



2002  
BUDGET PLAN

PP 00306

Produced to: Connecticut  
Attorney General Richard Blumenthal



# OxyContin® Tablets

PP 00307

Produced to: Connecticut  
Attorney General Richard Blumenthal



Pages 1-30 through 1-40, 1-43 and 1-44 redacted

PP 00308

Produced to: Connecticut  
Attorney General Richard Blumenthal



## II. ASSUMPTIONS

### A. Market Overview

To date the market for OxyContin<sup>®</sup> Tablets consists of patients with both cancer pain and non-cancer pain. The non-cancer pain market is the significantly larger market. In 2000 sales of opioids were \$2.1 billion for non-cancer pain compared to \$396 million for cancer pain. However, due to the recent addition of a black box warning and modification of the approved indication, the ability to expand OxyContin Tablets use in non-cancer pain will be more challenging. It is unlikely that an opioid approved by the FDA in the future will have as broad of an indication as OxyContin now enjoys. However, we still expect that new and existing single agent and combination analgesics will expand their promotion to nonmalignant pain as well.

In accordance with the approved indication, OxyContin Tablets should be initiated at the appropriate point in the patient with moderate to severe pain when a continuous around-the-clock opioid is needed for an extended period of time.

#### Abuse and Diversion

Beginning in 2000, OxyContin Tablets sales have been under assault due to the media reports of abuse and diversion of the product in certain geographic areas. Attention to this problem has intensified extensively in 2001. This attention has come from the media (television, print, internet), Food and Drug Administration, and the DEA. The poor education and understanding of the issues surrounding pain management, abuse, and diversion has fueled a national debate on the legitimacy of opioids for the treatment of non-cancer pain. The reality as shown by the Pain In America Survey, conducted by Purdue and a consumer research organization, as well as other surveys, is that moderate to severe pain is left untreated or undertreated everyday by healthcare providers.

The media's attention to abuse and diversion of OxyContin Tablets has provided state Medicaid plans and some HMOs, concerned about the affect the product is having on their budget, an excuse to look for ways to limit the prescribing of OxyContin Tablets.

### B. Fixed Combination Opioids

Oral opioids in combination with either APAP (acetaminophen) or ASA (aspirin) remain the most commonly prescribed opioid analgesics. These combinations are being prescribed by all physician populations who write approximately 146 million prescriptions per year. Despite the high

volume of prescriptions being written for these combination opioids such as Percocet, Vicodin®, Lorcet® and Darvocet-N®, moderate to severe pain remains grossly undertreated. (Pain in America Survey). The short duration of action of these oral products causes peaks and valleys in blood levels, which can contribute to increased side effects and poor, inconsistent pain control. The short duration of action is also problematic for patients who need around-the-clock dosing of their pain medication. Dosing every four-to-six hours does not allow a patient to sleep through the night, or participate easily in many normal activities. The combination of an opioid with APAP or ASA limits the number of tablets that can be prescribed because of potential liver or gastrointestinal toxicity. The APAP or ASA component also has the potential to mask fever in patients with cancer and infections. All of these factors, associated with the choice of opioid analgesics in Step 2, as well as the large dollar and prescription volume of this class of drugs, provide a continuing opportunity for a single-entity, long-acting oxycodone product to treat moderate to severe pain of an extended duration, OxyContin Tablets.

- Percocet®

Endo Pharmaceuticals launched line extensions of Percocet in February 2000. These line extensions of the 2.5 mg, 7.5 mg and 10 mg tablet formulations was launched to capitalize on the success of oxycodone made possible by OxyContin Tablets. In 2001 prescriptions for the new dosage strengths of Percocet contributed to growth of the entire brand by over 1million prescriptions.

C. Single Entity Opioids

Long-acting morphine and transdermal fentanyl provide physicians with two long-acting products to meet the needs of patients with moderately severe to severe pain. However, these products possess disadvantages such as the stigma that surrounds morphine and the reluctance of physicians, nurses, and pharmacists to use them. Hydromorphone is considered a potent opioid analgesic, but has been limited in its use for chronic pain due to the need to dose it at least every six hours for consistent around-the-clock pain relief. OxyContin Tablets will continue to be utilized for severe pain, as evidenced by an increase in the sales volume of the 40 mg and 80 mg OxyContin Tablet strengths during 2001.

- MS Contin Tablets/Generic Sustained Release Morphine

- MS Contin Tablets had been considered the gold standard for treating moderate to severe cancer pain. In fact, some physicians,

## VI. TACTICS

### A. Sales Force Allocation

The deployment of our most valuable and substantial promotional resource, the sales force, is critical to the continued success of OxyContin Tablets. Promotional support will continue in order to ensure appropriate awareness of OxyContin Tablets in the opioid market and on steps physicians can take to reduce abuse and diversion.

### B. Representative Delivered Promotional Materials

#### Wholesalers/Chain Headquarters (National Account Managers)

Contacts will be made with wholesalers to ensure that there are appropriate inventory levels for the 10 mg, 20 mg, 40 mg, and 80 mg strength tablets. Appropriate distribution channels will be sought for the 160 mg to ensure future targeted availability and the success of this dosage strength for appropriate high dose patients.

#### Pharmacies

Representatives will call on chain and independent retail stores to educate them on how to protect their pharmacy against abuse and diversion of prescription products and ensure there is adequate stocking of OxyContin Tablets. Representatives will also continue to increase the distribution of OxyIR<sup>®</sup> at the retail level.

#### Hospitals

In an effort to continue gaining hospital formulary acceptance of OxyContin Tablets, representatives will work with their Abbott counterparts to make calls on all Pharmacy and Therapeutic (P&T) committees.

The revised hospital formulary kit and product data brochure will be utilized by the sales force to provide the appropriate clinical data necessary to continue to add OxyContin Tablets to hospital formularies. In addition, representatives will continue to use the OxyContin Tablets tabletop hospital display panels. Speakers' Bureau lectures will be conducted during grand rounds, tumor boards, etc. The focus of these presentations will be the appropriate positioning of OxyContin Tablets in their analgesic treatment armamentarium.

#### Managed Care Organizations

Managed Care Account Executives will be devoted to ensuring the continued availability of OxyContin Tablets where Managed Care plans are looking at restricting availability.

PP 00324

Given this split in responsibilities, it will be crucial that the efforts of Managed Care Account Executives stay focused and that new clinical data be leveraged in a way to ensure continued availability of OxyContin Tablets.

The Partners Against Pain<sup>®</sup> program will continue to be expanded for the Managed Care market, providing customized materials to meet their needs. Educational materials will be offered to Managed Care Organizations with their plan "indicia" printed on them.

C. Direct Mail/eDetailing

Mailings

A number of mailings are planned to support OxyContin Tablets in 2002. Mailings will be done to support key OxyContin Tablets messages. Direct mail will be utilized to assist in maintaining share-of voice in what will become a crowded market. In addition, Internet detailing initiatives will be directed to targeted physicians to support representatives' efforts.

Representative Follow-up Mailings

Representatives will be able to send follow-up mailings to MDs and RNs after making a call. This will be accomplished through the Quest<sup>®</sup> call reporting system.

D. Journal Advertising

The journal ad campaign for OxyContin Tablets will focus on "life after pain." This humane, quality of life look, with pictures of patients with their pain under control with OxyContin Tablets, will show an active vibrant patient who has been liberated from the limitations of persistent pain. This will be a component of our Patients' Profiles campaign that highlights specific pain states, such as osteoarthritis and low back pain. The journal schedule and publications used will be chosen based on important specialties for treating cancer and non-cancer pain, as well as the synergies which may exist with the launch of Palladone.

E. Conventions

The OxyContin Tablets exhibit structure will feature graphic panels of the OxyContin Tablets core creative concept as seen in our journal ads and visual aids. Panels highlighting specific pain states from our "Life After Pain" Patient Profiles campaign will be utilized at appropriate conventions. Various promotional activities will be conducted at the booth to draw attendees into a discussion with our representatives about OxyContin Tablets.

