

EISAI SUBMITS MARKETING AUTHORIZATION APPLICATION FOR ANTICANCER AGENT LENVATINIB IN SOUTH KOREA

Eisai Co., Ltd. (Headquarters: Tokyo, CEO: Haruo Naito, "Eisai") announced today that it has submitted its application to the regulatory authority in South Korea (Ministry of Food and Drug Safety) for marketing approval of its novel in-house developed anticancer agent lenvatinib mesylate (lenvatinib) as a treatment for progressive radioiodine-refractory differentiated thyroid cancer. Following the submission of marketing authorization applications in Japan, the United States and Europe, this marks the first time Eisai has submitted a marketing authorization application for lenvatinib in Asia.

Lenvatinib is an oral molecular targeted agent that selectively inhibits the activities of several different molecules including VEGFR, FGFR, RET, KIT and PDGFR, involved in angiogenesis and tumor proliferation. This potentially makes lenvatinib a first-in-class treatment in thyroid cancer, especially given that it simultaneously inhibits the activity of the three molecules VEGFR, FGFR and also RET.

Lenvatinib application seeks marketing authorization in Japan in June 2014 as the first in the world, followed by the submission of applications in the United States and Europe in August 2014. Lenvatinib was granted Orphan Drug status by the regulatory authorities in Japan, Europe and the United States. Lenvatinib was also granted an accelerated assessment in Europe by the European Medicines Agency and orphan drug review status in the United States by the U.S. Food and Drug Administration.

The number of patients newly diagnosed with thyroid cancer in 2012 in South Korea was 33,000, and in Asia was estimated to be 144,000. Although treatment is possible for thyroid cancer, there are few treatment options available once thyroid cancer is diagnosed. Lenvatinib remains a disease with significant unmet medical needs.

Eisai is committed to exploring the potential clinical benefits of lenvatinib and seeking marketing approval in each country in Asia as soon as possible in order to provide relief for patients with thyroid cancer, and their families.

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[Notes to editors]

1. About Lenvatinib (E7080)

Lenvatinib, discovered and developed by Eisai, is an oral molecular targeted agent that selectively inhibits the kinase activities of vascular endothelial growth factor (VEGF) receptors (VEGFR1 (FLT1), VEGFR2 (KDR) and VEGFR3 (FLT4)), in addition to other proangiogenic and oncogenic pathway-related RTKs (including fibroblast growth factor (FGF) receptors FGFR1, 2, 3 and 4; the platelet-derived growth factor (PDGF) receptor PDGFR ; KIT; and RET) involved in tumor proliferation. This potentially makes lenvatinib a first-in-class treatment in thyroid cancer, especially given that it simultaneously inhibits the receptor tyrosine kinase activity of the three molecules VEGFR, FGFR and also RET via its novel binding mode. Applications for marketing authorization approval of lenvatinib were submitted in Japan for the indication of thyroid cancer in June 2014, and in the United States and Europe for the indication of progressive, radioiodine-refractory differentiated thyroid cancer in August 2014. Furthermore, a marketing authorization application was submitted in Switzerland in October 2014. Lenvatinib was granted Orphan Drug Designation in Japan for thyroid cancer in August 2012, in the United States for the treatment of follicular, medullary, anaplastic, and metastatic or locally advanced papillary thyroid cancer in December 2012, and in Europe for follicular and papillary thyroid cancer in April 2013. It is currently under development as a potential treatment for hepatocellular carcinoma (Phase III), non-small cell lung cancer (Phase II) and other solid tumor types.

2. About the SELECT Trial

The SELECT (Study of (E7080) Lenvatinib in differentiated Cancer of the Thyroid) trial was a multicenter, randomized, double-blind, placebo-controlled Phase III study of lenvatinib in patients with RR-DTC and radiographic evidence of disease progression within the prior 13 months (patients may have received 1 prior VEGFR-targeted therapies). Patients were randomized 2:1 to either receive once-daily, oral lenvatinib (24 mg) or placebo therapy. The study enrolled 392 patients in over 100 sites in Europe, North and South America and Asia (including Japan) and was conducted by Eisai in collaboration with SFJ Pharma Ltd.

Compared to placebo, lenvatinib achieved a statistically significant improvement (Hazard Ratio (HR) 0.21; 99% CI: 0.14-0.31; $p < 0.0001$) in progression free survival (PFS), which was the primary objective of the study. The median PFS with lenvatinib and placebo was 18.3 months and 3.6 months respectively. Secondary endpoints included overall response rate*, overall survival (OS) and safety. The results for overall response rate were 64.8% in the lenvatinib group and 1.5% in the placebo group. Complete response was observed in 1.5% (4 patients) of the lenvatinib group and zero in the placebo group. The median time to response for lenvatinib was 2.0 months. Median OS has not been reached yet in both groups. The most common lenvatinib treatment-related adverse events (TRAEs) (events with an incidence rate of at least 40%) were hypertension (67.8%), diarrhea (59.4%), decreased appetite (50.2%), weight loss (46.4%) and nausea (41.0%). The most common TRAEs (events with an incidence rate of at least 5%) of Grade 3 or higher (Common Terminology Criteria for Adverse Events) in