFA) to launch the Allergies Are No Laughing Matter educational campaign. Shannon and AAFA, with support from the makers of ZYRTEC®, have introduced a new online Allergy Quiz to help Americans learn if they may have allergies, so they can laugh more and sneeze less this spring.

Known for her characters on Saturday Night Live and movie roles including Year of the Dog, Shannon suffers from both indoor and outdoor allergies. "Allergies are not something I joke about, especially when I'm on the set with my animal co-stars or spending time with my kids," she says. "Before I learned how to control my allergy symptoms, it was really tough. I even avoided doing a lot of things I enjoyed because they triggered my allergies. I've teamed with AAFA, and the makers of ZYRTEC®, to help other people like me. They can tackle their allergies, like I have, and not miss a beat this spring or all year long."

Allergies take a toll on Americans both personally and professionally, according to a new survey by Kelton Research, in which 50 percent of U.S. allergy sufferers say allergies negatively affect their work, and almost three out of 10 (27 percent) have missed an event, such as a wedding or party, because of their allergies. Hitting closer to home, one out of five (20 percent) people told a family member they couldn't get a dog or cat because of their allergies.

To learn more, visit [www.AllergySavvy.com](http://www.AllergySavvy.com).

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**StreetInsider.com**

**Perrigo (PRGO) to Market Generic Zyrtec-D**

**March 6, 2008**

Perrigo Company (Nasdaq: PRGO) announced that its partner, Teva Pharmaceutical Industries Ltd. (Nasdaq: TEVA), has received final approval from the U.S. Food and Drug Administration (FDA) for its Abbreviated New Drug Application (ANDA) for over-the-counter Cetirizine Hydrochloride, Pseudoephedrine Hydrochloride Extended-Release Tablets, 5 mg/120 mg.

The product will be marketed by Perrigo under store brand labels and is comparable to McNeil Consumer Healthcare's recently launched Zyrtec-D Extended-Release Tablets, indicated for 12 hour relief of indoor and outdoor allergy symptoms and nasal congestion. According to Wolters Kluwer data, brand sales for the original prescription strength version of the product for the 12 months ending December 2007 were approximately \$190 million.[SM]

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**Briefing.com**

**Market Report -- In Play (PRGO)**

**March 6, 2008**



Perrigo to market over-the-counter cetirizine hydrochloride, pseudoephedrine hydrochloride extended-release tablets Co announced that its partner, Teva Pharmaceutical (TEVA), has received final approval from the U.S. Food and Drug Administration for its Abbreviated New Drug Application for over-the-counter Cetirizine Hydrochloride, Pseudoephedrine Hydrochloride Extended-Release Tablets, 5 mg/120 mg. The product will be marketed by Perrigo under store brand labels and is comparable to McNeil Consumer Healthcare's recently launched Zyrtec-D Extended-Release Tablets, indicated for 12 hour relief of indoor and outdoor allergy symptoms and nasal congestion.

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#### **Thomson Financial**

**Perrigo: Teva gets FDA final approval for OTC generic version of Zyrtec-D  
March 6, 2008**

SAN FRANCISCO (Thomson Financial) - Perrigo Co. said Thursday its partner, Teva Pharmaceutical Industries Ltd., received final approval from the Food and Drug Administration to market an over-the-counter generic version of Zyrtec-D, extended-release tablets.

The product, cetirizine hydrochloride, pseudoephedrine hydrochloride, will be marketed by Perrigo under store brand labels and is indicated for 12-hour relief of indoor and outdoor allergy symptoms and nasal congestion.

Brand sales for the original prescription strength version of the product for 2007 were \$190 million, Perrigo said, citing Wolters Kluwer data.

Allegan, Mich.-based Perrigo said it expects to begin shipping the product in the next 90 days.

Shares of Perrigo fell 2.7% to \$32.76, while shares of Teva fell 2.1% to \$48.40. Gabriel Madway gm/jw

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#### **13wham.com**

**Molly Shannon: Allergies Are No Laughing Matter  
March 6, 2008**

Actress and allergy sufferer Molly Shannon talked about the new educational campaign being launched by the Asthma and Allergy Foundation of America (AAFA) and supported by the makers of Zyrtec® including a new Web site with an online Allergy Quiz.

By visiting the site, Americans can learn about allergy symptoms, how to avoid triggers, and how to best treat their symptoms.

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**Perrigo Company Press Release** (picked up by TradingMarkets.com, CNMMoney.com, Biloxi Sun Herald Online)

**Perrigo Company to Market Over-the-Counter Cetirizine Hydrochloride, Pseudoephedrine Hydrochloride Extended-Release Tablets**

**March 6, 2008**

ALLEGAN, Mich., Mar. 6 /PRNewswire-FirstCall/ -- Perrigo Company (Nasdaq: PRGO; TASE) today announced that its partner, Teva Pharmaceutical Industries Ltd. (Nasdaq: TEVA), has received final approval from the U.S. Food and Drug Administration (FDA) for its Abbreviated New Drug Application (ANDA) for over-the-counter Cetirizine Hydrochloride, Pseudoephedrine Hydrochloride Extended-Release Tablets, 5 mg/120 mg.

The product will be marketed by Perrigo under store brand labels and is comparable to McNeil Consumer Healthcare's recently launched Zyrtec-D(R) Extended-Release Tablets, indicated for 12 hour relief of indoor and outdoor allergy symptoms and nasal congestion. According to Wolters Kluwer data, brand sales for the original prescription strength version of the product for the 12 months ending December 2007 were approximately \$190 million.

Perrigo's Chairman and CEO Joseph C. Papa stated, "This approval and marketing agreement reflect our strategy to be first to market with the important products that make quality healthcare more affordable for our customers and drive value for our shareholders."

The Company expects to begin shipping the product in the next 90 days.

Perrigo Company is a leading global healthcare supplier that develops, manufactures and distributes over-the-counter (OTC) and prescription pharmaceuticals, nutritional products, active pharmaceutical ingredients (API) and consumer products. The Company is the world's largest manufacturer of OTC pharmaceutical products for the store brand market. The Company's primary markets and locations of manufacturing facilities are the United States, Israel, Mexico and the United Kingdom. Visit Perrigo on the Internet ( <http://www.perrigo.com> ).

Note: Certain statements in this press release are forward-looking statements within the meaning of Section 21E of the Securities Exchange Act of 1934, as amended, and are subject to the safe harbor created thereby. These statements relate to future events or the Company's future financial performance and involve known and unknown risks, uncertainties and other factors that may cause the actual results, levels of activity, performance or achievements of the Company or its industry to be materially different from those expressed or implied by any forward-looking statements. In some cases, forward-looking statements can be identified by terminology such as "may," "will," "could," "would," "should," "expect," "plan," "anticipate," "intend," "believe," "estimate," "predict," "potential" or other comparable terminology. The Company has based these forward-looking statements on its current expectations, assumptions, estimates and projections. While the Company believes these expectations, assumptions, estimates and projections are reasonable, such forward-looking statements are only predictions and involve known and unknown risks and uncertainties, many of which are beyond the Company's control. These and other important factors, including those discussed under "Risk Factors" in the Company's Form 10-K for the year ended June 30, 2007, as well as the Company's subsequent filings with the Securities and Exchange Commission, may cause actual results, performance or achievements to differ materially from those expressed or implied by these forward-looking statements. The forward-looking statements in this press release are made only as of the date hereof, and unless otherwise required by applicable securities laws, the Company disclaims any intention or obligation to update or revise any forward-looking statements, whether as a result of new information, future events or otherwise.

SOURCE Perrigo Company

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**WHSV.com (Staunton, VA; ABC)**  
**What's Going Around Shenandoah Valley**  
**March 6, 2008**  
**By Jamie Currott**

Influenza continues to plague the Valley, but something new is surfacing.

Dr. Robert Fern with Waynesboro Pediatrics reports that seasonal allergies are starting up.