PP 00325

OXYCONTIN Tablets Promotional Plan

Program	Total Cost 2002	First Quarter			Second Quarter			Third Quarter			Fourth Quarter		
		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec
<u>Promotional Materials/Reorders</u>	\$5,000,000	X	X	X	X	X	X	X	X	X	X	X	X
Premium	\$200,000	X	X	X									
<u>Pain Education</u>													
Fact-a-Day Calendar	\$440,000							X	X	X			
<u>Patient</u>													
Patient P.I.	\$80,000	X	X	X	X	X	X	X	X	X	X	X	X
<u>Core Market</u>													
<u>Oncology</u>													
New OxyContin Visual Aid	\$100,000	X	X	X									
OxyIR Moderate-Severe Comparison Visual Aid	\$60,000	X	X	X				X	X	X			
Oncologic Rehabilitation Visual Aid	\$10,000				X	X	X						
<u>Oncologists/Pain Management Nurses</u>													
ONS Grant	\$22,000							X	X	X			
<u>Primary Care</u>													
Diabetic Neuropathy Reprint Carrier	\$125,000	X	X	X									
"Pathway to Pain Specialist" Series 1-4	\$200,000	X	X	X	X	X	X	X	X	X	X	X	X
American Academy of Physician Assistants (AAPA) Grant	\$22,000							X	X	X			
OxyContin Titration Step Pad	\$260,000	X	X	X									

PP 00326

OXYCONTIN Tablets Promotional Plan

Program	Total Cost 2002	First Quarter			Second Quarter			Third Quarter			Fourth Quarter		
		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec
OxyContin Telephone Antibacterial Pad	\$70,000	X	X	X									
JCAHO PAP Patient to Comfort (PTC) Follow-up	\$50,000				X	X	X						
2002 Pain Prescribing Guide	\$140,000	X	X	X									
Patients Rights CD ROM	\$100,000	X	X	X									
Internet E-Detailing Support Materials	\$250,000	X	X	X	X	X	X	X	X	X	X	X	X
<b>TOTAL</b>	<b>7,129,000</b>												
<b>Special Programs</b>													
Partners Against Pain Programs	\$2,000,000	X	X	X	X	X	X	X	X	X	X	X	X
JCAHO Regional Program Sponsorship/Highlights	\$200,000	X	X	X	X	X	X	X	X	X	X	X	X
Strategic Alliances American Hospital Association Grant	\$100,000	X	X	X	X	X	X	X	X	X	X	X	X
<b>TOTAL</b>	<b>\$2,300,000</b>												

PP 00327

OXYCONTIN Tablets Promotional Plan

Program	Total Cost 2002	First Quarter			Second Quarter			Third Quarter			Fourth Quarter			
		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	
<b>Direct Mail</b>														
PAP Mailing	\$250,000	X	X	X	X	X	X	X	X	X	X	X	X	X
50 Million Reasons to Treat Pain Mailer	\$300,000											X	X	X
<b>TOTAL</b>	<b>\$550,000</b>													
<b>Journal Ad Production</b>														
	\$100,000	X	X	X				X	X	X				
<b>Journal Advertising</b>														
	\$2,500,000	X	X	X	X	X	X	X	X	X	X	X	X	X
<b>TOTAL</b>	<b>\$2,600,000</b>													
<b>MANAGED CARE</b>														
<b>Promotional Materials</b>														
<b>Case Managers</b>														
Case Management Society of America (CMSA) Grant	\$30,000	X	X	X	X	X	X	X	X	X	X	X	X	X
<b>Publication Plan</b>														
Quality Indicator	\$200,000											X	X	X
Reorders	\$200,000	X	X	X	X	X	X	X	X	X	X	X	X	X
NCQA/HEDIS Report	\$50,000							X	X	X				
Prior Authorization Compendium	\$10,000				X	X	X							
PP 00328														
<b>HECON</b>														
ICD Coding by Plan Brochure	\$100,000							X	X	X				

OXYCONTIN Tablets Promotional Plan

Program	Total Cost 2002	First Quarter			Second Quarter			Third Quarter			Fourth Quarter		
		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec
Quality Improvement in Pain Management formkit.com	\$100,000				X	X	X						
Reorders	\$250,000	X	X	X	X	X	X	X	X	X	X	X	X
Business Plan Template/Toolbox	\$800,000	X	X	X	X	X	X	X	X	X	X	X	X
<b>TOTAL</b>	<b>\$1,740,000</b>												
<b>Journal Advertising</b>													
Journal Ads	\$250,000	X	X	X	X	X	X	X	X	X	X	X	X
<b>TOTAL</b>	<b>\$250,000</b>												
<b>Special Promotion</b>													
Quality Improvement in Pain Management Protocare Algorithyms	\$150,000	X	X	X									
Initial Member Survey	\$100,000				X	X	X						
Initial Provider Survey	\$100,000				X	X	X						
Quality Improvement Report	\$50,000							X	X	X			
Action Plan Report	\$50,000							X	X	X			
Customized Quality Improvement Plan	\$250,000							X	X	X	X	X	X

OXYCONTIN Tablets Promotional Plan

Program	Total Cost 2002	First Quarter			Second Quarter			Third Quarter			Fourth Quarter		
		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec
Follow up Provider Survey	\$100,000				X	X	X						
Protocare Sciences Patient/Provider Support Center	\$100,000				X	X	X						
Protocare Sciences	\$150,000				X	X	X						
<b>TOTAL</b>	<b>\$1,050,000</b>												
<b><u>LONG TERM CARE</u></b>													
<b><u>Promotional Materials</u></b>													
Sub-acute Care Seminars in Pain	\$60,000				X								
Sub-acute Visual Aids	\$10,000				X								
Nursing Programs Long-Term Care Advisory Board	\$120,000				X	X	X				X	X	X
"How to Report Pain, Not Issues to a Physician"	\$50,000				X	X	X						
<b>Medical Director</b>													
Managing Pain in the PPS Environment Series, A Collaboration with AMDA	\$100,000				X	X	X	X	X	X	X	X	X
Philadelphia College of Pharmacy Long-Term Care Treatment Guidelines In-Service	\$80,000				X	X	X						

PP 00330

OXYCONTIN Tablets Promotional Plan

Program	Total Cost: 2002	First Quarter			Second Quarter			Third Quarter			Fourth Quarter		
		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec
<b>Consultant Pharmacist</b>													
"Recent Advances: Nonclinical Guidelines for the Pain Management" Supplement	\$75,000	X	X	X									
<b>Case Managers</b>													
American Society of Consultant Pharmacists (annual meeting) Grant	\$19,000	X	X	X									
ASCP (mid-year) Grant	\$19,000							X	X	X			
<b>Home Healthcare</b>													
Two-point Supplement on Pain Management	\$132,145				X			X					
<b>TOTAL</b>	<b>\$665,145</b>												
<b>Agency Fees</b>													
LLNS	\$1,500,000	X	X	X	X	X	X	X	X	X	X	X	X
<b>TOTAL</b>	<b>\$1,500,000</b>												
<b>ANTI-DIVERSION</b>													
<b>Promotional Materials</b>													
<b>Pharmacist/Clinical Pharmacist</b>													
The RPh Role in Pain Management Compendium	\$100,000				X	X	X						
U.S. Pharmacist Supplement	\$85,000							X	X	X			

OXYCONTIN Tablets Promotional Plan

Program	Total Cost 2002	First Quarter			Second Quarter			Third Quarter			Fourth Quarter		
		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec
<b>Law Enforcement</b>													
"Do Not Crush" Stickers	\$180,000	X	X	X	X	X	X	X	X	X	X	X	X
Pain Advocate Reference Guide	\$200,000				X	X	X	X	X	X	X	X	X
General Antidiversion	\$100,000	X	X	X	X	X	X	X	X	X	X	X	X
Educational CD ROM on Abuse and Diversion	\$300,000				X	X	X						
Missed Opportunities Surveys: "Don't Forget to Ask"	\$40,000	X	X	X									
"Cage" Aid in Spotting Abuse	\$20,000				X	X	X						
<b>Pharmacist</b>													
Pharmacy Poster/Easel Sticker	\$40,000				X	X	X						
<b>Managed Care</b>													
How to Treat Pain Without Addiction	\$125,000							X	X	X			
<b>State Government/ Affairs</b>													
White Paper Electronic Prescription Monitoring Program	\$2,000							X	X	X			
<b>TOTAL</b>	<b>\$1,192,000</b>												
<b>Direct Mail</b>													
Direct Mail - Three-Wave Tamper Rx Mailer	\$320,000	X	X	X	X	X	X	X	X	X	X	X	X
<b>NAMs</b>													
"Keep it Safe" Mailing	\$125,000							X	X	X			

