

Corporate Factsheet

Company: Millennium: The Takeda Oncology Company

Address: 40 Landsdowne Street, Cambridge, MA 02139

Phone: (617) 679-7000

Web address: www.millennium.com

Takeda: Takeda Pharmaceutical Company Limited

Web address: www.takeda.com

Ticker: Tokyo Stock Exchange (TSE:4502)

Other U.S. Takeda

Takeda Research Investment, Inc. (www.tri-takeda.com)

Takeda San Diego, Inc. (www.takedasd.com)

Takeda San Francisco, Inc. (www.takedasf.com)

Takeda Pharmaceuticals North America, Inc. (www.tpna.com)

Takeda Global Research & Development Center, Inc. (www.tpna.com)

Vision: We Aspire to Cure Cancer.™

Mission: To deliver extraordinary medicines to patients with cancer worldwide through our science, innovation and passion.

Number of Employees: ~1,250*

Recognition: Millennium was recognized in 2009 by *Science* magazine, *The Scientist* magazine and *The Boston Globe* as one of the best places to work. Additionally, it was named the 2008 Corporate Citizen of the Year by the Cambridge Chamber of Commerce (Massachusetts).

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Management Team

Deborah Dunsire, M.D., President and CEO

Lisa Adler Vice President, Corporate Communications

Christophe Bianchi, M.D., Executive Vice President

Joseph B. Bolen, Ph.D., Chief Scientific Officer

Nancy Simonian, M.D., Chief Medical Officer, Clinical, Medical and Regulatory Affairs

Stephen M. Gansler, Senior Vice President, Human Resources and Administration

Laurie Bartlett Keating, Senior Vice President, General Counsel

Anna Protopapas, Senior Vice President, Corporate Development and Corporate Strategy

Todd Shegog, Senior Vice President, Finance and Treasury

Peter F. Smith, Ph.D. Senior Vice President, Non-Clinical Development Sciences

* Information current as of February 2010

Millennium: The Takeda Oncology Company

Millennium Pharmaceuticals, Inc. was established in 1993 as a genomics company and was acquired by Takeda Pharmaceutical Company Limited in May 2008 and renamed Millennium: The Takeda Oncology Company in May, 2008. As a wholly owned and independent subsidiary of Takeda, Millennium operates as Takeda's Global Center of Excellence in Oncology. It has a robust pipeline of drug candidates that are being investigated in a broad range of cancers. The Company aims to one day become a global leader in oncology.

Takeda is the largest pharmaceutical company in Japan and a global enterprise operating in more than 90 markets worldwide. It was founded in 1781.

VELCADE® (bortezomib) for Injection

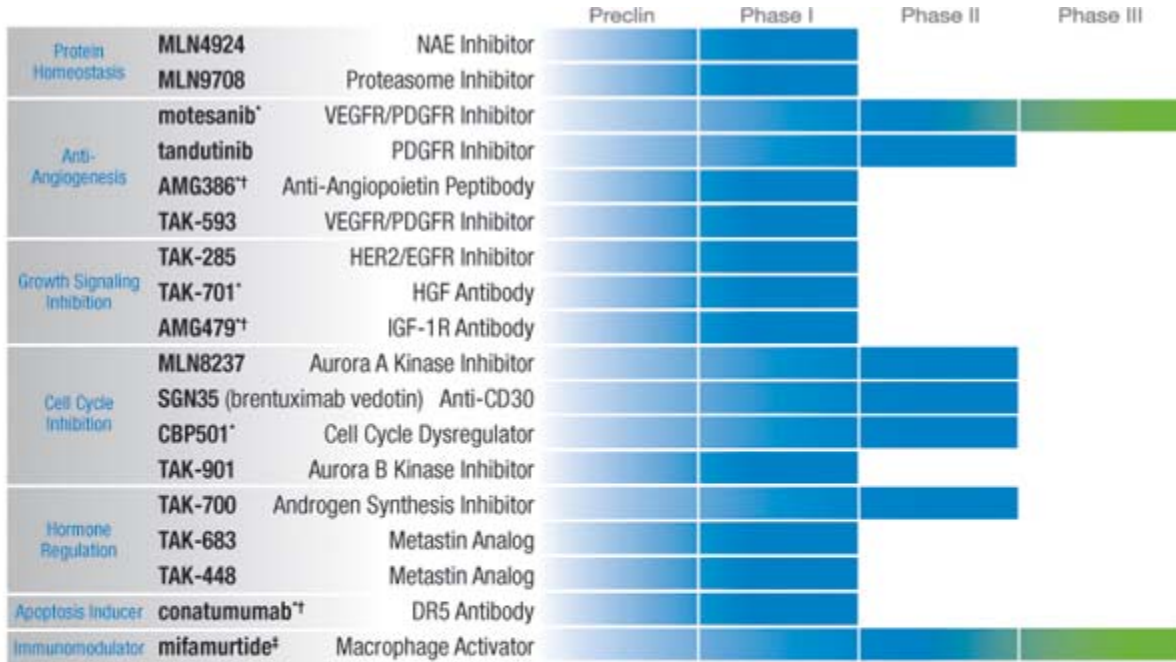
Prior to Takeda's acquisition, Millennium had become a fully-integrated biopharmaceutical company. Its lead product, VELCADE, was introduced in 2003. It is a first-in-class proteasome inhibitor derived from Nobel Prize-winning science. Today, the highly successful therapeutic agent has been prescribed to more than 160,000 people in more than 92 countries worldwide. Millennium reported more than \$1 billion in global VELCADE sales in 2008. VELCADE is FDA approved for the treatment of patients with multiple myeloma and relapsed mantle cell lymphoma, a sub-type of non-Hodgkin's lymphoma.

