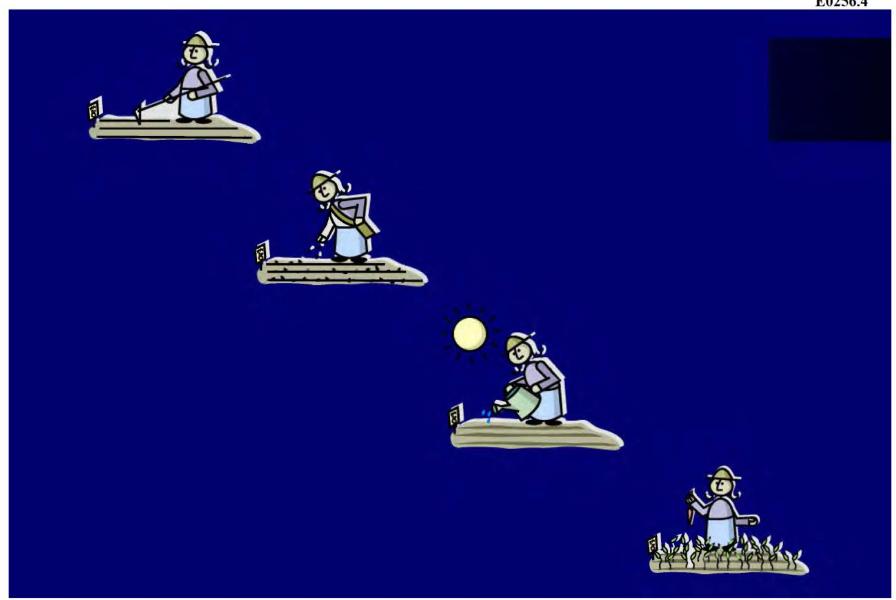
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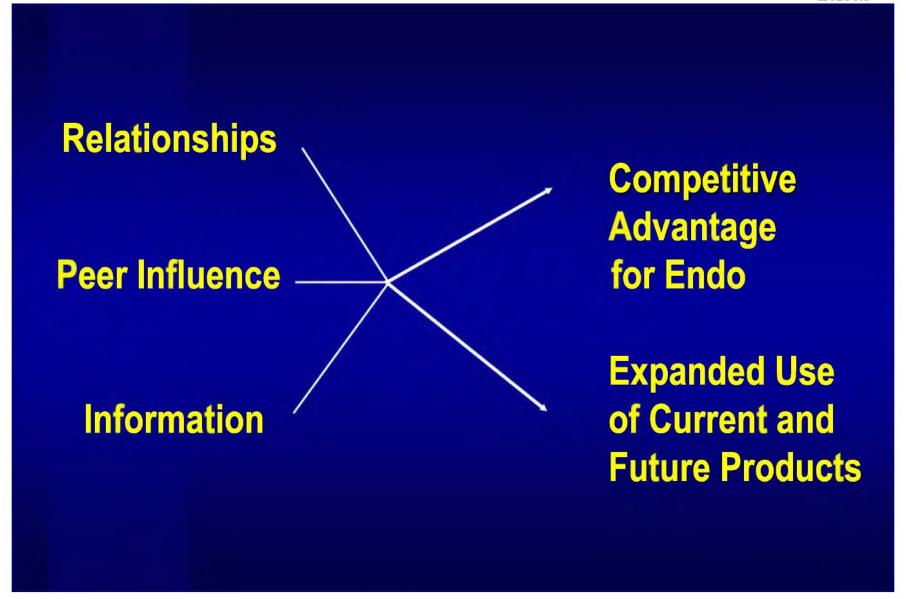
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CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER

ENDO-OPIOID\_MDL-02344002

# CD&E: The Critical Connection for Success in 2000 and Beyond





#### 2000: CD&E Objectives

- Attain/exceed financial objectives for promoted products
- Establish Endo as a leader in the field of pain mgmt.
- Enhance Endo's visibility, image, and access to:
  - leaders in clinical pain management & research
  - national primary care professional associations
- Expand usage of current products by developing and leveraging strategic relationships/alliances
- Enhance value of Endo's future pharmaceutical offerings through input during the development process

#### 2000: CD&E Objectives (cont'd)

- Identify opportunities to expand Endo's current and future product line
- Identify emerging treatment practices/information which could impact Endo's current/future offerings
- Provide unfiltered feedback from pain community to Endo
- Facilitate productive interactions between customers and Endo's R&D, Phase IV, Business Development, and Marketing Departments
- Serve as a technical resource for Endo & our customers

#### 2000: Key Issues

- Availability of resources \$\$\$ and people
  - Lead time necessitates advance commitments
  - Innovative leveraging & entry stakes
  - Publications & VF \$'s needed to achieve "critical mass"
- Intense competition for key advocates & influentials
  - Predilection toward Endo, but...
  - If we don't utilize, Purdue, Parke-Davis, Abbott, Janssen will
  - Visiting faculty, publications, Phase IV, advisory board
    - Advisors/VF committed to participate; need to commit resources
    - ◆ CD&E cost effectiveness: e.g. 3 Adv. Mtgs. \$122K vs \$360 450K