PP 00332

## OXYCONTIN Tablets Promotional Plan

Program	Total Cost, 2002	First Quarter			Second Quarter			Third Quarter			Fourth Quarter		
		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec
<b>TOTAL</b>	\$445,000												
<b>Special Promotion</b>													
Special Promo - Tamper Rx Program	\$2,100,000	X	X	X	X	X	X	X	X	X	X	X	X
<b>TOTAL</b>	\$2,100,000												
<b>GRAND TOTAL</b>	\$21,521,145												

PP 00333

Produced to: Connecticut  
Attorney General Richard Blumenthal

OXYCONTIN Tablets Promotional Plan

00-7

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
<u>Promotional Materials/Reorders</u>	To provide for reprinting of successful materials based on 2001 utilization and field force expansion. Includes outsert purchases used for promotional items and giveaways such as personal photos, etc.	Repeat	N/A	N/A	N/A	N/A	N/A	\$1,250,000	\$1,250,000	\$1,250,000	\$1,250,000	\$5,000,000
Premium	For high volume prescribers.	New	100,000				100,000	\$200,000				\$200,000
Pain Education Fact-a-Day Calendar	Discuss prevalence of pain in America.	New			100,000		100,000			\$440,000		\$440,000
Patient Patient P.I.	Develop a brochure containing patient P.I. Information to be distributed by physicians to patients receiving OxyContin.	New	200,000	200,000	200,000	200,000	800,000	\$20,000	\$20,000	\$20,000	\$20,000	\$80,000

Produced to: Connecticut  
Attorney General Richard Blumenthal

PP 00334

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
<b>Core Market</b>												
Oncology												
New OxyContin Visual Aid	OxyContin in oncology starting down the ladder.	New	50,000				50,000	\$100,000				\$100,000
OxyIR Moderate-Severe Comparison Visual Aid	Sales visual for OxyIR versus combos for p.r.n. moderate-severe cancer pain.	New	100,000		100,000		200,000	\$30,000		\$30,000		\$60,000
Oncologic Rehabilitation Visual Aid	Postsurgical procedures for patients leading to rehabilitation. Discuss OxyContin benefit for moderate/severe pain.	New		2,000			2,000		\$10,000			\$10,000
Oncologists/Pain Management Nurses ONS Grant	To produce a supplement to the Purdue-sponsored symposium.	New			30,000		30,000			\$22,000		\$22,000

Produced to: Connecticut  
Attorney General Richard Blumenthal

PP 00335

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
Primary Care Diabetic Neuropathy Reprint Carrier	Discussion on analgesic efficacy of OxyContin in managing moderate-severe neuropathic pain.	New	100,000				100,000	\$125,000				\$125,000
"Pathway to Pain Specialist" Series 1-4	Each quarter a new educational program focused on educating PCP on how to manage chronic moderate-severe pain, techniques, medications, addiction work with APS.	New	100,000	100,000	100,000	100,000	400,000	\$50,000	\$50,000	\$50,000	\$50,000	\$200,000
American Academy of Physician Assistants (AAPA) Grant	A grant to produce a supplement to the Purdue-sponsored symposia.				34,000		34,000			\$22,000		\$22,000
OxyContin Titration Step Pad	Use as office tool, but also provides information on titration.	Repeat	100,000				100,000	\$260,000				\$260,000
OxyContin Telephone Antibacterial Pad	Office premium that is strategically placed to remind the nurse/physician about OxyContin and the point of decision.	New	200,000				200,000	\$70,000				\$70,000

PP 00336

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
JCAHO PAP Patient to Comfort (PTC) Follow-up	Recommended by Dr. Sherry Siege. Carbon copy reassessment form to be filled out by patient and doctor. Support JCAHO. Add PAP website to pages.	New		200,000			200,000		\$50,000			\$50,000
2002 Pain Prescribing Guide	Compilation of all scheduled medications.	Repeat	TBD				TBD	\$140,000				\$140,000
Patients Rights CD ROM	Updated CD ROM version of hard copy to include other medications/therapy.	New	50,000				50,000	\$100,000				\$100,000
Internet E-Detailing Support Materials	Visual aid to support internet detailing program targeted to high prescribers of combination opioids with a branded OxyContin message.	New	TBD	TBD	TBD	TBD	TBD	\$62,500	\$62,500	\$62,500	\$62,500	\$250,000
TOTAL								\$2,407,500	\$1,442,500	\$1,896,500	\$1,382,500	7,129,000

Produced to: Connecticut  
 Attorney General Richard Blumenthal

PP 00337

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
<b>Special Programs</b>												
Partners Against Pain Programs	To expand the influence of PAP through public relations and unbranded influence with consumer initiatives.	Repeat	TBD	TBD	TBD	TBD	TBD	\$500,000	\$500,000	\$500,000	\$500,000	\$2,000,000
JCAHO Regional Program Sponsorship/Highlights	A series of regional educational materials will be coordinated with JCAHO and AHA. Purdue will underwrite the costs as well as publish the results to attendees.	Repeat	N/A	N/A	N/A	N/A	1,500	\$50,000	\$50,000	\$50,000	\$50,000	\$200,000
<b>Strategic Alliances</b>												
American Hospital Association Grant	A program in pain management efforts of the American Hospital Association and Purdue.	New	TBD	TBD	TBD	TBD	TBD	\$25,000	\$25,000	\$25,000	\$25,000	\$100,000
<b>TOTAL</b>								<b>\$575,000</b>	<b>\$575,000</b>	<b>\$575,000</b>	<b>\$575,000</b>	<b>\$2,300,000</b>

Produced to: Connecticut Attorney General Richard Blumenthal

PP 00338

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
<u>Direct Mail</u>												
PAP Mailing	Targeted to decile 8-10 OxyContin PA/RN/MDs to encourage continued pain management.	New	TBD	TBD	TBD	TBD	TBD	\$62,500	\$62,500	\$62,500	\$62,500	\$250,000
50 Million Reasons to Treat Pain Mailer	Designed to target/identify diversion areas with message of undertreatment.	New				200,000	200,000				\$300,000	\$300,000
TOTAL								\$62,500	\$62,500	\$62,500	\$362,500	\$550,000
<u>Journal Ad Production</u>	Creation of new ads which incorporate new FDA approved messages.	New	TBD		TBD		TBD	\$50,000		\$50,000		\$100,000
<u>Journal Advertising</u>	Expanded focus for 2002 to include RN/PA journals in LTC, ethnic read journals, universe health educationals, advertorials.	Repeat	TBD	TBD	TBD	TBD	TBD	\$625,000	\$625,000	\$625,000	\$625,000	\$2,500,000
TOTAL								\$675,000	\$625,000	\$675,000	\$625,000	\$2,600,000

PP 00339

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
<b>MANAGED CARE</b>												
<u>Promotional Materials</u>												
Case Managers Case Management Society of America (CMSA) Grant	A grant to provide a supplement to the Purdue-sponsored symposia at CMSA in 2002.	New	TBD	TBD	TBD	TBD	TBD	\$7,500	\$7,500	\$7,500	\$7,500	\$30,000
Publication Plan Quality Indicator	Healthcare resource.	New	TBD	TBD	TBD	TBD	TBD				\$200,000	\$200,000
Reorders	Designated to cover the cost of reprinting promotional materials for use by account executives.	Repeat	TBD	TBD	TBD	TBD	TBD	\$50,000	\$50,000	\$50,000	\$50,000	\$200,000
NCQA/HEDIS Report	A report publishing the importance of a pain management program in overall quality improvement.	Repeat			50,000		50,000			\$50,000		\$50,000
Prior Authorization Compendium	A booklet of prior authorization procedures for the top ten plans.	New		1,000			1,000		\$10,000			\$10,000

