DISCOVERIES FOR HEALTHIER LIVES

REDUCING THE RISK OF NVAF-RELATED STROKES

"With a population that is living longer, the prevalence of nonvalvular atrial fibrillation is increasing, but many patients are still not being managed effectively with warfarin."

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ELIQUIS® PROVIDING AN ALTERNATIVE TO WARFARIN

Eliquis (apixaban) is a novel oral anticoagulant (NOAC) jointly developed by Pfizer and Bristol-Myers Squibb (BMS). Eliquis was approved in the United States and the European Union in 2012 to reduce the risk of stroke and blood clots in people who have nonvalvular atrial fibrillation (NVAF), a type of irregular heartbeat, not caused by a heart valve problem.

Although it was launched third in the NOAC class, Eliquis has gained significant momentum worldwide due to its differentiated efficacy and safety profile versus warfarin.

Another key element of success for Eliquis has been the strong partnership between BMS and Pfizer from clinical development of the asset to its commercialization. Due largely to this successful partnership, Eliquis has recently become the number one NOAC prescribed by cardiologists for new to brand patients in the United States, Japan and several other major markets.

In 2014, the European Commission and the U.S. Food and Drug Administration approved Eliquis for new indications in the EU and the U.S. to treat blood clots in the veins of the legs (deep vein thrombosis) or lungs (pulmonary embolism), and reduce the risk of them occurring again. In the U.S., additional indications to reduce the risk of forming a blood clot in the legs and lungs of patients who have undergone hip or knee replacement surgery was also approved in 2014.

ABOUT ELIQUIS

Eliquis (apixaban) is an oral selective Factor Xa inhibitor. By inhibiting Factor Xa, a key blood clotting protein, Eliquis decreases thrombin generation and blood clot formation. Eliquis is approved for multiple indications in the U.S. based on efficacy and safety data, including results from seven Phase 3 clinical trials. Eliquis is indicated to reduce the risk of stroke and systemic embolism in patients with nonvalvular atrial fibrillation; for the prophylaxis of deep vein thrombosis (DVT), which may lead to pulmonary embolism (PE), in patients who have undergone hip or knee replacement surgery; for the treatment of DVT and PE; and to reduce the risk of recurrent DVT and PE following initial therapy.