Exubera (Insulin Human [rDNA Origin] Inhalation Powder)

- Comprehensive Post-Approval Pharmacovigilance Commitment
- Global Customer-Care Program
- Pfizer Participation in the Public-Health Agenda
  - Coalition Approaches to Diabetes Prevention and Treatment
    - Public Sector
    - Food Industry
    - Behavioral Experts
    - Clinicians

Valid as of November 30, 2006
Pfizer Committed to Improving the Lives of Patients with Diabetes

A New-Generation Device to Follow on From Exubera is in Research, Providing:

- Enhanced Medical Profile Allowing Smaller Titration Steps
- Advanced User Conveniences, Easier to Carry During the Day

Valid as of November 30, 2006
Approaches Along the Diabetes Continuum

Obesity

Genetic Susceptibility

Impaired Glucose Tolerance

Diabetes

Vascular Complications

Time

Insulin Resistance

β Cell Failure

Retinopathy

Nephropathy

Neuropathy

Approaches Along the Diabetes Continuum

Valid as of November 30, 2006

Approaches:
- Weight Loss
- Insulin Sensitizers
- Improved β Cell Function
- Diabetic Complications
Approaches Along the Diabetes Continuum

Genetic Susceptibility

- Obesity
- Impaired Glucose Tolerance
- Diabetes
- Vascular Complications

Time

Weight Loss
- CB-1 Antagonists
- Opioid Receptors
- CCK-A Agonists
- 5-HTc Agonists
- 11β HSD Antagonists

Insulin Sensitizers
- PPARα Agonists

Improved β Cell Function
- DPPIV Inhibitors

Diabetic Complications
- Insulin Resistance
- β Cell Failure
- Retinopathy
- Nephropathy
- Neuropathy

Approaches Along the Diabetes Continuum

Valid as of November 30, 2006
CVMED R&D

- Atherosclerosis
- Obesity
- Diabetes
- Bone and Muscle Health
- Thrombosis
**Bone**

- Prevent Bone Loss
  - Opora
- Bone Healing
  - CP-533,536

**Muscle**

- Chronic Muscle Loss
  - Myostatin mAb
- Acute Muscle Loss
  - Myostatin mAb

Valid as of November 30, 2006
Osteoporosis is a Major Public-Health Problem

- An Estimated 75 Million Women in the U.S., Europe, and Japan Have Osteoporosis
- One Third of Women Aged 50+ Years Will Have an Osteoporosis-related Facture
- Direct Medical Costs of Osteoporotic and Associated Fractures Were More Than $48 Billion in 2002

Valid as of November 30, 2006
Non-Approvable Letter Received in 2005

Assessing Risk/Benefit Profile
- 3-Year PEARL Data
- Additional Preclinical Assessments

Meeting Anticipated with FDA in Early 2007

Valid as of November 30, 2006
**Medical Need**

- In the U.S., 6 Million People Experience Bone Fractures, Resulting in About 1 Million Hospitalizations
- 300,000 Patients Progress to Delayed Union or Nonunion
- 44,000 Excisions of Bone Lesions, Which Result in Critical-Size Bone Gaps That Fail to Heal

**Current Fracture Treatment Options**

- Casting
- Intramedullary Nailing
- Pins
- Bone Morphogenetic Proteins
CP-533,536 (Prostaglandin E2 Agonist)
Heals Bone Fractures

Osteotomies (Shown at 10 weeks)

X-rays

Vehicle

CP-533536

CT Scans

Vehicle

CP-533536

Valid as of November 30, 2006
CP-533,536 (Prostaglandin E2 Agonist)
Heals Bone Defects

Critical Defect (Shown at 24 Weeks)

Defect
Vehicle
CP-533536

Phase 2 Trial will report in early 2007
Phase 3 start possible in late 2007

Valid as of November 30, 2006
Atherosclerosis

Obesity

Diabetes

Bone and Muscle Health

Thrombosis
The Unmet Medical Need In Thrombosis

An Ideal Anticoagulant Should Have. . .

Key Attributes
- Oral Administration
- Predictability
- Wide Therapeutic Window
- No Dose Adjustments
- No Monitoring
- Low Risk of Food or Drug Interactions

Potential Advantages
- Inpatient/Outpatient Use
- Safe and Effective Anticoagulant
- Broad Safety/efficacy Range
- Fixed Doses for Most
- Reduced Costs
- Convenient Use Regardless of Diet or Concomitant Meds

Valid as of November 30, 2006
Factor Xa Inhibition

- Larger Therapeutic Window, Leading to Possibly Greater Separation of Efficacy From Bleeding
- Reduced Bleeding Risk
- Less Risk of Rebound Ischemia After Therapy is Ended (As Demonstrated by Direct Thrombin Inhibitors)
PD-348,292
Factor Xa Inhibitor

Profile

- Oral, Selective, Direct-Acting Factor Xa Inhibitor
- Suitable for Once-Daily Dosing
- Low Risk of Food or Drug Interactions

Target indications

- Prevention of Venous Thromboembolism in Orthopedic Surgery
- Treatment and Secondary Prevention of Venous Thromboembolism
- Prevention of Thromboembolic Events in Patients With Atrial Fibrillation

Valid as of November 30, 2006
Pharmacokinetic/Pharmacodynamic Modeling for Dose Selection

Factor Xa Dose (mg)

Event frequency (%)

Venous Thromboembolism
Major Bleeding

Target Dose Range

Valid as of November 30, 2006
## Development Portfolio Focused on Risk-Factor Modification and Disease Intervention

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* = new disclosure