

# Strengthening our global leadership in treatment of addiction

JP Morgan Healthcare Conference 2017  
January 9-11, 2017



## Forward Looking Statements

*This announcement contains certain statements that are forward-looking and which should be considered, amongst other statutory provisions, in light of the safe harbour provisions of the United States Private Securities Litigation Reform Act of 1995. By their nature, forward-looking statements involve risk and uncertainty as they relate to events or circumstances that will or may occur in the future. Actual results may differ materially from those expressed or implied in such statements because they relate to future events. Forward-looking statements include, among other things, statements regarding the Indivior Group's financial guidance for 2016 and its medium- and long-term growth outlook, its operational goals, its product development pipeline and statements regarding ongoing litigation. Various factors may cause differences between Indivior's expectations and actual results, including: factors affecting sales of SUBOXONE® (buprenorphine and naloxone) Sublingual Tablets (CIII), SUBOXONE® Film (buprenorphine and naloxone) Sublingual Film (CIII), SUBUTEX® (buprenorphine) Sublingual Tablets (CIII) and any future products; the outcome of research and development activities; decisions by regulatory authorities regarding the Indivior Group's drug applications; the speed with which regulatory authorizations, pricing approvals and product launches may be achieved; the outcome of post-approval clinical trials; competitive developments; difficulties or delays in manufacturing; the impact of existing and future legislation and regulatory provisions on product exclusivity; trends toward managed care and healthcare cost containment; legislation or regulatory action affecting pharmaceutical product pricing, reimbursement or access; claims and concerns that may arise regarding the safety or efficacy of the Indivior Group's products and product candidates; risks related to legal proceedings; the Indivior Group's ability to protect its patents and other intellectual property; the outcome of the SUBOXONE Film patent litigation relating to the ongoing ANDA lawsuits; changes in governmental laws and regulations; issues related to the outsourcing of certain operational and staff functions to third parties; uncertainties related to general economic, political, business, industry, regulatory and market conditions; and the impact of acquisitions, divestitures, restructurings, internal reorganizations, product recalls and withdrawals and other unusual items.*

*This presentation does not constitute an offer to sell, or the solicitation of an offer to subscribe for or otherwise acquire or dispose of shares in the Company to any person in any jurisdiction to whom it is unlawful to make such offer or solicitation.*



# Indivior PLC

## Global Leader in Treatment of Opioid Dependence

- 2016 Sales >\$1bn
- Mainly SUBOXONE® brand

## Public Company since December 2014

- UK Domiciled
- London Listed

## US Based Business

- 80% of sales in US
- HQ in Richmond, Va.

## Experienced management team

- Built business from c.\$35m (£21m) sales in 2003.



# Addiction

Scale of the problem

# Addiction – A Global Epidemic affecting many millions



- c.250m people worldwide used illicit drugs
- We are global leaders in treatment of opioid use disorder:
  - 27m people aged 15-64 suffer from drug use disorders or drug dependence globally
- We are expanding our portfolio into other substance use disorders (e.g. Alcohol) and diseases associated with higher rates of substance use disorder (Schizophrenia).
  - There are 124m people worldwide dependant on alcohol
  - 3.3 m deaths per annum due to harmful use of alcohol
  - 21m people worldwide affected by schizophrenia

Indivior PLC annual report 2015 p.13. Full details of sources on p.137 but primarily UNODC World Drug Report 2015 & 2016; UNODC Executive Director Statement June 26, 2015; WHO Global Status on Alcohol & Health 2014. WHO Schizophrenia : access

[http://www.who.int/mental\\_health/management/schizophrenia/en/](http://www.who.int/mental_health/management/schizophrenia/en/)

Drug use and dependence from World Drug Report refers to opiates, cocaine, cannabis, amphetamines, and psychoactive substances



>3 people in the US die of opioid overdose every hour of every day<sup>1</sup>



Images like this one from the shocking Ohio overdose story in September are becoming all too common

THE DAILY RATE OF OVERDOSE DEATHS IN THE US IS THE EQUIVALENT OF AN 80-PASSENGER PLANE CRASHING EVERY DAY WITH NO SURVIVORS



<sup>1</sup>Center for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System, Mortality File. (2015). Number and Age-Adjusted Rates of Drug-poisoning Deaths Involving Opioid Analgesics and Heroin: United States, 2000–2014.

Picture Sources:<http://globalnews.ca/news/2932561/shocking-photos-of-ohio-overdose-victims-problematic-say-addiction-experts/>; <http://www.civilaviation.eu/Embraer/EMB-170.htm>







## OUR VISION

That all **patients** around the **world** will have **unrestricted access to high quality treatment services** for the chronic relapsing **conditions and co-morbidities of addiction**



## RBP-6000 GOALS

Improving  
treatment access

Improving  
treatment retention

>2.5<sub>m</sub>

patients diagnosed with  
OUD in the US<sup>1</sup>

<50%

of diagnosed patients  
receive any MAT<sup>2</sup>

52%

of BMAT patients  
leave treatment  
within 2 months<sup>2</sup>

69%

of patients who leave  
treatment are asked to  
leave by their physician as  
assessed in quantitative  
market research<sup>3</sup>

<sup>1</sup>SAMHSA, Results from the 2014 National Survey on Drug Use and Health. Rockville, MD: Substance Abuse and Mental Health Services Administration,

<sup>2</sup>NSDUH survey 2014 and INDV analytics, <sup>3</sup>INDV quantitative market research, 2015, n=123