Common symptoms are clear runny nose, nasal itching and sneezing along with watery, itchy and/or red eyes. Allergies can trigger asthma, so Dr. Fern suggests over-the-counter drugs such as Benadryl, Claritin and Zyrtec. See a doctor if they do not help.

Since flu remains widespread, Central Shenandoah Health District Epidemiologist, Deborah Bundy-Carpenter says it cannot be stressed enough that if you are ill, the best place for you and others is home so that you do not spread the disease.

The flu is spread by small droplets in the air when you cough, sneeze or even talk.

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**Dow Jones**

**Perrigo To Mkt OTC Cetirizine Hydrochloride, Pseudoephedrine Hydrochloride**

**March 6, 2008**

Perrigo Co.'s (PRGO) partner, Teva Pharmaceutical Industries Ltd. (TEVA), received approval from the Food and Drug Administration for its abbreviated new drug application for over-the-counter cetirizine hydrochloride, pseudoephedrine hydrochloride extended release tablets for the treatment of indoor and outdoor allergy symptoms and nasal congestion.

Perrigo, an Allegan, Mich., pharmaceutical and nutritional products developer, said it will market the product under store brand labels.

Perrigo said the product is similar to McNeil Consumer Healthcare's Zyrtec-D extended-release tablets, which had sales in 2007 of about \$190 million.

McNeil Consumer Healthcare is a unit of Johnson & Johnson (JNJ).

-Katherine Wegert; 201-938-5400; AskNewswires@dowjones.com [ 03-06-08 1335ET ]

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**McNeil Consumer Healthcare Press Release** (picked up by NewsRx.com)

**HAVE THE LAST LAUGH ON ALLERGIES THIS SEASON**

**ACTRESS MOLLY SHANNON TEAMS WITH THE ALLERGY FOUNDATION TO TALK ABOUT ALLERGIES**

**New Survey Shows How Allergies Take a Toll on Americans' Personal and Professional Lives**

**March 5, 2008**

Ft. Washington, PA, March 5, 2008 – With the first day of spring only 16 days away, actress and entertainer Molly Shannon is teaming with the Asthma and Allergy Foundation of America (AAFA) to launch the Allergies Are No Laughing Matter educational campaign. Molly and AAFA, with support from the makers of ZYRTEC® (cetirizine HCl), today introduced a new online Allergy Quiz to help Americans learn if they may have allergies, so they can laugh more and sneeze less this spring.

Known for her characters on "Saturday Night Live"\* and movie roles including Year of the Dog,\* Molly suffers from both indoor and outdoor allergies. "Allergies are not something I joke about, especially when I'm on the set with my animal co-stars or spending time with my kids," she says. "Before I learned how to control my allergy symptoms, it was really tough. I even avoided doing a lot of things I enjoyed because they triggered my allergies. I've teamed with AAFA, and the makers of ZYRTEC®, to help other people like me. They can tackle their allergies, like I have, and not miss a beat this spring or all year long."

Allergies take a toll on Americans both personally and professionally, according to a new survey by Kelton Research, in which 50 percent of U.S. allergy sufferers said allergies negatively affected their work, and almost three out of 10 (27 percent) have missed an event, such as a wedding or party, because of their allergies. Hitting closer to home, one out of five (20 percent) people told a family member they couldn't get a dog or cat because of their allergies.

The educational campaign announced today includes a quick and simple online Allergy Quiz with educational allergy tips, available on [www.AllergySavvy.com](http://www.AllergySavvy.com). By visiting the website, Americans can learn about allergy symptoms, how to avoid triggers, and how to best treat their symptoms.

"Molly's story shows people that they can manage their allergies, so that it doesn't disrupt their quality of life," says Mike Tringale, Director of External Affairs at AAFA. "With this new online Allergy Quiz, you can learn if your chronic sneezing, itching and runny eyes may be caused by allergies, so you can do something about it now and avoid major allergy problems this spring."

According to Danica Schulte, M.D., of Cedars Sinai Medical Center in Los Angeles, parents with allergies often struggle to cope with their children's allergies on top of managing their own symptoms. "I see patients all the time who complain about upper respiratory allergy symptoms, and it becomes especially difficult when their children have allergies too," Dr. Schulte says. "The good news is that an effective new treatment is available now without a prescription at your local store. This will be a huge convenience for allergy sufferers and busy parents."

#### About Allergies

More than 35 million Americans suffer from indoor and outdoor allergic rhinitis, also known as upper respiratory allergies. Allergies are caused when a person's immune system overreacts to normally harmless substances. These substances are often referred to as triggers. People can encounter indoor and outdoor allergy triggers anytime throughout the year that can lead to allergy symptoms. Indoor allergies can occur year round and are triggered by substances such as mold, dust mites, and pet dander. These allergens are often inhaled through the nose and mouth, putting the allergens in contact with the immune cells in the lining of the nose, mouth, throat, and airways of the lungs causing an allergic response.

Similarly, outdoor allergies can occur when outdoor allergens such as pollen from grasses, weeds and trees are inhaled through the nose and mouth into the lungs causing an allergic response. Those who suffer from outdoor allergies are often affected by allergies in the spring and fall. Symptoms for both indoor and outdoor allergies can include itchy, watery eyes, itchy nose or throat, sneezing and runny nose.

#### About AAFA

The Asthma and Allergy Foundation of America (AAFA), a not-for-profit organization founded in 1953, is the leading patient organization for people with asthma and allergies, and the oldest and largest asthma and allergy patient group in the world. AAFA provides practical information, community based services and support through a national network of chapters and support groups. AAFA develops health education, organizes state and national advocacy efforts and funds research to find better treatment and cures. Visit [www.aafa.org](http://www.aafa.org) to learn more.

#### About ZYRTEC®

ZYRTEC® is an antihistamine that helps block the action of histamine in the body. ZYRTEC® helps provide 24 hour relief of your worst indoor and outdoor upper respiratory allergy symptoms including symptoms of sneezing, runny nose, and watery eyes. These symptoms can be caused by allergy triggers such as dust, mold and pet dander, tree pollen, weeds and grasses. ZYRTEC® has proven to be generally well-tolerated. In studies, ZYRTEC® began working within one hour and showed continued symptom relief for a full-24 hours from a single dose. For more information about ZYRTEC®, visit [www.Zyrtec.com](http://www.Zyrtec.com).

#### About McNeil Consumer Healthcare

McNeil Consumer Healthcare Division of McNEIL-PPC, Inc., a subsidiary of Johnson & Johnson, markets a broad range of well-known and trusted over-the-counter (OTC) products. McNeil Consumer Healthcare is most widely recognized for the complete line of TYLENOL® acetaminophen products, the leading pain reliever brand in the adult and pediatric categories. The TYLENOL® product line consists of hundreds of products across a variety of pain categories including: arthritis pain, pain with accompanying sleeplessness and upper respiratory. Other McNeil Consumer Healthcare brands include BENADRYL® allergy medicines; IMODIUM® A-D anti-diarrheal; MOTRIN® IB; PediaCare® upper respiratory medicines for children; ROLAIDS® antacid products; ST. JOSEPH® Adult Regimen Aspirin; and SUDAFED® and SUDAFED PE® nasal decongestants.

(\*Property of one of the following: NBC Studios, Paramount Vantage)

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## **Reuters**

### **Pfizer eyes overseas relief as Lipitor cliff nears**

**March 5, 2008**

NEW YORK, March 5 (Reuters) - Pfizer Inc on Wednesday said it aims to expand in emerging markets and speed its pace of launching new drugs to offset looming generic competition for its \$12 billion-a-year Lipitor cholesterol fighter.

The world's largest drugmaker also said during a meeting with industry analysts that it will establish a new business unit focusing on cancer drugs and aims to significantly boost the number of its drugs in late-stage trials by late next year.

"Pfizer plans to expand operations in China from the 110 cities it now serves to more than 650 cities," the company said in a release tied to the meeting, while also broadening its reach in Latin America and Eastern Europe.

