

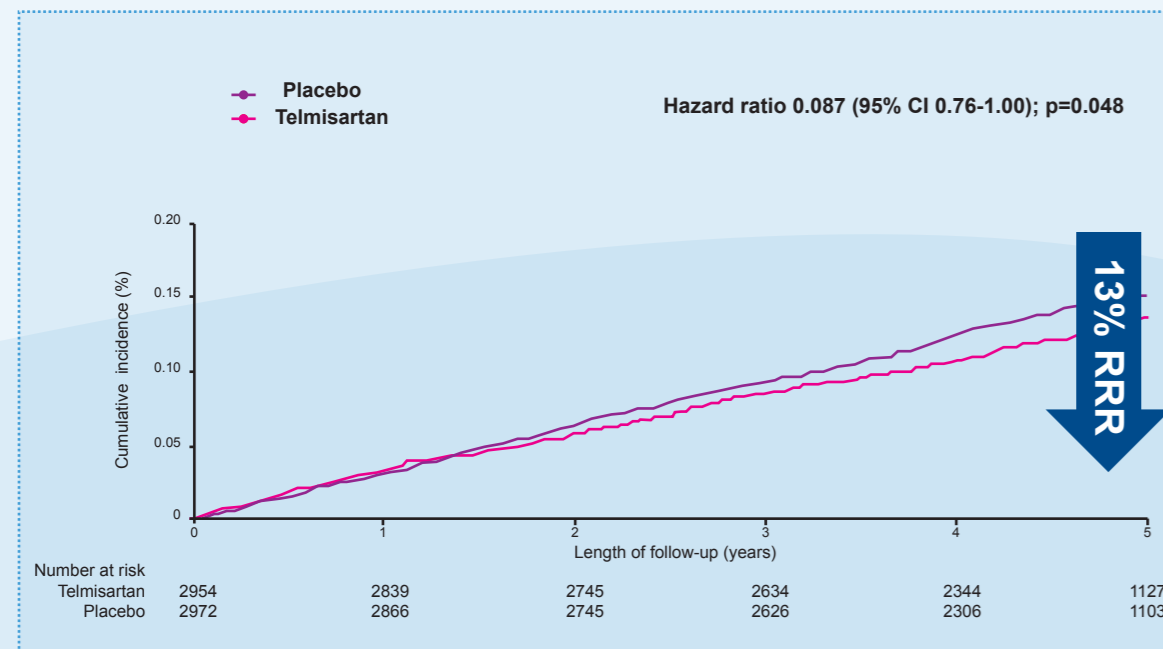
The 5 Ts of Telmicard®



ge of cardiovascular disease patients



▶ TRANSCEND - Again adding Telmisartan to ACE*- Intolerant patients showed added benefits



▶ TRANSCEND - Telmisartan 80mg Demonstrates a 13% Relative Risk Reduction of CV Death, MI* and Stroke in ACE-Intolerant High-Risk patients Receiving Best Standard of Care.¹⁷

Telmicard®
Telmicard® Plus
Telmisartan



The 5 Ts of Telmicard®

Help Save Lives

Target:

- ▶ True Once Daily
- ▶ Effective Blood Pressure Control in a Wide Range of Patients
- ▶ Saving Lives in a Broad Range of High Risk Cardiovascular Disease Patients
- ▶ Benefits Beyond BP Control
- ▶ Proven Tolerability Profile