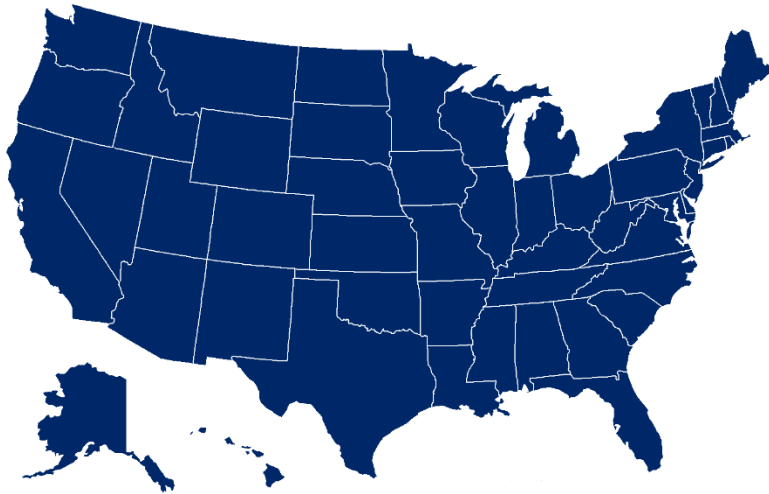
MAT: Medication-Assisted Treatment; BMAT: Buprenorphine Medication-Assisted Treatment





# Opioid Dependence

## Medication assisted treatment market is very US-based currently



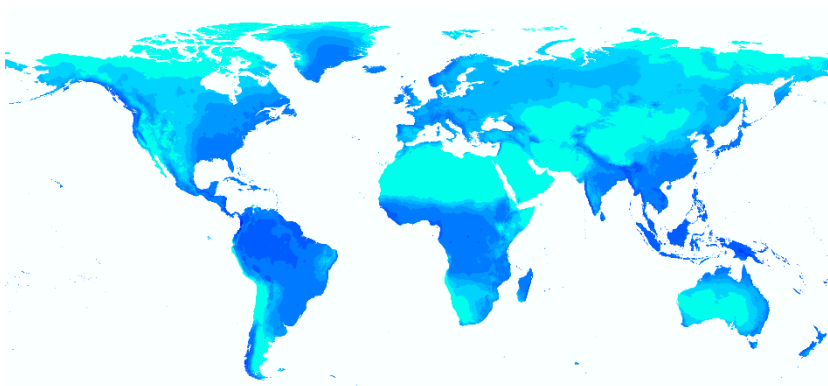
- US accounts for substantial majority (80%+) of buprenorphine based medication assisted treatment for opioid dependency by value
- Approximately 2.3m potential patients, the majority of whom (1.9m) abuse or are dependent on prescription painkillers.<sup>1</sup>
- Supportive government policy: treatment under the DATA 2000 act allowed in Doctor's surgery by certified physicians. Covered by health plans and Affordable Care Act. Treatment access increased in 2016 with CARA Act and increase in patient cap to 275.
- Net sales of buprenorphine based treatment in US estimated >**\$1bn p.a.**<sup>2</sup> - US will, therefore, remain the key determinant of Indivior's prospects in the short to medium term.

1. 2014 National Survey on Drug Use and Health, Substance Abuse and Mental Health Services Administration (SAMSHA)

2. Based on \$855m Indivior Revenues in USA in 2014, and share of 59%.



# Ex-US markets in earlier stage of development



- **EU (>1m problem opioid users) differs from US as opioid-dependence mainly heroin addiction<sup>1</sup>**
  - Policy focused more on harm reduction for society than on patient recovery
  - Methadone clinics, strict supervision prevail
  - Volume growing slowly, value in decline due to austerity pressures
  - Scope to grow by building recognition of painkiller dependence (estimated up to 0.45m patients)
- **ROW (~23m people with drug use disorders) opioid drug use almost exclusively heroin addiction<sup>1</sup>**
  - Under-developed or adversarial policy regimes (penal sentences for possession) in many countries
  - China (c.7m opioid dependent including 1.4m registered drug users) the largest potential market – a strategic target for Indivior
  - Australia a well developed market on US model
- **Scope for growth in ex-US markets in the medium to long-term.**

1. 2015 World Drug Report. European Drug Report 2015 (EMCDDA): China Narcotics Control Report, 205-2014, NNCC Office  
Drug use and dependence from World Drug Report refers to opiates, cocaine, cannabis, amphetamines, and psychoactive substances - Indivior PLC  
annual report 2015 p.13. Full details of sources on p.137



# Indivior PLC

Progress in 2016

# YTD Q3 Highlights

## Financials Above Plan

- NR \$799m
- Op Profit\* \$315m
- Net Income\* \$205m
- EPS \* 28c
- Cash \$586m
- Net Cash \$11m

\* Adjusted to exclude \$237m of exceptional items.

## Operationally Strong

- US market growth in mid to high single digits
- Third consecutive quarter of net revenue growth in USA
- SUBOXONE® Film share at 60.5% slightly ahead year to date.
- Separation virtually complete with no disruption.

