

Press Release

Boehringer Ingelheim further intensifies fight against AIDS

- Voluntary licence policy amended by easy-to-use, non-assert declarations increasing availability of generic Viramune® in 79 countries
- Price of Viramune® in developing countries considerably reduced through preferential pricing in 145 countries

Ingelheim, Germany, May 15th, 2007- In order to further improve access to its anti-HIV drug Viramune® (nevirapine) in developing countries Boehringer Ingelheim has amended its policy of voluntary licences for generic producers. The company now issues short, non-assert declarations which can be given to all generic producers worldwide, prequalified by the WHO, that will supply nevirapine to developing countries. These agreements, which practically mean that patents on nevirapine will not be enforced by Boehringer Ingelheim in developing countries, are free of licence fees or other charges.

On top of that Boehringer Ingelheim decided to introduce a new, considerably lower preferential price for original Viramune® of 0.60 US Dollars per day. This means that in all African countries and all other low-income countries as per World Bank classification, some 78 countries, the daily treatment costs for Viramune® will be cut on an average in half compared to the former preferential price. This former preferential price of 1.20 US Dollars per day will now be extended additionally to 67 middle income countries, such as some South and Central American and Eastern European countries not belonging to the above mentioned group. This price is a more than 90 percent discount on the price for the treatment in highly industrialized countries.

Dr Alessandro Bianchi, the Chairman of the Board of Managing Directors of Boehringer Ingelheim said, "Preferential pricing is the only way how we can meet both conflicting needs in the fight against AIDS: We can refinance our high research and development costs for innovative, new treatments by the established price system in industrialized countries and can offer affordable medicines to patients in poor countries that otherwise cannot afford antiretroviral medication. In order to further broaden access to

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nevirapine, a well-studied and effective AIDS medication, Boehringer Ingelheim offers free-of-charge non-assert declarations to any pharmaceutical manufacturer in the world who is prequalified by WHO for the production of nevirapine for developing countries. The patent situation will not stand in the way of poor people who need our medication.“

The non-assert agreements and price reductions are to be seen in addition to the well-established Boehringer Ingelheim Viramune® Donation Program for pregnant HIV-positive patients in developing countries and other health care supporting activities.

Donating to prevent further spread of HIV

Since 2000 Boehringer Ingelheim has given free access to single-dose Viramune® (nevirapine), used alone or in combination with other drugs, to prevent mother-to-child transmission of the HI virus during birth.* The company is currently donating the product to 59 countries in Africa, Asia, Latin America and Eastern Europe. In total more than 988, 000 mother and child doses were supplied free of charge so far.

Providing new hope through new treatments

After making available the first non-nucleoside transcriptase inhibitor Viramune® in 1996, Boehringer Ingelheim provides patients and the medical profession with the novel protease inhibitor Aptivus® for HIV-positive patients who have tried other AIDS medications and developed reduced susceptibility to currently available anti-HIV treatments. There are also further anti-viral substances in clinical development at Boehringer Ingelheim.

In all HIV research activities of Boehringer Ingelheim special care is given to paediatric indications. Viramune® is registered in most countries for use in children. For Aptivus® clinical trials in children are underway.

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* Monotherapy with VIRAMUNE in the prevention of mother-to-child transmission of the HI-virus during birth has been associated with the potential development of NNRTI resistance. According to the latest WHO guidelines for MTCT, where other ARV medicines are accessible, single-dose VIRAMUNE should be combined with additional effective antiretroviral medicines.

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