VELCADE is co-developed by Millennium Pharmaceuticals, Inc. and Johnson & Johnson Pharmaceutical Research & Development, L.L.C. Millennium is responsible for commercialization of VELCADE in the U.S., Janssen-Cilag is responsible for commercialization in Europe and the rest of the world. Janssen Pharmaceutical K.K. is responsible for commercialization in Japan. V

Our Pipeline

Our top priority is to develop and bring to market new drug candidates that improve patients' lives. Our ultimate goal is to find cures for cancer. But until then, we want to deliver medicines that make a real difference in the fight against cancer so that patients can manage their disease.

Our focus in drug development is on disease pathways—or processes—that cancer cells depend on to survive. We have more than 300 projects underway and more than 14 drug candidates in the following areas: protein homeostasis, angiogenesis, growth signaling inhibition, hormone regulation, cell cycle inhibition, apoptosis and immunomodulation.



ADDITIONAL INDICATIONS / NEW FORMULATIONS

Protein Homeostasis	VELCADE	Proteasome Inhibitor (Follicular NHL, First Line MCL, Subcutaneous Formulation)				
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* In License

‡ Japan Only Developed by TBOC

‡ Approved in EU only

- Motesanib dipivosphite is being developed by Millennium in collaboration with Angen, Incorporated

- CBP501 is being developed by Millennium in collaboration with Cellex Limited

- These compounds are either investigational or studied in new indications. Efficacy and safety have not been established.

Important Safety Information for VELCADE (bortezomib)

In the U.S., VELCADE is indicated for the treatment of patients with multiple myeloma. VELCADE also is indicated for the treatment of patients with mantle cell lymphoma who have received at least one prior therapy. VELCADE is contraindicated in patients with hypersensitivity to bortezomib, boron or mannitol. VELCADE should be administered under the supervision of a physician experienced in the use of antineoplastic therapy.

Risks associated with VELCADE therapy include new or worsening peripheral neuropathy, hypotension throughout therapy, cardiac and pulmonary disorders, reversible posterior leukoencephalopathy syndrome, gastrointestinal adverse events, thrombocytopenia, neutropenia, tumor lysis syndrome and hepatic events. Women of childbearing potential should avoid becoming pregnant while being treated with VELCADE. Nursing mothers are advised not to breastfeed while receiving VELCADE. Cases of severe sensory and motor peripheral neuropathy have been reported. The long-term outcome of peripheral neuropathy has not been studied in mantle cell lymphoma. Acute development or exacerbation of congestive heart failure, and new onset of decreased left ventricular ejection fraction has been reported, including reports in patients with no risk factors for decreased left ventricular ejection fraction. There have been reports of acute diffuse infiltrative pulmonary disease of unknown etiology such as pneumonitis, interstitial pneumonia, lung infiltration and Acute Respiratory Distress Syndrome in patients receiving VELCADE. Some of these events have been fatal. There have been reports of Reversible Posterior Leukoencephalopathy Syndrome (RPLS) in patients receiving VELCADE. RPLS is a rare, reversible, neurological disorder which can present with seizure, hypertension, headache, lethargy, confusion, blindness, and other visual and neurological disturbances. VELCADE is associated with thrombocytopenia and neutropenia. There have been reports of gastrointestinal and intracerebral hemorrhage in association with VELCADE. Transfusions may be considered. Complete blood counts (CBC) should be frequently monitored during treatment with VELCADE. Cases of acute liver failure have been reported in patients receiving multiple concomitant medications and with serious underlying medical conditions. Patients who are concomitantly receiving VELCADE and drugs that are inhibitors or inducers of cytochrome P450 3A4 should be closely monitored for either toxicities or reduced efficacy. Patients on oral antidiabetic medication while receiving VELCADE should check blood sugar levels frequently.

Adverse Reaction Data

Safety data from Phase II and III studies of single-agent VELCADE 1.3 mg/m²/dose twice weekly for 2 weeks followed by a 10-day rest period in 1163 patients with previously treated multiple myeloma (N=1008, not including the Phase III, VELCADE plus DOXIL[®] [doxorubicin HCl liposome injection] study) and previously treated mantle cell lymphoma (N=155) were integrated and tabulated. In these studies, the safety profile of VELCADE was similar in patients with multiple myeloma and mantle cell lymphoma.

In the integrated analysis, the most commonly reported adverse events were asthenic conditions (including fatigue, malaise and weakness) (64%), nausea (55%), diarrhea (52%), constipation (41%), peripheral neuropathy NEC (including peripheral sensory neuropathy and peripheral neuropathy aggravated) (39%), thrombocytopenia and appetite decreased (including anorexia) (each 36%), pyrexia (34%), vomiting (33%), anemia (29%), edema (23%), headache, paresthesia and dysesthesia and headache (each 22%), dyspnea (21%), cough and insomnia (each 20%), rash (18%), arthralgia (17%), neutropenia and dizziness (excluding vertigo) (each 17%), pain in limb and abdominal pain (each 15%), bone pain (14%), back pain and hypotension (each 13%), herpes zoster, nasopharyngitis, upper respiratory tract infection, myalgia and pneumonia (each 12%), muscle cramps (11%), and dehydration and anxiety (each 10%). Twenty percent (20%) of patients experienced at least 1 episode of ≥Grade 4 toxicity, most commonly thrombocytopenia (5%) and neutropenia (3%). A total of 50% of patients experienced serious adverse events (SAEs) during the studies. The most commonly reported SAEs included pneumonia (7%), pyrexia (6%), diarrhea (5%), vomiting (4%), and nausea, dehydration, dyspnea and thrombocytopenia (each 3%).

For more information about VELCADE clinical trials, patients and physicians can contact the Millennium Medical Product Information Department at 1-866-VELCADE (1-866-835-2233).