## Pipeline Continuing Progress

- Buprenorphine Monthly Depot positive Phase 3 trial efficacy top-line results – in line to meet both primary and secondary endpoints vs placebo.
- Risperidone Monthly Depot – successful Pre-NDA meeting.
- Arbaclofen Placarbil for alcohol use disorder – cap target dose well tolerated but some individual variability in PK levels observed

**Guidance for Full Year Raised**  
**NR guidance \$1,060m to \$1,075m**  
**Net Income guidance \$250m to \$265m**



# Guidance for 2016

	Initial Guidance	Half Year Guidance	New Guidance
Net Revenue	\$945m - \$975m	1,000m - \$1,030m	<b>\$1,060m-\$1,075m</b>
Net Income (adjusted)	\$155m - \$180m	\$180m - \$200m	<b>\$250m-\$265m</b>

## Guidance was based on

- **No material change in current market conditions;**
  - ✓ no deterioration in generic tablet pricing;
  - ✓ limited impact of branded competition
  - ✓ no generic film entry in 2016.
  - ✓ modest loss of US share due to formulary changes & managed Medicaid accounts lost in 2015

- **Reinvestment of <\$35m of the gross profit above original assumptions in driving innovations:-**
  - ✓ Buprenorphine Monthly Depot
- **Excluding Exceptional Items (\$237m year to date)**
- **At constant exchange rates (to estimated 2015 averages)**
- **Estimated tax charge of 25% plus exceptional tax charges**



# INDIVIOR PLC – PRIORITIES FOR 2016 (AS SHOWN IN FEBRUARY & JULY)

## Resolve litigation & investigations and secure long-term certainty for Company

### 1. SUBOXONE® Film Resilience

Preserve leadership position in USA against 5 (now 7) generic and 3 branded competitors



### 2. Develop the pipeline

- Transformational lifecycle products for Buprenorphine
- Treatments for other addictions and addiction rescue



### 3. Finance ready for BD / M&A

- Expand business
  - Diversify risk
- through targeted business development

#### US Listing process

BD/M&A and US listing on hold until litigation/investigation is clarified / resolved

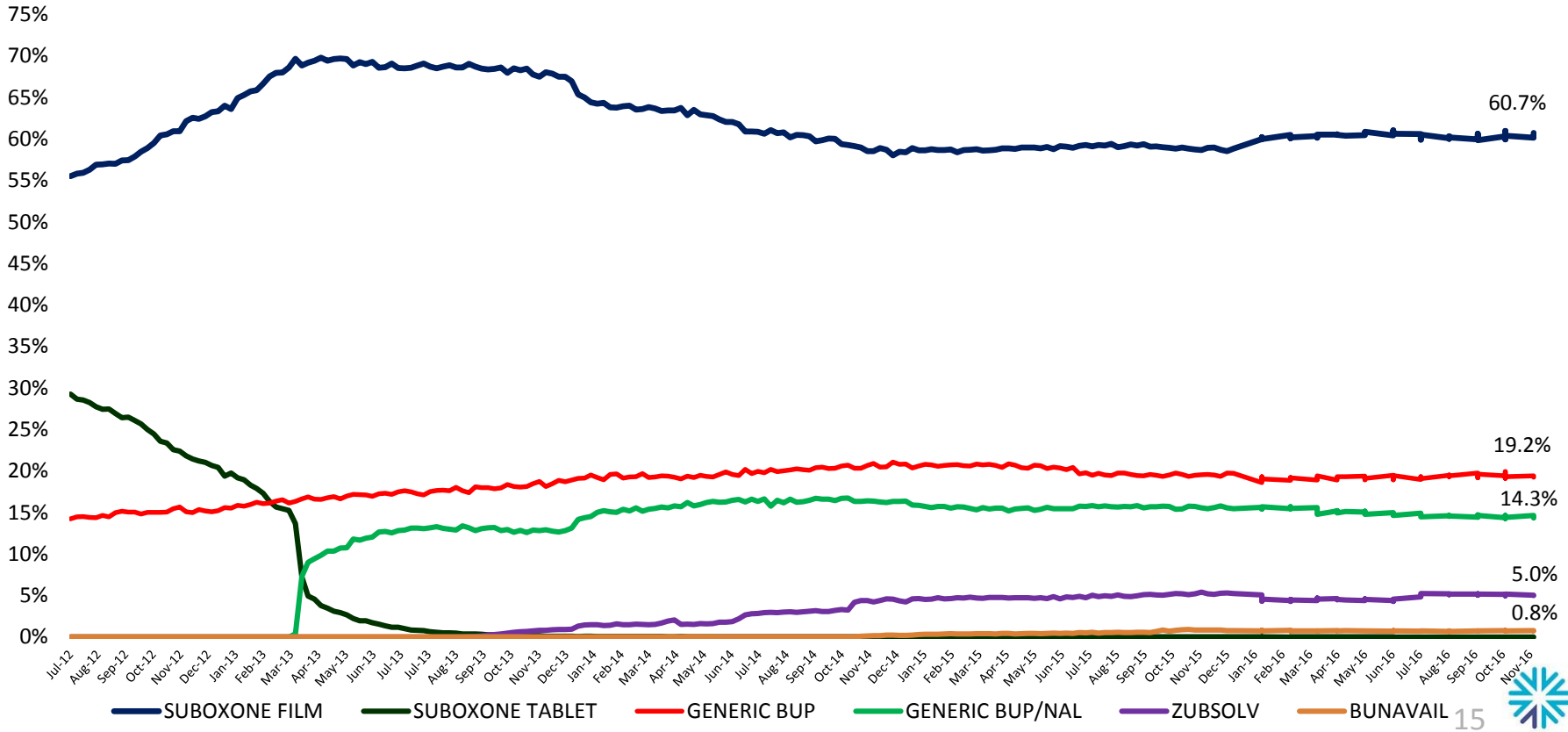
### 4. Expand Global treatment

- New treatment areas of addiction and related morbidities
- Expand treatment access in USA
- Opioid painkiller dependence in Europe
- File NDA in China