Produced to: Connecticut  
Attorney General Richard Blumenthal

PP 00340

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
HECON ICD Coding by Plan Brochure	To help providers properly code procedures to minimize cost to themselves and the plan.	New			100,000		100,000			\$100,000		\$100,000
Quality Improvement in Pain Management formkit.com	OxyContin updated formulary kit available on-line for P&T committee members of HMOs.	New	10,000				10,000		\$100,000			\$100,000
Reorders		Repeat	TBD	TBD	TBD	TBD	TBD	\$62,500	\$62,500	\$62,500	\$62,500	\$250,000
Business Plan Template/Toolbox		Repeat	N/A	N/A	N/A	N/A	N/A	\$200,000	\$200,000	\$200,000	\$200,000	\$800,000
<b>TOTAL</b>								<b>\$320,000</b>	<b>\$430,000</b>	<b>\$470,000</b>	<b>\$520,000</b>	<b>\$1,740,000</b>
<u>Journal Advertising</u>												
Journal Ads	Update corporate ads and expand circulation.	Repeat	TBD	TBD	TBD	TBD	TBD	\$62,500	\$62,500	\$62,500	\$62,500	\$250,000
<b>TOTAL</b>								<b>\$62,500</b>	<b>\$62,500</b>	<b>\$62,500</b>	<b>\$62,500</b>	<b>\$250,000</b>

PP 00341

Produced to: Connecticut  
Attorney General Richard Blumenthal

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
<u>Special Promotion</u>												
Quality Improvement in Pain Management Protocare Algorithms	A series of algorithms which can be applied to the MCO database for identifying specific areas of need in pain management education.	New	5 pilot projects				5 pilot projects	\$150,000				\$150,000
Initial Member Survey	A series of member surveys targeted to the key MCO accounts for the purpose of baseline overall satisfaction with pain management.	New		5 pilot projects			5 pilot projects		\$100,000			\$100,000
Initial Provider Survey	A series of provider surveys targeted to key MCOs for the purpose of baseline understanding of the level of education in pain assessment and management.	New		5 pilot projects			5 pilot projects		\$100,000			\$100,000

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
Quality Improvement Report	A reprint which summarizes the results of the baseline member/provider survey on pain management, which the MCO sends to the providers in their plan.	New			5 pilot projects		5 pilot projects			\$50,000		\$50,000
Action Plan Report	A report to the MCO from Purdue which outlines a plan of action recommended by Purdue to aid in provider education specific to the identified needs of the provider network.	New			5		5			\$50,000		\$50,000
Customized Quality Improvement Plan	A series of available educational materials, which will be customized with the plan logo, to aid in pain management education for providers.	New			TBD	TBD	TBD			\$125,000	\$125,000	\$250,000
Follow up Provider Survey	Provider survey to measure the effectiveness of the MCO quality improvement initiative on pain management education.	New		5 pilot projects			5 pilot projects		\$100,000			\$100,000

PP 00343

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
Protocare Sciences Patient/Provider Support Center	This pilot program would focus on education and compliance. It would utilize a 1-800 call center service offered to the MCO for patient questions to physicians regarding their pain management.	New		5 pilot projects			5 pilot projects		\$100,000			\$100,000
Protocare Sciences	A complete presentation binder on the quality improvement initiative for pain management.	New		150			150		\$150,000			\$150,000
<b>TOTAL</b>								\$150,000	\$550,000	\$225,000	\$125,000	\$1,050,000
<b><u>LONG TERM CARE</u></b>												
<b><u>Promotional Materials</u></b>												
Sub-acute Care Seminars in Pain	Support OxyContin use in postsurgical care and rehabilitation in SNF sub-acute care.	New		TBD			TBD		\$60,000			\$60,000

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
Sub-acute Visual Aids	Discussion advantages of OxyContin in management of moderate-severe pain in long-term care sub-acute pain.	New		2,000			2,000		\$10,000			\$10,000
Nursing Programs												
Long-Term Care Advisory Board	Introduce new ideas and solicit what they need.	New		N/A		N/A	N/A		\$60,000		\$60,000	\$120,000
"How to Report Pain, Not Issues to a Physician"	From Margo McCaffery, RN. A brochure that provides nurses with a pathway for reporting patient pain to doctor.	New		100,000			100,000		\$50,000			\$50,000
Medical Director												
Managing Pain in the PPS Environment Series, A Collaboration with AMDA	A series of quick reference cards designed to educate medical directors of long-term care facilities on the value of proper pain management in a PPS environment.	New		20,000			20,000		\$50,000	\$25,000	\$25,000	\$100,000
Philadelphia College of Pharmacy Long-Term Care Treatment Guidelines In-Service	A slide show and PowerPoint presentation on the relief paradigm.	New		500			500		\$80,000			\$80,000

PP 00345

Produced to: Connecticut  
Attorney General Richard Blumenthal

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
<b>Consultant Pharmacist</b>												
"Recent Advances: Nonclinical Guidelines for the Pain Management" Supplement	A supplement comparing and contrasting the evolution of long-term care pain management guidelines. The relief paradigm, AMDA, and AGS all compares.	New	140,000				140,000	\$75,000				\$75,000
<b>Case Managers</b>												
American Society of Consultant Pharmacists (annual meeting) Grant	A grant to provide a supplement to the Purdue-sponsored symposia at ASCP.	New	11,000				11,000	\$19,000				\$19,000
ASCP (mid-year) Grant	A grant to provide a supplement to the Purdue-sponsored symposia at ASCP.	New			11,000		11,000			\$19,000		\$19,000
<b>Home Healthcare</b>												
Two-point Supplement on Pain Management	Educate multidisciplinary team about proper pain management of the home healthcare patient.	New		70,000	70,000		140,000		\$69,550	\$62,595		\$132,145
<b>TOTAL</b>								\$94,000	\$379,550	\$106,595	\$85,000	\$665,145

PP 00346

Produced to: Connecticut Attorney General Richard Blumenthal

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
<u>Agency Fees</u>												
LLNS			N/A	N/A	N/A	N/A	N/A	\$375,000	\$375,000	\$375,000	\$375,000	\$1,500,000
TOTAL								\$375,000	\$375,000	\$375,000	\$375,000	\$1,500,000
<u>ANTI-DIVERSION</u>												
<u>Promotional Materials</u>												
Pharmacist/Clinical Pharmacist												
The RPh Role in Pain Management Compendium	A compendium of six articles focusing on the role of the pharmacist in the treatment of pain patients.	New		50,000			50,000		\$100,000			\$100,000
U.S. Pharmacist Supplement	Discussion on safekeeping of opioid/scheduled meds, tactics monitoring inventory.	New			100,000		100,000			\$85,000		\$85,000
Law Enforcement												
"Do Not Crush" Stickers	Stickers given to RPh to be placed on any prescription medication that should not be broken, chewed, or crushed.	New	55,000	55,000	55,000	55,000	220,000	\$45,000	\$45,000	\$45,000	\$45,000	\$180,000

PP 00347

Produced to: Connecticut Attorney General Richard Blumenthal

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
Pain Advocate Reference Guide	Reference guide given to law enforcement that compiles tablet picture identification, third party references, web addresses, topics of discussion with diversion contacts etc. NADD/SAMSHA data/DAWN. Includes photographs of physical	New		100,000	100,000	100,000	300,000		\$66,666	\$66,667	\$66,667	\$200,000
General Antidiversion	Use to reproduce materials and additional education programs.	New	TBD	TBD	TBD	TBD	TBD	\$25,000	\$25,000	\$25,000	\$25,000	\$100,000
Educational CD ROM on Abuse and Diversion	Working with Steeprook to produce educational series on "Reducing Misuse, Abuse, and Diversion of Opioids through Internet Education."	New		100,000			100,000		\$300,000			\$300,000
Missed Opportunities Surveys: "Don't Forget to Ask"	Companion aid to physical signs of abuse pictures provide selected questions to ask based on survey.	New	TBD				TBD	\$40,000				\$40,000

PP 00348

Submitted to: Connecticut  
 Department of Mental Health

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
"Cage" Aid in Spotting Abuse	Poster to be hung in physician offices, pharmacies, ER Rooms. Questionnaire and diagram to educate practitioner on how to find abusers.	New		100,000			100,000		\$20,000			\$20,000
Pharmacist Pharmacy Poster/Easel Sticker	Template to be used with NAMs: display pharmacy for patients to see protective measures pharmacy is taking to ensure proper dispensing of medications.	New		100,000			100,000		\$40,000			\$40,000
Managed Care How to Treat Pain Without Addiction	Sid Scroll program identifying medical signs of drug abuse. How to manage, and discussion on Samsha, NADDI data and DAWN.	New			100,000		100,000			\$125,000		\$125,000
State Government/ Affairs White Paper Electronic Prescription Monitoring Program	A review of the benefits of a monitoring program for states that currently have one. Positives versus negatives.	New		500			500			\$2,000		\$2,000

