



Wyeth

Annual
Review
2007

Wyeth Vaccines: **A World to Protect**

WYETH'S GLOBAL LEADERSHIP POSITIONS*

Largest Selling Biotechnology Brand: Enbrel®



Number One Antidepressant: Effexor XR®



World's Leading Vaccine: Prevnar®



Top-Ranked I.V. Antibiotic: Zosyn®



Best Selling Adult Vitamin: Centrum®



Leading Calcium Supplement: Caltrate®



*by revenue 2007

On the Cover

Today, children in emerging markets like Mexico and in dozens of other countries around the world are benefiting from the extraordinary advances in disease prevention that have come from Wyeth Vaccines. Now Wyeth is hard at work developing next-generation vaccines to protect both children and adults.

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Wyeth at a Glance

Wyeth is one of the world's largest research-based pharmaceutical and health care products companies. It is a leader in the discovery, development, manufacturing and marketing of pharmaceuticals, biotechnology products, vaccines, non-prescription medicines and animal health care products that improve the quality of life for people worldwide. The Company's major divisions include Wyeth Pharmaceuticals, Wyeth Consumer Healthcare and Fort Dodge Animal Health.

REPORT TO STOCKHOLDERS

Wyeth delivered a very strong financial performance in 2007, mainly driven by the fast growth of our biotechnology products *Enbrel* and *Prevnar*. We introduced new products – *Torisel* and *Lybrel* – and continued our rapid expansion into China, the Middle East and Latin America. We also expanded our aggressive cost-management efforts. As a result, we were able to produce record sales and earnings in 2007 and also were able to increase our dividend to stockholders. In addition, we implemented important leadership changes, effective in January 2008, that were well-planned and efficiently executed.

While we did not secure all expected new drug approvals in 2007, the recent approval of *Pristiq* for major depressive disorder and of *Xyntha* for hemophilia A points to our ability to execute on this front. To achieve sustained success, Wyeth Research is undertaking a number of breakthrough initiatives – strategies to address the challenges posed by an ever-changing regulatory and public health environment around the world. A key outcome of this project is to establish the differentiation of our product candidates to ensure a greater value proposition to key stakeholders: patients, physicians, payors and regulators.

The at-risk launch by a generic manufacturer of a generic version of Wyeth's proton pump inhibitor, *Protonix*, late in 2007 illustrates one of the important challenges faced by innovation-driven companies like our own. In response to loss of *Protonix* sales, in 2008 we introduced Project Impact, a corporate-wide initiative to adjust down our infrastructure and reduce our operating costs.

Our goal remains to protect and sustain our important investments in research – well illustrated by Wyeth's current projects in its fight against Alzheimer's disease. Research and development is the engine that drives our Company and poises us for great possibility – the opportunity to make an important difference in the health and well-being of people around the world.



Robert Essner, Chairman of the Board,
and Bernard Poussot, President and
Chief Executive Officer

Financial Highlights

In thousands except per share amounts

Year Ended December 31,	2007	2006
Net Revenue	\$22,399,798	\$20,350,655
Net Income	4,615,960	4,196,706
Diluted Earnings per Share	3.38	3.08
Dividends per Common Share	1.06	1.01
Total Assets	42,717,282	36,478,715
Stockholders' Equity	18,210,535	14,652,755

Financial Highlights

Our operating results for 2007 helped expand a strong foundation on which to build for the future. Wyeth's worldwide net revenue for the year increased 10 percent to \$22.4 billion. This was led by 10 percent growth in Pharmaceuticals, with seven product franchises each achieving more than \$1 billion in sales. Our multibillion-dollar biotechnology products – *Enbrel* and *Prevnar* – demonstrated especially strong revenue growth, positioning Wyeth as the world's fourth largest biotech company by revenue. Biotechnology products represented more than 35 percent of our 2007 pharmaceutical revenue, up from 17 percent in 2002.

Consumer Healthcare revenue grew 8 percent, and Fort Dodge Animal Health revenue increased 11 percent, surpassing \$1 billion in sales for the first time in its history.

Wyeth's reported net income and diluted earnings per share for 2007 were \$4.6 billion and \$3.38, respectively. Before certain significant items, net income was \$4.8 billion, with pro forma diluted earnings per share up 12 percent to \$3.52, a third consecutive year of double-digit pro forma earnings growth. An in-depth review of our 2007 financial performance can be found in the Wyeth 2007 Financial Report, which accompanies this Annual Review.

Outlook for 2008

We view 2008 as a year of transition and progress for our Company, as we drive growth, pursue innovation and continue to look for ways to further improve our performance.

A near-term challenge for the Company is the impact of generic competition for several of our major products, including *Protonix*, *Effexor XR* and *Zosyn*. For *Protonix*, we believe our patent, which runs through 2010, is strong. Confronted with a generic manufacturer's "at-risk" launch of a generic form of *Protonix*, we decided in January to launch our own generic through a designated distributor. We also are vigorously pursuing patent litigation to protect our rights to this important product. In addition, we

have made assumptions about the emergence of generic competition to *Effexor XR* and *Zosyn* in our plans for 2008.

We are initiating a company-wide effort in 2008 to re-examine our cost structure, reduce expenses and identify new productivity opportunities. Among other things, this initiative will help guide our Company in reducing its workforce by as much as 10 percent over the next three years.

Wyeth is a resilient organization, with a proven track record of overcoming challenges. As you will see throughout this Annual Review, our people, our resources, our products and our new product pipeline provide us with a strong base from which to continue building our Company.

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Wyeth Pharmaceuticals

In 2007, *Enbrel*, marketed for both rheumatoid arthritis and psoriasis, generated \$5 billion in global sales, making it the industry's largest selling biotechnology brand. Net sales in North America – where we co-promote the brand with Amgen Inc. – exceeded \$3 billion. Sales

in international markets – where we have exclusive rights to the product – grew to more than \$2 billion, an increase of 36 percent over 2006.

Sales of *Effexor*, marketed for anxiety and depression, grew to almost \$3.8 billion in 2007, increasing 2 percent over the previous year and maintaining the brand's position as the world's largest selling antidepressant. This was achieved despite a wide range of challenges, including emerging generic competition to the product in some markets.

In February 2008, we received U.S. Food and Drug Administration (FDA) approval to market *Pristiq*, a once-daily serotonin-norepinephrine reuptake inhibitor, for the treatment of adult patients with major depressive disorder, a serious medical condition that affects more than 120 million adults around the world. *Pristiq* provides efficacy at a simple, once-daily dosage without the need for titration, providing most patients the appropriate therapeutic dose right from the start of treatment.

We also received approval for *Xyntha*, an improved recombinant factor VIII formulation, both for the control and prevention of bleeding episodes and for surgical prophylaxis in patients with hemophilia A.

Our impact on human health around the world continues to be defined by innovative products like *Prevnar* (*Prevenar* outside the United States), a first-in-class vaccine to help prevent invasive pneumococcal disease in infants and children. Globally, *Prevnar* achieved net sales of \$2.4 billion, an increase of 24 percent. Much of this growth came from inclusion in national immunization programs around the world, volume growth in the U.S. private market and continued geographic expansion.

This past year, we produced more than 45 million doses of *Prevnar*. The vaccine is available in 86 countries, 19 of which have included it in their national immunization programs. In 2007, regulatory filings seeking approval for *Prevnar* were submitted in China, Russia and Japan, which, combined, account for about 19 million new births each year. In developing countries, we are working closely with the international health community to help children gain access to this important public health intervention. Wyeth vaccines, including *Prevnar*, are the subject of a special report that begins on page 10.

In 2007, sales of *Zosyn*, a broad-spectrum intravenous antibiotic, grew 17 percent to become only the second product in its class to exceed the \$1 billion mark in annual sales. During the year, the Company completed, in most markets around the world, the introduction of a new and improved *Zosyn* formulation designed to meet current specifications for particulate matter for injectable drugs. Compound patent protection for *Zosyn* in the United States and Europe expired in 2007, and the product is facing generic competition in a number of markets in Europe and elsewhere around the world.

Tygacil, our newest entry in the I.V. antibiotic market, continued its growth, particularly for use against drug-resistant strains of bacteria. Sales for *Tygacil* nearly doubled in 2007 to \$138 million, and it now is approved in 66 markets. Regulatory filings were made during the year for use of *Tygacil* in community-acquired pneumonia, which currently accounts for 20 percent of all in-hospital, I.V.-administered antibiotic usage.

In women's health care, 2007 global sales of the *Premarin* family were consistent with the prior year at just over \$1 billion. Wyeth contraceptive products delivered

sales of \$430 million, a decrease of 5 percent for the year. In May, Wyeth received U.S. market clearance for *Lybrel*, the first and only FDA-approved low-dose combination oral contraceptive with unique 365-day dosing, which makes it possible for some women to be period-free.

Torisel was approved in the United States during the second quarter of 2007 for the treatment of advanced renal cell carcinoma. It is the first targeted therapy with a proven overall survival benefit in patients suffering from

this cancer. *Torisel* uptake in its first few months has been strong, with \$27 million in 2007 sales. European Medicines Agency approval was received in November, and sales in the European Union (EU) have begun.

Wyeth Nutrition

Wyeth Nutrition is a worldwide leader in the development of scientifically advanced nutritional products for infants and young children. A commitment to research has enabled the Company to achieve numerous innovations, most recently with the first-to-market addition

of lutein to the premium *Gold* product line. In 2007, global sales increased 20 percent to \$1.4 billion, with the *Gold* line accounting for the majority of sales. Double-digit growth was recorded in each of the three regions in which Wyeth Nutrition competes. A key driver for Wyeth Nutrition's growth has been its focus on growing markets in Asia, Latin America and the Middle East. To meet the increasing demand for high-quality formulas, the Company recently completed nutritional manufacturing facility expansions in Mexico, and further expansions are under way in the Philippines and Singapore. A new facility also is planned in China, which, with growth of 38 percent in 2007, became the largest Wyeth Nutrition market.

Consumer Healthcare

Total global net sales rose to \$2.7 billion in 2007, an increase of 8 percent, with international net sales up 16 percent. Wyeth Consumer Healthcare executed important brand extensions during the year with the introduction of *Advil Liqui-Gels* on a global basis, *Centrum Cardio* in the United States and *Centrum* food grade in China. Overall, key growth drivers included

Our impact on human health around the world continues to be defined by innovative products like Prevnar, a first-in-class vaccine to help prevent invasive pneumococcal disease in infants and children.

the *Advil* franchise, which grew 11 percent, in part as a result of significant growth in *Advil PM*; *Centrum* vitamins, which grew 7 percent; and the *Caltrate* brand of calcium supplements, which saw 16 percent growth. Also driving growth were strong performances in a number of international markets, including Brazil, which grew 40 percent; Canada, up nearly 13 percent; and Italy, with sales up more than 19 percent. As a result, Wyeth Consumer Healthcare remains among the top five over-the-counter (OTC) companies in the world, with *Advil* and *Centrum* two of the top five global OTC brands.