References

(1) Kazuomi Kario, Vascular Damage in Exaggerated Morning Surge in Blood Pressure, Hypertension 2007;49:771-772; (2) American Heart Association. (3) Gordon McInnes, 24-hour powerful blood pressure-lowering: is there a clinical need? Journal of the American Society of Hypertension 2 (4) (2008) S16-S22; (5) Hypertension: The inside facts. What Happens to blood pressure over 24 hours? (6) Joel M. Neutel, MD, David H.G. Smith, MD, Journal of Clinical Hypertension, March 2003; EVALUATION of Angiotensin II Receptor Blockers for 24-Hour Blood Pressure Control: Meta-Analysis of a Clinical Database. (7) Amy Bareras, PHARM.D., and Chenye Gurkturner, RPH; BUMC PROCEEDINGS 2003;16:123-126 Angiotensin II Receptor Blockers. (8) R. Asmar, Journal compilation © 2006 Blackwell Publishing Ltd Int J Clin Pract, March 2006, 60, 3, 315-320; Targeting Effective Blood Pressure Control with Angiotensin Receptor Blockers. (9) Drugs 2001, 61 (10), 1501 – 1529. (10) Clinical Pharmacokinetics of ARBs in HT. Journal of Human Hypertension(2000) 14, Supp. 1, S73-S86. (11) Identification of Telmisartan as a unique ARB with Selective PPAR-g Modulating activity. Hypertension 2004; 43: 993-1002. (12) Cristiana Vitale, Giuseppe Mercurio, Carlotta Castiglioni, Cardiovascular Diabetology 2005, 4:6; Metabolic Effect of Telmisartan and Losartan in Hypertensive patients with Metabolic Syndrome. (13) ARBs FDC: Telmisartan/HCTZ in comparison with Losartan/HCTZ in managing patients with mild to moderate HT. Neutel J.M., et al on behalf of the Telmisartan group. Hypertens Res 2005; 28: 555-563. (14) ATHOS Study: Telmisartan/HCTZ Vs Amlodipine/HCTZ in older patients with systolic HT: Results from a large ABPM Study. Neldam S., et al. on behalf of the ATHOS group; AJGC 2006; 15: 151-160. (15) SMOOTH Study: Telmisartan/HCTZ Vs Valsartan/HCTZ in obese HTve patients with type 2 diabetes; Yves Lacourciere, Cardiovascular Diabetology 2007, 6: 28. (16) Salim Yusuf, D.Phil., Koon K.Teo, PhD., N Engl J Med 2008; 358: 1547-59; The Ongoing Telmisartan Alone and in Combination with Ramipril Global Endpoint Trial (ONTARGET). (17) Teo K, et al. American Heart Journal, 2004; 148: 52-61. (18) Peter Sleight, Acta Diabetologica 2005; 42: S 50-56. (19) The Telmisartan Randomized Assessment Study in ACE Intolerant subjects with cardiovascular Disease (TRANSCEND) investigators. Lancet 2008; 372:1174-83.

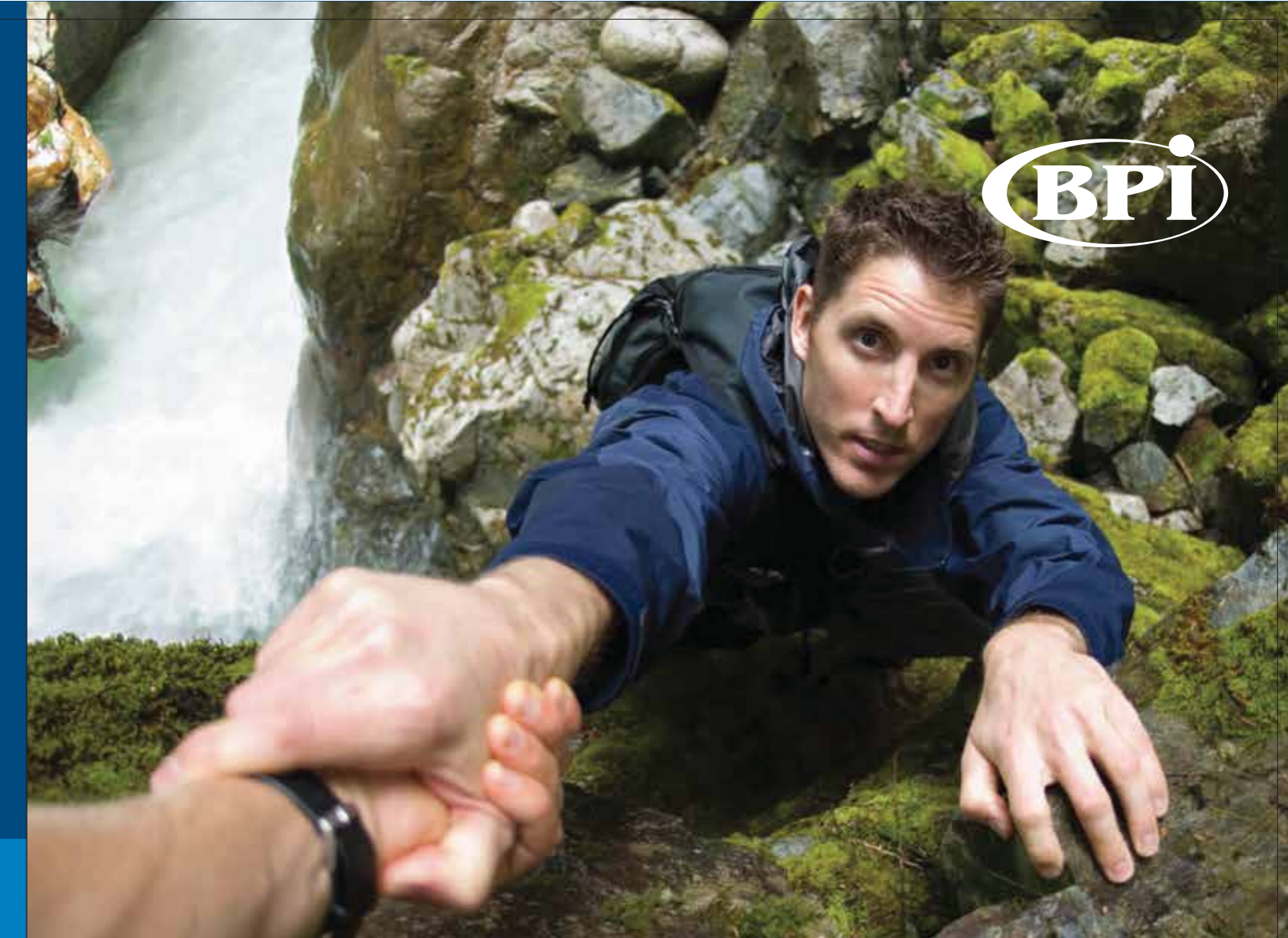
Before prescribing please consult physicians' circular.

