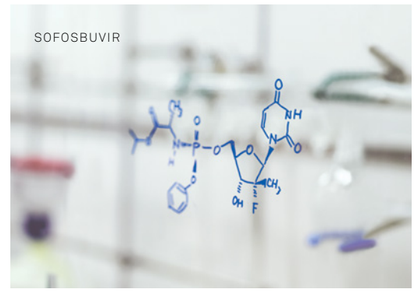
INNOVATION: NEW TREATMENT OPTIONS FOR CHRONIC HEPATITIS C

Transforming Treatment Paradigms

Current interferon-based regimens available for treating hepatitis C remain a challenge for patients due to safety issues, side effects, variable response rates and burdensome injections. Because of this, Gilead is advancing the development of all-oral hepatitis C medicines with the goal of improving tolerability and convenience and increasing cure rates. In November 2012, we reported a 100 percent sustained virologic response rate (SVR4*) for treatment-naïve genotype 1 hepatitis C patients enrolled in a Phase 2 trial evaluating an all-oral combination of sofosbuvir (GS-7977) and ledipasvir (GS-5885) with ribavirin. Based on these data, sofosbuvir and ledipasvir have been co-formulated into a single pill, which is now being studied in Phase 3 trials.



Accelerating Clinical Development

Following the acquisition of Pharmasset in January 2012, we moved quickly to expand clinical testing of hepatitis C therapies. Phase 3 trials exploring sofosbuvir in various combinations with other agents in genotype 1-6 patient populations are ongoing. In 2012, there were 21 new studies initiated, enrolling more than 2,680 participants, and because of patient and provider interest, we were able to complete enrollment of some of these trials within weeks. In addition to evaluating multiple hepatitis C drug combinations in diverse genotypes and patient populations, we are investigating ways to shorten therapy from one year to a matter of weeks.

Edward Gane, MD, Professor of Medicine at the University of Auckland, New Zealand, is a leading expert on treating chronic hepatitis C. As the principal investigator of the ELECTRON study of Gilead's investigational agent sofosbuvir, Dr. Gane is excited by the potential of all-oral regimens that could make treatment more effective and tolerable for patients.

*HCV RNA undetectable four weeks after completing therapy.