PP 00349

Produced to: Connecticut Attorney General Richard Blumenthal

OXYCONTIN Tablets Promotional Plan

Program	Usage	New or Repeat	1st Qtr. No. Pieces	2nd Qtr. No. Pieces	3rd Qtr. No. Pieces	4th Qtr. No. Pieces	Total Pieces 2002	1st Qtr. Cost	2nd Qtr. Cost	3rd Qtr. Cost	4th Qtr. Cost	Total Cost 2002
TOTAL								\$110,000	\$596,666	\$348,667	\$136,667	\$1,192,000
<u>Direct Mail</u>												
Direct Mail - Three-Wave Tamper Rx Mailer	Inform physicians about program.	New	TBD	TBD	TBD	TBD	TBD	\$80,000	\$80,000	\$80,000	\$80,000	\$320,000
NAMs "Keep it Safe" Mailing	Wholesaler mailing to retail pharmacists about ways to protect medication, proper filling out of Form 222 on how to return and dispose of medications.	New			100,000		100,000			\$125,000		\$125,000
TOTAL								\$80,000	\$80,000	\$205,000	\$80,000	\$445,000
<u>Special Promotion</u>												
Special Promo - Tamper Rx Program	Provide prescribers with free tamper Rx pads quarterly.	New	TBD	TBD	TBD	TBD	TBD	\$525,000	\$525,000	\$525,000	\$525,000	\$2,100,000
TOTAL								\$525,000	\$525,000	\$525,000	\$525,000	\$2,100,000
GRAND TOTAL								\$5,436,500	\$5,703,716	\$5,526,762	\$4,854,167	\$21,120,035

V. Total S&P Overview  
(000s)  
MS CONTIN / OXYCONTIN\*

	MSC 2001		MSC 2002		OXY 2001		OXY 2002		Combined	
	Est.	% of Sales	Proj.	% of Sales	Est.	% of Sales	Proj.	% of Sales	MSC+ OXY 2002	% of Sales
Sales	\$136,876	100%	\$81,912	100%	\$1,325,844	100%	\$1,187,982	100%	\$1,269,894	100.0%
<b>Marketing &amp; Promotion</b>										
Promotional Materials	\$1,400	1.0%	\$1,100	1.3%	\$11,322	0.9%	\$10,726	0.9%	\$11,826	0.9%
Direct Mail	\$216	0.2%	\$260	0.3%	\$2,121	0.2%	\$995	0.1%	\$1,255	0.1%
Journal Advertising	\$0	0.0%	\$0	0.0%	\$3,175	0.2%	\$2,750	0.2%	\$2,750	0.2%
Journal Ad Production	\$0	0.0%	\$0	0.0%	\$116	0.0%	\$100	0.0%	\$100	0.0%
<b>Total Direct Mail/Journal Advertising</b>	\$216	0.2%	\$260	0.3%	\$5,412	0.4%	\$3,845	0.3%	\$4,105	0.3%
Samples	\$0	0.0%	\$0	0.0%	\$0	0.0%	\$0	0.0%	\$0	0.0%
Agency Fee	\$0	0.0%	\$0	0.0%	\$2,060	0.2%	\$1,500	0.1%	\$1,500	0.1%
Special Promotions	(\$47)	0.0%	\$0	0.0%	\$5,211	0.4%	\$5,450	0.5%	\$5,450	0.4%
Co-op Advertising	\$0	0.0%	\$0	0.0%	\$0	0.1%	\$0	0.0%	\$0	0.0%
Conventions	\$109	0.1%	\$266	0.3%	\$1,814	7.2%	\$1,796	0.2%	\$2,062	0.2%
Sales Agent Commission	\$0	0.0%	\$0	0.0%	\$95,903	7.2%	\$95,039	8.0%	\$95,039	7.5%
<b>Total Marketing &amp; Promotion</b>	\$1,678	1.2%	\$1,626	2.0%	\$121,722	9.2%	\$118,356	10.0%	\$119,982	9.4%
<b>Total Allocation</b>	\$6,346	4.6%	\$785	1.0%	\$142,569	10.8%	\$128,202	10.8%	\$128,987	10.2%
<b>Total S&amp;P</b>	\$8,024	5.9%	\$2,411	2.9%	\$264,291	19.9%	\$246,558	20.8%	\$248,969	19.6%

\* Includes MHC and LTC

V. Total S&P Overview  
(000s)  
OXYCONTIN\*

	2000		2001		2002		% Change	
	Actual	% of Sales	Est.	% of Sales	Proj.	% of Sales	01/00	02/01
Sales	\$1,081,457	100%	\$1,325,844	100%	\$1,187,982	100%	22.6%	-10.4%
<b>Marketing &amp; Promotion</b>								
Promotional Materials	\$7,545	0.7%	\$11,322	0.9%	\$10,726	0.9%	50.1%	-5.3%
Direct Mail	\$491	0.0%	\$2,121	0.2%	\$995	0.1%	332.0%	-53.1%
Journal Advertising	\$4,534	0.4%	\$3,175	0.2%	\$2,750	0.2%	-30.0%	-13.4%
Journal Ad Production	\$61	0.0%	\$116	0.0%	\$100	0.0%	90.2%	-13.8%
<b>Total Direct Mail/Journal Advertising</b>	<b>\$5,086</b>	<b>0.5%</b>	<b>\$5,412</b>	<b>0.4%</b>	<b>\$3,845</b>	<b>0.3%</b>	<b>6.4%</b>	<b>-29.0%</b>
Samples	\$0	0.0%	\$0	0.0%	\$0	0.0%	N/A	N/A
Agency Fee	\$1,418	0.1%	\$2,060	0.2%	\$1,500	0.1%	45.3%	-27.2%
Special Promotions	\$3,066	0.3%	\$5,211	0.4%	\$5,450	0.5%	70.0%	4.6%
Co-op Advertising	\$0	0.0%	\$0	0.0%	\$0	0.0%	N/A	N/A
Conventions	\$1,863	0.2%	\$1,814	0.1%	\$1,796	0.2%	-2.6%	-1.0%
Abbott Commission	\$76,267	7.1%	\$95,903	7.2%	\$95,039	8.0%	25.7%	-0.9%
<b>Total Marketing &amp; Promotion</b>	<b>\$95,245</b>	<b>8.8%</b>	<b>\$121,722</b>	<b>9.2%</b>	<b>\$118,356</b>	<b>10.0%</b>	<b>27.8%</b>	<b>-2.8%</b>
<b>Total Allocation &amp; Other</b>	<b>\$145,335</b>	<b>13.4%</b>	<b>\$142,569</b>	<b>10.8%</b>	<b>\$128,202</b>	<b>10.8%</b>	<b>-1.9%</b>	<b>-10.1%</b>
<b>Total S&amp;P</b>	<b>\$240,580</b>	<b>22.2%</b>	<b>\$264,291</b>	<b>19.9%</b>	<b>\$246,558</b>	<b>20.8%</b>	<b>9.9%</b>	<b>-6.7%</b>