® Registered trade name

Telmicard® / Telmicard® Plus manufactured by BPI



Benta Pharma Industries - Dbayah, Lebanon

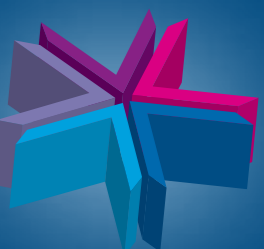


Telmicard®
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Telmisartan

Help Save Lives

The 5 Ts of Telmicard®



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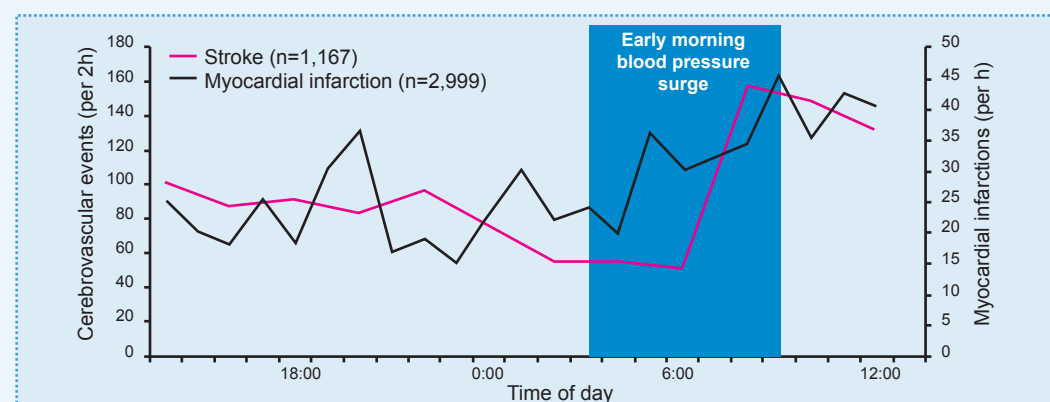
Telmisartan

