Roche

Pharmaceuticals

November 13, 2006

IMPORTANT PRESCRIBING INFORMATION

Dear Healthcare Professional:

Roche Laboratories Inc. would like to advise you of a recent update to the TAMIFLU® (oseltamivir phosphate) package insert. The revision to the product label is a result of information about adverse events reported during postmarketing clinical use of TAMIFLU.

The revised PRECAUTIONS section of the TAMIFLU Capsules and Oral Suspension package insert now includes the following information and guidance under a new Neuropsychiatric Events subheading:

> ***Neuropsychiatric Events***
>
> There have been postmarketing reports (mostly from Japan) of self-injury and delirium with the use of TAMIFLU in patients with influenza. The reports were primarily among pediatric patients. The relative contribution of the drug to these events is not known. Patients with influenza should be closely monitored for signs of abnormal behavior throughout the treatment period.

In addition, the following statement has been added to the TAMIFLU Patient Information, in the ***What are the possible side effects of TAMIFLU?*** section:

> People with the flu, particularly children, may be at an increased risk of self-injury and confusion shortly after taking TAMIFLU and should be closely monitored for signs of unusual behavior. A healthcare professional should be contacted immediately if the patient taking TAMIFLU shows any signs of unusual behavior.

TAMIFLU is indicated for the treatment of uncomplicated acute illness due to influenza infection in patients 1 year and older who have been symptomatic for no more than 2 days. TAMIFLU is indicated for the prophylaxis of influenza in patients 1 year and older. TAMIFLU is not a substitute for early vaccination on an annual basis as recommended by the Centers for Disease Control's Immunization Practices Advisory Committee. Please see page 2 of this letter for other important TAMIFLU safety information.

We encourage you to become familiar with these label revisions. If you have any questions or require additional information concerning TAMIFLU, please contact the Roche Pharmaceuticals Service Center at 1-800-526-6367. An updated package insert is enclosed for your information. In addition, healthcare professionals can access the revised TAMIFLU complete product information at http://www.rocheusa.com/products/tamiflu/pi.pdf.

Roche Laboratories will continue to monitor the safety of TAMIFLU through established reporting mechanisms and notify regulatory authorities of any serious adverse events for evaluation. We will continue to provide you with the most current product information for TAMIFLU moving forward. You can assist us in monitoring the safety of TAMIFLU by reporting adverse reactions to us at 1-800-526-6367, by FAX at 1-800-532-3931, or to FDA at www.fda.gov/medwatch, or by mail to MedWatch, HF-2, Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20851.

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Safety Information

There is no evidence for efficacy against any illness caused by agents other than influenza types A and B.

Treatment efficacy in subjects with chronic cardiac and/or respiratory disease has not been established. No difference in the incidence of complications was observed between the treatment and placebo groups in this population.

No information is available regarding treatment of influenza in patients at imminent risk of requiring hospitalization.

Efficacy of Tamiflu has not been established in immunocompromised patients.

Safety and efficacy of repeated treatment of prophylaxis courses have not been studied.

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In postmarketing experience, rare cases of anaphylaxis and serious skin reactions, including toxic epidermal necrolysis, Stevens-Johnson syndrome and erythema multiforme, have been reported with TAMIFLU.

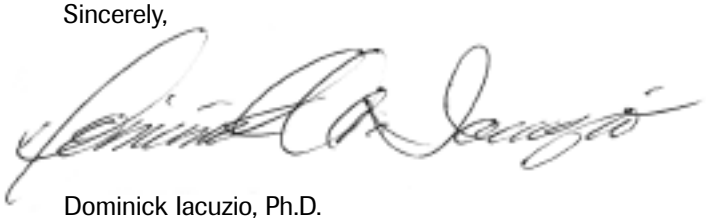
In treatment studies in adult patients, the most frequently reported adverse events (incidence ≥ 1%) were nausea and vomiting. Other events reported numerically more frequently in patients taking TAMIFLU compared with placebo were bronchitis, insomnia and vertigo. In treatment studies in patients 1 to 12 years old, the most frequently reported adverse event (incidence ≥ 1%) was vomiting (15%). Other events reported more frequently in patients taking TAMIFLU compared with placebo included abdominal pain (5% vs 4%), epistaxis (3% vs 3%), ear disorder (2% vs 1%) and conjunctivitis (1% vs ≤ 1%).

In prophylaxis studies in adult patients, adverse events were similar to those seen in the treatment studies. Events reported more frequently in patients taking TAMIFLU compared with placebo (incidence ≥ 1%) were nausea (7% vs 3%), vomiting (2% vs 1%), diarrhea (3% vs 2%), abdominal pain (2% vs 1%), dizziness (1% vs 1%), headache (18% vs 18%) and insomnia (1% vs 1%). In household prophylaxis trial that included patients 1 to 12 years old, adverse events were consistent with those observed in pediatric treatment studies, with GI events being the most frequently observed.

The concurrent use of TAMIFLU with live attenuated influenza vaccine (LAIV) intranasal has not been evaluated. However, because of the potential for interference between these products, LAIV should not be administered within 2 weeks before or 48 hours after administration of TAMIFLU, unless medically indicated. The concern about possible interference arises from the potential for antiviral drugs to inhibit replication of live vaccine virus. Trivalent inactivated influenza vaccine can be administered at any time relative to use of TAMIFLU.

Vaccination is considered the first line of defense against influenza.

Sincerely,



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Medical Director, Roche Laboratories Inc.

Enclosures:

- Complete Product Information for TAMIFLU® (oseltamivir phosphate) Capsules and for Oral Suspension.
- TAMIFLU® (oseltamivir phosphate) Patient Information