#### 2000: Key Issues (cont'd)

- Uncertainty regarding "safe harbor"
  - Acute pain : Pl's not reflective of guidelines/clinical practice
  - Neuropathic pain: great deal of interest/use outside of PI
- Endo/Algos-related issues
  - Algos invests heavily in pain community; expectations exist
  - Some skepticism among investigators
- Relatively low noise level
  - Pain field anticipated more "splash" w/ Lidoderm launch
    - ♦ Interest + = momentum ♦ sales!
  - Acute vs. chronic pain (pain & PC literature, lay press)
  - Lack of coverage in pain centers & hospitals

#### 2000: Key Opportunities (cont'd)

- Endo poised for success with pain community
  - Endo viewed as up & coming innovator
  - Advisors/advocates take personal interest in our progress
  - "Guys in the white hats"
  - "The next Merck"
- Lidoderm favorably regarded by pain community
  - Viewed as 1st line therapy by neuropathic pain experts
    - Publications & VF provide vehicles to convey this to others
  - Considerable interest in off-label usage
    - Peer influence & Phase IV

#### 2000: Key Opportunities (cont'd)

- Entrée to non-pain professional associations
  - American Academy of Neurology
  - American College of Physicians
  - American Academy of Family Physicians
  - American Osteopathic Association
  - American Society Health Care Pharmacists
- JCAHO standards make pain mgmt an imperative
  - Hospitals, LTC, ambulatory care, rehab, etc.
  - Endo represented on national committee

#### 2000: Key Opportunities (cont'd)

- Launch of acute pain initiatives developed in 1999
  - Tufts/NEMC preceptorship
  - ACPE accredited monograph
  - Acute pain inclusion in ACP materials and residency modules
  - Patient ed/pain assessment tear pads
- **■** Full spectrum of analgesics available or in development
  - Opioids & non-opioids
  - Acute, breakthrough, and chronic pain
  - Moderate to severe pain
  - Nociceptive & neuropathic pain
  - Innovative delivery systems

#### 2000: CD&E Strategies

- Leverage strategic alliances & relationships to expand utilization of current product line
  - Build awareness & expand usage of Lidoderm
  - Expand awareness & usage of Percos & Zydone through acute pain initiatives
  - Support/develop initiatives that combat opiophobia
- Spearhead initiatives that establish Endo's position of leadership in the field of pain management
- Utilize new JCAHO standards as impetus to establish pain mgmt, as a priority w/ PCP's, RPh's, Neuros

#### 2000: CD&E Strategies (cont'd)

- Enhance potential value of future products through input to development/commercialization teams
- Leverage relationships w/ investigators/influentials to:
  - obtain priority consideration for Endo with regard to new drug/technology acquisitions
  - identify expanded indications for existing products
  - identify evolving mechanism/treatment concepts
  - identify potential sites for Endo clinical trials
  - identify opportunities for mutually-beneficial alliances with other companies/institutions

#### 2000: CD&E Tactics (cont'd)

- Establish Endo as a leader in the field of pain mgmt.
  - Corporate membership & active participation in:
    - American Pain Society
    - American Academy of Pain Medicine
    - International Association for the Study of Pain
  - APS guideline project & implementation committee
  - APS regional primary care symposia (3 planned for 2000)
  - Speaker placement at key regional pain meetings
    - **♦UCSF, UCLA, Harvard**

#### 2000: CD&E Tactics (cont'd)

- Establish pain mgmt. as a priority w/ PCP's, RPh's, Neuro
  - American College of Physicians Pain Initiative
  - Society of Teachers of Family Medicine Workshops
  - National Pharmacy Traineeships
  - Interactive Pain CD ROM (Galer)
  - FL Office of Health Policy State Pain Initiative
  - Wright State Residency Rotation
  - American Academy of Neurology Corporate Roundtable
  - Chicago City-Wide Pain Conference

#### 2000: CD&E Tactics (cont'd)

- Advocate appropriate use of opioid analgesics
  - Partner w/ Beth Israel: Project on Pain & Chemical Dependency
  - Develop & implement Portenoy video on opioid analgesics
    - Post on STOPPAIN web site & Endo web site
    - Provide to reps for inservice
  - Soc. Teachers of Family Medicine workshops & annual mtg
  - Pain speakers American Academy of Addiction Medicine
  - American Alliance of Cancer Pain Initiatives
    - National meeting and newsletter
  - STOPPAIN resource center/web site
  - NJ State Pain & Addiction Medicine Project