I - Target the True Once Daily

Telmicard® optimizes protection

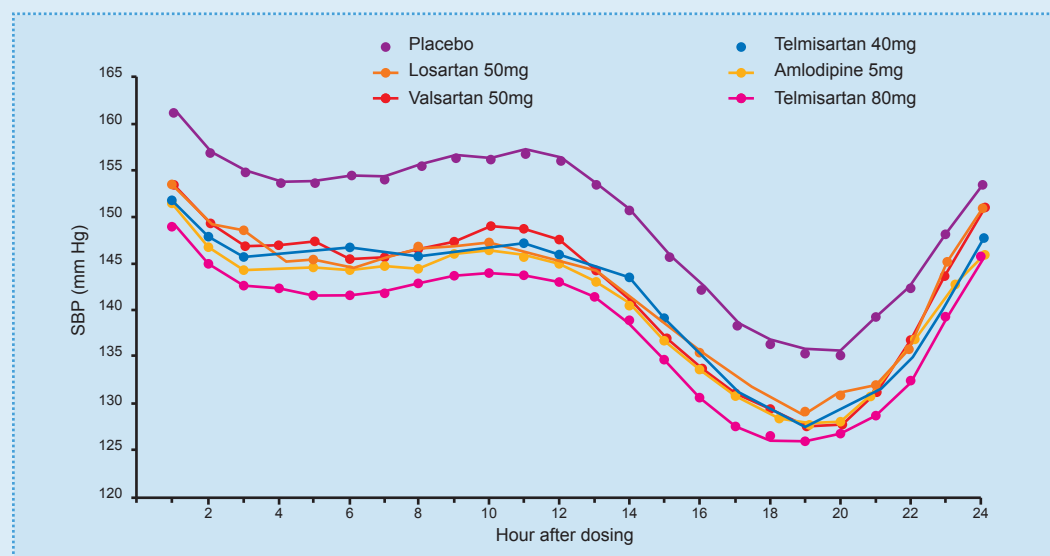
Early Morning Blood Pressure Surge

Increased cardiovascular risk



Early-Morning Blood Pressure Surge is an Independent Risk for Advancing the Atherosclerotic process and for Triggering Cardiovascular events.^{1,2,3}

Early Morning and 24 Hour Mean Blood Pressure Control



Telmisartan 80mg is significantly more effective than Losartan 50mg & Valsartan 80mg for reducing 24-Hour mean BP.

Furthermore, Telmisartan 80mg is comparable to Amlodipine 5mg for controlling the early morning surge in blood pressure.⁴

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IV - Target Benefits Beyond Best Standard of Care

Adding Telmisartan showed added benefits even in well treated patients

	ONTARGET (n=25,620) (%)	TRANSCEND (n=5,304) (%)	HOPE (n=9,541) (%)
ACE inhibitors	57.5	57.0	11.6
Angiotensin receptor blockers	8.6	30.0	-
Beta-blockers	56.9	57.6	39.5
Diuretics	27.9	32.6	15.1
Ticlodipine	2.5	2.6	-
Clopidogrel	8.5	8.0	-
Statins	60.7	54.4	28.9

The use of therapies known to reduce mortality/morbidity, such as beta blockers, statins, anti-platelets, ACEIs, is Higher in, ONTARGET and TRANSCEND studies, compared to their use in HOPE Study.^{15, 16}

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V - Target Tolerability

Telmisartan offers a better tolerability profile¹⁴

Variable	Ramipril (N=8,542)	Telmisartan (N=8,542)	Telmisartan Vs Ramipril	
			Relative risk	P Value
Cough	360 (4.2%)	93 (1.1%)	0.26	< 0.001
Angioedema	25 (0.3%)	10 (0.1%)	0.4	0.01

Over 5 years, there were fewer discontinuations in the Telmisartan arm (21.6%) versus the ramipril group (23.7% , p=0.055)¹⁴

