



## **Research Supporting the Role of Antiepileptic Drug Vimpat® (Lacosamide) (C-V) to be Highlighted at Upcoming AAN Meeting**

### **- Guide to Lacosamide Posters for Science Writers Attending the 62nd Annual Meeting of the American Academy of Neurology (AAN) -**

**Atlanta - April 9, 2010** – The antiepileptic drug (AED) Vimpat® (lacosamide) (C-V) will be the subject of numerous studies and analyses—both UCB-sponsored and independent—at the 62nd annual American Academy of Neurology (AAN) meeting, taking place at the Metro Toronto Convention Centre in Toronto from April 10-17.

“The breadth and depth of Vimpat data being presented at AAN suggests that the neurology community recognizes the important role of Vimpat in today’s epilepsy treatment approach,” said James Zackheim, PhD, CNS Medical Director at UCB.

Vimpat tablets are indicated as adjunctive therapy in the treatment of partial-onset seizures in people with epilepsy who are 17 years and older. Vimpat injection is available as an alternative for patients when oral administration is temporarily not feasible. The most common adverse reactions occurring in greater than or equal to 10 percent of Vimpat-treated patients, and greater than placebo, were dizziness, headache, nausea and diplopia. Additional important safety information for Vimpat is available at the end of the press release.

Following is a guide to Vimpat posters that will be exhibited during the AAN meeting. To view a floor plan showing poster locations, please click [here](#); for additional information on study authors, please click [here](#). To schedule an interview with Dr. Zackheim or a Vimpat investigator, please contact Andrea Levin at 404.483.7329 or [Andrea.Levin@ucb.com](mailto:Andrea.Levin@ucb.com).

### **UCB-Sponsored Vimpat Posters**

#### **1. Long-term Efficacy of Lacosamide for Partial-Onset Seizures: An Interim Evaluation of Completer Cohorts Exposed to Lacosamide for up to 36 Months**

*Poster P05.179, Thursday, April 15, 2010, 7:30 am, Room 808*

Objective: To examine the long-term efficacy of lacosamide in cohorts of patients completing successively longer durations of lacosamide exposure (greater than or equal to 12, 24 and 36 months) in Phase II-III double-blind and/or open-label (OL) extension trials.



## **2. Long-term Safety and Tolerability of Lacosamide for Partial-Onset Seizures: An Interim Evaluation of Patients Exposed to Lacosamide in Double-Blind and Open-Label Trials**

*Poster P05.181, Thursday, April 15, 2010, 7:30 am, Room 808*

Objective: Examine long-term safety of lacosamide for partial-onset seizures in Phase II-III double-blind and open-label extension trials.

## **3. Improvement in Patient-Reported Outcomes Seen in Patients Responding to Lacosamide: Pooled QOLIE-31, SSQ and PGIC Data from Three Phase II/III Clinical Trials**

*Poster P05.187, Thursday, April 15, 2010, 7:30 am, Room 808*

Objective: To evaluate patient-reported outcome results in three Phase II/III clinical trials of lacosamide, an antiepileptic drug for the adjunctive treatment of partial-onset seizures in adults.

## **4. Lacosamide Efficacy in Partial-Onset Seizures with and without Secondary Generalization: A Pooled Analysis of Three Phase II/III Trials**

*Poster P05.186, Thursday, April 15, 2010, 7:30 am, Room 808*

Objective: Evaluate the efficacy of lacosamide in individual partial seizure types by change in seizure frequency and proportion of greater than or equal to 50% responders.

## **5. Pharmacokinetic Evaluation of Intravenous Lacosamide as Short-Term Replacement for Oral Lacosamide in Partial-Onset Seizures**

*Poster P05.182, Thursday, April 15, 2010, 7:30 am, Room 808*

Objective: To analyze the pharmacokinetic parameters of IV lacosamide administered over infusion durations of 30, 15, or 10 minutes as a short-term replacement (2-5 days) for oral lacosamide in 160 patients receiving lacosamide as part of a long-term, open-label extension trial.



## **6. A Multicenter, Open-Label Trial To Assess the Safety and Tolerability of a Single Intravenous Loading Dose of Lacosamide Followed by Oral Maintenance as Adjunctive Therapy in Subjects with Partial-Onset Seizures: An Interim Report**

*Poster P05.178, Thursday, April 15, 2010, 7:30 am, Room 808*

Objective: To examine the safety and tolerability of a single intravenous (IV) loading dose of lacosamide infused over 15-minutes followed by oral lacosamide maintenance treatment in subjects with partial-onset seizures (POS) currently taking 1–2 AEDs.

