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**CLINICAL STUDY SHOWS INTRAMUSCULAR ADMINISTRATION OF ARIPIPRAZOLE
(ABILIFY®) SIGNIFICANTLY IMPROVES ACUTE AGITATION IN PATIENTS WITH
SCHIZOPHRENIA**

Data Show Significant Improvement in Agitation Within 45 Minutes Without Excessive Sedation

(NEW YORK, May 5, 2004) – Patients with schizophrenia, schizoaffective and schizophreniform disorders who received treatment with intramuscular (IM) administration of aripiprazole (ABILIFY®) showed significant improvement in acute agitation as early as 45 minutes after dosing, according to a study presented at the 157th Annual Meeting of the American Psychiatric Association. The study showed that treatment with IM aripiprazole resulted in significant symptom improvement in these patients, and was generally well tolerated, without excessive sedation or pain at the injection site.

“Patients experiencing acute agitation in schizophrenia are the most highly distressed and potentially disruptive group of patients,” said David Daniel, MD, clinical professor of psychiatry at George Washington University. “This study shows that IM aripiprazole may help physicians control acutely agitated patients’ symptoms quickly, without excessive sedation.”

Study Results

In a 24-hour, inpatient, double-blind, placebo-controlled study, 357 patients with schizophrenia, schizoaffective and schizophreniform disorders with acute agitation were randomized to IM aripiprazole (1 mg, 5 mg, 10 mg or 15 mg), IM haloperidol (7.5 mg), or placebo. Patients were evaluated according to the Positive and Negative Syndrome Scale - Excited Components (PEC), Agitation-Calmness Evaluation

Scale (ACES) and Corrigan Agitated Behavior Scale (CABS) at baseline and every 15 minutes for the first two hours after dosing and then at four, six, 12 and 24 hours after dosing.

Aripiprazole (ABILIFY®) 10 mg administered IM demonstrated significant reductions in PEC vs. placebo at 45 minutes (-4.39 vs. -2.22, $p=0.007$) and 60 minutes (-5.48 vs. -2.41, $p=0.001$) after dosing. Efficacy was maintained for the duration of the 24-hour study with IM aripiprazole 5 mg, 10 mg and 15 mg. Patients receiving IM haloperidol experienced significant reductions in PEC after 105 minutes vs. placebo ($p=0.004$). In addition, aripiprazole-treated patients showed a significant improvement in agitation as measured by ACES. The most common adverse event reported in the aripiprazole-treated groups was headache (range 7% to 18% vs. placebo 2%). IM aripiprazole was associated with minimal pain at the injection site (1 mg, 1.8%; 5 mg, 1.6%; 10 mg, 1.8%; 15 mg, 5.7%). No patients receiving IM haloperidol and 3.3% of those receiving placebo reported pain at the injection site. Incidence of any extrapyramidal symptoms with haloperidol was 19.3%; incidence with aripiprazole (average across all doses) was 5.2%.

About ABILIFY

ABILIFY® (aripiprazole) was approved by the FDA in 2002 for the treatment of schizophrenia. The efficacy of ABILIFY in schizophrenia was established by short-term and longer-term controlled trials. Since its approval, over 1.5 million prescriptions have been written in the United States. ABILIFY is available in 5 mg, 10 mg, 15 mg, 20 mg and 30 mg tablets.

Serious side effects can occur with any antipsychotic medicine, including ABILIFY. A rare but potentially fatal complex of symptoms referred to as neuroleptic malignant syndrome (NMS) has been reported. Another condition associated with antipsychotic medicines is called tardive dyskinesia (TD), a condition that can cause potentially irreversible involuntary movements.

Hyperglycemia, including some serious cases ranging from ketoacidosis to death, has been reported in patients treated with atypical antipsychotics. ABILIFY was not included in epidemiologic studies suggesting this risk; therefore the risk of hyperglycemia with ABILIFY is not known. However, there have been few reports of hyperglycemia in patients treated with ABILIFY. Patients should be appropriately monitored.