# Competition is intensifying, but Film share has been resilient



## ANDA litigation update

- 5 Generic companies pursuing ANDAs seeking to commercialise generic versions of SUBOXONE® Film in US
- Indivior has asserted patents (both formulation and process patents) in litigation against these ANDA filers
- **District court decision announced Friday June 3<sup>rd</sup>, 2016 found that Actavis & Par infringed the '514 patent which expires 2024.**
  - '514 patent validity upheld and infringed
  - '150 patent validity upheld but not infringed.
  - '832 patent claims invalid but would have been infringed if valid.
  - Actavis and Par enjoined from launching generic products until April 2024.

### Timetable

ANDA Applicant	Patents asserted against Filer	Trial Date	30 Month Stay Expires
Actavis Par	3 Orange Book	Nov/Dec 2015	28 Feb 2016 (Actavis) 25 Sept 2016 (Par)
Dr Reddy's (DRL)	2 Orange Book	Nov 2016	17 April 2017 (DRL has challenged the applicability of the 30-month stay as to one of its two ANDAs)
Actavis, Par, DRL	1 Process Patent	Nov 2016	n/a
Alvogen	2 Orange Book 1 Process	Sept 2017 (tentative)	29 Oct 2017
Mylan	2 Orange Book 1 Process	Sept 2017	24 March 2018



# Other Legal Proceedings

(see detailed disclosures in back-up)

## Department of Justice

A federal criminal grand jury investigation of Indivior initiated in Dec 2013 is continuing and includes marketing and promotion practices, pediatric safety claims and overprescribing of medication by certain physicians.

## State Subpoenas

In Q4 2016, two States served Indivior with subpoenas for records relating to the Company's marketing and promotion of SUBOXONE® products and other formerly marketed products.

## Federal Trade Commission

A non-public investigation of Indivior initiated in June 2013 is continuing and is focused on business practices related to SUBOXONE®, including those that are the subject of the allegations in the Antitrust litigation.

## Antitrust Litigation

The lawsuits concerning allegations that Indivior violated federal and state antitrust laws in attempting to delay generic entry of alternatives to SUBOXONE® tablets, and that Indivior unlawfully acted to lower the market share of these products, are continuing.



# R&D Pipeline Delivery

## Success with the major projects

- RBP-6000 – Phase III efficacy and safety trials concluded
  - Achieved all primary and secondary endpoints
- RBP-7000 – Phase III efficacy and safety trials concluded
  - Achieved all primary and secondary endpoints
- Arbaclofen Placarbil – reformulating and plan for next steps in 2017

## Scale of Market Opportunity as indicated on demerger <sup>1</sup>

<u>Product</u>	<u>Potential Peak NR</u>
RBP-6000	\$400m - \$700m
RBP-7000	\$100m - \$200m
Arbaclofen Placarbil	\$500m - \$900m

- 2014 estimates – markets have grown since then and our knowledge base has increased
- Will revisit peak NR estimates in 2017

<sup>1</sup> Indivior PLC investor day November 21, 2014, slide 184



## More on key asset – RBP-6000

### Monthly Depot Buprenorphine

- Proven ATRIGEL® sub-cutaneous system
- Phase III efficacy and safety trial: Top Line Results published August 17<sup>th</sup>, 2016.
- Phase III long-term safety trial: Database lock achieved October 31<sup>st</sup>, 2016.
- Fast Track Designation granted May 23<sup>rd</sup>, 2016. Pre-NDA meeting in December 2016.

### Objectives of development

- To enhance compliance and adherence to treatment
- To reduce risk of diversion & misuse
- To assess association of sustained plasma levels of buprenorphine/ high  $\mu$ OR occupancy with suppression of withdrawal symptoms and blockade of subjective and objective effects of opioid agonists

001 (Efficacy Study) Interim TLFs Aug 2016

NDA Submission Q2 2017

FDA Approval Q4 2017 (if FDA Priority Review granted)

Promotional Launch End 2017



# First priority is always to invest in organic growth

## Lower risk, investing in what we know.

### Pre-commercialisation for RBP-6000

- Medical education
- Healthcare professional & patient preparation
- Development of distribution channels
- Salesforce training

### SUBOXONE® Tablet in China

- NDA submission completed
- Investing in pre-commercial infrastructure

### Accelerating growth in treatment USA

- Significant investment in driving patients into treatment
- Opportunities arising from regulatory change
- Nurse practitioners and physician assistants
  - Patient cap raised for certain qualified, waived doctors

### RBP-7000 strategy

Still open minded on route forward – internal or external – and there is no rush to resolve this, NDA not filed until H2 2017

However time to start education, marketing and medical affairs investment is 2017 whichever route is taken





# Cost Saving Initiative 2016

---

## 2014-2016 Building fit-for-purpose as PLC

---

First priority was to get it right

- separation from RB
- standalone PLC functions
- appropriate compliance and regulatory infrastructure for a company selling a schedule III drug
- SAP implementation,
- taking control of supply / Fine Chemical Plant

---

## 2016 forward: Optimizing the Organisation

---

Now optimising what we have

- We have initiated a project in H2 2016
- We have already achieved some savings in indirect costs in 2016
- We are benchmarking costs against appropriate comparators
- We are looking at optimizing our structure