Overseas markets, however, are far less lucrative than the United States, which has no strict government price controls and allows drugmakers to widely advertise their products on television and other media.

Pfizer in the past year has cut more than 10,000 jobs and is paring other costs to keep earnings growing amid generic competition in the United States for antidepressant Zoloft, blood pressure treatment Norvasc and its Zyrtec antihistamine.

Most importantly, it is bracing for the U.S. patent expiration, possibly by 2010, for Lipitor. The company badly needs new products to offset expected plunging sales of the world's best-selling prescription medicine.

Although investors have lauded Pfizer's cost-cutting, they have been profoundly disappointed that the company has launched only a few big-selling new medicines in recent years despite its \$7 billion annual research budget.

"We know haven't been productive enough over the last few years," Martin Mackay, Pfizer's research chief, told hundreds of analysts and money managers gathered at the New York meeting.

Moreover, two of those successful new products -- Chantix to help smoker's kick the habit and its Sutent kidney cancer drug -- have raised safety concerns that could limit their long-term sales potential.

Pfizer on Wednesday said it aims to seek 15-20 regulatory approvals between 2010 and 2012.

A company spokeswoman said about two-thirds of the submissions would be for approvals of new products, while the remainder would be for approved new uses of existing medicines.

Results were also hurt by allergy medication Zyrtec becoming over-the-counter, although it and the introduction of a Walgreen-branded version of the drug, helped front-end sales.

Same-store sales in the 28 days this year compared with 28 days last year rose 4.2 percent.

Fiscal 2008 year-to-date sales rose 11 percent to \$29.43 billion while same-store sales rose 5.1 percent.

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**Deseret Morning News (Salt Lake City, Utah)**

**Itchy, sniffly misery of spring hits Utahns**

**Allergy experts offer tips to reduce the suffering**

**March 4, 2008**

**By Lois M. Collins**

Some of the earliest pollen producers are hard at it, and people who are sensitive to them are feeling the first itchy, eye-stinging, sniffly misery of spring.

Elm trees are the earliest pollen producers, but other trees will begin sending their little airborne gifts aloft soon, ready to be inhaled by allergy sufferers. That will last through May, overlapping with grass allergies, which begin in earnest in April and last three to four months. In summer, weed pollen will kick in, as well.

"It will be interesting to see if we have higher-than-average pollen counts from trees, because of the wet winter," said Dr. Greg Wickern, allergist at Intermountain Allergy Center in Salt Lake City. "Wet springs boost grass pollen and the potential for suffering. It's less predictable when it comes to trees."

People with mild symptoms, like an annoying little sneeze or itchy eyes, usually can get adequate relief from an over-the-counter antihistamine, such as Claritin, Alavert and Zyrtec, Wickern said.

"But if you start to feel like you have a whopper of a head cold that goes on and on despite an OTC, that's when seeing your doctor for prescription nose sprays and antihistamines can help. Some people will feel like they're coming down with a viral respiratory tract infection that will go on for the entire season. It's bad enough to have a head cold for 10 days, let alone 10 to 12 weeks," Wickern said.

Studies say seasonal allergies actually affect performance at school, work and home. After a study showed that college entrance wannabes who had seasonal allergies scored lower on average than others during entrance tests, which took place in spring, England changed to allow several testing periods throughout the year.

"I call allergies the Rodney Dangerfield of illness," said Wickern. "It doesn't get much respect, unless you suffer yourself."

If allergies dampen your spring, there are things you can do. Allergy experts say to use the car air conditioning, instead of driving around with open windows. Close windows at home because pollen can blow in. When you go home, a quick shower will wash the pollen out of hair, which acts as a wick. Otherwise, when you sleep, you'll apply the pollen to your pillow, then rub your face in it all night.

Some people take extra steps, like wearing little surgical masks when they're outside. That doesn't help the eyes, which also react to pollen.

Wickern warns that allergies can move south, from the upper airways into the lungs. Pollen can trigger asthma in those with the right combination of genetics and pollen sensitivity.

Some medicines, such as inhaled steroids, can significantly help people who routinely have spring hay fever, if they start taking them about two weeks before the season begins. Any physician can prescribe them. If you have mild allergies, don't bother. Taking antihistamines as a prevention doesn't help.

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## Global Insight Daily Analysis

### Growth Cools at UCB in 2007, with Sales Up 1.4% Y/Y Ahead of Patent Challenges to Zyrtec, Keppra

February 29, 2008

By Mitra Thompson

#### Global Insight Perspective

##### Significance

As expected, Belgium's UCB saw minimal top-line growth in 2007, with group sales up by just 1.4% y/y.

##### Implications

UCB attributed its slow performance to costs related to the consolidation of Schwarz Pharma, as well as growing generic competition and the effects of a fluctuating U.S. dollar.

##### Outlook

The beginnings of a downward revenue trend are expected this year, driven by patent expiry on Zyrtec and generic competition for Keppra. Strong U.S. sales of Xyzal and a string of regulatory approvals are key to limiting losses at UCB.

Belgian pharmaceutical company UCB saw its top-line growth grind almost to a halt in 2007, as costs related to the acquisition of Schwarz Pharma (Germany) and the shrinking sales of allergy drug Zyrtec (cetirizine) took their toll. Total revenues of 3.6 billion euro (US\$5.4 billion) were down by 0.1% year-on-year (y/y), while net sales grew by just 1.4% y/y to 3.2 billion euro. Operating costs were well contained and indeed shrank in several key areas, with spending on research and development (R&D) down by 3.3% y/y at 788 million euro, while general and administrative costs contracted by as much as 15.2% y/y.

UCB's operating profit, calculated by Global insight as total revenues minus R&D spending, marketing, and sales expenses, and general and administrative costs, did see some improvement y/y, with a 4.5% increase to 1.5 billion euro. Net profit, however, suffered a major hit, and at 160 million euro was down by as much as 59.1% y/y. The company attributed the heavy loss to expenses associated with the 4.4-billion-euro takeover of Schwarz Pharma, the one-time non-cash impact of an inventory step-up of 93 million euro, as well as a reduced after-tax contribution from non-recurring items. Meanwhile, at 47.6%, the group's operating margin is arguably in rude health.

#### UCB: 2007 Financial Results (mil. euro)

	2007	% Change, Y/Y
Revenue	3,626	-0.1
Net Sales	3,188	1.4
Marketing and Sales Expenses	-1,054	0.5
R&D Expenses	-788	-3.3
General and Administrative Expenses	-267	-15.2
Operating Income*	1,517	4.5
R&D as % of Sales	24.7%	1.2 pp lower
Operating Margin	47.6%	1.4 pp higher

\* Calculated by Global Insight as revenues minus R&D spending, marketing, and sales expenses, and general and administrative costs. Source: UCB

Despite UCB's shaky top-line performance, turnover from most of its leading medicines showed strong growth last year. Epilepsy drug Keppra (levetiracetam) posted the highest level of growth, with a 43% y/y rise in comparable terms to just over 1 billion euro in sales. Although former sales leader Zyrtec's turnover contracted by 7% y/y, its younger replacement product Xyzal (levocetirizine) saw its turnover expand by 19% y/y, reaching 168 million. Sales of Xyzal are expected to pick up more rapidly over 2008, following the product's much-anticipated U.S. market launch at the end of last year (see Belgium: 2 October 2007:

). Neupro (rotigotine), the transdermal patch system for Parkinson's disease patients acquired through the consolidation of Schwarz Pharma, brought in 52 million euro-worth of sales in 2007, and also benefited from a U.S. market launch midway through the year.