Animal Health Care

Sales in 2007 grew 11 percent over 2006, to exceed \$1 billion for the first time. Fort Dodge significantly enhanced its leadership position in the industry through the U.S. and European introductions of *ProMeris*, a new line of flea and tick products for cats and dogs. Its livestock product business experienced 12 percent global growth, led by strong sales of cattle products in the United States and Europe and a full year of sales of *Suwayn* PCV2, a new swine vaccine. Also achieving significant sales was the poultry product line, up 13 percent, with a broadening portfolio of vaccines, including an avian influenza vaccine to address the potentially pandemic Asian H5N1 strain. Fort Dodge also remained the overall leader in the U.S. companion animal biological vaccine market. During the year, an important new registration was approved for the prevention of a particularly virulent strain of calicivirus in cats. To accommodate future growth, Fort Dodge is expanding its research facilities in the Kansas City metropolitan area.

Research and Development

Wyeth's research and development organization draws upon expertise in multiple discovery platforms. This means that, in addition to traditional small molecules, we are sharply focused on biologics. As a result, nearly one-third of our current pipeline is composed of biotechnology candidate products and vaccines.

We have outlined a number of late-stage development highlights in the chart on pages 8 and 9. These include three novel oncology agents, a monoclonal antibody to fight Alzheimer's disease, a next-generation vaccine, an antipsychotic, an oral therapy for opioid-induced constipation and a new therapy for river blindness. We also have programs progressing through development that seek to expand existing products with newly identified uses and indications. We are hopeful for U.S. approval in 2008 for *Relistor* in subcutaneous form to treat opioid-induced constipation in patients in palliative care settings. We expect that *Viviant*, being developed for the prevention and treatment of osteoporosis, will be reviewed at an FDA advisory committee meeting. *Aprala*, under investigation for postmenopausal vasomotor symptoms and the treatment of postmenopausal osteoporosis, is targeted for regulatory filing in the first half of 2009.

In addition, we are pressing forward on many fronts in new product development. For example, we have nine

projects in active development for improved symptomatic treatments or disease modifiers for Alzheimer's disease, using small molecules, biologics and vaccines. We also are exploring a wide range of unique compounds with novel mechanisms of action for schizophrenia, bipolar disorder, major depressive disorder, other cognitive disorders and chronic pain. Though still early, these compounds potentially offer significant improvements compared with current standards of care. In the cardiovascular area, we are developing

new compounds that focus on reducing cardiovascular mortality and the complications of diabetes. In addition, we are investigating innovative therapies in gastrointestinal disease and asthma.

To address the challenges of getting new drugs approved in an increasingly difficult environment, Wyeth Research is undertaking a breakthrough initiative. Its scope includes ensuring that new product track candidates clearly demonstrate a value proposition; developing predictive safety and efficacy models that are the best in the industry; and improving the process for assessing benefit-risk during development. This breakthrough project builds on Wyeth's existing R&D productivity initiatives and is intended to formulate strategies for sustainable success in the years to come.

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Social Responsibility Initiatives

In everything we do, our goal is to act responsibly – not only for the sake of our stakeholders but for the world at large.

Two examples are prominent. The first is the rollout of *Pevnar* in the poorest of countries to make this life-saving vaccine more accessible over time to millions of children. In addition, since 1996, we have been working with the World Health Organization to develop moxidectin, a first-in-class agent for the treatment – and potential eradication – of onchocerciasis or river blindness, a disease that is endemic in sub-Saharan Africa as well as in parts of Central America and the Middle East. More than 125 million people worldwide are at risk with more than 17 million people infected with the disease.

In 2007, we contributed approximately \$12 million in products to developing countries, including about 700,000 doses of *Meningitec* vaccine to prevent meningitis C and 25,000 doses of *Pevnar* to areas of Peru hard hit by an earthquake earlier in the year. What's more, our U.S. patient assistance programs continue to provide Wyeth products at no charge to those unable to pay. More than 145,000 patients benefited from the program in 2007, with product donations valued at over \$143 million.

Management Changes

In the sidebar to this letter, you can read more about our CEO transition announced during 2007. In addition, we have other changes to report. We're pleased that Robert M. Amen, Chairman and Chief Executive Officer of International Flavors & Fragrances Inc., has joined the Company's Board of Directors, bringing us his wide-ranging expertise in consumer products. At the same time, we offer our thanks to Walter V. Shipley, who stepped down from the Board in 2007 in compliance with the Company's mandatory retirement policy, for his years of devoted service. We also want to express our appreciation to Ivan G. Seidenberg, who after his years of dedicated service, resigned from the Board.

We have made a number of corporate management leadership changes to prepare Wyeth for continued growth and to capitalize on the executive talent within the Company. Gregory Norden became Senior Vice President and Chief Financial Officer. He has been with the Company since 1989 and previously was

BERNARD POUSSOT, WYETH'S NEW CEO

In late September 2007, Bernard Poussot was elected President and Chief Executive Officer of Wyeth, effective January 1, 2008. He succeeds Robert Essner, who announced his plans to retire from the Company. Mr. Essner will continue as Chairman of the Board of Directors for a period of transition.

Mr. Poussot began his career at Wyeth in 1986 as President of Wyeth France. In 1996, he was appointed President of Wyeth-Ayerst International and a year later became President of the worldwide pharmaceutical business. In 2002, while continuing as President of Wyeth Pharmaceuticals, he became Executive Vice President of Wyeth, assuming additional responsibility for Wyeth R&D. In 2006, Mr. Poussot was promoted to President and Vice Chairman of Wyeth and, in January 2007, to the position of President, Chief Operating Officer and Vice Chairman of the Company.

In announcing this succession, Mr. Essner noted, "Bernard is exceptionally well-qualified for this role, and we have built a world-class management team to support him and the Company. His election is a result of the Company's ongoing succession planning process – an important focus of Wyeth's Board of Directors and management."

Mr. Essner's leadership helped propel Wyeth to the top tier of the global pharmaceutical industry. During his tenure as CEO, revenue increased from \$14 billion in 2001 to more than \$22 billion in 2007, accompanied by significant increases in earnings per share. Mr. Essner was responsible for initiating a transformation of the Company's research and drug development process, advancing a new model for pharmaceutical sales in the United States and successfully navigating the Company through significant litigation challenges.

CFO of Wyeth Pharmaceuticals. Denise M. Peppard was promoted to Senior Vice President, Human Resources, with the retirement of René R. Lewin, who was instrumental in developing a performance-based culture during his 13 years with the Company. Mary Katherine Wold was promoted to Senior Vice President, Finance. The Board elected Andrew F. Davidson as Vice President, Internal Audit. Finally, in February 2008, Timothy P. Cost joined the Company as Senior Vice President, Corporate Affairs, bringing to Wyeth many years of experience in communications and investor relations. Mr. Cost replaces Marily H. Rhudy, who has announced plans to retire. We thank Ms. Rhudy for her many contributions to our business.

There also were a number of organizational changes within our business operations. Joseph M. Mahady was promoted to President, Wyeth Pharmaceuticals, and remains Senior Vice President, Wyeth. Geno J. Germano became President, U.S. Pharmaceuticals and Women's Health Care. Ulf Wiinberg was promoted to President, EMEA/Canada and BioPharma, and remains Senior Vice President, Wyeth. In the animal health division, Richard R. DeLuca, Jr., was named President of Fort Dodge Animal Health with the retirement of E. Thomas Corcoran, who provided 23 years of distinguished contributions to Wyeth. Cavan M. Redmond was promoted to President, Wyeth Consumer Healthcare, while Douglas A. Rogers became President of U.S. and Global New Business for the division.

Wyeth's ability to develop talent, as well as to attract new leaders, highlights the continuity of culture and depth of experience that is critical for our future. We wish all those with new responsibilities great success and will give them our full support, and we thank those retiring from the Company for their many contributions over the years. The outstanding leadership, expertise and experience that our entire management team brings to Wyeth should continue to translate into successful solutions to important health problems worldwide.

The Road Ahead

We are immensely proud of all we have accomplished during the past year and the past decade. The capabilities we have built in R&D and across the Company are delivering innovative products to save and improve lives. We hope our work on Alzheimer's disease will make a difference for the patients and families who suffer. We believe that as *Prevnar* is introduced in more

countries, the lives of hundreds of thousands of children eventually will be saved. We know that *Enbrel* already has made an extraordinary difference in the lives of people who have benefited from its use.

To continue and expand this record of achievement, we will remain flexible and resilient in seeking better ways to deliver accessible and affordable health care.

As we do all this, we will be guided by five principles: Our values. Science and innovation. Leadership. Sound financial decisions. And belief in our noble cause – improving the lives of people through medical advances and putting the patient at the center of everything we do.

We thank our colleagues at Wyeth for their innumerable contributions – and for their dedication to reshaping our Company in order to make it stronger. As we look to the future, we believe that the support and hard work of our people will help us to grow, to prosper and to lead as we build the most trusted and respected health care company in the world.