We will report more at Full Year in February



# Agenda for 2017 – H1

Date	Activity	Event
<u>Q1</u>		
Jan 9-11	JP Morgan Conference San Francisco	
Feb 22	Full Year 2016 Financial Results	Presentation in London (webcast live)
End Q1	RBP-6000 Long-term safety extension	Top Line results
End Q1	RBP-7000 long-term safety extension	Top Line results
<u>Q2</u>		
May 3	Q1 2017 results	Conference Call
May 4	Deutsche Bank Boston Conference	
June 6-7	Jefferies New York Conference	
Q2	RBP-6000	NDA filing



## Summary

We face the  
future with  
confidence

We are making  
progress in  
managing the  
risks to the  
business

We look forward  
to continuing our  
progress



### **Indication**

SUBOXONE® (buprenorphine and naloxone) Sublingual Film (CIII) is a prescription medicine indicated for treatment of opioid dependence and should be used as part of a complete treatment plan to include counseling and psychosocial support.

**Treatment should be initiated under the direction of physicians qualified under the Drug Addiction Treatment Act.**

### **IMPORTANT SAFETY INFORMATION**

#### **Indication**

SUBOXONE® (buprenorphine and naloxone) Sublingual Film (CIII) is a prescription medicine indicated for treatment of opioid dependence and should be used as part of a complete treatment plan to include counseling and psychosocial support.

**Treatment should be initiated under the direction of physicians qualified under the Drug Addiction Treatment Act.**

#### **Important Safety Information**

Do not take SUBOXONE Film if you are allergic to buprenorphine or naloxone as serious negative effects, including anaphylactic shock, have been reported.

SUBOXONE Film can be abused in a manner similar to other opioids, legal or illicit.

SUBOXONE Film contains buprenorphine, an opioid that can cause physical dependence with chronic use. Physical dependence is not the same as addiction. Your doctor can tell you more about the difference between physical dependence and drug addiction. Do not stop taking SUBOXONE Film suddenly without talking to your doctor. You could become sick with uncomfortable withdrawal symptoms because your body has become used to this medicine.

SUBOXONE Film can cause serious life-threatening breathing problems, overdose and death, particularly when taken by the intravenous (IV) route in combination with benzodiazepines or other medications that act on the nervous system (ie, sedatives, tranquilizers, or alcohol). It is extremely dangerous to take nonprescribed benzodiazepines or other medications that act on the nervous system while taking SUBOXONE Film.

You should not drink alcohol while taking SUBOXONE Film, as this can lead to loss of consciousness or even death.

Death has been reported in those who are not opioid dependent.

Your doctor may monitor liver function before and during treatment.

SUBOXONE Film is not recommended in patients with severe hepatic impairment and may not be appropriate for patients with moderate hepatic impairment. However, SUBOXONE Film may be used with caution for maintenance treatment in patients with moderate hepatic impairment who have initiated treatment on a buprenorphine product without naloxone.

Keep SUBOXONE Film out of the sight and reach of children. Accidental or deliberate ingestion of SUBOXONE Film by a child can cause severe breathing problems and death.

Do not take SUBOXONE Film before the effects of other opioids (eg, heroin, hydrocodone, methadone, morphine, oxycodone) have subsided as you may experience withdrawal symptoms.

Injecting the SUBOXONE Film product may cause serious withdrawal symptoms such as pain, cramps, vomiting, diarrhea, anxiety, sleep problems, and cravings.

Before taking SUBOXONE Film, tell your doctor if you are pregnant or plan to become pregnant. If you are pregnant or become pregnant while taking SUBOXONE Film, alert your doctor immediately and you should report it using the contact information provided below.\*

Neonatal opioid withdrawal syndrome (NOWS) is an expected and treatable outcome of prolonged use of opioids during pregnancy, whether that use is medically-authorized or illicit. Unlike opioid withdrawal syndrome in adults, NOWS may be life-threatening if not recognized and treated in the neonate. Healthcare professionals should observe newborns for signs of NOWS and manage accordingly.

Before taking SUBOXONE Film, talk to your doctor if you are breastfeeding or plan to breastfeed your baby. The active ingredients of SUBOXONE Film can pass into your breast milk. You and your doctor should consider the development and health benefits of breastfeeding along with your clinical need for SUBOXONE Film and should also consider any potential adverse effects on the breastfed child from the drug or from the underlying maternal condition.

Do not drive, operate heavy machinery, or perform any other dangerous activities until you know how SUBOXONE Film affects you. Buprenorphine in SUBOXONE Film can cause drowsiness and slow reaction times during dose-adjustment periods.

Common side effects of SUBOXONE Film include nausea, vomiting, drug withdrawal syndrome, headache, sweating, numb mouth, constipation, painful tongue, redness of the mouth, intoxication (feeling lightheaded or drunk), disturbance in attention, irregular heartbeat, decrease in sleep, blurred vision, back pain, fainting, dizziness, and sleepiness.

This is not a complete list of potential adverse events associated with SUBOXONE Film. Please see [full Prescribing Information](#) for a complete list.

\*To report negative side effects associated with taking SUBOXONE Film, please call 1-877-782-6966. You are encouraged to report negative side effects of prescription drugs to the FDA. Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch) or call 1-800-FDA-1088.

For more information about SUBOXONE Film, SUBOXONE® (buprenorphine and naloxone) Sublingual Tablets (CIII), or SUBUTEX® (buprenorphine) Sublingual Tablets (CIII), please see the respective [full Prescribing Information](#) and Medication Guide at [www.suboxoneREMS.com](http://www.suboxoneREMS.com).