*MI = Myocardial Infarction

*ACEI = Angiotensin Converting Enzyme Inhibitor

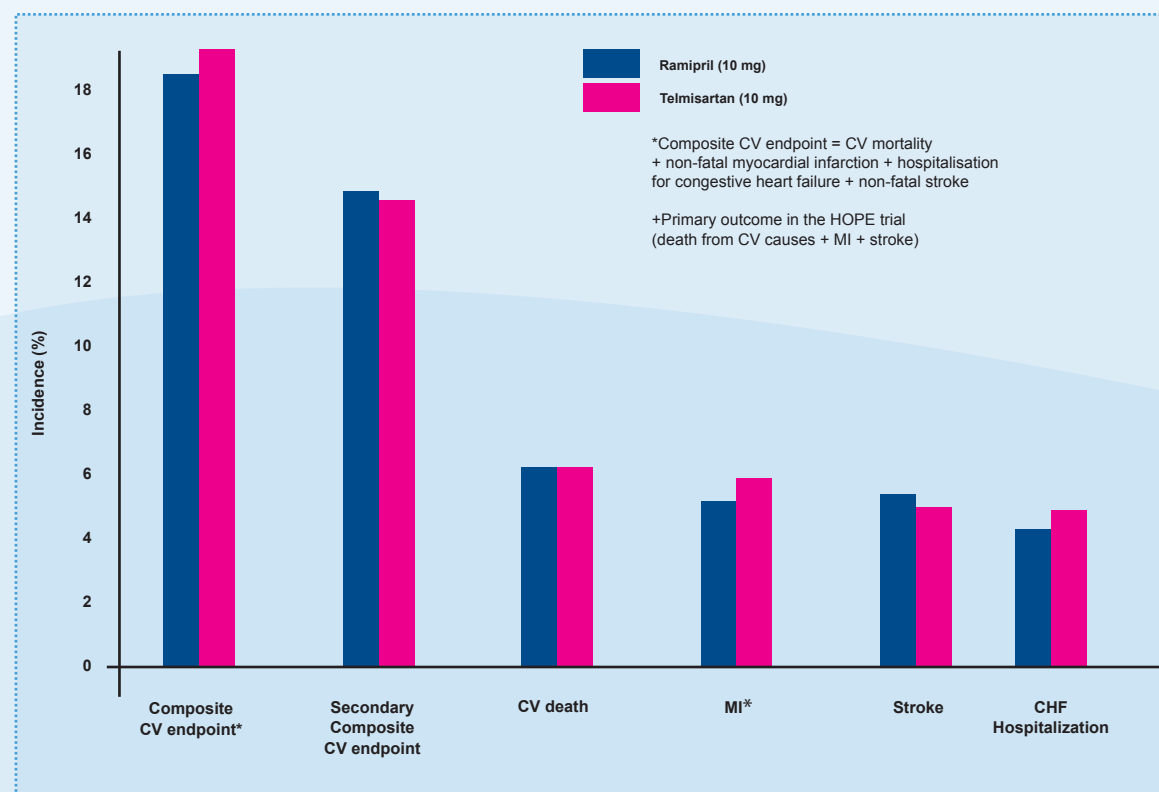
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Telmisartan

III- Target Saving Lives

➤ Telmicard® saves lives in a broad range during the early morning

➤ **ONTARGET** - Telmisartan is equivalent to Ramipril in prevention of CVEs*



➤ **ONTARGET** - Telmisartan 80mg is proven to be **EQUALLY EFFECTIVE** to Ramipril 10mg in patients with vascular disease or high risk diabetes, over a period of 5.5 years.¹⁴