UCB: 2007 Sales of Leading Products (mil. euro)

Brand 2007 % Change, Y/Y (reported) % Change, Y/Y (comparable)

Keppra 1,026 35.0 43.0

Zyrtec 487 -13.0 -7.0

Xyzal 168 18.0 19.0

Neupro 52 - -

Source: UCB

#### Outlook and Implications

UCB's guidance for 2008 is decidedly sombre, with revenues seen falling to approximately 3.4 billion euro. UCB has cited Zyrtec's patent expiry as the biggest anticipated cause of lost revenue, but has also pointed to the expected start of generic competition for Keppra in the United States, as well as a continuation of the transatlantic currency fluctuations that have negatively affected the performance of so many European drug-makers this year. Cost-containment efforts should see a slight lowering of operating costs compared with 2007, while the group will only say that net profit should surpass 100 million euro, again hinting at a considerable loss.

The Belgian pharmaceutical company is clearly in need of a stronger revenue base and a larger product mix within its portfolio. Despite regulatory approvals for Neupro, Xyzal, and Cimzia (certolizumab pegol) in various markets, UCB suffered a well-publicised setback to its drug-marketing plans last year in the shape of the EMEA's rejection of Cimzia (see Belgium: 16 November 2007: ). The group is now more reliant than ever on rapid sales growth for Xyzal and Neupro, boosted by new approvals (see Belgium: 19 February 2008:) and new regulatory filings (see Belgium: 13 December 2007:). Beyond this, UCB's new-drug hopes for this year lie with Vimpat (lacosamide), which is awaiting decisions from the EMEA and the U.S. FDA for approval as a treatment for diabetic neuropathic pain and epilepsy.

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#### Associated Press Newswires

##### UCB says net profit fell 59 percent

February 29, 2008

BRUSSELS, Belgium (AP) - Belgian pharmaceutical company UCB SA said Friday full-year net profit fell 59 percent, mainly as a consequence of the cost of integrating its 2006 purchase of German drug maker Schwarz Pharma.

Net profit fell to euro160 million from euro391 million (US\$591 million) on a pro-forma basis after the integration of Schwarz Pharma, beating analysts' expectations of euro147 million. The Brussels-based company met its own guidance, set in December.

Revenue was flat at euro3.6 billion (US\$5.4 billion) on a pro-forma basis, although it increased by 41 percent from a reported euro2.55 billion (US\$3.9 billion) in 2006, almost totally due to the first time contribution from Schwarz Pharma. Sales of UCB's anti-epileptic drug Keppra, the company's main product, rose 35 percent to euro1.0 billion (US\$1.5 billion), UCB said in a statement.

Results are in line with expectations, said Deutsche Bank analyst Brian Bourdot.

"The dividend was a bit higher than we thought," he said. UCB proposed a gross dividend payment of 0.92 (US\$1.92) per share, up from last year's euro0.90, while Bourdot expected it to be flat.



The company confirmed it sees net profit "exceeding" euro100 million in 2008.

In 2008, "operating expenses should be slightly lower as a result of the continued cost containment efforts," UCB said.

UCB is a global pharma, specializing in epilepsy and allergy treatments. Its stable of products includes epilepsy drug Keppra, antihistamine treatment Zyrtec and Parkinson's disease patch Neupro.

The shares slipped 0.4 percent to euro32.18 (US\$48.67) in Brussels. They have fallen 20 percent in the last four months after European regulators raised concerns about the company's key pipeline drug Cimzia as a treatment for Crohn's disease, a painful inflammation of the bowel.

The delay in the drug's European launch followed a similar delay imposed by the U.S. Food and Drug Administration. The drug's long-term effectiveness remains under scrutiny, and the regulators also flagged up bleeding risks and manufacturing difficulties.

Cimzia in Crohn's Disease has however gone on sale in Switzerland and U.S. regulators are considering the drug under its alternative indication as a treatment for rheumatoid arthritis.

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**Dow Jones International News**

**3rd UPDATE: UCB 07 Net Pft Down On Schwarz Integration Costs**

**February 29, 2008**

(Adds analyst comment, updates share price.)

By Alessandro Torello

Of DOW JONES NEWSWIRES

BRUSSELS (Dow Jones)--Belgian pharmaceutical company UCB SA (UCB.BT) Friday posted a 59% drop in full-year net profit, mainly due to the cost of integrating its 2006 purchase of German drug maker Schwarz Pharma.

Net profit fell to EUR160 million from EUR391 million on a pro-forma basis after the integration of Schwarz Pharma, beating analysts' expectations of EUR147 million. The Brussels-based company met its own guidance, set in December, of a net profit above EUR100 million.

Revenue was flat at EUR3.6 billion on a pro-forma basis, although it increased by 41% from a reported EUR2.55 billion in 2006, almost totally due to the first time contribution from Schwarz Pharma. Sales of UCB's anti-epileptic drug Keppra, the company's main product, rose 35% to EUR1.0 billion, UCB said in a statement.

Results are in line with expectations, said Deutsche Bank analyst Brian Bourdot. "The dividend was a bit higher than we thought," he said. UCB proposed a gross dividend payment of EUR0.92 per share, up from last year's EUR0.90, while Bourdot expected it to be flat.

The company confirmed it sees net profit "exceeding" EUR100 million in 2008 and recurring earnings before interests, taxes, depreciation and amortization, or recurring Ebitda, at around EUR650 million. Recurring Ebitda was EUR741 million last year, slightly beating analysts' estimate of EUR736 million.

In 2008, "operating expenses should be slightly lower as a result of the continued cost containment efforts," UCB said.

UCB is a global pharma, specializing in epilepsy and allergy treatments. Its stable of products includes epilepsy drug Keppra, antihistamine treatment Zyrtec and Parkinson's disease patch Neupro.

At 0930 GMT, UCB's shares were down 0.4% at EUR32.18. They have fallen 20% in the last four months after European regulators raised concerns about the company's key pipeline drug Cimzia as a treatment for Crohn's disease, a painful inflammation of the bowel.

The delay in the drug's European launch followed a similar delay imposed by the U.S. Food and Drug Administration. The drug's long-term effectiveness remains under scrutiny, and the regulators also flagged up bleeding risks and manufacturing difficulties.

The negative comments have led some analysts to remove the Crohn's treatment side of the drug from their forecasts altogether.

Cimzia in Crohn's Disease has however gone on sale in Switzerland and U.S. regulators are considering the drug under its alternative indication as a treatment for rheumatoid arthritis.

Cimzia is a key pipeline drug for UCB, poised for sales of \$1 billion or more. The drug is vital for the company's growth in the coming years, as its other blockbuster drug Keppra's patents will expire in the U.S. in 2009 and in Europe in 2010.

Company Web site: <http://www.ucb-group.com> [<http://www.ucb-group.com>]

-By Alessandro Torello, Dow Jones Newswires; +32 2 741 1488; [alessandro.torello@dowjones.com](mailto:alessandro.torello@dowjones.com) [ 29-02-08 0934GMT ]

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#### **Reuters News**

#### **UPDATE 2-UCB 2007 net hit by Schwarz buy, repeats outlook**

**February 29, 2008**

**By Philip Blenkinsop**

(Adds analyst comment, CEO)

BRUSSELS, Feb 29 (Reuters) - Belgian pharmaceutical group UCB reported a sharp decline in 2007 net profit on Friday, albeit better than expectations, hit by charges related to its purchase of German peer Schwarz Pharma.

UCB, with blockbuster allergy and epilepsy drugs, said net profit fell 59 percent to 160 million euros (\$241.6 million) from a pro-forma 391 million euros, coming in above the average forecast of 127 million euros from a Reuters poll of 11 analysts.

Growth was predominantly from epilepsy drug Keppra, with sales rising 35 percent to 1.03 billion euros, while costs attached to the Schwarz merger and marketing expenses drew down the bottom line.

UCB said in December it expected revenue to slightly beat last year's pro-forma figure, and recurring EBITDA (earnings before interest, tax, depreciation and amortisation) to top 720 million euros.

Revenues in fact were unchanged at 3.6 billion euros, versus expectations of 3.5 billion in the poll, and EBITDA was 741 million euros.