\* Includes MHC and LTC

PP 00351

Produced to: Connecticut  
Attorney General Richard Blumenthal

V. Total S&P Overview  
(000s)  
MS CONTIN / OXYCONTIN\*

	MSC 2001		MSC 2002		OXY 2001		OXY 2002		Combined	
	Est.	% of Sales	Proj.	% of Sales	Est.	% of Sales	Proj.	% of Sales	MSC+ OXY 2002	% of Sales
<b>Sales</b>	\$136,876	100%	\$81,912	100%	\$1,325,844	100%	\$1,187,982	100%	\$1,269,894	100.0%
<b>Marketing &amp; Promotion</b>										
Promotional Materials	\$1,400	1.0%	\$1,100	1.3%	\$11,322	0.9%	\$10,726	0.9%	\$11,826	0.9%
Direct Mail	\$216	0.2%	\$260	0.3%	\$2,121	0.2%	\$995	0.1%	\$1,255	0.1%
Journal Advertising	\$0	0.0%	\$0	0.0%	\$3,175	0.2%	\$2,750	0.2%	\$2,750	0.2%
Journal Ad Production	\$0	0.0%	\$0	0.0%	\$116	0.0%	\$100	0.0%	\$100	0.0%
<b>Total Direct Mail/Journal Advertising</b>	\$216	0.2%	\$260	0.3%	\$5,412	0.4%	\$3,845	0.3%	\$4,105	0.3%
Samples	\$0	0.0%	\$0	0.0%	\$0	0.0%	\$0	0.0%	\$0	0.0%
Agency Fee	\$0	0.0%	\$0	0.0%	\$2,060	0.2%	\$1,500	0.1%	\$1,500	0.1%
Special Promotions	(\$47)	0.0%	\$0	0.0%	\$5,211	0.4%	\$5,450	0.5%	\$5,450	0.4%
Co-op Advertising	\$0	0.0%	\$0	0.0%	\$0	0.1%	\$0	0.0%	\$0	0.0%
Conventions	\$109	0.1%	\$266	0.3%	\$1,814	7.2%	\$1,796	0.2%	\$2,062	0.2%
Sales Agent Commission	\$0	0.0%	\$0	0.0%	\$95,903	7.2%	\$95,039	8.0%	\$95,039	7.5%
<b>Total Marketing &amp; Promotion</b>	\$1,678	1.2%	\$1,626	2.0%	\$121,722	9.2%	\$118,356	10.0%	\$119,982	9.4%
<b>Total Allocation</b>	\$6,346	4.6%	\$785	1.0%	\$142,569	10.8%	\$128,202	10.8%	\$128,987	10.2%
<b>Total S&amp;P</b>	\$8,024	5.9%	\$2,411	2.9%	\$264,291	19.9%	\$246,558	20.8%	\$248,969	19.6%

\* Includes MHC and LTC

Produced to: Connecticut  
Attorney General Richard Blumenthal

PP 00352

volume of prescriptions being written for these combination opioids such as Percocet, Vicodin®, Lorcet® and Darvocet-N®, moderate to severe pain remains grossly undertreated. (Pain in America Survey). The short duration of action of these oral products causes peaks and valleys in blood levels, which can contribute to increased side effects and poor, inconsistent pain control. The short duration of action is also problematic for patients who need around-the-clock dosing of their pain medication. Dosing every four-to-six hours does not allow a patient to sleep through the night, or participate easily in many normal activities. The combination of an opioid with APAP or ASA limits the number of tablets that can be prescribed because of potential liver or gastrointestinal toxicity. The APAP or ASA component also has the potential to mask fever in patients with cancer and infections. All of these factors, associated with the choice of opioid analgesics in Step 2, as well as the large dollar and prescription volume of this class of drugs, provide a continuing opportunity for a single-entity, long-acting oxycodone product to treat moderate to severe pain of an extended duration, OxyContin Tablets.

- Percocet®

Endo Pharmaceuticals launched line extensions of Percocet in February 2000. These line extensions of the 2.5 mg, 7.5 mg and 10 mg tablet formulations was launched to capitalize on the success of oxycodone made possible by OxyContin Tablets. In 2001 prescriptions for the new dosage strengths of Percocet contributed to growth of the entire brand by over 1million prescriptions.

### C. Single Entity Opioids

Long-acting morphine and transdermal fentanyl provide physicians with two long-acting products to meet the needs of patients with moderately severe to severe pain. However, these products possess disadvantages such as the stigma that surrounds morphine and the reluctance of physicians, nurses, and pharmacists to use them. Hydromorphone is considered a potent opioid analgesic, but has been limited in its use for chronic pain due to the need to dose it at least every six hours for consistent around-the-clock pain relief. OxyContin Tablets will continue to be utilized for severe pain, as evidenced by an increase in the sales volume of the 40 mg and 80 mg OxyContin Tablet strengths during 2001.

- MS Contin Tablets/Generic Sustained Release Morphine

- MS Contin Tablets had been considered the gold standard for treating moderate to severe cancer pain. In fact, some physicians,



particularly oncologists, continue to switch patients with more severe pain from OxyContin Tablets to MS Contin Tablets. In spite of stiff competition from Duragesic<sup>®</sup>, Oramorph SR<sup>®</sup>, OxyContin Tablets and generic sustained-release morphine (Endo's AB rated generic), MS Contin Tablets prescriptions have continued to exceed expectations. Total prescriptions for MS Contin (Jan-Jun '00 compared to Jan-Jun '01) grew by 0.8%.

- MS Contin prescriptions, plus our generic prescriptions, have decreased 4.0% (16,877) Jan-Jun '00 compared to Jan-June '01.
- Generic sustained release morphine continues to be an alternative that decreases the cost of opioid therapy with q12h dosing. An AB-rated generic to MS Contin is produced by Endo. When distribution is adequate, it is likely that a "maximum allowable charge" (MAC) will be developed for MS Contin Tablets, increasing significantly the rate of substitution. To date the MAC has not occurred; however, it was proposed and delayed in 2000. In addition, generic MSER has now captured approximately 33.8% of the prescription volume of the long-acting morphine category.

For the first six months ending June '01 versus the same time period last year, the SR morphine category of prescriptions grew by 19.6% (144,909).

Total prescriptions of generic sustained-release morphines are shown in the tables below.

REDACTED

PP 00311

REDACTED

- Duragesic

Janssen has been targeting the moderate-to-moderately severe pain market for the past two-to-three years. Their progress has been slow but steady in obtaining patients coming directly from fixed combination opioids, as they stress convenience, lower side effects (particularly constipation), and increased quality of life. In 2001 Janssen is continuing to seek to replace Vicodin, Percocet, OxyContin Tablets and MS Contin Tablets prescriptions. Janssen has been expected to gain FDA approval for a 12.5-mcg patch, but this has not occurred to date. It is expected to be promoted as a titration and early entry dosage form used to capture earlier starts for patients. The 12.5 mg strength is also being studied in pediatric patients and, if successful, is expected to extend the patent life of Duragesic through December 2004.

Field reports have revealed at least one direct head-to-head study of Duragesic and OxyContin Tablets in nonmalignant pain. In addition, it has been reported that Janssen sales representatives are using improper techniques to capitalize on the negative press surrounding OxyContin Tablets and the issue of abuse and diversion. Janssen also published an article in the Journal of Pain and Symptom Management in 2001 that attempted to show improved pharmacoeconomic benefit for Duragesic. Janssen is utilizing this data in the managed care setting.

Janssen has a dedicated sales force targeted specifically to the long-term care (LTC) market. In addition to marketing Duragesic, they are promoting Ultram® for Ortho-McNeil in this market. Ultram is provided as a Step 1 to Step 2 analgesic, while Duragesic is promoted as a Step 2 to Step 3 analgesic.

Janssen has been stressing decreased side effects, especially constipation, as well as patient quality of life, as supported by patient

PP 00312

ratings compared to sustained release morphine. We do not have such data to support OxyContin promotion. They have expanded their patient preference claims to oral opioids. In addition, Janssen has been using the "life uninterrupted" message in promotion of Duragesic for non-cancer pain, stressing that Duragesic "helps patients think less about their pain." This is a competitive advantage based on our inability to make any quality of life claims.

Due to the above, it is likely that Janssen will continue to target primary care physicians (internists and selected family practice physicians), as well as oncologists. We estimate that their 2001 journal spend will be approximately \$300,000 based on \$75,000 in journal spend January-March 2001. This compares to \$494,000 spent in 2000.

- Kadian®

In 2001 Faulding continues active promotion of Kadian. The promotion of Kadian centers on its 24-hour dosing, its sprinkle formulation, and cost effectiveness. In addition, Kadian added the indication for use in NG tubes and began promotion in late 2000. Field reports indicate comparative studies of OxyContin vs. Kadian in progress.

Faulding's main program to support Kadian has been the continuation of their "Script Voucher" program with a free 30-capsule supply of Kadian at the retail pharmacy.

Kadian prescriptions have increased 70.8% (+51,714) year-to-date Jan-June 2001. Kadian prescriptions averaged 8,619 per month for the time period Jan-June 2001. Recent weekly data indicate a sharp increase in Kadian prescriptions. For the week ending July 27, 2001, weekly prescriptions are up 94.6%. Kadian is now available in 20, 30, 50, 60 and 100 mg capsules for patient convenience and dosing flexibility. The 30 and 60 mg strengths allow for easier conversion for patients initially on MS Contin. In addition, recent promotional messages for Kadian include the addition of conditions such as failed back, chronic musculoskeletal disorders, degenerative joint disease, rheumatoid arthritis and ankylosing spondylitis, clearly a move to capture a greater share of the non-cancer pain market.