Some people taking antipsychotics have experienced orthostatic hypotension (lightheadedness or faintness caused by rising too quickly from a sitting or lying position).

As with other antipsychotic drugs, ABILIFY should be used cautiously if the patient has a history of seizures. Patients should not drive or operate heavy machinery until they are certain ABILIFY does not affect them adversely.

Before starting ABILIFY® (aripiprazole), patients should talk to their healthcare provider about any health problems and other prescription or nonprescription medicines they are taking.

In short-term clinical trials, the most commonly reported side effects compared to placebo (sugar pill) were: headache (32% vs. 25%), anxiety (25% vs. 24%), insomnia (24% vs. 19%), nausea (14% vs. 10%), vomiting (12% vs. 7%), sleepiness (11% vs. 8%), lightheadedness (11% vs. 7%), restlessness (10% vs. 7%) and constipation (10% vs. 8%).

The adverse events reported in a 26-week, double-blind trial comparing ABILIFY® (aripiprazole) and placebo were generally consistent with those reported in the short-term, placebo-controlled trials, except for a higher incidence of tremor: 9% for ABILIFY vs. 1% for placebo. In this study the majority of the cases of tremor were of mild intensity, occurred early in therapy (≤ 49 days) and were of limited duration (≤ 10 days). Tremor infrequently led to discontinuation ($<1\%$) of ABILIFY. In addition, in a long-term (52-week) active controlled study, the incidence of tremor for ABILIFY was 4%.

ABILIFY is available by prescription only. Patients should talk to their healthcare provider or pharmacist for more information. To learn more about schizophrenia and ABILIFY, including full prescribing information, please visit www.ABILIFY.com.

ABILIFY® is a registered trademark of Otsuka Pharmaceutical Co., Ltd.

About Bristol-Myers Squibb and Otsuka Pharmaceutical Co., Ltd.

Bristol-Myers Squibb Company and Otsuka Pharmaceutical Co., Ltd. are collaborative partners in the development and commercialization of aripiprazole in the United States and major European countries. Aripiprazole was discovered by Otsuka Pharmaceutical Co., Ltd. Founded in 1964, Otsuka is a diversified health care company guided by its philosophy “Otsuka, people creating new products for better health worldwide” and dedicated to the research and development of innovative medical, pharmaceutical, and nutritional consumer products to improve the quality of human life. Otsuka has a diverse portfolio including central nervous system, cardiovascular, circulatory, gastro-intestinal, respiratory, dermatological, ophthalmologic, anti-cancer therapies, and is pursuing research in genomics and protein function. The Otsuka Pharmaceutical Group is comprised of 51 businesses and 22,000 employees around the world, earning total revenues of \$4.3 billion annually.

Bristol-Myers Squibb is a global pharmaceutical and related health care products company whose mission is to extend and enhance human life.

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For more information and full prescribing information, visit: www.ABILIFY.com

Visit Bristol-Myers Squibb on the World Wide Web at: <http://www.bms.com>

Visit Otsuka Pharmaceutical Co., Ltd. at: <http://www.otsuka.co.jp>

This press release includes certain forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995 regarding, among other things, statements relating to goals, plans and projections regarding the company's financial position, product development and business strategy. These statements may be identified by the fact that they use words such as "anticipate," "estimate," "expect," "intend," "plan," "believe," and other words and terms of similar meaning in connection with any discussion of future operating or financial performance. Such forward-looking statements are based on current expectations and involve inherent risks and uncertainties, including factors that could delay, divert or change any of them, and could cause actual outcomes and results to differ materially from current expectations. These factors include, among other things, market factors, competitive product development, governmental regulations and legislation, changes to wholesaler inventory levels, the results of the planned financial statement restatement process and the audit of such restated financial statements patent positions and litigation. For further details and a discussion of these and other risks and uncertainties, see Bristol-Myers Squibb Company's Securities and Exchange Commission filings, including the company's 2000 annual report on Form 10-K. The company undertakes no obligation to publicly update any forward-looking statement, whether as a result of new information, future events or otherwise.