Sincerely,



Robert Essner
Chairman of the Board



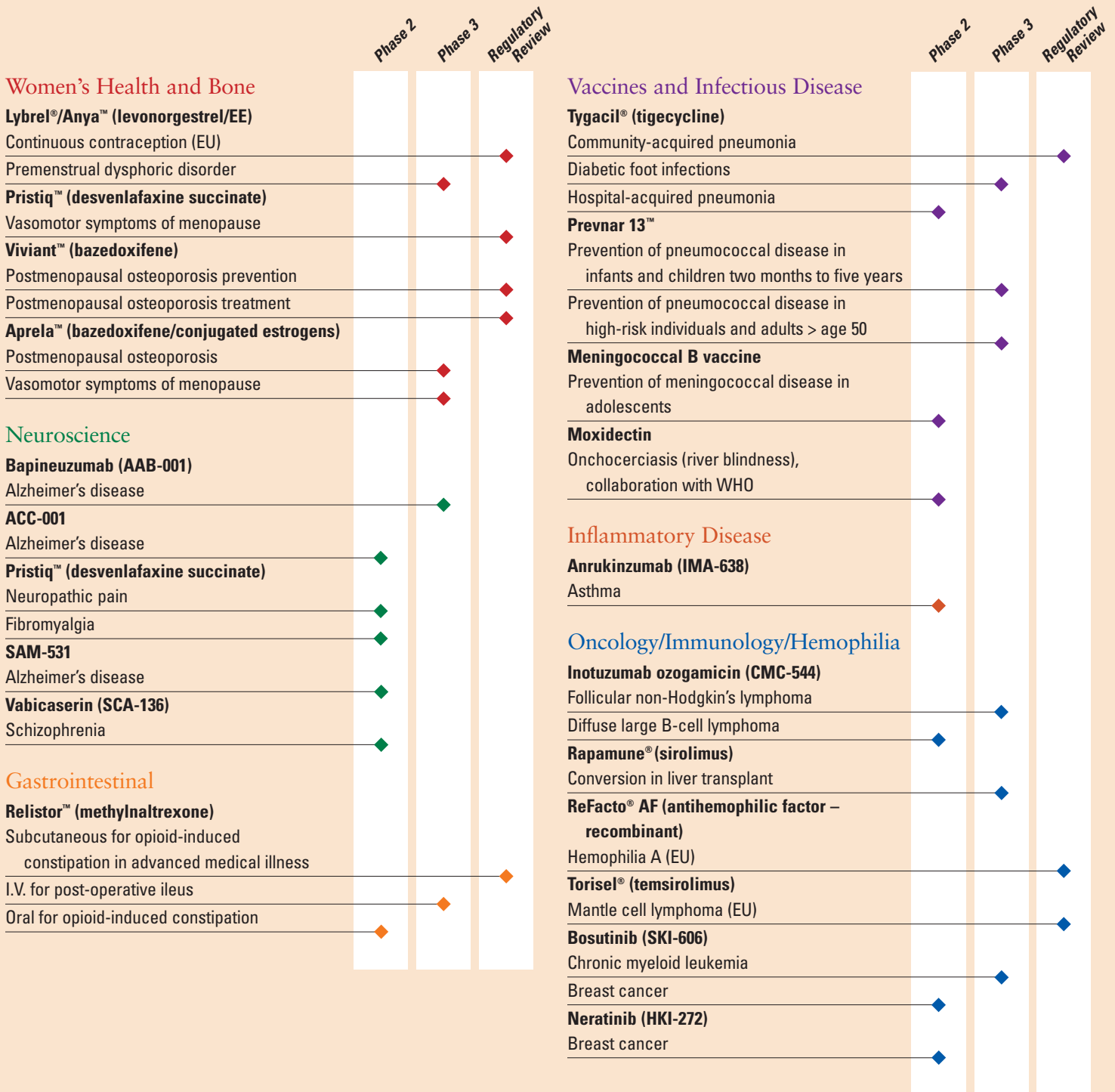
Bernard Poussot
President and
Chief Executive Officer

February 29, 2008

Wyeth's Pipeline for Innovation

During 2007, Wyeth filed four New Drug Applications (NDA) in the United States, including two that represented new molecular entities. Since 2004, Wyeth has delivered on its goal of filing two NDAs each year for new molecular entities. In addition, over the past seven years, 91 new candidate medicines were placed into development, with 72 advancing to human clinical


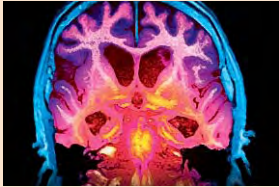
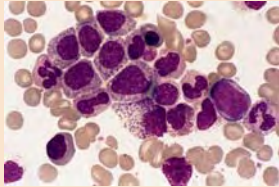
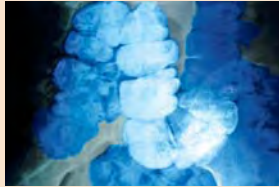
trials. The majority of these have the potential to be first- or best-in-class therapies. This chart presents a snapshot, as of February 2008, of new drugs or potential new indications/formulations from Wyeth that are in advanced human trials or under review by regulatory agencies.



Phase 2 – Determination of safe and effective dosage for an experimental medicine, generally conducted in hundreds of patients
Phase 3 – Determination of overall benefit/risk ratio for an experimental medicine, generally conducted in thousands of patients
Regulatory Review – Evaluation of safety and efficacy data by governmental regulatory agencies

Highlights from Wyeth's Late-Stage Drug Development

Wyeth's development pipeline of new vaccines and therapies continues to grow in breadth, depth and innovation. Eleven potential new therapies or uses for significant existing drugs are in Phase 3 development, and another eight currently are awaiting approval in

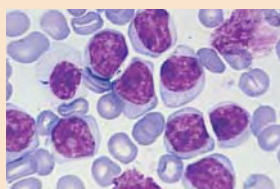
Candidate	<i>Prevnar 13</i>	<i>Bapineuzumab (AAB-001)</i>	<i>Bosutinib (SKI-606)</i>	<i>Relistor</i>
	For infants, children and adults	Collaboration with Elan Corporation, plc		Oral formulation Collaboration with Progenics Pharmaceuticals, Inc.
Indication	 Prevention of invasive pneumococcal disease	 Mild to moderate Alzheimer's disease	 Chronic myelogenous leukemia (CML)	 Opioid-induced constipation (OIC)
Stage	Phase 3 – Infants and children Phase 3 – Adults	Phase 3	Phase 3 – first-line CML Phase 2 – breast cancer	Phase 2
Unmet Medical Need	For infants and children, <i>Prevnar 13</i> expands protection against six additional pneumococcal disease-causing serotypes, including 19A. For adults, it may provide substantially greater efficacy against pneumococcal disease than current standards of care.	Current therapies for Alzheimer's disease provide some symptomatic relief but do not alter the underlying disease pathology.	There is a need for safer and more tolerable therapies capable of inducing rapid and long-lasting remissions in newly diagnosed CML patients.	Opioid analgesics often produce constipation as a side effect, which can be a barrier to effective pain management. Currently, there are no approved medications that specifically target OIC's cause.
Mechanism of Action	The vaccine is designed to induce functional antibody responses to all 13 vaccine serotypes, thus promoting clearance of the bacteria by antibodies binding to pneumococcal capsular polysaccharides.	By binding to all forms of beta-amyloid in the brain, bapineuzumab is thought to help clear damaging beta-amyloid plaques from the brain and also neutralize neuro-toxic forms of beta-amyloid, thereby having a fundamental impact on the disease process.	Bosutinib is an orally active inhibitor of src and abl kinases, proteins involved in tumor cell growth and metastasis.	<i>Relistor</i> is a selective mu-opioid receptor antagonist that blocks the peripheral side effects of opioid analgesics without interfering with pain relief.
What's Different	For infants and children, it is expected to be the most complete vaccine for the global prevention of serious pneumococcal disease and acute otitis media. For adults, it is the first conjugate vaccine for adult pneumococcal disease, including pneumococcal pneumonia, with the potential for long-term protection through boosting.	This potentially is the first therapy for Alzheimer's disease that may halt or modify its course.	This compound potentially offers an excellent side effect profile in comparison with imatinib and other second-generation abl kinase inhibitors. In imatinib-resistant/intolerant patients, bosutinib exhibits response rates comparable with or better than other second-generation abl kinase inhibitors.	It is designed to rapidly reverse OIC without reversing analgesic effects.

the United States or the European Union. Most important, 75 percent of the projects in Wyeth's overall development portfolio, including those in earlier stages of development are new molecular entities or NMEs. These represent novel or innovative

compounds that offer significant value to patients and society. This chart presents a snapshot of new drugs or significant new indications/formulations from Wyeth that are in advanced human trials or under review by regulatory agencies.

Inotuzumab ozogamicin (CMC-544)

Collaboration with UCB Group



Follicular non-Hodgkin's lymphoma (FL NHL) and diffuse large B-cell lymphoma (DL BCL)

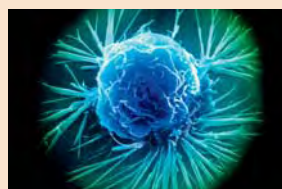
Phase 3 – FL NHL
Phase 2 – DL BCL

Current treatments could benefit from reduced toxicities and from improvements in duration of remission, disease-free survival and quality of life as well as from reduced supportive care costs.

This anti-CD22 antibody calicheamicin conjugate binds to the CD22 receptor expressed by B lymphocytes in the body. The complex then is internalized by the cell, releasing calicheamicin into the cell nucleus and inducing cell death.

Inotuzumab ozogamicin, combined with rituximab, has the potential to be the first completely targeted treatment for non-Hodgkin's lymphoma, resulting in increased efficacy and better safety.

Neratinib (HKI-272)



HER-2 positive metastatic breast cancer (initial indication)

Phase 2

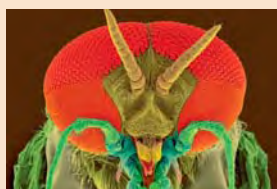
In patients whose tumors recur after treatment with trastuzumab (Herceptin), there is a significant need for alternative therapies that can halt the continued growth of the tumor and progression of cancer.

It potentially is an irreversible inhibitor of erbB tyrosine kinases, including HER-2 and EGFR, which are implicated in cancer cell growth and division.

Through an irreversible inhibition of erbB kinases, use of neratinib may result in the sustained suppression of associated pathways, thus inhibiting cancer cell proliferation.

Moxidectin

Collaboration with the World Health Organization



Onchocerciasis (river blindness)

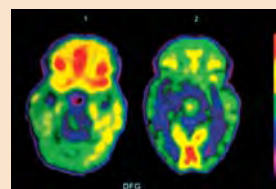
Phase 2

River blindness is a devastating parasitic disease predominantly found in Africa that is the second leading infectious cause of blindness.

Moxidectin acts on the GABA-A receptor chloride channel complex to disrupt cell membranes in the parasite, ultimately leading to its paralysis and death.

Unlike current treatments that may have serious side effects or can only control the disease, it has a unique mechanism of action that may result in complete elimination of the parasite in endemic areas over time.

Vabicaserin (SCA-136)



Schizophrenia (oral agent)

Phase 2

Current antipsychotics for schizophrenia offer adequate symptom relief but often have significant side effects, including weight gain and cardiovascular and metabolic problems. The relief of negative symptoms and a reduction of cognitive defects remain important unmet needs.

5-HT2C agonists impact the activity of serotonin receptors in the brain and differentially modulate dopamine release in several key pathways relevant to schizophrenia.

Vabicaserin potentially treats symptoms without the significant side effects associated with currently available antipsychotics.

Wyeth Vaccines

A World to Protect



The development of vaccines to prevent serious disease is an extraordinary story of medical achievement – one in which Wyeth has played a critical role for more than 100 years. Today, the Company is helping to usher in a new era of vaccine innovation by focusing sharply on its biggest challenge yet – saving the lives of the 1.5 million children and adults who die each year from pneumococcal disease.

