

VIRGINIA:

IN THE CIRCUIT COURT FOR THE CITY OF RICHMOND

COMMONWEALTH OF VIRGINIA,
EX REL. MARK R. HERRING,
ATTORNEY GENERAL,

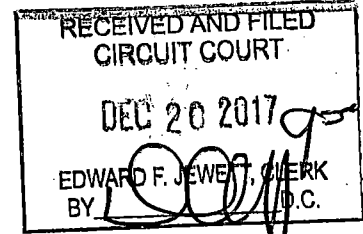
Plaintiff,

v.

BOEHRINGER INGELHEIM
PHARMACEUTICALS, INC.

Defendant.

CIVIL ACTION NO. CL17-6038-7



COMPLAINT

1. The Plaintiff, Commonwealth of Virginia, by, through, and at the relation of the Attorney General of Virginia, Mark R. Herring (the "Plaintiff" or the "Commonwealth") brings this action against Defendant Boehringer Ingelheim Pharmaceuticals, Inc. for violating the Virginia Consumer Protection Act ("VCPA"), Virginia Code §§ 59.1-196 through 59.1-207. In support thereof, Plaintiff states as follows:

JURISDICTION AND VENUE

2. The Circuit Court of the City of Richmond has authority to entertain this action and to grant the relief requested herein pursuant to Virginia Code §§ 8.01-620, 17.1-513, 59.1-203, and 59.1-206.

3. Venue is preferred in this Court pursuant to Virginia Code § 8.01-261(15)(c) because some or all of the acts to be enjoined are, or were, being done in the City of Richmond. Venue is permissible in this Court pursuant to § 8.01-262(3) and (4) because Defendant regularly conducts substantial business activity within the City of Richmond and the cause of action arose,

in part, in the City of Richmond.

4. Prior to the commencement of this action, the Plaintiff gave the Defendant written notice, through communications by a multi-state group of Attorneys General, that these proceedings were contemplated and a reasonable opportunity to appear before the Office of the Attorney General to demonstrate that no violations of the VCPA had occurred, or to execute an appropriate Assurance of Voluntary Compliance, pursuant to Virginia Code § 59.1-203(B). The Defendant has not established that no violation of the VCPA occurred and has agreed to execute an acceptable Consent Judgment in lieu of an Assurance of Voluntary Compliance.

PARTIES

5. Plaintiff, Commonwealth of Virginia ex rel. Mark R. Herring, Attorney General, is charged with enforcing the VCPA, which prohibits fraudulent or deceptive acts or practices made by a supplier in connection with a consumer transaction. Pursuant to Va. Code § 59.1-203, the Attorney General may initiate civil law enforcement proceedings in the name of the Commonwealth to enjoin violations of the VCPA and to secure such equitable and other relief as may be appropriate in each case.

6. Defendant Boehringer Ingelheim Pharmaceuticals, Inc. (“BIPI”) is a Delaware corporation with its principal place of business at 900 Ridgebury Road, Ridgefield, CT 06877. At all relevant times, BIPI transacted business in the Commonwealth by marketing, promoting, and selling the prescription drugs Aggrenox, Micardis, Atrovent, and Combivent.

FACTS

Aggrenox

7. Aggrenox (a combination of aspirin and dipyridamole) is an antiplatelet drug and was approved by the U.S. Food and Drug Administration (“FDA”) in 1999 to reduce the risk of

secondary stroke in patients who have had a transient ischemic attack (“TIA”), which is sometimes referred to as a “mini stroke,” or stroke due to a blood clot.

8. Aggrenox’s main competitor was Plavix, which the FDA approved in 1997.

9. Plavix had an indication to reduce the risk of secondary stroke following a TIA or stroke due to a blood clot; however, it also had indications to treat a broader range of secondary clot related events, including myocardial infarction and peripheral artery disease (“PAD”), which is also referred to as peripheral vascular disease (“PVD”).

10. BIPI represented that Aggrenox was superior to Plavix and Plavix/aspirin combinations, when in fact, BIPI did not have evidence to substantiate those claims.

11. BIPI also represented that Aggrenox was effective “below the neck” to treat myocardial infarction (heart attack), congestive heart failure, and PAD/PVD, when in fact, BIPI did not have evidence to substantiate those claims.

Micardis

12. Micardis (telmisartan) belongs to a class of drugs called angiotensin receptor blockers (“ARB”s) and is indicated to treat hypertension (high blood pressure) and to reduce cardiovascular risk in patients unable to take angiotensin-converting-enzyme (“ACE”) inhibitors.

13. The FDA approved Micardis in 1998 as the fourth ARB on the market.

14. At that time, the hypertension market was already dominated by Diovan, Cozaar, and Avapro.

15. Initial sales for Micardis were poor, in part, because BIPI had no comparative data proving Micardis was superior to any of the existing hypertension drugs.