"The results seem fairly good. Net profit was higher than expected and Keppra sales very good," said Tim Heirwegh, analyst at Fortis.

UCB achieved 166 million euros of synergies from integrating Schwarz in 2007. In a brief conference call, Chief Executive Roch Doliveux repeated the 380 million euro target by 2010 and said that synergy benefits should reach 290 million euros in 2008.

The company repeated its forecast of a revenue fall this year to 3.4 billion euros, due to the patent expiry of antihistamine Zyrtec and the start of generic competition for Keppra. Recurring EBITDA would drop to about 650 million euros and net profit would again top 100 million euros.

UCB raised its proposed gross dividend to 0.92 euros per share from 0.90 euros a year ago.

UCB suffered a setback last year after the U.S. Food and Drug Administration refused to approve the use of would-be blockbuster Cimzia to treat Crohn's Disease and after a panel of European medical experts issued a negative opinion on it.

Rivals have received clearance for Crohn's treatments. (Reporting by Philip Blenkinsop; Editing by David Cowell/Rory Channing)

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**Reuters News**  
**UCB's Xyzal drug patent challenged in U.S.-analyst**  
**February 28, 2008**

BRUSSELS, Feb 28 (Reuters) - Belgian pharmaceutical group UCB has received a patent challenge for its antihistamine drug Xyzal, a Deutsche Bank research note said on Thursday.

"We had expected such a challenge given Xyzal is protected only by new product exclusivity, not new chemical entity exclusivity," the research report said.

It added that the challenge had little implication for its valuation of UCB.

A UCB spokeswoman said she was unaware of the challenge but that such a procedure was to be expected.

Xyzal is UCB's follow-up drug to its successful Zyrtec and was launched in the United States last year. (Reporting by Julien Ponthus; Editing by David Cowell)

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**Reuters News**  
**EARNINGS POLL-UCB net to plummet after Schwarz purchase**  
**February 25, 2008**

\* UCB 2007 results

\* Feb. 29 at 7 a.m. (0600 GMT)

\* Net profit seen at 127 million euros

BRUSSELS, Feb 25 (Reuters) - Belgian pharmaceutical group UCB's net profit is expected to have plummeted in 2007 after spiralling costs related to its purchase of German peer Schwarz Pharma.

UCB, which said in December net profit should exceed 100 million euros, is expected on Friday to report a figure of 127 million euros (\$188.1 million), the average of a Reuters poll of 11 analysts. In 2006, net profit was 367 million euros.

The company had a busy 12 months, the highlight of which was the completion of the purchase of Schwarz. Its low point was the failure of would-be blockbuster drug Cimzia to find favour with regulators.

UCB said in December it expected revenue to slightly beat the pro-forma 3.5 billion euros of 2006 and for recurring EBITDA (earnings before interest, tax, depreciation and amortisation) to top 720 million euros.

Analysts see a revenue figure of 3.5 billion euros and EBITDA of around 740 million euros.

Growth is predominantly from epilepsy drug Keppra, while costs attached to the Schwarz merger and marketing expenses will pull down the bottom line.

UCB also said it expected revenue this year to decrease to

3.4 billion euros -- due to the patent expiry of antihistamine Zyrtec -- recurring EBITDA of about 650 million euros and a net

profit again above 100 million euros.

Analysts said the Belgian company will need cost control and merger synergies to offset lost Zyrtec royalties, even after the U.S. launch of successor Xyzal last year. Keppra is also likely to face generic competition by the year end. UCB was hit last year by downbeat sentiment after the U.S. Food and Drug Administration refused to approve the use of Cimzia to treat Crohn's Disease and after a panel of European medical experts issued a negative opinion on it.

Rivals have received clearance for Crohn's treatments.

The Belgian company filed for U.S. approval for Cimzia to treat rheumatoid arthritis in February and will seek the same in Europe later this year.

UCB is waiting to hear from U.S. and European health authorities regarding its drug Vimpat for epilepsy and neuropathic pain, and its Neupro treatment for Restless Legs Syndrome and, in the United States only, for advanced Parkinson's disease.

The following is a summary of a Reuters poll (figures in millions of euros)

	Mean	Range	Previous	Forecasts	
Sales	3495	3233 - 3604	2523*	18	
Recurring EBIT	502	447 - 560	475	7	
EBIT	417	324 - 577	571	7	
Reported Net	127	103 - 150	367	11	

\* pro-forma sales in 2006 (including Schwarz Pharma) 3.5 billion euros (Reporting by Philip Blenkinsop and Tineke van der Struik; Editing by David Hulmes)

UCB-RESULTS/ (EARNINGS POLL)|LANGEN|Table|ABN|E|RBN|BL

### **Houston Chronicle**

**Treat allergies rather than avoid what ails you / AHHH CHOO!!!**

**February 18, 2008**

**By JEANNIE KEVER**

Sneezing, sniffing and snorting? You're in good company. Thanks to Houston's mild winters, there's always something to make an allergy sufferer miserable.

Right now, it's tree pollen. Soon something else will be blooming. Air pollution, mold, dust and pet dander are always lurking.

"Our spring is stop-and-start in Houston," says Anne Graubart, so it's hard to say what time of year is worst.

Graubart is best-known for her community work, especially in the arts world. But she's also at home among the estimated 35 million Americans with respiratory allergies. (Food allergies are another matter.)

She's allergic to ragweed, grass and trees. And cats.

No one can completely avoid outdoor pollens. And thanks to her grandchildren, Graubart can't avoid cats.

Still, she manages just fine with the help of allergy shots, an antihistamine and a steroid nasal spray. As Graubart has discovered, these are good times for people with allergies.

Zyrtec last month joined another popular antihistamine, Claritin, as long-term allergy medications available without a prescription. That makes relief easier to find, although it may cost more for anyone accustomed to having prescription drug insurance pick up the cost.

The new over-the-counter options are good for people with short-term, mild allergies, said Dr. Eric Sandberg, an allergist with Kelsey-Seybold Clinic. But he and other doctors say people with allergy-induced nasal congestion do best with steroid nasal sprays that still require a prescription.

Allergy shots - technically known as immunotherapy - provide the most permanent relief.

And new treatments are coming.

Research is under way on treatments that could be tailored to a patient's individual DNA, said Dr. Stuart Abramson, an allergy and immunology specialist with Baylor College of Medicine and Texas Children's Hospital.

Already, doctors say most people can find significant relief. It may require persistence, however.

Avoiding the things that make your allergies go haywire would be ideal, but Sandberg says that's not realistic.

"This stuff floats all over the city," he said. He recommends treating allergies, rather than trying to avoid them.

Over-the-counter medications are a good place to start. For one thing, they're generally safe, Sandberg noted. "People are getting more options without increasing their risk."

But those medications don't necessarily help with nasal congestion. Some formulas include a decongestant, but Sandberg and Abramson say prescription nasal corticosteroid sprays are often more effective. (Decongestant nasal sprays can provide temporary relief but have a rebound effect, making congestion worse with regular use.)

Prescription corticosteroid sprays have been around for well over a decade and are now available in generic form. But some patients still confuse them with oral or injectable steroids and worry about side-effects.

An injection might contain 50 milligrams of steroids, Sandberg said, while a nasal spray dose is closer to 50 micrograms. "It's an entirely different scale."

Allergy shots, on the other hand, can actually reduce your sensitivity.

The shots first involve testing to see what you're allergic to - mold vs. cat dander, dust vs. oak pollen - and then tailoring the injections to slowly build up immunity.

Allergy shots haven't been approved to treat food allergies, but Abramson said they can help most people with airborne allergens.

Shots should be continued for at least five years, he said. After that, some people can stop the shots and still reap the benefits.

Graubart discontinued her allergy shots, "but I started being just as miserable as I was before," she said.

She's back on the injections.

"For me, it just makes all the difference in the world," she said. "Most people think you're a sissy when you say, 'My allergies are bothering me.' And in the grand scheme of things, it's not so bad, but it can ruin a couple of days of your life."