- Oramorph SR®

The future promotion of Oramorph by Roxane is uncertain. In 2001 it was announced that the Roxane division of Boeringer Ingelheim (B.I.) was available for acquisition. Assuming acquisition by another competing company does not take place, B.I./Roxane is expected to

PP 00313

continue promotion of Oramorph SR by positioning it as a cost-effective alternative to MS Contin. Individual Roxane representatives are also promoting Oramorph SR as a cost effective alternative to OxyContin Tablets, utilizing a 1:1 conversion of morphine to oxycodone.

During 2001 Roxane continues an Oramorph SR promotion that combines promotion of their pain products with other palliative care products under a Roxane Palliative Care Products umbrella.

As a result of the continued promotion of Oramorph SR versus MS Contin and MSER, Oramorph SR prescriptions increased 3.8% to a total of 136,283 (Jan-June 2001), an increase of approximately 5,000 prescriptions.

A press release by Elan announced a portfolio of pain management products from Roxane Laboratories, Inc., a subsidiary of the Boehringer Ingelheim Corporation. These products are marketed in the United States and generated in excess of \$50 million in revenue for 2000. The portfolio of products includes Roxicodone™ immediate release oxycodone hydrochloride and Oramorph SR® (sustained release morphine sulfate).

- PCA Pumps

The 2000 sales of injectable morphine were \$78,441,000 a decrease of approximately 1.8% from 1999. Market research lists PCA pumps as a form of cancer pain management used (along with MS Contin Tablets and Duragesic) when OxyContin Tablets is perceived to be ineffective, no longer tolerated, or the patient has problems swallowing pills. While a percentage of the patients changed to PCA pumps may not be able to swallow, it is likely that a number of patients were switched to a PCA pump strictly due to lack of perceived OxyContin Tablets efficacy, or reimbursement issues.

Medtronic aggressively promotes their implantable pump (Synchoromed) in the hospice market, as well as for other chronic pain patients. For non-hospice patients reimbursement issues can play a key role. Medicare will pay for pump implantation as well as the medication refills. Medicare does not reimburse for oral analgesics like OxyContin Tablets; however, the debate regarding a Medicare drug benefit in Congress continues.

In the post-operative patient OxyContin Tablets are positioned for post-PCA pain management. A clinical study (Ginsberg) has supported OxyContin Tablets use in the post-operative patient; however, our promotion is limited to the approved labeling, which is limited. The recent FDA required revisions to the OxyContin prescribing information support our continued promotion in the postoperative

setting. Abbott Laboratories retains main responsibility for the postoperative market; however, they also continue to promote Vicoprofen in the 12-24 hour position prior to the initiation of OxyContin Tablets. Knoll, the manufacturer of Vicoprofen, is now a division of Abbott Laboratories after the acquisition of Knoll by Abbott in late 2000 to early 2001.

D. OxyContin Future Opportunities

New Labeling Approved July 2001

The action by the FDA to clarify the OxyContin Tablets labeling has created enormous opportunities. In effect, the FDA has expanded the indication for OxyContin Tablets to any patient with moderate to severe around-the-clock persistent pain, provided that the pain is moderate to severe, and expected to be for an extended duration. This broad labeling is likely to never again be available for an opioid seeking FDA approval. This may give OxyContin Tablets a competitive advantage. This is a positive action which helps to combat the negative reports perpetuated by the media.

- JCAHO Pain Management Initiative

JCAHO (Joint Commission Agency that accredits hospitals) will continue to be the focus of a major initiative focusing on pain assessment and treatment. Purdue has taken a major leadership role in helping hospitals meet the JCAHO requirements in this area through the development of pain assessment and pain management materials geared to the hospital setting.

Purdue supported the educational efforts of the JCAHO in an exclusive agreement throughout 2001 by supporting two pain summits and seven regional educational symposia. Purdue also supported the development of a video series to educate providers, as well as education for the JCAHO pain summits with unrestricted educational grants.

Another significant opportunity presents itself in 2002 for Purdue to support the efforts of JCAHO. This initiative represents an opportunity to provide true value-added education on pain management and, at the same time, continue Purdue's leadership in pain management. As a whole, the JCAHO initiative has provided the field force with many opportunities to conduct in-service presentations and to position OxyContin appropriately for pain.

PP 00315

E. Expected Competitive Entries in 2002

The promotional objective for OxyContin Tablets will be to defend our market position against new competitive entries with the exception of Palladone and Norspan Transdermal System, in both cancer and non-cancer pain, and enable continued growth of OxyContin Tablets in both the cancer and non-cancer pain markets.

Potential new competitors in 2002 include:

- Dilaudid SR

Knoll Pharmaceuticals received an approvable letter for controlled-release hydromorphone in early 2000. The NDA for the Dilaudid SR formulation is now owned by Abbott Laboratories. If launched, Dilaudid SR poses an additional threat to OxyContin.

- Ziconitide

An NDA for ziconitide (SNX 111) was approved in July 2000. Ziconitide is marketed by Elan. New information indicates a substantial delay due to toxicity issues in the introduction of ziconitide for intractable neuropathic pain. Should ziconitide launch in 2002, it will present a challenge to OxyContin by competing for neuropathic pain patients, who are currently on high doses of opioid to treat their pain. Ziconitide will be prescribed by anesthesiologists who currently employ the use of the implantable pump.

- Morphelan

Elan Pharmaceuticals is developing a Q24hour oral formulation of morphine sulfate. Market research reports have indicated that an NDA for this formulation was filed in the US in May 2000. It is expected that approval could be granted sometime in 2002. This formulation will be marketed by Ligand, Inc. who has the license for Morphelan in the US and Canada.

- OxyMorphone Q12H

Endo Pharmaceuticals is expected to file the NDA for their Q12h oxymorphone product in the fourth Quarter of 2001. Assuming a 10-12 month review by the FDA, this product could be available in the Fourth Quarter of 2002. Reports in the literature and from the field indicate that the Q12h oxymorphone product claims of efficacy will be due to the pro-drug issue. There is limited evidence of the oxycodone

PP 00316

to oxymorphone pro-drug conversion for efficacy; however, we must be prepared for this in 2002.

F. Managed Care

MCOs have adopted multi-tiered formularies to encourage the use of generics and less expensive, preferred brands. As drug costs continue to rise, MCOs are finding ways to share costs. Three-tiered copayments require consumers to pay a larger co-pay out of pocket for a drug of choice. In a typical formulary structure, generic drugs are in the lowest tier, formulary brands are in the middle tier, and nonformulary brand products are in the highest tier. Drugs in tier 1 cost the consumer an average of \$5 to \$10; drugs in tier 2 cost \$15-\$20, and drugs in tier 3 cost \$35-\$50. The introduction of new tiers will further shift costs to consumers. An example is a 5-tier plan being contemplated by Express Scripts.

Multi-tiered financial incentives encourage physicians to write less expensive products, even when a more expensive product is clinically superior. Clinical presentations must be supported with an economic message such as reducing long-term costs. Managed Care organizations have also taken action requiring prior authorization for OxyContin based on the negative press and their misunderstanding of the issues of abuse and diversion. Other actions such as limiting the number of tablets per prescription and thus, per month, via formulary enforcement will also create barriers to OxyContin being able to achieve significant growth in 2002.

PP 00317

### III. PRODUCT INITIATIVES

#### A. Objectives

- To achieve \$1.2 billion in factory sales.
- To protect our market share from existing competitors and the negative media.
- To continue to expand OxyContin Tablets use in the non-malignant pain market.
- To further establish OxyContin Tablets as the opioid of choice in Step 2 of the WHO analgesic ladder by positioning it as the opioid for moderate to severe persistent cancer and non-cancer pain of an extended duration.
- Support the acceptance of opioids for non-cancer pain through educational and public relation efforts.
- Continue to aggressively educate physicians on actions they can take to limit abuse and diversion of prescription products including OxyContin Tablets.
- Expand the use of OxyContin Tablets in patients with moderate to severe pain of an extended duration due to osteoarthritis and diabetic neuropathy.