Wyeth's pneumococcal conjugate vaccine – *Prevnar* – introduced in 2000, has become the global industry standard in pneumococcal disease prevention and has helped redefine the industry in the process. Since the launch of *Prevnar* (marketed as *Prevenar* outside the United States), millions of cases of pneumococcal disease have been averted and thousands of lives saved. In this special report, you will see the faces of some of the children *Prevnar* has helped protect and learn about the scientific advances that have made this extremely complex biologic product a reality.

For Wyeth, all of this is just the beginning because there still is a world to protect.

A significant proportion of illness, disability and death in African children can be averted through vaccination against pneumococcal disease, a leading killer of young children in developing countries.

A Legacy of Achievement in Preventing Disease

The significant impact of Wyeth's vaccines – and those of its predecessor companies Lederle Laboratories and Praxis Biologics – dates back more than a century. In the early 1900s, the Company was involved in the commercial production of smallpox vaccine. It later launched *Dryvax*, a highly advanced version of the vaccine, and revolutionized smallpox vaccine delivery with the introduction of the bifurcated needle. These contributions helped lead to the worldwide eradication of this devastating disease. In 1906, Lederle became a major supplier of the diphtheria antitoxin and later introduced the first combined vaccine for preventing diphtheria, pertussis and tetanus. Lederle also produced more than 600 million doses of the first live trivalent oral poliovirus vaccine, substantially contributing to the 1994 eradication of polio in the Americas.

As vaccine research and development took exciting new directions through emerging knowledge about viral and bacterial diseases, Wyeth continued to press forward. Even as many others abandoned vaccine research, Wyeth remained on the leading edge in vaccine development. In fact, says Jim Connolly, who heads the Company's Global Vaccines business unit, "Wyeth has played a leading role in the introduction of some of the most significant vaccine advances over the last century, and our commitment and excitement about vaccines today are stronger than ever."



"One of my first jobs after coming here from Russia was with the pneumococcal program at Praxis Biologics, which later became part of Lederle and then Wyeth. Our goal was to create a vaccine that would work in infants by boosting their immune response. Applying our knowledge to create such a complex vaccine and make it effective — that was the challenge. Not many people are lucky enough to work on such a project, to actually see what a vaccine like this can do and then help bring it to the populations that need it most. That's very special."

Maya Koster, Principal Research Scientist, Pharma R&D, Vaccines, and recipient, National Medal of Technology for *Prevnar*



Streptococcus pneumoniae bacteria, magnified 25,000 times, is the pathogen responsible for infections such as bacteremia, sepsis and meningitis as well as middle ear infections and pneumonia. Most at risk are young infants and older adults.



Creating Conjugate Vaccines

In 1989, Wyeth's use of novel conjugation technologies led to the introduction of groundbreaking vaccines, ones that were effective in young children, offered longer protection and reduced the rates of disease transmission. In many bacterial diseases, the bacterium expresses a surface coat composed of characteristic polysaccharides, which are long-linked sugar molecules. Using conjugation technology, Wyeth scientists linked these polysaccharides to a specific protein called CRM₁₉₇ – a non-toxic variant of diphtheria toxin. Doing so produced vaccines that boosted the body's immune response and immune memory, even in very young infants. Three innovative Wyeth conjugate vaccines resulted from this technological breakthrough. The first conjugate vaccine, *HibTITER*, targeted a bacterium called *Haemophilus influenzae* type b (Hib), thus helping to protect young infants from resulting infections that could lead to severe meningitis, an inflammation of the membranes surrounding the brain and spinal cord. A second vaccine, *Meningitec*, targets the meningococcal group C bacterium. This vaccine made a significant contribution to public health in the late 1990s, when the United Kingdom experienced an

Wyeth's *Meningitec*, a vaccine against meningitis C, was introduced in the United Kingdom when the country saw an alarming spike in cases, especially in adolescents and young adults.

“Wyeth has played a leading role in the introduction of some of the most significant vaccine advances over the last century, and our commitment and excitement about vaccines today are stronger than ever.”

alarming increase in group C meningitis. After its 1999 introduction in the United Kingdom, *Meningitec*, along with follow-on vaccines from other producers, led to the virtual elimination of the disease in that country.

The third vaccine – *Prevnar* – was launched in 2000 in the United States and now is available in 86 countries. *Prevnar* is the first and only pneumococcal polysaccharide-protein conjugate vaccine approved for routine use in infants and young children. As a result of the extraordinary health benefits it provides, *Prevnar* has become the global standard in pneumococcal disease prevention.

The vaccine focuses on the seven most prevalent pneumococcal serotypes that cause the majority of disease worldwide. These bacteria can cause severe invasive disease, including bacteremia, sepsis and meningitis as well as middle ear infections and pneumonia. Infants, children under the age of two and older adults are at highest risk because their immune systems are less capable of fighting the disease.

In recognition of the pioneering science employed by Wyeth in the development of *Prevnar* as well as its broad public health impact, a team of Wyeth scientists was awarded the 2005 National Medal of Technology – the highest honor the United States can bestow for technological achievement.

Prevnar Makes a Significant Impact on Public Health

Walter Orenstein, M.D., is a world-class infectious disease specialist who today is Associate Director of the Emory Vaccine Center. During his leadership of the Centers for Disease Control and Prevention (CDC) National Immunization Program, Dr. Orenstein was pivotal in recommending that *Prevnar* be included in the U.S. national immunization schedule.

“The health burden in the United States from pneumococcal disease in children was substantial at the time,” Dr. Orenstein says. “You had bacteremia, meningitis and pneumonia. It also was clear that there was a substantial risk for young children and that the current pneumococcal polysaccharide vaccine was not effective in that group. We looked to pneumococcal conjugate vaccine for a new answer.”

Jerome Klein, M.D., now professor of pediatrics at Boston University School of Medicine, was on the Data Safety Monitoring Committee for the Phase 3 trials of *Prevnar* conducted by Northern California Kaiser Permanente. “The committee broke



“Tracking of epidemiological trend data predicted a peak in incidence of meningitis C in the United Kingdom. In 1997, the British government had asked all vaccine suppliers to accelerate development of new vaccines. By November 1999, a national immunization campaign began with *Meningitec*, the only vaccine available for the disease during the critical winter peak months. *Meningitec* reduced infections by 76 percent, with an efficacy of 97 percent in adolescents. Today, thanks to an effective immunization program, meningitis C infections have been reduced dramatically in the United Kingdom.”

Julie Willingham, Vaccines Group Product Manager, Wyeth U.K.

Thanks to Wyeth’s *Prevnar*, millions of children are protected from the potentially devastating effects of serious pneumococcal disease.



the code when 17 cases of invasive pneumococcal disease were identified among children in the trials. It was extraordinary to recognize within seconds that every child who had received *Prevnar* had been protected and that the illness was confined only to those children who were not vaccinated.” At the time of its approval, Dr. Klein deemed the vaccine “a big win for kids.” He recalls, “As soon as *Prevnar* was available, pediatricians enthusiastically grabbed it. Its profile of efficacy and safety was very advantageous. Universal immunization soon was recommended.”

Optimally, the vaccine is given in four doses. Dr. Klein explains: “You want to start as early as possible to capture disease in the very young. After the first dose at two months, you get a minimal antibody rise; at four months, an amplified rise; at six months, a great rise because the infant’s immune system is more capable at this time. At 12-15 months, a booster is administered – to get another substantial rise of antibodies. This takes you through the period of major vulnerability.”

David Perlstein, M.D., is Associate Medical Director and Ambulatory Pediatric Director at St. Barnabas Hospital in the Bronx, New York. The hospital, located in a neighborhood with explosive pediatric growth, receives more than 75,000 pediatric visits a year and has 45 pediatricians on staff. Dr. Perlstein remembers what his work was like before the vaccine.

Navajo children in the southwestern United States, at greater risk of invasive pneumococcal disease than most of the U.S. population, participated in the clinical trials that led to the introduction of *Prevnar*.



“Before *Prevnar*, we erred on the side of doing everything possible at the moment – including administering every kind of test and giving advanced antibiotics – because we knew the damage that invasive disease could do to our younger patients. Now our whole practice has been revolutionized. We watch and follow, especially when we know a child has received *Prevnar*. I can’t remember the last time we had a positive finding of invasive disease due to *Streptococcus pneumoniae*.”

The CDC recently reported that in 2005 there was a 98 percent reduction in invasive pneumococcal disease caused by the seven serotypes contained in *Prevnar* and a 77 percent reduction in overall invasive pneumococcal disease in children under age five in the United States. “A great deal of the history of infectious disease is tied to pneumococcal disease,” says William Gruber, M.D., Vice President, Wyeth Vaccines Clinical Research. “Being in a position to see such a dramatic reduction in this disease is a wonderful history to be living.”

Unexpected Benefit for Adults

What’s more, there has been an unexpected benefit. “The kicker came from CDC and Kaiser Permanente data showing that invasive disease among non-immunized individuals also had been reduced,” Dr. Klein notes. A reservoir of immunity led to the decreased spread of those diseases from infants to older siblings, parents and grandparents.”

So adults are being protected as well. The CDC observed a 76 percent reduction in the incidence of vaccine serotype disease – especially pneumonia – among unvaccinated adults over age 50. With fewer cases of pneumococcal disease in the overall population, there are fewer chances of transmitting the disease to those over age 50 and especially to those over age 65 whose immune systems become less efficient. This remarkable phenomenon, known as “herd immunity,” underscores the broad public health impact of the vaccine.

“What’s unique about vaccines is that they have both an individual and a societal effect,” says Peter Paradiso, Ph.D., head of Scientific Affairs for Wyeth Vaccines and a scientist who has worked on *Prevnar* for many years. “Vaccines don’t just prevent disease in the individual, they also protect society. We saw their power years ago when mass polio vaccinations prevented an epidemic.

“Today,” he continues, “*Prevnar* is the clearest example of a vaccine that has targeted and immunized a population that gets a disease and, at the same time, helps stop the spread of that disease to other cohorts. Indeed, in many ways, the societal benefit of *Prevnar* is bigger than its direct benefit.”



“One of the nicest aspects of vaccine development is the almost immediate gratification that follows. You have a disease burden in a population, you introduce an effective vaccine and, in a few years, the disease burden is reduced substantially. You can see the impact very quickly. The concept of reducing or even eliminating serious illness and death in infected kids in only a few years is incredible.”

Emilio Emini, Ph.D., Executive Vice President,
Vaccine Research and Development,
Wyeth Pharmaceuticals

“By including *Prevnar* in its national immunization program, the Mexican government has ensured that children will be protected from a dangerous and potentially deadly disease.”

Carlos Fabian Abelleira, General Manager, Wyeth Mexico



For the first time in that country, all children born in Mexico in 2008 are expected to be able to receive *Pevnar* – at no cost to their families – at government hospitals.