Strengthening our global leadership in Addiction Treatment



# Back Up

- Litigation update
- Pipeline update (at Q3)



# LITIGATION UPDATE



*Our vision is that all patients around the world will have unrestricted access to high quality treatment services for the chronic relapsing conditions and co-morbidities of addiction*

## \$220m Litigation provision

The Company has recorded a charge of \$220m in the third quarter of 2016 for the investigative and antitrust litigation matters noted below. Because these matters are in various stages, the Company cannot predict with any certainty the ultimate resolution or cost of all of the matters. The final amount might be materially different from this reserve.



## Department of Justice Investigation

A federal criminal grand jury investigation of Indivior initiated in December 2013 is continuing, and includes marketing and promotion practices, pediatric safety claims, and overprescribing of medication by certain physicians. The U.S. Attorney's Office for the Western District of Virginia has served a number of subpoenas relating to SUBOXONE® Film, SUBOXONE® Tablet, SUBUTEX® Tablet, buprenorphine and our competitors, among other issues. We are in the process of responding by producing documents and other information in connection with this on-going investigation, and in preliminary discussion about a possible resolution of the investigation. It is not possible at this time to predict with any certainty the potential impact of this investigation on us or to quantify the ultimate cost of a resolution. We are cooperating fully with the relevant agencies and prosecutors and will continue to do so.

## State Subpoenas

On October 12, 2016, the Company was served with a subpoena for records from the state of Connecticut Office of the Attorney General under its Connecticut civil false claims act authority. The subpoena requests documents related to the Company's marketing and promotion of SUBOXONE® products and its interactions with a non-profit third party organization. On November 16, 2016, the Company was served with a subpoena for records from the state of California Department of Insurance under its California insurance code authority. The subpoena requests documents related to SUBOXONE® Film, SUBOXONE® Tablet, and SUBUTEX® Tablet. The Company is cooperating in these investigations.



## FTC Investigation

The Judge overseeing the legal privilege dispute in the FTC investigation has appointed a Special Master (an independent external lawyer) to investigate the claims of legal privilege and provide a recommendation to the Court on how the documents at issue should be treated. An initial report and recommendation relating to the first tranche of privileged documents reviewed by the Special Master was finalized in April 2016 and adopted by the Court on August 1<sup>st</sup>, 2016. Pursuant to this report and the Court's order, Indivior produced certain additional documents. A second tranche of documents remains under review. Following that review, the Court's decision then may be subject to appeal by either party.

## Antitrust Litigation

Fact discovery is continuing in the antitrust class action litigation described on our Annual Report ("Class Action Litigation"). Plaintiffs allege, among other things, that Indivior violated federal and state antitrust laws in attempting to delay generic entry of alternatives to SUBOXONE tablets, and plaintiffs further allege that Indivior unlawfully acted to lower the market share of these products.

Amneal Pharmaceuticals LLC, a manufacturer of generic buprenorphine / naloxone tablets, filed a complaint against the Company in December 2015. This case has been coordinated with the Class Action litigation. Amneal's complaint contains antitrust allegations similar in nature to those set out in the class action complaints, and Amneal has also alleged violations of the Lanham Act.

On September 22, 2016, 35 states and the District of Columbia filed a complaint against the Company in the same district where the Class Action and *Amneal* litigation is pending. The States' complaint is similar to the other pending complaints, and alleges violations of state and federal antitrust and consumer protection laws.

On November 16, 2016 the States served an amended complaint, adding six additional states as plaintiffs. This lawsuit relates to the investigation conducted by various states, as discussed in previous filings.



## ANDA Litigation

The ruling after trial against **Actavis** and **Par** in the lawsuit involving the Orange Book-listed patents for SUBOXONE® Film issued on June 3<sup>rd</sup>, 2016. Ruling found the asserted claims of the '514 patent valid and infringed; the asserted claims of the '150 patent valid but not infringed; and the asserted claims of the '832 patent invalid, but found that certain claims would be infringed if they were valid.

Based on the ruling as to the '514 patent, **Actavis** and **Par** are currently enjoined from launching a generic product. Par has appealed and **Actavis** is expected to appeal this ruling. The generics have also moved to reopen the judgment based on a more stringent claim construction in the **Dr Reddy's** case. In light of the motions to reopen, **Par's** appeal has been deactivated until the District Court rules on the motions, and the deadline for **Actavis** to file a notice of appeal has been postponed.

Trial against **Dr. Reddy's, Actavis and Par** in the lawsuits involving the process patent (US Patent No. 8,900,497) took place on November 16<sup>th</sup> and 21<sup>st</sup>-23<sup>rd</sup>, 2016.

Trial against **Dr. Reddy's** in the lawsuit involving the Orange Book-listed patents for SUBOXONE® Film took place on November 7<sup>th</sup>, 16<sup>th</sup>, and 21<sup>st</sup>-23<sup>rd</sup>, 2016, with **Dr. Reddy's** 30-month stay of FDA approval on ANDA No. 20-5806 expiring April 17<sup>th</sup>, 2017. Indivior believes **Dr. Reddy's** 30-month stay of FDA approval on ANDA No. 20-5299 also expires on April 17<sup>th</sup>, 2017, however, **Dr Reddy's** disputes the applicability of the stay to this ANDA.

