

Genentech Fast Facts

Founded more than 30 years ago, Genentech is a leading biotechnology company that discovers, develops, manufactures and commercializes medicines to treat patients with serious or life-threatening medical conditions. The company, a wholly-owned member of the Roche Group, has headquarters in South San Francisco, California.

The below information is current as of November 2009.

Founders and Date of Incorporation

Venture capitalist Robert Swanson and biochemist Dr. Herbert Boyer founded Genentech on April 7, 1976.

Employees

Number of full-time employees: ~11,000

The company has consistently been recognized as a top employer by such publications as FORTUNE, Working Mother, and Science. In January 2009, FORTUNE named Genentech to its list of the "100 Best Companies to Work For" in the United States for the eleventh consecutive year.

Research

Genentech conducts basic and applied research in the areas of oncology, immunology, and disorders of tissue growth and repair, with a major focus on angiogenic disorders. In March 2008, the research organization also announced the initiation of early efforts in two new therapeutic areas: neuroscience and infectious disease. Genentech's approximately 1,100 researchers, scientists and postdocs consistently publish important papers in prestigious journals and are among the top researchers in the world in terms of total citations.

Pipeline

Genentech's development pipeline numbers more than 100 projects and includes a combination of breakthrough innovations and new indications for existing, well-understood products that may fight more than one disease or more than one form of a disease.

Products

Since the company was founded in 1976, Genentech has focused its drug discovery efforts on therapies that address significant unmet medical needs. Today Genentech manufactures and commercializes multiple biotherapeutics for serious or life-threatening medical conditions:

BioOncology

- Avastin® (bevacizumab) for use in combination with intravenous 5-fluorouracil-based chemotherapy for first- or second-line treatment of patients with metastatic carcinoma of the colon or rectum and in combination with carboplatin and paclitaxel for the first-line treatment of patients with unresectable, locally advanced, recurrent or metastatic non-squamous non-small cell lung cancer
- Herceptin® (Trastuzumab)
For adjuvant treatment of HER2-overexpressing node-positive or node-negative (ER/PR-negative or with one high-risk feature) breast cancer:

- As part of a treatment regimen containing doxorubicin, cyclophosphamide, and either paclitaxel or docetaxel
- With docetaxel and carboplatin
- As a single agent following multi-modality anthracycline-based therapy

Also indicated:

- In combination with paclitaxel for the first line treatment of HER2-overexpressing metastatic breast cancer
- As a single agent for treatment of HER2-overexpressing breast cancer in patients who have received one or more chemotherapy regimens for metastatic disease
- Rituxan® (Rituximab) for the treatment of patients with relapsed or refractory, low-grade or follicular, CD20-positive, B-cell non-Hodgkin's lymphoma (NHL) as a single agent; for previously untreated diffuse large B-cell, CD20-positive, NHL in combination with CHOP (cyclophosphamide, doxorubicin, vincristine and prednisone) or other anthracycline-based chemotherapy regimens; for previously untreated follicular, CD20-positive, B-cell NHL in combination with CVP (cyclophosphamide, vincristine and prednisolone) chemotherapy; and for the treatment of non-progressing (including stable disease), low-grade, CD20-positive, B-cell NHL as a single agent, after first-line CVP chemotherapy
- Tarceva® (erlotinib) for the treatment of patients with locally advanced or metastatic non-small cell lung cancer after failure of at least one prior chemotherapy regimen; in combination with gemcitabine chemotherapy for the treatment of advanced pancreatic cancer in patients who have not received previous chemotherapy

Immunology

- Rituxan® (Rituximab) for use in combination with methotrexate for the treatment of adult patients with moderately- to severely-active rheumatoid arthritis who have had an inadequate response to one or more TNF antagonist therapies
- Xolair® (Omalizumab) for Subcutaneous Use for adults and adolescents (age 12 or older) with moderate-to-severe persistent asthma who have a positive skin test or in vitro reactivity to a perennial aeroallergen and whose symptoms are inadequately controlled with inhaled corticosteroids

Tissue Growth and Repair

- Activase® (Alteplase, recombinant), a tissue-plasminogen activator to dissolve blood clots, for treating patients with acute myocardial infarction (heart attack), acute massive pulmonary embolism (blood clots in the lungs), and acute ischemic stroke (brain attack) within the first three hours of symptom onset
- Cathflo® Activase® (Alteplase), a thrombolytic agent for the restoration of function to central venous access devices in both pediatric and adults patients
- Lucentis® (ranibizumab injection), a vascular endothelial growth factor (VEGF) inhibitor indicated for the treatment of neovascular (wet) age-related macular degeneration (AMD).
- Nutropin® [somatotropin (rDNA origin) for injection] and Nutropin AQ® [somatotropin (rDNA origin) injection] human growth hormone for treating growth hormone deficiency, for the treatment of growth hormone deficiency in children and adults, growth failure associated with chronic renal insufficiency prior to kidney transplantation, short stature associated with Turner syndrome, and long-term treatment of idiopathic short stature
 - Nutropin AQ Pen® for use with Nutropin AQ Pen® Cartridge, a delivery device for Nutropin AQ®
- Pulmozyme® (dornase alfa, recombinant) Inhalation Solution, for the management of cystic fibrosis patients to improve pulmonary function

- TNKase® (Tenecteplase), a modified form of t-PA for use in mortality reduction associated with acute myocardial infarction; treatment should be initiated as soon as possible after the onset of AMI symptoms

About Genentech Access Solutions

Genentech is committed to people having access to our medicines. Genentech Access Solutions is a team of 350 Genentech employees who help those who need Genentech medicines. This team works with patients and doctors to resolve reimbursement and insurance issues and provides assistance to eligible patients in the United States who do not have insurance coverage or who cannot afford their out-of-pocket co-pay costs.

Since its first medicine was approved in 1985, Genentech has donated approximately \$1.3 billion in free Genentech medicine to the uninsured through the Genentech® Access to Care Foundation (GATCF) and other product donation programs. The household income limit to receive free medicine through GATCF is \$100,000 per year. Since 2005, Genentech has also donated approximately \$250 million to various independent, non-profit organizations that provide financial assistance to those who cannot access needed medical treatment due to co-pay costs.