Mexico: An Emerging Market Model

It is estimated that in Latin America, two children die of invasive pneumococcal disease every hour. In 2001, Mexico was among the first countries in Latin America – and the first emerging market in the world – to introduce *Prevnar*. Mexico will serve as an important model as the vaccine is introduced in other emerging markets.

Today, nearly 50 percent of all children in Mexico who should be vaccinated with *Prevnar* are receiving it – either at no cost through government hospitals and clinics or through the private sector. By the end of 2008, it is expected that coverage will reach nearly 100 percent. “All children born in 2008 will have the right to be taken to a government hospital and receive the vaccine,” says Carlos Fabian Abelleira, General Manager for Wyeth in Mexico. “This is a major achievement for Wyeth and a great benefit for the children of our country.”

With the addition of *Prevnar* to Mexico’s national immunization schedule in February 2008, the vaccine has forced a change in the paradigm of how vaccines are viewed. “Basically, this has caused the government to take a fresh look at how it allocates its health care dollars,” Abelleira says. “As you can imagine, in Mexico, as in many other countries, resources are limited, and the government must carefully choose its public health priorities. By including *Prevnar* in its national immunization program, the Mexican government has ensured that children will be protected from a dangerous and potentially deadly disease. It also has affirmed the importance and cost-effectiveness of prevention as a critical component of its national health strategy, as advanced vaccines like *Prevnar* benefit children and society – today and well into the future.”

Early on, the Mexican government created its own cost-benefit analyses for *Prevnar* and, as a result, decided to move from initial coverage in only the most at-risk populations – indigenous children in rural areas of the country – to universal coverage.

Feeling of Hope Emerges

Demóstenes Gómez Barreto, M.D., has been a pediatrician in Mexico City for the past 30 years. “I saw many cases of severe pneumonia, bacteremia and meningitis in my practice. So all of us who treated children understood the need for a vaccine like *Prevnar*,” he says.

“We were very happy when it first was introduced in private practice because we finally could protect some of our own patients. But we were even happier,” he adds, “when the government started its own vaccination program in groups of high-risk children.”



“To raise the profile of pneumococcal disease and the benefits of immunization, Wyeth worked with the Mexican government on a mass media campaign, the first ever in Mexico for a vaccine. That allowed us to foster awareness and create an environment that would facilitate the introduction of *Prevnar* on a universal basis.”

Carlos Fabian Abelleira, General Manager,
Wyeth Mexico

Today, Dr. Gómez Barreto believes *Prevnar* is covering most of the serotypes that can cause disease in the country and is showing a strong efficacy rate.

“Our hope,” he says, “is that the most positive impact will be seen in villages around the country, where a campaign to vaccinate every child is taking place to reduce mortality rates in these rural areas that have limited access to health care services.”

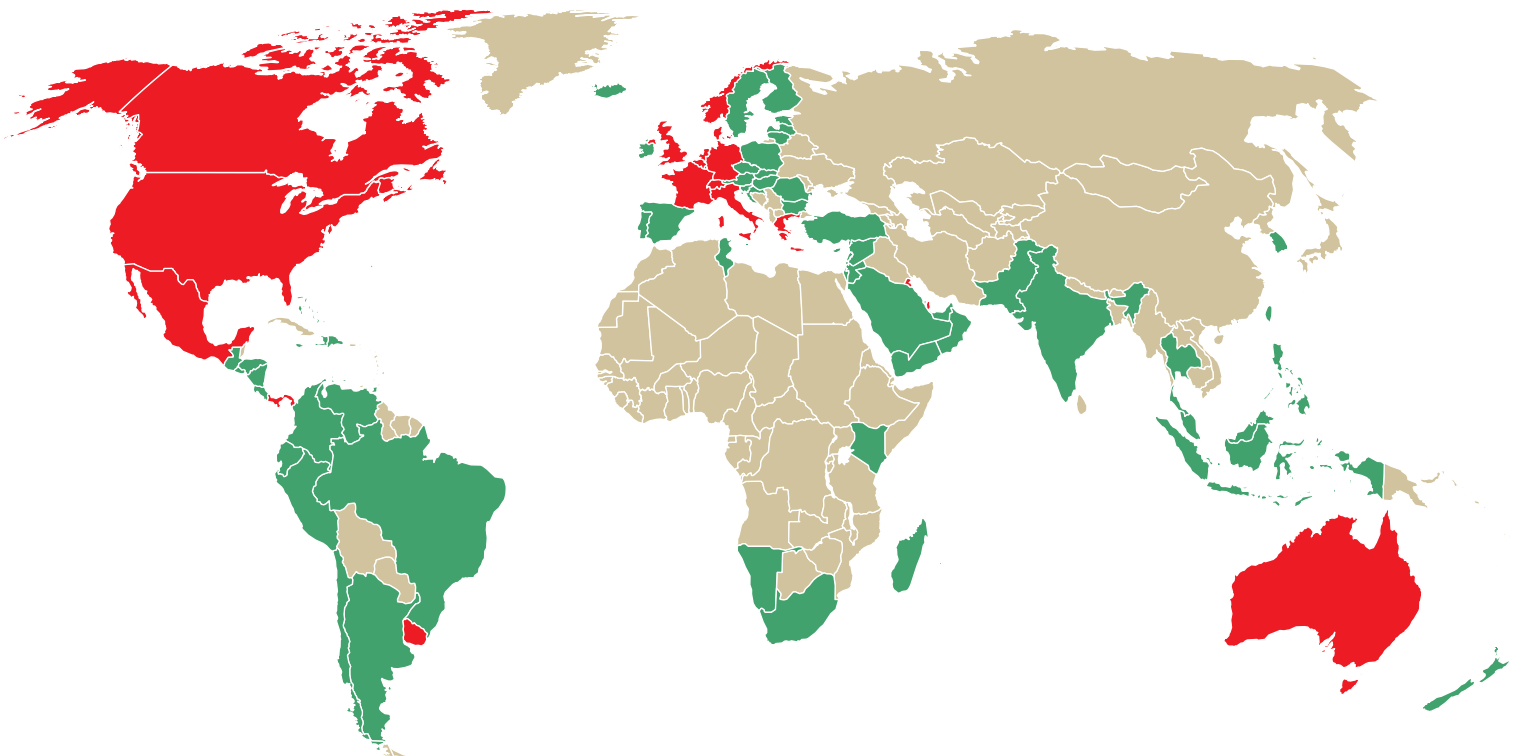
A Vaccine for the Developing World

Today, even with all the advances that *Prevnar* has made, pneumococcal disease still kills more children than any other illness – more than AIDS, malaria and measles combined. Yet only a small percentage of children in the world at greatest risk of dying from the disease are getting the vaccine. Starting this year, that picture is expected to begin to change.

Wyeth’s goal is to work with the international health community to make *Prevnar* available to the poorest countries in the world as quickly as possible. Thirty-four countries with per capita incomes under \$1,000 already have indicated an interest in introducing pneumococcal vaccines by 2010. These countries account for more than a third of all the childhood pneumococcal deaths worldwide. The most interest has come from Africa, which has the highest incidence of pneumococcal disease.

Global Impact

- Countries where *Prevnar* currently is available
- Countries where *Prevnar* also is on their national immunization schedule



Orin Levine, Ph.D., an associate professor at The Johns Hopkins University Bloomberg School of Public Health, leads the effort to create a bridge to the developing world for pneumococcal vaccines. As Executive Director of PneumoADIP, a project supported by the GAVI Alliance – a unique public/private partnership of which Wyeth is a member – he is focused on getting these vaccines to every child who can benefit.

Dr. Levine says, “Even though many people haven’t heard of it, pneumococcal disease is the leading vaccine-preventable cause of death worldwide. More than 90 percent of those deaths occur in developing countries. So if we want to change the world – as we do – then we need to use these vaccines in the countries where children need them the most.”

In addition to GAVI, a novel funding mechanism called the Advance Market Commitments (AMC) is seeking to help ensure that needed vaccines will be taken up by developing countries. Designed to create predictable markets in poorer countries for future vaccines, the AMC was launched in February 2007, with donors pledging \$1.5 billion to support next-generation pneumococcal vaccines. The AMC goal is to guarantee a market for vaccines from producers at steeply discounted prices and then get those vaccines to countries in need.

“We expect pneumococcal vaccines to begin saving lives in developing countries in 2008,” Dr. Levine concludes. “We also expect the impact of *Prevnar* to be substantial. We should get on with using it now and have that experience serve as a base for an expanded vaccine. If we can show good results early, we can sustain political support and financing. Success requires that industry and the public sector demonstrate they can come together, deliver the vaccine and measure its health impact.”

Manufacturing One of the Most Complex Biotech Products Ever

Until the advent of vaccines like *Prevnar*, vaccine production often involved growing bacteria, adding certain components to either kill or weaken those bacteria, then filtering and packaging the result. Advanced conjugate vaccines like *Prevnar* are changing all that. “Now we’re using more biotechnology,” says David Zisa, Vice President, Vaccines Product Supply. “We’re expressing components of bacteria, then performing biochemical rearrangements or restructuring to actually make the vaccine work.”

The result, at least for *Prevnar* and for a next-generation Wyeth vaccine that will cover 13 different pneumococcal strains,



“I believe that rough roads lead to the top and that there is no substitute for hard work. That’s why I’m proud to be part of the Pearl River team that helps produce *Prevnar*. What a great feeling to know the vaccine we’re producing helps save the lives of babies around the world.”

Ernie M. Skinner, Aseptic Set-up Worker,
Wyeth Vaccines, Pearl River, New York

Among other complex production processes, the carrier protein that gives *Prevnar* some of its special characteristics is grown at Wyeth’s Sanford, North Carolina, manufacturing facility, where the key focus is quality control, increased productivity and efficiency.



is increased complexity, longer cycle times and higher costs. “*Prevnar* is among the most complex biotech or biologic products ever made,” says Michael Kamarck, Ph.D., Executive Vice President, Wyeth Technical Operations and Product Supply. “It’s a combination vaccine that contains seven glycoconjugates – or seven different vaccines in one. It combines, or conjugates, the seven different polysaccharides or sugars found on the cell coats of each of seven different bacterial strains in the vaccine with a carrier protein that enhances their effect.”

Dr. Kamarck further explains: “At a modern facility in Pearl River, New York, in a series of fermentation tanks (with separate tanks for each different strain), we start by growing bacteria using a mixture of nutrients, all of which support the bacterial growth. Then we kill the bacteria by adding chemicals that disrupt the cells. After that, we take the cell coatings that largely are polysaccharides and separate them from other bacterial debris.” A series of steps in a rigorous purification process follows to isolate the polysaccharide intermediates.