Trial against **Alvogen** in the lawsuit involving the Orange Book-listed patents and the '497 process patent for SUBOXONE® Film has been postponed and is presently expected to take place in September 2017, with Alvogen's 30-month stay of FDA approval expiring October 29<sup>th</sup>, 2017.

By a Court order dated August 22<sup>nd</sup>, 2016, Indivior's SUBOXONE® Film patent litigation against **Sandoz** has been dismissed without prejudice because Sandoz is no longer pursuing Paragraph IV certifications for its proposed generic formulations of SUBOXONE® film.

Trial against **Mylan** in the lawsuit involving the Orange Book-listed patents and the '497 process patent for SUBOXONE® Film is scheduled for September 25<sup>th</sup>, 2017, with Mylan's stay expiring March 24, 2018.

Indivior received a Paragraph IV notification from **Teva**, dated February 8, 2016, indicating that Teva had filed a 505(b)(2) New Drug Application (NDA) for a 16mg/4mg strength of Buprenorphine/naloxone sublingual film. The Indivior Group and Teva agreed that infringement by Teva's 16 mg/4 mg dosage strength will be governed by the infringement ruling on the accused 8 mg/2 mg dosage strength in its ANDA currently scheduled for trial in November 2016.



## Inter-Partes Reviews

The USPTO declined to institute **Teva's** petitions for inter partes review of the three Orange Book-listed patents on procedural grounds.

**Dr. Reddy's** has filed an inter partes review petition on each of the three Orange Book Patents. These petitions are substantively similar to those filed by Teva. The USPTO denied the petitions, finding Dr. Reddy's had failed to establish a reasonable likelihood of showing the challenged claims are unpatentable as obvious.

Certain claims of the '832 patent were found invalid in an IPR proceeding brought by **BioDelivery Sciences International (BDSI)**, a decision that has been affirmed by the Court of Appeals for the Federal Circuit









# The Pipeline

update



## OPIOID USE DISORDER

Product	Geography	Milestone
SUBOXONE® Tablet		<b>Additional Dosage Strengths 12mg/3 mg and 16 mg/4 mg:</b> sNDS submitted to Health Canada (HC) Dec 6 <sup>th</sup> , 2016.
		<b>NDA preparation:</b> Plan to submit NDA to CFDA by end of Q4-2016
RBP-6000 in ATRIGEL®		<ul style="list-style-type: none"> <li>▪ <b>Phase 3 efficacy and safety trial (RB-US-13-0001):</b> Positive top line results Aug 17<sup>th</sup>.</li> <li>▪ <b>Phase 3 long-term safety trial (RB-US-13-0003):</b> Database lock achieved Oct 31<sup>st</sup>.</li> <li>▪ <b>Extension study (INDV-6000-301):</b> First Patient dosed in Aug 2016.</li> <li>▪ <b>REmission from Chronic Opioid Use: Studying EnVironmental and socioEconomic factors on Recovery (RECOVER®) study:</b> Logo USPTO-approved registered TM in Jul 2016; &gt;400 subjects achieving baseline survey; Baseline interim analysis report in Q4-2016.</li> <li>▪ <b>Regulatory:</b> Fast Track Designation May 23<sup>rd</sup>; REMS meeting Sep 28<sup>th</sup>; Pre-NDA meeting Dec 14<sup>th</sup>; NDA submission (<i>pending outcome of pre-NDA meeting</i>): Q2-2017.</li> </ul>
		<b>Meeting with Regulatory Agencies Q4-2016:</b> TGA; HC; ANSM; MHRA; MPA; BfArM

NDS: New Drug Submission; NDA: New Drug Application; TGA: Therapeutic Goods Administration; HC: Health Canada; ANSM: Agence Nationale de Sécurité du Médicament et des Produits de Santé; MHRA: Medicines and Healthcare products Regulatory Agency; MPA: Medical Products Agency; BfArM: Bundesinstitut für Arzneimittel und Medizinprodukte.



## 2016 PEER-REVIEWED SCIENTIFIC PUBLICATIONS: RBP-6000



*J Clin Psychopharmacol*, 36(1):18-26. <http://dx.doi.org/10.1097/JCP.0000000000000434>

- Monthly injections of RBP-6000 produced clinically relevant plasma levels of buprenorphine (and predicted  $\mu$ -opioid receptor occupancy in the brain), which translated into an almost complete blockade of the subjective effects of hydromorphone and a significant reduction in the reinforcing effects of hydromorphone. RBP-6000 was also safe and well tolerated.




*J Clin Pharmacol*, 56(7):806-815. <http://dx.doi.org/10.1002/jcph.665>

- The results of this population PK analysis jointly with the predicted level of  $\mu$ -opioid receptor occupancy in the brain provided quantitative criteria for clinical Phase III dose selection of RBP-6000: a dose of 300 mg every 28 days was appropriate for immediately achieving an effective exposure after the first SC injection and to maintain effective levels of exposure during chronic treatment.