#### B. Product Attributes/Core Messages

- The analgesic efficacy of immediate-release oxycodone. The familiarity of physicians with oxycodone is an important part of the message and has led to rapid acceptance. This familiarity is a principal factor that should lead to continued growth of OxyContin Tablets.
- Onset within one hour, comparable to immediate-release oxycodone. Recent market research focus groups, discussing product attributes, indicated OxyContin Tablets is perceived as being very effective, with a lower side effect profile than its competitors and with a favorable dosing schedule. The onset of action message is very important in the post-operative pain market.
- When an opioid naïve patient with moderate to severe pain needs an opioid analgesic, physicians should prescribe OxyContin Tablets. The many benefits of OxyContin Tablets make it logical as the next step for patients who would otherwise be started on Percocet, Lortab<sup>®</sup>, Vicodin, Tylenol<sup>®</sup> #3 or Darvocet under WHO Step 2. OxyContin Tablets are also appropriate for proper titration as the disease progresses.
- In 2002 OxyContin Tablets will continue to be promoted for use in the non-malignant pain market. The most common diagnoses that result in non-malignant pain are back pain, osteoarthritis, injury, and trauma. The major competitors for these diagnoses will be oxycodone and hydrocodone combination products.

- A single agent OxyContin Tablets is a single entity opioid agent without the dosing limitations present in products that are fixed combinations of an opioid and a second agent such as acetaminophen, aspirin, ibuprofen, or dextromethorphan for patients with moderate to severe pain that is expected to be for an extended duration. There is added dosing flexibility with a single agent, since a variety of co-analgesics and adjuvant medications can be used to enhance the individual patient's pain relief, while having the freedom to dose OxyContin Tablets as high as is clinically necessary. There is also a decreased risk of organ toxicity, compared to products containing acetaminophen, aspirin, or ibuprofen.

#### C. Competition

- Combination opioids, including (oxycodone, hydrocodone, codeine, and propoxephine with APAP, ibuprofen, ASA and the Percocet 2.5 mg, 7.5 mg, and 10 mg): moderate-to-moderately severe pain (Step 2 of the WHO ladder), when such combinations are used for patients that present with the same indication as OxyContin.
- Duragesic: cancer and non-cancer pain. Possible approval of Duragesic 12.5 mg in non-cancer pain.
- Actiq: Fentanyl oralette used for breakthrough cancer pain.
- Methadone: Market research, as well as reports from the sales force, indicate that methadone use is increasing in both the management of cancer pain and non-malignant pain due to its low cost. Clinical studies have also been published over the last year regarding the effective use of methadone for cancer pain management. While not yet a serious competitor, this trend needs to be monitored.
- Generic morphine sulfate extended release

#### D. Communication Objectives

- Recently completed clinical trials in the management of pain due to osteoarthritis have produced significant data for OxyContin Tablets regarding increased patient function. Future promotional objectives will be to communicate this data to health care professionals.
- Recent clinical trial results of OxyContin in the management of diabetic neuropathy will also be utilized in the future. Combined with the results in post-herpetic neuropathy, this is strong support for use of OxyContin in selected patients with neuropathic pain.
- Convince MDs to prescribe OxyContin Tablets, instead of combination opioids for opioid-naïve or opioid-exposed patients with moderate-to-severe pain lasting for an extended period of time. Through proper dosing and titration, eliminate or delay the need for other long-acting opioids.

PP 00319

- Broaden OxyContin Tablets usage in the management of pain due to various causes (e.g., back pain, osteoarthritis, neuropathic pain, post-operative pain, etc.) will be stressed.
- Convince health care professionals (physicians, nurses, pharmacists, and managed health care professionals) to aggressively assess and treat both non-cancer pain and cancer pain. The positive use of opioids will be stressed, with particular emphasis on OxyContin Tablets.
- Convince patients and their families to actively pursue effective pain relief. The importance of patients assessing their own pain and communicating the status to the health care giver will be stressed.
- Aggressively educate physicians regarding abuse and diversion to help minimize the misuse and abuse of OxyContin Tablets.

E. Evolution of OxyContin Tablets

OxyContin Tablets is expected to achieve \$1.2 billion in factory sales in 2001. Given the new millennium and the significant achievement of the OxyContin Tablets brand, it is important to examine the history of OxyContin Tablets in order to understand the future of the brand.

Future Evolution of OxyContin Tablets Brand

In spite of impending competitive threats, the future for OxyContin Tablets is very bright. Future growth of OxyContin Tablets will be achieved through targeted efforts to penetrate:

- Primary Care
- Rheumatology
- OB/GYN
- Surgical
- Oncology
- Sports/Physical Medicine/Rehabilitation

The promotional campaign utilized to achieve further market penetration in the above-mentioned categories will be a pronouncement of the widespread success of the OxyContin Tablets brand to treat various types of moderate to severe pain states. A focus on the documented clinical success will be the bridge used to raise awareness and interest in OxyContin Tablets. In addition, a focus on intermittent versus persistent pain will be a key positioning tactic used to gain physician starts with OxyContin Tablets. A continued focus on the benefits of around-the-clock pain control with the flexibility of q12h dosing will be critical to differentiate OxyContin Tablets from current and future competitors. The flexibility of q12h in terms of patient titration along with the analgesic onset and quality of life claims will be expanded and reinforced with new clinical data.

PP 00320

The promotional message in non-cancer pain will focus on patients whose pain is currently not controlled on current medications or combination opioids taken on a p.r.n. basis and who meets the conditions of the approved indication. OxyContin Tablets provides the logical next step in these patients based on their persistent or around-the-clock pain. The message in cancer pain will focus on patients who are uncontrolled on p.r.n. combination opioids or maximum doses of Ultram SR.

The promotional message in non-cancer pain will focus on the value of OxyContin Tablets in improving quality of life, mood, and sleep.

PP 00321

F. Target Audiences

1. Primary Audiences

Audiences	Site	Targets	Frequency	Comments	Total Calls Required
A. Physicians (Primary) <ul style="list-style-type: none"> <li>• IMs</li> <li>• FP/GPs</li> <li>• DOs</li> <li>• ANS</li> <li>• Oncologists</li> <li>• Surgeons</li> <li>• Physical Medicine</li> <li>• Neurologists</li> <li>• Rheumatologists</li> <li>• OB/GYN</li> <li>• Other</li> </ul>	<ul style="list-style-type: none"> <li>• Office and Hospital</li> </ul>	80,000	5	<u>Target List</u> Contains 100% of decile 10 and 50% of decile 9 combo and single entity unique prescribers	400K
		77,500	2	<u>Target List</u> Contains 50% of decile 9, and 100% of decile 8 combo and single entity unique prescribers.	155K
B. Nurses (Secondary) <ul style="list-style-type: none"> <li>• Oncology RNs</li> <li>• Nurse Practitioners</li> <li>• Physician Assistants</li> </ul>	<ul style="list-style-type: none"> <li>• Hospice</li> <li>• Home Care</li> <li>• Office</li> <li>• Hospital</li> </ul>	27,000			
C. Managed Care Organizations <ul style="list-style-type: none"> <li>• Directors of Pharmacy</li> <li>• Clinical Pharmacists</li> <li>• Case Managers</li> <li>• Quality Assurance Managers</li> <li>• Other</li> </ul>	<ul style="list-style-type: none"> <li>• Managed Care Facilities</li> </ul>	TBD		<ul style="list-style-type: none"> <li>• PBMs</li> <li>• IPAs</li> <li>• Staff Models</li> <li>• IHN</li> </ul>	
D. Long-Term Care <ul style="list-style-type: none"> <li>• Consultant Pharmacists</li> <li>• Nursing Home MDs and RNs</li> </ul>	<ul style="list-style-type: none"> <li>• Long-Term Care Facilities</li> </ul>	6,000 10,000		Influential decision-makers at LTC facilities and corporate level nursing home chains	

PP 00322

2. Secondary Audiences

Secondary Audiences	Site	Targets	Comments
A. Patients and Caregivers			
B. Residents/Fellows	Teaching Hospitals	TBD	Provides the ability to influence physicians still in training. Chief Residents can be especially influential in teaching facilities.
C. Wholesalers		150	
D. Pharmacies	<ul style="list-style-type: none"> <li>• Hospital</li> <li>• Retail</li> </ul>	6,000 60,000	To assure appropriate stocking of the four dosage strengths.

PP 00323