Carrier Protein Is Key

The carrier protein that gives *Prevnar* its special ability to be identified by an infant’s immature immune system and that enhances immune memory also must be grown, a process that takes place at the Company’s Sanford, North Carolina, facility. That protein – CRM₁₉₇ – is isolated from the *Corynebacterium diphtheriae* bacterium, grown in large quantities, then separated from the bacterium and purified.

The purified polysaccharides for each strain in *Prevnar* are chemically activated and then linked with the carrier protein through another biochemical process. Each of the seven resulting glycoconjugates is purified. All along the way, quality control tests are used to make sure batches are consistent and remain sterile.

Finally, the seven glycoconjugates are combined using aluminum phosphate to complete the formulation. The final formulated bulk vaccine is filled into syringes and packaged at a number of sites in the United States and Europe for distribution around the world. There are some 1,000 controls in place to ensure quality and safety during production. The manufacturing complexity is unprecedented because 15 individual components are required for *Prevnar*.

To ensure that production facilities can meet the growing demand for *Prevnar*, Wyeth has invested hundreds of millions of dollars in new facilities and capital improvements.

Creating the next-generation pneumococcal vaccine – a 13-valent formulation – will require even more resources, including a new



“Our people are using their technical skills to increase output at our facilities so that we get *Prevnar* to more and more kids. What really motivates people is that they’re delivering a life-saving product. Everywhere you go in Pearl River, Collegeville and Sanford, you see pictures of babies – the babies we’re trying to save. Actually, it’s almost too easy to be a manager in an environment where you’re working to save kids’ lives. It just doesn’t get any better than this.”

David Zisa, Vice President,
Vaccines Product Supply, Wyeth

“*Prevnar* is among the most complex biotech or biologic products ever made. It’s a combination vaccine that contains seven glycoconjugates – or seven different vaccines in one.”

process development facility in Sanford costing \$200 million as well as investment of nearly \$1 billion at other Wyeth sites in Andover, Massachusetts; Pearl River, New York; and Grange Castle, Ireland.

“We’ll almost be doubling the complexity of the vaccine,” Dr. Kamarck says. “There will be 27 discrete steps for analytical assessments. Our job is to manufacture it perfectly.”

No wonder employees at all the Wyeth facilities involved are “absolutely inspired by it,” Dr. Kamarck says. Process improvements have tripled the output of existing plants in the past four years. And, over the next decade, Wyeth is looking for further increases in manufacturing capacity.

Creating a New Generation of Vaccines to Address Global Concerns

Today, Wyeth R&D is focusing on the next generation of significant vaccine advances – both to prevent disease and to be used therapeutically to treat illnesses.

The Company’s pipeline includes: *Prevnar 13*, a 13-valent vaccine to prevent pneumococcal disease in infants and children as

Aboriginal children and adults in Australia are among the higher-risk groups expected to benefit greatly from *Prevnar 13*, Wyeth’s next-generation 13-valent pneumococcal conjugate vaccine.





well as adults; a vaccine that targets a bacterium that causes significant numbers of meningitis and bloodstream infections for which no vaccine currently exists; a first-in-class vaccine – being developed in collaboration with Elan Corporation – to halt the progression of Alzheimer’s disease; a vaccine for strep throat; and a vaccine for the staphylococcal infections that have increased significantly in both hospital and community settings.

Prevnar 13 Pediatric

The Company has a 13-valent pneumococcal conjugate vaccine in late-stage clinical development for use in infants and children. This vaccine – called *Prevnar 13* – adds protection for six additional serotypes to the seven already present in *Prevnar*, thus covering approximately 60 percent of the bacterial strains responsible for the remaining pneumococcal disease.

Included among those are serotype 19A infections, which have been on the rise and are responsible for an increasing proportion of antibiotic-resistant disease. In addition, the vaccine includes serotypes prevalent in developing countries in Africa and Asia as well as in certain other high-risk populations, including Native Americans, Native Alaskans and aborigines in Australia.

Targeting serotypes that have begun to replace the seven original strains, sooner rather than later, is an important part of the *Prevnar 13* Pediatric vaccine strategy. “The CDC is on record that 19A is the most important emerging serotype in the post-*Prevnar* era in the United States,” says Wyeth’s Dr. Gruber. “Two trials – one in Israel and the other in Alaska – are designed to make the case that our vaccine works to protect against this serotype.”

The trial in Israel will examine how the six additional serotypes in the 13-valent vaccine will affect colonization by emerging pneumococcal serotypes. With regard to Alaska, Dr. Gruber says: “19A has emerged as a very important cause of invasive pneumococcal disease in Native Alaskan infants and children and may serve as a sentinel for what we might expect to see over time in the population at large,” Dr. Gruber says. “So, in addition to potentially improving protection in this vulnerable population as part of the trial there, we will be better able to predict the global impact of the 13-valent vaccine in reducing disease.”

“The objective of our 13-valent pediatric pneumococcal conjugate vaccine program is to develop the most complete vaccine available for the global prevention of pneumococcal disease and pneumococcal otitis media,” says Wyeth’s Emilio Emini, Ph.D., Executive Vice President, Vaccine Research and Development. Planned for regulatory submission in 2009, the program now is in Phase 3 clinical development.



“The development program for *Prevnar 13* Pediatric is one of the most complex and challenging ever attempted since, in principle, you’re dealing with 13 separate vaccines. As a result, the unprecedented efforts by our internal teams are nothing short of heroic. For example, hundreds of thousands of tests are expected to be completed over the next year alone to assess protective immune responses as well as to demonstrate that this vaccine doesn’t interfere with other childhood vaccines.”

Kathrin Jansen, Ph.D., Senior Vice President,
Early Phase Programs, Wyeth Vaccine
Research

Opposite page: Children in Kenya will be among the many who will benefit as millions of doses of *Prevnar* are provided to countries in Latin America, Africa and Asia.

Prevnar 13 Adult

While *Prevnar* has provided herd immunity to older adults in many countries by reducing the reservoir of communicable disease that can be spread, pneumococcal disease in adults still remains a major health burden. Death rates from pneumococcal disease in adults between age 50 and age 64 are 10 times higher than those for one-year-old infants. And for adults over age 65, death rates increase to 27 times greater than for one-year-olds.

“Currently, there is a 23-valent, free-polysaccharide pneumococcal vaccine available for adults ages 65 and older,” Dr. Emini says. “However,” he explains, “within five years of administration, the efficacy of this vaccine declines. And the vaccine cannot be used to substantially boost the immune response once an initial dose is administered.

Dr. Gruber says: “We expect that Wyeth’s *Prevnar 13 Adult* will provide immunologic memory to permit boosting to maintain protective levels of antibody throughout adult life. These features of *Prevnar 13 Adult* could extend the age of protection against pneumococcal disease and provide longer-term protection with repeated dosing or boosters.

“Another important objective for the vaccine is to protect the elderly against community-acquired pneumococcal pneumonia, a leading killer of older adults,” Dr. Gruber adds.

Notes Wyeth’s Connolly, “The adult vaccine has the opportunity to transform and reshape the adult pneumococcal area the same way *Prevnar* continues to transform pediatric pneumococcal disease.” The adult clinical program is in Phase 3 trials with regulatory filings expected to begin early in 2010.

Meningococcal B Vaccine

Next in Wyeth’s pipeline is a vaccine targeting meningococcus group B, which is an important cause of meningitis and bloodstream infections in very young children and adolescents and for which no vaccine currently is available. In the United States, a third of all meningitis cases caused by meningococci are the result of meningococcus group B; in Europe, almost two-thirds of the illness is caused by group B.

The disease is devastating and has mortality rates of 10 percent, with 20 percent of those who survive often suffering severe consequences of the disease, including limb loss and brain damage.

“Parents and physicians alike are frightened by this disease. It can kill in just 24 to 48 hours,” says Kathrin Jansen, Ph.D., Senior Vice President, Early Phase Programs, Wyeth Vaccine Research.



“The development of conjugate vaccines is a tremendous story about medical as well as public health advances. After all, worldwide, the death rate for pneumococcal disease is about 1 million children a year. With broader application of a 13-valent conjugate pneumococcal vaccine, there is the possibility of preventing up to 750,000 deaths a year. The opportunity is real.”

William Gruber, M.D., Vice President,
Wyeth Vaccines Clinical Research

Currently in Phase 1 and Phase 2 clinical trials, Wyeth's vaccine works by targeting a surface protein that covers almost all the meningococcus group B strains, eliciting antibodies that kill the bacteria. "Our researchers were hunting for a cross-protective antibody response and discovered a lipoprotein that showed the desired traits," Dr. Jansen adds. "More than 1,000 different strains were evaluated to make sure there was enough lipoprotein target on the surface of the cell so that antibodies made by the vaccine could efficiently kill the bacteria. The bacterium seems to actually need this protein so we believe we have found the right target."

Alzheimer's Vaccine

Alzheimer's disease affects some 15 million people worldwide. Wyeth and its partner, Elan Corporation, are engaged in Phase 3 trials for a so-called "passive immunization" approach to attack Alzheimer's disease, based on providing monoclonal antibodies to a patient.

In addition, an "active immunization" approach – based on the body's production of antibodies in response to the presence of an antigen – also is being developed.

This Wyeth and Elan vaccine – ACC-101 – uses peptide fragments of the beta-amyloid protein conjugated to a protein carrier to elicit an immune response against beta-amyloid plaques present in the brains of Alzheimer's patients. It is hoped that the immune response will clear the plaques, thereby stopping progression of the disease or preventing the plaques' initial deposit. The vaccine currently is in Phase 2 trials after demonstrating in mouse models that immunization using the vaccine could prevent memory loss. "This would be one of the first examples of a therapeutic rather than a preventative vaccine," Dr. Jansen observes.

Staphylococcus Aureus Vaccine

Staphylococcus aureus is the leading cause of hospital-acquired infections – more than a half million cases annually – in the United States. In addition, there has been an alarming increase of methicillin-resistant *S. aureus* or MSRA. *S. aureus* can cause large boil-like lesions, pneumonia, bloodstream infections and even death.

A vaccine to address these infections is in development at Wyeth. This vaccine includes a bacterial surface component. "While the antibodies generated from the immune system in response to the vaccine can't kill the bacteria directly, they coat the bacteria and act in concert with immune components in the blood to gobble up these complexes and destroy the bacteria in the process," Dr. Jansen says.



"As we have seen an increase in the overall public health impact of *Prevnar*, the cost-effectiveness of this complex vaccine becomes even clearer. The need now is to broaden into emerging markets like Mexico and other countries with about 70 million new births each year and to implement an affordable and sustainable plan for the vaccine's use in the developing world."