## PSYCHIATRIC CO-MORBIDITIES

Product	Geography	Milestone
RBP-7000 in ATRIGEL®		<ul style="list-style-type: none"><li>▪ <b>Phase 3 efficacy and safety trial (RB-US-09-0010):</b><ul style="list-style-type: none"><li>✓ Positive top line results released May 5<sup>th</sup>, 2015.</li></ul></li><li>▪ <b>Phase 3 long-term safety extension trial (RB-US-13-0005):</b><ul style="list-style-type: none"><li>✓ Database Lock achieved Oct 21<sup>st</sup>, 2016.</li></ul></li><li>▪ <b>US Health Economics &amp; Outcomes Research (HEOR) studies:</b><ul style="list-style-type: none"><li>✓ Analysis of HEOR endpoints in Phase III RB-US-09-0010 and RB-US-13-0005 with budget Impact Model &amp; AMCP dossier.</li></ul></li><li>▪ <b>Pre-NDA meeting held August 4<sup>th</sup>, 2016:</b><ul style="list-style-type: none"><li>✓ FDA agreement with proposed stability testing timelines &amp; NDA submission strategy (Target: Q4-2017).</li></ul></li></ul>



## PSYCHIATRIC CO-MORBIDITIES (SCHIZOPHRENIA)

Product	Geography	Milestone
RBP-7000 in ATRIGEL®		<ul style="list-style-type: none"><li>▪ <b>Phase 3 efficacy and safety trial (RB-US-09-0010):</b><ul style="list-style-type: none"><li>✓ Positive top line results released May 5<sup>th</sup>, 2015.</li></ul></li><li>▪ <b>Phase 3 long-term safety extension trial (RB-US-13-0005):</b><ul style="list-style-type: none"><li>✓ Database Lock achieved Oct 21<sup>st</sup>, 2016.</li></ul></li><li>▪ <b>US Health Economics &amp; Outcomes Research (HEOR) studies:</b><ul style="list-style-type: none"><li>✓ Analysis of HEOR endpoints in Phase III RB-US-09-0010 and RB-US-13-0005 with budget Impact Model &amp; AMCP dossier.</li></ul></li><li>▪ <b>Pre-NDA meeting held August 4<sup>th</sup>, 2016:</b><ul style="list-style-type: none"><li>✓ FDA agreement with proposed stability testing timelines &amp; NDA submission strategy (Target: Q4-2017).</li></ul></li></ul>

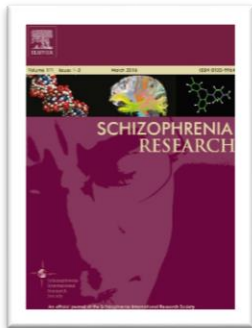


## 2016 PEER-REVIEWED SCIENTIFIC PUBLICATIONS: RBP-7000



*J. Clin. Psychopharmacology* 36(2):130-140. <http://dx.doi.org/10.1097/JCP.0000000000000479>

- **Phase III efficacy trial (RB-US-09-0010):** RBP-7000 (90 mg & 120 mg) significantly reduced Positive and Negative Syndrome Scale (PANSS) total scores (*primary endpoint*) and significantly improved Clinical Global Impression – Severity (CGI-S) scores (*secondary endpoint*) vs. placebo. Both RBP-7000 dosages were well tolerated.




*Schizophr. Res.* 174(1-3): 126-131. <http://dx.doi.org/10.1016/j.schres.2016.03.020>

- **Phase III efficacy trial (RB-US-09-0010):** Patients randomized to RBP-7000 (90 mg & 120 mg) showed significantly greater improvements in Health-Related Quality of Life (HRQoL) and overall well-being vs. placebo. Patient satisfaction and patient preference for their medicine improved significantly with RBP-7000 (90 mg and 120 mg) vs. Placebo.





# ALCOHOL USE DISORDER

Product	Geography	Milestone
Arbaclofen Placarbil		<ul style="list-style-type: none"><li>▪ <b>RB-US-14-0001:</b> Final Clinical Study Report Jun 29<sup>th</sup>, 2016.</li><li>▪ Arbaclofen Placarbil appears to be safe &amp; well tolerated up to a dose of 240mg in controlled abstinence setting.</li></ul> <p><i>However:</i></p> <ul style="list-style-type: none"><li>▪ Significant inter-individual variability in pharmacokinetics profile as doses increased.</li><li>▪ <i>In vitro</i> and potential <i>in vivo</i> alcohol interactions require:<ul style="list-style-type: none"><li>— new formulation development.</li><li>— additional clinical studies (regional absorption and alcohol interaction) to mediate safety risk prior to further outpatient studies in AUD patients.</li></ul></li></ul>



# RESCUE MEDICATIONS FOR DRUG OVERDOSE/INTOXICATION

Product	Geography	Milestone
<b>Intranasal Naloxone for Opioid Overdose</b>		<ul style="list-style-type: none"><li>▪ <b>Temporary Authorization for Use (ATU):</b> Approved by French ANSM on Nov 5<sup>th</sup>, 2015.</li><li>▪ ANSM approved <b>ATU launch</b> on Jul 26<sup>th</sup>, 2016 with NALSCUE® launch in France on Jul 27<sup>th</sup>, 2016.</li><li>▪ <b>MAA</b> submitted Nov 28<sup>th</sup>, 2016.</li></ul>
<b>RBP-8000: Cocaine Esterase for Cocaine Intoxication</b>		<ul style="list-style-type: none"><li>▪ <b>Breakthrough Therapy Designation:</b> Granted Oct 17<sup>th</sup>, 2014.</li><li>▪ <b>Second Type B meeting with the FDA:</b> Mar 16<sup>th</sup>, 2016.</li><li>▪ Per agreement with FDA, work has continued with the development of a lyophilized product and first test batch has been manufactured in October 2016.</li></ul>

ANSM: Agence Nationale de Sécurité du Médicament et des Produits de Santé; MAA: Marketing Authorisation Application





Strengthening our global leadership in Addiction Treatment

