

Schering-Plough Corporation  
2000 Galloping Hill Road  
Kenilworth, New Jersey 07033-0530

---

**FOR IMMEDIATE RELEASE**

Media Contact: Catherine Cantone  
P: +1-908-298-3944  
C: +1-908-327-3103

Investor Contact: Alex Kelly  
P: +1-908-298-7436

*Embargoed until Tuesday 30 October at 8:00 CET*

**EUROPEAN GASTROENTEROLOGISTS AND INFLAMMATORY BOWEL  
DISEASE PATIENTS AGREE COMMUNICATION ABOUT QUALITY OF LIFE  
IS KEY TO ACHIEVING SUCCESSFUL TREATMENT**

**Survey Findings Reveal Differences in Attitudes Regarding Treatment  
Expectations and Outcomes**

**PARIS, France, 30 October 2007** – Results from two recent pan-European TNS Healthcare surveys of 300 gastroenterologists and more than 1,300 inflammatory bowel disease (IBD) patients with Crohn's disease (CD)/ulcerative colitis (UC) shed light on the quality of communication that exists between physicians and IBD patients regarding treatment expectations, outcomes and quality of life issues. The physician survey results were accepted for poster presentation at the 15<sup>th</sup> United European Gastroenterologist Week (UEGW) congress in Paris. Findings from both surveys were also used as the basis for a roundtable discussion between gastroenterologists and CD/UC patients from each of the surveyed countries: the United Kingdom, France, Spain, Italy and Belgium.

While 92 percent of gastroenterologists in the physician survey said they were likely to initiate a conversation with their patients regarding the impact CD or UC has on quality of life, a minority of patients from each surveyed country indicated these conversations do occur. Two-fifths of patients said they felt their doctor understands the impact CD or UC has on their quality of life. A high proportion of patients (35-54 percent) felt their disease had a heavy impact on many activities, especially on traveling, dining out and performance at work.

“When we look at the results from both surveys we are reminded that physicians - and patients - can do a better job of discussing the issues related to IBD, such as the impact the disease has on quality of life,” said Gert van Assche, M.D., Associate Professor of Medicine, Department of Internal Medicine, University of Leuven, Belgium and advisor to the development of the surveys. “It’s important we engage in ongoing communication as patients and physicians often have different definitions as to what successful treatment means.”

In addition to assessing the quality of communication, the surveys also sought to understand: how gastroenterologists and IBD patients define success as it relates to treatment expectations and desired long-term outcomes; the value both physicians and IBD patients place on mucosal healing and how often the topic is discussed; the different concerns and preferences of gastroenterologists and patients in regards to treatment options versus surgery.

### **Additional Key Findings**

**Mucosal Healing** - While 8 in 10 doctors surveyed believed mucosal healing – the healing of the lining of the bowel - will improve the long-term course of the disease in both CD and UC, less than half of the participating doctors discussed mucosal healing with their patients. An average of only 28 percent of patients said their physicians had ever explained to them what mucosal healing means.

**Surgery and other treatment options** - While the numbers of patients who had undergone surgery to treat their CD / UC varied across each country, 75 percent of patients indicated they viewed it as a last resort. Eighty percent of physicians would not recommend surgery if biologic therapy had not been tried first. For patients, one of the highest treatment option satisfaction levels was with biologics (59 percent).

“Patients with IBD often have difficulty in talking to their physician about the symptoms of their illness as they may be embarrassed. As a result many ‘suffer in silence’ with the disease sometimes controlling their daily lives,” said Rod Mitchell, chairman of the European Federation of Crohn's & Ulcerative Colitis Associations (EFCCA), and an advisor to the IBD patient survey. “Findings from the surveys assist both EFCCA and the member patient organizations to help people with these chronic conditions and to feel less alone.” Mr. Mitchell also emphasized the need for patients to speak openly with their doctors their symptoms and as appropriate, ask about other options and treatments.

#### **About the Pan-European Gastroenterologist Survey**

TNS Healthcare interviewed via the Internet a total of 300 gastroenterologists in five countries (UK, France, Spain, Italy and Belgium) beginning on 30<sup>th</sup> April and ending 10<sup>th</sup> June 2007. To qualify for the survey, gastroenterologists had to treat a minimum number of CD patients in an average month (It and UK=6; Belg and Fr = 5; Sp=4) and UC patients (UK=10; It and SP=6; Belg and Fr=5). At least half of the physicians had experience treating CD and/or UC with a biologic therapy.

#### **About the Pan-European IBD Patient Survey**

TNS Healthcare conducted the survey of 1,338 IBD patients via self-completion postal interviews in five countries (UK, France, Spain, Italy and Belgium) beginning in mid-August. While fieldwork continues in each country, interim data was collected in mid-October. Patients were recruited to participate via the pan-European CD/UC patient group, European Federation of Crohn's & Ulcerative Colitis Associations (EFCCA). Surveys were mailed by EFCCA affiliated organizations in each of the participating

countries. To qualify for the survey all patients had to confirm they were diagnosed with either CD and/or UC. For more information about EFCCA and their 23 national IBD patient organizations go to [www.efcca.org](http://www.efcca.org).

### **About Inflammatory Bowel Disease**

Crohn's disease (CD), a form of inflammatory bowel disease (IBD), is a chronic disorder of the digestive tract that is characterized by inflammation, deep ulcers, and scarring. It usually occurs along the walls of the small intestine and/or colon, but can also affect other areas of the digestive tract between the mouth and anus. Ulcerative colitis (UC), another form of IBD, is a chronic disorder that causes inflammation and sores, called ulcers, in the lining of the large intestine. Also known as colitis or proctitis, UC typically occurs in the rectum and lower part of the colon, but it may affect the entire colon. Sometimes the symptoms of CD are confused with UC. In approximately 10 to 15 percent of cases, it can be difficult to distinguish between the two diseases. According to EFCCA, more than 1 million people in Europe suffer from IBD.

### **About Schering-Plough**

Schering-Plough is a global science-based health care company with leading prescription, consumer and animal health products. Through internal research and collaborations with partners, Schering-Plough discovers, develops, manufactures and markets advanced drug therapies to meet important medical needs. Schering-Plough's vision is to earn the trust of the physicians, patients and customers served by its approximately 33,500 people around the world. The company is based in Kenilworth, N.J., and its Web site is [www.schering-plough.com](http://www.schering-plough.com).

The surveys were sponsored by Schering-Plough Corporation.

SCHERING-PLOUGH DISCLOSURE NOTICE: The information in this press release contains certain "forward-looking" statements within the meaning of the Private Securities Litigation Reform Act of 1995. Forward-looking statements relate to expectations or forecasts of future events. Schering-Plough does not assume the obligation to update any forward-looking statement. Many factors could cause actual

results to differ materially from Schering-Plough's forward-looking statements, including market forces, economic factors, product availability, patent and other intellectual property protection, current and future branded, generic or over-the-counter competition, the regulatory process, and any developments following regulatory approval, among other uncertainties. For further details and a discussion of risks and uncertainties that may impact forward-looking statements, see Schering-Plough's Securities and Exchange Commission filings, including Part II, Item 1A, "Risk Factors" in the company's first quarter 2007 10-Q.

###