Bayer AG: Phase III Study of Bayer’s Rivaroxaban in Patients with Acute Coronary Syndrome Meets Primary Efficacy Endpoint

Leverkusen, Germany, September 29, 2011

Bayer AG announced today that the double blind, placebo controlled Phase III ATLAS ACS TIMI 51 clinical trial of Rivaroxaban plus standard therapy has met its primary efficacy endpoint, showing a statistically significant reduction in the rate of events for the primary composite endpoint of cardiovascular death, myocardial infarction and stroke in patients with ACS, compared to standard therapy plus placebo. For the primary safety endpoint, defined as major bleeding events not associated with Coronary Artery Bypass Graft surgery according to the TIMI-classification, there was a statistically significant increase in such events in patients receiving Rivaroxaban versus placebo.

It is intended to present these data as soon as possible at a forthcoming scientific congress as well as to file for market authorization by the end of this year.

Forward-Looking Statements
This Ad-hoc Statement may contain forward-looking statements based on current assumptions and forecasts made by Bayer Group or subgroup management. Various known and unknown risks, uncertainties and other factors could lead to material differences between the actual future results, financial situation, development or performance of the company and the estimates given here. These factors include those discussed in Bayer’s public reports, which are available on the Bayer website at www.bayer.com. The company assumes no liability whatsoever to update these forward-looking statements or to conform them to future events or developments.
Bayer Investor Relations contacts

Dr. Alexander Rosar (+49-214-30-81013)
Dr. Juergen Beunink (+49-214-30-65742)
Peter Dahlhoff (+49-214-30-33022)
Judith Nestmann (+49-214-30-66836)
Dr. Olaf Weber (+49-214-30-33567)
Fabian Klinge (+49-214-30-35426)
Ute Menke (+49-214-30-33021)