



Genexol-PM (Paclitaxel)

- Metastatic or Recurrent Breast Cancer
- Advanced or Metastatic Non-small Cell Lung Cancer
- Advanced Pancreatic Cancer (clinical stage)
- Ovarian Cancer (clinical stage)

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Genexol-PM

1. Composition

- Package: 30 mg paclitaxel/vial and 100 mg paclitaxel/vial
- Composition: Paclitaxel + proprietary biopolymer

2. Formulation (Lyophilisate)



- * Samyang's Polymeric Micelle (PM) platform is a non-toxic, biodegradable polymer based system for solubilization of poorly soluble drugs
- Cremophor free formulation of paclitaxel (Less Toxicity)
- Higher MTD value compared to chremophore based paclitaxel formulation (Higher Efficacy)

3. Indications

- Metastatic or Recurrent Breast Cancer (1st line)
- Locally Advanced or Metastatic NSCLC (in combination with Cisplatin)
- Advanced Pancreatic Cancer (phase II in US)

4. Market

- Breast & NSCLC cancers
- Launched in Korea (2007)
- Launched in India, Vietnam, Philippines, & Indonesia (2009)

5. Dosage and Administration

- Metastatic or recurrent breast cancer :
- ✓ 300 mg/m² i.v. over 3 hours every 3 weeks. No Premedication required.
- Locally advanced or metastatic non-small cell lung cancer :
- √230 mg/m² i.v. over 3 hours every 3 weeks. Premedication required.



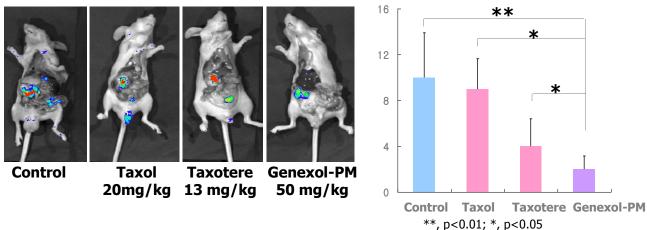
Preclinical Studies

1. Toxicity studies

Species/model	Dosing regimen	MTD (mg/kg)	
Species/model	Dosing regimen	Genexol-PM	Taxol ®
Mice bearing B16F10	Once/day x 3	50	20
Nude mice bearing SKOV3	4 times/day x 3 50		20
CD-1 mice	Single	420	9
	5 cycles (3weekly)	120	9
SD rats Single		200	8
Beagle dogs	Single (infusion)	4.5/3 hr inf.	2.5/30 min inf.
Deagle dogs	5 cycles (infusion, 3wks.)	4.5/3 hr inf.	2.5/30 min inf.

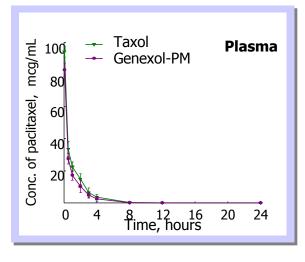
2. Efficacy study in orthotopic pancreatic tumor model

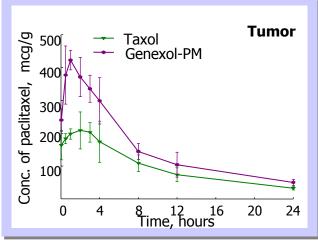
- GFP- ASPC-1 tumor fragment was surgically implanted onto pancreas
- Animal : (BALB/C, nu/nu, female) athymic nude mice
- Drug administration & group: 20 days after implantation, i.v.(3 times/dx3), 6 mice/group
- Evaluation: 50 days after implantation, primary tumor weight & metastasis
- RESULT: Higher MTD, Higher tumor concentration & Reduction in tumor volume



3. Pharmacokinetic studies

- Animal: Female C57BL/6 mice; s.c. inoculation of murine B16F10 melanoma
- Treatment initiated after tumors grew to 50~400 mm³
- Group and Dose: Genexol-PM (50 mg/kg, n=4), Taxol (20 mg/kg, n=4)
- RESULT: Substitution of Cremophor by patented bioabsorbable polymer results in changes in Pharmacokinetic behavior of paclitaxel: higher MTD and lower toxicity.