16. Both Cozaar and Avapro received additional indications for treatment of renal nephropathy among diabetics, which distinguished them from other hypertension drugs,

including Micardis.

17. Similarly, there was data suggesting that Cozaar was effective against prevention of secondary myocardial infarction.

18. To increase sales, BIPI created marketing messages that lacked substantiation in an effort to distinguish Micardis from the competition.

19. BIPI represented that Micardis best protects consumers from the “Early Morning Risk” of strokes or cardiac events due to rising blood pressure for patients at the end of a dosing interval for hypertension drugs, when in fact, BIPI did not have evidence to substantiate that claim.

20. BIPI also represented that Micardis could treat the constellation of symptoms popularly known as “Metabolic Syndrome”, protected the kidneys, and prevented heart attacks and strokes, when in fact, BIPI did not have evidence to substantiate those claims.

Atrovent and Combivent

21. Both Atrovent (ipratropium bromide) and Combivent (ipratropium bromide and albuterol) are bronchodilators indicated to treat bronchospasms (airway narrowing) associated with chronic obstructive pulmonary disease (COPD) and contain albuterol plus a drug belonging to a class called anticholinergics.

22. Atrovent is approved as a first line treatment; however, Combivent is only approved for use when a person continues to have evidence of bronchospasm when using a regular aerosol bronchodilator.

23. BIPI represented Combivent could be used as a first line treatment for bronchospasms associated with COPD, when in fact, Combivent is not indicated as a first-line treatment and BIPI did not have evidence to support that claim.

24. BIPI also represented that both Atrovent and Combivent could be used at doses that exceed the maximum dosage recommendation in the product labeling, when in fact, BIPI did not have evidence to support that claim.

25. BIPI further represented that anticholinergics were essential for treatment of COPD, when in fact, BIPI did not have evidence to support that claim.

CAUSE OF ACTION: VIRGINIA CONSUMER PROTECTION ACT

26. Plaintiff realleges and incorporates by reference herein each and every allegation contained in the preceding Paragraphs 1 through 25.

27. BIPI was at all times relative hereto, a “supplier” engaged in “consumer transactions” in the Commonwealth, as those terms are defined in § 59.1-198 of the VCPA.

28. Virginia Code § 59.1-200(A)(2) prohibits a supplier from misrepresenting the source, sponsorship, approval, or certification of goods or services.

29. BIPI, in the course of marketing, promoting, selling, and distributing the prescription drugs Aggrenox, Micardis, Atrovent, and Combivent in the Commonwealth, violated Virginia Code § 59.1-200(A)(2) by misrepresenting the source, sponsorship, approval, or certification of these drugs.

30. Virginia Code § 59.1-200(A)(5) prohibits a supplier from misrepresenting that goods or services have certain quantities, characteristics, ingredients, uses, or benefits in connection with a consumer transaction.

31. BIPI, in the course of marketing, promoting, selling, and distributing the prescription drugs Aggrenox, Micardis, Atrovent, and Combivent in the Commonwealth, violated Virginia Code § 59.1-200(A)(5) by misrepresenting that these drugs had characteristics, uses, or benefits that they did not have.

32. Virginia Code § 59.1-200(A)(14) prohibits a supplier from using any deception, fraud, false pretense, false promise, or misrepresentation in connection with a consumer transaction.

33. Defendant, in the course of marketing, promoting, selling, and distributing Aggrenox, Micardis, Atrovent, and Combivent in the Commonwealth, violated Virginia Code § 59.1-200(A)(14) by using deception, fraud, false pretense, false promise, or misrepresentation in connection with these drugs.

34. BIPI willfully engaged in the acts and practices described in this Complaint in violation of the VCPA.

PRAYER FOR RELIEF

WHEREFORE, Plaintiff, Commonwealth of Virginia, respectfully requests this Court:

A. Permanently enjoin and restrain BIPI, its agents, employees, and all other persons and entities, corporate or otherwise, in active concert or participation with any of them, from engaging in deceptive or misleading conduct, acts, or practices which violate the VCPA in the marketing, promotion, and sale of the prescription drugs Aggrenox, Micardis, Atrovent, and Combivent, pursuant to Virginia Code § 59.1-203;

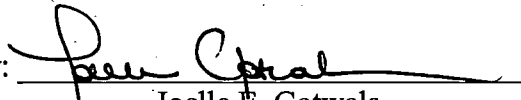
B. Order BIPI to pay civil penalties of up to \$2,500 for each and every willful violation of the VCPA, pursuant to Virginia Code § 59.1-206(A);

C. Order BIPI to pay the Commonwealth's attorney's fees, costs, and expenses for the prosecution and investigation of this action, pursuant to Virginia Code § 59.1-206(C); and

D. Grant Plaintiff such other and further relief as the Court deems equitable and proper.

Respectfully submitted,

**COMMONWEALTH OF VIRGINIA,
EX REL. MARK R. HERRING,
ATTORNEY GENERAL**

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