...

**WHAT IS IT?** An allergy is described as an overreaction of the immune system to a foreign substance that is eaten, breathed into the lungs, injected or touched. Severe cases can cause difficulty breathing, asthma attacks and death.

**BY THE NUMBERS:** 50 million Americans suffer from all types of allergies; about 75 percent have indoor/outdoor allergies.

10 million people are allergic to cat dander, the most common pet allergy.

700 people in the U.S. die every year from allergic reactions.

\$5.7 billion is spent every year on allergy medications.

Source: Asthma and Allergy Foundation of America

jeannie.kever@chron.com

**PHOTO: FINDING RELIEF:** Anne Graubart suffers from allergies, but says now is the best time for people with allergies. So many options are on the market to treat the symptoms.

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**NewsRx.com**

**Allergies; Allergy Treatment ZYRTEC(R) Now Available Without a Prescription  
February 8, 2008**

2008 FEB 8 - (NewsRx.com) -- McNeil Consumer Healthcare, a division of McNEIL-PPC, Inc., announced that ZYRTEC(R) (cetirizine HCl), the number one prescribed allergy treatment in the U.S.\*, and ZYRTEC-D(R) 12-HOUR(R), are now available without a prescription in stores nationwide\*. Allergy sufferers can now find ZYRTEC-D(R) 12-HOUR(R) and ZYRTEC(R) in stores in the original prescription strength. ZYRTEC(R) is a once-a-day medication for adults and children that provides 24 hour relief from the worst symptoms due to perennial and seasonal allergic rhinitis, commonly referred to as indoor and outdoor upper respiratory allergies. ZYRTEC(R) also relieves itching due to hives (see also Allergies).

"Physicians have been prescribing ZYRTEC(R) for the last decade to help patients manage their worst indoor and outdoor allergy symptoms," said Ashley McEvoy, President, McNeil Consumer Healthcare. "It is the number one prescribed allergy medicine in the U.S. with a loyal patient base of nine million people. Now that ZYRTEC(R) is stocked on store shelves, these allergy sufferers can easily get the 24 hour effective allergy relief they need, and for many, ZYRTEC(R) will cost up to one-third less than prescription ZYRTEC(R)."

ZYRTEC(R) is available over-the-counter in 10mg tablets, 5mg and 10mg chewable tablets, and 1mg/mL syrup to relieve allergy symptoms of sneezing, runny nose and watery eyes for 24 hours. ZYRTEC-D(R) 12-HOUR(R), which is available in stores behind the counter, combines ZYRTEC(R) with a decongestant and provides the added benefit of relieving nasal congestion in a 12-hour extended release tablet.

"Now that ZYRTEC(R) can be found in stores where over-the-counter medications are sold, allergy sufferers don't have to see an allergist or other healthcare professional before going to buy the treatment they need," said Anil Datwani, Pharm. D., AR-EX Pharmacy, Fords, New Jersey. "It's great to have a new and effective treatment on my store shelves that will offer people needed allergy relief."

#### ZYRTEC(R) Arrives With a Burst of Spring

To celebrate the availability of ZYRTEC(R) on store shelves without a prescription, visitors to New York City's Central Park can escape the cold and experience a virtual spring at the Spring Wonderland Dome, sponsored by the makers of ZYRTEC(R), from January 24-27. Admission to the Spring Wonderland Dome is free, and visitors get complimentary hot chocolate while experiencing fun-filled activities and entertainment.

This article was prepared by Drug Week editors from staff and other reports. Copyright 2008, Drug Week via NewsRx.com.

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#### **Perrigo Company Press Release**

#### **Perrigo Reports Record Sales and Earnings for Second Quarter Fiscal 2008; Increases Full Year Guidance**

**February 5, 2008**

ALLEGAN, Mich., Feb. 5 /PRNewswire-FirstCall/ --

- Second quarter revenue increased \$65 million, or 17 percent, to \$435 million
- GAAP net income increased 63 percent to \$34 million, or \$0.36 per share
- Second quarter cash provided by operations of \$67 million
- Fiscal 2008 earnings guidance increased to between \$1.50 and \$1.60 per share

Perrigo Company (Nasdaq: PRGO; TASE) today announced results for its second quarter fiscal year 2008 and six months ended December 29, 2007.

#### Perrigo Company

(in thousands, except per share amounts)

Second Quarter		Six Months	
2008	2007	2008	2007



Sales	\$435,483	\$370,629	\$818,223	\$710,844
Net Income	\$34,289	\$21,088	\$68,308	\$37,970
Diluted EPS	\$0.36	\$0.23	\$0.72	\$0.41
Diluted Shares	95,283	93,506	95,104	93,595

## Second Quarter Results

Net sales for the second quarter of fiscal 2008 were a record \$435.5 million, an increase of \$64.9 million, or 17 percent, compared with \$370.6 million last year. Reported net income was \$34.3 million, or \$0.36 per share, compared with \$21.1 million, or \$0.23 per share a year ago, which included expense for a product recall of \$3.2 million after-tax, or \$0.03 per share, and a restructuring charge of \$417 thousand after-tax, or less than \$0.01 per share.

Perrigo Chairman and CEO, Joseph C. Papa, stated, "I am extremely pleased with our performance this quarter both financially and operationally. Record sales were achieved through double digit sales growth in each of our business segments. Operating income grew 85 percent from last year on a 390 basis point improvement in gross margins. These improvements, along with continued focus on working capital, generated \$67 million in cash flow from operations, up \$43 million from last year. These results also come before the largest new product launch in our history, Omeprazole, which we expect to start shipping by the end of our third fiscal quarter."

## Six Months Results

Net sales for the six months ended December 29, 2007 were \$818.2 million, an increase of \$107.4 million, or 15 percent, compared with \$710.8 million last year. Reported net income was \$68.3 million, or \$0.72 per share, compared with \$38.0 million, or \$0.41 per share last year. The year ago period included expense for a product recall of \$3.9 million after-tax, or \$0.04 per share, and a restructuring charge of \$417 thousand after-tax, or less than \$0.01 per share.

## Consumer Healthcare

Consumer Healthcare segment net sales in the quarter were a record \$320.2 million, up \$44.3 million, or 16 percent, compared with \$275.9 million a year ago. The sales increase resulted from \$9.9 million in new product revenue; strong sales in the smoking cessation, analgesics and cough/cold product categories and increases in non-U.S. businesses. Operating income was \$38.5 million, compared with \$17.4 million a year ago. The income gain was a result of the volume increase as well as benefits from supply chain and operational efficiency improvements. Additionally, last year's second quarter included \$3.2 million in after-tax costs related to a product recall.

On December 28, 2007, Perrigo announced it received final approval from the FDA for its Abbreviated New Drug Application (ANDA) for OTC Cetirizine Hydrochloride Tablets, 5 and 10 mg. The product will be marketed under store brand labels and is comparable to McNeil Consumer Healthcare's Zyrtec(R) Tablets. Store brand shipments began in January.

For the first six months of 2008, Consumer Healthcare sales were \$588.5 million, up \$70.7 million, or 14 percent, compared with \$517.8 million last year. Operating income was \$68.1 million, up \$33.6 million, or 97 percent, compared with \$34.5 million last year, which included after-tax costs of \$3.9 million related to a product recall.

On January 9, 2008, the Company announced it acquired Galpharm Healthcare, Ltd., a leading United Kingdom-based supplier of over-the-counter store brand products, for approximately \$86 million. The acquisition is expected to add more than \$55 million in sales annually and be accretive to earnings in the first 12 months.

## Rx Pharmaceuticals

The Rx Pharmaceuticals segment reported sales of \$38.7 million, including \$5.0 million of service and royalty revenue, an increase of \$10.4 million, or 37 percent, compared with \$28.3 million a year ago. Fiscal 2008 second quarter results also included \$6.9 million in sales of products acquired from Glades Pharmaceuticals. Operating income was \$8.4 million, up from \$3.7 million last year as a result of increased volume and improved margins.