## **7. Outcome of Infants with Prenatal Exposure to Lacosamide during the Clinical Development Program**

*Poster P05.180, Thursday, April 15, 2010, 7:30 am, Room 808*

Objective: To report initial observations of lacosamide exposure during pregnancy in the lacosamide clinical development program.

### **Select Independent Lacosamide Posters**

#### **1. Lacosamide Add-On Treatment: Results of Open Label 6 Months Follow-Up**

*Poster P05.188, Thursday, April 15, 2010, 7:30 am, Room 808*

Objective: We prospectively followed 131 patients (Erlangen cohort A n = 81, Kork cohort B n = 50) treated with add-on lacosamide. Experiences of lacosamide treatment with a follow-up of at least 6 months were reported.

#### **2. Rapid Titration of Lacosamide with Simultaneous Reduction in Concomitant AEDs Is Well-Tolerated and Effective in Reducing Seizures in Patients with Drug-Resistant Partial-Onset Epilepsy**

*Poster P05.177, Thursday, April 15, 2010, 7:30 am, Room 808*

Objective: To determine whether rapid programmed titration of lacosamide to 400 to 700 mg/day with rapid tapering of concomitant antiepilepsy drugs (AEDs) limits side effects and reduces seizures in patients with drug-resistant partial-onset epilepsy.

#### **3. Lacosamide in Brain Tumor Patients**

*Poster IN10-2.003, Friday, April 16, 2010, 2:30 pm, Reception Hall 104A-D*

Objective: The purpose of the study is to investigate a single institution experience with lacosamide in brain tumor patients with seizure disorder.



#### **4. Lacosamide in Refractory Status Epilepticus: A Report of Four Patients**

*Poster P05.172, Thursday, April 15, 2010, 7:30 am, Room 808*

Objective: To report the efficacy of lacosamide in refractory focal status epilepticus (SE) in four patients.

#### **IMPORTANT SAFETY INFORMATION**

##### **Warnings and Precautions**

AEDs increase the risk of suicidal behavior and ideation. Patients taking Vimpat should be monitored for the emergence or worsening of depression, suicidal thoughts or behavior, and/or any unusual changes in mood or behavior.

Patients should be advised that Vimpat may cause dizziness, ataxia, and syncope. Caution is advised for patients with known cardiac conduction problems, who are taking drugs known to induce PR interval prolongation, or with severe cardiac disease. In patients with seizure disorders, Vimpat should be gradually withdrawn to minimize the potential of increased seizure frequency. Multiorgan hypersensitivity reactions have been reported with antiepileptic drugs. If this reaction is suspected, treatment with Vimpat should be discontinued.

For more information and prescribing information visit [Vimpat.com](http://Vimpat.com) or contact UCB at (800) 477-7877.

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##### **About Epilepsy**

Epilepsy is a chronic neurological disorder affecting approximately 50 million people worldwide and three million people in the U.S.—making it more common than multiple sclerosis and Parkinson's disease combined. More than one million U.S. patients continue to experience seizures despite trying two or more antiepileptic drugs (AEDs).

Epilepsy is caused by abnormal, excessive electrical discharges of the nerve cells, or neurons, in the brain. Epilepsy is characterized by a tendency to have recurrent seizures and defined by two or more unprovoked seizures. There are many different seizure types and epileptic syndromes. Roughly 30 percent of people living with epilepsy have either uncontrolled seizures or significant side effects secondary to medication. Almost 60 percent of all epileptic seizures are partial onset.



### **Further Information**

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### **About UCB**

UCB, Brussels, Belgium ([www.ucb.com](http://www.ucb.com)) is a biopharmaceutical company dedicated to the research, development and commercialization of innovative medicines with a focus on the fields of central nervous system and immunology disorders. Employing more than 9,000 people in over 40 countries, UCB produced revenue of EUR 3.1 billion in 2009. UCB is listed on Euronext Brussels (symbol: UCB). U.S. headquarters is located in Atlanta.

### **Forward Looking Statement**

This press release contains forward-looking statements based on current plans, estimates and beliefs of management. Such statements are subject to risks and uncertainties that may cause actual results to be materially different from those that may be implied by such forward-looking statements contained in this press release. Important factors that could result in such differences include: changes in general economic, business and competitive conditions, effects of future judicial decisions, changes in regulation, exchange rate fluctuations and hiring and retention of its employees.

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