Jim Connolly, Executive Vice President and General Manager, Wyeth Vaccines

Group A Strep Vaccine

While the major burden of group A streptococcus (GAS) infection is strep throat, with more than 600 million cases a year, untreated or unrecognized GAS infection can result in acute rheumatic fever, a disease that is the most common cause of acquired heart disease in children and adults worldwide. A multi-component vaccine that seeks to prevent GAS infections in young children is in early development.

A large team of scientists at Wyeth works on the Company's vaccine R&D projects. "We ask a lot from our scientists these days, but our people are willing to work more and go the extra mile," Dr. Jansen says proudly. "There is incredible enthusiasm to bring these programs to the finish line."

Redefining the Possible

As head of Wyeth's commercial vaccine business, Jim Connolly spends a good part of his time looking at new opportunities for what already is one of the Company's main drivers of growth while also planning for the introduction of new vaccines. He knows that "the market will pay for innovation but not for mediocrity."

Says Connolly, "I believe the success we have achieved with *Prevnar* is a direct reflection of the extraordinary value and public health impact of the vaccine. *Prevnar* has redefined the possible when it comes to meeting significant unmet medical needs on a large scale. As we look ahead, we will have other assets – advanced vaccines – that could make a dramatic impact in parts of the world where most of the deaths from invasive disease are occurring. We will do all we can to make these vaccines available and to do it in a sustainable and affordable way. The key is finding the narrow pathway that meets the needs of our stockholders and the needs of the countries – and the people – who can benefit most. I know we will be able to do that. We simply must. It's at the heart of Wyeth's mission – to lead the way to a healthier world – and we take that mission very seriously." ■

"It's at the heart of Wyeth's mission – to lead the way to a healthier world – and we take that mission very seriously."

Wyeth's new 13-valent vaccine – *Prevnar 13* – now is being developed to more fully address invasive pneumococcal disease in vulnerable populations, including infants and children as well as older adults.



SELECTED FINANCIAL DATA

(Dollar amounts in thousands except per share amounts)

Year Ended December 31,	2007	2006	2005	2004
Net revenue	\$22,399,798	\$20,350,655	\$18,755,790	\$17,358,028
Research and development expenses	3,256,785	3,109,060	2,749,390	2,460,610
Net income	4,615,960	4,196,706	3,656,298	1,233,997
Diluted earnings per share	3.38	3.08	2.70	0.91
Dividends per common share	1.06	1.01	0.94	0.92
Capital expenditures	1,390,668	1,289,784	1,081,291	1,255,275
Total assets	\$42,717,282	\$36,478,715	\$35,841,126	\$33,629,704
Number of employees at year end	50,527	50,060	49,732	51,401
Wages and salaries	\$ 3,765,604	\$ 3,488,510	\$ 3,434,476	\$ 3,280,328

COMPANY DATA BY REPORTABLE SEGMENT

(In millions)

Year Ended December 31,	2007	2006	2005	2004
Net Revenue from Customers				
Pharmaceuticals	\$ 18,622.0	\$16,884.2	\$15,321.1	\$13,964.1
Consumer Healthcare	2,736.1	2,530.2	2,553.9	2,557.4
Animal Health	1,041.7	936.3	880.8	836.5
Consolidated total	\$22,399.8	\$20,350.7	\$18,755.8	\$17,358.0
Income (Loss) before Income Taxes				
Pharmaceuticals	\$ 6,164.5	\$ 5,186.4	\$ 4,544.9	\$ 4,040.1
Consumer Healthcare	519.2	516.2	574.3	578.6
Animal Health	194.1	163.7	139.4	134.8
Corporate	(421.1)	(436.4)	(478.0)	(4,883.3)
Consolidated total	\$ 6,456.7	\$ 5,429.9	\$ 4,780.6	\$ (129.8)
Depreciation and Amortization Expense				
Pharmaceuticals	\$ 800.5	\$ 719.9	\$ 682.0	\$ 529.5
Consumer Healthcare	35.1	20.0	40.8	45.7
Animal Health	32.6	32.7	30.3	29.9
Corporate	50.5	30.4	33.8	17.3
Consolidated total	\$ 918.7	\$ 803.0	\$ 786.9	\$ 622.4
Expenditures for Long-Lived Assets				
Pharmaceuticals	\$ 1,410.6	\$ 1,228.3	\$ 1,077.9	\$ 1,226.5
Consumer Healthcare	72.2	35.3	28.4	33.2
Animal Health	42.4	37.2	45.0	40.0
Corporate	84.5	72.0	47.1	83.4
Consolidated total	\$ 1,609.7	\$ 1,372.8	\$ 1,198.4	\$ 1,383.1
Total Assets at December 31,				
Pharmaceuticals	\$18,814.9	\$17,171.6	\$15,770.2	\$15,771.2
Consumer Healthcare	1,833.4	1,492.9	1,463.2	1,701.4
Animal Health	1,569.4	1,430.0	1,326.7	1,340.9
Corporate	20,499.6	16,384.2	17,281.0	14,816.2
Consolidated total	\$42,717.3	\$36,478.7	\$35,841.1	\$33,629.7

WORLDWIDE NET REVENUE BY PRODUCT

(In millions)

	2007	2006	2005	2004
Pharmaceuticals				
<i>Effexor</i>	\$ 3,793.9	\$ 3,722.1	\$ 3,458.8	\$ 3,347.4
<i>Plevnar</i>	2,439.1	1,961.3	1,508.3	1,053.6
<i>Enbrel</i>	2,044.6	1,499.6	1,083.7	680.0
<i>Protonix</i>	1,911.2	1,795.0	1,684.9	1,590.6
Nutrition	1,443.0	1,200.8	1,040.9	943.3
<i>Zosyn/Tazocin</i>	1,137.2	972.0	891.6	760.3
<i>Premarin</i> family	1,055.3	1,050.9	908.9	880.2
Oral contraceptives	433.9	454.9	525.3	590.1
<i>BeneFIX</i>	432.6	357.6	343.3	301.5
<i>Rapamune</i>	364.8	336.9	300.2	259.0
rhBMP-2	358.9	308.0	236.3	165.3
<i>ReFacto</i>	334.9	305.6	268.4	249.4
<i>Tygacil</i>	137.9	71.5	10.0	0.0
<i>Zoton</i>	93.3	130.8	375.7	447.7
<i>Torisel</i>	26.6	0.0	0.0	0.0
Alliance revenue	1,294.2	1,339.2	1,146.5	789.9
Other	1,320.6	1,378.0	1,538.3	1,905.8
Total Pharmaceuticals	\$18,622.0	\$16,884.2	\$15,321.1	\$13,964.1
Consumer Healthcare				
<i>Centrum</i>	\$ 704.9	\$ 657.1	\$ 634.0	\$ 616.6
<i>Advil</i>	684.1	620.2	514.0	490.4
<i>Caltrate</i>	225.9	195.1	189.2	179.0
<i>Robitussin</i>	220.3	225.5	253.2	237.9
<i>ChapStick</i>	139.7	127.9	134.4	123.2
<i>Preparation H</i>	109.7	103.1	104.8	102.3
<i>Advil Cold & Sinus</i>	73.7	61.0	122.4	129.7
<i>Dimetapp</i>	72.6	81.7	80.4	87.8
<i>Alavert</i>	56.0	49.8	49.5	56.0
Other	449.2	408.8	472.0	534.5
Total Consumer Healthcare	\$ 2,736.1	\$ 2,530.2	\$ 2,553.9	\$ 2,557.4
Animal Health				
Livestock products	\$ 452.4	\$ 405.5	\$ 377.2	\$ 351.0
Companion animal products	317.9	283.9	257.8	252.6
Equine products	145.3	135.5	138.2	138.2
Poultry products	126.1	111.4	107.6	94.7
Total Animal Health	\$ 1,041.7	\$ 936.3	\$ 880.8	\$ 836.5

DIRECTORS AND OFFICERS

Board of Directors

Robert Essner¹
Chairman

Bernard Poussot¹
President and
Chief Executive Officer

Robert M. Amen^{2,3,12}
Chairman and
Chief Executive Officer
International Flavors
& Fragrances Inc.

John D. Feerick^{2,5}
Professor of Law
Fordham University School
of Law

Frances D. Fergusson,
Ph.D.^{4,5,6}
President Emeritus
Vassar College

Victor F. Ganzi^{1,2,3,12}
President and
Chief Executive Officer
The Hearst Corporation

Robert Langer, Sc.D.^{4,5,6}
Institute Professor
Massachusetts Institute
of Technology

John P. Mascotte^{1,2,3,5,12}
Retired President and
Chief Executive Officer
Blue Cross and Blue Shield
of Kansas City, Inc.

Raymond J. McGuire^{4,5}
Co-Head, Global
Investment Banking
Citi

Mary Lake Polan, M.D.,
Ph.D., M.P.H.^{4,5,6}
Professor and Chair Emeritus
Department of Obstetrics
and Gynecology
Stanford University School
of Medicine

Gary L. Rogers^{2,3}
Former Vice Chairman
General Electric Company

John R. Torell III^{2,4}
Partner
Core Capital Group, LLC

Principal Corporate Officers

Robert Essner
Chairman

Bernard Poussot^{7,8,9,10,11}
President and
Chief Executive Officer

Timothy P. Cost^{7,8,9}
Senior Vice President,
Corporate Affairs

Thomas Hofstaetter,
Ph.D.^{7,9}
Senior Vice President –
Corporate Business
Development

Joseph M. Mahady^{7,8,9,10}
Senior Vice President

Gregory Norden^{7,8,9,10,11}
Senior Vice President and
Chief Financial Officer

Denise M. Peppard^{7,8,9,10,11}
Senior Vice President –
Human Resources

Marilyn H. Rhudy^{7,8,9}
Senior Vice President –
Public Affairs

Robert R. Ruffolo, Jr.,
Ph.D.^{7,8,9,10}
Senior Vice President

Lawrence V. Stein^{7,8,9,10,11}
Senior Vice President and
General Counsel

Ulf Wiinberg^{7,9}
Senior Vice President

Mary Katherine Wold^{9,10,11}
Senior Vice President –
Finance

Andrew F. Davidson
Vice President –
Internal Audit

Douglas A. Dworkin⁸
Vice President and
Deputy General Counsel

Leo C. Jardot
Vice President –
Government Relations

Paul J. Jones^{8,9}
Vice President and
Controller

Jeffrey E. Keisling
Vice President –
Corporate Information
Services and
Chief Information Officer

John C. Kelly
Vice President –
Finance Operations

Eileen M. Lach⁸
Vice President,
Corporate Secretary and
Associate General Counsel

David A. Manspeizer⁸
Vice President –
Intellectual Property and
Associate General Counsel

