



PHASE III

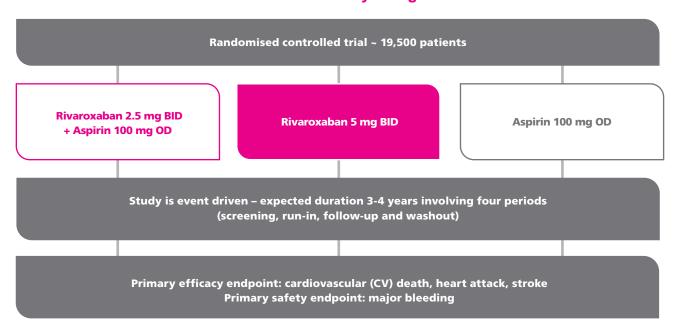
COMPASS Will Provide Significant Insights into How Best to Protect Patients with Coronary or Peripheral Artery Disease from Long-term Clot Formation



For patients with coronary or peripheral artery disease (CAD or PAD), the current standard of care – antiplatelet agent aspirin – provides significant protection^{1,2}. However, residual risk of cardiac events such as heart attack, stroke or even death still remains in these high-risk patients.

Antiplatelet therapies and rivaroxaban have complementary mechanisms of action and when combined have been shown to improve outcomes in patients with acute coronary syndrome (ACS). In the same way, the study will evaluate whether the combination has the potential for more complete protection against long-term clot formation for patients with CAD or PAD in comparison to each of the therapies alone³.

COMPASS Study Design⁴



The extensive evaluation of rivaroxaban to protect different patient populations at risk of venous and arterial thromboembolism (VAT), makes it the most studied novel OAC in the world. Rivaroxaban (Xarelto®) is already approved for five indications in seven areas of use and its investigation - both completed and ongoing - will include more than 275,000 patients in clinical trials and real world settings.



^{*}Population Health Research Institute



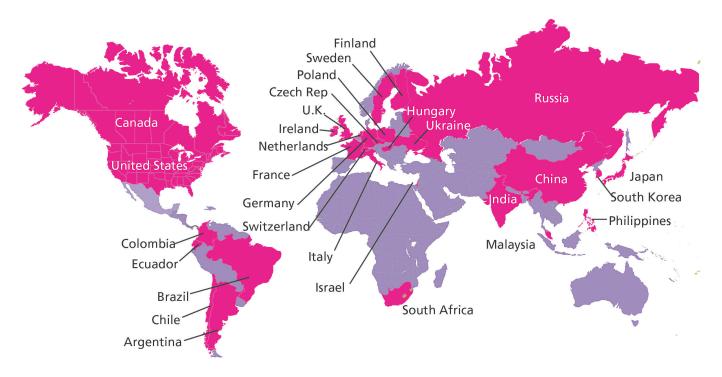


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COMPASS Study Enrolling Patients with Coronary or Peripheral Artery Disease from Around the World

CAD is the most common cause of heart disease, leading to 7.4 million deaths worldwide in 2012⁵

PAD, which is a powerful risk marker of heart disease, affects approximately 202 million people worldwide⁶



About Coronary or Peripheral Artery Disease

Patients with CAD or PAD have a build-up of arterial plaque, narrowing the arteries and decreasing blood flow to the heart muscle or the legs^{1,7}. The plaque can rupture, creating a blood clot that may lead to serious cardiovascular events including heart attack, stroke or even death^{8,9}.

References

1) Patient UK. Peripheral Arterial Disease in Legs. Available at: http://www.patient.co.uk/health/peripheral-arterial-disease-in-legs. Accessed January 2015. 2) Irish Heart Foundation. Peripheral Arterial Disease. Available at: http://www.irishheart.ie/media/pub/padcd/pad_guidelines.pdf. Accessed January 2015. 3) Mega JL, Braunwald E, Wiviott SD et al. ATLAS TIMI 51;N Engl J Med 2012;366:9-19. 4) ClinicalTrials.gov. Rivaroxaban for the Prevention of Major Cardiovascular Events in Coronary or Peripheral Artery Disease (COMPASS). Available at: http://clinicaltrials.gov/ct2/show/NCT01776424?term=compass&rank=3. Accessed January 2015. 5) WHO. The top 10 causes of death. Available at: http://www.who.int/mediacentre/factsheets/fs310/en/index2.html Accessed January 2015. 6) Hiramoto JS1, Katz R, Weisman S, Conte M. et al. Gender-specific risk factors for peripheral artery disease in a voluntary screening population. J Am Heart Assoc. 2014 Mar 13;3(2):e000651. 7) Mayo Clinic. Heart Failure. Available at: http://www.mayoclinic.com/health/heart-failure/DS00061/DSECTION=causes. Accessed January 2015. 8) American Heart Association. Coronary Artery Disease - The ABCs of CAD. Available at: http://www.heart.org/HEARTORG/Conditions/More/PeripheralArtery/Disease-Available at: http://www.heart.org/HEARTORG/Conditions/More/PeripheralArtery/Disease-PAD_UCM_301301_Article.jsp. Accessed January 2015.