*CVE = cardiovascular Events

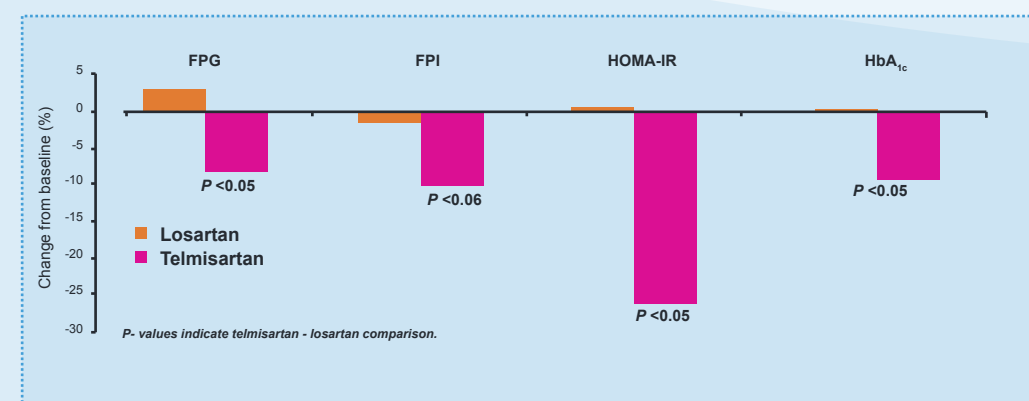
The 5 Ts of Telmicard®



Unique ARB ... Unique Pharmacokinetic Profile.^{5,6,7,8}

Drug	Half-life (Hrs) ⁵	Time to Cmax (hour) ⁸	Protein Binding (%) ⁵	Partition Coefficient (index of lipophilicity) ⁷	Volume of distribution (L) ⁶	Receptor Binding ⁶	Renal excretion (%) ⁵
Losartan	2	1 - 1.5	98.7%	-2.45	12	Competitive	35
Valsartan	9	1 - 2	95%	-0.95	17	Competitive	13
Irbesartan	11 - 15	1 - 2	90 - 95%	1.48	53 - 93	Insurmountable	20
Candesartan	3.5 - 11	3 - 4	99.5%	-0.96	0.13L/Kg	Insurmountable	33
Telmisartan	24	0.5 - 3	> 99%	3.20	500	Insurmountable	0.5
Eprosartan	5 - 7	-	98%	-	13	Insurmountable	7

➤ **and MORE...** Telmisartan has added benefits in diabetics and metabolic syndrome patients.



Effect of telmisartan and losartan on measures of glycaemia and insulin resistance in 40 patients with metabolic syndrome. FPG = Fasting Plasma Glucose, FPI = Fasting Plasma Insulin, HOMA-IR = Homeostatic Model Assessment - Insulin Resistance. HbA_{1c} = Glycosylated Haemoglobin.

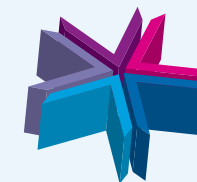
Telmisartan, unlike losartan, displays insulin-sensitizing activity, which is explained by its PPAR-gamma activity, as well as providing superior 24-hour Blood Pressure control. Telmisartan, but not losartan, significantly reduces FPG, FPI, HOMA-IR and HbA_{1c}.^{9,10}

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Telmisartan

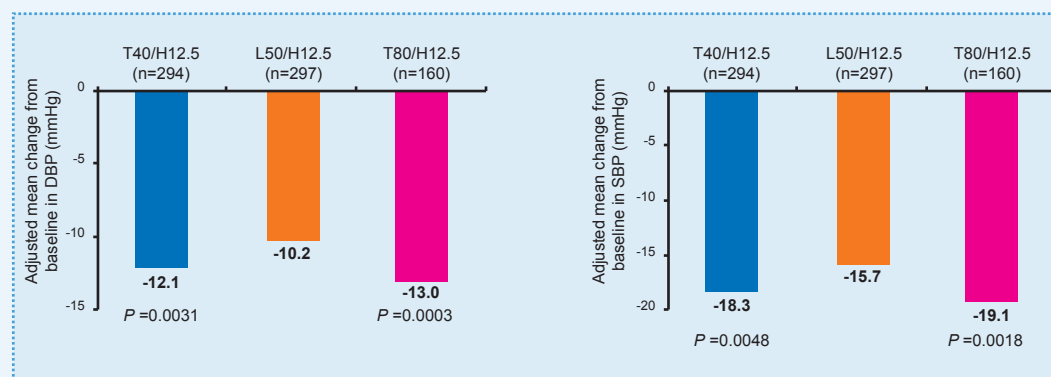
II- Target the Synergetic Effect

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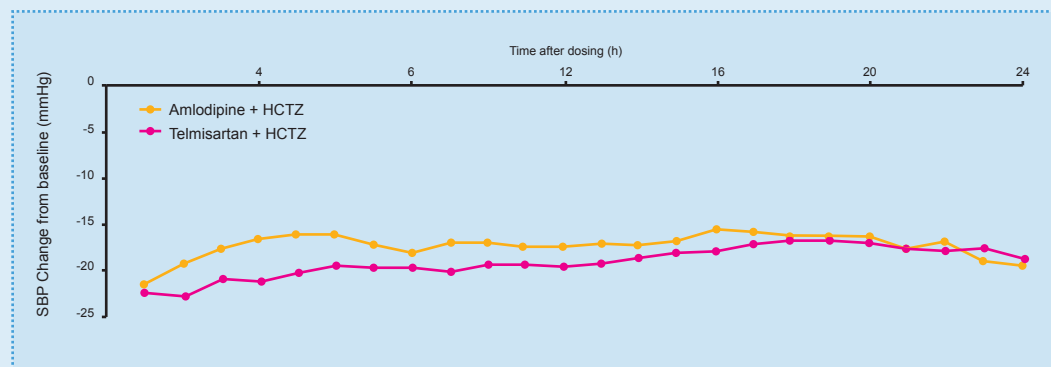
Telmicard® has superior BP* lowering effect in a wide range of patients alone, or in combination