Clinical Studies (Completed)

1. Phase I studies

	Korea	US
Number of patients	21	23
MTD	390 mg/m ²	> 435 mg/m ²
DLT	Neutropenia, myalgia, neuropathy	Diarrhea, fatigue, neutropenia

2. Phase II studies

1) Metastatic or recurrent breast cancer (in Korea)

• Dose: 300 mg/m² administered over 3 hours every 3 weeks

• Primary endpoint : response rate

- Response

Tumor Response	ITT (N=41*)	
Complete Response	12.2%	
Partial Response	46.3%	
Stable Disease	31.7%	
Progressive Disease	4.9%	
Not evaluable	4.9%	

- Adverse events (Grade III & IV)

Major adverse events (N=41)		
Neotropenia (Grade IV) 17.1%		
Febrile Neutropenia	0.0%	
Neuropathy ¹⁾	17.1%	
Hypersensitivity ²⁾	4.9%	

^{1) :}Analyzed for the treatments prior to 6 cycle

2) Locally advanced or metastatic NSCLC (in Korea)

• Dose : 230 mg/m² administered over 3 hours every 3 weeks in combination with 60 mg/m² of cisplatin

• Primary endpoint : response rate

- Response

Tumor Response	ITT (N=69)	
Complete Response	0.0%	
Partial Response	37.7%	
Stable Disease	29.0%	
Progressive Disease	23.2%	
Not evaluable	10.1%	

- Adverse events (Grade III & IV)

Major adverse events (N=69)		
Neutropenia (Grade IV) 17.4%		
Febrile Neutropenia	2.9%	
Neuropathy	13.0%	
Myalgia/Arthralgia	7.3%	
Hypersensitivity	5.8%	

3) Advanced pancreatic cancer (in US)

• Dose: 300 mg/m² or 350m/m2 administered over 3 hours every 3 weeks

• Primary endpoint : time to tumor progression (TTP)

- Efficacy

Number of Pts	N=45
Response (CR+PR)	7.7 %
TTP	2.7 Mon
Overall Survival	6.5 Mon

- Adverse events (Grade III & IV)

Major adverse events (N=69)		
Neutropenia (Grade IV) 15.6%		
Neuropathy	13.3%	
Nausea/Vomiting	4.4%	

^{2) :}Premedication was not applied



Clinical Studies (Recent & Ongoing)

1. Phase I combination therapy (completed)

- Genexol-PM and Gemcitabine in advanced pancreatic cancer (under US FDA IND); Preliminary Results
 - Dose finding:
 Genexol-PM administered over 3 hours every 3 weeks in combination with 1250 mg/m² of Gemzar

	Genexol PM		Tarceva
Dose	1,250 mg/m ² of Gemzar with 220, 260, 300 mg/m ² of Genexol-PM	1,250 mg/m ² of Gemzar with 300 mg/m ² of Genexol-PM	1,000 mg/m ² of Gemzar with 100 or 150 mg/d of Tarceva
RR (%)	28	50	8.6
Patients #	18	6	285

2. Post Marketing Surveillance (completed)

1) PMS in Breast cancer (safety)

• Dose: 300 mg/m² administered over 3 hours every 3 weeks

• Enrollment: 132 patients

Safety evaluation results

✓ Adverse Events : Occur in 97 patients(73.5%), 496 case → Grade IV & V (7.86%)

✓ Unexpected Adverse Events : 3 case

2) PMS in Lung cancer (safety & efficacy)

- Dose: 230 mg/m² administered over 3 hours every 3 weeks in combination with 60 mg/m² of cisplatin
- Enrollment: 191 patients (safety), 181 patients (efficacy)
- Safety evaluation results
 - ✓ Adverse Events : Occur in 168 patients(88%), 1,306 case → Grade IV & V (2.84%)
 - ✓ Unexpected Adverse Events :Occur in 93 patients(49%), 191 case
 - Tingling sensation 8.3% , Hiccup 6.8%, Rash 6.3%
- Efficacy evaluation results
 - ✓ Objective Response Rate: 50%

3. Phase II study

1) Ovarian cancer (in Korea: completed)

• Dose: 260 mg/m² administered over 1 hours every 3 weeks in combination with Carboplatin 5 AUC

• No. of patients: 100

4. Phase III study

1) Breast cancer (in Korea, ongoing)