James J. Pohlman
Vice President –
Corporate Strategic Initiatives

Steven A. Tasher⁸
Vice President and
Associate General Counsel

Justin R. Victoria^{8,9}
Vice President –
Investor Relations

Robert E. Landry, Jr.¹¹
Treasurer

Principal Division and Subsidiary Officers

Wyeth Pharmaceuticals
Joseph M. Mahady^{7,8,9,10}
President

Wyeth Pharmaceuticals –
Asia/Pacific and
Nutritionals
Mark M. Larsen⁹
President

Wyeth Pharmaceuticals –
EMEA/Canada and
BioPharma
Ulf Wiinberg^{7,9}
President

Wyeth Pharmaceuticals –
Latin America
Eduardo G. Nieto⁹
President

Wyeth Pharmaceuticals –
Technical Operations and
Product Supply
Charles A. Portwood^{7,8,9}
President

Wyeth Pharmaceuticals –
U.S. Pharmaceuticals and
Women's Health Care
Geno J. Germano^{7,9}
President

Wyeth Research
Robert R. Ruffolo, Jr., Ph.D.^{7,8,9,10}
President

Fort Dodge Animal Health
Richard R. DeLuca, Jr.^{7,8,9,10}
President

Wyeth Consumer
Healthcare
Cavan M. Redmond^{7,8,9,10}
President

Wyeth Consumer
Healthcare – United States –
and Global New Business
Douglas A. Rogers⁹
President

Wyeth Consumer
Healthcare – International
Etienne N. Attar⁹
President

1 Executive Committee
2 Audit Committee
3 Compensation and Benefits
Committee
4 Corporate Issues Committee
5 Nominating and Governance
Committee
6 Science and Technology Committee
7 Management Committee

8 Law/Regulatory Review
Committee
9 Operations Committee
10 Human Resources and
Benefits Committee
11 Retirement Committee
12 Designated to be a "Financial
Expert" as defined in
applicable SEC rules

WYETH WORLDWIDE

Pharmaceuticals

Affiliate & General Manager

John Wyeth and
Brother Ltd.

(United Kingdom)
Palle H. Christensen

Wyeth Pharma GmbH
(Germany)

Andreas Krebs

Wyeth Pharmaceuticals
France

(France)
Emmanuelle Quiles

Wyeth Lederle S.p.A.
(Italy)

Mathieu W. Simon, M.D.

Wyeth Farma S.A.

(Spain/Portugal)
Elvira Sanz

Wyeth K.K.

(Japan Region)
Susumu Kurata

Wyeth AB

(Nordic Region)
Vacant

Wyeth S.A. de C.V.

(Mexico)
Carlos Fabian Abelleyra

Wyeth Pharmaceutical
Co., Ltd.

(China/Hong Kong)
Dr. Xiaobing Wu

Wyeth Australia Pty.
Limited

(Australia/New Zealand)
Erica Mann

Wyeth Canada

(Canada)
Arnout Ploos van Amstel

Wyeth Philippines, Inc.
(Philippines)

Andrew Ericson L. Santos

Wyeth Pharmaceuticals
FZ-LLC

(Middle East/North Africa)
Joseph Henein

Wyeth Pharmaceuticals
B.V.

(Netherlands)
Edward Lysen

Wyeth-Lederle Pharma
GmbH

(Austria/CEE Region)
Mark Heselton

Consumer Healthcare

Affiliate & General Manager

Wyeth Consumer
Healthcare Inc.

(Canada)
Suneet Varma

Wyeth Consumer
Healthcare S.p.A.

(Italy)
Massimo Gallo

Whitehall-Much GmbH

(Germany)
Frank Kube

Wyeth Pharmaceutical
Co., Ltd.

(China)
John Chou

Wyeth Consumer
Healthcare

(Eastern and Central Europe/
Commonwealth of
Independent States/Middle
East/Africa/Balkans)
Luciano de'Portu

Whitehall Laboratories
Limited

(England/Ireland)
John R. Smith

Wyeth Consumer
Healthcare Pty. Ltd.

(Australia)
Allan R. Franz

Wyeth S.A. de C.V.

(Mexico)
Arturo Sanchez

Wyeth Consumer
Healthcare Ltd.

(Colombia Branch)
(Colombia)
Camilo Tedde

Wyeth Sante Familiare
(France)

Faissal Tahiri

Wyeth Philippines, Inc.
(Philippines)

Edgardo B. Mendoza

Animal Health

Regional Managers

Brent A. Standridge
Senior Vice President –
North America Sales and
Marketing

Luis F. Andrade
Senior Vice President
and Managing Director,
Latin America, Japan,
and Global Poultry

Rob Barclay
Senior Vice President
and Managing Director,
Asia/Pacific

Ugo Cosentino
Vice President and
Managing Director,
Europe and
Emerging Markets

CORPORATE DATA

Executive Offices

Wyeth
Five Giralda Farms
Madison, NJ 07940
(973) 660-5000

www.wyeth.com

Stock Trading Information

Wyeth stock is listed on the New York Stock Exchange (ticker symbol: WYE).

Independent Registered Public Accounting Firm

PricewaterhouseCoopers LLP
400 Campus Drive
Florham Park, NJ 07932

Annual Meeting

The Annual Meeting of Stockholders will be held on Thursday, April 24, 2008 at the Hyatt Morristown in Morristown, New Jersey.

Stockholder Account Information

The Bank of New York Mellon is the transfer agent, registrar, dividend disbursing agent and dividend reinvestment agent for the Company. Stockholders of record with questions about lost certificates, lost or missing dividend checks, or notification of change of address should contact:

Wyeth
c/o BNY Mellon Shareowner Services
P.O. Box 358015
Pittsburgh, PA 15252-8015
(800) 565-2067
(Inside the United States and Canada)
(201) 680-6578
(Outside the United States and Canada)
For the hearing impaired:
(800) 231-5469 (TDD)

Internet address:
www.bnymellon.com/shareowner/isd

BuyDIRECT Stock Purchase and Sale Plan

The BuyDIRECT plan provides stockholders of record and new investors with a convenient way to make cash purchases of the Company's common stock and to automatically reinvest dividends. Inquiries should be directed to The Bank of New York Mellon.

Reports Available

The Company's 2007 Annual Report on Form 10-K and all Company filings with the Securities and Exchange Commission can be accessed on our Web site at www.wyeth.com. Alternatively, a printed copy of the Company's 2007 Annual Report on Form 10-K and other Company filings may be obtained by any stockholder without charge through Wyeth by calling (877) 552-4744.

Equal Employment Opportunity

Our established affirmative action and equal employment programs demonstrate our long-standing commitment to provide job and promotional opportunities for all qualified persons regardless of age, color, disability, national origin, race, religion, sex, sexual orientation or status as a veteran.

Environment, Health and Safety

Information on the Company's environmental, health and safety (EHS) performance and its EHS Policy is available on the Web at <http://www.wyeth.com/aboutwyeth/citizenship/ehs>. EHS information also is included in *Corporate Citizenship 2006 – Living Our Values*, which is available on the Web at <http://www.wyeth.com/aboutwyeth/citizenship>. A copy of the EHS Policy may be obtained upon written request to:

Wyeth
Department of Environment,
Health and Safety
Five Giralda Farms
Madison, NJ 07940

This paper is FSC (Forest Stewardship Council) certified from well-managed forests, controlled sources and recycled wood or fiber.



Corporate Citizenship

Corporate Citizenship 2006 – Living Our Values, a report describing the Company's efforts in the areas of governance, employee development, support for our communities, and protection of the environment and the health and safety of our employees, is available on the Web at <http://www.wyeth.com/aboutwyeth/citizenship> or via written request to:
Wyeth
Public Affairs
Five Giralda Farms
Madison, NJ 07940

Trademarks

Product designations appearing in differentiated type are trademarks. Trademarks for products that have not received final regulatory approval are subject to change.

Cautionary Statement

The information in this Annual Review is a summary and does not provide complete information; it should be considered along with the information contained in the Company's 2007 Financial Report, 2007 Annual Report on Form 10-K and other periodic filings with the Securities and Exchange Commission.

This Annual Review includes forward-looking statements. All statements that are not historical facts are forward-looking statements. All forward-looking statements address matters involving numerous assumptions, risks and uncertainties that could cause actual results to differ materially from those expressed or implied by those statements. In particular, the Company encourages the reader to review the risks and uncertainties described under the heading "Item 1A. RISK FACTORS" in the Company's 2007 Annual Report on Form 10-K. The forward-looking statements in this Annual Review are qualified by these risk factors. Accordingly, the Company cautions the reader not to place undue reliance on these forward-looking statements, which speak only as of the date on which they were made, and the Company undertakes no obligation to update or revise any of these statements, whether as a result of new information, future developments or otherwise.

SELECTED PRODUCTS FROM WYETH

Wyeth Pharmaceuticals

Cardiovascular and Gastrointestinal

Protonix
Protonix I.V.
Zoton

Hemophilia

BeneFIX
ReFacto
Xyntha

Immunology and Oncology

Mylotarg
Neumega
Rapamune
Torisel

Infectious Disease

Tygacil
Zosyn/Tazocin

Inflammatory Disease

Enbrel *

Neuroscience

Effexor/Efexor
Effexor XR

Nutritionals

Nursoy
Progress
Progress Gold
Promil
Promil Gold
Promise
Promise Gold
S-26
S-26 Gold

Vaccines

Meningitec
Prevnar/Prevenar

Women's Health Care

Loette
Lybrel
Minesse
Premarin
Premarin Vaginal Cream
Premphase
Prempro/Premelle
Totelle

Wyeth Consumer Healthcare

Analgesics

Advil
Advil PM
Anadin
Robaxin
Spalt

Cough/Cold/Allergy

Advil Cold & Sinus
Alavert
Dimetapp
Robitussin

Nutritional Supplements

Caltrate
Centrum
Centrum Cardio
Centrum Select
Centrum Silver
Polase
Vitasprint B12

Other Products

Anbesol
ChapStick
FiberCon
Preparation H
Primatene

Fort Dodge Animal Health

Bronchi-Shield
Bursine
Calicivax
Cydectin
Duramune
Fel-O-Vax/Pentofel
Fluvac Innovator/Duvaxyn
LymeVax
Nolvasan
Polyflex
Poulvac
ProHeart/Guardian
ProMeris
Pyramid
Quest/Equest
Rabvac
Suvaxyn
Synovex
Telazol
ToDAY
ToMORROW
Torbugesic/Torbutrol
Triangle
West Nile-Innovator

* Co-promoted with Amgen Inc.



The above products are identified as trademarks used by Wyeth and its subsidiaries.

Wyeth

Five Giralda Farms
Madison, NJ 07940