#### 2000: CD&E Tactics

- Advance appropriate treatment of acute pain
  - Initiate Tufts preceptorship with 6 targeted participants
  - Distribute ACPE monograph to 5000 key pharmacists
  - Utilize Xponent/DuPont reps data to ID new advocates
    - Distribute acute pain slides & post on web site
  - Disseminate pt. ed/pain assessment tools via reps/web
  - Create series of Endo patient ed brochures
    - Select topics covered by JCAHO which apply to Endo e.g. opioid analgesics, pain assessment, acute pain tx
    - Brand Endo's educational resources
  - Pain as "5th Vital Sign" campaign -- CD&E, Dupont/Endo reps

#### 2000: CD&E Tactics (Cont'd)

- Build awareness & expand usage of Lidoderm
  - APS symposium (Proposal submitted: Rowbotham, Max, Dworkin, Galer)
  - Annual Neuropathic Pain Meeting
    - Speakers (Dworkin, Rowbotham, Argoff)
    - Clinical Journal of Pain Supplement (Dworkin: ed.)
  - Neuropathic Pain Handbook (Galer, Dworkin eds)
  - Shingles/PHN video & PHN brochure (Pain centers & select offices)
  - Midwest Pain Society speakers (Galer, Bennett, Rutter)
  - UCSF Initiatives (Fields, Rowbotham, Miaskowski)
  - VZV Foundation National Mtg. (speakers: Dworkin, Oaklander)
  - Neuropathy Association Nat'l Mtg Speaker (Galer)

#### 2000: CD&E Tactics (Cont'd)

- Build awareness & expand usage (cont'd)
  - Advances in Tx of Neuropathic Pain CME-accredited Monograph
  - Targeted symposia/workshops w/ advocates
  - Targeted visiting faculty programs
- Encourage expanded use of Lidoderm by advisors/VF
  - Stock box for office use
  - Work with M. Davis to identify/place Phase IV studies
  - Distribution of expanded slide kit/monograph

#### 2000: CD&E Tactics (cont')

- Strategic tactics: future products/delivery systems
  - Participation on development/commercialization teams
  - Formal advisory board meeting (Dex combos)
  - Discussions with advisors (Lido, Dex , 3202, 3215, Quick-Dis)
  - Potential investigator/site recommendations
  - Networking with influentials to:
    - identify opportunities for expanded indications/product line
    - identify opportunities for mutually-beneficial alliances
  - Current reviews of literature
  - Participation in national conferences
  - Premarketing educational initiatives (as budget permits)

## **Cost of Budgeted Tactics**

National Symposia - Pain Community	\$215 K
Educational Materials (slides, video, monograph, CD)	\$165 K
Regional Pain Symposia (Lidoderm)	\$105 K
National Primary Care Initiatives	\$ 95 K
Preceptorships or Certificate Programs	\$ 70 K
National Guideline Projects (multidisciplinary)	\$ 45 K
Publications (Clinical Journal of Pain Supplement)	\$ 45 K
National Multidisciplinary Initiatives	\$ 30 K
Visiting Faculty	\$ 15 K
Corporate Memberships	\$ 15 K
Total	\$800 K

#### **2000: Unbudgeted Tactics**

- National visiting faculty program
  - Critical to expand base of prescribers & avg. # scripts written
  - > 50 speakers currently identified
  - High potential areas & institutions targeted
  - Effectiveness of "peer-to-peer" influence well-documented
- Publications program (prioritized plan developed in '99)
  - Critical for building awareness, usage, credibility & data to stimulate uptake by "moderate / late adopters"
  - Publications beget publications!
  - Textbook & peer-reviewed articles permanently indexed
  - Establishes standards of care, algorithms/guidelines

#### **2000: Priority Unbudgeted Tactics**

National Visiting Faculty: \$200-\$225 K

Total Publications: \$121-\$168 K

Major clinical study: \$15 - \$20 K

4 abstracts/posters: \$24 - \$32 K

1 review article: \$15 - \$20 K

1 rapid publication: \$ 8 - \$10 K

**Textbooks** \$15 - \$20 K

Reprints & slide updates \$20 - \$30 K (depending on qty)

Agency costs: \$24 - \$36 K (depending on level of

involvement)

Total Priority Unbudgeted: \$321-393 K

#### **2000: Unbudgeted Tactics**

- Lidoderm Teleconferences (15 sites/call;10 calls) \$50K
- Lidoderm Telemedicine Pilot Project (NY) \$10K
- American Academy of Neurology Meeting \$40K
- National Primary Care Advisory Meeting \$30K
- Regional Pain Conferences (West, East, South) \$35K
- Lidoderm slide kit distribution (broad distrib.) \$35K
- American Academy Family Physicians Symposium \$25K
- American Osteopathic Association Symposium \$40K
- American Pain Foundation \$20K

Total = \$285 K

### 2000: Secondary Unbudgeted Tactics

- WHO Addiction Newsletter (US only) \$10K
- World Institute of Pain Meeting \$10K
- **ASHP Annual Meeting workshop \$10K**
- Nat'l Community Pharmacists Meeting \$5K
- Pain Mgmt & Oncology Nursing Meetings \$10K

**Total = \$45K**