

LANDMARK RULING COMES INTO EFFECT: TREATMENT NOW AVAILABLE FOR PEOPLE IN ENGLAND AND WALES WITH MILD ALZHEIMER'S AT TIME OF DIAGNOSIS

Eisai Co., Ltd. (Headquarters: Tokyo, President and CEO: Haruo Naito, "Eisai") announced today that new Alzheimer's disease treatment guidance issued by the United Kingdom's National Institute for Health and Clinical Excellence (NICE) came into effect on March 23, 2011 (U.K. local time), marking a significant change to an earlier 2007 ruling which restricted access to medication for patients with moderate disease only. The new guidance means that Alzheimer's patients in England and Wales can now be prescribed treatment when presenting with mild stages of the disease.

The guidance recommends three Alzheimer's disease medications belonging to a class of drugs known as acetylcholinesterase (AChE) inhibitors, including Eisai's Aricept[®] (donepezil hydrochloride), as possible options for managing mild to moderate Alzheimer's disease¹⁾. This is a milestone for people with Alzheimer's disease, their families, carers and society as the new ruling means that crucial treatment can be given earlier thereby helping to keep patients as independent as possible for as long as a possible.

Since pioneering a therapeutic treatment for Alzheimer's disease with the launch of Aricept[®], Eisai has gone on to provide a range of highly beneficial treatment options that include multiple formulation types of varying specifications. In compliance with the new guidance, Eisai will continue to make further contributions to address the diversified needs of and increase the benefits provided to patients and their families as well as healthcare professionals.

[Please refer to the following notes for additional information on the NICE guidance and Alzheimer's disease in the United Kingdom]

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[Notes to editors]

1. Additional Information on the NICE Guidance

1.1 The three acetylcholinesterase (AChE) inhibitors (donepezil, galantamine and rivastigmine) are recommended as options for managing mild to moderate Alzheimer's disease (as per their license indications), under all of the following conditions:

- Only specialists in the care of patients with dementia should initiate treatment.
- Treatment should be continued only when it is considered to be having a worthwhile effect on cognitive, global, functional and behavioral symptoms.
- Patients who continue on the drug should be reviewed at least every six months using cognitive, global, functional and behavioral assessment.
- If prescribing an AChE inhibitor (donepezil, galantamine and rivastigmine), treatment should normally be started with a drug with the lowest acquisition cost (taking into account required daily dose and the price per dose once shared care has started). However, an alternative AChE inhibitor could be prescribed if it is considered appropriate when taking into account adverse event profile, expectations around adherence, medical comorbidity, possibility of drug interactions and dosing profiles.

1.2 Memantine is recommended as an option for managing Alzheimer's disease for people with: moderate Alzheimer's disease who are intolerant to or have a contraindication to AChE inhibitors; or severe Alzheimer's disease.

For further information, please visit: <http://guidance.nice.org.uk>

2. About Alzheimer's Disease in the United Kingdom

Currently, there are around 820,000 people living with Alzheimer's and other dementias in the United Kingdom²⁾, including an estimated 575,000 sufferers in England and 37,000 in Wales. Alzheimer's disease is the most common form of dementia, affecting 62% of dementia patients in the United Kingdom³⁾. This irreversible, progressive brain disorder gradually destroys memory, reasoning and thinking skills, and may eventually leave patients unable to carry out even the simplest tasks. Alzheimer's disease has impacts in many ways including physical, mental, nursing, medical and social impacts. Despite its burden, Alzheimer's remains a relatively overlooked disease. Just 2.5% of the U.K. government's medical research budget is devoted to dementia; in contrast a quarter is allocated to cancer research.

1) National Institute for Health and Clinical Excellence, NICE Technology Appraisal guidance 111. Available at:

<http://guidance.nice.org.uk/>

2) Alzheimer's Research Trust -Dementia 2010. Available at:

<http://www.dementia2010.org/reports/Dementia2010Full.pdf>. Last accessed Jan 2011

3) Alzheimer Society. Available at: <http://alzheimers.org.uk> Last accessed Jan 2011