For the first six months of fiscal 2008, net sales were \$73.6 million, including \$10.8 million of service and royalty revenue and \$13.5 million in sales of acquired products, resulting in an increase of \$13.9 million, or 23 percent, compared with \$59.7 million last year. Operating income was \$15.8 million, up 67 percent from \$9.5 million last year.

#### API

API segment sales were \$34.6 million, compared with \$28.6 million a year ago, or an increase of 21 percent. Operating income was \$3.4 million, compared with \$5.9 million last year, reflecting a less favorable product sales mix. For the six months, sales were \$73.4 million, up \$15.0 million, or 26 percent, compared with \$58.4 million a year ago. Operating income for the six months was \$10.7 million, compared with \$10.6 million in the same period last year.

#### Other

The Other category, consisting of the Israel Consumer Products and Israel Pharmaceutical and Diagnostic Products segments, reported second quarter sales of \$42.0 million, compared with \$37.8 million a year ago, an increase of 11 percent. Operating income was \$3.3 million, compared with \$3.0 million last year. Sales for the six months were \$82.7 million, up 10 percent, compared with \$75.0 million in the same period a year ago. Operating income was \$5.8 million, compared with \$5.6 million last year.

In the fiscal 2008 second quarter, unallocated expenses were \$4.8 million, compared with \$3.6 million a year ago, due to higher employee wage and benefit costs. For the six months in fiscal 2008, unallocated expenses were \$5.5 million, compared with \$8.1 million last year. The decrease was due primarily to a favorable legal settlement that offset expenses in the first quarter of fiscal 2008.

#### Outlook

The Company is increasing full year guidance and now anticipates adjusted EPS for the full fiscal year in the range of \$1.50 to \$1.60 per share, up 69 to 80 percent from last year. This increase from previous guidance reflects the continued strong performance of Perrigo's existing portfolio and additional volume gains as a result of ongoing quality issues at a competitor. The Company also expects its full-year tax rate to be in the range of 21 to 24 percent, down from prior guidance as a result of forecasted changes to the worldwide income mix and additional tax planning measures. The Company expects to generate cash from operations in the range of \$180 million to \$200 million.

Mr. Papa stated, "Perrigo is executing in a challenging economic environment by delivering quality, affordable healthcare to our customers. We continue our focus on improving quality, our supply chain, and working capital management, while investing in our new product pipeline. The Galpharm acquisition is another example of improving our customer offering, while also improving our return on invested capital. We are generating strong cash flow and delivering value to our customers and shareholders."

Perrigo will host a conference call to discuss fiscal 2008 second quarter results at 10:00am (ET) on Tuesday, February 5. The conference call will be available via webcast to interested parties on the Perrigo website <http://www.perrigo.com> or by phone 888-694-4676, International 973-582-2737, and reference ID# 31908064. A taped replay of the call will be available beginning at approximately 2:30 p.m. (ET) Tuesday, February 5, until midnight Tuesday, February 12, 2008. To listen to the replay, call 800-642-1687, International 706-645-9291, access code 31908064.

Perrigo Company is a leading global healthcare supplier that develops, manufactures and distributes over-the-counter (OTC) and prescription pharmaceuticals, nutritional products, active pharmaceutical ingredients (API) and consumer products. The Company is the world's largest manufacturer of OTC pharmaceutical products for the store brand market. The Company's primary markets and locations of manufacturing facilities are the United States, Israel, Mexico and the United Kingdom. Visit Perrigo on the Internet ( <http://www.perrigo.com> ).

Note: Certain statements in this press release are forward-looking statements within the meaning of Section 21E of the Securities Exchange Act of 1934, as amended, and are subject to the safe harbor created thereby. These statements relate to future events or the Company's future financial performance and involve known and unknown risks, uncertainties and other factors that may cause the actual results, levels of activity, performance or achievements of the Company or its industry to be materially different from those expressed or implied by any forward-looking statements. In some cases, forward-looking statements can be identified by terminology such as "may," "will," "could," "would," "should," "expect," "plan," "anticipate," "intend," "believe," "estimate," "predict," "potential" or other comparable terminology. The Company has based these forward-looking statements on its current expectations, assumptions, estimates and projections. While the Company believes these expectations, assumptions, estimates and projections are reasonable, such forward-looking statements are only predictions and involve known and unknown risks and uncertainties, many of which are beyond the Company's control. These and other important factors, including those discussed under "Risk Factors" in the Company's Form 10-K for the year ended June 30, 2007, as well as the Company's subsequent filings with the Securities and Exchange Commission, may cause actual results, performance or achievements to differ materially from those expressed or implied by these forward-looking statements. The forward-looking statements in this press release are made only as of the date hereof, and unless otherwise required by applicable securities laws, the Company disclaims any intention or obligation to update or revise any forward-looking statements, whether as a result of new information, future events or otherwise.

PERRIGO COMPANY  
CONDENSED CONSOLIDATED STATEMENTS OF INCOME  
(in thousands, except per share amounts)  
(unaudited)

	Second Quarter		Year-to-Date	
	2008	2007	2008	2007
Net sales	\$435,483	\$370,629	\$818,223	\$710,844
Cost of sales	305,071	274,147	571,093	521,547
Gross profit	130,412	96,482	247,130	189,297
Operating expenses				
Distribution	7,744	7,155	14,818	14,539
Research and development	16,143	14,902	32,463	27,949
Selling and administration	57,685	47,396	104,960	94,068
Restructuring	-	642	-	642
Total	81,572	70,095	152,241	137,198
Operating income	48,840	26,387	94,889	52,099
Interest, net	3,674	3,300	8,329	7,886
Other income, net	(969)	(2,258)	(2,152)	(2,319)
Income before income taxes	46,135	25,345	88,712	46,532
Income tax expense	11,846	4,257	20,404	8,562

Net income	\$34,289	\$21,088	\$68,308	\$37,970
Earnings per share				
Basic	\$0.37	\$0.23	\$0.73	\$0.41
Diluted	\$0.36	\$0.23	\$0.72	\$0.41
Weighted average shares				
outstanding				
Basic	93,147	91,836	93,186	92,104
Diluted	95,283	93,506	95,104	93,595
Dividends declared per share	\$0.0500	\$0.0450	\$0.0950	\$0.0875

PERRIGO COMPANY  
CONDENSED CONSOLIDATED BALANCE SHEETS  
(in thousands)

	December 29, 2007	June 30, 2007	December 30, 2006	
Assets	(unaudited)	(unaudited)	(unaudited)	
Current assets				
Cash and cash equivalents		\$72,163	\$30,305	\$39,635
Investment securities		29,642	49,110	34,030
Accounts receivable		311,013	282,045	246,603
Inventories		326,002	295,114	322,624
Current deferred income taxes		38,683	41,400	50,358
Income taxes refundable		4,568	-	-
Assets held for sale		2,746	2,746	-
Prepaid expenses and other				
current assets	18,669	18,340	24,515	
Total current assets	803,486	719,060	717,765	
Property and equipment		687,068	664,096	629,325
Less accumulated depreciation		358,068	333,024	308,999
	329,000	331,072	320,326	
Restricted cash	400,000	422,000	400,000	
Goodwill	212,934	196,218	188,272	
Other intangible assets	191,430	159,977	137,921	
Non-current deferred income taxes	59,925	54,908	46,039	
Other non-current assets	42,535	41,919	43,740	
	\$2,039,310	\$1,925,154	\$1,854,063	
Liabilities and Shareholders'				
Equity				
Current liabilities				
Accounts payable	\$194,214	\$164,318	\$173,008	
Notes payable	3,937	11,776	18,333	
Payroll and related taxes	44,673	46,226	41,049	
Accrued customer programs	48,882	48,218	45,436	
Accrued liabilities	40,137	47,333	44,328	
Accrued income taxes	-	29,460	23,311	
Current deferred income taxes	20,320	17,125	6,193	
Current portion of long-term				

debt	16,539	15,381	-
Total current liabilities	368,702	379,837	351,658
Non-current liabilities			
Long-term debt	648,077	650,762	668,784
Non-current deferred income taxes	106,569	103,775	106,702
Other non-current liabilities	99,566	36,311	34,646
Total non-current liabilities	854,212	790,848	810,132
Shareholders' equity			
Preferred stock, without par value, 10,000 shares authorized	-	-	-
Common stock, without par value, 200,000 shares authorized	505,076	519,419	509,910
Accumulated other comprehensive income	79,470	56,676	31,456
Retained earnings	231,850	178,374	150,907
Total shareholders' equity	816,396	754,469	692,273
	\$2,039,310	\$1,925,154	\$1,854,063
Supplemental Disclosures of Balance Sheet Information			
Allowance for doubtful accounts	\$8,944	\$9,421	\$12,198
Allowance for inventory	\$36,184	\$36,210	\$39,098
Working capital	\$434,784	\$339,223	\$366,107
Preferred stock, shares issued	-	-	-
Common stock, shares issued	93,353	93,395	92,666