In patients with Mild to Moderate Hypertension¹¹



Telmisartan 40/HCTZ12.5 Provides significantly SUPERIOR BP Reductions compared with Losartan50/HCTZ12.5, and Telmisartan 80/HCTZ12.5 provides ADDITIONAL Blood Pressure Reductions.¹¹

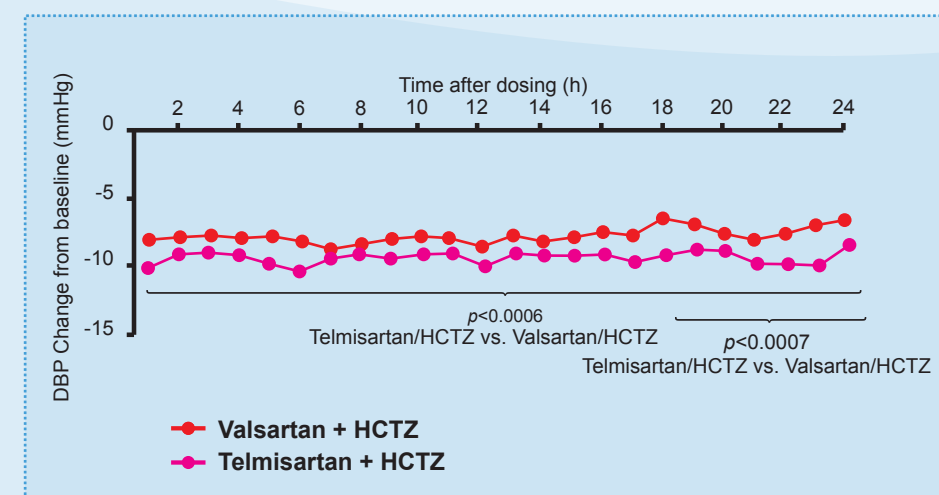
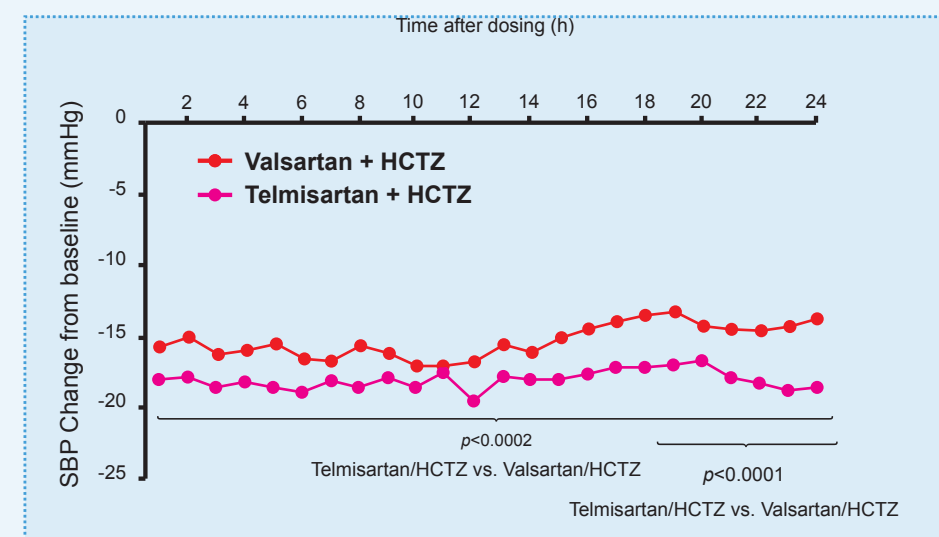
In older patients with Systolic Hypertension¹²



Telmisartan/HCTZ offers comparable SBP Reduction to Amlodipine/HCTZ, during the last 6 hours of the dosing interval, and Telmisartan/HCTZ offers Superior SBP Reduction over the 24-hour dosing period.¹²

*BP = Blood Pressure

In overweight Hypertensive Type 2 Diabetic patients¹³



Telmisartan/HCTZ Provides significantly GREATER BP lowering versus Valsartan/HCTZ throughout the 24-h dosing interval, particularly during the hazardous early morning hours.¹³