PERRIGO COMPANY  
CONDENSED CONSOLIDATED STATEMENTS OF CASH FLOWS  
(in thousands)  
(unaudited)

	Year-To-Date	
	2008	2007
Cash Flows (For) From Operating Activities		
Net income	\$68,308	\$37,970
Adjustments to derive cash flows		
Depreciation and amortization	30,983	27,681
Share-based compensation	3,930	5,718
Deferred income taxes	6,096	(4,248)
Sub-total	109,317	67,121
Changes in operating assets		

and liabilities		
Accounts receivable	(22,125)	(9,295)
Inventories	(24,238)	(22,919)
Income taxes refundable	(4,568)	-
Accounts payable	24,951	(4,034)
Payroll and related taxes	(2,605)	(12,658)
Accrued customer programs	664	(4,098)
Accrued liabilities	(6,663)	(937)
Accrued income taxes	10,266	9,480
Other	10,131	(5,025)
Sub-total	(14,187)	(49,486)
Net cash from operating activities	95,130	17,635

#### Cash Flows (For) From Investing

##### Activities

Purchase of securities	(133,791)	(117,746)
Proceeds from sales of securities	153,502	111,665
Asset acquisition	(12,401)	-
Additions to property and equipment	(13,714)	(19,784)
Proceeds from sales of property and equipment	-	2,613
Net cash for investing activities	(6,404)	(23,252)

#### Cash Flows (For) From Financing

##### Activities

Repayments of short-term debt, net	(7,839)	(1,699)
Borrowings of long-term debt	50,000	60,000
Repayments of long-term debt	(55,000)	(15,000)
Tax effect of stock transactions	1,115	(59)
Issuance of common stock	16,029	3,700
Repurchases of common stock	(35,417)	(15,547)
Cash dividends	(8,898)	(8,116)
Net cash (for) from financing activities	(40,010)	23,279

Net increase in cash and cash equivalents	48,716	17,662
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Cash and cash equivalents, at beginning of period	30,305	19,018
Effect of exchange rate changes on cash	(6,858)	2,955
Cash and cash equivalents, at end of period	\$72,163	\$39,635

#### Supplemental Disclosures of Cash

##### Flow Information

Cash paid/received during the period for:

Interest paid	\$19,561	\$18,254
Interest received	\$10,392	\$9,831
Income taxes paid	\$11,723	\$6,727
Income taxes refunded	\$1,288	\$1,369

Table I  
PERRIGO COMPANY  
SEGMENT INFORMATION  
(in thousands)  
(unaudited)

	Second Quarter		Fiscal Year	
	2008	2007	2008	2007
<b>Segment Sales</b>				
Consumer Healthcare	\$320,205	\$275,947	\$588,464	\$517,756
Rx Pharmaceuticals	38,655	28,260	73,615	59,685
API	34,608	28,633	73,422	58,412
Other	42,015	37,789	82,722	74,991
Total	\$435,483	\$370,629	\$818,223	\$710,844
<b>Segment Operating Income (Loss)</b>				
Consumer Healthcare	\$38,521	\$17,420	\$68,070	\$34,520
Rx Pharmaceuticals	8,356	3,686	15,801	9,473
API	3,425	5,929	10,701	10,587
Other	3,292	2,976	5,781	5,640
Unallocated expenses	(4,754)	(3,624)	(5,464)	(8,121)
Total	\$48,840	\$26,387	\$94,889	\$52,099

Table II  
PERRIGO COMPANY  
RECONCILIATION OF NON-GAAP MEASURES  
(in thousands, except per share amounts)  
(unaudited)

	Second Quarter		Fiscal Year	
	2008	2007	2008	2007
Reported operating income	\$48,840	\$26,387	\$94,889	\$52,099
Restructuring	-	642	-	642
Adjusted operating income	\$48,840	\$27,029	\$94,889	\$52,741
Reported net income	\$34,289	\$21,088	\$68,308	\$37,970
Restructuring (1)	-	417	-	417
Adjusted net income	\$34,289	\$21,505	\$68,308	\$38,387
Diluted earnings per share				
Reported	\$0.36	\$0.23	\$0.72	\$0.41
Adjusted	\$0.36	\$0.23	\$0.72	\$0.41
Diluted weighted average shares outstanding	95,283	93,506	95,104	93,595

(1) Net of taxes at 35%

Table II (Continued)  
REPORTABLE SEGMENTS

RECONCILIATION OF NON-GAAP MEASURES  
(in thousands, except per share amounts)  
(unaudited)

	Second Quarter		Fiscal Year	
	2008	2007	2008	2007
Consumer Healthcare				
Reported operating income	\$38,521	\$17,420	\$68,070	\$34,520
Restructuring	-	642	-	642
Adjusted operating income	\$38,521	\$18,062	\$68,070	\$35,162

SOURCE Perrigo Company

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**Newsday**

**Sorting out drug names Medications with similar-looking and -sounding monikers can confuse, but experts offer solutions**

**February 4, 2008**

**BY DELTHIA RICKS**

Even though a new report on medication errors has found that thousands of people receive the wrong drug because too many have confusing look-alike or sound-alike names, experts say there are ways to prevent the mix-ups, which in some instances have proven deadly.

The United States Pharmacopeia, which sets standards for the purity and potency of medications, examined 26,000 instances of patients receiving the wrong medication in 870 hospitals nationwide. About 1.4 percent of those mistakes resulted in harm, including seven that may have caused or contributed to patients' deaths, the nonprofit group said in a report last week.

But experts say it's not necessarily sloppiness by health care professionals that's causing the errors. Too many pharmaceutical companies christen their medications with names similar to those of other companies. The drugs rarely, if ever, are for the same condition.

"The most common reason for this error is not negligence, but simply misreading the prescription," said Jason Zvokel, pharmacy manager at Walgreens in Centereach who has published pamphlets to help fellow pharmacists - and consumers - recognize subtleties that can lead to mistakes.

"With more look-alike and sound-alike medications on the market than ever before, it's becoming all too easy to misread doctors' handwriting," he said.

USP found 3,170 pairs of names that look or sound alike, nearly double the 1,750 pairs it identified in its 2004 analysis.

Zvokel said consumers should always discuss their prescriptions with a pharmacist so that each is aware of the reason the prescription was written. New York State requires pharmacists to counsel patients on medication use, Zvokel said.

Electronic prescribing is helping to clear some of the confusion, but human error - entering the wrong drug name - leads to the same problem as bad handwriting.

Sometimes prescriptions are called into pharmacies, and the sound-alike names can result in a mistake: Zantac, an ulcer medication, sounds confusingly similar to Xanax, a tranquilizer. Other examples: Zolof, Zofran, Zocor, Zyrtec, Zantac, Ziac, Zetia, Zerit, Zestril and Zyprexa, to name a few.